



People’s Experience Survey (PES)

The experience that you have of care is important to us. We will ask you questions about your latest experience of healthcare. This might be an appointment with your doctor or health visitor, a hospital stay, an outpatient visit or something else. We would be grateful if you could complete this anonymous survey so that we can understand this better.

The questions are based on the things that patients have said matter most. Please help us by giving your honest opinion.

The questions mostly have four options and you are asked to tick the answer that you feel best describes how you feel.

To find out how we manage your personal information, please see our privacy notice on our webpage page at: abuhb.nhs.wales/files/information-governance/privacy-notice-general/

Site	
Location/Department	
Date	

About you:

1. Which of the following best describes you?

I am a patient/service user

I am a relative of a patient/service user

I am an unpaid carer of a patient/service user

I am a paid carer of a patient/service user

I am a paid advocate of a patient/service user

Thinking about this experience:

2. Was the time you waited:

- Much shorter than expected A bit shorter than expected About right A bit longer than expected Much longer than expected

3. Did you feel well cared for?

- Always Usually Sometimes Never

4. Were you treated with dignity and respect?

- Always Usually Sometimes Never

5. Which language would you prefer to communicate in?

- Welsh Urdu Gujarati
 English Portuguese Italian
 Polish Spanish British Sign Language
 Romanian Arabic Other, please specify
 Panjabi Bengali _____

6. Were you able to communicate in your preferred language?

- Always Usually Sometimes Never

7. Did you feel that you were listened to?

- Always Usually Sometimes Never

8. Did you feel safe?

- Always Usually Sometimes Never

9. Did you feel physically comfortable?

Always

Usually

Sometimes

Never

10. Were you involved as much as you wanted to be in decisions about your care?

Always

Usually

Sometimes

Never

11. Were things explained to you in a way that you could understand?

Always

Usually

Sometimes

Never

12. Did you have the care and support from staff who understood your needs and respected your choices?

Always

Usually

Sometimes

Never

13. Did you have the support of family (or friends) when you needed them?

Always

Usually

Sometimes

Never

Not applicable

Thinking of your overall experience:

14. How would you rate your overall experience?

Very poor

Poor

Neither good nor poor

Good

Very good

15. Was there anything particularly good about your experience you would like to tell us about?

16. Was there anything particularly bad about your experience you would like to tell us about?

Equality Monitoring:

The following responses are optional and should relate to the patient/service user.

We are committed to ensuring that everyone receives fair and equal respect. Whatever your age, disability, ethnicity, faith, gender reassignment or sexual identity, you can expect to be treated with dignity. We can only achieve this with your help by providing the information below.

Data will be used for monitoring purposes only and held in strictest confidence. Your identity will not be disclosed to anyone.

What is your age?

- 0-15 years 35-44 years 55-64 years 75+ years
- 16-24 years 45-54 years 65-74 years I prefer not to say
- 25-34 years

What is your gender?

- Male Female Other I prefer not to say

At birth, were you described as:

- Male Female Other I prefer not to say

Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?

- Yes, a lot Yes, a little Not at all I prefer not to say

Which of the following options best describes how you think of yourself?

- Heterosexual or straight Gay or lesbian Bisexual Other
- I prefer not to say

What is your religion?
(Please choose one option that best describes your religion)

- No religion Hindu Muslim Any other religion
- Christian (all denominations) Jewish Sikh I prefer not to say
- Buddhist

What is your ethnic group?

(Please choose one option that best describes your ethnic group or background)

White:

Welsh

English

Scottish

British

Irish

Northern
Irish

Gypsy or Irish
Traveller

Any other white
background

Mixed / multiple ethnic groups

White and
Black
Caribbean

White and
Black
African

White and
Asian

Any other
Mixed / multiple
ethnic
background

Asian / Asian British

Indian

Pakistani

Bangladeshi

Chinese

Any other Asian
background

Black / African / Caribbean / Black British

African

Caribbean

Any other
Black /
African/
Caribbean /
background

Other ethnic group

Arab

Any other
ethnic group

I prefer not to say

If you require any advice, support or information please contact our Patient Advice and Liaison Service (PALS) by either calling 01633 493753 or via e-mail to ABB.PALS@wales.nhs.uk

The feedback you have provided is anonymous, if you feel like you would like to make a complaint so we can investigate and get back to you then please contact our Putting Things Right Team on 01633 431666 or via e-mail to Puttingthingsright.ABHB@wales.nhs.uk

Thank you for taking the time to answer these questions.