







# **Using Health and Care services during** Covid 19 lockdown

Patient and public experience on how the National Covid 19 lockdown impacted on them and their use of local NHS and Social Care services

# **Contents**

Introduction	3
What did we do?	3
Covid 19 survey analysis	4
Access to information	4
Access to General Practitioners	6
Long term conditions	11
Access to Pharmacies	12
Social Care	14
Accessing healthcare	16
Access to mental health	17
Views of changes	18
Groups more likely to have been affected	19
Lockdown in the City vs Lockdown in the County	19
Summary	20
Next steps	20
Thank you & Acknowledgements	21
Appendix A - Demographic breakdown	22



# Introduction

During early discussions between Healthwatch and engagement colleagues in the NHS, it became clear a common goal was to understand how the national pandemic lockdown was impacting on how local residents were accessing health and care services as well as how services were changing to meet the challenges of such restricted patient mobility.

Working together with Healthwatch Rutland and the Clinical Commissioning Groups (CCGs) across Leicester, Leicestershire and Rutland (LLR), a joint survey was designed and hosted between 29th April and the 7th June.

This report looks at the overall responses and also looks at the difference between responses between residents of Leicester City and residents of Leicestershire County.





# What did we do??

For a full breakdown of the engagement and communications approach see the Joint Healthwatch and LLR CCGs report - 'A review of Primary and Social Care services during the Covid-19 pandemic' www.healthwatchll.com/news

This work was undertaken through an online survey which was widely shared with all Health and Social Care partners and through a substantial communication plan, aimed at all media and press outlets locally.

The survey was open for responses between the 29th April till the 7th June.

#### **Guidance**

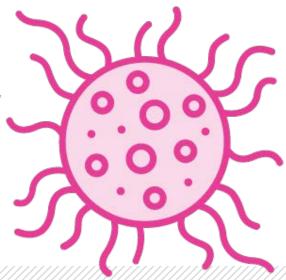


Latest information and advice from Leicester City Council
Latest information and advice from Leicestershire County Council

Leicester City Clinical Commissioning Group (CCG), West Leicestershire CCG, and East Leicestershire and Rutland have jointly produced advice for people in Leicester, Leicestershire, and Rutland.

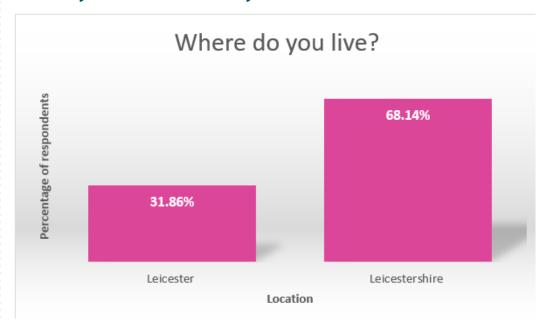
Information and resources are available to let you know how University Hospitals of Leicester (UHL) are supporting patients and visitors in our hospitals.

Government Guidance NHS Guidance



# **Covid 19 survey analysis**

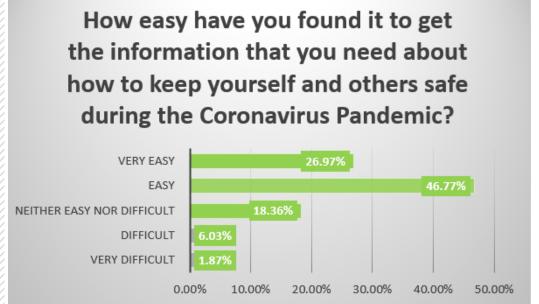
There was a total of 835 surveys fully or partially completed with 31.86% being from respondents who said that they lived in Leicester City and 68.14% saying that they lived in the County of Leicestershire.



(A full breakdown of the demographic information can be found in Appendix A)

#### **Access to information**

73.74% of respondents said that they had found it very easy or easy to get the information that they needed to stay safe and keep others safe during the pandemic. 7.9% said that they had found it difficult or very difficult to get information.



69% of respondents from the City said that they had found it very easy or easy to find information; 10% said that they had found it difficult or very difficult to find information. Of the respondents who indicated that they resided in the County,

76% said that they had found it either very easy or easy to find information and 7% said that it was either difficult or very difficult to find information.

# Where have you found information or advice about the Coronavirus Pandemic? 23.82% 14.25% 11.68% 22.05% 10.71% 8.43% 7.12% 1.94% Aredia Received by Toch Triping Contine Social Received by Toch Triping Contine Contine Social Received by Toch Triping Contine Social Received by To

Source of information

The highest percentages of respondents who answered the question said that they had found information and advice from the websites of national bodies such as the government websites or NHS websites (23.82%). The second highest group were those that had found information from the media (22.05%) including radio, television and newspapers.

Of those respondents who said that they lived in the City 23% said that they had found information online from national sources. 21% said that they had found out information from the media and 14% said that they had found information from local online sources.

Of the respondents who were resident in the County 24% said that they had found information online from national organisations; 23% said that they had found information from the media and 15% had found information from local online resources.

Those that said that they had found it difficult to access information were asked what had made it difficult for them. When considered as themes most of the comments related to issues with information being inconsistent. For example, one respondent commented

'it has been difficult because there have been very mixed messages given surrounding healthcare' whilst another said that they 'had to put together information from various sources to get a clearer picture. Unfortunately, there is an element of sensationalism so it can be difficult to understand what is needed to be done.'

It was also commented by some that using the media as a source of information was difficult as there was 'too much speculation and opinion instead of facts.' For another there was 'far too much information. Difficult to unpick the fake news. A lot of news stories were scaremongering. It was very difficult to get clear, informed advice that was specific to me and my family.'

Being able to get specific information was also raised as a theme, with condition specific information being seen as lacking for some such as 'managing Diabetes' and for another 'information relating to my personal medical condition was absent, so was unsure how to respond, but otherwise background information was good,' Those that had long term conditions were sometimes confused about shielding and who should be doing so. One respondent commented that their husband was older and had a lung condition. However, they had 'not been advised to quarantine for 12 weeks. No letter came from the Government advising him to do this. Nevertheless, he is self-isolating. Another respondent commented that they were 'not sure about shielding as initial advice contradictory then update wasn't clear. Not sure if I should be shielding and no-one seems to be able to tell me.'

#### **Access to General Practitioners**

Over half (54%) of the respondents that answered the question felt that they were being kept up to date with changes at their GP practice during the Pandemic. 38% said that they did not feel that they were being kept up to date.

46% of the respondents from the City said that they were kept up to date about changes and 43% said that they were not kept up to date; 11% said that they did not know.

Of those respondents who said that they were resident in the County 57% said that they felt that there were kept up to date with changes at their GP practice; 35% said that they did not feel they were being kept up to date and 8% said that they did not know.

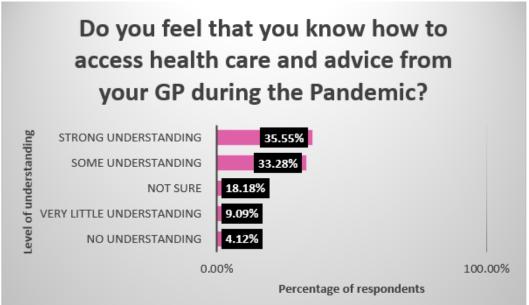


Do you feel that you are being kept up to date on changes and ways to access services at your GP during the Pandemic?

| Section 2.54% | Section 2.54% | Pandemic 2.54% | Pandem

Those that said that they did not feel they were being kept up to date on changes at their GP practice were asked how they could be better supported. Comments have been divided into themes. A key theme was that respondents would have benefited from more information on when they could access a doctor for advice,

for example, one respondent commented that 'you could make it clear under what circumstances you can contact the GP. You could be more explicit how your needs will be met at this time.' Another theme was around understanding if and when practices were open as some respondents believed their practice to be closed with one respondent commenting that "I don't know whether they can use my GPP or not. It appears to be closed.' A further theme from the feedback was for individuals to be contacted by their GP practice with information by text, email or by letter rather than patients having to search out the information for themselves and this should be regularly updated with relevant changes.

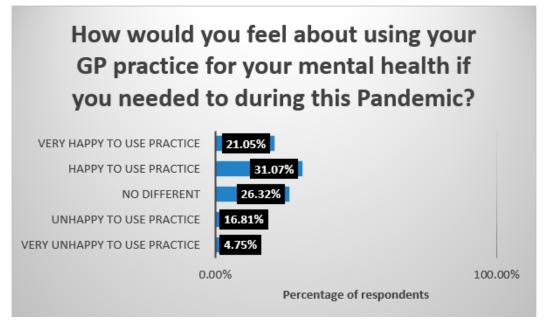


68.83% of the respondents to the question said that they felt that they had either a strong understanding or some understanding of how to access care and advice from their GPP during the Pandemic.

13.21% said that they had very little or no understanding.

**58%** of the respondents from the City said that they either had a strong understanding or some understanding of how to access their GPP during the Pandemic. **17%** said that they had little or no understanding of how to access healthcare and advice from their GP during the Pandemic.

73% of residents from the County said that they had either strong understanding or some understanding of how to access their GP during the Pandemic; 12% said that they either had little or no understanding how to access their GP at this time.



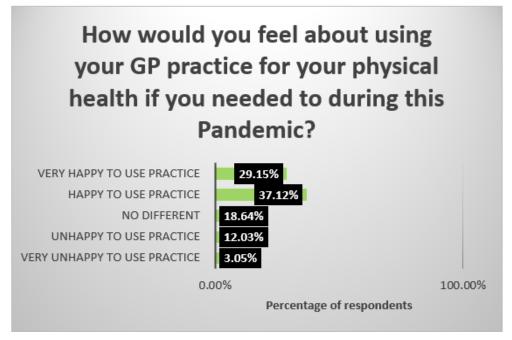
When asked how they would feel about using their GP Practice for their mental health during the Pandemic 52.12% of those that answered the question said that they would be very happy or happy to use their GPP for their mental health during the Pandemic. 21.56% of respondents to the question said that they were unhappy or very unhappy to use their GP practice. 26.32% of the respondents felt that there was no difference in whether they would use their GPP for their mental health or not during the Pandemic.

43% of the City respondents to the question said that they would be happy or very happy to use their GP for their mental health during the Pandemic; whereas, 31% said that they were unhappy or very unhappy about using their GP for their mental health at this time.

Of the respondents from the County 56% said that they would be happy or very happy to use their GP for their mental health during the Pandemic; 18% said that they would be unhappy or very unhappy about using their GP for their mental health during the Pandemic.

Respondents were asked why they had given the answer that they had as to how they felt about using their GPP practice if they needed help for their mental health during the Pandemic. Those that were happy to use their practice gave answers such as 'I have a good rapport with doctors and feel I can talk to them' or that 'the GP practice is the first port of call.' For those that were unhappy to talk to their GP a 'lack of empathy' from their GP was amongst the reasons for not using the service. One respondent said that they felt that 'it would not be important enough' and another that they were 'not sure the service was there.' Generally, the answers were not Pandemic related and were more concerned with general access to mental health support through GP practices.

When asked how they felt about using their GP Practice for their physical health during the Pandemic 66.27% of those that answered the question said that they were either very happy or happy to use the practice for their physical health. 15.08% said that they were either unhappy or very unhappy to use their GP practice for their physical health during the Pandemic.



Of the respondents from the City 53% said that they were either very happy or happy to use their GP for their physical health during the Pandemic and 20% said that they were either very unhappy or unhappy to use their GP.

Respondents were then asked to explain their answers. The key themes that emerged were not related specifically to the Pandemic. Being able to access appointments was a key concern of respondents with one commenting their GP was 'always fully booked' and another respondent saying that 'it was hard enough to get an appointment pre-pandemic.' Others were positive about using their GP saying that 'if I required medical advice and intervention and it was not an emergency, I would use my GP as a first port of call. One respondent told how they were being contacted regularly by their GP because of their ongoing health concerns saying, 'my GP has already been in touch a couple of times and spent a long time on this.' However, some respondents raised issues with the ways that they could access their GP with alternatives to seeing a GP face to face seen as inadequate by some respondents. One respondent commented that 'the GPs are very reluctant to see anyone face to face so how can they assess people if they are unable to look at a person, feel their stomach, listen to their heart rate, etc? People with serious illnesses are being missed.'

Respondents were asked how they felt about the ways that they could access advice and care from their GP practice.

Of those that answered the question about using telephone or online triage 73.08% of the respondents said that they were either very satisfied or satisfied with online or telephone triage at their GP practice. 15.97% of respondents said that they were either dissatisfied or very dissatisfied with telephone or online triage at their GP practice.

74% of the respondents from the City said that they were very satisfied or satisfied with telephone or online triage and 19% said that they were dissatisfied or very dissatisfied.

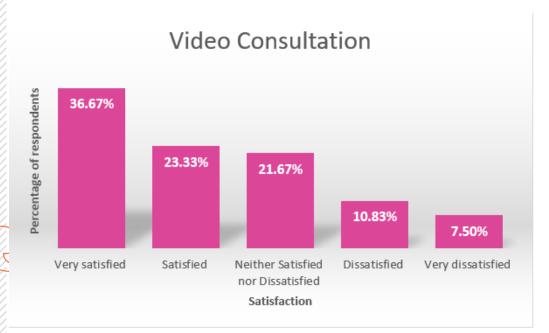
Of the respondents from the County 77% said that they were either very satisfied or satisfied with telephone or online triage. 15% said that they were either dissatisfied or very dissatisfied.



60% of the respondents who answered the question said that they were either very satisfied or satisfied with video consultations at their GP practice.

18.33% of respondents to the question said that they were either dissatisfied or very dissatisfied with video consultations at their GP practice.

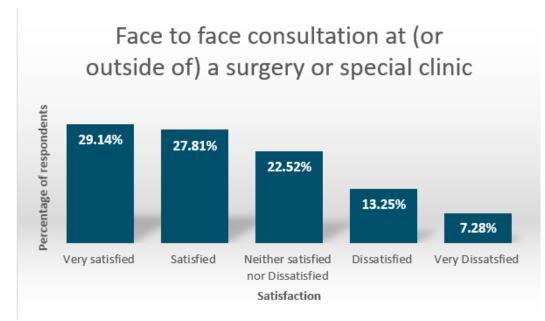
50% of the respondents from the City said that they were either very satisfied or satisfied with video consultations and 11% said that they were either dissatisfied or very dissatisfied. 66% of the respondents from the County said that they were very satisfied or satisfied with video consultations and 14% said they were either dissatisfied or very dissatisfied.



**56.95**% of respondents who answered the question said that they were very satisfied or satisfied with face to face consultations at their surgery or special clinic. **20.53%** of the respondents said that they were either dissatisfied or very dissatisfied.

50% of the respondents from the City said that they were very satisfied or satisfied with face to face consultations whereas, 20% said that they were dissatisfied or very dissatisfied.

61% of the respondents from the County said that they were either very satisfied or satisfied with face to face consultation at a surgery or special clinic. 21% said that they were either dissatisfied or very dissatisfied.



Respondents were asked if there was anything that had worked particularly well or had gone badly in accessing their GP during the Pandemic.

Feedback on remote appointments whether by telephone or video were mixed with some respondents being positive about their experience of telephone triage and appointments and others less happy. For example, one respondent commented that 'the telephone triage is excellent' and another saying that 'telephone consultations worked extremely well. No time wasted.' However, other respondents felt that remote appointments were less thorough with one respondent saying that 'having hearing problems using anything that you have to listen to can be very challenging at times and I don't like using this.'

Repeat prescriptions were a theme in the feedback with respondents being generally positive about how their prescriptions had been dealt with by the GP practice, for example one respondent said that 'ordering prescriptions online has been useful. No need to ring or visit the practice...' However, for some the experience of ordering repeat prescriptions. For example, one respondent said that the GP practice 'would not take request for repeat medication over the phone [and] wanted the patient to come to the surgery and request in person.'

There was mixed feedback about the safety in practices when respondents did go to the GP practice. Some felt that the changes to maintain safety were positive with one respondent saying that 'I think sectioning the reception are with limited seating was appropriate and increasing safety of staff and patient's'. However, others felt that 'the way the reception is set up is bad. Staff need to be safe but there is no information about where to go/stand and what to do. And they are very unwelcoming, as if you shouldn't be there. Carers are anxious enough without having to deal with hostility at the doctors.'

# **Long Term Conditions**

When asked if they or a family member had one or more long term conditions that required them to have regular contact with their GP or Pharmacy, 72% of the respondents who answered the gauestion said that they did.

72% of respondents from the City said that they or a family member had one or more long term conditions. 71% of respondents from the County said that they or a family member had one or more long term conditions.



Those respondents who said that they, or someone that they care for, had a longterm condition were asked how their care had been affected by the service changes in the Pandemic.

Themes from the feedback included the *cancellation of appointments in secondary care* with one respondent commenting that 'the changes were with the hospital who cancelled follow up appointments after 12 March, which was a shame because my husband had to go in as an emergency on 24 April.' Another said that 'I think the management of my illness has got worse under the current conditions, but I think that has been mainly due to changes at the hospital.'

Other respondents said that routine check-ups had been cancelled with one saying that there were 'no diabetic checks' and another said that it was 'all on hold'. However, others said that they had still have their check-ups with one saying that 'appointments to see the District Nurse have still been possible' and another saying that 'I would probably have had my last consultation face to face in normal circumstances but it wasn't a problem to do it by phone.' Another said that they had had a 'routine appointment with the asthma nurse.''

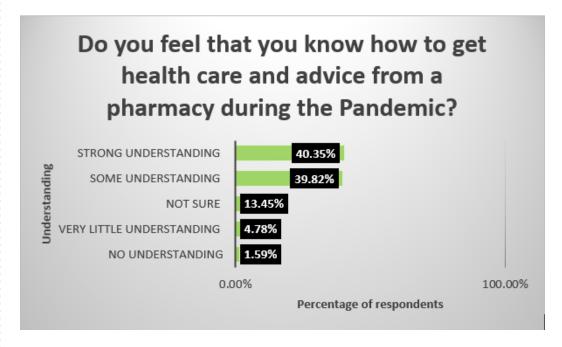
Those with long term conditions were asked how they felt about accessing their GP or pharmacy for support during the pandemic. Themes from the feedback were that respondents felt positive about using the services in most circumstances with some reporting that they 'felt safe' at their GP or the pharmacy because of 'social distancing' measures being in place. Others however, said that they felt 'unhappy, and rather fearful where the GP is concerned' and another said that 'the thought of having to go to the pharmacy regularly fills me with dread because of the anxiety of the situation-queuing around the car park, uncertain opening times, being turned away when services can no longer cope with demand.'

#### **Access to Pharmacies**

When asked if they knew how to get advice and care from a pharmacy during the Pandemic, 80.17% of respondents that answered the question said that they had either a strong understanding or some understanding of how to access the pharmacy. 6.37% Of respondents said that they had very little or no understanding of how to access a pharmacy during the pandemic.

75% of the respondents from the City said that they had a strong understanding or some understanding of how to access a pharmacy during the Pandemic; 8% said that they had little or no understanding.

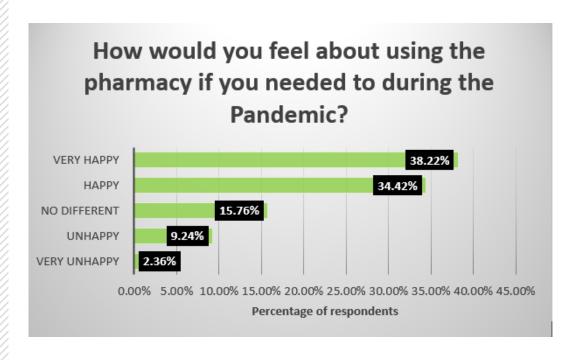
83% of the respondents from the County said that they had a strong understanding or some understanding of how to access a pharmacy during the Pandemic; 5% said that they had little or no understanding of how to access a pharmacy during the Pandemic. .



**72.64%** of respondents who answered the question said that they would either be very happy or happy to use their pharmacy if they needed to during the Pandemic. **11.6%** said that they would be either unhappy or very unhappy about using the pharmacy.

11% of respondents from the City said that they were either very unhappy or unhappy about using the Pharmacy if they needed to. 70% of respondents said that they would be either happy or very happy to use the Pharmacy.

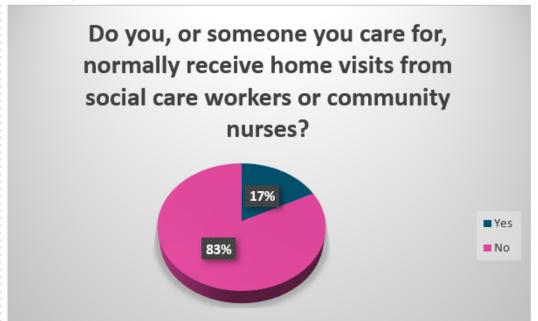
Of the respondents from the County 12% were either unhappy or very unhappy about using the Pharmacy during the Pandemic; 74% said that they were either very happy or happy to use the Pharmacy.



#### **Social Care**

When asked if they, or someone that they care for, normally receives home visits from social care workers or community nurses 17% of those that answered the question said that they did. 83% said that they did not normally receive visits from social care workers or community nurses.

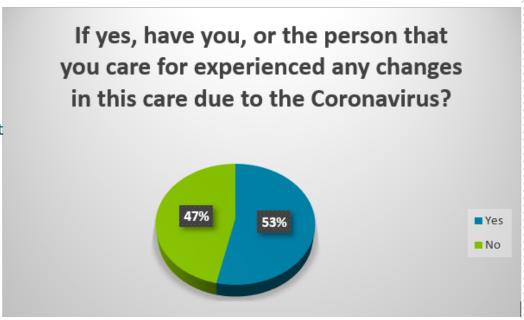
22% of the respondents from the City said that they, or someone that they care, normally received visits from social care workers or community nurses.



16% of the respondents who said that they lived in the County said that they, or someone that they care for, normally received homes visits from social care workers or community nurses. Those that said that they normally received visits from social care workers or community nurses

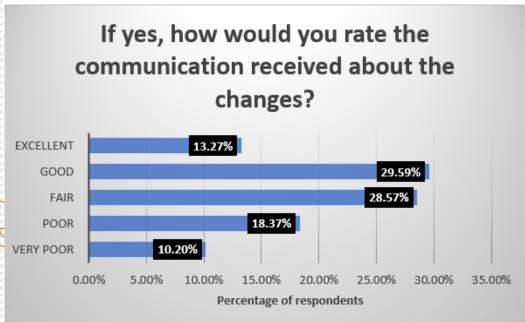
were then asked a series of questions about their experiences during the Pandemic. 53% of respondents that answered the question said that they or the person that they care for had experienced changes to their care during the Pandemic.

44% of the City respondents said that they had experienced changes in the care that they received at home; whereas 59% of respondents from the County said that they had experienced changes to their care.



Those that had experienced changes to their care were asked how they rated the communication that they had received about the changes. 42.86% said that communication had been excellent or good. 28.57% said that communication had been poor or very poor.

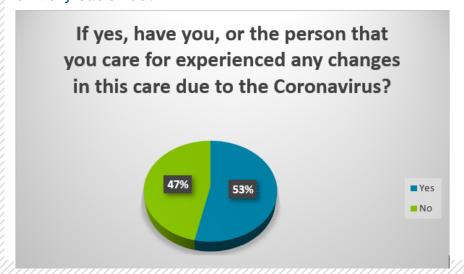
42% of the respondents from the City said that the communication had been excellent or good; 24% said that the communication had been poor or very poor. 44% of the respondents from the County said that the communication that they had received about the changes had been excellent or good; 31% said that it had been poor or very poor.



**37.58**% of the respondents who answered the question said that they were either very satisfied or satisfied with the changes that they had experienced in their social care or from community nurses during the Pandemic. **27.09**% of respondents said that they were either dissatisfied or very dissatisfied with the changes.

38% of the respondents from the City were either very satisfied or satisfied with the changes that were made to their care; 19% were either very dissatisfied or dissatisfied but the highest number (43%) said that they were neither satisfied nor dissatisfied.

Whereas 32% of the respondents from the County were either dissatisfied or very dissatisfied with the changes to their care and 41% said that they were either satisfied or very satisfied.

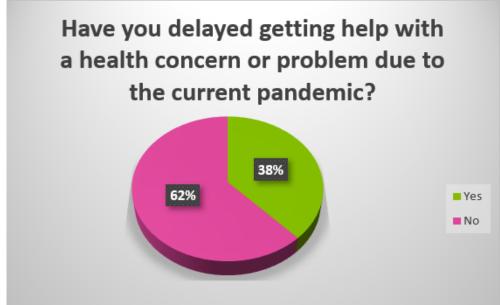




Respondents who said that there had been changes to the services were asked about those changes. One respondent told how their relative had been having visits from a District Nurse but was then informed that they needed to administer their injections themselves. They felt that the nurse had 'sprung this on' them but that the nurse had been 'lovely in explaining the risks of her visiting other Coronavirus patients which could be even riskier for a cancer patient' and that they had 'come back the next day to make sure my [relative] was injecting [themselves] correctly.' Other respondents said that their care packages had been reduced with one saying that it was 'disgraceful and non-existent' and that 'social care haven't been in touch at all.' However, one said that the reduction in their care package was 'Joint between the care agency and myself to reduce care staff to one individual to reduce the risk of infection. The hours have been cut due to high limitation.'

# **Accessing healthcare**

38% of respondents to the question said that they had delayed getting help with a health concern or problem due to the Pandemic.



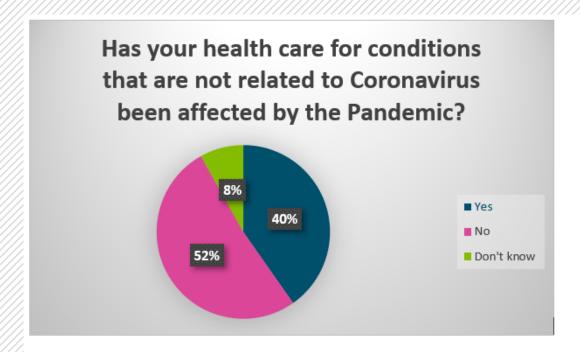
47% of respondents from the City said that they had delayed getting help due to the Pandemic; whereas 34% of respondents from the County said that they had delayed getting help. Those that said that they had delayed getting help were asked why they had done so.

Themes from the feedback included fear of contracting Covid-19 whilst visiting health providers with one respondent saying they were 'just afraid of getting more than I initially went in with'; whilst others felt that the problems were not urgent and they 'don't want to over burden the NHS.'

When asked if their health care for conditions not related to Coronavirus had been affected by the Pandemic 40% oof those that answered the question said that it had and 52% said that it had not.

45% of respondents from the City said that they felt that their healthcare for conditions not related to Coronavirus had been affected and 42% said that it had not.

38% of respondents from the County said that their healthcare for non-Coronavirus conditions had been affected and 55% said that it had not been affected.



Those that said that their health care for other conditions had been affected were asked in what ways they had been affected. Respondents told about cancelled appointments with secondary care that for some meant that 'no outcomes or diagnosis if there is anything wrong, or medication adjusted.' Another told about cancelled appointments saying that they were 'constantly cancelled by the hospital and was told by the staff that due to Covid virus delays were inevitable. Same message was given regarding investigations and scans. It was only after my persistence that action was taken. This situation should not be happening especially when the patient and family are feeling anxious about the condition.'

When asked what could be done to improve the situation for the respondents who had been affected the main theme was to reinstate services back to normal operations as soon as possible.

#### **Access to mental health**

When asked if they had been able to access support for their mental health or wellbeing during the Pandemic, 42.14% of respondents said that they had not needed to access support. 48.28% of respondents said that they had been able to access support with 26.89% saying that they had accessed support from friends and family. 9.59% said that they had been unable to access any support during the Pandemic.

22% of respondents from the City said that they had not needed to access support for their mental health during the Pandemic. 20% said that they had accessed support from family and friends and 10% said that they had been unable to access any support.



49% of the respondents from the County said that they had not needed any support with their mental health during the Pandemic. 27% said that they had accessed support from friends and family; 8% said that they had not been able to access any support



Respondents to the survey were asked to score how their mental wellbeing had been affected during the Pandemic from 1 to 100. The average score for the respondents to the question was **52.64**.

The average score for residents in the City was 56.75 and the average score for residents in the County was 50.9.

# Views offchanges

Respondents to the survey were asked what changes to services that had been made due to the Pandemic they considered to have been successful and could be made more permanent.

A key theme was making use of telephone and video consultations. For example, one respondent said that 'virtual and telephone-based consultations are helpful and for most medical concerns can be an effective and efficient way to have access to your GP.' However, the point was made by another respondent that 'it should be a choice, not a standard default practice.' Others voiced concerns that if more telephone consultations were used 'patients needing to actually see a GP will become a second-tier service.' Others said that telephone call backs were an issue because there was not a specific time and for those that were working 'I am not often available for phone calls.'

For others, prescriptions were an area where there had been changes that had been positive with one respondent saying, 'if GP surgeries could continue to send prescriptions directly to the pharmacy that would be very helpful.' However, for others none of the changes that had occurred were positive and one respondent commented that they would 'like things to return to some degree of normality as soon as possible. There are people with serious conditions out in the community who are struggling.' Another said that all of the changes aside from telephone consultations had been negative for them and they had 'essentially been left to find my own solutions.'

Those that had been receiving social care support pointed out that day care services had been closed leaving one respondent without 'day care support for seven weeks.' Another carer said that 'cancellation of respite and day care services with no idea of when they will restart' meant that 'I have found this physically and mentally hard caring for my profoundly disabled [child] 24/7.' /7.'

# Groups more likely to have been affected

Respondents were asked if they knew of any groups that were more likely to have been affected by changes to services.

There were a variety of suggestions that included Gypsies and Irish Travellers; the Homeless, people who didn't speak English as a first language including those that used British Sign Language; as well those who did not have access to the internet, the elderly, those living alone and those who had low incomes.

# Lockdown in the City vs Lockdown in the County

Through our survey results it can be seen that the scores given by those living in the City, when compared to those living In Leicestershire County, there is a close correlation in scores. So, in most instances we can see a similar impact of Covid Lockdown between residents however there are a few interesting differences we can observe -

- •For access to services responses from City residents were consistently lower than responses from Leicestershire County residents (mostly a small difference
- •City residents delayed accessing services more than County residents.
- •County residents had a much lower need to access Mental Health support
- •Impact on Mental Health was higher for City residents



# **Summary**

From the data we can clearly see that the responses from different ethnic groups is low and this has limited our ability to analyse how the Covid 19 lockdown impacted on these communities.

Overall our findings show residents felt there was a good access to information available from different sources however more consistent communications would have improved patient experience. There was almost too much information, so understanding what guidance to follow became much more challenging.

Having a greater focus on online or phone triage with Primary Care services was seen a mostly positive for residents however concerns were raised about it becoming the only method of accessing services as well as highlighting how this approach can disadvantage some communities. Residents felt slightly less positive towards video consultation.

Looking at comments left, more proactive communications between patients and their GP practice, would supported better understanding what support and services are available.

A significant portion of residents have not sought help and support for health and care issues during lockdown. This is likely to impact on services once restrictions are lifted.

It is widely felt that the Pandemic has had an impact on residents mental health.

# **Next Steps**

In Healthwatch we are keen to see the following -

•How the findings from the survey will shape and influence the strategy within the CCG

Working with the CCGs we are looking at the following -

• Focused community workshops looking into issues highlighted within the survey responses - workshops have been held on ethnic communities and future workshops will be held around - Digital Inclusion and Mental Health

Healthwatch Rutland will be publishing a similar report looking more closely at the impact of the lockdown on residents of Rutland County.

To understand what the impact of Covid 19 lockdown was on Ethnic communities, we are now running our BME Connect engagement project. This will look at how communities are communicated with by NHS and council services and work with different community representatives to improve engagement and communications.

We will use the insight and experience captured through this work to shape our work priorities in the years to come.

# Thanks and acknowledgments

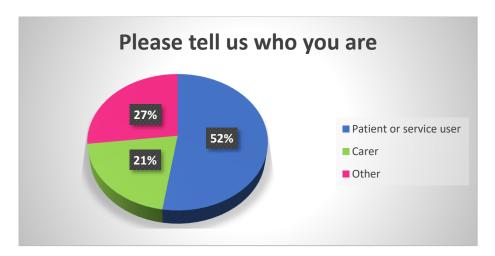
We would like to thank each and every person who took the time to share their experience during this challenging time. By sharing their personal experience, we have been able to better understand the wider public experience.

We would also like to thank our colleagues in Healthwatch Rutland and within the Clinical Commissioning Group. Through this collaborative working we have been able to co-produce and deliver meaningful public engagement which will shape and influence local NHS and Care services.



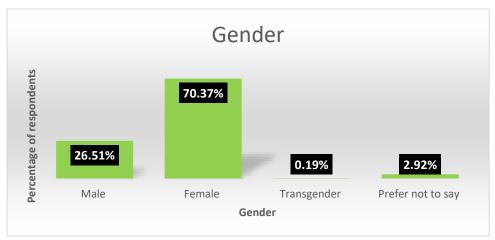
#### **Appendices**

#### Appendix A - Demographic breakdown



**52%** of the respondents to the question said that they were a patient or service user; **21%** identified themselves as a carer and **27%** said that they were answering in another capacity. These included employees from the CCG; healthcare providers and social care providers.

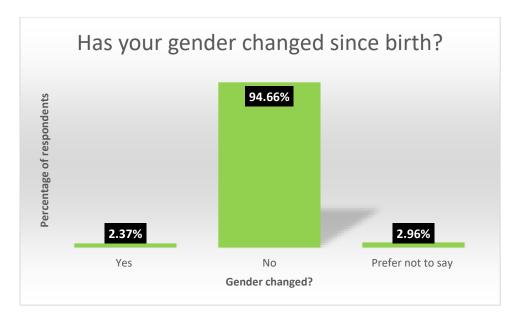
26.51% of respondents said that they identified as male; 70.37% as female and 0.19% as transgender. 2.92% preferred not to tell us their gender identity.



71% of the respondents who said that they were resident in the County said that they were female; 27% said that they were male and the remaining 2% said that they preferred not to say what their gender was.

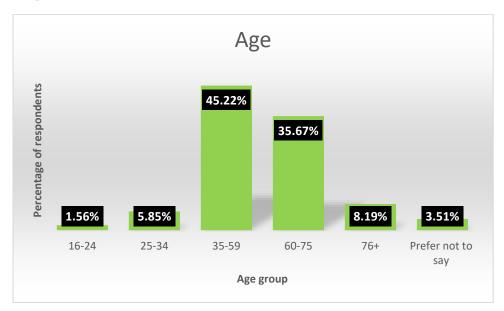
68% of the respondents resident in the City said that they were female; 26% said that they were male; 1% said that they were transgender and 5% said that they preferred to not say what their gender was.

2.37% of respondents to the question said that their gender had changed since birth and 94.66% of respondents said it had not. 2.96% preferred not to tell us whether their gender had changed since birth.



3% of City respondents said that their gender had changed since birth and 2% of respondents from the County said that they had a different gender than at birth.

#### Age

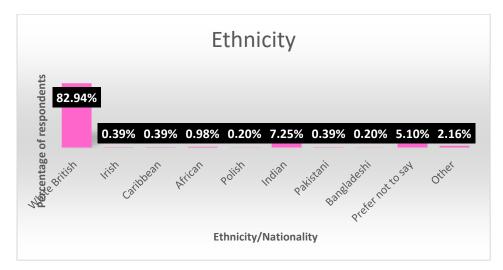


When asked their age the largest group of respondents said that they were aged 35-59 years (45.22%) followed by those aged 60 to 75 years (35.67%). The smallest group were those aged 16-24 years (1.56%).

The smallest group within the County respondents were those aged 16-24 which accounted for 2% of the respondents. The largest group was those aged between 35-59 years who made up 44% of the respondents from the County.

1% of the City respondents said that they were aged 16-24 years. The largest group was those aged 35-59 who made up 47% of the respondents from the City.

#### **Ethnicity**



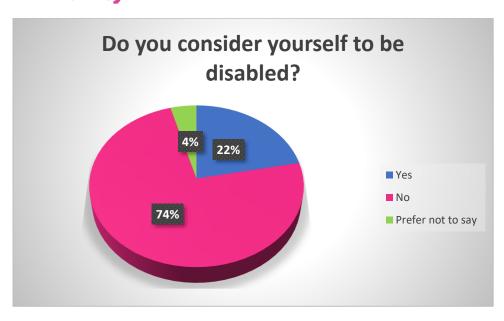
Respondents were asked what their ethnic background was. However, nationality and ethnicity have been used interchangeably within the options for answers.

Only groups where there were respondents who identified within that population are shown in the chart. The largest group were those who identified as White British at 82.49% of respondents.

66% of respondents from the City said that they identified as White British; 18% said that they identified as Indian; 2% said that they were identified as African. Those identifying as Irish, Caribbean or Bangladeshi made up 1% each of the respondents from the City.

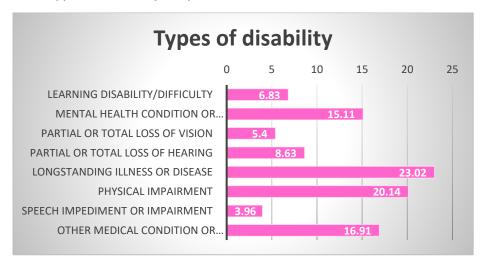
89% of the respondents from the County said that they identified as White British; 3% said that they were Indian and 1% each said that they were Irish; African; Polish or Pakistani.

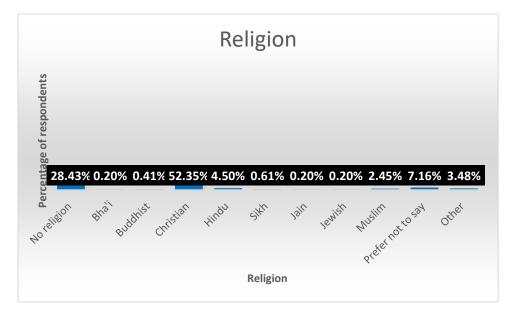
#### **Disability**



22% of respondents said that they considered themselves to be disabled. 18% of the respondents from the County said that they considered themselves to have a disability. 31% of the respondents from the City considered themselves to have a disability.

Those that answered that they considered themselves to be disabled were then asked what type of disability they had.

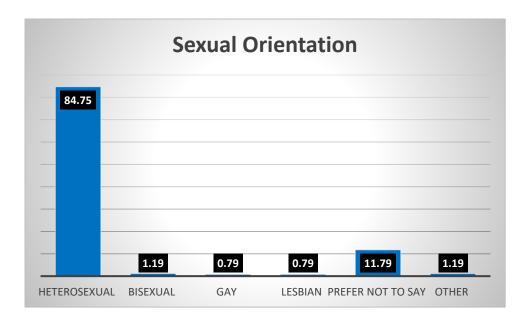




- **52.35**% of respondents said that they considered themselves to be Christians and this was the biggest group of respondents to the question. The second largest group was those that said that they had no religion or belief.
- 39% of the respondents from the City said that their religion was Christian; 26% said that they had no religion or belief; 10% said that their religion was Hindu; 8% were Muslim and 1% were Hindu.
- 59% of the respondents from the County described themselves as being Christians; 29% said that they had no religion or belief and 6% said that they preferred not to say what their religion or belief was. 2% said that their religion was Hindu and the remaining

religions made up less than 1% each of the respondents. There were no respondents from the County that described themselves as being Muslims.

#### **Sexual orientation**



79% of the respondents from the City said that they were Heterosexual; 3% said that they identified as Bisexual and those identifying as Gay or Lesbian made up 1% each of the respondents.

87% of the respondents from the County identified as heterosexual; with those identifying as Bisexual, Gay or Lesbian made up 1% each of the respondents.

The surveys returned by each protected characteristic group is too small to be used for an accurate comparison between experiences and any findings would be skewed. Therefore, no breakdown of experience by protected characteristic is included in the analysis.





Healthwatch Leicester and Healthwatch Leicestershire Clarence House 46 Humberstone Gate Leicester LEI 3PJ

www.healthwatchll.com t: 0116 2518313 enquiries@healthwatchll.com tw: @HealthwatchLeic Fb: @HealthwatchLeic In: @HealthwatchLeic