Fareham and Gosport Primary Care Trust

Mrs Richards

• Please find enclosed copy of Community Health Council Questionnaire which was omitted from original correspondence. Please accept our apologies for this error.

Unit 180, Fareham Reach 166 Fareham Road Gosport PO13 OFH

lan Piper **Chief Executive**

Tel: 01329 233447 Fax: 01329 234984

I deal not reply to this

With compliments

FAG0021 02/02

PORTSMOUTH AND SOUTH-EAST HAMPSHIRE COMMUNITY HEALTH COUNCIL

Admiral House, Second Floor, High Street, Cosham, Portsmouth, Hampshire. PO6 3BZ Tel: 023 9238 3832

COMMUNITY HOSPITALS COMMUNICATION SURVEY

Please circle or tick the answer which applies to you and write your comments in the spaces provided.

Are you cobehalf?	ompleting this for	rm yourself or is s	someone else filling it in o	on your
Se	f Frier	nd/Relative	CHC Member	
Did you ha	ave an explanatio	n of the reasons f	or your admission from:	
Your IYour I	Consultant District Nurse Named Nurse / H	ospital Nurse		8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
·	planation was giv	1	Please go to que	e de la companya de l
Did you u	nderstand the exp	olanation?		,
Υe	es	No		
Were you	given an opportu	unity to ask questi	ons?	
Υe	• •	No		

5.	Have you had an exp	Have you had an explanation of your diagnosis from:				
	 Your GP Your Consultant Your District Nur Your Named Nur Anyone Else - Ple No explanation w 	se / Hospital Nurse ase specify	Please go to question 6 Please go to question 8			
6.	Did you understand the	he explanation?				
	Yes	No				
7.	Were you given an op	pportunity to ask qu	estions?			
	Yes	No				
8.	Have you received an	Have you received any written information explaining your condition?				
	Yes - Please g	go to question 9	No - Please go to question 10			
9.	Where or from whom	did you get this inf	ormation?			
10.	Have you had an explanation of your treatment from:					
		rse se / Hospital Nurse ase specify	Please go to question 11			
	➤ No explanation w	as given	Please go to question 13			
11.	Did you understand the	he explanation?				
	Yes	No				
12.	Were you given an op	pportunity to ask que	estions?			
	Yes	No				

13.	Have any changes in	Have any changes in treatment been explained to you?			
	Yes	No	Not Applicable		
14.	Have you had an exp	lanation of your progr	nosis (outlook) from:		
	 Your GP Your Consultant Your District Num Your Named Num Anyone Else - ple 				
	No explanation w	vas given	Please go to question 15		
	7 No explanation w	as given	Please go to question 17		
15.	Did you understand t	he explanation?			
	Yes	No			
16.	Were you given an o	pportunity to ask que	stions?		
	Yes	No			
17.	Have your cultural a	nd religious beliefs be	en taken into account?		
	Yes	No	Not Applicable		
18.	How often do you ex	spect to speak to a Do	octor, Consultant or Nurse?		
19.	Has a Doctor, Const	ıltant or Nurse approa	ached you or have you had to approach		
20.	At any time were yo given time for reflec		y for additional questions after being		
	Ves	No			

21.	Do you have a named nurse who is looking after your general care?
	Yes Please go to question 22 No Please go to question 25 Don't Know Please go to question 25
22.	Has he/she been introduced to you?
	Yes Please go to question 23 No Please go to question 25
23.	How frequently have you been able to speak with your named nurse?
24.	If this person is not available who is available for you to talk to?
25.	Has there been a consistent approach to explanations and information received from staff?
	Yes No
26.	Are you satisfied that any treatments or investigations have been fully explained to you before being carried out?
	Yes - Please go to question 28 No - Please go to question 27
27.	Can you explain why not?
28.	Have you given your consent before any treatments or investigations have been carried out?
	Yes - Please go to question 30 No - Please go to question 29
29.	Can you explain why not?

30 .	Do you feel the staff ha	ave time to talk to y	ou?	Carlotte
	 Doctors Nurses Physiotherapist Occupational Ther Chaplain Domestic Staff Others - Please special 			
31.	From the above list, w			
32.	On admission, were yo		•••••	••••••
	 Where the bathroo How to call a nurs Meal times Visiting times Where the day roo How to access the 	om is		
33.	Has the hospitals disc	harge policy been ex	cplained to	o you?
	Yes Please	go to question 34	No	Please go to question 36
34.	Did you understand th	ne explanation?		
	Yes	No		
35.	Were you given an or	portunity to ask que	estions?	
	Yes	No		
36.	Have staff discussed e.g. meals, carer, eme	with you whether your gency button or me	ou will rec edication	quire any support at home? etc?
	Yes	No		
37.	Have staff discussed home? e.g. raised cha	with you whether yours, commode, hand	ou will red rails, and	quire any special equipment at who will provide them?
	Yes	No		Not Applicable

38.	Have you had, or are i.e. a talk with a Soc are discharged.	Have you had, or are you expecting to have a Social Services Assessment? i.e. a talk with a Social Services Officer about what your needs may be when you are discharged.				
	Yes	No	No	t Applicable		
39.	If you need to go to choices?	need to go to a Nursing or Care Home, has anyone talked to you about yours?				
	Yes	No	No	t Applicable		
40.	40. If there have been any emergencies regarding your condition, who was told e.g. Your Primary Carer, your next visitor or someone else.			ition, who was told? lse.		
			•••••		•••••	
41.	When were they told e.g. Immediately by p	? phone, at their next vis	sit or no one v	vas told?		
42.	Was this appropriate Yes Please	? e go to question 44	No Ple	ase go to question 43		
43.		not?			•••••	
44.				mission to this hospital?	?	
					•••••	
	•••••	•••••	, * * * * * * * * * * * * * * * * * * *		•••••	
	•••••	•••••••••••••••••••••••••••••••••••••••			•••••	
	••••••		••••••		•••••	

45.	Has your stay in hospital and your treatment and care lived up to these expectations and if not, in what respect were they not met?
46.	What else, if anything, would you have wanted or expected?
	••••••
47.	Do you have any further comments you would like to make?
0	
48.	