## INCONTINENCE AIDS

Firstly, some questions about you.....
Gender?
Male

Female


Relationship to the patient? $\qquad$
What age group do you fit into?

46-55
years


56-65 years


66-75 yrs years


More than 75
years

Your postcode or name of suburb $\square$

## Management of incontinence

| Next some questions about the <br> management of patient's incontinence <br> using the aids....... | Strongly <br> agree | Agree | Neither <br> agree nor <br> disagree | Disagree | Strongly <br> disagree | Not <br> applicable |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| The FI aids seem comfortable to wear |  |  |  |  |  |  |
| The FI aids are easy to insert |  |  |  |  |  |  |
| The FI aids are easy to remove |  |  |  |  |  |  |

Any other comments about the use of the aids?

## Staff care

| These questions are about the staff <br> who helped you manage your aids.... | Strongly <br> agree | Agree | Neither <br> agree nor <br> disagree | Disagree | Strongly <br> disagree | Not <br> applicable |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| The staff took time to explain the use <br> of the aid |  |  |  |  |  |  |
| The staff answered my questions <br> about the use of the aid |  |  |  |  |  |  |
| The staff were patient with me |  |  |  |  |  |  |
| Staff helped me when I needed it |  |  |  |  |  |  |
| Any other comments about the staff? |  |  |  |  |  |  |

## Hospital care

| These questions are about the hospital <br> care your loved one received here <br> whilst learning to use the aids..... | Strongly <br> agree | Agree | Neither <br> agree nor <br> disagree | Disagree | Strongly <br> disagree | Not <br> applicable |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| My family member has been made <br> comfortable when learning to use the <br> aids |  |  |  |  |  |  |
| Staff attended to our needs in a timely <br> manner |  |  |  |  |  |  |
| The hospital routine helped me to <br> learn to manage the aids with the <br> patient |  |  |  |  |  |  |
| As a carer, I was given time to learn <br> about using the aids |  |  |  |  |  |  |
| Any other comments about your hospital stay in relation to the incontinence management? |  |  |  |  |  |  |

Any other comments about using the incontinence aids?

## Thank you for taking time to complete this satisfaction survey. Your input is very valuable to us.

