#### **Appendix 1:**

# **QUESTIONNAIRE**



Accident & Emergency Department Royal Hospital for Sick Children Edinburgh.

The Accident and Emergency department at the Sick Kids is hoping to find out more about the parents and children who come along to see us.

We are interested in looking at how people make use of General Practice and Accident & Emergency services when a child is unwell.

We would like to ask you a little about

- yourselves
- your GP
- your visit to Accident & Emergency today

This questionnaire should only take a short time to complete while you are waiting, and this will not cause any delay in your child being seen or treated.

We hope that this study will help us improve the service we are able to offer to sick children in the future.

Information collected will be treated in a confidential manner.

Thank you for your help.

| NUMBER: | <br> | <br> |
|---------|------|------|
| DATE:   |      |      |
| TIME:   |      |      |

### **SECTION A**

### ABOUT YOU AND YOUR HOUSEHOLD

| 1. How old is the child wh | o needs to be  | e seen?           |         |
|----------------------------|----------------|-------------------|---------|
| 2. Is the child            |                | Male/F            | emale ? |
| 3. Who is with the child?  |                |                   |         |
| mother                     |                |                   | П       |
| father                     |                |                   | П       |
| other                      |                |                   |         |
|                            |                |                   |         |
| 4. Which of these describe | es your currer | nt circumstances? |         |
| married/living wit         | h partner      |                   |         |
| single parent              |                |                   |         |
| legal guardian             |                |                   |         |
|                            |                |                   |         |
| 5. Do you have any other   | children livin | g at home?        | YES/NO  |
| 6. What age are they?      |                |                   |         |
|                            |                |                   |         |
|                            |                |                   |         |
|                            |                |                   |         |
| 7. Can you tell us your Po | st Code        |                   |         |
| 8. Is the home you live in |                |                   |         |
| owned/mortgaged            |                | private tenancy   |         |
| council tenancy            |                | other (specify)   |         |
|                            |                |                   |         |
| 9. Which of the following  | applies to yo  | u?                |         |
| working full time          |                | unemployed        |         |
| working part time          |                | other (specify)   |         |
| caring for home/           |                |                   |         |

| SECTION A continued                                       |                          |                    |       |
|---|--------------------------|--------------------|-------|
| 10. Do you or your partner o                              | own a car?               | YES/NO             |       |
| 11. Do you have your own t                                | elephone?                | YES/NO             |       |
| 12. At what age did you leav                              | ve full time education   | n? year            | s     |
|   |                          |                    |       |
|   |                          |                    |       |
|   |                          |                    |       |
| SECTION B   |                          |                    |       |
| ABOUT YOUR VISIT  | TO ACCIDENT &            | EMERGENCY          |       |
|   |                          |                    |       |
| 13. Have you attended A &                                 | E here at the Sick Ki    | ds before? YES     | /NO   |
| 14. If you have, can you ren<br>here in the past 12 month |                          |                    | times |
| 15. Are you attending A & I                               | E because the child ha   | as a problem with: |       |
| an illness  |                          |                    |       |
| an injury   |                          |                    |       |
| not sure  |                          |                    |       |
| 16. For how long has the ch                               | ild had this problem?    |                    |       |
| 17. How serious do you thin                               | ak the illness/injury is | ?                  |       |
| not serious at all  |                          | fairly serious     |       |
| not very serious  |                          | very serious       |       |
| not sure  |                          |                    |       |
| 18. How worried are you ab                                | out the illness/injury   | ?                  |       |
| not worried at all  |                          | fairly worried     |       |

very worried

not very worried

not sure

# **SECTION B** continued

| 19. Did <u>y</u> | you think that the illness                        | s/injury | needed to be assessed:         |           |          |
|------------------|---|----------|--------------------------------|-----------|----------|
| S                | straight away?                                    |          |                                |           |          |
| 5                | same day?   |          |                                |           |          |
| •                | within a few days?                                |          |                                |           |          |
|                  | e you taken any action y<br>, what have you done? | oursel   | ves to try to treat the illnes | ss/injury | ? YES/NO |
| 21. Wou          | ld you describe yourself                          | f as a v | vorrier?                       |           |          |
| í                | all of the time                                   |          | a little of the tir            | me        |          |
| 1                | most of the time                                  |          | none of the time               | e         |          |
| 5                | some of the time                                  |          |                                |           |          |
| 22. Did <u>y</u> | you get advice from any                           | of the   | following before coming        | along to  | A & E?   |
| 1                | relative  |          | Pharmacist                     |           |          |
| 1                | friend/neighbour                                  |          | your GP surgery                |           |          |
| 5                | school/nursery                                    |          | A & E staff                    |           |          |
| (                | over phone  |          |                                |           |          |
| 23. How          | did you get up to A & l                           | E?       |                                |           |          |
| •                | walked $\Box$                                     |          | public transport               |           |          |
| (                | own car   |          | taxi                           |           |          |
| 1                | lift in other car                                 |          | ambulance                      |           |          |
|                  |   |          |                                |           |          |

#### **SECTION C**

#### **ABOUT YOUR GP**

| 24.                                    | Is the child registered  | l with a GP?         | YES  | /NO                    |                      |  |  |
|--|--|----------------------|--|------------------------|----------------------|--|--|
| 25. How do you find trying to arrange: |  |                      |  |                        |                      |  |  |
| a)                                     | a) a non-urgent appointment with a GP?                               |                      |  |                        |                      |  |  |
|  | very easy<br>quite easy<br>neither easy or d                         | ☐<br>☐<br>ifficult ☐ | quite difficult very difficult                           |                        |                      |  |  |
| b)                                     | an urgent appointmen   | nt with a GP?        |  |                        |                      |  |  |
|  | very easy<br>quite easy<br>neither easy or d                         | ☐<br>☐<br>ifficult ☐ | quite difficul   |                        |                      |  |  |
| c)                                     | to see a GP outside o  | f normal surge       | ery hours?   |                        |                      |  |  |
|  | very easy quite easy neither easy or d                               | ☐<br>☐<br>ifficult ☐ | quite difficult very difficult never had to              |                        |                      |  |  |
| 26.                                    | 26. Did you try to contact a GP before coming along to A & E? YES/NO |                      |  |                        |                      |  |  |
|  | •  |                      | outside of normal surge<br>did you speak to and <u>w</u> | •                      |                      |  |  |
|  | Please tick all the b  | oxes that app        | ly to you  |                        |                      |  |  |
| Red                                    | ceptionist   | Just over phone      | At own GP surgery  | At GP emergency centre | During home<br>visit |  |  |
| Nu                                     | rse/health visitor   |                      |  |                        |                      |  |  |
| GP                                     |  |                      |  |                        |                      |  |  |
|  | -one/answer  |                      |  |                        |                      |  |  |

## **SECTION C** continued

| <ul> <li>told how you might treat the problem yourself<br/>and to wait and see if things got better</li> </ul> |   |  |  |
|--|---|--|--|
| at home  |   |  |  |
|  |   |  |  |
| atment given?  |   |  |  |
| not very satisfied   |   |  |  |
| not satisfied at all   |   |  |  |
|  |   |  |  |
| e to make about GP serv  | ices?   |  |  |
|  | atment given?  not very satisfied  not satisfied at all |  |  |

#### **SECTION D**

#### **USING GP/ACCIDENT & EMERGENCY SERVICES**

There are a number of reasons why parents may decide to come straight up to A & E with their child <u>without</u> contacting a GP first.

Some are listed below.

#### Please tick those that you feel apply to you today:

| Unable to contact GP                                   |  |
|--|--|
| No confidence in GP                                    |  |
| Child's problem more appropriate for A&E               |  |
| GP would have referred child to A&E anyway             |  |
| Advised to take child straight to A&E by somebody else |  |
| Child will be seen more quickly in A&E                 |  |
| Child already been seen at Sick Kids with same problem |  |
| Easier to get to A&E than GP surgery                   |  |
| Easier to get to A&E than GP emergency centre          |  |
| A&E more convenient because of my working hours        |  |
| A&E more convenient because of child care arrangements |  |
| Doctors at Sick Kids more experienced                  |  |
| Get better treatment at Sick Kids                      |  |
| Anything else?   |  |

#### **SECTION D**

#### **USING GP/ACCIDENT & EMERGENCY SERVICES**

Having been in contact with a GP, as well as being told to attend or referred, there are <u>other reasons</u> why parents may decide to come up to A & E.

Some are listed below.

| Please tick those that you feel apply to you today:   |  |
|---|--|
| Only offered advice over phone  |  |
| GP unable to see child quickly enough   |  |
| Child seen by GP but not getting any better   |  |
| Not happy with GP advice/treatment  |  |
| Wanted second opinion on child's problem  |  |
| No confidence in GP   |  |
| Child seen by GP and referred to out patient clinic at Sick Kids but not prepared to wait for appointment |  |
| Anything else?  |  |

#### **SECTION E**

#### YOU AND YOUR SICK CHILD

| 1. How do you generally   | feel when you    | have to look after a child who                          | is unwell? |  |  |
|---|------------------|---|------------|--|--|
| very confident  |                  | not very confident                                      |            |  |  |
| quite confident   |                  | not confident at all                                    |            |  |  |
| not sure  |                  |   |            |  |  |
|   | •                | need a doctor when a child is you should call a doctor? | s unwell.  |  |  |
| very confident  |                  | not very confident                                      |            |  |  |
| quite confident   |                  | not confident at all                                    |            |  |  |
| not sure  |                  |   |            |  |  |
| <ul> <li>3. It is important to look for ways to offer better support for parents when a child is unwell, and to help them get the care that their child needs. A number of suggestions are listed below.</li> <li>Please tick the one that you would find most useful.</li> <li>Leaflets on childhood illness/injury to keep at home</li> </ul> |                  |   |            |  |  |
|   |                  | th in newspapers/magazines                              |            |  |  |
|   |                  |   |            |  |  |
| More adverts/information  |                  |   |            |  |  |
| More information on chi   | ld health via th | ne Internet   |            |  |  |
| 24 hour National telepho  | ne helpline for  | advice when your child is ill                           |            |  |  |
| Easier access to GP   |                  |   |            |  |  |
| Easier access to children   | 's A&E           |   |            |  |  |
| 4. Anything else you would  | d like to see?   |   |            |  |  |

### THANK YOU VERY MUCH FOR COMPLETING THIS QUESTIONNAIRE