

Patient-Reported Experience Measures (PREMs)

PREMs are assessments designed to capture your personal experience and perception of the care and services you receive.

These measures focus on your interactions with healthcare providers, the environment in which care was delivered, and your overall satisfaction with the care received.

Your feedback through PREMs helps us understand what aspects of your care were positive and where there may be opportunities for improvement.

Your responses are kept strictly confidential. They are aggregated and analyzed in a way that protects your identity. Your feedback will be used solely for the purpose of enhancing the quality of care provided.

Thank you for taking the time to share your experiences and outcomes. Your input is invaluable in our continuous efforts to provide the highest standard of care.

Patient details

1. Patient name/initials

2. Age

3. Gender

Mark only one oval.

Male

Female

Other: _____

4. **Respect and Dignity:** The ICU staff treated me with respect and dignity.

Mark only one oval.

- Strongly disagree
- Disagree
- Neutral
- Unsure
- Agree
- Strongly Agree

5. **Respect and Dignity:** My privacy and confidentiality was respected

Mark only one oval.

- Strongly disagree
- Disagree
- Neutral
- Unsure
- Agree
- Strongly Agree

6. **Communication:** I was able to understand the information provided about my condition and treatment during my time in the ICU

Mark only one oval.

- Strongly disagree
- Disagree
- Neutral
- Unsure
- Agree
- Strongly Agree

7. **Communication:** The healthcare team listened to my concerns and answered my questions adequately

Mark only one oval.

- Strongly disagree
- Disagree
- Neutral
- Unsure
- Agree
- Strongly Agree

8. **Involvement in Care:** I felt involved in decisions about my care.

Mark only one oval.

- Strongly disagree
- Disagree
- Neutral
- Unsure
- Agree
- Strongly Agree

9. **Emotional Support:** I received emotional support from the ICU staff during my stay.

Mark only one oval.

- Strongly disagree
- Disagree
- Neutral
- Unsure
- Agree
- Strongly Agree

10. **Information Provision:** I received sufficient information about my condition, treatment, and what to expect during and after my time in the ICU.

Mark only one oval.

- Strongly disagree
- Disagree
- Neutral
- Unsure
- Agree
- Strongly Agree

11. Overall, I am satisfied with the care I received in the ICU.

Mark only one oval.

- Strongly disagree
- Disagree
- Neutral
- Unsure
- Agree
- Strongly Agree

12. Any comments or feedback?

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