

Coding Guidance

Open response questions

- 1.1 Approved Contractors are responsible for entry and quality assurance of the data from the questionnaires. An SPSS template of the dataset required will be supplied by the Co-ordination Centre and this should be populated with coded responses to each question as per the codes noted in the questionnaire.
- 1.2 In addition to predefined codes, some questions will include open response fields (also referred to as free text) for respondents to add additional comments or answers which should also be captured.
- 1.3 Questions in which open responses can be provided are listed below:
 - Q27. If there is anything else you would like to tell us about your experience in hospital please write your comments below – *(a) Admission to hospital, (b) The hospital and ward, (c) Care and treatment, (d) Staff, (e) Leaving hospital, (f) Arrangements for discharge home (g) Other,*
 - Q29. Do you have any of the following – *Other, please write in;*
 - Q31. What religion, religious denomination or body do you belong to – *Another religion, please write in;*
 - Q33. Do you need an interpreter or other help to communicate – *Yes - what type of help do you need?;* and
 - Q34. What is your ethnic group – *Other, please write in.*

Data outputs required

- 1.4 Approved Contractors should supply the following data outputs to the Coordination Centre:
 - An SPSS file of coded responses for all questions in the questionnaire including all codes for open responses; and
 - A Microsoft Excel workbook spreadsheet containing open response comments, code and unique patient ID number. Each open response question or item should have a separate worksheet to capture comments as illustrated in [Figure 1](#) (i.e. a separate worksheet for Q27a, another one for Q27b and so forth).

Figure 1: Setting up Excel spreadsheet to provide UID number, open response comments and assigned code

Unique patient ID number	Open verbatim response	Code
G107H-121	I was made very comfortable.	1
G107H-532	Greeted like a friend and was dealt with immediately.	1
G107H-324	On admission to ward at 10.00am I had to wait until after 4pm before given my bed.	2
G107H-768	A&E was excellent, this was my first experience in an A&E admission.	1
G107H-565	Good.	1
G107H-123	Good.	1
G107H-764	Speddy admittance.	1
G107H-097	This was straight forward.	1
G107H-125	Did not have my name on the list for admission - no bed. Had travelled 60 miles. Spent first night in day ward by myself - only place they could get a bed. Went from there to theatre.	2
G107H-754	I was very impressed with communications between my doctors and surgery and admittance to hospital.	1
G107H-434	Good.	1
G107H-328	Straight forward.	1
G107H-373	Broke femur on Friday and was not operated on until Sunday. Long time to wait.	2
G107H-375	Very straight forward. No problems.	1
G107H-290	Went smoothly - no problems.	1
G107H-565	Very good.	1
G107H-684	Ward changed - as closed. Felt worried about reason - not told.	2
G107H-663	The admission times were totally haphazard. My time was 10am but I did not get into the ward until 3pm, five hours sitting around needlessly.	2
G107H-855	No complaints regarding hospital treatment.	1
G107H-798	Acceptable (was in quite an amount of pain to care).	1
G107H-474	Very quick and efficient in A&E.	1
G107H-797	Because of where I live being outside the ambulance service area of the hospital I needed to attend with my emergency situation I had to use a taxi at considerable cost and discomfort.	2
G107H-287	Very good, did not wait long.	1
G107H-487	A&E Department were a credit to the NHS.	1
G107H-134	Excellent.	1
G107H-809	Hours of sitting around to be admitted.	2
G107H-786	I was satisfied with my admission.	1
G107H-129	I had to wait longer in the emergency waiting area than I anticipated.	2
G107H-094	This was straight forward.	1
G107H-142	Could have been arranged before I became so ill. Several doctors examined me over several days.	2
G107H-121	A & E Department was very good and helpful.	1
G107H-121	Ok.	1
G107H-121	Admitted by ambulance, crew were great. A & E staff I felt were not informative.	1

Protocol for cleaning free text comments

- 1.5 Free text comments should be captured in an anonymised format as outlined in paragraphs 13.23 and 13.24 in the Better Together Inpatient Guidance Manual.

Protocol for coding

Guidance for coding Q27

- 1.6 Free text responses to Q27a, Q27b, Q27c, Q27d, Q27e, Q27f and Q27g should be coded using the coding frame attached in Appendix A and should be captured and coded in a separate worksheet (see Figure 1).
- 1.7 Where a response has been crossed out another response provided, or not, the guidance outlined in paragraph 3.10 of the Better Together Inpatient Guidance Manual should be followed.

Guidance for coding Q29, Q31, Q33 and Q34

- 1.8 Where possible, Approved Contractors should strive to back code any 'other' or 'please write in' codes using pre-existing codes when coding free text comments.
- 1.9 For Q31 and Q34 specifically, if multiple responses are provided in the open response boxes for either or both of these questions, each response should be added as a verbatim as well as being individually coding using the ISD data dictionary. These multiple responses should be sent back to the Coordination Centre without applying the rules set out in: <http://www.scotland.gov.uk/Resource/Doc/253579/0075142.pdf>
- 1.10 If free text comments cannot be attributed to pre-existing codes the following guidance should be used:

- Q29 – The coding frame attached in Appendix B should be used for additional codes;
- Q31 – Additional codes should conform with ISD data dictionary conventions for religious groups. A full list of subsidiary codes can be found at: <http://www.datadictionaryadmin.scot.nhs.uk/isddd/files/Religion%20Subsidiary%20Codes.doc>

- Q33 – The coding frame attached in Appendix C should be used for additional codes;
- Q34 – Additional codes should conform with ISD data dictionary conventions for ethnic groups. A full list of subsidiary codes can be found at:
<http://www.datadictionaryadmin.scot.nhs.uk/isddd/files/Ethnic%20Group%20Specific%20Codes.doc>

Inclusion of new codes

- 1.11 If a free text comment has been provided which cannot be attributed to a pre-existing code, coding frame code or data dictionary code then Approved Contractors should code responses into an 'other' code. This applies to Q29, Q31, Q33 and Q34 only. The verbatim responses of 'other' codes should then be sent to the Coordination Centre once there are over 30 separate thematic codes in this category.
- 1.12 The Coordination Centre will review and provide new codes as appropriate. The Coordination Centre will also then circulate updated coding guidance to all Approved Contractors.

Appendix A – Coding Frame for Q27

Question	Code Number	Code Label	Example
Q27a – Admission to hospital	1	Positive comments about admission to hospital	<i>"I was made very comfortable."</i>
	2	Negative comments about admission to hospital	<i>"During my admission to the ward I was given no information. I was very anxious and worried."</i>
Q27b – The hospital and ward	1	Positive comments about the hospital and ward	<i>"The hospital was clean and bright."</i>
	2	Negative comments about the hospital and ward	<i>"The wards were unclean and not set out to allow staff to monitor the patients."</i>
Q27c – Care and treatment	1	Positive comments about care and treatment	<i>"My care and treatment could not have been better."</i>
	2	Negative comments about care and treatment	<i>"Distinctly average. On a few occasions my bed wasn't even made."</i>
Q27d – Staff	1	Positive comments about staff	<i>"I cannot praise too highly the dedication of the staff."</i>
	2	Negative comments about staff	<i>"Some nurses were off hand with my condition."</i>
Q27e – Leaving hospital	1	Positive comments about leaving hospital	<i>"Very good. All very helpful."</i>
	2	Negative comments about leaving hospital	<i>"It wasn't well planned."</i>
Q27f – Arrangements for discharge home	1	Positive comments about arrangements for discharge home	<i>"It was very good."</i>
	2	Negative comments about arrangements for discharge home	<i>"Poor – I had to wait for a wheelchair."</i>
Q27g – Other	1	Positive comments about other aspects of hospital stay	<i>"Food was good."</i>
	2	Negative comments about other aspects of hospital stay	<i>"Ordering meals was difficult."</i>

Appendix B – Coding Frame for Q29

Code Number	Code Label
8	Lung condition
9	Stroke
10	Arthritis
11	Heart conditions
12	Gynaecology
13	Ear, Nose and Throat (ENT)
14	Kidney / renal problems
15	Blood conditions
16	Stress related
17	Neurology
18	Bone related
19	Senility
20	Glands
21	Stomach / intestinal condition
22	Skin condition
23	Problem not diagnosed yet
24	Addictions
25	Multiple sclerosis

Appendix C – Coding Frame for Q33

Code Number	Code Label
1	Help with senility
2	Help with hearing
3	Help with illness
4	Family member to be present
5	Help understand doctors and nurses as first language is not English
6	Require a support worker to be present
7	Understanding of information provided and required