

NHS ADULT INPATIENT SURVEY 2019

SURVEY DEVELOPMENT REPORT

Last updated: March 2020

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1. Background

The NHS Adult Inpatient Survey was first undertaken by all acute NHS trusts¹ in England in 2002, and has been carried out on an annual basis since 2004. In 2018, 144 acute trusts took part, 76,668 people returned a completed questionnaire and the average response rate across all trusts was 45%. In 2019 the survey is being conducted again as part of the NHS Patient Survey Programme (NPSP), giving acute trusts information on inpatient care to facilitate targeted quality improvement.

Data collected from the 2019 Inpatient Survey will be used by the Care Quality Commission (CQC) in its assessment of trusts in England. The results are also used by NHS England and the Department of Health and Social Care for performance assessment, improvement and regulatory purposes, with compound measures such as the NHS Outcomes Framework (Domain 4: Ensuring patients have a positive experience), or the NHS England Overall Patient Experience Score (OPES). The data also constitute a National Statistic on patient experience in the NHS. Results from this survey (and any other patient experience collections) may be used by NHS trusts as evidence of adherence to NICE Quality Standards and used in Quality Accounts.

The overall methodology of the 2019 Inpatient Survey is as per the previous year, with trusts submitting a sample of 1,250 recent patients who had an overnight stay (consecutive discharges from end of July 2019, or for trusts with lower throughput, working back through earlier months until the required sample size is reached). As is standard practice, the questionnaire was reviewed for the 2019 survey, highlighting questions for inclusion or removal. Amendments were made following performance analysis of the previous year's questionnaire and stakeholder consultation:

- Consultation with stakeholders at CQC and NHS England regarding any topics that should be addressed either from a policy or patient perspective;
- Analysis of the 2018 survey data to examine item non-response i.e. questions that were not answered but were applicable to the respondent;
- Analysis of the 2018 survey data to examine ceiling or floor effects i.e. when the vast majority of respondents report a very positive or negative experience;
- Analysis of the 2018 survey data to examine statistical correlations to identify any
 questions that respondents tend to answer in the same way, which could be indicative of
 a similar or the same underlying concept.

Changes to the questionnaire are presented in details below and the full 2019 questionnaire is included in <u>Appendix A</u>.

This research was carried out in accordance with the international standard for organisations conducting social research (accreditation to ISO20252:2012; certificate number GB08/74322).

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¹ Those trusts that only treat children (Alder Hey Children's NHS Foundation Trust, Birmingham Children's Hospital NHS Foundation Trust, Great Ormond Street Hospital NHS Trust and Sheffield Children's NHS Trust) were not eligible for participation.

2. Cognitive Testing

Following consultation a questionnaire was drafted for testing with people who had recently stayed overnight as an inpatient in an NHS hospital. This cognitive testing phase is employed to test questionnaire items with lay people to check if the instructions, questions and response options are understood as intended.

Participants are asked to complete the questionnaire as they normally would. The interviewer observes the responses that the participant makes and periodically asks questions such as whether the question was easy to answer, what their circumstances were and what they were thinking about when considering their answer. The interviewer also pays attention to whether the respondent hesitates when answering certain questions, and whether instructions were read and followed correctly.

The interviewees were recruited via a range of mechanisms, including advertisements on Twitter, on Gumtree across multiple geographical locations across the midlands, south east and south-west and via Daily Info, an online and print newssheet published weekly in the Oxford. In addition, contacts were made with several NHS trusts for assistance with promoting the recruitment via their own media channels and through the display of posters.

A diverse mix of participants was recruited to capture a range of experiences (see Table 1):

- Gender 9 males, 9 females;
- Age ranging from 21 to 71 (4 18-35's, 6 36-50's, 4 51-65's, 2 66-80's, 2 unknowns);
- Ethnicity 9 White British, 1 White German, 1 Pakistani, 2 Black Caribbean, 1 Black African, 1 White & Black Caribbean, 1 Indian;
- Route of admission 11 emergency; 6 planned;
- Long-term condition 12 with one or more long-term conditions, 4 with no conditions,
 2 unknowns.

Volunteers were given £25 in 'Love2shop' or Amazon vouchers for the one hour interview as a thank you.

Table 1. Demographics of participants*

Interview	Gender	Age	Ethnicity	Admission	Long-term condition
number				Туре	
Round 1					
1	Male	30	Pakistani	Emergency	Mental health condition
2	Female	60	White British	Planned	-
3	Female	46	White German	Planned	Autoimmune condition
4	Male	24	Black Caribbean	Emergency	None
5	Male	36	White British	Emergency	Asthma
6	Female	-	-	-	-
Round 2					
1	Female	66	White British	Planned	Joint problem
2	Female	59	White British	Emergency	Breathing problem; cancer; joint
					problem; mental health
					condition
3	Male	-	-	Planned	Cancer
4	Female	71	White British	Emergency	Joint problem
5	Male	43	White British	Planned	None
6	Female	46	White British	Emergency	Deafness; mental health
					condition; neurological condition
Round 3					
1	Female	55	White British	Emergency	Mental health condition
2	Male	62	White British	Planned	Joint problem; neurological
					condition; other
3	Male	21	White & Black	Emergency	Mental health condition
			Caribbean		
4	Female	42	Indian	Emergency	None
5	Male	48	Black African	Emergency	None
6	Male	33	Black Caribbean	Emergency	Heart problem; mental health
	1-1-11				condition

^{*}Demographic details could not be captured in some instances due to worries around confidentiality or due to time constraints

Interviews were conducted during April and May 2019 in Oxford, Chipping Norton, Reading, Birmingham, Bristol, Somerset, and inner & outer London. After each round, findings were analysed and recommendations discussed with CQC, with additional input from NHSE. The final questionnaire can be found in <u>Appendix A</u> with changes highlighted in yellow. <u>Appendix B</u> summarises the changes made to the 2018 questionnaire in developing the questionnaire for 2019.

3. Changes to the questionnaire

3.1. Summary of changes

Following analysis of the performance of question items in the 2018 questionnaire, consultation and subsequent cognitive testing with recent inpatients, a number of changes were made to the questionnaire: one question was added and four questions were modified. No questions were removed. The front page of the questionnaire was also changed, instructions updated and colour added throughout. The 2019 questionnaire has 82 questions plus three final free-text questions. It is twelve-pages long as before and completion time is estimated at 20 minutes.

3.2. Question added

'Frailty' question

One question was added to the questionnaire, its purpose being to give an assessment of the frailty of respondents. The question is a key focus for NHS England and was taken from the national GP Patient Survey:

in the last twelve months? (apply)	_
Problems with your phy such as difficulty gettin home	
Two or more falls that he medical attention	nave needed
₃ ☐ Feeling isolated from o	thers
₄ ☐ None of these	

77 Have you experienced any of the following

It is anticipated that people who have issues with frailty will report different experiences than those who do not. As such, responses to the question will be used as part of the multivariate analysis that is conducted, along with responses to the other demographic questions.

During cognitive testing, the question tested well overall and was unchanged across all rounds of testing and into the final questionnaire. Participants generally were able to interpret what the response options meant, however it was not universally liked: two participants in Round 1 and one in Round 2 could not grasp what the question was getting at. Additionally, one participant in Round 3 did not like the question and felt it was more relevant to older people. The participant did not answer 'none of these' but skipped the question completely. This is something to be mindful of when receiving the final data and assessing performance of the question for the next iteration.

3.3. Questions modified

Four questions had amondments made to them.

roul questions had amendments made to them.
Q12 – 'changing wards at night'
12. Did you change wards at night?
 Yes, but I would have preferred not to → Go to 13
2 ☐ Yes, but I did not mind → Go to 13
3 ☐ No → Go to 14
The words 'at night' were made bold following a query from one participation of the control of t

The words 'at night' were made bold following a query from one participant during Round 3 of cognitive testing who asked whether they should answer 'yes' to this question as they were moved after 24 hours of arrival, though it was during the day. Putting the words in bold was intended to emphasise that the question was only asking about changes that occurred at night.

Q51 – 'main reason for delay at discharge'

	Vhat was the MAIN reason for the delay? Cross ONE box only)
1	☐ I had to wait for medicines
2	☐ I had to wait to see the doctor
3	☐ I had to wait for hospital transport
4	☐ Something else

The third response option was 'I had to wait for an ambulance' in the 2018 questionnaire. This was changed to 'I had to wait for hospital transport' as it is possible that in previous iterations of the survey, people may have selected 'something else' as they waited for hospital transport but which was not an ambulance. The change was introduced to Round 1 and kept for all rounds and into the final questionnaire. Only one participant chose this response option however, in combination with 'I had to wait for medicines'. When pressed to choose one answer they responded that they would answer 'medicines' as the wait for those impacted on everything else.

Q66 – 'care and support after discharge'

66.	After being discharged, was the care and support you expected available when you needed it?
1	Yes
2	No No
3	I did not expect any further care or support after I was discharged

Question 66 had 'After being discharged...' added to the beginning of the question. The question appears in a section titled 'Leaving Hospital' and so the questions in the section are about the discharge process and aftercare. The section is long however, and the title does not appear on the double-page of the booklet where the question appears, therefore providing no reference point. It was found during cognitive testing that some participants were confused as to what point in time the question was asking about, with some answering in relation to the time they were on the ward.

In Round 1, when asked, one participant said that they were referring to their time when in hospital receiving treatment; another said that this question was asking both about their time in hospital and after leaving. The question was carried unchanged into Round 2 to test further

During Round 2 of testing, one participant first answered 'Yes' before then scribbling that out when they then saw the third option and answered 'I did not expect any further care or support after I was discharged'. They stated that they were responding initially to their time when in hospital and it was only when they saw the third option that they surmised the question must be referencing the period after leaving hospital. A second respondent during this round was referencing their experience on the hospital ward rather than post-discharge. This person answered both 'yes' and 'no', explaining that they received the care and support they needed when on the first ward but did not receive this when they were moved to the second ward. 'After being discharged...' was added to the question going into Round 3 to add clarity. The question was understood well by participants in Round 3 with no participants mentioning their time in hospital.

Q80 – 'year of birth'

In all the surveys within the NPSP, respondents are asked their year of birth. Four boxes are included for people to write in their year of birth in 'YYYY' format, with an example given above this.

80. What was your year of birth?

(Please write in) e.g. 1 9 3 4

The example year is 1934, meaning that the example age given is 85 – clearly at the upper end of the age range. Given that the survey is open to adults aged 16 or over, this example was thought to be potentially quite alienating for younger recipients. This is a particular concern since people up to the age of 35 are under-represented in the survey and was brought up at the advisory group for the Community Mental Health Survey. The example year was changed to 1964 as a 'middling' choice and the change was carried across to this survey from Round 2 following on from that recommendation.

Additionally, while the 'YYYY' are in pale grey on the online document, when printed out the letters appeared dark and obscured any date participants wrote in (three participants wrote their year of birth under the boxes). Therefore the "YYYY" were removed from the box and they were left empty.

Rounds 2 & 3: Q80 'year of birth'

80. What was your year of birth?

(Please write in)			е.	g.	1	9	6	4
								i

4. Questions tested but not included

'Carers' question'

An additional question was taken from the GP Patient Survey for testing and asked about participants' carer responsibilities. The question taken into Round 1 was:

Round 1: 'carer responsibility'

78.	 Do you look after, or give any suppor help to family members, friends, neighbours or others because of either 						
	•	Long-term physical or mental ill health / disability, or					
	•	Problems related to old age?					
		count anything you do as part of paid employment					
1	1 Yes						
2	₂ No						

One participant remarked that the question was asking whether they were a carer for someone, though could not understand why the question asked not to include anything done as part of paid employment. Another participant felt that only physical support would count, despite the first response option referencing mental health. The question was taken unchanged into Round 2 (aside from the instruction being changed to blue font in line with all instructions in the questionnaire being changed in this round) to gather further evidence around what 'support' meant to people:

Round 2: 'carer responsibility'

- 78. Do you look after, or give any support or help to family members, friends, neighbours or others because of either:
 - Long-term physical or mental ill health / disability, or
 - Problems related to old age?

Don't count anything you do as part of your paid employment

1	Yes
2	No

In Round 2, one person read the question and initially thought it was going to be asking about support given to them. It was only when they read the instruction not to include anything they do as part of their paid employment that they realised it was asking about support they gave to others. They suggested instead that the word 'their' at the end of the question, rather than 'either'. The suggestion was carried forward to Round 3.

Another participant answered 'yes' to the question and referenced looking after both their mother and father but the interviewer ascertained that this was not a current responsibility.

A third participant did not like the question, saying that it did not belong in the 'About you' section as it had nothing to do with patient experience.

The question does not include a time reference whereas other questions in the section (the two long-term condition questions and the new 'frailty' question) all reference 'in the last twelve months'. As the question was intended to measure carer responsibilities at the time

they were in hospital – which may not be current responsibilities– the question was changed with 'Around the time of your most recent hospital stay...' added.

Round 3: 'carer responsibility'

- 78. Around the time of your most recent hospital stay, were you responsible for looking after, giving support to, or helping family members, friends, neighbours or others because of their:
 - Long-term physical or mental ill health / disability, or
 - · Problems related to old age?

Don't count anything you do as part of your paid employment

	Yes
)	No

In Round 3 of testing, one participant was confused and did not answer the question. While they were ill in hospital their child still had to be taken to and from school and so on, and so their illness did impact on others.

A second participant read the question three times before answering but was still confused by it. They guessed it was asking 'something about being a carer' but that the question was too long to understand properly.

A third respondent in Round 3 did not answer and queried why they would be expected to look after someone else when they were sick.

Across all rounds, the question proved too confusing and was not taken forward to the final questionnaire. The question appears to be asking something about carers but includes too many clauses and so is difficult for people to assimilate and answer confidently. For some, the question is confusing while some question its relevance in this questionnaire.

5. Questions for further review

The Survey Coordination Centre for Existing Methods (SCCEM) and CQC agreed that there are some questions requiring further testing for future iterations of the survey.

Q1-Q5 – admission to hospital

The first set of questions presented at Round 1 are as per the image below: respondents are first asked whether their most recent hospital stay was 'planned' or an 'emergency' (or 'something else'). From this, they are then directed either to Question 2 in the 'The Accident & Emergency Department' section or to Question 5 in the 'Waiting List or Planned Admission' section. Throughout cognitive testing, multiple amendments were made to this section to aid comprehension. Amendments are discussed below.

Round 1 – 'admission to hospital'

Please remember, this questionnaire is about your most recent stay at the hospital named in the accompanying letter.			EMERGENCY & URGENTLY ADMITTED PATIENTS, now please go to Question 9
	ADMISSION TO HOS	PITAL	
1.	Was your most recent hospital stay planned in advance or an emergency? , □ Emergency or urgent → Go to 2		WAITING LIST & PLANNED ADMISSION PATIENTS, please continue to Question 5
	2 Waiting list or planned in	advance → Go to 5	WAITING LIST OR PLANNED ADMISSION
	3 Something else	→ Go to 2	When you were referred to see a specialist, were you offered a choice of hospital for your first hospital
	THE ACCIDENT & EME	RGENCY	appointment?
	DEPARTMENT	•	₁ ☐ Yes
2.	When you arrived at the hose go to the A&E Department (a		2 No, but I would have liked a choice
	the Emergency Department, Medical or Surgical Admission	Casualty,	₃ No, but I did not mind
	₁ ☐ Yes	→ Go to 3	4 Don't know / can't remember
	₂ ☐ No	→ Go to 5	How do you feel about the length of time you were on the waiting list before your
3.	While you were in the A&E Department,		admission to hospital?
	how much information about or treatment was given to yo		I was admitted as soon as I thought was necessary
	Not enough		₂ ☐ I should have been admitted a bit
	2 Right amount		sooner
	3 Too much		3 I should have been admitted a lot sooner
	I was not given any informy treatment or condition		Was your admission date changed by the
	5 Don't know / can't remen	mber	hospital?
	14/		₁ □ No
4.	Were you given enough private being examined or treated in Department?		₂ ☐ Yes, once
	Yes, definitely		yes, 2 or 3 times
	2 Yes, delimitely		4 Yes, 4 times or more
	₃ □ No		
	▲ □ Don't know / can't remen	mber	

Results from round 1 of cognitive testing found issues with the placement of routing instructions. This issue occurs partly because most people are right-handed and when filling in the questionnaire their hand covers the routing instructions. The same issue was observed in the development of UEC18 and as a result the routing instructions were placed closer to the response options, rather than all being aligned at the same position to the right.

Moreover, some participants overlooked important instructions. The instructions at the top of the second column were missed by two participants and, when asked, one participant said they would expect instructions to be next to the question. Ahead of round 2, instructions were changed to blue and additional routing instructions were added next to Question 4. In addition, the instruction above 'Waiting list & planned admission patients' was removed and a short instruction was added below the question title instead.

Round 2 – 'admission to hospital'

Please remember, this questionnaire is about your most recent stay at the hospital named in the accompanying letter. ADMISSION TO HOSPITAL	EMERGENCY & URGENTLY ADMITTED PATIENTS - go to Question 9		
 Was your most recent hospital stay planned in advance or an emergency? 	WAITING LIST OR PLANNED ADMISSION		
□ Emergency or urgent → Go to 2	This section should be completed if you		
2 ☐ Waiting list or planned in advance → Go to 5	answered 'Waiting list or planned in advance' at Question 1		
₃ ☐ Something else → Go to 2	 When you were referred to see a specialist, were you offered a choice of hospital for your first hospital appointment? 		
THE ACCIDENT & EMERGENCY			
DEPARTMENT	₁ ☐ Yes		
When you arrived at the hospital, did you go to the A&E Department (also known as	2 No, but I would have liked a choice		
the Emergency Department, Casualty, Medical or Surgical Admissions unit)?	3 No, but I did not mind		
_	4 Don't know / can't remember		
₁ ☐ Yes → Go to 3			
₂ □ No → Go to 5	How do you feel about the length of tir you were on the waiting list before you admission to hospital?		
While you were in the A&E Department, how much information about your condition or treatment was given to you?	I was admitted as soon as I thought was necessary		
₁ ☐ Not enough	2 I should have been admitted a bit sooner		
2 Right amount	_		
3 Too much	₃ ☐ I should have been admitted a lot sooner		
 I was not given any information about my treatment or condition 	Was your admission date changed by the		
5 Don't know / can't remember	hospital?		
	1 No		
4. Were you given enough privacy when	2 ☐ Yes, once		
being examined or treated in the A&E Department?	₃ ☐ Yes, 2 or 3 times		
, ☐ Yes, definitely → Go to 9	₄ ☐ Yes, 4 times or more		
2 ☐ Yes, to some extent → Go to 9			
₃ □ No → Go to 9			
□ Don't know / can't remember			
→ Go to 9			

Results from round 2 found that the instructions and routing were clearer and easier to follow highlighted in blue.

Following Round 2, it was decided to keep the routing instructions at Q4 as these were thought to be helpful. The small instruction below the 'waiting list or planned admission' header was removed however and instead replaced as a large instruction at the top of the second column.

Please remember, this questionnaire is about your most recent stay at the hospital named in the accompanying letter. EMERGENCY & URGENTLY ADMITTED PATIENTS - go to Question 9 ADMISSION TO HOSPITAL 1. Was your most recent hospital stay planned in advance or an emergency? WAITING LIST & PLANNED ADMISSION PATIENTS - go to Question 5 1 ☐ Emergency or urgent → Go to 2 2 Waiting list or planned in advance WAITING LIST OR PLANNED s ☐ Something else → Go to 2 ADMISSION 5. When you were referred to see a THE ACCIDENT & EMERGENCY specialist, were you offered a choice of hospital for your first hospital **DEPARTMENT** appointment? 2. When you arrived at the hospital, did you go to the A&E Department (also known as the Emergency Department, Casualty, Medical or Surgical Admissions unit)? 2 No. but I would have liked a choice Yes → Go to 3 No but I did not mind. 2 ☐ No → Go to 5 4 Don't know / can't remember 3. While you were in the A&E Department 6. How do you feel about the length of time how much information about your condition you were on the waiting list before your or treatment was given to you? admission to hospital? ₁ ☐ Not enough 1 I was admitted as soon as I thought 2 Right amount 2 I should have been admitted a bit ↓ I was not given any information about my treatment or condition 3 I should have been admitted a lot 5 Don't know / can't remember 7. Was your admission date changed by the Were you given enough privacy when being examined or treated in the A&E hospital? , □ No 2 Yes, once Yes, definitely → Go to 9 3 Yes, 2 or 3 times yes to some extent → Go to 9. 4 Yes, 4 times or more ■ No.
■ Go to 9 4 Don't know / can't remember

Results from round 3, highlighted that participants sometimes struggled to categorise their admission at Question 1, resulting in confusion at following sections. One participant had a scheduled, but urgent, admission and so was hesitant at Question 1 to identify whether their admission was planned in advance or an emergency.

Another participant identified themselves as an emergency case as they went to the GP and then sent straight to hospital directly from the GP. They struggled to answer Question 2, however, as they did not think they had attended A&E or any of those listed as examples. The respondent did answer questions Q3 and Q4 (about emergency admissions) correctly as they had been an emergency admission rather than planned.

Furthermore, a participant answered 'something else' at Question 1 and then 'no' at Question 2. Their reasoning was that it was an emergency but they did not go via A&E, which is how they interpreted the response at Question 1. This was the correct interpretation, but they problematically missed the two large routing instructions at the top of column 2 because they followed the routing instruction at Question 2.

Another respondent followed the instruction before Question 1 which asks respondents to think about their 'most recent' stay. They initially chose 'waiting list or planned in advance' at

Question 1 and went on to answer the questions within the 'waiting list or planned admission' section. When the interviewer asked what the circumstances of the admission were, it became clear that the participant was answering with a recent outpatient appointment in mind. This highlights that many people who have had an inpatient stay will have a subsequent outpatient appointment. As a result, in the final questionnaire, the front page of the questionnaire, the instruction before Question 1 and the covering letter text were all updated to highlight that the questionnaire was in reference to their most recent overnight stay.

Post-cognitive testing amendment

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

Overall, results from all three rounds of cognitive testing, has proven the first page of questions to be quite challenging for some people in terms of how they have been routed to certain questions. It is of particular importance that opening questions are simple and easy to follow to avoid dropout. While clear improvements were made to these sections during cognitive testing, there is some further development required for the opening questions and how people are routed through the questionnaire. Any changes would have required further testing and so amendments were kept to a minimum so as not to impact the survey.

Q59 - 'information about medicines'

The questionnaire includes a long-standing question around the provision of written or printed information about new medicines. One person in Round 1 responded 'no' as the information was on the printed leaflet inside the box and they were not 'given' this, while another responded 'yes, completely' as the information was in the box. In Round 2, a participant referred to an A4 printout by the hospital and a participant in Round 3 referred to a form that has their medications information, medical history and his diagnosis on it.

The question should be considered for revision next year to clarify what format the information should be.

59. Were you given clear written or printed information about your medicines?

¹ ☐ Yes, completely
² ☐ Yes, to some extent
³ ☐ No
⁴ ☐ I did not need this
⁵ ☐ Don't know / can't remember

Rounds 1, 2 & 3 – 'information about medicines'

Q60 - 'danger signals'

A long-standing question about 'danger signals' was included in Round 1, however two participants misconstrued the meaning of the question to some degree. The first responded that they were told to rest at home and avoid alcohol while the second spoke about the possibility that the medication given to them could cause a heart attack.

Round 1: Q60 'danger signals'

60.	Did a member of staff tell you about any danger signals you should watch for after you went home?
1	☐ Yes, completely
2	Yes, to some extent
3	No No
4	☐ It was not necessary

The question also caused confusion in the cognitive testing phase of the Urgent & Emergency Care Survey 2018 (UEC18) and so the question was changed to:

Round 2: Q60 'danger signals'

Round 2. Qou danger signals
60. Did a member of staff tell you about what symptoms to watch for regarding your illness or treatment after you went home?
₁ ☐ Yes, completely
$_{2}$ \square Yes, to some extent
₃ □ No
₄ ☐ It was not necessary
Note that the fourth response option is 'I did not need this type of information' in UEC18 in keeping with the terminology in the rest of that questionnaire, while 'It was not necessary' is a standard response in the Inpatient questionnaire.
The question tested better in Round 2, with people mentioning symptoms such as bruising, deep vein thrombosis, shortness of breath and a racing heart as things they were told to watch out for.
The question reverted back to the original going into Round 3 however as it was felt that it could not be changed due to this question contributing to a metric within an Overall Patient Experience Score (OPES) under the 'Safe, high quality, coordinated care' domain.
Since three out of twelve participants were confused by the question or had misconstrued it is recommended that this question is reviewed going into the next iteration of the survey.
Q69 – 'research study'
A question on whether people had been invited to take part in a research study was carried across from the Inpatient 2018 questionnaire:
Rounds 1-3: Q60 'research study'
69. During this hospital stay, did anyone discuss with you whether you would like to take part in a research study?
$_{\scriptscriptstyle 1}$ \square Yes, and I agreed to take part
² Yes, but I did not want to take part
₃ □ No
Don't know / can't remember

The first participant in Round 1 found this question irrelevant as it was not in relation to his condition or treatment and said that they would not want to answer it. When probed, the participant thought that it was referring to 'a medical study'.

In Round 2, a participant queried whether the question included the cognitive testing interview they were taking part in at the time. Another person thought that it was not referring to clinical trials, but 'research'.

In Round 3, a participant said that they were answering in relation to 'a study like this one' (i.e. the cognitive testing interview) rather than any clinical research, while another participant asked the interviewer if it meant the questionnaire they were completing during the cognitive interview.

Clearly the term 'research study' means different things to different people and, if it is to be included in future surveys, needs to be reworded to clarify whether it is referring to feedback forms, questionnaires, clinical studies etc.

Q83 - 'ethnicity'

As per other recent phases of cognitive testing across other surveys, participants commented upon the ethnicity question. The layout of the question causes confusion amongst participants. For example, a couple of participants crossed 'White – British' then continued to read down the list (this is observed frequently during cognitive interviews). Participants also commented that it does not look like one. Another participant, without being asked to comment on this question, highlighted the term 'Gypsy', saying that this was an outmoded term.

However, as part of the harmonised questions of the Government Statistical Service, it allows to collect data in similar format as other surveys and would therefore not be considered for revision

83	What is your ethnic group? (Cross ONE box only)
a.	WHITE Description: The property of the proper
	Gypsy or Irish Traveller Any other White background, write in
b.	MIXED / MULTIPLE ETHNIC GROUPS MIXED / MULTIPLE ETHNIC GROUPS White and Black Caribbean White and Black African White and Asian Any other Mixed / multiple ethnic
c.	ASIAN / ASIAN BRITISH
	10 ☐ Pakistani 11 ☐ Bangladeshi 12 ☐ Chinese 13 ☐ Any other Asian background, write in
d.	BLACK / AFRICAN / CARIBBEAN / BLACK BRITISH African Caribbean Any other Black / African / Caribbear
e.	DTHER ETHNIC GROUP Arab Any other ethnic group, write in

Changes to the design of patient-facing materials

6.1. Redesigned questionnaire

It became evident during cognitive testing that some participants did not read the front page and others did not follow the routing correctly and had to be directed. Similar issues were found in the development of UEC18 and so learnings from that were carried across to this questionnaire.

Colour was added to make key elements stand out: instructions were made blue including routing instructions next to each question. The front page was redesigned separating the information around what the survey is about and some instructions removed.

Round 1 - front page





INPATIENT QUESTIONNAIRE

What is the survey about?

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

Who should complete the questionnaire?

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

Completing the questionnaire

For each question please cross 🗵 clearly inside one box using a black or blue pen. For some questions you will be instructed that you may cross more than one box.

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

Don't worry if you make a mistake; simply fill in the box ■ and put a cross 🏿 in the

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

Questions or help?

If you have any queries about the questionnaire, please call our helpline number:

<Insert helpline number here>

Taking part in this survey is voluntary. Your answers will be treated in confidence.

The reference to the stay was clarified and the word "inpatient" further explained by adding the mention 'This would have been when you had to stay overnight in hospital' in the introduction, below the questionnaire title.





Inpatient Questionnaire

This questionnaire is about your most recent experience as an inpatient at the NHS hospital named in the letter enclosed with this questionnaire. This would have been when you had to stay overnight in hospital.

What you tell us is confidential and taking part is voluntary.

WHO SHOULD COMPLETE THE QUESTIONNAIRE?

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

WHAT TO DO

Put a cross X clearly inside one box using a black or blue pen.

If you make a mistake, just fill in the box ■and put a cross ☒ in the correct box.

If you cannot answer a question, or do not want to answer it, just leave it blank and go to the next question.

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

When you have filled in as much as you can, please return it in the Freepost envelope provided.

NEED MORE HELP?

For help completing the questionnaire, please call the survey helpline on <insert helpline number here>

If you have concerns about the care you or others have received please contact the Care Quality Commission (CQC) on 03000 61 61 61.

6.2. Redesigned covering letters

Some changes were made to the covering letters as follows:

- Following on from the clarification that was added to the questionnaire, an explanation was added to the letters outlining what is meant by the term 'inpatient'.
- In line with what is now done as standard on other surveys within the programme, the full signatory (i.e. the full name and title of the trust Chief Executive) was added to mailing two.
- Toned down the black font as per other surveys.
- Made the blue font and box the same shade as in the questionnaire.

In addition, the content of the second covering letter (reminder) was changed significantly as the version used for the 2018 survey was taken from a pilot study, results from which suggested that the second letter was not motivating.

The covering letters can be found in Appendix C.

7. Other changes to patient-facing materials

7.1. No CQC flyer

The inclusion of the CQC flyer was tested as part of the Community Mental Health Survey 2018 pilot. It was found that its inclusion offered no measurable increase in response, with findings also suggesting its inclusion could have a detrimental impact on response from 18-35 year olds (who are under-represented in the survey). The findings led to the CQC flyer no longer being included in survey packs across any of the surveys within the programme.

8. Changes to the methodology and design of guidance materials

As part of the development work for the 2019 iteration of the Inpatient Survey, the Survey Coordination Centre for Existing Methods underwent a sampling review exercise involving interviews with approved contractors and NHS Trusts. Two phases were implemented, the first phase interviewed contractors to identify how the sampling materials could be improved and where learnings from the 2018 iteration of the survey could be applied. Updated sampling materials were then drafted based on the findings highlighted in phase 1 and were then distributed in the 2019 iteration of the Inpatients Survey. Phase 2 commenced after samples had been submitted and approved, where twelve NHS trust staff members (responsible for drawing or checking the samples) were recruited for semi-structured interviews to capture their comments of the updated sampling materials.

In addition to the specific feedback stated below, phase 1 interviews recommended that all sampling materials were published at the same time rather than the staggered approach adopted in previous iterations. In the 2019 iteration, all sampling materials were distributed at the same time.

8.1. Sampling instructions

Feedback from phase 1 was that the document was not written from the perspective of the person drawing the sample and relied somewhat on assumed knowledge – proving difficult for new staff members at NHS trusts to follow. The order of instructions felt out of place with sections going from compiling a list of patients, to the dissent posters, then back to patient eligibility. Trusts also acknowledged that while repetition is there to demonstrate the importance of an instruction, complicated or technical instructions only need to be stated once.

As a result of the findings in phase 1, the 'Sampling instructions' were reworked for the 2019 iteration. The instructions were reordered so that members drawing the sample did not have to go back and forth, allowing for a smoother sample preparation process. Based on feedback that some instructions were not clear, clarifications were also included in the redesign of the sampling instructions, for example, that Treatment Function Code must be the code applied on discharge, not admission. Additionally, a new section was added 'Checks done on the sample data', to help clarify the next steps involved in the process once the sample has been submitted – highlighting the importance of this process and the types of queries trusts are likely to receive from contractors or the SCCEM while checks are underway. Further feedback from phase 2 suggested this section would be better moved further up at the sample drawing stage rather than at the end.

8.2. Survey handbook

Similarly, following phase 1 the 'Survey handbook' was overhauled with the content being reordered to better follow the sampling process and three distinct sections were created: 'Survey requirements', 'Changes to the survey for 2019' and 'Managing the survey'. The sample submission and checking escalation strategy was also detailed with key dates so

trusts were aware of what would happen if deadlines were not met. When reviewed with trusts in phase 2, it was suggested most trusts do not read the full handbook and only look out for changes from the previous iteration or read certain sections. It has been suggested section 3 'Compiling a list of patients' and section 4 'Submitting your sample file' should be moved to the sampling instructions where they would be better suited.

8.3. Sample declaration form

Feedback from phase 1 was that for some trusts the 'Sample declaration form' was somewhat of a 'tick box' exercise. There are multiple checks that the person drawing the sample must either respond to by indicating a tick or N/A from the drop down list next to each check. Contractors commented that the form often requires them to go back to trusts for further information, particularly if the sample drawer has said that the check does not apply to their trust. It was suggested that providing an example in the form might encourage trusts to provide further information.

In the updated form, trusts were asked to provide more information in general comments that might affect the comparability of the trust's sample to the previous year. The following example was provided: 'Example: 'The trust underwent a merger in November 2018 and so the throughput of inpatients at the trust has nearly doubled. Due to this our sample discharge dates only go back to mid-July, whereas previously we needed to sample back to June in order to reach the required sample size. The make-up of our inpatient population has also changed somewhat, therefore the distribution of treatment function codes assigned on discharge will be slightly different to previous years'.

In the first check which asks trusts to confirm that the sample consists of consecutive discharges, the example given was: 'Example: 'Confirmed - our discharge dates for the sample range from 31st July to 11th July'.

Findings from phase 2, suggested completion of the form raises no issues instead it is the ease of getting the Caldicott Guardian to sign the form which can be problematic. In the 2019 iteration, a note was added into the sampling instructions providing advance warning that the Caldicott Guardian would be required to sign the form. However, it was felt this message was somewhat hidden and they should be copied into all communications regarding the sampling process going forward to ensure they are aware early on.

9. Further information

All survey materials for the Inpatient Survey 2019 and its previous iterations can be viewed on our website. Data and reports will be published in summer 2020.

Appendix A: 2019 questionnaire with changes highlighted





Inpatient Questionnaire

This questionnaire is about your most recent experience as an inpatient at the NHS hospital named in the letter enclosed with this questionnaire. This would have been when you had to stay overnight in hospital.

What you tell us is confidential and taking part is voluntary.

WHO SHOULD COMPLETE THE QUESTIONNAIRE?

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

WHAT TO DO

Put a cross
clearly inside one box using a black or blue pen.

If you make a mistake, just fill in the box ■and put a cross 🖾 in the correct box.

If you cannot answer a question, or do not want to answer it, just leave it blank and go to the next question.

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

When you have filled in as much as you can, please return it in the Freepost envelope provided.

NEED MORE HELP?

For help completing the questionnaire, please call the survey helpline on <insert helpline number here>

If you have concerns about the care you or others have received please contact the Care Quality Commission (CQC) on 03000 61 61.

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Page 1

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

ADMISSION TO HOSPITAL

1.	Was your most recent hospital stay planned in advance or an emergency?
	☐ Emergency or urgent → Go to 2
	2 ☐ Waiting list or planned in advance → Go to 5
	₃ ☐ Something else → Go to 2
	THE ACCIDENT & EMERGENCY DEPARTMENT
2.	When you arrived at the hospital, did you go to the A&E Department (also known as the Emergency Department, Casualty, Medical or Surgical Admissions unit)?
	₁ ☐ Yes → Go to 3
	2 ☐ No → Go to 5
3.	While you were in the A&E Department, how much information about your condition or treatment was given to you?
	₁ ☐ Not enough
	2 Right amount
	₃ ☐ Too much
	^₄ □ I was not given any information about my treatment or condition
	₅ ☐ Don't know / can't remember
4.	Were you given enough privacy when being examined or treated in the A&E Department?
	₁ ☐ Yes, definitely → Go to 9
	² ☐ Yes, to some extent → Go to 9
	₃ ☐ No → Go to 9
	4 ☐ Don't know / can't remember → Go to 9
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EMERGENCY & URGENTLY ADMITTED PATIENTS - go to Question 9

WAITING LIST & PLANNED ADMISSION PATIENTS - go to Question 5

WAITING LIST OR PLANNED ADMISSION

5.	When you were referred to see a specialist, were you offered a choice of hospital for your first hospital appointment?
	₁ ☐ Yes
	$_{\scriptscriptstyle 2}$ \square No, but I would have liked a choice
	$_{\mbox{\tiny 3}}$ \square No, but I did not mind
	4 Don't know / can't remember
3.	How do you feel about the length of time you were on the waiting list before your admission to hospital?
	I was admitted as soon as I thought was necessary
	² I should have been admitted a bit sooner
	3 I should have been admitted a lot sooner
7.	Was your admission date changed by the hospital?
	1 No
	₂ ☐ Yes, once
	₃ ☐ Yes, 2 or 3 times
	4 Yes, 4 times or more

8. In your opinion, had the specialist you saw in hospital been given all of the necessary information about your condition or illness from the person who referred you?	12. Did you change wards at night? ☐ Yes, but I would have preferred not to → Go to 13
₁ ☐ Yes, definitely	₂ ☐ Yes, but I did not mind → Go to 13
₂ ☐ Yes, to some extent	₃ ☐ No → Go to 14
3 ☐ No 4 ☐ Don't know / can't remember	Did the hospital staff explain the reasons for being moved in a way you could understand?
ALL TYPES OF ADMISSION	Yes, completely
9. From the time you arrived at the hospital, did you feel that you had to wait a long time to get to a bed on a ward?	² ☐ Yes, to some extent ³ ☐ No
Yes, definitely Yes, to some extent	14. Were you ever bothered by noise at night from other patients?
₃ □ No	₁ ☐ Yes
TUT 110001T11 0 WADD	2 No
THE HOSPITAL & WARD 10. While in hospital, did you ever stay in a critical care area (e.g. Intensive Care Unit, High Dependency Unit or Coronary Care Unit)? Yes	15. Were you ever bothered by noise at night from hospital staff?
2 No	16. In your opinion, how clean was the hospital
3 Don't know / can't remember	room or ward that you were in?
 11. While in hospital, did you ever share a sleeping area, for example a room or bay, with patients of the opposite sex? Yes No 	□ Very clean □ Fairly clean □ Not very clean □ Not at all clean
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17. Did you get enough help from staff to wash or keep yourself clean?	21. Did you get enough help from staff to eat your meals?
Yes, always	Yes, always
² Yes, sometimes	² Yes, sometimes
₃ □ No	₃ ☐ No
I did not need help to wash or keep myself clean	₄ ☐ I did not need help to eat meals
18. If you brought your own medication with you to hospital, were you able to take it when you needed to? ¹ ☐ Yes, always ² ☐ Yes, sometimes ³ ☐ No ⁴ ☐ I had to stop taking my own medication as part of my treatment	 22. During your time in hospital, did you get enough to drink? ☐ Yes ☐ No, because I did not get enough help to drink ☐ No, because I was not offered enough drinks ☐ No, for another reason
□ I did not bring my own medication with me to hospital	DOCTORS
19. How would you rate the hospital food? Very good Good Fair Poor I did not have any hospital food 20. Were you offered a choice of food? Yes, always Yes, sometimes No	 23. When you had important questions to ask a doctor, did you get answers that you could understand? Yes, always Yes, sometimes No I had no need to ask 24. Did you have confidence and trust in the doctors treating you? Yes, always Yes, sometimes No
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25. Did doctors talk in front of you as if you weren't there?	 30. Did you know which nurse was in charge of looking after you (this would have been a different person after each shift change)? ☐ Yes, always ☐ Yes, sometimes ☐ No
26. When you had important questions to ask a nurse, did you get answers that you could understand? 1 Yes, always 2 Yes, sometimes 3 No 4 I had no need to ask 27. Did you have confidence and trust in the nurses treating you?	YOUR CARE & TREATMENT 31. Did you have confidence and trust in any other clinical staff treating you (e.g. physiotherapists, speech therapists, psychologists)? 1 Yes, always 2 Yes, sometimes 3 No 4 I was not seen by any other clinical staff
Yes, always Yes, sometimes No No No No No No No No No N	32. In your opinion, did the members of staff caring for you work well together? Yes, always Yes, sometimes No Don't know / can't remember 33. Sometimes in a hospital, a member of staff will say one thing and another will say something quite different. Did this happen to you? Yes, often Yes, sometimes No
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yes, definitely yes, to some extent No 35. Did you have confidence in the decisions made about your condition or treatment?	34. Were you involved as much as you wanted to be in decisions about your care and treatment?	38. Do you feel you got enough emotional support from hospital staff during your stay?
35. Did you have confidence in the decisions made about your condition or treatment?	₁ ☐ Yes, definitely	₁ ☐ Yes, always
35. Did you have confidence in the decisions made about your condition or treatment? Yes, always Yes, sometimes No Not enough Right amount Was not given any information about my treatment or condition Don't know / can't remember Yes, definitely Yes, to some extent No No I had no worries or fears I did not need any emotional support I definite nough privacy when discussing your condition or treatment? Yes, always I did not need any emotional support	² Yes, to some extent	² Yes, sometimes
35. Did you have confidence in the decisions made about your condition or treatment? Yes, always Yes, sometimes No No much information about your condition or treatment was given to you? Not enough Right amount Was not given any information about my treatment or condition No my treatment or condition or treatment? No my treatmen	₃ □ No	₃ □ No
Copyright of the Care Quality Commission Page 6	35. Did you have confidence in the decisions made about your condition or treatment? Yes, always Yes, sometimes No 36. How much information about your condition or treatment was given to you? Not enough Right amount Right amount Uwas not given any information about my treatment or condition Don't know / can't remember 37. Did you find someone on the hospital staff to talk to about your worries and fears? Yes, definitely Yes, to some extent	39. Were you given enough privacy when discussing your condition or treatment? 1
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	Copyright of the Care Quality Commission	Page 6

43. If you needed attention, were you able to get a member of staff to help you within a	LEAVING HOSPITAL
reasonable time?	48. Did you feel you were involved in decisions about your discharge from hospital?
₁ ☐ Yes, always —	₁ ☐ Yes, definitely
₂ ☐ Yes, sometimes	₂ ☐ Yes, to some extent
ß ☐ No	3 ☐ No
₄ ☐ I did not want / need this	
	₄ ☐ I did not want to be involved
OPERATIONS & PROCEDURES	49. Were you given enough notice about when
44. During your stay in hospital, did you have	you were going to be discharged?
an operation or procedure?	₁ ☐ Yes, definitely
₁ ☐ Yes → Go to 45	₂ ☐ Yes, to some extent
2 ☐ No → Go to 48	₃ □ No
45. Beforehand, did a member of staff answer your questions about the operation or procedure in a way you could understand?	50. On the day you left hospital, was your discharge delayed for any reason?
Yes, completely	1 ☐ Yes → Go to 51
₂ ☐ Yes, to some extent	2 ☐ No → Go to 53
<u></u>	
₃ □ No ₄ □ I did not have any questions	51. What was the MAIN reason for the delay? (Cross ONE box only)
	₁ ☐ I had to wait for medicines
46. Beforehand, were you told how you could expect to feel after you had the operation	₂ I had to wait to see the doctor
or procedure?	₃ I had to wait for <mark>hospital transport</mark>
Yes, completely	₄ ☐ Something else
₂ ☐ Yes, to some extent	
₃ ☐ No	52. How long was the delay?
	₁ ☐ Up to 1 hour
47. After the operation or procedure, did a member of staff explain how the operation or procedure had gone in a way you could	Longer than 1 hour but no longer than 2 hours
understand?	Longer than 2 hours but no longer than 4 hours
₂ ☐ Yes, to some extent	4 Longer than 4 hours
_	
3 No	Page 7
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53. Where did you go after leaving hospital?☐ I went home → Go to 54	57. Did a member of staff explain the purpose of the medicines you were to take at home in a way you could understand?
I went to stay with family or friends Go to 54 I was transferred to another hospital Go to 55 I went to a residential nursing home Go to 55 I went somewhere else → Go to 55	Yes, completely → Go to 58 Yes, to some extent → Go to 58 No → Go to 58 I did not need an explanation → Go to 58 I had no medicines → Go to 60
support from health or social care professionals to help you recover and manage your condition? Yes, definitely Yes, to some extent No, but support would have been useful No, but I did not need any support When you left hospital, did you know what would happen next with your care? Yes, definitely Yes, definitely Yes, to some extent No It was not necessary Before you left hospital, were you given any written or printed information about what you should or should not do after leaving hospital? Yes No	 58. Did a member of staff tell you about medication side effects to watch for when you went home? ¹
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61. Did hospital staff take your family or home situation into account when planning your discharge? 1 Yes, completely 2 Yes, to some extent 3 No 4 It was not necessary 5 Don't know / can't remember	65. Did hospital staff discuss with you whether you may need any further health or social care services after leaving hospital (e.g. services from a GP, physiotherapist or community nurse, or assistance from social services or the voluntary sector)? 1 Yes 2 No, but I would have liked them to 3 No, it was not necessary to discuss it
62. Did the doctors or nurses give your family, friends or carers all the information they needed to help care for you? 1 Yes, definitely 2 Yes, to some extent 3 No 4 No family, friends or carers were involved 5 My family, friends or carers did not want or need information 6 I did not want my family, friends or carers to get information 6 I did not want my family, friends or carers to get information 6 No 6 No spital staff tell you who to contact if you were worried about your condition or treatment after you left hospital? 1 Yes 2 No 3 Don't know / can't remember 64. Did hospital staff discuss with you whether you would need any additional equipment in your home, or any adaptations made to your home, after leaving the hospital? 1 Yes	66. After being discharged, was the care and support you expected available when you needed it? 1
 No, but I would have liked them to No, it was not necessary to discuss it 	₃ ☐ No ₄ ☐ Don't know / can't remember
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o	

70. During your hospital stay, were you ever asked to give your views on the quality of your care?	Reminder : All the questions should be answered from the point of view of the person named on the envelope. This includes the following background questions.		
Yes	74. Do you have any physical or mental health		
2 ☐ No 3 ☐ Don't know / can't remember	conditions, disabilities or illnesses that have lasted or are expected to last for 12 months or more?		
 71. Did you see, or were you given, any information explaining how to complain to the hospital about the care you received? Yes No Not sure / don't know 72. Did you feel well looked after by the non-clinical hospital staff (e.g. cleaners, porters, catering staff)? Yes, always Yes, sometimes No I did not have contact with any non-clinical staff 	Include problems related to old age. 1		
	⊤ ☐ Heart problem, such as angina		
ABOUT YOU	₃ ☐ Joint problem, such as arthritis		
 73. Who was the main person or people that filled in this questionnaire? The patient (named on the front of the envelope) A friend or relative of the patient Both patient and friend/relative together The patient with the help of a health professional 	 Kidney or liver disease Learning disability Mental health condition Neurological condition Another long-term condition 		
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or control of the con	-		

 76. Do any of these reduce your ability to carry out day-to-day activities? Yes, a lot Yes, a little No, not at all 77. Have you experienced any of the following in the last twelve months? (Cross ALL that apply) Problems with your physical mobility, such as difficulty getting about your 	80. What is your religion? No religion Buddhist Christian (including Church of England, Catholic, Protestant, and other Christian denominations) Hindu Jewish Muslim Sikh
home Two or more falls that have needed medical attention Feeling isolated from others None of these Table Male	Box of the following best describes how you think of yourself? Heterosexual / straight Gay / lesbian Bisexual
preserved Female 79. What was your year of birth? (Please write in) e.g. 1 9 6 4	□ Other □ I would prefer not to say
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82. What is your ethnic group? (Cross ONE	OTHER COMMENTS
box only) a. WHITE English / Welsh / Scottish / Northern Irish / British Irish Gypsy or Irish Traveller Any other White background, write in D. MIXED / MULTIPLE ETHNIC GROUPS White and Black Caribbean	If there is anything else you would like to tell us about your experiences in the hospital, please do so here. Please note that the comments you provide will be looked at in full by the NHS Trust, CQC and researchers analysing the data. We will remove any information that could identify you before publishing any of your feedback. Was there anything particularly good about your hospital care?
White and Black African White and Asian Any other Mixed / multiple ethnic background, write in C. ASIAN / ASIAN BRITISH	Was there anything that could be improved?
Indian India	
d. BLACK / AFRICAN / CARIBBEAN / BLACK BRITISH African Caribbean Any other Black / African / Caribbean background, write in	Any other comments?
e. OTHER ETHNIC GROUP	THANK YOU VERY MUCH FOR YOUR HELP Please check that you answered all the
¹ଃ ☑ Any other ethnic group, write in	questions that apply to you. Please post this questionnaire back in the FREEPOST envelope provided. No stamp is needed.
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Appendix B: Summary of changes 2019 vs. 2018 questionnaire

2019	2018	Question text	Change		
ADMISSI	ADMISSION TO HOSPITAL				
Q1	Q1	Was your most recent hospital stay planned in advance or an emergency?			
THE ACC	CIDENT & E	EMERGENCY DEPARTMENT			
Q2	Q2	When you arrived at the hospital, did you go to the A&E Department (also known as the Emergency Department, Casualty, Medical or Surgical Admissions unit)?			
Q3	Q3	While you were in the A&E Department, how much information about your condition or treatment was given to you?			
Q4	Q4	Were you given enough privacy when being examined or treated in the A&E Department?			
WAITING	LIST OR F	PLANNED ADMISSION			
Q5	Q5	When you were referred to see a specialist, were you offered a choice of hospital for your first hospital appointment?			
Q6	Q6	How do you feel about the length of time you were on the waiting list before your admission to hospital?			
Q7	Q7	Was your admission date changed by the hospital?			
Q8	Q8	In your opinion, had the specialist you saw in hospital been given all of the necessary information about your condition or illness from the person who referred you?			
ALL TYPES OF ADMISSION					
Q9	Q9	From the time you arrived at the hospital, did you feel that you had to wait a long time to get to a bed on a ward?			
THE HOSPITAL & WARD					
Q10	Q10	While in hospital, did you ever stay in a critical care area (e.g. Intensive Care Unit, High Dependency Unit or Coronary Care Unit)?			

2019	2018	Question text	Change	
Q11	Q11	While in hospital, did you ever share a sleeping area, for example a room or bay, with patients of the opposite sex?		
Q12	Q12	Did you change wards at night?	'At night' made bold	
Q13	Q13	Did the hospital staff explain the reasons for being moved in a way you could understand?		
Q14	Q14	Were you ever bothered by noise at night from other patients?		
Q15	Q15	Were you ever bothered by noise at night from hospital staff?		
Q16	Q16	In your opinion, how clean was the hospital room or ward that you were in?		
Q17	Q17	Did you get enough help from staff to wash or keep yourself clean?		
Q18	Q18	If you brought your own medication with you to hospital, were you able to take it when you needed to?		
Q19	Q19	How would you rate the hospital food?		
Q20	Q20	Were you offered a choice of food?		
Q21	Q21	Did you get enough help from staff to eat your meals?		
Q22	Q22	During your time in hospital, did you get enough to drink?		
DOCTORS				
Q23	Q23	When you had important questions to ask a doctor, did you get answers that you could understand?		
Q24	Q24	Did you have confidence and trust in the doctors treating you?		
Q25	Q25	Did doctors talk in front of you as if you weren't there?		
NURSES				
Q26	Q26	When you had important questions to ask a nurse, did you get answers that you could understand?		
Q27	Q27	Did you have confidence and trust in the nurses treating you?		

2019	2018	Question text	Change
Q28	Q28	Did nurses talk in front of you as if you weren't there?	
Q29	Q29	In your opinion, were there enough nurses on duty to care for you in hospital?	
Q30	Q30	Did you know which nurse was in charge of looking after you (this would have been a different person after each shift change)?	
YOUR CA	ARE & TRE	ATMENT	
Q31	Q31	Did you have confidence and trust in any other clinical staff treating you (e.g. physiotherapists, speech therapists, psychologists)?	
Q32	Q32	In your opinion, did the members of staff caring for you work well together?	
Q33	Q33	Sometimes in a hospital, a member of staff will say one thing and another will say something quite different. Did this happen to you?	
Q34	Q34	Were you involved as much as you wanted to be in decisions about your care and treatment?	
Q35	Q35	Did you have confidence in the decisions made about your condition or treatment?	
Q36	Q36	How much information about your condition or treatment was given to you ?	
Q37	Q37	Did you find someone on the hospital staff to talk to about your worries and fears?	
Q38	Q38	Do you feel you got enough emotional support from hospital staff during your stay?	
Q39	Q39	Were you given enough privacy when discussing your condition or treatment?	
Q40	Q40	Were you given enough privacy when being examined or treated?	
Q41	Q41	Were you ever in any pain?	
Q42	Q42	Do you think the hospital staff did everything they could to help control your pain?	
Q43	Q43	If you needed attention, were you able to get a member of staff to help you within a reasonable time?	
OPERATIONS & PROCEDURES			

2019	2018	Question text	Change
Q44	Q44	During your stay in hospital, did you have an operation or procedure?	
Q45	Q45	Beforehand, did a member of staff answer your questions about the operation or procedure in a way you could understand?	
Q46	Q46	Beforehand, were you told how you could expect to feel after you had the operation or procedure?	
Q47	Q47	After the operation or procedure, did a member of staff explain how the operation or procedure had gone in a way you could understand?	
LEAVING	HOSPITA	L	
Q48	Q48	Did you feel you were involved in decisions about your discharge from hospital?	
Q49	Q49	Were you given enough notice about when you were going to be discharged?	
Q50	Q50	On the day you left hospital, was your discharge delayed for any reason?	
Q51	Q51	What was the MAIN reason for the delay?	One response option changed from 'I had to wait for an ambulance' to 'I had to wait for hospital transport'
Q52	Q52	How long was the delay?	
Q53	Q53	Where did you go after leaving hospital?	
Q54	Q54	After leaving hospital, did you get enough support from health or social care professionals to help you recover and manage your condition?	
Q55	Q55	When you left hospital, did you know what would happen next with your care?	
Q56	Q56	Before you left hospital, were you given any written or printed information about what you should or should not do after leaving hospital?	
Q57	Q57	Did a member of staff explain the purpose of the medicines you were to take at home in a way you could understand?	
Q58	Q58	Did a member of staff tell you about medication side effects to watch for when you went home?	

2019	2018	Question text	Change	
Q59	Q59	Were you given clear written or printed information about your medicines?		
Q60	Q60	Did a member of staff tell you about any danger signals you should watch for after you went home?		
Q61	Q61	Did hospital staff take your family or home situation into account when planning your discharge?		
Q62	Q62	Did the doctors or nurses give your family, friends or carers all the information they needed to help care for you?		
Q63	Q63	Did hospital staff tell you who to contact if you were worried about your condition or treatment after you left hospital?		
Q64	Q64	Did hospital staff discuss with you whether you would need any additional equipment in your home, or any adaptations made to your home, after leaving the hospital?		
Q65	Q65	Did hospital staff discuss with you whether you may need any further health or social care services after leaving hospital (e.g. services from a GP, physiotherapist or community nurse, or assistance from social services or the voluntary sector)?		
Q66	Q66	After being discharged, was the care and support you expected available when you needed it?	'After being discharged' added to beginning of question stem	
OVERALL				
Q67	Q67	Overall, did you feel you were treated with respect and dignity while you were in the hospital?		
Q68	Q68	Overall		
Q69	Q69	During this hospital stay, did anyone discuss with you whether you would like to take part in a research study?		
Q70	Q70	During your hospital stay, were you ever asked to give your views on the quality of your care?		
Q71	Q71	Did you see, or were you given, any information explaining how to complain to the hospital about the care you received?		
Q72	Q72	Did you feel well looked after by the non-clinical hospital staff (e.g. cleaners, porters, catering staff)?		

2019	2018	Question text	Change		
ABOUT Y	ABOUT YOU				
Q73	Q73	Who was the main person or people that filled in this questionnaire?			
Q74	Q74	Do you have any physical or mental health conditions, disabilities or illnesses that have lasted or are expected to last for 12 months or more?			
		Include problems related to old age.			
		Do you have any of the following?			
Q75	Q75	Select ALL conditions you have that have lasted or are expected to last for 12 months or more.			
Q76	Q76	Do any of these reduce your ability to carry out day-to-day activities?			
Q77	-	Have you experienced any of the following in the last twelve months?	New question		
Q78	Q77	Are you male or female?			
Q79	Q78	What was your year of birth?	YYYY removed from write-in boxes and example year changed from 1934 to 1964		
Q80	Q79	What is your religion?			
Q81	Q80	Which of the following best describes how you think of yourself?			
Q82	Q81	What is your ethnic group?			
OTHER COMMENTS					
Other	Other	Was there anything particularly good about your hospital care?			
Other	Other	Was there anything that could be improved?			
Other	Other	Any other comments?			

Appendix C: Covering letters

1st covering letter

Please print on the trust's headed paper with signatory at the bottom. You need to edit the text in square brackets and remove the yellow highlighting. The letter below should fit onto one side of A4 with the questions on the reverse.

[Date]

Dear [Insert patient's first name and surname],

You're invited to tell us about your most recent overnight stay in hospital.

We want hospital care to be as good as possible but we can only do this with your help.

This national survey will help us at [Hospital name or NHS trust name] and the Care Quality Commission to find out what was good about your care and if any improvements are needed.

All you need to do:

- Take 20 minutes to fill out the questionnaire.
- Return the questionnaire using the Freepost envelope (no need to put a stamp on).

Your feedback is important as it's the best way for us to understand your experience of staying overnight in hospital.

This survey is **confidential** and none of the staff who cared for you will know if you take part.

We are also sending this questionnaire to many other people, so please join them in completing this survey.

Please see the back of this letter for more information or call [our Freephone helpline/us] on [phone number] [free of charge] if you have any questions and [they/we] will do our best to help. The line is open between [opening time] and [closing time], [days].

Thank you for taking the time to complete this important survey.

Yours sincerely,

[Chief Executive name]

Chief Executive, [NHS Trust Name]

Can a relative or friend complete this questionnaire on my behalf?

Yes, but the answers to the questions should be the views of the person who the letter was sent to.

Is this survey voluntary?

Yes. If you don't wish to take part, this will not affect your care and you don't need to give us a reason. If you don't want to take part, please either return the blank questionnaire or call the helpline number.

What is the bar code/number for?

You have been given a unique number just for this survey so that your name and address don't appear on the questionnaire.

I was admitted to one hospital but discharged from another, what should I do? Please answer the questionnaire thinking of when you stayed overnight in the hospital named in this letter.

I can't answer one of the questions - what should I do?

If you can't answer a question just leave it blank and move on to the next.

How is my personal data protected?

Your personal data are held in accordance with the General Data Protection Regulation and the NHS Confidentiality Code of Practice. [NHS Trust name] has a leaflet that explains how we use your personal information and keep it safe, and what your rights are under the law. If you would like a leaflet or further information, please write to us, or call [Freephone survey helpline] or go to [privacy statement on trust website].

[NHS Trust name] picked a sample of people who had recently used their services which is used to send you the questionnaire and reminders. Personal data about your involvement in this survey is not used for any other purpose and is deleted once the survey process is complete. Your responses to the questions are not linked back to your name, or to other personal data that may identify you.

[[IF CONTRACTOR USED]: [Your contact details have been passed to [survey contractor], only so that they can send you this questionnaire and process your response. [Survey contractor] will process your answers in confidence and keep them separate from your contact details. [Survey contractor will delete your contact details once the survey process is completed]]

How will the results from the survey be used?

The results will be published on CQC's website in spring 2020. The results are used to understand what care and treatment is like, both for England as a whole and at your local trust. To see results from previous surveys, please go to: www.cqc.org.uk/surveys

We share data from the surveys with national bodies, including the Department of Health and Social Care and NHS England. They use the information to help their work. This never includes names or addresses. You can see more information about how data is shared at: www.nhssurveys.org/faq

Please print on the trust's headed paper with signatory at the bottom. You need to edit the text in square brackets and remove the yellow highlighting. The letter below should fit onto one side of A4.

[Date]

Dear [Insert patient's first name and surname],

Don't forget to tell us about your care and treatment when you recently stayed overnight in hospital.

We recently sent you a questionnaire about your experience of being in hospital at [NHS trust name], but we haven't received your response yet.

Your views are very important so we would like to hear from you. The results of the survey will help us find out what we do well and what changes we need to make.

Please remember your responses are **confidential** and the people who provided your care will **not** know if you have taken part or not.

If you have already returned your questionnaire, **thank you**, and please accept our apologies for sending this reminder. If you have misplaced the questionnaire, another one will be sent to you soon.

Your response can help improve people's experiences of care and treatment at the hospital.

For any questions, please call [our Freephone line/us] on [number] between [opening time] and [closing time], [days].

Thank you.

[Chief Executive Name]
Chief Executive
[NHS Trust Name]

Please print on the trust's headed paper with signatory at the bottom. You need to edit the text in square brackets and remove the yellow highlighting. The letter below should fit onto one side of A4 with the questions on the reverse.

[Date]

Dear [Insert patient's first name and surname],

Please take this opportunity to make a difference.

A few weeks ago we sent you a questionnaire asking about your recent overnight stay in hospital. As we don't seem to have heard from you yet, we have enclosed another copy of the questionnaire. Thousands of other people have completed the survey, and we would really like to hear from you too.

This survey is **confidential** - nobody involved with your care will know if you have participated or not.

This is the final chance to take part in this year's survey so don't miss out on this opportunity to have your say about the care at [NHS trust name].

This survey is voluntary, but to participate please complete the questionnaire as soon as possible and return in the Freepost envelope provided (no need for a stamp).

We look forward to hearing from you soon - thank you for your time.

Yours sincerely,

[Chief Executive Name]
Chief Executive
[NHS Trust Name]

Can a relative or friend complete this questionnaire on my behalf?

Yes, but the answers to the questions should be the views of the person who the letter was sent to.

Is this survey voluntary?

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