

Urgent Care Questionnaire (Scored Questionnaire)

This survey is about the urgent medical attention you received on your **most recent** visit to the NHS Trust named in the letter enclosed with this questionnaire. The department you visited might have been called an **Urgent Care Centre (UCC)**, **Urgent Treatment Centre (UTC)** or **Minor Injury Unit (MIU)**. You might also think of it as **A&E**. These are places that you can go to for minor injuries or illnesses instead of going to A&E. Throughout the questionnaire, we will use the term 'Urgent Care Centre'.

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

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 remember not to 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.

ARRIVAL

Please remember, this questionnaire is about your **most recent visit** to the Urgent Care Centre at the NHS trust named in the letter. This may have been called an Urgent Treatment Centre (UTC) or Minor Injury Unit (MIU). You might also think of it as A&E.

1. Was this urgent care centre the **first** service you went to, or contacted, for help with your condition?

- 1 Yes → **Go to 4**
2 No → **Go to 2**

(Q1 not scored)

2. Before going to this urgent care centre, where did you go to, or contact, for help with your condition? **(Cross ONE only - if more than one option applies, cross the last one you went to, or contacted, before the urgent care centre)**

- 1 999 emergency service
2 NHS 111 telephone / online service
3 A&E department
4 Pharmacist
5 GP practice
6 GP out-of-hours service
7 A different Urgent Care Centre / Minor Injuries Unit / Walk-in Centre
8 Somewhere else

(Q2 not scored)

3. What was the MAIN reason for going to the urgent care centre following your contact with the service above? **(Cross ONE only)**

- 1 The service above referred / took me
2 I couldn't get a GP appointment quickly enough
3 I am not registered with a GP
4 My condition became worse
5 I was not satisfied with the help I received
6 A different reason

(Q3 not scored)

4. Were you given enough privacy when discussing your condition with the **receptionist**?

- 1 Yes, definitely **10**
2 Yes, to some extent **5**
3 No **0**
4 I did not discuss my condition with a receptionist **-**

5. Before your most recent visit to this urgent care centre, had you previously been to **the same** urgent care centre about **the same condition** or something related to it?

- 1 Yes, within the previous week
2 Yes, between one week and one month earlier
3 Yes, more than a month earlier
4 No
5 Don't know / can't remember

(Q5 Not scored)

WAITING

6. Did you have an appointment on your most recent visit to the urgent care centre?

- 1 Yes
2 No
3 Don't know / can't remember

(Q6 not scored)

(Q6 is used to score Q7 and Q8: please see notes on page 9)

7. How long did you wait before you **first spoke** to a health professional?

- 1 0 -15 minutes **10**
2 16 - 30 minutes **7.5**
3 31- 60 minutes **5**
4 More than 1 hour but no more than 2 hours **2.5**
5 More than 2 hours **0**
6 Don't know / can't remember **-**

8. Sometimes, people will first talk to a health professional and be examined later. **From the time you arrived**, how long did you wait **before being examined**?
- 1 I did not have to wait → **Go to 11** **10**
- 2 Up to 15 minutes → **Go to 9** **8**
- 3 16 – 30 minutes → **Go to 9** **6**
- 4 31 – 60 minutes → **Go to 9** **4**
- 5 More than 1 hour but no more than 2 hours → **Go to 9** **2**
- 6 More than 2 hours → **Go to 9** **0**
- 7 Don't know / can't remember → **Go to 9** **-**
9. Were you informed **how long** you would have to wait to be examined?
- 1 Yes, but the wait was **shorter** **10**
- 2 Yes, and I had to wait about as long as I was informed **10**
- 3 Yes, but the wait was **longer** **5**
- 4 No, I was not informed **0**
- 5 Don't know / can't remember **-**
10. While you were waiting, were you able to get help from a member of staff?
- 1 Yes **10**
- 2 No **0**
- 3 I did not need any help **-**
11. Overall, how long did your visit to the **urgent care centre** last?
- 1 Up to 1 hour **10**
- 2 More than 1 hour but no more than 2 hours **6.7**
- 3 More than 2 hours but no more than 4 hours **3.3**
- 4 More than 4 hours **0**
- 5 Can't remember **-**

SEEING THE HEALTH PROFESSIONAL

12. Did you have **enough time** to discuss your condition with the health professional?
- 1 Yes, definitely **10**
- 2 Yes, to some extent **5**
- 3 No **0**
13. While you were in the urgent care centre, did a health professional explain your condition and treatment in a way you could understand?
- 1 Yes, completely **10**
- 2 Yes, to some extent **5**
- 3 No **0**
- 4 I did not need an explanation **-**
14. Did the health professional listen to what you had to say?
- 1 Yes, definitely **10**
- 2 Yes, to some extent **5**
- 3 No **0**
15. If you had any anxieties or fears about your condition or treatment, did a health professional discuss them with you?
- 1 Yes, completely **10**
- 2 Yes, to some extent **5**
- 3 No **0**
- 4 I did not have any anxieties or fears **-**
16. Did you have confidence and trust in the health professional examining and treating you?
- 1 Yes, definitely **10**
- 2 Yes, to some extent **5**
- 3 No **0**

17. Did health professionals talk to each other about you as if you weren't there?
- 1 Yes, definitely 0
- 2 Yes, to some extent 5
- 3 No 10
- 4 Not applicable -

18. When you were at the urgent care centre, did you have a family member, friend or carer with you?

- 1 Yes → Go to 19
- 2 No → Go to 20

(Q18 not scored)

19. If a family member, friend or carer wanted to talk to a health professional, did they have enough opportunity to do so?

- 1 Yes, definitely 10
- 2 Yes, to some extent 5
- 3 No 0
- 4 This was not necessary -

YOUR CARE AND TREATMENT

20. While you were at the urgent care centre, how much information about your condition or treatment was given to **you**?

- 1 Not enough 5
- 2 Right amount 10
- 3 Too much 5
- 4 I was not given any information about my condition or treatment 0

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

- 1 Yes, definitely 10
- 2 Yes, to some extent 5
- 3 No 0

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

- 1 Yes, definitely 0
- 2 Yes, to some extent 5
- 3 No 10

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

- 1 Yes, definitely 10
- 2 Yes, to some extent 5
- 3 No 0
- 4 I was not well enough to be involved in decisions about my care -

TESTS

24. Did you have any tests (such as x-rays, scans or blood tests) when you visited the urgent care centre?

- 1 Yes → Go to 25
- 2 No → Go to 28

(Q24 not scored)

25. Did a member of staff explain **why you needed** these test(s) in a way you could understand?

- 1 Yes, completely 10
- 2 Yes, to some extent 5
- 3 No 0

26. Before you left the urgent care centre, did you get the **results** of your tests?

- 1 Yes → Go to 27 10
- 2 No → Go to 28 0
- 3 I was told that the results of the tests would be given to me at a later date → Go to 28 -
- 4 Don't know / can't remember → Go to 28 -

27. Did a member of staff explain the **results of the tests** in a way you could understand?

- 1 Yes, definitely **10**
2 Yes, to some extent **5**
3 No **0**
4 Not sure / can't remember **-**

PAIN

28. Were you in any pain while you were at the urgent care centre?

- 1 Yes → **Go to 29**
2 No → **Go to 30**

(Q28 not scored)

29. Do you think the staff did everything they could to help control your pain?

- 1 Yes, definitely **10**
2 Yes, to some extent **5**
3 No **0**
4 Can't say / don't know **-**

ENVIRONMENT AND FACILITIES

30. In your opinion, how clean was the urgent care centre?

- 1 Very clean **10**
2 Fairly clean **6.7**
3 Not very clean **3.3**
4 Not at all clean **0**
5 Can't say **-**

31. While you were in the urgent care centre, did you feel threatened by other patients or visitors?

- 1 Yes, definitely **0**
2 Yes, to some extent **5**
3 No **10**

32. Were you able to get suitable food or drinks when you were at the urgent care centre?

- 1 Yes **10**
2 No **0**
3 I was told not to eat or drink **10**
4 I did not know if I was allowed to eat or drink **0**
5 I did not want anything to eat or drink **-**

LEAVING THE URGENT CARE CENTRE

33. What happened at the end of your visit to the urgent care centre?

- 1 I was admitted to or transferred to a hospital ward → **Go to 42**
2 I was sent to A&E → **Go to 42**
3 I went home / somewhere else → **Go to 34**

(Q33 not scored)

Medications (e.g. medicines, tablets, ointments)

34. Before you left the urgent care centre, were you prescribed any **new** medications?

- 1 Yes → **Go to 35**
2 No → **Go to 37**

(Q34 not scored)

35. Did a member of staff explain **the purpose** of the medications you were to take at home in a way you could understand?

- 1 Yes, completely **10**
2 Yes, to some extent **5**
3 No **0**
4 I did not need an explanation **-**

36. Did a member of staff tell you about **medication side effects** to watch for?

- 1 Yes, completely **10**
2 Yes, to some extent **5**
3 No **0**
4 I did not need this type of information **-**

Information

37. Did a member of staff tell you when you could **resume your usual activities**, such as when to go back to work or drive a car?

- 1 Yes, definitely **10**
- 2 Yes, to some extent **5**
- 3 No **0**
- 4 I did not need this type of information **-**

38. Did a member of staff take your **family or home situation** into account when you were leaving the urgent care centre?

- 1 Yes, completely **10**
- 2 Yes, to some extent **5**
- 3 No **0**
- 4 It was not necessary **-**
- 5 Don't know / can't remember **-**

39. 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 **10**
- 2 Yes, to some extent **5**
- 3 No **0**
- 4 I did not need this type of information **-**

40. Did a member of staff tell you **who to contact** if you were worried about your condition or treatment after you left the urgent care centre?

- 1 Yes **10**
- 2 No **0**
- 3 Don't know / can't remember **-**

41. Did staff give you enough information to help you care for your condition at home?

- 1 Yes, definitely **10**
- 2 Yes, to some extent **5**
- 3 No **0**
- 4 I did not need this type of information **-**

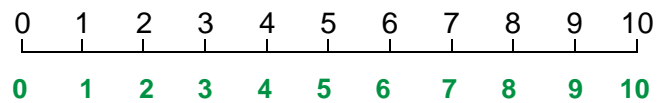
OVERALL

42. Overall, did you feel you were treated with respect and dignity while you were in the urgent care centre?

- 1 Yes, all of the time **10**
- 2 Yes, some of the time **5**
- 3 No **0**

43. Overall... **(please circle a number)**

I had a very poor experience I had a very good experience



The entire 'About You' section (Q44 to Q52) is not scored

ABOUT YOU

44. Who was the main person or people that filled in this questionnaire?

- 1 The **patient** (named on the front of the envelope)
- 2 A **friend or relative** of the patient
- 3 **Both** patient and friend/relative together
- 4 The patient with the help of a health professional

Reminder: All questions should be answered from the point of view of the person named on the envelope, including these background questions.

45. Are you male or female?

- 1 Male
- 2 Female

46. What was your **year** of birth?

(Please write in)

e.g.

1	9	3	4
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47. What is your religion?

- 1 No religion
- 2 Buddhist
- 3 Christian (including Church of England, Catholic, Protestant, and other Christian denominations)
- 4 Hindu
- 5 Jewish
- 6 Muslim
- 7 Sikh
- 8 Other
- 9 I would prefer not to say

48. Which of the following best describes how you think of yourself?

- 1 Heterosexual / straight
- 2 Gay / lesbian
- 3 Bisexual
- 4 Other
- 5 I would prefer not to say

49. 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.

- 1 Yes → Go to 50
- 2 No → Go to 52

50. Do you have any of the following?

Select **ALL** conditions you have that have lasted or are expected to last for 12 months or more.

- 1 Breathing problem, such as asthma
- 2 Blindness or partial sight
- 3 Cancer in the last 5 years
- 4 Dementia or Alzheimer's disease
- 5 Deafness or hearing loss
- 6 Diabetes
- 7 Heart problem, such as angina
- 8 Joint problem, such as arthritis
- 9 Kidney or liver disease
- 10 Learning disability
- 11 Mental health condition
- 12 Neurological condition
- 13 Another long-term condition

51. Do any of these reduce your ability to carry out day-to-day activities?

- 1 Yes, a lot
- 2 Yes, a little
- 3 No, not at all

52. What is your ethnic group? (**Cross ONE box only**)

a. WHITE

- 1 English / Welsh / Scottish / Northern Irish / British
- 2 Irish
- 3 Gypsy or Irish Traveller
- 4 Any other White background, **write in...**

b. MIXED / MULTIPLE ETHNIC GROUPS

- 5 White and Black Caribbean
- 6 White and Black African
- 7 White and Asian
- 8 Any other Mixed / multiple ethnic background, **write in...**

c. ASIAN / ASIAN BRITISH

- 9 Indian
- 10 Pakistani
- 11 Bangladeshi
- 12 Chinese
- 13 Any other Asian background, **write in...**

d. BLACK / AFRICAN / CARIBBEAN / BLACK BRITISH

- 14 African
- 15 Caribbean
- 16 Any other Black / African / Caribbean background, **write in...**

e. OTHER ETHNIC GROUP

- 17 Arab
- 18 Any other ethnic group, **write in...**

ANY OTHER COMMENTS

If there is anything else you would like to tell us about your experiences in the urgent care centre, 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.

THANK YOU VERY MUCH FOR YOUR HELP

Please check that you answered all the questions that apply to you.

Please post this questionnaire back in the **FREEPOST** envelope provided.

No stamp is needed.

Scoring rules for Questions 7 and 8

The rules of scoring these questions are bulleted below and displayed in figure 1.

- If response to Q6 is missing or is option 1 (Yes) or option 3 (don't know), Q7 and Q8 are not scored.
- If response to Q6 is 2 (no), scoring would be as presented for Q7 and Q8

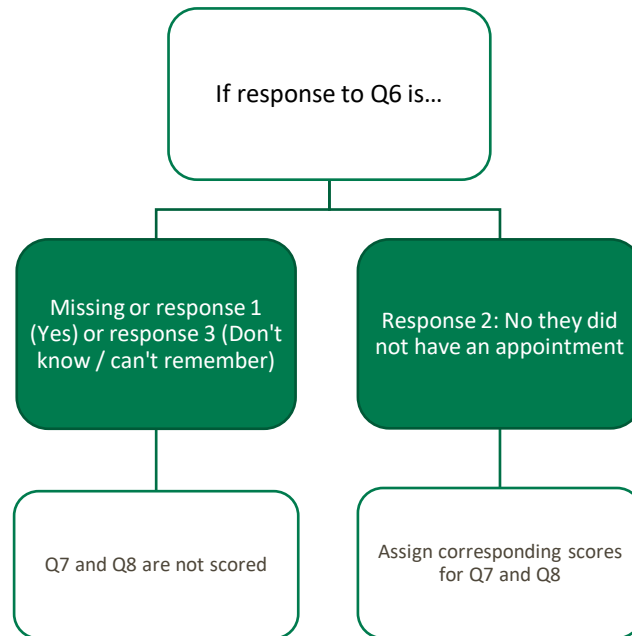


Figure 1. Rules for scoring Q7 and Q8