

Review of patient satisfaction and experience surveys conducted for public hospitals in Australia

A Research Paper for the Steering Committee for the Review of Government
Service Provision.

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1 Executive Summary

Health Policy Analysis Pty Ltd was engaged by the Steering Committee for the Review of Government Service Provision to review patient satisfaction and responsiveness surveys conducted in relation to public hospital services in Australia. The review identified current patient satisfaction surveys (including any ‘patient experience surveys’) of public hospital patients conducted by (or for) State and Territory governments in Australia that are relevant to measuring ‘public hospital quality’. The review examined surveys from all jurisdictions except the Australian Capital Territory and the Northern Territory. Interviews were held with key informants from each of the jurisdictions. In addition, international developments were briefly reviewed.

One objective of this project was to:

... identify points of commonality and difference between these patient satisfaction surveys and their potential for concordance and/or for forming the basis of a ‘minimum national data set’ on public hospital ‘patient satisfaction’ or ‘patient experience’.

It was concluded that:

- All the Australian patient based surveys assess similar aspects of patient experience and satisfaction and therefore there is some potential for harmonising approaches.
- In recent years, a similar initiative has been underway in relation to State computer assisted telephone interview (CATI) population health surveys. This has occurred under the umbrella of the Public Health Outcomes Agreement. However, there is no similar forum for addressing patient surveys. As a result, communications between jurisdictions have been largely ad hoc. A starting point for this process would be to identify an auspicing body and create a forum through which jurisdictions can exchange ideas and develop joint approaches.
- With respect to patient experience, population surveys (such as the NSW survey) have some fundamental differences to patient surveys and therefore pursuing harmonisation between these two types surveys is unlikely to result in useful outcomes. The major focus should be on exploring the potential to harmonise the surveys that are explicitly focused on former patients.
- The different methodologies adopted for the patient surveys pose significant impediments to achieving comparable information. One strategy for addressing

some of these problems is to include in any ‘national minimum data set’ a range of demographic and contextual items that will allow risk adjustment of results. However, other differences in survey methodologies will mean basic questions about the comparability of survey results will persist.

Another objective of this project was to ‘identify data items in these surveys that could be used to report on an indicator of public hospital quality, in chapter 9 of the annual Report on Government Services. This indicator would be reported on a non-comparable basis initially but, ideally, have potential to improve comparability over time.’ Whilst the issues of differences in methods make comparison very difficult, there are several areas in which some form of national reporting could occur, initially on a non-comparative basis.

- Most of the surveys include overall ratings of care, and these have been reported in previous editions of the Report on Government Services. With some degree of cooperation there is some potential to standardise particular questions related to overall ratings of care, and related to specific aspects of care.
- The patient based surveys adopt a variety of approaches to eliciting overall ratings of care. Whilst there are some doubts over the value of overall ratings, there appear to be good opportunities to adopt an Australian standard question and set of responses. In addition, supplementary questions related to overall aspects of care could be agreed to including: patient’s views on the extent to and how the hospital episode helped the patient, and also judgments about the appropriateness of the length of hospital stay.
- Comparative information will be more useful if there is the potential to explore specific dimensions of care. Table 5.8 sets out a number of areas in which non-comparative data could be reported in the short term with a medium term agenda of achieving standard questions and responses. These address the following aspects of patient experiences.
 - **Waiting times** — The issue is not actual waiting times but patients’ assessment of how problematic those waiting times were. The experience of having admissions dates changed could also be assessed.
 - **Admission processes** — Waiting to be taken to a room/ward/bed — again the issue is not actual waiting times but patient assessment of how problematic that waiting was.
 - **Information/Communication** — Focusing on patient assessments of the adequacy of information provided about the condition or treatment, and the extent to which patients believed they had opportunities to ask questions.
 - **Involvement in decision making** — Focusing on patient assessments of the adequacy of their involvement in decision making.

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- **Treated with respect** — Patients’ views on whether hospital staff treated them with courtesy, respect, politeness and/or consideration. These questions could be split to focus specifically on doctors versus nurses. Patient assessments of the extent to which cultural and religious needs were respected could also be included.
 - **Privacy** — Patient assessments on the extent to which privacy was respected.
 - **Responsiveness of staff** — Most surveys include a patient experience question related to how long nurses took to respond to a call button. Related questions concerning availability of doctors is included in several surveys.
 - **Management of pain**
 - **Information provided related to new medicines**
 - **Physical environment** — Patient assessments of cleanliness of rooms and toilets/bathrooms, quietness/restfulness, quality, temperature and quantity of food.
 - **Management of complaints** — Patient assessments of how complaints were handled.
 - **Discharge** — Information provided at discharge on to how to manage the patient’s condition.

The major challenge here is that many of the surveys adopt different sets of standard responses for rating these and other questions.

In addition to jurisdictional surveys, the project examined two international examples of surveys of hospital patients that could provide suitable templates for a national minimum dataset on public hospital ‘patient satisfaction’ or ‘patient experience’ — the UK National Health Service (NHS) survey (for admitted patients) and the US based H-CAPHS. The main advantage of adopting or adapting one of these approaches is that they are supported by significant investment and rigorous attention to methods. A secondary advantage is the potential for international comparison. Whilst the experience with these international surveys has lessons for Australia, and may well inform the future development of Australian based instruments, the Australian based surveys — particularly the Victorian Patient Satisfaction Monitor (VPSM) and the WA surveys — also have relatively strong methodological bases and strong jurisdictional commitment. Wholesale adoption of international instruments is unlikely to be acceptable to these jurisdictions.

1 Background

Health Policy Analysis Pty Ltd was engaged by the Steering Committee for the Review of Government Service Provision to identify and evaluate patient satisfaction and responsiveness surveys conducted in relation to public hospitals in Australia. This project had several objectives, including to:

- identify all current patient satisfaction surveys (including any ‘patient experience surveys’) conducted in relation to public hospital patients by (or for) State and Territory governments in Australia that are relevant to measuring ‘public hospital quality’
- identify points of commonality and difference between these patient satisfaction surveys and their potential for concordance and/or for forming the basis of a ‘minimum national data set’ on public hospital ‘patient satisfaction’ or ‘patient experience’
- identify data items in these surveys that could be used to report on an indicator of public hospital quality, in Chapter 9 of the annual *Report on Government Services*. This indicator would be reported on a non-comparable basis initially but, ideally, have potential to improve comparability over time
- identify international examples of surveys of public hospital patients that could provide suitable models for a national minimum dataset on public hospital ‘patient satisfaction’ or ‘patient experience’.

The project was researched through examination of publicly available material from each state and territory, interviews with key informants from each jurisdiction and a brief review of international literature.

This paper is structured as follows. Chapter 2 describes the methods adopted for this project. Chapter 3 briefly reviews selected international developments related to surveys of patient experience. Chapter 4 describes the approach taken in each jurisdiction to surveying and tracking patient satisfaction and experience. Chapter 5 reviews and compares methods adopted in each jurisdiction. Chapter 6 considers potential future directions and makes a number of recommendations for consideration by the Health Working Group and the Steering Committee.

Appendix A lists the people interviewed in each jurisdiction for this project. Appendix B provides a comparison of each of the survey instruments reviewed, whilst the survey instruments are presented in Appendix C. International survey instruments are presented in Appendices D, E and F (see separate pdf. files).

2 Research Methods

To assist this research project, a targeted review of the literature was undertaken, focusing mainly on recent developments in the area of assessment of responsiveness, patient satisfaction and experience. The literature review included an examination of Draper and Hill (1995), which examined the potential role of patient satisfaction surveys in hospital quality management in Australia.

Since Draper and Hill, there have been several major national and international developments. In particular, five Australian States have invested in developing ongoing programs for surveying patient satisfaction and experience. Internationally, the British National Health Service (NHS) has adopted a national approach to surveying patient experience. More recently, the United States' centres for Medicare and Medicaid have announced that all US hospitals participating in the Medicare Program (which is effectively all US hospitals) will be surveyed using a standardised instrument — Hospital-Consumer Assessment of Health Plans Survey (HCAHPS). Leading to and following the *World Health Report 2000*, the World Health Organisation (WHO) has also sponsored significant work on the development of methods of assessing health system responsiveness (see, for example, Valetine, de Silva, Kawabata *et al.* 2003; Valetine, Lavellee, Liu *et al.* 2003). Major reports relating to these developments were examined for this paper (see chapter 3).

Key informants from all Australian States and Territories were contacted and interviewed by telephone (see appendix A). Copies of States' surveys were requested and these were supplied for each survey examined (see appendix C). During these interviews, the informants were asked questions about:

- current approaches to surveying patient satisfaction and experience in their jurisdiction
- nature of the surveys conducted, including the years in which surveys have been conducted
- details of sample sizes, selection criteria and processes, and demographic specifications
- survey methods
- timing of the survey relative to hospital admission
- the specific questions in the survey related to hospital quality/satisfaction
- how results are fed back to hospitals
- whether and how results are made available to the broader public.

3 International Developments

The extensive literature on methodologies for assessing patient satisfaction reflect several competing orientations including market research approaches, epidemiological approaches and health services research. Patient satisfaction emerged as an issue of interest for health service researchers and health organisations in the 1970s and 1980s. In recent decades a number of organisations have emerged, particularly in the United States and Europe, that developed expertise and markets in managing patient surveys, and analysing and benchmarking results (for example, Picker and Press Ganey). These organisations dominate this market, although many health care organisations and individuals implement an enormous variety of patients surveys.

Draper and Hill (1995) reviewed and described projects and initiatives that had been undertaken in Australia up to the mid-1990s. At that point in time, three Australian States (NSW, Victoria and Western Australia) had been relatively active in developing and conducting statewide surveys. Since that time, NSW has abandoned a specific patient survey, although Queensland, South Australia and Tasmania have implemented patient survey approaches.

Whilst statewide approaches have not been implemented in all States and Territories, patient surveys are conducted in some form in public hospitals in all States and Territories. One of the motivations for these patient surveys relates to the accreditation process implemented by the Australian Council on Healthcare Standards (ACHS). The ACHS' EQUiP process requires all accredited hospitals (public and private) to undertake patient experience and satisfaction surveys.

Initially, these patient satisfaction surveys typically asked patients to rate their satisfaction with various aspects of hospital services. In the 1990s, patient satisfaction surveys became quite common, but were often been criticised on the basis of conceptual problems and methodological weaknesses (see, for example, Hall and Dornan 1988; Aharony and Strasser 1993; Carr-Hill 1992; Williams 1994; Draper and Hill 1995; Sitzia and Wood 1997). Several conceptual and methodological issues were identified.

- Satisfaction is a multi-dimensional construct. There is limited agreement on what are the dimensions of satisfaction, and a poor understanding of what overall ratings actually mean.
- Surveys typically report high levels of overall satisfaction (rates that are similar across a broad range of industries), but often there is some disparity between the overall satisfaction ratings, and the same patients' opinions of specific aspects of their care process (Draper and Hill 1995).

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- Survey approaches have often reflected the concerns of administrators and clinicians rather than reflecting what is most important to patients.
 - Satisfaction ratings are affected by: the personal preferences of the patient; the patient's expectations; and the care received.
 - Systematic biases have been noted in survey results — for example, older patients are generally more satisfied with their hospital experience than younger patients; patients with lower socio-economic circumstances are generally more satisfied than wealthier patients.

One response to these criticisms has been the development of survey approaches that assess actual patient experiences. It is argued that this enables a more direct link to actions required to improve quality (see, for example, Cleary 1993). This is one of the underlying philosophies of the Picker organisation. A qualitative research program involving researchers at Harvard Medical School was implemented to identify what patients value about their experience of receiving health care and what they considered unacceptable. Various survey instruments were then designed to capture patients' reports about concrete aspects of their experience. The program identified eight dimensions of patient-centred care:

- **Access** (including time spent waiting for admission or time between admission and allocation to a bed in a ward)
- **Respect for patients' values, preferences and expressed needs** (including impact of illness and treatment on quality of life, involvement in decision making, dignity, needs and autonomy)
- **Coordination and integration of care** (including clinical care, ancillary and support services, and 'front-line' care)
- **Information, communication and education** (including clinical status, progress and prognosis, processes of care, facilitation of autonomy, self-care and health promotion)
- **Physical comfort** (including pain management, help with activities of daily living, surroundings and hospital environment)
- **Emotional support and alleviation of fear and anxiety** (including clinical status, treatment and prognosis, impact of illness on self and family, financial impact of illness)
- **Involvement of family and friends** (including social and emotional support, involvement in decision making, support for care giving, impact on family dynamics and functioning)

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- **Transition and continuity** (including information about medication and danger signals to look out for after leaving hospital, coordination and discharge planning, clinical, social, physical and financial support).

The Picker approach (based on these eight dimensions) has subsequently formed the basis of the United Kingdom's NHS patient survey and was adapted for some surveys in Australia in previous years.

Since 1998, the United Kingdom's NHS has mandated a range of surveys including surveys of acute inpatients. National survey instruments have been developed with the Picker Institute in Europe. Whilst the surveys are centrally developed and accompanied by detailed guidance, they are generally implemented locally by individual healthcare organisations. Results from previous surveys are published and form part of the rating systems used for assessing health service performance across England. For this project the latest survey instrument for acute inpatients was analysed (see appendix E).

Another important international initiative (yet to be finalised) is the development of the Hospital-Consumer Assessment of Health Plans Survey (H-CAHPS) in the United States. The Consumer Assessment of Health Plans (CAHPS) was originally developed for assessing health insurance plans. The development occurred under the auspices of the US Agency for Healthcare Research and Quality (AHRQ), which has provided considerable resources to ensure a scientifically based instrument. The work on CAHPS was originally published in 1995 along with design principles that would guide the process of survey design and development. CAHPS instruments go through iterative rounds of cognitive testing, rigorous field testing, and process and outcome evaluations in the settings where they would be used. Instruments are revised after each round of testing (see *Medical Care Supplement*, March 1999, 37(3), which is devoted to CAHPS). Various CAHPS instruments were subsequently adopted widely across the US.

The H-CAHPS initiative has occurred as a result of a request from the Centres for Medicare and Medicaid for a hospital patient survey which can yield comparative information for consumers who need to select a hospital and as a way of encouraging accountability of hospitals for the care they provide.

Whilst the main purposes of H-CAHPS are consumer choice and hospital accountability, AHRQ states that the instrument could also provide a foundation for quality improvement. The H-CAHPS survey will capture reports and ratings of patients' hospital experience. AHRQ has indicated that

... as indicated in the literature, patient satisfaction surveys continually yield high satisfaction rates that tend to provide little information in the way of comparisons between hospitals. Patient experiences tend to uncover patient concerns about their

hospital stay, which can be of value to the hospitals (in quality improvement efforts) as well as consumers (for hospital selection).

For this paper, a draft version of the H-CAHPS instrument (see appendix D) has been compared with the various Australian survey instruments.

In the *World Health Report 2000*, the WHO presented a framework for assessing health system performance. The framework identified health system responsiveness as an important component of health system performance. Responsiveness is conceptualised as the way in which individuals are treated and the environment within which they are treated (Valetine, de Silva, Kawabata *et al.* 2003). The WHO identified eight dimensions of responsiveness:

- respect for autonomy
- choice of care provider
- respect for confidentiality
- communication
- respect for dignity
- access to prompt attention
- quality of basic amenities and
- access to family and community support.

Following criticism of the approach taken to assessing responsiveness for the *World Health Report 2000*, the WHO sponsored a work program to develop survey methods for assessing responsiveness. These were trialled in a multi-country survey conducted in 2000-01 and subsequently in the World Health Survey 2002 (Valetine, Lavellee, Liu *et al.* 2003). Questions from the 2002 survey are provided in appendix F.

4 Description of approaches taken in Australia and each jurisdiction

National

TQA conducts the 'Health Care & Insurance — Australia' survey, a biennial survey of the public which elicits views on a broad range of health related issues. The survey is supported and/or purchased by Australian, State and Territory government health departments, private health insurance organisations, hospital operators and health related industry associations.

The TQA survey is conducted by computer-assisted telephone interview (CATI). It surveys randomly selected households/insurable units. Interviews are conducted with the person in the unit identified as the primary health decision maker. The most recent survey, conducted from 12 July to 12 August 2003, had 5271 respondents from all States and Territories. Numbers ranged from 1434 interviews in NSW to 350 interviews in the ACT. Response rates were not available.

The actual survey instrument was not analysed for this paper, although the questions can be interpreted from the results of the survey. The survey canvases views of the public generally (including those who have not used health services) and respondents who have been patients. Respondents are asked to rate overall health care including: Medicare; the services offered by public hospitals; the service offered by private hospitals; GPs and the services they offer; specialist doctors; and State and Territory health departments. The response choices are Very High, Fairly High, Neither High nor Low, Fairly Low, Very Low. The percentage of respondents giving 'very high' and/or 'fairly high' responses are published for some of these measures. Responses are also given a numeric value (with Very High = 100 and Very Low = 0) and mean ratings are then calculated and published. Table 1 shows the results of general public ratings of public hospitals by jurisdictions from the TQA surveys since 1987.

Patients (respondents who have attended a hospital) are asked to identify how satisfied they were with their hospital stay, with responses of 'very satisfied' to 'not at all satisfied'. The sample size for patients is not reported, but it is likely to be small — around 700 across Australia. The percentage of respondents giving very high' and/or 'fairly high' responses were published for public and private hospitals (see table 2), together with mean ratings of public hospital stays by jurisdiction for the 2003 survey (see table 3).

Table 1 Patients who rate the service of public hospitals 'very high' or 'fairly high' (per cent)

<i>Year</i>	<i>NSW</i>	<i>VIC</i>	<i>QLD</i>	<i>SA</i>	<i>WA</i>	<i>TAS</i>	<i>ACT</i>	<i>NT</i>	<i>AUST</i>
1987	46	54	63	50	62	60	59	65	53
1989	44	52	52	49	55	66	42	44	49
1991	51	51	52	61	48	61	50	50	52
1993	58	55	62	60	59	61	38	50	58
1995	47	48	42	62	65	54	44	37	49
1997	50	38	47	58	53	56	54	48	47
1999	42	37	45	46	50	54	34	44	43
2001	42	44	47	42	52	51	44	51	45
2003	42	43	46	61	49	51	51	46	46

Source: TQA.

Table 2 Patients who were 'very satisfied' with their last hospital visit (per cent)

<i>Year</i>	<i>Public Hospitals</i>	<i>Private Hospitals</i>
1995	57	62
1997	59	71
1999	62	66
2001	57	69
2003	61	69

Source: TQA.

Table 3 Mean satisfaction scores — public hospital stay

Scale: 'very satisfied' = 100 ... 'not at all satisfied' = 0

<i>Year</i>	<i>NSW</i>	<i>VIC</i>	<i>QLD</i>	<i>SA</i>	<i>WA</i>	<i>TAS</i>	<i>ACT</i>	<i>NT</i>	<i>AUST</i>
2003	78	84	87	82	84	81	79	79	82

Source: TQA.

Patients who were dissatisfied with their stay are asked to say why. The 10 per cent of patients who were dissatisfied with their public hospital visit in the 2003 survey said this was because of (in order):

- Uncaring/rude/lazy staff (36 per cent of dissatisfied patients)
- Waiting for place in hospital/waiting for admission (21 per cent)
- Lack of staff (17 per cent)
- Poor information/communication (15 per cent)
- Personal opinion not listened to/not able to discuss matters (9 per cent).

New South Wales

New South Wales reports on patient satisfaction based on analysis of questions included in the NSW Continuous Health Survey, which was a computer-assisted telephone interview (CATI) survey conducted on a random sample of the NSW population. The current continuous survey commenced in 2002, but previous surveys included adult health surveys in 1997 and 1998, an older people's health survey in 1999, and a child health survey in 2001. The survey is managed and administered by the Centre for Epidemiology and Research in the NSW Health Department, although it is conducted in collaboration with the NSW area health services. Since the commencement of the continuous survey, reports have been published for 2002 and 2003.

The main objectives for the NSW surveys are to provide detailed information on the health of the people of NSW, and to support the planning, implementation, and evaluation of health services and programs in NSW. Estimation of patient satisfaction levels forms a component of the evaluation of health services, but it is not a principal focus of the survey. The survey instrument covers eight priority areas. It included questions on:

- social determinants of health including demographics and social capital
- environmental determinants of health including environmental tobacco smoke, injury prevention, and environmental risk
- individual or behavioural determinants of health including physical activity, body mass index, nutrition, smoking, alcohol consumption, immunisation, and health status
- major health problems including asthma, diabetes, oral health, injury and mental health
- population groups with special needs including older people and rural residents
- settings including access to, use of, and satisfaction with health services; and health priorities within specific area health services
- partnerships and infrastructure including evaluation of campaigns and policies.

The target population for the survey in 2003 was all NSW residents living in households with private telephones. The target sample comprised approximately 1000 people in each of the 17 Area Health Services (total sample of 17 000). In total, 15 837 interviews were conducted in 2003, with at least 837 interviews in each Area Health Service and 13 088 with people aged 16 years or over. The overall response rate was 67.9 per cent (completed interviews divided by completed interviews and refusals).

In relation to hospital services, the survey asked whether the respondent stayed at least one night in a hospital in the last 12 months. NSW Health reports that 2012 respondents identified that they had been admitted (overnight) to hospital in the previous 12 months, equivalent to estimated 13.5 per cent of the overall population. The name of the hospital was identified, along with whether the hospital was a public or private hospital, and whether the admission was as a private or public patient. Respondents were then asked ‘Overall, what do you think of the care you received at this hospital?’ Response choices were: Excellent; Very Good; Good; Fair; Poor; Don’t Know; and Refused. Respondents who rated their care Fair or Poor were then asked to describe why they rated the care fair or poor, with an open ended question. Respondents were also asked ‘Did someone at this hospital tell you how to cope with your condition when you returned home?’ and ‘How adequate was this information once you went home?’

A similar set of questions was asked of respondents who had used community health services and public dental services. For respondents who had used emergency departments, a similar overall rating question was asked, along with an open ended question if they rated their care as fair or poor.

Respondents were asked ‘Do you have any difficulties getting health care when you need it?’, and were given an opportunity to provide open ended responses describing their difficulties. Respondents were also given the opportunity to offer any comments on health services in their local area.

The NSW survey included questions relating to demographics, geographic location and socio-economic status, so the relationships between a person’s rating of care and some these characteristics can be examined. Several analyses are reported by the NSW health department, but confidence intervals are very wide and statistical evidence of differences is weak. For example, estimated ratings are significantly different from the statewide mean for only two Area Health Services.

Results from the NSW survey are published on the NSW health department’s website (<http://www.health.nsw.gov.au/public-health/survey/hs03>). Survey results are produced annually and are updated as additional analyses are conducted. Results are also published in a supplement to the NSW Public Health Bulletin (Centre for Epidemiology and Research 2003).

It should be noted that in addition to the statewide survey, almost all major public hospitals in NSW undertake their own patient experience and satisfaction surveys. This is a requirement of the ACHS’ EQUIP standards (see chapter 3). This is often coordinated at an Area Health Service level, with a single instrument used by all public hospitals within the Area. For example, the Hunter Area Health Service has engaged Press Ganey for a number of years to undertake a hospital patient survey.

A comprehensive picture of what is happening in each individual Area Health Service across NSW could not be obtained for this paper.

Victoria

Between 1993 and 2000, the Victorian Department of Human Services commissioned two once-off surveys of patients' perceptions of hospital care, in 1995 (based on a Picker Institute questionnaire) and 1997. In July 2000, a system for ongoing monitoring of patient satisfaction and experience was established, the Victorian Patient Satisfaction Monitor (VPSM). Annual reports have been published for 2000-01, 2001-02 and 2002-03 (TQA Research 2004) but surveys have occurred in every year since.

The VPSM is specifically focused on patient satisfaction and experience. Its main objectives include to:

- determine indices of patient satisfaction with respect to key aspects of service delivery
- identify and report on the perceived strengths and weaknesses of the health care service provided to patients in Victorian public hospitals
- provide hospitals with information that will help them to improve the service they provide to patients
- set benchmarks and develop comparative data to allow hospitals to measure their performance against other similar hospitals.

The scope of the VPSM is patients aged 18 years or more who are receiving acute inpatient care in the 95 public hospitals that provide acute care in Victoria. It excludes: episodes of care that involve neonatal death or termination; patients who are aged less than 18 years; '4 hour admissions' in emergency departments; patients attending outpatient clinics; patients who were discharged or transferred to a psychiatric care centre; and 'hospital in the home' patients who are admitted to a hospital as inpatients but are not actually occupying a hospital bed. Potential participants are provided with information about the study during their inpatient stay and all participants have the opportunity to 'opt out' of the survey at any time.

The survey is conducted using a mailed out, self-completion questionnaire, which patients return in a reply-paid envelope. Surveying is conducted by an independent research company (formerly TQA Research now Ultra Feedback). Formerly, hospitals provided the organisation with lists of recently discharged patients who are eligible to participate in the survey. More recently, a different sampling process has been implemented. This involves drawing a sample from the admitted patients

database centrally. For the 2003 survey 16 349 questionnaires were completed and returned.

The 2003 questionnaire contained 83 questions designed to elicit patients' perspectives on a range of key hospital services. These were reduced to around 60 questions in the most recent survey (appendix C), with various demographic and contextual items drawn directly from the admitted patients database. Questions were clustered into six key 'indices of care':

- access and admission
- general patient information
- treatment and related information
- physical environment
- complaints management
- discharge and follow-up.

Responses to questions on these indices were combined and weighted to create an Overall Care Index (OCI), which is used as a global measure of satisfaction. The 27 questions and conceptual structure of the survey are set out in figure 1. For each of the 27 questions, respondents were asked to respond Excellent, Very Good, Good, Fair, Poor, Not Sure, Does not Apply. Each response was converted to a numeric score, using the scheme set out in figure 2. These scores were summed for the 27 questions (with a maximum score of $27 \times 4 = 108$) and then scaled back to an index with a maximum value of 100. Figure 3 depicts Victoria's statewide OCI results for the 2000, 2002 and 2003 surveys.

Respondents were also asked: 'Thinking about all aspects of your hospital stay, how satisfied were you?' Response categories included: Very satisfied, Fairly satisfied, Not too satisfied, Not satisfied at all and Not Sure. Figure 4 depicts statewide results for this question for 2000, 2002 and 2003. This question was asked late in the survey following a large number of questions related to specific aspects of the patient's experience.

In addition to these questions, there was a range of other questions addressing issues such as the patient's perceptions of being helped by the hospital stay and the appropriateness of the length of stay. Two open ended questions were also asked relating to events that happened during the stay that were surprising or unexpected, and areas in which the hospital could improve the care and services provided.

In reporting the survey results, measures were risk adjusted to take account of systematic differences in responses by patients across age groups, overnight/same day status and public/private status (TQA Research 2004, pp. 96–97). Maternity

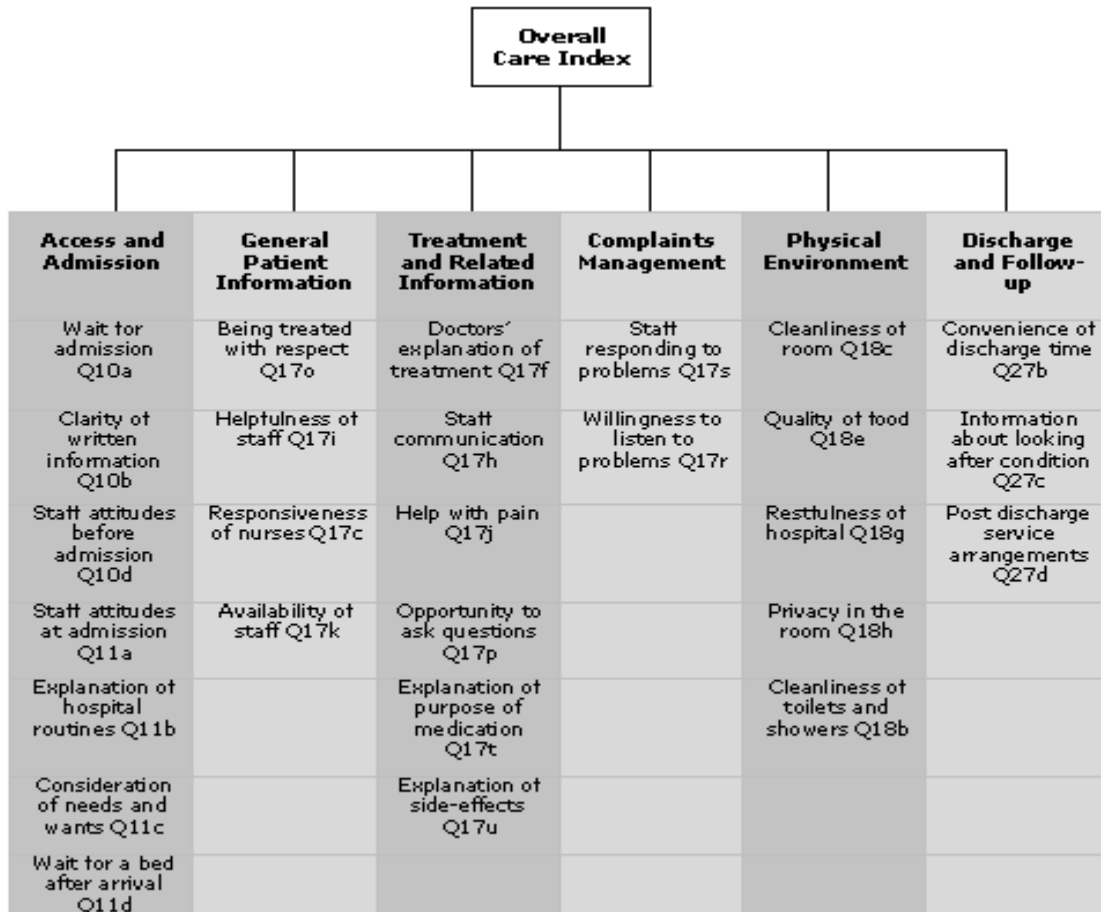
patients were separated and excluded from the reported statistics because maternity patients are thought to have different expectations and criteria for evaluating their hospital experience than general acute patients. Victoria prepares a separate report on survey results for maternity services.

Individual hospitals receive reports on the survey results every six months. These reports allow comparison between hospitals of a similar type. Comparisons are tested to identify statistically significant differences. Reports on the survey results for the four main maternity hospitals in Victoria are prepared separately. Statewide results are published in an annual report (for example, TQA Research 2004), which includes analyses by the major peer hospital groups and groups of patients. Examples of overall results for the last three years are provided in figures 3 and 4.

An independent evaluation of the VPSM was conducted in 2003-04. The evaluation found strong support from metropolitan and rural health services for the continuation of the VPSM. It concluded the VPSM had made valuable contributions to quality improvement activities within these hospitals. It was also concluded that the VPSM's methods were consistent with current approaches to accessing the views of patients, and the survey was a credible, independent and technically robust data gathering and analysis process. Recommendations from the evaluation included: continue the VPSM for a further three years; undertake a detailed review of the questionnaire; improve the timeliness of reporting survey results back to hospitals; and develop survey modules for patients not included in previous surveys, such as patients in sub-acute care programs.

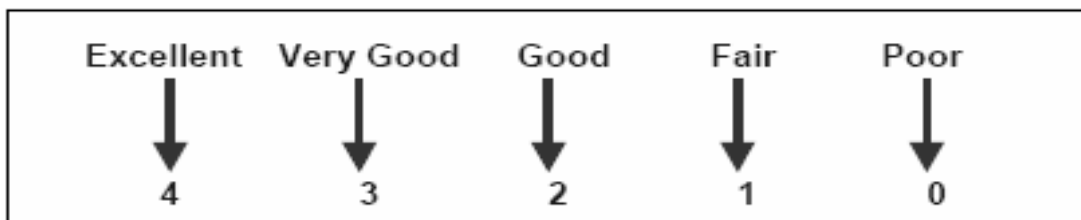
Subsequent to this evaluation, the VPSM survey instrument was modified. Efforts were made to ensure valid comparisons with previous surveys could continue to be made. In addition, demographic and some clinical data are now directly obtained from the data extract, which has allowed the survey to be reduced in size.

Figure 1 Construction of Overall Care Index for the Victorian Patient Satisfaction Monitor



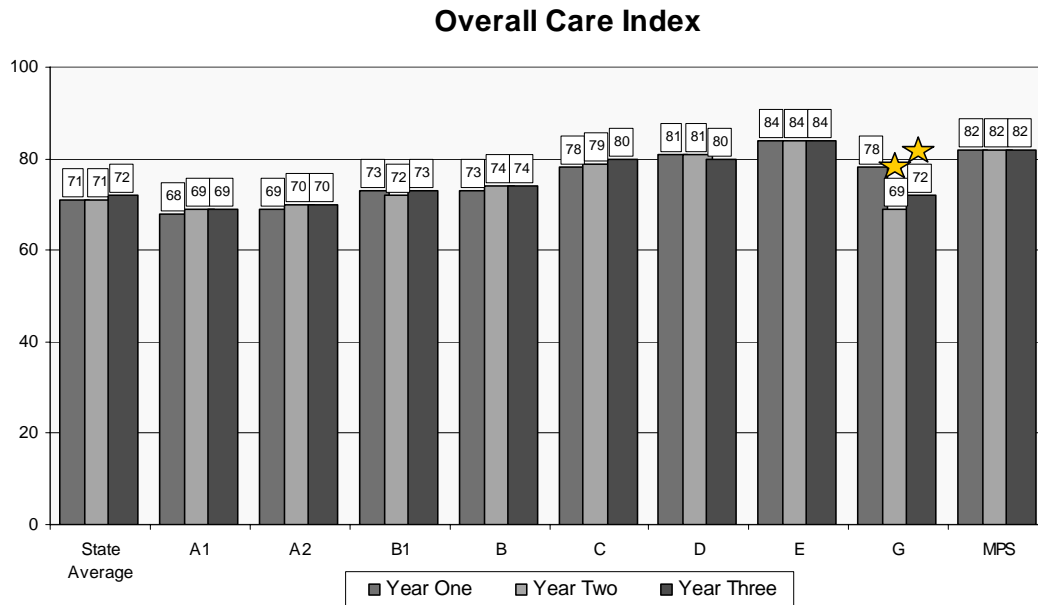
Data source: VPSM.

Figure 2 Scoring Scheme for Individual Responses to Questions included in construction of Overall Care Index for the Victorian Patient Satisfaction Monitor



Data source: VPSM.

Figure 3 Overall care index by hospital category, Victorian Patient Satisfaction Monitor 2001-2003^a

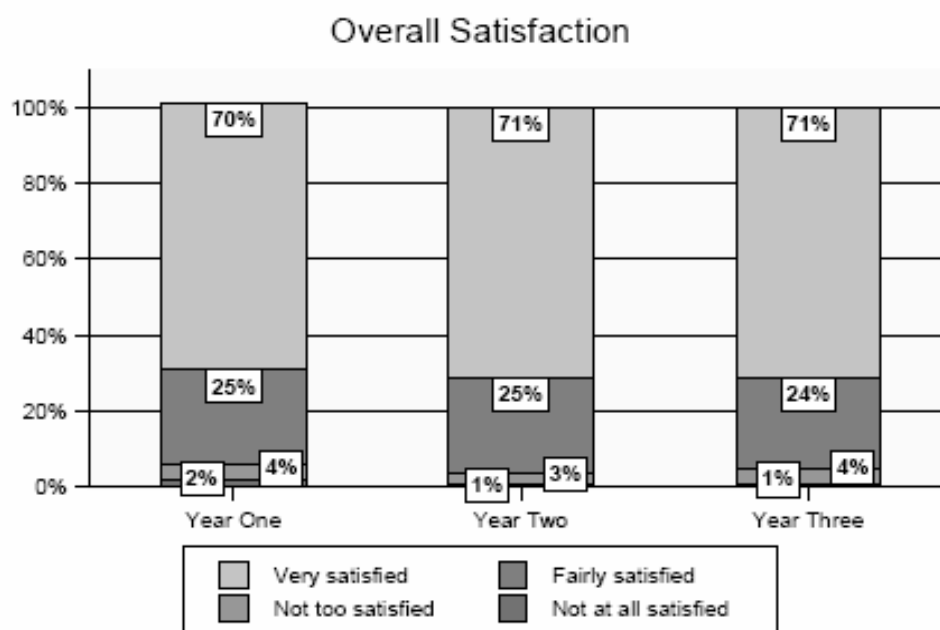


☆ Denotes significant change between Year One/Year Two and Year Two/Year Three

^a The hospital groups are: A1: Major teaching hospitals with the exclusion of the Royal Children’s Hospital; A2: Major teaching hospitals with a lesser range of specialised services than A1 Group hospitals; B1: Regional Base Hospitals; B: Medium sized suburban hospitals; C: General hospitals in suburban and rural areas, which are generally smaller than Group B hospitals. Between 1000 – 4000 inpatients per year; D: Area Hospitals with 500 – 1000 inpatients per year; E: Local Hospitals with less than 500 inpatients per year; G: This refers to one general hospital with a unique mix of acute care, aged care and rehabilitation. Only acute care patients are sampled for the VPSM. MPS: Multipurpose Services.

Data source: TQA Research 2004, p. 25.

Figure 4 Responses to Question 28 — ‘Thinking about all aspects of your hospital stay, how satisfied were you?’ Victorian Patient Satisfaction Monitor 2001–2003



Data source: : TQA Research 2004, p. 16.

Queensland

Queensland conducted a statewide patient satisfaction survey in 2001 and is currently in the middle of a second statewide survey, which will survey patients who were discharged from hospital between December 2004 and March 2005. At this stage, Queensland is reviewing the continuation of the survey beyond 2005.

Both the 2001 and 2005 surveys adopted instruments based on the VPSM in each of those years (see above). Queensland’s 2005 survey instrument is included in appendix C. In 2001, the processing and analysis of questionnaires was undertaken by TQA. For the 2005 survey, Roy Morgan was engaged to manage the survey process.

The 2005 survey adopted an ‘opt-in’ approach to identifying patients to participate in the survey. During their hospital stay, patients were asked whether they would be willing to participate in the survey. Their response was then recorded in the State’s admitted patient database. A random sample was drawn from this database. There were certain other selection criteria that vary from the VPSM approach.

Results of the Queensland hospital surveys are fed back to districts and individual hospitals. They form a key component of the internal Measured Quality Report and Board of Management reports. A statewide report for the 2001 survey was published, providing a summary statistics for each hospital in the sample. It included: the percentage of patients who were very or fairly satisfied; the Overall Care Index; and the index score for each of the six dimensions.

As a result of adopting a ‘Balanced Scorecard’ approach to performance measurement, Queensland Health has also considered several initiatives that are designed to assess other aspects of patient and community experience including self efficacy and self management, engagement and access to services. A number of pilots have been undertaken to assess the potential of certain survey instruments in addressing these issues with populations with selected chronic conditions and populations within a particular region.

Western Australia

Western Australia has been engaged in a process for developing and enhancing an ongoing program for assessing patient satisfaction and experience since 1996-97. The developmental process for the survey involved a range of focus groups which assisted in identifying seven dimensions of patient experience. At present this program involves a range of surveys including surveys focused on admitted overnight patients, emergency department patients, short stay patients and maternity patients. Currently there are 13 different survey instruments used for the program. Different survey methods are adopted for each survey including mail out (for the admitted patients survey) and CATI for some other surveys. The current instrument involves 83 questions including questions that ask patients to rank the relative importance of dimensions of their experience.

The sample for the admitted patients survey is drawn from the state hospital morbidity data every two weeks. This is subsequently matched with the deaths data to remove patients who have died. Survey instruments are posted to respondents around 2–4 weeks following their discharge. The survey is administered by the University of Western Australia Survey Research Centre.

Reports of the survey results are forwarded to hospitals within one to two months of the end of the survey period. In various years, results from the surveys have been published as Key Performance Indicators in the *Annual Report* of the WA Department of Health.

South Australia

South Australia initiated processes to assess patient satisfaction in 2001. The program involves a range of surveys, focusing on different aspects of patient experience and satisfaction including: hospital admitted patients; same day patients; emergency department patients; outpatients; mental health; indigenous patients; and children. The most recent admitted patient surveys were held in 2003 and 2005. The 2005 survey is currently in progress. It is a CATI survey, although potential respondents are sent a letter prior to any attempt to make telephone contact. The survey instrument was originally based on the WA Health approach and involved around 100 questions.

Reports on survey results are prepared for individual hospital with comparisons to statewide results, peers and regions. Key areas for action are highlighted in the report. A system for reporting on actions taken to address these areas is also in place. Results are not published or available in the public domain.

Tasmania

Tasmania conducted statewide patient satisfaction surveys in 1998-99, 2001, 2002 and 2004. The survey conducted in 1998-99 was based on the Patient Judgement of Hospital Quality Questionnaire (Rubin, Ware, Nelson, Meterko 1990). For the 2001 survey, a review was conducted and a new survey instrument was developed, with input from a consumer reference group. The new survey instrument was used for the 2001, 2002 and 2004 surveys.

The survey instrument was provided to patients who were discharged from wards during a designated period. Within designated wards, the first 75 patients were issued with a survey form. The form was posted back to the Department of Health. Analysis of the survey results was undertaken by staff within the Department.

Survey results were fed back to hospitals and analyses could be disaggregated to the ward level. The Tasmanian health department's *Annual Report* includes a broad summary of results. No other public report of survey results is issued.

ACT

There are two main public hospitals in the ACT — The Canberra Hospital and Calvary Public Hospital. No jurisdiction wide approach to assessing patient satisfaction and experience has been implemented, but each of these hospitals has

systems in place. An informant from The Canberra Hospital was interviewed for this project, but contact was not made with Calvary Public Hospital.

Until recently, The Canberra Hospital contracted the Press Ganey organisation to undertake a patient satisfaction and experience survey. However, following a review of options, a decision was made to adopt the VPSM as the basis for patient satisfaction surveys for the hospital in the future. Negotiations with the VPSM are close to finalisation.

Northern Territory

No Territory-wide approach to surveying patient satisfaction and experience has been implemented in the Northern Territory. Individual hospitals and units have undertaken surveys at various times.

A major challenge for Northern Territory public hospitals is that around 70 per cent of patients are indigenous. They often come from remote communities, speak English as a second language or have poor literacy skills. Several reports have highlighted the challenges in surveying remote Indigenous patients, both in terms of communication, but also in their preparedness to provide critical feedback on their hospital experiences.

5 Comparison of methods

The potential for harmonisation of approaches between the various States and Territories is affected by variations in survey methods and the actual questions. In this chapter, we focus on comparison of the main admitted patient surveys in each State or Territory. Several States also conduct other surveys, focused on other types of interaction with health services.

Survey methodologies

Tables 4 and 5 contrast the main areas in which there is variation between the jurisdictional surveys in the methods adopted.

The NSW Health Survey and the TQA Survey of Health Care and Insurance are both general population surveys, in which households with telephones are randomly sampled. This method reflects the primary purposes of these surveys, which do not include estimation of patient experience and satisfaction. Recent patients form a subset of this broader sample. In contrast, the other States' surveys are specifically focused on recent patients. The potential effect of these differences in the process through which recent patients are identified is unknown. However, there are empirical and a priori reasons for suspecting there are systematic differences. For example, in the population based 2003 TQA survey, around 61 per cent of recent public hospital patients reported they were very satisfied with their most recent hospital stay (table 2), whereas in the 2003 VPMS, 71 per cent of recent patients said they were very satisfied (figure 4).

Recall biases may play a role in these differences. Population surveys typically ask about the patient's experience of their most recent hospital stay within the last 12 months. For the focused patient satisfaction surveys, patients are generally approached within a matter of weeks or months following their hospital stay. Assessment of the quality of care might change over time (Aharony and Strasser 1993). Respondents in general population surveys often have difficulty in recalling precisely when they last used a health service. Over time, relatively adverse experiences of hospital care may be more clearly recalled compared to satisfactory experiences.

Postal surveys versus telephone interviews

Most jurisdictions used a postal survey for admitted patients, but several surveys were CATI based. For most postal surveys, the questionnaire was posted to patients at some point following their hospital stay. In Tasmania, the questionnaire was

issued to the patient by hospital staff at discharge. It is difficult to assess the precise effects of these different methods. There has been one evaluation of this issue in Victoria (TQA 1998). One difference that has been detected between these methods is response rates. The postal surveys examined for this paper typically achieved a response rate of 40 to 50 per cent, with higher response rates in WA, where there was also a telephone reminder. The exception was Tasmania, at around 35 per cent. The CATI surveys achieved higher response rates, with 67 per cent in NSW (see table 4).

Timing of surveys

The timing of surveys may have an impact on results. Results of surveys conducted through the busy winter months may be systematically different to the results of surveys conducted through other months, or to surveys conducted continuously through the year.

Table 5 sets out the sample selection criteria for the various surveys. These criteria result in different sample populations. It is possible the differences in samples may give rise to a range of systematic differences in survey results between services. The main issues appear to be:

- inclusion/exclusion of same day patients
- inclusion/exclusion of maternity patients. Maternity patients make up very large proportion of hospital patients. The VPSM includes maternity patients, but analyses them separately, with some acknowledgement that these patients appear to be systematically different in their responses
- inclusion/exclusion of mental health patients
- inclusion/exclusion of Indigenous patients. As discussed above, there are specific issues related to surveying Indigenous patients. Some states specifically exclude these patients from their surveys. For many states, Indigenous patients will make up a relatively low proportion within samples, so these differences are unlikely to have a significant impact on results.
- Inclusion/exclusion of children in surveys, typically with proxies (parents or guardians) responding on behalf of younger patients. Children make up a small proportion of hospital activity so this may not significantly impact results.

These different criteria are likely to have some impact on the comparability of results, even where the same survey instrument is used (for example, in Victoria and Queensland). If there is sufficient information available, some of these differences can be controlled through risk adjustment of the results or partitioning results (for example the separate reporting of maternity patients in Victoria).

Table 4 Selected characteristics of patient satisfaction and experience surveys in Australia

<i>Survey</i>	<i>Recent Surveys Conducted</i>	<i>Latest Published Results</i>	<i>Survey Method</i>	<i>Process for selecting sample</i>	<i>Sample Size</i>	<i>Response Rate (%)</i>
National (TQA)	2005	2003	Telephone Interview	Randomly drawn from telephone numbers	Total - 5271 Around 700 admitted to hospital	Unknown
NSW	2005 Continuous since 2002	2003	Computer Assisted Telephone Interview	Randomly drawn from telephone numbers	Total 15 837 2012 admitted overnight in the last 12 months	67% for total sample
Vic	2005 Continuous since 2000-01	2003	Postal Survey	Eligible patients identified by hospitals and sample drawn from these patients	16 349 (2003-04)	42%
Qld	Dec 2004 – Mar 2005	May-June 2001	Postal Survey	Sample drawn centrally from state database	10 414 (2001) 18 000 (2004-5) Sample	44% (2001) 40% (planned for 2004-5)
WA	Aug 2003 – June 2004 Overnight admitted patients surveyed every second year	Not Published	Postal Survey with telephone follow-up	Sample drawn centrally from state database	3842	47%
SA	2003-1 month 2005-1 month	Not Published	CATI	Sample drawn centrally from state database	2620 (2003) 3500 (2005)	81%
Tas	2003-June–Sept 2004-Sept–Nov	Not Published	Postal survey issued to patients at discharge	First 75 patients in identified wards within survey period	563 (2003) 484 (2004)	35% 36%

Table 5 Sample selection criteria for patient satisfaction and experience surveys in Australia

<i>Survey</i>	<i>Selection criteria</i>
NSW	<p>Includes:</p> <p>NSW residents living in households with private telephones. Patients' satisfaction surveyed for respondents who identify that they have been admitted to hospital overnight within the last twelve months. Questions are focused on the more recent hospital stay.</p> <p>Excludes:</p> <ul style="list-style-type: none"> • Same day patients
Vic	<p>Includes:</p> <ul style="list-style-type: none"> • Same day patients except '4 hour admissions' in emergency departments <p>Excludes:</p> <ul style="list-style-type: none"> • Episodes involving neonatal death or termination • Patients less than 18 years • '4 hour admissions' in emergency departments • Patients attending outpatient clinics • Patients who were discharged or transferred to a psychiatric care centre • 'Hospital in the home' patients not actually occupying a hospital bed • Patients with dementia • Patients who have opted out of participating in the survey
Qld	<p>Includes:</p> <ul style="list-style-type: none"> • Respondents have previously consented during their hospital stay (an Opt-In approach) — implemented for the most recent (2004-05) survey. • Mental health patients • Children — for children under 14 years parented or guardians are approached <p>Excludes:</p> <ul style="list-style-type: none"> • Same day patients
WA	<p>Includes:</p> <ul style="list-style-type: none"> • Children < 16 years, but parents and guardians are asked to respond. <p>Excludes:</p> <ul style="list-style-type: none"> • Mental health patients • Indigenous patients • People who don't reside in WA
SA	<p>Includes:</p> <ul style="list-style-type: none"> • Episodes of 1 to 35 days <p>Excludes:</p> <ul style="list-style-type: none"> • Children under 16 years • Adults over 80 years • Maternity patients • Mental health patients • Indigenous patients • Patients discharged to nursing homes or other hospitals
Tas	<p>Excludes:</p> <ul style="list-style-type: none"> • Children under 18 years • Patients in paediatric wards • Mental health patients

Survey instruments for assessing patient satisfaction

The survey instruments used by jurisdictions vary significantly in the number of questions included. For the surveys specifically targeted at former patients, survey length varies from 24 items in the H-CAHPS survey, to around 100 items in the SA survey. The VPSM instrument includes around 80 items. The VPSM has avoided the need to ask about a range of demographic and other variables because these are derived from the admitted patients database.

Most of the survey instruments include items that elicit overall assessments of care. Table 6 shows the questions that are most relevant to overall satisfaction. The WA survey is the only survey that does not include a general question of this nature. Other instruments vary significantly in the language used in the question, and the range of responses offered to the respondent.

Table 6 Questions used to assess overall satisfaction with experience of hospital admitted patient episode

<i>Survey</i>	<i>Questions</i>	<i>Responses</i>
USA – HCAHPS	Using any number from 0 to 10, where 0 is the worst hospital possible and 10 is the best hospital possible, what number would you use to rate this hospital?	Worst hospital possible 0 1 2 3 4 5 6 7 8 9 10 Best hospital possible
English NHS	Overall, how would you rate the care you received?	Excellent, Very Good, Good, Fair, Poor
TQA Health Care & Insurance Survey	The specific question wasn't available but it is understood the question was 'How satisfied were you with your hospital stay?'	Very Satisfactory, Fairly Satisfactory, Not Too Satisfactory, Not At All satisfactory, Not Sure
NSW	Overall, what do you think of the care you received at this hospital?	Excellent, Very Good, Good, Fair, Poor, Don't Know and Refused.
Victoria & Queensland	Thinking about all aspects of your hospital stay, how satisfied were you?	Very Satisfactory, Fairly Satisfactory, Not Too Satisfactory, Not At All satisfactory, Not Sure
Western Australia	No overall rating question.	
South Australia	Overall, how would you rate the health care provided by the hospital on this visit?	Poor; Acceptable; Good; Excellent; Don't know/can't say; ;
Tasmania	Thinking about all parts of your hospital stay, how would you rate your overall care?	Very Good, Good, Fair, Poor, Very Poor, Doesn't Apply

In addition to a general assessment question, some surveys include other more general questions about the patients experience and assessment of that experience (table 7). These include questions that seek the patient's views on the extent to and how the hospital episode helped the patient, and also judgments about the appropriateness of the length of hospital stay.

Table 7 Questions used to gauge patient’s assessment of outcomes of the admitted patient episode

<i>Survey</i>	<i>Questions</i>	<i>Responses</i>
Vic/ Qld	How much do you think you were actually helped by your stay in the hospital?	A great deal, Quite a bit, Somewhat, A little, Not at all, Not Sure
	Was the length of time you spent in hospital ... ?	Right amount, Too short, Too long, Not Sure
WA	Which one of the following best describes what your hospital stay did for you? My hospital stay ...:	<ul style="list-style-type: none"> • made my health worse • made it more difficult to cope with my condition • made no difference • helped me to cope better with my problem • helped me to come closer to being healthy • helped maintain my health • helped restore my health
	How worthwhile would you say your hospital stay was in respect of the following outcomes?	<ul style="list-style-type: none"> • Not worthwhile • Can't judge • Worthwhile • Doesn't apply
	<ul style="list-style-type: none"> • Achieving the result you expected • Relief from pain you had before your hospital stay • Relief from other symptoms you had before your hospital stay • Relief/improvement from restrictions your condition was imposing on your daily living • Being more able to manage your condition 	
SA	Which of the following statements best describes what your hospital stay did for you? My hospital stay ...	<ul style="list-style-type: none"> • helped me to maintain or restore my health • helped me to cope better with my problem • made no difference • made it more difficult to cope with my problem • made my health worse • don't know/can't say
	Regarding the length of time you stayed in hospital, was it:	Too short, Enough, Too long, No opinion, Doesn't apply
Tas	How much do you think you were actually helped by your stay in hospital?	A lot, a little, no change, made worse, Doesn't apply

For the surveys specifically targeted at former patients, other questions about patient experience and rating of care are grouped into various dimensions of care. These dimensions are similar between the instruments, probably reflecting similar conceptual origins. The dimensions are important in relation to grouping questions,

but also in terms of analysing results. Table 8 shows the main conceptual dimensions for each of the instruments. For the purpose of this project, where an attempt has been made to compare the various survey instruments, questions were grouped into the areas shown in table 9.

Table 8 Specific dimensions of patient experience assessed by the various survey instruments

<i>US -HCAHPS</i>	<i>English NHS</i>	<i>Vic/ Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
	Access	Access and admission	Getting into hospital	Hospital process waiting/ admission	Admission to hospital
Your care from nurses	Respect for patients' values, preferences and expressed needs	General patient information	Information and communication between you and the people caring for you		Your hospital stay, including issues such as: communication; respect; sensitivity and kindness of staff; involvement in decision making; and physical environment
Your care from doctors	Coordination and integration of care. Information, communication, and education	Treatment and related information	Time and attention paid to your care. Your right to be involved in your care and treatment	Care and treatment management	
The hospital environment	Physical comfort	Physical environment	Meeting your personal as well as clinical needs	Personal needs	
Your experiences in the hospital	Emotional support and alleviation of fear and anxiety		The residential aspects of the hospital (eg food, room/ward)	The residential aspects of the hospital (eg food, room/ward)	
	Involvement of family and friends	Complaints management			
When you left the hospital	Transition and continuity	Discharge and follow-up	Coordination and consistency of your care		Discharge from hospital

Table 9 Groupings of questions adopted for this project

Question groups

Waiting times
Admission processes
Hospital stay — information/ communication
Hospital stay — involvement in decision making
Hospital stay — treated with respect
Hospital stay — privacy
Hospital stay — responsiveness of staff
Hospital stay — management of pain
Hospital stay — medicines
Hospital stay — physical environment
Hospital stay — patients' rights and management of complaints
Hospital stay — other
Discharge

As noted above, the surveys adopt various approaches to standardising responses and ratings. The most commonly used ratings scales within each survey are set out in table 10. The difference between the rating approaches are likely to have some systematic effects on results. For example, the scales have a different number of possible options. Some scales include 'Very Poor' and 'Poor', whilst others include only 'Poor'. Some include 'Excellent' and 'Good', others 'Very Good' and 'Good', whilst others include only 'Good'.

In appendix B, questions from each of the surveys are compared in detail. Overall the surveys fall into two main clusters — Victoria and Queensland (and now The Canberra Hospital), and the Western Australia and South Australia surveys. The Tasmanian survey is relatively unique.

Table 11 presents a comparison on questions where there is some commonality, at least in subject matter, between the various surveys, and therefore some potential for achieving harmonisation of surveys. These include around 26 groups of questions.

Table 10 Standard responses used in patient satisfaction and experience surveys

<i>Survey</i>	<i>Response scale</i>
USA – HCAPS	Never; Sometimes; Usually; Always (Worst hospital possible) 0 1 2 3 4 5 6 7 8 9 10 (Best hospital possible)
UK – NHS	Excellent; Very good; Good; Fair; Poor; Yes, definitely; Yes, to some extent; No Yes, always; Yes, sometimes; No
Vic/Qld	Poor; Fair; Good; Very Good; Excellent; Not sure; Does not Apply
WA	Poor; Adequate; Good; Excellent; No Opinion; Doesn't Apply Got None, Wanted More, As Much As Needed, Too Much, No opinion, Doesn't Apply Never, Sometimes, Usually, Always, Doesn't Apply
SA	Poor; Fair; Good; Not sure; No Opinion; Doesn't Apply Unacceptable, Could be improved, Acceptable, No opinion, Doesn't Apply None, Want More, Enough, Too Much, No opinion, Doesn't Apply Never, Sometimes, Usually, Always, Doesn't Apply
Tas	Very Good, Good, Fair, Poor, Very Poor, Doesn't Apply

Table 11 **Comparison of questions addressing similar issues in selected patient satisfaction and experience surveys**

<i>Issue</i>	<i>US -HCAHPS</i>	<i>UK NHS</i>	<i>Victoria/ Queensland</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
Waiting times		(A) How do you feel about the length of time you were on the waiting list before your admission to hospital? (B) I was admitted as soon as I thought was necessary; I should have been admitted a bit sooner; I should have been admitted a lot sooner;	(A) How would you rate the hospital on the way it prepared you for admission? (B) The length of time between when you found out you had to go to hospital and when the hospital was able to admit you was ...? Was your planned admission date changed by someone at the hospital? Y/N	(A) How long did you have to wait to be admitted to hospital after your doctor told you it was necessary? Didn't have to wait; 1-7 days; 8-14 days; 15-30 days; 31-60 days; 61-90 days; Over 90 days [Specify]; Can't remember how long (B) Time you waited to get into hospital: PAGE	(A) How long did you have to wait to be admitted to hospital after your doctor told you it was necessary? Didn't have to wait; 1-7 days; 8-14 days; 15-30 days; 31-60 days; Over 90 days [Specify]; Can't remember how long (B)The time you waited to get into hospital was: UCA The notice you received if your admission date was cancelled or changed was: UCA	
Admission processes		(A) Following arrival at the hospital, how long did you wait before admission to a room or ward and bed? - < 1 hour 1-2 2-4 4-8 8+; Can't remember; Did not have to wait	The time you had to wait for a bed (after you arrived at the hospital) -PFGVE	(A) Once you got to hospital, how long did you wait before you were taken or sent to your room or ward? Didn't have to wait; < 30 minutes; 30-60 minutes; 1-2 hours; > 2 hours Can't remember;	(A) Once you got to hospital, how long did you wait before you were taken or sent to your room or ward? Didn't have to wait; < 30 minutes; 30-60 minutes; 1-2 hours; > 2 hours Can't remember;	Concerning your actual admission to hospital please rate the following: ease of being admitted, including the amount of time it took? VPFGV

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Table 11 (continued)

<i>Issue</i>	<i>US -HCAHPS</i>	<i>UK NHS</i>	<i>Victoria/ Queensland</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
		(B) From the time you arrived at the hospital, did you feel that you had to wait a long time to get to a bed on a ward? - Yes definitely; Yes to some extent; no		(B) Please Rate: The time you waited to be taken/sent to your ward/room	(B) The time you waited before you were able to go to your ward or room after you had seen the admissions clerk was: UCA	
Hospital stay: information/ communication		How much information about your condition or treatment was given to you? - Not enough; The right amount; Too much;	During your hospital stay, how would you rate: How well information about your treatment was explained to you - PFGVE	The way health care professionals explained your condition and treatment PAGE	Regarding the information given to you about your planned treatment when you got to the ward, did you get.... NWET	How well did your doctor or nurse explain the following? - benefits and risks of procedures and treatment VPEWV
			During your hospital stay, how would you rate: The opportunity to ask questions about your condition or treatment -PFGVE	Please rate: The way health care professionals answered your questions PAGE	The way health care professionals explained the outcome of your treatment, procedure or surgery was: UCA	How well did your doctor or nurse explain the following? - the results of procedures and treatment VPEWV
Involve-ment in decision making		Were you involved as much as you wanted to be in decisions about your care and treatment? - YD YS N	During your hospital stay, how would you rate: The way staff involved you in decisions about your care -PFGVE	Involvement in decisions about your care and treatment NWET	Regarding involvement in decisions about your care and treatment, did you have ... NWET	
Treated with respect	During this hospital stay, how often did nurses treat you with courtesy and respect? - NSUA	Did nurses talk in front of you as if you weren't there? - YO YS N	During your hospital stay, how would you rate: The courtesy of nurses -PFGVE	Being treated with politeness and consideration NSUA	Were the staff considerate and polite to you? NSUA	Were there occasions when you could have been treated with more sensitivity and kindness? NWET

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Table 11 (continued)

<i>Issue</i>	<i>US -HCAHPS</i>	<i>UK NHS</i>	<i>Victoria/ Queensland</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
	During this hospital stay, how often did doctors treat you with courtesy and respect? - NSUA	Did doctors talk in front of you as if you weren't there? - YO YS N	During your hospital stay, how would you rate: The courtesy of doctors -PFGVE During your hospital stay, how would you rate: Being treated with respect -PFGVE During your hospital stay, how would you rate: How well your cultural or religious needs were respected by the hospital - PFGVE	Being shown respect while being examined or interviewed NSUA Were you asked if you had any cultural or religious beliefs that might affect the way you were treated in hospital? Y/N	Did you feel you were shown respect while being examined or interviewed? NSUA Did anyone ask whether you had any cultural or religious beliefs that might affect the way you were treated in hospital?	
Privacy		Were you given enough privacy when discussing your condition or treatment? - YA YS N	The respect for your privacy during your stay -PFGVE	Hospital staff using low voices when interviewing or examining you so others couldn't overhear NSUA	Did the hospital staff use low voices when talking or examining so that others couldn't overhear? NSUA	How do you rate the following parts of your stay? - privacy (eg curtains drawn , health professionals speaking quietly about your condition) VPEWV

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Table 11 (continued)

<i>Issue</i>	<i>US -HCAHPS</i>	<i>UK NHS</i>	<i>Victoria/ Queensland</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
		Were you given enough privacy when being examined or treated? - YA YS N	The privacy in the room where you spent most time -PFGVE	Having screens around the bed when you were examined to ensure your privacy NSUA	Was there screens (curtains) around the bed when being examined to ensure privacy..... NSUA	
Respon- siveness of staff	During this hospital stay, after you pressed the call button, how often did you get help as soon as you wanted it? - NSUA NA	How many minutes after you used the call button did it usually take before you got the help you needed? - 0 1-2 3-5 5+ NA	During your hospital stay, how would you rate: The length of time the nursing staff took to respond to your call - PFGVE	(A) If you used the call system while you were in hospital, how long did it usually take before a nurse came to ask why you had called? <5 mins; 5-10 mins; 11-15 mins; > 15 mins (specify); Didn't come at all; Can't remember; Not available (B) The time you waited for a nurse after using the call system PAGE The time you waited for a doctor if you needed to see one PAGE	(A) If you used the call system while you were in hospital, how long did it usually take before a nurse came to ask you why you had called? Didn't use the call system; <5 mins; 5-10 mins; 11-15 mins; > 15 mins (specify); Didn't come at all; Can't remember; Not available (B) The time you waited for a nurse after using the call system was: UCA The time you waited for a doctor if you asked to see one was: UCA	In your OPINION, how would you rate the following? - the availability of doctors when you needed them VPFGV

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Table 11 (continued)

<i>Issue</i>	<i>US -HCAHPS</i>	<i>UK NHS</i>	<i>Victoria/ Queensland</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
				The time doctors spent on your care and treatment NWET	Regarding the time doctors spent on your care and treatment. Did you get.... NWET	In your OPINION, how would you rate the following? - attention to detail demonstrated by doctors (diagnosing problems, examining you carefully, treating your condition) VPFGV
Management of pain	During this hospital stay, how often did the hospital staff do everything they could to help you with your pain? - NSUA	Do you think the hospital staff did everything they could to help control your pain? - YD YS N	During your hospital stay, how would you rate: The help you received for your pain - PFGVE			
Medicines	During this hospital stay, were you given any medicine that you had not taken before? Y/N - Before giving you any new medicine, how often did hospital staff tell you what the medicine was for? - NSUA Before giving you any new medicine, how often did hospital staff describe possible side effects in a way you could understand? - NSUA		During your hospital stay, how would you rate: How well the purpose of medicines was explained to you - PFGVE During your hospital stay, how would you rate: How well the possible side-effects of medicines was explained to you - PFGVE	Information about medications NWET	Regarding information about medications. Did you get..... NWET	How well did your doctor or nurse explain the following? - purpose of any medicines VPEWV

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Table 11 (continued)

<i>Issue</i>	<i>US -HCAHPS</i>	<i>UK NHS</i>	<i>Victoria/ Queensland</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
Physical environment	During this hospital stay, how often were your room and bathroom kept clean? - NSUA	In your opinion, how clean was the hospital room or ward that you were in? - V F NV NAA	The cleanliness of the room where you spent most time -PFGVE How clean were the toilets and bathrooms that you used in hospital? - V F NV NAA	The cleanliness of the surroundings PAGE		How do you rate the following parts of your stay? - condition of your room (eg cleanliness, comfort, room temperature, provisions) VPEWV
	During this hospital stay, how often was the area around your room quiet at night? - NSUA	Were you ever bothered by noise at night from other patients? Y/N Were you ever bothered by noise at night from hospital staff? Y/N	The restfulness of the hospital (amount of peace and quiet) - PFGVE	The noise level around the area PAGE		
		How would you rate the hospital food? - VG G F P Did not have food	The quality of food overall -PFGVE	The quality of the food PAGE	Did you find the quality of food to be..... PFG	How do you rate the following parts of your stay? - quality of food (eg presentation, taste, temperature, serving and variety) VPEWV
			The temperature of hot meals -PFGVE The quantity of food overall -PFGVE	The temperature of the food PAGE The quantity of food PAGE	Did you find the temperature of the food to be... PFG	

(continued next page)

Table 11 (continued)

<i>Issue</i>	<i>US -HCAHPS</i>	<i>UK NHS</i>	<i>Victoria/ Queensland</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
Patients rights and management of complaints			Did you have a reason to make a complaint during your stay? Y/N	The way any complaints were dealt with by the hospital PAGE	The way any complaints were dealt with by the hospital was: UCA	(A) Did you need to complain to a staff member on your ward? Y/N (B) If YES, how would you rate the way the complaint was handled? VPFGV
Discharge	During this hospital stay, did you get information in writing about what symptoms or health problems to look out for after you left the hospital? Y/N	Did a member of staff tell you about any danger signals you should watch for after you went home? - YC YS N	The written information you were given about how to manage your condition when you got home	Information on how to manage your condition/ recovery at home NWET	Regarding information on how to manage your condition or recovery at home, did you get..... NWET	How did you rate information given to you about - how to manage your condition when you got home VPFGV

Codes:

<i>Y/N</i>	<i>Yes, No</i>	<i>VPFGV</i>	<i>Very Poor, Poor, Fair, Good, Very Good</i>
<i>YD YS N</i>	<i>Yes definitely, Yes sometimes, No</i>	<i>VPEWV</i>	<i>Very Poorly, Poorly, Enough, Well, Very Well</i>
<i>YC YS N</i>	<i>Yes completely, Yes to some extent, No</i>	<i>PAGE</i>	<i>Poor, Average, Good, Excellent</i>
<i>UCA</i>	<i>Unacceptable, Could be Improved, Acceptable</i>	<i>PFGVE</i>	<i>Poor, Fair, Good, Very Good, Excellent</i>
<i>NSUA</i>	<i>Never, Sometimes, Usually Always</i>	<i>PFG</i>	<i>Poor, Fair, Good</i>
<i>NWET</i>	<i>None, Wanted More, Enough, Too Much</i>		

6 Future directions

This chapter addresses the main objectives of this project, including an examination of the potential for harmonising the various state surveys.

In their 1995 report, Draper and Hill examined these issues. Their report was relatively sceptical of the value of patient satisfaction surveys, although various developments since that time have addressed several of the concerns they raised. A key finding of their report was that patient satisfaction surveys:

... need to be undertaken in a context that goes beyond comparison of results to a context where hospitals used benchmarking, or other approaches, to establish what the processes are that lead to good practice. (Draper and Hill 1995, p. iv)

Several of the state surveys have been implemented in a manner to achieve these linkages to quality improvement processes. However, use of these data for comparative purposes has tended to be a much lower priority.

Draper and Hill argued that the preferred approach to achieving comparative national data would be to undertake a single, purpose-built national survey, undertaken under the auspices of the Australian Government. This option remains the most efficient means of achieving valid comparative data. However, it is unlikely to be realised at least in the medium term.

Draper and Hill also considered the option of agreeing to a common set of questions that could be included in statewide surveys. They pointed out that this option:

... is not straightforward, and that comparisons between state patient satisfaction surveys as currently constructed are not valid, due to difference in design, administration and sampling. (Draper and Hill 1995, p iv)

This is the option explored by this paper. Qualifications on the potential for harmonising survey questions in 2005 are almost identical to those identified in 1995.

One objective of this project was to ‘identify points of commonality and difference between these patient satisfaction surveys and their potential for concordance and/or for forming the basis of a ‘minimum national data set’ on public hospital ‘patient satisfaction’ or ‘patient experience’’. This project has found that:

- All the Australian patient based surveys assess similar aspects of patient experience and satisfaction and therefore there is some potential for harmonising approaches.

-
- In recent years, a similar initiative has been underway in relation to statewide CATI population health surveys. This has occurred under the umbrella of the Public Health Outcomes Agreement. However, there is no similar forum for addressing patient surveys. As a result, communications between jurisdictions has been largely *ad hoc*. A starting point for this process would be to identify an auspicing body and create a forum through which jurisdictions can exchange ideas and develop joint approaches.
 - With respect to patient experience, population surveys (such as the NSW survey) have some fundamental differences to patient surveys. Therefore, pursuing harmonisation between these types surveys is unlikely to result in useful outcomes. The major focus should be on exploring the potential to harmonise the surveys that explicitly focus on former patients.
 - The different methodologies adopted for the patient surveys poses a severe impediment to achieving comparable information. One strategy for addressing some of these problems is to include in any ‘national minimum data set’ a range of demographic and contextual items that will allow risk adjustment of results. However, other aspects of survey methodologies will mean basic problems of comparability between survey results will persist.

Another objective of this project was to ‘identify data items in these surveys that could be used to report on an indicator of public hospital quality, in chapter 9 of the annual *Report on Government Services*. This indicator would be reported on a non-comparable basis initially but, ideally, have potential to improve comparability over time.’ Whilst the issues of differences in methods make comparison very difficult, there are several areas in which some form of national reporting could occur, initially on a non-comparative basis.

- Most of the surveys include overall ratings of care, and these have been reported in previous editions of the *Report on Government Services*. With some degree of cooperation, there is some potential to standardise particular questions related to overall ratings of care, and related to specific aspects of care.
- The patient based surveys adopt a variety of approaches to eliciting overall ratings of care. Whilst there are some doubts about the value of overall ratings, there appear to good opportunities to adopt an Australian standard question and set of responses. In addition, supplementary questions related to overall aspects of care could be agreed to, including: patient’s views on the extent to and how the hospital episode helped the patient; and judgments about the appropriateness of the length of hospital stay.
- Comparative information will be more useful if there is the potential to explore specific dimensions of care. Table 11 sets out a number of areas in which non-comparative data could be reported in the short term with a medium term agenda

of achieving standard questions and responses. These address the following aspects of patient experiences:

- **Waiting times** — The issue is not actual waiting times but patient assessment of how problematic those waiting times were. The experience of having admissions dates changed could also be assessed.
- **Admission processes** — Waiting to be taken to a room/ward/bed — again the issue is not actual waiting times but patient assessment of how problematic that waiting was.
- **Information/Communication** — Focusing on patient assessments of the adequacy of information provided about the condition or treatment, and the extent to which patients believed they had opportunities to ask questions.
- **Involvement in decision making** — Focusing on patient assessments of the adequacy of their involvement in decision making.
- **Treated with respect** — Patients’ views on whether hospital staff treated them with courtesy, respect, politeness and/or consideration. These questions could be split to focus specifically on doctors versus nurses. Patient assessments of the extent to which cultural and religious needs were respected could also be included.
- **Privacy** — Patient assessments on the extent to which privacy was respected.
- **Responsiveness of staff** — Most surveys include a patient experience question related to how long nurses took to respond to a call button. Related questions concerning availability of doctors is included in several surveys.
- **Management of pain**
- **Information provided related to new medicines**
- **Physical environment** — Patient assessments of cleanliness of rooms and toilets/bathrooms, quietness/restfulness, quality temperature and quantity of food.
- **Management of complaints** — Patient assessments of how complaints were handled.
- **Discharge** — Information provided at discharge related to how to manage the condition.

The major challenge here is that many of the surveys adopt different sets of standard responses for rating these and other questions.

In addition to jurisdictional surveys, this project examined two international examples of surveys of hospital patients that could provide suitable templates for a national minimum dataset on public hospital ‘patient satisfaction’ or ‘patient

experience'. These were the British NHS survey (for admitted patients) and the US based H-CAPHS. The main advantage of adopting or adapting one of these approaches is that they are supported by significant investment and rigorous attention to methods. A secondary advantage is the potential for international comparison. Whilst the experience with these international surveys has lessons for Australia, and may well inform the future development of Australian based instruments, the Australian based surveys — particularly the VPSM and the WA surveys — also have relatively strong methodological bases and strong jurisdictional commitment. Wholesale adoption of these international instruments is unlikely to be acceptable to these jurisdictions.

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Appendix A Jurisdiction informants interviewed

NSW

Louisa Jorm (by email), Director, Centre for Epidemiology and Research, NSW Health Department.

Victoria

Dr Peter McNair, Senior Project Officer, Quality Performance Unit, Victorian Department of Human Services.

Mary Swift, Victorian Patient Satisfaction Monitor Coordinator, Metropolitan Health Services Relations, Metropolitan Health and Aged Care Services.

Queensland

Justine Collins, Manager Analysis and Evaluation, Queensland Health.

Kathy Rankin and Lulu Hill, Queensland Health.

Western Australia

Alison Daly, WA Department of Health.

South Australia

Anne Taylor, Manager Population Research and Outcomes, South Australian Department of Health.

Ann-Louise Hordacre, Epidemiologist/Senior Research Officer, Patient Evaluation of Hospital Services, Population Research and Outcome Studies Unit, South Australian Department of Health.

Tasmania

Tony Sansom, Manager, Planning and Performance Review, Department of Health and Human Services, Tasmania.

Peggy Tsang, Project Officer, Department of Health and Human Services, Tasmania.

ACT

Jane Gray, The Canberra Hospital, ACT.

NT

Richard Nelson, Senior Policy Officer, Department of Health and Community Services.

Penny Parker, Quality Coordinator Acute Care, Northern Territory Health Services.

Appendix B Review of questions included in patient survey instruments

<i>Issue</i>	<i>US -HCAHPS</i>	<i>UK NHS</i>	<i>Victoria/ Queensland</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
Waiting Times		How do you feel about the length of time you were on the waiting list before your admission to hospital? - I was admitted as soon as I thought was necessary; I should have been admitted a bit sooner; I should have been admitted a lot sooner;	How would you rate the hospital on the way it prepared you for admission? - The length of time between when you found out you had to go to hospital and when the hospital was able to admit you	(A) How long did you have to wait to be admitted to hospital after your doctor told you it was necessary? Didn't have to wait; 1-7 days; 8-14 days; 15-30 days; 31-60 days; 61-90 days; Over 90 days [Specify]; Can't remember how long (B) Time you waited to get into hospital: PAGE Was your admission date arranged so that you could easily keep it? Y/N	(A) How long did you have to wait to be admitted to hospital after your doctor told you it was necessary? Didn't have to wait; 1-7 days; 8-14 days; 15-30 days; 31-60 days; 61-90 days; Over 90 days [Specify]; Can't remember how long (B)The time you waited to get into hospital was: UCA The notice you received if your admission date was cancelled or changed was: UCA	
		When you were told you would be going into hospital, were you given enough notice of your date of admission? Y/N Was your admission date changed by the hospital? Y/N Were you given a choice of admission date? Y/N	Was your planned admission date changed by someone at the hospital? Y/N			

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Appendix B table (continued)

<i>Issue</i>	<i>US -HCAHPS</i>	<i>UK NHS</i>	<i>Victoria/ Queensland</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
Admission Processes			Were you provided with information about your stay before you went to hospital? Y/N		Were you sent any information on how to prepare for your hospital stay? Y/N	
				When you got to hospital did you know where you were supposed to go? Y/N	When you got to the hospital, did you know what you were supposed to do and where you were supposed to go? Y/N	
			How would you rate the hospital on the way it prepared you for admission? In particular: The clarity of written information you received about the hospital before your stay -PFGVE	Information sent before admission on how to prepare for your hospital stay		
			The helpfulness of admission staff - PFGVE			Concerning your actual admission to hospital please rate the following: the attention of admitting staff to your special needs and concerns? VPGV

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Appendix B table (continued)

<i>Issue</i>	<i>US -HCAHPS</i>	<i>UK NHS</i>	<i>Victoria/ Queensland</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
		(A) Following arrival at the hospital, how long did you wait before admission to a room or ward and bed? - < 1 hour 1-2 2-4 4-8 8+; Can't remember; Did not have to wait (B)From the time you arrived at the hospital, did you feel that you had to wait a long time to get to a bed on a ward? - Yes definitely; Yes to some extent; No;	The time you had to wait for a bed (after you arrived at the hospital) -PFGVE The way the hospital routine and procedures (like meal times, visiting hours, doctors' visits, etc.) were explained to you -PFGVE	(A) Once you got to hospital, how long did you wait before you were taken or sent to your room or ward? Didn't have to wait; < 30 minutes; 30-60 minutes; 1-2 hours; > 2 hours Can't remember; (B) Please Rate: The time you waited to be taken/sent to your ward/room Were you asked if you were currently taking any medication(s)? Y/N Were you asked about your dietary needs when you arrived on the ward? Y/N	(A) Once you got to hospital, how long did you wait before you were taken or sent to your room or ward? Didn't have to wait; < 30 minutes; 30-60 minutes; 1-2 hours; > 2 hours Can't remember; (B) The time you waited before you were able to go to your ward or room after you had seen the admissions clerk was: UCA	Concerning your actual admission to hospital please rate the following: ease of being admitted, including the amount of time it took? VPFGV

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Appendix B table (continued)

<i>Issue</i>	<i>US -HCAHPS</i>	<i>UK NHS</i>	<i>Victoria/ Queensland</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
Hospital stay — information/ communication		How much information about your condition or treatment was given to you? - Not enough; The right amount; Too much;	During your hospital stay, how would you rate: How well information about your treatment was explained to you - PFGVE During your hospital stay, how would you rate: The opportunity to ask questions about your condition or treatment -PFGVE	The way health care professionals explained your condition and treatment PAGE Please rate: The way health care professionals answered your questions PAGE	Regarding the information given to you about your planned treatment when you got to the ward, did you get.... NWET The way health care professionals explained the outcome of your treatment, procedure or surgery was: UCA	How well did your doctor or nurse explain the following? - benefits and risks of procedures and treatment VPEWV How well did your doctor or nurse explain the following? - the results of procedures and treatment VPEWV When you questioned nurses how well did you understand the answers? VPEWV
	During this hospital stay, how often did nurses explain things in a way you could understand? - B147	When you had important questions to ask a nurse, did you get answers that you could understand? - YA YS N				
	During this hospital stay, how often did doctors explain things in a way you could understand? - NSUA	When you had important questions to ask a doctor, did you get answers that you could understand? - YA YS N			The effort made by doctors to discuss the benefits and risks of your treatment was: UCA	When you questioned the doctors how well did you understand the answers? VPEWV
	During this hospital stay, how often did nurses listen carefully to you? - NSUA		During your hospital stay, how would you rate: The willingness of hospital staff to listen to your problems -PFGVE			

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Appendix B table (continued)

<i>Issue</i>	<i>US -HCAHPS</i>	<i>UK NHS</i>	<i>Victoria/ Queensland</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
During this hospital stay, how often did doctors listen carefully to you? - NSUA		Did you find someone on the hospital staff to talk to about your worries and fears? - YD YS N Sometimes in a hospital, a member of staff will say one thing and another will say something quite different. Did this happen to you? - YO YS N If your family or someone else close to you wanted to talk to a doctor, did they have enough opportunity to do so? - YD YS N		Feeling able to ask for information if you felt anxious about something NSUA The communication between doctors, nursing staff and other health care professionals about your treatment PAGE Information given to your family/carer(s) about your progress NWET Information about the purpose and results of any tests NWET	The communication between doctors, nurses and other health care professionals about your treatment was: UCA Regarding information given to your family or carers about your progress, did they get..... NWET Regarding the information about the purpose of the tests, did you get NWET	How do you rate the following parts of your stay? - information given to family and friends about your condition progress and needs (with your consent) VPEWV How well did your doctor or nurse explain the following? - the reasons for tests VPEWV

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Appendix B table (continued)

<i>Issue</i>	<i>US -HCAHPS</i>	<i>UK NHS</i>	<i>Victoria/ Queensland</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
				Information about your progress while in hospital NWET	Regarding the information about your progress while in hospital, did you get..... NWET	
				Encouragement to ask questions about your condition and treatment NWET		Were you encouraged to ask questions about your condition and treatment? Y/N
				Did you have access to an interpreter if you needed one? Y/N	Did you feel that you could ask for information if you felt anxious about something... NSUA	
				Were you told everything you needed to know when you arrived at your room/ward (e.g. how to use the call system, or rent a TV)? Y/N		
				Were you asked who (other than hospital staff) could be given information about your condition? Y/N		
				Did anyone check that you understood the information given to you? Y/N		
				Information given to you upon arrival on the ward about your planned treatment NWET		

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Appendix B table (continued)

<i>Issue</i>	<i>US -HCAHPS</i>	<i>UK NHS</i>	<i>Victoria/ Queensland</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
Involve-ment in decision making		Were you involved as much as you wanted to be in decisions about your care and treatment? - YD YS N	During your hospital stay, how would you rate: The way staff involved you in decisions about your care -PFGVE	Involvement in decisions about your care and treatment NWET	Regarding involvement in decisions about your care and treatment, did you have ... NWET	
				Did you feel that you could have refused the proposed test/ treatment/ procedure if you wanted to? Y/N Did you feel that you could have asked for a second opinion about the proposed test/ treatment/procedure if you wanted to? Y/N Having your right to an opinion respected NSUA Time to consider any consent form you needed to sign NWET	Was your right to have an opinion respected..... NSUA	
Treated with respect	During this hospital stay, how often did nurses treat you with courtesy and respect? - NSUA	Did nurses talk in front of you as if you weren't there? - YO YS N	During your hospital stay, how would you rate: The courtesy of nurses -PFGVE	Being treated with politeness and consideration NSUA	Were the staff considerate and polite to you? NSUA	Were there occasions when you could have been treated with more sensitivity and kindness? NWET
	During this hospital stay, how often did doctors treat you with courtesy and respect? - NSUA	Did doctors talk in front of you as if you weren't there? - YO YS N	During your hospital stay, how would you rate: The courtesy of doctors -PFGVE			

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Appendix B table (continued)

<i>Issue</i>	<i>US -HCAHPS</i>	<i>UK NHS</i>	<i>Victoria/ Queensland</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
			During your hospital stay, how would you rate: Being treated with respect -PFGVE	Being shown respect while being examined or interviewed NSUA	Did you feel you were you shown respect while being examined or interviewed? NSUA	
			During your hospital stay, how would you rate: How well your cultural or religious needs were respected by the hospital -PFGVE	Were you asked if you had any cultural or religious beliefs that might affect the way you were treated in hospital? Y/N	Did anyone ask whether you had any cultural or religious beliefs that might affect the way you were treated in hospital?	
				Did you feel that you could have refused to have students (medical, nursing) present during your treatment? Y/N	Did you feel that you could have refused to have students (medical or nursing) present during your treatment? Y/N	
Privacy		Were you given enough privacy when discussing your condition or treatment? - YA YS N	The respect for your privacy during your stay -PFGVE	Hospital staff using low voices when interviewing or examining you so others couldn't overhear NSUA	Did the hospital staff use low voices when talking or examining so that others couldn't overhear? NSUA	How do you rate the following parts of your stay? - privacy (eg curtains drawn , health professionals speaking quietly about your condition) VPEWV
		Were you given enough privacy when being examined or treated? - YA YS N	The privacy in the room where you spent most time - PFGVE	Having screens around the bed when you were examined to ensure your privacy NSUA	Was there screens (curtains) around the bed when being examined to ensure privacy..... NSUA	

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Appendix B table (continued)

<i>Issue</i>	<i>US -HCAHPS</i>	<i>UK NHS</i>	<i>Victoria/ Queensland</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
Responsive-ness of staff	<p>During this hospital stay, after you pressed the call button, how often did you get help as soon as you wanted it? - NSUA NA</p> <p>(A) During this hospital stay, did you need help from nurses or other hospital staff in getting to the bathroom or in using a bedpan? Y/N (B) How often did you get help in getting to the bathroom or in using a bedpan as soon as you wanted? - NSUA</p>	<p>How many minutes after you used the call button did it usually take before you got the help you needed? - 0 1-2 3-5 5+ NA</p>	<p>During your hospital stay, how would you rate: The length of time the nursing staff took to respond to your call - PFGVE</p>	<p>(A) If you used the call system while you were in hospital, how long did it usually take before a nurse came to ask why you had called? <5 mins; 5-10 mins; 11-15 mins; > 15 mins (specify); Didn't come at all; Can't remember; Not available (B) The time you waited for a nurse after using the call system PAGE</p> <p>The time you waited for a doctor if you needed to see one PAGE</p> <p>Any assistance you needed (e.g. going to the toilet) NWET</p>	<p>(A) If you used the call system while you were in hospital, how long did it usually take before a nurse came to ask you why you had called? Didn't use the call system; <5 mins; 5-10 mins; 11-15 mins; > 15 mins (specify); Didn't come at all; Can't remember; Not available (B) The time you waited for a nurse after using the call system was: UCA</p> <p>The time you waited for a doctor if you asked to see one was: UCA</p>	<p>In your OPINION, how would you rate the following? - the availability of doctors when you needed them VPFGV</p> <p>In your OPINION, how would you rate the following? - the assistance of nurses to meet your personal needs (e.g. eating, personal hygiene, toilet) VPFGV</p>

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Appendix B table (continued)

<i>Issue</i>	<i>US -HCAHPS</i>	<i>UK NHS</i>	<i>Victoria/ Queensland</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
			During your hospital stay, how would you rate: The responsiveness of the nurses to your needs -PFGVE	Attention by nursing staff to your care (e.g. to drips, dressings) NWET		In your OPINION, how would you rate the following? - attention to detail demonstrated by your nurses (things such as dressings, injections, medications) VPFGRV
				The time doctors spent on your care and treatment NWET	Regarding the time doctors spent on your care and treatment. Did you get.... NWET	In your OPINION, how would you rate the following? - attention to detail demonstrated by doctors (diagnosing problems, examining you carefully, treating your condition) VPFGRV
			How well hospital staff responded to your health care problems -PFGVE	The way health care professionals responded to your concerns or comments about your progress PAGE	The way health care professionals responded to any concerns or comments about your treatment was: UCA	If you had ALLIED HEALTH SERVICE, in your opinion, how would you rate the care given by your: - Physiotherapist, Occupational Therapist , Pharmacist , Dietician , Other VPFGRV

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Appendix B table (continued)

<i>Issue</i>	<i>US -HCAHPS</i>	<i>UK NHS</i>	<i>Victoria/ Queensland</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
			During your hospital stay, how would you rate: The helpfulness of the hospital staff in general -PFGVE	Did the nurse in charge of your care introduce themselves to you at each shift change? Y/N Feeling you could get help if you needed it NSUA Support and reassurance NWET	Did the nurse in charge of your care introduce him or herself to you at each shift change? Y/N	On the whole, how would you rate the kindness shown to you by hospital staff? VPFGV
Management of pain	During this hospital stay, did you need medicine for pain? Y/N During this hospital stay, how often was your pain well controlled? - NSUA During this hospital stay, how often did the hospital staff do everything they could to help you with your pain? - NSUA	Were you ever in any pain? Y/N Do you think the hospital staff did everything they could to help control your pain? - YD YS N	During your hospital stay, how would you rate: The help you received for your pain -PFGVE	Pain relief NWET		How well did your doctor or nurse explain the following? - the amount of pain or discomfort to expect VPEWV

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Appendix B table (continued)

<i>Issue</i>	<i>US -HCAHPS</i>	<i>UK NHS</i>	<i>Victoria/ Queensland</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
Medicines	<p>During this hospital stay, were you given any medicine that you had not taken before? Y/N - Before giving you any new medicine, how often did hospital staff tell you what the medicine was for? - NSUA</p> <p>Before giving you any new medicine, how often did hospital staff describe possible side effects in a way you could understand? - NSUA</p>		<p>During your hospital stay, how would you rate: How well the purpose of medicines was explained to you - PFGVE</p> <p>During your hospital stay, how would you rate: How well the possible side-effects of medicines was explained to you - PFGVE</p>	Information about medications NWET	Regarding information about medications. Did you get..... NWET	How well did your doctor or nurse explain the following? - purpose of any medicines VPEWV
Physical environ-ment		During your stay in hospital, did you ever share a room or bay with patients of the opposite sex? Y/N	Did you stay in a mixed (male and female) room? Y/N IF YES, was this a concern for you? Y/N	<p>The comfort of your bed PAGE</p> <p>The position of the call for help button PAGE</p> <p>The cleanliness of the surroundings PAGE</p>	Did you find the comfort of your bed to be..... PFG	How do you rate the following parts of your stay? - condition of your room (eg cleanliness, comfort, room temperature, provisions) VPEWV
	During this hospital stay, how often were your room and bathroom kept clean? - NSUA	In your opinion, how clean was the hospital room or ward that you were in? - V F NV NAA	The cleanliness of the room where you spent most time -PFGVE			

(continued next page)

Appendix B table (continued)

<i>Issue</i>	<i>US -HCAHPS</i>	<i>UK NHS</i>	<i>Victoria/ Queensland</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
		How clean were the toilets and bathrooms that you used in hospital? - V F NV NAA	The cleanliness of toilets and showers - PFGVE			
	During this hospital stay, how often was the area around your room quiet at night? - NSUA	Were you ever bothered by noise at night from other patients? Y/N	The restfulness of the hospital (amount of peace and quiet) - PFGVE	The noise level around the area PAGE		
		Were you ever bothered by noise at night from hospital staff? Y/N		The temperature of the surroundings PAGE	Did you find the temperature in your room or ward to be..... PFG	
		How would you rate the hospital food? - VG G F P Did not have food	The quality of food overall -PFGVE	The quality of the food PAGE	Did you find the quality of food to be..... PFG	How do you rate the following parts of your stay? - quality of food (eg presentation, taste, temperature, serving and variety) VPEWV
			The temperature of hot meals -PFGVE	The temperature of the food PAGE	Did you find the temperature of the food to be... PFG	
			The quantity of food overall -PFGVE	The quantity of food PAGE		
				The range and appeal of menus PAGE		
				The hospital parking PAGE	Did you find the hospital parking ... PFG	

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Appendix B table (continued)

<i>Issue</i>	<i>US -HCAHPS</i>	<i>UK NHS</i>	<i>Victoria/ Queensland</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
Patients rights and management of complaints			Did you have a reason to make a complaint during your stay? Y/N	The way any complaints were dealt with by the hospital PAGE	The way any complaints were dealt with by the hospital was: UCA	(A) Did you need to complain to a staff member on your ward? Y/N (B) If YES, how would you rate the way the complaint was handled? VPFGV
			Did the hospital staff encourage your feedback? Y/N		Regarding time to consider any consent form you needed to sign. Was there: NWET	Were you aware of the process by which to make a complaint or give a compliment Y/N
				Did you know that there is a Public Patients Charter listing your rights as a patient	Prior to receiving our letter, did you know there was a Public Patients Charter listing your rights as a patient? Y/N	Were you made aware of your consumer/patient rights and responsibilities while in hospital? Y/N
			(A) Are you aware that the Office of Health Review can assist with complaints not resolved by the hospital? (B) Are you aware that each hospital has a complaint service?	(A) Are you aware that there is a Health Ombudsman that can assist with complaints not resolved by the hospital? Y/N (B) Are you aware that each hospital/each region has a patient's adviser to assist with complaints? Y/N		

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Appendix B table (continued)

<i>Issue</i>	<i>US -HCAHPS</i>	<i>UK NHS</i>	<i>Victoria/ Queensland</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
Hospital stay — other		<p>Did you have confidence and trust in the nurses treating you? - YA YS N</p> <p>Did you have confidence and trust in the doctors treating you? - YA YS N</p> <p>(A) During your stay in hospital, did you have any tests, x-rays or scans other than blood or urine tests? Y/N (B)Were your scheduled tests, x-rays or scans performed on time? - YA YS N</p> <p>In your opinion, were there enough nurses on duty to care for you in hospital? - Always, Sometimes, Rarely</p>	<p>Your personal safety -PFGVE</p>	<p>Feeling safe and secure while in hospital NSUA</p> <p>Having confidence in the nursing staff NSUA</p> <p>Having confidence in the doctor(s) NSUA</p> <p>Access to any extra support you needed (e.g. support group) NWET</p> <p>The way things were put right if problems occurred while you were in hospital PAGE</p>	<p>Did you feel safe and secure while in the hospital... NSUA</p> <p>The way things were fixed if there was any problem while in the hospital was: UCA</p> <p>Did you feel you could see visitors as much as you needed/ wanted to? NSUA</p>	<p>In your OPINION, how would you rate the following? - teamwork between all health professionals involved in your treatment VPFGV</p> <p>In your OPINION, how would you rate the following? - the skills of other staff (ward clerks, medical orderlies, kitchen staff, cleaners) VPFGV</p>

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Appendix B table (continued)

<i>Issue</i>	<i>US -HCAHPS</i>	<i>UK NHS</i>	<i>Victoria/ Queensland</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
				Access to visitors NWET		On the whole, how would you rate the professional attitude of hospital staff? VPFGV How do you rate the following parts of your stay? - consideration shown to your family and friends (eg visiting hours, staff friendliness, and facilities) VPEWV
Discharge		(A) Did a member of staff explain the purpose of the medicines you were to take at home in a way you could understand? - YC YS N (B) Did a member of staff tell you about medication side effects to watch for when you went home? - YC YS N	The time given to plan when you were going home -PFGVE Were you provided with written information on the medicines you had to take after you left the hospital? Y/N		Regarding the time given to prepare for your discharge, did you get..... NWET	

(continued next page)

Appendix B table (continued)

<i>Issue</i>	<i>US -HCAHPS</i>	<i>UK NHS</i>	<i>Victoria/ Queensland</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
	During this hospital stay, did you get information in writing about what symptoms or health problems to look out for after you left the hospital? Y/N	Did a member of staff tell you about any danger signals you should watch for after you went home? - YC YS N	The written information you were given about how to manage your condition when you got home	Information on how to manage your condition/ recovery at home NWET	Regarding information on how to manage your condition or recovery at home, did you get..... NWET	How did you rate information given to you about - how to manage your condition when you got home VPFGV
		Did the doctors or nurses give your family or someone close to you all the information they needed to help you recover? - YD YS N Did hospital staff tell you who to contact if you were worried about your condition or treatment after you left hospital? Y/N				How did you rate information given to you about - danger signals to watch for about your illness, medication or operation VPFGV How did you rate information given to you about - who to contact for follow-up care VPFGV
	During this hospital stay, did doctors, nurses or other hospital staff talk with you about whether you would have the help you needed when you left the hospital? Y/N				If you needed some help to manage your recovery when you got home (e.g. nursing care or help with personal care) did the hospital staff help you get it? Y/N	
		On the day you left hospital, was your discharge delayed for any reason? Y/N		The time you waited for a doctor to discharge you from hospital PAGE	The time you waited at discharge for any prescription or medication was: UCA	When you were discharged from hospital how did you rate the following? - the time taken to get your medications VPFGV

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Appendix B table (continued)

<i>Issue</i>	<i>US -HCAHPS</i>	<i>UK NHS</i>	<i>Victoria/ Queensland</i>	<i>WA</i>	<i>SA</i>	<i>Tasmania</i>
		<p>What was the main reason for the delay? (Tick ONE only) - Wait for medicines; Wait to see the doctor; Wait for an ambulance; Something else;</p> <p>How long was the delay? - 1 hour, 1-2, 2-4, 4+</p>		<p>The arrangements at discharge with doctors and others continuing your care (e.g. Silver Chain, GP, Physio) PAGE</p> <p>If you needed any special equipment/aids (e.g. crutches, shower seat) did the hospital staff organise this for you at discharge? Y/N</p>	<p>Regarding access to any extra support you needed to help your recovery, for example a support group, did you get.... NWET</p>	<p>Did you need any of the following after your hospital stay? if YES, was it arranged BEFORE you left hospital? nursing help in the home; community help (eg. house-cleaning, support group); special equipment (eg. wheelchair, shower seat); a follow-up appointment Y/N</p> <p>When you were discharged from hospital how did you rate the following? - the amount of time given to plan when you were going home VPFGV</p> <p>When you were discharged from hospital how did you rate the following? - the way in which your discharge from hospital was organised by staff VPFGV</p>

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Appendix B table (continued)

Codes:

Y/N	Yes, No	VPCGV	Very Poor, Poor, Fair, Good, Very Good
YD YS N	Yes definitely, Yes sometimes, No	VPEWV	Very Poorly, Poorly, Enough, Well, Very Well
YC YS N	Yes completely, Yes to some extent, No	PAGE	Poor, Average, Good, Excellent
UCA	Unacceptable, Could be Improved, Acceptable	PFGVE	Poor, Fair, Good, Very Good, Excellent
NSUA	Never, Sometimes, Usually Always	PFG	Poor, Fair, Good
NWET	None, Wanted More, Enough, Too Much		

Appendix C Patient survey instruments in Australian jurisdictions

Victoria – VPSM

Queensland

Western Australia

South Australia

Tasmania

Patient Satisfaction Survey

Instructions for survey completion

About this survey

This survey is about your overall experience in hospital. It asks for your opinion about your **most recent stay** in hospital. Information from the survey will be used to help hospitals to improve services to patients.

- Not everybody receives all services. If you did not use a particular service while in hospital just mark the “Does Not Apply” box.
- There are no right or wrong answers; it is **your opinion** that is important.
- If you are assisting someone to complete this questionnaire, it is important that the **patient’s opinions** are presented.
- The survey is not the best way to make a **formal complaint**, as the survey researchers will not be able to help you to resolve it. If you would like to make a formal complaint about your experiences in hospital you should contact the hospital patient liaison officer. Alternatively, you may contact the Office of the Health Services Commissioner on **(03) 8601 5200** or toll free on **1800 136 066**.
- Your opinions are important. They will help the hospital to improve its services to patients. **Remember, the survey is completely anonymous.** No information that will identify you will be given to anyone at the hospital.



Please note, we have made every effort to ensure this survey has gone to the correct person. However, if you are **not** the person to whom this survey was addressed, or if you have **not** recently been an inpatient at the hospital mentioned in the covering letter, please return this survey in the envelope supplied, along with a note to this effect.

Thank you for your assistance.

When you have finished

Please remove the cover letter before mailing the survey.

Place the completed survey in the “**Reply Paid**” envelope and put it in the mail.

You do not have to use a stamp.

If you have misplaced the “**Reply Paid**” envelope, just use a plain envelope.

The address to write on the plain envelope is:



**Victorian Patient Satisfaction Monitor
Reply Paid 5210
South Melbourne VIC 3205**

You don’t need to use a stamp.

YOU MAY REMOVE THIS SECTION IF YOU WISH

This code will allow the Department of Human Services to work out things like whether you are male/female or an elective/emergency patient. It cannot identify you by name or address.

Completing the survey






To complete the survey, please follow the instructions by **marking the boxes**. An example is provided below.

EXAMPLE ONLY

The person completing the example has rated the quality of the car parking facilities as “good”. As this person did not have visitors during their hospital stay, they marked “Does Not Apply” for their rating of the visiting hours.

(Please mark **only one box** on each row)

A How would you rate the following?

	 Poor	 Fair	 Good	 Very good	 Excellent	Not sure	Does not apply
The quality of the car parking facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The visiting hours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

If you need to contact us

If you have any questions about how to complete this survey please contact UltraFeedback on **1800 143 733**.



For general enquiries about the nature of this research program or its administration please speak to the Coordinator, Victorian Patient Satisfaction Monitor, from the Department of Human Services on **1800 356 601**.

These questions are about **HOW YOU WERE ADMITTED** to hospital for treatment.

If a question does not apply to you, please mark the “Does not apply” box

1 Were you satisfied with each of the following aspects of your admission?

(Please mark **only one box** on each row)

Poor Fair Good Very good Excellent Not sure Does not apply

Waiting time – not having to wait too long when you arrived before being attended to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Waiting room comfort - comfortable chairs and pleasant surroundings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Change room - comfort and privacy (if required)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Facilities for storing belongings - availability, security and ease of use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recovery room - pleasant and quiet (if you had a procedure)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(Please mark **only one box** on each row)

Yes No Not sure Does not apply

2 Were you provided with information about your rights and responsibilities as a patient?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Were you provided with information about the way to make a formal complaint during your stay at the hospital?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(Please mark **only one box**)

Yes No Not sure

4 Was your admission to the hospital planned / pre-booked?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
-------------------------------------------------------------------	--------------------------	--------------------------	--------------------------

If **NOT** planned/pre-booked, go to Question **8**

Thinking about **BEFORE YOU WERE ADMITTED** for your **MOST RECENT** hospital stay - that is, from the time you found out you had to go to hospital until you actually arrived at the hospital.

If a question does not apply to you, please mark the “Does not apply” box

(Please mark **only one box** on each row)

Yes No Not sure Does not apply

5 Was your planned admission date changed by someone at the hospital?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Were you provided with information about your stay before you went to hospital?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Hospital: Month:

7 How would you rate the hospital on the way it prepared you for admission? In particular:

(Please mark **only one box** on each row)

Poor Fair Good Very good Excellent Not sure Does not apply

The length of time between when you found out you had to go to hospital and when the hospital was able to admit you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The clarity of information you received about your stay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8 How would you rate the hospital on the way your admission was handled? In particular:

(Please mark **only one box** on each row)

Poor Fair Good Very good Excellent Not sure Does not apply

The helpfulness of admission staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The way the hospital routine and procedures (like meal times, visiting hours, doctors' visits, etc.) were explained to you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The time you had to wait for a bed (after you arrived at the hospital)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Now some questions about the **TIME YOU WERE IN HOSPITAL** - that is, from when you were admitted until the time you were discharged.

If a question does not apply to you, please mark the “Does not apply” box

(Please mark **only one box** on each row)

Did any of the following happen to you during your stay in hospital?


Yes No Not sure Does not apply

9 Did you stay in a mixed (male and female) room?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IF YES , was this a concern for you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Did you want the hospital to provide an interpreter for you during your stay in hospital?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Hospital: Month:

11 During your hospital stay, how would you rate the following:

(Please mark **only one box** on each row)

 Poor
  Fair
  Good
  Very good
  Excellent
 Not sure Does not apply

The courtesy of the nurses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The responsiveness of the nurses to your needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The length of time the nursing staff took to respond to your call	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The courtesy of the doctors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How well information about your treatment was explained to you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The communication between doctors, nurses and other hospital staff about your treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The helpfulness of the hospital staff in general	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The help you received for your pain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The respect for your privacy during your stay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How well your cultural or religious needs were respected by the hospital	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your personal safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Being treated with respect	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The opportunity to ask questions about your condition or treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The way staff involved you in decisions about your care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The willingness of hospital staff to listen to your health care problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How well hospital staff responded to your health care problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How well the purposes of medicines were explained to you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How well the possible side-effects of medicines were explained to you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Hospital: Month:

12 Thinking about the physical environment and services of the hospital, how would you rate:

(Please mark **only one box** on each row)

 Poor
  Fair
  Good
  Very good
  Excellent
 Not sure Does not apply

The cleanliness of the toilets and showers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The cleanliness of the room where you spent the most time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The temperature of hot meals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The quality of food overall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The quantity of food overall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The restfulness of the hospital (amount of peace and quiet)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The privacy in the room where you spent the most time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Now some questions about the **WAY THE HOSPITAL RESPONDED TO YOUR NEEDS.**

If a question does not apply to you, please mark the "Does not apply" box

(Please mark **only one box** on each row)

	Yes	No	Not sure	Does not apply
13 Did the hospital staff encourage your feedback?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Did you have reason to make a formal complaint during your stay?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Did you actually make a formal complaint during your stay?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Hospital: Month:

Now some questions about **WHEN YOU LEFT** hospital.

If a question does not apply to you, please mark the “Does not apply” box

16 Thinking about when you left hospital, how would you rate the following:

(Please mark **only one box** on each row)

 Poor
  Fair
  Good
  Very good
  Excellent
 Not sure
 Does not apply

The time given to planning your return home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The written information you were given about how to manage your condition and recovery at home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The arrangements made by the hospital for any services you needed when you got home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The explanation (by hospital staff) of the medicines you had to take after you left hospital	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(Please mark **only one box** on each row)

Yes No Does not apply

17 Were you provided with written information on the medicines you had to take after you left the hospital?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Did you have someone to care for you when you got home?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Finally, these questions are about **YOUR OVERALL HOSPITAL EXPERIENCE.**

(Please mark **only one box**)

Not At All Not Too Fairly Very Not sure

19 Thinking about all aspects of your hospital stay, how satisfied were you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------------------------------------------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

(Please mark **only one box**)

Not At All A Little Some-what Quite A Bit Great Deal Not sure

20 How much do you think you were actually helped by your stay in the hospital?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------------------------------------------------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

(Please mark **only one box**)

Too Long Too Short Right Amount Not sure

21 Was the length of time you spent in hospital...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
------------------------------------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------

Hospital: Month:

22 What were the best things about your stay in hospital?

23 What were the worst things about your stay in hospital?

24 What could the hospital do to improve the care and services it provides to better meet the needs of patients?

Thank you for completing this survey. Please check that you have marked the boxes that best apply to your hospital experience.

Please remove the cover letter before mailing the survey.
 Place the completed survey in the “Reply Paid” envelope and put it in the mail.
 If you have misplaced the “Reply Paid” envelope, just use a plain envelope.
 The address to write on the plain envelope is:



**Victorian Patient Satisfaction Monitor
 Reply Paid 5210
 South Melbourne VIC 3205**

You don’t need to use a stamp.

**Again, thank you for your assistance in completing this survey and returning it promptly.
 This feedback will help the hospital to improve its services for patients.**

Hospital: Month:



Queensland Government
Queensland Health

BAR CODE & ADDRESS PANEL

LETTER PANEL

PERFORATION



Queensland
Government
Queensland Health

PATIENT SATISFACTION SURVEY

INSTRUCTIONS FOR SURVEY COMPLETION

ABOUT THE SURVEY

This survey is about your *overall* treatment at the specified hospital. It asks for *your opinion* about the services that you received as a hospital patient in 2004.

- Not everybody receives all services. If you did not use a particular service while in hospital just fill in the “**Does Not Apply**” response.
- Sometimes you may consider one staff member to have given excellent service and another to have given poor service. We want your **overall** opinion. There is space towards the end of the survey for you to make specific comments.
- There are no right or wrong answers, it is **your opinion** that is important.
- If you are assisting someone to complete this questionnaire, it is important that the **patient's** answers are presented. If you have other issues to discuss, please write them on a separate sheet of paper and send it directly to the Quality Manager at the hospital.
- Your answers are important. They will help the hospital to improve its services to patients. **REMEMBER, THE SURVEY IS COMPLETELY CONFIDENTIAL.** No information that will identify you will be given to anyone at the hospital.

Please note, we have made every effort to ensure this survey has gone to the correct person. However, if you are **not** the person to whom this survey was addressed, or if you have not been a patient at the hospital mentioned in the covering letter, please return this survey in the envelope supplied, along with a note to this effect. Thank you for your assistance.

WHEN YOU HAVE FINISHED

Place the completed survey in the “**Reply Paid**” envelope and put it in the mail. You do not have to use a stamp. If you have misplaced the “**Reply Paid**” envelope, just use a plain envelope. The address to write on the plain envelope is:

**Roy Morgan Research
Reply Paid 2282
MELBOURNE VIC 8060**

Remember you don't need to use a stamp.

COMPLETING THE SURVEY

To complete the survey please follow the instructions by either **placing an 'X' in the appropriate box or writing in your answers** as required using a blue/black ballpoint pen. An example of how to do this has been provided below.

EXAMPLE ONLY

The person completing the example has rated the quality of the car parking facilities as "good". However, this person did not have visitors during their stay in hospital, so selected "Does Not Apply" for their rating of visiting hours.

Question A. How would you rate the following:
(Please mark one box only for each)

	EXCELLENT	VERY GOOD	GOOD	FAIR	POOR	NOT SURE	DOES NOT APPLY
a) The quality of car parking facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) The visiting hours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

If you make a mistake, completely shade out the box and place an 'X' in the appropriate one.

IF YOU NEED TO CONTACT US

If you have any questions about how to complete this questionnaire please speak to **Roy Morgan Research** on **1800 337 332**.

THANK-YOU FOR YOUR ASSISTANCE IN COMPLETING THIS SURVEY
AND RETURNING IT TO THE REPLY PAID ADDRESS
AT YOUR EARLIEST CONVENIENCE.

Adapted from the Victorian Patient Satisfaction Monitor © 2000 State of Victoria under licence from the State of Victoria



Queensland
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Queensland Health

PATIENT SATISFACTION SURVEY

When answering all questions please refer to the time period in your letter.
First of all some general questions about your 2004 stay in Hospital.

These questions are about **HOW YOU WERE ADMITTED** to hospital for treatment.
Please **PLACE AN "X" IN THE BOX** next to the answer that applies to you.

Q1. What was the nature of your admission to hospital for this visit?

(Please mark one box only)

- SURGICAL** - you had surgery or an operation while in hospital
- MEDICAL** - you were admitted for an investigation, procedure and/or treatment (including ante-natal care), but you did **not** have surgery or an operation
- MATERNITY** - you gave birth while in hospital on this occasion
- Not sure**

Q2. On your 2004 visit to this hospital, did you stay overnight?

- Yes → **IF YES GO TO QUESTION 4**
- No
- Not sure

Q3. Were you satisfied with each of the following aspects of your visit as a Same Day Patient?

	EXCELLENT	VERY GOOD	GOOD	FAIR	POOR	NOT SURE	DOES NOT APPLY
a) Waiting time – not having to wait too long when you arrived before being attended to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Waiting room comfort – comfortable chairs and pleasant surroundings.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Change room – comfort and privacy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Lockers – availability, security and ease of use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Recovery room – pleasant and quiet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q4. Were you transferred from another hospital?

- Yes No Not sure

Q5. Was your admission to the hospital planned/pre-booked?

- Yes No Not sure

→ **IF NOT PLANNED OR PRE-BOOKED, GO TO QUESTION Q11**



Now thinking about **BEFORE YOU WERE ADMITTED** for your stay in hospital in 2004.
That is, from the time you found out you had to go to hospital until you actually arrived at the hospital.

Please mark one box for each item.
If a question does not apply to you, please mark the "Does Not Apply" box.

	YES	NO	NOT SURE	DOES NOT APPLY
Q6. Was your planned admission date changed by someone at the hospital?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q7. Did someone from the hospital talk to you <i>before</i> you went to hospital about what you needed for your stay?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q8. Did you <i>visit</i> the hospital to talk to a nurse, or have some tests <i>before</i> you were admitted for treatment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q9. Before you went to hospital did you receive any written information about <i>the hospital</i> ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q10. How would you rate the hospital on the following features?
(Please mark one box for each item)

	EXCELLENT	VERY GOOD	GOOD	FAIR	POOR	NOT SURE	DOES NOT APPLY
a) The length of time between when you found out you had to go to hospital and when the hospital was able to admit you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) The clarity of written information you received about the hospital before your stay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) The <i>amount</i> of information you received about the hospital before your stay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) The attitude of the hospital staff you spoke to <i>before</i> you were admitted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Now thinking about **YOUR ACTUAL ADMISSION** to the hospital.

Q11. How would you rate the hospital on the way your admission was handled?
(If you were admitted as an emergency patient, some may not apply)
(Please mark one box for each item)

	EXCELLENT	VERY GOOD	GOOD	FAIR	POOR	NOT SURE	DOES NOT APPLY
a) The attitude of admission staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) The way the hospital routine and procedures (like meal times, visiting hours, doctors' visits, etc.) were explained to you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Consideration of your personal needs and wants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) The time you had to wait for a bed (after you arrived at the hospital)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Now some questions about the **TIME YOU WERE IN HOSPITAL**.
That is, from when you were admitted until the time you were discharged.

Did any of the following happen to you during your stay in hospital?

Please mark one box for each item.
If a question does not apply to you, please mark the "Does Not Apply" box.

	YES	NO	NOT SURE	DOES NOT APPLY
Q12. Did you stay in a mixed (male and female) room?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a) IF YES, was this a concern for you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q13. Did you have any tests during your hospital stay? (eg. X-ray, ECG)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q14. Did you have an operation during your hospital stay?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q15. Was your medicine changed, or were you prescribed any medication that you had not taken before this hospital stay?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q16. Did you <i>need</i> the hospital to provide a professional language interpreter for you during your stay in hospital?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a) IF YES, were you offered a professional interpreter?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q17. DURING YOUR HOSPITAL STAY, how would you rate:
(Please mark one box for each item)

	EXCELLENT	VERY GOOD	GOOD	FAIR	POOR	NOT SURE	DOES NOT APPLY
a) The <i>courtesy</i> of nurses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) The way <i>the nurses explained</i> your treatment to you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) The <i>responsiveness</i> of the nurses to your needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) The <i>length of time</i> the nursing staff took to respond to your call	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) The <i>courtesy of doctors</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) The way <i>doctors explained</i> your treatment to you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please mark one box for each item.
If a question does not apply to you, please mark the "Does Not Apply" box.

Q17. Continued . . .

DURING YOUR HOSPITAL STAY, how would you rate:
(Please mark one box for each item)

	EXCELLENT	VERY GOOD	GOOD	FAIR	POOR	NOT SURE	DOES NOT APPLY
<i>g)</i> Your <i>confidence</i> in the doctor(s) in charge of your care at the hospital.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>h)</i> The communication <i>between</i> doctors, nurses and other hospital staff about your treatment.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>i)</i> The <i>helpfulness</i> of the hospital staff in general.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>j)</i> The way hospital staff <i>helped</i> you with your <i>pain</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>k)</i> The <i>availability</i> of staff when you needed them.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>l)</i> <i>Respect</i> for your <i>privacy</i> during your stay.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>m)</i> The way information about your <i>condition</i> was explained to you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>n)</i> The <i>compassion</i> and <i>reassurance</i> of staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>o)</i> Being treated with <i>respect</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>p)</i> The opportunity to <i>ask questions</i> about your medical treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>q)</i> The way staff <i>involved</i> you in decisions about your care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>r)</i> The <i>willingness</i> of hospital staff to listen to your problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>s)</i> Hospital staff <i>responding</i> to your problems.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>t)</i> How well the <i>purpose</i> of medicines was explained to you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>u)</i> How well the possible <i>side-effects</i> of medicines was explained to you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please mark one box for each item.
If a question does not apply to you, please mark the "Does Not Apply" box.

Q18. Thinking about THE PHYSICAL ENVIRONMENT of the hospital, how would you rate:

	EXCELLENT	VERY GOOD	GOOD	FAIR	POOR	NOT SURE	DOES NOT APPLY
<i>a)</i> Your <i>comfort</i> during your stay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>b)</i> <i>Cleanliness</i> of toilets and showers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>c)</i> The <i>cleanliness</i> of the room where you spent most time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>d)</i> The temperature of <i>hot meals</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>e)</i> The <i>quality</i> of food overall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>f)</i> The <i>quantity</i> of food overall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>g)</i> <i>Restfulness</i> of the hospital (amount of peace and quiet)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>h)</i> <i>Privacy</i> in the room where you spent most time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Now some questions about the WAY THE HOSPITAL RESPONDED TO YOUR NEEDS.

Please mark one box for each item.
If a question does not apply to you, please mark the "Does Not Apply" box.

	YES	NO	NOT SURE	DOES NOT APPLY
Q19. Did the hospital staff encourage your feedback?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q20. Were you aware that you could make a formal complaint in the hospital?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q21. Did you have a reason to make a complaint during your stay?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q22. Did you make a complaint?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a) IF YES, were you satisfied with the way your complaint was handled?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

WHEN YOU WERE DISCHARGED from hospital . . .

Please mark one box for each item.
If a question does not apply to you, please mark the "Does Not Apply" box.

	YES	NO	NOT SURE	DOES NOT APPLY
Q23. Were you told what activities you should or should not do?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q24. Were you given written information about how to manage your condition/recovery at home?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q25. Were you told what to do if you had a problem or needed help?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q26. Was a follow-up appointment made for you to see a doctor or go to an outpatient clinic?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q27. How would you rate the following aspects of your DISCHARGE?
(Please mark one box for each item)

	EXCELLENT	VERY GOOD	GOOD	FAIR	POOR	NOT SURE	DOES NOT APPLY
a) The amount of time given to plan when you were going home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) The convenience of the time of day you were discharged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) The information you were given about how to look after your condition when you got home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) The services and care arranged for you by the hospital when you got home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) The explanation (by hospital staff) of the medicines you had to take after you left hospital.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

These questions are about YOUR OVERALL HOSPITAL EXPERIENCE.

Please mark one box for each item.

Q28. Thinking about all aspects of your hospital stay, how satisfied were you?
(Please mark one box)

- Very satisfied
- Fairly satisfied
- Not too satisfied
- Not satisfied at all
- Not sure

Q29. How much do you think you were actually helped by your stay in the hospital?

- Helped a great deal
- Helped quite a bit
- Helped somewhat
- Helped a little
- Not helped at all
- Not sure

Q30. Was the length of time you spent in hospital . . . ?

- About the right amount of time
- Time was too short
- Time was too long
- Not sure

Q31. Did anything happen during your stay in the hospital, good or bad, that you thought was surprising or unexpected?
(Please write your response on the lines below)

.....

.....

.....

.....

.....

.....

.....

.....

Q32. Is there anything the hospital could do to improve the care and services provided to better meet the needs of patients?
(Please write your response on the lines below)

.....

.....

.....

.....

.....

.....

.....

.....

Q33. If you gave your consent for a medical or surgical procedure, were you given sufficient information by the hospital staff to make an informed decision?

- Yes - received sufficient information
- No - did not receive sufficient information
- Not applicable - did not have a medical or surgical procedure

Q34. Did hospital staff talk with you about providing information about your care to your GP/community health service provider?

- Yes
- No
- Unsure/Can't remember

Q35. How would you rate the hospital on...

EXCELLENT VERY GOOD GOOD FAIR POOR NOT SURE DOES NOT APPLY

- a) How you were involved in your discharge plan.....
- b) How your carer/family was involved in your discharge plan.....
- c) Provision of follow up services after discharge, if any, (eg. Physiotherapy, outpatient clinics, etc)

Now there are some questions about you (the patient).
These questions help us make sure we have an accurate sample of patients.
This information will remain confidential but will be valuable in assessing results for the hospital.

Q36. Including your stay to which you have been referring, how many times have you been admitted to any hospital over the last 12 months?

Times

Q37. Are you male or female?

- Male
- Female

Q38. To which age group do you belong?

- Under 18 years
- 18 – 24 years
- 25 – 34 years
- 35 – 49 years
- 50 – 64 years
- 65 – 79 years
- 80 years or over

Q39. In which country were you born?

- Australia
- U.K.
- New Zealand
- Greece
- Italy
- Other - please specify:

Q40. Are you of Aboriginal or Torres Strait Islander origin?

- No
- Yes - Aboriginal
- Yes - Torres Strait Islander
- Yes - both Aboriginal and Torres Strait Islander

Q41. Are you of Australian South Sea Islander ancestry?

- Yes
- No

Q42. Do you speak a language other than English at home?

- Yes - please specify:
- No

Q43. For your stay in hospital earlier this year, were you treated as a:

- Public or Medicare patient
- Private patient
- WorkCover patient
- Motor Vehicle Insurance (MVI) patient
- Department of Veterans Affairs (DVA) patient
- Other - please specify:

Q44. Did you have someone to care for you when you got home?

- Yes
- No
- Didn't need help

Q45. Did the patient complete this survey?

- Yes - Patient completed survey by themselves
- Yes - But patient completed the survey with help from someone else
- No - Someone completed this survey for patient

Thank-you for completing this survey. Please check that you have answered all questions.

Place the completed survey in the "Reply Paid" envelope and put it in the mail.

You do not have to use a stamp.

If you have misplaced the "Reply Paid" envelope, just use a plain envelope.

The address to write on the plain envelope is:

**Roy Morgan Research Pty Ltd
Reply Paid 2282
Melbourne VIC 8060**

Again, thank you for your assistance.

This feedback will help the hospital to improve its services for patients.

OFFICE USE ONLY

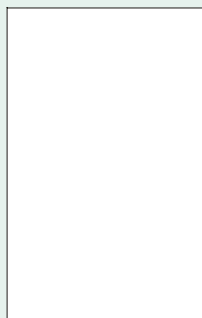
1	2	3

Patient Evaluation of Hospital Services

Overnight - Adult

Public Patients' Charter of Rights

- 1 To choose to receive quality public hospital services as a public patient or a private patient. Public patients will receive these services free of charge.
- 2 To receive services on the basis of clinical need as promptly as circumstances permit regardless of your financial or health insurance status.
- 3 To be treated with respect, dignity and consideration for privacy and special need.
- 4 To have access to a basic range of public hospital services regardless of where you live in Australia.
- 5 To be given a clear explanation of any proposed treatment including possible risks and alternatives before agreeing or refusing to have the treatment.
- 6 To seek a second medical opinion.
- 7 To be given information about your continuing care before you leave the hospital.
- 8 To see your medical records, subject to some legal provisions, and to have personal information kept confidential.
- 9 To agree or refuse to participate in health professional training or medical research.
- 10 To comment on or complain about the health care you receive and to be given information about how to lodge a complaint.



Recently you were an overnight patient in hospital and we would like you to answer some questions about your experience. Please try to answer all the questions.

To begin, we need to know what you think are the top priorities of hospital patients. Seven areas have been identified by others as being very important. These are listed below.

We want you to order the items in the list from the most important (1) to the least important (7) area of service from your point of view. We have left some space for you to add to this list if you wish.

First read all seven items. Select the item you think is the most important and write the number 1 in the box beside the item. Now select the item you think is the next most important and write the number 2 in the box beside it. Continue until you have ranked all seven items. Remember that each number can only be used once. You may find it difficult sometimes to make a choice but it is important for hospitals to know where to make improvements first.

	<i>Ranking of Importance</i>
Time and attention paid to your care	
Meeting your personal as well as clinical needs	
Getting into hospital (e.g. waiting, admission, arrival on ward)	
Information and communication between you and the people caring for you	
Your right to be involved in your care and treatment	
The residential aspects of the hospital (e.g. food, room/ward)	
The coordination and consistency of your care	

If there are other areas that you consider important, please write them below.

Section A - The Outcome of Your Hospital Stay

You may now have a good idea how your condition is as a result of your hospital stay. How worthwhile would you say your hospital stay was in respect of the following outcomes?

Please mark your answers by ticking the box that best fits your feeling. If any question doesn't seem to apply just tick the 'Doesn't Apply' box.

	Not Worthwhile	Can't Judge	Worthwhile	Doesn't Apply
Achieving the result you expected	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relief from pain you had before your hospital stay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relief from other symptoms you had before your hospital stay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relief/improvement from restrictions your condition was imposing on your daily living	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Being more able to manage your condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How did your actual recovery time compare with what was estimated by your doctor (that is, being able to return to your work/normal routines)?

- This question doesn't apply to me
- I am still recovering and the doctor thought I would be able to return to work/normal routines by now
- I felt that I could have returned to my work/normal routines earlier than was estimated
- The doctor estimated about the right recovery time
- I am still recovering as was expected

Did you have any unexpected complication arise from your treatment that needed a doctor to arrange extra treatment or medication?

- Yes No

Which one of the following best describes what your hospital stay did for you?

- My hospital stay made my health worse
- My hospital stay made it more difficult to cope with my problem
- My hospital stay made no difference
- My hospital stay helped me to cope better with my problem
- My hospital stay helped me to come closer to being healthy
- My hospital stay helped maintain my health
- My hospital stay helped restore my health

What best describes your general feeling about managing your recovery when you left the hospital?

- I felt completely confident that I could manage any problems that might arise
- I felt reasonably confident that I could manage any problems that might arise
- I felt somewhat unsure that I could manage any problems that might arise
- I felt very unsure that I could manage any problems that might arise

The rest of the questions ask you about your experience with various parts of the hospital system. Some of the questions will ask if you got the services that you needed, others will ask how you felt about the services you received.

Please continue to Section B

Section B - Hospital Process

How were you admitted to hospital?

- 1 Emergency or unplanned admission
- 2 Transferred from another hospital
- 3 Referred by my doctor and my admission was planned

How long did you have to wait to be admitted to hospital after your doctor told you it was necessary?

- 1 Didn't have to wait 2 1 to 7 days 3 8 to 14 days
- 4 15 to 30 days 5 31 to 60 days 6 61 to 90 days
- 7 Over 90 days. **If over 90 days** how long did you wait? months
- 8 Can't remember how long I waited

Once you got to hospital, how long did you wait before you were taken/sent to your room/ward?

- 1 Didn't have to wait 2 Under 30 minutes 3 30 to 60 minutes
- 4 Between 1 and 2 hours
- 5 Over two hours. **If over 2 hours** how long did you wait? hours
- 8 Can't remember how long I waited

If you used the call system while you were in hospital, how long did it usually take before a nurse came to ask why you had called?

- 1 Didn't use the call system 2 Within 5 minutes 3 5 to 10 minutes
- 4 11 to 15 minutes
- 5 Over 15 minutes. **If over 15 minutes** how long did you wait? minutes
- 8 Can't remember how long I waited

If you needed to see a doctor while you were in hospital, how long did it usually take before one came to see you?

- 1 I didn't need to see a doctor 2 Within 1 hour 3 1 to 1½ hours
- 4 Between 1½ and 2 hours
- 5 Over 2 hours. **If over 2 hours** how long did you wait? hours
- 8 Can't remember how long I waited

Here are some more questions. Please mark your answers by ticking the box that best fits your feeling. If any question doesn't seem to apply just tick the 'Doesn't Apply' box.

	No	Yes	Can't Remember	Doesn't Apply
Was your admission date arranged so that you could easily keep it?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 8	<input type="checkbox"/> 9
When you got to hospital did you know where you were supposed to go?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 8	<input type="checkbox"/> 9
Were you asked if you were currently taking any medication(s)?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 8	<input type="checkbox"/> 9
Were you asked about your dietary needs when you arrived on the ward?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 8	<input type="checkbox"/> 9
Were you asked if you had any cultural or religious beliefs that might affect the way you were treated in hospital?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 8	<input type="checkbox"/> 9
Were you asked who (other than hospital staff) could be given information about your condition?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 8	<input type="checkbox"/> 9
Did you have access to an interpreter if you needed one?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 8	<input type="checkbox"/> 9
Were you told everything you needed to know when you arrived at your room/ward (e.g. how to use the call system, or rent a TV)?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 8	<input type="checkbox"/> 9

Continued over

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	No	Yes	Can't Remember	Doesn't Apply
Did the nurse in charge of your care introduce themselves to you at each shift change?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	8 <input type="checkbox"/>	9 <input type="checkbox"/>
Did anyone check that you understood the information given to you?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	8 <input type="checkbox"/>	9 <input type="checkbox"/>
Did you feel that you could have refused the proposed test/treatment/procedure if you wanted to?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	8 <input type="checkbox"/>	9 <input type="checkbox"/>
Did you feel that you could have asked for a second opinion about the proposed test/treatment/procedure if you wanted to?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	8 <input type="checkbox"/>	9 <input type="checkbox"/>
Did you feel that you could have refused to have students (medical, nursing) present during your treatment?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	8 <input type="checkbox"/>	9 <input type="checkbox"/>
If you needed any special equipment/aids (e.g. crutches, shower seat) did the hospital staff organise this for you at discharge?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	8 <input type="checkbox"/>	9 <input type="checkbox"/>
Did you know that there is a Public Patients Charter listing your rights as a patient (see first page)?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	8 <input type="checkbox"/>	9 <input type="checkbox"/>
Are you aware that each hospital has a complaint service?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	8 <input type="checkbox"/>	9 <input type="checkbox"/>
Are you aware that the Office of Health Review can assist with complaints not resolved by the hospital?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	8 <input type="checkbox"/>	9 <input type="checkbox"/>

Please continue to Section C

Section C - How Your Care and Treatment Were Managed

Please rate the following by ticking the box that most closely reflects your feelings:

	Poor	Adequate	Good	Excellent	No Opinion	Doesn't Apply
The time you waited to get into hospital	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	9 <input type="checkbox"/>
The time you waited to be taken/sent to your ward/room	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	9 <input type="checkbox"/>
The time you waited for a doctor if you needed to see one	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	9 <input type="checkbox"/>
The way health care professionals answered your questions	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	9 <input type="checkbox"/>
The way health care professionals responded to your concerns or comments about your progress	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	9 <input type="checkbox"/>
The time you waited for a nurse after using the call system	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	9 <input type="checkbox"/>
The way health care professionals explained your condition and treatment	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	9 <input type="checkbox"/>
The communication between doctors, nursing staff and other health care professionals about your treatment	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	9 <input type="checkbox"/>

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	Poor	Adequate	Good	Excellent	No Opinion	Doesn't Apply
The arrangements at discharge with doctors and others continuing your care (e.g. Silver Chain, GP, Physio)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
The way things were put right if problems occurred while you were in hospital	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
The time you waited for a doctor to discharge you from hospital	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
The length of time you stayed in hospital	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
The way any complaints were dealt with by the hospital	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9

Please rate the following by ticking the box that most closely reflects the level of service received.

	Got None	Wanted More	As Much As Needed	Too Much	No Opinion	Doesn't Apply
Information sent before admission on how to prepare for your hospital stay	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
Information given to you upon arrival on the ward about your planned treatment	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9

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	Got None	Wanted More	As Much As Needed	Too Much	No Opinion	Doesn't Apply
Time to consider any consent form you needed to sign	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
Pain relief	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
Attention by nursing staff to your care (e.g. to drips, dressings)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
Information about your progress while in hospital	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
Involvement in decisions about your care and treatment	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
Support and reassurance	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
Information about the purpose and results of any tests	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
Access to visitors	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9

Continued over

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	Got None	Wanted More	As Much As Needed	Too Much	No Opinion	Doesn't Apply
The time doctors spent on your care and treatment	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
Information about medications	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
Any assistance you needed (e.g. going to the toilet)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
Information given to your family/carer(s) about your progress	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
Encouragement to ask questions about your condition and treatment	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
Access to any extra support you needed (e.g. support group)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9
Information on how to manage your condition/ recovery at home	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 9

Please continue to Section D

Section D - Meeting Personal Needs as Well as Clinical Needs

Being in hospital can be an unsettling experience. Consideration of your personal needs by hospital staff whenever possible is an important part of hospital care. Please tick the box that you think most closely reflects how often the following needs were met.

	Never	Sometimes	Usually	Always	Doesn't Apply
Being shown respect while being examined or interviewed	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 9
Having your right to an opinion respected	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 9
Being treated with politeness and consideration	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 9
Feeling able to ask for information if you felt anxious about something	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 9
Feeling you could get help if you needed it	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 9
Having confidence in the nursing staff	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 9
Having screens around the bed when you were examined to ensure your privacy	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 9
Hospital staff using low voices when interviewing or examining you so others couldn't overhear	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 9
Having confidence in the doctor(s)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 9
Feeling safe and secure while in hospital	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 9

Please continue to Section E

Patient Evaluation of Hospital Services

Overnight

June 2004

Introduction

Good My name is from the Department of Human Services. May I speak withplease?

Either

1. Get person and repeat introduction
2. Make appointment to call back later

Recently you were an overnight patient in [] hospital and we would like you to answer some questions about your experience so that we can identify things that need to be improved in the hospital care system.

You would have received a letter recently about the survey on behalf of the Department?

Did you receive the letter?

(Single Response)

1. Yes []
2. No []
3. Don't know []

I can assure you that information you give will remain confidential. The answers from all people interviewed will be gathered together and presented in a report. No individual answers will be passed on.

A PATIENT EXPERIENCES

To begin, we need to know what you think are the top priorities of hospital patients.

[If letter received] Do you have the pink list we sent you, showing the top priorities for hospital patients?

A1 I am going to read out seven areas that have been identified by others as being very important. I am then going to ask you which item you think is the most important.

(Interviewer note: Re response 7, if necessary – clarify “clinical” = medical)

(Read Options Single response must = 1)

1. **The coordination and consistency of your care** []
2. **The residential aspects of the hospital (e.g. food, room/ ward, toilet)** []
3. **Your right to be involved in your care and treatment** []
4. **Access to the hospital (e.g. waiting for an admission date and being able to get into the hospital).** []
5. **Availability of the people caring for you** []
6. **Information and communication between you and the people caring for you** []
7. **Meeting your personal as well as clinical needs** []

A2 I am going to read out the six remaining areas. Which item do you think is the next most important. You may find it difficult sometimes to make a choice, but it is important for hospitals to know where to make improvements first)

(Continue until each item has a unique number from 2 to 7. Repeat options until priority established)

A3 Was there any other area of your stay that you considered important?

(Single Response)

1. Specify []
2. No []

B THE OUTCOME OF YOUR HOSPITAL STAY

B1 How were you admitted to hospital?

(Interviewer note: if answer is 'through outpatients', response equals unplanned admission.

Read Options. Single Response)

1. **Emergency or unplanned admission** []
2. **Transferred from another hospital** []
3. **Referred by my doctor and my admission was planned** []
4. **Other** []

You may now have a good idea how your condition is as a result of your hospital stay.

B2 In terms of achieving the results you expected? Was your hospital stay...

(Read Options. Single Response)

1. **Worthwhile** []
2. **Can't Judge** []
3. **Not worthwhile** []
4. **Doesn't Apply** []

B3 Did you have any pain before you were admitted to hospital?

(Interviewer note: if answer is “unconscious on admission”, response = 3.)

(Single Response)

1. Yes []
2. No [] Go to B5
3. Can't Judge [] Go to B5

B4 As a result of your hospital stay did you get relief from the pain?

(Single Response)

1. Yes []
2. Some []
3. No []
4. Can't Judge []

B5 Did you have any other symptoms before you were admitted to hospital?

(Single Response)

1. Yes []
2. No [] Go to seq. guide before B7
3. Can't Judge [] Go to seq. guide before B7

B6 As a result of your hospital stay did you get relief from these symptoms?

(Single Response)

1. Yes []
2. No []
3. Can't Judge []

(If B1 = 1 Go to B11)

B7 Did your condition restrict your daily life (that is your normal activities) before you were admitted to hospital?

(Single Response)

1. Yes []
2. No [] Go to B9
3. Can't Judge [] Go to B9

B8 As a result of your hospital stay did this improve?

(Single Response)

1. Yes []
2. No []
3. Can't Judge []

B9 Were you able to manage your condition before you were admitted to hospital?

(Single Response)

1. Yes [] Go to B11
2. No []
3. Can't Judge [] Go to B11

B10 As a result of your hospital stay were you more able to manage your condition?

(Single Response)

1. Yes []
2. No []
3. Can't Judge []

B11 Which of the following situations do you think best applies to you at this time?

(Read Options. Single Response)

1. I feel I am still recovering although the doctor thought I would be able to return to work/normal activities by now []
2. I felt that I could have returned to my work or normal routines earlier than was estimated by the doctor []
3. The doctor estimated about the right recovery time []
4. I am still recovering as was expected []
5. I feel I am coping with my ongoing condition []
6. None of these []
7. Don't know/can't say []

B12 Did you have any unexpected complication(s)?

(Single Response)

1. Yes []
2. No [] Go to B14
3. Don't know/can't say [] Go to B14

B13 Did the complication require a doctor to arrange extra treatment or medication?

(Single Response)

1. Yes []
2. No []
3. Don't know/can't say []

B14 Which of the following statements best describes what your hospital stay did for you?

(Read Options. Single Response)

1. My hospital stay helped me to maintain or restore my health []
2. My hospital stay helped me to cope better with my problem []
3. My hospital stay made no difference []
4. My hospital stay made it more difficult to cope with my problem []
5. My hospital stay made my health worse []
6. Don't know/can't say []

B15 What best describes your general feeling in regard to managing your condition when you left the hospital?

(Interviewer note: 'managing' includes with the help available to them at home e.g. partner, home help)

(Read Options. Single Response)

1. I felt confident that I could manage []
2. I felt somewhat unsure that I could manage []
3. I felt that I would be unable to manage []
4. Don't know/can't say []

B16 Overall, how would you rate the health care provided by the hospital on this visit?

(Read Options. Single Response)

1. Poor []
2. Acceptable []
3. Good []
4. Excellent []
5. Don't know/can't say []

C HOSPITAL PROCESS

The next questions ask you about your experience with various parts of the hospital system. Some questions will ask whether or not you got the services that you needed, others will ask how you felt about the services you received.

(If B1 = 1 Go to C3)

C1 How long did you have to wait to be admitted to hospital after your doctor told you it was necessary?

(Single Response)

1. Didn't have to wait []
2. 1 - 7 days (<1wk) []
3. 8 - 14 days (1-2wks) []
4. 15 - 30 days (3 - 4wks) []
5. 31 - 60 days (5-8 wks) []
6. 61 - 90 days (9-12wks) []
7. Over 90 days (>3mnths) [Specify] _____
8. Can't remember how long []

C2 Once you got to hospital, how long did you wait before you were taken or sent to your room or ward?

(Interviewer note: Question relates to time to ward NOT until any proposed operation or treatment.)

(Single Response)

1. Didn't have to wait []
2. Within 30 minutes []
3. 30 to 60 minutes []
4. Between 1 and 2 hours []
5. If over two hours, how long did you wait (in hours) []
6. Can't remember []

C3 If you used the call system while you were in hospital, how long did it usually take before a nurse came to ask you why you had called?

(Single Response)

1. I didn't use the call system []
2. Within 5 minutes []
3. 5 to 10 minutes []
4. 11 to 15 minutes []
5. If over 15 minutes, specify _____
6. Can't remember []

C4 If you asked to see a doctor while you were in the hospital, how long did it usually take before one came to see you?

(Single Response)

1. Didn't ask to see a doctor []
2. Within 1 hour []
3. 1 to 1 ½ hours []
4. 1 ½ to 2 hours []
5. If over 2 hours specify _____
6. Can't remember []

(If B1 = 1 Go to C8)

C5 If you had to travel some distance to the hospital, was your admission date arranged so that you could easily keep it?

(Single Response)

1. Yes []
2. No []
3. Can't remember []
4. Doesn't apply []

C6 Were you sent any information on how to prepare for your hospital stay?

(Single Response)

1. Yes []
2. No []
3. Can't remember []
4. Doesn't apply []

C7 When you got to the hospital, did you know what you were supposed to do and where you were supposed to go?

(Single Response)

1. Yes []
2. No []
3. Can't remember []
4. Doesn't apply []

C8 Did anyone ask you whether or not you were currently taking any medication(s)?

(Single Response)

1. Yes []
2. No []
3. Can't remember []
4. Doesn't apply to me []

C9 Were you asked about your dietary needs when you arrived on the ward?

(Single Response)

- 1. Yes []
- 2. Asked pre-admission []
- 3. No []
- 4. Can't remember []
- 5. Doesn't apply to me []

C10 Did anyone ask whether you had any cultural or religious beliefs that might affect the way you were treated in hospital?

(Single Response)

- 1. Yes []
- 2. No []
- 3. Asked pre-admission []
- 4. Can't remember []
- 5. Doesn't apply []

C11 Did anyone ask you if someone else such as a family member could be given information about your condition?

(Single Response)

- 1. Yes []
- 2. Asked pre-admission []
- 3. No []
- 4. Can't remember []
- 5. Doesn't apply to me []

C12 Did you have access to an interpreter if you needed one?

(Single Response)

- 1. Yes []
- 2. No []
- 3. Can't remember []
- 4. Doesn't apply []

C13 Were you told everything you needed to know when you arrived at your room or ward? For example, how to use the call system or how to rent a TV?

(Single Response)

- 1. Yes []
- 2. No []
- 3. Can't remember []
- 4. Doesn't apply to me []

C14 Did the nurse in charge of your care introduce him or herself to you at each shift change?

(Interviewer note: response must apply to every shift)

(Single Response)

- 1. Yes []
- 2. No []
- 3. Can't remember []
- 4. Doesn't apply to me []

C15 Did any of the nursing staff let you know when a doctor would be coming to see you so that you could prepare any questions you wanted to ask?

(Single Response)

- 1. Yes []
- 2. No []
- 3. Can't remember []
- 4. Doesn't apply to me []
- 5. Doctor came regularly []

C16 Did anyone check that you understood information given to you?

(Single Response)

- 1. Yes []
- 2. No []
- 3. Can't remember []
- 4. Doesn't apply to me []

C17 Did you feel that you could have refused any proposed test, treatment or procedure if you wanted to?

(Interviewer note: Answers e.g. "doctor knows best", response = "didn't know/feel could refuse")

(Single Response)

- 1. Yes []
- 2. No []
- 3. Didn't know/feel I could refuse []
- 4. Doesn't apply to me []

C18 Did you feel that you could have asked for a second opinion about your proposed test, treatment or procedure if you wanted to?

(Single Response)

- 1. Yes []
- 2. No []
- 3. Didn't know/feel I could ask for a second opinion []
- 4. Doesn't apply to me []

C19 Did you feel that you could have refused to have students (medical or nursing) present during your treatment?

(Single Response)

- 1. Yes []
- 2. No []
- 3. Didn't know/feel I could refuse []
- 4. Doesn't apply to me []

C20 If you required some help to manage your recovery when you got home (eg nursing care or help with personal care) did the hospital staff help you get it?

(Single Response)

- 1. Yes []
- 2. No []
- 3. Can't remember []
- 4. Doesn't apply to me []

C21 If you needed any special equipment or aids such as crutches or a shower seat, did the hospital staff organise this for you at discharge?

(Single Response)

- 1. Yes []
- 2. No []
- 3. Can't remember []
- 4. Doesn't apply to me []

C22 [Interviewer note] If letter not received, omit the commencing phrase "prior to receiving our letter" for this question)

[If letter received] Prior to receiving our letter, did you know there was a Public Patients Charter listing your rights as a patient?

(Single Response)

- 1. Yes []
- 2. No []
- 3. Can't remember []
- 4. Doesn't apply []

(If country hospital patient, coded 6,7 etc, Go to C24)

C23 Are you aware that each hospital/each region has a patient's adviser to assist with complaints?

(Single Response)

- 1. Yes []
- 2. No []
- 3. Can't remember []
- 4. Doesn't apply []

C24 Are you aware that there is a Health Ombudsman that can assist with complaints not resolved by the hospital?

(Single Response)

- 1. Yes []
- 2. No []
- 3. Can't remember []
- 4. Doesn't apply []

D REASON FOR HOSPITAL STAY

In view of what you knew about the reason for your being in hospital, please rate how acceptable the following were.

(If B1 = 1 Go to D2.)

D1 The notification you received if your admission date was cancelled or changed was:

(Read Options. Single Response)

- 1. Unacceptable []
- 2. Could be improved []
- 3. Acceptable []
- 4. No opinion []
- 5. Doesn't apply []

D2 The time you waited to get into hospital was:

(Read Options. Single Response)

- 1. **Unacceptable** []
- 2. **Could be improved** []
- 3. **Acceptable** []
- 4. No opinion []
- 5. Doesn't apply []

D3 The time you waited to be seen by the admissions clerk was:

(Read Options. Single Response)

- 1. **Unacceptable** []
- 2. **Could be improved** []
- 3. **Acceptable** []
- 4. No opinion []
- 5. Doesn't apply []

D4 The time you waited before you were able to go to your ward or room after you had seen the admissions clerk was:

(Read Options. Single Response)

- 1. **Unacceptable** []
- 2. **Could be improved** []
- 3. **Acceptable** []
- 4. No opinion []
- 5. Doesn't apply []

(If C3 = 1 Go to D6)

D5 The time you waited for a nurse after using the call system was:

(Read Options. Single Response)

- 1. **Unacceptable** []
- 2. **Could be improved** []
- 3. **Acceptable** []
- 4. No opinion []
- 5. Doesn't apply []

(If C4 = 1 Go to D7)

D6 The time you waited for a doctor if you asked to see one was:

(Read Options. Single Response)

- 1. **Unacceptable** []
- 2. **Could be improved** []
- 3. **Acceptable** []
- 4. No opinion []
- 5. Doesn't apply []

D7 The way health care professionals (eg. Nurses, Physios) provided any assistance you required (for example going to the toilet) was:

(Read Options. Single Response)

- 1. **Unacceptable** []
- 2. **Could be improved** []
- 3. **Acceptable** []
- 4. No opinion []
- 5. Doesn't apply []

D8 The way health care professionals (eg doctors, nurses, physios, social workers) explained your condition and treatment was:

(Interviewer note: if answer is "some were okay but others were not", response = "could be improved", similarly for questions below)

(Read Options. Single Response)

- 1. **Unacceptable** []
- 2. **Could be improved** []
- 3. **Acceptable** []
- 4. No opinion []
- 5. Doesn't apply []

D9 The way health care professionals answered your questions was:

(Read Options. Single Response)

- 1. **Unacceptable** []
- 2. **Could be improved** []
- 3. **Acceptable** []
- 4. No opinion []
- 5. Doesn't apply []

D10 The effort made by doctors to discuss the benefits and risks of your treatment was:

(Read Options. Single Response)

- 1. **Unacceptable** []
- 2. **Could be improved** []
- 3. **Acceptable** []
- 4. No opinion []
- 5. Doesn't apply []

D11 The way health care professionals responded to any concerns or comments about your treatment was:

(Read Options. Single Response)

- 1. **Unacceptable** []
- 2. **Could be improved** []
- 3. **Acceptable** []
- 4. No opinion []
- 5. Doesn't apply []

D12 The way health care professionals explained the outcome of your treatment or procedure or surgery was:

(Read Options. Single Response)

- 1. **Unacceptable** []
- 2. **Could be improved** []
- 3. **Acceptable** []
- 4. No opinion []
- 5. Doesn't apply []

D13 The coordination of your care over time if you had more than one visit was:

(Interviewer note: relates to all visits including outpatient visits associated with this admission.)

(Read Options. Single Response)

- 1. **Unacceptable** []
- 2. **Could be improved** []
- 3. **Acceptable** []
- 4. No opinion []
- 5. Doesn't apply []

D14 The communication between doctors, nursing staff and other health care professionals about your treatment was:

(Read Options. Single Response)

- 1. **Unacceptable** []
- 2. **Could be improved** []
- 3. **Acceptable** []
- 4. No opinion []
- 5. Doesn't apply []

D15 The arrangements at discharge with the doctor and others continuing your care (for example GP, Physios) was:

(Read Options. Single Response)

- 1. **Unacceptable** []
- 2. **Could be improved** []
- 3. **Acceptable** []
- 4. No opinion []
- 5. Doesn't apply []

D16 The way things were rectified if there was any problem while in the hospital was:

(Interviewer note: if no problems, response is does not apply)

(Read Options. Single Response)

- 1. **Unacceptable** []
- 2. **Could be improved** []
- 3. **Acceptable** []
- 4. No opinion []
- 5. Doesn't apply []

D17 The time you waited at discharge for any prescription or other medication was:

(Read Options. Single Response)

- 1. **Unacceptable** []
- 2. **Could be improved** []
- 3. **Acceptable** []
- 4. No opinion []
- 5. Doesn't apply []

D18 The way any complaints were dealt with by the hospital was:

(Read Options. Single Response)

- 1. **Unacceptable** []
- 2. **Could be improved** []
- 3. **Acceptable** []
- 4. No opinion []
- 5. Doesn't apply []

E CARE AND TREATMENT MANAGEMENT

The following questions ask you to rate the level of service you received.

(If B1 = 1 or 2 Go to E2)

E1 Regarding the information sent before admission on how to prepare for your hospital stay, did you get

(Read Options. Single Response)

- 1. **None** []
- 2. **Want more** []
- 3. **Enough** []
- 4. **Too much** []
- 5. No opinion []
- 6. Doesn't apply []

E2 Regarding the information given to you upon arrival on the ward about your planned treatment, did you get....

(Read Options. Single Response)

- 1. **None** []
- 2. **Want more** []
- 3. **Enough** []
- 4. **Too much** []
- 5. No opinion []
- 6. Doesn't apply []

E3 Regarding pain relief, overall did you get....

(Read Options. Single Response)

- 1. **None** []
- 2. **Want more** []
- 3. **Enough** []
- 4. **Too much** []
- 5. No opinion []
- 6. Doesn't apply []

E4 Regarding attention by nursing staff to your care for example, drips and wound dressing, did you get

(Read Options. Single Response)

- 1. **None** []
- 2. **Want more** []
- 3. **Enough** []
- 4. **Too much** []
- 5. No opinion []
- 6. Doesn't apply []

E5 Regarding the time doctors spent on your care and treatment. Did you get....

(Read Options. Single Response)

- 7. **None** []
- 8. **Want more** []
- 9. **Enough** []
- 10. **Too much** []
- 11. No opinion []
- 12. Doesn't apply []

E6 Regarding the information about the purpose of the tests, did you get

(Read Options. Single Response)

- 1. **None** []
- 2. **Want more** []
- 3. **Enough** []
- 4. **Too much** []
- 5. No opinion []
- 6. Doesn't apply []

E7 Regarding the information about the results of tests. Did you get.....

(Read Options. Single Response)

- 1. **None** []
- 2. **Want more** []
- 3. **Enough** []
- 4. **Too much** []
- 5. No opinion []
- 6. Doesn't apply []

E8 Regarding information about medications. Did you get.....

(Read Options. Single Response)

- 1. **None** []
- 2. **Want more** []
- 3. **Enough** []
- 4. **Too much** []
- 5. No opinion []
- 6. Doesn't apply []

E9 Regarding time to consider any consent form you needed to sign. Was there:

(Read Options. Single Response)

- 1. **No time** []
- 2. **Too short** []
- 3. **Enough** []
- 4. **Too long** []
- 5. No opinion []
- 6. Doesn't apply []

E10 Regarding the encouragement you were given to ask questions about your condition and treatment, did you get.....

(Read Options. Single Response)

- 1. **None** []
- 2. **Want more** []
- 3. **Enough** []
- 4. **Too much** []
- 5. No opinion []
- 6. Doesn't apply []

E11 Regarding the information about your progress while in hospital, did you get.....

(Read Options. Single Response)

- 1. **None** []
- 2. **Want more** []
- 3. **Enough** []
- 4. **Too much** []
- 5. No opinion []
- 6. Doesn't apply []

E12 Regarding information given to your family or carers about your progress, did they get.....

(Read Options. Single Response)

- 1. **None** []
- 2. **Want more** []
- 3. **Enough** []
- 4. **Too much** []
- 5. No opinion []
- 6. Doesn't apply []

E13 Regarding involvement in decisions about your care and treatment, what involvement did you have?

(Read Options. Single Response)

- 1. **None** []
- 2. **Wanted more** []
- 3. **Enough** []
- 4. **Too much** []
- 5. No opinion []
- 6. Doesn't apply []

E14 Regarding access to any extra support you needed to aid your recovery for example a support group, did you get....

(Interviewer note: support is any extra help of information about groups at all. Read Options. Single Response)

- 1. **None** []
- 2. **Want more** []
- 3. **Enough** []
- 4. **Too much** []
- 5. No opinion []
- 6. Doesn't apply []

E15 Regarding the length of time you stayed in hospital, was it:....

(Read Options. Single Response)

- 1. **Too short** []
- 2. **Enough** []
- 3. **Too long** []
- 4. No opinion []
- 5. Doesn't apply []

E16 Regarding the time given to prepare for your discharge, did you get.....

(Read Options. Single Response)

- 1. **No Time** []
- 2. **Want more** []
- 3. **Enough** []
- 4. **Too long** []
- 5. No opinion []
- 6. Doesn't apply []

E17 Regarding information on how to manage your condition or recovery at home, did you get.....

(Read Options. Single Response)

- 1. **None** []
- 2. **Want more** []
- 3. **Enough** []
- 4. **Too much** []
- 5. **No opinion** []
- 6. **Doesn't apply** []

F PERSONAL NEEDS

Being in hospital can be an unsettling experience. Consideration of your personal needs by hospital staff whenever possible is an important part of hospital care. The following questions relate to the degree that your needs were met.

F1 Did you get prompt assistance with eating, bathing, or going to the toilet when required?

(Read Options. Single Response)

- 1. **Never** []
- 2. **Sometimes** []
- 3. **Usually** []
- 4. **Always** []
- 5. **Doesn't apply** []

F2 Did you feel you could see visitors as much as you needed/ wanted to?

(Read Options. Single Response)

- 1. **Never** []
- 2. **Sometimes** []
- 3. **Usually** []
- 4. **Always** []
- 5. **Doesn't apply** []

F3 Was there screens (curtains) around the bed when being examined to ensure privacy.....

(Read Options. Single Response)

- 1. **Never** []
- 2. **Sometimes** []
- 3. **Usually** []
- 4. **Always** []
- 5. **Doesn't apply** []

F4 Was your right to have an opinion respected.....

(Read Options. Single Response)

- 1. **Never** []
- 2. **Sometimes** []
- 3. **Usually** []
- 4. **Always** []
- 5. **Doesn't apply** []

F5 Did you feel you were you shown respect while being examined or interviewed?

(Read Options. Single Response)

- 1. **Never** []
- 2. **Sometimes** []
- 3. **Usually** []
- 4. **Always** []
- 5. **Doesn't apply** []

F6 Were you treated with consideration and politeness....

(Read Options. Single Response)

- 1. **Never** []
- 2. **Sometimes** []
- 3. **Usually** []
- 4. **Always** []
- 5. **Doesn't apply** []

F7 Did you receive the meals that were ordered....

(Read Options. Single Response)

- 1. **Never** []
- 2. **Sometimes** []
- 3. **Usually** []
- 4. **Always** []
- 5. **Doesn't apply** []

F8 Did you feel that you were able to ask for information if you felt anxious about something...

(Read Options. Single Response)

- 1. **Never** []
- 2. **Sometimes** []
- 3. **Usually** []
- 4. **Always** []
- 5. **Doesn't apply** []

F9 Did you get the feeling you could get help if you needed it?

(Interviewer note: Includes staff help. Read Options. Single Response)

- 1. **Never** []
- 2. **Sometimes** []
- 3. **Usually** []
- 4. **Always** []
- 5. **Doesn't apply** []

F10 Did you have confidence in the nursing staff...

(Read Options. Single Response)

- 1. **Never** []
- 2. **Sometimes** []
- 3. **Usually** []
- 4. **Always** []
- 5. **Doesn't apply** []

F11 Did you have confidence in the doctors.....

(Read Options. Single Response)

- 1. **Never** []
- 2. **Sometimes** []
- 3. **Usually** []
- 4. **Always** []
- 5. **Doesn't apply** []

F12 Did you feel safe and secure while in the hospital...

(Read Options. Single Response)

- 1. **Never** []
- 2. **Sometimes** []
- 3. **Usually** []
- 4. **Always** []
- 5. **Doesn't apply** []

F13 Did the hospital staff use low voices when interviewing or examining so that others couldn't overhear?

(Read Options. Single Response)

- 1. **Never** []
- 2. **Sometimes** []
- 3. **Usually** []
- 4. **Always** []
- 5. **Doesn't apply** []

G RESIDENTIAL ASPECTS OF THE HOSPITAL

Now, we would like you to rate some of the residential aspects of the hospital.

G1 Did you find the hospital parking ...

(Interviewer note: Includes visitors. Read Options. Single Response)

- 1. **Poor** []
- 2. **Adequate** []
- 3. **Good** []
- 4. **No opinion** []
- 5. **Doesn't apply** []

G2 Did you find the sign posting to help you get around the hospital....

(Read Options. Single Response)

- 1. **Poor** []
- 2. **Adequate** []
- 3. **Good** []
- 4. **No opinion** []
- 5. **Doesn't apply** []

(If B1 = 1 Go to G4)

G3 Did you find the assistance provided to get into the hospital (for example wheelchair)....

(Read Options. Single Response)

- 1. **Poor** []
- 2. **Adequate** []
- 3. **Good** []
- 4. **No opinion** []
- 5. **Doesn't apply** []

G4 Did you find the quality of food to be.....

(Read Options. Single Response)

- 1. **Poor** []
- 2. **Adequate** []
- 3. **Good** []
- 4. **No opinion** []
- 5. **Doesn't apply** []

G5 Did you find the range and appeal of the menus to be....

(Read Options. Single Response)

- 1. **Poor** []
- 2. **Adequate** []
- 3. **Good** []
- 4. No opinion []
- 5. Doesn't apply []

G6 Did you find the temperature of the food to be...

(Read Options. Single Response)

- 1. **Poor** []
- 2. **Adequate** []
- 3. **Good** []
- 4. No opinion []
- 5. Doesn't apply []

G7 Did you find the position of the call for help button to be....

(Read Options. Single Response)

- 1. **Poor** []
- 2. **Adequate** []
- 3. **Good** []
- 4. No opinion []
- 5. Doesn't apply []

G8 Did you find the comfort of your bed to be.....

(Read Options. Single Response)

- 1. **Poor** []
- 2. **Adequate** []
- 3. **Good** []
- 4. No opinion []
- 5. Doesn't apply []

G9 Did you find the cleanliness of your room or ward to be.....

(Read Options. Single Response)

- 1. **Poor** []
- 2. **Adequate** []
- 3. **Good** []
- 4. No opinion []
- 5. Doesn't apply []

G10 Did you find the temperature in your room or ward to be.....

(Read Options. Single Response)

- 1. **Poor** []
- 2. **Adequate** []
- 3. **Good** []
- 4. No opinion []
- 5. Doesn't apply []

G11 Did you find the noise level around your area to be.....

(Read Options. Single Response)

- 1. **Poor** []
- 2. **Adequate** []
- 3. **Good** []
- 4. No opinion []
- 5. Doesn't apply []

G12 Did you find the storage for your personal possessions to be....

(Read Options. Single Response)

- 1. **Poor** []
- 2. **Adequate** []
- 3. **Good** []
- 4. No opinion []
- 5. Doesn't apply []

H OTHER INDICATORS

Now a few questions about your condition.

H1 What condition were you in hospital for?

(Interviewer note: item 4, cancer includes all cancers e.g. leukaemia, lymphomas, CML etc)

(Multiple Response)

- 1. Allergies (specify - to what?) []
- 2. Arthritis (osteo-, rheumatoid) []
- 3. Eye diseases e.g. cataract, glaucoma []
- 4. Cancer []
- 5. Diabetes []
- 6. Epilepsy []
- 7. Gastrointestinal conditions eg. reflux, hernia, irritable bowel syndrome, diverticulitis, Crohn's disease []
- 8. Gout/ joint problems e.g. knee []
- 9. Genital conditions eg. endometriosis, hysterectomy, prostate []
- 10. Hearing problem []
- 11. Heart attack/angina []
- 12. Kidney stones []
- 13. Parkinson's disease []
- 14. Respiratory e.g. asthma, chronic bronchitis or emphysema []
- 15. Skeletal problems/ fracture / injury e.g. back, osteoporosis []
- 16. Skin diseases eg dermatitis []
- 17. Thyroid problem / underactive thyroid []
- 18. Other (specify) []
- 19. Not stated []

H2 How long had you had the problem prior to being admitted?

(Interviewer note: time from when the condition became a problem and when hospital admission was discussed, not when first diagnosed)

(Single Response)

- 1. ≤ 1 day []
- 2. ≤ 1 week []
- 3. 1 to 4 weeks []
- 4. > 1 month but ≤ 12 months []
- 5. > 1 year and ≤ 5 years []
- 6. 5+ years []
- 7. Don't know/can't remember []

H3 How many times have you been admitted to any hospital with this condition previously?

(Single Response)

- 1. Specify Text or numeric? _____
- 2. Don't know/can't remember []
- 3. None []

H4 Do you have any other current major medical conditions?

(Single Response)

- 1. Yes []
- 2. No [] Go to I1

H5 What is (are) it (they)?

(Interviewer note: item 4, cancer includes all cancers e.g. leukaemia, lymphomas, CML etc)

(Multiple Response)

1. Allergies (specify - to what?) []
2. Arthritis (osteo-, rheumatoid) []
3. Eye diseases e.g. cataract, glaucoma []
4. Cancer []
5. Diabetes []
6. Epilepsy []
7. Gastrointestinal conditions eg. reflux, hernia, irritable bowel syndrome, diverticulitis, Crohn's disease []
8. Gout/ Joint problems e.g. knee []
9. Genital conditions eg. endometriosis, hysterectomy, prostate []
10. Hearing problem []
11. Heart attack/angina []
12. Kidney stones []
13. Parkinson's disease []
14. Respiratory e.g. asthma, chronic bronchitis or emphysema []
15. Skeletal problems/fracture / injury e.g. back, osteoporosis []
16. Skin diseases e.g. dermatitis []
17. Thyroid problem / underactive thyroid []
18. Other (specify) []
19. Not stated []

I DEMOGRAPHIC AND SOCIAL INDICATORS

Now to finish off with some general questions.

I1 What is your marital status?

(Read Options. Single Response)

1. **Married** []
2. **Living with partner or in a de facto relationship** []
3. **Separated** []
4. **Divorced** []
5. **Widowed** []
6. **Never Married** []
7. Not stated []

I2 Do you have Private Health Insurance with any of the following companies?

(Read options, multiple response)

1. **Mutual Community** []
2. **SGIC** []
3. **Medibank Private** []
4. **Health Partners** []
5. **Other (specify)** []
6. Repat Gold Card [] Go to I4
7. Don't know [] Go to I4
8. No insurance [] Go to I4

I3 What type of cover do you have? Is it ...

(Read options, single response)

1. **Extras cover only** []
2. **Hospital cover only** []
3. **Hospital and extras cover** []
4. Don't know []

I4 Do you identify as being of Aboriginal or Torres Strait Islander origin?

(Single Response)

1. No []
2. Aboriginal []
3. Torres Strait Islander []
4. Both []
5. Not stated []

I5 What is your country of birth?

(Single Response)

1. Australia [] Go to I7
2. Austria []
3. Bosnia-Herzegovina []
4. Canada []
5. China []
6. Croatia []
7. France []
8. Germany []
9. Greece []
10. Holland / Netherlands []
11. Hong Kong []
12. Iran []
13. Italy []
14. Japan []
15. Malaysia []
16. New Zealand []
17. Philippines []
18. Poland []
19. Slovenia []
20. Spain []
21. UK and Ireland []
22. USA []
23. Vietnam []
24. Former Yugoslav Republic of Macedonia []
25. Former Yugoslav Republics of Serbia & Montenegro []
26. Other country (specify) []

I6 What year did you arrive in Australia?

(Single Response)

1. Enter year 19__
2. Don't know [99]

I7 What is the main language you speak at home?

(Single Response)

1. English []
2. Aboriginal/Torres Strait Islander languages []
3. Cambodian []
4. Cantonese []
5. Chinese []
6. Croatian []
7. Dutch []
8. Filipino []
9. German []
10. Greek []

11. Italian []
12. Polish []
13. Serbian []
14. Vietnamese []
15. Other (specify) []

I8 What is the highest level of education you have completed?

(Single Response. Interviewer note: Prompt if necessary)

1. Never attended school []
2. Some Primary school []
3. Completed Primary School []
4. Some High School []
5. Completed High School (i.e. Year 12, Form 6, HSC) []
6. TAFE or Trade Certificate or Diploma []
7. University, CAE or some other Tertiary Institute degree []
8. Other (specify) []

I9 Can you tell me the approximate annual gross income of your household? That is, for all people in the household before tax is taken out. I'll read out some categories and could you please tell me into which one your household's income falls?

(Read Options. Single Response)

1. **Up to \$12,000** []
2. **\$12,001 - \$20,000** []
3. **\$20,001 - \$40,000** []
4. **\$40,001 - \$60,000** []
5. **\$60,001 - \$80,000** []
6. **More than \$80,000** []
7. Not stated/refused []
8. Don't know []

110 Can you tell me which of the following living arrangements describes your household? Do you..

(Read Options. Single Response)

- 1. Live alone []
- 2. Live with partner []
- 3. Live with children []
- 4. Live with partner & children []
- 5. Live with parent(s) []
- 6. Live with parent(s) and siblings []
- 7. Live with other unrelated adults []
- 8. Live with other related adults []
- 9. Other []

111 What kind of work have you done for most of your life?

(Single Response)

- 1. Specify

112 Finally, were there any other issues about your hospital stay that you really want to tell us about?

(Single Response)

- 1. Issues satisfied with (specify) _____
- 2. Issues dissatisfied with (specify) _____
- 3. Unsure/ Don't Know []
- 4. No []

113 Would you recommend the hospital to a relative or friend?

(Single Response)

- 1. Yes []
- 2. No []
- 3. Unsure/ Don't Know []

Date of interview

Day of week interview undertaken

Time of day interview undertaken

That concludes the survey. Would you mind receiving a call back later by a supervisor to check this interview?

On behalf of the Department of Human Services I would like to thank you very much for taking part in the survey. Thank you for your time.



Your Hospital Stay:
**THE PATIENT'S
VIEWPOINT**

Office Use only

Hospital Ward Code Number

Instructions for completing this survey

Before answering the questionnaire please read the following points

- Please **TICK "✓"** the box that best represents your **OVERALL** feelings. If you have something extra you would like to tell us, there is space at the end of the survey or you may attach a separate sheet of paper.
- Please tick "✓" **ONE BOX ONLY** unless the question allows multiple responses. If you tick more than one box there is a risk that your answer may not be used.
- It is **YOUR OPINION** that is important. There are no "right" or "wrong" answers.
- If you did not receive the service the survey asks about, or if you have no opinion, please tick the "Doesn't apply" box.
- If you would like to discuss anything in more detail please phone or write a note to the Quality Coordinator identified in the attached letter.
- Your answers are important. They help the hospital to improve its services to patients. Please **REMEMBER THE SURVEY IS COMPLETELY CONFIDENTIAL**. No information that will identify you will be given to anyone at the hospital.

WHEN YOU HAVE FINISHED

Put the completed survey in the "Reply Paid" envelope and put it in the mail. **You do not have to use a stamp**. If you have lost the "Reply Paid" envelope, just send the questionnaire in an unstamped envelope to the following address:

Hospitals and Ambulance Service
Divisional Support Unit
Reply Paid 125
HOBART TAS 7001

INCLUDING YOUR NAME ON THIS FORM IS OPTIONAL

PLEASE NOTE: This questionnaire should be completed by the patient. If **YOU** are assisting the patient to complete this questionnaire:

What is your relationship to the patient?

REMEMBER it is important that the answers to the following questions are the PATIENT'S OPINION

For each question please tick "✓" one box only that best answers the question. If you wish to make further comments please use the last page.

1. **Are you:** Male ₁ Female ₂
2. **Your age group:** 18-25 ₁ 26-39 ₂ 40-64 ₃ 65-75 ₄ 76+ ₅
3. **How long were you in hospital?** 1 night or less ₁ 2-4 nights ₂ 5-10 nights ₃ More than 10 nights ₄
4. **What is your residential post code?**

YOUR ADMISSION TO HOSPITAL

5. Was your admission to hospital:

- (a) planned (with at least 24 hours notice) ₁ → Please go to Question 6
- (b) unplanned, a hospital transfer or emergency (less than 24 hours notice) ₂ → Please go to Question 7
- (c) don't know ₃ → Please go to Question 7

6. If you were admitted for elective surgery, did you attend a pre-admission clinic (ie a check prior to surgery) [This does not include any visit to a Specialist Clinic.]

₁ Yes ₂ No

....if YES, how long did you have to wait?

Less than 15 mins ₁ 15-30 mins ₂ 30-45 mins ₃ 1 hour or more ₄

How would you rate the following :

- | | Very Good | Good | Fair | Poor | Very Poor | Doesn't Apply |
|-----------------------------------------------------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|
| (a) the usefulness of the clinic..... | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ | <input type="checkbox"/> ₄ | <input type="checkbox"/> ₅ | <input type="checkbox"/> ₆ |
| (b) the information provided to you at the clinic | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ | <input type="checkbox"/> ₄ | <input type="checkbox"/> ₅ | <input type="checkbox"/> ₆ |
| (c) the amount of time you spent waiting at the pre-admission clinic?..... | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ | <input type="checkbox"/> ₄ | <input type="checkbox"/> ₅ | <input type="checkbox"/> ₆ |
| 7. Concerning your actual admission to hospital please rate the following: | Very Good | Good | Fair | Poor | Very Poor | Doesn't Apply |
| (a) ease of being admitted, including the amount of time it took..... | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ | <input type="checkbox"/> ₄ | <input type="checkbox"/> ₅ | <input type="checkbox"/> ₆ |
| (b) the attention of admitting staff to your special needs and concerns..... | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ | <input type="checkbox"/> ₄ | <input type="checkbox"/> ₅ | <input type="checkbox"/> ₆ |

YOUR HOSPITAL STAY

8. In your OPINION, how would you rate the following?

	Very Good	Good	Fair	Poor	Very Poor	Doesn't Apply
(a) attention to detail demonstrated by your nurses (things such as dressings, injections, medications).....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
(b) the assistance of nurses to meet your personal needs (e.g. eating, personal hygiene, toilet).....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
(c) attention to detail demonstrated by doctors (diagnosing problems, examining you carefully, treating your condition)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
(d) the availability of doctors when you needed them	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
(e) teamwork between all health professionals involved in your treatment	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
(f) the skills of other staff (ward clerks, medical orderlies, kitchen staff, cleaners)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

9. If you had ALLIED HEALTH SERVICE, in your opinion, how would you rate the care given by your:

	Very Good	Good	Fair	Poor	Very Poor	Doesn't Apply
(a) Physiotherapist.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
(b) Occupational Therapist	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
(c) Pharmacist	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
(d) Dietician	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

(e) Other

IF OTHER, such as dietician, social workers, speech pathologist, podiatrist, chaplain: please specify-

.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

10. How well did your doctor or nurse explain the following?

	Very well	Well	Enough	Poorly	Very Poorly	Doesn't Apply
(a) benefits and risks of procedures and treatment.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
(b) the amount of pain or discomfort to expect.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
(c) purpose of any medicines.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
(d) the reasons for tests.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
(e) the results of tests and what they meant.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
(f) the results of procedures and treatments.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

11a. On the whole, how would you rate the kindness shown to you by hospital staff?

Very Good	Good	Fair	Poor	Very Poor	Doesn't Apply
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

11b. Were there occasions when you could have been treated with more sensitivity and kindness?.....

<input type="checkbox"/> Yes	<input type="checkbox"/> No	Go to Question 12
------------------------------	-----------------------------	-------------------

..... if YES, by whom:

Nurses	<input type="checkbox"/> 1
Doctors	<input type="checkbox"/> 2
Housekeeping Staff	<input type="checkbox"/> 3
Allied Health Staff	<input type="checkbox"/> 4
Others	<input type="checkbox"/> 5

Tick one or more boxes

IF OTHER please specify:

.....

12a. On the whole, how would you rate the professional attitude of hospital staff?.....

Very Good	Good	Fair	Poor	Very poor	Doesn't Apply
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

12b. Were there occasions when you could have been treated with more respect?.....

<input type="checkbox"/> Yes	<input type="checkbox"/> No	Go to Question 13
------------------------------	-----------------------------	-------------------

..... if YES, by whom:

Nurses	<input type="checkbox"/> 1
Doctors	<input type="checkbox"/> 2
Housekeeping Staff	<input type="checkbox"/> 3
Allied Health Staff	<input type="checkbox"/> 4
Other	<input type="checkbox"/> 5

Tick one or more boxes

IF OTHER please specify:

.....

13. How much were you involved in decisions about your care and treatment?.....

Too much	A Lot	Enough	A Little	Not at All	Doesn't Apply
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

14a. Were you encouraged to ask questions about your condition and treatment?..... Yes No
1 2

14b. When you questioned the nurse, how well did you understand the answers?.....
Very Well Enough Poorly Very Doesn't
well Well Enough Poorly Poorly Apply

1 2 3 4 5 6

14c. When you questioned the doctor, how well did you understand the answers?

1 2 3 4 5 6

15. How did you rate the following parts of your stay?

(a) privacy (eg curtains drawn; health professionals speaking quietly about your condition).....
Very Good Good Fair Poor Very Poor Doesn't Apply

1 2 3 4 5 6

(b) consideration shown to your family and friends (eg visiting hours, staff friendliness, and facilities)....

1 2 3 4 5 6

(c) information given to family or friends about your condition, progress and needs (with your consent).....

1 2 3 4 5 6

(d) condition of your room (eg cleanliness, comfort, room temperature, provisions)

1 2 3 4 5 6

(e) quality of food (eg presentation, taste, temperature, serving and variety)

1 2 3 4 5 6

16. Were you aware of the process by which to make a complaint or give a compliment? Yes No
1 2

16a. Did you need to complain to a staff member on your ward?.....
 Yes No
1 2

.....If YES, how would you rate the way the complaint was handled?.....
Very Good Good Fair Poor Very Poor Doesn't Apply

1 2 3 4 5 6

YOUR DISCHARGE FROM HOSPITAL

17. When you were discharged from hospital how did you rate the following?

(a) the amount of time given to plan when you were going home.....
Very Good Good Fair Poor Very Poor Doesn't Apply

1 2 3 4 5 6

(b) the way in which your discharge from hospital was organised by staff

1 2 3 4 5 6

(c) the time taken to get your medications

1 2 3 4 5 6

18a. How did you rate information given to you about:

(a) how to manage your condition when you got home.....
Very Good Good Fair Poor Very Poor Doesn't Apply

1 2 3 4 5 6

(b) what activities you should or should not do when you got home

1 2 3 4 5 6

(c) danger signals to watch for about your illness, medication or operation.....

1 2 3 4 5 6

(d) who to contact for follow-up care

1 2 3 4 5 6

18b. How much did this information help you manage your condition once you got home?
A Lot Enough A Little Not at All Doesn't Apply

1 2 3 4 5

19. Have you been to your GP since you left hospital? Yes No
1 2

.....AND if YES, had your GP received any information (or a discharge summary) regarding your hospital stay?
 Yes No Don't know
1 2 3

20. Did you need any of the following after your hospital stay?

(a) nursing help in the home.....
No Yes

1 2

(b) community help (eg. house-cleaning, support group).....

1 2

(c) special equipment (eg. wheelchair, shower seat).....

1 2

(d) a follow-up appointment

1 2

(e) other help (Please Describe.....)

1 2

.....AND if YES, was it arranged BEFORE you left hospital?

(a) nursing help in the home.....
Yes No

1 2

(b) community help (eg. house-cleaning, support group).....

1 2

(c) special equipment (eg. wheelchair, shower seat).....

1 2

(d) a follow-up appointment

1 2

(e) other help (Please Describe.....)

1 2

OVERALL

21. How much do you think you were actually helped by your stay in hospital?..... ₁ A Lot ₂ A Little ₃ No change ₄ Made Worse ₅ Doesn't Apply

22. Thinking about all parts of your hospital stay, how would you rate your overall care?..... ₁ Very Good ₂ Good ₃ Fair ₄ Poor ₅ Very Poor ₆ Doesn't Apply

23. Were you made aware of your consumer/patient rights and responsibilities while in hospital? ₁ Yes ₂ No ₃ Don't know

.....AND If YES, did you understand the information given to you on your rights and responsibilities? ₁ Yes ₂ No ₃ Don't know

24. Did anything, good or bad, happen during your stay in hospital about which you would like to comment?

25. In your opinion, is there anything the hospital could do better?

PLEASE USE THIS SPACE FOR ANY ADDITIONAL COMMENTS ...

AND FINALLY:

If you would like to take the opportunity to participate in a **FOCUS GROUP** (a group to discuss your area of care) in the upcoming months please contact the hospital staff member listed in the attached letter and leave your name and address.

If you would just like to talk to someone about the care you received during your stay in hospital, please phone or write a letter to the hospital staff member listed in the attached letter.

If you have access to the Internet, details about ongoing consumer forums can be found at the following web address: <http://www.interact.dhhs.tas.gov.au/consultations/details.php3?id=66>

You are welcome to participate.

THANK YOU

for taking the time to answer these questions.

Please return in the **REPLY PAID ADDRESSED** envelope provided,

or, if you have lost the "Reply Paid envelope, send the questionnaire in an unstamped envelope to the following address:

Hospitals and Ambulance Service
Divisional Support Unit
Reply Paid 125
HOBART TAS 7001

Appendix D Hospital CAHPS (H-CAHPS) instrument — draft

Hospital CAHPS®

SURVEY INSTRUCTIONS

- ◆ You should only fill out this survey if you were the patient during the hospital stay named in the cover letter. Do not fill out this survey if you were not the patient.
- ◆ Answer all the questions by checking the box to the left of your answer.
- ◆ You are sometimes told to skip over some questions in this survey. When this happens you will see an arrow with a note that tells you what question to answer next, like this:

- Yes
 No → **If No, Go to Question 1 on Page 1**

All information that would let someone identify you or your family will be kept private.

You may notice a number on the cover of this survey. This number is ONLY used to let us know if you returned your survey so we don't have to send you reminders.

Please answer the questions in this survey about your stay at the hospital named on the cover. Do not include any other hospital stay in your answers.

YOUR CARE FROM NURSES

1. During this hospital stay, how often did nurses treat you with courtesy and respect?

- 1 Never
2 Sometimes
3 Usually
4 Always

2. During this hospital stay, how often did nurses listen carefully to you?

- 1 Never
2 Sometimes
3 Usually
4 Always

3. During this hospital stay, how often did nurses explain things in a way you could understand?

- 1 Never
2 Sometimes
3 Usually
4 Always

4. During this hospital stay, after you pressed the call button, how often did you get help as soon as you wanted it?

- 1 Never
2 Sometimes
3 Usually
4 Always
9 I never pressed the call button

YOUR CARE FROM DOCTORS

5. During this hospital stay, how often did doctors treat you with courtesy and respect?
- 1 Never
2 Sometimes
3 Usually
4 Always
6. During this hospital stay, how often did doctors listen carefully to you?
- 1 Never
2 Sometimes
3 Usually
4 Always
7. During this hospital stay, how often did doctors explain things in a way you could understand?
- 1 Never
2 Sometimes
3 Usually
4 Always

THE HOSPITAL ENVIRONMENT

8. During this hospital stay, how often were your room and bathroom kept clean?
- 1 Never
2 Sometimes
3 Usually
4 Always
9. During this hospital stay, how often was the area around your room quiet at night?
- 1 Never
2 Sometimes
3 Usually
4 Always

YOUR EXPERIENCES IN THIS HOSPITAL

10. During this hospital stay, did you need help from nurses or other hospital staff in getting to the bathroom or in using a bedpan?
- 1 Yes
2 No → If No, Go to Question 12
11. How often did you get help in getting to the bathroom or in using a bedpan as soon as you wanted?
- 1 Never
2 Sometimes
3 Usually
4 Always
12. During this hospital stay, did you need medicine for pain?
- 1 Yes
2 No → If No, Go to Question 15 on page 3
13. During this hospital stay, how often was your pain well controlled?
- 1 Never
2 Sometimes
3 Usually
4 Always
14. During this hospital stay, how often did the hospital staff do everything they could to help you with your pain?
- 1 Never
2 Sometimes
3 Usually
4 Always

15. During this hospital stay, were you given any medicine that you had not taken before?

- Yes
 No → If No, Go to Question 18

16. Before giving you any new medicine, how often did hospital staff tell you what the medicine was for?

- Never
 Sometimes
 Usually
 Always

17. Before giving you any new medicine, how often did hospital staff describe possible side effects in a way you could understand?

- Never
 Sometimes
 Usually
 Always

WHEN YOU LEFT THE HOSPITAL

18. After you left the hospital, did you go directly to your own home, to someone else's home, or to another health facility?

- Own home
 Someone else's home
 Another health facility → If Another, Go to Question 21

19. During this hospital stay, did doctors, nurses or other hospital staff talk with you about whether you would have the help you needed when you left the hospital?

- Yes
 No

20. During this hospital stay, did you get information in writing about what symptoms or health problems to look out for after you left the hospital?

- Yes
 No

OVERALL RATING OF HOSPITAL

Please answer the following questions about your stay at the hospital named on the cover. Do not include any other hospital stays in your answer.

21. Using any number from 0 to 10, where 0 is the worst hospital possible and 10 is the best hospital possible, what number would you use to rate this hospital?

- 0 Worst hospital possible
 1
 2
 3
 4
 5
 6
 7
 8
 9
 10 Best hospital possible

22. **Would you recommend this hospital to your friends and family?**

- 1 Definitely no
- 2 Probably no
- 3 Probably yes
- 4 Definitely yes

ABOUT YOU

There are only a few remaining items left.

23. **In general, how would you rate your overall health?**

- 1 Excellent
- 2 Very good
- 3 Good
- 4 Fair
- 5 Poor

24. **What is the highest grade or level of school that you have completed?**

- 1 8th grade or less
- 2 Some high school, but did not graduate
- 3 High school graduate or GED
- 4 Some college or 2-year degree
- 5 4-year college graduate
- 6 More than 4-year college degree

25. **Are you of Hispanic or Latino origin or descent?**

- 1 Yes, Hispanic or Latino
- 2 No, not Hispanic or Latino

26. **What is your race? Please choose one or more.**

- 1 White
- 2 Black or African American
- 3 Asian
- 4 Native Hawaiian or other Pacific Islander
- 5 American Indian or Alaska Native

27. **What language do you mainly speak at home?**

- 1 English
- 2 Spanish
- 8 Some other language (please print): _____

THANK YOU

Please return the completed survey in the postage-paid envelope.

Appendix E British NHS admitted patient instrument



INPATIENT QUESTIONNAIRE

What is the survey about?

This survey is about your **most recent** experience as an **inpatient** at the National Health Service hospital named in the letter enclosed with this questionnaire.

Who should complete the questionnaire?

The questions should be answered by the person named on the front of the envelope. If that person needs help to complete the questionnaire, the answers should be given from his/her point of view – not the point of view of the person who is helping.

Completing the questionnaire

For each question please tick clearly inside one box using a black or blue pen.

Sometimes you will find the box you have ticked has an instruction to go to another question. By following the instructions carefully you will miss out questions that do not apply to you.

Don't worry if you make a mistake; simply cross out the mistake and put a tick in the correct box.

Please **do not** write your name or address anywhere on the questionnaire.

Questions or help?

If you have any queries about the questionnaire, please call the helpline number given in the letter enclosed with this questionnaire.

Your participation in this survey is voluntary. **Your answers will be treated in confidence.**

Please remember, this questionnaire is about your **most recent** stay at the hospital named in the accompanying letter.

ADMISSION TO HOSPITAL

1. Was your hospital stay planned in advance or an emergency?

1 Emergency/dialled 999/immediately referred by GP or NHS direct → **Go to 2**

2 Waiting list or planned in advance → **Go to 4**

3 Something else → **Go to 4**

Emergency or immediately referred

2. How organised was the **care** you received in Accident & Emergency (or the Medical Admissions Unit)?

1 Not at all organised

2 Fairly organised

3 Very organised

3. Following arrival at the hospital, how long did you wait before admission to a room or ward and bed?

1 Less than 1 hour

2 At least 1 hour but less than 2 hours

3 At least 2 hours but less than 4 hours

4 At least 4 hours but less than 8 hours

5 8 hours or longer

6 Can't remember

7 I did not have to wait

→ **Now please go to Question 9 on next page**

Waiting list or planned admission

4. How do you feel about the length of time you were on the waiting list before your admission to hospital?

1 I was admitted as soon as I thought was necessary

2 I should have been admitted a bit sooner

3 I should have been admitted a lot sooner

5. When you were told you would be going into hospital, were you given enough notice of your date of admission?

1 Yes, enough notice

2 No, not enough notice

6. Were you given a choice of admission date?

1 Yes

2 No

3 Don't know/ Can't remember

7. Was your admission date changed by the hospital?

1 No

2 Yes, once

3 Yes, 2 or 3 times

4 Yes, 4 times or more

8. Were you given a choice about **which hospital** you were admitted to?

1 Yes

2 No

3 Don't know/ Can't remember

All types of admission

9. From the time you arrived at the hospital, did you feel that you had to wait a long time to get to a bed on a ward?

- 1 Yes, definitely
2 Yes, to some extent
3 No

THE HOSPITAL AND WARD

10. During your stay in hospital, did you ever share a room or bay with patients of the opposite sex?

- 1 Yes
2 No

11. Were you ever bothered by noise at night from **other patients**?

- 1 Yes
2 No

12. Were you ever bothered by noise at night from **hospital staff**?

- 1 Yes
2 No

13. In your opinion, how clean was the hospital room or ward that you were in?

- 1 Very clean
2 Fairly clean
3 Not very clean
4 Not at all clean

14. How clean were the toilets and bathrooms that you used in hospital?

- 1 Very clean
2 Fairly clean
3 Not very clean
4 Not at all clean
5 I did not use a toilet or bathroom

15. How would you rate the hospital food?

- 1 Very good
2 Good
3 Fair
4 Poor
5 I did not have any hospital food

DOCTORS

16. When you had important questions to ask a doctor, did you get answers that you could understand?

- 1 Yes, always
2 Yes, sometimes
3 No
4 I had no need to ask

17. Did you have confidence and trust in the doctors treating you?

- 1 Yes, always
2 Yes, sometimes
3 No

18. Did doctors talk in front of you as if you weren't there?

- 1 Yes, often
2 Yes, sometimes
3 No

NURSES

19. When you had important questions to ask a nurse, did you get answers that you could understand?

- 1 Yes, always
2 Yes, sometimes
3 No
4 I had no need to ask

20. Did you have confidence and trust in the nurses treating you?

- 1 Yes, always
2 Yes, sometimes
3 No

21. Did nurses talk in front of you as if you weren't there?

- 1 Yes, often
2 Yes, sometimes
3 No

22. In your opinion, were there enough nurses on duty to care for you in hospital?

- 1 There were always or nearly always enough nurses
2 There were sometimes enough nurses
3 There were rarely or never enough nurses

YOUR CARE AND TREATMENT

23. Sometimes in a hospital, a member of staff will say one thing and another will say something quite different. Did this happen to you?

- 1 Yes, often
2 Yes, sometimes
3 No

24. Were you involved as much as you wanted to be in decisions about your care and treatment?

- 1 Yes, definitely
2 Yes, to some extent
3 No

25. How much information about your condition or treatment was given to **you**?

- 1 Not enough
2 The right amount
3 Too much

26. If your family or someone else close to you wanted to talk to a doctor, did they have enough opportunity to do so?

- 1 Yes, definitely
2 Yes, to some extent
3 No
4 No family or friends were involved
5 My family did not want or need information
6 I did not want my family or friends to talk to a doctor

27. Did you find someone on the hospital staff to talk to about your worries and fears?

- 1 Yes, definitely
- 2 Yes, to some extent
- 3 No
- 4 I had no worries or fears

28. Were you given enough privacy when discussing your condition or treatment?

- 1 Yes, always
- 2 Yes, sometimes
- 3 No

29. Were you given enough privacy when being examined or treated?

- 1 Yes, always
- 2 Yes, sometimes
- 3 No

30. How many minutes after you used the call button did it usually take before you got the help you needed?

- 1 0 minutes/right away
- 2 1-2 minutes
- 3 3-5 minutes
- 4 More than 5 minutes
- 5 I never got help when I used the call button
- 6 I never used the call button

31. During your stay in hospital, did you have any tests, x-rays or scans other than blood or urine tests?

- 1 Yes → Go to 32
- 2 No → Go to 33

32. Were your scheduled tests, x-rays or scans performed on time?

- 1 Yes, always
- 2 Yes, sometimes
- 3 No

PAIN

33. Were you ever in any pain?

- 1 Yes → Go to 34
- 2 No → Go to 35

34. Do you think the hospital staff did everything they could to help control your pain?

- 1 Yes, definitely
- 2 Yes, to some extent
- 3 No

LEAVING HOSPITAL

35. On the day you left hospital, was your discharge delayed for any reason?

- 1 Yes → Go to 36
- 2 No → Go to 38

36. What was the main reason for the delay? (Tick ONE only)

- 1 I had to wait for **medicines**
- 2 I had to wait to **see the doctor**
- 3 I had to wait for an **ambulance**
- 4 Something else

37. How long was the delay?

- 1 Up to 1 hour
- 2 Longer than 1 hour but no longer than 2 hours
- 3 Longer than 2 hours but no longer than 4 hours
- 4 Longer than 4 hours

38. Did a member of staff explain the purpose of the medicines you were to take at home in a way you could understand?

- 1 Yes, completely → Go to 39
- 2 Yes, to some extent → Go to 39
- 3 No → Go to 39
- 4 I did not need an explanation → Go to 39
- 5 I had no medicines → Go to 40

39. Did a member of staff tell you about medication side effects to watch for when you went home?

- 1 Yes, completely
- 2 Yes, to some extent
- 3 No
- 4 I did not need an explanation

40. Did a member of staff tell you about any danger signals you should watch for after you went home?

- 1 Yes, completely
- 2 Yes, to some extent
- 3 No
- 4 It was not necessary

41. Did the doctors or nurses give your family or someone close to you all the information they needed to help you recover?

- 1 Yes, definitely
- 2 Yes, to some extent
- 3 No
- 4 No family or friends were involved
- 5 My family or friends did not want or need information

42. Did hospital staff tell you who to contact if you were worried about your condition or treatment after you left hospital?

- 1 Yes
- 2 No
- 3 Don't know / Can't remember

OVERALL

43. Overall, did you feel you were treated with respect and dignity while you were in the hospital?

- 1 Yes, always
2 Yes, sometimes
3 No

44. How would you rate how well the doctors and nurses worked together?

- 1 Excellent
2 Very good
3 Good
4 Fair
5 Poor

45. Overall, how would you rate the care you received?

- 1 Excellent
2 Very good
3 Good
4 Fair
5 Poor

ABOUT YOU

46. Are you male or female?

- 1 Male
2 Female

47. What was your year of birth?

(Please write in) e.g.

1	9	3	4
---	---	---	---

--	--	--	--

48. How old were you when you left full-time education?

- 1 16 years or less
2 17 or 18 years
3 19 years or over
4 Still in full-time education

49. Overall, how would you rate your health during the **past 4 weeks**?

- 1 Excellent
2 Very good
3 Good
4 Fair
5 Poor
6 Very poor

50. To which of these ethnic groups would you say you belong? (Tick **ONE** only)

a. WHITE

- 1 British
2 Irish
3 Any other White background
(Please write in box)

--

b. MIXED

- 4 White and Black Caribbean
5 White and Black African
6 White and Asian
7 Any other Mixed background
(Please write in box)

--

c. ASIAN OR ASIAN BRITISH

- 8 Indian
9 Pakistani
10 Bangladeshi
11 Any other Asian background
(Please write in box)

--

d. BLACK OR BLACK BRITISH

- 12 Caribbean
13 African
14 Any other Black background
(Please write in box)

--

e. CHINESE OR OTHER ETHNIC GROUP

- 15 Chinese
16 Any other ethnic group
(Please write in box)

--

OTHER COMMENTS

If there is anything else you would like to tell us about your experiences in the hospital, please do so here.

Was there anything particularly good about your hospital care?

Was there anything that could be improved?

Any other comments?

THANK YOU VERY MUCH FOR YOUR HELP

Please check that you answered all the questions that apply to you.

Please post this questionnaire back in the FREEPOST envelope provided.

No stamp is needed.

Appendix F World Health Survey 2002 — Patient Responsiveness Survey

Table 43.2 Operationalization of the domains in the World Health Survey 2002

<i>Responsiveness domains</i>		<i>World Health Survey 2002 *</i>
<i>Domain label</i>	<i>Short description</i>	<i>Items for patients and close others (as parents)</i>
Autonomy	Involvement in decisions	* How would you rate your experience of being involved in making decisions about your health care or treatment How would you rate your experience of getting information about other types of treatments or tests ¹
Choice	Choice of health care provider	How would you rate the freedom you had to choose the health care providers that attended you
Communication	Clarity of communication	* How would you rate the experience of how clearly health care providers explained things to you * How would you rate your experience of getting enough time to ask questions about your health problem or treatment ¹
Confidentiality	Confidentiality of personal information	* How would you rate the way the health services ensured you could talk privately to health care providers * How would you rate the way your personal information was kept confidential ¹
Dignity	Respectful treatment and communication	* How would you rate your experience of being greeted and talked to respectfully * How would you rate the way your privacy was respected during physical examinations and treatments ¹
Quality of basic amenities	Surroundings	* How would you rate the cleanliness of the rooms inside the facility, including toilets * How would you rate the amount of space you had ¹
Prompt attention	Convenient travel and short waiting times	How would you rate the travelling time to the hospital How would you rate the amount of time you waited before being attended to ¹
Access to family and community support	Contact with outside world and maintenance of regular activities	How would you rate the ease of having family and friends visit you * How would rate your [child's] experience of staying in contact with the outside world when you [your child] were in hospital ¹

* Similar items appear in the Multi-country Survey Study.

¹ Item dropped for the short version of the World Health Survey.