















Scottish Inpatient Patient Experience Survey 2014

Volume 2: Technical Report

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SCOTTISH INPATIENT PATIENT EXPERIENCE SURVEY 2014 VOLUME 2: TECHNICAL REPORT

Scottish Government 2014

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1 INTRODUCTION

Introduction

- The Scottish Inpatient Patient Experience Survey is a postal survey, first conducted in early 2010, with the aim of establishing the experience of a sample of people aged 16 years and over who had a recent overnight hospital stay. The survey covers seven specific areas of inpatient experience: admission to hospital; the hospital and ward; care and treatment; operations and procedures; hospital staff; arrangements for leaving hospital; and care and support services after leaving hospital. A copy of the questionnaire can be found in Appendix A.
- The inpatient survey is administered across all 14 territorial NHS Boards, and the National Waiting Time Centre (NWTC) and provides results for 44 individual hospitals as well nationally for Scotland.
- This report provides technical information on the survey design, sampling, fieldwork and analysis of the 2014 inpatient survey. The latest results are available in the national report at: http://www.gov.scot/Publications/2014/08/4194

Scottish Patient Experience Programme

- The Scottish Patient Experience Programme supports NHS Scotland in developing ways to use patients' experiences to inform service design and planning across the health service to drive improvement.
- The Scottish Patient Experience Programme supports the Healthcare Quality Strategy for NHSScotland (or Quality Strategy) by providing a basis for the measurement of quality as experienced by service users across Scotland, in addition to support for local improvement.
- The ultimate aim of the *Quality Strategy* is to deliver the highest quality health and care services to people in Scotland, and through this to ensure that NHSScotland is recognised by the people of Scotland as amongst the best in the world. Through the Scottish Patient Experience programme, people in Scotland are being given the opportunity to comment systematically on their experience of healthcare and its impact on their quality of life. The Scottish Inpatient Patient Experience Survey is one example of this work. There are also two other surveys currently being run through the Scottish Patient Experience programme: the Scottish Health and Care survey allows patients to comment on community services; and the Scottish Maternity Survey allows patients to comment on their experiences of maternity services. Further information on the Health and Care Survey and the Maternity Survey can be found at:

http://www.gov.scot/Topics/Statistics/Browse/Health/GPPatientExperienceSurvey and

http://www.gov.scot/Topics/Statistics/Browse/Health/maternitysurvey

- Further information about the Quality Strategy can be found at: http://www.gov.scot/Publications/2010/05/10102307/1
- The Scottish Inpatient Patient Experience Survey is jointly supported by Scottish Government, Information Services Division (ISD)¹, NHS Boards and Healthcare Improvement Scotland².

Aims of the Scottish Inpatient Patient Experience Survey

- The survey's specific aims are to:
 - Gain a fuller understanding of the experiences of adult patients receiving inpatient services at NHS hospitals in Scotland;
 - Provide NHS Boards and NHS hospitals with feedback on the experiences of their patients, relative to previous surveys and other areas in Scotland;
 - Provide comparable national data on the quality of the patient experience across NHSScotland;
 - Provide information for the national performance framework indicator 'Improve the quality of the healthcare experience in Scotland';
 - Explore the variations in the experiences of different groups of patients.

Outputs from this survey

- The national report is available at: http://www.gov.scot/Publications/2014/08/4194
- Reports for NHS Boards and individual hospitals are available at: http://www.careexperience.scot.nhs.uk/
- These statistics have been independently assessed by the UK Statistics Authority and are designated as National Statistics subject to meeting the requirements set out in the assessment report:

 <u>http://www.statisticsauthority.gov.uk/assessment/assessment/assessment-reports/assessment-report-131---statistics-on-scottish-patient-experience.pdf</u>
- The next section discusses the outputs from the survey in more detail.

¹ The Information Services Division (ISD) is part of National Services Scotland. ISD provides health information, health intelligence, statistical services and advice that supports the NHS in progressing quality improvement in health and care. ISD role's in the inpatient survey is to analyse the national and local

results and produce NHS Board and hospital level reports.

² Healthcare Improvement Scotland's (HIS) vision is to deliver excellence in improving the quality of the care and experience of every person in Scotland every time they access healthcare. HIS provides support for NHS boards to use the experiences of their patients to improve healthcare services.

2 OUTPUTS FROM THE INPATIENT SURVEY

National report

The national level report was released on the 26th August 2014. It presents national weighted results for each survey question and compares the results with last year, showing statistically significant changes. It also provides results for the 14 NHS Boards and National Waiting Times Centre (NWTC), and reports on statistically significant differences from last year at the 5% level.

NHS Board and hospital reporting

- Reports are published for the 14 NHS Boards and NWTC, and for 44 hospitals by the Information Services Division (ISD) and are available at: http://www.careexperience.scot.nhs.uk/
- These reports provide information on the number of people who were sent a survey and the number who responded. They also provide, information on age, gender and whether respondents' day-to-day activities were limited by a health problem or disability.
- The format is similar to the 2012 reports, with results shown as the percentage positive. This means the percentage of people who answered in a positive way. For example, when asked how much they agreed the main ward or room they stayed in was clean, if patients strongly agreed or agreed these have been counted as positive answers (see Appendix B).
- Bar charts show the percentage positive as green, and the percentage negative
 as red. The results are compared with those from last year for the same Board or
 hospital and are also compared with this year's Scottish average. Differences from
 Scotland or from the previous survey that are statistically significant are shown
 with a 's' next to the percentage change, e.g. +4s or -5s.

3 CHANGES TO THE SURVEY

Introduction

- Following the 2012 survey, a number of changes were made to the survey administration, questionnaire and reporting. Details of these changes are outlined below.
- Information on the initial development of the survey is available in Chapter 3 of the technical report from the first survey carried out in 2010 at: http://www.gov.scot/Publications/2010/09/30111425/0

Changes to sampling

- In previous surveys NHS Boards had appointed their own contractors to sample data. This year a central approach was taken whereby ISD selected the sample from the Scottish Morbidity Register database (SMR01).
- ISD combined these data with a list of patients provided by NHS Greater Glasgow & Clyde. This was necessary as ISD do not hold data on the specific hospital of treatment for patients treated within a particular group of Greater Glasgow & Clyde hospitals including Beatson West of Scotland Cancer Centre, Drumchapel Hospital, Gartnavel General Hospital, Glasgow Homeopathic Hospital and Glasgow Western Infirmary.
- This resulted in the production of a list of eligible patients.
- Further information on sampling is available in Chapter 4.

Changes to the death checks procedures

- Improvements were made to the death checking procedures. Prior to 2012, NHS Boards were responsible for undertaking their own checks of their sample using information provided by National Records of Scotland (NRS). In 2012 NHS Central Register³ (NHSCR) undertook the death checks centrally. This year ISD Scotland coordinated death checking centrally, working with two separate organisations: NHSCR undertook the death checks for patients resident within Scotland and the Health and Social Care Information Centre (HSCIC) undertook death checks for patients resident in England.
- In previous surveys it had not been possible to carry out sufficiently timely and reliable death checks on patients resident within England who were treated within NHS Borders, so these patients were excluded from the sample. Following consideration of various options and discussion with NHS Borders a system for death checking was put in place to allow these patients to be included in the survey without causing an unnecessary risk of questionnaires being sent to deceased patients.

³ http://www.nrscotlan<u>d.gov.uk/statistics-and-data/nhs-central-register</u>

- NHS ISD provided detail of the sampled patients to NHSCR and NHSCR passed details of patients resident in England to HSCIC. Both organisations ran a death check the morning of a posting and supplied details of deceased patients to ISD by 10 am. ISD processed this information, supplied a list to the contractors (Quality Health) by 11 am and the contractor removed the relevant questionnaires from the mailing which was sent from 12 noon.
- These new checks minimised the risk of sending surveys to people who were
 deceased by improving the process and minimising the lag between a death being
 registered and contractors receiving notification of it. Details on the number of
 deceased patients identified prior and during the survey are provided in Chapter 7.

Changes to the questionnaire

- The 2014 questionnaire can be viewed in Appendix A.
- There have been some substantial changes to the 2014 questionnaire as a result of consultation with Scottish Government (SG) health policy areas, Scottish NHS Boards, members of the general public, Health Improvement Scotland, and the Scottish Health Council.
- A total of 33 new questions were introduced to the 2014 survey (see Table 1 below). Of these new questions, Q26, Q27, Q28 and Q32 allowed for multiple choice answers.
- Many questions were carried over from 2012, receiving minor changes such as slight wording or rephrasing. 5 questions carried over from 2012 included an expanded number of answer categories, these were Q21, Q41, Q42, Q57 and Q71 (see Table 2).
- A small number of questions were removed from the survey between 2012 and 2014. The was chiefly done to allow the inclusion of more relevant questions. These questions are detailed in Table 3.
- The questions requesting free text 'comments' from respondents were all changed, with the number of such questions reduced from 6 to 3. Instead of asking for comments on each individual section of the questionnaire, we now ask patients for comments across their whole experience. This takes the form of asking patients to recount positive and negative aspects of their inpatient stay, with a third question: "Do you have any other comments" allowing for feedback on areas which may not have been raised within the questionnaire.

Changes to the Inpatient Survey 2014, compared with the 2012 Inpatient Survey

New questions

New questions in the 2014 Inpatient Survey are shown in Table 1 below:

Table 1: New questions for the 2014 Inpatient Patient Experience Survey

Table 1			
Question Number	Question	Reason for new question	
5	In A&E, once you had been seen by a nurse or doctor, were you kept informed about what was happening? [answer options: Yes, completely; Yes, to some extent; No; Don't know / can't remember]	In the 2012 survey, we asked only if patients were told how long they would have to wait to be seen in A&E. Feedback from the SG health policy area covering A&E	
7	Were you given enough privacy when being examined in A&E? [answer options: Yes, completely; Yes, to some extent; No; Don't know / can't remember]	suggested we needed to be asking more detailed questions to understand more fully the patient experience of A&E.	
8	When you were in A&E, did you feel safe? [answer options: Yes, completely; Yes, to some extent; No; Don't know / can't remember]	The question regarding privacy enables us to benchmark against England.	
16	Were hand wash gels available for patients and visitors to use? [answer options: Yes, always; Yes, some of the time; No; Don't know / can't remember]	This question was proposed by the SG policy area covering Hospital Acquired Infections. Wards are required to provide hand wash gels for patients and visitors to use in order to minimise the opportunity for spread of infections.	
17	During your most recent stay in hospital, were you in a single room at any time? [answer options: Yes, and I was happy; Yes, but I would have preferred to be with other patients; No, but I would have preferred to be in a single room; No, and I was happy]	This question was proposed by the SG policy area covering single room occupancy whilst in hospital.	
18	During your most recent stay in hospital, were you happy with the visiting hours? [answer options; Yes; No; Don't know / can't remember]	These two new questions were added in	
19	Did you feel that you were able to spend enough time with the people that matter to you? [answer options: Yes, definitely; Yes, to some extent; No; Don't know / can't remember]	order to understand more fully the patient experience of visiting hours.	
23	Were the people that matter to you (e.g. family and friends) involved in decisions about your care and treatment as much as you wanted? ? [answer options: Yes, definitely; Yes, to some extent; No, and I would have liked them to be more involved; No, but they didn't need to be involved]	This question was proposed by Health Improvement Scotland and SG health policy area covering person centred care.	

Table 1			
Question Number	Question	Reason for new question	
24	Did you feel that staff took adequate care when carrying out physical procedures? (e.g. injections or blood tests, inserting, checking or removing drips or catheters, moving you) [answer options: Yes, definitely; Yes, to some extent; No; Don't know / can't remember; Does not apply to me]	This question was proposed by SG health policy area covering patient harm/safety. We also received a lot of comments from patients in the 2012 survey suggesting that this was an important question to include.	
25	While you were in hospital, did your condition get worse at any time? [answer options: No; Yes, and staff responded quickly; Yes, and staff did not respond quickly; Don't know / can't remember]	These two questions were proposed by the SG health policy area covering patient	
26	During your hospital stay, if you had a drip or needle in a vein to give you medicines or fluids, did the following occur [answer options: I didn't have a drip; I did not feel it was checked regularly enough; I did not feel it was changed when necessary; I did not feel it was removed quickly enough; Don't know / can't remember]	safety/harm. They were both well received by patients when we tested them in consumer panel groups and in cognitive testing sessions.	
27	Did you experience any of the following problems during, or because of, your hospital stay? [answer options: Infection (e.g. urinary tract infection, surgical wound infection, MRSA, Cdiff, etc.); Blood poisoning/sepsis; Blood clot (e.g. Deep Vein Thrombosis [DVT], embolism); Bed sore (pressure sore); Injury from falling over; Adverse reaction to medication; Complication from surgery; Any other problems; None]	This question was proposed by the SG health policy area covering patient safety/harm. It was well received by patients when tested in consumer panel groups and in cognitive testing sessions.	
28	During your most recent hospital stay, did any of the following events occur? [answer options: Incorrect diagnosis; Wrong treatment; Incorrect medicines; Incorrect doses of medicines; Delayed or incorrect test results; None]	These three questions were proposed by the SG health policy area covering patient safety/harm.	
29	Did a member of staff discuss any of these events with you? [answer options: Yes, completely; Yes, to some extent; No; Don't know / can't remember]	They were introduced to understand if staff were discussing any errors with patients in a satisfactory way.	
30	Were you satisfied with how these events were dealt with? [answer options: Yes, completely; Yes, to some extent; No; Don't know / can't remember]	These questions were well received by patients when we tested them in consumer panel groups and in cognitive testing sessions.	
31	When you were in hospital, did you move wards? [answer options: Yes; No; Don't know / can't remember]	These two questions were introduced to	
32	What time did you move wards? [answer options: Morning / afternoon; Evening (6pm to 10pm); Middle of the night (10pm onwards); Don't know / can't remember]	understand more fully the experience of patients moving wards when in hospital.	
35	During your most recent stay, did you have an operation or procedure? [answer options: Yes; No]	These six questions represent a newly created section in the 2014 survey related to operations and procedures.	

Table 1		
Question Number	Question	Reason for new question
36	Beforehand, did a member of staff explain the risks and benefits of the operation or procedure in a way you could understand? [answer options: Yes, completely; Yes, to some extent; No; I did not want an explanation]	The experience patients have when undergoing operations and procedures makes up an important part of their inpatient journey; therefore, it was felt to be
37	Beforehand, did a member of staff explain what would be done during the operation or procedure? [answer options: Yes, completely; Yes, to some extent; No; I did not want an explanation]	important to add this new section of questions. These questions tested well with patients and NHS Boards alike. In the 2012 survey,
38	Beforehand, were you told how you could expect to feel after you had the operation or procedure? [answer options: Yes, completely; Yes, to some extent; No; I did not want an explanation]	some of these questions were duplicated in the 'Staff' section. These questions also enable us to
39	Beforehand, did a member of staff answer your questions about the operation or procedure in a way you could understand? [answer options: Yes, completely; Yes, to some extent; No; Don't know / can't remember]	benchmark against England with regards to the patient experience of operations and procedures.
40	After the operation or procedure, did a member of staff explain how it had gone in a way you could understand? [answer options: Yes, completely; Yes, to some extent; No; Don't know / can't remember]	
43	Did you know which nurse was in charge or your care? [answer options: Yes, all or most of the time; Yes, some of the time; No, but I would have liked to know; No, but it didn't bother me]	This question was introduced as a result of patient feedback. We do have a question asking if patients knew which nurse was in charge of the ward; however, many people commented that it was important to know which nurse was in charge of their care.
44	In your opinion, were there enough nurses on duty to care for <u>you</u> in hospital? [answer options: There were always or nearly always enough nurses; There were sometimes enough nurses; There were rarely or never enough nurses; Don't know / can't remember]	This question has been added as a result of patient feedback. When answering questions in the survey, many patients commented that they felt nurses were very busy due to staffing pressures. This question enables us to benchmark against England with regards to the patient experience of nursing levels.
46	Did you feel that staff took account of the things that matter to you? [answer options: Yes, definitely; Yes, to some extent; No; Don't know / can't remember]	This question was proposed by Health Improvement Scotland and SG health policy area covering person centred care.
47	Did you feel you got enough emotional support from staff during your stay? [answer options: Yes, definitely; Yes, to some extent; No; Don't know / can't remember]	This question was proposed by NHS Health Boards who commented that the 2012 survey asked about physical health but did not ask whether patients' psychological / emotional needs were being met whilst in hospital.

Table 1							
Question Number	Question	Reason for new question					
53	How did you feel about the length of time you were in hospital? [answer options: It was reasonable; It was too long; It was too short; Don't know / can't remember]	This question was introduced in response to patients' feedback that we were not asking any questions regarding whether or not they were happy with how long they were in hospital. We previously asked about delayed discharge but this did not enable patients to tell us if they thought they had been discharged too early.					
57a	I was involved in decisions about leaving hospital [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know]	This question was proposed by Health Improvement Scotland and SG health policy covering person centred care.					
65	Did you see, or were you given, any information explaining how to give feedback or make a complain to the hospital about the care you received? [answer options: Yes; No; Don't know / can't remember]	This question was added to assess patients' experience of providing feedback or making complaints about their treatment and care. The 2011 Patient Rights Act requires that NHS Boards actively encourage and welcome feedback from patients. The introduction of this question also enables us to benchmark against England.					
66	Overall (please circle a number) [scale ranges from 0 : I had a very poor experience to 10: I had a very good experience]	This question was introduced to gain an understanding of the patients' overall experience in their hospital stay. The introduction of this question also enables us to benchmark against England.					

Changed questions

- Changes to existing questions were made for similar reasons to those that led to the inclusion of new questions. In addition, where possible, questions were reduced in complexity and in some cases we changed the format of questions in order to make them more easily understood.
- Questions that were changed from the 2012 to the 2014 Inpatient Survey are shown in Table 2 below:

Table 2: Questions changed in the 2014 Inpatient Patient Experience Survey

Table 2	Table 2					
Question Number 2014 Survey	Question	Question Number 2012 Survey	Question	Reason for change		
6	When you were in the A&E department, did a nurse or doctor discuss your condition with you in a way you could understand? [answer options: Yes, completely; Yes, to some extent; No, but I would have liked them to; No, but I did not want to discuss it]	4	In A&E, I was told what was happening in a way I could understand [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]	This question has been reworded in a more person centred way reflecting the more collaborative approach the NHS is working to achieve with patients.		
3	In A&E, were you kept informed about the length of time you would have to wait to be seen by a nurse or doctor? [answer options: Yes, completely; Yes, to some extent; No; Don't know / can't remember]	3	In A&E, I was told how long I would have to wait [answer options: Strongly agree; Agree; Neither agree nor disagree;	In the 2014 survey, we split the 2012 question so that we could understand the patient experience before		
4	In A&E, how did you feel about the length of time you had to wait to see a nurse or doctor? [answer options: I didn't have to wait; It was reasonable; It was too long; Don't know / can't remember]		Disagree; Strongly disagree; Does not apply; Don't know / can't remember]	and after they were seen by a doctor or nurse in A&E.		
10	How did you feel about the length of time you waited to be admitted to hospital after you were referred? [It was reasonable; It was too long; It was too short]	6	If your hospital visit was planned in advance how did you feel about the length of time you waited to be admitted to hospital after being referred? [It was reasonable; It was too long; It was too short]	to simplify it.		
14c	I was bothered by noise at night from other patients [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]	11c	I was bothered by noise at night [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]	Feedback from patients and NHS Boards suggested that it was important to understand whether noise at night was being generated by other patients or by hospital staff. By splitting this question, we can now benchmark against England.		

Table 2					
Question Number 2014 Survey	Question	Question Number 2012 Survey	Question	Reason for change	
14d	I was bothered by noise at night from hospital staff [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]				
14e	I was happy with the food / meals I received [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]	- 11e		I was happy with the food and drink I received [answer options: Strongly agree; Agree; Neither	Patients provided feedback that their experience in hospital could be very different for food and for drinks; therefore, we have split the 2012 question in
14f	I was happy with the drinks I received [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]		disagree; Strongly disagree; Does not apply; Don't know / can't remember]	order that the results are more meaningful for NHS Boards. We can now benchmark against England with regards to patients' satisfaction with food.	
15	Did you know which nurse was in charge of the ward? [answer options: Yes, all or most of the time; Yes, some of the time; No; Don't know / can't remember]	11h	I knew who was in charge of the ward [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]	This question was changed to a different format in order to make it easier for patients to answer.	
21a	I was able to get adequate pain relief when I needed it [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]	14a	I was able to get adequate pain relief [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]	This question has been shortened slightly to simplify it.	
21b	I had enough privacy when being examined or treated	14b	I had privacy when being examined	These five questions had minor wording changes to make them more person centred. We can benchmark against England to understand whether patients felt their pain was controlled whether patients felt they	
21c	I had enough privacy when my condition and treatment was discussed	14c	I had privacy when my condition and treatment were being discussed		

Table 2				
Question Number 2014 Survey	Question	Question Number 2012 Survey	Question	Reason for change
21d	I got enough help with washing and dressing when I needed it	14d	I got help with washing and dressing when I needed it	were given enough privacy when they were being examined or treated; and whether patients felt they were given enough privacy
21e	I got enough help with eating and drinking when I needed it	14e	I got help with eating and drinking when I needed it	when discussing their condition and treatment. [All questions had the following answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree;
21f	I got enough help with going to the bathroom or toilet when I needed it	14f	I got help with going to the bathroom or toilet when I needed it	Strongly disagree; Does not apply; Don't know / can't remember]
21g	I was kept as physically comfortable as I could expect to be [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]	29	I was as physically comfortable as I could expect to be [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]	In response to feedback from NHS Boards, this question was reworded slightly in order to make implicit the staff's role in ensuring patients comfort.
22	Were you involved as much as you wanted to be in decisions about your care and treatment? [answer options: Yes, definitely; Yes, to some extent; No, and I would have liked to have been; No, but I didn't want to be involved]		How did you feel about being involved in decisions about your care and treatment? [answer options: I was more involved than I wanted to be; I was involved as much as I wanted to be; I was not involved enough]	The wording of this question was simplified in order to make it easier for patients to answer. This question enables us to benchmark against England.
33	In your opinion, was moving you between wards managed well? [Yes, definitely; Yes, to some extent; No; Don't know / can't remember]	14h	Moving wards was managed well [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]	This question was changed to a different format in order to make it easier for patients to answer.
40	After the operation or procedure, did a member of staff explain how it had gone in a way you could understand? [Yes, completely; Yes, to some extent; No; Don't know / can't remember]	18g	understand. [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does	This question was changed so that not only doctors were included in the staff who could have talked to the patient about their procedure or operation. The scale was changed to be consistent with other questions.

Table 2				
Question Number 2014 Survey	Question	Question Number 2012 Survey	Question	Reason for change
41b	Doctors discussed my condition and treatment with me in a way I could understand [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]	18e		These questions have been reworded in a more person centred way reflecting the more collaborative approach the NHS is working to achieve with patients.
42b	Nurses discussed my condition and treatment with me in a way I could understand [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]	19d		
41f	I had confidence and trust in the doctors treating me [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]	29d	I trusted the people looking after me [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]	Patients' feedback helped us to understand that experiences with regards to doctors and nurses whilst in hospital were often very different. In the 2012 survey, the question did not enable patients to tell us about their experiences of doctors and nurses independently; and it did not enable NHS Boards to understand if there was a difference. In 2014, we have asked about confidence and trust for doctors and nurses separately. These questions enables us to benchmark against England.
42f	I had confidence and trust in the nurses treating me [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]	29d	I trusted the people looking after me [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]	
45	Did you think that staff worked well together in organising your care? [answer options: Yes, definitely; Yes, to some extent; No; Don't know / can't remember]	20	Strongly agree; Agree;	This question was changed to a different format in order to make it easier for patients to answer.

Table 2						
Question Number 2014 Survey	Question	Question Number 2012 Survey	Question	Reason for change		
48	Did you feel that staff treated you with compassion and understanding during your stay? [answer options: Yes, definitely; Yes, to some extent; No; Don't know / can't remember]	29a	I was treated with respect [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]	In response to patient feedback, we replaced three questions from the 2012 survey which with a new question in the 2014 survey. The question regarding religious and spiritual needs		
10		29b	I was treated with care [answer options as above]	tested poorly in previous surveys and feedback from patients helped us to understand that this may have been because many		
		29g	My religious and spiritual needs were respected [answer options as above]	patients did not feel it was relevant.		
50	On the day you left hospital, were you delayed for any reason? [answer options: Yes; No]	22h				In the 2012 survey, the
51	What was the <u>main</u> reason you were delayed? [answere options: I had to wait for medicines; I had to wait to see a doctor; I had to wait for hospital transport; I had to wait for my discharge letter; Something else]		I was happy with how long I had to wait around when I was told I could go home [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply;	question regarding the length of time in hospital on the day of discharge was not clear. We therefore have replaced it with three questions which seek to understand if the patient was delayed on the day of discharge, how long they were delayed, and also the		
52	How long was the delay? [answer options: Up to 1 hour; Longer than 1 hour but less than 2 hours; Longer than 2 hours but less than 4 hours; Longer than 4 hours; Don't know / can't remember]		Don't know / can't remember]	reason for the delay. The introduction of these three questions enables us to benchmark against England.		
54	Were you confident you could look after yourself when you left hospital? [answer options: Yes; No]	29	I was confident I could look after myself when I left hospital [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]	This question was changed to a different format in order to make it easier for patients to answer.		

Table 2				
Question Number 2014 Survey	Question	Question Number 2012 Survey	Question	Reason for change
55	Before leaving hospital, were you confident that any help you needed had been arranged for you? [answer options: Yes, completely; Yes, to some extent; No; I didn't need any help arranged]	22g	I was confident that any help I needed had been arranged for when I left hospital [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]	This question was changed to a different format in order to make it easier for patients to answer.
56	If your condition meant you were eligible for hospital transport to take you home, were you happy with how this was arranged? [answer options: Not applicable to me; Yes; No]		I was given help with arranging transport [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]	This question was changed to a different format in order to make it easier for patients
57c	I knew who to contact if I had any questions after leaving hospital [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]	22d	I understood who to contact if I had any questions after leaving hospital [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]	This question's wording was amended to make it easier for patients to answer.
57d	I was told about danger signs to look out for when I left hospital [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]	22e	I was told about danger signals to look out for when I left hospital [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]	We made a minor wording change in this question. We now use the more familiar 'danger signs' instead of 'danger signals'. Thischange also enables us to benchmark against England.
59d	I understood the possible side effects of my medicines [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply; Don't know / can't remember]		medicines and what to do if I had any concerns [answer options: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Does not apply;	We have removed some words from this question to simplify it. In the 2012 survey, it was essentially two questions in one which made it a little more difficult to answer. This question enables us to benchmark against England.

Removed questions

 Several questions which were in the 2012 questionnaire have been removed from the 2014 questionnaire. These are shown in Table 3 below:

Table 3: Questions removed for the 2014 Inpatient Patient Experience Survey

Table 3							
Question Number 2012							
survey	Question 2012	Reason for removing the question					
8	Were you transferred to or from another hospital?	This question provided limited useful information in and of itself and was not used in secondary analysis of results.					
11d	I was bothered by noise during the day	Feedback from patient groups and NHS Boards suggested that noise through the day was not an issue in the way that noise through the night is; therefore, we removed the question regarding noise during the day from the 2014 questionnaire.					
12	During your most recent stay in hospital, did you share a room or bay with members of the opposite sex?	This question was removed because almost all complaints about shared rooms or bays come from patients who have been housed in wards or hospital areas that are excepted from the policy for single sex wards.					
16	When you were in hospital, were you in a High Dependency Unit (HDU) or Intensive Care Unit (ICU)?	This question provided limited useful information in and of itself and was not used in secondary analysis of results.					
18a	Doctors introduced themselves to me	These four questions were removed in					
18b	There was enough time to talk to doctors	order to reduce the number of questions specifically dedicated to doctors and					
19a	Nurses introduced themselves to me	nurses. We were then able to ask more					
19b	There was enough time to talk to nurses	questions in the staff section relevant to patient experiences of staff in general.					
22f	I was given advice on how to look after myself	This question was removed as the questionnaire now includes other, more relevant, questions about leaving hospital.					
29c	I got the best treatment for my condition	This question was removed as we ask questions in the 'operations and procedures' and 'staff' sections which adequately cover discussions about conditions and treatment.					
41	NHS Boards will be conducting further research in order that they can learn more about the experiences of patients. Would you like to be considered as a participant in this future research?	This question was removed because NHS Boards already have mechanisms in place locally to engage with their patients.					

Aims of consultation

- The Scottish Inpatient Patient Experience Survey ran in 2010, 2011 and 2012.
 Whilst there were minor updates to the 2012 survey, a more detailed review of the survey was carried out in 2013 to assess its efficacy in assessing the experience of an inpatient stay in hospital.
- This substantial review had the following aims:
 - To ensure the questions we are asking reflect the end-to-end experience of an inpatient stay in hospital
 - To ensure the questions cover key SG health policy patient experience priorities
 - To ensure the questions cover patient experience priorities identified by Scotland's NHS Boards
 - To ensure the questions are easy to understand and simple to answer
 - Where possible, to benchmark against England for key patient experience areas, either with the introduction of new questions, or through reformatting of existing questions

Consultation process (Sept - Dec, 2013)

Phase 1: consultation with SG health policy areas

- Members of the patient experience team met with SG health policy areas in September 2013. The purpose of these meetings was to review the questions included in the 2012 version of the questionnaire to consider:
 - Did the questions represent SG health policy priorities?
 - Were there any 'gaps' in the question set?

Phase 2: consultation with NHS Boards

- Once feedback from SG health policy areas had been taken into account, an updated version of the Inpatient Survey was circulated to all Scottish NHS Boards for their review and comment in October 2013. We specifically asked them to consider:
 - Did the questions cover NHS Boards' patient experience priorities
 - Whether there were any 'gaps' in the question set
 - Overall usability of the questionnaire

Phase 3: consultation with members of the general public

- Once feedback from NHS Boards had been taken into account alongside that received from SG health policy areas, consultation with members of the general public took place in November 2013.
- Consultation with members of the general public occurred in two ways: 1. through patient group meetings; and 2. through cognitive testing sessions. Participants for the patient group meetings and cognitive testing interviews were recruited by the Scottish Health Council.

Consumer panel group meetings

Patient group meetings were comprised of members of the general public, most of whom had had an inpatient experience (maximum 10 participants per group meeting). In these meetings, group panel members were asked to complete the updated Inpatient Survey and then a discussion about the survey was facilitated by members of the SG patient experience team. These group meetings were specifically focussed on ensuring that the questions covered all areas of inpatient experience that patients considered to be important to them. We held three patient group meetings in Edinburgh, Glasgow and Inverness.

Cognitive testing sessions

- Once we had taken into account the feedback from the patient group meetings, cognitive testing of the Inpatient Survey was conducted via interviews with members of the general public. In the two weeks spanning 4th to the 14th of November 2013 members of the SG patient experience team carried out 18 interviews with members of the general public who had previously had an inpatient stay in a Scottish hospital.
- During the one-to-one interviews participants were asked to complete the
 questionnaire whilst the interviewer observed their progress, specifically looking
 for any points within the questionnaire which appeared to cause confusion. The
 participant and interviewer then discussed the experience of completing the
 questionnaire and the interviewer probed any areas which seemed to be difficult
 for the participant. This allowed us to be sure that questionnaire was useable, and
 that the final questions were easy to understand and simple to answer.
- The interviews were scheduled to ensure adequate time between rounds to allow for discussions around findings and amendments made to the questionnaire.
 Interviews were conducted in Arbroath, Dundee, Kirkcaldy and Galashiels.
- Participants who took part in cognitive testing interviews consisted of:
 - 12 females and 6 males
 - 17 people describing themselves as 'white' and 1 described themselves as 'mixed or multiple ethnicity'
 - Ages ranging from 28 to 85

Changes to the introductory letter and reminder letters

- The introductory and reminder letters are available in Appendices C-E.
- We made minor text changes to the introductory and reminder letters for the 2014 survey in order to simplify them.

Changes to NHS board and hospital reporting

The local NHS Board and hospital reports had generally been well received. However, it was decided that more extensive and comprehensive reports should be provided. The reports were reformatted to more closely resemble those produced within the Health and Care Experience Survey as feedback had indicated that this format was useful to local policy makers. Additional sections were added to compare current and previous surveys' results, show variation at the NHS Boards or hospital level across Scotland and to include more information on trends in the results.

4 SAMPLE

Introduction

- This section of the report presents detail on the design of the inpatient survey sample, the sampling frame used, sample selection, procedures and checks undertaken.
- It also provides detail on the procedures for data transfer of the agreed sample and arrangements around access to data.

Design of sample

- The sampling approach for the Inpatient Patient Experience Survey was designed to
 - meet the needs of each NHS Board
 - inform local improvement work
 - meaningfully compare findings across Boards and
 - provide national level results.
- In order to meet these requirements, a stratified sampling strategy was developed through consultation between Analytical Services Division (ASD) within the Scottish Government, Analysts with the Information Services Division of National Services Scotland (ISD) and representatives of each NHS Board.
- Sample strata were agreed with each NHS Board to meet their needs in providing local results at the most useful level. These strata were defined either at site (hospital) level, sub-site (directorate or grouped specialties) level or as groupings of smaller hospitals.

Table 4 provides detail on the number of eligible patients within each NHS Board.

Sampling frame

- Eligible patients were identified from an extract from ISD's Scottish Morbidity Register database (SMR01) of hospital admissions.
- Eligible patients were defined as adults (aged 16 years old and above on discharge from hospital) who had an overnight stay in hospital as an inpatient (defined as one night or more where the individual was in hospital at midnight in an inpatient bed) between April 2013 and September 2013. A sampling period of 6 months was chosen for this survey rather than the one year period used in previous surveys. This period was chosen to shorten the maximum possible delay between a patient's discharge and receiving a questionnaire to 9 months from 15 months if a year sampling period was used.

- Certain patients were excluded from the survey, as follows:
 - Privately funded patients receiving care in NHS or private hospitals
 - Scottish NHS patients treated in hospitals outside of Scotland but whose care was commissioned by an NHS Board
 - Patients who were not resident in Scotland, with the exception of Northumberland residents treated in NHS Borders
 - Patients who were receiving care as an outpatient or day case which did not result in an overnight stay
 - Patients who were expected to have an overnight stay at admission but did not
 - Patients who stayed in hospital for termination of pregnancy
 - Patients who stayed in a hospital maternity unit
 - Patients who were known to be deceased, i.e. those who had death recorded in SMR01 records
 - Patients treated in a private hospital
 - Patients treated in a hospice
 - Inpatients who were being treated for a mental health condition in a mental illness hospital
 - Inpatients who were resident in a long-stay hospital
 - Inpatients who were being treated in a learning disabilities unit, and
 - Inpatients aged 15 or less on discharge
 - Patients within NHS Greater Glasgow & Clyde where the diagnosis was of a sensitive nature or which suggested that they were incapable of completing the questionnaire satisfactorily. Note that this does represent an inconsistency in the sampling between NHS boards however, time constraints were such that it was not possible to either apply this consistently across all NHS Boards or hold discussions with NHS Greater Glasgow & Clyde about removing this exclusion.
- Based on the selection and exclusion criteria, the total number of inpatients who were eligible to take part in the study was 177,690⁴.

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⁴ This total excludes patients who were recorded as being deceased on SMR01 but includes patients who were identified as being deceased by either NHSCR or HSCIC following initial sampling. These patients were subsequently removed from the sample before surveys were sent.

Table 4 Table 4 summarises the total number of eligible inpatients within each NHS Board.

Table 4 Total number of eligible patients within each NHS Board including

deceased patients

NHS Board	Inpatient Population
NHS Ayrshire & Arran	14,561
NHS Borders	3,762
NHS Dumfries & Galloway	5,157
NHS Fife	7,018
NHS Forth Valley	8,093
NHS Grampian	17,671
NHS Greater Glasgow & Clyde	45,036
NHS Highland	8,681
NHS Lanarkshire	17,413
NHS Lothian	28,354
NHS National Waiting Times Centre	3,161
NHS Orkney	470
NHS Shetland	541
NHS Tayside	16,906
NHS Western Isles	866
Total	177,690

Sampling method

- The sample size calculation was based on a 95% confidence level. The margin of error was set as +/- 5% which yielded results which would be accurate to within +/-5 percentage points (increased to +/-7 percentage points in sites with less than 1,000 patients annually to avoid sampling too many patients in smaller sites).
- Expected response rates within each NHS Board were calculated based on the response rates achieved by the 2012 Survey. These were used to adjust the required sample size to allow for non-response.
- In previous years the proportion of inpatients sampled at any hospital was limited to 60% to avoid surveying too many patients from smaller hospitals, however as the sample for this survey was based upon a 6 month period, rather than one year in previous surveys, this limit was removed.
- Table 5 shows that the total sample size allowing for non-response was 57,132, based on the requirement to achieve 29,485 completed returns for the stated accuracy.

Table 5 Required sample and total selected sample

NHS Board	Required sample	To allow for non-response	Proportion of inpatients sampled
NHS Ayrshire & Arran	2,400	5,069	35%
NHS Borders	441	734	20%
NHS Dumfries & Galloway	1,230	2,367	46%
NHS Fife	652	1,091	16%
NHS Forth Valley	485	943	12%
NHS Grampian	2,886	5,606	32%
NHS Greater Glasgow & Clyde	6,306	13,109	29%
NHS Highland	2,532	4,343	50%
NHS Lanarkshire	1,083	2,359	14%
NHS Lothian	2,626	5,132	18%
National Waiting Times Centre	615	829	26%
NHS Orkney	136	244	52%
NHS Shetland	148	296	55%
NHS Tayside	1,153	2,232	13%
NHS Western Isles	225	409	47%
Total	2,2919	44,763	25%

Sampling procedures

- ISD compiled a list of eligible patients appropriate for inclusion in the inpatient survey by combining a list extracted from ISD's Scottish Morbidity Register database (SMR01) with a list of patients provided by NHS Greater Glasgow & Clyde. This was necessary as ISD do not hold data on the specific hospital of treatment for patients treated within the group of hospitals including Beatson West of Scotland Cancer Centre, Drumchapel Hospital, Gartnavel General Hospital, Glasgow Homeopathic Hospital and Glasgow Western Infirmary. This resulted in the production of a list of eligible patients.
- Once the list of eligible patients was compiled, ISD eliminated duplications, incomplete records, deceased patients and ineligible patients to determine a final sample frame.
- ISD then randomly selected the required number of patients for each strata from the sample frame, based on a random number generated on the uniform distribution U(0,N), where N is the total number of patients within that sampling strata, and allocated each patient a unique number.

Data transfer

- ISD and the contractor ensured that all data was transferred securely via secure
 File Transfer Protocol (sFTP) with secure login. Once files were received they
 were immediately deleted from this system. The data transferred to the contractor
 included patient name and address, hospital code and name, NHS Board of
 treatment and a unique identifier, generated for the specific purposes of this
 survey.
- The fields included in the data transfer were limited to those required to mail the survey pack to the individual patient and to identify which episode of care they should complete the survey in relation to.
- On completion of the survey fieldwork and data capture (described in more detail in Chapters 5 and 6) the contractors sent the complete anonymised data files electronically to ISD through secure FTP. This enabled ISD to undertake analysis for the reporting.

Access to data

In accordance with the NHS ethical approval for the survey, contractors were
given access to the names and addresses of the people who were to be sent the
survey. All personnel were governed by the NHS Research Governance
Framework for Health and Community Care. The survey guidance manual
detailed the research governance responsibilities and accountabilities of all those
involved in the survey.

5 FIELDWORK

Introduction

 This section of the report provides detail on the survey fieldwork activities for the inpatient survey, including roles, collecting data and the timing of reminder letters during the fieldwork period.

Fieldwork activities

- Previously, individual NHS Boards used a Framework Agreement containing a list of approved contractors to appoint a survey contractor which best met need their local needs and requirements. This Framework was developed after a rigorous selection process run by NSS National Procurement. NSS National Procurement undertakes national procurement exercises for the NHS in Scotland.
- This year a contractor, Quality Health, was appointed through this process to administer the survey throughout the whole of Scotland, while ISD selected the sample of patients to receive a survey questionnaire. Further information on sampling is available in Chapter 4.
- Scottish Government staff provided day-to-day support for the administration of the survey to the contractor during the fieldwork period. In addition, the inpatient survey guidance manual set out the minimum requirements to be adhered to regarding ethics, data transfer and data security for fieldwork to be undertaken.
- The contractor carried out the fieldwork element of the inpatient survey, organising the mail out of survey packs, sending weekly monitoring updates to ISD and the Scottish Government, issuing reminders, input and quality assurance of data and sending completed datasets to ISD.
- The fieldwork commenced on a rolling basis on the 15th January 2014. In total 43,893 survey packs were initially posted out in batches between 15th January 2014 and 23rd January 2014 by the contractor on behalf of each NHS Board. The survey pack contained the following:
 - Introductory / Cover letter;
 - Inpatient Patient Experience Survey;
 - A language sheet;
 - Information leaflet; and
 - FREEPOST envelope in which to return the survey.
- The front page of the survey provided information on how to complete the survey and directed respondents to a helpline number and website.

- The cover letter provided detail on why recipients had been chosen to participate in the survey, instructions on how to take part and information relating to the security of their personal data.
- The information leaflet provided information on arrangements for reporting the
 results of the survey. It also included information on accessing the survey in other
 formats and contained a space for contractors to add the telephone number for
 their translation line by the eight minority languages most widely spoken in
 Scotland.
- Patients who did not wish to take part in the survey were advised to indicate this
 either by phoning the helpline number and leaving their details so that they could
 be removed from the mailing list or return the uncompleted questionnaire using
 the FREEPOST envelope.
- Reminder letters were sent out twice during the duration of fieldwork to further
 encourage participation in the study. The initial reminder was sent on 13th
 February 2014 to all patients who did not respond to the first mailing in the three
 or four weeks after receiving the initial survey pack. The first reminder pack
 consisted of a letter requesting the potential respondents to complete the
 questionnaire previously sent in the original survey pack.
- A second reminder was sent out in batches between 12th March 2014 and 17th March 2014. The second reminder letter was sent to all those patients who did not respond approximately four weeks after the first reminder letter was issued. At this stage a full survey pack (additional copy of the questionnaire and leaflet and a FREEPOST envelope) was re-issued along with the second reminder letter to make it easier for the participants to respond.
- Before the initial survey and each reminder was issued, NHSCR⁵ undertook death checks to identify patients who had recently died to minimise the risk of the survey going to dead patients' addresses.
- The survey closed on 22nd April 2014. In total, 43,893 survey packs were sent to patients and 21,127 were returned, giving an overall response rate of 48%.
- During the fieldwork, a freephone helpline was made available to respond to queries from patients' surveys. Approximately 1,500 telephone enquiries were received.

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⁵ http://www.nrscotland.gov.uk/statistics-and-data/nhs-central-register

6 DATA ENTRY AND FIELDWORK QUALITY CONTROL

Introduction

 This section of the report provides detail on the arrangements for data entry and coding and datafile processing. In addition it discusses data checks, quality assurance processes and reliability and validity tests undertaken.

Data entry and coding

- The contractor was responsible for data entry and quality assurance of data collected during the Inpatient Survey.
- Prior to fieldwork commencing, a datafile template was sent by ISD to the contractor. The template was then used by the contractor as the format in which to send data to ISD. In advance of moving data into this format, the contractor used their own internal processes to undertake data entry and coding of the responses.
- With the exception of answers which allowed respondents to provide written comments, the Inpatient Survey contained predefined answer options in questions for respondents to tick as appropriate. Answer options corresponded to codes which were entered into the datafile to indicate which answer had been selected by respondents for each question. A copy of the questionnaire is in Appendix A.
- For questions where a written comment could be provided, guidance was provided to contractors on how to process these answers (see Appendix F). Questions which contained options for respondents to provide a written answer and approaches to coding these answers are listed below:
 - Q67a: Was there anything particularly good about your hospital stay?
 - Q67b: Was there anything that could be improved?
 - Q67c: Do you have any other comments?
- In addition to recording predefined codes and coding of comments, contractors
 were required to capture cases where a patient had ticked two or more answers
 on any question in the survey and it was unclear what the correct answer was.
- The contractor was also required to record responses where a patient answered a routing question and then continued to answer subsequent questions contrary to the routing instructions within the original routing question.

Datafile processing

- Once data had been collected and input into the required datafile format, the contractor was able to establish a raw final datafile containing all survey information including double answers and routing errors.
- In addition to producing a raw datafile containing all information collected during fieldwork, the contractor was also required to establish a cleaned version of the datafile by undertaking data cleaning. Data cleaning involved the following activities:
 - Removal of double answers and marking of these as 'missing' as the intention of the respondent could not be ascertained;
 - Cleaning of routing errors where routing instructions had been incorrectly followed and patients incorrectly provided answers; and
 - Removal of any information recorded within free text comments which could be viewed as disclosive to respondents, other patients or staff in order to comply with the Data Protection Act.
- Once a raw and clean datafile had been developed by the contractor, the file was transferred to ISD to carry out its analysis.

Quality assurance processes

- Throughout the data entry process and prior to the datafile being sent to ISD, the contractor was required to undertake data checks on data entered into the final datafile.
- Checks were made by two team members checking every tenth record to ensure that what was contained within the respondent's completed version of the survey was checked against what had been entered within the data files.

Survey routing errors

 Routing errors were cleaned within the final dataset based on questions being applicable to respondents. For example, where a patient answered a routing question and then continued to answer subsequent questions contrary to the routing instructions within the original routing question.

7 SURVEY RESPONSE

Introduction

 This section of the report presents detail on response rates for the survey and summary analysis of non-responses. In addition, it provides an overview of survey routing errors and the level of double responses.

Response rate for the survey

• The response rate for the survey is the number of completed forms returned as a percentage of the number of people in the sample. In total, 43,893 surveys were sent to patients and 21,127 were returned completed, giving an overall response rate of 48 per cent.

Respondent burden

• The survey is short and should only take respondents 20 minutes to complete. The total burden as defined by (number of responses) * (time taken to respond) is 7,042 hours.

Response analysis

- The number of responses analysed for each question is lower than the total number of responses received. This is because not all of the questionnaires returned could be included in the calculation of results for every individual question. This was mainly for the following reasons
 - The specific question did not apply to the respondent and so they did not answer it. For example if they were not admitted to the A&E department the respondent therefore did not answer questions about their experience at A&E
 - The respondent did not answer the question for another reason (e.g. refused). Patients were advised that if they did not want to answer a specific question they should leave it blank
 - The respondent answered that they did not know or could not remember the answer to a particular question, or
 - The respondent gave an invalid response to the question, for example they ticked more than one box where only one answer could be accepted.
- Response analysis numbers also varied to an extent between NHS Board and site reporting due to suppressions and exclusions that were applied at different levels of analysis.

Response rates

• The highest response rate for an NHS Board was the National Waiting Times Centre (75%) and the lowest response rate was for Lanarkshire (42%).

Table 6 Response rate by NHS Board

NHS Board	Total	Number of	Response	Expected
	forms	Responses	Rate	Response
	sent out			Rate
Ayrshire and Arran	4,968	2,281	46%	51%
Borders	720	378	53%	59%
Dumfries and Galloway	2,310	1,202	52%	59%
Fife	1,070	486	45%	49%
Forth Valley	928	417	45%	46%
Grampian	5,507	2,772	50%	55%
Greater Glasgow and Clyde	12,870	5,878	46%	49%
Highland	4,251	2,170	51%	55%
Lanarkshire	2,321	969	42%	46%
Lothian	5,013	2,426	48%	51%
Orkney	237	115	49%	57%
Shetland	291	134	46%	49%
Tayside	2,180	1,074	49%	53%
Western Isles	403	209	52%	52%
National Waiting Times	824	616	75%	75%
Total	43,893	21,127	48%	52%

Of the 21,127 respondents

- 19,467 sent their surveys back in the post
- 1,563 completed their survey online
- 96 completed their survey via the telephone helpline, and
- the remaining 1 completed the survey using the telephone translation helpline.

Non response

Deaths

- Prior to initial survey packs and reminder letters being sent, NHSCR undertook checks to ensure that surveys were not sent to people who were registered as deceased.
- Before the questionnaires were initially sent, 866 people were identified as deceased by NHSCR checks and removed from the sample. Prior to the first and second reminders, NHSCR checks identified 352 and 263 people as deceased respectively and they were not sent reminders.
- During the fieldwork period 51 people contacted the contractors by phone or post to inform the contractor that the person who had been sent a survey had since died.

Undeliverable

 A total of 769 (2%) questionnaires were returned to the contractors as undelivered. The sample was drawn from ISD's SMR01 hospital admission system which is populated from each NHS Board's inpatient records and therefore addresses would have been checked with the patient during their stay. It is possible that a number of patients have moved address during the period after leaving hospital and the survey being distributed.

Returned blank

 A total of 2,136 (5%) questionnaires were returned blank. Some of these questionnaires were returned blank because the person was too ill to complete it.

8 ANALYSIS AND REPORTING

Introduction

 This section of the report presents detail on the approach to weighting the data, confidence intervals, significance testing and design effects. In addition to the quality of the statistics, sources of error and bias are discussed.

Weighting the data

- As the sampling was based on a stratified approach, weighting was applied to
 ensure that the sample was reflective of the overall number of inpatients who were
 eligible to take part in the survey.
- Estimates for Scotland and NHS Boards are weighted. Weighted results are calculated by weighting the result for each stratum for each question by the relative number of eligible inpatients. The weight is calculated as the number of eligible inpatients (aged 16+ and therefore eligible for survey) as a proportion of the total number of eligible inpatients (Scotland or NHS Board). Weighting the results in this way provides more representative results because the contribution of each hospital, to the national or NHS Board average, is proportional to the number of eligible patients treated there.
- There are other ways that the data could be weighted using the differences in the characteristics of those sampled. However historically this survey has been weighted to allow for the different sizes of the strata alone and continuing to use this methodology allows for consistent comparison of the weighted results between the surveys. If weighting to take account of differences in the characteristics of those sampled and responding was used then the results could not be validly compared with previous surveys and trends over time could not be assessed.
- The English inpatient survey gives equal weight to all NHS trusts when calculating national results. Equal weighting has not been given to NHS Boards within the Scottish survey. Giving NHS Boards equal weighting as was done for NHS Trusts in England would provide misleading results as it would give Greater Glasgow and Clyde's results (where there are over 80,000 inpatients annually) the same weight as Orkney's (where there are fewer than 1,000 inpatients annually). The effect of this type of weighting for the Scottish results would be to inflate the national results because the smaller boards generally achieve higher positive scores.
- Results provided within the Patient Inpatient Experience Survey national report use weighted data unless otherwise stated.

Percentage positive and negative

- Percentage positive is frequently used in the reporting, this means the percentage
 of people who answered in a positive way. If people said they strongly agreed or
 agreed these answers have been counted as positive answers. If people said they
 disagreed or strongly disagreed, these have been counted as negative. Appendix
 B details which answers have been classed as positive and negative for each
 question.
- Percentage positive is mainly used to allow easier comparison rather than
 reporting results on the five point scale that patients used to answer the questions.
 Another reason for doing this is that there may be little or no difference between a
 person who "strongly agrees" and one who "agrees" with a statement. In fact
 some people may never strongly agree or disagree with any statements. For
 those individual respondents that neither agreed nor disagreed, these have been
 classified as neutral.
- A slight modification to the board and hospital level reporting this year was to separate those responding in a positive way into 'very positive' and 'positive'. This change was made to give additional detail to the reporting.
- Appendix B details which answers have been classed as very positive and positive for each question (both are in the positive percentage column, with the very positive option given first).

Significance tests

- As the national inpatient results are based on a survey of a sample of patients and not all hospital inpatients, the results are subject to sampling variability (information on sampling can be found in Chapter 4).
- The survey used a disproportionately stratified (by site or sub-site specialty level) sample design with weights applied to estimate national or NHS Board averages. As described in 8.13, one of the effects of using stratification and weighting is that standard errors for survey estimates are generally larger than the standard errors that would be derived from a simple random sample of the same size. The calculations of standard error and comments on statistical significance have taken the stratification into account.
- Comparisons with last year's percentage positive results are discussed on the basis that differences are statistically significant (at the 5% level). The normal approximation to the binomial theorem was used for this. This approach is equivalent to constructing a 95% confidence for the difference between the results, and if this confidence interval does not contain 0 then the result is statistically significant at the 5% level.

Design effects

- One of the effects of using a stratified random sample is that standard errors (measure of sampling error) for survey estimates are generally larger than the standard errors that would be derived from a simple random sample of the same size.
- The design effect is the ratio between the variance (average deviation of a set of data points from their mean value) of a variable under the sampling method used (actual) and the variance computed under the assumption of simple random sampling (standard). In short, a design effect of 2 would mean doubling the size of a simple random sample to obtain the same volume of information; a design effect of 0.5 implies the reverse. Design effect adjustments are necessary when adjusting standard errors which are affected by the design of the survey.
- Generally speaking, disproportionate stratification and sampling with non-equal probabilities tends to increase standard errors, giving a design effect greater than 1. The sampling design of the inpatient survey meets the criteria above in that disproportionate stratification is applied across the hospital sites and sub-site specialties. As a result, one would expect the design effect to be above 1 although only modestly so.
- The standard errors used for tests for statistical significance take into account the design effects.

Inclusions and Exclusions

- A description of patients excluded from sampling is provided in paragraph 4.8.
- For hospital reports, results for the A&E section have not been shown for hospitals without an A&E department or a minor injury unit.
- Reports for NHS Boards and hospitals are only produced if there are 50 or more responses. If a particular question had less than 30 responses, the results for that question were suppressed.

Analysis

- The survey data collected and coded by Quality Health were securely transferred to ISD via secure FTP and analysed using the statistical software package SPSS.
- The analysis produced by ISD was transferred to the Scottish Government for inclusion in the national report.

Scotland Performs Healthcare Experience Indicator

- The Healthcare Experience Indicator has been developed to measure the reported experience of people using the NHS. It is one of the 50 National Indicators in the National Performance Framework, which sets out the Government's outcomes based approach. Progress is reported in Scotland Performs: http://www.gov.scot/About/Performance/scotPerforms
- The indicator is based on the reported experience from hospital inpatients, as a proxy for experience across the NHS. This has been chosen because: (a) the quality of hospital care is very important to people; (b) the indicator involves the transitions to and from hospital, which depend on health and care services in the community; and (c) it includes the feedback of inpatients on experience in A&E which should reflect a much wider population of users and is an indicator of the system.
- The indicator is calculated by taking the mean scores for individual patients' answers on the following questions in the inpatient survey and weighting them using total inpatient numbers to get a national score:
 - Overall, how would you rate your admission to hospital (i.e. the period after you arrived at hospital until you got to a bed on the ward)?
 - Overall, how would you rate the care and treatment you received during your time in the A&E?
 - Overall, how would you rate the hospital and ward environment?
 - Overall, how would you rate your care and treatment during your stay in hospital?
 - Overall, how would you rate all the staff you came into contact with?
 - Overall, how would you rate the arrangements made for your leaving hospital?
- The score for each question for each patient is: 0 for very poor; 25 for poor; 50 for fair; 75 for good; 100 for excellent.
- The mean of a patient's scores for the six questions is used rather than the sum because not all patients will have answered every question. The methodology will result in an indicator between 0 and 100 which is reported to one decimal place (Table 7).

Table 7 Example of how an individual patient's answers are converted into a score

for the Healthcare Experience Indicator

	e ricalificate Experience indicator	T					
Ques	stion	Very poor (0)	Poor (25)	Fair (50)	Good (75)	Excellent (100)	Score
Q9	Overall, how would you rate the care and treatment you received during your time in A&E?						-
Q13	Overall, how would you rate your admission to hospital (i.e. the period after you arrived at hospital until you got to a bed on the ward)?				✓		75
Q20	Overall, how would you rate the hospital and ward environment?				✓		75
Q34	Overall, how would you rate your care and treatment during your stay in hospital?					✓	100
Q49	Overall, how would you rate all the staff you came into contact with?					✓	100
Q60	Overall, how would you rate the arrangements made for your leaving hospital?					✓	100
	Patient Score =	(7	5+75+	100+1	00+10	0)/5 =	90

The analysis was done using the SAS procedure proc surveymeans which calculates sampling errors of estimators based on complex sample designs.

Quality Outcome Indicator

Twelve national Quality Outcome Indicators show progress towards the ambitions of the Quality Strategy. One of these indicators is Healthcare Experience. This indicator combines the Scotland Performs Healthcare Experience Indicator described above, with data from the Health and Care Experience Survey.

- The indicator is calculated by taking the mean of the Scotland Performs Healthcare Experience Indicator and an indicator using data from a survey of people registered with a GP practice. The latest value of the Healthcare Experience Quality Outcome Indicator is based on the 2014 Inpatient Survey and the 2013/14 Health and Care Experience Survey⁶.
- The GP practice component of the indicator is calculated by taking the mean scores for individual patients' answers on the following questions and weighting them using GP practice populations to get a national score. As for the Healthcare

⁶ http://www.gov.scot/Topics/Statistics/Browse/Health/GPPatientExperienceSurvey/Survey1314

Experience Indicator, the score for each question for each patient is: 0 for very poor; 25 for poor; 50 for fair; 75 for good; 100 for excellent.

- Overall how would you rate the arrangements for getting to see a doctor/and or nurse in your GP surgery? As there are separate questions about doctors and nurses the mean score of the answers is used.
- Overall, how would you rate the care provided by your GP surgery?
- The analysis was done using the SAS procedure proc surveymeans which calculates sampling errors of estimators based on complex sample designs.
- The standard error of the indicator is calculated by combining the standard errors of the inpatient and GP components.

Quality of these statistics - Sources of bias and other errors

Non-response bias

- The greatest source of bias in the survey estimates is due to non-response. Non-response bias will affect the estimates if the experiences of respondents differ from those of non-respondents.
- From the Health and Care Experience Survey we know that some groups (e.g. men and younger people) are less likely to respond to the survey. We also know that there are differences in the experiences of different groups (e.g. younger people and women tend to be less positive about their experiences). An example of the effects of this type of bias is that with more older people responding, who are generally more positive, the estimates of the percentage of patients answering positively will be slightly biased upwards. Another example is that with more women responding, who are generally less positive, the estimates of the percentage of patients answering positively will be slightly biased downwards.
- The comparisons between different years of the survey should not be affected by non-response bias as the characteristics of the sample are similar for each year.
- Some non-response bias is adjusted for by weighting the results. The response rates differ between hospitals, but weighting the results by patient numbers means that hospitals with lower response rates are not under-represented in the national results.

Sampling error

• The results are affected by sampling error. However due to the large sample size the effect of sampling error is very small for the national estimates. Confidence intervals (95%) for the percentage of patients responding positively to a particular statement are generally less than +/- 1%.

 When comparisons have been made, the effects of sampling error have been taken into account in the tests for statistical significance. Only differences that are statistically significant, that is that they are unlikely to have occurred by random variation, are reported as differences.

Other sources of bias

- There are potential differences in the expectations and perceptions of patients with different characteristics. Patients with higher expectations will likely give less positive responses. Similarly patients will perceive things in different ways which may make them more or less likely to respond positively. When making comparisons between NHS Boards it should be remembered that these may be affected by differences in patient characteristics.
- There are some questions that are potentially affected by patients who do not see it as being relevant to them answering "neither agree nor disagree" instead of "not relevant". An example of this type of question is "I got enough help with eating or drinking when I needed it". The effect of this is to reduce the percentage of patients answering positively. The answer scale was cognitively tested and participants were happy with the "neither agree nor disagree" option.
- These other sources of bias should not affect comparisons between years.
- In interpreting the results, consideration should also be given to the varying size of NHS Boards in Scotland. For example NHS Orkney as an island board has one hospital with a six months inpatient population of 470 at the time of the survey, whereas NHS Greater Glasgow and Clyde as a large board has 16 hospitals with an inpatient population of 45,036 for the same six months period. Across Boards there is a large variation in geographic coverage, population sizes and hospital sites as well as hospital type which should be borne in mind when reviewing survey findings. For example, the results by type of hospital showed that both community and general hospitals were generally more positive than other hospital types. This means that where there is a greater mix of these types of hospitals within boards, results may be more positive.

APPENDIX A: SURVEY MATERIALS – QUESTIONNAIRE





Inpatient Patient Experience Survey

This survey is about your most recent stay in the **hospital named** in the letter which came with this survey.

The responses you give will help improve hospital services. Results of the survey will be shared with the hospital and NHS Board named in the letter which came with this survey; however, all of the answers you provide will be entirely confidential.

Please read the enclosed letter and leaflet for more information about this survey.



If you would prefer, you may also complete this survey online at: www.quality-health.co.uk /si14

To do this you will need to enter the ID number which can be found on the letter which came with this survey.

Instructions

The questions should be answered by the person named on the letter which came with the survey. A friend or carer can help you complete the survey but the answers should be yours not theirs.

The survey takes around 20 minutes to complete. Please answer all questions, unless the instructions ask you to skip a question. For each question, please place a tick in the box next to the answer that most closely matches your own experience. For example, if your answer is yes, write in a tick as below:

V	Yes
\Box	No

Don't worry if you make a mistake. Simply cross it out and tick the correct answer.



Complete by phone 0800 783 1775

SI14CORE

This reference number is for admin purposes only.

Section 1. Admission to hospital: your most recent hospital stay

surve	e answer all of the questions in this y about your most recent stay in the ital named in the letter that came with urvey.	In A&E, once you had been seen by a nurse or doctor were you kept informed about what was happening? Yes, completely
Q1 Please	Was your most recent hospital stay planned in advance or an emergency? etick ONE box only Emergency or urgent → Go to Q2 Waiting list or planned in advance → Go to Q10 Something else → Go to Q2	Yes, to some extent No Don't know / can't remember In A&E, did a nurse or doctor discuss your condition with you in a way you could understand? Yes, completely
Q2	When you arrived at hospital did you go to the Accident and Emergency Department (A&E)? Yes → Go to Q3 No → Go to Q12 Don't know → Go to Q12	Yes, to some extent No, but I would have liked them to No, but I did not need to discuss it Were you given enough privacy when being examined or treated in A&E?
Q3	In A&E, were you kept informed about how long you would have to wait to be seen by a nurse or doctor? Yes, completely Yes, to some extent No	Yes No Don't know / can't remember When you were in A&E, did you feel safe? Yes, completely
Q4 1 1 1 1 2 1 3 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Don't know / can't remember In A&E, how did you feel about the length of time you waited to be seen by a nurse or doctor? I didn't have to wait It was reasonable It was too long Don't know / can't remember	Yes, to some extent No Don't know / can't remember Overall, how would you rate the care and treatment you received during your time in A&E? Please tick ONE box only Excellent Good Fair Poor Go to Q12
		s Very Poor

2

SI14CORE-02

Waiting list and planned in patients	advance		All ty	pes of adn	nission (al	l patients)		
Q10 How did you feel about th time you waited to be adr hospital after you were re	nitted to	Q12	From the time you arrived at hospital, how did you feel about the time you had to wait to get to a bed on the ward?					
, 🔲 It was reasonable			, 🔲	It was reas	onable			
₂ It was too short			2	It was too le	ong			
₃ ☐ It was too long			3 🔲	I did not ha	ve to wait			
Did the information you we attending hospital help you what would happen? Yes, a lot Yes, a little No, not at all I wasn't given any informa Don't know / can't remember	understa		Q13	I did not have to wait Overall, how would you rate your admission to hospital? (i.e. the period after you arrived at hospital until you got to a bed on the ward) Excellent Good Fair Poor Very Poor				
Section 2. The hospital a	ınd war	d: you	ır most r	ecent ho	spital sta	ay .		
Q14 How much do you agree of during your most recent he Please tick ONE box only on each	ospital stay	with ea					rd	
Q14 How much do you agree of during your most recent ho	ospital stay	with ea	ch of the fo Neither				Don't know	
Q14 How much do you agree of during your most recent ho	ospital stay h line Strongly	with ea y?	Neither agree nor	llowing abo	ut the hospi Strongly	tal and war	Don't	
How much do you agree of during your most recent he Please tick ONE box only on each. The main ward or room I stayed	spital stay h line Strongly agree	with early? Agree	Neither agree nor disagree	llowing abor	Strongly disagree	Does not apply	Don't know	
How much do you agree of during your most recent he Please tick ONE box only on each The main ward or room I stayed in was clean The bathrooms and toilets were	spital stay h line Strongly agree	e with early? Agree	Neither agree nor disagree	Disagree	Strongly disagree	Does not apply	Don't know	
How much do you agree of during your most recent he Please tick ONE box only on each The main ward or room I stayed in was clean The bathrooms and toilets were clean I was bothered by noise at	ospital stay h line Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Does not apply	Don't know	
How much do you agree of during your most recent he Please tick ONE box only on each in was clean The main ward or room I stayed in was clean The bathrooms and toilets were clean I was bothered by noise at night from other patients I was bothered by noise at	ospital stay h line Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Does not apply	Don't know	
How much do you agree of during your most recent he Please tick ONE box only on each The main ward or room I stayed in was clean The bathrooms and toilets were clean I was bothered by noise at night from other patients I was bothered by noise at night from hospital staff I was happy with the food/meals	spital stay h line Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Does not apply	Don't know	
The main ward or room I stayed in was clean I was bothered by noise at night from hospital staff I was happy with the food/meals I received I was happy with the drinks I	ospital stay h line Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Does not apply	Don't know	

SI14CORE-03

4			
	ı		
ge		Q18	During your the visiting h

Q15	Did you know which of the ward?	in charge	Q1		our stay, we	ere you happy	y with		
Pleas	e tick ONE box only Yes, all or most of t	he time		, 🗆	Yes				
¹ L	Yes, some of the tin			2	No				
2 📙				, ,	Don't kn	ow / can't re	emember		
₃ □	No, but I would have	now		District	f ==1				
4 📙	No, but it didn't both		o for	Q1	Q19 Did you feel you were able to spend enough time with the people that matted to you (e.g. family and friends)?				
Q16	Were hand-wash ge patients and visitors		3 101			-	na monacy.		
, 🔲	Yes, always			'	Yes, cor	. ,			
2	Yes, some of the tin	ne		2 _		some extent			
3	No			3 [No Don't kn	ow / can't re	member		
4	Don't know / can't re	emember		'	Dontkii	OW / Carri le	member		
Q17	During your most re			Q2		how would d environme	you rate the lent?	hospital	
1 🔲	Yes, and I was hap		•	1 [Exceller	nt			
2	Yes, but I would have	ve preferred	d to be	2	Good				
	with other patients			3 🗆	Fair				
3	No, but I would have single room	e preferred	to be in a	4	Poor				
single room No, and I was happy				Very Po	or				
4	No, and I was napp	У		5 -	, ,,,,,	01			
4 🗌			-4	5					
Sect	tion 3. Care and		nt: you	r most re			у		
Q21	tion 3. Care and How much do you a during your stay in h	treatme agree or dis nospital?	agree witl		cent hos	pital sta		ment	
Q21	tion 3. Care and	treatme agree or dis nospital?	agree witl	n each of the	cent hos	pital sta		ment	
Q21	tion 3. Care and How much do you a during your stay in h	treatme agree or dis nospital?	agree witl		cent hos	pital sta		Don't	
Q21 Pleas I was adequ	tion 3. Care and How much do you a during your stay in h	treatme agree or dis nospital? on each line Strongly	agree witl	n each of the Neither agree nor	cent hos	spital star bout your ca	are and treat	Don't	
Q21 Pleas I was adeque when I had	How much do you a during your stay in he tick ONE box only of able to get uate pain relief I needed it enough privacy being examined or	treatme agree or dis nospital? on each line Strongly	agree witl	Neither agree nor disagree	cent hos	spital stay bout your ca	are and treat	Don't	
I was adeque when I had when treate I had when	How much do you a during your stay in he tick ONE box only of able to get uate pain relief I needed it enough privacy being examined or	treatme agree or dis nospital? on each line Strongly	agree with	Neither agree nor disagree	cent hos following a Disagree	Strongly disagree	Does not apply	Don't know	
Pleas I was adeque when I had when treate I had when treatm I got & washi	How much do you a during your stay in he tick ONE box only of able to get uate pain relief I needed it enough privacy being examined or denough privacy my condition and	sgree or dis nospital? on each line Strongly agree	agree with	Neither agree nor disagree	cent hos following a Disagree	Strongly disagree	Does not apply	Don't know	
Pleas I was adeque when I had when treate I had when treatm I got e washi when I got e	How much do you a during your stay in he tick ONE box only of able to get uate pain relief I needed it enough privacy being examined or denough privacy my condition and nent was discussed enough help with ng and dressing I needed it enough help with g and drinking when	treatme	Agree	Neither agree nor disagree	cent hos following a Disagree	Strongly disagree	Does not apply	Don't know	

SI14CORE-04

Care and treatment cont'd	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Does not apply	Don't know
I got enough help with going to the bathroom or toilet when I needed it	_ ,	2	3	4	5	6	7
I was kept as physically comfortable as I could expect to be	_ 1		3	4	5	6	7

toilet when I needed it		1	²		3	L 4	5		7			
	kept as physically rtable as I could t to be	_ 1	_ 2		3	_ 4	5		7			
Q22	Were you involved a wanted to be in dec care and treatment?	isions abou			During your stay in hospital, if you had drip or needle in a vein to give you medicines or fluids, did any of the							
1	Yes, definitely Yes, to some extent No. and I would have		nave been		Pleas		occur? . <i>that apply</i> ave a drip					
Q23	No, but I didn't want Were the people that family & friends) invalout your care and	t to be invo at matter to olved in de	lved you (e.g. cisions		I did not feel it was checked regula enough I did not feel it was changed when required I did not feel it was removed quickl							
1	as you wanted? Yes, definitely Yes, to some extent	t			s 🗌	enough Don't kn	ow / can't re	emember				
3	No, and I would have more involved No, but they didn't r				Q27	Did you experience any of the followir problems during, or because of, your hospital stay?						
Q24	Did you feel that sta when carrying out p (e.g. injections or bl checking or removir moving you)?	hysical pro ood tests; i	cedures? nserting,		Pleas	Infection surgical etc.)	wound infe	ry tract infecti ction, MRSA,	on, CDiff,			
1	Yes, definitely Yes, to some extent	t			3 🔲	Blood clo [DVT], e	mbolism)	p ∨ein Throm	nbosis			
4	Don't know / can't re Does not apply to m		ember			Bed sore (pressure sore) Injury from falling over Bad reaction to medication						
Q25	While you were in h condition get worse				7 8	Complication Any other	ation from s er problems	surgery				
3 4	Yes, and staff responsible Yes, and staff did no Don't know / can't re	ot respond	•		9 🔲	None						

SI14CORE-05

Q28	During your most recent hospital stay, did any of the following events occur?	Q34	Overall, how would you rate your care and treatment during your stay in
Please	e tick ALL that apply		hospital?
1	Incorrect diagnosis	1 L	Excellent
2	Wrong treatment	2 📙	Good
3	Incorrect medicines	3 🔲	Fair
4	Incorrect doses of medicines	4	Poor
5	Delayed or incorrect test results	5	Very poor
6	None → Go to Q31	Soci	tion 4 Operations and
Q29	Did a member of staff discuss any of these events with you?	proc	tion 4. Operations and cedures: your most recent pital stay
1	Yes, completely		
2	Yes, to some extent	Q35	During your most recent hospital stay,
3	No		did you have an operation or procedure?
4	Don't know / can't remember	1 🗆	Yes → Go to Q36
Q30	Were you satisfied with how these events	2	No → Go to Q41
	were dealt with?		Beforehand, did a member of staff explain the risks and benefits of the
1	Yes, completely	Q36	operation or procedure in a way you
2	Yes, to some extent		could understand?
3	No	1	Yes, completely
4	Don't know / can't remember	2	Yes, to some extent
Q31	When you were in hospital, did you move	3 🔲	No
	wards?	4	I did not want an explanation
1 📙	Yes → Go to Q32		Beforehand, did a member of staff
2	No → Go to Q34	Q37	explain what would be done during the operation or procedure?
3	Don't know / can't remember → Go to Q34		
Q32	What time did you move wards?	1 📙	Yes, completely
If you	moved several times, please tick ALL that	2 📙	Yes, to some extent
apply		3 📙	No
1	Morning / afternoon	4	I did not want an explanation
2 📙	Evening (6pm to 10pm)		Beforehand, were you told how you could
з 🔲	Middle of the night (10pm onwards)	Q38	expect to feel after you had the operation
4	Don't know / can't remember		or procedure?
Q33	In your opinion, was moving you between	1	Yes, completely
400	wards managed well?	2	Yes, to some extent
1	Yes, definitely	3	No
2	Yes, to some extent	4	I did not want an explanation
3	No		
4	Don't know / can't remember		
	Ь		SI14CORE-06

Beforehand, did a member of staff answer your questions about the operation or procedure in a way you could understand? 1 Yes, completely 2 Yes, to some extent 3 No 4 Don't know / can't remember Section 5. Staff: your most recent hospital stay Q40 Member of staff explain in a way you could understand? 1 Yes, completely 2 Yes, to some extent 3 No 4 Don't know / can't remember Section 5. Staff: your most recent hospital stay Q41 How much do you agree or disagree with each of the following when you think of you came into contact with? If you were not in contact with a doctor go to queries tick ONE box only on each line							gone ors who
	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Does not apply	Don't know
Doctors knew enough about my condition and treatment	1	2	П 3	4	s	6	7
Doctors discussed my condition and treatment with me in a way I could understand	_ ,		3	4	5	6	7
Doctors talked in front of me as if I was not there	_ ,	2	3	4	5	6	7
Doctors listened to me if I had any questions or concerns	_ ,	2	3	4	5	6	7
As far as I was aware doctors washed/cleaned their hands at appropriate times	_ 1	2	3	4	5	6	7
I had confidence and trust in the doctors treating me	_ 1	2	3	4	5	6	7
How much do you agre you came into contact v	vith? If you			th any nui			
Nurses knew enough about my condition and treatment	_ 1		з	4	5		7
Nurses discussed my condition and treatment with me in a way I could understand	_ 1		3	4	5	6	7
Nurses talked in front of me as if I was not there	_ 1		3	4	5	6	_ 7
Nurses listened to me if I had any questions or concerns	_ 1		3	4	s	6	7
			7	SII	4CORE-07		

Nurses cont'd	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Does not apply	Don't know
As far as I was aware nurses washed/cleaned their hands at appropriate times	_ 1	_ 2	3	4	5	6	7
I had confidence and trust in the nurses treating me	_ 1		3	4	5	6	7

at appr	appropriate times									
	had confidence and trust in he nurses treating me		з	_ 4	5					
Q43 ,	Did you know which nof your care? Yes, all or most of the Yes, some of the time No, but I would have I No, but it didn't bother. In your opinion, were nurses on duty to care hospital?	time iked to know me there enough	Did you feel that staff treated you compassion and understanding of your stay? ,							
1	There were always or enough nurses There were sometime There were rarely or n nurses Don't know / can't rem	s enough nurses ever enough	1	Excellent Good Fair Poor Very poor						
Q45	Did you think that the together in organising Yes, definitely			tion 6. Lea t recent h			our			
3 4	Yes, to some extent No Don't know / can't rem		On the day you left hospital, were you delayed for any reason? Please tick ONE box only Yes → Go to Q51							
Q46	Did you feel that staff the things that matter Yes, definitely Yes, to some extent No		Q51	No → Go to What was the delayed?	to Q53 ne <u>main</u> re	eason you v	vere			
4 🗆	Don't know / can't rem	ot enough	Please tick ONE box only 1 I had to wait for medicines 2 I had to wait to see the doctor							
Q47	emotional support from stay? Yes, always Yes, sometimes	n stan during your	3	I had to wait for hospital transport I had to wait for my discharge letter Something else						
3 📙	No Don't know / can't rem	nember								

SI14CORE-08

Q52	How long was the dela	ay?		Q54	Were you o		ou could loc t hospital?	k after
1	Up to 1 hour			, 🗆	Yes			
2	Longer than 1 hour bu	ıt less than	2	2 🗆	No			
3	Longer than 2 hours b	out less tha	n 4	Q55		hat any hel	al, were you p you neede	
4	Longer than 4 hours						.	
5	Don't know / can't rem	nember		' L	Yes, comp	-		
	How did you feel abou	ıt the lengt	h of	2 📙	Yes, to sor	ne extent		
Q53	time you were in hosp		11 01	3 📙	No			
, 🗆	It was reasonable			4 🗆	I didn't nee	ed any help	arranged	
2	It was too long						nt you were to take you h	
3	It was too short			Q56			now this was	
4	Don't know / can't rem	nember						
				1	Not applica	ible to me		
				2 📙	Yes			
				3 📙	No			
Q57	How much do you agr	ee or disag	gree with	each of the foll	owina when	you think a	about what	
	happened when you vertick ONE box only on	vere leavin			g	,	about mut	
		vere leavin			Disagree	Strongly disagree	Does not	Don't know
Pleas		vere leavin each line Strongly	g hospita	Neither agree		Strongly	Does not	
I was about My fa was to when	e tick ONE box only on involved in decisions	each line Strongly agree	g hospita Agree	Neither agree		Strongly	Does not apply	know
I was about My fa was ta when leavin I knew had a	involved in decisions tleaving hospital mily or home situation aken into account planning for me	each line Strongly agree	Agree	Neither agree nor disagree		Strongly disagree	Does not apply	know
I was about My fa was to when leavin I knew had a leavin I was signs	involved in decisions t leaving hospital mily or home situation aken into account planning for meng hospital w who to contact if I any questions after	each line Strongly agree	Agree	Neither agree nor disagree		Strongly disagree	Does not apply	7 7
I was about My fa was to when leavin I knew had a leavin I was signs	involved in decisions tleaving hospital mily or home situation aken into account planning for meng hospital who to contact if I may questions after any hospital told about any danger to watch for when I	vere leavin each line Strongly agree	g hospita Agree 2 2 2	Neither agree nor disagree	Disagree 4	Strongly disagree	Does not apply	r r r r r r r r r r

Q59 How much do you agree or disagree with the following statements regarding your medicines?							
Please tick ONE box only o	Strongly agree	Agree	Neither agree	Disagree	Strongly disagree	Does not apply	Don't know
I didn't have to wait too long to get my medicines		2	3	4	s		7
I understood what my medicines were for	_ ,		3	4	5		7
I understood how and when to take my medicines	_ 1	2	3	4	5		7
I understood the possible side effects of my medicines	_ 1	2	3	_ 4	s		7
Q60 Overall, how would Please tick ONE box only , Excellent2	you rate the		ments made for	your leavin	g hospital?	Very poor	
Section 7. After leave your most recent how The next few questions ask support services that you not service that	spital state about care eeded to be	ay and	Q64		•	u rate the c got after lea	
arranged before you could leave hospital. This includes any equipment needed in your home, home care or personal care, or a place in a care / nursing home. 2 Good 5 Fair Poor							
to be arranged for whospital?				Very poor			
, ☐ Yes → Go to Q62 2 ☐ No → Go to Q6						perience: pital sta	
No → Go to Q6 Did you have to stay than expected to was support services to lead to the property of the prop	/ in hospital it for your ca	are or	Q65	information feedback	n explaining	you given, a how to prov to the hosp ceived?	vide
Yes Yes			, 🗆	Yes			
₂ No			3	No Don't know	v / can't rem	nember	
Q63 Did you feel that you support services that you?			Q66	Overall (please circ	le a numbe	er)
, Yes			I had a experi	a very poor ence		l had a very expe	good erience
2 No			1 1	1 2 3	4 5 6	7 8 9	10
			10	SI140	CORE-10		_

Section 9. Other comments about your experience of your hospital stay

Q67

If there is anything else you would like to tell us about your experience in hospital please write your comments below.

Was there anything particularly good about your hosp	oital care	?
Was there anything that could be improved?		
Do you have any other comments?		
Section 10. About you		
This information will help us find out if different groups of people have different experiences of treatment as an inpatient. Nobody at the	Q69	Are you male or female?
hospital you attended will be able to see your	1	Male
answers. If you would prefer not to answer a particular question then you should skip it and go to the next question.	2	Female
Q68 What was your age last birthday?	Q70	How would you rate your health in general? <i>Please tick ONE box only</i>
	1 🔲	Good
	3	Fair Poor
I		
•	11	SI14CORE-11

Q71	Do you have any of the following conditions which have lasted, or are expected to last at least 12 months?	Which of the following options best describes how you think of yourself?
Pleas	e tick ALL that apply	, Heterosexual / Straight
1	A physical disability	2 Gay / Lesbian
2	Chronic pain lasting at least 3 months	3 Bisexual
з 🔲	Another long-term condition	4 Other
4	Mental health condition	
5	Deafness or severe hearing impairment	Q75 What is your ethnic group?
ε 🔲	Blindness or severe vision impairment	Tick ONE box which best describes your ethnic
7	A learning disability	group
s 🔲	None of the above	₁ ∐ White
	Are your day-to-day activities limited	2
	because of a health problem or disability	│ □ □ Asian, Asian Scottish or Asian British
Q72	which has lasted, or is expected to last, at least 12 months? (Include problems	4
	related to old age)	5 U Other ethnic group
,	Yes, limited a lot	Q76 Do you need an interpreter or other help to communicate?
2	Yes, limited a little	, \ \ Yes
3	No	, No
		2 NO
Q73	What religion , religious denomination or body do you belong to?	NHS Statisticians hold information about your stay in hospital e.g. how long you were in hospital
1 🗌	None	and reason for attending. We would like your
2	Church of Scotland	permission to add your survey results to this information. Your information will be used only for
з 🔲	Roman Catholic	research and will not identify you individually.
4	Other Christian	If you give your permission to add your survey results to this information it will not be shared with
5	Muslim	the people who looked after you and will in no
е 🗌	Buddhist	way affect your current or future treatment or care.
7	Sikh	
8	Jewish	Do you give your permission for NHS
9	Hindu	Q777 Statisticians to add your survey results to information held about your hospital stay?
10	Pagan	
11	Another religion (non-Christian)	, L Yes
		₂ No
		I

Thank you for answering these questions.

Please return this survey FREEPOST, in the envelope provided.

12 SI14CORE-12

APPENDIX B: POSITIVE, NEUTRAL, NEGATIVE CLASSIFICATIONS

The table below shows which answers were classed as positive and which were classed as negative for each question in the inpatient survey.

Table 8 Classification of scoring questions

* This is a new question.

1 Inis is a new question number		Positive %	Neither positive nor negative %	Negative %
3	In A&E, were you kept informed about how long you would have to wait to be seen by a nurse or doctor?	Yes, completely	Yes to some extent	No
4	In A&E, how did you feel about the length of time you waited to be seen by a nurse or doctor?*	I didn't have to wait; It was reasonable	-	It was too long
5	In A&E, once you had been seen by a nurse or doctor were you kept informed about what was happening?*	Yes, completely	Yes, to some extent	No
6	In A&E, did a nurse or doctor discuss your condition with you in a way you could understand?	Yes, completely	Yes, to some extent	No, but I would have liked them to
7	Were you given enough privacy when being examined or treated in A&E?*	Yes	-	No
8	When you were in A&E, did you feel safe?*	Yes, completely	Yes, to some extent	No
9	Overall, how would you rate the care and treatment you received during your time in A&E?	Excellent; good	Fair	Poor; Very Poor
10	How did you feel about the length of time you waited to be admitted to hospital after you were referred?	It was reasonable	-	It was too short; It was too long
11	Did the information you were given before attending hospital help you understand what would happen?	Yes, a lot; Yes, a little	-	No, not at all; I wasn't given any information
12	From the time you arrived at hospital, how did you feel about the time you had to wait to get to a bed on the ward?	I did not have to wait; It was reasonable	-	It was too long

Question number	Original Question Text	Positive %	Neither positive nor negative	Negative %
13	Overall, how would you rate your admission to hospital? (i.e. the period after you arrived at hospital until you got to a bed on the ward)	Excellent; Good	Fair	Poor; Very Poor
14a	The main ward or room I stayed in was clean	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
14b	The bathrooms and toilets were clean	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
14c	I was bothered by noise at night from other patients	Disagree; Strongly disagree	Neither agree nor disagree	Strongly agree, Agree
14d	I was bothered by noise at night from hospital staff	Disagree; Strongly disagree	Neither agree nor disagree	Strongly agree, Agree
14e	I was happy with the food/meals I received	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
14f	I was happy with the drinks I received	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
14g	When I called I received assistance within a reasonable time	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
14h	There were times when I felt bothered or threatened by other patients or visitors	Disagree; Strongly disagree	Neither agree nor disagree	Strongly agree; Agree
15	Did you know which nurse was in charge of the ward?	Yes, all or most of the time	Yes, some of the time	No, but I would have liked to know; No, but it didn't bother me
16	Were hand-wash gels available for patients and visitors to use?*	Yes, always	Yes, some of the time	No
18	During your stay, were you happy with the visiting hours?*	Yes	-	No
19	Did you feel you were able to spend enough time with the people that matter to you (e.g. family and friends)?*	Yes, completely	Yes, to some extent	No
20	Overall, how would you rate the hospital and ward environment?	Excellent; Good	Fair	Poor; Very Poor
21a	I was able to get adequate pain relief when I needed it	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree

Question number	Original Question Text	Positive %	Neither positive nor negative	Negative %
21b	I had enough privacy when being examined or treated	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
21c	I had enough privacy when my condition and treatment was discussed	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
21d	I got enough help with washing and dressing when I needed it	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
21e	I got enough help with eating and drinking when I needed it	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
21f	I got enough help with going to the bathroom or toilet when I needed it	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
21g	I was kept as physically comfortable as I could expect to be*	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
22	Were you involved as much as you wanted to be in decisions about your care and treatment?	Yes, definitely	Yes, to some extent	No, and I would have liked to have been
23	Were the people that matter to you (e.g. family & friends) involved in decisions about your care and treatment as much as you wanted?*	Yes, definitely	Yes, to some extent	No, and I would have liked them to be more involved
24	Did you feel that staff took adequate care when carrying out physical procedures? (e.g. injections or blood tests; inserting, checking or removing drips or catheters; moving you)?*	Yes, definitely	Yes, to some extent	No
29	Did a member of staff discuss any of these events with you?*	Yes, completely	Yes, to some extent	No
30	Were you satisfied with how these events were dealt with?*	Yes, completely	Yes, to some extent	No
33	In your opinion, was moving you between wards managed well?	Yes, definitely	Yes, to some extent	No
34	There was enough time to talk to the nurses	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
36	Beforehand, did a member of staff explain the risks and benefits of the operation or procedure in a way you could understand?*	Yes, completely	Yes, to some extent	No

Question number	Original Question Text	Positive %	Neither positive nor negative	Negative %
37	Beforehand, did a member of staff explain what would be done during the operation or procedure?	Yes, completely	Yes, to some extent	No
38	Beforehand, were you told how you could expect to feel after you had the operation or procedure?	Yes, completely	Yes, to some extent	No
39	Beforehand, did a member of staff answer your questions about the operation or procedure in a way you could understand?*	Yes, completely	Yes, to some extent	No
40	After the operation or procedure, did a member of staff explain how it had gone in a way you could understand?	Yes, completely	Yes, to some extent	No
41a	As far as I was aware nurses washed/ cleaned their hands at appropriate times	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
41b	Doctors discussed my condition and treatment with me in a way I could understand	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
41c	Doctors talked in front of me as if I was not there	Disagree; Strongly disagree	Neither agree nor disagree	Strongly agree; Agree
41d	Doctors listened to me if I had any questions or concerns	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
41e	As far as I was aware doctors washed/cleaned their hands at appropriate times	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
41f	I had confidence and trust in the doctors treating me*	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
42a	Nurses knew enough about my condition and treatment	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
42b	Nurses discussed my condition and treatment with me in a way I could understand	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
42c	Nurses talked in front of me as if I was not there	Disagree; Strongly disagree	Neither agree nor disagree	Strongly agree; Agree
42d	Nurses listened to me if I had any questions or concerns.	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
42e	As far as I was aware nurses washed/cleaned their hands at appropriate times	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree

Question number	Original Question Text	Positive %	Neither positive nor negative	Negative %
42f	I had confidence and trust in the nurses treating me*	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
43	Did you know which nurse was in charge of your care?*	Yes, all or most of the time	Yes, some of the time	No, but I would have liked to know; No, but it didn't bother me
44	In your opinion, were there enough nurses on duty to care for you in hospital?*	There were always or nearly always enough nurses	There were sometimes enough nurses	There were rarely or never enough nurses
45	Did you think that the staff worked well together in organising your care?	Yes, definitely	Yes, to some extent	No
46	Did you feel that staff took account of the things that matter to you?*	Yes, definitely	Yes, to some extent	No
47	Did you feel that you got enough emotional support from staff during your stay?*	Yes, always	Yes, sometimes	No
48	Did you feel that staff treated you with compassion and understanding during your stay?*	Yes, always	Yes, sometimes	No
49	Overall, how would you rate all the staff you came into contact with?	Excellent; Good	Fair	Poor; Very Poor
53	How did you feel about the length of time you were in hospital?*	It was reasonable	-	It was too long; It was too short
54*	Were you confident you could look after yourself when you left hospital?	Yes	-	No
55	Before leaving hospital, were you confident that any help you needed had been arranged for you?	Yes, completely	Yes, to some extent	No
56*	If your condition meant you were eligible for hospital transport to take you home, were you happy with how this was arranged?	Yes	-	No
57a	I was involved in decisions about leaving hospital*	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree

Question number	Original Question Text	Positive %	Neither positive nor negative	Negative %
57b	My family or home situation was taken into account when planning for me leaving hospital	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
57c	I knew who to contact if I had any questions after leaving hospital	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
57d	I was told about any danger signs to watch for when I left hospital	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
59a	I didn't have to wait too long to get my medicines	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
59b	I understood what my medicines were for	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
59c	I understood how and when to take my medicines	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
59d	I understood the possible side effects of my medicines	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
60	Overall, how would you rate the arrangements made for your leaving hospital?	Excellent; Good	Fair	Poor; Very Poor
62	Did you have to stay in hospital longer than expected to wait for your care or support services to be organised?	No	-	Yes
63	Did you feel that you got the care and support services that were right for you?	Yes	-	No
64	Overall, how would you rate the care or support services you got after leaving hospital?	Excellent; Good	Fair	Poor; Very Poor
65	Did you see, or were you given, any information explaining how to provide feedback or complain to the hospital about the care you received?*	Yes	-	No

^{*} This is a new question.

The table below lists the demographic and information questions contained within the survey.

Table 9 Classification of demographic and information questions

*This is a new question.

Question number	Original Question Text	Question Type
1	Was your most recent hospital stay planned in advance or an emergency?	Information
2	When you arrived at hospital did you go to the Accident and Emergency Department (A&E)?	Information
17	During your most recent stay in hospital did you have a single room at any time?	Information
25	While you were in hospital, did your condition get worse at any time?*	Information
26_1	During your stay in hospital, if you had a drip or needle in a vein to give you medicines or fluids, did any of the following occur? I didn't have a drip*	Information
26_2	During your stay in hospital, if you had a drip or needle in a vein to give you medicines or fluids, did any of the following occur? I did not feel it was checked regularly enough*	Information
26_3	During your stay in hospital, if you had a drip or needle in a vein to give you medicines or fluids, did any of the following occur? did not feel it was changed when required*	Information
26_4	During your stay in hospital, if you had a drip or needle in a vein to give you medicines or fluids, did any of the following occur? I did not feel it was removed quickly enough*	Information
26_5	During your stay in hospital, if you had a drip or needle in a vein to give you medicines or fluids, did any of the following occur? Don't know / can't remember*	Information
27_1	Did you experience any of the following problems during, or because of, your hospital stay? Infection (e.g. urinary tract infection, surgical wound infection, MRSA, CDiff, etc.)*	Information
27_2	Did you experience any of the following problems during, or because of, your hospital stay? Blood poisoning / sepsis*	Information
27_3	Did you experience any of the following problems during, or because of, your hospital stay? Blood clot (e.g. Deep Vein Thrombosis [DVT], embolism)*	Information
27_4	Did you experience any of the following problems during, or because of, your hospital stay? Bed sore (pressure sore)*	Information
27_5	Did you experience any of the following problems during, or because of, your hospital stay? Injury from falling over*	Information

Question number		Question Type
27_6	Did you experience any of the following problems during, or because of, your hospital stay? Bad reaction to medication*	Information
27_7	Did you experience any of the following problems during, or because of, your hospital stay? Complication from surgery*	Information
27_8	Did you experience any of the following problems during, or because of, your hospital stay? Any other problems*	Information
27_9	Did you experience any of the following problems during, or because of, your hospital stay? None*	Information
28_1	During your most recent hospital stay, did any of the following events occur? Incorrect diagnosis*	Information
28_2	During your most recent hospital stay, did any of the following events occur? Wrong treatment*	Information
28_3	During your most recent hospital stay, did any of the following events occur? Incorrect medicines*	Information
28_4	During your most recent hospital stay, did any of the following events occur? Incorrect doses of medicines*	Information
28_5	During your most recent hospital stay, did any of the following events occur? Delayed or incorrect test results*	Information
28_6	During your most recent hospital stay, did any of the following events occur? None*	Information
31	When you were in hospital, did you move wards?*	Information
32_1	What time did you move wards? Morning / afternoon*	Information
32_2	What time did you move wards? Evening (6pm to 10pm)*	Information
32_3	What time did you move wards? Middle of the night (10pm onwards)*	Information
32_4	What time did you move wards? Don't know / can't remember*	Information
35	During your most recent hospital stay, did you have an operation or procedure?*	Information
50	On the day you left hospital, were you delayed for any reason?*	Information
51	What was the main reason you were delayed?*	Information
52	How long was the delay?*	Information
58	Were you given any medicines to take home when you left hospital?	Information
61	Did you need care or support services to be arranged for when you got out of hospital?	Information

Question number		Question Type
66	Overall (please circle a number)*	Information
68	What was your age last birthday?	Demographic
69	Are you male or female?	Demographic
70	How would you rate your health in general?	Demographic
71_1	Do you have any of the following conditions which have lasted, or are expected to last at least 12 months? A physical disability	Demographic
71_2	Do you have any of the following conditions which have lasted, or are expected to last at least 12 months? Chronic pain lasting at least 3 months*	Demographic
71_3	Do you have any of the following conditions which have lasted, or are expected to last at least 12 months? Another long-term condition	Demographic
71_4	Do you have any of the following conditions which have lasted, or are expected to last at least 12 months? Mental health condition	Demographic
71_5	Do you have any of the following conditions which have lasted, or are expected to last at least 12 months? Deafness or severe hearing impairment	Demographic
71_6	Do you have any of the following conditions which have lasted, or are expected to last at least 12 months? Blindness or severe vision impairment	Demographic
71_7	Do you have any of the following conditions which have lasted, or are expected to last at least 12 months? A learning disability	Demographic
71_8	Do you have any of the following conditions which have lasted, or are expected to last at least 12 months? None of the above*	Demographic
72	Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months? (Include problems related to old age)	Demographic
73	What religion, religious denomination or body do you belong to?	Demographic
74	Which of the following options best describes how you think of yourself? Heterosexual / Straight	Demographic
75	What is your ethnic group?	Demographic
76	Do you need an interpreter or other help to communicate?	Demographic

Question number	Original Question Text	Question Type
77	Do you give your permission for NHS Statisticians to add your survey results to information held about your hospital stay?	Demographic

^{*} This is a new question.

APPENDIX C: SURVEY MATERIALS – COVERING LETTER

Please see next page.

Inpatient Patient Experience Survey

First Name Middle Name Last Name

Address 1

Address 2

Address 3

Address 4

Address 5



Helpline: 0800 7831775 Monday – Friday 9am – 5 pm

Dear First Name Last Name

I would like to invite you to take part in a survey about your **most recent stay** in the NHS Site in NHS Board. We are sending questionnaires to patients to collect their views about their experiences of the care they received. Your feedback is very important so please complete the survey if you can.

The survey is being carried out to help us understand more about the quality of NHS services and what needs to be improved. Results from the survey will be shared with the hospital and NHS Board where you received care, however, all of the answers you provide will be entirely confidential and none of the staff who treated you will know if you responded.

You can complete the survey online at: www.quality-health.co.uk/si14; password:

Alternatively you can complete the enclosed questionnaire and return it in the FREEPOST envelope provided.

You will receive a reminder in a couple of weeks if you have not returned your questionnaire. So if you wish to take part, please respond as quickly as possible to save the cost of sending a reminder. Alternatively, if you do not want to take part, you can opt out by returning the questionnaire blank or by calling the FREEPHONE helpline number below.

If you need more information or have any questions about completing in the survey, please phone our FREEPHONE Survey Helpline on 0800 783 1775. The line is open between 9am and 5pm, Monday to Friday and there is an answerphone at all other times where you can leave a message.

Thank you very much for your time.

Yours sincerely

Chief Executive NHS Board Name



0800 783 1775



0800 028 5695



www.quality-health.co.uk/si14



Some Questions & Answers

What is this survey for?

The survey asks about your experiences of your recent stay in hospital. The information that you give is important because it will help us to understand more about the quality of services, and what needs to be improved. The results of the survey will be published in **late summer 2014 on http://www.scotland.gov.uk/Topics**/Statistics/Browse/Health/InpatientSurvey/inpatients2014.

How do I complete the survey?

You can complete the survey online at www.quality-health.co.uk/si14. Alternatively you can complete the enclosed questionnaire and return it in the FREEPOST envelope provided. Please do not send your questionnaire to your NHS Board. Your responses will be completely confidential and none of the health professionals involved in your care will see them.

I've visited this hospital more than once, which visit should I refer to?

This questionnaire is about an inpatient visit so means that you should have spent one night or more in hospital. If you have had more than one such visit to the hospital named in this letter then please think about your most recent visit.

I was admitted to one hospital but discharged from another?

As far as possible, please answer the questions based on the hospital named in this letter (i.e. the hospital from which you were discharged).

Can someone help me with the survey?

Yes, a relative, friend or carer may help you to fill in the survey, but please remember that all of the answers should be given from your own point of view. If you would prefer, you can give your answers over the phone instead, by calling the FREEPHONE helpline on 0800 783 1775. The person on the phone will need you to tell them the number that is on the front of this letter.

Do I have to answer the survey?

Taking part is voluntary and if you do, you don't have to answer every question. There are several equalities questions which ask about age, gender, disability, ethnicity, religion or belief, sexual orientation. These have been included to help us better understand the experiences of different equality groups but they are entirely voluntary.

If you do not want to receive any more reminders about the survey, please call our FREEPHONE helpline number on 0800 783 1775 or return the questionnaire blank.

How did you get my name and address?

NHS Scotland stores your contact details securely and confidentially under the terms of the Data Protection Act. We picked names **at random** from a database of patients who had a recent overnight stay in hospital. Your contact details have been passed to a patient survey contractor, Quality Health Ltd, only so that they can send you this questionnaire. Quality Health does not have access to information about your medical details and your contact details will be destroyed by the contractor once the survey is completed.

APPENDIX D: SURVEY MATERIALS - FIRST REMINDER

Please see next page.

Inpatient Patient Experience Survey

First Name Middle Name Last Name

Address 1

Address 2

Address 3

Address 4

Address 5

Date

Ref

Dear First Name Middle Name Last Name

We recently sent you a survey about your **most recent stay in the NHS site in NHS Board**. So far, we have not received your completed survey. If you have recently replied, please ignore this letter and I am sorry for contacting you again. If you haven't sent us your survey, we would be very grateful if you could do so if you can as your feedback is important to us.

The findings from this survey will be used to help us understand more about the quality of NHS services and what needs to be improved. Results from the survey will be shared with the hospital and NHS board named on this letter; however, all of the answers you provide will be entirely confidential and none of the staff who treated you will know if you responded.

Please complete the survey online at: www.quality-health.co.uk/si14. Alternatively you can complete the enclosed questionnaire and return it in the FREEPOST envelope provided.

If you have any questions or need help filling in the survey, please call the survey FREEPHONE helpline on XXXX XXX XXXX.

Thank you very much for your time.

Yours sincerely

Chief Executive NHS Board Name



Helpline: 0800 xxx xxxx



0800 XXX XXXX



www.quality-health.co.uk/si14





Some Questions & Answers

What is this survey for?

The survey asks about your experiences of your recent stay in hospital. The information that you give is important because it will help us to understand more about the quality of services, and what needs to be improved. The results of the survey will be published in late summer 2014 on http://www.scotland.gov.uk/Topics/Statistics/Browse/Health/InpatientSurvey/inpatients2014.

How do I complete the survey?

You can complete the survey online at www.quality-health.co.uk/si14. Alternatively you can complete the enclosed questionnaire and return it in the FREEPOST envelope provided. Please do not send your questionnaire to your NHS Board. Your responses will be completely confidential and none of the health professionals involved in your care will see them.

I've visited this hospital more than once, which visit should I refer to?

This questionnaire is about an inpatient visit so means that you should have spent one night or more in hospital. If you have had more than one such visit to the hospital named in this letter then please think about your most recent visit.

I was admitted to one hospital but discharged from another?

As far as possible, please answer the questions based on the hospital named in this letter (i.e. the hospital from which you were discharged).

Can someone help me with the survey?

Yes, a relative, friend or carer may help you to fill in the survey, but please remember that all of the answers should be given from your own point of view. If you would prefer, you can give your answers over the phone instead, by calling the FREEPHONE helpline on XXXX XXXX The person on the phone will need you to tell them the number that is on the front of this letter.

Do I have to answer the survey?

Taking part is voluntary and if you do, you don't have to answer every question. There are several equalities questions which ask about age, gender, disability, ethnicity, religion or belief, sexual orientation. These have been included to help us better understand the experiences of different equality groups but they are entirely voluntary.

If you do not want to receive any more reminders about the survey, please call our FREEPHONE helpline number on XXXX XXXX or return the questionnaire blank.

How did you get my name and address?

NHS Scotland stores your contact details securely and confidentially under the terms of the Data Protection Act. We picked names **at random** from a database of patients who had a recent overnight stay in hospital. Your contact details have been passed to a patient survey contractor, Quality Health Ltd, only so that they can send you this questionnaire. Quality Health does not have access to information about your medical details and your contact details will be destroyed by the contractor once the survey is completed.

APPENDIX E: SURVEY MATERIALS - SECOND REMINDER

Please see next page.

Inpatient Patient Experience Survey

First Name Middle Name Last Name

Address 1

Address 2

Address 3

Address 4

Address 5

Date

Ref

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APPENDIX F: SURVEY MATERIALS – GUIDANCE ON PATIENT COMMENTS

Proofing comments

- ➤ The file will need to be spell checked in the first instance firstly using the spell check facility in excel (ensuring it is on English UK).
- ➤ Each comment must then be thoroughly proof read to correct any further spelling mistakes, typos, issues with punctuation. Do not correct the comment for grammatical errors the comment should be presented as the respondent has written it, even if it is grammatically incorrect. This process must be done carefully and without changing the original context of the comment.
- A key part of the proofing process is to ensure that comments have been properly anonymised to ensure the respondent's identity is protected. This involves removing any personal details or references including any staff / patient / ward / unit names or any other specifically detailed information such as diagnosis or tests or procedures done that could allow the respondent to be identified. Hospital names can be left in unless you are specifically instructed not to include these. This level of anonymisation should have taken place when the comments were first typed and you should see examples of this throughout the file where identifiable details have been removed and replaced with the following types of references - [name removed] / [job title removed] / [details removed]. These references should always appear in square brackets like this [in normal brackets then please replace these with the square brackets for consistency. If you find instances of personal details that have not been successfully removed (unless there are specific instructions to leave them in for the particular survey you are working on), then please remove these details and replace them using the formulation described above. If in doubt, please seek clarification from a manager. Therefore, the following example alternatives should be used using the square brackets shown below:

Identifiable Information	Example of substitution
Mary Jones was in the bay beside me	Patient [name removed] was in the bay beside me
Nurse Smith was very nice	Nurse [name removed] was very nice
Dr I. Smith was very nice	Dr. [initial and name removed] was very nice
I did not like Dr Brown's bedside manner	I did not like Dr [name removed] bedside manner
I work as a male midwife on Trinity Ward	I work as a [job title removed] on Ward [name removed]

My Manager is the Director of Nursing and I have been abused and bullied	My Manager is the [name/title removed] and I have been abused and bullied
Date e.g. 10/05/2013	[date removed]
Mention of correspondence e.g. "official complaint", "letter to NHS Board", "letter to newspaper.	[correspondence removed]
Exact ages e.g. 29, eighteen	[age removed]

- If you cannot identify a word then you can type [word unreadable].
- Any obscenities should be replaced with [obscenity removed].
- You need to enter data in all comments boxes available before you can move to the next survey – for any blank boxes use a full stop.
- Do not use CAPITAL letters.
- reversed letter e.g. "teh" rather than "the" and other typos "i" rather than "I". Amend as necessary.
- When reading each comment in its entirety, it should be 'sense checked' to identify any unusual circumstances, detailed description of events or other very specific detail which could potentially lead to a person being identified. If any such reference is present, it should be removed to protect the identity of the respondent.
- ➤ Any comments which may need escalating under the Duty of Care policy should be immediately raised with a Manager these include examples of respondents talking about allegations of abuse, self-harm, harm to others or suicide.
- ➤ If you are in doubt at all about the application of any of these rules against a specific comment, please ask for a 2nd opinion from a Manager it is always better to check than risk revealing a respondents identity. You will have the final check on this document before it is sent to the client so it is important that these rules are followed thoroughly and carefully to fully protect the identity of all participants.

A NATIONAL STATISTICS PUBLICATION FOR SCOTLAND

The United Kingdom Statistics Authority has designated these statistics as National Statistics, in accordance with the Statistics and Registration Service Act 2007 and signifying compliance with the Code of Practice for Official Statistics.

Designation can be broadly interpreted to mean that the statistics:

- meet identified user needs;
- are well explained and readily accessible;
- · are produced according to sound methods, and
- are managed impartially and objectively in the public interest.

Once statistics have been designated as National Statistics it is a statutory requirement that the Code of Practice shall continue to be observed.

Further information about Official and National Statistics can be found on the UK Statistics Authority website at www.statisticsauthority.gov.uk

SCOTTISH GOVERNMENT STATISTICIAN GROUP

Our Aim

To provide relevant and reliable information, analysis and advice that meet the needs of government, business and the people of Scotland.

For more information on the Statistician Group, please see the Scottish Government website at http://www.gov.scot/Topics/Statistics

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Telephone: 0131 244 2831 or 244 3201

e-mail: patientexperience@scotland.gsi.gov.uk

For general enquiries about Scottish Government statistics please contact:

Office of the Chief Statistician, Telephone: 0131 244 0442,

e-mail: statistics.enquiries@scotland.gsi.gov.uk

Complaints and suggestions

If you are not satisfied with our service or have any comments or suggestions, please write to the Chief Statistician, 3WR, St Andrew's House, Edinburgh, EH1 3DG, Telephone: (0131) 244 0302, e-mail statistics.enquiries@scotland.gsi.gov.uk.

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