The following topics will be addressed in semistructured interviews with managerial staff involved in organization of patient experience data collection and in the implementation of quality improvement initiatives in response to this data. This guide is a reference for the researcher. Upon request, a simplified version of the guide will be made available to participants.

Topic areas and their order are indicative. Questions will be refined in the course of the study and selected on the basis of the interviewee's role in the trust.

1. *Questions and consent*
o Are you happy with the information you received about the study?
o Do you have any questions?
o [consent procedure and permission to audio-record]

2. *Past and current involvement in patient experience data*
o Can you tell me a little bit about your role in the organisation? (obtain details of ward and time at trust and on specific ward)
o How and when did you start being involved in collecting information on patient experience?
o How has your involvement changed over time and what does your role entail now?

3. *Data journeys*
o How (if at all) is patient experience data collected on your ward at the moment?
   - What kind of data are collected?
   - How often are data collected? At what point of the patient journey?
   - By whom?
o Which tools are used to gather patient experience data?
o Where are data sent after collection? Who is responsible for processing or analysing the data?
o Does your trust use any external organization/contractors to help collect and analyse patient experience data? If so, how is this collaboration organized and managed?
o Once the data have been analysed/processed, how are results communicated and discussed and with whom (i.e. staff/patients/external organizations)?
o What actions are taken as a result of the information provided by these data? Who is in charge of making decisions about it?
o Is the impact of these actions publicly reported in your ward/by your trust? If so how?
o How is the collection/analysis of patient experience data funded? How is the implementation of improvements related to the results of patient experience data funded?

4. *Discussion and communication of patient experience data*
o Once the data have been analysed/processed, how are results communicated to patients and the general public?
o How are patient experience data results communicated to the staff in your trust?
   - Are data actively discussed with staff in your trust and how is it done?
o Does your trust share patient experience data results with any local/national groups or organizations? Is there any official form of collaboration with external organizations?

5. *Co-ordination across wards*
o Does your ward/trust have a specific written plan/strategy for the collection and use of patient experience data?
o Is there any coordinating strategy for data collection, analysis, discussion and use across different wards in the trust?
o Do you know whether there are wards where things are done very differently? For example with regard to using the data, or communicating what the data show, or acting upon the data?
o Which staff groups are most involved with patient experience data? Are there staff groups that have nothing to do with the data?
o How does the collection and use of patient experience data fit with other initiatives going on in the hospital?

6. *Your views on patient experience data*
o What are your views on patient experience data? Are they useful to produce positive change in an NHS organization? Can you give me an example?
o What do you think the impact of patient experience data you collect on this ward has been *up to now*?
o In your experience, what factors help translate patient experience data into organisational change? And what factors constitute a barrier to this?
o Have patient experience data had any direct impact on you/*your* work?
o How could the collection of patient experience data on your ward be improved, in your opinion? And how could the use of data be improved/made more effective? (if necessary, explore possible options: greater publicity, stronger support from the top, use of technology, etc)?
o Do you feel there is enough board/senior level support and/or sufficient resources for the collection and use of patient experience data?