

Emergency Department Survey

Before the appointment

1. Are you:

- Patient Relative/Carer

2. In which month did you visit the clinic?

- January February March April May June July August September
 October November December

3. What was the main reason that you went to the Emergency Department for? (Please tick only one)

- Told to go by a health professional Taken by ambulance service My GP was not available
 Local health centre was closed Was not aware of any other service available
 Wanted a second opinion I decided I needed to go Somebody else decided I needed to go

4. How many times have you been a patient in the Emergency Department in the last 12 months?

- 1 2 3 or more

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

- Yes, definitely Yes, to some extent No I did not discuss my condition with a receptionist

Waiting

6. How long did you wait before you first spoke to a nurse or doctor?

- 0-15 minutes 16-30 minutes 31-60 minutes More than 60 minutes Don't know/remember

7. Overall, how long did your visit to the Emergency Department last?

- Up to 1 hour More than 1 hour but less than 2 hours More than 2 hours but less than 4 hours
 More than 4 hours but less than 8 hours More than 8 hours but less than 12 hours
 More than 12 hours but less than 24 hours More than 24 hours Don't know/remember

Doctors and nurses

8. Did you have confidence and trust in the doctors and nurses examining and treating you?

- Yes definitely Yes, to some extent No

9. Did doctors and nurses talk in front of you as if you weren't there?

- Yes, definitely Yes, to some extent No

10. While you were in the Emergency Department, how much information about your condition or treatment was given to you?

- Not enough Right amount Too much I was not given an information

11. If you needed attention, were you able to get a member of staff to help you?

- Yes, always Yes, sometimes No, I could not find a member of staff to help me
 A member of staff was with me all the time I did not need attention

12. Sometimes in a hospital, a member of staff will say one thing and another will say something quite different. Did this happen to you in the Emergency Department?

- No Yes, to some extent Yes, definitely

Pain

13. If you requested pain relief, how many minutes after you requested it did it take before you got it?

- Straight away 1-5 minutes 6-10 minutes 11-15 minutes 16-30 minutes
 More than 30 minutes I asked for pain relief but did not get any
 I did not require pain relief medication

Hospital environment and facilities

14. In your opinion, how clean was the Emergency Department?

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

15. How clean were the toilets in the Emergency Department?

- Very clean Fairly clean Not very clean Not at all clean I did not use a toilet

Overall

16. Was the main reason you went to the Emergency Department dealt with to your satisfaction?

Yes, completely Yes, to some extent No

17. Overall, how would you rate the care you received in the Emergency Department?

Excellent Very good Good Fair Poor Very poor

18. Would you recommend this hospital to your family and friends?

Yes, definitely Yes, probably No

Please write in any additional comments in the space below.

Please return your completed survey to: The Patient Relations Team, Freepost RLRJ-XCCE-CCZH
Level 2 Main Entrance, Royal Berkshire Hospital, London Road, Reading RG1 5AN.

Thank you for completing this survey