



Scottish Inpatient Patient Experience Survey 2012

Volume 2: Technical Report

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1 INTRODUCTION

Introduction

- 1.1 The *Better Together* Scottish Patient Experience Inpatient 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 six specific areas of inpatient experience: admission to hospital; the hospital and ward; care and treatment; 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.
- 1.2 The inpatient survey is administered across all 14 territorial NHS Boards, and the National Waiting Time Centre (NWTC) and provides results for 68 individual hospitals as well nationally for Scotland.
- 1.3 The third Scottish Patient Experience inpatient survey was run in 2012. This report provides technical information on the survey design, sampling, fieldwork and analysis of the 2012 inpatient survey. The latest results are available in the national report at:
<http://www.scotland.gov.uk/inpatientsurveynationalreport>

Better Together: Scottish Patient Experience Programme

- 1.4 *Better Together* is Scotland's Patient Experience Programme, which supports NHS Scotland in developing ways to use patients' experiences to inform service design and planning across the health service to drive improvement.
- 1.5 The *Better Together* 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.
- 1.6 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 *Better Together* 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. The Scottish GP / local NHS services survey also allows patients to comment on community services. Further information on the GP / local NHS services survey can be found at:
<http://www.scotland.gov.uk/Topics/Statistics/Browse/Health/GPPatientExperienceSurvey>.
- 1.7 Further information about the Quality Strategy can be found at:
<http://www.scotland.gov.uk/Topics/Health/NHS-Scotland/NHSQuality>.

1.8 The Better Together Inpatient Experience Survey is jointly supported by Scottish Government, Information Services Division (ISD)¹, NHS Boards and Healthcare Improvement Scotland².

1.9 Further information about the *Better Together* programme can be found at: <http://www.bettertogetherscotland.com>.

Aims of the *Better Together* Inpatient Survey

1.10 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

1.11 The national report is available at: <http://www.scotland.gov.uk/inpatientsurveynationalreport>

1.12 Reports for NHS Boards and individual hospitals are available at: <http://www.patientexperience-bettertogether.scot.nhs.uk/index.html>

1.13 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: <http://www.statisticsauthority.gov.uk/assessment/assessment/assessment-reports/assessment-report-131---statistics-on-scottish-patient-experience.pdf>

1.14 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

Introduction

2.1 This section of the report sets out the range of outputs from the survey. Table 1 provides an overview of these and the following paragraphs sets out further detail on each.

Table 1 Overview of reporting and outputs of inpatient survey

Survey outputs	Publication date
<ul style="list-style-type: none">▪ The National Report containing national results for inpatient survey▪ The Technical report detailing the inpatient survey methodology	28 th August 2012
<ul style="list-style-type: none">▪ NHS Board level reporting	28 th August 2012
<ul style="list-style-type: none">▪ Hospital site level reporting	28 th August 2012

National report

2.2 The national level report was released on the 28th August 2012. 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

2.3 Reports are published for the 14 NHS Boards and NWTC, and for 68 hospitals by the Information Services Division (ISD) and are available at: <http://www.patientexperience-bettertogether.scot.nhs.uk/>

2.4 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.

2.5 The format is the same as the 2011 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).

2.6 Bar charts show the percentage positive as green, and the percentage negative as red. The results are compared with those from last year and the Scottish average. Differences are highlighted if they are statistically significant.

3 CHANGES TO THE SURVEY

Introduction

- 3.1 Following the 2011 survey, a number of changes were made to the survey administration, questionnaire and reporting. Details of these changes are outlined below.
- 3.2 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://scotland.gov.uk/Publications/2010/09/30111425/0>

Changes to the death checks procedures

- 3.3 Improvements were made to the death checking procedures. Previously, NHS Boards were responsible for undertaking their own checks of their sample using information provided by National Records of Scotland (NRS). This year NHS Central Register³ (NHSCR) undertook the death checks centrally.
- 3.4 NHS Boards provided details of their sampled patients to NHSCR. When the contractors were ready to post surveys they contacted NHSCR to request a death check. NHSCR ran death checks overnight and would notify the contractors of any deaths in the morning. The contractor would post the surveys later that day having removed any patients identified as deceased.
- 3.5 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.
- 3.6 The new death checks procedure identified that non-Scottish residents were being sampled contrary to the eligibility criteria. These non-Scottish residents were then excluded from the sample. The survey did cover NHS Borders patients resident in Northumberland. However, it was not possible to carry out sufficiently timely and reliable death checks on these patients so they were excluded from the sample this year. Going forward, various options for death checks for these patients are currently being considered.

Changes to the questionnaire

- 3.7 New questions were introduced to find out about people's experiences of care and support services that they needed arranged before they could leave hospital. The four new questions were:
- Did you need care or support services to be organised for when you got out of hospital?

³ <http://www.gro-scotland.gov.uk/national-health-service-central-register/index.html>

If people answered yes to the first question they were asked the following three questions:

- Did you have to stay in hospital for longer than expected to wait for your care or support services to be organised?
- Did you feel that you got the care or support services that were right for you?
- Overall, how would you rate the care or support services you got after leaving hospital?

3.8 The introduction of the new questions on care and support services led to the addition of a box allowing people to comment on these services.

3.9 The question that asked patients about how long they had to wait to get their medicines was relocated to the section with other questions about medicines. The wording of the question was also changed. In 2011 people were asked how much they agreed with the statement:

- Any medicines I needed before I could go home were given to me in a reasonable time.

In the current survey this was simplified to make it easier for people to answer to:

- I didn't have to wait too long to get my medicines.

3.10 Some of the demographic questions at the end of the questionnaire were shortened or simplified.

3.11 Boxes that allowed patients to write in other answers to the following questions were removed. The reason for this was that analysing the free text took a lot of time and did not result in useful information. For the religion question all of the religions that people wrote in were reclassified into one of the options with a tick box. People with interpretation needs were previously asked what help they required, but it was not possible to analyse this information.

- What religion, religious denomination or body do you belong to?
- Do you need an interpreter or other help to communicate?

3.12 The short form of the ethnicity question was used. This was also used for the patient experience survey of people registered with a GP practice.

Changes to the introductory letter and reminder letters

3.13 The introductory and reminder letters are available in Appendices C-E.

3.14 This year the letters were shortened and simplified to have a format similar to the survey of GP patients which was felt to have worked well. For the previous survey the letter included frequently asked questions within the body of it, but this year they were included on the reverse. This allowed the inclusion of more frequently asked questions and meant the letter could be shortened to only provide the key information about the survey.

Changes to the reporting

- 3.15 The local NHS Board and hospital reports have generally been well received to date. We consulted with staff from individual NHS Boards who are responsible for leading on patient experience work. These users made clear that they were used to the format of the reports and did not want any changes.
- 3.16 One change that was introduced this year was to increase the threshold number of responses from a particular hospital in order for us to publish a report. In previous years, reports were published if 20 or more people responded, but this year this has been increased to 50. The reason for this change was that for reports with a small number of respondents, the results were not sufficiently accurate.
- 3.17 We introduced a change to the threshold for reporting results for individual questions within the reports. For this year the results for individual questions are displayed if there are 30 responses compared to 20 last year.

4 SAMPLE

Introduction

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

Design of sample

- 4.3 The sampling approach for the Better Together Inpatient Survey was designed to meet the needs of each NHS Board and to inform local improvement work as well as to meaningfully compare findings across Boards and provide national level results.
- 4.4 In order to meet these requirements, a stratified sampling strategy was developed through consultation between Analytical Services Division (ASD) within the Scottish Government and each NHS Board.
- 4.5 Sample strata were based on site level (or in the case of some Boards sub-site level). Table 2 provides detail on the number of eligible patients within each NHS Board.

Sampling frame

- 4.6 NHS Boards were responsible for compiling a list of eligible patients from their records in order to finalise the sample for the survey. The survey guidance manual provided advice on doing this along with inclusion and exclusion criteria.
- 4.7 Eligible patients were 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 October 2010 and September 2011.
- 4.8 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;
 - 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;
- Patients shown on hospital / ISD systems as being unable to give consent e.g. having incapacity as set out in the Adults with Incapacity (Scotland) Act 2000;
- 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.

4.9 Based on the selection and exclusion criteria, the total number of inpatients who were eligible to take part in the study was 363,600⁴. Table 2 summarises the total number of eligible inpatients within each NHS Board.

Table 2 Total number of eligible patients within each NHS Board including deceased patients

NHS Board	Inpatient Population
NHS Ayrshire and Arran	41,814
NHS Borders	6,032
NHS Dumfries and Galloway	6,904
NHS Fife	17,891
NHS Forth Valley	15,081
NHS Grampian	36,875
NHS Greater Glasgow and Clyde	88,382
NHS Highland	15,005
NHS Lanarkshire	32,416
NHS Lothian	56,078
NHS National Waiting Times	7,967
NHS Orkney	705
NHS Shetland	1,817
NHS Tayside	34,929
NHS Western Isles	1,704
Total	363,600

⁴ This total includes patients who are deceased. Patients who were known to be deceased were subsequently removed from samples before surveys were sent. The totals excludes NHS patients treated in private hospitals.

Sampling method

- 4.10 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% (increased to +/-7 percentage points in sites with less than 1,000 patients annually to avoid sampling too many patients in smaller sites).
- 4.11 Expected response rates within each NHS Board were calculated based on the response rates achieved by the 2011 Survey. These were used to adjust the required sample size for non-response.
- 4.12 The proportion of inpatients sampled at any hospital was limited to 60%. This avoids surveying too many patients from smaller hospitals, and is done to reduce costs as well as patient burden.
- 4.13 Table 3 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 3 Required sample and total selected sample

NHS Board	Required sample	To allow for non-response	Proportion of inpatients sampled
NHS Ayrshire and Arran	3,847	7,554	18%
NHS Borders	617	1,105	18%
NHS Dumfries and Galloway	1,455	2,608	38%
NHS Fife	1,163	2,487	14%
NHS Forth Valley	729	1,572	10%
NHS Grampian	4,061	7,296	20%
NHS Greater Glasgow and Clyde	8,292	16,254	18%
NHS Highland	3,160	5,645	38%
NHS Lanarkshire	1,233	2,914	9%
NHS Lothian	1,950	3,839	7%
NHS National Waiting Times	696	1,392	17%
NHS Orkney	154	259	37%
NHS Shetland	318	576	32%
NHS Tayside	1,391	2,925	8%
NHS Western Isles	419	706	41%
Total	29,485	57,132	16%

NHS Boards sampling procedures

- 4.14 NHS Boards compiled a list of eligible patients appropriate for inclusion in the inpatient survey using a spreadsheet template provided by the Scottish Government. Detail to support this process was provided in the guidance manual for the inpatient survey as well as via liaison with Scottish Government staff.

- 4.15 Once a list of eligible patients was compiled, checks were undertaken by Boards to ensure that duplications, incomplete records, deceased patients and ineligible patients were not included in final proposed lists of patients.
- 4.16 Once compiled lists were checked and complete, Boards used the “Random” column function in Microsoft Excel to generate a random number between 0 and 1 for each sample record. The final sample was then selected by sorting randomly generated numbers in a random order and selecting the top listed patients by the required number within each stratum.

Sampling checks

- 4.17 In order to ensure that final sample was correct and accurate before survey packs were distributed, NHS Boards sent details of the proposed sample to their contractor who undertook quality assurance checks. For data protection purposes, the contractor did not receive any patient identifiable information – checks required Boards to provide overall profile of the patients in the eligible list and the profile of patients in the random drawn sample. Tables collected inpatient information relating to:
- Gender;
 - Age;
 - Month/year of admission;
 - Month/year of discharge;
 - Length of stay;
 - NHS Board of residence;
 - Hospital site and code; and
 - Specialty code on discharge.
- 4.18 The contractor undertook a review of this anonymised aggregated information to ensure that sample was drawn correctly and that the final proposed sample was broadly representative of each Board’s inpatient populations, with no unexplainable variances.

Data transfer

- 4.19 NHS Boards and Contractors were responsible for ensuring that all data was sent to and from NHS.net (NHSmail service) email accounts. The NHSmail service is a secure service and all information sent is encrypted whilst in transit. In addition, test emails were exchanged prior to sending any data to ensure the NHS.net addresses were correct.
- 4.20 All files were password protected when being transferred and delivery/read receipts were requested to ensure the information was received safely. All emails were kept for audit purposes.
- 4.21 On completion of the survey fieldwork and data capture (described in more detail in Chapters 5 and 6) the complete anonymised data files were sent electronically to ISD. This enabled ISD to undertake analysis for the reporting. In future, ISD will also be able to use the data files to link the survey responses of those patients who had given permission to do so with

other health datasets for the purposes of exploring relationships between patient experience and health outcome.

Access to data

4.22 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

5.1 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

5.2 NHS Boards were responsible for appointing a survey contractor to administer the survey on their behalf. A Better Together Framework Agreement containing a list of approved contractors was developed after a rigorous selection process run by NSS National Procurement. NSS National Procurement undertakes national procurement exercises for the NHS in Scotland.

5.3 NHS Boards used this framework contract to appoint a survey contractor which best met need their local needs and requirements. Ultimately for the 2012 survey process, across the 14 NHS Boards and the National Waiting Times Centre Board, two contractors were appointed, Quality Health and Patient Perspective. Ten NHS Boards contracted Quality Health while five appointed Patient Perspective.

5.4 Scottish Government staff provided day-to-day support for the administration of the survey to NHS Boards and contractors 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.

5.5 Contractors carried out the fieldwork element of the inpatient survey, organising the mail out of survey packs, sending weekly monitoring updates to the NHS Board and the Scottish Government, issuing reminders, input and quality assurance of data and sending completed datasets to ISD.

5.6 The fieldwork commenced on a rolling basis on the 26th January 2012. In total 55,231 survey packs were initially posted out in batches between 26th January 2012 and 27th February 2012 by the contractors on behalf of each NHS Board. The survey pack contained the following:

- Introductory / Cover letter;
- Better Together Patient Survey;
- A language sheet;
- Information leaflet; and
- FREEPOST envelope in which to return the survey.

5.7 The front page of the survey provided information on how to complete the survey and directed respondents to a helpline number and website.

- 5.8 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.
- 5.9 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.
- 5.10 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.
- 5.11 Reminder letters were sent out twice during the duration of fieldwork at two week intervals to further encourage participation in the study. The initial reminder was sent in batches between 20th February 2012 and 21st March 2012 to all patients who did not respond to the first mailing. The first reminder pack consisted of a letter requesting the potential respondent to complete the questionnaire previously sent in the original survey pack.
- 5.12 A second reminder was sent out in batches between 13th March 2012 and 11th April 2012. 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.
- 5.13 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.
- 5.14 The survey closed on 30th April 2012. In total, 55,231 survey packs were sent to patients and 28,709 were returned, giving an overall response rate of 52%.
- 5.15 During the fieldwork, a freephone helpline was made available to respond to queries from patients' surveys. Approximately 1,750 telephone enquiries were received.

⁵ <http://www.gro-scotland.gov.uk/national-health-service-central-register/index.html>

6 DATA ENTRY AND FIELDWORK QUALITY CONTROL

Introduction

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

Data entry and coding

- 6.3 Contractors were responsible for data entry and quality assurance of data collected during the Inpatient Survey.
- 6.4 Prior to fieldwork commencing, a datafile template was sent by the Scottish Government to each 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, each contractor used their own internal processes to undertake data entry and coding of the responses.
- 6.5 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.
- 6.6 For questions where a written comment could be provided, guidance was provided to contractors on how to code these answers (see Appendix F). Questions which contained options for respondents to provide a written answer and approaches to coding these answers are summarised below:
- Q30a – Q30f “If there is anything else you would like to tell us about your experience in hospital please write your comment below: (a) Your experience of admission to hospital, (b) Your experience of the hospital and ward, (c) Your experience of care and treatment, (d) Your experience of staff, (e) Your experience of leaving hospital; (f) Your experience of care and support services after leaving hospital.
- 6.7 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.
- 6.8 Contractors were 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

- 6.9 Once data had been collected and input into the required datafile format, contractors were able to establish a raw final datafile containing all survey information including double answers and routing errors.
- 6.10 In addition to producing a raw datafile containing all information collected during fieldwork, contractors were 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.
- 6.11 Once a raw and clean datafile had been developed by each contractor, files were transferred to ISD where final merging of contractor files took place prior to final analysis of data.

Quality assurance processes

- 6.12 Throughout the data entry process and prior to datafiles being sent to ISD, contractors were required to undertake data checks on data entered into final datafiles.
- 6.13 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

- 6.14 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

7.1 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

7.2 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, 55,231 surveys were sent to patients and 28,709⁶ were returned completed, giving an overall response rate of 52 per cent.

Respondent burden

7.3 The survey is short and should only take respondents 15 minutes to complete. The total burden as defined by (number of responses) * (time taken to respond) is 7,177 hours.

Response analysis

7.4 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; and
- The respondent gave an invalid response to the question, for example they ticked more than one box where only one answer could be accepted.

⁶ A total of 28,782 patients responded to the survey, however 73 of these respondents were treated within private hospitals. Core analysis is based on 28,709 patients treated within NHS hospital sites.

7.5 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

7.6 The highest response rate for an NHS Board was the National Waiting Times Centre (75%) and the lowest response rate was for Forth Valley (46%).

Table 4 Response rate by NHS Board⁷

NHS Board	Total forms sent out	Number of Responses	Response Rate	Expected Response Rate
Ayrshire and Arran	7,296	3,706	51%	52%
Borders	874	513	59%	53%
Dumfries and Galloway	2,551	1,502	59%	54%
Fife	2,399	1,183	49%	49%
Forth Valley	1,500	690	46%	47%
Grampian	7,152	3,932	55%	56%
Greater Glasgow and Clyde	15,819	7,740	49%	51%
Highland	5,585	3,063	55%	55%
Lanarkshire	2,843	1,307	46%	46%
Lothian	3,596	1,822	51%	49%
Orkney	257	146	57%	60%
Shetland	570	278	49%	53%
Tayside	2,741	1,448	53%	49%
Western Isles	668	347	52%	56%
National Waiting Times	1,380	1,032	75%	76%
Total	55,231	28,709	52%	52%

7.7 Of the 28,709 respondents, 28,000 sent their surveys back in the post, 598 completed their survey online and the remaining 111 completed the survey using the telephone helpline.

Non response

Deaths

7.8 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 dead.

7.9 Before the questionnaires were initially sent, 839 people were identified as deceased by NHSCR checks and removed from the sample. Prior to the first and second reminders, NHSCR checks identified 305 and 271 people as deceased respectively and they were not sent reminders.

⁷ This table excludes the surveys sent to patients treated in private hospitals

7.10 During the fieldwork period 47 people contacted the contractors by phone or post to inform the contractor that the person sent a survey had died, compared to 234 last year. This indicates that the new process for death checks has been a significant improvement.

Undeliverable

7.11 A total of 1,142 (2%) questionnaires were returned to the contractors as undelivered. The sample was drawn 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 home during the period after leaving hospital and the survey being distributed.

Returned blank

7.12 A total of 1,778 (3%) 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

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

Weighting the data

- 8.3 As the sampling was based on a stratified approach, weighting was applied to ensure that sample was reflective of the overall number of inpatients who were eligible to take part in the survey.
- 8.4 Estimates for Scotland and NHS Boards are weighted. Weighted results are calculated by weighting the result for each strata 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.
- 8.5 There are other ways that the data could be weighted using the differences in the characteristics of those sampled. However based on ethical approvals for the survey, only the contractors had access to the demographic characteristics of the sample for performing the sample checks. This meant that weighting could not take into account differences in the characteristics of those sampled and those who responded.
- 8.6 The English inpatient survey gives equal weight to all NHS trusts when calculating national results. Equal weighting has not been given to NHS Boards. 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.
- 8.7 Results provided within the Better Together inpatient survey national report use weighted data unless otherwise stated.

Percentage positive and negative

- 8.8 As described in paragraph 2.5, percentage positive is frequently used in the reporting which means the percentage of people who answered in a positive way. If people said they strongly agreed or agreed these 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.
- 8.9 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.

Significance tests

- 8.10 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).
- 8.11 The survey used a disproportionately stratified (by site or sub-site specialty level) sample design with weights applied to estimate national averages. As described in 8.13, one of the effects of using stratification and weighting is that standard errors for survey estimates are generally higher than the standard errors that would be derived from an unweighted simple random sample of the same size. The calculations of standard error and comments on statistical significance have taken the weighting and stratification into account.
- 8.12 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

- 8.13 One of the effects of using stratification and weighting is that standard errors (measure of sampling error) for survey estimates are generally higher than the standard errors that would be derived from an unweighted simple random sample of the same size.
- 8.14 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.

- 8.15 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.
- 8.16 The standard errors used for tests for statistical significance take into account the design effects.

Inclusions and Exclusions

- 8.17 The national results exclude the 125 NHS patients treated in a private hospital, of which 73 responded.
- 8.18 The reports for individual boards excluded NHS patients treated in a private hospital. National Waiting Times Centre (Golden Jubilee hospital) patients who answered “Yes” to question 2 had their responses treated as invalid and their response to questions 3, 4, 5 and 16 were suppressed because this hospital has no A&E, HDU or ICU.
- 8.19 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.
- 8.20 For the hospital reports, results for the A&E section have not been shown for hospitals without an A&E department or a minor injury unit.⁸

Analysis

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

Scotland Performs Healthcare Experience Indicator

- 8.23 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.scotland.gov.uk/About/scotPerforms>.

⁸ A&E results are shown for the Western General in Edinburgh. Although it doesn't have an A&E it does have an acute receiving unit.

- 8.24 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.
- 8.25 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 but before you were taken to the ward)?
 - Overall, how would you rate the care and treatment you received during your time in the Emergency Department / Accident and Emergency?
 - Overall, how would you rate the hospital environment?
 - Overall, how would you rate your care and treatment during your stay in hospital?
 - Overall, how would you rate all the staff who you came into contact with?
 - Overall, how would you rate the arrangements made for you leaving hospital?
- 8.26 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.
- 8.27 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 5).

Table 5 Example of how an individual patient's answers are converted into a score for the Healthcare Experience Indicator

Question	Very poor (0) Poor (25) Fair (50) Good (75) Excellent (100)					Score
Q5 Overall, how would you rate the care and treatment you received during your time in A&E?						-
Q10 Overall how would you rate your admission to hospital?				✓		75
Q13 Overall, how would you rate the hospital environment?				✓		75
Q17 Overall, how would you rate your care and treatment during your stay in hospital?					✓	100
Q21 Overall, how would you rate all the staff who you came into contact with?					✓	100
Q24 Overall, how would you rate the arrangements made for you leaving hospital?					✓	100
Patient Score =	(75+75+100+100+100)/5 =					90

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

Quality Outcome Indicator

8.29 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 Patient Experience Survey of GP and other local NHS services.

8.30 The indicator is calculated by taking the mean of the Scotland Performs Healthcare Experience Indicator and an indicator using data a survey of people registered with a GP practice. The latest value of the Healthcare Experience Quality Outcome Indicator is based on the 2012 Inpatient Survey and the 2011/12 Patient Experience Survey of GP and other local NHS services⁹.

8.31 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 Experience Indicator, the score for each question for each

⁹ [Patient experience survey of GP and other local NHS Services 2011-12](#)

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?
- 8.32 The analysis was done using the SAS procedure proc surveymeans which calculates sampling errors of estimators based on complex sample designs.
- 8.33 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

- 8.34 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.
- 8.35 Although the contractors had access to the demographic characteristics of the sample for performing the sample checks, unfortunately we did not have access to this information. This means that we do not know if the survey respondents have different characteristics to those that did not respond, but there is evidence that they do. From the GP Patient 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 tend to be less positive about their experiences and women tend to be less positive). 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.
- 8.36 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.
- 8.37 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

- 8.38 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%.
- 8.39 When comparisons have been made, the effects of sampling error are taken into account by 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

- 8.40 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.
- 8.41 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 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.
- 8.42 These other sources of bias should not affect comparisons between years.
- 8.43 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 an annual inpatient population of 705 at the time of the survey, whereas NHS Greater Glasgow and Clyde as a large board has 16 hospitals with an inpatient population of 88,382. 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.

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. **Your answers will be confidential and will not be shared with the health professionals who looked after you.**

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



If you would prefer, you can complete this survey online at

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 is easy to answer and takes 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:

Yes

No

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



Complete by phone
0800 xxx xxxxx

XXXXXXXXXXXXXXXXXXXX

This reference number is for admin purposes only.

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

Q1 Was your most recent hospital stay planned in advance or an emergency?

*Please tick **ONE** box only*

- Emergency or urgent → **Go to Q2**
 Waiting list or planned in advance → **Go to Q6**

Q2 When you arrived at hospital did you go to the Accident and Emergency Department (A & E)? *Please tick **ONE** box only*

- Yes → **Go to Q3**
 No → **Go to Q8**
 Don't know → **Go to Q8**

How much do you agree or disagree with each of the following about the A&E?

Q3 In A&E I was told how long I would have to wait

*Please tick **ONE** box only*

- Strongly agree
 Agree
 Neither agree nor disagree
 Disagree
 Strongly disagree
 Not relevant
 Don't know

Q4 In A&E I was told what was happening in a way I could understand

*Please tick **ONE** box only*

- Strongly agree
 Agree
 Neither agree nor disagree
 Disagree
 Strongly disagree
 Not relevant
 Don't know

Q5 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
 Very Poor

→ **Now go to Q8**

Waiting List and Planned In Advanced Patients

Q6 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?

*Please tick **ONE** box only*

- It was reasonable
 It was too short
 It was too long

Q7 Did the information you were given before attending hospital help you understand what would happen?

*Please tick **ONE** box only*

- Yes, a lot
 Yes, a little
 No, not at all
 I wasn't given any information
 Don't know

All Patients (planned in advance or emergency)

Q8 Were you transferred to or from another hospital?

*Please tick **ONE** box only*

- Yes
 No
 Don't know

Q9 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?

*Please tick **ONE** box only*

- It was reasonable
 It was too long
 I did not have to wait

Q10 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)

*Please tick **ONE** box only*

- Excellent
 Good
 Fair
 Poor
 Very Poor

Section 2: The hospital and ward – your most recent hospital stay

Q11 How much do you agree or disagree with each of the following about your stay in hospital?

Please tick **ONE** box on each line

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Not relevant	Don't know
The main ward or room I stayed in was clean	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
The bathrooms and toilets were clean	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
I was bothered by noise at night	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
I was bothered by noise during the day	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
I was happy with the food and drink that I received	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
When I called I received assistance within a reasonable time	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
There were times when I felt bothered or threatened by other patients or visitors	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
I knew who was in charge of the ward	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7

Q12 During your most recent stay in hospital did you share a room or bay with members of the opposite sex?

Please tick **ONE** box only

1 Yes

2 No

Q13 Overall, how would you rate the hospital environment?

Please tick **ONE** box only

1 Excellent

2 Good

3 Fair

4 Poor

5 Very Poor

Section 3: Care and treatment – your most recent hospital stay

Q14 How much do you agree or disagree with each of the following about your care and treatment during your stay in hospital?

Please tick **ONE** box on each line

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Not relevant	Don't know
I was able to get adequate pain relief when I needed it	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
I had privacy when being examined or treated	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
I had privacy when my condition and treatment was discussed	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
I got help with washing and dressing when I needed it	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
I got help with eating and drinking when I needed it	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
I got help with going to the bathroom or toilet when I needed it	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
Before moving wards, a member of staff explained what would happen	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
Moving wards was well managed	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7

Q15 How did you feel about being involved in decisions about your care and treatment?

- 1 I was involved more than I wanted to be
 2 I was involved as much as I wanted to be
 3 I was not involved enough

Q16 When you were in hospital were you in a High Dependency Unit (HDU) or Intensive Care Unit? (ICU)

- 1 Yes
 2 No
 7 Don't know

Q17 Overall, how would you rate your care and treatment during your stay in hospital?

Please tick **ONE** box only

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

Section 4: Staff – your most recent hospital stay

Q18 How much do you agree or disagree with each of the following when you think of the doctors who you came into contact with? **If you were not in contact with a doctor go to question 19.**

Please tick **ONE** box on each line

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Not relevant	Don't know
Doctors introduced themselves to me	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
There was enough time to talk to the doctors	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
Doctors knew enough about my condition and treatment	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
Doctors explained the risks and benefits of any treatment in a way I could understand	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
Doctors talked in a way that helped me understand my condition and treatment	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
Doctors gave me clear explanations about any operations and procedures (e.g. what would happen, how I could expect to feel)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
Doctors told me how my operation or procedure had gone in a way I could understand	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
Doctors talked in front of me as if I was not there	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
Doctors listened to me if I had any questions or concerns	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
As far as I was aware doctors washed/ cleaned their hands at appropriate times	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7

Q19 How much do you agree or disagree with each of the following when you think of the nurses who you came into contact with? **If you were not in contact with a nurse go to question 20.**

Please tick **ONE** box on each line

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Not relevant	Don't know
Nurses introduced themselves to me	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
There was enough time to talk to the nurses	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
Nurses knew enough about my condition and treatment	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
Nurses talked in a way that helped me understand my condition and treatment	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
Nurses gave me clear explanations about any operations and procedures (e.g. what would happen, how I could expect to feel)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
Nurses talked in front of me as if I was not there	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
Nurses listened to me if I had any questions or concerns	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
As far as I was aware nurses washed/cleaned their hands at appropriate times	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7

Q20 How much do you agree or disagree that staff worked well together in organising your care?

Please tick **ONE** box only

- 1 Strongly agree
- 2 Agree
- 3 Neither agree nor disagree
- 4 Disagree
- 5 Strongly disagree

Q21 Overall, how would you rate all the staff who you came into contact with?

Please tick **ONE** box only

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

Section 5: Leaving hospital – your most recent hospital stay

Q22 How much do you agree or disagree with each of the following when you think about what happened when you were leaving hospital?

Please tick **ONE** box on each line

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Not relevant	Don't know
My family or home situation was taken into account when planning for me leaving hospital	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
I was happy with how long I had to wait around when I was told I could go home	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
I was given help with arranging transport	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
I understood who to contact if I had any questions after leaving hospital	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
I was told about any danger signals to watch for when I got home	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
I was given advice on how to look after myself	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
I was confident that any help I needed had been arranged for when I left hospital	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7

Q23 Were you given any medicines to take when you left the hospital?

No → Go to **Q24**

Yes → How much would you agree or disagree with following about your medicines?

Please tick **ONE** box on each line

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
I didn't have to wait too long to get my medicines	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
I understood what my medicines were for	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
I understood how and when to take my medicines	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
I understood the possible side effects and what to do if I had any concerns	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

Q24

Overall, how would you rate the arrangements made for you leaving hospital?

Please tick **ONE** box only

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

Section 6: After leaving hospital – your most recent hospital stay

The next few questions ask about care and support services that you needed to be 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.

Q25

Did you need **care or support services** to be organised for when you got out of hospital?

Please tick **ONE** box only

- 1 No → Go to **Q29**
- 2 Yes → Go to **Q26**

Q26

Did you have to stay in hospital for longer than expected to wait for your care or support services to be organised?

Please tick **ONE** box only

- 1 No
- 2 Yes

Q27

Did you feel that you got the care or support services that were right for you?

Please tick **ONE** box only

- 1 No
- 2 Yes

Q28

Overall, how would you rate the care or support services you got after leaving hospital?

Please tick **ONE** box only

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

Section 7: Overall experience of your most recent hospital stay

Q29 How much do you agree or disagree that each of the following happened during your stay in hospital?

Please tick **ONE** box on each line

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
I was treated with respect	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
I was treated with care	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
I got the best treatment for my condition	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
I trusted the people looking after me	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
I understood what was happening to me	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
I was as physically comfortable as I could expect to be	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
My religious and spiritual needs were respected	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
I was confident I could look after myself when I left hospital	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

Section 8: Other comments about your experiences of your hospital stay

Q30 If there is anything else you would like to tell us about your experience in hospital please write your comments below.

Your experience of admission to hospital	
Your experience of the hospital and ward	
Your experience of care and treatment	
Your experience of staff	
Your experience of leaving hospital	
Your experience of care and support services after leaving hospital	

Section 9: 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 hospital you attended will be able to see your answers. **If you would prefer not to answer a particular question then you should skip it and go to the next question.**

Q31 What was your age last birthday?

Q32 Are you male or female?
*Please tick **ONE** box only*

- Male
 Female

Q33 How would you rate your **health** in general? *Please tick **ONE** box only*

- Good
 Fair
 Poor

Q34 Do you have any of the following conditions which have lasted, or are expected to last at least 12 months?

*Please tick **ALL** that apply*

- Deafness or partial hearing loss
 Blindness or partial sight loss
 Learning disability (for example, Down's Syndrome)
 Learning difficulty (for example, dyslexia)
 Developmental disorder (for example, Autistic Spectrum Disorder or Asperger's Syndrome)
 Physical disability
 Mental health condition
 Long-term illness, disease or condition

Q35 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) *Please tick **ONE** box*

- Yes, limited a lot
 Yes, limited a little
 No

Q36 What **religion**, religious denomination or body do you belong to?
*Please tick **ONE** box only*

- None
 Church of Scotland
 Roman Catholic
 Other Christian
 Muslim
 Buddhist
 Sikh
 Jewish
 Hindu
 Pagan
 Another religion (non-Christian)

Q37 Which of the following options best describes how you think of yourself?
*Please tick **ONE** box only*

- Heterosexual / Straight
 Gay / Lesbian
 Bisexual
 Other

Q38 Do you need an **interpreter** or other **help to communicate**?
*Please tick **ONE** box only*

- No
 Yes

Q39 What is your **ethnic group**?
Tick ONE box which best describes your ethnic group

- ¹ White
- ² Mixed or multiple ethnic groups
- ³ Asian, Asian Scottish or Asian British
- ⁴ African, Caribbean or Black
- ⁵ Other ethnic group

NHS Statisticians hold information about your stay in hospital e.g. how long you were in hospital and reason for attending. We would like your permission to add your survey results to this information. Your information will be used only for research and will not identify you individually.

If you give your permission to add your survey results to this information it will not be shared with the people who looked after you and will in no way affect your current or future treatment or care.

Q40 Do you give your permission for NHS Statisticians to add your survey results to information held about your hospital stay?
Please tick ONE box only

- ¹ Yes
- ² No

Q41 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?
Please tick ONE box only

- ¹ Yes, I would like to take part in any future research
- ² No, I would not like to take part in any future research

**Thank you for answering these questions.
Please return this survey to FREEPOST, in the envelope
provided.**

APPENDIX B: STATEMENT OF TABLE EXPLANATIONS

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

* This is a new question.

Question number	Original Question Text	Positive %	Neither positive nor negative %	Negative %
3	In A&E I was told how long I would have to wait	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
4	In A&E I was told what was happening in a way I could understand	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
5	Overall, how would you rate the care and treatment you received during your time in A&E?	Excellent, good	Fair	Poor, very poor
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
7	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
9	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, I did not have to wait	-	It was too long
10	Overall, how would you rate your admission to hospital?	Excellent, good	Fair	Poor, Very Poor
11a	The main ward or room I stayed in was clean	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
11b	The bathrooms and toilets were clean	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
11c	I was bothered by noise at night	Disagree, Strongly disagree	Neither agree nor disagree	Strongly agree, Agree

Question number	Original Question Text	Positive %	Neither positive nor	Negative %
11d	I was bothered by noise during the day	Disagree, Strongly disagree	Neither agree nor disagree	Strongly agree, Agree
11e	I was happy with the food and drink that I received	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
11f	When I called I received assistance within a reasonable time	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
11g	There were times when I felt bothered or threatened by other patients or visitors	Disagree, Strongly disagree	Neither agree nor disagree	Strongly agree, Agree
11h	I knew who was in charge of the ward	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
13	Overall, how would you rate the hospital environment	Excellent, good	Fair	Poor, very poor
14a	I was able to get adequate pain relief when I needed it	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
14b	I had privacy when being examined or treated	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
14c	I had privacy when my condition and treatment was discussed	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
14d	I got help with washing and dressing when I needed it	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
14e	I got help with eating and drinking when I needed it	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
14f	I got help with going to the bathroom or toilet when I needed it.	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
14g	Before moving wards, a member of staff explained what would happen	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
14h	Moving wards was well managed	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
15	How did you feel about being involved in decisions about your care and treatment	I was involved as much as I wanted to be		I was involved more than I wanted to be, I was not involved enough

Question number	Original Question Text	Positive %	Neither positive nor	Negative %
17	Overall how would you rate your care and treatment during your stay in hospital	Excellent, Good	Fair	Poor, Very Poor
18a	Doctors introduced themselves to me.	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
18b	There was enough time to talk to the doctors	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
18c	Doctors knew enough about my condition and treatment	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
18d	Doctors explained the risks and benefits of any treatment in a way I could understand	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
18e	Doctors talked in a way that helped me understand my condition and treatment	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
18f	Doctors gave me clear explanations about my operations and procedures (e.g. what would happen, how I could expect to feel)	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
18g	Doctors told me how my operation or procedure had gone in a way I could understand	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
18h	Doctors talked in front of me as if I was not there.	Disagree, Strongly disagree	Neither agree nor disagree	Strongly agree, Agree
18i	Doctors listened to me if I had any questions or concerns	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
18j	As far as I was aware doctors washed/ cleaned their hands at appropriate times	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
19a	Nurses introduced themselves to me.	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
19b	There was enough time to talk to the nurses	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree

Question number	Original Question Text	Positive %	Neither positive nor	Negative %
19c	Nurses knew enough about my condition and treatment	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
19d	Nurses talked in a way that helped me understand my condition and treatment	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
19e	Nurses gave me clear explanations about my operations and procedures (e.g. what would happen, how I could expect to feel)	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
19f	Nurses talked in front of me as if I was not there.	Disagree, Strongly disagree	Neither agree nor disagree	Strongly agree, Agree
19g	Nurses listened to me if I had any concerns	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
19h	As far as I was aware nurses washed/ cleaned their hands at appropriate times	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
20	How much do you agree or disagree that staff worked well together in organising your care?	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
21	Overall, how would you rate all the staff who you came into contact with?	Excellent, Good	Fair	Poor, Very Poor
22a	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
22b	I was happy with how long I had to wait around when I was told I could go home	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
22c	I was given help with arranging transport	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
22d	I understood who to contact if I had any questions after leaving hospital	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
22e	I was told about any danger signals to watch for when I got home	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree

Question number	Original Question Text	Positive %	Neither positive nor	Negative %
22f	I was given advice on how to look after myself.	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
22g	I was confident that any help I needed had been arranged for when I left hospital.	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
23b	I didn't have to wait too long to get my medicines*	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
23c	I understood what my medicines were for	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
23d	I understood how and when to take my medicines	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
23e	I understood the possible side effects and what to do if I had any concerns	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
24	Overall, how would you rate the arrangements made for you leaving hospital?	Excellent, good	Fair	Poor, Very poor
26	Did you have to stay in hospital for longer than expected to wait for your care or support services to be organised?*	No	-	Yes
27	Did you feel that you got the care or support services that were right for you?*	Yes	-	No
28	Overall, how would you rate the care or support services you got after leaving hospital?*	Excellent, good	Fair	Poor, Very poor
29a	I was treated with respect	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
29b	I was treated with care	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
29c	I got the best treatment for my condition	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
29d	I trusted the people looking after me	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree

Question number	Original Question Text	Positive %	Neither positive nor	Negative %
29e	I understood what was happening to me	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
29f	I was as physically comfortable as I could expect to be	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
29g	My religious and spiritual needs were respected	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree
29h	I was confident I could look after myself when I left hospital	Strongly agree, Agree	Neither agree nor disagree	Disagree, Strongly disagree

* This is a new question.



Inpatient Patient Experience Survey

www.bettertogetherscotland.com

Title First Name Second Name
Address 1
Address 2
Address 3
Address 4
Address 5

Date

Ref

Dear Title Second 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**. It is important that we get the opinions of as many people as possible, so please take a few minutes to complete the survey if you can.

The findings from this survey will be used to help us understand the views and experiences of patients. We will use this information to help us to improve NHS services. None of the staff who treated you will know if you respond, and all answers you provide will be **entirely confidential**.

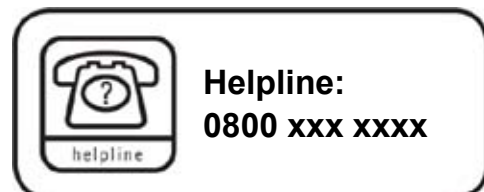
If you have any questions or need help filling in the survey, please phone our FREEPHONE survey helpline on XXXX XXX XXXX.

Please return your completed survey in the FREEPOST envelope provided (or you can complete it online at « www.addressTBC.co.uk »).

Thank you very much for your time.

Yours sincerely

Chief Executive
NHS Board Name



0800 XXX XXXX



www.addressTBC.co.uk



Please turn over for
more information



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 2012 on www.bettertogetherscotland.com

How did you get my name and address?

NHSScotland 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 [survey contractor], only so that they can send you this questionnaire. [Survey contractor] 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.

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 questionnaire based on the hospital named in this letter (ie 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 XXX 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?

No, taking part is voluntary, and you don't have to answer every question if you don't want to. Please fill in as much as you can though, because the more that people answer, the more we can understand about the different experiences of people across Scotland. If you do not want to receive any more reminders about the survey, please call our FREEPHONE helpline number on XXXX XXX XXXX.

Why is NHSScotland spending money on a survey?

It is important for the NHS to collect the views of the people that use its services. This survey has been specially developed to ensure that it asks questions which matter to patients.

What is Better Together?

Better Together is Scotland's Patient Experience Programme, using the public's experiences of NHSScotland to improve health services



Inpatient Patient Experience Survey

www.bettertogetherscotland.com

Title First Name Second Name
Address 1
Address 2
Address 3
Address 4
Address 5

Date

Ref

Dear Title Second 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 would. It is important that we get the opinions of as many people as possible, so please take a few minutes to complete the survey if you can.

The findings from this survey will be used to help us understand the views and experiences of patients. We will use this information to help us to improve NHS services. None of the staff who treated you will know if you respond, and all answers you provide will be **entirely confidential**.

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0800 XXX XXXX



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more information



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What if I have lost my survey?

If you've lost your survey, please call the helpline number on XXXX XXX XXXX and we will send you a new one. If we do not hear anything from you within two weeks, we will send you another survey and a Freepost envelope. After that we will make sure that we do not contact you again.

How did you get my name and address?

NHSScotland 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 [survey contractor], only so that they can send you this questionnaire. [Survey contractor] 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.

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 questionnaire based on the hospital named in this letter (ie the hospital from which you were discharged).

Can someone help me with the survey?

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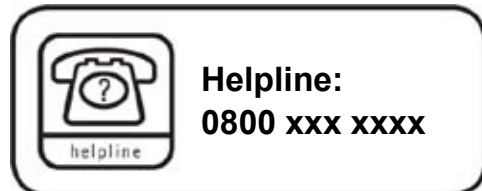
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Yours sincerely

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NHS Board Name



0800 XXX XXXX



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I was admitted to one hospital but discharged from another?

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

Can someone help me with the survey?

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APPENDIX F: SURVEY MATERIALS – GUIDANCE ON PATIENT COMMENTS

Better Together Inpatient Survey 2012 Open Text Data Entry and Sanitisation Rules

Type in comment exactly as it appears on the questionnaire in lower case e.g. "The doctor was helpful" (do not use CAPITALS) for each part of question 30 separately (30a, 30b, 30c, 30d, 30e and 30f)

Check the spelling of the text which has been typed in. Be particularly careful of reversed letter e.g. "teh" rather than "the" and other typos "i" rather than "I". Amend as necessary

Identify if any of the following are in the text and replace with the brackets:

- Names of people e.g. "Mr Brown", "Glenda", "Nurse Smith" - [name removed]
- Exact ages e.g. 29, eighteen - [age removed]
- Address (e.g. patient address) – [address removed]

Check 1 in every 100 comments as follows:

- Someone who has not done the data entry should check that the rules above have been applied.
- Amend if necessary and retrain.

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 www.scotland.gov.uk/statistics

Correspondence and enquiries

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