



Answers Booklet

Our plans for making Health Services better in Dulwich and the areas around Dulwich.



What do you think?

Please tell us by Friday 31 May 2013.

This is an EasyRead version of:

Improving Health Services in Dulwich and the Surrounding Areas.

A Consultation about Local Services.

This includes Dulwich, Nunhead, Herne Hill, south Camberwell and south Peckham.





The questions

BQ1

Are you filling in this form for:

you

one group (please write their name)

some groups (please write their name)

BQ2

Please write your name



Please write your postcode



1. Health services in Dulwich now

Please tick all of the health services you have used in the last year.



Services at your doctor's surgery

A visit to your doctor to talk about a problem

Care after you have had an operation, such as changing a dressing

Jabs for children

Health clinics for children

Sexual health

How to stop smoking

NHS health checks

Tests for your bowel

Counselling

Physiotherapy

Heart failure care

An appointment at the hospital when you didn't stay overnight

Services at Dulwich Community Hospital

Blood taking

Physiotherapy

Renal dialysis

Advice and care from a doctor
when the surgery was shut

A visit to or from your own doctor

Bladder and bowel service

Advice on healthy eating

Preparation for having a baby



Services at Townley Road and Consort Road Clinics

District nursing clinics

Help with looking after
small children

Help with talking for children

Foot health

Help to look after children
of school age



Home-based services



Help with looking after small children

District nursing

Intermediate care

Help after you have had a stroke

Help after you have had a fall and hurt yourself or have difficulty walking

Please write any other community health services you have used in the last year.

An illustration of a document with several lines of text and a green pen resting on it. The document is tilted slightly to the right. The pen is a bright green color. This illustration is located in the top right corner of a large, empty rectangular box intended for writing.

2. Where would you like these services to be?

1. A first visit to your doctor

At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know



2. Have dressings changed after an operation

At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know

3. Maternity health visits

At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know



4. Jabs for children

At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know

5. Child health clinics



At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know

6. Help for women who do not want to get pregnant and tests for some diseases caught when having sex

At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know

7. Help to stop smoking



At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know

8. NHS Health Checks

At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know

9. Bowel screening

At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know



10. Help if you are stressed, very worried or cannot remember things

At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know

11. Help with healthy eating



At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know

12. An appointment to see a specialist doctor or nurse

At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know

13. Blood taking



At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know

14. Physiotherapy

At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know

15. Diabetes care

At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know



16. Preparation for having a baby

At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know

17. Help with talking



At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know

18. Foot health

At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know

19. Help after you have had a stroke



At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know

20. Help if you have Heart failure

At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know

21. Help if you have a Chest Disease



At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know

22. Special eye tests for people who have diabetes

At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know

23. Tests for cancer



At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know

24. Testing your hearing and help with your hearing aid

At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know

25. Simple surgery



At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know

26. Help if you have sores on your legs and they need bandages

At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know

27. Help to drink less alcohol and stop
using some drugs

At your local doctor's surgery

At your local health centre

You do not mind

A different place (write here)

You do not know





3. Are there any other health services that you need locally that are not on this list?



**4. How do you feel about how we want to change health services in the future?
(Page 8)**

Really agree

Agree

I do not mind

Disagree

Really disagree

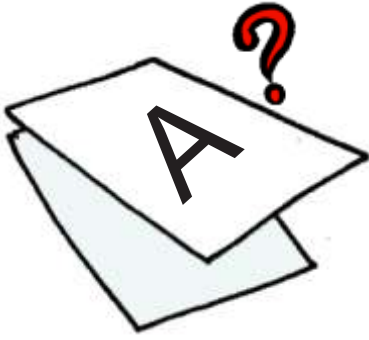
I do not know



4b. Why do you feel this way?



A large, empty rectangular box with a black border, intended for the user to write their response to the question.



Different ways we could deliver health services to you.

**5. How do you feel about plan A?
(Page 24)**

Really agree

Agree

I do not mind

Disagree

Really disagree

I do not know

6. How do you think plan A will change things for you?





How easy will it be for you to get the care that you need?

Will get better

Stay the same

Will get worse

Do not know

Why do you think this?





How easy will it be for you to get to places where you need healthcare?

Get better

Stay the same

Get worse

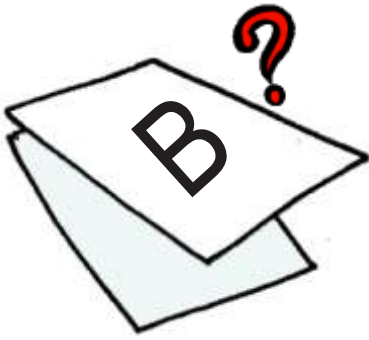
Do not know

Why do you think this?



Is there anything else we should be thinking about?





**7. How do you feel about plan B?
(Page 26)**

Really agree

Agree

I do not mind

Disagree

Really disagree

I do not know

**8. How do you think plan B will change
these things for you?**

How easy will it be for you to get the care
that you need?

Will get better

Stay the same

Will get worse

Do not know

Why do you think this?



How easy will it be to get to places where you need healthcare?

Get better

Stay the same

Get worse

Do not know

Why do you think this?



Is there anything else we should be thinking about?



9. Are there any other ways we could be giving you healthcare in Dulwich and nearby places?





10. How important are the following things for the new health centre?

Being open at weekends and early evenings

- Very important
- Quite important
- Not important
- Do not know

Having lots of parking spaces

- Very important
- Quite important
- Not important
- Do not know

Being close to public transport

- Very important
- Quite important
- Not important
- Do not know



Being able to call in for health checks

Very important

Quite important

Not important

Do not know

Having space for health workshops

Very important

Quite important

Not important

Do not know



Having advice services that are not about health (for example, benefits advice)

Very important

Quite important

Not important

Do not know

Having a healthy café and space to meet people

Very important

Quite important

Not important

Do not know



11. Here we explain what we are thinking about health services in Dulwich. Please tick the right box to tell us if you agree or not.

a. Local health services need updating so we get the right healthcare for local people.

Really agree

Agree

I do not mind

Disagree

Really disagree

I do not know



b. Health services in the community have newer equipment, offer more services and are close to where you live. Hospitals will treat patients who are seriously ill.

- | | |
|-----------------|--------------------------|
| Really agree | <input type="checkbox"/> |
| Agree | <input type="checkbox"/> |
| I do not mind | <input type="checkbox"/> |
| Disagree | <input type="checkbox"/> |
| Really disagree | <input type="checkbox"/> |
| I do not know | <input type="checkbox"/> |

c. Some local doctor's buildings need to be made better.

- | | |
|-----------------|--------------------------|
| Really agree | <input type="checkbox"/> |
| Agree | <input type="checkbox"/> |
| I do not mind | <input type="checkbox"/> |
| Disagree | <input type="checkbox"/> |
| Really disagree | <input type="checkbox"/> |
| I do not know | <input type="checkbox"/> |

12. Is there anything else we should be thinking about when we make these changes?



Please tell us about yourself. You do not have to do this but we would like to see if different groups have different ideas.

We will keep your information safe.

13. Please write your age.



14. Are you:



Male

Female

Other:

Do not want to say



15. Which of these groups do you belong to?

White:

1 British

2 Irish

3 Any other white background:

Mixed:

4 White and black Caribbean

5 White and black African

6 White and Asian

7 Any other mixed background:

Asian or Asian British:

8 Indian

9 Pakistani

10 Bangladeshi

11 Any other Asian background:



Black or Black British:

12 Caribbean

13 African

14 Any other black background:

Chinese or other ethnic group:

15 Chinese

16 Any other ethnic group:

17 Do not want to say

16. Are you:

Straight/heterosexual

Gay or lesbian

Bisexual

Something else

Don't know

Do not want to say.



17. What sort of job do you do?

Please tick the nearest to the type of job you do.

- Important manager or director of a large company, a doctor or solicitor.
- A manager between the most important and the supervisor, director of a small business, manager for the council or local government.
- Supervisor or junior manager, office worker, student doctor, foreman or sales person.
- Student at school, college or university.
- Skilled manual worker, builder, carpenter, plumber, painter, ambulance or lorry driver or pub worker.
- Unskilled worker, apprentice or trainee, caretaker, park keeper or shop assistant.
- Casual worker
- Housewife or homemaker
- Retired
- Unemployed or long term sick
- Full time carer
- Self employed
- Or something else:



18. Do you have a disability or long term illness?

Yes

No (do not answer question 19)

I do not want to say

19. Are any of these connected to your disability or long term illness?

Wheelchair

Difficulty in getting around

Difficulties with speech

Problems with your eyesight

Learning difficulties

Hearing difficulties

Mental health issues:

Other disability or long term illness:

I do not want to say.

What will happen next?



All these answers will be sent to a group of people who do not work for the NHS.

They will tell us what everyone said.



We will then have a meeting in summer 2013 and decide which plan is best for everyone.

Please put this document in an envelope and send it to:



NHS Southwark Consultation
Facts International
Ashford
TN24 8BR
FREEPOST HS464

You do not need to put a stamp on your envelope