

Parental Access and Family Facilities Survey Update 2018 - Board Catering Managers/Lead Paediatric Dieticians

FOR COMPLETION BY BOARD CATERING MANAGER OR LEAD PAEDIATRIC DIETICIAN

Introduction

In 1985 Children's Health Scotland, formerly known as Action for Sick Children Scotland, and the National Association for the Welfare of Children in Hospital (Scotland) surveyed the 191 wards that admitted child patients in Scotland in order to find out what was available in the way of parental access and family facilities. Since then the survey has been updated in 1988, 1991, 1995, 2000, 2005 and 2013. The findings have been extremely useful for NHS Board planners and Scottish Government.

This 2018 survey will capture information on parental access and family facilities within all NHS hospitals in Scotland. The results of the survey, which is funded and supported by the Scottish Government, will be placed in the public domain and will inform the Scottish Government's policy making in relation to the healthcare of children and young people in Scotland. We are grateful for your cooperation in providing a general overview of services for children and young people in your Health Board and for answering the brief questionnaire attached.

We would like to ask you some details about your Health Board. The information you give us will allow us to compare facilities by type of hospital and location.

Your name has been provided by your Nurse Director as the most appropriate person to complete the survey. If you feel you are not the most appropriate person, please contact **Elizabeth May at Children's Health Scotland on 0131 553 6553 or e.may@childrenshealthscotland.org**. If you have any queries about the survey, please contact **Ian Christie or Susan Gardiner at Blake Stevenson by telephone (0131 667 2919) or email (ian@blakestevenson.co.uk or susan@blakestevenson.co.uk).**

The survey should take around 5 to 10 minutes to complete and will be available until 19 November.

Please use the 'back' and 'next' buttons on the survey to navigate through the questionnaire - please do not use your internet browser's back button.

The questionnaire format will allow you to complete the survey in several visits, should you wish to do so. To save your answers at any point, please click on the 'Save' button at the bottom of the screen and follow the instructions carefully.

NB: In the questionnaire, 'Parent' means parent or carer with legal responsibility for the child, or parent substitute who is 'a suitably qualified person (e.g. an aunt or granny), not necessarily being legally responsible, selected for the care of the child in agreement with the child's wishes.

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How we will use the data you provide

Should you wish to view further information about how we will store and use the data you provide, and your rights in respect of the personal data we will hold about you, you can view this on the Blake Stevenson website.

Your consent to take part

Please click on the 'Next' button to begin the survey.

By clicking the button you agree to participate in the survey we are carrying out on behalf of CHS, and a researcher may contact you to discuss your responses if clarification is needed.

Questionnaire

Q1 Please indicate which of the following apply: (Please tick all that apply)

	Children's wards	Adult wards admitting children and young people (up to their 16th birthday)
Use of a validated tool to assess nutritional risk or nutritional status	<input type="checkbox"/>	<input type="checkbox"/>
Recommended nutritional intake and salt standards adhered to	<input type="checkbox"/>	<input type="checkbox"/>
Support for special diets	<input type="checkbox"/>	<input type="checkbox"/>
A children's menu planning group with paediatric dietetic input	<input type="checkbox"/>	<input type="checkbox"/>
Specific menus for children/young people	<input type="checkbox"/>	<input type="checkbox"/>
Support for special diets (medical)	<input type="checkbox"/>	<input type="checkbox"/>
Support for special diets (cultural) e.g. vegetarian	<input type="checkbox"/>	<input type="checkbox"/>
Support for special diets (religious) e.g. halal, kosher	<input type="checkbox"/>	<input type="checkbox"/>

Q2 What is the daily spend per child on children's meals on children's wards in your hospital?

Q2a Do you adhere to hospital meal standards as set out in 'Food in Hospital' 2016?

Yes

No

We would now like to ask you for some final information

Q3 The survey staff may wish to contact you for clarification of information provided in the questionnaire. Please indicate if you give your consent for them to re-contact you.

Yes

No

In any published material, the data will be anonymised and it will not be possible for anyone to link the responses to any individual.

Q4 Name of member of staff completing this survey:

Q5 Designation:

Q6 Phone:

Q7 Email address:

Q8 Department: (Answer required)

Q9 Hospital name: (Answer required)

Q10 Hospital type: (Answer required)

- | | |
|---|------------------------------------|
| <input type="radio"/> District General | <input type="radio"/> GP/Community |
| <input type="radio"/> Rural General | <input type="radio"/> Teaching |
| <input type="radio"/> Children's Hospital | |

Q11 Health Board: (Answer required)

- | | |
|---|-------------------------------------|
| <input type="radio"/> Ayrshire & Arran | <input type="radio"/> Highland |
| <input type="radio"/> Borders | <input type="radio"/> Lanarkshire |
| <input type="radio"/> Dumfries & Galloway | <input type="radio"/> Lothian |
| <input type="radio"/> Fife | <input type="radio"/> Orkney |
| <input type="radio"/> Forth Valley | <input type="radio"/> Shetland |
| <input type="radio"/> Grampian | <input type="radio"/> Tayside |
| <input type="radio"/> Greater Glasgow & Clyde | <input type="radio"/> Western Isles |

Thank you very much for your help.

Please now click on the 'submit' button below to submit your answers. You will then be redirected to the Children's Health Scotland website.