

Are you Male Female

Community Palliative Care Team Patient Experience Survey

To which ethnic group do you belong?

White British	
White Irish	
Other White, please state	

White & Black Caribbean	
White & Black African	
White & Asian	
Other mixed, please state	

Indian	
Pakistani	
Bangladeshi	
Other Asian, please state	

Black Caribbean	
Black African	
Other Black, please state	

Other ethnic group, please state	
--	--

1. Who did you meet from the Palliative Care Team?

- Macmillan Nurse/Nurse Specialist
- Doctor
- Other, please specify

2. Were you asked your preferred name?

.....

3. Do you think the referral to palliative care was made

- At the right time
- Too early
- Too late
- Please comment

.....

4. Did the team member give you their contact details?

.....

.....

5. Did you feel confident that the team member would not share your worries, problems or records with anyone else without your permission?

.....

.....

6. Do you feel the team member treated you with courtesy and respect?.....

7. Do you feel that your religious and cultural beliefs were respected?
If not, why?

8. Did the team member ask about problems in the following areas:

- Physical issues
- Psychological/emotional issues
- Spiritual issues
- Social issues
- Financial issues
- Family issues

9. Was the involvement useful in the above issues?
.....
In what way did the team member help or not help?

10. Did you feel you could easily discuss your problems with the team member?
.....
If not, what was it that made this difficult?

11. Did you feel involved in the decisions made around your care?.....

12. Were you offered a leaflet about palliative care services?

13. Would you have liked more:

- Written information
- Practical guidance
- Further discussion

If yes, on what issue?

14. Were you offered a written summary of the visit/appointment?

- Yes

Was this helpful? How?

- No

Would you have liked one?.....

15. Do you have any suggestions of how we could improve our service/care?