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Patient Experience Annual Report

2015/16

1. Introduction

This is the third annual patient experience report for the Trust and provides an overview of the patient experience activity for 2015/16.

The responsibilities of the Patient Experience team (PET) includes managing PALS, complaints, coordinating patient feedback through a variety of methods, leading on PLACE, managing Interpreting services and leading on Equality and Diversity across the Trust. The remit of the PET facilitates triangulation of complaints, PALS and other sources of feedback to identify links and trends.

This report covers:

- information on how patient feedback is captured
- what our patient feedback tells us
- how the feedback is shared with staff and service users
- actions taken in response to feedback
- an overview of the annual Patient Led Assessment of the Care Environment (PLACE) results for the Trust
- measurement of performance against the NICE quality standards for adult patient experience
- activity of the Patient Experience Forum
- improving the care of people with learning disabilities
- ensuring accessibility for all service users (interpreting services)
- plans for 2016/17

2. Glossary of terms

HCT	Hertfordshire Community NHS Trust
HGC	Healthcare Governance Committee
HwH	Healthwatch Hertfordshire
NICE	National Institute of Health and Care Excellence
PLACE	Patient Led Assessment of the Care Environment
PSEG	Patient Safety and Experience Group
PEF	Patient Experience Forum
FFT	Friends and Family Test
CQC	Care Quality commission
HV	Health Visiting

3. Strategic context

Hertfordshire Community NHS Trust (HCT) is committed to delivering 'High Value Healthcare', and ensuring that patients have an outstanding patient experience is one of the four components of the Trust Strategy.

In April 2012 the National Institute of Health and Care Excellence (NICE) produced their Quality Standard in relation to patient experience, setting out best practice within this area. The Quality Standard sets out quality statements, measures and descriptors to provide service providers and commissioners with definitions of high quality care. Evidence for each statement has been collated during 2015/16.

The Trust complies with the CQC requirement to provide evidence on the effective use of patient feedback and how it is used to improve services.

NHS Outcomes framework sets out the indicators and measures that will be used to hold NHS England to account for improvements in health outcomes. There are five domains relating to effectiveness, experience and safety. Domain 4 is specific to patient experience: Ensuring that people have a positive experience of care. The operating framework stresses the importance of gathering complementary patient feedback in order to allow broader improvement activities to take place. NHS England also requires all Trusts to offer the Friends and Family Test to all service users and report monthly on compliance. The outcome framework remains unchanged in 2015/17.

4. Governance

The Director of Quality & Governance/Chief Nurse has board level responsibility for patient experience and delivery of the PET annual plan. The plan is developed by the Patient Safety and Experience Group and monitored at the bi-monthly meetings. A representative from Hertfordshire Healthwatch participates in the meetings.

Reports and outcomes from the meetings are presented to Healthcare Governance Committee.

Patient experience is reported in detail in the quarterly Quality Reports, in the annual Quality Account, the monthly Business Unit Performance Reviews and Integrated Business Performance Reports.

Information and reports relating to patient experience are shared with the commissioners at the Quality Review Meetings.

Patient, carer and staff stories are shared at the bi-monthly Trust board meetings.

5. Gaining Patient feedback

HCT is committed to capturing patient feedback in order to improve and develop services that meet the needs of the users. Information about patient experience is gained in a variety of ways as detailed below:

National Inpatient survey - Patients in the eight community hospitals are requested to complete a survey prior to discharge.

National Patient Reported Experience Measure (PREM) survey – The NHS Benchmarking Network carried out a national audit. HCT scored above the national average in 12 out of 17 questions. See Appendix 3.

Adult patient experience survey - Twice a year, patients across all adult community services are requested to complete the survey. The survey sets 13 standard questions including the Friends and Family Test question, with additional service specific questions. The survey was introduced in February 2016 and has enabled measurement of the NICE quality standard statements for adult patient experience.

Children's services surveys - There are currently several service-specific surveys given to the child/young person's parent or carer to complete. Versions suitable for children and young people have been developed for use in the School Nursing and Step 2 services.

Friend and Family Test Card - This is used continuously for patients across adult and children's services. The comments provide compliments as well as information about aspects of care that could be improved. Using NHS England guidance, HCT have compiled

three versions of the FFT with the aim of gaining feedback from all our patients. This includes a version suitable for people with a learning disability, low levels of literacy and limited English; and a version for children and young people. Demographic questions have been included. The staff area of the Trust's website provides a link to the NHS England FFT website with versions of the FFT question translated into 20 different languages. A link has also been added to the Trust website to enable patients to provide feedback electronically if they prefer.

15 step challenge - Following complaints about staff attitude at Health Visitor baby clinics, a programme of unannounced visits to HCT baby clinics took place across Hertfordshire. These visits were supported by the Trusts Non-Executive Directors to provide further scrutiny. The assessing team found the staff to be very welcoming, friendly, professional and helpful. The visits identified some general improvements, for example to the clinic environments, and action plans were subsequently completed by the Health Visiting Team Leads.

Patient stories - Listening to the experience of patients and carers is a core element of gaining feedback. It provides detailed information required to understand and analyse which areas need improvement, as well as what is working well. Training was provided to Healthwatch volunteers and health visitors in their preceptorship year. The focus in 2015/16 included the Diabetes services, Health Visiting services and the experience of carers looking after a family member with a long term condition. The health visitors have listened to parents' stories across the Health Visiting service. Stories have been shared at the Trust board meetings by a carer, a palliative care patient and a patient with diabetes.

Complaints - In 2015/16, 250 complaints were received providing essential information about areas for improvement and enabling lessons to be learned. A separate annual complaints report has been produced which outlines the changes made to improve services for users.

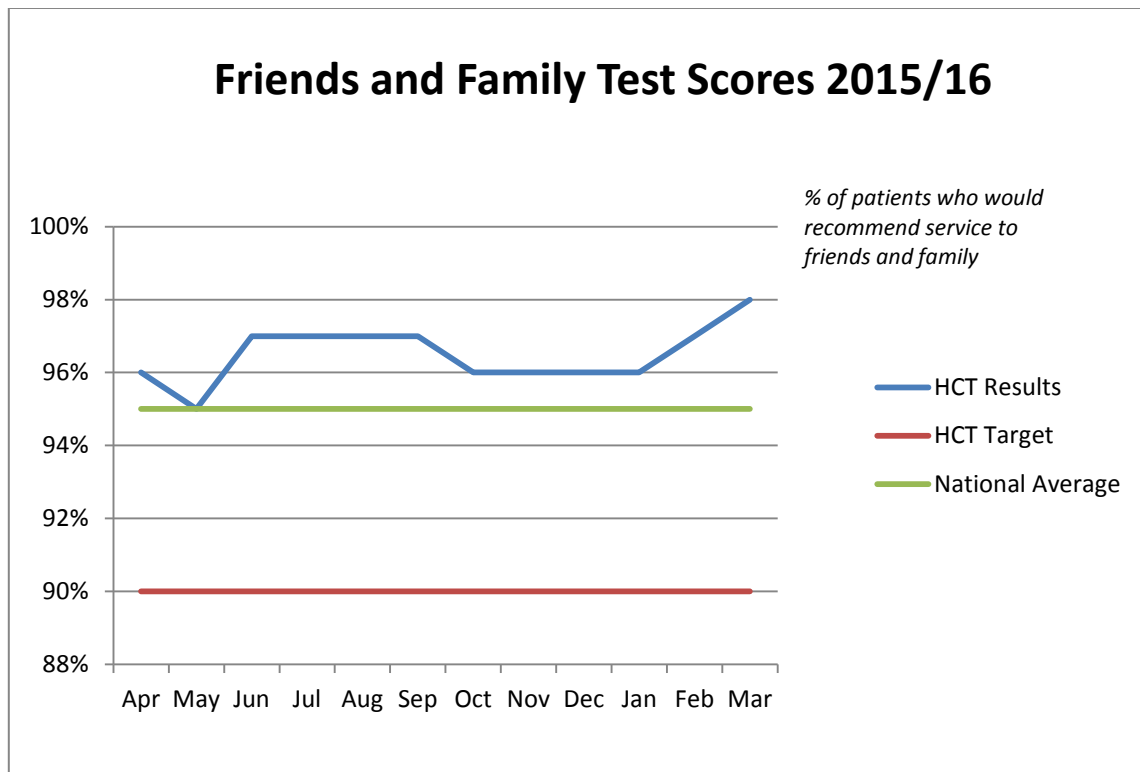
Compliments - Patients provide compliments via thank you cards, letters and emails either directly to the service, to the chief executive or via PALS. These are fed back to the Patient Experience team. In 2015/16 the Trust received **6924** compliments.



6. What our patient feedback tells us

Friends and Family Test

The percentage of patients who would recommend our service to their friends and family is consistently above the HCT target and national average across all services as detailed in the table below.



Inpatient survey



The following tables demonstrate end of year inpatient survey results for privacy and dignity, and other key results for comparison over previous years or to reflect areas of developments in year.

Overall, How would you rate the quality of care received?	2013/14	2014/15	2015/16
Very Good / Excellent	93%	95%	94%
Very Good / Excellent / Good	99%	99%	99%

Overall, How would you rate the quality of care received?	2013/14	2014/15	2015/16
Very Good / Excellent	93%	95%	94%
Very Good / Excellent / Good	99%	99%	99%

Were you treated with dignity and respect?	2013/14	2014/15	2015/16
Yes	99%	99%	99%

Were you given privacy when discussing or receiving your treatment?	2013/14	2014/15	2015/16
Yes Always	92%	92%	94%
Yes Always / Yes Mostly	99.72%	99.77%	100%

How would you rate the hospital food?	2013/14	2014/15	2015/16
Good / Very Good	84%	84%	84%

The inpatient survey data was also used to measure some of the NICE quality standard statements. Appendix 1 shows the results per ward. Results demonstrated that staff consistently introduced themselves by name and that patients are treated with privacy, dignity and respect. Any areas that scored below 80% satisfaction (see questions below), were reviewed and improvement actions were identified.

Survey questions requiring improvement actions:

- When patients had important questions to ask they did not always receive an answer they understood

- Patients did not always feel supported to understand relevant treatment options
- Patients did not always feel actively involved in decisions
- Patients did not always know who to contact with on-going concerns.

The areas requiring improvement have been brought to the attention of the staff and actions taken. For example, patients are given a discharge leaflet with a list of who to contact.

Adult patient experience survey



Services were requested to give patients the standard adult patient experience survey for the last two weeks of January 2016. The questions were linked to the NICE quality standards for adult patient experience and analysed accordingly. 23 community services completed the adult patient experience surveys. Appendix 2 demonstrates the results per service. Results indicated that 100% of patients were treated with privacy, dignity and respect, and staff always introduced themselves by name. Areas for improvement were identified for any areas scoring under 80% satisfaction as detailed below:

- Patients were not always made aware that they have the right to choose, accept or decline treatment. Service managers and team leads have brought this to the attention of staff in their teams to encourage staff to include this in their discussion with patients.
- Patients' preferences for sharing information with their partner, family members and/or carers were not always established, respected and reviewed throughout their care. To address this, the electronic record keeping system (Systmone) will include this as a completion field on initial assessment. It is important to note that this result may be misleading as the question was not applicable to all patients depending on which service they were attending. A not applicable option will be added in future surveys.

Children's services surveys



Feedback regarding children's services is generally gained from parents and carers but where possible bespoke surveys are used to capture direct feedback from children and young people.

Surveys suitable for children and young people to complete are available for school nursing, Looked after Children, children's nursing, physiotherapy and occupational therapy and Step 2 services as well as a children's version of the FFT.

Feedback regarding children's services has mainly been gained from the FFT comment cards. **4908** FFT responses were received across children's services and 98.02% of respondents would recommend the service to a family member or friend.

The table below provides some examples of the **9830** comments received from children's services surveys, including the FFT cards.

Service	Comment
School Nursing- immunisation	She spoke to me the entire time to keep me calm.
Health Visiting	So happy to be able to ask all questions and get friendly advice. Thank you.
Speech and Language Therapy drop in	Friendly environment for child & parents.
Step 2	We have a child who is able to process his emotions and his confidence is building. A year ago all he wanted to do was die due to grief and bullying.
Children's transitional care	Thank you for all your help and guidance. We felt very supported throughout our son's transition to adult service and into his adult residential provision.
West Essex Children's Occupational Therapy	Very thorough, friendly, good rapport with daughter.
Paediatric audiology	Friendly, caring and supportive staff. Respectful and professional service.
Specialist dental service	I know now which Teepees to use and I now know what to do even with any blood coming from gums.

Service	Comment
	I was never told by my ex-dentist to keep going even if it bleeds. Went through what will happen at next appointment.
Breast feeding clinic	The team are really supportive and helpful. They are passionate about mums giving babies the best.
Children's Physio, West Essex	The Physio gave my daughter lots of exercises to improve her balance and core stability which will benefit her.
West Essex Community Paediatrician	The Doctor was clear and concise in her information. Helpful and constructive. Explained processes and tried to find the best solutions.
Special School Nurse	My nurse was very understanding and patient. It felt good to talk to her.
Neonatal Screening	Screeener was very thorough at explaining the tests and carrying them out. I felt very reassured by the service.

7. How feedback is shared

All feedback received from patients by the Patient Experience team is shared directly with the staff and teams involved in a variety of ways as outlined below.



- The service managers and team leads receive a monthly email which tells them the number of surveys completed, the % satisfaction score, the best and worst scoring areas and the patients' comments. The information is shared with staff at team meetings.
- Following a complaints investigation an action plan is implemented to ensure any required changes are made. In addition to providing regular reports to the Trust board and commissioners, the learning from complaints is shared with staff across all services via staff bulletins including the bi monthly Clinical Matters, weekly Noticeboard and bi-monthly children and adult services bulletins.
- A selection of compliments is shared with staff in the weekly Noticeboard.
- A patient experience webpage for the public facing pages of the HCT website is in the development stage. HCT is working with volunteers from Hertfordshire Healthwatch to seek service users' views on the information that should be shared via the web page. The new web pages will enable service users to see the feedback HCT receives, including patient stories and compliments, as well as the actions that have been taken as a result of listening to feedback.

8. You said, we did

HCT have employed various means to gain patient feedback. The table below demonstrates examples on the source of the feedback and the actions taken.

Source	Feedback	Action
Carers (usually family members) looking after patients with dementia	Importance of having access to high quality information and community support	Developing information boards and by sourcing relevant information leaflets to give to people with dementia and their carers. Development of information for carers on trust website
15 step challenge to well-baby clinics	It was not clear that a private room was available to breast feed or to have a conversation in private	Signage/notices introduced to all clinics to make this clear
15 step challenge baby clinics	The display boards were overcrowded and difficult to read	Reorganisation of the display boards, laminating posters and theming displays to make them clearer
Complaint regarding provision of equipment	There was a lack of communication about the ordering of equipment and a long delay in receiving the right equipment	The children's occupational therapy service in West Essex has reviewed their processes for ordering equipment and has implemented a staff training programme
Patient feedback to Diabetes service	The Diabetes Clinic was difficult to find	The Diabetes service has reviewed their appointment letters for Garston Clinic and now includes a map and directions for patients
Health Visiting Patient Stories	Parents would like to be able to contact with HV via their mobile phone	Health visitors provide parents with their work mobile phone number
Health Visiting Patient Stories	Health visitors need to promote the wide scope of their role. Health Visiting does not always get the positive perception it deserves	Share positive stories and compliments about the HV service on the patient experience page of the Trust website

9. Patient Led Assessment of the Care Environment (PLACE)

Patient Led Assessment of the Care Environment (PLACE) is undertaken nationally in all NHS inpatient care provider units. This is the third year of the National PLACE programme.

The assessments focus on the environment in which care is provided, which includes non-clinical services such as cleanliness, condition and maintenance, food, hydration, and the extent to which the provision of care with privacy and dignity is supported.

A new dementia assessment was added this year. The results of the 2015 programme highlights that HCT improved in 19 areas of assessment but in 12 areas achieved a reduced score since 2014 and one area has remained the same.

Low scores were achieved in the assessment of privacy and dignity and the new Dementia element that was added this year. A working group and action plan is in place to address the concerns identified and improve the patient experience.

The PLACE assessments are supported by volunteers from Healthwatch Hertfordshire. The volunteers attended a joint training session delivered by HCT, Hertfordshire Partnership Foundation Trust, East & North Herts Hospital Trust and West Herts Hospital Trust.

Working in partnership



The table below provides examples of actions that have been taken to improve the patient's experience in the area of privacy dignity and wellbeing.

Issue	Action
Day and date to be clearly displayed in all rooms and communal areas	Wards have provided visible day and date displays
Additional seating is required with seats of differing heights	Seating of differing heights has been provided
Internet access	Capital funding has been applied to install Wi-Fi in all patient areas during 2016/17
Multi faith prayer room	All wards have allocated a room that could be used as a multi faith prayer room as required

10. Patient Experience Forum

The Patient Experience Forum was established in January 2016 by the Clinical Quality Manager for Patient Experience. The Forum provides a central point of coordination for patient experience activity, with staff, patients and carers shaping and developing the group. The aim of the group is to engage staff and embed a culture of capturing and using patient feedback to make improvements.

11. Improving the care of people with learning disability

Hertfordshire Community NHS Trust has been working in partnership with the local authority's Health Liaison Team Learning Disability, who have reviewed the Trust's delivery plan and provided specialist advice.

Objectives for the Trust include:

- Review of the Adult Learning Disability policy
- Increased patient feedback from service users
- Increased production of easy-read literature
- Implementation of the Purple Star Strategy

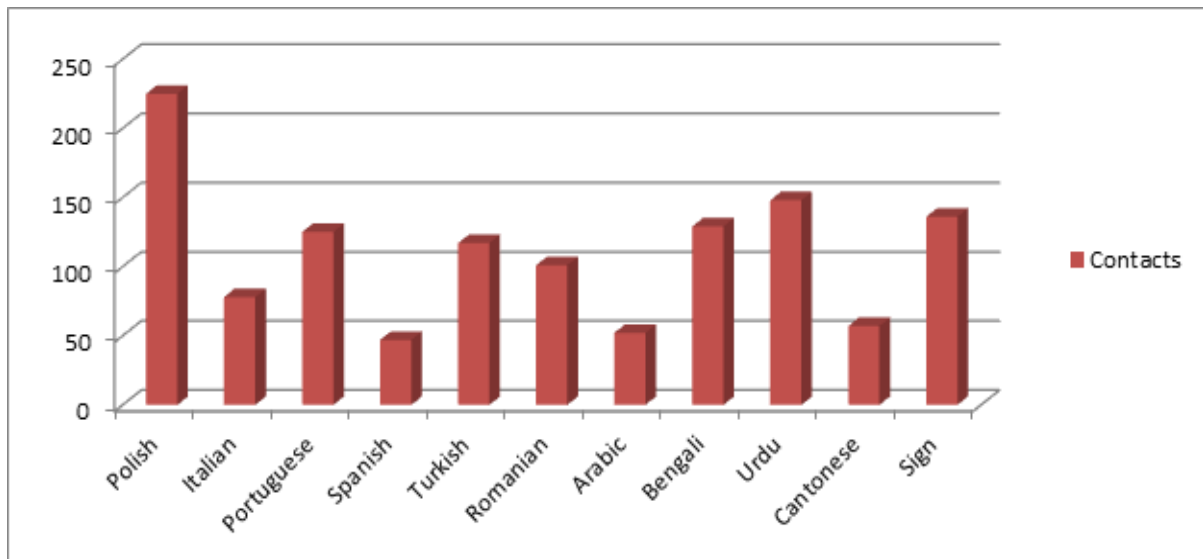
Key achievements in 2015-16:

- St Albans Specialist Dental Care Service awarded Purple Star kite mark for delivery of high quality care to learning disability service users
- Podiatry at Queensway awarded Purple Star kite mark
- A Hertfordshire-wide conference arranged in partnership with health and social care partners
- An audit of key aspects of the quality of care provided to patients with learning disabilities has been completed for the first time
- Learning disability awareness session delivered to dementia champions
- Learning disability champions for adult services identified
- Newly mandatory Equality Delivery System2 (EDS2) implemented in partnership with a diverse range of local community and voluntary groups including people with learning disabilities
- Special Dental Care Service finalist in Health Education East of England's 2015 Leadership Recognition Awards for its work on learning disabilities
- Participation in Hertfordshire-wide Improving Health Outcomes Group for Learning Disabilities
- Easy-read Friends and Family Test comment cards produced
- The Podiatry service has produced an easy read appointment letter
- Patient information leaflet for diabetic foot care develop and to be published shortly

12. Ensuring accessibility

The Interpreting service provides language support to staff of HCT, HPFT and Herts Valleys GPs. The interpreters are provided by two external local agencies, Herts Interpreting and Translation Services and Signs in Vision. This complies with NICE Patient Experience in Adult NHS Services Guidance 1.1.2: *'Ensure that factors such as physical or learning disabilities, sight, speech or hearing problems and difficulties with reading, understanding or speaking English are addressed so that the patient is able to participate as fully as possible in consultations and care'*.

The table below shows the top 10 interpreting languages and numbers of British Sign Language Interpreters booked in 2015/16.



Surveys have been translated into different languages in order to gain feedback from patients about their experience of the Interpreting service. The Trust's Cross Cultural Advisor worked in partnership via a British Sign Language interpreter with a local deaf club to develop an easy-read version of the survey suited to their need.

Roll out of NHS Equality Delivery System 2 in 2015/16

The main aim of the newly mandatory Equality Delivery System 2 (EDS2) is to improve services for people who belong to vulnerable and protected groups. The objective is to assess health inequalities and provide better working environments, free of discrimination, for people who use, and work in, the Trust.

The EDS2 sets out four goals around equality, diversity and human rights. Within the four goals, there are 18 outcomes against which HCT are required to assess and grade equality performance. Nine of the 18 outcomes examine equality in service delivery and nine examine equality in workforce development.

The Trust organised two grading events in the autumn of 2015; one with the staff and their representatives, and the other with a diverse range of local community and voluntary organisations.

The EDS2 engagement process has informed our equality objectives for 2016/17.

Equality & Diversity training

Bespoke training on a range of areas is provided at HCT to make sure staff are competent and confident in dealing with a range of culturally diverse patient and staff groups. The aim is to encourage self-awareness to facilitate change in individuals, teams and departments, focusing on engaging 'hearts and minds'.

Equality and diversity training is mandatory. All new staff receive training on equality and diversity as part of the corporate induction process. Existing staff are required to complete training every three years.

13. Plans for 2016/17

- Delivery of Quality Priority 2: **To develop a culture where staff value feedback and implement changes as required to improve the experience of service users**

This involves:

- increasing the number of Friends and Family Test responses across all services;
 - increasing staff awareness of service user feedback;
 - developing a culture where service user feedback is valued and utilised by staff identifying areas for improvement following service user feedback and demonstrating evidence of actions taken
- Introduction of a standard survey for use in children's services
 - Re audit the NICE quality standards in the areas identified for improvement
 - Evolvement of the recently formed Patient Experience Forum
 - Launch of the Patient Experience page on HCT website
 - Improve the collection and recording of equality data for patients
 - Enhance the experience of patients, with disabilities with the provision of personalised and accessible information
 - Further improve access to services for people with learning disabilities

Tricia Wren, Deputy Director Quality & Governance, Deputy Chief Nurse.

Ruth Bradford, Clinical Quality Manager for Patient Experience.

June 2016.

Appendix 1: Inpatient survey results measured against the NICE quality standards for adult patient experience

	Questionnaire count	Contacting the service	Dignity and respect	Communication	Say in decisions	Supported to understand treatment options
Herts & Essex Community Hospital	32	100	100	99	100	100
Langley House	41	89	100	93	86	87
Potters Bar	55	88	100	96	88	94
QVM	29	76	97	72	33	37
Langton SACH	11	82	100	95	89	92
Sopwell SACH	36	79	97	96	80	88
St Peters	25	100	100	97	100	100
Neuro inpatients Danesbury	13	100	100	88	93	87
Neuro inpatients Holywell	14	100	93	87	81	81

Appendix 2: Adult patient experience survey measured against the NICE quality standard statements

	Questionnaire count	Clarity of speech	Communication	Contacting the service	Dignity and respect	Eye contact	Helpfulness	Intro by name	Right to choose, accept, decline 2nd opinion	Say in decisions	Sharing information asked	Sharing information followed	Supported to understand treatment options
Bladder & Bowel	43	100	100	85	100	100	100	98	77	91	52	100	93
Acute Therapies	3	100	100	95	100	100	100	100	100	100	50	0	100
Community Respiratory	5	100	100	100	100	100	100	100	100	90	80	100	80
E & N Herts ESD stroke	9	100	100	100	100	100	100	100	100	100	100	100	100
E & N MSK Physio	281	100	100	72	100	100	100	97	70	94	26	92	97
E & N MSK Triage Service	74	100	100	86	100	100	100	95	75	96	29	100	100
HomeFirst Hertsmere	16	100	100	100	100	100	100	100	100	100	93	100	94
HomeFirst North Herts	6	100	100	100	100	100	100	100	100	92	100	100	100
ICT Dacorum	20	100	100	100	100	100	100	100	100	95	83	100	100
ICT Hertsmere	78	100	100	99	100	97	100	97	94	91	87	96	99
ICT North & Stort Valley (Royston)	14	100	100	100	100	100	100	100	100	96	64	100	100
ICT North Herts	1	100	100	100	100	100	100	100	100	100	100	100	100
ICT St Albans & Harpenden	7	100	100	57	100	100	96	100	83	86	86	100	86
ICT Watford	136	100	100	86	100	100	100	94	77	87	64	96	88
ICT Welwyn & Hatfield	34	100	100	97	100	100	100	94	82	93	82	100	94
Leg Ulcer Service		100	100	97.83	100	100	100	100	84.78	84.78	73.33	60.87	97.843
Lymphoedema Service	87	99	99	96	100	100	100	93	87	99	44	96	96
Minor Injuries	84	99	100	89	100	100	100	98	89	96	63	100	96
MSK CROPS	123	100	100	81	100	100	100	98	80	95	26	100	97

	Questionnaire count	Clarity of speech	Communication	Contacting the service	Dignity and respect	Eye contact	Helpfulness	Intro by name	Right to choose, accept, decline 2nd opinion	Say in decisions	Sharing information asked	Sharing information followed	Supported to understand treatment options
MSK Physio & OT West	10	100	100	90	100	100	100	100	90	90	67	100	100
Skin Health Service	57	100	100	80	100	98	100	100	81	95	29	100	96
Special Care Dental Service	127	100	100	96	100	100	100	100	94	95	80	96	99
West Herts Stroke ESD Service	6	100	100	100	100	100	100	100	100	100	67	100	100
Wheelchair Service	25	100	100	96	100	100	100	100	100	100	78	100	92

Appendix 3: National PREM survey

PREM Question	Option	National Average (%)	HCT Position (%)
The length of time I had to wait for my care from the community team to start was reasonable	Yes	96.9%	92.0%
	No	3.1%	8.0%
The staff that cared for me at home had been given all the necessary information about my condition or illness from the person who referred me	Yes	88.6%	100.0%
	No	2.8%	0.0%
	Don't know	8.6%	0.0%
I was aware of what we were aiming to achieve e.g. to be mobile at home, to be independent at home, to be able to go out shopping, to understand my health better	Yes	98.2%	100.0%
	No	1.8%	0.0%
I was involved in setting these aims	Yes - always	82.3%	88.0%
	Yes - sometimes	14.8%	8.0%
	No	2.9%	4.0%
I was as involved in discussions and decisions about my care, support and treatment as I wanted to be	Yes - definitely	82.1%	84.0%
	Yes - to some extent	16.1%	16.0%
	No	1.9%	0.0%
The staff let me know how to contact them if I needed to	Yes - always	91.1%	88.0%
	Yes - sometimes	5.9%	12.0%
	No	3.0%	0.0%
The appointment / visit times by staff were convenient for me	Yes - always	85.0%	88.0%
	Yes - sometimes	13.6%	12.0%
	No	1.4%	0.0%
When I had important questions to ask the staff they were answered well enough	Yes - always	82.6%	100.0%
	Yes - sometimes	9.4%	0.0%
	No	0.2%	0.0%
	I had no need to ask	7.8%	0.0%
I had confidence and trust in the staff treating or supporting me	Yes - always	95.3%	100.0%
	Yes - sometimes	4.4%	0.0%
	No	0.3%	0.0%
I felt involved in decisions about when my care from the community team was going to stop	Yes - definitely	71.3%	70.8%
	Yes - to some extent	18.2%	25.0%
	No	4.2%	0.0%
	I did not need to be	6.3%	4.2%

PREM Question	Option	National Average (%)	HCT Position (%)
	asked		
I was given enough notice about when my care from the community team was going to stop	Yes - definitely	77.8%	75.0%
	Yes - to some extent	16.5%	25.0%
	No	5.8%	0.0%
Staff gave my family or someone close to me all the information they needed to help care for me	Yes - definitely	70.4%	88.0%
	Yes - to some extent	10.8%	0.0%
	No	4.3%	0.0%
	I did want or need them to	14.5%	12.0%
Staff discussed with me whether I needed any further health or social care services after this service stopped (e.g. services from a GP, physiotherapist or community nurse, or assistance from social services or the voluntary sector)	Yes	76.4%	84.0%
	No - but I would have liked them to	6.4%	0.0%
	No - it was not applicable	17.2%	16.0%
Overall, I felt I was treated with respect and dignity while I was receiving my care from this service	Yes - always	97.7%	100.0%
	Yes - sometimes	2.2%	0.0%
	No	0.2%	0.0%
Since having care from this service, my ability to maintain social contact has improved	Yes - definitely	49.9%	56.0%
	Yes - to some extent	26.1%	20.0%
	No	4.4%	0.0%
	I am not concerned about this	19.6%	24.0%
Do you feel that there is something that could have made your experience of the service better?	Yes	13.2%	8.0%
	No	86.8%	92.0%