

Please provide details of the patient experience surveys and measurements in place:

1. Do you have a monthly target response rate targets set for your The Friends and Family Test? If so please indicate on the table below

FFT Area	Response Rate Target	Current Response Rate
Outpatient	N/A	N/A
Admissions	30%	38.9%
Daycase	NO	12.1%
Emergency Dept	20%	12.1%
Community	N/A	N/A
Maternity (Birth)	20%	15.7%
Other: (please state)Mental Health	NO	N/A

2. What survey channels do you use to ask The Friends and Family Test?

Survey Channel	Is this channel used? Y/N	Annual Volume	Cost per unit
Text	N		N/A
IVR/IVM	N		
Agent calls	N		
Online surveys	Y		
Paper	Y	48000	
Kiosk	N		
Other: (please state)			

3. How do you promote The Friends and Family Test to patients?

Social Media, Promotional materials, trust website, positive engagement with Staff, Visitors and patients

Adhering NHS England compliance

4. When surveying patients by text, how do you ensure there is no charge to the end user to respond?

N/A

5. Are you using a dedicated short code for your text messaging patient feedback?

N/A

Supplier details

- 6. The Friends and Family Test suppliers of the above services: Optimum Healthcare
- 7. Expected contract length? 12 month rolling
- 8. Contract review date: End of year
- 9. Details of the implementation costs and on-going support costs: Annual Subscription
- 10. Any other associated costs to The Friends and Family Test? Printing of cards
- 11. Details of the processes followed to procure The Friends and Family Test?
- 12. Procurement Cluster advice on renewal
- 13. Details of the channels used to publish notification of procurement for The Friends and Family Test? Procurement Cluster advice on renewal

Local surveys

- 14. Does the Trust carry out local surveys? (please circle) **YES** NO (move to question 16)
- 15. What survey channels do you use to carry out local surveys? (please circle all that apply)

Survey Channel	Is this channel used? Y/N	Volume	Cost per unit
SMS	N		
IVR/IVM	N		
Agent calls	N		
Online surveys	N		
Paper	Y	350	Part of contract
Kiosk	N		
Other: (please state)			

- 16. How often does the Trust carry out local surveys? (please circle)

Monthly **Quarterly** Annually No local surveys

17. If not, does the Trust intend to in the future?
18. If Local surveys are outsourced, what supplier(s) is used? Optimum Healthcare
19. Expected contract length? Rolling Contract
20. Contract review date? Rolling Contract
21. Details of the implementation costs and on-going support costs: Part of contract
22. Details of any other costs associated to carrying out Local surveys? None
23. Details of the processes followed to procure Local surveys? Part of contract
24. Details of the channels used to publish notification of procurement for local surveys?
25. N/A