



## A & E Patient Survey

Please be aware that at the end of this questionnaire you will be asked to provide the two references that can be found on the letter that was sent to you. This will help us find out who attended you. All information provided will be kept confidential. Thank you.

### Section 1

Please tell us about the patient.

**Q1 Are you the patient?**

Yes .....

No, I am completing this on behalf of the patient.....

**Q3 Gender of the patient?**

Male .....

Female .....

**Q2 Age of the patient in years?**

### Section 2

Please tell us about your experience with The East of England Ambulance Service NHS Trust on this occasion.

**Q4 Please tell us if you had contact with any of the following health care providers before contacting the ambulance service for this incident.**

GP Surgery.....

Out of Hours Doctor's Service .....

NHS Direct .....

A walk-in centre.....

Pharmacy .....

The ambulance service were the first health care provider contacted for help with this incident. ....

Other, please specify

**Q5 How did you make contact with the ambulance service?**

I called 999 .....

Someone else called 999 on my behalf.....

I was referred to the Ambulance service by another health care provider .....

Other, please specify

**Q6** Were you made aware of the length of time you would be waiting for the ambulance service to attend you?

- Yes, I was given an exact time .....
- Yes, I was given an approximate time.....
- No, No time was given.....
- Unable to say.....

**Q7** How would you describe the length of time you waited for the ambulance service to arrive?

- Very acceptable.....
- Acceptable.....
- Fairly acceptable .....
- Unacceptable.....
- Very Unacceptable .....
- Unable to say.....

**Q8** Did the ambulance service staff introduce themselves to you?

- Yes .....
- Yes, but I would have liked them to introduce themselves to a greater extent.....
- No.....
- Unable to say.....

**Q9** How would you describe the attitude of the ambulance service staff that attended you?

- Very professional.....
- A little improvement necessary.....
- Not professional.....
- Unable to say.....

**Q10** Did the ambulance crew explain your care and treatment to you in a way that was easy to understand?

- Yes, definitely .....
- Yes, to some extent.....
- Yes, but not in away I was able to understand.....
- No, no explanation was given.....
- Unable to say.....

**Q11** Were you satisfied with the advice you received from the ambulance service staff?

- Very satisfied.....
- Satisfied.....
- Fairly satisfied.....
- Unsatisfied.....
- Very unsatisfied.....
- Unable to say / No advice was given .....

**Q12** Did the ambulance service staff assess you for pain?

- Yes .....
- No.....

**Q13** Did the ambulance service staff give you any pain relief?

- Yes.....
- No.....
- Unable to say/ cannot remember...
- I was not experiencing any pain.....

**Q14** Were you taken to hospital by the ambulance crew?

- Yes.....
- No, I went to hospital by other means .....
- No, I was left at my home.....
- No, I was left at the scene of the incident which was not my home...

**Q15** How involved do you feel your were in the decisions made regarding your care?

- Very involved.....
- Fairly involved.....
- Not involved.....

**Q16** How would you describe the service you received in relation to your expectations of the ambulance service?

- Exceeded my expectations*.....
- Met my expectations*.....
- Reasonably met my expectations*...
- Barely met my expectations*.....
- Did not meet my expectations* .....
- Unable to say*.....

**Q17** Overall, how would you describe the service you received?

- Very satisfactory*.....
- Satisfactory*.....
- Fairly satisfactory*.....
- Unsatisfactory*.....
- Very unsatisfactory*.....

**Q18** Please use this box to explain why, if you have responded in the negative to any questions, or if you have any other comments.

## Ethnic Origin

**We as a Trust, in line with other health care providers, are charged by the Department of Health to collect information about the ethnic group of patients. This information can help us to plan to meet the needs of the community and ensure that everyone has equal access to the health care we provide.**

**Please note we are not asking about citizenship or nationality, but about the ethnic group to which you feel you belong. All information provided will be kept confidential.**

**The classification is entirely voluntary but will help us to provide a better service. The level of care you will be offered by this Trust will not be affected by your decision to complete this form. If you have any queries about completing this form please call Victoria Maillardet on 01603 422747. Otherwise, please complete the form below by ticking the box of the ethnic group you feel you belong to, or choose the 'Any other ethnic group' option.**

- White British* .....
- White Irish* .....
- Any other White*.....
- White and Asian* .....
- White and Black Caribbean*.....
- White and Black African* .....
- Chinese* .....
- Indian*.....
- Pakistani*.....
- Bangladeshi*.....
- Caribbean*.....
- African* .....
- Any other Asian background* .....
- Any other Black background* .....
- Any other mixed background*.....
- Any other ethnic group* .....

**Please enter the reference number and letter you will find on the letter that was sent to you. This will help us find out who attended you.**

**Ref1:**

**Ref2:**

**Thank you for your time. If you would like any help completing this questionnaire or have any queries, please contact Victoria Maillardet on 01603 422747**