

PATIENT AND CARER SURVEY

Noble's Hospital is taking part in a programme of reviews of care for people who have had visited the Emergency Department at your local hospital with the aim of improving the quality of the service. A team of clinicians and patients from the West Midlands will be visiting our service and as part of preparing for our visit, we are gathering views from patients and carers about their experience of the service here.

Any comments you make will be used to improve the service locally and will be shared with the visiting team. Individual responses will not be identified in the visit report or in any other publication so please comment freely.

Your comments are important to us and will help us to improve the quality and consistency of care we offer to all patients and carers in the future.

When did you last go to the Emergency Department at the hospital? (Please give date, month and year if possible)	
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WHEN YOU ARRIVED AT THE EMERGENCY DEPARTMENT:

Was it clear how long you may have to wait? (There may have been a sign about this)	Y/N
Was there some clear information about whether or not you should report straight to the receptionist? (E.g. if you had chest pain, breathing problems, serious injury).	Y/N

INFORMATION:

When you were waiting to be seen, did you see any information telling you what to do if you started to feel worse?	Y/N
Did you receive any information about your condition, such as a leaflet?	Y/N

COMMUNICATION:

If you needed extra support to communicate with staff was it offered, e.g. someone to interpret for you or to use British Sign Language?	Y/N or Not applicable
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**Please place in the box at the Reception
or return for the attention of the Department Manager, David Sewell.**

BEFORE YOU LEFT THE EMERGENCY DEPARTMENT:

Did the person who had treated you talk to you (or the person who was with you) about any treatment that you may have received, your condition and what would happen in the future if necessary? (This may include coming back to a clinic at the hospital or going to see your GP).	Y/N Not sure
Were you given a discharge letter to take home with you, which would be shared, with your GP?	Y/N Not sure
Were you given the opportunity to give feedback about what had happened to you in the Emergency Department? (This may have been a questionnaire or a form to complete).	Y/N

IF YOU ARE A CARER OR RELATIVE OF SOMEONE WHO VISITED EMERGENCY DEPARTMENT:

If your friend or family member was seriously ill, were you taken to a quiet room, separate from people in the waiting room?	Y/N
If you answered 'Y' to the last question, was it suitable in your opinion and did it contain a telephone for your use and facilities for refreshments?	Y/N
Please feel free to add any further information below:	

Please feel free to add any further information about your visit to the Emergency Department below:

**Thank you very much for completing this survey.
Your help is very much appreciated.**

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or return for the attention of the Department Manager, David Sewell.**