

A close-up of a logo

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Your NHS Wales Experience

Questionnaire 2025

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The experience that you have of care is important to us. This might be an appointment  
with your doctor or health visitor, a hospital stay, an outpatient visit or something else.  
We would be grateful if you could complete this survey so that we can understand this  
better.  
  
The questions are based on the things that patients have said matter most. We will ask  
you questions about your latest experience of healthcare. Please help us by giving  
your honest opinion.  
  
The questions mostly have 4 options and you are asked to tick the answer that you feel  
best describes how you feel.  
  
Some of the questions have ‘not applicable‘. Please tick this if the question is not  
relevant to your experience.  
  
We do not need to know your personal details but have asked some general questions  
at the end about who you are. This is so we can make sure we are asking all groups of  
people about their experience.

**Q1. How recent was the experience you are thinking of?**

* In the last 6 months?
* Between 6 months and 1 year ago
* Between 1 and 2 years ago
* More than 2 years ago

**Q2. Did you feel that you were listened to?**

* Always
* Usually
* Sometimes
* Never

**Q3. Were you able to speak in Welsh to staff if you needed to?**

* Always
* Usually
* Sometimes
* Never

**Q4. From the time you realised you needed to use this service, was the time you waited:**

* Shorter than expected
* About right
* A bit too long
* Much too long

**Q5. Did you feel well cared for?**

* Always
* Usually
* Sometimes
* Never

**Q6. If you asked for assistance, did you get it when you needed it?**

* Always
* Usually
* Sometimes
* Never
* Not applicable

**Q7. Did you feel you understood what was happening in your care?**

* Always
* Usually
* Sometimes
* Never

**Q8. Were things explained to you in a way that you could understand?**

* Always
* Usually
* Sometimes
* Never

**Q9. Were you involved as much as you wanted to be in decisions about your care?**

* Always
* Usually
* Sometimes
* Never

**Q10. Overall Experience**

* 0 - Very bad
* 1
* 2
* 3
* 4
* 5 - Average
* 6
* 7
* 8
* 9
* 10 - Excellent

**Q 11. Was there anything particularly good about your experience that you would like to  
tell us about?**

|  |
| --- |
|  |

**Q12. Was there anything that we could change to improve your experience?**

|  |
| --- |
|  |

**Q13. What is your age?**

* 0-15
* 16-24
* 25-34
* 35-44
* 45-54
* 55-64
* 65-74
* 75+ Years
* I prefer not to say

**Q14. What is your gender?**

* Male
* Female
* Other
* Prefer not to say

**Q15. At birth, were you described as:**

* Male
* Female
* Other
* Prefer not to say

**Q16. Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?**

* Yes, A lot
* Yes, a little
* Not at all
* Prefer not to say

**Q17. Which of the following options best describes how you think of yourself?**

* Heterosexual or straight
* Gay or lesbian
* Bisexual
* Other
* Prefer not to say

**Q18. What is your religion? (Please choose one option that best describes your religion)**

* No religion
* Christian (all denominations)
* Buddhist
* Hindu
* Jewish
* Muslim
* Sikh
* Any other religion
* I prefer not to say

**Q18. What is your ethnic group? (Please choose one option that best describes your ethnic group or background)**

* Welsh
* Irish
* English
* Northern Irish
* Scottish
* Gypsy or Irish Traveller
* British
* Other White Background
* White & Black Caribbean
* White & Black African
* White & Asian
* Any other Mixed / Multiple Ethnic Background
* Indian
* Pakistani
* Bangladeshi
* Chinese
* Any other Asian Background
* African
* Caribbean
* Any other Black / African / Caribbean Background
* Arab
* Any other Ethnic Group
* I prefer not to say

**Thank you for completing this questionnaire.**