



Supplement 1

Questionnaire asked by the local site researchers

Safer@home

a. How many times a week do you (the patient) see friends?	<input type="checkbox"/> 0 <input type="checkbox"/> 1-2 <input type="checkbox"/> 3-4 <input type="checkbox"/> More than 4
b. Did you (the patient) feel better at discharge (IA)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know <input type="checkbox"/> Patient didn't answer the question
c. Did you (the patient) feel ready at discharge (IA)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know <input type="checkbox"/> Patient didn't answer the question
d. Did you (the patient) suggest to doctors to stay longer in hospital on index admission?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know <input type="checkbox"/> Patient didn't answer the question
e. Were you (the patient) given a written summary of your admission and/or did your doctor sent a discharge summary?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know <input type="checkbox"/> Patient didn't answer the question
f. Do you (the patient) feel current readmission was preventable	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know <input type="checkbox"/> Patient didn't answer the question
Readmission was: <ul style="list-style-type: none"> <li><input type="checkbox"/> Disease-related: Related to natural progress disease, beyond the control/influence patient, its carers or healthcare workers (Doctor's hospital, GP, nurse) – for example: metastasis cancer</li> <li><input type="checkbox"/> Patient-related: Related to control/influence patient, beyond the control/influence carers, healthcare workers (Doctors hospital, GPs, nurses) – for example: a patient who refused extra home care after the index admission, or non-compliance in taking prescribed medication</li> <li><input type="checkbox"/> Human(healthcare worker)-related: Related to the control/influence professionals (Doctors hospital, GPs, nurses) - for example: Failure to monitor the patient's progress or condition, poor medication handover after index admission, a nursing home that did not monitor fluid restriction</li> <li><input type="checkbox"/> Organisational: Readmission related to organisational problems - for example: failures relating to the quality or availability of appropriate protocols, no beds available, transfer from other hospital</li> <li><input type="checkbox"/> Technical: Readmission related to technical defects of materials or equipment – for example: IV-drip home infusion antibiotics broken, correct designed medical device inappropriately constructed or placed, failures to poor design of equipment</li> <li><input type="checkbox"/> Other: Not classifiable (please explain why)</li> </ul>	
MORE than one answer possible (tick the box). Comment (please write this down- it is the clue to improvement!)	



<p>g. Does the carer feel current readmission was expected</p> <p>preventable</p>	<table border="1"> <tr> <td data-bbox="836 297 1513 465"> <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> Don't know  <input type="checkbox"/> Carer didn't answer the question         </td> </tr> <tr> <td data-bbox="836 465 1513 600"> <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> Don't know  <input type="checkbox"/> Carer didn't answer the question         </td> </tr> </table>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know <input type="checkbox"/> Carer didn't answer the question	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know <input type="checkbox"/> Carer didn't answer the question
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<p>Comment (please write this down)</p>			
<p>h. Does the physician<sup>a</sup> feel current RA was expected</p> <p>preventable</p>	<table border="1"> <tr> <td data-bbox="836 1234 1513 1402"> <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> Don't know  <input type="checkbox"/> Physician didn't answer the question         </td> </tr> <tr> <td data-bbox="836 1402 1513 1541"> <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> Don't know  <input type="checkbox"/> Physician didn't answer the question         </td> </tr> </table>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know <input type="checkbox"/> Physician didn't answer the question	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know <input type="checkbox"/> Physician didn't answer the question
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<p>MORE than one answer possible (tick the box).</p>	
<p>Comment (please write this down)</p>	
<p>i. Does the nurse<sup>b</sup> feel current RA was expected</p>	<p><input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> Don't know  <input type="checkbox"/> Nurse didn't answer the question</p>
<p>preventable</p>	<p><input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> Don't know  <input type="checkbox"/> Nurse didn't answer the question</p>
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<p>MORE than one answer possible (tick the box).</p>	
<p>Comment (please write this down)</p>	
<p>j. Does the researcher feel current RA expected</p>	<p><input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> Don't know  <input type="checkbox"/> Researcher didn't answer the question</p>
<p>preventable</p>	<p><input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> Don't know  <input type="checkbox"/> Researcher didn't answer the question</p>
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