



GIG
CYMRU
NHS
WALES

Ymddiriedolaeth GIG
Gwasanaethau Ambiwylans Cymru

Welsh Ambulance Services
NHS Trust

Carers Survey

Thinking about your experience of using Welsh Ambulance Services

1. Have you needed to use ambulance services recently? (Over the last 12 months)

This includes phoning 999, Hospital Transport,
NHS Direct Wales or 111 Wales

Yes

(Continue to **Q2**)

No

(Continue to **Q9**)

2. Was it for yourself or for someone you care for?

Yourself

Someone you care for

3. What was your experience?

Think about if we did anything well or if we could we have done
anything better.

4. Did you feel you understood what was happening?

Think about: Were things explained clearly?
 Could you follow what was being said?
 Did staff use complicated jargon?

Yes No

Comment

5. Were you involved and listened to as much as you wanted to be in decisions?

Yes No

Comment

6. Were you allowed to accompany the person you care for?

Yes No Not applicable

Comment

7. Were you able to communicate in your preferred language? e.g.

Welsh, English, BSL

Yes

No

comment

8. How would you rate the overall experience of using our service?

(Please circle your score)

very poor

Excellent

1 2 3 4 5 6 7 8 9 10

Please continue over the page to question 9.

Thinking about your caring role

9. What is your relationship with the person you care for?

e.g. wife, husband, partner, friend, family, neighbour

10. What are the needs of the person you care for?

e.g. Frail, living with dementia, learning disability, autism, physical disability, sensory loss, long term medical condition

11. Do you have any plans in place for emergencies?

e.g. do you have a carer's card, or a friend or neighbour to call on, have you made arrangements with your GP or other services?

Yes No

comment

12. Is there anything you think The Welsh Ambulance Service needs to consider to support carers better?

13. What support could we give that could help carers to stay at home, where appropriate?

For example, think about what information we could give, or if we could signpost you to community services etc

14. What support could we provide to help carers know when it is appropriate to call 999 and what other help is available?

15. What would be the best way to let carers know about any new initiatives?

For example, newsletters, via carers groups

Where did you hear about this survey?

Carers group At an event or meeting

Facebook Twitter Other

Date completed _____

The questions on the next pages are voluntary and will give us more information on how we can help carers. Complete the sections you wish to share with us...

Equality monitoring

The following questions are voluntary.

We are committed to ensuring that everyone receives fair and equal respect. Whatever your age, disability, ethnicity, faith, gender or sexual identity, you can expect to be treated with dignity. We can only achieve this with your help by providing the information below.

Data will be used for monitoring purposes only and held in strictest confidence. Your identity will not be disclosed to anyone.

1. What is your age?

- | | | |
|--------------------------------------|--------------------------------------|--|
| <input type="checkbox"/> 0-15 years | <input type="checkbox"/> 16-24 years | <input type="checkbox"/> 25-34 years |
| <input type="checkbox"/> 35-44 years | <input type="checkbox"/> 45-54 years | <input type="checkbox"/> 55-64 years |
| <input type="checkbox"/> 65-74 years | <input type="checkbox"/> 75+ years | <input type="checkbox"/> I prefer not to say |

2. What is your gender?

- male female I Identify as
- I prefer not to say

3. Does your current gender identity match the one assigned to you at birth?

- Yes no I prefer not to say

4. Are your day to day activities limited because of a health problem or disability? (which has lasted, or is expected to last, at least 12 months?)

- Yes a lot yes a little not at all
- I prefer not to say

5. Which of the following best describes how you think of yourself?

- Heterosexual or straight gay or lesbian bisexual
- I prefer not to say I identify as

6. What is your religion?

- No religion Christian (all denominations) Buddhist
 Hindu Jewish Muslim Sikh
 Any other religion I prefer not to say

7. What is your ethnic group?

(Please choose one option that best describes your ethnic group or background)

White

- Welsh English Scottish British Irish
 Northern Irish Gypsy or Irish Traveller
 Any other white background

Mixed / multiple ethnic group

- White and Black Caribbean White and Black African
 White and Asian
 Any other Mixed / multiple ethnic background

Asian / Asian British

- Indian Pakistani Bangladeshi Chinese
 Any other Asian background

Black / African / Caribbean / Black British

- African Caribbean
 Any other Black / African/ Caribbean background

Other ethnic group

- Arab Any other ethnic group

- I prefer not to say

Thank you for completing this questionnaire

Please forward completed surveys to;

Freepost RUAE-SLLA-TJLS

PECI Team, Welsh Ambulance Service

Matrix House, Matrix One, Northern Boulevard,

Swansea Enterprise Park

Swansea, SA6 8RE