



Derby and Derbyshire Integrated Care Board

Post (Long) Covid Service Review Survey

Introduction

The Integrated Care Board (NHS) are currently in the process of reviewing our Derby and Derbyshire Post (Long) Covid Service.

We would like you to complete this survey and share your views and experiences. This will be fed into the review and support the development of options for the future service.

All feedback from the engagement will put into a report and shared across the system for better learning and understanding.

For more information go to our [Engagement Platform](#) where you will also find:

- An overview of the project
- The Case for Change documents (reports about the review)
- Area to ask any questions
- Our engagement approach
- An area to sign up to attend engagement events

The closing date for survey is 30 September 2023.

If you have any questions or would like to talk to someone about accessibility please call 01332 868 730 or email ddicb.enquiries@nhs.net.



Derby and Derbyshire
Integrated Care Board

Post (Long) Covid Service Review Survey

Survey

Have you used the Derby and Derbyshire Post (Long) Covid Service?

☐ No

☐ Yes



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Questions for people that have used the Post (Long) Covid Service

Who used or is currently using the Derby and Derbyshire Post (Long) Covid Service?

- ☐ You
- ☐ A child in your care
- ☐ An adult friend or family member

How would you rate the current Derby and Derbyshire Post (Long) Covid Service overall?

Very poor

Poor

Acceptable

Good

Very good

☐☐☐☐☐

What do you find works well with the current service?

What do you think could be improved with the service?

Before accessing the service, were you aware of the Post (Long) Covid Service in Derby and Derbyshire?

- ☐ No
- ☐ Yes (please provide details of where you heard about the service)

Before accessing the service, did you know what the symptoms of post (long) covid were?

- ☐ No
- ☐ Yes
- ☐ Unsure

Roughly how long did you wait from GP referral to your first contact with the Derby and Derbyshire Post (Long) Covid Service?

- ☐ Under 1 month
- ☐ 1 to 2 months
- ☐ 3 to 4 months
- ☐ 5 to 6 months
- ☐ Over 6 months

Did you think the wait from GP referral to your first contact with the service was reasonable?

- ☐ No
- ☐ Yes

Did you receive any information while you were waiting?

- ☐ No
- ☐ Yes

ONLY if you answered NO to the above question, would it have been useful to have any information while you were waiting?

- ☐ No
- ☐ Yes (please give some examples of what information would have been useful)

How would you rate the communication from the Derby and Derbyshire Post (Long) Covid Service?

Very poor

Poor

Acceptable

Good

Very good

☐☐☐☐☐

Regarding communication from the service, why did you give that rating?

What improvements around communications would you recommend?

Regarding face-to-face appointments, which site did you attend?

- ☐ Chesterfield Hub (North Hub)
- ☐ Derby Hub (South Hub)
- ☐ Did not attend face-to-face meetings

Regarding face-to-face appointments, did you find location accessible?

- ☐ Yes
- ☐ No
- ☐ Did not attend face-to-face meetings

Please give further details.

Regarding face-to-face appointments, did you feel the travel time/distance is manageable?

- ☐ Yes
- ☐ No
- ☐ Did not attend face-to-face meetings

Please give further details.

How would you rate your discharge from the service?

Very poor	Poor	Acceptable	Good	Very good	N/A - I have not been discharged
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Did you feel confident to be discharged from the service?

- ☐ No
- ☐ Yes
- ☐ N/A - I have not been discharged

When discharged were you referred/signposted to other services?

- ☐ No
- ☐ Yes
- ☐ N/A - I have not been discharged

Do you think there is anything unfair about the current service?



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Questions for people that have not used the Post (Long) Covid Service

Do you know what the symptoms of post (long) covid are?

- ☐ No
- ☐ Yes
- ☐ Unsure

Are you aware of the Post (Long) Covid Service in Derby and Derbyshire?

- ☐ No
- ☐ Yes (please provide details of where you heard about the service)



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Questions around the future of the Post (Long) Covid Service

What would you say are the 3 most important things to you in regard to the Derby and Derbyshire Post (Long) Covid Service?

1.
2.
3.

Do you have any other comments about the service review?



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About you

Equality Monitoring Form (strictly confidential)

NHS Derby and Derbyshire Clinical Commissioning Group recognises and actively promotes the benefits of diversity and is committed to treating everyone with dignity and respect regardless of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex (gender) or sexual orientation. To ensure that we understand who has given us feedback we would like you to complete the short monitoring section below in relation to yourself or if you are representing another person in relation to them. The information provided will only be used for the purpose it has been collected for and will not be passed on to any third parties.

Our Commitment to Data Privacy and Confidentiality Issues

We are committed to protecting your privacy and will only process data in accordance with the Data Protection Legislation. This includes the General Data Protection Regulation (EU) 2016/679 (GDPR), the Data Protection Act (DPA) 2018, the Law Enforcement Directive (Directive (EU) 2016/680) (LED) and any applicable national Laws implementing them as amended from time to time.

In addition, consideration will also be given to all applicable Law concerning privacy, confidentiality, the processing and sharing of personal data including the Human Rights Act 1998, the Health and Social Care Act 2012 as amended by the Health and Social Care (Safety and Quality) Act 2015, the common law duty of confidentiality and the Privacy and Electronic Communications (EC Directive) Regulations.

What are the first 3 or 4 characters of your post code? (optional)

What is your age group? (optional)

- ☐ Under 18
- ☐ 18 – 24 years
- ☐ 25 – 34 years
- ☐ 35 – 44 years
- ☐ 45 – 54 years
- ☐ 55 - 64 years
- ☐ 65 – 74 years
- ☐ 75 – 79 years
- ☐ 80+ years
- ☐ Prefer not to say

Please choose one option that best describes your relationship status.

- ☐ Single
- ☐ In a relationship
- ☐ Living with partner
- ☐ Married / Civil Partnership
- ☐ Separated
- ☐ Divorced / Dissolved Civil Partnership
- ☐ Widowed / Surviving Civil Partner
- ☐ Child
- ☐ Other
- ☐ Prefer not to say

What is your Gender?

- ☐ Male
- ☐ Female
- ☐ Transgender male
- ☐ Transgender female
- ☐ Non-binary (including agender, genderfluid and genderqueer)
- ☐ Prefer not to say
- ☐ Prefer to self-describe as... (please specify)

Have you gone through any part of a process (including thoughts or actions) to change from the sex you were described as at birth to the gender you identify with, or do you intend to? (this could include changing your name, wearing different clothes, taking hormones or having gender reassignment surgery)

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

Please choose one option that best describes how you think of yourself.

- ☐ Heterosexual / Straight
- ☐ Gay woman / Lesbian
- ☐ Gay man
- ☐ Bisexual
- ☐ Pansexual
- ☐ Asexual
- ☐ Prefer not to say
- ☐ Prefer to self-describe as... (please specify)

Are your day-to-day activities limited because of a health condition or illness which has lasted, or is expected to last, at least 12 months? (please select all that apply)

- ☐ Vision (such as due to blindness or partial sight)
- ☐ Hearing (such as due to deafness or partial hearing)
- ☐ Mobility (such as difficulty walking short distances, climbing stairs)
- ☐ Dexterity (such as lifting and carrying objects, using a keyboard)
- ☐ Ability to concentrate, learn or understand (Learning Disability/Difficulty)
- ☐ Memory
- ☐ Mental ill-health
- ☐ Stamina or breathing difficulty or fatigue
- ☐ Social or behavioural issues (e.g. due to neuro diverse conditions such as Autism, Attention Deficit Disorder or Aspergers' Syndrome)
- ☐ No
- ☐ Prefer not to say
- ☐ Any other condition or illness (please specify)

Do you look after, or give any help or support to family members, friends, neighbours or others because of any of the following? (select all that apply)

☐ Long-term physical or mental-ill-health/disability

☐ Problems related to old age

☐ No

☐ I'd prefer not to say

☐ Other (please specify)

Please choose one option that best describes your Ethnic Group or Background?

☐ White - English/Welsh/Scottish/Northern Irish/British

☐ White - Irish

☐ White - Gypsy or Irish Traveller

☐ White - Other

☐ Mixed/multiple ethnic groups - White and Black Caribbean

☐ Mixed/multiple ethnic groups - White and Black African

☐ Mixed/multiple ethnic groups - White and Asian

☐ Mixed/multiple ethnic groups - Other

☐ Asian/Asian British - Indian

☐ Asian/Asian British - Pakistani

☐ Asian/Asian British - Bangladeshi

☐ Asian/Asian British - Chinese

☐ Asian/Asian British - Other

☐ Black / African / Caribbean / Black British - African

☐ Black / African / Caribbean / Black British - Caribbean

☐ Black / African / Caribbean / Black British - Other

☐ Chinese

☐ Arab

☐ Prefer not to say

☐ Any other ethnic group (please specify)

Please choose one option that best describes your religious identity.

- ☐ No religion
- ☐ Christian (including Church of England, Catholic, Protestant and all other Christian denominations)
- ☐ Buddhist
- ☐ Hindu
- ☐ Jewish
- ☐ Muslim
- ☐ Sikh
- ☐ Baha'i
- ☐ Jain
- ☐ Prefer not to say
- ☐ Any other religion (please specify)

Please choose your preferred language option for communicating and interpreting information.

- ☐ English
- ☐ Arabic
- ☐ Bengali
- ☐ BSL (British Sign Language)
- ☐ Chinese
- ☐ Farsi
- ☐ Gujarati
- ☐ Hindi
- ☐ Pashtu
- ☐ Polish
- ☐ Portugueses
- ☐ Punjabi
- ☐ Slovak
- ☐ Somali
- ☐ Turkish
- ☐ Urdu
- ☐ Any other preferred language (please specify)

All NHS Derby and Derbyshire Integrated Care Board policies can be provided in large print or Braille formats, if requested, and an interpreting service is available to individuals who require them. For any questions or feedback regarding this Quality Monitoring Form please contact Claire Haynes, Involvement Manager either by phone on 01332 868 730 or email claire.haynes2@nhs.net