

What is this survey about?

Thank you for taking part in this survey.

The North Halifax Community Wellbeing Partnership (NHCWP) would like to know more about how people are using NHS health services in North Halifax, so they have asked Healthwatch Calderdale to interview a few patients who are registered with GP Practices in the area.

We will be asking:

- how you feel about your health in general
- which NHS services you use and how you access them
- if you have tried anything non-medical to improve your health and wellbeing, e.g. yoga classes, healthy diet advice
- whether you can think of anything else that is not already on offer that could help to improve your health and wellbeing.

If you have any questions about this survey please do not hesitate to give Healthwatch Calderdale a call on 01422 399433, or email info@healthwatchcalderdale.co.uk.

You can find more information about how we will maintain your confidentiality, and what Healthwatch is, on the Healthwatch Calderdale website, www.healthwatchcalderdale.co.uk

Please note that when we report on the findings of this engagement, the information you have provided will be anonymised, which means that you will not be individually identified.

PLEASE NOTE: If you are filling the survey in for someone else, please answer the questions from that patient's point of view.

Who is this survey about?

1. Who are you filling in this questionnaire about?

- Yourself
- Your child
- Your partner or spouse
- Another relative
- A friend

Tell us a bit about yourself...

2. Approximately how long have you lived in North Halifax?

3. Tell us about your household. Please tick all that apply:

- I live alone
- I live with my partner / husband / wife
- I live with my children
- I live with my mother / father / other relatives
- Other (please specify)

4. Tell us which best describes you. Please tick all that apply:

- I am retired
- I am employed, full time or part time
- I am in full/part time education
- I look after my children / grandchildren
- I am looking for work
- I am unable to work
- I do volunteer work
- I am a carer
- Other (please specify)

5. What do you like to do in your spare time? Please tick all that apply:

- I like to spend time with my family or friends
- I enjoy getting out and about
- I am involved with local groups and activities
- I like to stay at home
- Other (please specify)

Tell us a bit about your health...

6. In general, how would you rate your physical health?

- Excellent
- Very good
- Good
- Fair
- Poor
- Other (please specify)

7. In general, how would you rate your mental and emotional health?

- Excellent
- Very good
- Good
- Fair
- Poor
- Other (please specify)

8. Do you have any long-term disabilities, conditions or health concerns?

- No
- Yes, please give brief details:

9. Lots of different concerns can affect peoples health and wellbeing. Do any of the things in the list below have a positive or negative impact on your health and wellbeing?

	Very positive impact	Slight positive impact	No impact	Slight negative impact	Very negative impact
Your housing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Your access to transport	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Your employment situation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Your finances / debt	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Your family relationships	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Your social situation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The area you live in	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Of all the concerns above, can you tell us a bit more about the ones which have the biggest positive or negative impacts on your health and wellbeing?

Tell us about the NHS services you use...

10. Which GP Practice are you registered with?

11. Roughly how often do you attend your GP Practice?

- Weekly
- Every 2-3 weeks
- Monthly
- Every 2-4 months
- Every 4-6 months
- Every 6-12 months

Other (please specify)

12. When you visit your GP Practice who do you usually have an appointment with? Please tick all that apply.

- A doctor
- A practice nurse
- Other (please specify)

13. Please tell us a little about your experience of visiting your GP Practice.

14. Do you use any other NHS services, e.g. A&E, NHS 111?

- No
- Yes (please specify)

15. Of all the NHS services you use, which one do you prefer to use and why?

16. Of all the NHS services you use, which one do you like to use least and why?

Has anything been suggested, that might help you to manage or improve your health and wellbeing?

17. Has your doctor, nurse or other medical professional ever suggested that something non-medical, e.g. exercise classes or a support group, might benefit your health and wellbeing?

- No
- Not sure / don't remember
- Yes

Suggested activities that might help improve your health and wellbeing...

18. What sort of thing did the doctor, nurse or medical practitioner suggest you could try? Please tick all that apply.

- Support group, social activities, befriending, etc.
- Healthy eating, diet advice, cook and learn, etc.
- Exercise and activity, walking, cycling, gardening, etc.
- Creative activities, knit and natter, art groups, etc.
- Welfare advice, benefits, housing, money worries, etc.
- Self-care, supported self-management for long term conditions, etc.
- Talking therapies, mindfulness, yoga, etc.
- Other (please specify)

19. Did you try the suggested activity/activities?

- No
- Yes
- Other (please specify)

Things you didn't try, and why...

20. What were the suggested activities and why didn't you try them?

Things you did try, and what happened...

21. What were the suggested activities, and what happened when you tried them?

Have you tried anything yourself, off your own back, to improve your health and wellbeing?

22. Have you tried anything yourself, off your own back, to improve or manage your health and wellbeing better?

Yes

No

What did you try, and what happened?

23. What did you try, and what happened?

Is there a reason you didn't try anything off your own back?

24. Are there any specific reasons why you have not tried to improve your health and wellbeing yourself?

Local activities and groups that might help you manage or improve your own health and wellbeing

25. Are you aware of any groups, activities or support you could access in North Halifax that might be able to help you manage or improve your health and wellbeing?

No

I would be interested in receiving details about what is available, by email, post or phone

I am not interested in receiving details about what is available

Yes

Which ones are you aware of?

Can you think of anything else that might help?

26. Can you think of anything your GP Practice could do differently that could help you manage or improve your health and wellbeing?

No

Yes. Please add further information:

Any other comments...

27. Do you have any other comments you would like to add?

No

Yes. Please add further information:

28. Would you be happy for Healthwatch Calderdale to contact you again, either with information about local activities or support that might be useful for you, or to invite you to a follow up event?

No

Yes - how would you prefer to be contacted?

Thank you for completing this survey.

If you have any queries, or would like to speak to someone about it please contact Jo Budgen as below:

Jo Budgen, Healthwatch Calderdale, Elsie Whiteley Innovation Centre, Hopwood Lane, Halifax, HX1 5ER

Tel: 01422 399433

Email: jo.budgen@healthwatchcalderdale.co.uk

Any feedback that we use when we report back on the results of this survey will be anonymised, with identifying personal data removed to ensure your confidentiality.

Equality monitoring

The next questions will provide us with some basic information about who took part in the survey, so if you can, please take the time to give us this information.

It's really important to Healthwatch Calderdale that we ask as broad a range of people as possible for their views. To make sure that we do this, we ask people to give us some information about themselves, and we review this regularly to check we are not discriminating against any group of people by not asking for their views.

PLEASE NOTE: If you are filling this in on behalf of someone else, please provide details about that patient.

29. What is the first part of your postcode? e.g. HD1, WF10, BD4, LS13, HX6

If you would prefer not to say, please leave the box blank

30. What gender are you?

- Male Transgender
 Female Prefer not to say

31. How old are you? e.g. 42

If you would prefer not to say, please leave the box blank

32. Which country were you born in?

If you would prefer not to say, please leave the box blank

33. Do you belong to any religion or belief?

- | | |
|--|---|
| <input type="radio"/> Buddhism | <input type="radio"/> Judaism |
| <input type="radio"/> Christianity | <input type="radio"/> Sikhism |
| <input type="radio"/> Hinduism | <input type="radio"/> No religion |
| <input type="radio"/> Islam | <input type="radio"/> Prefer not to say |
| <input type="radio"/> Other (please specify) | |

34. What is your ethnicity?

- | | |
|--|--|
| <input type="radio"/> Arab | <input type="radio"/> Chinese |
| <input type="radio"/> Gypsy or Irish Traveller | <input type="radio"/> Any other Asian Background |
| <input type="radio"/> White British | <input type="radio"/> Black British |
| <input type="radio"/> Any other White background | <input type="radio"/> Caribbean |
| <input type="radio"/> Asian British | <input type="radio"/> African |
| <input type="radio"/> Indian | <input type="radio"/> Any other Black background |
| <input type="radio"/> Pakistani | <input type="radio"/> Any other Mixed/Multiple ethnic background |
| <input type="radio"/> Bangladeshi | |
| <input type="radio"/> Any other ethnic group | |

35. Do you consider yourself to be disabled?

- Yes No Prefer not to say

36. Types of impairment:

If you selected yes to the question above, please tick all that apply

- | | |
|--|---|
| <input type="checkbox"/> Physical or mobility impairment (such as using a wheelchair to get around and / or difficulty using your arms) | <input type="checkbox"/> Learning disability (such as Downs syndrome or dyslexia) or cognitive impairment (such as autism or head-injury) |
| <input type="checkbox"/> Sensory impairment (such as being blind / having a serious visual impairment or being deaf / having a serious hearing impairment) | <input type="checkbox"/> Long term condition (such as cancer, HIV, diabetes, chronic heart disease, or epilepsy) |
| <input type="checkbox"/> Mental health condition (such as depression or schizophrenia) | <input type="checkbox"/> Prefer not to say |

37. Are you a carer?

Do you look after, or give any help or support to a family member, friend or neighbour because of a long term physical disability, mental ill-health or problems related to age?

Yes No Prefer not to say

38. Are you pregnant?

Yes No Prefer not to say

39. Have you given birth in the last 6 months?

Yes No Prefer not to say

40. What is your sexual orientation?

Bisexual (both sexes) Lesbian (same sex)
 Gay (same sex) Other
 Heterosexual/straight (opposite sex) Prefer not to say

Again, thank you for taking the time to complete this survey today.

Healthwatch Calderdale will be pulling together all the feedback that people have shared with us, and will be passing the anonymised data to the North Halifax Community Wellbeing Partnership.

We then intend to invite you to a feedback event where you can share your ideas and feed into the ongoing work to improve access to services that might help to improve the health and wellbeing of people in North Halifax.

Please note that any views you have shared with us will remain confidential, and when we report on the findings of this engagement individuals details will be anonymised.

If you would like to know more about the results of this survey or if you want more information about what will happen to your feedback please contact us info@healthwatchcalderdale.co.uk