



Scottish Inpatient Experience Survey 2016

Volume 2: Technical Report



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INTRODUCTION

This report provides information on the technical aspects of the 2015/16 Scottish Inpatient Experience Survey including implementation, analysis and reporting.

The survey covers seven specific areas of people's experience: admission to hospital; the hospital and ward; care and treatment; operations and procedures; hospital staff; arrangements for leaving hospital; and care and support services after leaving hospital.

The Inpatient Experience Survey is jointly supported by Scottish Government, Information Services Division (ISD Scotland)¹ and NHS Boards. **National results** as well as individual reports for NHS Health Boards, including Golden Jubilee Foundation (GJF), and hospitals were **published on 30 August 2016**.

The Inpatient Experience Survey is one of a suite of national surveys which are part of the Scottish Care Experience Survey Programme. The surveys aim to provide local and national information on the quality of health and care services from the perspective of those using them. They allow local health and care providers to compare with other areas of Scotland and to track progress in improving the experiences of people using their services.

Information about the other national care experience surveys is available at: www.gov.scot/Topics/Statistics/Browse/Health/careexperience

¹ The Information Services Division (ISD) is part of National Services Scotland. ISD provides health information, health intelligence, statistical services and advice that supports the NHS in progressing quality improvement in health and care. ISD role's in the inpatient survey is to analyse the national and local results and produce NHS Board and hospital level reports.

CHANGES TO THE SURVEY

Survey development

The survey was fundamentally redeveloped ahead of the 2014 survey, details of which are available in the 2013/14 survey's technical report:

www.gov.scot/Publications/2015/03/9281/0

Minimal changes were made to the 2016 survey to ensure comparability and allow reporting of trends over time. Details of these changes are outlined below.

Changes to the 2016 Survey, compared with the 2014 Survey

New questions

Only one new question was added to the 2016 Inpatient Survey, which is shown in Table 1 below:

Table 1: New question for the 2015/16 Survey

Question Number	Question	Reason for new question
14i	The equipment used for my treatment was clean.	This question was proposed by SG health policy area covering healthcare associated infection as this is an important part of patient care.

Changed questions

Changes were made to three existing questions, which are shown in Table 2.

Table 2: Questions changed in the 2016 Inpatient Experience Survey

Question Number 2016 Survey	Question	Question Number 2014 Survey	Reason for change
14h	There were times when I felt threatened by other patients or visitors.	14h	This question has been reworded to exclude the word 'bothered' which will enable benchmarking against England.
26	During your stay in hospital, if you had a drip or needle in a vein to give you medicines or fluids, did any of the following occur? – Response options amended	26	The answer options to this question have been reworded in order to make it easier for people to answer. In its previous format, the available response options meant that the correct response for some people was to leave the question blank. Now all respondents can select a valid answer.
53	How did you feel about the overall length of time you were in hospital?	53	This question has been reworded to include the word 'overall' for clarification and consistency with other 'overall' questions.

Changes to the survey

Removed questions

No questions were removed from the 2016 Inpatient Survey.

Survey materials

The survey mail out included a questionnaire, an invitation letter, an information leaflet in a range of languages and a freepost envelope. Respondents also had the option to complete and return the questionnaire online or via a telephone helpline in a wide range of languages. The helpline was also available to handle questions or complaints about the survey.

A copy of the questionnaire and other survey materials can be found at :
www.gov.scot/Topics/Statistics/Browse/Health/InpatientSurvey/Inpatient2016

SAMPLE

Introduction

The sampling approach for the Inpatient experience survey was designed to meet the needs of each NHS Board and inform local improvement work whilst being able to give a meaningful comparison across Boards and provide national level results.

A stratified sampling strategy was developed through consultation between the Health and Social Care team within the Scottish Government, analysts with ISD Scotland and representatives of each NHS Board.

Design of sample

Sample strata were agreed with each NHS Board to meet their needs in providing local results at the most useful level. These strata were defined either at site (hospital) level, sub-site (directorate or grouped specialties) level or as groupings of smaller hospitals, depending on what was most appropriate for each NHS Board.

Sampling frame

Eligible people were identified from an extract from ISD's Scottish Morbidity Register database (SMR01) of hospital admissions.

Eligible people were defined as adults (aged 16 years old and above on discharge from hospital) who had an overnight stay in hospital as an inpatient (defined as one night or more where the individual was in hospital at midnight in an inpatient bed) between April 2015 and September 2015.

Details of the type of people excluded from the survey are as follows:

- People who received privately funded care in NHS or private hospitals
- Scottish NHS patients treated in hospitals outside of Scotland but whose care was commissioned by an NHS Board
- People who were not resident in Scotland, with the exception of Northumberland residents treated in NHS Borders
- People who were receiving care as an outpatient or day case which did not result in an overnight stay
- People who were expected to have an overnight stay at admission but did not
- People who stayed in hospital for termination of pregnancy
- People who stayed in a hospital maternity unit
- People who were known to be deceased, i.e. those who had death recorded in SMR01 records
- People treated in a private hospital

Sample

- People treated in a hospice
- Inpatients who were being treated for a mental health condition in a mental illness hospital
- Inpatients who were resident in a long-stay hospital
- Inpatients who were being treated in a learning disabilities unit, and
- Inpatients aged 15 or less on discharge

Based on the selection and exclusion criteria, the **total number of inpatients** who were eligible to take part in the study was **183,363**². Table 3 summarises the total number of eligible inpatients within each NHS Board.

Table 3 Total number of eligible inpatients within each NHS Board including deceased people

NHS Board	Inpatient Population
NHS Ayrshire & Arran	14,731
NHS Borders	3,733
NHS Dumfries & Galloway	4,601
NHS Fife	9,777
NHS Forth Valley	8,374
Golden Jubilee Foundation	3,685
NHS Grampian	17,577
NHS Greater Glasgow & Clyde	50,686
NHS Highland	6,439
NHS Lanarkshire	18,537
NHS Lothian	27,429
NHS Orkney	511
NHS Shetland	531
NHS Tayside	15,971
NHS Western Isles	781
Total	183,363

Sampling method

The sample size calculation was based on a 95% confidence level, with a margin of error of 5% either side. This produced results which would be accurate to within +/- 5 percentage points. Where the sample site has less than 1,000 inpatients in the sampling period, this was increased to +/-7 percentage points to avoid sampling too many people.

Table 4 shows that to achieve this level of accuracy, **22,062 completed returns** were required.

Expected response rates within each NHS Board were calculated based on the response rates achieved by the 2014 Survey. These were used to adjust the required sample size to allow for non-response.

² This total excludes people who were recorded as being deceased on SMR01 but includes people who were identified as being deceased by either NHSCR or HSCIC following initial sampling. These people were subsequently removed from the sample before surveys were sent.

Sample

Table 4 shows that after applying these expected response rates the **total sample size** was **44,575**.

Table 4 Required sample and total selected sample

NHS Board	Required sample	To allow for non-response	Proportion of inpatients sampled
NHS Ayrshire & Arran	2,334	5,104	35%
NHS Borders	407	724	19%
NHS Dumfries & Galloway	982	1,879	41%
NHS Fife	622	1,394	14%
NHS Forth Valley	530	1,059	13%
Golden Jubilee Foundation	636	851	23%
NHS Grampian	2,812	5,575	32%
NHS Greater Glasgow & Clyde	6,412	13,144	26%
NHS Highland	1,984	3,731	58%
NHS Lanarkshire	1,084	2,596	14%
NHS Lothian	2,595	5,268	19%
NHS Orkney	142	293	57%
NHS Shetland	143	312	59%
NHS Tayside	1,155	2,250	14%
NHS Western Isles	225	395	51%
Total	22,062	44,575	24%

Sampling procedures

A list of eligible people was produced by ISD Scotland by combining a list of people extracted from Scottish Morbidity Register database (SMR01) of hospital admissions and a list provided by NHS Greater Glasgow & Clyde.

The final sample frame was compiled from the list of eligible people after duplications, incomplete records, deceased people and ineligible people were removed.

A random selection of people for each strata was chosen from the final sample frame based on a random number generated on the uniform distribution $U(0,N)$, where N is the total number of people within that sampling strata, with each person selected allocated a unique number.

FIELDWORK

The Scottish Government contracted Quality Health Ltd to administer the survey. Quality Health Ltd has in depth experience of NHS surveys, and has provided support for other patient experience survey work both in Scotland and elsewhere in the UK. ISD Scotland provided support for the administration of the survey along with Scottish Government analytical staff.

Mail-out

The fieldwork **commenced** on **20 January 2016** with **43,901 survey packs initially posted** by the contractor on behalf of each NHS Board.

Reminder letters were sent out twice during the duration of fieldwork to further encourage participation in the study. The **first reminder**, which consisted solely of a reminder letter, was sent on **17 February 2016** to all people who did not respond to the first mailing in the three or four weeks after receiving the initial survey pack.

A **second reminder**, which consisted of a full survey pack, was sent out on **16 March 2016** to all those people who did not respond approximately four weeks after the first reminder letter was issued.

Data collection

Data was collected in the form of hardcopy (postal) returns and online returns.

During the fieldwork, a freephone helpline was made available to respond to queries from the people surveyed. Approximately 950 telephone enquiries were received.

Deceased people

As with all Care Experience surveys, ISD Scotland and the Scottish Government were keen that every possible effort was made to avoid questionnaires being sent to family members of deceased people. Therefore, similar to previous surveys, before the initial survey and reminders were issued, a list of people included in the survey was sent to NHS Central Register (NHSCR³) and linked to the National Records of Scotland (NRS) deaths database. This allows NHSCR to provide regular extracts of deceased people to ISD Scotland during the various mail-out periods. This process also helped identify people who had died elsewhere in the UK. Having access to death information greatly reduced the number of questionnaires being sent to addresses of deceased people. We are grateful to NHSCR for their help and support during this stage of the project.

³ <http://www.nrscotland.gov.uk/statistics-and-data/nhs-central-register>

Fieldwork

A total of 544 people were identified as deceased by NHSCR checks and removed from the sample prior to the initial mail-out of the survey. These individuals were not sent survey packs.

NHSCR checks identified 432 and 389 people as deceased prior to the first and second mail-out respectively. These individuals were not sent reminders.

In a further 43 cases, a questionnaire was sent to a person who had died but had not yet appeared on the deaths database and the person's family contacted Quality Health Ltd to notify them of this.

Any death which occurs in Scotland must be registered within eight days of the date of death. This means that there can be a delay between the actual date of death and the date that is registered and updated on the NRS database.

This delay, combined with the volume of the mail-out process, made it extremely difficult to prevent all questionnaires being sent to addresses of deceased people. However, as outlined above, considerable effort was made to avoid this as much as possible.

DATA ENTRY AND FIELDWORK QUALITY CONTROL

Data entry and coding

Paper questionnaires received by Quality Health Ltd were logged and scanned on a daily basis. A verification process was then carried out for each batch scanned and a number of integrity checks were undertaken to ensure that the scanning process had worked correctly and all data had been captured as expected.

Data from online questionnaires is automatically stored alongside the data from the paper questionnaires.

Once captured, all data are checked in house by Quality Health Ltd according to pre-set verification rules, by staff who have been given training and detailed instructions about the survey. The data entry system ensured that only valid answer codes for each question could be entered and that the correct data appeared in each field. Other checks included ensuring that numeric data was the correct format and that fields were not truncated in error.

Secure disposal

Once processed, all returned questionnaires were immediately stored in labelled containers and archived in a secure room on-site until they reached their agreed destruction date. Once destroyed a certificate of destruction was received.

Free text

The survey asked respondents three questions where a written comment could be provided:

- Was there anything particularly good about your hospital stay?
- Was there anything that could be improved?
- Do you have any other comments?

Disclosive details that could be used to identify people were suppressed when the comments were entered. These details included personal names, addresses, ages, dates, medications and medical conditions. Staff names were also removed.

Quality checks were undertaken on records to ensure that the instructions for suppressing disclosive details were followed.

SURVEY RESPONSE

Response rate for the survey

The response rate for the survey is the number of completed forms returned as a percentage of the number of people in the sample. In total, **43,901 surveys were sent** to people and **17,767** were **returned completed**, giving an **overall response rate** of **40 per cent**.

Response analysis

The number of responses analysed for each question is lower than the total number of responses received. This is because not all of the questionnaires returned could be included in the calculation of results for every individual question. This was mainly for the following reasons:

- the specific question did not apply to the respondent and so they did not answer it. For example if they were not admitted to the A&E department the respondent therefore did not answer questions about their experience at A&E
- the respondent did not answer the question for another reason (e.g. refused). People were advised that if they did not want to answer a specific question they should leave it blank
- the respondent answered that they did not know or could not remember the answer to a particular question (these responses are typically excluded from results calculations)
- the respondent gave an invalid response to the question, for example they ticked more than one box where only one answer could be accepted

The number of responses analysed also varied between NHS Board and site reporting due to suppressions and exclusions that were applied at the different levels of analysis.

Response rates

The **highest response rate** for an NHS Board was the **Golden Jubilee Foundation (69 per cent)** and the **lowest response rate** was for **Greater Glasgow and Clyde (36 per cent)** (Table 5).

Survey Response

Table 5 Response rate by NHS Board

NHS Board	Total forms sent out	Number of Responses	Response Rate	Expected Response Rate
Ayrshire and Arran	5,030	1,898	38%	46%
Borders	702	334	48%	53%
Dumfries and Galloway	1,851	796	43%	52%
Fife	1,366	495	36%	45%
Forth Valley	1,045	377	36%	45%
Golden Jubilee Foundation	845	584	69%	75%
Grampian	5,495	2,518	46%	50%
Greater Glasgow and Clyde	12,943	4,657	36%	46%
Highland	3,680	1,582	43%	51%
Lanarkshire	2,566	925	36%	42%
Lothian	5,179	2,202	43%	48%
Orkney	290	160	55%	49%
Shetland	306	130	42%	46%
Tayside	2,212	944	43%	49%
Western Isles	391	165	42%	52%
Total	43,901	17,767	40%	48%

Method of response

Of the 17,767 respondents, the majority of surveys were completed and returned in the post (Table 6).

Table 6 Response rate per method of response

Completion method	Number of Questionnaires completed	Completed (%)
Post	16,367	92
Online	1,367	8
Telephone	32	0
Language line	1	0

Non response

Undeliverable

A total of 611 (**one per cent**) questionnaires were **returned** to the contractors as **undelivered**. It is possible that a number of people have moved address during the period after leaving hospital and the survey being distributed.

Returned blank

A total of 1,778 (**four per cent**) questionnaires were **returned blank**. This was explained to respondents as being a way for them to opt out of the survey. Some of these questionnaires were returned blank due to the respondent being too ill to complete it.

ANALYSIS AND REPORTING

Analysis

The survey data collected and coded by Quality Health Ltd were securely transferred to ISD Scotland via secure FTP and analysed using the statistical software package SPSS.

The analysis produced by ISD Scotland was transferred to the Scottish Government for inclusion in the national report.

Weighting the data

Estimates for Scotland and NHS Boards are weighted as the sampling is based on a stratified approach. The weight is calculated as the number of eligible inpatients (aged 16+ and therefore eligible for survey) as a proportion of the total number of eligible inpatients (Scotland or NHS Board).

Weighting the results in this way provides more representative results because the contribution of each hospital, to the national or NHS Board average, is proportional to the number of eligible patients treated there.

Percentage positive and negative

Percentage positive is frequently used in the reporting meaning the percentage of people who answered in a positive way. If people said they strongly agreed or agreed, these answers have been counted as positive responses. If people said they disagreed or strongly disagreed, these have been counted as negative.

[Appendix A](#) details which responses have been classed as positive and negative for each question.

Inclusions and Exclusions

A description of people excluded from sampling is provided in section [sampling frame](#).

Hospitals without an A&E department or a minor injury unit will not contain result for the A&E section of the hospital reports.

Reports for NHS Boards and hospitals are only produced if there are 50 or more responses. If a particular question had less than 20 responses, the results for that question were suppressed within the report.

Scotland Performs Healthcare Experience Indicator

The Healthcare Experience Indicator has been developed to measure the reported experience of people using the NHS. It is one of the 50 National Indicators in the National Performance Framework, which sets out the

Analysis and Reporting

Government's outcomes based approach. Progress is reported in Scotland Performs: <http://www.gov.scot/About/Performance/scotPerforms>

The indicator is based on the reported experience from hospital inpatients, as a proxy for experience across the NHS. This has been chosen because:

- a) the quality of hospital care is very important to people
- b) the indicator involves the transitions to and from hospital, which depend on health and care services in the community
- c) it includes the feedback of inpatients on experience in A&E which should reflect a much wider population of users and is an indicator of the system

The indicator is calculated by taking the mean scores for individual peoples' answers on the following questions in the inpatient survey and weighting them using total inpatient numbers to get a national score:

- Overall, how would you rate your admission to hospital (i.e. the period after you arrived at hospital until you got to a bed on the ward)?
- Overall, how would you rate the care and treatment you received during your time in the A&E?
- Overall, how would you rate the hospital and ward environment?
- Overall, how would you rate your care and treatment during your stay in hospital?
- Overall, how would you rate all the staff you came into contact with?
- Overall, how would you rate the arrangements made for your leaving hospital?

The score for each question for each patient is: 0 for very poor; 25 for poor; 50 for fair; 75 for good; 100 for excellent.

The mean of a person's scores for the six questions is used rather than the sum because not all people will have answered every question. The methodology will result in an indicator between 0 and 100 which is reported to one decimal place (Table 7).

The analysis was done using the SAS procedure `proc surveymeans` which calculates sampling errors of estimators based on complex sample designs.

Analysis and Reporting

Table 7 Example of how an individual person's answers are converted into a score for the Healthcare Experience Indicator

Question	Very poor (0)	Poor (25)	Fair (50)	Good (75)	Excellent (100)	Score
Q9 Overall, how would you rate the care and treatment you received during your time in A&E?						-
Q13 Overall, how would you rate your admission to hospital (i.e. the period after you arrived at hospital until you got to a bed on the ward)?				✓		75
Q20 Overall, how would you rate the hospital and ward environment?				✓		75
Q34 Overall, how would you rate your care and treatment during your stay in hospital?					✓	100
Q49 Overall, how would you rate all the staff you came into contact with?					✓	100
Q60 Overall, how would you rate the arrangements made for your leaving hospital?					✓	100
Patient Score =						(75+75+100+100+100)/5 = 90

Quality Outcome Indicator

Twelve national Quality Outcome Indicators show progress towards the ambitions of the Quality Strategy. One of these indicators is the Healthcare Experience which combines the Scotland Performs Healthcare Experience Indicator, described above, with data from the Health and Care Experience Survey.

The indicator is calculated by taking the mean of the Scotland Performs Healthcare Experience Indicator and an indicator using the data from a survey of people registered with a GP practice. The latest value of the Healthcare Experience Quality Outcome Indicator is based on the 2016 Inpatient Experience survey and the 2015/16 Health and Care Experience survey⁴.

The GP practice component of the indicator is calculated by taking the mean scores for individual peoples' answers on the following questions in the Health and Care Experience survey and weighting them using GP practice populations to get a national score:

- Overall, how would you rate the arrangements for getting to see a doctor/and or nurse in your GP practice? As there are separate questions about doctors and nurses, the mean score of the answers are used
- Overall, how would you rate the care provided by your GP practice?

⁴ www.gov.scot/Topics/Statistics/Browse/Health/GPPatientExperienceSurvey

Analysis and Reporting

As for the Healthcare Experience Indicator, the score for each question for each patient is: 0 for very poor; 25 for poor; 50 for fair; 75 for good; 100 for excellent.

The analysis was done using the SAS procedure proc surveymeans which calculates sampling errors of estimators based on complex sample designs. The standard error of the indicator is calculated by combining the standard errors of the inpatient and GP components.

National report

The **national level report** was **released** on the **30th August 2016**. It presents national weighted results for each survey question and compares the results with the previous survey, showing statistically significant changes. It also provides results for the 14 NHS Boards and Golden Jubilee Foundation (GJF), and reports on statistically significant differences from the previous survey at the 5% level.

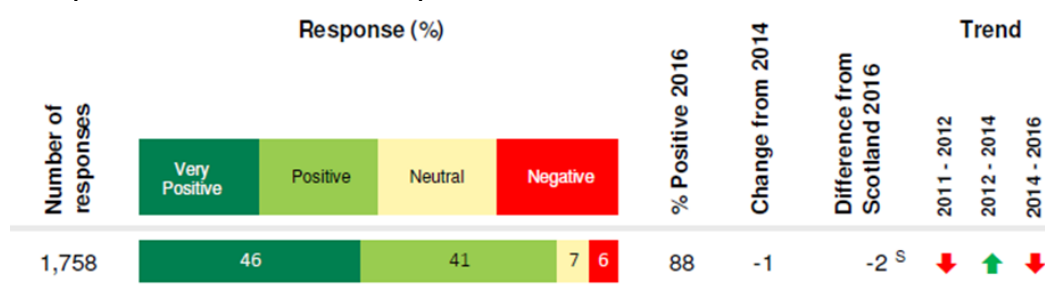
NHS Board and hospital reporting

These reports provide information on the number of people who were sent a survey and the number who responded. They also provide, information on age, gender and whether respondents' day-to-day activities were limited by a health problem or disability. The local reports for individual hospitals and NHS Boards are available at: www.careexperience.scot.nhs.uk/Results2016.html

The format is similar to the 2012 and 2014 reports, with results shown as the positive percentage. This means the percentage of people who answered in a positive way. For example, when asked how much they agreed the main ward or room they stayed in was clean, if patients strongly agreed or agreed these have been counted as positive answers (see [Appendix A](#)).

Bar charts show the percentage positive as green, and the percentage negative as red. The results are compared with those from last year for the same NHS Board or hospital and are also compared with this year's Scottish average. Differences from Scotland or from the previous survey that are statistically significant are shown with a 's' next to the percentage change, e.g. +4s or -5s. Where a comparison has not been performed due to small numbers of responses in any category being compared this is denoted by "NT". An example is shown in Chart 1.

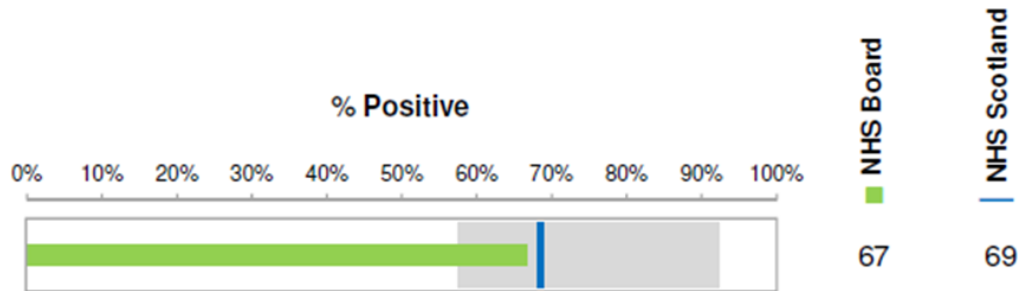
Chart 1 Example of NHS Board/ hospital bar charts



Analysis and Reporting

The variation between NHS Boards and Scotland are shown in the example shown in Chart 2. The green bar represents the NHS Board percentage positive result, the blue line represents the Scottish average with the grey bar displaying the range of percentage positive results from all NHS Boards.

Chart 2 Example of NHS Board variation chart



Details of the data sampling, quality assurance, data sources and confidentiality are can be found at the following [link](#).

APPENDIX A: POSITIVE, NEUTRAL, NEGATIVE CLASSIFICATIONS

The table below shows which answers were classed as positive and which were classed as negative for each question in the inpatient survey.

Table 8 Classification of scoring questions

Question number	Original Question Text	Positive %	Neither positive nor negative %	Negative %
3	In A&E, were you kept informed about how long you would have to wait to be seen by a nurse or doctor?	Yes, completely	Yes to some extent	No
4	In A&E, how did you feel about the length of time you waited to be seen by a nurse or doctor?	I didn't have to wait; It was reasonable	-	It was too long
5	In A&E, once you had been seen by a nurse or doctor were you kept informed about what was happening?	Yes, completely	Yes, to some extent	No
6	In A&E, did a nurse or doctor discuss your condition with you in a way you could understand?	Yes, completely	Yes, to some extent	No, but I would have liked them to
7	Were you given enough privacy when being examined or treated in A&E?	Yes	-	No
8	When you were in A&E, did you feel safe?	Yes, completely	Yes, to some extent	No
9	Overall, how would you rate the care and treatment you received during your time in A&E?	Excellent; good	Fair	Poor; Very Poor
10	How did you feel about the length of time you waited to be admitted to hospital after you were referred?	It was reasonable	-	It was too short; It was too long
11	Did the information you were given before attending hospital help you understand what would happen?	Yes, a lot; Yes, a little	-	No, not at all; I wasn't given any information
12	From the time you arrived at hospital, how did you feel about the time you had to wait to get to a bed on the ward?	I did not have to wait; It was reasonable	-	It was too long
13	Overall, how would you rate your admission to hospital? (i.e. the period after you arrived at hospital until you got to a bed on the ward)	Excellent; Good	Fair	Poor; Very Poor

Question number	Original Question Text	Positive %	Neither positive nor negative %	Negative %
14a	The main ward or room I stayed in was clean	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
14b	The bathrooms and toilets were clean	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
14c	I was bothered by noise at night from other patients	Disagree; Strongly disagree	Neither agree nor disagree	Strongly agree, Agree
14d	I was bothered by noise at night from hospital staff	Disagree; Strongly disagree	Neither agree nor disagree	Strongly agree, Agree
14e	I was happy with the food/meals I received	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
14f	I was happy with the drinks I received	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
14g	When I called I received assistance within a reasonable time	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
14h	There were times when I felt threatened by other patients or visitors*	Disagree; Strongly disagree	Neither agree nor disagree	Strongly agree; Agree
14i	The equipment used for my treatment was clean*	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
15	Did you know which nurse was in charge of the ward?	Yes, all or most of the time	Yes, some of the time	No, but I would have liked to know; No, but it didn't bother me
16	Were hand-wash gels available for patients and visitors to use?	Yes, always	Yes, some of the time	No
18	During your stay, were you happy with the visiting hours?	Yes	-	No
19	Did you feel you were able to spend enough time with the people that matter to you (e.g. family and friends)?	Yes, completely	Yes, to some extent	No
20	Overall, how would you rate the hospital and ward environment?	Excellent; Good	Fair	Poor; Very Poor
21a	I was able to get adequate pain relief when I needed it	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
21b	I had enough privacy when being examined or treated	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree

Question number	Original Question Text	Positive %	Neither positive nor negative %	Negative %
21c	I had enough privacy when my condition and treatment was discussed	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
21d	I got enough help with washing and dressing when I needed it	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
21e	I got enough help with eating and drinking when I needed it	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
21f	I got enough help with going to the bathroom or toilet when I needed it	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
21g	I was kept as physically comfortable as I could expect to be	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
22	Were you involved as much as you wanted to be in decisions about your care and treatment?	Yes, definitely	Yes, to some extent	No, and I would have liked to have been
23	Were the people that matter to you (e.g. family & friends) involved in decisions about your care and treatment as much as you wanted?	Yes, definitely	Yes, to some extent	No, and I would have liked them to be more involved
24	Did you feel that staff took adequate care when carrying out physical procedures? (e.g. injections or blood tests; inserting, checking or removing drips or catheters; moving you)?	Yes, definitely	Yes, to some extent	No
29	Did a member of staff discuss any of these events with you?	Yes, completely	Yes, to some extent	No
30	Were you satisfied with how these events were dealt with?	Yes, completely	Yes, to some extent	No
33	In your opinion, was moving you between wards managed well?	Yes, definitely	Yes, to some extent	No
34	Overall, how would you rate your care and treatment during your stay in hospital?	Excellent, Good	Fair	Poor, Very Poor
36	Beforehand, did a member of staff explain the risks and benefits of the operation or procedure in a way you could understand?	Yes, completely	Yes, to some extent	No
37	Beforehand, did a member of staff explain what would be done during the operation or procedure?	Yes, completely	Yes, to some extent	No
38	Beforehand, were you told how you could expect to feel after you had the operation or procedure?	Yes, completely	Yes, to some extent	No

Question number	Original Question Text	Positive %	Neither positive nor negative %	Negative %
39	Beforehand, did a member of staff answer your questions about the operation or procedure in a way you could understand?	Yes, completely	Yes, to some extent	No
40	After the operation or procedure, did a member of staff explain how it had gone in a way you could understand?	Yes, completely	Yes, to some extent	No
41a	Doctors knew enough about my condition and treatment.	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
41b	Doctors discussed my condition and treatment with me in a way I could understand	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
41c	Doctors talked in front of me as if I was not there	Disagree; Strongly disagree	Neither agree nor disagree	Strongly agree; Agree
41d	Doctors listened to me if I had any questions or concerns	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
41e	As far as I was aware doctors washed/cleaned their hands at appropriate times	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
41f	I had confidence and trust in the doctors treating me	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
42a	Nurses knew enough about my condition and treatment	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
42b	Nurses discussed my condition and treatment with me in a way I could understand	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
42c	Nurses talked in front of me as if I was not there	Disagree; Strongly disagree	Neither agree nor disagree	Strongly agree; Agree
42d	Nurses listened to me if I had any questions or concerns	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
42e	As far as I was aware nurses washed/cleaned their hands at appropriate times	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
42f	I had confidence and trust in the nurses treating me	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
43	Did you know which nurse was in charge of your care?	Yes, all or most of the time	Yes, some of the time	No, but I would have liked to know; No, but it didn't bother me

Question number	Original Question Text	Positive %	Neither positive nor negative %	Negative %
44	In your opinion, were there enough nurses on duty to care for you in hospital?	There were always or nearly always enough nurses	There were sometimes enough nurses	There were rarely or never enough nurses
45	Did you think that the staff worked well together in organising your care?	Yes, definitely	Yes, to some extent	No
46	Did you feel that staff took account of the things that matter to you?	Yes, definitely	Yes, to some extent	No
47	Did you feel that you got enough emotional support from staff during your stay?	Yes, always	Yes, sometimes	No
48	Did you feel that staff treated you with compassion and understanding during your stay?	Yes, always	Yes, sometimes	No
49	Overall, how would you rate all the staff you came into contact with?	Excellent; Good	Fair	Poor; Very Poor
53	How did you feel about the overall length of time you were in hospital?*	It was reasonable	-	It was too long; It was too short
54	Were you confident you could look after yourself when you left hospital?	Yes	-	No
55	Before leaving hospital, were you confident that any help you needed had been arranged for you?	Yes, completely	Yes, to some extent	No
56	If your condition meant you were eligible for hospital transport to take you home, were you happy with how this was arranged?	Yes	-	No
57a	I was involved in decisions about leaving hospital	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
57b	My family or home situation was taken into account when planning for me leaving hospital	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
57c	I knew who to contact if I had any questions after leaving hospital	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
57d	I was told about any danger signs to watch for when I left hospital	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
59a	I didn't have to wait too long to get my medicines	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
59b	I understood what my medicines were for	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree

Question number	Original Question Text	Positive %	Neither positive nor negative %	Negative %
59c	I understood how and when to take my medicines	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
59d	I understood the possible side effects of my medicines	Strongly agree; Agree	Neither agree nor disagree	Disagree; Strongly disagree
60	Overall, how would you rate the arrangements made for your leaving hospital?	Excellent; Good	Fair	Poor; Very Poor
62	Did you have to stay in hospital longer than expected to wait for your care or support services to be organised?	No	-	Yes
63	Did you feel that you got the care and support services that were right for you?	Yes	-	No
64	Overall, how would you rate the care or support services you got after leaving hospital?	Excellent; Good	Fair	Poor; Very Poor
65	Did you see, or were you given, any information explaining how to provide feedback or complain to the hospital about the care you received?	Yes	-	No

*This is a new question.

A National Statistics publication for Scotland

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