



Patient survey of acute services



Please tell us what you think about your hospital.



It will help us check services and help them get better.



Please tick the box that is best for you or write your answer in the space. There is extra space at the end if you need more space for answers.



You do not have to answer any questions you do not want to.

About you



1. Are you

Female

Male

Prefer not to say



2. How old are you?



3. Which hospital did you go to?



4. Which part of the hospital did you go to?
Which ward or department?



About your hospital

5. Before you went into hospital were you told what was going to happen while you were there?

Yes

No



For example, did they send you any information?
And was it in easy read?

Yes

No



6. Did the hospital do anything special to help you with your needs when you got there?

For example, could you wait in a quieter room, or were given extra time to talk to the doctor about what you might need?



Yes. Please tell us what;



No. Was there anything they could have done?



7. Did you understand everything that was said to you?

For example, why you were there, what was going to happen to you?

Yes

No



8. Were you involved in everything that happened to you and were you told what was happening?

Yes

No

What could they have told you more about?



9. Were your family or carer involved in what would happen to you if you wanted them to be?

Yes

No

Do not know



10. How were the staff? How did they treat you?



11. Were you given help to plan what would happen after you left the hospital?

Yes

No



12. When you left the hospital did they give you any information about what you might need to do when you got home?

For example:

- a list of when to take any pills?
- what to do with bandages or dressings?
- how to keep well?

Yes

No



13. How did you find your time in the hospital?
For example,

What went well?

What could have been done better?

Do you want to tell us anything else about
your stay in the hospital?

Extra space.



Thank you very much for helping us!

What you have said will be very helpful to us and the Hospital.



Please send this form to:



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