

Engagement event report

March 2019



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1. Purpose of the event

NHS North Kirklees Clinical Commissioning Group (CCG) invited the public and representatives of the voluntary and community sector (VCS) organisations to attend their engagement event on Wednesday 19th March, 2.00pm – 4.00pm at Batley Town Hall.

The event had been arranged as part of the North Kirklees CCG commitment to hold regular engagement events to provide updates on the work of the CCG and to invite attendees to participate in discussions.

As well as hearing presentations the public and VCS were invited to take part in discussions about the NHS Long Term Plan and Primary Care Networks.

2. Attendance at the event

26 people attended, representing 8 voluntary and community sector organisations. In addition to representatives from the voluntary and community sector there were also representatives from GP practice Patient Reference Groups, Kirklees Council, and South West Yorkshire Partnership NHS Foundation Trust. See appendix A for a full list of the organisations that attended.

3. Presentations

A number of presentations were delivered (see appendix B), these were:

Update - delivered by Dr David Kelly updating on the Lung Health project; Thriving Kirklees; and the Looking out for our neighbours campaign.

NHS Long Term Plan - delivered by Dr David Kelly – providing an overview of the NHS Long Term Plan and what it means for Kirklees.

Primary Care Networks - delivered by Chris Nicholls – providing an overview on the development of Primary Care Networks (PCN) in Kirklees.

4. Questions / comments raised

The following questions / comments were raised in response to the presentations:

Long Term Care presentation

Question was asked around new healthcare apps in relation to use/abuse of data particularly those being used by mental health service.

Primary Care Networks presentation

Following PCN presentation the following questions were asked:

- Will PCNs affect the continuity of care – will patients find it easier to see a GP in future?
- Will GP practices be merging?
- How will PCNs impact on secondary care and other services

- Representative from mental health trust indicated that they were not fully aware of PCNs or what their role was in them
- Who will manage PCNs?
- Will contracts for PCNs go out to tender?
- How will PCNs be governed?
- Will GPs have to do this on top of their day jobs?
- Will more efficient surgeries become overburdened with work? Will some practices simply pass on their work to others?
- Are all patient records going to be shared across a PCN – by staff in up to 8 GP practices?

5. NHS Long Term Plan

Four facilitated discussion groups took place and notes were taken of each of the discussions (see appendix C for notes for each discussion group). Each group was asked to discuss the following question:

What areas of the Long Term Plan would you would like to focus on at future events?

People were interested in learning more about the following areas;

- What is available now and what does the Long Term Plan mean for the future.
- Timeline for changes being implemented locally.
- Mental health including;
 - Substance misuse - cannabis and psychosis in young people
 - Young people's mental health and particularly crisis support
 - Transition from CAMHS to adult services
 - Domestic sexual abuse
 - Eating disorders
 - Workforce for mental health
 - Support for mental health issues
 - How will the mental health extra funding be spent and how will this extra funding build upon/impact upon existing services.
- Workforce planning in respect of primary care
- The role of Social Prescribing Link Workers and what will be new.

Questions raised

- What will happen to the walk in centre in Dewsbury? (following on from conversation about Urgent Treatment Centres and increasing community based services)
- What is the difference between online consultations + E-Consultations? How will it work? What will the benefits for patients and GPs be?
- How is health involved in planning decisions, such as impact on local services, health of the local population, pollution etc? Is this part of the Long Term Plan?
- How will extra mental health funding be spent? Especially men's mental health? How will it tie in with current services?
- Are new digital services like the mental health app aimed at young people digitally secure?

- Where is the workforce coming from to support new mental health funding?
- What is in place in terms of places of safety which can be accessed immediately in the case of a mental health emergency situation?
- Do we discuss mental health enough as part of NHS day to day running?
- How will the workforce be utilised to back up the new funding?
- How can community services reach people that are unable to leave their homes? Digital services?
- Plans for children's services?
- 400 private care homes have closed across the UK over the last 5 years. How do we place hospital patient discharges without a strong care sector?
- Been hearing for a while about clinicians having access to patient records wherever they are – when will this be an actual reality?
- Paramedics being given 'extra duties'. Is this not taking them away from their main roles?
- How can patients keep their data 'confidential' when they can't opt out of being in a 'network' which will share data?
- NHS 111 SPA for mental health crisis. How does that work with local services?

6. Primary Care Networks

Four facilitated discussion groups took place and notes were taken of each of the discussions (see appendix C for notes for each discussion group). Each group was asked to discuss the following questions;

What else do you want to know about the work of primary care networks?

People were interested in learning about how the networks are going to work in practice. And to understand what change, both positive and negative, there would be for patients, VCS and providers.

People were particularly interested in who would be part of the leadership teams, and what authority / powers the PCNs would have. Some wanted clarity on how PCNs could impact on established NHS research and development networks that are already in existence.

How would you like to be involved in and informed about the work of your local PCN?

There was some concern that the development of PCNs hadn't been raised in public before, and queries as to whether this should have been done sooner. People do want to be involved and kept up to date on developments, and the proposed mechanisms were;

- There was a recommendation that a briefing be provided urgently to all PRGs to explain what a PCN was, which could include space for the local network to include some specific detail about themselves and what they were doing.
- Need to ensure that there is consistency in the messages that are being communicated so everyone is hearing / reading the same messages.
- Utilise the GP Practice Patient Reference Groups (PRG) by having the development of PCNs as a regular agenda item; invite PRG reps to be part of the PCN meetings; encourage PRG reps to produce a practice newsletter including information about the

PCNs. Although it was acknowledged that not everyone is engaged with their PRG so need to ensure that messages go wider than just the PRG.

- GP Practices to use a wide range of mechanisms to share information this included;
 - Having information on GP practice websites and using social media
 - Include a 'did you know' statement on the on hold message when calling the GP practice
 - Add a message to prescriptions
 - Install PCN noticeboards at practices providing information about which network the practice is part of
- Publish PCN priority work areas
- Involve Voluntary Community Sector organisations.

Suggestions made on how the PCNs could be developed

- Incorporate Police Community Support Officers (PCSO) in PCNs
- Establish Network Manager posts

Questions raised

Appointments

- Relationship with GPs is important and this includes being able to see doctor who knows you and your history. The current system of having a names GP for the elderly doesn't appear to be working. Will PCNs improve this?
- How will priority be given to the elderly (as highest users of services) within PCNs?
- Can patients go to own surgery, if they can't reach the one assigned by the PCN urgently?
- What happens if people want to see their "own" GP?

Development of PCNs

- Timelines of scheme should be released. Why are the NHS creating PCNs? What will this scheme look like in 5 years?
- Will PCNs have a board?
- Concerns around sharing of data within the PCN – what safeguards are in place?
- How is the medical indemnity issue going to be addressed?
- Should this be put out to tender in terms of leadership?

Involving patients

- Will Patient Voice have a part in PCNs?
- Patients want their say before the PCNs form. How can they have their say?
- What will happen to PRG's – will the network decide?

7. Evaluation of the event

Each of the attendees was asked to complete an evaluation form about the event (see appendix D). 11 people completed the form and all of the respondents rated the event as either excellent or good. In terms of the venue there were some concerns expressed about the seating.

All of the respondents felt that they were given the opportunity to have their say, and found the discussions informative and interesting.

“Interesting presentations and discussions”

“Useful updates and info on future plans”

“It is helpful to hear about plans and changing services”

“Thank you for organising these events”

8. Next steps

The feedback we received will inform our plans as they develop. We will use our Quarterly Bulletin and future engagement events as an opportunity to update you on the progress we make.

List of organisations represented at the event

26 people attended the event, with representatives attending from the following organisations:

1. Bradford District CCG West Yorkshire Research & Development
2. Carers Count
3. Cleckheaton PPG representative
4. Happy Memories
5. Horton Housing
6. Mirfield Practice PPG representative
7. North Kirklees NHS Support Group
8. North Road Surgery PPG Representative
9. PALS (Kirklees)
10. Parkview Surgery PPG representative
11. PJs Health and Fitness
12. Ravensthorpe Surgery PPG representative
13. Royal Voluntary Service
14. South West Yorkshire Partnership Foundation Trust
15. St Anne's Community Services
16. United Response
17. Women Centre

Presentation



Quarterly engagement event

WELCOME



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Event programme

Welcome	Dr David Kelly
Update	Dr David Kelly
Long Term Plan	Dr David Kelly
Primary Care Networks	Alan Turner

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Update

Lung Health Project

- North Kirklees is part a £70 million national, targeted Lung Health Checks project
- People aged between 55 and 74 who smoke/have ever smoked will be offered a free lung health check
- Checks are designed to identify a range of health problems and speed up access to potentially life-saving treatment



Update

Children and young people's mental health

- NHS North Kirklees and NHS Greater Huddersfield CCGs are among 25 trailblazer sites that will see the development of new mental health support teams for children and young people
- Thriving Kirklees have commissioned Kooth, an online emotional health and wellbeing platform for children and young people aged 11-19 years



Update

- **Looking out for our neighbours** launched 15 March across West Yorkshire and Harrogate
- Aims to help prevent loneliness and social isolation by encouraging people to do simple things to look out for one another
- Households will receive a 'neighbour pack' with resources and suggestions
- Nearly 300 organisations have pledged their support
- Visit ourneighbours.org.uk



www.longtermplan.nhs.uk

NHS Long Term Plan

The NHS has written a Long Term Plan (LTP) so it can be fit for the future. The plan is backed by a Government commitment to improve NHS funding.

What does the LTP mean for North Kirklees?

- Confirms that the CCG is going in the right direction
- Includes some new commitments which will impact on CCGs and other NHS organisations
- Local approach will be reflected in CCG Annual Operating Plan and in West Yorkshire and Harrogate Care Partnership 5-year plan

<https://www.youtube.com/watch?v=H3I1NS8cyBE>

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NHS Long Term Plan

Theme 1: more NHS action on prevention

- Smoking
- Obesity
- Alcohol



NHS Long Term Plan

Theme 2: better care for major health conditions

- Heart disease and stroke
- Cancer
- Respiratory conditions
- Dementia
- Mental health

NHS Long Term Plan

Theme 3: investing in mental health services

- New and integrated models of primary and community mental health care
- Extra 380,000 people a year able to access IAPT services
- NHS 111 will become the single point of access for people experiencing mental health crisis
- Ambulance staff will be trained and equipped to respond effectively to people experiencing a mental health crisis
- Mental health liaison services will be available in all acute hospital A&E departments



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NHS Long Term Plan

Theme 4: primary and community services

- Increased funding for primary and community services
- GP practices will join together to form primary care networks covering 30–50,000 people
- Development of integrated community healthcare
- Better support for people living in care homes



NHS Long Term Plan

Theme 5: hospital services

- Redesign and reduce pressure on emergency hospital services
- Urgent treatment centres rolled out across country
- Outpatient services will be redesigned
- Reducing delayed discharges from hospital remains priority



NHS Long Term Plan

Theme 6: digital technology

- Simple digital access to NHS services
 - Online GP consultations
 - New national NHS app
 - Wifi in GP practices
 - Digital outpatient services
- Greater patient access to own health records
- Clinicians will be able to access patient records and care plans wherever they are



NHS Long Term Plan

Theme 7: personalised care

- People to have more control over their own health and care
- Increased support for patients/carers to self manage long-term health conditions
- Roll out NHS Personalised Care model
- Increased referrals to social prescribing schemes



NHS Long Term Plan

What Next?

- Healthwatch Kirklees will be engaging locally on some specific elements of the plan during March and April 2019.
- CCG event on Monday 8th April 2019 at 12pm – 3pm at Hudawi Centre, Huddersfield
- Future engagement events

Over to you

**What areas of the Long Term Plan
would you would like to
focus on at future events**



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Primary Care Networks

Alan Turner

Programme Manager

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What are Primary Care Networks?

- GP practices are joining together to form 'networks'
- Typically neighbouring practices
- Each network serving 30,000–50,000 patients
- Other community-based professionals and services will work alongside networks eg pharmacists, district nurses, dementia workers physiotherapists, social care and the voluntary sector

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Why is this happening?

- Approach has been piloted across the country over the past 3 years
- NHS England expects every GP practice to become part of a primary care network by June 2019
- Reinforced by the NHS Long Term Plan
- Part of the new GP contract published in 2019

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What does this mean for patients?



<https://www.youtube.com/watch?v=W19DtEsc8Ys>

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Benefits of Primary Care Networks

- More joined-up care for patients
- Small enough to deliver personalised care
- Large enough to ensure GP practices and other services remain resilient

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Networks in North Kirklees

Area	Number of practices	Population
Cleckheaton and Heckmondwike	7	53,000
Batley and Birstall	8	60,000
Ravensthorpe, Dewsbury and Mirfield	5	42,000
Dewsbury and Thornhill	7	40,000

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Next steps?

- Rapid development of networks in progress
- Each considering their own population health needs
- Setting up governance and leadership arrangements
- From 2019 networks will employ one clinical pharmacist and one social prescriber
- From 2020 physiotherapists and physicians associates employed
- From 2021 will include community paramedics

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Over to you

What else do you want to know about the work of primary care networks?

How would you like to be involved in and informed about the work of your local PCN?



Thank you for attending today

Discussion Group feedback

Discussion group 1

Facilitator: Khaled Naeem

Scribe: Aimee Haggas

NHS Long Term Plan

- Wellness Model (Obesity, Exercise)
- Role of Social Prescribing Link Workers
- Carers
- How can community services reach people that are unable to leave their homes? Digital services?
- Plans for children's services? Re: Obesity?
- Digital Technology – Security Assurance. (are new digital services like the mental health app aimed at young people digitally secure?)
- How can patients keep their data 'confidential' when they can't opt out of being in a 'network' which will share data?
- NHS 111 SPA for mental health crisis. How does that work with local services?
- Online consultations + E-Consultations. How is it working? Benefits for patients and GPs? (Understanding the difference between online and E consultations)
- Health Influence on Planning Policy. Planning in terms of buildings, impact on local services + personal health (pollution). Is this part of LTP?

Primary Care Networks

What else do you want to know about

- The group felt they didn't know enough about PCN to give a response and had a lot of basic questions;
- How are networks going to work?
- Who is the leadership team?
- Who decides which practices get what?
- GP's view- they're still finding their feet, they don't have the answers to these questions if patients asked.
- Concern this could impact on established NHS research and development networks that are already in existence, and there might be cross over in how the R&D team have been set up and which areas they work with.

How would you like to be involved and informed

- Could be a regular item on PRG agenda, but the group acknowledged they're not really engaged with their PRG.
- PRG rep could be part of PCN meeting.
- PRG could produce a newsletter and leave in practice. This could have info about PCN in.

- Could put a 'did you know' statement on the on hold message when calling practice.
- Could add a message to prescriptions.
- There should be a sign in the practice which says which network the practice is a part of.

Discussion group 2

Facilitator: Sarah Sowden

Scribe: Jacob Mutsvanemoto

NHS Long Term Plan

What areas of the NHS NK Long Term Plan would you like to focus on at future events?

- Mental health: substance misuse - cannabis and psychosis in young people. Establish school hubs and adolescent wards in hospitals.
- Transitions from CAMHS to adult services: needs leadership.
- Physical health is ignored and blamed in dementia/mental health.
- Earlier and more intensive support for eating disorders.
- Domestic sexual abuse: (the resultant trauma leads to loneliness, mental health problems, substance misuse, poverty and eating disorders).
- Physical interventions for eating disorder clients in the community

Primary Care Networks

Question 1

What else do you want to know about PCNs?

Discussed in plenary

Question 2

How would you like to be involved in and informed about the work of your local PCN?

- Establish: Network Manager posts
- Regular newsletters:
 - Paper: on letter boards at GP practices
 - Digital: email, website and social media
- Social prescribing
- Interval circulation of lists of practices in the Networks
- Publish respective network priority work areas
- Meaningfully involve Voluntary Community Sector organisations.
- Digital media outreach: network websites and social media platforms
- Install network letter boards at practices
- Virtual meetings
- Incorporate PCSOs in PCNs

Discussion group 3

Facilitator: Siobhan Jones

Scribe: Matt Thompson

Long Term Plan

What areas of the NHS NK Long Term Plan would you like to focus on at future events?

- GP appointments for elderly/those with LTCs. Relationship with GPs is important and this includes being able to see doctor who knows you and your history. This doesn't work well now = never get to see their 'designated' GP. Will PCNs improve this?
- How will priority be given to the elderly (as highest users of services) within PCNs.
- Young people's mental health and particularly crisis support. What is available now and what does the LTP mean for the future.
- How will the MH extra funding be spent and how this extra funding builds upon/impacts upon existing services. Interested in knowing more about support of men's MH issues?
- Workforce for MH
- What happens to the walk in centre in Dewsbury (following on from conversation about UTC and increasing community-based services)
- Timeline for changes being implemented locally.
- Basic principles of healthcare must be covered.
- Ageing population and chronically ill still find it difficult to get an appointment with their own GP.
- The GP they do get has no background knowledge of their history.
- They were promised a designated GP for over 75's, which hasn't happened.
- GP's unaware of the needs of the elderly.

Questions

- How will extra mental health funding be spent? Especially men's mental health? How will it tie in with current services?
- Where is the workforce coming from to support new MH funding?
- What is in place in terms of places of safety which can be accessed immediately in the case of a MH emergency situation?
- Do we discuss MH enough as part of NHS day to day running?
- Scheme sounds great, but how will the workforce be utilised to back up the new funding?

Primary Care Networks

What else do you want to know about PCNs?

How would you like to be involved in and informed about the work of your local PCN?

- Some concern that we hadn't raised this development in public before, particularly as networks are to be in place by June.
- Timing and pace of PCN is too fast to effectively communicate the new scheme to those it will impact.
- A concise and honest comms release is needed on the subject.
- Provide a consistent and honest message to all practices, to be disseminated between practice staff and patients.

- There was a recommendation that a briefing be provided urgently to all PRGs to explain what a PCN was, which could include space for the local network to include some specific detail about themselves and what they were doing.
- There was also a concern about consistency of message amongst practices within a network. Practices have been known to put their own spin on an issue, and PCNs need to avoid this by developing common lines for all to use with patients. So everyone has the same story.

Questions

- We would like more briefs on the scheme from higher level representatives, including positives and negatives of scheme. How will this affect us?
- Timelines of scheme should be released. Why are the NHS creating PCNs? What will this scheme look like in 5 years?
- Transport. Can patients go to own surgery, if they can't reach the one assigned by the PCN urgently?
- Will walk-in centres exist still?
- Will PCNs have a board? (DK: 'It is the choice of the individual Primary Care Network.')
- Will Patient Voice have a part in PCNs?
- Patients want their say before the PCNs form. How can they have their say? (DK: 'The networks are a new scheme. May be working out regulations and how PCN will work, before engaging patients and getting their views'.)

Discussion group 4

Facilitator: Julie Pieske

Scribe: Helen Haythorne

NHS Long Term Plan

- Workforce planning – lack of GPs in primary care.
- Social prescription. Been around since 2012, what will be new? Different IT systems, extra funding etc. will be needed.
- Been hearing for a while about clinicians having access to patient records wherever they are – when will this be an actual reality?
- Paramedics being given ‘extra duties’. Is this not taking them away from their main roles?
- Prevention better than cure – referrals and recommendations to prescribed exercise regimes. Working with local fitness facilities like PJ’s health and fitness who work individually with each member to improve mobility, health and fitness.
- Private care homes. 400 have closed across the UK over the last 5 years. How do we place hospital patient discharges without a strong care sector?
- 7 day working needs training. Patients also need to think 7 day working as late nights and weekends. Appointments available, not taken up.
- Prevention is better than cure – Obesity/ weight loss referrals should be more readily available and especially to Slimming World (as in other areas of the country) to make lifestyle changes/ health eating and permanent weight loss.

Primary Care Networks

1. What else do you want to know about the work of primary care networks?

- Concerns around sharing of data within the PCN – what safeguards are in place?
- Concerns around whether it will work
- How is the medical indemnity issue going to be addressed?
- What happens if people want to see their “own” GP?
- Should this be put out to tender in terms of leadership?
- All logistics need to be worked out
- What will happen to PRG’s – will the network decide?

2. How would you like to be involved in and informed about the work of your local PCN?

- Being involved from the onset – different for each network area

Evaluation of the event

Public Event Batley Town Hall, 19 March 2019, 2.00pm – 4.00pm Event Evaluation

Thank you for taking the time to attend the event today, we hope you found it useful. We would appreciate if you could take the time to complete the questions below to let us know your views.

1. What was your overall impression of the event?

Excellent	Good	Adequate	Poor
3	8	0	0

Additional comments:

- Interesting presentations and discussions. I had no knowledge about the NHS Long Term Plan or Primary Care Networks.
- Good topics, good pace.

2. How would you rate the venue and facilities?

Excellent	Good	Adequate	Poor
2	8	1	0

Additional comments:

- Chairs rather uncomfortable for my back.
- No decaf available.

3. Do you feel you had your say today?

Yes	No
10	0

Additional comments:

- Don't have much to say, more about information gathering (?)
- Did not get my question answered satisfactorily. Was very defensive in answering.
- Some opportunity for discussion.
- NHS Long Term Plan.

4. What was your favourite thing about the event?

- Talking to other people about their issues.
- Long term planning.
- Presentations and questions from the floor.
- GP network changes.
- Meeting other people.
- Useful updates and info on future plans.

5. What was your least favourite thing about the event?

- Nothing
- Nothing
- The chair I was sitting on.
- N/A

6. Please use this space for any additional comments you may have about the event.

- None
- It is important that any further developments are widely communicated.
- Thank you for organising these events – they don't happen in every area of W. Yorks. It is helpful to hear about plans and changing services.

Equality Monitoring Form

To make sure we plan and buy the right services it is important for us find out some information about you. We use this information to know if we have reached enough people and to understand if people from different groups have different views. No personal information will be released when reporting statistical data and data will be protected and stored securely in line with data protection rules. This information will be kept confidential.

<p>1. What is the first part of your postcode?</p> <table border="1"> <tr> <td>Example</td> <td>HD6</td> </tr> <tr> <td>Yours</td> <td>WF17; WF5; WF14; WF13; BD19; HX3/ HD1; LS27</td> </tr> </table> <p><input type="checkbox"/> Prefer not to say x 2</p> <p>2. What sex are you?</p> <p><input type="checkbox"/> Male x 3 <input type="checkbox"/> Female x 7 <input type="checkbox"/> I identify in another way <input type="checkbox"/> Prefer not to say</p> <p>3. How old are you?</p> <table border="1"> <tr> <td>Example</td> <td>42</td> </tr> <tr> <td>Yours</td> <td>35; 58; 70; 73; 47; 80; 43; 46; 39</td> </tr> </table> <p><input type="checkbox"/> Prefer not to say x 1</p> <p>5. Which country were you born in?</p> <table border="1"> <tr> <td>England – 5</td> </tr> <tr> <td>Scotland – 1</td> </tr> <tr> <td>UK – 4</td> </tr> </table> <p><input type="checkbox"/> Prefer not to say</p> <p>6. Do you belong to any religion?</p> <p><input type="checkbox"/> Buddhism</p> <p><input type="checkbox"/> Christianity x 5</p> <p><input type="checkbox"/> Hinduism</p> <p><input type="checkbox"/> Islam x 1</p> <p><input type="checkbox"/> Judaism</p> <p><input type="checkbox"/> Sikhism</p> <p><input type="checkbox"/> No religion x 3</p> <p><input type="checkbox"/> Other (Please specify in the box below)</p> <table border="1" style="width: 100%;"> <tr> <td style="height: 20px;"></td> </tr> </table> <p><input type="checkbox"/> Prefer not to say x 2</p>	Example	HD6	Yours	WF17; WF5; WF14; WF13; BD19; HX3/ HD1; LS27	Example	42	Yours	35; 58; 70; 73; 47; 80; 43; 46; 39	England – 5	Scotland – 1	UK – 4		<p>7. What is your ethnic group?</p> <p>Asian or Asian British:</p> <p><input type="checkbox"/> Indian</p> <p><input type="checkbox"/> Pakistani x 1</p> <p><input type="checkbox"/> Bangladeshi</p> <p><input type="checkbox"/> Chinese</p> <p><input type="checkbox"/> Other Asian background (please specify)</p> <table border="1" style="width: 100%;"> <tr> <td style="height: 20px;"></td> </tr> </table> <p>Black or Black British:</p> <p><input type="checkbox"/> Caribbean</p> <p><input type="checkbox"/> African</p> <p><input type="checkbox"/> Other Black background (please specify)</p> <table border="1" style="width: 100%;"> <tr> <td style="height: 20px;"></td> </tr> </table> <p>Mixed or multiple ethnic groups:</p> <p><input type="checkbox"/> White and Black Caribbean</p> <p><input type="checkbox"/> White and Black African</p> <p><input type="checkbox"/> White and Asian</p> <p><input type="checkbox"/> Other mixed background (please specify)</p> <table border="1" style="width: 100%;"> <tr> <td style="height: 20px;"></td> </tr> </table> <p>White:</p> <p><input type="checkbox"/> English/Welsh/Scottish/Northern Irish/British x 9</p> <p><input type="checkbox"/> Irish</p> <p><input type="checkbox"/> Gypsy or Irish Traveller</p> <p><input type="checkbox"/> Other White background (please specify)</p> <table border="1" style="width: 100%;"> <tr> <td style="height: 20px;"></td> </tr> </table> <p>Other ethnic groups:</p> <p><input type="checkbox"/> Arab</p> <p><input type="checkbox"/> Any other ethnic group (please specify)</p> <table border="1" style="width: 100%;"> <tr> <td style="height: 20px;"></td> </tr> </table> <p><input type="checkbox"/> Prefer not to say x 1</p>					
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England – 5																		
Scotland – 1																		
UK – 4																		

8. Do you consider yourself to be disabled?

- Yes **No x 11**
 Prefer not to say

Type of impairment:

Please tick all that apply

- Physical or mobility impairment**
(such as using a wheelchair to get around and / or difficulty using their arms)
- Sensory impairment**
(such as being blind / having a serious visual impairment or being deaf / having a serious hearing impairment)
- Mental health condition**
(such as depression or schizophrenia)
- Learning disability**
(such as Downs syndrome or dyslexia) or cognitive impairment (such as autism or head-injury)
- Long term condition x 1**
(such as cancer, HIV, diabetes, chronic heart disease, or epilepsy)
- Prefer not to say

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

- Yes x 5** **No x 6** Prefer not to say

10. Please select the option that best describes your sexual orientation.

- Bisexual (both sexes)
 Gay (same sex) x 1
 Heterosexual/straight (opposite sex) x 10
 Lesbian (same sex)
 Other
 Prefer not to say

11. Do you identify as Trans?

- Yes **No x 8** Prefer not to say

12. Do you/or anyone you live with get any of these benefits: Universal Credit, Housing Benefit, Income Support, Free School Meals, Pension Credit – Guarantee Credit element, Working Tax Credit, Child Tax Credit, Jobseekers Allowance, Council Tax Benefit, Incapacity Benefit/Employment Support Allowance, Disability Living Allowance/Personal Independence Payment

- Yes x 2** **No x 6** **Prefer not to say x 2**



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