



NSW Patient Survey

Adult admitted patients



<Barcode>
<title> <given names> <surname>
<Address Line 1>
<SUBURB> <STATE> <POSTCODE>

Date

Dear <title> <surname>

I invite you to complete a questionnaire about your most recent visit to [Hospital Name] during [Month].

Your feedback will be used to help improve healthcare experiences and outcomes for patients across NSW.

Any information you provide will be treated confidentially, and the health professionals who cared for you will not be able to see your responses.

If you have questions, or need help, please contact the survey helpline on 1800 220 936 (Monday to Friday, 9am–8pm).

For further information about patients' experiences across hospitals in NSW, including results from previous surveys, visit bhi.nsw.gov.au

Yours sincerely

Dr Diane Watson
Chief Executive
Bureau of Health Information

It's easy to take part
using your smartphone,
tablet or computer:

Scan the QR code



Or

go to
[health.nsw.gov.au/
patientsurvey](http://health.nsw.gov.au/patientsurvey)
and enter the
access code below

Access code:

[USERNAME]



Completing the paper questionnaire

If you complete the paper questionnaire, please use a blue or black pen to mark clearly in the box next to your answer.

Sometimes response options have a 'Go to...' instruction which directs you to skip any questions that do not apply to you:

Q42. On the day you left hospital, was your discharge delayed?

- Yes
 NoGo to Q44

If you make a mistake or wish to change a response, simply fill in the box and mark in the correct box:

Q34. At the time you were discharged, did you feel that you were well enough to leave hospital?

- Yes
 No

If someone is helping you to complete the questionnaire, please ensure the answers are from your point of view, and not the opinion of the person helping you.

To return the paper questionnaire, place the completed copy in the enclosed reply paid envelope.

Privacy information

Your privacy is protected by legislation

The Bureau of Health Information (BHI) works with Ipsos Public Affairs Ltd to manage the NSW Patient Survey Program on behalf of NSW Health. Your name and address are provided to Ipsos for the purpose of sending you this questionnaire only. Ipsos will keep your personal information confidential.

Your questionnaire responses will be treated in the strictest confidence. BHI will receive your questionnaire responses in a form that is identifiable, but your name, address and contact details are not provided to BHI to ensure your confidentiality is protected at all times.

BHI will not report any results that may identify you as an individual. Your questionnaire responses will not be accessible to the health professionals who cared for you.

You can find more information about privacy and confidentiality on the BHI website at bhi.nsw.gov.au/privacy



Your feedback about your experience will help improve healthcare services

When completing this questionnaire, please think about your experiences of care at the hospital named, in the month shown, in the covering letter. If you had more than one admission in that month, to the hospital named in the letter, please refer to the most recent admission.

Any information you provide will be treated confidentially, and the health professionals who cared for you will not be able to see your responses.

Completing the questionnaire

For each question, please mark clearly in the box next to the answer you choose using a blue or black pen.

Don't worry if you make a mistake; simply fill in the box and mark in the correct box.

Sometimes response options have a 'Go to...' instruction which directs you to skip any questions that do not apply to you.

Arrival

For the questions in this section, please think about when you first arrived at the hospital and all the staff you met, including receptionists, nurses and others.

Q1. Were the staff you met on your arrival to hospital polite and welcoming?

- Yes, definitely
- Yes, to some extent
- No
- Don't know/can't remember

Q2. How well organised was the admission process?

- Very well organised
- Fairly well organised
- Not well organised
- Not applicable

The hospital environment

For the questions in this section, please think about your experiences of the hospital environment during your stay.

Q3. How clean were the areas of the hospital you used during your stay?

- Very clean
- Fairly clean
- Not very clean
- Not at all clean

Q4. How would you rate the food you were served while in hospital?

- Very good
- Good
- Neither good nor poor
- Poor
- Very poor
- I wasn't served any hospital food

Q5. Were you given enough privacy during your stay at the hospital?

- Yes, always
- Yes, sometimes
- No

Health professionals

For the questions in this section, please think about all the health professionals who treated or examined you at the hospital. This may include doctors, nurses, allied health (e.g. physiotherapists) and others.

Q6. Did the health professionals who treated you introduce themselves to you?

- Yes, all of them
- Some of them
- Very few or none of them
- Don't know/can't remember

Q7. Did the health professionals ask your name or check your identification band before giving you any medications, treatments or tests?

- Yes, always
- Yes, sometimes
- No
- Don't know/can't remember
- Not applicable

Q8. Did you have enough time to discuss your health or medical problem with the health professionals?

- Yes, definitely
- Yes, to some extent
- No
- Don't know/can't remember

Q9. Did the health professionals explain things in a way you could understand?

- Yes, always
- Yes, sometimes
- No

Q10. Did you have confidence and trust in the health professionals?

- Yes, definitely
- Yes, to some extent
- No

Q11. Were the health professionals kind and caring?

- Yes, always
- Yes, sometimes
- No

Q12. Overall, how would you rate the doctors?

- Very good
- Good
- Neither good nor poor
- Poor
- Very poor

Q13. Overall, how would you rate the nurses?

- Very good
- Good
- Neither good nor poor
- Poor
- Very poor

Care and treatment

For the questions in this section, please think about the care and treatment you received while in hospital.

Q14. During your stay in hospital, how much information about your condition or treatment was given to you?

- Not enough
- The right amount
- Too much
- Not applicable

Q15. How much information about your condition or treatment was given to your family, carer or someone close to you?

- Not enough
- The right amount
- Too much
- Don't know/can't remember
- Not applicable

Q16. Did you receive conflicting information about your condition or treatment from the health professionals?

- Yes, definitely
- Yes, to some extent
- No

Q17. In your opinion, did the health professionals who treated you know enough about your care and treatment?

- Yes, always
- Yes, sometimes
- No

Q18. Did the health professionals give you the support you needed to help with any worries or fears related to your care and treatment?

- Yes, definitely
- Yes, to some extent
- No
- I didn't have any worries or fears

Q19. Were you involved, as much as you wanted to be, in decisions about your care and treatment?

- Yes, definitely
- Yes, to some extent
- No
- Not applicable

Q20. When the health professionals spoke about your care in front of you, were you included in the conversation?

- Yes, definitely
- Yes, to some extent
- No
- Not applicable

Q21. Did the health professionals listen carefully to your views and concerns?

- Yes, always
- Yes, sometimes
- No
- Not applicable

Q22. How would you rate how well the health professionals worked together as a team?

- Very good
- Good
- Neither good nor poor
- Poor
- Very poor

Q23. Were you treated with respect and dignity?

- Yes, always
- Yes, sometimes
- No

Q24. Were your cultural or religious beliefs respected by the hospital staff?

- Yes, always
- Yes, sometimes
- No
- Not applicable

Q25. If you needed help with personal care (e.g. eating and drinking, moving around or going to the bathroom), did hospital staff help you within a reasonable timeframe?

- Yes, always
- Yes, sometimes
- No
- I didn't need help with personal care

Q26. Do you think the health professionals did everything they could to help manage your pain?

- Yes, definitely
- Yes, to some extent
- No
- I didn't have any pain

Q27. Did the health professionals explain what would happen during your tests, operations or procedures in a way you could understand?

- Yes, always
- Yes, sometimes
- No
- Don't know/can't remember
- Not applicable

Q28. Did the health professionals explain the results or outcomes of your tests, operations or procedures in a way you could understand?

- Yes, always
- Yes, sometimes
- No
- Don't know/can't remember
- Not applicable

Problems and complications

For the questions in this section, please think about any problem or clinical complication that you may have experienced related to your care and treatment.

Q29. During your hospital stay or soon after, did you experience any problem related to your care and treatment?

- Yes
- NoGo to Q33

Q30. Was the impact of this problem...?

- Very serious
- Fairly serious
- Not very serious
- Not at all serious

Q31. Were the health professionals open with you about this problem?

- Yes, definitely
- Yes, to some extent
- No
- Not applicable

Q32. Were the health professionals responsive in addressing this problem?

- Yes, definitely
- Yes, to some extent
- No
- Not applicable

Leaving hospital (discharge)

For the questions in this section, please think about your experiences as you were preparing to leave hospital.

Q33. Did you feel involved in decisions about your discharge from hospital?

- Yes, definitely
- Yes, to some extent
- No
- I didn't want or need to be involved

Q34. At the time you were discharged, did you feel that you were well enough to leave hospital?

- Yes
- No

Q35. Thinking about when you left hospital, were you given enough information about how to manage your care at home?

- Yes, definitely
- Yes, to some extent
- No
- Not applicable

Q36. Was your family and home situation taken into account when you were discharged?

- Yes, definitely
- Yes, to some extent
- No
- Don't know/can't remember
- Not applicable

Q37. Thinking about when you left hospital, were adequate arrangements made for any services you needed (e.g. equipment, home care, community care, follow-up appointments)?

- Yes, definitely
- Yes, to some extent
- No
- I didn't need any services

Q38. Were you told who to contact if you were worried about your condition or treatment after your hospital stay?

- Yes
- No
- Not applicable

Q39. Were you given or prescribed any new medication to take at home?

- Yes
- No Go to Q41

Q40. Did a health professional in the hospital tell you about medication side effects to watch for?

- Yes, definitely
- Yes, to some extent
- No

Q41. Did you receive a document summarising your hospital care (e.g. a digital or physical copy of the letter to your general practitioner or a discharge summary)?

- Yes
- No
- Don't know/can't remember

Q42. On the day you left hospital, was your discharge delayed?

- Yes
- No Go to Q44

Q43. Did hospital staff explain the reason for the delay?

- Yes
- No

Q44. Were the health professionals you saw in your community after your hospital stay (such as your general practitioner) up-to-date about the care you received?

- Yes, definitely
- Yes, to some extent
- No
- Not applicable

Overall experience

For the questions in this section, please think about your overall experiences of the care you received while in hospital.

Q45. Overall, how would you rate the care you received while in hospital?

- Very good
- Good
- Neither good nor poor
- Poor
- Very poor

Q46. How well organised was the care you received in hospital?

- Very well organised
- Fairly well organised
- Not well organised

Q47. If asked about your hospital experience by friends and family, how would you respond?

- I would speak highly of the hospital
- I would neither speak highly nor be critical
- I would be critical of the hospital

Q48. Did the care and treatment you received help you?

- Yes, definitely
- Yes, to some extent
- No

Q49. In the one month following your discharge, were you re-admitted to any hospital or did you go to an emergency department because of complications related to the care you received?

- Yes
- No
- Don't know/can't remember

Q50. In the three months following your discharge, were you re-admitted to any hospital or did you go to an emergency department because of complications related to the care you received?

- Yes
- No
- Don't know/can't remember

About you (the patient)

The questions in this section will help us to see how experiences vary between different groups of the population.

Q51. What year were you born?

Write in (YYYY)

Q52. How do you describe your gender?

Please one option

- Man or male
- Woman or female
- Non-binary
- Prefer to use a different term

Please specify below.

- Prefer not to answer

Q53. What is the highest level of education you have completed?

- Less than Year 12 or equivalent
- Completed Year 12 or equivalent
- Trade or technical certificate or diploma
- University degree
- Postgraduate/higher degree

Q54. Which language do you mainly speak at home?

- English
- A language other than English

What is that language? Please write below.

Q55. Are you of Aboriginal origin, Torres Strait Islander origin, or both?

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

Q56. Which, if any, of the following longstanding health conditions do you have (including age-related conditions)?

Please all the boxes that apply to you

- Deafness or severe hearing impairment
- Blindness or severe vision impairment
- A longstanding illness (e.g. cancer, HIV, diabetes, chronic heart disease)
- A longstanding physical condition (e.g. arthritis, spinal injury, multiple sclerosis)
- An intellectual disability
- A mental health condition (e.g. depression)
- A neurological condition (e.g. Alzheimer's, Parkinson's)
- None of these **Go to Q58**

Q57. Does this condition(s) cause you difficulties with your day-to-day activities?

- Yes, definitely
- Yes, to some extent
- No

BHI would like your permission to link your questionnaire responses to other information from health records relating to you which are maintained by NSW Government and Commonwealth agencies (including your hospitalisations or health registry information).

Linking to your health information will allow us to better understand how the care provided by health services is related to the health of their patients.

Your information will be treated in the strictest confidence. BHI will not report any results that may identify you as an individual. Your questionnaire responses will not be accessible to the health professionals who cared for you.

Q58. Do you give permission for the Bureau of Health Information to link your answers from this survey to health records related to you (the patient)?

- Yes
- No

Please turn over to complete questionnaire →

Comments

Q59. What was the best part of the care you received from this hospital?

Please don't include your name, address or any personal information about yourself or the health professionals who treated you.

Q60. What most needs improving about the care you received from this hospital?

Please don't include your name, address or any personal information about yourself or the health professionals who treated you.

Thank you for taking the time to complete the questionnaire

Please return the questionnaire in the reply paid envelope provided or send it in an envelope addressed to our survey processing centre (no stamp needed):
NSW Patient Survey, Ipsos Social Research Institute,
Reply Paid 91752, Port Melbourne VIC 3207

Some of the questions asked in this survey are sourced from the NHS Patient Survey Programme (courtesy of the NHS Care Quality Commission).
Questions are used with the permission of this organisation.

Barcode