

## NSW Patient Survey: Admitted Young Patients

<Barcode>  
<First Name> <Last Name>  
<Address Line 1>  
<SUBURB> <STATE> <POSTCODE>

Date

Dear <FIRST NAME> ,

### Your experience in hospital is very important to us

I am writing to ask you to take part in the NSW Patient Survey by telling us about your recent admission to [HOSPITAL NAME] during [MONTH]. **Your experience in this hospital is important as it helps us to understand the quality of care you received and allows hospitals to see where they need to improve.**

**The survey is easiest to complete online.** Please visit the web address below (or scan the QR code) and log in with the following username and password. It is possible to partially complete the survey online and then return to it later to complete the remainder.



**Web address:** [survey.ipsos.com.au/patientsurvey](http://survey.ipsos.com.au/patientsurvey)

**Username:** [INS\_UNAME]

**Password:** [INS\_PWORD]

If you prefer to complete the attached paper survey, please use the included reply-paid envelope to mail it back to us.

Taking part in the survey is voluntary. You have been randomly selected to participate and there are many safeguards in place to protect your identity. The hospital staff who cared for you will not know if you have returned a completed survey and will not be able to see your responses to the survey. At no point will we report any information that identifies you as an individual.

The Bureau of Health Information (BHI) runs the survey along with Ipsos Social Research Institute, who is sending you this survey on BHI's behalf. BHI was established by the NSW Government to independently report on the performance of the public health system in NSW, including the healthcare experiences of patients. Results for the NSW Patient Survey are reported in *Healthcare Observer*, found on our website [www.bhi.nsw.gov.au](http://www.bhi.nsw.gov.au)

**If you have any queries regarding the survey, please contact the toll-free Patient Survey Helpline on 1800 220 936 (Monday to Friday, 4pm–8pm).**

Thank you for taking part in the survey.

Yours sincerely

**Jean-Frédéric Lévesque**

Chief Executive

Bureau of Health Information



## How to complete the survey

This survey is about your recent experience as a patient admitted to the hospital named on the previous page. If you have been an admitted patient more than once during the month specified on the previous page, please answer about your most recent experience.

For each question, please use a blue or black pen to mark the box  next to the answer you choose, as shown below.

### **Example only**

**How clean were the wards or rooms you stayed in while in hospital?**

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

Sometimes you will find the box you have marked has an instruction to go to another question. By following the instructions carefully you will be able to move past questions that do not apply to you.

If you would prefer not to answer individual questions, leave them blank but please complete the rest of the survey.

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

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

If you prefer a language other than English, please refer to the separate language sheet for information on the Healthcare Interpreter Service.

Please do not write your name or address on the survey.

### **When you have finished**

- ➔ Remove the covering letter by tearing along the perforated line.
- ➔ Place the completed survey in the "Reply Paid" envelope and post it. You do not have to use a stamp.
- ➔ If you have misplaced the "Reply Paid" envelope, please use a plain envelope (no stamp is necessary) and address to:

**NSW Patient Survey Program  
Ipsos Social Research Institute  
Reply Paid 84599  
Hawthorn VIC 3122**

## Some questions and answers

### **Why are you carrying out the survey?**

The NSW Patient Survey gathers information about your experience of health services. By completing the survey, you are helping to improve health services in NSW.

### **Why have I been sent a survey?**

You have been sent a survey because you were recently admitted to a NSW public hospital.

Under NSW Health policy, 16 and 17 year old patients are considered old enough to provide consent for their own hospital treatment. Because of this, patients of this age are asked to complete the survey themselves (as opposed to having a parent or carer completing it on their behalf).

### **What happens to my survey responses?**

Your survey responses will be de-identified and then processed with responses from other people who completed the survey to form a report. These reports will then be provided to NSW Health and local hospitals to help them to improve health services.

Your responses will be treated in the strictest confidence and no identifying information will be given to NSW Health, the hospital or health service you attended, your doctor or other health provider unless required by law. Your responses will not affect any future health services that may be provided to you.

### **How is my privacy protected?**

Your privacy is protected by legislation. Ipsos has been provided with your name and address by NSW Health for the purpose of sending you this survey only, and will keep your contact details confidential.

After all surveys are processed, identifying information will be destroyed and Ipsos will then no longer be able to identify the responses you provided. However, for the period that identifiable details remain, you will be able to contact Ipsos through the toll-free Patient Survey Helpline to ask to see your responses, or to request that some or all of your information be deleted.

You can get more information about privacy and confidentiality by calling the toll-free Patient Survey Helpline or at the following website:

**[www.bhi.nsw.gov.au/nsw\\_patient\\_survey\\_program/privacy](http://www.bhi.nsw.gov.au/nsw_patient_survey_program/privacy)**

### **How do I make a formal complaint about my experience in hospital?**

Please contact the hospital directly.

Alternatively, you can get more information about your options at the following website:

**[www.health.nsw.gov.au/patientconcerns](http://www.health.nsw.gov.au/patientconcerns)**

# NSW Patient Survey: Admitted Young Patients

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

- An emergency ..... **Go to Q5**
- Planned in advance
- Something else

## BEFORE ARRIVING AT HOSPITAL

Thinking back to before your hospital stay...

**Q2** From the time a doctor said you would need to go to hospital, how long did you have to wait to be admitted?

- Less than 1 month
- 1 to 3 months
- 4 to 6 months
- 7 to 12 months
- More than 1 year
- Don't know/can't remember

**Q3** Do you think the amount of time you waited to go to hospital was...?

- About right
- Slightly too long
- Much too long
- Don't know/can't remember

**Q4** Before your arrival, how much information about your hospital stay was given to you?

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

## ARRIVING AT HOSPITAL

**Q5** When you arrived in hospital did you spend time in the emergency department?

- Yes
- No ..... **Go to Q8**
- Don't know/can't remember ..... **Go to Q8**

## THE EMERGENCY DEPARTMENT (ED)

**Q6** Were the emergency department staff polite and courteous?

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

**Q7** Do you think the amount of time you spent in the emergency department was... ?

- About right ..... **Go to Q10**
- Slightly too long ..... **Go to Q10**
- Much too long ..... **Go to Q10**
- Don't know/can't remember ..... **Go to Q10**

## PLANNED AND OTHER TYPES OF ARRIVAL / ADMISSION

**Q8** Were the staff you met on your arrival to hospital polite and courteous?

- Yes, always
- Yes, sometimes
- No

Q9

Do you think the time you had to wait from arrival at hospital until you were taken to your room or ward was...?

- About right
- Slightly too long
- Much too long
- Don't know/can't remember

## THE HOSPITAL AND WARD

Q10

For **most** of your stay in hospital, what type of room or ward were you in?

- A children's room or ward
- An adolescent's/teenager's room or ward
- An adult's room or ward
- Don't know/can't remember

Q11

Was the room or ward suitable for someone your age?

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

Q12

Were there things for you to do (such as books and games)?

- There were plenty of things for me to do
- There were some things, but not enough
- There was nothing for my age group
- There was nothing for children to do
- Don't know/can't remember

Q13

How clean were the wards or rooms you stayed in while in hospital?

- Very clean
- Fairly clean
- Not very clean
- Not at all clean
- Don't know/can't remember

Q14

How clean were the toilets and bathrooms that you used while in hospital?

- Very clean
- Fairly clean
- Not very clean
- Not at all clean
- Don't know/can't remember

Q15

Did you see the health professionals wash their hands, or use hand gel to clean their hands, before touching you?

- Yes, always
- Yes, sometimes
- No, I did not see this
- Can't remember

Q16

Were you given enough privacy during your hospital stay?

- Yes, always
- Yes, sometimes
- No

Q17

Were you ever bothered by noise in the hospital?

- Yes
- No

## FOOD

Q18

How would you rate the hospital food?

- Very good
- Good
- Not good or bad
- Bad
- Very bad
- I did not have any hospital food... [Go to Q21](#)

Q19

Did you have any special dietary needs (e.g. vegetarian, diabetic, food allergies, religious, cultural, or related to your treatment)?

- Yes  
 No .....Go to Q21

Q20

Was the hospital food suitable for your dietary needs?

- Yes, always  
 Yes, sometimes  
 No

## DOCTORS

Q21

If you needed to talk to a doctor, did you get the opportunity to do so?

- Yes, always  
 Yes, sometimes  
 No, I did not get the opportunity  
 I had no need to talk to a doctor

Q22

In your opinion, did the doctors who treated you know enough about your medical history?

- Yes, always  
 Yes, sometimes  
 No

Q23

Did you have confidence and trust in the doctors treating you?

- Yes, always  
 Yes, sometimes  
 No

Q24

Were the doctors kind and caring towards you?

- Yes, always  
 Yes, sometimes  
 No

## NURSES

Q25

In your opinion, did the nurses who treated you know enough about your care and treatment?

- Yes, always  
 Yes, sometimes  
 No

Q26

Did you have confidence and trust in the nurses treating you?

- Yes, always  
 Yes, sometimes  
 No

Q27

Were the nurses kind and caring towards you?

- Yes, always  
 Yes, sometimes  
 No

## YOUR TREATMENT & CARE

For the following questions, please think about all the health professionals who treated or examined you in the hospital, including doctors, nurses and others.

Q28

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

- Yes, always  
 Yes, sometimes  
 No

Q29

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 to my situation

**Q30** Did you receive contradictory information from health professionals in the hospital – for example, different opinions on your treatment?

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

**Q31** Did you have worries or fears about your condition or treatment while in hospital?

- Yes
- No .....Go to Q33

**Q32** Did a health professional discuss your worries or fears with you?

- Yes, completely
- Yes, to some extent
- No

**Q33** Did the health professionals introduce themselves to you?

- Yes, always
- Yes, sometimes
- No

**Q34** Were you involved, as much as you wanted to be, in decisions about your care and treatment?

- Yes, definitely
- Yes, to some extent
- No
- I did not want or need to be involved
- Not applicable to my situation

**Q35** Was a family member or carer allowed to remain with you when you were being treated (excluding surgery)?

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

**Q36** How would you rate how well the health professionals worked together?

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

**Q37** Did you feel you were treated with respect and dignity while you were in the hospital?

- Yes, always
- Yes, sometimes
- No

**Q38** Were your cultural or religious beliefs respected by the hospital staff?

- Yes, always
- Yes, sometimes
- No, my beliefs were not respected
- My beliefs were not an issue

**Q39** While in hospital, did you receive or see any information about how to comment or complain about your care?

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



Q40

Not including the reason you came to hospital, during your hospital stay, or soon afterwards, did you experience any of the following complications or problems?

Please  all the boxes that apply to you

- An infection
- Uncontrolled bleeding
- A negative reaction to medication
- Complications as a result of an operation or surgical procedure
- Complications as a result of tests, X-rays or scans
- A blood clot
- A pressure wound or bed sore
- A fall
- Any other complication or problem
- None of these.....Go to Q43

Q41

Was the impact of this complication or problem...?

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

Q42

In your opinion, were members of the hospital staff open with you about this complication or problem?

- Yes, completely
- Yes, to some extent
- No
- Not applicable, as it happened after I left

## INFORMATION AND ACCESS

Q43

How much information were you given about the hospital facilities available to you?

- Not enough
- The right amount
- Too much
- Not applicable to my situation

Q44

Were facilities available for parents and carers to make drinks or food?

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

## PAIN

Q45

If you were in pain, did the doctors and nurses do everything they could to help with your pain?

- Yes, definitely
- Yes, to some extent
- No
- I was not in any pain

## TESTS

Q46

During your stay in hospital, did you have any tests, X-rays or scans?

- Yes
- No .....Go to Q50

Q47

Did a health professional discuss the purpose of these tests, X-rays or scans with you?

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

Q48

Did you receive test, X-ray or scan results while you were still in hospital?

- Yes
- No .....Go to Q50

Q49

Did a health professional explain the test, X-ray or scan results in a way that you could understand?

- Yes, completely
- Yes, to some extent
- No

## LEAVING HOSPITAL (DISCHARGE)

Thinking now about when you were discharged, that is when you left the hospital to go home or to another facility...

**Q50** Did you feel involved in decisions about your discharge from hospital?

- Yes, definitely
- Yes, to some extent
- No, I did not feel involved
- I did not want or need to be involved

**Q51** At the time you were discharged, did you feel that you were well enough to leave the hospital?

- Yes
- No

**Q52** Thinking about when you left hospital, were you given enough information about how to manage your care at home?

- Yes, completely
- Yes, to some extent
- No, I was not given enough
- I did not need this type of information

**Q53** Thinking about when you left hospital, were adequate arrangements made by the hospital for any services you needed?

- Yes, completely
- Yes, to some extent
- No, arrangements were not adequate
- It was not necessary

**Q54** Did hospital staff tell you who to contact if you were worried about your condition or treatment after you left hospital?

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

**Q55** Were you given or prescribed any new medication to take at home?

- Yes
- No .....Go to Q58
- Don't know/can't remember ....Go to Q58

**Q56** Did a health professional in the hospital explain the purpose of this medication in a way you could understand?

- Yes, completely
- Yes, to some extent
- No

**Q57** Did a health professional in the hospital tell you about medication side effects to watch for?

- Yes, completely
- Yes, to some extent
- No

**Q58** Did you receive a copy of a letter from the hospital doctors to your family doctor (GP)?

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

**Q59** On the day you left hospital, was your discharge delayed?

- Yes
- No .....Go to Q63

**Q60** How long was the delay?

- Less than 1 hour
- At least 1 hour but less than 2 hours
- At least 2 hours but less than 4 hours
- 4 hours or longer
- Don't know/can't remember



■

**Q61** Did a member of staff explain the reason for the delay?

- Yes
- No

**Q62** What were the main reasons for the delay?  
Please  all the boxes that apply to you

- I had to wait for medicines
- I had to wait to see the doctor
- I had to wait for an ambulance or hospital transport
- I had to wait for the letter for the GP
- I was not well enough
- Some other reason
- Don't know/can't remember

## OVERALL

**Q63** Overall, how would you rate the care you received while in hospital?

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

**Q64** How well organised was the care you received in hospital?

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

**Q65** 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

**Q66** Did you want to make a complaint about something that happened in hospital?

- No, I did not want to make a complaint ..... [Go to Q68](#)
- Yes, and I did complain ..... [Go to Q68](#)
- Yes, but I did not complain

**Q67** Why didn't you make a complaint?  
Please  all the boxes that apply to you

- I didn't know how to make a complaint
- I didn't know who to complain to
- I was worried it might affect my future care
- I didn't think it would be taken seriously
- It wasn't a serious issue
- Some other reason

## OUTCOMES

**Q68** Did the care and treatment received in hospital help you?

- Yes, definitely
- Yes, to some extent
- No, not at all

**Q69** Is the problem you went to hospital for...?

- Much better
- A little better
- About the same
- A little worse
- Much worse

**Q70** In the week before your hospital stay, how difficult was it for you to carry out your normal daily activities (e.g. physical activity, going to school/TAFE or going to work)?

- Not at all difficult
- Only a little difficult
- Somewhat difficult
- Very difficult
- Too difficult to do

**Q71** About one month after your discharge from hospital, how difficult was it for you to carry out your normal daily activities?

- Not at all difficult
- Only a little difficult
- Somewhat difficult
- Very difficult
- Too difficult to do

## ABOUT YOU

**Q72** What year were you born?

WRITE IN (YYYY)

**Q73** What is your gender?

- Male
- Female

**Q74** Which language do you mainly speak at home?

- English ..... [Go to Q76](#)
- A language other than English

**Please write in the language:**

**Q75** Was an interpreter provided when you needed one?

- Yes, always
- Yes, sometimes
- No, an interpreter was needed but not provided
- No, an interpreter was not needed

**Q76** Which, if any, of the following long-standing conditions do you have?

Please  **all the boxes that apply to you**

- Deafness or severe hearing impairment
- Blindness or severe vision impairment
- A long-standing illness (e.g. cancer, diabetes, respiratory disease)
- A long-standing physical condition
- A learning disability
- A mental health condition (e.g. depression, eating disorder)
- A neurological condition (e.g. ADHD)
- None of these

**Q77** In general, how would you rate your health?

- Excellent
- Very good
- Good
- Fair
- Poor

**Q78** 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

**Q79** Who completed this survey?

- The patient
- The patient with help from a parent or carer
- The parent or carer of the patient



**Q80** The Bureau of Health Information would like your permission to link your survey answers to other information from health records relating to you which are maintained by various NSW and Commonwealth agencies (including your hospitalisations, medical visits, ambulance transportation, medication or health registry information). Linking to your health care information for the two years before and after your visit will allow us to better understand how different aspects of the care provided by health facilities are related to the health and use of health services of their patients.

Your information will be treated in the strictest confidence. We will receive the linked information after your name and address have been removed. We will not report any results which may identify you as an individual and your responses will not be accessible to the people who looked after you.

Do you give permission for the Bureau of Health Information to link answers from this survey to health records related to you?

- Yes
- No

## YOUR FINAL COMMENTS

**Q81** What was the best part of the care you received while in this hospital?

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---





Q82

What part of your care provided by this hospital most needs improving?

Sample 2015

Thank you for your time.

Please remove the front page by tearing along the perforated line.

Return the survey in the reply paid envelope provided or send in an envelope addressed to  
NSW Patient Survey, Ipsos Social Research Institute, Reply Paid 84599, Hawthorn, VIC 3122  
(no stamp is needed)

*Some of the questions asked in this survey are sourced from the NHS patient survey programme (courtesy of the NHS Care Quality Commission and the National Research Corporation (USA)), from the Australian Patient Experience Indicator Development Working Group (PEIDWG) national set of core, common patient experience questions and from the Royal College of Paediatrics and Child Health and Picker Institute Europe Urgent and Emergency Care PREM tools. Questions are used with the permission of each organisation.*

Barcode

