

Critical Care Follow-Up Clinic Questionnaire

Thank you for attending the recent appointment to discuss your experience in Intensive Care/Critical Care. We are interested in your feedback about whether the Follow-Up clinic was beneficial to you and would appreciate it if you could answer some questions for us below. The questionnaires are anonymous and are purely to help us evaluate the effectiveness of the clinic. If you have access to the internet and/or a smart phone please complete online using the link

below:

Or if you prefer completing the paper copy, once completed please return to: West Yorkshire Critical Care and Major Trauma Operational Delivery Network, 2 Park Lane, 2nd Floor, Leeds, LS3 1ES

Q1. Which Critical Care/ICU follow clinic did you attend	Q1.	Which	Critical	Care/ICU	follow	clinic	did	you	attend
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	Airedale General Hospital					
	Bradford Royal Infirmary					
	Calderdale Royal hospital					
	Huddersfield Royal Infirmary					
	Pinderfields General Hospital					
	St James Hospital, Leeds					
	Leeds General Infirmary					
	Harrogate District Hospital					
	Other, please state					
Q2. How was the clinic appointment done?						
🗌 Vi	rtually on smartphone/ laptop 🗌 Telephone 🗌 Face to face					
Other: please specify?						

Q3. How satisfied were you with the clinic helping you to understand better what had happened to you whilst in Critical Care and your experiences following recovery?

			West Yorkshire Critical Care & Major Trauma Operational Delivery Networks
Very satisfied	Satisfied	Neutral	
	Unsatisfied	Very Unsatisfied	

Q4. Were you able to discuss your problems at your appointment? Were you given the opportunity to ask any question you had regarding your stay within Critical Care? (can select more than one response)

Yes – I was able to discuss my problems
No - I was not given the opportunity to discuss my problems
\Box Yes - I was given the opportunity to ask questions regarding my stay in Critical Care
\Box No - I was not given the opportunity to ask questions regarding my stay in Critical Care
Other: please specify?
Q5. Did you / your family receive a patient diary?
Yes
Νο
Q6. If you received a diary – How helpful did you find it?
Very helpful Helpful Neutral Unhelpful Very Unhelpful
Q7. Did you / your family receive an information booklet about Critical Care and recovery?
Yes
No
Q8. If you received and have read the booklet – how helpful did you find the information?
Very helpful Helpful Neutral Unhelpful Very Unhelpful
Not Applicable (NA)
Q9. At the end of the clinic did you discuss agreed actions?
Yes
No



Q10. Were you provided with contact details for the follow up service? Would you feel happy to contact the Follow up team if you needed further support? Tick all that apply.

- Yes I was provided with details of the Follow up service
 - Yes I would be happy to contact the Follow up team if I needed further support
 - □ No I was not provided with details of the Follow up service
- No I would not feel happy to contact the Follow up team if I needed further support

Q11. Please feel free to leave any further feedback / comments below:

Thank you for taking the time to give feedback which will be used to evaluate and improve our service.