

QDM Emergency Department Patient Experience Survey (Child Version)

Introduction1

Hi, my name is [InterviewerFirstName] [InterviewerLastName], and I'm calling on behalf of Massachusetts General Hospital from Quality Data Management. Massachusetts General Hospital is conducting a survey to obtain information about the care provided to children and teenagers in the [Department].

This survey is part of an initiative to measure the quality of care in [Department] based on patients' experiences. Survey results can be used by the hospital to monitor quality and to improve care and services.

Participation in the survey is completely voluntary and will not affect your child's health care or your benefits. The questions should take about 8 minutes to answer. Can you help me with this?

BeginNow

Before we begin, I want to let you know that this survey may be monitored for quality assurance purposes.

ConfirmVisit

First, I need to confirm that your child was a patient at Massachusetts General Hospital's [Department] on [MonthDay]? Is this correct?

If 'No' ⇒ **No Visit**

Thank you for your time, but for the purpose of this study, we are speaking only with people who visited this emergency department on [MonthDay]. Goodbye.

ThisVisitLeadIn

Please answer the questions in this survey about this visit. Do not include any other emergency department or urgent care visits in your answers.

ArrivalLeadIn

Please think about the time when you first arrived with your child at the emergency department when you checked in, got registered and someone first asked you questions to find out about the medical condition that brought your child to the emergency department.

Q1 (Q1A)

Did the registration staff treat you with courtesy and respect?

‘Never,’ ‘Sometimes,’ ‘Usually,’ or ‘Always?’

Q2 (Q1B)

Was there enough privacy while you were checking in and giving insurance or payment information to the registration staff?

‘Not at all,’ ‘Somewhat,’ ‘Mostly,’ or ‘Completely?’

Q3 (Q1C)

From the time you arrived in the emergency department, how long did it take for a nurse or doctor to first ask you questions about your child’s medical condition to learn about the type of problem your child was experiencing?

‘More than 30 minutes,’ ‘15 to 30 minutes,’ ‘5 to 15 minutes,’ or ‘Less than 5 minutes?’

IVR Invite

I would like to invite you to continue the survey using our automated system. The questions have been pre-recorded, and you give your answers by speaking directly into your phone. You don’t have to push any buttons; you simply wait until you hear all the response choices, choose one, and then say that answer out loud. Please reserve any comments until the end of the survey, where there are questions asking you to give your comments in your own words. May I switch you to the automated system now?

If ‘Yes’ ⇒ **Help/Repeat**

Welcome to the automated system. If at any time, you need to speak with a live agent, say, “Please help.” If you want me to repeat a question, say, “Please repeat.”

If 'No' ⇒ **CATI Survey**

Okay. I'd be happy to do the survey with you.

WaitTimeLeadIn

Next, I would like to ask you about the time your child spent waiting in the emergency department.

Q4 (Q3)

Did your child spend any time waiting while you were in the emergency department?

(Non-spoken Yes/No responses)

If 'Yes' ⇒ **Q4A** (Q3B)

Did the staff keep you updated on how long you would need to wait?

'Never,' 'Sometimes,' 'Usually,' or 'Always?'

Q4B (Q3C)

Were the places you were waiting kept clean?

'Never,' 'Sometimes,' 'Usually,' or 'Always?'

Q4C (Q3D)

How long did your child wait to first be seen by a doctor?

'More than 4 hours,' '2 to 4 hours,' '1 to 2 hours,' '30 to 60 minutes,' or 'Less than 30 minutes?'

Q5 (Q4)

Did you have family or friends who you wanted to be informed about your child's care?

(Unprompted Yes/No responses)

If 'Yes' ⇒ **Q5A** (Q4A)

Did the emergency department staff keep any family or friends that came to the emergency department with you updated about the care your child was receiving?

'Never,' 'Sometimes,' 'Usually,' or 'Always?'

NursingCare

Next, I would like to ask you about the care your child received from nurses. Please answer the following questions by saying 'never,' 'sometimes,' 'usually,' or 'always.'

Q6 (Q5)

During this emergency department visit, how often did nurses treat your child with courtesy and respect?

'Never,' 'Sometimes,' 'Usually,' or 'Always?'

Q7

How often did nurses listen carefully to you and your child?

'Never,' 'Sometimes,' 'Usually,' or 'Always?'

Q8

How often did nurses explain things in a way you could understand?

'Never,' 'Sometimes,' 'Usually,' or 'Always?'

DoctorsCare

Next, I would like to ask you about the care your child received from the doctors. Please continue to answer the next questions by saying 'never,' 'sometimes,' 'usually,' or 'always.'

Q9 (Q10)

During this emergency department visit, how often did doctors treat you and your child with courtesy and respect?

'Never,' 'Sometimes,' 'Usually,' or 'Always?'

Q10 (Q12)

How often did doctors listen carefully to you and your child?

‘Never,’ ‘Sometimes,’ ‘Usually,’ or ‘Always?’

Q11 (Q13)

How often did doctors explain things in a way you could understand?

‘Never,’ ‘Sometimes,’ ‘Usually,’ or ‘Always?’

Q12 (Q14)

Were the doctors aware of all the information you and your child gave to other hospital staff members?

‘Never,’ ‘Sometimes,’ ‘Usually,’ or ‘Always?’

Q13 (Q15)

Did you always know which doctor was responsible for your child’s care?

‘Never,’ ‘Sometimes,’ ‘Usually,’ or ‘Always?’

PainExperience

Now I would like to ask you about the pain your child experienced while you were in the emergency department.

Q14 (Q18)

Did your child experience any pain during this emergency department visit?

(Unprompted Yes/No responses)

If ‘Yes’ ⇒ **Q14Yes** (Q18Yes)

Please answer the next three questions by saying, ‘Never’, ‘Sometimes’, ‘Usually,’ or ‘Always.’

Q14A (Q18A)

How often did emergency department staff talk to your child about his or her pain?

‘Never,’ ‘Sometimes,’ ‘Usually,’ or ‘Always?’

Q14B (Q18B)

How often did emergency department staff do everything they could to help your child with the pain?

‘Never,’ ‘Sometimes,’ ‘Usually,’ or ‘Always?’

Q14C (Q18C)

How often was your child’s pain well controlled?

‘Never,’ ‘Sometimes,’ ‘Usually,’ or ‘Always?’

LeavingEmergencyDepartment

The following questions are about what happened when you were getting ready to leave the emergency department, including getting follow-up instructions about caring for your child at home.

Q15 (Q19)

After your emergency department visit, did your child go directly to your home or to someone else’s home or was your child admitted to the hospital, or transferred to another health facility?

‘Home,’ ‘Someone else’s home,’ ‘Admitted to hospital,’ or ‘Transferred to another health facility?’

If ‘Home’ or ‘Someone else’s home’ ⇒

Q15A (Q19C)

Did you understand the information you were given about your child when you went home from the emergency department?

‘Not at all,’ ‘Somewhat,’ ‘Mostly,’ or ‘Completely?’

Q15B (Q19D)

How comfortable were you with your ability to carry out the follow-up instructions you were given about your child when you went home from the emergency department.

‘Not at all,’ ‘Somewhat,’ ‘Mostly,’ or ‘Completely?’

If ‘Admitted to the hospital’ ⇒

Q16 (Q20)

How comfortable was your child while he or she was waiting for a hospital bed?

‘Not at all,’ ‘Somewhat,’ ‘Mostly,’ or ‘Completely?’

Overall Experience

The next set of questions ask you about your child’s overall experiences in the emergency department.

Q17 (Q21)

Did it seem like there was good teamwork among doctors, nurses and the other staff members who cared for your child?

‘Not at all,’ ‘Somewhat,’ ‘Mostly,’ or ‘Completely?’

Q18 (Q24)

What was the total amount of time your child spent in the emergency department beginning with the time your child first arrived and ending with the time your child left the emergency department to go home or to be admitted to the hospital?

‘More than 4 hours,’ ‘2-4 hours,’ ‘1-2 hours,’ or ‘Less than an hour?’

Q19 (Q25)

How much was your child helped by the care he or she received in the emergency department?

‘Not at all,’ ‘Somewhat,’ ‘Mostly,’ or ‘Completely?’

Q20 (Q27)

Using any number from 0 to 10, where 0 is the worst emergency department possible and 10 is the best emergency department possible, what number would you use to rate this emergency department during your child's visit?

0, 1, ..., 10

Q21 (Q28)

Would you recommend this emergency department to your friends and family?

'Definitely no,' 'Probably no,' 'Probably yes,' or 'Definitely yes.'

Verbatims

Here are some questions I'd like you to answer in your own words. Think about all your child's experiences during his or her visit to the emergency department.

Q22 (Q29)

Please describe the best thing that happened during your child's visit.

(verbatim response)

Q23 (Q31)

If you were asked to name the one thing that would have significantly improved your child's visit, what would it be?

(verbatim response)