

# **Age UK Service**

## **Survey findings**

### **Background**

This report provides the findings from the 'Your Services – Your Say' stakeholder engagement campaign that was undertaken to understand the views and experiences from patients, health and care professionals accessing the service. The survey commenced on 28<sup>th</sup> August 2018 and ran until 2<sup>nd</sup> October 2018.

The survey was undertaken as part of the community services review that is being undertaken by NHS East Lancashire CCG. The findings from this survey will be used, in conjunction with service intelligence, data and national guidance to inform the community services review.

### **Aim**

The aim of the survey was to understand the views of patients, health and care professionals, as well as other professionals who use or work within the Age UK's ICP service.

In particular, the survey sought to elicit what patients and other stakeholders like about the service, what, if anything could be better, and any other comments or views. The demographic data of respondents was also sought to ensure the insights obtained from the survey were representative of the local population and to understand the demographic nature.

### **Methodology**

The survey was a retrospective online questionnaire to obtain views and experiences of service use and perception. The survey link was emailed to Age UK ICP's key stakeholders and advertised in the CCG's GP weekly bulletin. In addition, the CCG's Communication and Engagement team promoted the survey to the public on social media via Facebook, on our website and via Twitter. The reach of posts on East Lancashire CCGs Facebook page is 1,839, and on Twitter our following is 5,773. The post was shared on Facebook three times during the period, which led to 1,677 people viewing and engaging with the post. The posts were shared on Twitter and reached our 5,773 followers.

### **Approach**

The survey focused on three open questions: what do you like about the service, what if anything could be better, and any other comments. The open questions enabled respondents to articulate their views in narrative format, rather than in a rating scale such as a Likert scale for example. The responses therefore lend themselves to a qualitative analysis approach, which was undertaken using content analysis to identify key themes and establish a framework of these themes. These were then used to consider and map the comments from respondents. Having established the content themes in a framework for East Lancashire, the framework was then cross referenced against responses for each locality, and by each professional working within that locality. In the context of the locality findings, the responses to the "any other comments" were integrated into the first two questions, as these were reiterations of answers to these questions. For East Lancashire, a range of key quotes has been drawn out for illustrative purposes: primarily to illustrate the positive sentiment described in the summary of findings in the next section.

## Findings

### East Lancashire

#### Responses

A total of 38 individuals responded to the survey.

The majority of respondents were nurses (42%). Four (11%) Age UK staff responded, and 2 GPs (6%) responded

#### Respondents

Table 1, below shows who responded to the Age UK ICP survey

Table 1 Respondents

Respondent	Frequency	Percent
Age UK member of staff	4	11.1
Care professional - Social Care	1	2.8
Health professional - GP	2	5.6
Health professional - Nurse	16	42.1
Health professional - Other (please state below)	6	16.7
Other (please state below)	5	13.9
Voluntary Sector worker	2	5.6
Total	38	100.0

Eleven respondents described themselves as “other” – 6 (17%) as health professionals and 5 (14%) as other not connected to health (see Table 2, below, for breakdown of respondents).

Table 2 Other health and non-health professionals

Respondent	Frequency	Percent
Administrator (Other)	2	5.6
AHP (Health Other)	1	2.8
Borough Councillor (Other)	1	2.8
Care home practitioner nurse (Health Other)	1	2.8
Case Navigator (Health Other)	1	2.8
District Councillor and Chair of 50+ Forum (Other)	1	2.8
INT Clinical Coordinator (Health Other)	1	2.8
INT co-ordinator (Health Other)	1	2.8
Occupational Therapist (Health Other)	1	2.8
Over 75s Service (Health Other)	1	2.8
Podiatrist (Health Other)	1	2.8
Referral partner (Other)	1	2.8

## Locality of respondent

Of the 38 respondents, the majority were based in Burnley (11, 31%). Three respondents work in multiple localities, while 2 respondents did not state which locality they worked in. Four (11%) respondents stated that they work across East Lancashire, and one stated that they worked in all five localities in East Lancashire, as well as Blackburn with Darwen. See table 3, below.

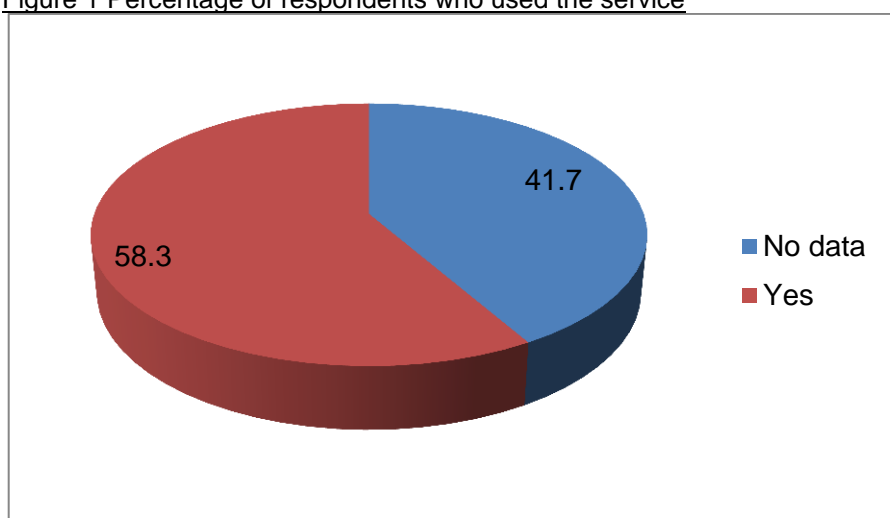
Table 3 Locality of respondent

Locality	Frequency	Percent
No data	2	5.6
Burnley	9	25.0
Burnley, Hyndburn	1	2.8
Burnley, Hyndburn, Pendle, Ribblesdale, Rossendale, Bwd	1	2.8
East Lancashire	4	11.1
Hyndburn	5	13.9
Hyndburn, Ribblesdale, Rossendale	1	2.8
Pendle	6	16.7
Ribblesdale	4	11.1
Rossendale	3	8.3

## Service use

Twenty-one respondents (58%) stated that they used the service, while 15 (42%) did not answer this question. Respondents may not have used the service themselves, however they may have referred people to the service, or their family or colleagues may have used the service and the responses reflect information about the service from them. See Figure 1, below.

Figure 1 Percentage of respondents who used the service



## Reason for not using service

Six (40%) of the 15 respondents who didn't use the service, stated that it was not applicable to them, three (20%) felt that there was no need to use the service, 20% were not aware of the service, and 2 (13%) stated that they were members of staff delivering the service. For those who felt that there was no need to use the service, one was a nurse, one was an Age UK member of staff, and one was a podiatrist. Their statements were simply "I haven't required this service". One individual felt that there were so many similar services and that it was confusing.. See table 4, below.

Table 4 Reason for not using the service.

Reason	No
Not applicable	6
No need	3
Not aware of it	3
Member of staff delivering it	2
It's confusing: that there are many services available and keeping up to date with them all	1

## What do respondents like about the service?

When asked what respondents like about the service, the themes that emerged from the textual analysis can be seen in Table 5, opposite.

The most notable themes are that respondents felt it was a supportive service, easy to access, and that staff were knowledgeable, flexible, friendly and responsive.

Table 5. Themes - "Like"	No
Supportive	13
Easy to access	7
Knowledgeable	4
Flexible	4
Friendly	4
Responsive	4
Integrated	3
Important	3
Experienced	2
Wide range of support	2
Efficient	2
Informative literature	2
Supports independence	2
Caring/ Compassionate	2
Availability	1
Befriending	1
Communicates well	2
Hardworking	1
Didn't know service	1
Problem solving	1
Professional	1
Good feedback	1
Interpersonal skills	1

<b>Table 5. Themes - "Like"</b> continued	<b>No</b>
Engagement	1
Awareness	1
One stop contact	1
Case coordinator	1
Improves lives/wellbeing	1
Sounds good	1
Gets things done	1
Practical	1
Dedicated	1
Reduces isolation	1
Offers advice	1
Unique	1
Innovative	1
Improves confidence	1
Family support available	1
MDT builds relationships	1
Short term & long support	1
Holistic	1
Supports autonomy	1

## What, if anything could be better about the service?

When asked, what if anything, could be better about the service, 30 (83%) provided ideas about how the service could be improved. The majority of responses relate to the need to promote the service more, increase the capacity and funding to ensure long term sustainability. A particular focus for improvement was around the referral process. Cumulatively, this feedback amounts to 8 respondents and references, ensuring the referrer receives feedback, allowing patients to self-refer, ensure that referrals are speedier, and allowing faxed referrals. In addition one respondent highlighted the importance of checking whether patients were military veterans and referring to Veterans in the Community. Although a specific point, it may well suggest that the service needs to be aware of other services that it can refer onwards.

Table 6 What if anything could be better about the service.

What, if anything could be better?	No
Promote service (GPs and Public)	5
Increase staffing capacity	5
Long term funding/ substantial posts	3
Feedback to referrer (of appropriacy/action taken/on EMIS)	3
Add additional elements to the service for example assistance for people with long term conditions, health and wellbeing, shopping and appointments	2
Allow patients to self-refer	2
Conduct speedier patient reviews	2
Based in/alongside primary care/GP practices	1
Check if military vets and refer to VIC	1
Improve support for staff	1
Give more time for staff with patients	1
Create leaflets for patients	1
Allow faxed referrals	1
Sorrow that the Primrose project is being disbanded	1

## Is there anything else you would like to say about the service?

Thirty-one (86%) of respondents added further, additional comments. The majority of these were reinforcing messages from the previous questions. However 4 individuals highlighted that the service is either good or excellent, 2 respondents stated that the service is “invaluable”, and 2 referenced that patients were grateful for the support.

Table 7 Anything else?.

Theme	No
Good/excellent service	4
Promote the service	3
Reduces workload in primary care	3
Invaluable service	2
Patients grateful for support	2
Service improves quality of life	2
Staff regarded highly	2
Service reduces dependency on NHS	1
Prefers to use Community Connector, Memory Matters, Homewise as patients being referred back to the GP for check-ups that have already been done	1
Not aware / lack of knowledge of local support/services for blind people (RNIB cited)	1
Provide feedback to referrers about patients referred	1
Ideal for in-reach/front door team support	1
Helpful to INT/neighbourhood	1
Hardworking	1
Approachable	1
Always available	1
Reaches and helps older people who are increasingly marginalised by complexity and online nature of services	1
Helpful to Over 75s nurses	1
Service acts as a triage as we receive signposted referrals from service	1
Collaborative style of working	1
Staff names mentioned within survey for being helpful and regarded highly	1

## Detailed analysis of comments from respondents, by role and locality

The following pages and tables depict the comments of respondents, and analyses these by the role they have described from themselves, and also by the locality. This level of granular analysis provides significant detail, and is presented here for detailed scrutiny. The themed comments described earlier, were taken from the detailed comments provided in the following tables and pages.

## What do respondents like about the service? (Comments by Respondents)

Table 14 "Like" about the service, by the role of the respondents

Comments	Unknown	Age UK member of staff	Care professional - Social Care	Health professional - GP	Health professional - Nurse	Health professional - Other (please state below)	Other (please state below)	Voluntary Sector worker
Both the knowledge & support provided to both my parents. The interpersonal skills required to build and maintain engagement & awareness to re-refer in as needed for any required support as a result of change in care circumstances.	0	0	0	0	1	0	0	0
Caring, compassionate easily accessed very experienced and knowledgeable	0	0	0	0	1	0	0	0
Don't know - have not had any feedback following referrals	0	0	0	1	0	0	0	0
Easy access and workers friendly and helpful	0	0	0	0	1	0	0	0
Easy referral scheme and staff helpful	0	0	0	0	1	0	0	0
Easy to refer into, often lots of problems addressed other than those identified on the referral	0	0	0	0	1	0	0	0
Efficient, professional, knowledgeable, patient friendly	0	0	0	0	1	0	0	0
Excellent communication skills Hard working and flexible	0	0	0	0	0	1	0	0
Friendly and accommodating	0	0	0	1	0	0	0	0
Friendly, efficient staff who enhance our patient's quality of life and are a helping hand when they are struggling.	0	0	0	0	1	0	0	0
Good communicators adaptable and a can do attitude.	0	0	0	0	1	0	0	0
Helpful and get things done	0	0	0	0	0	0	1	0
Helpful staff - Informative literature for service users	0	0	0	0	1	0	0	0
Helping and supporting the elderly Easy to refer	0	0	0	0	1	0	0	0
I did not know about this service	0	0	0	0	0	0	0	1
I have had very good feedback from patients and colleagues.	0	0	0	0	0	1	0	0
I have never heard of this service which is a shame but I will now seek it out, it sounds fantastic	0	0	0	0	0	1	0	0
I like that there is a service available	0	0	0	0	1	0	0	0
I think the idea of the service is sound, but I feel it overlaps with other local agencies	1	0	0	0	0	0	0	0
N/A	0	0	0	0	0	0	2	0
Never heard of service	0	0	0	0	0	1	0	0
Responsive, vital, supportive, part of greater team	0	0	0	0	1	0	0	0
Sounds good	0	0	0	0	0	0	1	0



<b>Table 14 “Like” about the service, by the role of the respondents Comments continued/</b>	<b>Unknown</b>	<b>Age UK member of staff</b>	<b>Care professional - Social Care</b>	<b>Health professional - GP</b>	<b>Health professional - Nurse</b>	<b>Health professional - Other (please state below)</b>	<b>Other (please state below)</b>	<b>Voluntary Sector worker</b>
The aim of joined up working	0	0	0	0	0	0	0	1
The befriending service	0	0	0	0	1	0	0	0
The flexibility and autonomy of the service to fit in with the personal care plans of the clients. Every delivery is different to suit the person	0	1	0	0	0	0	0	0
The service offers a wide range of support to a variety of patients. You are always happy to accept referrals and offer advice.	0	0	0	0	0	1	0	0
The service provides a one stop contact for individuals who have a lot of health & social care needs. A "Case" coordinator who can help to provide a wraparound service that improves people's lives and wellbeing.	0	1	0	0	0	0	0	0
The thorough holistic support service that is given to the patient providing necessary information and support that we are unable to provide	0	0	0	0	1	0	0	0
They are quick to respond to referral and offer a variety of services.	0	0	0	0	0	0	1	0
They help clients achieve what they need to in order to be more independent and less isolated. They offer practical help and go the extra mile with their involvement	0	1	0	0	0	0	0	0
This service is a unique and innovative programme which allows the time and flexibility to address different needs which include physical, mental and emotional. The support provided is at a key stage and at a time of unexpected and significant changes in day to day living and we aim to support the client in their immediate and long term needs, help them to regain confidence and independence and support them in setting and achieving their personal goals. We can work alongside and liaise with other social and health professionals ensuring that they are no gaps in services. Also, it encapsulates the whole household; for instance their partner/carer is provided with support too. Furthermore; working with MDT for the first time means that it allows the development of professional relationships and invaluable experience and knowledge of services in the local area and made aware of new changes in policies or services too.	0	1	0	0	0	0	0	0
Very responsive	1	0	0	0	0	0	0	0

## What do respondents like about the service? (Comments by Localities)

Table 15. "Like" about the service, by locality of respondents

Comments	Unknown	Burnley	Burnley, Hyndburn	Burnley, Hyndburn, Pendle, Ribblesdale, Rossendale, Bwd	East Lancs	Hyndburn	Hyndburn, Ribblesdale, Rossendale	Pendle	Ribblesdale	Rossendale
Both the knowledge & support provided to both my parents. The interpersonal skills required to build and maintain engagement & awareness to re-refer in as needed for any required support as a result of change in care circumstances.	0	0	0	1	0	0	0	0	0	0
Caring, compassionate easily accessed very experienced and knowledgeable	0	0	0	0	1	0	0	0	0	0
Don't know - have not had any feedback following referrals	0	0	0	0	0	0	0	1	0	0
Easy access and workers friendly and helpful	0	0	0	0	0	1	0	0	0	0
Easy referral scheme and staff helpful	0	1	0	0	0	0	0	0	0	0
easy to refer into, often lots of problems addressed other than those identified on the referral	0	0	0	0	0	1	0	0	0	0
efficient, professional, knowledgeable, patient friendly	0	0	0	0	0	0	0	1	0	0
Excellent communication skills Hard working and flexible	0	1	0	0	0	0	0	0	0	0
friendly and accommodating	0	1	0	0	0	0	0	0	0	0
Friendly, efficient staff who enhance our patient's quality of life and are a helping hand when they are struggling.	0	0	0	0	0	0	0	0	1	0
Good communicators adaptable and a can do attitude.	0	1	0	0	0	0	0	0	0	0
helpful and get things done	0	1	0	0	0	0	0	0	0	0
Helpful staff - Informative literature for service users	0	0	0	0	0	0	0	1	0	0
Helping and supporting the elderly Easy to refer	0	0	0	0	0	0	0	1	0	0
I did not know about this service	0	0	0	0	1	0	0	0	0	0
I have had very good feedback from patients and colleagues.	0	1	0	0	0	0	0	0	0	0
I have never heard of this service which is a shame but I will now seek it out, it sounds fantastic	0	0	0	0	0	0	0	1	0	0
I like that there is a service available	0	0	0	0	0	0	0	0	1	0
I think the idea of the service is sound, but I feel it overlaps with other local agencies	1	0	0	0	0	0	0	0	0	0
N/A	0	0	1	0	0	0	0	1	0	0

Table 15. "Like" about the service, by locality of respondents Comments continued/	Unknown	Burnley	Burnley, Hyndburn	Burnley, Hyndburn, Pendle, Ribblesdale, Rossendale, Bwd	East Lancs	Hyndburn	Hyndburn, Ribblesdale, Rossendale	Pendle	Ribblesdale	Rossendale
Never heard of service	0	0	0	0	1	0	0	0	0	0
Responsive, vital, supportive, part of greater team	0	0	0	0	0	0	0	0	1	0
Sounds good	0	0	0	0	0	0	0	0	0	1
The aim of joined up working the befriending service	0	0	0	0	1	0	0	0	0	0
The flexibility and autonomy of the service to fit in with the personal care plans of the clients. Every delivery is different to suit the person	0	0	0	0	0	0	0	0	1	0
The service offers a wide range of support to a variety of patients. You are always happy to accept referrals and offer advice.	0	0	0	0	0	0	0	0	0	1
The service provides a one stop contact for individuals who have a lot of health & social care needs. A "Case" coordinator who can help to provide a wrap-around service that improves people's lives and wellbeing.	1	0	0	0	0	0	0	0	0	0
The thorough holistic support service that is given to the patient providing necessary information and support that we are unable to provide	0	0	0	0	0	1	0	0	0	0
They are quick to respond to referral and offer a variety of services.	0	1	0	0	0	0	0	0	0	0
They help clients achieve what they need to in order to be more independent and less isolated. They offer practical help and go the extra mile with their involvement	0	1	0	0	0	0	0	0	0	0
This service is a unique and innovative programme which allows the time and flexibility to address different needs which include physical, mental and emotional. The support provided is at a key stage and at a time of unexpected and significant changes in day to day living and we aim to support the client in their immediate and long term needs, help them to regain confidence and independence and support them in setting and achieving their personal goals. We can work alongside and liaise with other social and health professionals ensuring that they are no gaps in services. Also, it encapsulates the whole household; for instance their partner/carer is provided with support too. Furthermore; working with MDT for the first time means that it allows the development of professional relationships and invaluable experience and knowledge of services in the local area and made aware or new changes in policies or services too.	0	1	0	0	0	0	0	0	0	0
Very responsive	0	0	0	0	0	1	0	0	0	0

## What, if anything could be better about the service? (Comments by Respondents)

Table 16. "What if anything could be better" about the service, by role of respondents

Comment	Unknown	Age UK member of staff	Care professional - Social Care	Health professional - GP	Health professional - Nurse	Health professional - Other (please state below)	Other (please state below)	Voluntary Sector worker
* Long term funding to provide security for staff and to allow the project to develop and flourish * Based alongside health professionals or within GP setting * GP funding could contribute to this project; a PIC could work with GP surgeries in certain areas; like Burnley East and Burnley West. Within a surgery setting; GP's, nurses or HCA's could possibly identify patients where their clinical needs have been met but making appointments for more non-clinical needs and this would avoid unnecessary doctors appointments; as they could be referred to a PIC. Furthermore, if their needs are met at an earlier stage then it could possibly prevent unplanned hospital admissions	0	1	0	0	0	0	0	0
Able to let referer know if appropriately done.	0	0	0	0	1	0	0	0
Advertise more to the GP Practices and general public	0	0	0	0	0	0	1	0
an increase in capacity would improve upon and add additional aspects that would further help individuals to better manage their Long term conditions., health & wellbeing. e.g More capacity would allow us to recruit more volunteers to the service and would increase the amount of people being supported	0	1	0	0	0	0	0	0
Ask people if they have ever served in the armed forces, or are connected to someone who is/has. Then refer them to Veterans in Communities	0	0	0	0	0	0	0	1
Better support for the staff. Time is very restricted and the basics always get done but the follow up/documentation can be pressurised to complete the tasks.	0	1	0	0	0	0	0	0

Table 16. "What if anything could be better" about the service, by role of respondents Comments continued/	Unknown	Age UK member of staff	Care professional - Social Care	Health professional - GP	Health professional - Nurse	Health professional - Other (please state below)	Other (please state below)	Voluntary Sector worker
Continue (staffing) posts and make posts substantial, this is a unique, supporting service for our older people freeing up medical staff with vital time, as your staff are excellent at advance care planning, which is a vital aspect of work to prevent unnecessary hospital admissions often relating to our most frail patients who do not benefit from hospital admissions.	0	0	0	0	1	0	0	0
Do you have leaflets for patients to pick up? Can patients self-refer?	0	0	0	0	1	0	0	0
Employ more workers	1	0	0	0	0	0	0	0
Faster review of patients but I recognize the demands on the service and staff.	0	0	0	0	1	0	0	0
Fax Referrals	0	0	0	0	1	0	0	0
I was sorry to hear that the Primrose Project is being disbanded as I felt that this was really positive experience for our patients and helped them to get things in order towards the end of life	0	0	0	0	1	0	0	0
I'm not sure	1	0	0	0	1	0	0	0
Increase work force to provide more availability.	0	0	0	0	0	1	0	0
More advertising in surgeries for opportunistic patient self-referral?	0	0	0	0	1	0	0	0
More of you!	0	0	0	0	1	0	0	0
N/A	0	1	0	0	0	0	2	0
Never heard of service	0	0	0	0	0	1	0	0
No/nothing to add	0	0	0	0	2	2	2	0
Promote it	0	0	1	0	0	1	0	1
Provide a service to take people out shopping, assist to appointments.	0	0	0	0	1	0	0	0

Table 16. "What if anything could be better" about the service, by role of respondents Comments continued/	Unknown	Age UK member of staff	Care professional - Social Care	Health professional - GP	Health professional - Nurse	professional - Other (please state below)	Other (please state below)	Voluntary Sector worker
Provide some feedback on action taken	0	0	0	1	0	0	0	0
Some way of sharing information on EMIS regarding outcomes of the referral. Currently the individual who has referred gets an email.	0	0	0	0	1	0	0	0
Sometimes may get delay as too many referrals received by them	0	0	0	1	0	0	0	0
Unable to think of any required improvements at present other than re-current funding from CCG to support future service delivery.	0	0	0	0	1	0	0	0

## What, if anything could be better about the service? (Comments by Localities)

Table 17. "What if anything could be better" about the service, by locality of respondents

Comments	Unknown	Burnley	Burnley, Hyndburn	Burnley, Hyndburn, Pendle, Ribblesdale, Rossendale, Bwd	East Lancs	Hyndburn	Hyndburn, Ribblesdale, Rossendale	Pendle	Ribblesdale	Rossendale
* Long term funding to provide security for staff and to allow the project to develop and flourish * Based alongside health professionals or within GP setting * GP funding could contribute to this project; a PIC could work with GP surgeries in certain areas; like Burnley East and Burnley West. Within a surgery setting; GP's, nurses or HCA's could possibly identify patients where they clinical needs have been met but making appointments for more non-clinical needs and this would avoid unnecessary doctors appointments; as they could be referred to a PIC. Furthermore, if their needs are met at an earlier stage then it could possibly prevent unplanned hospital admissions	0	1	0	0	0	0	0	0	0	0
Able to let referrer know if appropriately done.	0	0	0	0	0	0	0	1	0	0
Advertise more to the GP Practices and general public	0	0	0	0	0	0	0	0	0	1
An increase in capacity would improve upon and add additional aspects that would further help individuals to better manage their Long term conditions., health & wellbeing. e.g More capacity would allow us to recruit more volunteers to the service and would increase the amount of people being supported	1	0	0	0	0	0	0	0	0	0
Ask people if they have ever served in the armed forces, or are connected to someone who is/has. Then refer them to Veterans in Communities	0	0	0	0	1	0	0	0	0	0
Better support for the staff. Time is very restricted and the basics always get done but the follow up/documentation can be pressurised to complete the tasks.	0	0	0	0	0	0	0	0	1	0
Continue posts/make posts substantial, this is a unique, supporting service for our older people freeing up medical staff with vital time, as your staff are excellent at advance care planning, which is a vital aspect of work to prevent unnecessary hospital admissions often relating to our most frail patients who do not benefit from hospital admissions.	0	0	0	0	0	0	0	0	1	0
Do you have leaflets for patients to pick up? can patients self-refer?	0	0	0	0	0	0	0	0	1	0
Employ more workers	0	0	0	0	0	1	0	0	0	0
Faster review of patients but I recognize the demands on the service and staff.	0	0	0	0	0	1	0	0	0	0
Fax Referrals	0	0	0	0	0	0	0	1	0	0

Table 17. "What if anything could be better" about the service, by locality of respondents Comments continued/	Unknown	Burnley	Burnley, Hyndburn	Burnley, Hyndburn, Pendle, Ribblesdale, Rossendale, Bwd	East Lancs	Hyndburn	Hyndburn, Ribblesdale, Rossendale	Pendle	Ribblesdale	Rossendale
I was sorry to hear that the Primrose Project is being disbanded as I felt that this was really positive experience for our patients and helped them to get things in order towards the end of life	0	0	0	0	0	0	0	0	1	0
Increase work force to provide more availability.	0	0	0	0	1	0	0	0	0	1
More advertising in surgeries for opportunistic patient self referral?	0	0	0	0	0	0	0	1	0	0
N/A	0	1	1	0	0	0	0	1	0	0
No/unsure/not sure	1	6	0	0	0	0	0	0	0	1
Promote it	0	0	0	0	2	0	1	1	0	0
Provide a service to take people out shopping, assist to appointments.	0	0	0	0	0	1	0	0	0	0
Provide some feedback on action taken	0	0	0	0	0	0	0	1	0	0
Some way of sharing information on EMIS regarding outcomes of the referral. Currently the individual who has referred gets an email.	0	0	0	0	0	1	0	0	0	0
Sometimes may get delay as too many referrals received by them	0	1	0	0	0	0	0	0	0	0
Unable to think of any required improvements at present other then re-current funding from CCG to support future service delivery.	0	0	0	1	0	0	0	0	0	0



## Is there anything else you'd like to say about the service? (Comments by Respondents)

Table 18. "Anything else to say" about the service, by role of respondents

Comment	Unknown	Age UK member of staff	Care professional - Social Care	Health professional - GP	Health professional - Nurse	professional - Other (please state below)	Other (please state below)	Voluntary Sector worker
Age UK ICP is an invaluable service to the INT. We depend upon the service to support a large amount of our patients and these people are always grateful of the support they receive which massively improves their quality of life and reduces their dependency and sometimes unnecessary usage of health services.	0	0	0	0	0	1	0	0
As a fulltime health professional myself this service has been invaluable in supporting the care needs of my aging parents.	0	0	0	0	1	0	0	0
Don't know what you do as there has been no communication regarding patients referred	0	0	0	1	0	0	0	0
Good service	0	0	0	1	0	0	0	0
I have used the service, but found my patients being referred back to me for check-ups etc that have already been done. I felt that there wasn't enough support available of the kind the patients wanted, for example, I referred a lady who was newly registered blind and the worker didn't refer to the RNIB, she was told there were no local services and that was the end of it, it was then suggested that I visit more often for support instead. I don't know if that was a problems with the member of staff individually or the service as a whole, but it has put me off referring. I prefer to use the Community Connector and Memory matters/Homewise.	1	0	0	0	0	0	0	0
I'd like to know more about the work that you do.	0	0	1	0	0	0	1	0
It has a very positive impact on the clients it helps	0	1	0	0	0	0	0	0
It is an excellent service particularly from the in-reach/front door team perspective	0	0	0	0	1	0	0	0
It would be interesting to have stats on how well your service is received and what are the top areas you give help for	0	0	0	0	1	0	0	0

Table 18. "Anything else to say" about the service, by role of respondents Comment continued/	Unknown	Age UK member of staff	Care professional - Social Care	Health professional - GP	Health professional - Nurse	Health professional - Other (please state below)	Other (please state below)	Voluntary Sector worker
It's excellent, sorry gushing but honestly, we would be under greater pressure without it	0	0	0	0	1	0	0	0
Never heard of service	0	0	0	0	0	1	0	0
Nighat Ahmed and Shahid Salim have been very helpful during INT meetings and referrals done by Over 75s Service.	0	0	0	0	1	0	0	0
Nighat and Shamim are hard working, approachable and are always on hand to help with any problems.	0	0	0	0	0	1	0	0
No	0	0	0	0	1	0	1	0
Older people are finding it increasingly more difficult to navigate their own Health & social care and financial needs as there is less physical presence on the high street, with the reliance more on digital communications that the majority of the older population aren't familiar with	0	1	0	0	0	0	0	0
positive feedback from the patients referred, allows nurses to freed up from an administration role which allows more time for clinical work	0	0	0	0	1	0	0	0
Really good effective service	0	0	0	0	1	0	0	0
The staff, Christine Entwistle and Sarah Connolly are amazing and are held in high regard amongst both staff and patients	0	0	0	0	1	0	0	0
This service is essential element of the neighborhood team contribution and without this we would be lost at times what support to offer our patients.	0	0	0	0	1	0	0	0
We receive many referrals from this service into our services and we do a lot of intervention with older people following this service. This service seems to be a triage service only; whilst we are working with the individuals with their health and wellbeing needs	0	0	0	0	0	0	1	0
Workers attend meeting regularly and keep us updated with regards to the support they are provided - collaborative working at its best	1	0	0	0	0	0	0	0

## Is there anything else you'd like to say about the service? (Comments by Localities)

Table 19. "Anything else to say" about the service, by locality of respondents

Comments	Unknown	Burnley	Burnley, Hyndburn	Burnley, Hyndburn, Pendle, Ribblesdale, Rossendale, Bwd	East Lancs	Hyndburn	Hyndburn, Ribblesdale, Rossendale	Pendle	Ribblesdale	Rossendale
Age UK ICP is an invaluable service to the INT. We depend upon the service to support a large amount of our patients and these people are always grateful of the support they receive which massively improves their quality of life and reduces their dependency and sometimes unnecessary usage of health services.	0	0	0	0	0	0	0	0	0	1
As a fulltime health professional myself this service has been invaluable in supporting the care needs of my aging parents.	0	0	0	1	0	0	0	0	0	0
Don't know what you do as there has been no communication regarding patients referred	0	0	0	0	0	0	0	1	0	0
Good service	0	1	0	0	0	0	0	0	0	0
I have used the service, but found my patients being referred back to me for check-ups etc that have already been done. I felt that there wasn't enough support available of the kind the patients wanted, for example, I referred a lady who was newly registered blind and the worker didn't refer to the RNIB, she was told there were no local services and that was the end of it, it was then suggested that I visit more often for support instead. I don't know if that was a problems with the member of staff individually or the service as a whole, but it has put me off referring. I prefer to use the Community Connector and Memory matters/Homewise.	1	0	0	0	0	0	0	0	0	0
I'd have liked to have known about it.	0	0	0	0	0	0	1	1	0	0
It has a very positive impact on the clients it helps	0	1	0	0	0	0	0	0	0	0
It is an excellent service particularly from the in-reach/front door team perspective	0	0	0	0	1	0	0	0	0	0
It would be interesting to have stats on how well your service is received and what are the top areas you give help for	0	0	0	0	0	0	0	0	1	0

<b>Table 19. “Anything else to say” about the service, by locality of respondents Comments continued/</b>	<b>Unknown</b>	<b>Burnley</b>	<b>Burnley, Hyndburn</b>	<b>Burnley, Hyndburn, Pendle, Ribblesdale, Rossendale, Bwd</b>	<b>East Lancs</b>	<b>Hyndburn</b>	<b>Hyndburn, Ribblesdale, Rossendale</b>	<b>Pendle</b>	<b>Ribblesdale</b>	<b>Rossendale</b>
It's excellent, sorry gushing but honestly, we would be under greater pressure without it	0	0	0	0	0	0	0	0	1	0
Never heard of service	0	0	0	0	1	0	0	0	0	0
Nighat Ahmed and Shahid Salim have been very helpful during INT meetings and referrals done by Over 75s Service.	0	0	0	0	0	0	0	1	0	0
Nighat and Shamim are hard working, approachable and are always on hand to help with any problems.	0	1	0	0	0	0	0	0	0	0
No	0	2	0	0	0	0	0	0	0	0
Older people are finding it increasingly more difficult to navigate their own Health & social care and financial needs as there is less physical presence on the high street, with the reliance more on digital communications that the majority of the older population aren't familiar with	1	0	0	0	0	0	0	0	0	0
positive feedback from the patients referred, allows nurses to freed up from an administration role which allows more time for clinical work	0	0	0	0	0	1	0	0	0	0
Really good effective service	0	0	0	0	0	1	0	0	0	0
The staff, Christine Entwistle and Sarah Connolly are amazing and are held in high regard amongst both staff and patients	0	0	0	0	0	0	0	0	1	0
This service is essential element of the neighborhood team contribution and without this we would be lost at times what support to offer our patients.	0	0	0	0	0	1	0	0	0	0
We receive many referrals from this service into our services and we do a lot of intervention with older people following this service. This service seems to be a triage service only; whilst we are working with the individuals with their health and wellbeing needs	0	0	1	0	0	0	0	0	0	0
Workers attend meeting regularly and keep us updated with regards to the support they are provided - collaborative working at its best	0	0	0	0	0	1	0	0	0	0

## Demographics

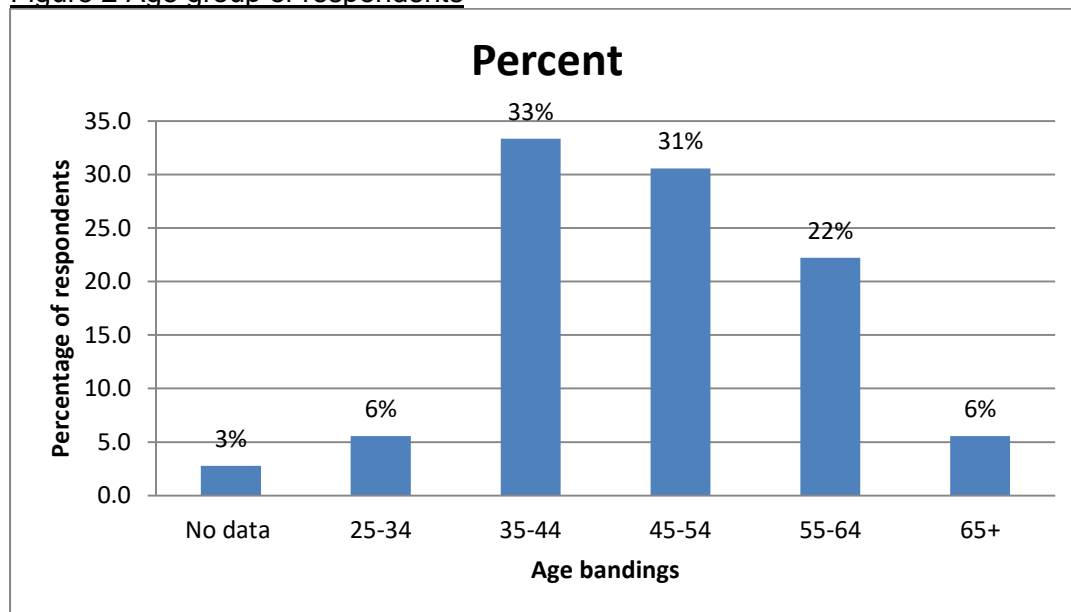
### Age group of respondents

The majority of respondents were in the age groups 35-44 (33%), 45-54 (31%) and 55-64 (22%). See table 8, and figure 2, below for more detail.

Table 8 Age group of respondents

Age group	Frequency	Percent
No data	1	3%
25-34	2	6%
35-44	12	33%
45-54	11	31%
55-64	8	22%
65+	2	6%

Figure 2 Age group of respondents

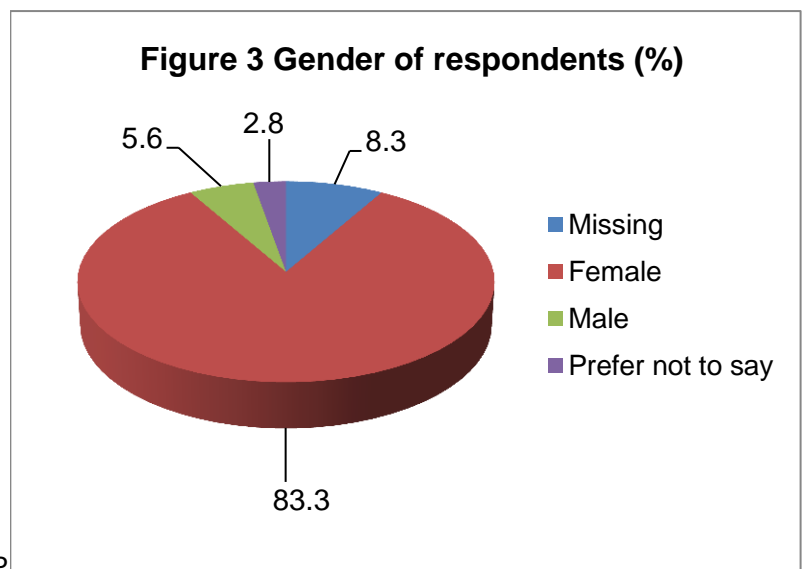


### Gender of respondents

The majority of respondents were female (83%), see table 9 below, and figure 3, opposite.

Table 9 Gender

Gender	Frequency	Percent
Missing	3	8%
Female	30	83%
Male	2	6%
Prefer not to say	1	3%
Total	36	100%



## Gender reassignment

None of the respondents stated that they had either gone through or were in the process of gender reassignment. Four (11%) either didn't respond to the question (3%), or stated that they preferred not to say (8%).

## Ethnicity

The majority of respondents were white British (81%). Four respondents were Asian or Asian/British (11%) and one respondent was of mixed/multiple heritage (3%). One individual stated that they preferred not to say, and another did not respond to the question. See table 10, below.

Table 10 Ethnicity

Ethnicity	Frequency	Percent
Blank	1	3%
Asian / Asian British	4	11%
Mixed/ Multiple	1	3%
Prefer not to say	1	3%
White British	29	81%
Total	36	100%

## Sexuality

The majority of respondents stated that they were heterosexual (81%). Four respondents did not respond to this question (11%) and three stated that they preferred not to say (8%). See table 11, below.

Table 11 Sexuality

Sexuality	Frequency	Percent
Blank	4	11%
Heterosexual	29	81%
Prefer not to say	3	8%
Total	36	100%

## Religion

The majority of respondents stated that they were Christian (64%). Four (11%) stated that they were agnostic/atheist and 4 (11%) stated that they were Muslims. See table 12, below.

Table 12 Religion

Religion	Frequency	Percent
Blank	1	3%
Agnostic / Atheist / No religion	4	11%
Christianity	23	64%
Islam	4	11%
Judaism	1	3%
Prefer not to say	3	8%
Total	36	100%

## Disability

Four individuals (11%) stated that they had a disability, while 2 (6%) did not reply to the question, but did in the follow up question describe their disability. Therefore, 6 (17%) had a disability. See table 13, below.

Table 13. Disability

Disability	Frequency	Percent
Blank	2	6%
No	30	83%
Yes	4	11.1%
Total	36	100.0%

Three individuals had one disability. These were: long term illness, mental health need and physical disability respectively. Three respondents had multiple disabilities. These were learning disabilities and long term illness, physical disability and long term illness, and physical, sensory and mental health needs respectively.