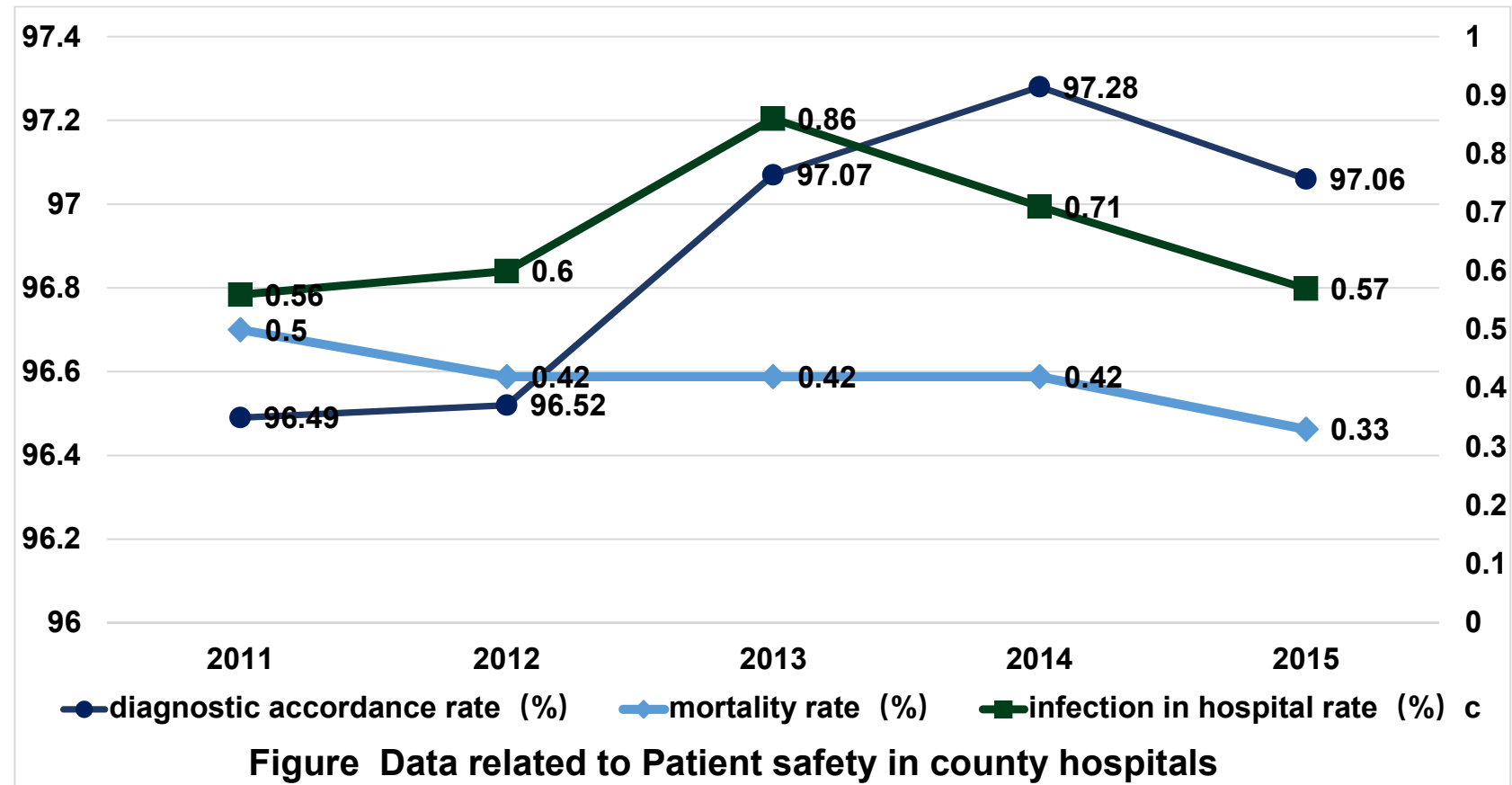
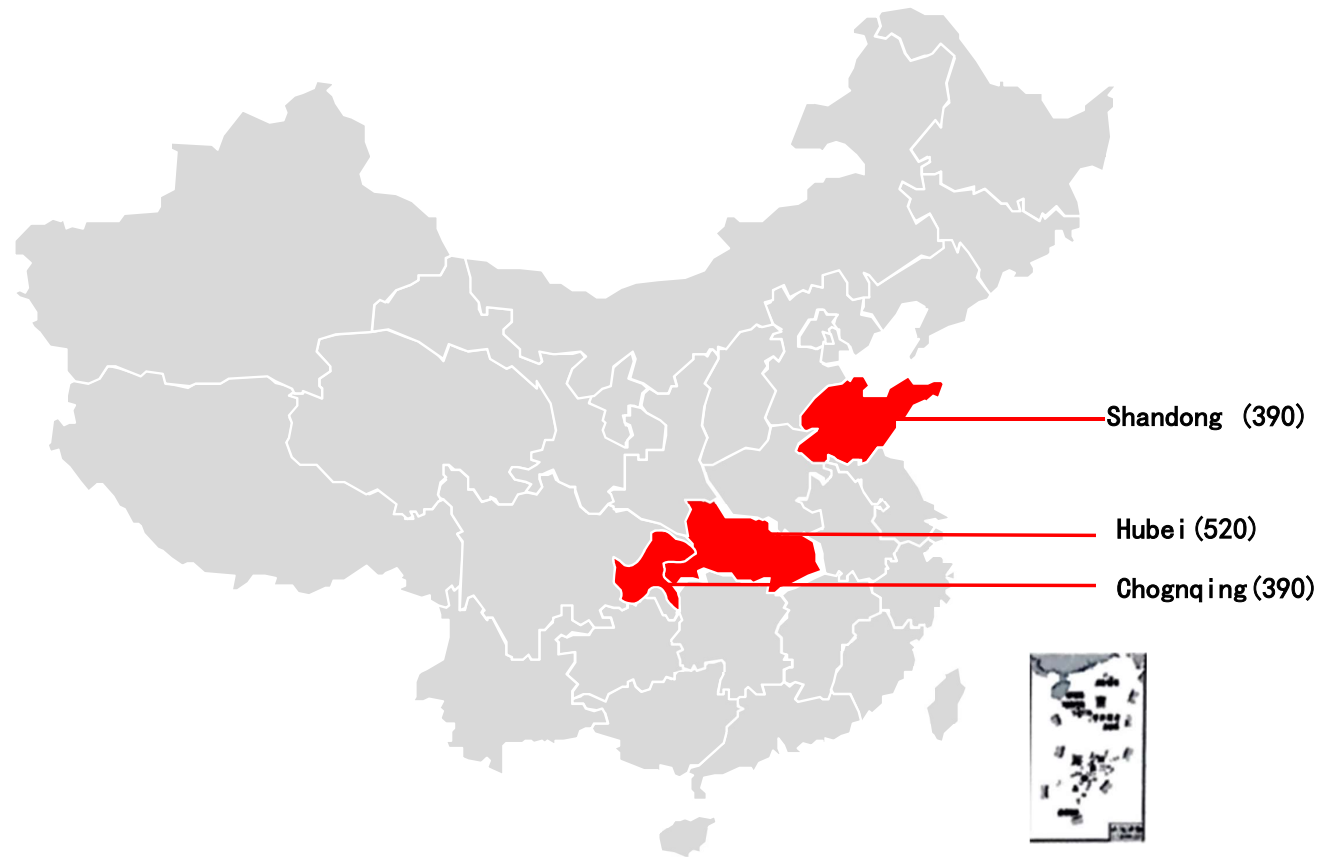


Appendix I



Data source: data from 10 sample county hospitals from 2011-2015

Appendix II Field study samples



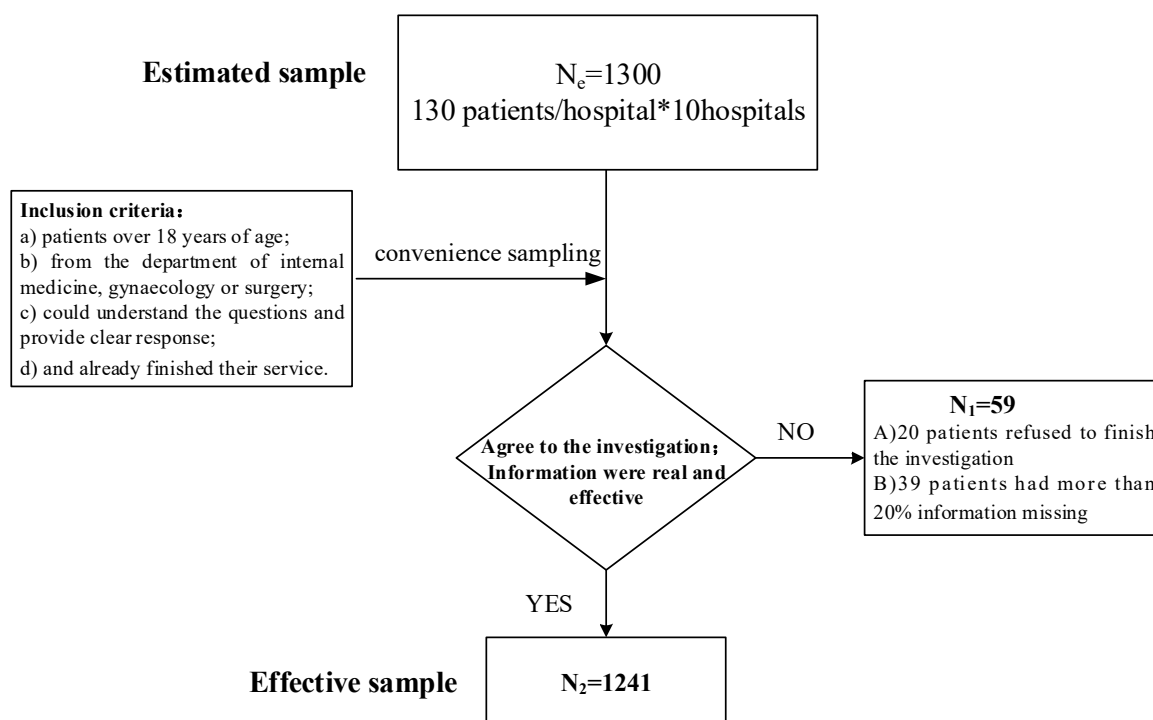
Appendix III: Formula for calculating the sample size

$$n = \frac{Z_{\alpha/2}^2 p(1-p)N}{\delta^2(N-1) + Z_{\alpha/2}^2 p(1-p)}$$

$$\alpha = 0.05, \delta = 0.05, N = 163.08 \times 10^6, p = 0.9$$

Note: According to the national report, there are 815.4 million rural residents in 2017. The two-week prevalence rate was 20.2%. In this study, the patient population (N) was estimated 163.08 million. Meanwhile, the response rate of previous question survey was 90% -95%. The total sample was 73-139. With the expert group discussion and based on the basic service situation for county-level hospitals, we choose 130 patients for each hospital (50 outpatients and 80 inpatients).

Appendix IV: Effective sample size



Appendix V: Patient experience questionnaire (PPE-15+overall feelings)

Basic information

1. Gender: *male/female*
2. Age: _____
3. Educational level:
Middle school and below/High school/Undergraduate/Master & Doctor
4. Marriage situation:
Single/Married/inconvenient to disclose
5. Employment situation:
Employed/Retired/Student/Unemployed
6. Which kind of basic health insurance do you have?
UEMI/URMI/NCMS/none
7. What is your reason to visit hospital this time?
Sickness/recovery & second visit/public health & health examination

PPE-15 questions and response categories

1. When you had important questions to ask a doctor, did you get answers that you could understand?
Yes, always/Yes, sometimes/No/I have no need to ask
2. When you had important questions to ask nurse, did you get answers that you could understand?
Yes, always/Yes, sometimes/No/I have no need to ask
3. Sometimes in a hospital, one doctor or nurse will say one thing and another will say something quite different. Did this happen to you?
Yes, always/Yes, sometimes/No
4. Did doctors talk in front of you as if you weren't there?
Yes, always/Yes, sometimes/No
5. If you had any anxieties or fears about your condition or treatment, did a doctor discuss them with you?
Yes, completely/Yes, to some extent/No/I didn't have any anxieties or fears
6. If you had any anxieties or fears about your condition or treatment, did a nurse discuss them with you?
Yes, completely/Yes, to some extent/No/I didn't have any anxieties or fears
7. Did you want to be more involved in decisions made about your care and treatment?
Yes, definitely/Yes, to some extent/No
8. Overall, did you feel that you were treated with respect and dignity while you were in hospital?
Yes, always/Yes, sometimes/No
9. Did you talk about your concerns with the hospital staff?
Yes, definitely/Yes, to some extent/No/I had no concern
10. Were you ever in pain during your stay in the hospital?
Yes/No
If yes, do you think the hospital staff did everything they could to help control your pain?
Yes, definitely/Yes, to some extent/No

11. If your family or someone else close to you wanted to talk to a doctor, did they have enough opportunity to do so?
*Yes, definitely/Yes, to some extent/No/No family member or friend was involved/
My family or friends didn't want or need information/
I didn't want my family or friends to talk to a doctor*
12. Did the doctors or nurses give your family or someone close to you all the information they needed to help you recover?
*Yes, definitely/Yes, to some extent/No/No family member or friend was involved/
My family or friends didn't want or need information*
13. Did any staff member of the hospital explain the purpose of the medicines you had to take at home in a way that you could understand?
*Yes, completely/Yes, to some extent/No/I didn't need an explanation/
I had no medicine (go to Q15)/
Don't know, as it was taken by other person (go to Q15)*
14. Did any staff member of the hospital tell you about medication side effects to watch for when you went home?
Yes, completely/Yes, to some extent/No/I didn't need an explanation
15. Did any staff member of the hospital tell you about danger signals regarding your illness or treatment to watch for after you went home?
Yes, completely/Yes, to some extent/No/I didn't need an explanation

Overall feelings (overall satisfaction and visiting willing)

1. How do you feeling about the health service in the hospital this time?
Very Satisfied/ Satisfied/ dissatisfied /very dissatisfied
2. If you can choose again, will you take this hospital as the first choice?
Never/may not /maybe/definitely yes

患者体验调查问卷

尊敬的先生/女士:

您好!非常感谢您填写本调查表,本调查问卷采取不记名填写方式,只作学术研究,所有个人信息都将得到严格保密,敬请放心。谢谢您的合作与支持!

敬祝健康快乐!

华中科技大学同济医学院

2017年2月

A 个人基本资料

(特别声明:以下属于您的个人资料,不记姓名,内容绝对保密,请放心作答。)

A1. 性别: (1)男 (2)女

A2. 年龄: _____岁

A3. 文化程度: (1)初中及以下 (2)高中或中专 (3)大专或本科 (4)硕士及以上

A4. 婚姻状况: (1)未婚 (2)已婚 (3)离婚 (4)丧偶 (5)其他

A5. 就业状况: (1)在业 (2)离退休 (3)在校学生 (4)无业或失业

A6. 职业类型:

(1)机关、企事业单位管理人员 (2)专业技术人员 (3)一般办事人员

(4)商业/服务业员工 (5)个体工商户 (6)非农户产业工人

(7)从事非农劳动的农民 (8)农业劳动者(从事农林牧渔工作)

(9)其他_____

A7. 您参加了一下哪种医疗保险(可多选):

(1)城镇职工医疗保险 (2)城镇居民医疗保险 (3)新型农村合作医疗

(4)公费医疗 (5)商业医疗保险 (6)其他医疗保险 (7)未参加任何保险

A8. 本次接受何种医疗服务? (1)看病 (2)康复 (3)咨询 (4)预防保健

(5)体检 (6)购药 (7)其他_____

B 就诊体验情况

请您就本次就诊情况回答以下问题,在合适的答案处打“√”。

B1. 您有问题问医生时,医生给您的答复您明白吗?

(1)明白 (2)部分明白 (3)不明白 (4)我未曾提问

B2. 您有问题问护士时,护士给您的答复您明白吗?

(1)明白 (2)部分明白 (3)不明白 (4)我未曾提问

B3. 当不同医护人员解答您同一问题时,是否遇到过回答不一致的情况?

(1)总是如此 (2)有时如此 (3)从未遇到

B4. 在诊疗过程或交谈中,医生是否表现的过于冷漠或忽视您的存在?

- (1) 总是如此 (2) 有时如此 (3) 从未遇到
- B5.** 当您对您的状况或治疗产生顾虑或担忧，医生是否会与您交流？
- (1) 总是如此 (2) 有时如此 (3) 从未遇到 (4) 没有顾虑或担心
- B6.** 当您对您的状况或治疗产生顾虑或担忧，护士是否会与您交流？
- (1) 总是如此 (2) 有时如此 (3) 从未遇到 (4) 没有顾虑或担心
- B7.** 您是否愿意更多参与制定诊疗方案？（检查、护理方案、用药计划、手术等）
- (1) 当然愿意 (2) 在一定程度上愿意 (3) 不想参与
- B8.** 在就诊过程中，您是否感受到医生/护士对您的尊重？
- (1) 总是如此 (2) 有时如此 (3) 从未遇到
- B9.** 若您有顾虑时，会和医务人员沟通吗？
- (1) 当然 (2) 在一定程度上会 (3) 不会 (4) 没有顾虑
- B10.** 您在就诊期间是否有过疼痛？ (1) 是 (2) 否
- 如果有过疼痛，医务人员是否采取有效措施帮您止痛？**
- (1) 是的，每次都会 (2) 有时候会采取 (3) 没有
- B11.** 您的亲朋好友是否有充足的机会同医生了解您的情况？
- (1) 当然 (2) 一定程度是 (3) 没有机会
- (4) 他们不知道我病了 (5) 他们不想/不需要咨询 (6) 我不希望他们了解
- B12.** 医护人员是否向您的亲朋好友告知了有助于您康复的事项、信息？
- (1) 告知了所需要的所有信息 (2) 告知了一部分 (3) 没有告知
- (4) 他们不知道我病了 (5) 他们不想/不需要这些信息
- B13.** 医务人员是否向您明确解释了离院回家后所用药物的适应症/使用目的？
- (1) 明确告知了所有 (2) 告知了一部分 (3) 没有告知 (4) 不需要告知
- (5) 没有开药（跳至 B15） (6) 不知道，药是别人帮忙拿的（跳至 B15）
- B14.** 就诊结束/出院前，医护人员是否告知了您所用药物需要注意的副作用？
- (1) 明确告知了所有 (2) 告知了一部分 (3) 没有告知 (4) 不需要告知
- B15.** 就诊结束/出院前，医护人员是否告知了您需注意的不适症状？
- (1) 明确告知了所有 (2) 告知了一部分 (3) 没有告知 (4) 不需要告知

C 就诊意向及影响因素

- C1.** 您对本次医院的总体服务是否满意？
- (1) 十分满意 (2) 满意 (3) 不满意 (4) 十分不满意
- C2.** 如果可以再次选择，您是否还会选择本医院就诊？
- (1) 绝对不会 (2) 也许不会 (3) 可能会 (4) 绝对会

Appendix VI: Ethics approval**RESEARCH ETHICS COMMITTEE APPROVAL FORM**

The Ethics Committee of Tongji Medical College, Huazhong University of Science and Technology (IORG No: IORG0003571) gave a final APPROVAL on 11/07/2018 for the study Evaluation of the Service Quality of Public Hospitals in China's Country Level: An Experimental Study Based on Service Capability Evaluation of Hubei, Shandong, and Guizhou Provinces which is conducted by Prof. Fang Pengqian at School of Medicine and Health Management, Tongji Medical College, Huazhong University of Science and Technology.

This Ethics Committee is constituted and functioned in accordance with ICH-GCP, GCP in China and Declaration of Helsinki (2013).

<u>Hui Chen</u>		<u>11/07/2018</u>
Printed Name	Signature	Date

IEC Chairperson/Designee

Appendix VII explanations of the Picker Patient Experience-15 (PPE-15)

A) Examples of questions from the Picker Patient Experience-15 (PPE-15) questionnaire showing the derivation of problem scores

Items	Response*
When you had important questions to ask a doctor, did you get answers that you could understand?	
1) <i>Yes, always</i>	
2) <i>Yes, sometimes</i>	<input checked="" type="checkbox"/>
3) <i>No</i>	<input checked="" type="checkbox"/>
4) <i>I have no need to ask</i>	
Sometimes in a hospital, one doctor or nurse will say one thing and another will say something quite different. Did this happen to you?	
1) <i>Yes, often</i>	<input checked="" type="checkbox"/>
2) <i>Yes, sometimes</i>	<input checked="" type="checkbox"/>
3) <i>No</i>	
Did doctors talk in front of you as if you weren't there?	
1) <i>Yes, always</i>	<input checked="" type="checkbox"/>
2) <i>Yes, sometimes</i>	<input checked="" type="checkbox"/>
3) <i>No</i>	
Did you talk about your concerns with the hospital staff?	
1) <i>Yes, definitely</i>	
2) <i>Yes, to some extent</i>	<input checked="" type="checkbox"/>
3) <i>No</i>	<input checked="" type="checkbox"/>
4) <i>I had no concern</i>	

Note: * The chosen boxes indicate responses coded as a 'problem'.

B) Classified dimensions of items and problems identified in the Picker Patient Experience (PPE-15) questionnaire

Items	Problems [#]	Dimensions
1	Doctors could not answer my questions clearly	Information transmission and patient education (S1)
2	Nurses could not answer my questions clearly	Information transmission and patient education (S1)
3	Staff gave conflicting information	Information transmission and patient education (S1)
4	I felt neglected when talking to doctors	Respect for patient preference (S2)
5	Doctors didn't care about my anxieties or fears	Emotional support (S3)
6	Nurses didn't care about my anxieties or fears	Emotional support (S3)
7	Not sufficiently involved in decisions about my treatment and care	Respect for patient preference (S2)
8	I couldn't feel respect and dignity when treated	Respect for patient preference (S2)
9	Not easy to find staff to talk about my concerns	Emotional support (S3)
10	Not enough work in pain control	Physical comfort (S4)
11	Family or friends didn't get opportunity to talk to doctors	Involvement of family or friends (S5)
12	Family or friends didn't get information to help to my recovery	Involvement of family or friends (S5)
13	Purpose of medicines wasn't explained	Continuity of medical service (S6)
14	Side effects of medicines weren't explained	Continuity of medical service (S6)
15	Danger signals I needed to look for weren't explained	Continuity of medical service (S6)

#Reference 14: *Jenkinson C, Coulter A, Bruster S. The Picker Patient Experience Questionnaire: development and validation using data from in-patient surveys in five countries. Int J Qual Health Care. 2002;14(5):353-3582002-10-01].*