



# Patient Satisfaction Survey Overall Findings 2017/18

Prepared By



Report (V02)  
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# 1.0 Introduction

## Background

City Health Care Partnership (CHCP) CIC is a co-owned for better profit business providing a wide range of health care services to over half a million people across numerous geographical areas, including Hull, East Riding of Yorkshire and the North West.

Since 2009, CHCP CIC has measured the experiences of their service users through a patient satisfaction survey. This is an integral part of CHCP CIC's engagement activities and is conducted on an annual basis. CHCP CIC commissioned SMSR Ltd, an independent research company to undertake their annual patient satisfaction survey. This is CHCP CIC's ninth annual patient satisfaction survey and the eighth since becoming a co-owned social enterprise.

## Report Structure

Included in the report is a set of topline findings which provides quick reference to all of the questions asked throughout the survey. In addition all questions have been analysed by service area and demographic group and any significant differences in opinion across the demographic variables and user groups are commented on throughout the report.

By conducting the survey on an annual basis, changes in opinion and experience can be monitored and therefore comparisons with previous patient satisfaction surveys have been included where possible.

It should be noted that when the results are discussed within the report, often percentages will be rounded up or down to the nearest one per cent, therefore occasionally figures may add up to 101% or 99%.

## Acknowledgements

SMSR would like to thank the 2,240 service users who took part in this consultation as well as Martin Dougan, Phil Yates and Lucy Flower at CHCP CIC for their help in conducting this survey and their regular input and interest in the overall process.

## 2.0 Research Aims and Objectives

The main aim of the survey was to ensure patients and service users had the opportunity to give their views on their experiences of accessing CHCP CIC services and to ensure these views are used to improve patient care in the future. It was also important to monitor satisfaction and trends over time.

The key objectives of the consultation were as follows:

- Measure overall patient experience
- To ascertain level of contact via telephone
- Experience of contacting the service by telephone
- Experience of waiting times
- Experience and satisfaction with short notice appointments
- Measure how service users rate the health professionals
- Measure trust and confidence in the health professionals
- Measure satisfaction with information volume and provision
- Understand perceptions of information handling and storage
- Measure impact of care plans
- Assess referral processes where relevant (MECC)
- Determine how services could be improved

## 3.0 Methodology

Prior to the fieldwork commencing, SMSR and officers from CHCP CIC undertook a full review of the questionnaire. It was agreed that most questions were still relevant and therefore would remain consistent in order for comparisons to be made. Additional questions have been added this year so that CHCP CIC can provide relevant feedback to their commissioners.

The methodological approach for the consultation remained consistent with the three years previous, with all surveys being undertaken via interviewer-led completion. The needs of each service and their users was taken into consideration when deciding if the interviews would be undertaken in-situ or over the telephone; detailed information on the methodological approach for each service can be found in Section 4. For some services, mixed methodology was used to maximise response rates for hard to reach patients. A small number of surveys were self-completed due to the sensitive nature of the service.

The fieldwork was conducted between April 2017 and May 2018. All interviews were undertaken by trained and experienced SMSR staff.

## 4.0 Sample

In total 2,240 surveys were completed, with 535 being undertaken over the telephone and 1,705 undertaken face to face.

The demographic and service breakdown of responses was as follows:

Gender	Number	Percentage
Male	860	38.4%
Female	1380	61.6%

Age	Number	Percentage
Under 18	28	1.3%
18 to 24	212	9.5%
25 to 34	352	15.7%
35 to 44	320	14.3%
45 to 54	394	17.6%
55 to 64	339	15.1%
65 to 74	391	17.5%
75 to 84	150	6.7%
85 or over	43	1.9%
Prefer not to say	11	0.5%

Disability	Number	Percentage
Yes	802	35.8%
No	1385	61.8%
Prefer not to say	43	2.4%

Ethnicity	Number	Percentage
White or White British	2147	95.8%
Mixed	7	0.3%
Asian or Asian British	29	1.3%
Black or Black British	32	1.4%
Chinese	1	0.0%
Any other ethnic group	16	0.7%
Prefer not to say	8	0.4%

Religious	Number	Percentage
Yes	867	38.7%
No	1334	59.6%
Prefer not to say	39	1.7%

Religion	Number	Percentage
Christian	821	94.7%
Muslim	37	4.3%
Sikh	0	0.0%
Judaism/Jewish	2	0.2%
Hinduism	0	0.0%
Buddhism	3	0.3%
Other	4	0.5%

Sexual Orientation	Number	Percentage
Heterosexual / straight	2113	94.3
Gay or lesbian	17	0.8
Bisexual	20	0.9
Other	3	0.1
Prefer not to say	87	3.9

Employment	Number	Percentage
Employee in full time job	582	36.0%
Employee in part time job	296	13.2%
Self employed	85	3.8%
In full time or part time education/training	98	4.4%
Not working/unemployed	484	21.6%
Retired	666	29.7%
Doing something else	29	1.3%

Location	Number	Percentage
Hull	1318	58.8
East Riding	848	37.9
Knowsley	28	1.3
North Lincolnshire	16	0.7
St Helens	15	0.7
Wigan	15	0.7
Other	0	0.0
Prefer not to say	0	0.0



Service					
Service Area	Service	Locality	Method	Number	Percentage
0-19 Service	0-19 Service	Hull	F2F	93	4.2%
Carers' Information & Support Services	Carers (CISS)	Hull	Tel	6	0.3%
Chronic Community Pain Management	Pain Management (Hull)	Hull	F2F	29	1.3%
	Pain Management (ER)	East Riding	F2F	15	0.7%
City Health Dental	Specialist Dental (Hull)	Hull	F2F	10	0.4%
	General Dentistry (Hull)	Hull	F2F	49	2.2%
	Specialist Dental (ER)	East Riding	F2F	11	0.5%
	General Dentistry (ER)	East Riding	F2F	47	2.1%
Evolve	Evolve	Hull	F2F	3	0.1%
Integrated Paediatrics & Nursing Services	Paediatric Nursing	Hull	F2F	41	1.8%
	Paediatric Nursing (Sunshine House)	Hull	Tel	6	0.3%
	Paediatric Medical	Hull	F2F	15	0.7%
Integrated Sexual Health Services	Community Gynaecology (Hull)	Hull	F2F	4	0.2%
	Community Gynaecology (ER)	East Riding	F2F	4	0.2%
	Erectile Dysfunction (Hull)	Hull	Tel	4	0.2%
	Sexual Health (GU/FP-Hull)	Hull	F2F	100	4.5%
	Sexual Health (GU/FP-ER)	East Riding	F2F	50	2.2%
	Vasectomy (Hull)	Hull	Tel	4	0.2%
	EMA (Hull)	Hull	F2F	6	0.3%
	Specialist Menopause (Hull & ER)	Hull & East Riding	F2F	3	0.1%
Integrated Urgent Care	DVT	Hull	Tel	5	0.2

	Urgent Care (Hull)	Hull	F2F	152	6.8%
	Urgent Care (ER)	East Riding	F2F	100	4.5%
	Storey Street Walk In	Hull	F2F	60	2.7%
	MIU ER (Wolds View)	East Riding	F2F	51	2.3%
Let's Talk	Let's Talk	Hull	F2F	50	2.2%
Nursing and Conditions	Community Nursing - Home Visits	Hull	Tel	103	4.6%
	Community Nursing - Treatment Rooms	Hull	F2F	20	0.9%
	AntiCoag	Hull	F2F	53	2.4%
	Home Oxygen	Hull	Tel	10	0.4%
	TB (Hull)	Hull	F2F	15	0.7%
	Tissue Viability	Hull	F2F	4	0.2%
	Lymphoedema	Hull	F2F	5	0.2%
	Bladder & Bowel Health	Hull	Tel	10	0.4%
	NCTs - Community Nursing - home visit	East Riding	Tel	116	5.2%
	NCTs - Specialist Nursing	East Riding	Tel	15	0.7%
	NCTs - Community Nursing - treatment rooms	East Riding	F2F	20	0.9%
	Home Oxygen	East Riding	Tel	9	0.4%
	Bladder & Bowel Health	East Riding	Tel	12	0.5%
Primary Care & APMS	Calvert Centre	Hull	F2F	39	1.7%
	Kingston Medical Centre	Hull	F2F	66	2.9%
	Riverside Medical Centre	Hull	F2F	34	1.5%
	The Quays	Hull	F2F	30	1.3%
	Storey Street Medical Centre	Hull	F2F	27	1.2%

	Newington Medical Centre	Hull	F2F	32	1.4%
	East Park Practice	Hull	F2F	31	1.4%
	Wolds View GP	East Riding	F2F	32	1.4%
Integrated Urgent Care	Smoking Cessation Hull	Hull	Tel	15	0.7%
	Smoking Cessation Knowsley	Knowsley	F2F	16	0.7%
	Smoking Cessation St Helens	St Helens	F2F	15	0.7%
	Healthy Routes Wigan	Wigan	F2F	13	0.6%
	Community Link Workers Wigan	Wigan	F2F	2	0.1%
Rehabilitation and Therapies	Intermediate Care & Reablement	Hull	F2F	32	1.4%
	Pulmonary Rehab (Hull)	Hull	Tel	10	0.4%
	Cardiac Rehab (Hull)	Hull	Tel	16	0.7%
	Podiatry (Hull)	Hull	F2F	76	3.4%
	Dietetics (Hull)	Hull	F2F	30	1.3%
	Falls (Hull)	Hull	Tel	17	0.8%
	Stroke (Hull)	Hull	F2F	3	0.1%
	Community Therapies (Hull)	Hull	Tel	23	1.0%
	NCTs - Therapies	East Riding	Tel	19	0.8%
	NCTs - Intermediate Care	East Riding	Tel	22	1.0%
	Community Hospital	East Riding	F2F	32	1.4%
	Pulmonary Rehab (ER)	East Riding	Tel	10	0.4%
	Cardiac Rehab (ER)	East Riding	Tel	16	0.7%
	Podiatry (ER)	East Riding	F2F	76	3.4%
	Dietetics (ER)	East Riding	F2F	32	1.4%
	Falls (ER)	East Riding	Tel	16	0.7%

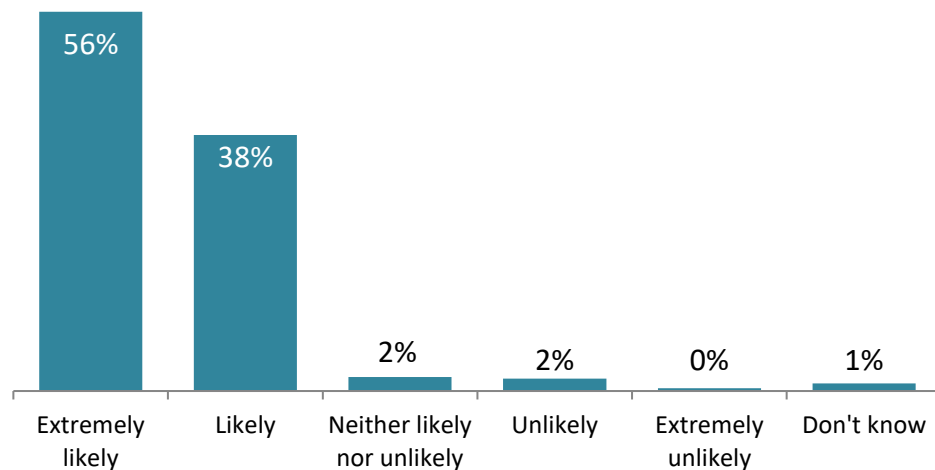
	Stroke (ER)	East Riding	Tel	15	0.7%
	Speech & Language Therapy	East Riding	Tel	10	0.4%
	MSK	East Riding	F2F	118	5.3%
Tier 3 Weight Management	Tier 3 Weight Management	Hull	Tel	4	0.2%

## 5.0 Summary

### 5.1 Summary of Results

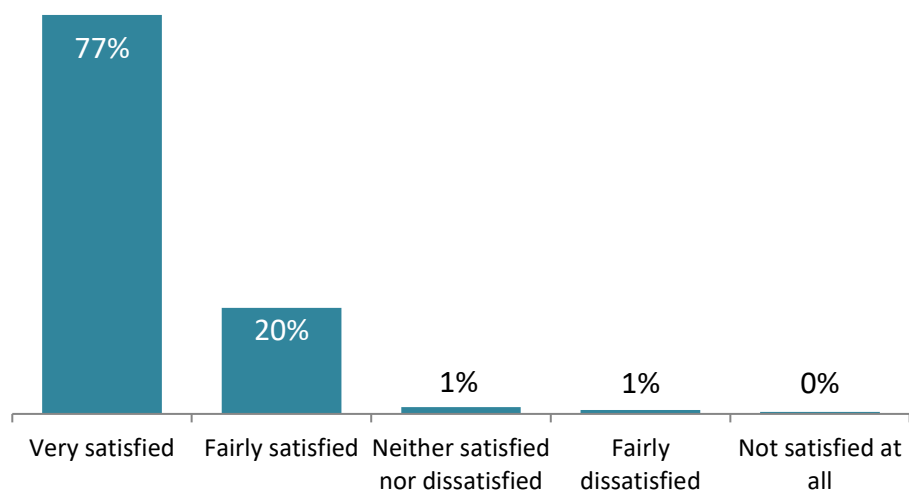
#### Overall Service

How likely are you to recommend our clinic/service to friends and family if they needed similar care or treatment? (Base: 2240)



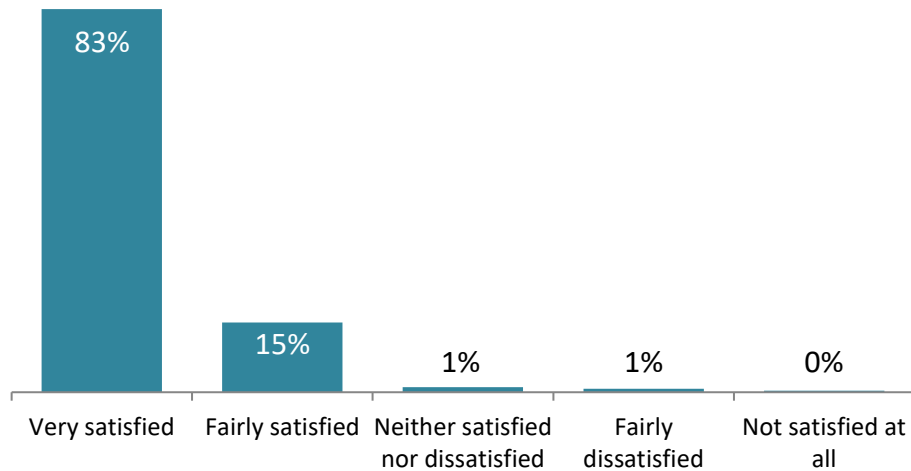
Overall results were found to be extremely positive with more than 9 out of every 10 respondents stating they would be likely to recommend the service based on their overall experience. Over half said they would be extremely likely to recommend the service to their family and friends; furthermore, just 2% of respondents said it was unlikely.

How satisfied were you with your overall experience? (Base: 2237)



Almost all (98%) respondents expressed satisfaction towards the overall experience, with over three-quarters (77%) confirming they were very satisfied. Again, only a very small percentage voiced any dissatisfaction with their overall experience (1%).

How satisfied were you with the standard of care and support you have received? (Base: 2228)



Continuing the trend of high levels of satisfaction, the vast majority (98%) of patients were satisfied with the standard of the care and support they had received, with over 8 out of every 10 suggesting they were very satisfied. Levels of dissatisfaction remained negligible at 1%

Further to this, over two thirds of respondents (71%) said that they had received the care that mattered to them at *all* times, an additional quarter (25%) saying they had the care that mattered *most* of the time. Although levels of respondents stating they received the care that mattered *all or most* of the time have remained consistent since 2012, the percentage of those who stated *all* of the time has receded by 10% since 2016.

When considering care across organisation, the vast majority (95%) were satisfied that services worked together to integrate their care, with four-fifths (80%) stating they were very satisfied.

It was also found that a quarter of respondents considered their opinion of the service to have improved as a result of their most recent experience and only 3% reported that the experience had a negative impact.

Availability of appointments and waiting times were most commonly identified as areas of improvement, as consistent with previous years.

## Telephone Contact

The percentage of respondents stating they contacted the service via telephone fell marginally with 39% stating they did so. This continues a downward trend, year on year in telephone contact; 26% fewer respondents had contacted the service via telephone when compared with 2011. Of those who contacted the service by telephone, just under a third (30%) said they had done so using the 247111 number.

Overall, respondents were very positive about their experience of contacting the service via telephone; however, getting through to someone in a timely manner and ease of navigating the automated telephone system emerged as areas that have scope for improvement with around a tenth of respondents stating dissatisfaction for each of these aspects.

## Accessibility

Satisfaction was also high towards all aspects of making and managing appointments, with all achieving satisfaction levels above 80%. Around a tenth, however expressed dissatisfaction with the ability to book an appointment on an evening or weekend. Less than 5% expressed any level of dissatisfaction towards the location, flexibility of changing appointments and the date and time of the appointment.

The majority of respondents (83%) confirmed they had not had an appointment cancelled or changed to a later date in the last 12 months; a fifth (17%) revealing they had at least one appointment cancelled or changed, representing a 3% increase since 2016 and 5% since 2015.

When considering services which provide short access capabilities, two fifths (41%) had attempted to access at short notice, the majority of which (84%) had been successfully seen within two days. Over three-quarters (82%) of respondents who had attempted to access the service at short notice expressed satisfaction that they were seen as soon as was necessary, this represents a 4% increase since 2016.

Overall, when attending services, nearly 9 out of every 10 indicated that they had been seen as soon as they felt was necessary, with a tenth indicating they should have been seen a bit sooner (10%) and 2% that expressing they should have been see a lot sooner. Satisfaction was particularly high towards the ease of finding the location (99%) and the cleanliness and comfort of the waiting room (99%); however, over a tenth did state some level of dissatisfaction with the availability of parking spaces.

## Health Professionals

Health professionals were consistently rated very highly with regards to each aspect of service delivery, with satisfaction ranging from 96% to 99%. The only notable indicator of dissatisfaction was expressed towards the health professional's knowledge of medical history, expressed by only 2% of respondents. Rates of dissatisfaction for all other aspects were below this percentage.

Satisfaction towards the communication with and from the health professional was, again, exceptionally high, with each aspect indicating a satisfaction level of at least 98%. Dissatisfaction levels did not exceed 1% for any of the statements involving communication between patients and health professionals.

More specifically, when asked what, in particular was good about the service they received from the health professional, the manner and friendliness of staff was cited most frequently, implying that this is an important aspect of care. Although few participants mentioned any improvements that could be made by health professionals, a reduction in waiting times was the most recurrent theme.

## Self-Care

The vast majority of respondents felt they received care that enabled them to manage their condition more independently (94%) and that the care received has contributed to an improved quality of life (90%).

Nearly all felt that they got the care that was agreed as part of their care plan (99%) and the vast majority of those asked were confident they would get that care that was agreed upon in their care plan (97%). Around 9 out of every 10 respondents felt the care received has resulted in a positive outcome for them in physical, psychological or social terms.

Over nine-tenths (93%) felt that support was available for long-term self-care, with agreement also high that they were encouraged to set targets for their self-care (89%).

The majority of urgent care service users (96%) felt that the care they had received helped them understand how to self-care and access appropriate alternative services to urgent care with a similar proportion (93%) concluding that urgent care needs had been met.

## Making Every Contact Count (MECC)

Less than half (43%) of service users had been informed that they may be referred to another service, with 67% of respondents who received an offer had accepted the referral (+13% from 2016). Respondents who had undergone a referral process were positive about their experience, with 9 in every 10 expressing satisfaction.



## Communication and Information

Respondents indicated positive levels of confidence towards aspects surrounding information governance, although confidence dropped slightly from 2016. Notably there was a decrease in those that felt they were kept up-to-date with how information about them is used and shared, from 89% in 2016 to 83% during 2017.

The vast majority (94%) were satisfied with the opportunities they had to give feedback; furthermore the majority (92%) also stated they would raise concerns if they were unhappy with the service or had concerns.

## Points of contact

When asked who they would contact / where they would go in the event of a minor injury, over half (55%) stated that they would visit a walk-in centre, MIU or urgent care centre. When considering a minor ailment, two fifths (38%) said that they would make an appointment with a GP with a quarter (28%) indicating that they would ask a pharmacist for advice.

If a long term condition worsened, the majority of respondents said that they would make an appointment with a GP (70%) and, in the event of an emergency, opinion was divided, with around two fifths said that they would call 999 (42%) or visit A&E (43%).

## 6.0 Overall Findings

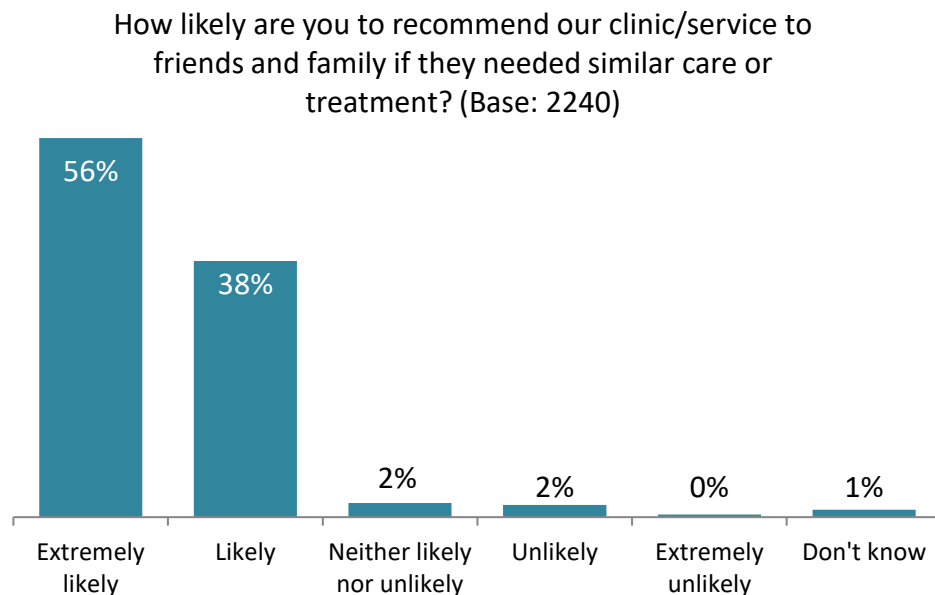
In addition to the overall results, findings are split and presented by the service areas; commentary on variance by service area is included where significant. For clarity the fourteen service areas are as follows:

- 0-19 Services
- Carers' Information & Support Services
- Chronic Community Pain Management
- City Health Dental
- Evolve
- Integrated Paediatrics & Nursing Services
- Integrated Sexual Health Services
- Integrated Urgent Care
- Let's Talk
- Nursing and Conditions
- Primary Care & APMS
- Public Health Hull and NW
- Rehabilitation and Therapies
- Tier 3 Weight Management

It should be taken into consideration that sample sizes vary between service areas, therefore, although results from service areas are shown in the report they should be used as a guide for service user opinion only, rather than as a tool for making direct comparisons. Any variation between service areas could be a result of the differing sample sizes, rather than service performance.

## 6.1 The Service Overall

### 6.1.1 Future Recommendations



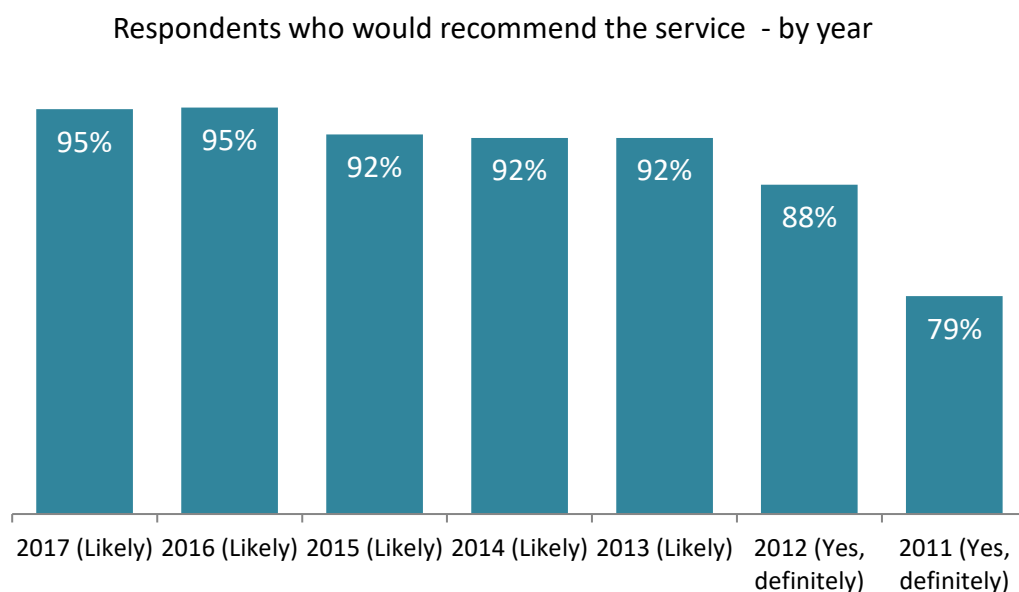
More than nine-tenths (95%) of respondents said they would be likely to recommend the service based on their overall experience, with over half (56%) saying they would be extremely likely to do so. Only 2% of respondents said it was unlikely that they would recommend the service to their family and friends.

The likelihood that a respondent would recommend the service was high across all demographic groups; however, when considering responses of extremely likely, respondents with a disability (66%) were more likely to do so than those who did not have a disability (52%). In addition, the proportion of respondents who indicated that it was extremely likely that they would recommend the service was over higher amongst respondents who were retired (62%) and unemployed (61%) than those employed in full time or part time work (51% and 50% respectively).

The likelihood that the individual would be extremely likely to recommend the service also, to some extent, increased with age, with responses of extremely likely ranging from 45% among those aged 18-24 to 72% among respondents aged 75 to 84.

Respondents who had used the service between 4 and 5 times over the past 12 months most frequently said they would be extremely likely to recommend the service to family and friends (64%); respondents who had only used the service once less frequently said it was extremely likely that they would recommend the service (55%).

Just under three-quarters (72%) of respondents who had used a service which was delivered within their home said it was extremely likely that they would recommend the service to family and friends whereas responses of extremely likely fell to just over half (54%) among those who had visited the service.



The proportion of respondents who said they would be likely to recommend the service has remained the same since 2016, with those who reported being extremely likely to do so decreasing significantly during this period (-11%).

In order to track opinion across years, responses of 'extremely likely' and 'likely' have been compared with the response 'yes, definitely' from the 2012 and 2011 surveys. The proportion of respondents who would recommend the service has tended to increase over time, with current levels being 7% higher than in 2012 and 16% higher than in 2011.

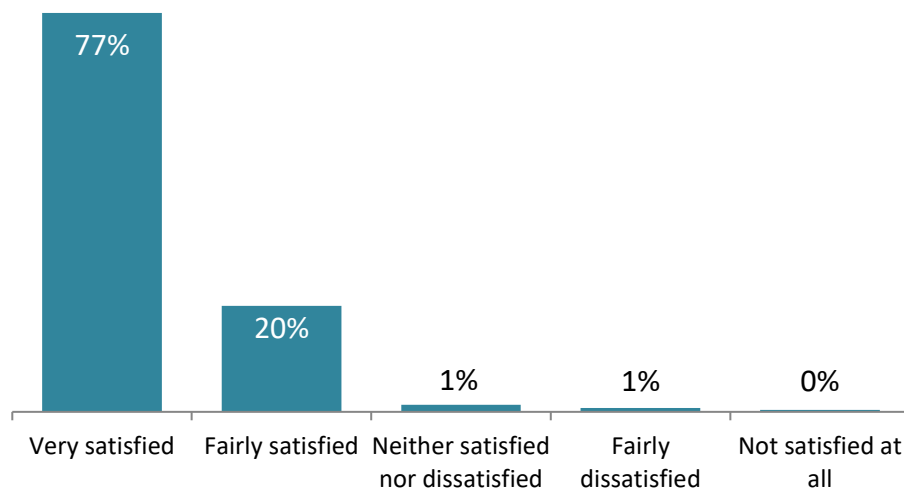
Respondents who would be extremely likely to recommend the service – by service area		
Service Area	Base	Extremely likely
Public Health Hull & NW	61	92%
Chronic Community Pain Management	44	91%
Let's Talk	50	70%
0-19 Service	93	70%
Nursing and Conditions	393	66%
Rehabilitation and Therapies	573	64%
Integrated Paediatrics & Nursing Services	62	61%
Integrated Sexual Health Services	175	51%
City Health Dental	117	48%
Integrated Urgent Care	368	44%
Primary Care & APMS	291	30%

Over 9 out of every 10 respondents who had accessed Public Health Hull and NW services and Chronic Community Pain Management said they would be extremely likely to recommend the service to friends and family. Over two-thirds (70%) of respondents who used the Let's Talk service and 0-19 services saying they would be extremely likely to recommend.

In contrast, less than a third (30%) of respondents who had accessed services within Primary Care and APMS indicated that they would be extremely likely to recommend the service to friends and family. Less than half of respondents who accessed City health Dental and Integrated Urgent Care services said they were extremely likely to recommend the service to friends and family, based on their experiences (48% and 44% respectively).

### 6.1.2 Rating of the Experience Overall

How satisfied were you with your overall experience?  
(Base: 2237)



A combined total of 97% of respondents expressed a level of satisfaction towards the overall experience of accessing the service, with just over three quarters (77%) saying they were very satisfied with their experience and a fifth (20%), fairly satisfied overall. Only 1% provided any level of dissatisfaction when thinking about their overall experience with a further 1% stating that they were neither satisfied nor dissatisfied.

Higher levels of satisfaction tended to increase with age with over 8 out of every 10 respondents aged 55 to 84 stating that they were very satisfied with the overall service: 55-64 (82%); 65-74 (83%) and 75-84 (85%). Levels of high satisfaction dropped to around two thirds amongst those aged 18-24 (67%) with 7 out of every 10 respondents aged 25-34 and 35-44 stating that they were very satisfied with the overall experience (both 72%)

Respondents who indicated they had a disability (82%) were more likely to be very satisfied with the overall experience compared to those without a disability (75%). Those respondents who were retired were more likely to express they were very satisfied with the service overall than those in other activities, notably those in education (68%).

Respondents who had used a service which was delivered within the home expressed higher satisfaction than those who had visited the service, with 86% compared with 76% saying that they were very satisfied with their overall experience. Respondents who had accessed services either once or more than 11 times were more likely to state that they were very satisfied with the service overall (79% and 83% respectively).

Respondents who were satisfied with the overall experience or rated the overall experience as excellent - good - by year



Prior to 2015 opinion of the overall experience was measured on an excellent to very poor scale and therefore in order for comparisons to be made responses of very and fairly satisfied have been measured against responses of excellent, very good and good.

Positive opinion is now slightly higher than what it was in 2016 (+1%); resuming the level it reached during 2015. However, responses of very satisfied have decreased from 83% in 2016 to 77% currently. Over time there has been little variance in respondents who rated the overall experience positively, with responses of very / fairly satisfied or excellent / good varying from 95% to 98%.

Respondents who were very satisfied with their overall experience – by service area		
Service Area	Base	Very satisfied
Chronic Community Pain Management	44	98%
Public Health Hull & NW	61	93%
Nursing and Conditions	393	87%
0-19 Service	93	85%
Let's Talk	50	84%
Integrated Paediatrics & Nursing Services	62	84%
Rehabilitation and Therapies	572	82%
Integrated Urgent Care	367	74%
City Health Dental	117	72%
Integrated Sexual Health Services	175	65%
Primary Care & APMS	290	54%

Overall satisfaction was high and therefore there was little variance across service area when responses of very and fairly satisfied are combined (90% or above for all service area). The table above therefore shows the proportion of respondents from each service area who indicated that they were very satisfied.

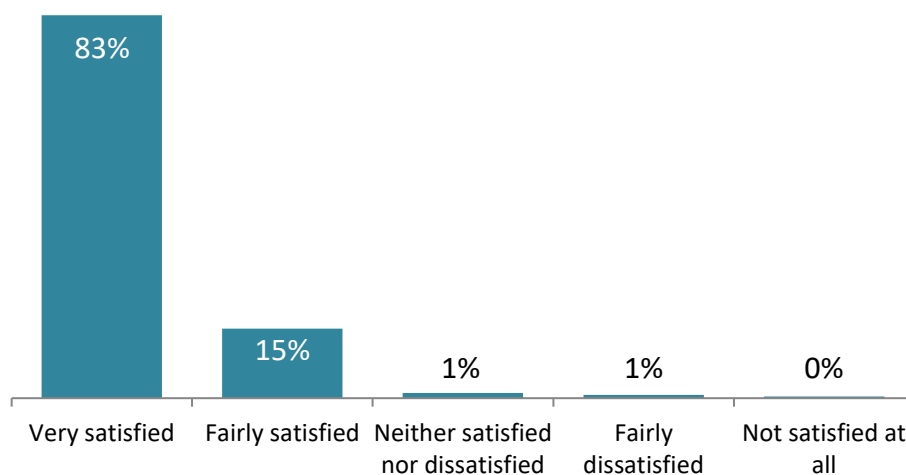
Almost all (98%) respondents who had accessed Chronic Community Pain Management reported being very satisfied with their overall experience, with no respondents expressing any dissatisfaction. Satisfaction was also high among those who had accessed Public Health Hull and NW (93%) with over 9 out of every 10 respondents who used service in this area stating that they were very satisfied with the overall experience.

Satisfaction with the experience overall was lower among those who had used a service within Integrated Sexual Health Services and Primary Care & APMS; within both service areas fewer than two-thirds of respondents reported being very satisfied with their overall experience (65% and 54% respectively).



### 6.1.3 Rating of the Care Received

How satisfied were you with the standard of care and support you have received? (Base: 2228)



Almost all (98%) respondents were satisfied with the standard of the care and support, with more than 8 out of every 10 expressing they were very satisfied with the care which they had received. Only 1% of respondents said they were either fairly dissatisfied with the same percentage stating neither satisfied nor dissatisfied (1%).

When considering overall satisfaction (very/fairly), younger respondents were significantly less satisfied – specifically those aged 18-24 (92%) when compared to all other age groups which exceeded 98%. BAME respondents were also less likely to be satisfied overall when compared to white respondents (94% and 98% respectively).

When taking into account, responses of very satisfied, older respondents were again more likely to be very satisfied compared to younger respondents with responses of very satisfied exceeding 80% among all respondents aged 45 and over whereas it was below three-quarters for those aged 18 to 24 (70%).

Respondents with a disability (86%) and white respondents (83%) were more likely to state they were very satisfied with that standard of care they received compared to those without a disability (82%) and BME respondents (74%). Those who had the care delivered at home (90%) were more likely to state they were very satisfied compared to those who visited the service (82%). Respondents who had visited the service more than 11 times were also significantly more likely to state that they were very satisfied with the standard of care and report when compared to all other time of access.

Respondents who were satisfied with the care and support or rated the care and support as excellent / good  
- by year



Opinion of the care and support received has remained at a high of 98% when compared to 2016. Positive opinion has varied little since 2011 (+/-3%); however, there has been an overall upwards trend in positive opinion over time.

Respondents who were very satisfied with the standard of care and support received – by service area

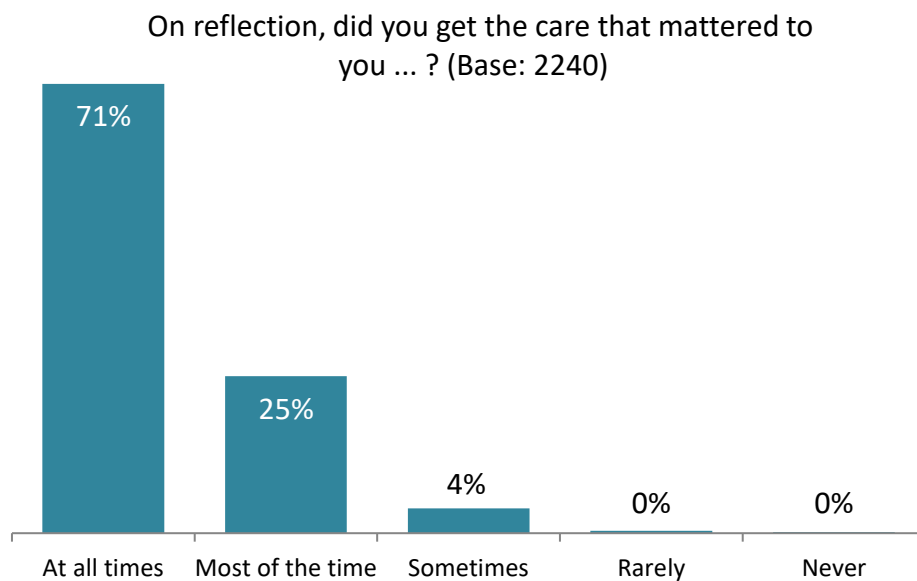
Service Area	Base	Very satisfied	Very / fairly satisfied
Public Health Hull & NW	61	93%	98%
Chronic Community Pain Management	44	91%	100%
Nursing and Conditions	393	91%	99%
Integrated Paediatrics & Nursing Services	62	90%	100%
Rehabilitation and Therapies	572	88%	98%
0-19 Service	93	85%	97%
Let's Talk	50	84%	96%
Integrated Urgent Care	362	81%	99%
City Health Dental	117	76%	100%
Primary Care & APMS	290	69%	94%
Integrated Sexual Health Services	171	68%	94%

Satisfaction was high within each service area and all respondents who had used services within Chronic Community Pain Management, Integrated Paediatrics & Nursing Services and City Health Dental expressed 100% satisfaction towards the care and support which they had received.

When considering responses of very satisfied, respondents who had used Public Health Hull & NW (93%) expressed the highest level of satisfaction towards the standard of care and support received. Responses of very satisfied were also high amongst users of Chronic Community Pain Management (91%), Nursing and Conditions (91%) and Integrated Paediatrics & Nursing Services (90%).

A lower level of satisfaction around the care and support received was expressed by users of Primary Care & APMS (69%) and Integrated Sexual Health Services (68%) when taking into account responses of very satisfied.

#### 6.1.4 Opinion of the Care Received

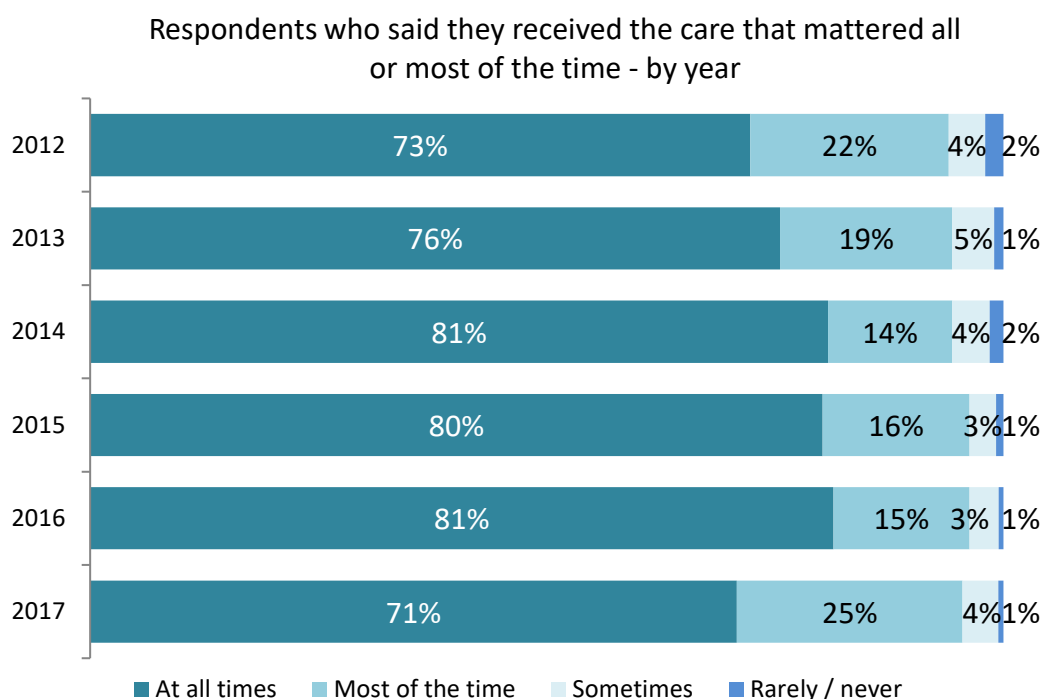


The vast majority (96%) of respondents received the care that mattered to them either all or most of the time, with over two-thirds (71%) saying this level of care was received at all times. Less than 1% of respondents said that the care that mattered to them was either rarely or never delivered (0.6%).

At least nine-tenths of respondents across all demographic and user groups said that they had received the care which mattered to them either all or most of the time; there were however, some significant differences in the distribution of responses of all and most of the time.

Those aged 18 to 24 (65%) and 35 to 44 (65%) were less likely to state that they received the care that mattered to them at all times when compared older respondents: 65 to 74 (74%) and 75 to 84 (77%).

Older respondents were more likely to say they received the care that mattered to them at all times, with those aged 65 to 74 (88%) most likely to feel they always received the care that mattered compared to 69% of those aged 18 to 24. Furthermore, retired respondents were also more inclined to express that they received the care that mattered to them at all times (75%) when compared to those in full time employment (70%), unemployed respondents (67%) self-employed respondents (64%).



Whilst the level of respondents who stated that they received the care that mattered all or most of the time, 2017 has seen a significant decrease in the proportion of respondents who said that they received the care that mattered to them all of the time.

However, only 1% of respondents said that they had received the care that mattered either rarely or never which remains the lowest that this response has been since tracking began.

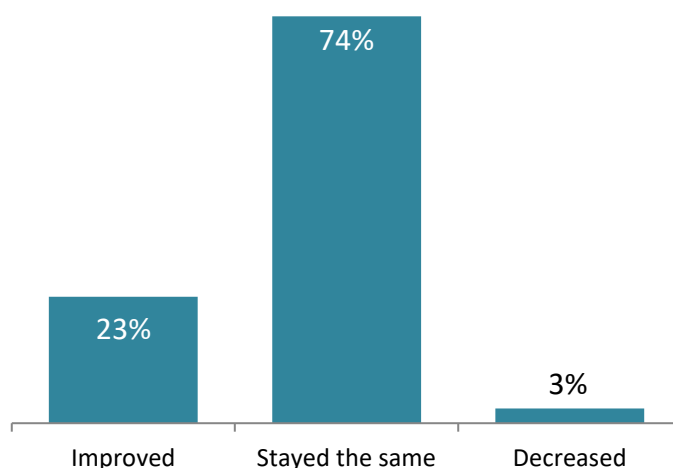
Respondents who had received the care that mattered at all times – by service area		
Service Area	Base	At all times
Public Health Hull & NW	61	92%
Integrated Paediatrics & Nursing Services	62	85%
0-19 Service	93	83%
Rehabilitation and Therapies	572	76%
Chronic Community Pain Management	44	75%
Nursing and Conditions	393	74%
Integrated Urgent Care	362	73%
Let's Talk	50	72%
City Health Dental	117	72%
Integrated Sexual Health Services	171	66%
Primary Care & APMS	290	44%

Over nine-tenths of respondents who had accessed services within Public Health Hull & NW (92%) with more than 8 out of every 10 respondents using services within Integrated Paediatrics & Nursing Services (85%) and 0-19 Service (83%) indicating that they had received the care that mattered to them at all times.

Although still high overall; the proportion of respondents who said the care that mattered had been received at all times fell below three-quarters among those who had accessed services within Nursing and Conditions (74%), Integrated Urgent Care (73%), Let's Talk (64%), City Health Dental (72%), Integrated Sexual Health Services (66%) and Primary Care & APMS (44%).

### 6.1.5 Changes in Perceptions

After accessing the service on this occasion, has your opinion of the service... (Base: 2240)

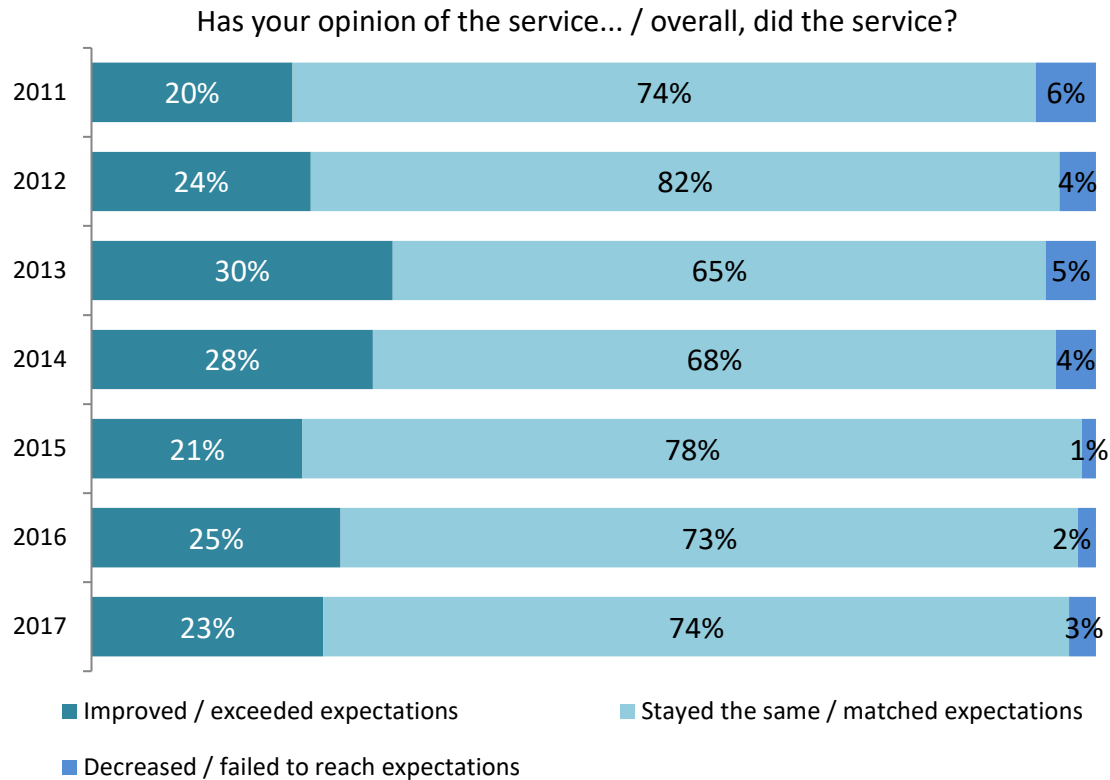


A quarter of respondents said that after accessing the service on the last occasion their opinion of the service had improved (23%). Just under three-quarters (74%) of respondents indicated that their perception was unchanged, meaning only 3% of respondents said that their opinion of the service had worsened as a result of accessing the service on the last occasion.

Respondents aged 18 to 24 (27%), 45 to 54 (26%) and 55 to 64 (26%) were the most likely to have an improved opinion of the service, whereas those aged 25 to 34 (21%) were the least likely to have an improved opinion of the service.

Respondents with a disability (28%) were significantly more likely to have an improved opinion of the service when compared to those without a disability (20%). Furthermore respondents who were unemployed / not working (30%) were significantly more likely to state that they had an improved opinion of the service than people in other activities. Respondents who had accessed the service 11 or more times over the past 12 months were more likely to have an improved opinion of the service (30%) when compared to other levels of access.

Respondents who had the care delivered at home (38%) were nearly a fifth more likely to say they have an improved opinion of the service when compared to those who visited the service (21%).



In both 2017 and 2016 the largest proportion of respondents said that accessing the service had no impact on their opinion, with 74% of respondents in 2017 saying their opinion had remained the same and 73% of respondents in 2016 saying the service had stayed the same.

Just under a quarter of respondents said that their experience had improved their opinion of the service which represents a 2% decrease since 2016. However, this still exceeds the figure recorded during 2015 (21%).

Across all consultations, few respondents said that accessing the service had a negative impact upon their perception of the service although the 2017 figure is 1% higher than 2016.



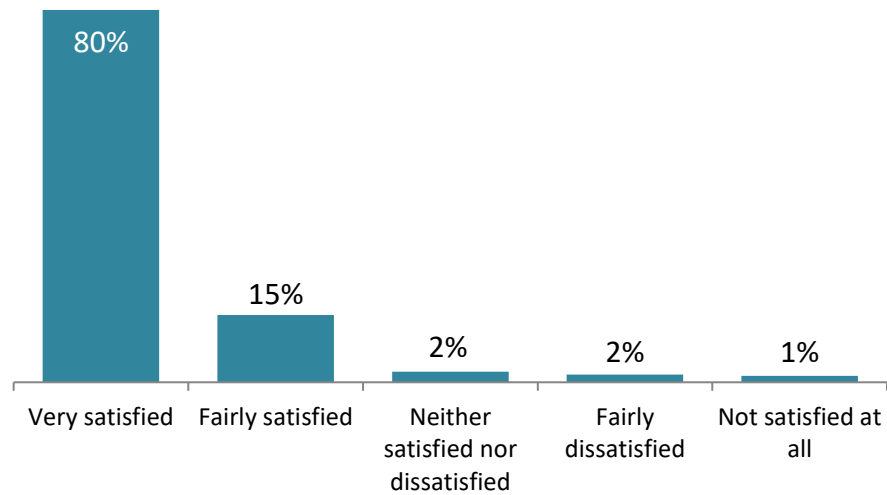
Respondents who said their opinion had improved based on their experiences – by service area		
Service Area	Base	Improved
Public Health Hull & NW	61	39%
Chronic Community Pain Management	44	30%
Nursing and Conditions	393	29%
Rehabilitation and Therapies	573	27%
Integrated Sexual Health Services	175	24%
Let's Talk	50	22%
0-19 Service	93	19%
City Health Dental	117	18%
Primary Care & APMS	291	18%
Integrated Urgent Care	368	15%
Integrated Paediatrics & Nursing Services	62	15%

It was most common for respondents who had accessed services within Public Health Hull & NW (39%) to say that their opinion of the service had improved as a result of their most recent experience. Over a quarter of respondents who accessed Chronic Community Pain Management (30%), Nursing and Conditions (29%) and Rehabilitation and Therapies (27%) said they had an improved opinion of the service.

Less than a fifth of respondents who had accessed services within Integrated 0-19 Service (19%), City Health Dental (18%), Primary Care & APMS (18%), Integrated Urgent Care (15%) and Integrated Paediatrics & Nursing Services (15%) reported that the experience had led to an improvement in their opinion of the service.

### 6.1.6 Integrated Care

How satisfied were you that services worked together to integrate your care? (Base: 1095)

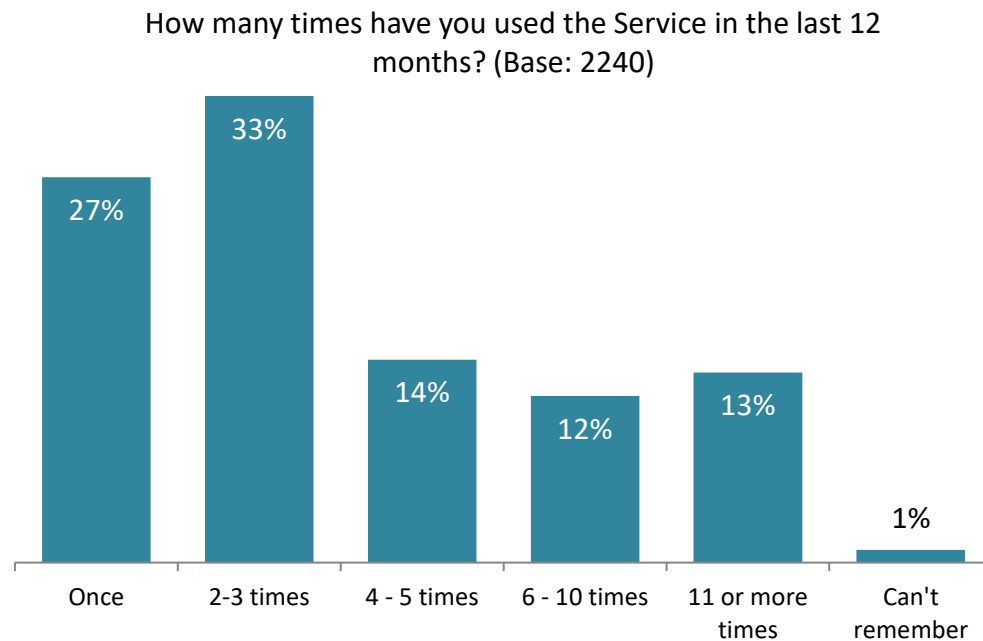


Over nine-tenths of respondents (95%) were satisfied that services worked together to integrate their care with the majority indicating that they were very satisfied (80%). Only 3% were dissatisfied with how well services worked together to integrate their care.

Female respondents (96%) were more likely to express that they were satisfied that services worked together to integrate their care than male respondents (92%). Respondents aged 75 to 84 (99%) were also more likely than other age group to express satisfaction that services worked together to integrate their care.

## 6.2 Accessing Health Services

### 6.2.1 Frequency of Use



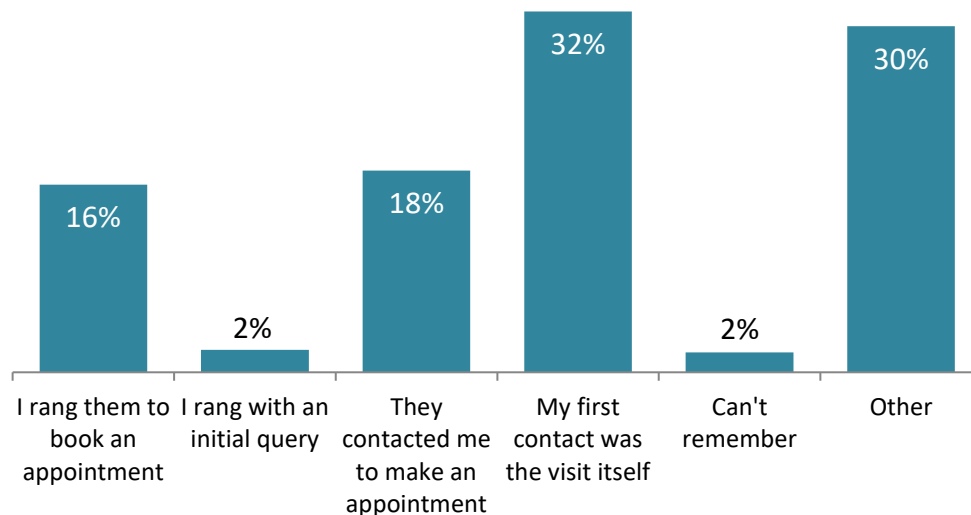
Just over a quarter (27%) of respondents had used the service on one occasion during the 12 months prior to taking part in the consultation, with a third that had accessed the service either two or three times. Only 13% of participants reported that they had used the service eleven times or more.

Respondents with a disability and respondents who had the service delivered at home tended to use services on a more frequent basis than those who did not have a disability and respondents who visited the service. Similarly younger respondents (i.e. those aged 24 and under) used services less frequently than older respondents (i.e. those aged 65 and over).

Frequency of use varied significantly by service area, with more than two-fifths of respondents who accessed services within Integrated Sexual Health Services (43%), Integrated Paediatrics & Nursing Services (44%), Integrated Urgent Care (44%) and Public Health Hull and NW (59%) stating that they had only used the service once. In contrast, respondents who had accessed Nursing and Conditions (37%) and Let's Talk (28%) most frequently said that they had used the service eleven times or more.

### 6.2.2 Initial Contact

Thinking about your last experience of the service, which of the following best describes your initial contact with the service? (Base: 2240)

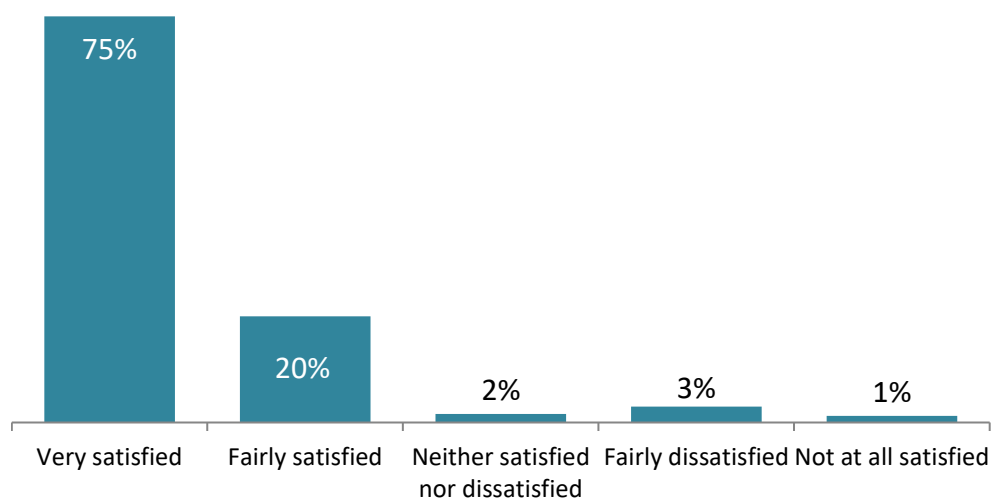


Just under a third of respondents (32%) had not had contact with the service prior to use, while less than a fifth (18%) indicated the service had contacted them with 16% that had initiated the use by calling the service to book an appointment. Only 2% of respondents said their access to the service had begun with a call with an initial query. Three-tenths said that they used another method to make initial contact with the service.

Please specify other (Base: 681)		
Response	Number	Percentage
Pre-booked appointments	457	67.1%
Referral (through my doctor's or the hospital etc.)	198	29.1%
On site / walk in (where they are based)	13	1.9%

When asked to specify what other method of contact was used to make initial contact two-thirds stated it was by a pre-booked appointment with less than a third stated that it was by referral, either through the doctors or the hospital (29%).

How satisfied were you with the initial contact with the service? (Base: 2240)



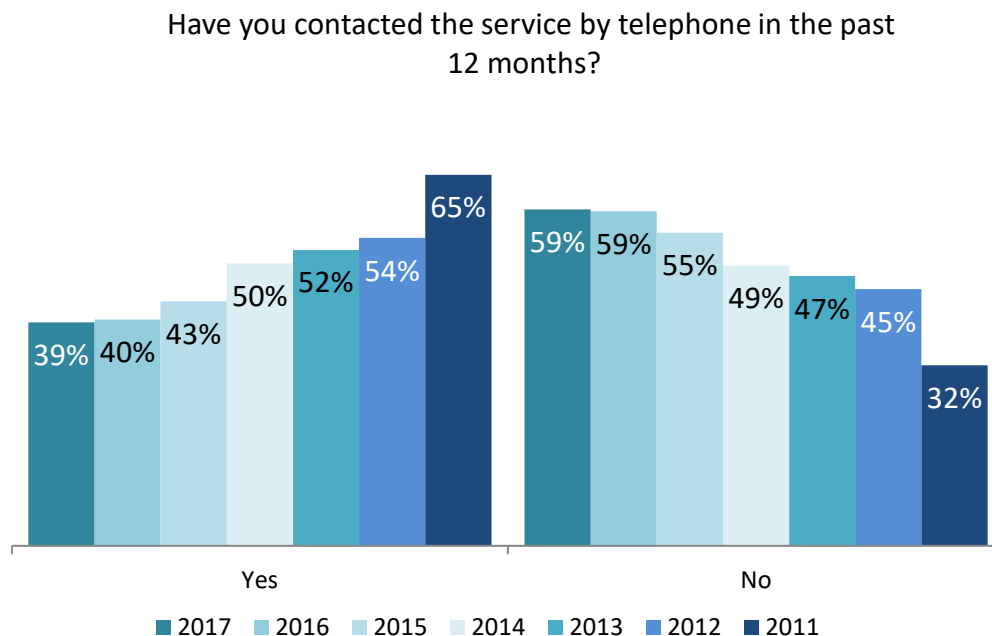
Satisfaction towards the initial contact with the service was high, with three-quarters of respondents reporting being very satisfied with the initial contact and a further fifth saying that they had been fairly satisfied. Only 4% of respondents reported any level of dissatisfaction towards their initial contact with the service.

Why do you say this? (Base: 2215)		
Response	Number	Percentage
Nice manner / friendly staff / caring	798	36.0%
Quick / efficient service / seen straightaway	431	19.5%
Helpful / resolved my issue	370	16.7%
Generally satisfied	220	9.9%
Ease of access / straightforward	210	9.5%
Provided information / answered questions	152	6.9%
Professional / knew what they were doing	76	3.4%

When asked to give reasons for their satisfaction with the initial contact with the service, the largest proportion of respondents (36%) said it was down to the staff's manner (for example being friendly and / or caring). A fifth (20%) stated it was because it was quick / efficient service or that they were seen straightaway with slightly less that said the staff were helpful or resolved their issue (17%).

## 6.3 Telephone Contact

### 6.3.1 Contact via Telephone



Only 39% of respondents had contacted the service by telephone in the 12 months prior to taking part in the consultation, meaning a higher proportion had not (59%). The use of this method of contact has continually decreased over time and is now a quarter lower than when tracking began in 2011.

The likelihood that the individual had contacted the service via telephone increased with frequency of use, with over two-fifths who had contacted the service 4-5 times (42%), 6-10 times (48%) or 11 times or more (61%) had contacted the service via telephone compared with only a quarter of respondents who had used the service on one occasion.

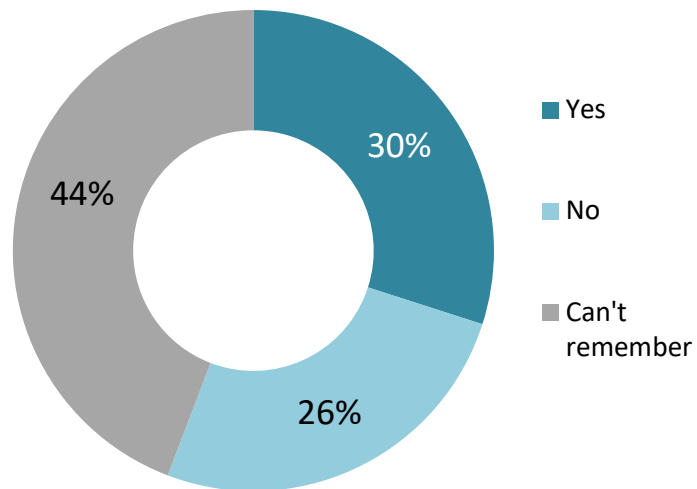
Respondents who had the service delivered at home (52%) were also more likely to have contacted the service by telephone compared to those who visited the service (38%).

Have you contacted this service by telephone in the past 12 months – by service area		
Service Area	Base	Yes
Primary Care & APMS	291	81%
Let's Talk	50	78%
City Health Dental	117	71%
Nursing and Conditions	393	51%
Integrated Paediatrics & Nursing Services	62	31%
Integrated Sexual Health Services	175	29%
Rehabilitation and Therapies	573	28%
Integrated Urgent Care	368	17%
Public Health Hull & NW	61	13%
0-19 Service	93	12%
Chronic Community Pain Management	44	11%

The use of telephone to contact the service varied significantly between service areas, with the use of this method of contact being particularly high among respondents who had used Primary Care & APMS (81%), Let's Talk (78%) and City Health Dental (71%).

The proportion of respondents who reported making contact via telephone did not exceed a fifth within Integrated Urgent Care (17%), Public Health Hull & NW (13%), 0 to 19 Services (12%) and Chronic Community Pain Management (11%). This is not a surprising trend as these services are predominately walk-in services and therefore have much less reliance on telephone contact.

If yes, did you make contact using the 247111 number? (Base: 414)

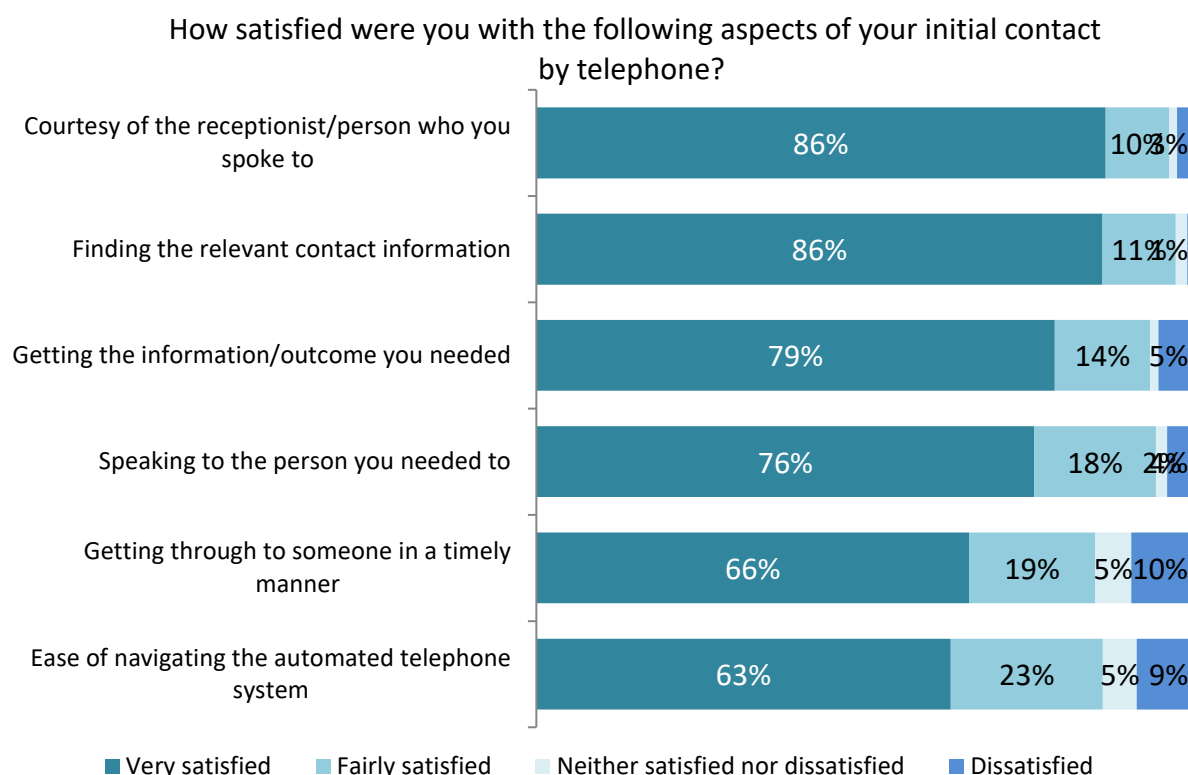


Of those that did contact the service by telephone, three-tenths (30%) said they did so using the 247111 number. Slightly fewer (26%) stated they did not use the 247111 number, with a significant proportion (44%) that were not sure whether they used the 247111 number or not.



### 6.3.2 Overall Experience of Telephone Contact

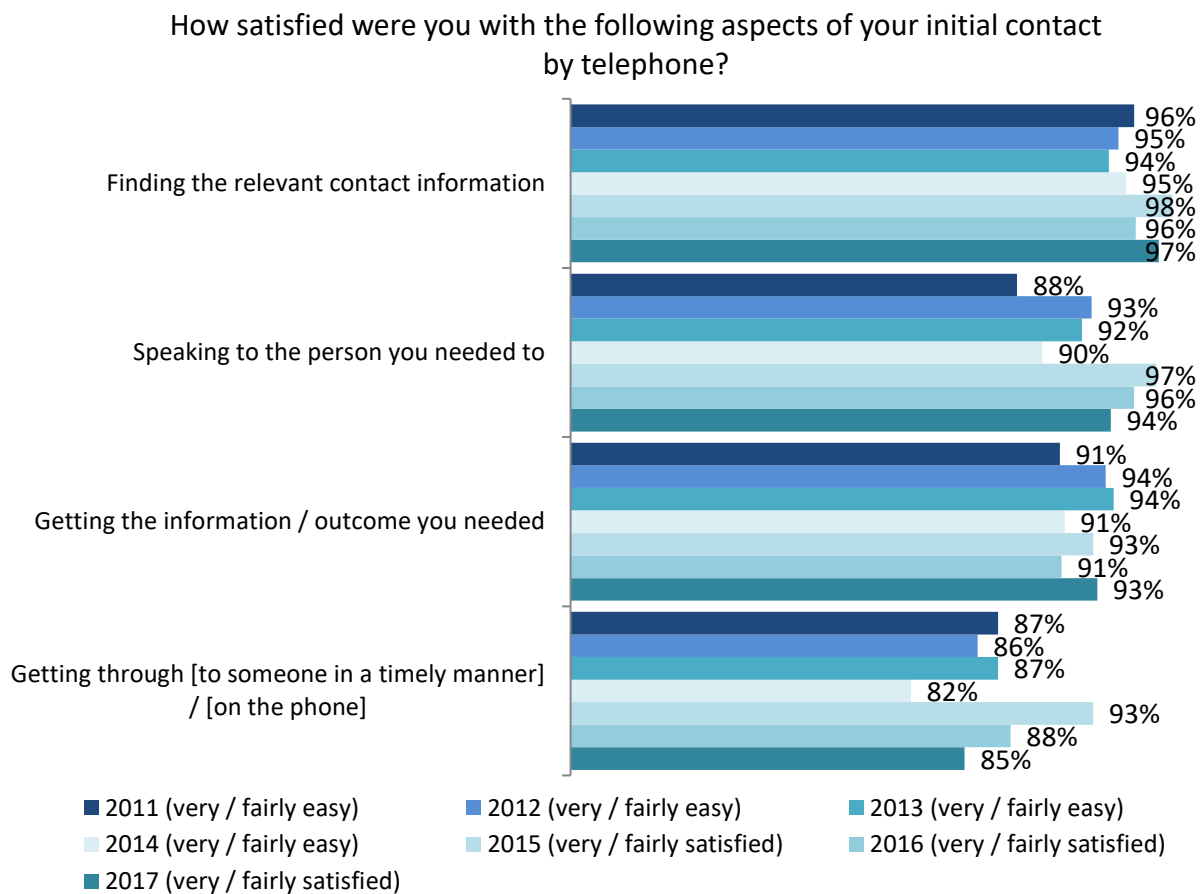
Respondents who had contacted the service by telephone in the 12 months prior to taking part in the consultation were asked further questions about their experience of doing so.



Overall, respondents were positive about their experience of contacting the service via telephone, with satisfaction exceeding nine-tenths towards four of the six aspects considered. The only aspects which did not exceed 90% satisfaction were the ability to get through to someone in a timely manner (85%) and the ease of navigating the automated telephone system (86%).

The vast majority of respondents expressed a level of positive satisfaction towards the ease in which they had found the contact information (97%), the courtesy of the receptionist or person they spoke to (96%) being able to speak to the person they needed to (94%) and getting the information or outcome they needed (93%). Dissatisfaction was low for all aspects of the initial telephone contact with all six aspects indicating dissatisfaction levels below a tenth.

Respondents who had only used the service once over the past 12 months were much more likely to be satisfied with the ability to get through to someone in a timely manner (93%) compared to those that used the service multiple times, with satisfaction with this aspect falling to as low as 81% amongst those that used the service between 6 and 10 times. Respondents who had the service delivered at home and respondents with a disability generally indicated higher levels of satisfaction with their experience of contacting the service by telephone, whereas BME respondents indicated lower levels of satisfaction.



Positive opinion has decreased for two of the four contact variables from 2016 with those that were satisfied with getting to speak to the person they needed to (-2%) and getting through to someone in a timely manner (-3%) both showing decreases in positivity. When compared to 2011 those satisfied with the ability to get through to someone in a timely manner is the only aspect which is lower now than it was in 2011 (-2%).

Satisfaction with contact by telephone – by service area											
Statement	0-19 Service	Chronic Community Pain Management	City Health Dental	Integrated Paediatrics & Nursing Services	Integrated Sexual Health Services	Integrated Urgent Care	Let's Talk	Nursing and Conditions	Primary Care & APMS	Public Health Hull & NW	Rehabilitation and Therapies
Finding the relevant contact information	100	100	100	95	84	90	100	100	99	88	97
Ease of navigating the automated telephone system	100	50	73	100	83	93	100	96	66	86	98
Getting through to someone in a timely manner	64	80	94	100	88	86	97	98	57	100	98
Speaking to the person you needed to	64	100	94	100	90	94	100	99	87	88	99
Courtesy of the receptionist / person who you spoke to	100	100	100	100	92	97	100	98	91	100	98
Getting the information / outcome you needed	100	100	96	100	90	94	100	100	81	88	99

Respondents who had accessed a service within Integrated Paediatrics & Nursing Services and Let's Talk tended to be the most positive about their experience of making contact via telephone.

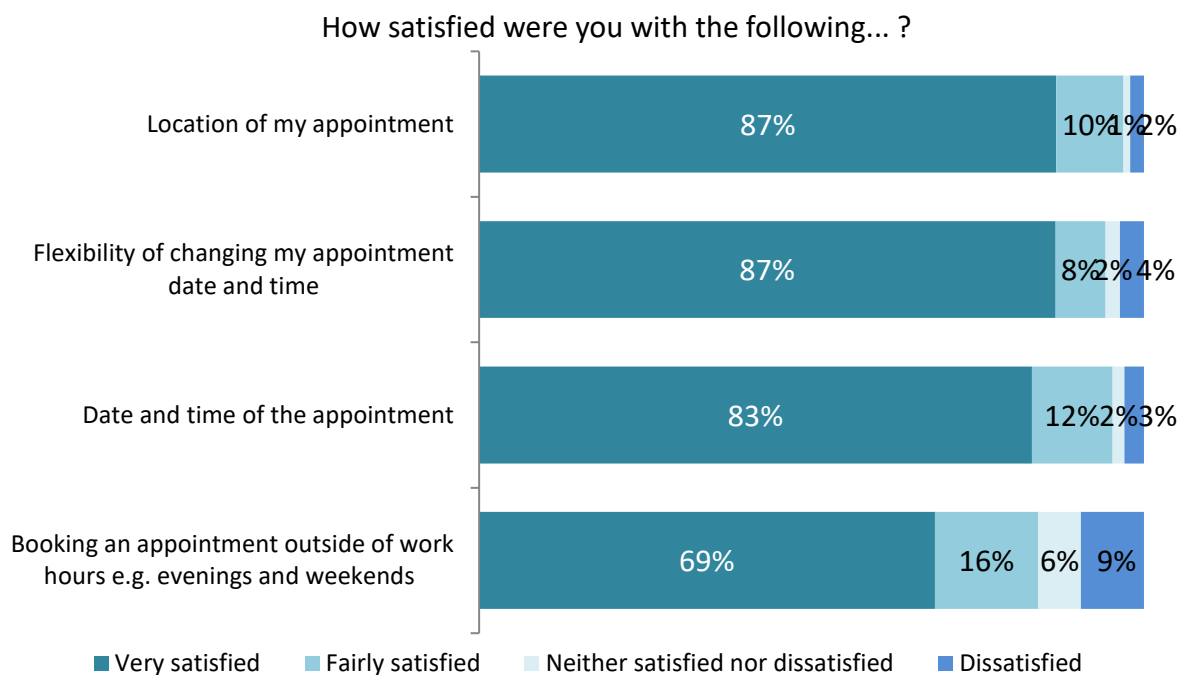
There was greatest variance in satisfaction that the individual had been able to get through to someone in a timely manner and the ease of navigating the telephone system. Satisfaction was significantly lower with getting through to someone in a timely manner among those who had accessed services within 0-19 Service (64%) and Primary Care & APMS (57%) and was lower with the ease of navigating the automated telephone system with Chronic Community Pain Management (50%), Primary Care & APMS and City Health Dental (73%).

Respondents who had used a service within Primary Care & APMS tended to be the least positive towards the initial contact by telephone with five of the six statements achieving satisfaction levels below the CHCP CIC average.

## 6.4 Access to the Service

### 6.4.1 Appointments

Respondents who had accessed a service which offered appointments were asked to give feedback on their experience of the service's appointment system.



The vast majority of respondents were satisfied with the location of their appointment (97%) and the date and flexibility of changing their appointment date and time (94%) with nearly nine out of ten respondents reporting that they had been very satisfied with these aspects (87% for both).

Over nine-tenths (95%) of respondents were satisfied with the date and time of their appointment with 83% stating they were very satisfied.

Fewer respondents had been satisfied with the opportunities to book appointments outside of work hours; just over four-fifths (84%) indicated a level of satisfaction; around a tenth (9%) of respondents were dissatisfied with their ability to book appointments outside of work hours.

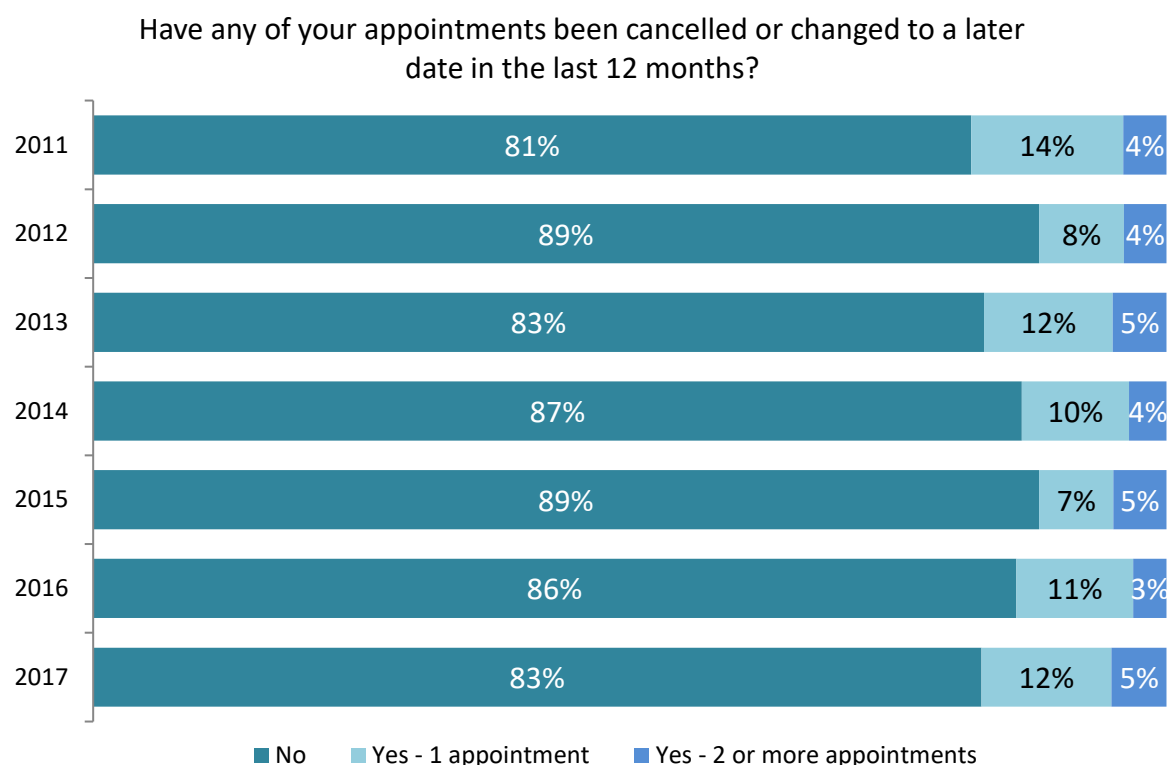
Satisfaction with appointments – by service area									
Statement	Chronic Community Pain Management	City Health Dental	Integrated Paediatrics & Nursing Services	Integrated Sexual Health Services	Let's Talk	Nursing and Conditions	Primary Care & APMS	Public Health Hull & NW	Rehabilitation and Therapies
Date and time of appointment	100	97	100	84	100	99	86	98	99
Booking an appointment outside of work hours e.g. evenings and weekends	100	75	100	86	93	87	72	93	100
Location of my appointment	89	92	92	96	98	97	98	98	99
Flexibility of changing my appointment date and time	100	86	100	95	90	97	91	95	98

Respondents who had accessed Chronic Community Pain Management, Integrated Paediatrics & Nursing Services, Public Health Hull and NW and Rehabilitation and Therapies were the most positive about the appointment system within the service.

Although Primary Care & APMS service users were positive about the location (98%) of their appointment, users of this service indicated lower satisfaction towards the date and time of their appointment (86%), the flexibility of changing the appointment (91%) and the ability to book an appointment outside of working hours (72%).

## 6.4.2 Changes to Appointments

A number of questions were asked to respondents about their appointments and whether or not any appointments had been cancelled or changed to a later date in the last 12 months. Only respondents who had indicated they had an appointment when they accessed the service were asked the questions in this section.



Over four-fifths (83%) of respondents had not had an appointment which was changed or cancelled in the 12 months prior to taking part in the consultation; this is a decrease of 3% when compared with the previous consultation, however represents an 2% increase since tracking began in 2011.

Of the 17% who had an appointment which had been changed /cancelled, 12% said one appointment had been changed or cancelled whereas 5% said two or more of their appointments had been altered.

The likelihood that the respondent had an appointment cancelled or changed tended to increase with the number of times that they had accessed the service, with 5% of respondents who had accessed the service once saying they had an appointment cancelled or changed compared with 31% of those who had accessed the service between 6 and 10 times and 28% who had accessed it on 11 or more occasions.

Respondents who had one or more appointment changed – by service area		
Service Area	Base	Appointment changed
Let's Talk	50	40%
Primary Care & APMS	291	24%
City Health Dental	117	23%
Rehabilitation and Therapies	343	17%
Chronic Community Pain Management	44	14%
Integrated Sexual Health Services	25	8%
Nursing and Conditions	109	6%
Public Health Hull & NW	61	2%

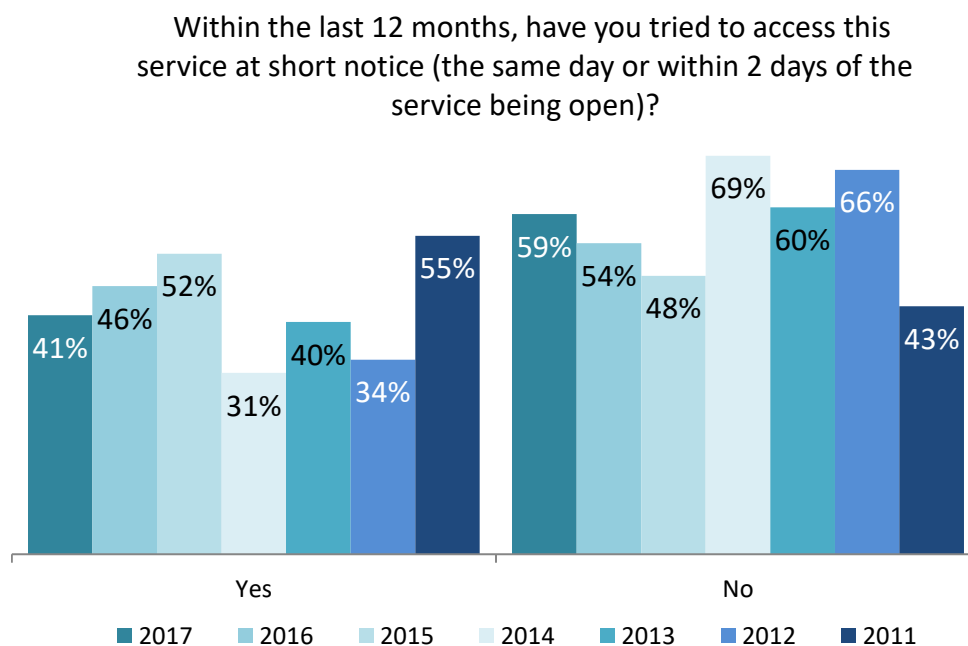
There was significant variance in respondents who said they had one or more appointment changed depending on service area, varying from as high as 40% in some services to as low as 2% in others. Less than a tenth of respondents who used a service within Integrated Sexual Health Services (8%), Nursing and Conditions (6%) and Public Health Hull & NW (7%) indicated that one or more appointment had been cancelled.

Reporting a change or a cancellation to at least one appointment was significantly higher among those who had accessed a service with Let's Talk (40%), Primary Care & APMS (24 %) and City Health Dental (23%).

## 6.5 Access at Short Notice

A series of questions were asked regarding accessing the service at short notice; short notice refers to access on the same day or within 2 days of the service being open and is not offered by all CHCP CIC services. Only respondents who had used a service which could be accessed at short notice were asked the questions in this section.

### 6.5.1 Attempts to Access at Short Notice



Around two-fifths (41%) of respondents had attempted to access the service at short notice, which represents a 5% decrease in respondents who had attempted to do so when compared with 2016.

Attempting to access the service at short notice was higher among female respondents (45%) and those without a disability (45%) when compared to males (37%) and those with a disability (37%).

The likelihood that the individual had attempted to access the service at short notice decreased significantly with age, with more than half of respondents aged 18-24 (68%), and 35-44 (55%) reporting that they had attempted such access compared with less than a third of respondents aged 65-74 (28%), 75-84 (12%) and 85 over (6%).

There was greater demand for short notice access within services which were not delivered in the home, as 45% of respondents who had visited the service had attempted short notice access compared with only 29% of respondents who had received a service within their home.

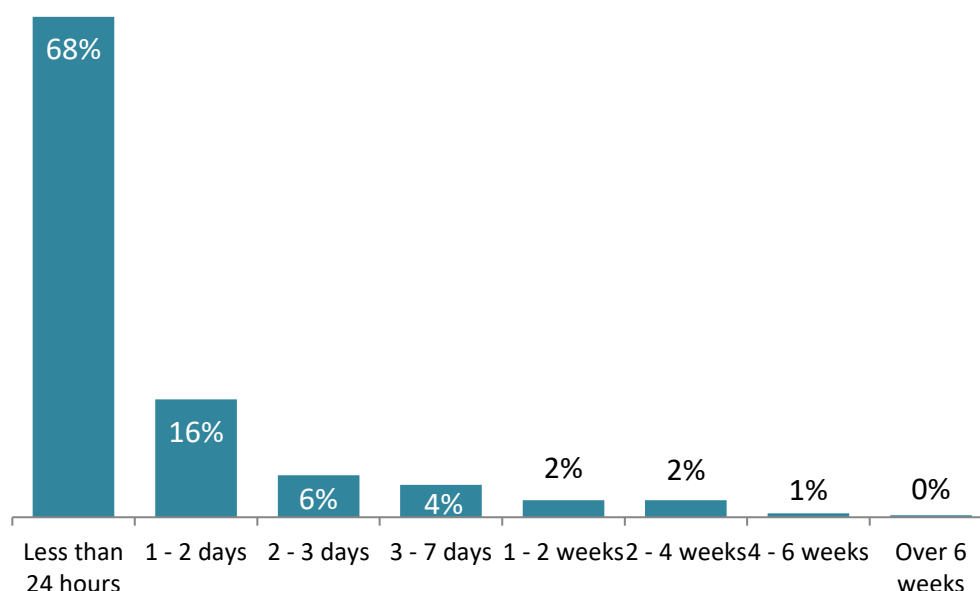
Respondents using Integrated Sexual Health Services (67%) and Primary Care & APMS (56%) were more likely to have tried to access the service at short notice, whereas those using City Health



Dental (30%), Nursing and Conditions (26%) and Rehabilitation and Therapies (10%) were less likely to have attempted to access the service at short notice.

### 6.5.2 Time Taken to be Seen

If yes, how long did it take for you to be seen? (Base: 385)

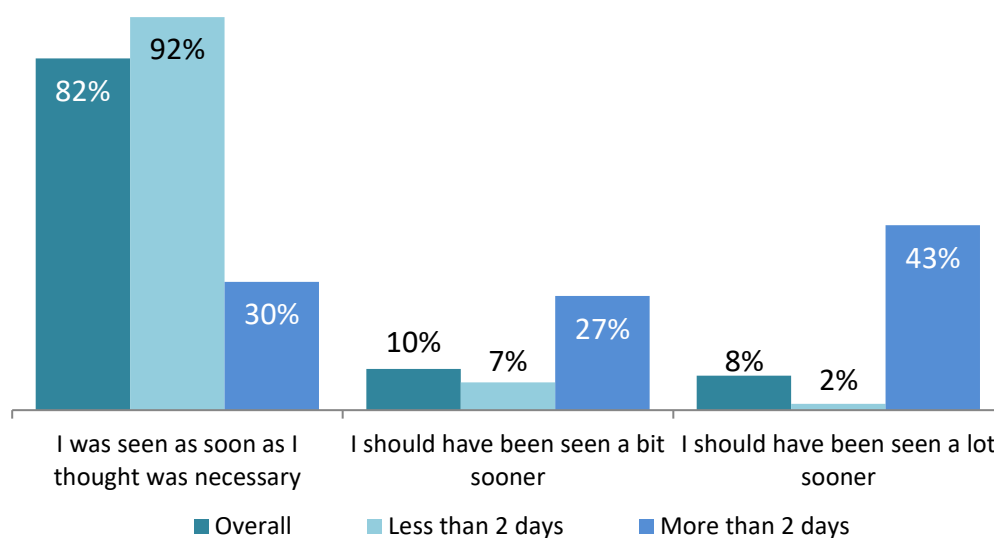


Among the respondents who had tried to access the service at short notice, over four-fifth (84%) had been seen within this time (i.e. on the same day or within two days of the service being open). Despite attempting to access the service within 2 days, 2% of respondents had waited for between one and two weeks before they had been able to access the service, with a further 2% having to wait for between two and four weeks.

Respondents who were seen at short notice (i.e. within 2 days) – by service area		
Service Area	Base	<2 days
Integrated Sexual Health Services	100	93%
Nursing and Conditions	77	88%
City Health Dental	35	83%
Primary Care & APMS	164	79%

Although an attempt was made to access the service at short notice, not all services were able to offer the respondent an appointment within this time scale. The likelihood that the individual had been seen at short notice was higher within Integrated Sexual Health Services (93%) and Nursing and Conditions (88%) than it was within City Health Dental (83%) and Primary Care & APMS (79%).

How do you feel about the length of time it took to access the service? (Base: 385)



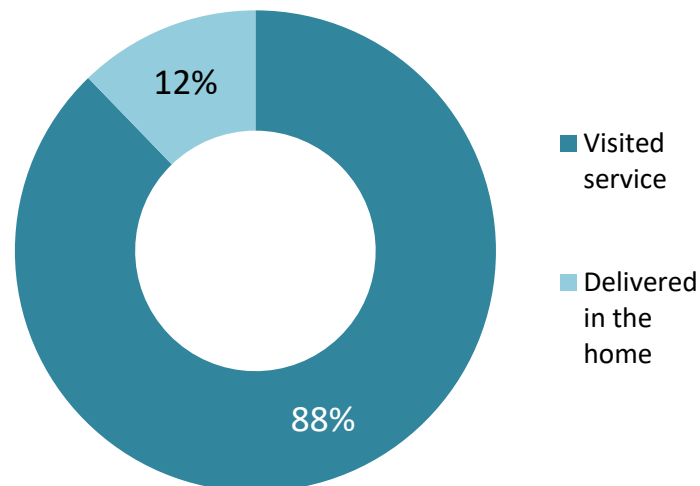
Overall, over four-fifths (82%) of respondents felt they had been able to access the service as soon as was necessary, with this response increasing to 92% among those who had been seen within 2 days.

Although the individuals had not been able to access the service within the 2 days they had anticipated, just under a third (30%) still felt they were seen as soon as they felt necessary with 43% that said they should have been seen a lot sooner.

## 6.6 Service Experience

### 6.6.1 Location and Facilities

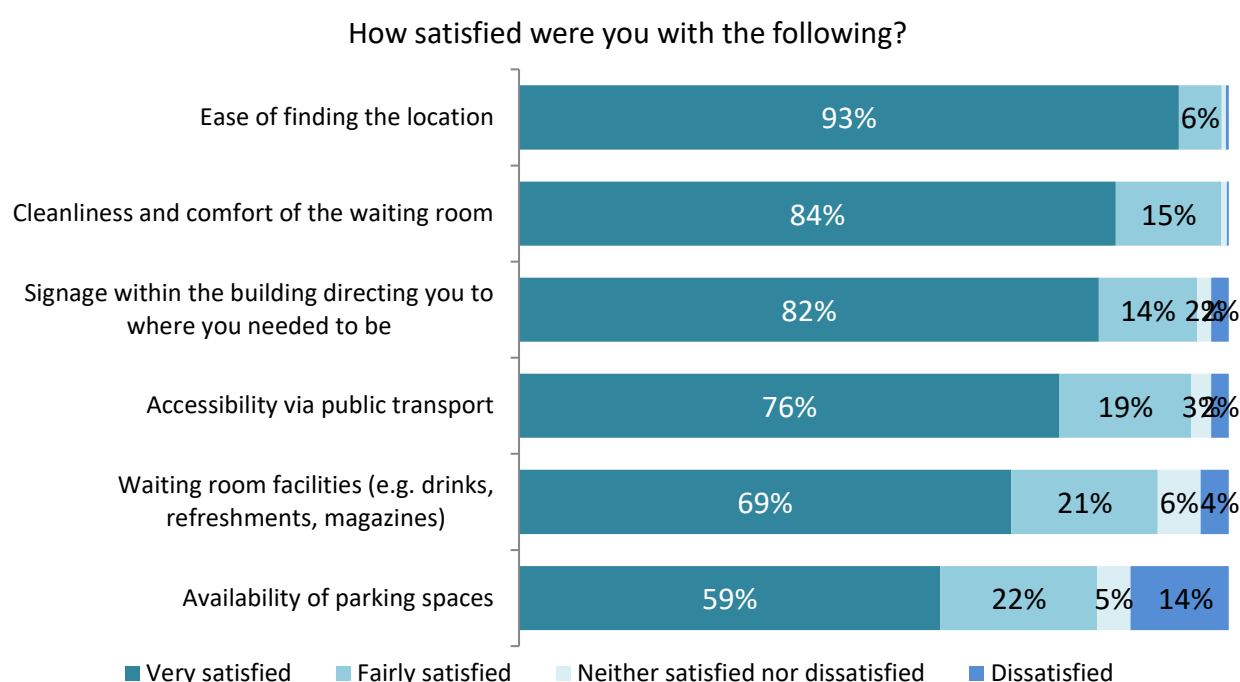
Did you visit the service or was the service delivered in your home? (Base: 385)



Just over a tenth (12%) of respondents indicated that the service was delivered to them in their home with the remaining 88% stating they visited the service. Respondents aged 55-64 (20%) and 65-74 (22%), respondents with a disability (23%) and those that had accessed the service more than 11 times (34%) were the most likely to have the service delivered at home.

Respondents who had accessed a service which was delivered within a CHCP building or another building within the community, were asked for their opinion of the location and the facilities which were provided.

It should be noted that several of these patient experience aspects cannot be directly influenced by CHCP CIC such as public transport accessibility and parking spaces due to current location and contractual agreements.



The vast majority (99%) of respondents were satisfied with the ease of finding the location, with over nine-tenths (93%) that stated they were very satisfied; less than 1% of respondents expressed any level of dissatisfaction towards the ease in which they were able to find the location.

Responses of very satisfied were also high when considering the cleanliness and comfort of the waiting room (84%) and signage within the building (82%), and for both aspects dissatisfaction was low (<1% and 2% respectively).

Responses of very satisfied fell to around three-quarters in regards to the accessibility via public transport (76%) with satisfaction with the waiting room facilities lower still (69%), however, when responses of very and fairly satisfied are combined around nine-tenths of respondents expressed satisfaction towards these aspects of the service (95% and 90% respectively).

Although still high, fewer respondents expressed satisfaction towards the availability of parking spaces (82%), with 59% stating they were very satisfied. Over a tenth (14%) of respondents said they were either fairly dissatisfied with the parking or not satisfied at all.

Respondents who had accessed the service more frequently over the past year tended to be less positive towards the availability of parking spaces with only 74% of those that visited the service between 4 and 10 times and 76% of those that visited the service more than 11 times satisfied with parking spaces available. Amongst those that had visited the service only once in the past year 90% were satisfied with the availability of parking spaces.

Satisfaction with location and facilities – by service area											
Statement	0-19 Service	Chronic Community Pain Management	City Health Dental	Integrated Paediatrics & Nursing Services	Integrated Sexual Health Services	Integrated Urgent Care	Let's Talk	Nursing and Conditions	Primary Care & APMS	Public Health Hull & NW	Rehabilitation and Therapies
Ease of finding the location	100	100	98	97	97	98	98	99	100	100	100
Availability of parking spaces	51	71	46	88	93	88	88	82	75	92	87
Accessibility via public transport	100	100	79	88	97	93	97	100	99	100	91
Signage within the building directing you to where you needed to be	88	100	97	98	92	94	96	99	98	90	97
Cleanliness and comfort of the waiting room	100	100	100	98	98	99	98	98	100	100	99
Waiting room facilities (e.g. drinks, refreshments, magazines)	84	83	84	79	79	91	83	98	90	100	95

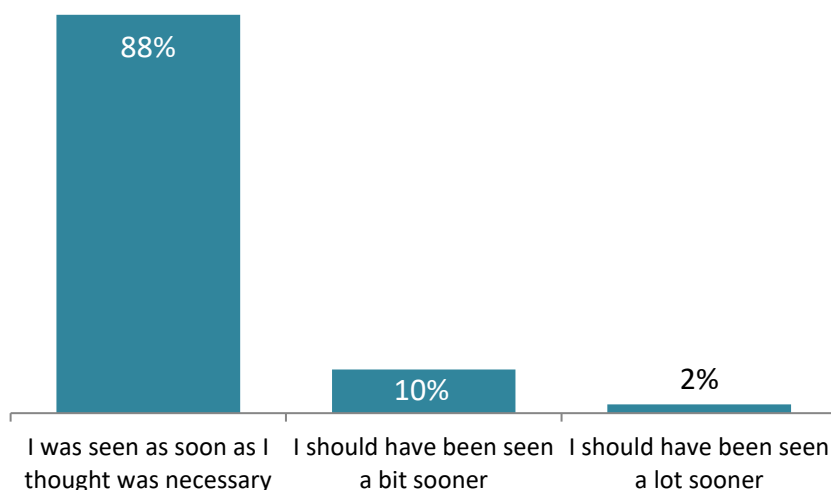
Respondents who had accessed a service within Nursing and Conditions and Public Health Hull & NW were most positive about the location and facilities in which the service had been delivered, closely followed by Rehabilitation and Therapies.

Respondents accessing a service within City Health Dental and 0-19 Services tended to be the least positive towards the location and facilities with satisfaction being low within City Health Dental towards the availability of parking spaces (46%) and accessibility via public transport (79%) and low within 0-19 services towards the parking spaces available (51%) and signage within the building (88%).

Satisfaction towards the waiting room facilities, such as drinks, refreshments and magazines was over a tenth lower than average for respondents who accessed a service within Integrated Paediatrics & Nursing Services and Integrated Sexual Health Services (both 79%).

## 6.6.2 Waiting Times

On the last occasion of accessing the service, how do you feel about the length of time that you had to wait to be seen? (Base: 1966)



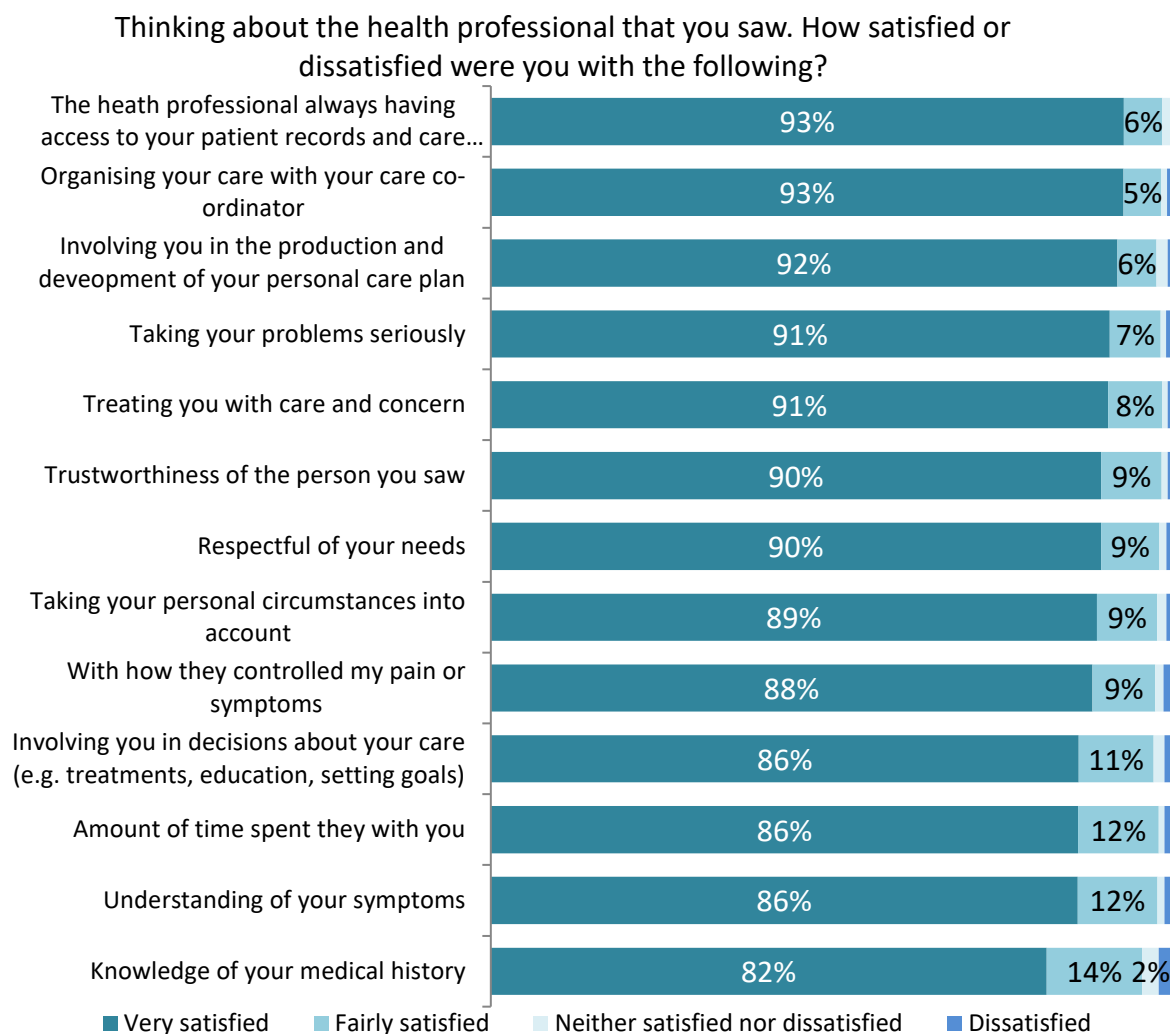
The majority (88%) of respondents had been seen as soon as they felt was necessary. Among the 12% of respondents who felt that they should have been seen sooner only 2% said that they should have been seen a lot sooner.

Younger respondents were less likely to say they were seen in a timely manner, with only 76% of those aged 18-24 and 80% of those aged 25 to 34 that said they were seen as soon as necessary, whereas those 55-64 (95%), 65-74 (95%), 75 to 84 (98%) and 85 and over (100%) were most likely to say they were seen as soon as necessary.

BME respondents were less inclined to have said they were seen as soon as they thought was necessary (76%), whereas those with a disability (94%) were more likely to say they were seen as soon as necessary.

All respondents who had accessed a Chronic Community Pain Management and Public Health Hull & NW said that they had been seen as soon as they thought was necessary, with almost all of those who accessed Integrated Paediatrics & Nursing Services (98%), Let's Talk (98%), Nursing and Conditions (96%) and Rehabilitation and Therapies (99%) that felt they were seen as soon as they thought necessary. Respondents who accessed Integrated Sexual Health Services (26%) and Integrated Urgent Care (23%) were most likely to say they should have been seen sooner.

### 6.6.3 The Health Professional



Positivity towards all aspects of the service provided by the health professional was high, with satisfaction exceeding 95% and dissatisfaction being 2% or lower for each statement that was considered.

When considering responses of very satisfied seven out of the thirteen statements achieved satisfaction levels equal to, or above, 90%. Responses of very satisfied were particularly high with the health professional always having access to their patient records and care plan and the ability to organise their care with their co-ordinator (93%).

Respondents least frequently said that they were very satisfied with the health professional's knowledge of their medical history, with 82% reporting that they had been very satisfied.

BME respondents indicated lower levels of very satisfied towards all statements around the health professional they saw when compared to White respondents. Respondents with a disability were more likely to be very satisfied towards the health professional they saw than those without a disability. Respondents aged 18-24 and 25 to 34 tended to be less positive towards statements surrounding the health professional they saw, whereas those aged 55 to 64 and 65-74 were the most positive.

Respondents who had the service delivered at home indicated higher levels of satisfaction (when considering both very and fairly satisfied and just responses of very satisfied) towards all statements regarding the health professional they saw when compared to those that visited the service.

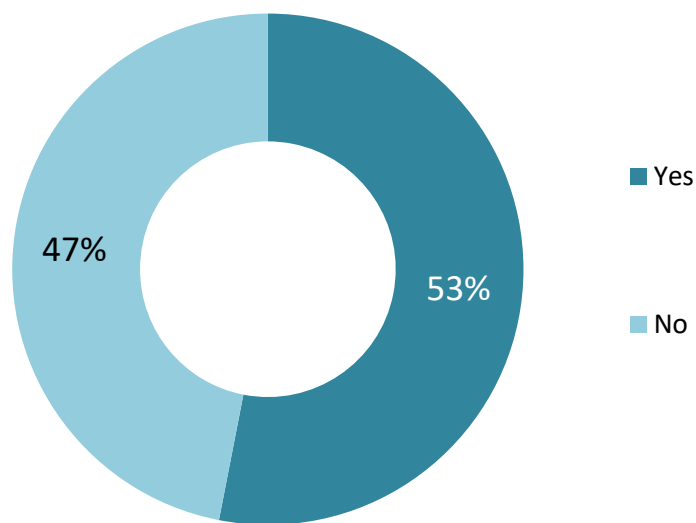


Satisfaction with the health professional – by service area											
Statement	0-19 Service	Chronic Community Pain Management	City Health Dental	Integrated Paediatrics & Nursing Services	Integrated Sexual Health Services	Integrated Urgent Care	Let's Talk	Nursing and Conditions	Primary Care & APMS	Public Health Hull & NW	Rehabilitation and Therapies
Amount of time spent they with you	100	100	97	98	94	98	98	99	97	100	99
Knowledge of your medical history	97	100	95	96	85	94	98	98	93	100	98
Understanding of your symptoms	100	100	100	95	95	99	98	98	95	100	98
Involving you in decisions about your care	100	100	94	96	93	97	100	98	95	100	99
Treating you with care and concern	100	100	100	95	96	97	100	99	98	100	100
Taking your problems seriously	100	100	100	97	96	98	100	99	96	100	99
Respectful of your needs	100	100	95	98	97	97	100	99	96	100	99
Taking your personal circumstances into account	98	100	100	98	95	96	100	99	95	100	99
Trustworthiness of the person you saw	100	100	100	98	94	97	96	99	97	100	100
Organising your care with your care co-ordinator	-	100	-	-	100	98	-	98	-	-	99
The health professional always having access to your patient records and care plan	-	100	-	-	100	99	-	97	-	-	100
With how they controlled my pain or symptoms	-	100	-	-	100	97	-	98	-	-	97

Satisfaction was very high for each aspect of the service delivered by the health professional; all respondents (100%) who had accessed a service within Chronic Community Pain Management and Public Health Hull & NW expressed a level of satisfaction towards each aspect of the health professional.

Satisfaction levels were consistently above 90% across all service areas and for all statements considered. The one exception to this was within Integrated Sexual Health Services where satisfaction the health professionals' knowledge of their medical history was only at 85%.

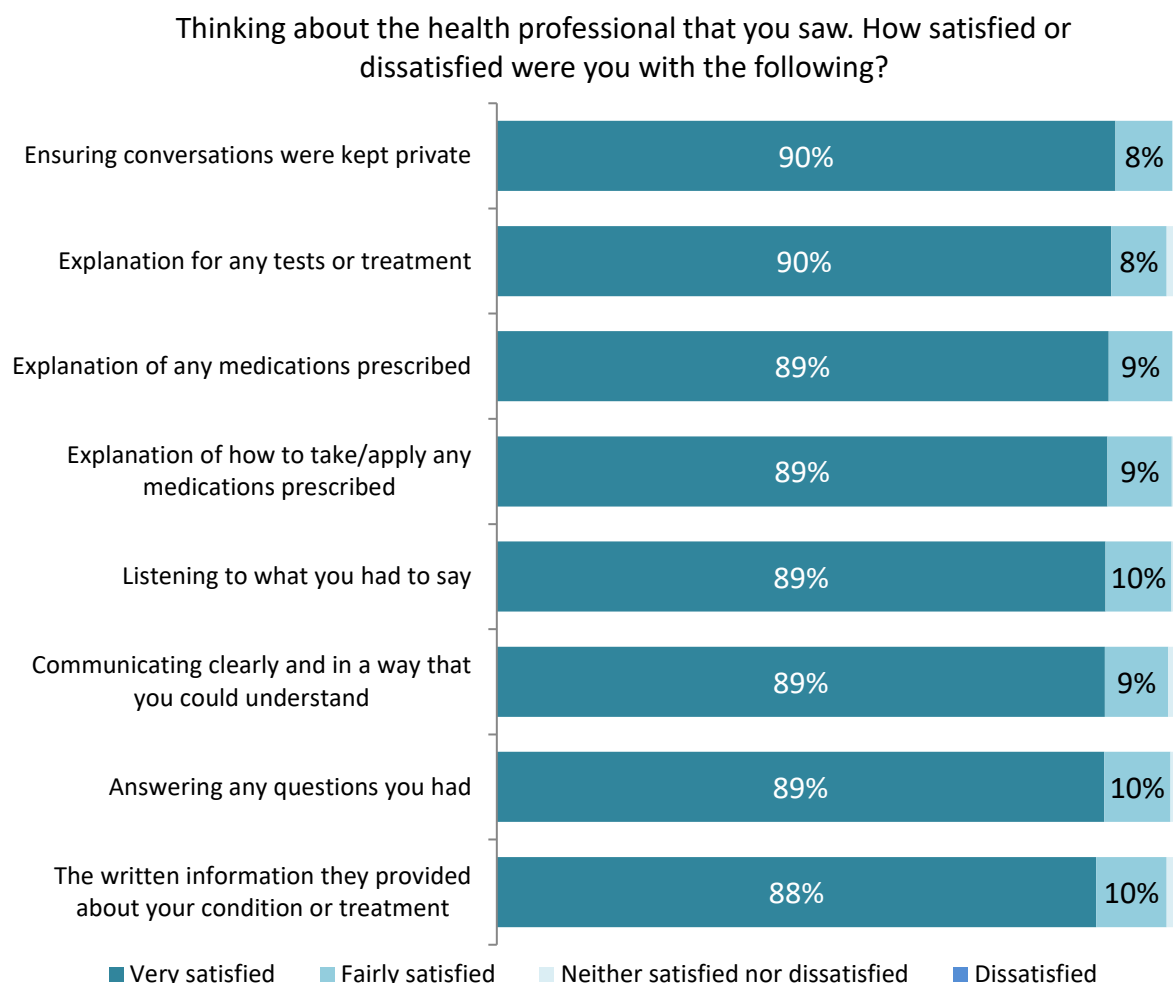
Have you experienced a reduction in the number of times you have had to tell your story to different services of health professionals? (Base: 995)



Over half of respondents (53%) stated they had experienced a reduction in the number of times they had to tell a different story to different services or health professionals. Respondents who accessed the service between 2-3 times (57%) and 6-10 times (55%), those that visited the service (56%), respondents with a disability (56%) and those aged 55 to 64 (58%), 75 to 84 (59%) and 85 and over (64%) were the most likely to indicate a reduction in the number of times they had to tell their story to different services or health professionals.

Respondents who accessed a service within Chronic Community Pain Management (90%), Integrated Urgent Care (55%) and Rehabilitation and Therapies (55%) were more likely to have experienced a reduction in the number of times they have had to tell their story to different services or health professionals.

#### 6.6.4 Communication by the Health Professional



Satisfaction with the health professional's communication was very high, with each aspect indicating satisfaction levels of at least 98%. For all six aspects concerning the health professional's communication around nine-tenths (between 88% and 90%) of respondents reported that they were very satisfied. Dissatisfaction levels did not exceed 1% for any of the statement surrounding the communication from the health professional.

Respondents aged 18-24 were less positive when thinking about the health professionals' communication with responses of very satisfied being significantly lower among this age group towards all statements. Those aged 55 to 64 and 65-74 were the most positive about how well the health professionals' communicated.

Satisfaction with the communication from the health professional – by service area											
Statement	0-19 Service	Chronic Community Pain Management	City Health Dental	Integrated Paediatrics & Nursing Services	Integrated Sexual Health Services	Integrated Urgent Care	Let's Talk	Nursing and Conditions	Primary Care & APMS	Public Health Hull & NW	Rehabilitation and Therapies
Answering any questions you had	98	99	100	98	100	96	98	97	99	92	100
Listening to what you had to say	98	99	100	97	100	96	98	100	98	94	100
Communicating clearly and in a way that you could understand	98	99	100	98	100	97	99	100	99	93	100
Ensuring conversations were kept private	98	98	100	98	100	96	99	99	99	95	99
Explanation for any tests or treatment	98	99	98	97	100	96	97	98	99	94	100
The written information they provided about your condition or treatment	96	98	98	98	100	93	97	98	99	89	100

Satisfaction with the communication from the health professional was high across all service areas, with all respondents (100%) accessing a service within Integrated Sexual Health Services expressing satisfaction with each aspect. Satisfaction levels were also noticeably high within Chronic Community Pain Management, City Health Dental, Nursing and Conditions, Primary Care & APMS and Rehabilitation and Therapies.

Although still high, levels of satisfaction were slightly lower within Public Health Hull & NW when compared to other service areas, most notably with the written information provided by the health professional about their condition or treatment (89%).

### 6.6.7 Feedback on the Health Professional

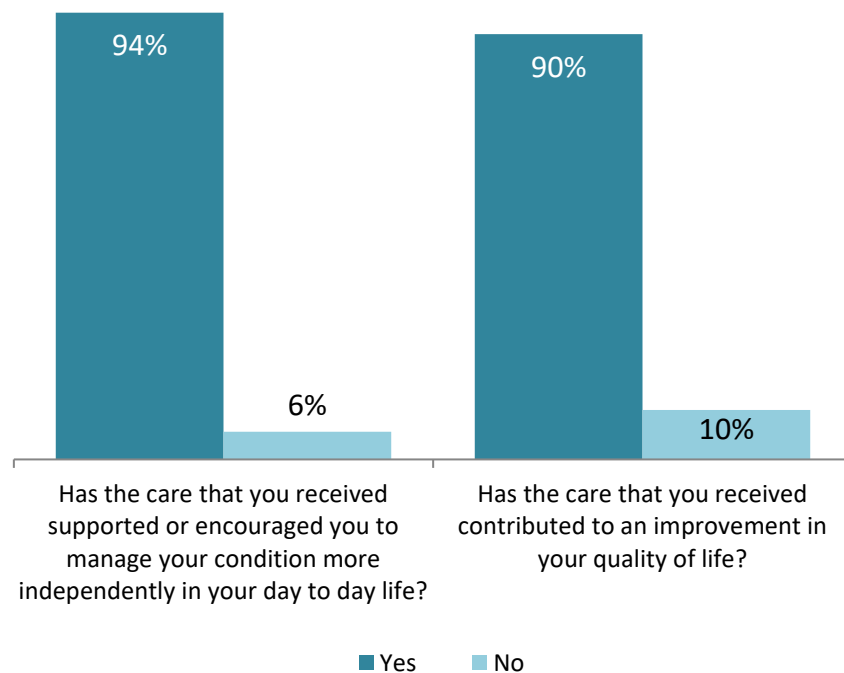
What, in particular, was good about the service you received from the health professional?		
Response	Number	Percentage
Nice manner / friendly staff	886	40.1%
Provided information / answered questions / referred to service	548	24.8%
Helpful / resolved my issue / got medication	473	21.4%
Professional	367	16.6%
Understanding / listened	336	15.2%
Caring / supportive	289	13.1%
Quick / efficient service / seen straightaway	223	10.1%
Reassuring / put me at ease	209	9.5%

When asked what in particular was good about the health professional, two-fifths of respondents commented on the member of staff's manner and friendliness. A quarter of respondents also mentioned that the health professional had provided information and / or answered any questions and / or referred them to a service, with slightly less that said the health professional had been helpful / resolved their issue (21%). Just under a fifth said the service from the health professional was professional (17%) or that they were understanding and listened (15%).

Is there anything that they could have improved?		
Response	Number	Percentage
No / nothing / don't think so	1942	88.0%
Reduce waiting times	60	2.7%
More GP's / nurse's / health professional / staff	26	1.2%
Better communication and listening	26	1.2%
Don't know / no comment / not sure	25	1.1%
Improve appointment system and availability of appointments	23	1.0%
Spent more time with me	16	0.7%

Respondents were then asked what the health professional could have improved, to which the majority (88%) of respondents said they had no suggestions for improvements. Of those that did have a suggestion on how to improve the service the most commonly suggested improvement was to reduce waiting times (3%).

## 6.7 Self Care



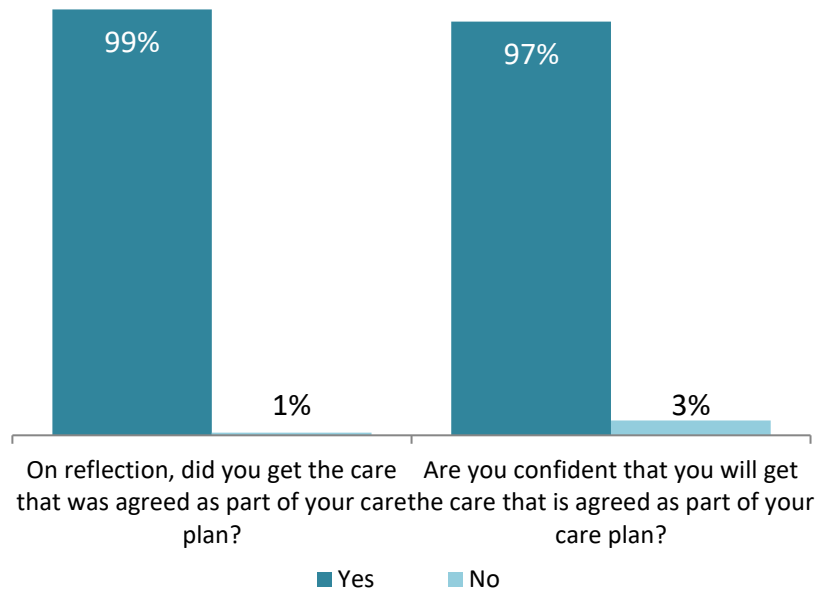
Over nine-tenths (94%) of respondents felt the care they received either supported or encouraged them to manage their condition more independently in their day to day life; the remaining 6% disagreed. Although still high, slightly fewer (90%) felt the care received contributed to an improvement in their quality of their life.

Females (96%) were more likely than males (92%) to have said they care they received helped them manage their condition more independently in their day to day life. Those aged 85 and over (97%) and 55 to 64 (97%) and those that had visited the service between 6 and 10 times (97%) were the most likely to have said the care received has helped them manage their condition more independently.

All of those (100%) who had used a service within Chronic Community Pain Management said they were supported or encouraged to manage their condition more independently and 97% of those that used Nursing and Conditions said this was the case, however, only 88% of those accessing Integrated Urgent Care said the care helped them manage their condition more independently.

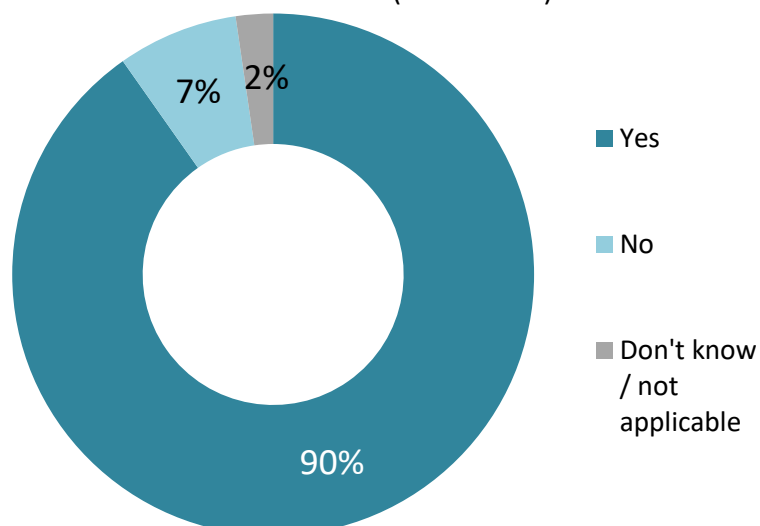
Respondents aged 75 to 84 and 85 and over (both 94%) more frequently said the care they received contributed to an improvement in their quality of life whereas only 85% of those aged 55 to 64 said they care had improved their quality of life. Those that had the service delivered at home (86%) were less agreeable that the care contributed to an improved quality of life compared to those that had visited the service (91%).

Respondents accessing a service within Chronic Community Pain Management (96%) were more likely to have stated the care received has contributed to an improvement in their quality of life compared to users accessing Integrated Urgent Care (88%) and Nursing and Conditions (89%).



The vast majority of respondents said that they got the care that was agreed as part of their care plan (99%) or they were confident that they would get the care that was agreed as part of their care plan (97%).

Has the care that you received resulted in a positive outcome for you either in physical, psychological or social terms? (Base: 1259)

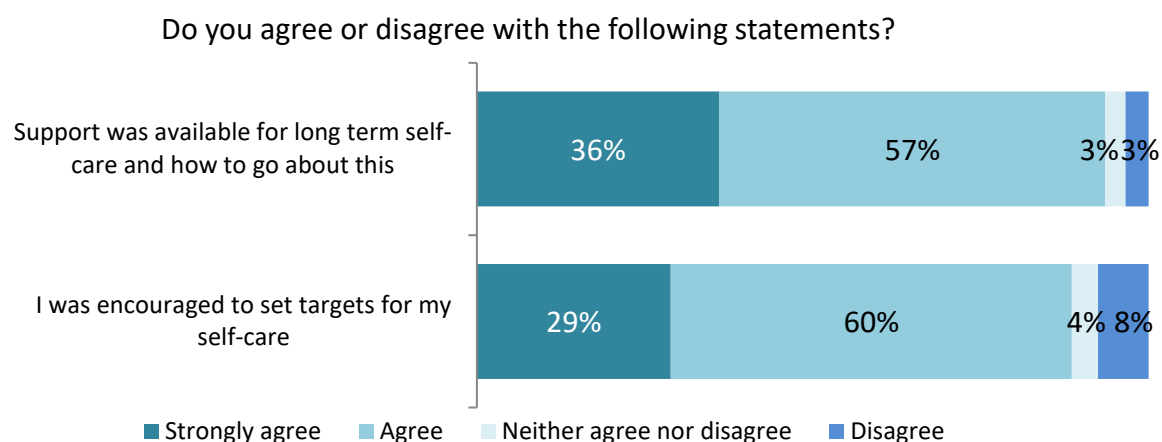


Nine-tenths of respondents felt the care received has resulted in a positive outcome for them in physical, psychological or social terms; with 7% that did not feel this was the case.



Respondents aged 25 to 34 (84%) and 75 to 84 (85%) were less likely to have agreed that the care received has resulted in a positive outcome when compared to those aged 85 and over (95%), 18 to 24 (94%) and 45 to 54 (94%). Respondents who had used the service between 2-3 times and 4-5 times (both 93%) more frequently said the care received had resulted in a positive outcome for them in either physical, psychological or social term, whereas those that had accessed the service just the once (86%) less frequently said this was the case.

Those accessing a service within Nursing and Conditions (88%) were less likely to have agreed that the care received has resulted in a positive outcome in contrast to respondents accessing a service in Chronic Community Pain Management (97%) and Rehabilitation and Therapies (92%).

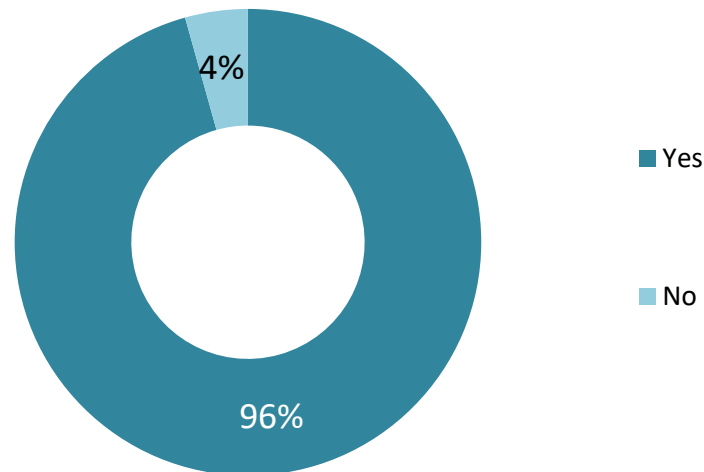


Over nine-tenths (93%) agreed that support was available for long term self-care, with over a third (36%) that strongly agreed with this. Agreement was also high that the respondent was encouraged to set targets for their self-care (89%) with over a quarter (29%) that strongly agreed with this statement. Disagreement was below a tenth for both statements (4% and 8% respectively).

Female respondents were more likely than male respondents to agree with both statements about support and encouragement for self-care. Respondents who visited a service within Nursing and Conditions were also more likely to be in agreement.

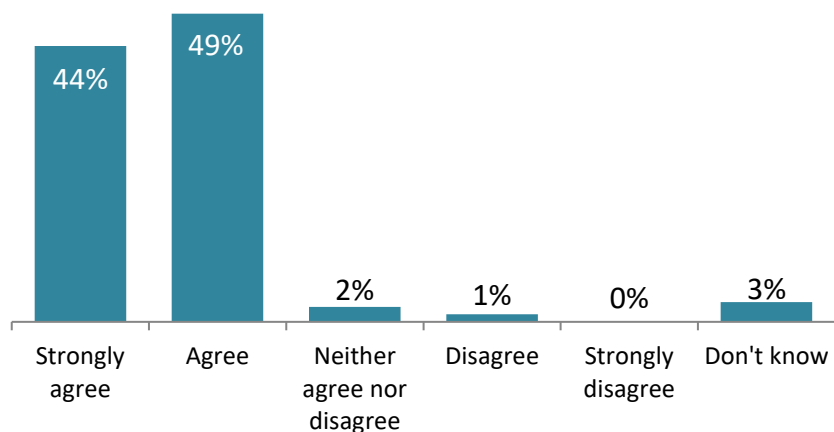
### 6.7.2 Urgent Care & Podiatry Care

Has the care that you received helped you understand how to self-care and access appropriate alternative services to urgent care? (Base:138)



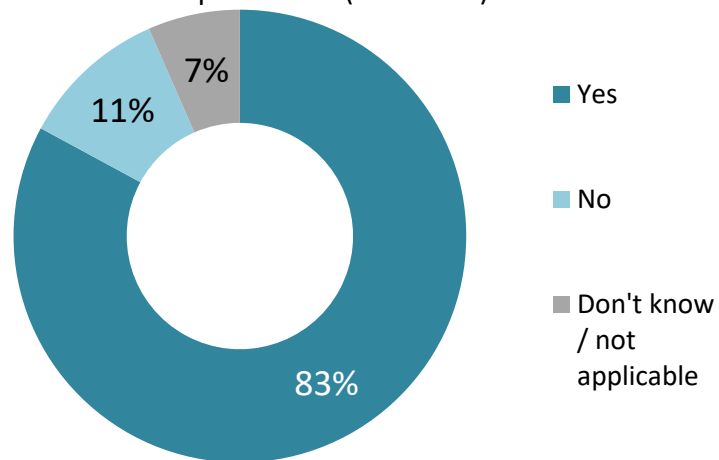
The majority (96%) of Urgent Care service users indicated that the care they had received had helped them understand how to self-care and access appropriate alternative services to urgent care, with the remaining 4% saying that it had not helped them do so.

To what extent do you agree or disagree that your urgent care need been met? (Base: 252)



Just under half (44%) of Urgent Care users strongly agreed that their urgent care needs had been met, with a further 49% that agreed this was the case. Just 1% felt their urgent care needs were not met.

Have you received information or advice on the care of your feet to help prevent any complications? (Base: 152)

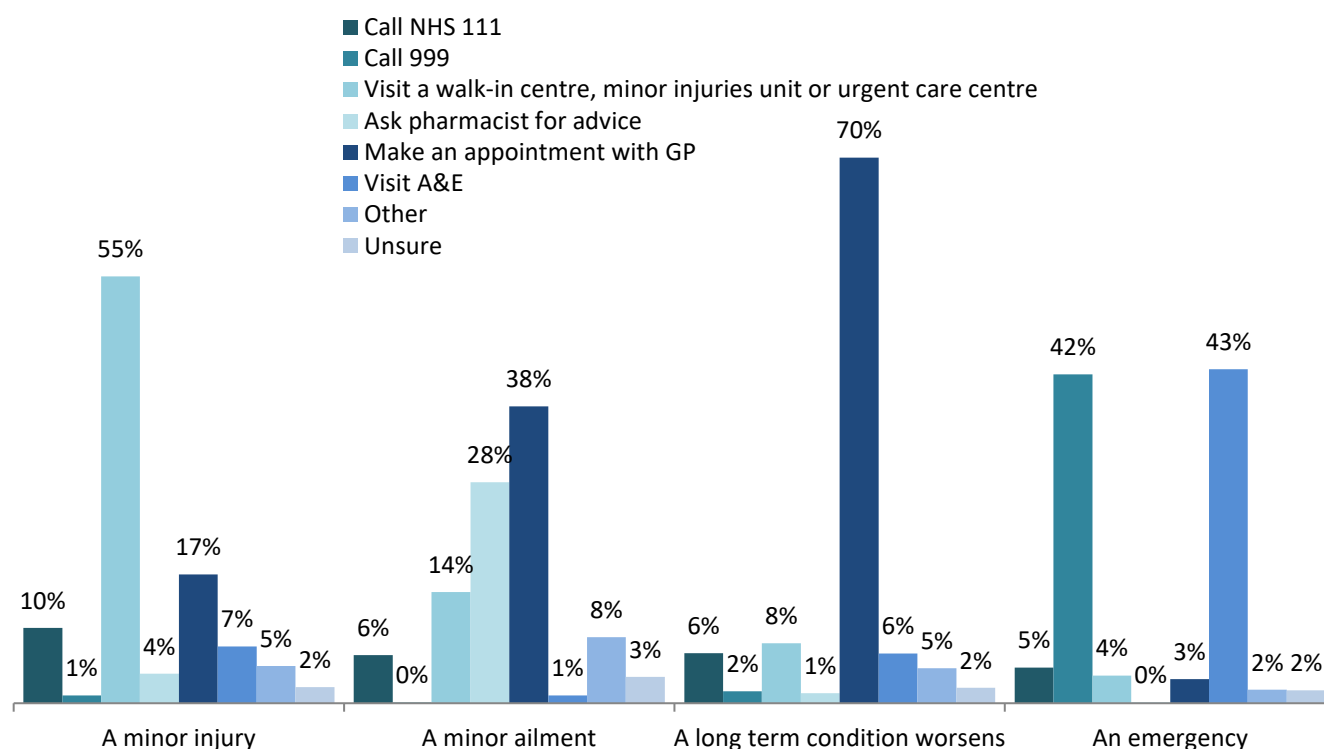


The majority of respondents (83%) that received podiatry care stated that they had received advice on the care of their feet to prevent any complications, with just over a tenth (11%) that said they had not received any information or advice.

Male respondents (87%) were more likely to have stated they had received some information or advice on their foot care compared to just 79% of female respondents. Those aged 65-74 (89%) were also more likely to have received information and advice to prevent and complication with their feet.

### 6.7.3 Points of Contact

Please state who you would contact / where you would go in the event of sustaining / experiencing the following...?

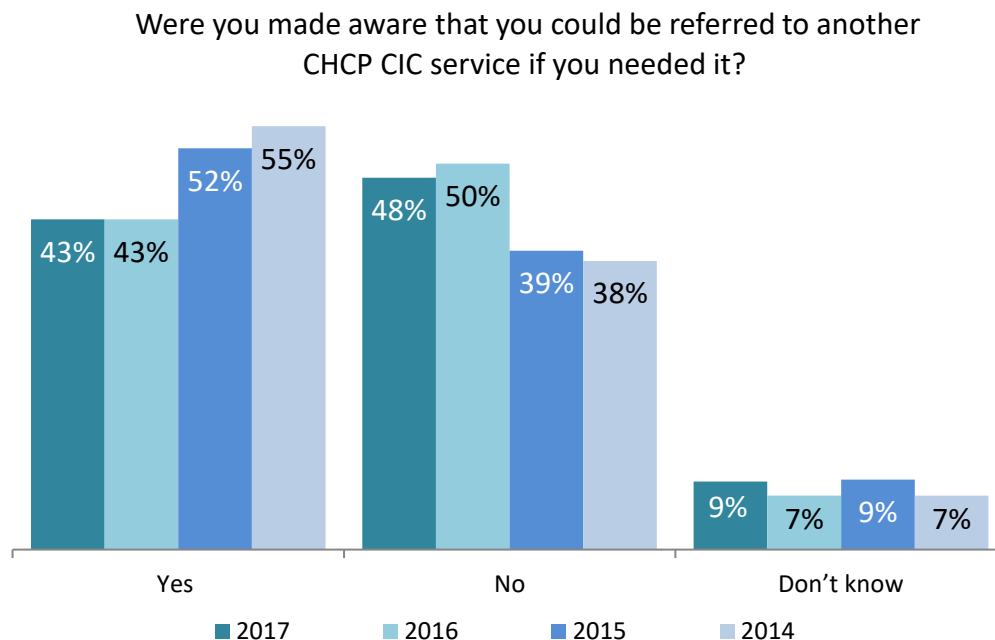


Over half (55%) stated they would visit a walk in centre in the event of a minor injury with just under a fifth (17%) that said they would make an appointment with a GP and a tenth that would call NHS 111. In the event of a minor ailment the most common response was that the individual would make an appointment with their GP (38%), with just over a quarter stating they would ask a pharmacist for advice (28%) and over a tenth (14%) said they would visit a walk-in centre, minor injuries unit or urgent care centre.

In the event of a long term condition worsening the majority said they would make an appointment with a GP (70%); no other response received more than a tenth. In the event of an emergency responses were split, almost evenly, between those saying they would call 999 (42%) and those that would visit A&E (43%).

## 6.8 Making Every Contact Count (MECC)

### 6.8.1 Awareness of Referral Process



Less than half (43%) of respondents were informed that if a need was identified they could be referred to another CHCP CIC service, with slightly more (48%) that said they were not informed of this. When compared with 2016, there has been no change in the proportion of respondents who indicated that said they had been informed that they could be referred, however, when compared to 2014 there has been a decline of over a tenth in those that had been informed they could be referred (-12%).

Being informed that the individual could be referred to another service tended to increase with the frequency in which the service had been used, with a third of respondents who had used the service on one occasion saying they had been informed compared with 54% of those who had used the service eleven or more times.

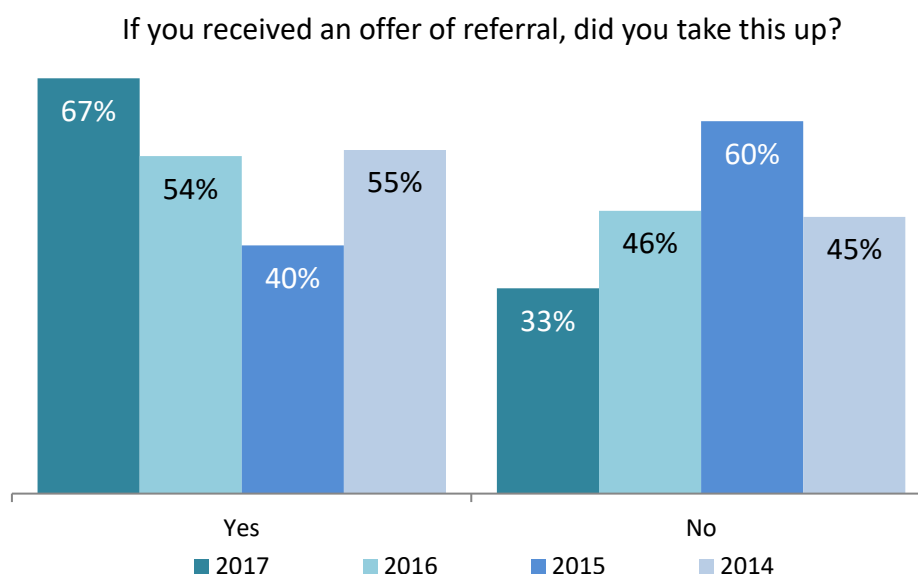
Female respondents (45%), respondents with a disability (47%) and white respondents (44%) were more likely to be aware they could be referred to another CHCP CIC service if needed when compared to male respondents (40%), respondents without a disability (40%) and BME respondents (24%).

Around half of respondents aged 45-54 (49%) and 55-64 (48%) were aware they could be referred to another CHCP CIC service if needed, however this dropped considerably when considering those aged 18-24 (35%), 75 to 84 (25%) and 85 and over (28%). Respondents who had the service delivered at home (55%) were also more likely than those that visited the service (41%) to know they could be referred to another CHCP CIC service.

Respondents who were made aware they could be referred to another CHCP CIC service if needed – by service area		
Service Area	Base	Aware
Let's Talk	50	68.0%
Rehabilitation and Therapies	359	50.1%
Nursing and Conditions	378	48.7%
Primary Care & APMS	291	48.1%
Integrated Sexual Health Services	175	42.9%
Public Health Hull & NW	61	42.6%
City Health Dental	117	32.5%
Integrated Urgent Care	368	27.7%
Chronic Community Pain Management	44	20.5%

Reporting that the health professional had explained that, if needed, a referral to another service could be made was significantly higher among those who had used services within Let's Talk (68%). Awareness was also high amongst those that had used rehabilitation and Therapies (50%), Nursing and Conditions (49%) and Primary Care & APMS (48%). In contrast, less than a third of respondents who had used City Health Dental (33%), Integrated Urgent Care (28%) and Chronic Community Pain Management (21%) services said that they had been informed that a referral could be made.

## 6.8.2 Referral Offers



Among those who received a referral offer, two-thirds said that they had taken up the offer; meaning a third had not.

When compared with 2016 there has been a significant increase in respondents who had taken up the offer of being referred to another service, with acceptance of the referral offer increasing from 54% to 67% during this period. Acceptance of the referral offer is now at the highest it has been at since 2014 when it was at 55%.

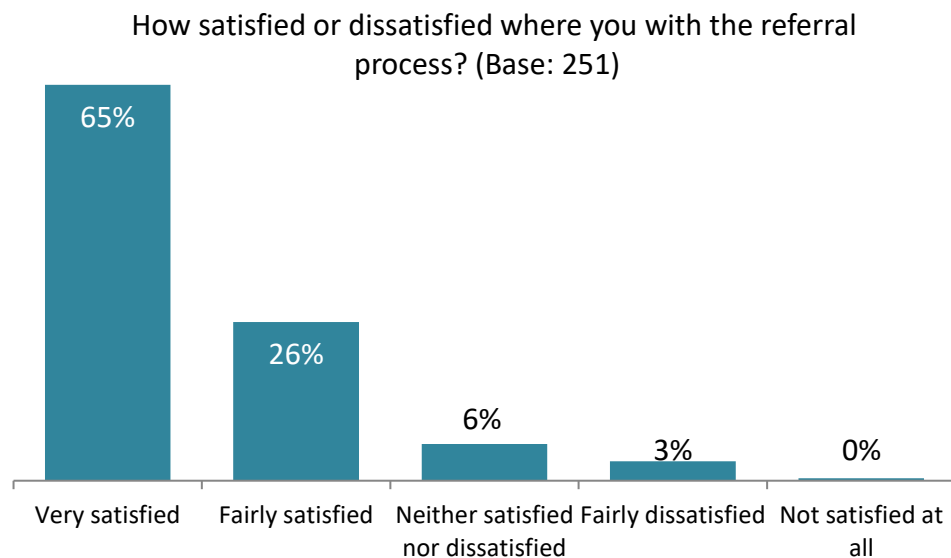
Respondents who did not accept the offer of referral mostly said this was due to them not feeling that they needed to use the service (87%). A few respondents had not accepted the referral as they were already receiving the service from another provider (7%) or they did not have time to access the service that was recommended (2%).

Female respondents (68%), those that visited the service (68%) and respondents with a disability (71%) most frequently said that they had accepted an offer of referral; fewer male respondents (64%), those that had the service delivered at home (63%) and respondents who did not have a disability (63%) had taken up a referral offer which was made.

The likelihood that the individual had taken up an offer to be referred to another service varied by age, with 75% of respondents aged 35 to 44 and 65 to 74 saying they had taken up a referral offer compared with 55% of those aged 55 to 64.

Respondents who had only accessed the service once (52%) or 6-10 times (65%) were less likely to take up an offer of referral whereas those accessing the service 2-3 times (71%), 4-5 times (74%) and 11 or more times (71%) were more likely to have taken up the offer of a referral.

### 6.8.3 Experience of the Referral Process



Among the 251 respondents who had accepted the offer to be referred to another service, nine-tenths reported that they had been satisfied with the process; 65% very satisfied and 26% fairly satisfied. Only 4% of respondents reported any level of dissatisfaction towards the referral process.

Males (98%) were over a tenth more satisfied with the referral process when compared to females (87%). Those aged 55 to 64 (97%) tended to express higher levels of satisfaction with the referral process when compared to those aged 65 to 74 (87%) and 18 to 24 (79%).

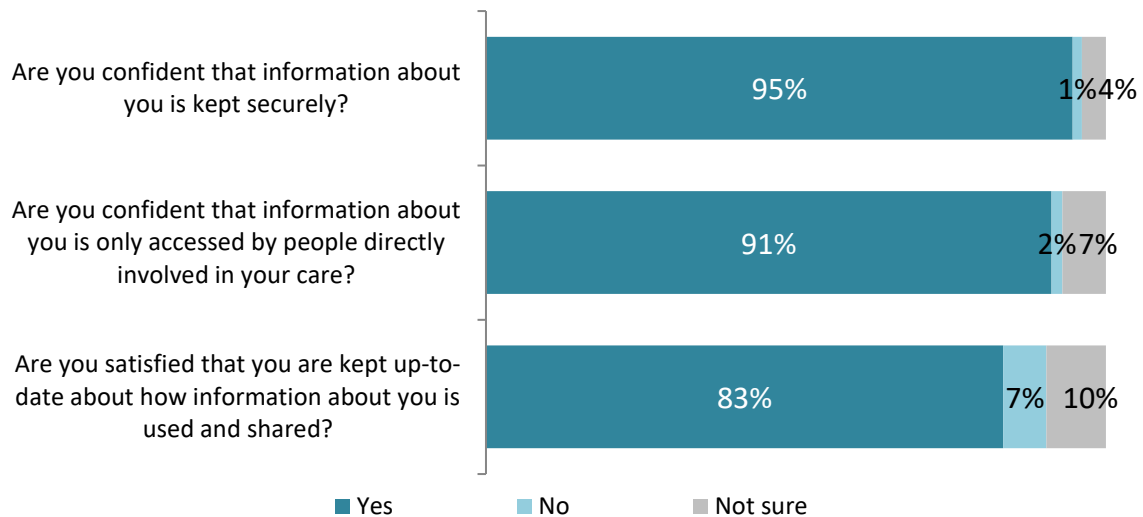
Nearly all (99%) of respondents who accessed the service 2-3 times were satisfied with the referral process, whereas amongst those that had visited the service either once or 4-5 times it was only 82% and 83% respectively.

Around four-fifths (81%) of respondents accessing Integrated Urgent Care were satisfied with the referral process whereas satisfaction was higher within Nursing and Conditions, Primary Care & APMS and Rehabilitation and Therapies (all 93%) with the referral process.



## 6.9 Communication and Information

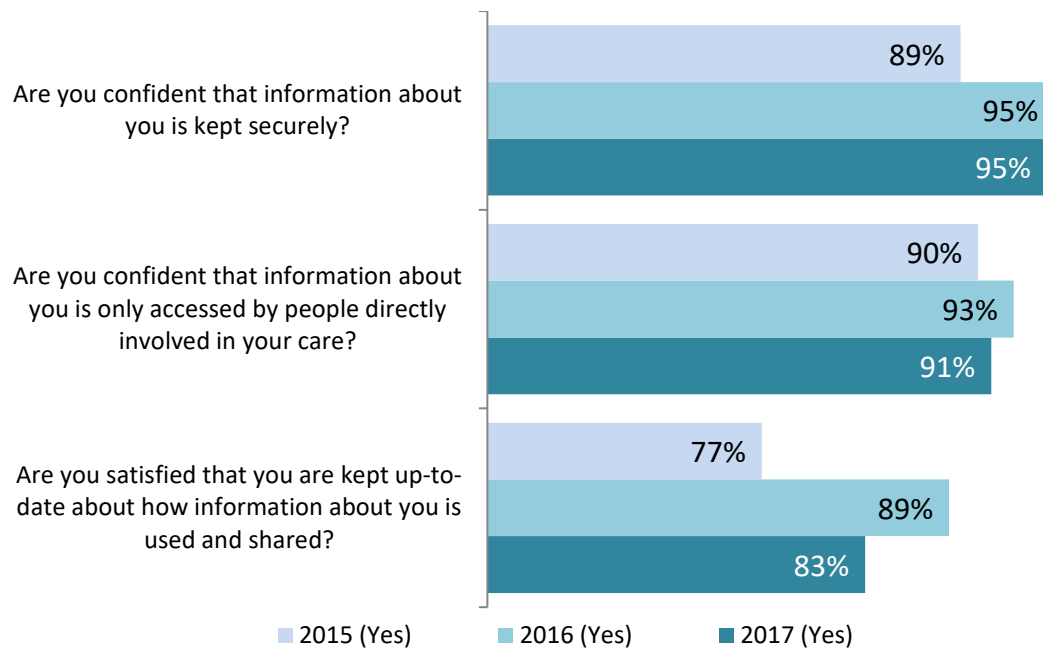
### 6.9.1 Information Governance



Over nine-tenths (95%) of respondents were confident that information about them is kept securely with slightly less that stated they were confident that information about them is only accessed by people directly involved in their care (91%). Disagreement was low for both of these statements with only 1% that said they were not confident that information about them is kept securely and 2% that were not confident that information about them is only accessed by people directly involved in their care.

Just over four-fifth (83%) said they were satisfied that they were kept up-to-date about how information about them is used and shared; 7% said they were not satisfied this was the case and a tenth said they were not sure.

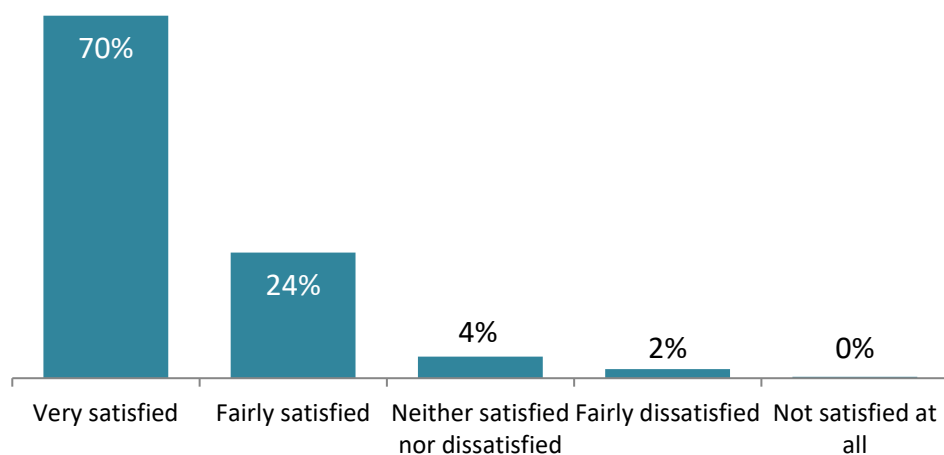
Respondents who had accessed 0-19 Services, Integrated Paediatrics & Nursing Services, Integrated Sexual Health Services and Public Health Hull & NW expressed higher levels of confidence towards information governance; in contrast respondents who had used Integrated Urgent Care were less confident towards information governance. Females also tended to be more confident towards information governance when compared to males.



When compared to 2016 there has been an decrease in positive perception towards all three statements on Information Governance, most notable has been an decrease in satisfaction that the individual is kept up-to-date about how information about them is used and shared (-6%). Despite this positive perception is still higher towards all three statements when compared to 2015.

## 6.9.2 Providing Feedback

How satisfied are you with the opportunities to give feedback about the service or make a complaint? (Base: 2136)



Seven-tenths of respondents were very satisfied with the opportunities they were given to provide feedback on the service or to make a complaint. A further 24% were fairly satisfied with the provision of opportunities. Only 2% of respondents said they were dissatisfied with the opportunities which they were given to provide feedback or make a complaint, while a further 4% reported being neither satisfied nor dissatisfied.

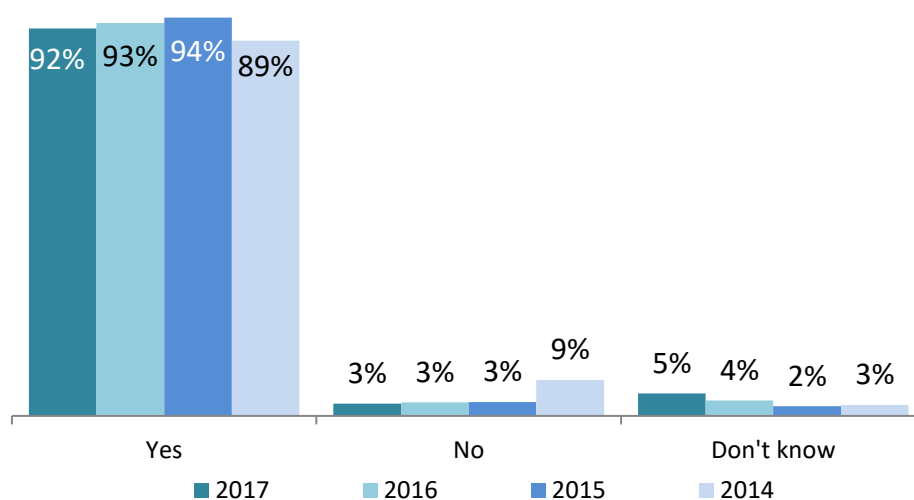
Younger respondents tended to be less satisfied with opportunities to provide feedback with 89% of those aged 18-24 and 91% of those 25-34 satisfied compared with 99% of those aged 55-64 and 98% of those aged 75-84. Those that visited the service once (91%) in the past 12 months less frequently said they were satisfied with the opportunity to provide feedback whereas those who had visited the service between 6-10 times and over 11 times (both 96%) more frequently were satisfied with the opportunities to provide feedback.

Respondents who were very / fairly satisfied with the opportunity to give feedback / make complaints – by service area		
Service Area	Base	Very / fairly satisfied
Chronic Community Pain Management	43	100%
Integrated Paediatrics & Nursing Services	60	100%
Public Health Hull & NW	56	100%
Nursing and Conditions	379	98%
Rehabilitation and Therapies	550	95%
0-19 Service	84	95%
City Health Dental	115	94%
Integrated Urgent Care	346	93%
Let's Talk	48	92%
Primary Care & APMS	284	88%
Integrated Sexual Health Services	158	84%

Satisfaction with the opportunities to give feedback was highest within Public Health Hull & NW, Integrated Paediatrics & Nursing Services and Chronic Community Pain Management, where all respondents were satisfied with the opportunities they had to give feedback or make complaints. Satisfaction was also notably high with Nursing and Conditions (98%).

Lower levels of satisfaction were expressed by respondents who had accessed services within Primary Care & APMS (88%) and Integrated Sexual Health Services (84%).

If you were not happy with the service you received or had concerns, would you raise them?



More than nine-tenths (92%) of respondents said that if they had concerns or were unhappy with the service they would raise the issue; only 3% of respondents said that they would not inform the service if they were unhappy or had concerns.

When compared with 2016 there has been a slight decrease (1%) in respondents who would raise concerns or unhappiness, with the proportion of respondents who said that they would do so falling from 93% to 92%.

When asked to explain why the respondent would not raise issues or concerns, the largest proportion said it was as they did not like to complain (43%). Just over a tenth (12%) of respondents said they would not raise a concern as they would prefer to keep quiet and not mention anything. A tenth of respondents said they wouldn't raise a concern because they either did not know how to do so or they would be concerned of the repercussions.

Respondents who would raise a concern – by service area		
Service Area	Base	%
Rehabilitation and Therapies	573	95%
Public Health Hull & NW	61	95%
Nursing and Conditions	393	95%
Integrated Urgent Care	368	93%
Let's Talk	50	92%
Primary Care & APMS	291	90%
Integrated Paediatrics & Nursing Services	62	90%
0-19 Service	93	89%
Chronic Community Pain Management	44	89%
City Health Dental	117	83%
Integrated Sexual Health Services	175	80%

The vast majority of respondents who accessed a service within Rehabilitation and Therapies, Public Health Hull & NW and Nursing and Conditions (all 95%) indicated they would be highly likely to raise a concern if they had one.

Less than nine-tenths of respondents using 0-19 Service (89%), Chronic Community Pain Management (89%) City Health Dental (83%) and Integrated Sexual Health Services (80%) indicated that if they were not happy with the service received or had concerns then they would raise a concern.

## 7.0 Advanced Analysis

A series of advanced analysis was undertaken on a number of key questions within the data set using two key techniques:

1. Text Analytics
2. Key Driver Analysis

### 7.1 Text Analytics

Verbatim comments from two open-text questions were analysed to better understand and evaluate what was good about the care received and what could be improved. Comments were classified and quantified into themes using natural language processing techniques and word association. The themes have been presented at an overall level and analysed by gender, age and key satisfaction metrics.

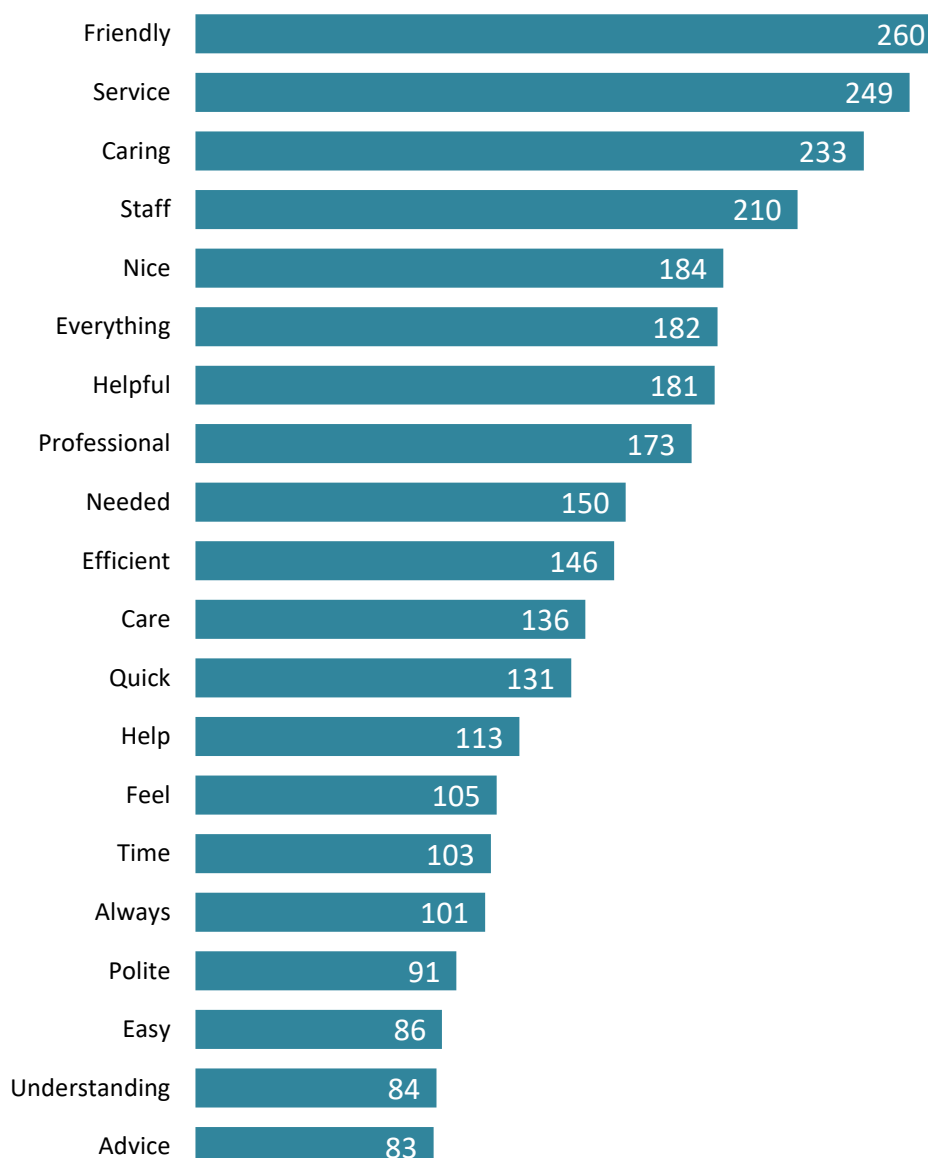
#### 7.1.1 What was good about the care you received?



The word cloud above visually illustrates the most commonly used words by respondents when talking about what was good about the care received. The word cloud gives greater prominence to words that were mentioned more frequently by respondents.

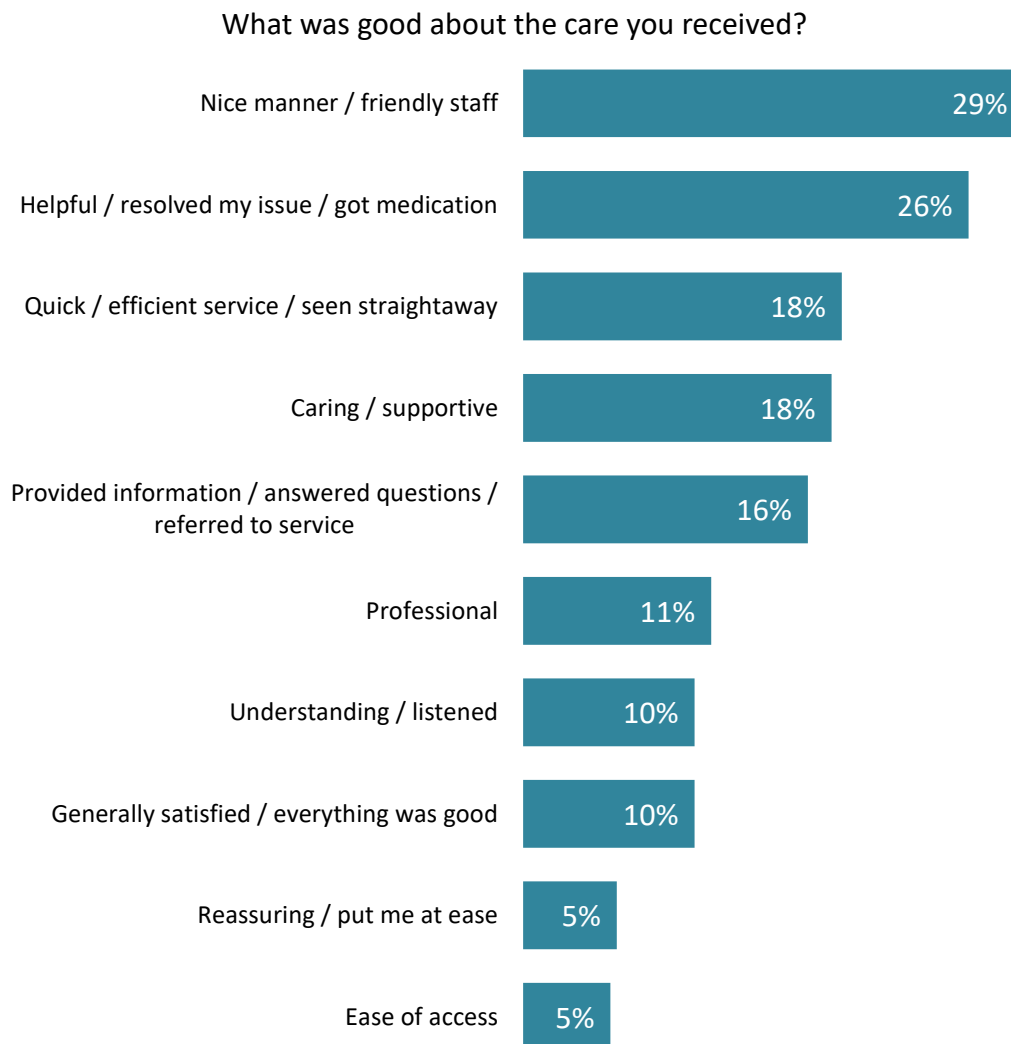
As the word cloud shows respondents were most likely to mention the words Friendly, Service and Caring.

The following chart shows the 20 most frequently mentioned words by respondents when talking about what was good about the care they received.



As the chart shows other commonly used words included: staff, nice, everything, helpful and professional.

The following chart shows the most commonly mentioned themes by respondents when talking about what was good about the care they received.



The manner and the friendliness of the staff (29%) was the most commonly mentioned theme, closely followed by the helpfulness and the fact their issue was resolved (26%). Around a fifth mentioned the efficiency of the service (18%), the care and support (18%) and that they were provided with information or any questions they had were answered (16%).

### Demographic analysis

Those aged 18 to 24 (27%) were significantly more likely to mention the quick and efficient service and that they were seen straightaway, whereas this was mentioned by only 13% of those aged 55 and over. Respondents aged 25 to 34 were significantly more likely to mention the manner and friendliness of the staff; amongst those aged 55 to 64 only 24% mentioned this as a reason as to what was good about the care they received.



Respondents aged 18 to 24 were a lot less likely to mention the caring and supportive nature of the staff with only a tenth doing so, however around a fifth of those aged 45 and over mentioned this as a reason why they were satisfied with the care they received.

### Example Comments (Top five themes)

#### Nice manner / friendly staff (29%)

*"The friendly attitude of the staff I deal with. They are always happy to help you and I feel quite safe in their hands."*

*"Everyone treated me with respect and that made a difference. I sometimes get a bit nervous about things but everyone was caring and helpful."*

*"The politeness; all the different nurses that came were all polite and understanding. It was just an excellent service."*

*"The general attitude of all the medical staff, they were all aware of my condition and gave given me the help I needed to get me through. My condition isn't going to get any better but they helped stabilise it."*

*"They were very polite and considerate and explained everything they did as well as telling me what I needed to do."*

#### Helpful / resolved my issue / got medication (26%)

*"If it wasn't for them I wouldn't be here as the hospital weren't bothered. They gave me a special dressing for my stomach and they were always there to help me and offer advice."*

*"Nothing was too much trouble; they helped me even if I couldn't make sense of things. They sorted things out for me and I couldn't have wished for a better service."*

*"Everyone was helpful and they made sure I had all the information I needed. They were understanding and included me in any decisions."*

*"The problem got sorted and I was advised what I should do if it happens again."*

*"It's completely tailored to his personal needs. It's not one size fits all, every child that goes and gets care, it's centred around that child and the parent's needs."*

#### Quick / efficient service / seen straightaway (18%)

*"It's convenient for me to come here. I do not have to wait, it's a very quick service and they seem to have the time to spend with you."*

*"The nurses and the appointments were kept on time and they are flexible with you. They were very patient and understanding."*

*"The speed of the appointments I got and everything was good. They couldn't have done any more for me."*

#### **Caring / supportive (18%)**

*"They care is great, the nurses are caring and they know what they are talking about."*

*"They were very caring from the moment I walked in. They were helpful and considerate and they took my condition in to their hands. If they felt like I couldn't do anything they would stop me. If they couldn't help me with anything they would refer me to somewhere else to get help. I told them I was wheezing and they helped me get a new asthma pump. They do a very good job and I hope they can keep it up."*

*"The care of the staff is very good. They are very caring and down to earth people."*

#### **Provided information / answered questions / referred to service (16%)**

*"They explained everything clearly and told us about the treatment and why they were doing the vaccination today. They said if we had any concerns afterwards to get back in contact."*

*"They explained everything fully regarding the medical equipment I would need and where to get it from."*

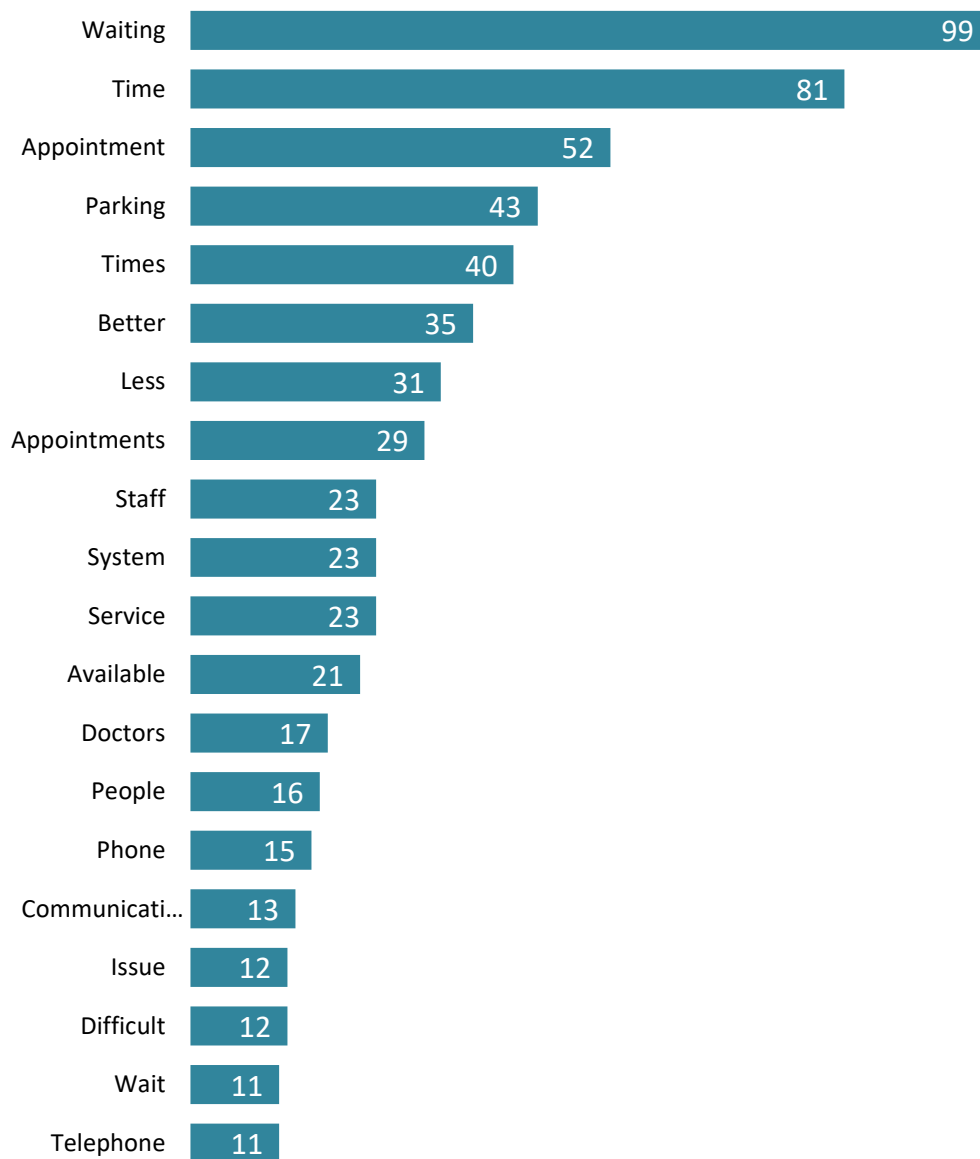
*"They answer your questions and show you how to help yourself where possible. They are friendly and pleasant."*

The following word cloud visually illustrates the most commonly used words by respondents when talking about what could have been improved.

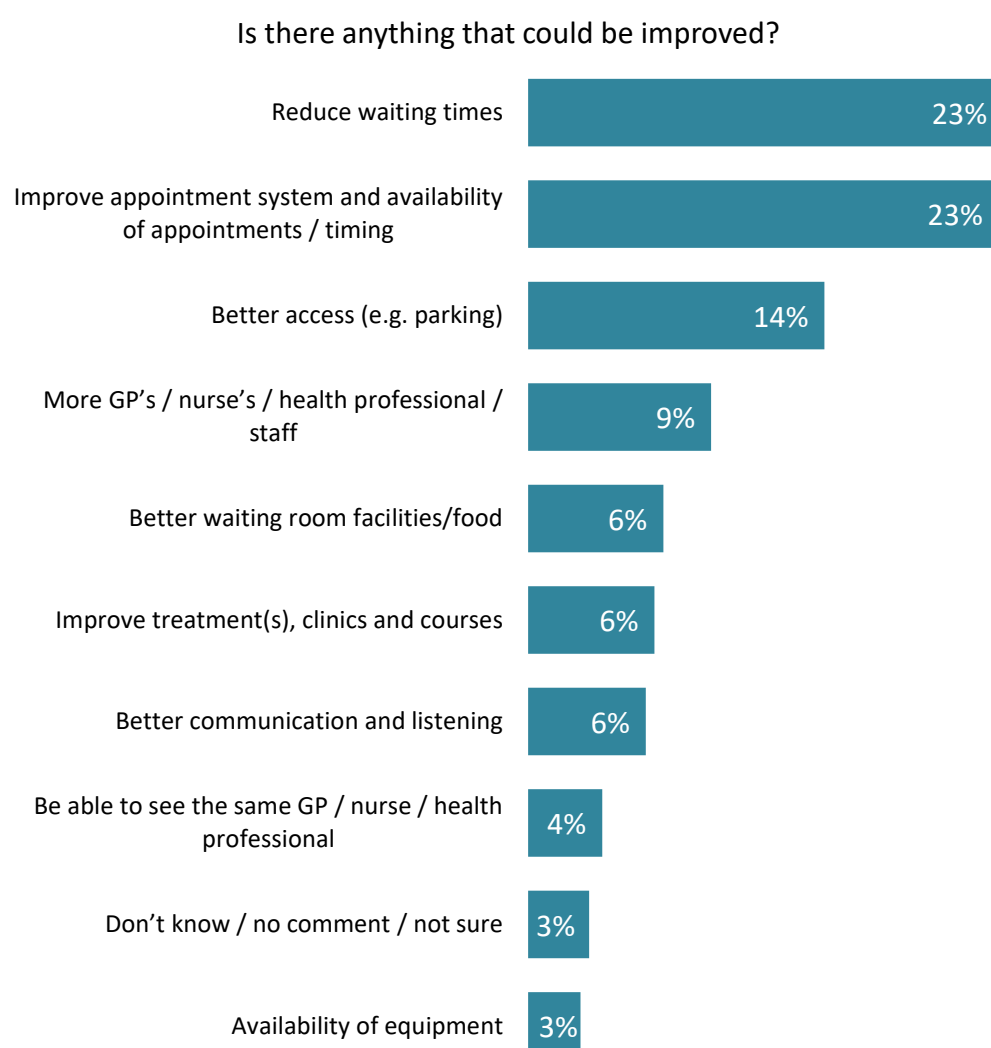


CHCP CIC Annual Patient Satisfaction Survey 2017

The following chart shows the 20 most frequently mentioned words by respondents when talking about what could be improved with care they received.



The following chart shows the most commonly mentioned themes by respondents when talking about what could be improved.



Consistent with previous years almost 8 out of 10 respondents said nothing could be improved. Respondents who felt there was room for improvement were most likely to mention a need for reduced waiting times and an improved appointment system and availability of appointments (both 23%). Other common themes included better access and parking (14%) and more staff and health professionals (9%).

### Example Comments (Top four themes)

#### Reduce waiting times

*"Less waiting time in the afternoon and better communication as to how long we will be waiting, or an electronic board."*

*"Just cut down the waiting time, but I do understand that it depends on the staff that are on and the circumstances."*

*"The referral process as it has taken too long. I would just have liked to have known what was going on."*

*"Waiting times, as with kids this can be a problem."*

### **Improve appointment system and availability of appointments / timing**

*"The booking and contacting system as it is very hard to try and contact someone to get an appointment."*

*"Getting an appointment is very hard sometimes. You can be in the phone for ages and when you do get through all the appointments have gone."*

*"Maybe sometimes the flexibility of times. They do their best but it is not geared to parents that work. I think a lot of people wouldn't have the same opinion as they are flexible with their time, but with me working full time it's harder. They do their best but the one thing that can be improved is the flexibility of times."*

*"It would be easier if I could book appointments outside of work hours."*

### **Better access (e.g. parking)**

*"I have a disabled badge and I had to park right at the back and had to walk a long way to get in which was very hard for me."*

*"Better directions on the self-check in service, maybe put on the letter about self-check in if the reception is closed."*

### **More GP's / nurses / health professional / staff**

*"They could have a few more nurses as they are all rushed off their feet."*

*"I believe that there should be more nurses available in busy periods, but understand that due to the underfunding to the NHS, this is not immediately possible."*

## 7.2 Linear Regression Approach

Linear regression is a statistical process for estimating relationships between variables. It measures how the typical value of one (dependent) variable changes when any one of the other (independent) variables changes. This gives insight into which independent variables have the greatest impact on the dependant variable. Variables which have a significant impact are known as key drivers.

Patient satisfaction data was used to create a linear regression model in SPSS to calculate the key drivers of patient advocacy (likelihood to recommend to friends and family).

Independent variables were taken from the five banks of satisfaction statements asked throughout the questionnaire. These statements asked respondents to rate their satisfaction with different touchpoints in their experience. These included satisfaction with the initial phone contact, booking an appointment, location/ facilities, the health professional that dealt with them and communication.

Only 524 out of 2,240 respondents experienced all five touchpoint areas. Hence five separate regression models were run to maximise the sample size in each touchpoint area.

The linear regression models produced model coefficients to measure the impact of satisfaction with different touchpoints compared to the patient's likelihood to recommend. If a touchpoint mean score changes +/-1 the model coefficient value explains how much the mean score for likelihood to recommend would change in response.

The model coefficients act as a measure of derived importance in determining what drives the likelihood of a patient recommending the clinic/service to friends and family.

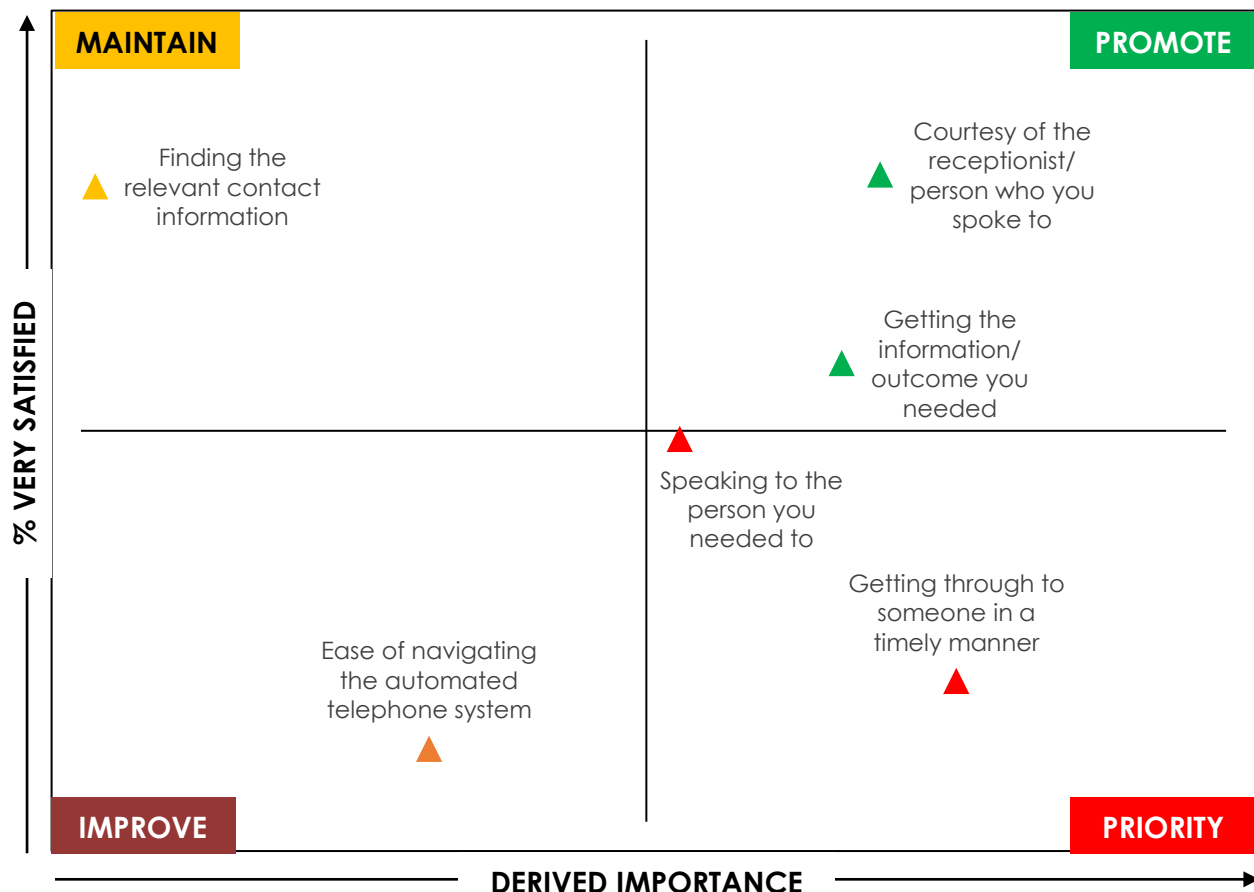
The model coefficients for each touchpoint have been mapped against the proportion of respondents who were very satisfied with each touchpoint to create an impact matrix. The impact matrix displays the model coefficient (derived importance) of each touchpoint on the x axis and the proportion of respondents who were very satisfied with each touchpoint (performance) on the y axis.

The impact matrix is classified into four quadrants:-

- **Promote** - touchpoints with above average satisfaction and above average importance
- **Maintain** - touchpoints with above average satisfaction and below average importance
- **Improve** - touchpoints with below average satisfaction and below average importance
- **Priority** - touchpoints with below average satisfaction and above average importance

## 7.2.1 Satisfaction with the initial phone contact

A total of 876 out of 2,240 respondents contacted the service by telephone. The following impact matrix displays the model coefficient (derived importance) of each statement on the x axis and the proportion of respondents who were very satisfied with each statement (performance) on the y axis.



Courtesy of the receptionist, Getting the information/outcome needed and Getting through to someone in a timely manner were the most important drivers of patient advocacy during initial contact.

Speaking to the person you needed to has become more important since 2016 and is now a priority improvement area. Since 2015 performance (% very satisfied) has fallen significantly from 88% to 76%.

Ease of navigating the automated telephone system remains an area to improve but is less important in driving patient advocacy. Performance has dropped significantly since 2015, from 83% very satisfied to 63%.



## Example verbatim

*"You can never get through on the telephone; it seems to be impossible."*

*"I was told I didn't need to make an appointment and could come to the walk in clinic only to be told when I got here that they couldn't help me today as it was triage only..... Not very discreet either."*

*"I cannot get an appointment – I have to come at 8am to try and get an appointment."*

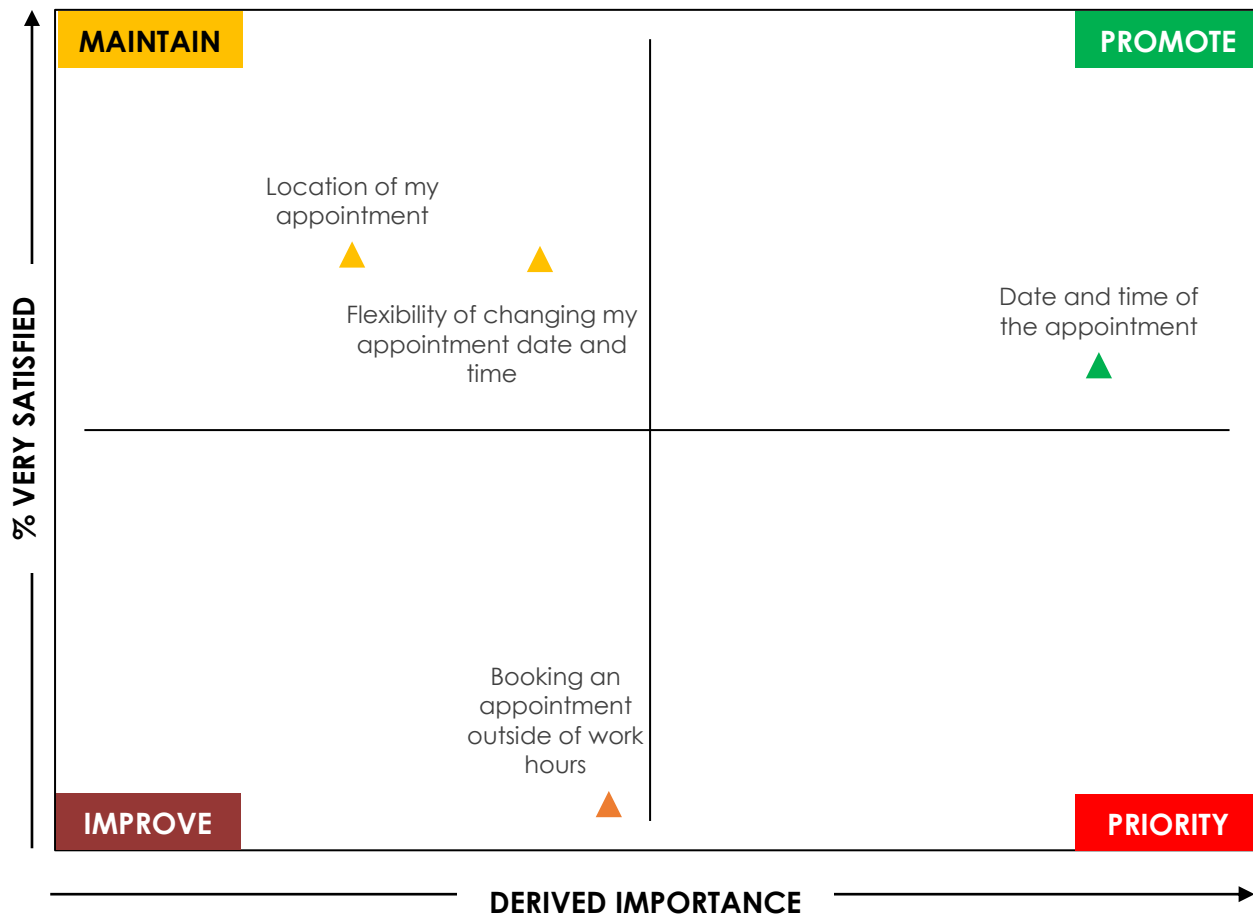
*"The hospital was meant to be letting them know they were coming, but the service didn't even know they were meant to be coming out when I rang them, but they sorted it out quickly and got someone out to me."*

*"I have been trying for a couple of weeks to get an appointment."*

*"You can never get through and when you do get through all the appointments have gone."*

## 7.2.2 Satisfaction with appointments

A total of 1,101 out of 2,240 respondents completed the appointment section. The following impact matrix displays the model coefficient (derived importance) of each statement on the x axis and the proportion of respondents who were very satisfied with each statement (performance) on the y axis.



The date and time of the appointment was the most important factor in driving recommendation of the service – most respondents were also very satisfied with this (83%).

Booking an appointment outside of work hours remains the second most important factor, but only 69% respondents were very satisfied, up from 63% in 2016.

Performance for Flexibility of changing my appointment date and time increased significantly from 79% in 2016 to 87% in 2017. These positive scores should be maintained over the coming year.

## Example verbatim

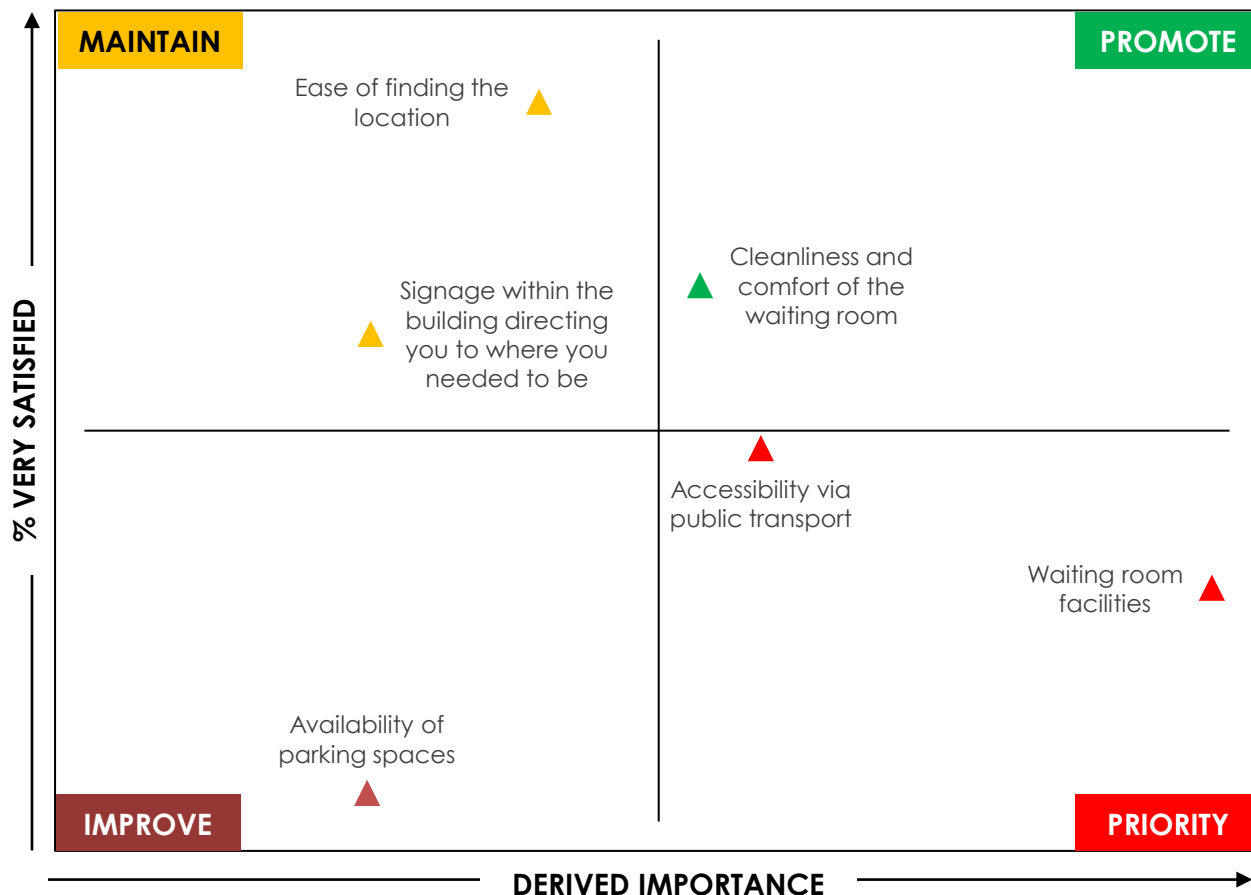
*“I rang three times to confirm if I needed to book, they said no but it was not guaranteed I’d be seen. Work hours make it hard to have the time to attend without knowing if I’ll be seen.”*

*“More flexibility for the hours you get, people could use the service for two nights in a row every couple of weeks, rather than using the service one night a week. It would be good if people could bank the hours and have longer breaks less often. I would say the criteria are not transparent for accessing the service.”*

*“It would be easier if I could book appointments outside of work hours.”*

### 7.2.3 Satisfaction with location and facilities

A total of 1,871 out of 2,240 respondents visited the service. The following impact matrix displays the model coefficient (derived importance) of each statement on the x axis and the proportion of respondents who were very satisfied with each statement (performance) on the y axis.



Accessibility via public transport has become more important since 2016 and is now a key driver of advocacy for location & facilities. With only 76% very satisfied this has now become a priority improvement area.

Waiting room facilities remain a priority improvement area with 69% very satisfied. Availability of parking spaces is also an area to focus on with only 59% very satisfied.

## Example verbatim

*"Maybe put a few magazines in the waiting areas so that there is something to do while you're waiting."*

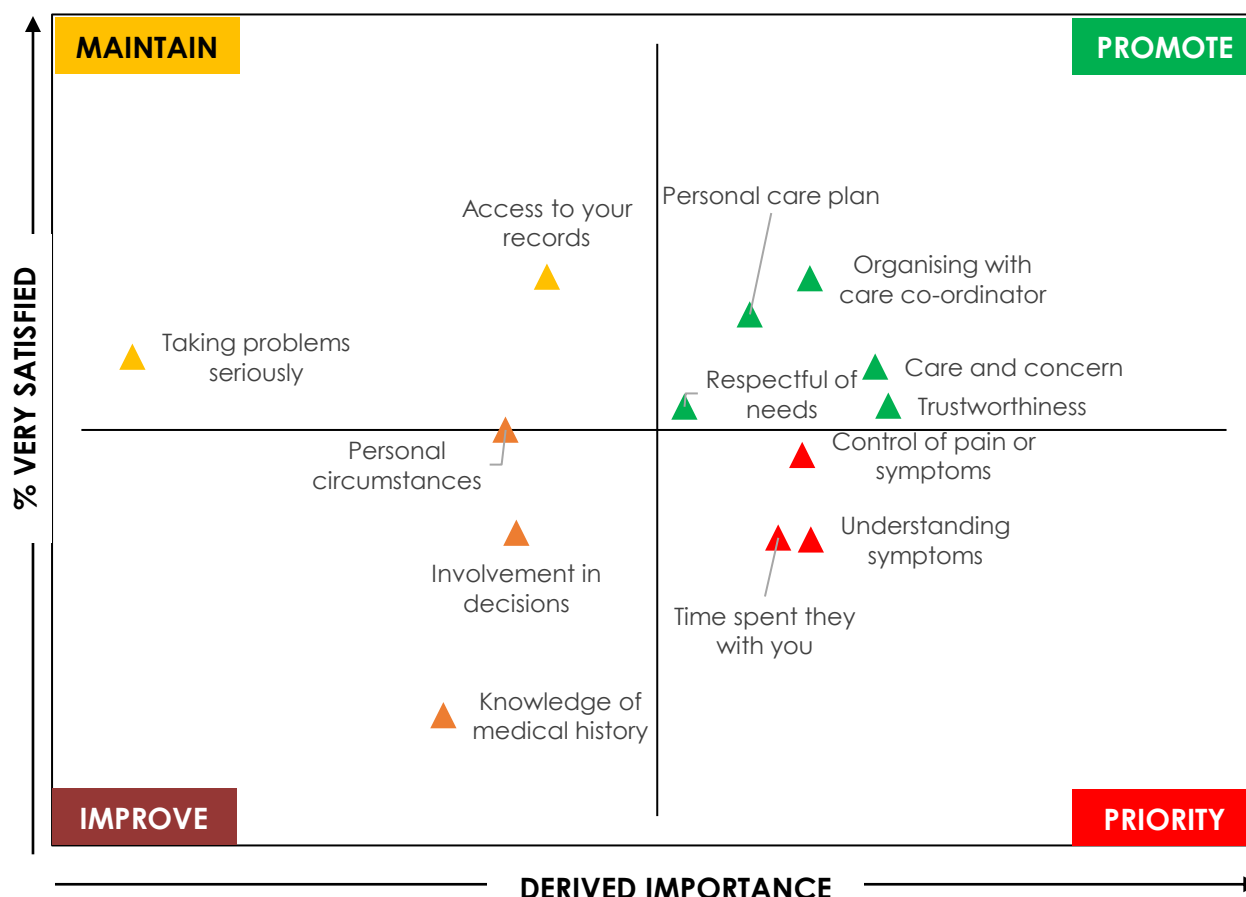
*"A TV in the waiting area would be nice so that there's something to do whilst you are waiting."*

*"Less waiting time. More walk in centres as I went to Marfleet and it was closed even though it said open on the website. And maybe more seats in the waiting area."*

*"Maybe better facilities in the waiting room".*

## 7.2.4 Satisfaction with the health professional

All respondents answered the statements relating to the health professional they saw (n=2,240). The following impact matrix displays the model coefficient (derived importance) of each statement on the x axis and the proportion of respondents who were very satisfied with each statement (performance) on the y axis.



Satisfaction with the health professional was very high for almost all attributes (82%+ very satisfied). Priority improvement areas include Control of pain or symptoms, Understanding symptoms and time spent with the patient. Knowledge of medical history remains the lowest performing attribute (82% very satisfied) and is an area to improve.

### Example verbatim

*"It's okay but they do not understand your family history."*

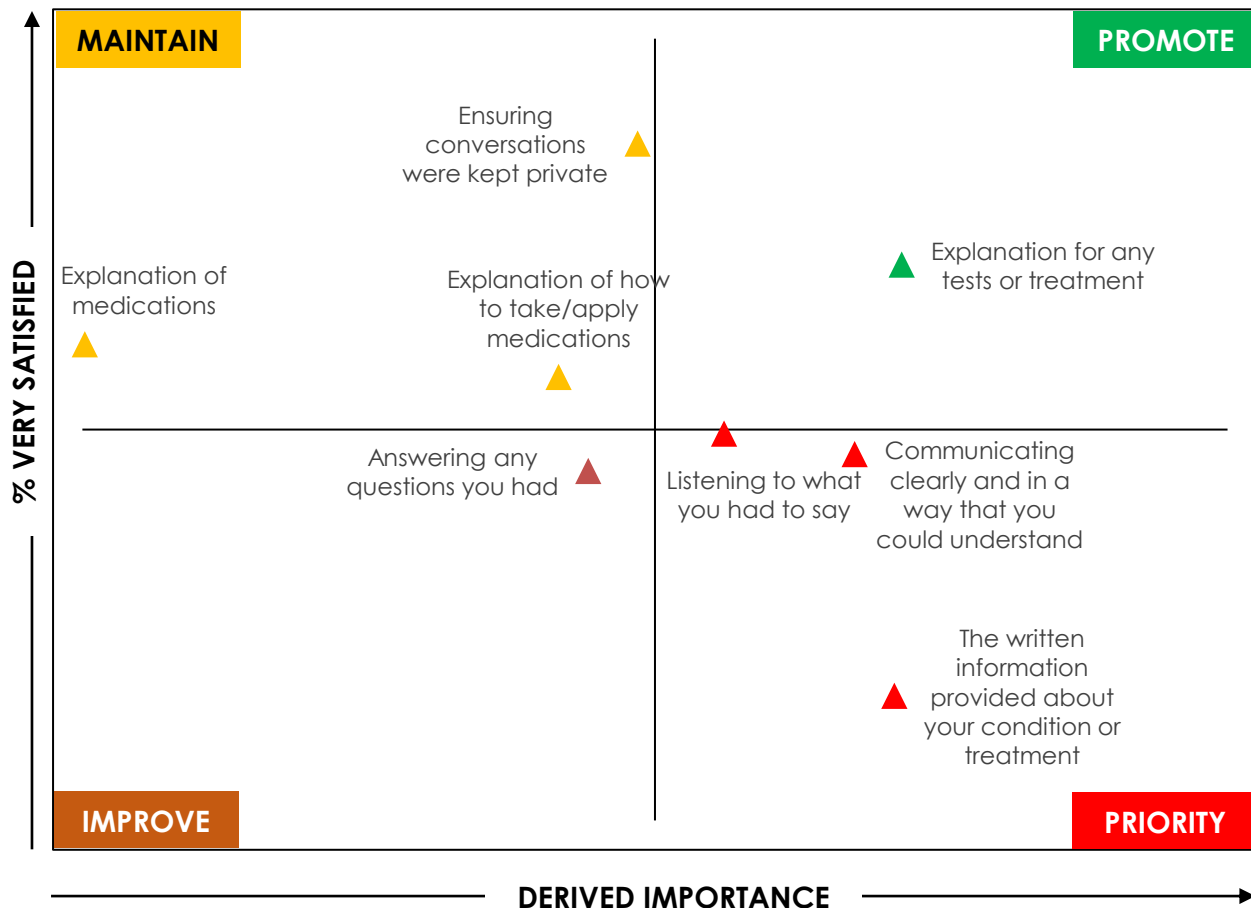
*"It would be helpful if they had your medical history to hand."*

*"Continuity of seeing the same person would help. I have had to repeat everything three times which is frustrating and I think they should have access to my medical records."*

*"They should keep your records safe and up to date."*

## 7.2.5 Satisfaction with communication

All respondents answered the statements relating to communication (n=2,240). The following impact matrix displays the model coefficient (derived importance) of each statement on the x axis and the proportion of respondents who were very satisfied with each statement (performance) on the y axis.



Satisfaction with communication very high for all attributes (88%+ very satisfied).

Listening and Communicating clearly continue to be classified as priority improvement areas as performance for both attributes fell from 93% in 2014 to 89% in 2017.

The written information provided has become more important in the last 12 months and is also a priority improvement area (88% very satisfied).



## Example verbatim

*“Better communication between the different services.”*

*“They should have a better attitude and be more patient. I’d like them to show more interest and provide better communication. It was a stand in GP not my usual GP.”*

*“Better communication. A structured plan about what should happen would be an improvement so that everyone understands where they are.”*

*“Improve communication between the service and the professional and also between nurses and the services that are treating me.”*

# Appendices

## Questionnaire

### CHCP CIC

#### Annual Patient Experience Questionnaire 2017

Good afternoon/evening my name is **{INSERT NAME}** and I'm calling from SMSR Ltd an independent research company on behalf of City Health Care Partnership CIC.

Would it be possible to speak to **{OP4}** please?

We are carrying out a survey on behalf of City Health Care Partnership CIC about the NHS health services and other local community health services they provide in your local area and their records show that you have recently accessed the **{Service}** Service.

Would you be able to spare 5 to 10 minutes to answer some questions about your experience of accessing the service?

Please note to ensure personal information about you is secure, all of your answers will be treated in the strictest confidence and will be stored securely in accordance with the Data Protection Act 1998.

**READ OUT IF NECESSARY:** If you have any queries about this survey please contact Lee Atkinson at SMSR on 0800 138 0845. Calls may be monitored or recorded for quality control purposes. Also participation is voluntary and you can withdraw at any time. SMSR adheres to the MRS code of conduct. MRS Freephone: 0500 396999.

#### SECTION A: ACCESSING HEALTH SERVICES

Q1 How many times have you used this service in last 12 months?

- |                        |                            |
|------------------------|----------------------------|
| Once .....             | <input type="checkbox"/> 1 |
| 2-3 times .....        | <input type="checkbox"/> 2 |
| 4 - 5 times .....      | <input type="checkbox"/> 3 |
| 6 - 10 times .....     | <input type="checkbox"/> 4 |
| 11 or more times ..... | <input type="checkbox"/> 5 |
| Can't remember .....   | <input type="checkbox"/> 6 |

Q2 Thinking about your last experience of the service, which of the following best describes your initial contact with the service?

- |   |                            |
|---|----------------------------|
| I rang them to book an appointment.....       | <input type="checkbox"/> 1 |
| I rang with an initial query.....             | <input type="checkbox"/> 2 |
| They contacted me to make an appointment..... | <input type="checkbox"/> 3 |
| My first contact was the visit itself .....   | <input type="checkbox"/> 4 |
| Can't remember .....                          | <input type="checkbox"/> 5 |
| Other.....                                    | <input type="checkbox"/> 6 |

Q3a How satisfied were you with the initial contact with the service?

- Not at all satisfied..... ☐ 1  
Fairly dissatisfied..... ☐ 2  
Neither satisfied nor dissatisfied..... ☐ 3  
Fairly satisfied..... ☐ 4  
Very satisfied..... ☐ 5

Q3b Why do you say that?

Q4 Have you contacted the service by telephone in the past 12 months?

- Yes..... ☐ 1      Go to Q4\_1  
No..... ☐ 2      Go to N7  
Can't remember..... ☐ 3      Go to N7

Q4\_1 If yes, did you make contact using the 247111 number? (INDICATOR 2)

- Yes..... ☐ 1  
No..... ☐ 2  
Can't remember..... ☐ 3

Q4a How satisfied were you with the following aspects of your initial contact by telephone? *Please tick one box per row.*

	Not satisfied at all	Fairly dissatisfied	Neither satisfied nor dissatisfied	Fairly satisfied	Very satisfied	N/A
Finding the relevant contact information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ease of navigating the automated telephone system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Getting through to someone in a timely manner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speaking to the person you needed to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Courtesy of the receptionist/person who you spoke to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Getting the information/outcome you needed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**INTERVIEWER NOTE: Survey will automatically skip Q5a - Q5b depending on service respondent has accessed.**

Q5a How satisfied were you with the following...? *Please tick one box per row.*

	Not satisfied at all	Fairly dissatisfied	Neither satisfied nor dissatisfied	Fairly satisfied	Very satisfied	N/A
Date and time of the appointment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Booking an appointment outside of work hours e.g. evenings and weekends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Location of my appointment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexibility of changing my appointment date and time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q5b Have any of your appointments been cancelled or changed to a later date in the last 12 months? (This only includes appointments that have been cancelled or changed by the service and not yourself)  
*Please tick one box only.*

No ..... ☐ 1

Yes, 1 appointment was cancelled or changed..... ☐ 2

Yes, 2 or more appointments have been cancelled or changed ..... ☐ 3

**INTERVIEWER NOTE: Survey will automatically skip Q6a to Q6c depending on service respondent has accessed.**

Q6a Within the last 12 months, have you tried to access this service at short notice (the same day or within 2 days of the service being open)?

Yes ..... ☐ 1      Go to Q6b

No ..... ☐ 2      Go to N9

Q6b If yes, how long did it take for you to be seen?

- Less than 24 hours..... ☐ 1
- 1 - 2 days ..... ☐ 2
- 2 - 3 days ..... ☐ 3
- 3 - 7 days ..... ☐ 4
- 1 - 2 weeks..... ☐ 5
- 2 - 4 weeks..... ☐ 6
- 4 - 6 weeks..... ☐ 7
- Over 6 week..... ☐ 8

Q6c How do you feel about the length of time it took to access the service?

- I was seen as soon as I thought was necessary..... ☐ 1
- I should have been seen a bit sooner..... ☐ 2
- I should have been seen a lot sooner..... ☐ 3

## SECTION B: SERVICE EXPERIENCE/EXPECTATIONS

Q7a Did you visit the service or was the service delivered in your home?

- Visited service ..... ☐ 1 Go to Q7b1
- Delivered in the home ..... ☐ 2 Go to Q9

Q7b How satisfied were you with the following? *Please tick one box per row.*

	Not satisfied at all	Fairly dissatisfied	Neither satisfied nor dissatisfied	Fairly satisfied	Very satisfied	N/A
Ease of finding the location	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Availability of parking spaces	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accessibility via public transport	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Signage within the building directing you to where you needed to be	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cleanliness and comfort of the waiting room	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Waiting room facilities (e.g. drinks, refreshments, magazines)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q8 On the last occasion of accessing the service, how do you feel about the length of time that you had to wait to be seen?

- I was seen as soon as I thought was necessary..... ☐ 1
- I should have been seen a bit sooner..... ☐ 2
- I should have been seen a lot sooner..... ☐ 3

Q9 Thinking about the health professional that you saw. How satisfied or dissatisfied were you with the following? *Please tick one box per row.*

	Not satisfied at all	Fairly dissatisfied	Neither satisfied nor dissatisfied	Fairly satisfied	Very satisfied	N/A
Amount of time spent they with you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Knowledge of your medical history	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understanding of your symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Involving you in decisions about your care (e.g. treatments, education, setting goals) (INDICATOR 4)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Treating you with care and concern	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Taking your problems seriously	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respectful of your needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Taking your personal circumstances into account	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trustworthiness of the person you saw	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organising your care with your care co-ordinator (INDICATOR 2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The health professional always having access to your patient records and care plan (INDICATOR 6)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
With how they controlled my pain or symptoms (INDICATOR 11)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Involving you in the production and development of your personal care plan.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q10 Have you experienced a reduction in the number of times you have had to tell your story to different services of health professionals? (INDICATOR 5)

Yes ..... ☐ 1

No ..... ☐ 2

Not applicable ..... ☐ 3



Q11a Thinking about the communication from the health professional. How satisfied or dissatisfied were you with the following? *Please tick one box per row.*

	Not satisfied at all	Fairly dissatisfied	Neither satisfied nor dissatisfied	Fairly satisfied	Very satisfied	N/A
Answering any questions you had	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Listening to what you had to say	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communicating clearly and in a way that you could understand	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ensuring conversations were kept private	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explanation for any tests or treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The written information they provided about your condition or treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explanation of any medications prescribed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explanation of how to take/apply any medications prescribed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q11b INTERMEDIATE CARE AND REABLEMENT ONLY: How satisfied or dissatisfied were you with the following services? *Please tick one box per row.*

	Not satisfied at all	Fairly dissatisfied	Neither satisfied nor dissatisfied	Fairly satisfied	Very satisfied	N/A
Physiotherapy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Occupational therapy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speech and language therapy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community nursing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Domiciliary care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q12a What, in particular, was good about the service you received from the health professional?

[illegible]

Yes ..... ☐ 1

No ..... ☐ 2

Not applicable ..... ☐ 3

Yes ..... ☐ 1

No ..... ☐ 2

Not applicable ..... ☐ 3

Yes ..... ☐ 1

No ..... ☐ 2

Not applicable ..... ☐ 3

Strongly agree.....	<input type="checkbox"/>	1
Agree.....	<input type="checkbox"/>	2
Neither agree nor disagree.....	<input type="checkbox"/>	3
Disagree.....	<input type="checkbox"/>	4
Strongly disagree.....	<input type="checkbox"/>	5
Don't know.....	<input type="checkbox"/>	6



Q16a On reflection, did you get the care that was agreed as part of your care plan? (INDICATOR 1)  
(TELEPHONE INTERVIEW - NOT TO BE ASKED TO URGENT CARE PATIENTS)

Yes ..... ☐ 1  
No ..... ☐ 2  
Not applicable ..... ☐ 3

Q16b Are you confident that you will get the care that is agreed as part of your care plan? (INDICATOR 1)  
(FACE TO FACE INTERVIEW - NOT TO BE ASKED TO URGENT CARE PATIENTS)

Yes ..... ☐ 1  
No ..... ☐ 2  
Not applicable ..... ☐ 3

Q17a On reflection, did your care plan reflect the care you agreed and record your care goals? (TELEPHONE INTERVIEW – NOT TO BE ASKED TO URGENT CARE PATIENTS)

Yes ..... ☐ 1  
No ..... ☐ 2  
Not applicable ..... ☐ 3

Q17b Are you confident that your care plan reflects the care you agreed and provides a record of your care goals? (FACE TO FACE INTERVIEW – NOT TO BE ASKED TO URGENT CARE PATIENTS)

Yes ..... ☐ 1  
No ..... ☐ 2  
Not applicable ..... ☐ 3

Q18 Has the care that you received resulted in a positive outcome for you either in physical, psychological or social terms? (INDICATOR 12)

Yes ..... ☐ 1  
No ..... ☐ 2  
Don't know / not applicable ..... ☐ 3

Q19 Do you agree or disagree with the following statements?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Not applicable
Support was available for long term self-care and how to go about this (INDICATOR 9)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I was encouraged to set targets for my self-care (INDICATOR 10)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q20 I have received information or advice on the care of my feet to help prevent any complications. (INDICATOR 16) PODIATRY CARE ONLY

Yes ..... ☐ 1  
No ..... ☐ 2  
Don't know / not applicable ..... ☐ 3

Q20a Please state who you would contact / where you would go in the event of sustaining / experiencing the following...?

	Call NHS 111	Call 999	Visit a walk -in centre, minor injuries unit or urgent care centre	Ask pharmacist for advice	Make an a pointment with GP	Visit A&E	Other	Unsure
A minor injury	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A minor ailment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A long term condition worsens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
An emergency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## SECTION D: MAKING EVERY CONTACT COUNT (MECC)

**INTERVIEWER NOTE: Survey will automatically skip Q21 - Q23 depending on service respondent has accessed.**

Q21 Were you made aware that you could be referred to another CHCP CIC service if you needed it? For example, stop smoking, weight management, sexual health, dental, Let's Talk, psychological wellbeing service, drug and alcohol services.

- Yes..... ☐ 1 Go to Q22  
 No..... ☐ 2 Go to Q24  
 Don't know ..... ☐ 3 Go to Q24

Q22 If you received an offer of referral, did you take this up?

- Yes..... ☐ 1 Go to Q22a  
 No..... ☐ 2 Go to Q23  
 Did not receive an offer ..... ☐ 3 Go to N14

Q22a How satisfied or dissatisfied were you with the referral process?

- Not satisfied at all..... ☐ 1 Go to N14  
 Fairly dissatisfied ..... ☐ 2 Go to N14  
 Neither satisfied nor dissatisfied..... ☐ 3 Go to N14  
 Fairly satisfied ..... ☐ 4 Go to N14  
 Very satisfied..... ☐ 5 Go to N14

Q23 If no... why not?

- Did not think I needed to use service ..... ☐ 1  
Did not have time to access service ..... ☐ 2  
Was not given enough information ..... ☐ 3  
Already access service from another provider / place ..... ☐ 4  
Other (specify in the box below) ..... ☐ 5

## SECTION E: Information / Communication

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Q24 Are you confident that information about you is kept securely?

- Yes ..... ☐ 1  
No ..... ☐ 2  
Not sure ..... ☐ 3

Q25 Are you satisfied that you are kept up-to-date about how information about you is used and shared?

- Yes ..... ☐ 1  
No ..... ☐ 2  
Not sure ..... ☐ 3

Q26 Are you confident that information about you is only accessed by people directly involved in your care?

- Yes ..... ☐ 1  
No ..... ☐ 2  
Not sure ..... ☐ 3

Q27 How satisfied are you with the opportunities to give feedback about the service or make a complaint?

- Not satisfied at all ..... ☐ 1  
Fairly dissatisfied ..... ☐ 2  
Neither satisfied nor dissatisfied ..... ☐ 3  
Fairly satisfied ..... ☐ 4  
Very satisfied ..... ☐ 5  
N/A ..... ☐ 6

Q28 If you were not happy with the service you received or had concerns, would you raise them?

- |   |           |
|---|-----------|
| Yes ..... <input type="checkbox"/> 1        | Go to N15 |
| No ..... <input type="checkbox"/> 2         | Go to Q29 |
| Don't know ..... <input type="checkbox"/> 3 | Go to Q29 |

Q29 If not, why not?

## SECTION F: THE SERVICE OVERALL

Q30 On reflection, did you get the care that mattered to you...?

At all times .....	<input type="checkbox"/>	1
Most of the time .....	<input type="checkbox"/>	2
Sometimes .....	<input type="checkbox"/>	3
Rarely .....	<input type="checkbox"/>	4
Never .....	<input type="checkbox"/>	5

Q31 Overall...how satisfied were you with the following: *Please tick one box per row.*

	Not satisfied at all	Fairly dissatisfied	Neither satisfied nor dissatisfied	Fairly satisfied	Very satisfied	Not applicable
Services worked together to integrate your care (INDICATOR 14)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q31 Overall...how satisfied were you with the following:

	Not satisfied at all	Fairly dissatisfied	Neither satisfied nor dissatisfied	Fairly satisfied	Very satisfied	Not applicable
...the standard of care and support you have received?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...your overall experience?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q32 After accessing the service on this occasion, has your opinion of the service...

...improved? .....	<input type="checkbox"/>	1
...stayed the same? .....	<input type="checkbox"/>	2
...decreased? .....	<input type="checkbox"/>	3

Q33 We would like you to think about your experience at the ..... clinic/service during this visit.

How likely are you to recommend our {Service} clinic/service to friends and family if they needed similar care or treatment?

- |                                   |                          |   |
|-----------------------------------|--------------------------|---|
| Extremely likely .....            | <input type="checkbox"/> | 1 |
| Likely .....                      | <input type="checkbox"/> | 2 |
| Neither likely nor unlikely ..... | <input type="checkbox"/> | 3 |
| Unlikely .....                    | <input type="checkbox"/> | 4 |
| Extremely unlikely .....          | <input type="checkbox"/> | 5 |
| Don't know .....                  | <input type="checkbox"/> | 6 |

Q34 What was good about the care you received?

Q35 Is there anything that could be improved?



## Demographics

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Q36 Are you male or female?

Male ..... ☐ 1  
 Female ..... ☐ 2

Q37 **C&YPS ONLY:** Is your child male or female?

Male ..... ☐ 1  
 Female ..... ☐ 2

Q38 To which of the following age groups do you belong?

Under 18 ..... ☐ 01  
 18 to 24 ..... ☐ 02  
 25 to 34 ..... ☐ 03  
 35 to 44 ..... ☐ 04  
 45 to 54 ..... ☐ 05  
 55 to 64 ..... ☐ 06  
 65 to 74 ..... ☐ 07  
 75 to 84 ..... ☐ 08  
 85 or over ..... ☐ 09  
 Prefer not to say (do not read out) ..... ☐ 10

Q39 **C&YPS ONLY:** How old is your child?

Q40 To which of these ethnic groups do you belong?

White or White British ..... ☐ 1  
 Mixed ..... ☐ 2  
 Asian or Asian British ..... ☐ 3  
 Black or Black British ..... ☐ 4  
 Chinese ..... ☐ 5  
 Prefer not to say (do not read out) ..... ☐ 6  
 Any other ethnic group (write in below) ..... ☐ 7

Q41 The Equality Act 2010 defines a disability as, 'A physical or mental impairment that has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities'.

In this definition, long term is taken to mean more than 12 months and would cover long term illness such as cancer and HIV or mental health problems.

- Yes ..... ☐ 1  
 No ..... ☐ 2  
 Prefer not to say (do not read out) ..... ☐ 3

Q42 Do you have a religion or belief?

- Yes ..... ☐ 1      Go to Q43  
 No ..... ☐ 2      Go to Q44  
 Prefer not to say (do not read out) ... ☐ 3      Go to Q44

Q43 If yes, what is it?

- Christian (including Church of England, Roman Catholic and all other denominations)..... ☐ 1  
 Muslim..... ☐ 2  
 Sikh..... ☐ 3  
 Judaism/Jewish..... ☐ 4  
 Hinduism ..... ☐ 5  
 Buddhism..... ☐ 6  
 Other (specify below) ..... ☐ 7

Q44 Do you consider yourself to be?

- Heterosexual / straight ..... ☐ 1  
 Gay or lesbian..... ☐ 2  
 Bisexual ..... ☐ 3  
 Other..... ☐ 4  
 Prefer not to say..... ☐ 5

Q45 Which of these activities best describes what you are doing at present?

- Employee in full time job ..... ☐ 1  
 Employee in part time job..... ☐ 2  
 Self employed ..... ☐ 3  
 In full time or part time education/training..... ☐ 4  
 Not working/unemployed (include if on long term sickness or disability or looking after the home or family) ..... ☐ 5  
 Retired ..... ☐ 6  
 Doing something else (specify below) ..... ☐ 7

Q45b Please could I take your postcode?