

Cardiff & Vale UHB Private Patient Satisfaction Questionnaire

Our hospital

Q1 How likely are you to recommend our hospital to friends and family if they need similar care or treatment?

Extremely likely

Likely

Neither likely nor unlikely

Unlikely

Extremely unlikely

Don't know

Q2 Were you involved as much as you wanted to be in decisions about your care and treatment?

Yes, definitely

Yes, to some extent

No

Q3 Did you find someone on the hospital staff to talk to about your worries and fears?

Yes, definitely

Yes, to some extent

No

I had no worries or fears

Q4 Were you given enough privacy when discussing your condition or treatment?

Yes, always

Yes, sometimes

No

Q5 Did a member of staff tell you about medication side effects to watch for when you went home?

Yes, completely

Yes, to some extent

No

I did not need an explanation

Q6 Did hospital staff tell you who to contact if you were worried about your condition or treatment after you left hospital?

Yes

No

Don't know

Can't remember

Q7 Overall, did you feel you were treated with respect and dignity while you were in the hospital?

Yes, always

Yes, sometimes

No

Our Staff

Q1 How likely are you to recommend your consultant to friends and family if they need similar care or treatment?

Extremely likely

Likely

Neither likely nor unlikely

Unlikely

Extremely unlikely

Don't know

Q2 Did your consultant show you understanding when assessing your need for Treatment?

Yes, definitely

Yes, to some extent

No

Q3 Did your consultant explain everything to you in a way that was easy to understand?

Yes, definitely

Yes, to some extent

No

Q4 Did you have sufficient time with your consultant during this visit or hospital stay?

Yes, definitely

Yes, to some extent

No

Q5 Did you have confidence that your consultant would deliver the appropriate care for you?

Yes, definitely

Yes, to some extent

No

Signed :

Date :

Print Name :