

# An Evaluation of the Urgent Care Centre (UCC) at New Cross Hospital

Report on the Research into Patient Experience

May 2017



# **Contents**

1. Introduction	1
2. Executive Summary	, 1
3. Methodology	2
3.1 Research Methods	2
3.2 Characteristics of the Participants	2
4. Findings	. 3
4.1 Context of the Patients' Visit	, 3
4.1.1 Referrals from Another Service	3
4.1.2 How the Patient Found Out About UCC	3
4.1.3 Circumstances for Seeking Help	4
4.1.4 Other Services Approached Before Attending the UCC	4
4.2 Arrival on Site	5
4.2.1 How Easy was it to Find the UCC?	5
4.2.2 What Would Make it Easier to Find the UCC?	5
4.3 Experience at the UCC Reception	5
4.4 Rating of the Surroundings in the UCC	6

4.5 Rating of the Facilities in the UCC	7
4.6 Experience of the Service at the UCC	.7
4.6.1 Length of Wait	7
4.6.2 Clinician Introducing Themselves	8
4.6.3 During the Consultation	8
4.6.4 Information about Making a Comment, Compliment or Complaint	9
4.6.5 Overall Satisfaction with the Service	10
4.7 Patients' Commentary on Their Experience at UCC	. 10
4.7.1 Dignity and Respect	10
4.7.2 Tell Us More	10
4.8 Fieldwork Observations	. 11
5. Conclusions	. 12
6. Recommendations	.13
Appendix 1 - Copy of the Questionnaire	
Appendix 2 - Equalities and Diversity Monitoring	

#### 1. Introduction

Due to the steady rise in demand for walk in centres and Accident and Emergency services in Wolverhampton, the Clinical Commissioning Group (CCG) developed a new service specification for an Urgent Care Centre which came into force on 1 April 2016. This new plan resulted in a purpose built facility at New Cross Hospital site and involved the relocation of services from Showell Park, one of the two walk in centres in Wolverhampton, to the new facility.

Healthwatch Wolverhampton approached the CCG with a research proposal to review the patient experience of users of the UCC. The research method chosen was a face-to-face survey to focus on the quality of service delivery and meeting the needs of patients. The results would provide evidence for one of the Key Performance Indicators in the UCC service specification, requiring the provider to conduct patient surveys, and was co-designed with this in mind. More detail is provided in the Methodology section.

## 2. Executive Summary

The highlights of the research findings are provided below. For some questions, a low number of people provided a response and these are indicated with an \*. Page references are provided in brackets for more detail on each topic.

- 63% were referred to the UCC by another service and over half of these were from the NHS 111 service. (Page 3)
- 78% provided GP-related reasons for attending the UCC, including those who couldn't get an appointment or whose GPs were closed. (Page 4)
- 85% said that it was easy or very easy to find the UCC. Signposting was the most common recommendation for improvement. (Page 5)
- 88-93% rated the friendliness, helpfulness and understanding of staff as good or very good. However, 34% rated waiting time as poor or very poor. (Pages 5-6)
- 90-93% rated lighting, cleanliness and availability of seating as good or very good. (Page 6)
- 73% were waiting two hours or less to be seen, although less than one-third answered this question.\* (Pages 7-8)
- 56% said that the clinician gave their name and 41% explained their job role.\* (Page 8)
- 83-95% agreed or strongly agreed that, during their consultation, they had time
  to explain their problem, had a clear explanation of their diagnosis and were told
  what would happen next. However, 68-71% disagreed or strongly disagreed that
  they were given printed information about their diagnosis and treatment.\* (Pages
  8-9)
- 79% said that information was not available or they were unsure about how they could make a comment, compliment or complaint.\* (Page 9)
- 81% were satisfied or very satisfied overall with the service at UCC.\* (Page 10)

## 3. Methodology

#### 3.1 Research Methods

A face-to-face survey was conducted in the waiting area of the UCC over the course of one week in February at different times of the day. The intention was to capture as many patients as possible whilst they were having the experience of the Centre. Some of the questions were designed to capture the respondents' views *after* their consultation. However, many did not want to wait around to complete these questions, having already been at the UCC for a long time.

A questionnaire was used for the survey, which had been co-designed by Healthwatch Wolverhampton, the CCG and Vocare, who are the providers of the service. The questionnaire was piloted with a small group of patients at UCC and was refined using the feedback from the pilot. A copy of the questionnaire is included in Appendix 1.

During the survey, the fieldwork team were recording any observations that were beyond the scope of the questionnaire and these are included in the findings of this report along with any emergent recommendations.

## 3.2 Characteristics of the Participants

187 people responded to the survey. The numbers of responses to each question vary, as not all participants answered all questions. A full breakdown of participants by their protected characteristics (such as age and race) can be found in Appendix 2, however the most frequent responses were as follows:

Gender identity - 72% female

Age - 62% aged 18-39

Race - 70% white British

Religion/belief - 48% Christianity, 41% none

Disability - 84% no

Relationship status - 40% married, 28% single Sexual orientation - 97% heterosexual/straight

Pregnant - 92% no Birth last 26 weeks - 95% no

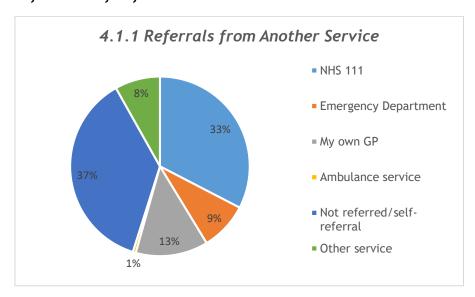
More than half of the patients were from the WV10 (34%) or WV11 (18%) postcodes. One-third of respondents (41) were in attendance as a parent or guardian. Nine of the patients (7%) were not registered with a GP.

## 4. Findings

#### 4.1 Context of the Patients' Visit

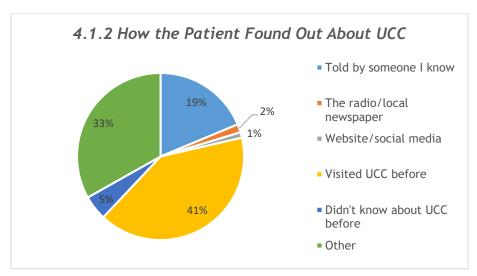
## 4.1.1 Referrals from Another Service

63% (115 patients) were referred to the UCC by another service. Of these, over half were from the NHS 111 service. The second largest group of referrals came from GPs (13% or 24 patients). Note: Those who indicated that they had been referred by another service, but then stated that this was a self-referral, have been included in the category 'not referred/self-referral'.



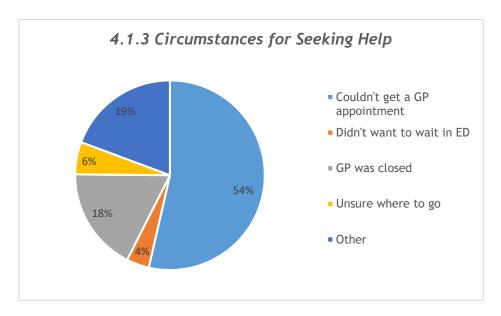
#### 4.1.2 How the Patient Found Out About UCC

The main reason for awareness of the UCC was a previous visit to the Centre (41% or 76 respondents). One-third of the patients recorded 'other' as their response and, for these, the main source of information was the NHS 111 service (19). Other high frequency responses were the patient's GP (13) and the hospital's Emergency Department (10).



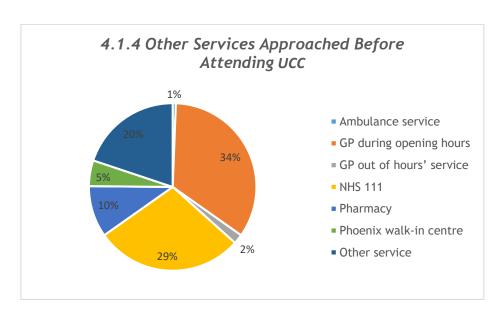
#### 4.1.3 Circumstances for Seeking Help

Over half of those who answered this question (97) said that they came to the UCC because they had contacted their GP and couldn't get an appointment, with a further 32 patients whose GPs were closed. The main reasons given by those who answered 'other' were GP-related (12). In total, 78% (141/181) of responses to this question were GP-related and mostly regarding access to appointments. Two of the respondents were not registered with a GP and one said that they hadn't contacted their GP, as they knew they wouldn't get an appointment. For some, the UCC was their first choice of destination for help (10) and for some others, they were unsure where else they could go (10).



## 4.1.4 Other Services Approached Before Attending the UCC

37% of respondents (including some who had indicated 'other') had sought help from their GP before attending the UCC. The service with the second highest frequency responses was NHS 111.

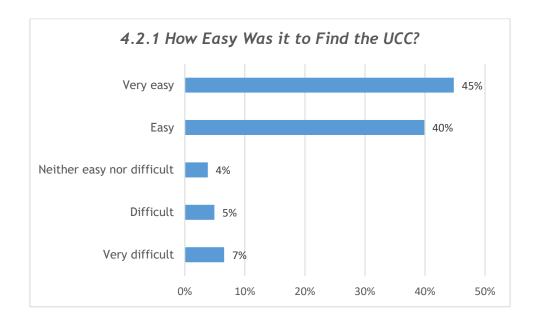


#### 4.2 Arrival on Site

#### 4.2.1 How Easy was it to Find the UCC?

85% of respondents said that it was easy or very easy to find the UCC. Of those who gave reasons for their response to this question, 35% (20) mentioned signposting as an issue, although the evaluation of this was split. 11/20 said that signposting was not good, whilst nine felt that it was.

Eight patients had to ask for directions. Two patients went to the old Accident and Emergency building not knowing that this had relocated on site. One respondent said that the Phoenix Centre had told them that UCC was in the Maternity building and another said that NHS 111 had called it the Primary Care Centre and this had caused confusion.

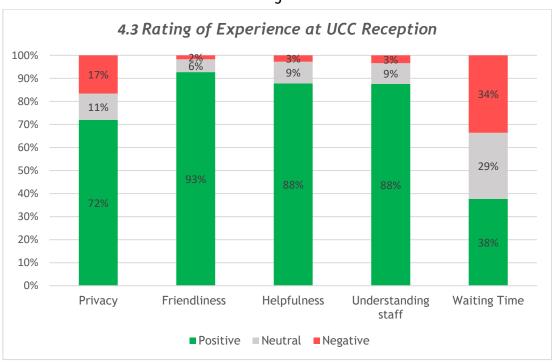


#### 4.2.2 What Would Make it Easier to Find the UCC?

39 patients provided free texts comments in response to this question. The most common recommendation by far (85%) was improved signage, including at other areas around the site. Increased size of signs and being able to differentiate between the Emergency Department and the UCC were suggested.

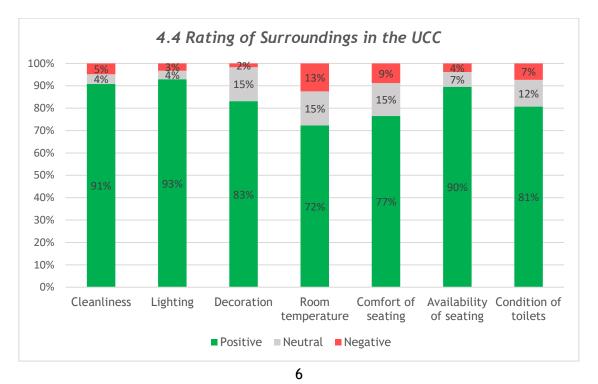
#### 4.3 Experience at the UCC Reception

The friendliness of staff at the UCC was rated as the most positive part of the patients' experience at the Reception, with 93% (165) rating this as good or very good. This was followed by the helpfulness (158) and understanding of staff (155), each with 88% of good or very good patient ratings. 72% of patients (126) rated the privacy of the UCC Reception as good or very good. 34% (41) of patients said that their waiting time was poor or very poor and a further 29% (35) said neither good nor poor.



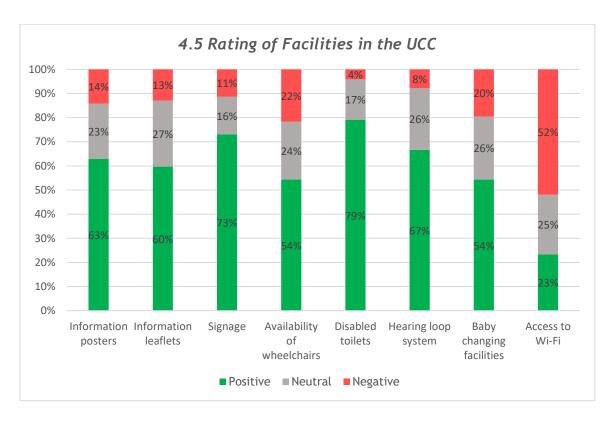
## 4.4 Rating of the Surroundings in the UCC

The most positive aspects of the surroundings in the UCC, rated as good or very good, were lighting (93% or 171 patients), cleanliness (91% or 168 patients) and availability of seating (90% or 163 patients). This was followed by decoration (83% or 148 patients) and condition of toilets (81% or 88 patients). Note: different numbers of patients answered each of the questions, hence the variability in numbers as represented by percentages. Survey respondents were less positive about the room temperature, with 72% (133) rating this as good or very good, and the comfort of seating (77% or 140 patients).



4.5 Rating of the Facilities in the UCC

The ratings for the facilities in the Centre were generally less positive than for earlier questions (experience of Reception and surroundings in the UCC). The areas which received the highest frequencies of good or very good ratings were disabled toilets (79% or 38 patients), signage (73% or 122 patients) and the hearing loop system (67% or 26 patients). Note: Numbers of responses to some questions were low, so percentage comparisons can be misleading. The poorest ratings were received for access to Wi-Fi, with 52% (40) of patients responding that this is poor or very poor.

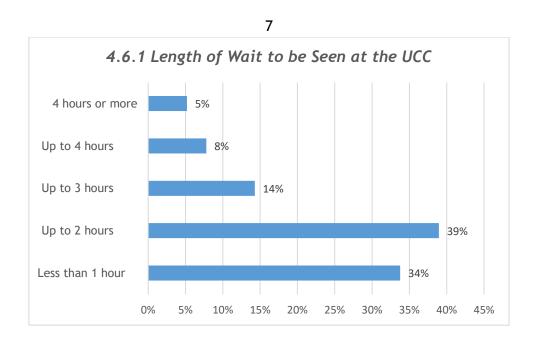


## 4.6 Experience of the Service at the UCC

This section of the survey was conducted after the patient had received their treatment and not all of the participants returned to complete these questions.

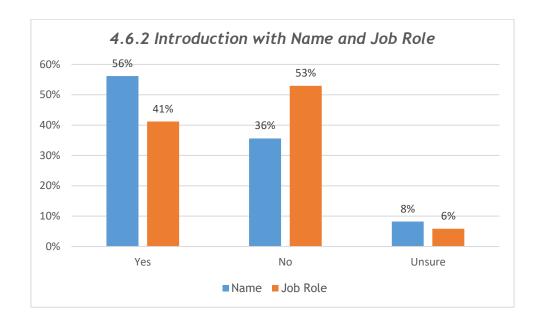
## 4.6.1 Length of Wait

Most patients surveyed were waiting two hours or less to be seen (73% or 56 patients).



## 4.6.2 Clinician Introducing Themselves

56% of patients (41) said that the person who treated them gave their name and 41% (28) said that they explained their job role/job title.



#### 4.6.3 During the Consultation

More than 80% of respondents agreed or strongly agreed that they were given enough time to explain their problem (95% or 69 patients), given a clear explanation of their diagnosis (88% or 59 patients) and were told what would happen next (83% or 58 patients).

56% (18 patients) agreed or strongly agreed that they were advised where they could pick up an urgent prescription and 38% (23 patients) were told that their GP would be informed of their treatment.

8

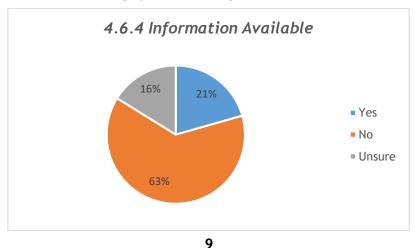
More than two-thirds of patients disagreed or strongly disagreed that they were given printed information about their diagnosis (68% or 39 patients) and their treatment (71% or 36 patients).

Respondents were offered an option of 'not applicable' to the questions about their consultation and these responses have been excluded from the analysis. However, there may be a difference in perception between clinician and patient as to whether provision of printed information on diagnosis and treatment, for example, is relevant.



## 4.6.4 Information about Making a Comment, Compliment or Complaint

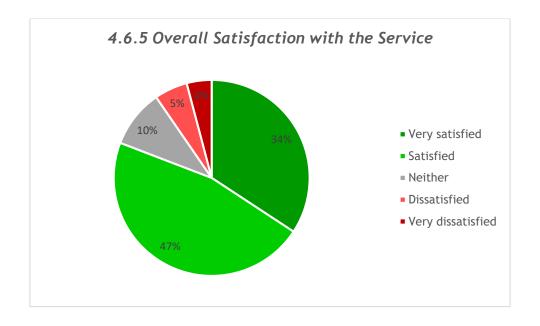
63% (43 patients) said that information was not available about how they could make a comment, compliment or complaint and a further 16% (11 patients) were unsure; a total of 79% of patients not answering 'yes' to this question.



#### 4.6.5 Overall Satisfaction with the Service

81% (59 patients) provided a positive response to this question, being satisfied or very satisfied with the service at UCC that day. 10% (7 patients) were neutral and 10% (7 patients) were dissatisfied or very dissatisfied. Note: Rounding of percentages accounts for the slight variation with the data on the chart below

More commentary is provided on the patient experience in Section 4.7 below.



## 4.7 Patients' Commentary on Their Experience at UCC

## 4.7.1 Dignity and Respect

Patients were asked to comment on whether they felt that they had been treated with dignity and respect. Of the 65 people who provided a comment, 86% (56) had something positive to say, using words such as excellent, with dignity and respect, with care, helpful and kind.

Nine negative comments were received (14%) and, of these, six were related to waiting time. The other three comments were:

#### 4.7.2 Tell Us More

In response to the question: "Would you like to tell us more about your experience today?" 43 comments were provided. Of the comments, one-third were complimentary, particularly about the service they had received and the attitude of the staff. Four

10

patients were happy that they had been seen quickly and two of these had made an appointment. Others described the staff using words such as friendly, informative, very nice, helpful, understanding and courteous. One person felt that the UCC offered "better service than at Bushbury - very relaxed".

The most common theme of the areas for improvement (30% of the comments) was the disappointment with the long wait to be seen. This included two patients who had booked an appointment, but were still waiting longer than expected; one of these patients reported a wait of six hours. Related to the long wait were comments about

<sup>&</sup>quot;Absolutely disgraceful. Neglected"

<sup>&</sup>quot;...very degrading and put me down as I am not breastfeeding my baby"

<sup>&</sup>quot;...not saying what they was going to do"

there being nothing to occupy the time, such as TV (switched off at the time) or "something to read", particularly for children as there were no toys to play with.

Some of the comments received related to the organisation of patients. One person felt that there "should be separate GPs for appointments and for walk-ins" and another suggested better "patient liaison and customer service". Two people referred to better information. One person had been previously unaware that "the service existed" and another suggested "information leaflets".

One patient was unhappy that the doctor had referred her back to her GP. Instead, she presented at A&E, where she was seen by a surgeon and admitted to hospital.

Other observations included the staffing levels of doctors, their long working hours and one person commented that the "doctor was not caring". Other suggestions included installing a clock on the wall and WiFi - "really could do with this".

#### 4.8 Fieldwork Observations

During the fieldwork, the team recorded their own observations. Many of their observations reflect the responses received by patients in the survey, including signage, improved information and facilities. The fieldwork team picked up on a sense of confusion about the triaging system, for example for those who had already waited in A&E and the priority given to children. They observed that there were other clinics taking place and people were waiting in the same area as other attendees of the UCC, which caused some confusion. Some patients could not hear when the clinician called out their name.

The team observed that the reception desk was very busy, with patients having to wait whilst the receptionists were on the telephones and there were some times when the desk was unattended. They felt concern for the safety of staff, who were easily accessible from the reception area should a patient become aggressive, and also for the privacy of patients at the desk.

11

#### 5. Conclusions

Most of the patients in the UCC during the survey week were referred by another service, with one-third of all patients being referred from the NHS 111 service. However, there was still some lack of awareness that an appointment with the UCC can be booked using this service. Some felt that more could be done to promote the UCC and NHS 111 through GPs, for example. One-third of patients came directly to the UCC without a referral from another organisation. The main reason given for this was the lack of access to GP

appointments. Of those who had been to their GP, some patients were not satisfied and came to the UCC for further help. In some cases, the GP had referred them on to the UCC. A small number of patients were not registered with a GP.

The main source of dissatisfaction was the length of waiting times. Whilst many acknowledge that this was due to the volume of activity at the UCC, there was a core of patients who felt that more could be done to: i) review the system for appointments and triage and ii) make the wait more bearable where this was unavoidable. There was a general sentiment that better communication and more information would improve the patient experience during their wait, especially to be given an indication of waiting times and reasons for this.

Signage was identified as an area for improvement, even amongst those who said that the UCC was easy to find. There were some positive comments about the signage, although some of these patients had visited the UCC before. The suggestions offered for improvements included the size and location of the signs, especially those on other parts of the site.

Most of the survey respondents were happy with the content of their consultation. They felt that they had been given enough time to explain their problem, had been given a clear explanation of their diagnosis and were told what would happen next. However, they were not so positive about clinicians' introducing themselves by name and job role. There was a strong negative view that patients had not been provided with printed information about their diagnosis and treatment. There may be a difference in perception between clinician and patient as to whether provision of printed information on diagnosis and treatment is relevant, but the choice should be with the patient where this resource is available.

A number of improvements to the provision of information resources and facilities in the waiting area were suggested by patients and the fieldwork team and these have been included in the recommendations.

12

## 6. Recommendations

Given the findings and conclusions of the research, it is recommended that:

• The pathways for urgent care are clearly identified and communicated to the general public, so that services can be accessed appropriately to meet the needs of the patient.

- More is done to encourage GP registration, including further research into the barriers to access for those who are not registered with a GP.
- Information on the triage system is improved, for example with posters and leaflets. This information could include:
  - How patients are prioritised, answering the following questions: To what extent is this based on clinical need? Are children given higher priority? Are NHS 111 appointments seen first?
  - Linkages between the Emergency Department and the UCC triage systems, so that patients understand whether they will have to wait twice.
- Consideration be given to the development of a patient liaison/customer service role within the UCC, so that patients have an improved understanding of how things work and what is happening to them.
- Organisation of the waiting room is reviewed, so that it is clear where patients attending clinics and NHS 111 bookings should report to and wait for their appointments.
- Signage be improved, as follows:
  - To differentiate between the Emergency Department (ED) and the UCC;
  - In the lift, indicating with floors are for the ED and UCC;
  - At the old A&E building, providing directions to the UCC;
  - At the entrances to the hospital site;
  - To make the lettering on signs bigger, to improve visibility and readability.
- Information about the complaints system is displayed more prominently, with consideration given to the introduction of posters, a patient notice board and a rack for leaflets.
- Visual displays be introduced for announcements, such as calling patients for their appointments. If the TV is used for this purpose (it was not in operation during the survey week), then consideration could be given to the purchase of a second set to improve visibility from different angles and as a backup in case the first set is out of order.
- Consideration be given to a system which indicates a patient's place in the queue, with an approximate waiting time.
- A consistent reminder is sent to clinicians about standards for consultations, which could include:
  - Introducing themselves by name and job title and briefly explaining their role;

13

- Providing information about where patients can collect an urgent prescription;
- Giving patients the choice to receive printed information about their diagnosis and treatment, if this is available.
- The experience of waiting at the UCC be improved by including the following:
  - Access to WiFi;
  - Installation of a clock;
  - Availability of a water dispenser or drinks machine;
  - Availability of toys and reading material.

• Assurances are provided that appropriate risk assessment has been/will be conducted into staff safety at the reception desk.

Author: Sam Hicks

Research and Evidence Officer Healthwatch Wolverhampton

0800 470 1944

# **APPENDIX 1 - COPY OF THE QUESTIONNAIRE**





## **Patient Experience of Wolverhampton Urgent Care Centre**

We are conducting a survey today to help us understand our patients' experiences of using the Urgent Care Centre. The information that you provide on this questionnaire will be collated and presented in a report, which will help to improve the services we provide at the Centre. By taking part today, you can help to ensure that our services meet your needs, so we really value your opinions. The survey is anonymous. If you prefer, you can complete this survey online at <a href="http://bit.ly/2kBoAp7">http://bit.ly/2kBoAp7</a>
Date (DD/MM/YYYY)
Time of arrival (HH:MM) at the Emergency Department downstairs (if applicable): Time of arrival (HH:MM) at the Urgent Care Centre upstairs:
SECTION 1: THE CONTEXT OF YOUR VISIT TO THE URGENT CARE CENTRE
<ol> <li>Which service referred you to the Urgent Care Centre today?</li> <li>NHS 111</li> <li>The Emergency Department at New Cross Hospital</li> <li>My own GP</li> <li>Ambulance service</li> <li>I was not referred by another service</li> <li>Other service, please specify</li> </ol>
<ul> <li>2. How did you find out about the Urgent Care Centre? (Please tick all that apply)</li> <li>I was told about it by someone I know</li> <li>I heard about it on the radio</li> <li>I read about it in a local newspaper</li> <li>I found out about it through the website</li> <li>I read about it on social media</li> <li>I had visited the Urgent Care Centre before</li> <li>I did not know about the Urgent Care Centre before</li> <li>Other, please specify</li> </ul> 3. What circumstances led you to seek help from the Urgent Care Centre today?
<ul> <li>3. What circumstances led you to seek help from the Urgent Care Centre today?</li> <li>I contacted my GP, but could not get an appointment</li> <li>I did not want to wait in the Emergency Department</li> <li>My condition started when my GP was closed</li> <li>I was unsure where else I could go</li> <li>Other, please specify</li> </ul>

4. Did you seek neip from any of the following services before attending the Urge
Centre today? (Please tick all that apply)
O Pharmacy
O Phoenix walk-in centre
O GP during opening hours
O GP out of hours' service
O NHS 111
O Ambulance service
O Other service, please specify
SECTION 2: ARRIVAL ON SITE AT THE HOSPITAL
5. How easy was it to find the Urgent Care Centre today?
O Very easy
O Easy
O Neither easy nor difficult
O Difficult
O Very difficult
Please tell us why
6. Is there anything which might make it easier to find the Urgent Care Centre?

## **SECTION 3: YOUR EXPERIENCE OF THE URGENT CARE CENTRE RECEPTION**

## 7. How would you rate your experience at the Urgent Care Centre reception?

	Very good	Good	Neither good nor poor	Poor	Very poor	Not applicable
Privacy	0	•	0	0	0	O
Friendliness of staff	0	•	O	0	0	0
Helpfulness of staff	0	•	O	0	0	0
Understanding staff	0	O	0	0	0	0
Waiting Time	0	0	O	O	O	0
Other	0	•	0	0	0	<b>O</b>

If other, please specify \_\_\_\_\_

## SECTION 4: YOUR EXPERIENCE OF OTHER AREAS WITHIN THE URGENT CARE CENTRE

## 8. How would you rate the surroundings in the Urgent Care Centre?

	Very good	Good	Neither good nor poor	Poor	Very poor	Not applicable
Cleanliness	0	O	0	0	<b>O</b>	O
Lighting	0	O	0	0	<b>O</b>	0
Decoration	0	•	0	0	0	0
Room temperature	0	O	•	0	0	0
Comfort of seating	0	0	O	O	0	0
Availability of seating	0	0	•	0	0	0
Condition of toilets	0	0	O	0	0	•
Other	0	O	O	•	O	<b>O</b>

If other, please specify \_\_\_\_\_

## 9. How would you rate the facilities in the Urgent Care Centre?

	Very good	Good	Neither good nor poor	Poor	Very poor	Not applicable
Information posters	0	0	•	0	0	•
Information leaflets	•	O	•	O	0	•
Signage	0	0	0	0	0	0
Availability of wheelchairs	•	•	0	•	0	0
Disabled toilets	•	•	•	•	•	•
Hearing loop system	0	•	0	•	0	0
Baby changing facilities	•	•	•	•	0	0
Access to Wi-Fi	O	0	0	0	0	•
Other	O	O	O	O	O	O
If other, please specify						

SECTION 5: YOUR EXPERIENCE OF THE SERVICE YOU RECEIVED AT THE URGENT CARE CENTRE. THIS SECTION IS TO BE COMPLETED AT THE END OF YOUR VISIT.

10. How long did you have to wait before you were to seen at the Urgent Care Centre?
O Less than 1 hour
O Up to 2 hours
O Up to 3 hours
O Up to 4 hours
O 4 hours or more. If more than 4 hours, how long were you waiting?
11. Did the person who treated you give you their name?
O Yes
O No
O Unsure
12. Did the person who treated you explain their job role/job title?
O Yes
O No
O Unsure
13. The Urgent Care Centre wants to ensure that all patients are treated with dignity and respect. How would you describe how you were treated today?

# 14. During your consultation, would you agree that you were...

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Not applicable
Given enough time to explain your problem?	•	•	0	•	•	•
Given a clear explanation of your diagnosis?	•	•	0	•	•	•
Told what would happen next?	•	•	0	•	•	0
Told that your GP would be informed of your treatment here today?	•	•	0	•	•	0
Given printed information about your diagnosis?	•	0	0	•	•	0
Given printed information about your treatment?	•	0	0	•	•	0
Advised where you could pick up an urgent prescription?	•	•	0	•	•	•

15.	Was there information available about how you could make a comment, compliment
or c	omplaint?

$\mathbf{O}$	Yes

O No

O Unsure

16. Are you attending the Urgent Care Centre as:
O A patient?
O A parent/guardian?
O Other? Please specify
17. Are you (the patient) registered with a GP?
O Yes
O No
O Unsure
If yes, what is the name of your GP?
18. Overall, how satisfied have you been with the service today?
O Very satisfied
O Satisfied
O Neither satisfied nor dissatisfied
O Dissatisfied
O Very dissatisfied
19. Would you like to tell us more about your experience today?
Thank you for taking time to complete our survey. That is the last question we would like to ask about your experiences at the Urgent Care Centre.
20. Are you happy to answer some questions about yourself on our Equalities Monitoring Form?
O Yes, turn to the next page
O No, thank you for completing our survey

## **SECTION 6: EQUALITIES MONITORING FORM**

Thank you for agreeing to complete this section. This will help us ensure that our services are not unfairly discriminating against some people. Your responses will be treated in the strictest confidence and you can leave blank any questions that you would prefer not to answer.

1. What is your gender identity?	
O Female	Female to Male Transgender
O Male	Male to Female Transgender
O Other	G
Please state	
2. What is your age?	
O Under 18	O 50 – 59
O 18 – 29	O 60 – 69
O 30 – 39	O 70 – 79
O 40 – 49	O 80+
3. What is your race?	
<u>White</u>	Mixed multi ethnic
O British	O White & Black Caribbean
O Irish	<ul><li>White &amp; Black African</li></ul>
O Polish	O White & Asian
O Lithuanian	O Arab
O Other	O Other
Please state	Please state
Asian or Asian British	Chinese or other ethnic groups
O Indian	O Chinese
O Pakistani	O Philippine
O Bangladeshi	O Vietnamese
O Nepali	O Thai
O Other	O Other
Please state	Please state
<u>Black</u>	Gypsy & Traveller
O Caribbean	O Irish
O African	O Romany
O British	O Other
O Other	Please state
Please state	
Any other ethnic or nationality backgr	ound not listed, please state:
4. What is your religion or belief?	
O None	O Islam
O Buddhism	O Sikhism
O Christianity	O Other

O	Judaism	Please state				
o o	What is your relationship status? Civil Partnership Divorced Married Live with Partner	o o	Separated Single Widowed Other ease state _			
O	What is your sexual orientation? Bisexual Gay		Heterosex Lesbian	ual/straight		
Are	Pregnancy and maternity (female only) you pregnant at this time? ve you given birth in the last 26 weeks?	0				
$\mathbf{O}$	<b>Do you consider yourself to have a dis</b> No Yes	abi	lity?			
	<ul> <li>If yes, which of these? (Please tick)</li> <li>Learning disability or difficulty</li> <li>Long term illness</li> <li>Mental health condition</li> </ul>	k al	O Phy O Ser O Oth	vsical impairment nsory impairment		
9.	What is your postcode?					

# **APPENDIX 2 - EQUALITIES AND DIVERSITY MONITORING**

# 1) Nine Protected Characteristics

# Gender identity

_					
Female	118	72%			
Male	44	27%			
Male to Female Transgender					1%
Blank	24				
TOTAL					
Total Without Blanks	163	100%			

## Age

<u> </u>					
Under 18	6	4%			
18-29				53	34%
30-39				43	28%
40-49				23	15%
50-59				15	10%
60-69	11	7%			
70-79	8	5%			
80+	3	2%			
Blank	25				
TOTAL	181				
Total Without Blanks	156	100%			

## Race

Asian Indian	11	7%
Asian Pakistani	2	1%
Black African	3	2%
Black Caribbean	5	3%
Mixed White & Asian	1	1%
Mixed White & Black African	1	1%
Mixed White & Black Caribbean	7	4%
White British	112	70%
White Irish	2	1%
White Lithuanian	2	1%
White Polish	8	5%
Other	6	4%
Blank 27	•	

blank	27	
TOTAL	187	
Total Without Blanks	160	100%

# Religion or belief

•					
Buddhism	1	1%			
Christianity	66	48%			
Islam				1	1%
None				56	41%
Sikhism	14	10%			
Other				15	11%
Blank	34		•		
TOTAL	187				
Total Without Blanks	138	100%			

# Relationship status

•					
Civil Partnership	2	1%			
Divorced				3	2%
Live with Partner				36	24%
Married				61	40%
Separated				3	2%
Single				43	28%
Widowed				5	3%
Other				3	2%
Blank	31				
TOTAL	187				
Total Without Blanks	153	100%			

## Sexual orientation

Gay					1%
Heterosexual/Straight					97%
Lesbian				3	2%
Blank	43				
TOTAL	187				
Total Without Blanks	144	100%			

# Pregnant

Yes					8%
No				121	92%
Blank	56				
TOTAL	187				
Total Without Blanks	131	100%			

## Given Birth in the Last 26 Weeks

Yes			6	5%
No			119	95%
Blank	62			
TOTAL	187			
Total Without Blanks	125	100%		

# Disability

Yes	23	16%
No	122	84%

# If yes, which disability?

Long term illness	9	45%
Learning disability or difficulty	1	5%
Mental health condition	5	25%
Other - Arthritis	1	5%
Physical impairment	4	20%

# 2) Other Participant Information

## Postcode

WV1	13	8%
WV2	5	3%
WV3	5	3%
WV4	9	6%
WV5	1	1%
WV6	12	8%
WV9	1	1%
WV10	52	34%
WV11	28	18%
WV12	3	2%
WV13	5	3%
WV14	10	6%
Non WV	10	6%

# Attending as:

•		
A parent/guardian?	41	34%
A patient?	75	61%
Other?	6	5%

What is your gender identity?		
Female	118	72%
Male	44	27%
Male to Female Transgender	1	1%
Blank	24	
TOTAL	187	
Total Without Blanks	163	100%

# Registered with a GP

Yes	112	93%
No	9	7%

Unsure	0	0%
Blank	66	