



**Y PWYLLGOR ANSAWDD, DIOGELWCH A PHROFIAD
QUALITY, SAFETY AND EXPERIENCE COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	04 December 2025
TEITL YR ADRODDIAD: TITLE OF REPORT:	Production and Use of Survey Guidelines
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Sharon Daniel, Executive Director of Nursing, Quality and Patient Experience
SWYDDOG ADRODD: REPORTING OFFICER:	Louise O'Connor, Assistant Director of Legal and Patient Experience

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Ar Gyfer Penderfyniad/For Decision

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

The Quality, Safety and Experience Committee is asked to approve **Policy Number 568 - Production and use of Survey Guidelines.**

This report provides assurance that Written Control Documentation (Policy 192) has been adhered to in the review of the above mentioned written control document and that therefore the document is in line with legislation/regulations, available evidence base and can be implemented within the Health Board.

Cefndir / Background

Policy number: 568

Classification: Corporate Supersedes: version 1 Version number: 2

The policy has been reviewed and updated in line with the requirements as set out in the new People's Experience Framework, implemented in April 2025.

The guidance provides advice on the production and provision of surveys for people, patients, their relatives and carers, the public and for staff.

This guidance applies to those members of staff that are employed by the Hywel Dda University Health Board, and for whom the Health Board have legal responsibility including contractors and those who undertake work on behalf on Contractors.

National surveys are developed at the request of clinical areas of work and in conjunction with the NHS Wales Executive Team. There is an approval process set up, to support the development and inclusion of national surveys within the Once for Wales Experience System (CIVICA).

Where applicable, all organisations will engage in the national survey approach in line with the Duty of Quality 'always-on' reporting and share with people and communities via local websites, the feedback received and any service improvements that have been undertaken because of the feedback.

Information collected via national surveys will remain the responsibility of clinical areas and organisations supporting the collection.

The information will also be used to populate the NHS Wales Executive Quality Dashboard.

Asesiad / Assessment

National Surveys are overseen by the NHS Executive in line with the national survey road map. The governance process for national surveys is facilitated by the Once for Wales Concerns Management System Central (OfWCMS) team.

Hywel Dda University Health Board promotes and provides training to all departments and wards across the UHB on the All-Wales CIVICA patient experience feedback system. Data is collected via Surveys created on the CIVICA patient experience feedback system to support improve patient experience.

Argymhelliad / Recommendation

- The Quality, Safety and Experience Committee, is requested to ratify the Production and Use of Surveys Guidelines Policy number 568.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	To provide a clear process and guidance for the development, ratification and use of surveys across Hywel Dda University Health Board (UHB). This includes the provision of surveys for patients, their relatives, carers, public, stakeholders and staff members.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not applicable.
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	6. Person-Centred
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	4. Learning, improvement and research
Amcanion Strategol y BIP: UHB Strategic Objectives:	2. Healthier communities

Amcanion Cynllunio Planning Objectives	Not Applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	9. All HDdUHB Well-being Objectives apply

Gwybodaeth Ychwanegol: Further Information:

Ar sail tystiolaeth: Evidence Base:	Real time feedback from Service Users which can be collated and analysed quickly and efficiently.
Rhestr Termiau: Glossary of Terms:	The CIVICA Experience Wales platform, Complaints, Compliments, PALS – Patient Advice and Liaison Service PE – Patient Experience National People’s Experience
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Ansawdd, Diogelwch a Phrofiod: Parties / Committees consulted prior to Quality, Safety and Experience Committee:	Listening and Learning Committee.

Effaith: (rhaid cwblhau) Impact: (must be completed)

Ariannol / Gwerth am Arian: Financial / Service:	Not applicable
Ansawdd / Gofal Claf: Quality / Patient Care:	Not applicable
Gweithlu: Workforce:	Not applicable.
Risg: Risk:	Not applicable
Cyfreithiol: Legal:	Not applicable
Enw Da: Reputational:	Not applicable
Gyfrinachedd: Privacy:	Not applicable – data is recorded anonymously.
Cydraddoldeb: Equality:	EqlA screening has been undertaken. Full EqlA is not required.

Production and Use of Surveys Guideline

People's Experience Surveys

Policy information

Policy number: 568

Classification: Corporate

Supersedes: version 1

Version number: 2

Date of Equality Impact Assessment Pending

Approval information

Approved by: Quality, Safety and Experience Committee

Date of approval: [Click or tap to enter a date.](#)

Date made active

Review date:

Summary of document:

This document sets out guidance for the production and use of surveys:

Scope:

This guidance provides advice on the production and provision of surveys for people, patients, their relatives and carers, the public and for staff.

This guidance applies to those members of staff that are employed by the Hywel Dda University Health Board (UHB), and for whom the UHB have legal responsibility including contractors and those who undertake work on behalf on contractors.

To be read in conjunction with:

[153 - Equality and Diversity Policy](#) (opens in a new tab)

[333 - Welsh Language Policy](#) (opens in a new tab)

Patient information: Not applicable

Owning group: Listening and Learning Sub-Committee 07/08/2025

Executive Director job title: Executive Director of Nursing, Quality and Patient Experience

Reviews and updates:

Version 1 – 15.8.2017

Version 2 – Full review

Carers, Complaint, Compliment, Engage, Feedback, Incidents, Involve, Negative, Patient, Patient Dissatisfaction, Patient Feedback, Patient Satisfaction, People, People's Experience, Positive, Public, Questionnaire, Research, Staff, Stakeholders, Survey, unpaid carers.

Glossary of terms

Complaint	When someone tells us they are unhappy with the care or service they received, and they want us to look into it.
Compliment	Positive feedback from someone who is happy with the care or service they received.
Engagement Team	A group of staff who work with patients, families, and communities to hear their views and involve them in improving and developing services.
Incident	An event that happened in care or services that was unexpected and could have or did cause harm.
Listening and Learning Tree	A visual tool used to show how we listen to feedback and use it to make improvements.
Peoples Experience Framework	A guide that helps us understand what matters most to people and how we can improve their experience.
Patient Experience Team	The team responsible for collecting, understanding, and acting on feedback from patients and families.
PREMs and PROMs	Short for Patient Reported Experience Measures and Patient Reported Outcome Measures. These are surveys that ask patients about their experience and how they feel after receiving care.
Once for Wales Experience system (CIVICA)	A national online system used across NHS Wales to record and manage patient feedback, including complaints, compliments, and surveys.
Triangulation	A way of looking at different types of information (like complaints, incidents, and surveys) together to get a fuller picture of what's happening and where we can improve.
CROMs	Clinician Reported Outcome Measures
SROMs	Staff Reported Outcome Measures

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Aim

To provide a clear process and guidance for the development, ratification and use of surveys across Hywel Dda University Health Board (UHB). This includes the provision of surveys for patients, their relatives, carers, public, stakeholders and staff members.

Objectives

Quality Assurance: To provide a quality assurance process for all surveys developed by the UHB, ensuring they follow good practice, are supported by a process of good governance, and portray a positive, professional image of the organisation.

Staff Awareness: To ensure staff are aware of the UHB's requirements and standards for producing good quality, effective people experience, engagement, and staff surveys.

Organisational Understanding: To ensure surveys used by the UHB contribute to a wider organisational understanding of people's experience, service development, and organisational development.

Staff Support: To support staff in the development, production, and management of surveys through better awareness of the standards for producing good quality, effective surveys via the Once for Wales Experience System.

Consistent Approach: To provide a consistent approach to the Once for Wales Experience System.

Survey Creation: To provide a consistent approach to creating and producing surveys via the UHB's Once for Wales Experience System (CIVICA).

These objectives align with best practices for survey development and management, ensuring quality, consistency, and effective use of survey data within the UHB. If you have any specific queries or need further advice, please email: patientexperience2@wales.nhs.uk (opens in a new tab).

Scope

This guidance applies to those members of staff that are employed by the UHB and for whom the UHB have legal responsibility including contractors and those who undertake work on behalf of contractors.

Surveys Not Covered by This Policy

This guidance can support the use of patient surveys in formal research or clinical audits. However, for further advice, please consult the Clinical Audit and Research and Development departments as follows: clinical.audit@wales.nhs.uk (opens in a new tab).

[Hywel Dda UHB Clinical Audit intranet page](#) (opens in a new tab)

This guidance can support the use of patient survey for formal public consultations or engagement periods. However for further advice on engagement requirements related to service change, please

consult the Engagement Team by emailing: hyweldda.engagement@wales.nhs.uk (opens in a new tab).

The difference between People's Experience, Engagement, Patient Reported Experience Measurements (PREMS), Patient Reported Outcome Measurements (PROMS)

People's experience is 'the sum of all interactions, shaped by the culture of the organisation, staff and systems. People's experience can be described as how people feel when using any services and programmes offered by NHS in Wales. Whether it be in a hospital ward, outpatient appointment, participation in national screening programs, engagement with primary care services (such as GP, Optometrist, Pharmacist, Dentist), interaction with health promotion practitioners, or attendance at any event hosted by an NHS Wales Organisation. In essence, the definition of People's Experience is fundamental to Person and Population centredness. The integration of all strands of experience feedback relies on local expertise and resources. However, the triangulation of experience feedback data alongside other metrics, e.g. outcomes, as depicted on the Listening and Learning Tree is indicative of an organisation committed to quality.

Engagement is different from People's experience and feedback. Although the two activities are related and overlap, engagement is the active participation of members of the public, communities or other stakeholders in service development, planning, delivery and evaluation.

For advice and guidance on PREM (Patient Reported Experience Measure) and PROMS (Patient-Reported Experience Measure) contact Value Based Health Care at:

ValueBased.Healthcare@wales.nhs.uk (opens in a new tab).

In addition to PREMS and PROMS there is ongoing development of additional measures including CROMs (Clinician Reported Outcome Measures) and SROMs (Staff Reported Outcome Measures).

For **information governance** queries around the survey creation, please contact:

Information.Governance3@wales.nhs.uk (opens in a new tab).

Use of Surveys

The use of surveys should form part of a planned departmental programme of people's experience, and staff engagement initiatives, and can be one of a range of tools used to gather patient, public or staff views.

Surveys should not be used as an opportunity to ask whatever is wished. Questions must be relevant and appropriate to the area being considered and designed with sensitivity, recognising the needs of the individuals completing them. They must not cause offence or make judgements either directly or implied on individual behaviour.

Surveys can be used to collect quantitative (numerical) or qualitative (descriptive) information, usually by using structured questions. Surveys, when well designed, can provide meaningful information and insights to inform and guide future directions.

A Welsh people's experience core set of questions has been developed for use in all experience and feedback surveys. In circumstances where people in receipt of services cannot directly provide feedback, consideration should be made for the views of family, friends and carers (unpaid) to be gathered. [People's Experience Survey \(PES\)](#) (opens in a new tab).

Locally requested surveys must reference the National People's Experience question set. contained within the Welsh People's Experience Framework [NHS Wales People's Experience Framework](#) (opens in a new tab).

National surveys are developed at the request of clinical areas of work and in conjunction with the NHS Wales Executive Team. There is an approval process set up to support the development and inclusion of national surveys within the Once for Wales Experience System. Where applicable, all organisations will engage in the national survey approach in line with the Duty of Quality 'always-on' reporting and share with people and communities via local websites, the feedback received and any service improvements that have been undertaken because of the feedback. Information collected via national surveys will remain the responsibility of clinical areas and organisations supporting the collection. The information will also be used to populate the NHS Wales Executive Quality Dashboard

Equality Monitoring

Health outcomes and experiences are often influenced by the protected characteristics of our people and communities. To support the identification of varying experiences, all experience and feedback surveys across NHS Wales should include a nationally agreed set of demographic and diversity (through a quality lens) questions which are included in appendix C of the People's Experience Framework. [NHS Wales People's Experience Framework](#) (opens in a new tab).

Departments should be mindful of the needs of different groups in the population, especially those with protected characteristics and ensure that appropriate adjustments are made. For further advice and guidance contact the Diversity and Inclusion Team - Inclusion.hdd@wales.nhs.uk (opens in a new tab).

Enhancing survey management within the UHB will improve survey quality and timing, maximising the value of the results. Survey results can be used to check progress and improvement of care providers and hold them to account for outcomes they achieve.

Patient feedback information can improve and drive quality improvement and learning of services that the NHS delivers.

Other methods of seeking and understanding patient, public or staff views may sometimes be more appropriate and include the use of patient stories - advice and guidance can be sought from the Patient Experience Team - patientexperience2@wales.nhs.uk (opens in a new tab).and other mechanisms such as focus groups - advice can be sought from the Engagement Team - hyweldda.engagement@wales.nhs.uk (opens in a new tab).

Survey Process

Consider why you want to do a survey?

It is important that the set of results provide real decision–enhancing value. Good surveys have focused objectives that are easily understood. Spend time to identify, in writing:

- What is the aim of this survey?
- Why are you creating this survey?
- What do you hope to accomplish with this survey?
- How will you use the data you are collecting?
- What decisions do you hope to influence with the survey results? (This will help you determine the necessary data to collect.)

Seek advice from the Patient Experience team if needed.

Ensure that you have agreement to proceed and final authorisation of the survey from your line manager. This will include approval of the need for the survey and the potential time required including training on the Once for Wales Experience System (CIVICA) and using the information gained for reports/feedback/lessons learnt.

Please complete the standard survey registration form ([Appendix 1](#)) and email to patientexperience2@wales.nhs.uk (opens in a new tab).

Draft your survey and include National People’s Experience Framework mandated core questions. [People’s Experience Survey \(PES\)](#) (opens in a new tab).

Advice on drafting survey questions

Once you have considered the purpose of the survey you should take time to carefully consider and write your questions.

Keep the survey as short as possible and consider what you need to know with what would be interesting to know; use plain language and try to avoid jargon and abbreviations; explain issues if needed; start with easier questions to get the respondent involved; avoid leading or loaded questions; use closed questions wherever possible as they are easier to analyse with yes/no, rating scales but also include open ended questions to provide opportunities for useful qualitative information and insights. All surveys must include mandated questions included in the National People’s Experience Framework.

For more advice on drafting up your survey questions see [Appendix 2](#) for tips on writing good surveys and you may wish to seek further advice from the Patient Experience team patientexperience2@wales.nhs.uk (opens in a new tab).

Test your survey before rolling out

Before you make the survey available, it would be of benefit to ask a sample group of respondents to complete the survey (not people who were involved in creating it). After they’ve completed it, ask them

Hywel Dda University Health Board

if they had problems understanding any questions or had answers that were not available on the list of choices. It's much easier to change the survey before you send it than afterwards.

Arrange to administer your survey

The Patient Experience Team will support the survey process, provide a QR code, and training on evaluating the findings on the Once for Wales Experience System (CIVICA).

Translation and Accessibility

You will need to consider the requirements of the Welsh Language Standards for any surveys to patients or the public. All surveys to patients or the public must be available in Welsh and English. The UHB has a Welsh Translation Service, which can be accessed from: [Welsh Language Team - Home \(sharepoint.com\)](#) (opens in a new tab).

For other language requirements please follow these steps:

- ☞ Contact switchboard and ask to be connected to WITS 02920 537555
- ☞ Once connected you will need to provide the following –
 - Departmental name and budget code
 - Quote purchase order code **87633817**
 - Confirm the Health Board you are calling from
 - Provide your NHS contact email and telephone number
 - A WITS team member will then direct you depending on your specific needs.

It is recommended that various options are offered to people to support them in completing the survey in a way that best meets their personal requirements for example audio, braille, paper copies, language of choice, video etc.

Audience

Have you identified your survey respondents and how to reach them? You are likely to have regular access to the audience of your survey as they are relevant to your service area and have ways to distribute and promote your survey, for example via the survey QR code on posters and leaflets.

The UHB also has an involvement and engagement scheme called Siarad Iechyd/Talking Health. The scheme gives members of the public and staff an opportunity to have their say on how our health services are planned, developed and delivered. If you think this group could be helpful in responding to your survey and sharing their views, please contact the Engagement team on hyweldda.engagement@wales.nhs.uk (opens in a new tab) for more information.

Analyse results and develop actions

The process for analysing the data from survey returns should be identified before starting the survey. Advice can be sought from the Patient Experience Team.

Publish results and share actions

It is important that you review the survey feedback which may influence and improve current services or to consider changing services or processes.

Survey results should be discussed at a service/departmental level and any identified actions built into the delivery plans for that area. It may also be appropriate to report to the corporate governance processes.

Including the experiences of patients as a core element of our quality improvement rather than as an additional extra is important.

It is good practice to share the results of your survey with those you have surveyed. This may be through a variety of methods as will best suit the survey and service, for example, direct feedback to correspondents, inclusion in newsletters, information on posters in waiting areas. It is also good practice to share any improvements or changes that develop following consideration of the survey results. It is important that people are made aware they have contributed to any improvements in services because of their input through the survey.

You may wish to summarise the main issues as – “you said, we did” - for sharing with respondents this function is available on the Once for Wales Experience system (CIVICA).

Please send any reports and actions to patientexperience2@wales.nhs.uk (opens in a new tab) patient experience team for recording. This will provide a valuable library of resources for future engagement and will assist us in triangulating information to improve services. Some questions could be reused at a future time but also aim to avoid duplication where similar questions have already been asked recently. It will also help ensure that the UHB is aware of the work and can reflect this in annual reporting mechanisms.

Consider when/if to re-survey

Actions should be regularly reviewed at the service level and changes made as a result monitored and reported within the corporate governance processes.

Sharing learning on an organisational basis will encourage wider improvement across the organisation.

Depending on the service and developments undertaken you may wish to re-survey to test whether they have resulted in improvement.

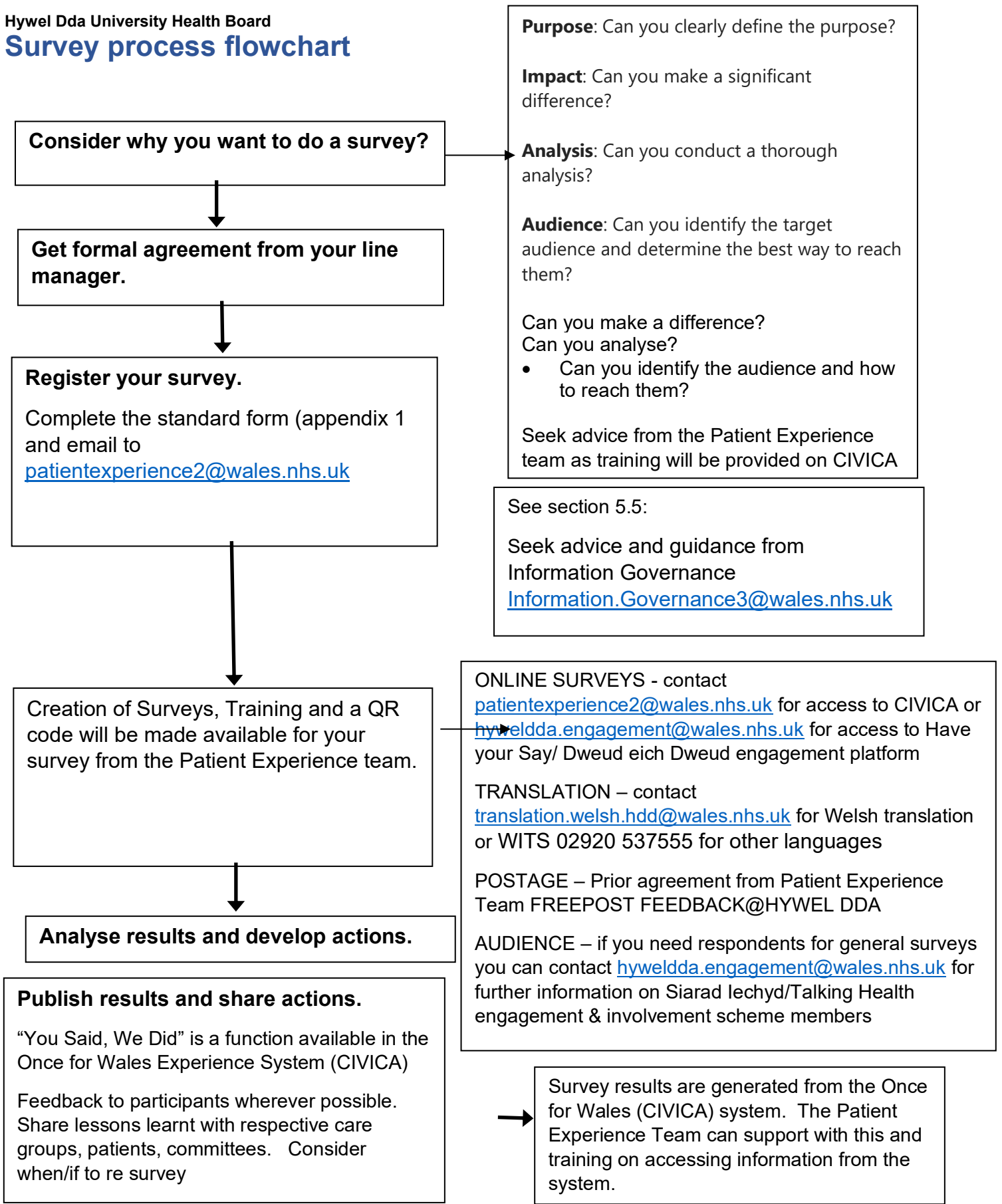
Training

Training and support will be available on request from the Patient Experience Team via email patientexperience2@wales.nhs.uk (opens in a new tab).

Further Support

Further support can be obtained via the Patient Experience Team patientexperience2@wales.nhs.uk (opens in a new tab) or the Engagement Team – Hyweldda.engagement@wales.nhs.uk (opens in a new tab).

Survey process flowchart



APPENDIX 1 - REGISTER YOUR SURVEY FORM

Name:	
Job Title:	
Service Area/Directorate:	
Department:	
Contact details:	
Name of Line manager:	
Survey approved by line manager:	Yes/No/TBC
Proposed title of survey:	
Purpose of the survey (topic, objectives, issues to be addressed, etc):	
Target population	
Intended sample size:	
Distribution method (e.g. online, direct request?)	
How survey participants will be approached (e.g. direct request, online notice):	
Proposed start & end time	

Frequency of the survey (one-time or reoccurring?)	
Data Usage (by Department / Committee)	
Results Communication method (e.g. Report, newsletter)	
Comments	

APPENDIX 2 – ADVICE ON WRITING GOOD SURVEYS

Clearly define the purpose of your survey. Advance planning helps ensure that the survey asks the right questions to meet the objectives and generate useful feedback/data.

Note the purpose of the survey. To ensure focused responses, outline at the beginning of the survey the reason you are asking questions and how you will use the results.

Keep it concise. Draw a mental line between what you "must know" and what would be "interesting to know." There is also a third category of information that "doesn't matter."

Keep it simple. Use plain language that is direct and familiar to the respondents. Avoid jargon or technical terminology – the recommended reading age for any audience is 12 years.

Spell it out. Do not ask questions that assume respondents are familiar with the specifics of the issue. Include details or additional information if necessary. Titles, abbreviations, and product names are often sources of misunderstanding. When in doubt, spell it out.

Start with easy questions. Begin the survey with questions that are likely to be easy to answer to get the respondent involved. Yes/No questions or simple multiple-choice questions are ideal to start with. Rating scales should come later. Open-ended questions usually come last as they give the respondent the opportunity to reflect on the topic throughout the survey.

General before specific. The issues raised in one question can influence how people think about the next question. It's a good idea to ask general questions first and move on to more specific questions later.

Avoid leading questions. You don't want to lead your respondents into answering a certain way based on the wording of the questions. For example, instead of asking, "We have recently upgraded our equipment to world-class levels. What are your thoughts on the world-class equipment?" ask, "What are your thoughts on the changes to our equipment?"

Avoid loaded questions. These types of questions use emotionally charged items like words or stereotypes, which can push respondents towards a specific answer choice.

Use closed questions whenever possible. Specific choices (e.g., Yes or No) make it easier to analyse results. Closed-ended questions can take the form of yes/no, multiple-choice, or rating scale. Open-ended survey questions allow people to answer in their own words and may provide useful qualitative information and insights.

Test your survey. Before you send the survey to real respondents, ask a sample group to take the survey (not people who were involved in creating it). After they've completed it, ask if they had problems understanding any questions or had answers that were not available on the list of choices. It's much easier to change the questionnaire before you send it than after!

Consider sending reminders. While not appropriate for all surveys, sending out reminders can often provide a significant boost in response rates. This is easier with online surveys.

Equality Impact Assessment (EqIA) Screening Template

When to complete an EqIA Screening

An EqIA Screening Template must be completed when reviewing, changing and developing procedures/ proposals/ projects/ policies. This is a first step and is used to consider whether there are any negative impacts that may arise.

Purpose of an EqIA Screening Template

The purpose of this short exercise is to ensure that you have shown appropriate due regard when considering the impact for people with protected characteristics in your decision making. The screening process is designed to help you consider the circumstances and to inform evidence-based decisions.

If the proposal is of a significant nature and it is apparent from the outset that a full EqIA will be required, then it is not necessary to complete this Screening Template, you can proceed to complete the full [EqIA](#).

If no negative impacts are identified following completion of the EqIA screening then it is not necessary to undertake a full EqIA however, the decision and justification must be clearly recorded in this document.

On completion of the Screening Template:

- Ensure that all the white boxes within the screening are completed.
- Ensure that the Procedure/ Project/ Proposal/ Policy owner has signed and dated the Screening Template.
- Send a copy of the completed template along with the related policy or project proposal to Inclusion.hdd@wales.nhs.uk for the Diversity & Inclusion Team to review.
- Each Screening Template will be reviewed by the Diversity & Inclusion Team and feedback will be provided to the Procedure/ Project/ Proposal/ Policy owner. This may include recommendations for further action to inform robust decision-making.

Support

For further support please visit the [EqIA Sharepoint](#) or contact:

Email: Inclusion.hdd@wales.nhs.uk

Tel: 01554 899055

Director and Directorate	Nursing, Quality and Patient Experience
Service Area	Patient Experience

Title of Procedure, Project, Proposal, Policy being screened:	568 - Production and Use of survey guideline
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Description of the Procedure/ Project/ Proposal/ Policy being screened (including key aims and objectives)

Aim:

To provide a clear process and guidance for the development, ratification and use of surveys across Hywel Dda University Health Board (UHB). This includes the provision of surveys for patients, their relatives, carers, public, stakeholders and staff members.

Objectives to achieve the Aim:

Quality Assurance: To provide a quality assurance process for all surveys developed by the Health Board, ensuring they follow good practice, are supported by a process of good governance, and portray a positive, professional image of the organisation.

Staff Awareness: To ensure staff are aware of the Health Board's requirements and standards for producing good quality, effective people experience, engagement, and staff surveys.

Organisational Understanding: To ensure surveys used by the Health Board contribute to a wider organisational understanding of people's experience, service development, and organisational development.

Staff Support: To support staff in the development, production, and management of surveys through better awareness of the standards for producing good quality, effective surveys via the Once for Wales Experience System.

Consistent Approach: To provide a consistent approach to the Once for Wales Experience System.

Survey Creation: To provide a consistent approach to creating and producing surveys via the Health Board's Once for Wales Experience System (CIVICA).

These objectives align with best practices for survey development and management, ensuring quality, consistency, and effective use of survey data within the Health Board. If you have any specific queries or need further advice, please email: patientexperience2@wales.nhs.uk

Evidence considered (including staff and population data, relevant research, expert and community knowledge etc.)

This guidance can support the use of patient surveys in formal research or clinical audits. However, for further advice, please consult the Clinical Audit and Research and Development departments as follows:

clinical.audit@wales.nhs.uk

https://nhs.wales365.sharepoint.com/:u:/r/sites/HDD_Clinical-audit/SitePages/Clinical%20Audit.aspx?csf=1&web=1&e=bfzqYu

The Patient Experience Team and Engagement Team advise and provide support on surveys for departments and wards across Hywel Dda University Health Board.

Assess which protected characteristics will potentially be affected by the proposal in the table below (please ✓ the relevant box to confirm positive, negative or no impact).

If at any point a negative impact has been identified (actual or potential), you do not need to proceed with the completion of this form, as a full EqlA must be undertaken: [Equality Impact Assessments \(EqlAs\) \(sharepoint.com\)](#)

Age				
Is it likely to affect older and younger people in different ways or affect one age group and not another?				
Positive Impact	<input type="checkbox"/>	Negative Impact	<input type="checkbox"/>	No Impact <input checked="" type="checkbox"/>
Justification of impact identified: This document provides guidance to staff on production of surveys. There will be a variety of methods and surveys available to ensure age appropriateness. This Guideline will be used to support staff who are asked to produce/ create surveys and would not have any impact due to a person's age.				
Disability				
Is it likely to affect those with a physical disability, learning disability, sensory loss or impairment, mental health conditions, long-term medical conditions such as diabetes?				
Positive Impact	<input checked="" type="checkbox"/>	Negative Impact	<input type="checkbox"/>	No Impact <input type="checkbox"/>
Justification of impact identified: The guidance is for staff producing surveys. The guidance includes advice on ensuring people with sensory loss such as low vision, can access the survey by increasing survey font on electronic and paper copies and other methods.				
Gender Reassignment				
Is it likely to affect those who either:				
<ul style="list-style-type: none"> • Have undergone, intend to undergo or are currently undergoing gender reassignment. • Do not intend to undergo medical treatment but wish to live in a different gender from their gender at birth 				
Positive Impact	<input type="checkbox"/>	Negative Impact	<input type="checkbox"/>	No Impact <input checked="" type="checkbox"/>
Justification of impact identified: This Guideline will be used to support staff who are asked to produce/ create surveys and would not have any gender related impact. There is choice for individuals on completing the equality questions.				

Marriage / Civil Partnership

Under the Equality Act, the characteristic of Marriage and Civil Partnerships is only protected in the workplace/ employment.

Is it likely to affect those who are married or in a Civil Partnership? This means someone who is legally married or in a civil partnership.

Positive Impact	<input type="checkbox"/>	Negative Impact	<input type="checkbox"/>	No Impact	<input checked="" type="checkbox"/>
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Justification of impact identified:

This Guideline will be used to support staff who are asked to produce/ create surveys and would not have any impact.

Pregnancy and Maternity

Is it likely to affect those who are pregnant or have recently had a baby? Maternity covers the period of 26 weeks after having a baby, whether or not they are on Maternity Leave.

Positive Impact	<input type="checkbox"/>	Negative Impact	<input type="checkbox"/>	No Impact	<input checked="" type="checkbox"/>
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Justification of impact identified:

This Guideline will be used to support staff who are asked to produce/ create surveys and would not have any impact.

Race / Ethnicity

Is it likely to affect people of a different race, nationality, colour, culture or ethnic origin including non-English / Welsh speakers, Gypsies/Travellers, asylum seekers and migrant workers?

Positive Impact	<input type="checkbox"/>	Negative Impact	<input type="checkbox"/>	No Impact	<input checked="" type="checkbox"/>
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Justification of impact identified:

There is the option of utilising translation services to support staff and also users in completing the questionnaire. The electronic systems utilised also have translations functions.

Religion or Belief

Is it likely to affect people who have a religion or belief? The term 'religion' includes a religious or philosophical belief.

Positive Impact	<input type="checkbox"/>	Negative Impact	<input type="checkbox"/>	No Impact	<input checked="" type="checkbox"/>
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Justification of impact identified:

This Guideline will be used to support staff who are asked to produce/ create surveys and would not have any religion related impact.

Sex

Is it likely to affect people who are mostly male or female. Where it applies to both equally does it affect one differently to the other?

Positive Impact	<input type="checkbox"/>	Negative Impact	<input type="checkbox"/>	No Impact	<input checked="" type="checkbox"/>
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Justification of impact identified:

This Guideline will be used to support staff who are asked to produce/ create surveys and would not have any sex related impact.

Sexual Orientation

Whether a person's sexual attraction is towards their own sex, the opposite sex or either.

Positive Impact	<input type="checkbox"/>	Negative Impact	<input type="checkbox"/>	No Impact	<input checked="" type="checkbox"/>
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Justification of impact identified:

This Guideline will be used to support staff who are asked to produce/ create surveys and would not have any impact due to a person's sexual orientation.

Armed Forces Community

Consider whether this impacts on members of the Armed Forces and their families, whose health needs may be impacted long after they have left the Armed Forces and returned to civilian life. Also consider their unique experiences when accessing and using day-to-day public and private services compared to the general population. It could be through 'unfamiliarity with civilian life, or frequent moves around the country and the subsequent difficulties in maintaining support networks, for example, members of the Armed Forces can find accessing such goods and services challenging.'

For a comprehensive guide to the Armed Forces Covenant Duty and supporting resource please see:

[Armed-Forces-Covenant-duty-statutory-guidance](#)

Positive Impact		Negative Impact		No Impact	√
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Justification of impact identified:

This Guideline will be used to support staff who are asked to produce/ create surveys and would not have any impact due to a person's affiliation to the Armed Forces community.

Socio Economic Duty

Consider those on low income, economically inactive, unemployed or unable to work due to ill-health. Also consider people living in areas known to exhibit poor economic and/or health indicators and individuals who are unable to access services and facilities. Food / fuel poverty and personal or household debt should also be considered.

For a comprehensive guide to the Socio-Economic Duty in Wales and supporting resources please see:

[more-equal-wales-socio-economic-duty](#)

Positive Impact		Negative Impact		No Impact	√
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Justification of impact identified:

A reminder for staff is that people may not have a smart phone due to low income. Paper copies are available.

Welsh Language

Is it likely to impact on opportunities for people to use the Welsh language? The Welsh language should be treated no less favourably than the English language.

Positive Impact		Negative Impact		No Impact	√
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Justification of impact identified:

All surveys are produced bilingually Welsh/English.
Requests for surveys in paper format is supported. Surveys in other languages – there is an option in the CIVICA patient experience system.

If a negative impact has been identified, you are not required to complete this form as a full EqlA must be undertaken. A full EqlA template and guidance can be found on the following link: [Equality Impact Assessments \(EqlAs\) \(sharepoint.com\)](#)

Screening Completed by:	Name	Emma Haycocks
	Title	PALS Manager
	Contact details	emma.j.haycocks@wales.nhs.uk
	Date	August 2025
Screening Authorised by:	Name	Louise O'Connor
	Title	Assistant Director
	Contact details	louise.oconnor@wales.nhs.uk

(Directorate level owner of the procedures/ proposals/ projects/ policy)	Date	27 November 2025
Guidance has been provided by Diversity & Inclusion Team:	Name	Alan Winter
	Title	Senior Diversity & Inclusion Officer
	Contact details	Alan.winter@wales.nhs.uk
	Date	28/11/2025
Diversity and Inclusion Team additional Comments:		

Please note: The D&I team will save a copy of the completed form for reference. If any changes are made after the date of review, it is the directorate's responsibility to update the EqIA and inform the D&I team.