

Liverpool University Hospitals NHS Foundation Trust (LUHFT), Listening Events Report, May 2022

The Royal Liverpool Hospital – 17 May 2022

Aintree University Hospital – 19 May 2022

Broadgreen Hospital – 19 May 2022



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1) Introduction

The Covid-19 pandemic meant that Healthwatch was unable to conduct on-site visits or Listening Events at most local hospital trusts, including Liverpool University Hospitals NHS Foundation Trust (LUHFT), for over two years. This was because we were following national and local guidance on infection control and social distancing, as well as following the Trust's own guidelines. Before Covid-19 we held regular Listening Events at LUHFT sites (which include The Royal Liverpool Hospital, Broadgreen Hospital, Aintree University Hospital and Liverpool Dental Hospital) where we would hear feedback from patients and family members about their treatment and care, or the treatment and care of their loved ones. We also used these opportunities to engage with staff about their own experiences. By May 2022 visitors were allowed back on hospital premises and Healthwatch was once again invited to engage with patients, family members and members of staff at the Royal, Aintree and Broadgreen hospitals. We also hope to visit Liverpool Dental Hospital as soon as possible.

Staff and volunteers from Healthwatch Liverpool, Sefton and Knowsley visited The Royal on 17th May 2022, and Aintree and Broadgreen on 19th May.

The aim of the events was to engage with patients, family members and staff, to gather feedback about their experiences of treatment and care at LUHFT. We wanted to find out what people thought was good and what they thought needed improving.

The three local Healthwatch organisations worked closely together to develop a standard survey for use across all sites.

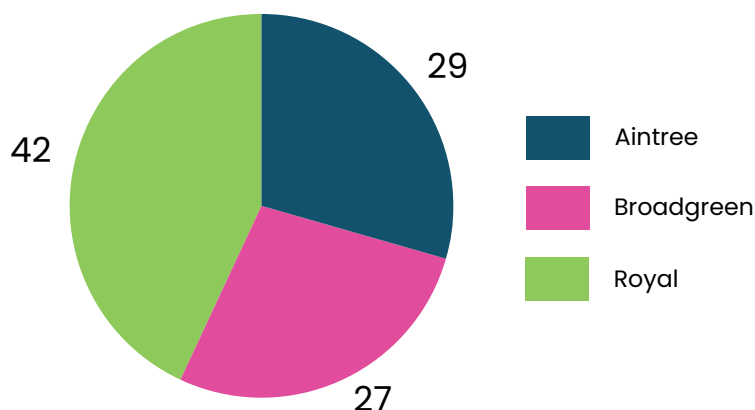
Unlike previous visits, we were not able to visit wards or clinic waiting rooms, so we had a stall in reception areas at each hospital. At The Royal, this was located close to the St Paul's Eye Clinic, and at Broadgreen it was next to the main reception desk which is shared with the Heart and Chest Hospital (which is not part of LUHFT). At Aintree we were asked to use the Hotel entrance. This was a small entrance area, and the location meant that we couldn't stop patients and their visitors to talk to them. We therefore handed out surveys and provided Freepost envelopes, asking patients to return their completed surveys to us.

If people were unable to complete surveys then and there, they were invited to take a paper copy of the survey and a pre-paid envelope and return it at a later date. At The Royal and Broadgreen, people were also offered the use of QR codes linking them to online feedback facilities via the Healthwatch Liverpool, Sefton and Knowsley websites.

In total, 98 surveys were completed. We also spoke to some staff members who also provided feedback to us as patients at the Trust. This report details all the feedback gathered.

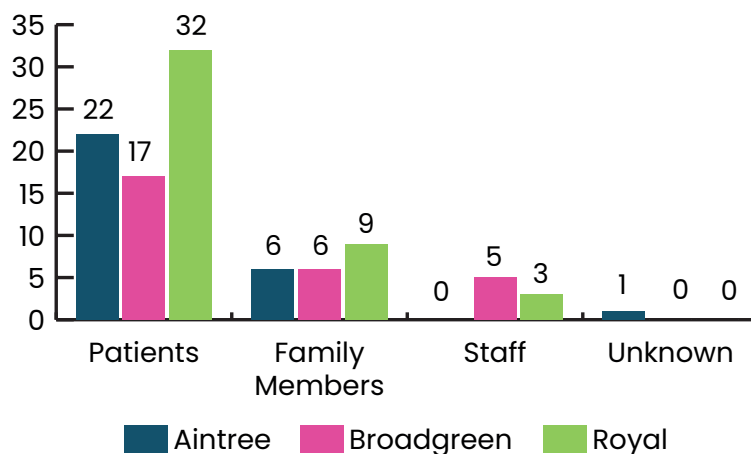
2) Key Findings

1) Surveys Completed:



- Royal x 42
- Broadgreen x 27
- Aintree x 29
- Total = 98

2) Who we spoke to



- Royal: 32 patients, 9 family members, 3 staff
- Broadgreen: 17 patients, 6 family members, 5 staff
- Aintree: 22 patients, 6 family members, 1 unknown

N.B. Some staff also provided feedback as patients, so numbers do not always tally with the total surveys completed.

3) Key issues raised by patients/families

Issues mentioned on multiple occasions included:

- **Staff** – generally very good, helpful, professional, and caring. More staff would be welcome
- **Impact of COVID-19** – has been felt by some but not all, in relation to quality of care/waiting lists/appointment cancellations
- **Waiting times** – were mentioned at all sites, as were cancellations. In most cases patients and family members were unhappy with the length of time they'd had to wait for treatment (whether at A&E, for elective procedures or for medication from the pharmacy), but some felt they'd been seen very promptly
- **Communication and language barriers** – remain an issue; whether between staff, between staff and patients/families, or between staff and people with language support needs
- **Food** – can be dull and repetitive
- **Parking and access** – could be improved at all sites

Further information is set out below.

A small minority of patients had concerns that they wanted to discuss with us further, and we took their contact details so that we could speak to them in more detail later on. These issues included poor communication and poor standards of medical/surgical care. In all other cases, the feedback was given anonymously.

Signage at Broadgreen

The only other issue that the Healthwatch Liverpool team noticed at Broadgreen was that people were constantly confused by the signage. People approached us all day for directions to various departments as they couldn't understand the signage. We noticed that porters and reception staff were also constantly dealing with similar requests for help. Healthwatch Liverpool is aware that this is an ongoing issue and that efforts have been made to distinguish the colours/signage/way finding used by LUHFT and the Heart and Chest Hospital, but further consultation with patients and visitors may be helpful.

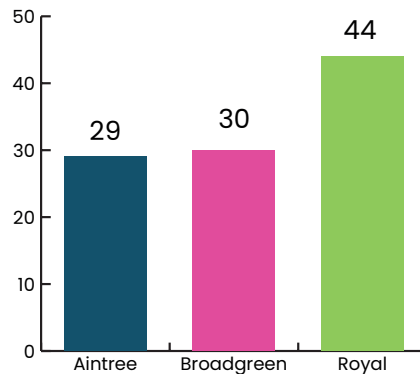
4) Staff concerns

We spoke with several members of staff at The Royal and Broadgreen and their concerns are set out in Section 9, (see p18, below).

3) Survey results

1) Which site is your story about?

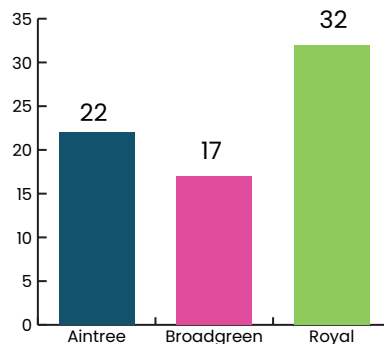
We asked people whether they had any stories they'd like to share with us about the care and treatment they'd received at LUHFT. 98 people shared their stories. Some people who we spoke to at one site also provided feedback about their experience at other LUHFT sites, so the total pieces of feedback we received (103) do not tally with the number of individuals we spoke to.



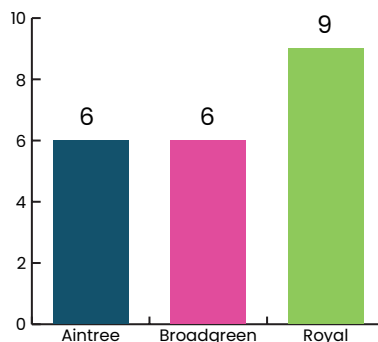
2) Is your story about...

We asked whether people were telling us about their own treatment or treatment received by a family member or loved one. The majority of people told us about their own experiences of treatment and care.

a) Treatment that you've received or are waiting for:



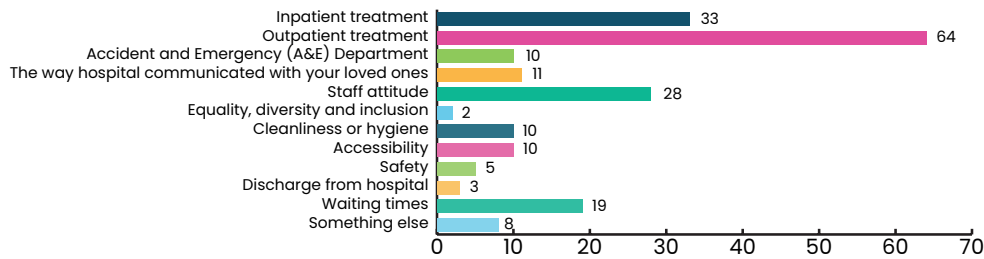
b) Treatment that a family member or loved one has received or is waiting for:



We also had feedback from 8 staff members (5 at Broadgreen and 3 at the Royal). Some of these staff members also provided feedback as patients, so numbers don't always tally.

3) Is your story about (Select as many as apply)

We gave people a selection of options from which they could pick as many as they wished. Some people fed back on several topics.



Feedback was generally related to the site at which we engaged with people (for example, there was no feedback about A&E at Broadgreen, as it doesn't have an accident and emergency department) but occasionally involved treatment received at more than one site. The figures for each site were:

LUHFT Feedback by Category	Aintree	Broadgreen	Royal	Total
a) Inpatient treatment	10	7	16	33
b) Outpatient treatment	22	16	26	64
c) Accident and Emergency (A&E) Department	7	0	3	10
d) The way the hospital communicated with you/your loved ones about treatment	6	2	3	11
e) Staff attitude	13	5	10	28
f) Equality, diversity and inclusion	1	1	0	2
g) Cleanliness or hygiene	6	2	2	10
h) Accessibility	6	4	0	10
i) Safety	4	1	0	5
j) Discharge from hospital	3	0	0	3
k) Waiting times	9	5	5	19
l) Something else	2	2	4	8

Where patients or family members identified the inpatient ward(s) or departments that they were providing feedback on, they named:

Inpatient wards/departments, as identified by patients and family members	
Ward 8 (Aintree)	1
Ward 29 (Aintree)	1
AC (Aintree)	1
Medical Assessment Ward (Aintree)	1
Colon Clinic (Aintree)	1
Ward 1 (Broadgreen)	1
Ward 2 (Broadgreen)	2
Ward 3 (Broadgreen)	1
Fracture Clinic (Broadgreen)	1
Ward 4B (Royal)	2
Ward 8X (Royal)	2
Covid Ward (Royal)	1
Intensive Care Unit (Royal)	1
Stroke Ward (Royal)	1
Renal (Royal)	1
St Paul's Eye Clinic (Royal)	4
Multiple Wards (Royal)	1

Where patients or family members identified the outpatient ward(s) or departments that they were providing feedback on, they named:

Outpatient wards/departments, as identified by patients and family members	
Diabetes (Aintree)	2
Physio (Aintree)	3
Elective Care (Aintree)	1
Ophthalmology (Aintree)	3
Endoscopy (Aintree)	1
Clinic/Department A (Aintree)	1
ENT/Audiology (Aintree)	2
Dermatology (Aintree)	1
Dermatology (Broadgreen)	2

Orthopaedics (Broadgreen)	6
X-Ray (Broadgreen)	1
Urology (Broadgreen)	4
ENT (Broadgreen)	2
Pre-Op Knee Surgery (Broadgreen)	1
Blood Test (Royal)	1
Cancer Treatment/Diagnostics (Royal)	1
Dr Yin (Royal)	1
St Paul's Eye Clinic (Royal)	12
Gastroenterology (Royal)	1
Haematology (Royal)	1
Nuclear (Royal)	1
Orthotics (Royal)	1
Pre-Op (Royal)	1
Liver Transplant Aftercare (Royal)	1

In most cases, people who chose to provide feedback on 'Something Else' actually commented on, communication, treatment received, or accessibility, for example. Comments outside these categories were mostly related to food or access to entertainment whilst in hospital.

"Have televisions. There are none at all. I'm going insane in there. And the food - it's a pleasure to be nil by mouth!" Patient, Royal

"Food! Lunch is tea, always a sandwich, cheese pasty or stew, limited choice. I don't get other options when other patients do. They say you have to order it, but don't tell you how to. The pigeons are getting fed well!" Patient, Royal

"Food was good but felt like they were putting something in to keep his weight down." Family member, Royal

"Meals were terrible, chicken chewy, sandwiches were tasteless, pasties were hard." Patient, Royal

4) Tell us more about Liverpool University Hospitals Foundation Trust (LUHFT) services that you have used recently or are waiting to use

4a) What was/is good about the care that you or your loved one has received?

This section includes a representative selection of the positive feedback that we received from patients and family members at the three LUHFT sites we visited.

Feedback about staff attitudes, professionalism, efficiency, and standards of care was generally very positive:

Staff attitude and Standard of Care/Treatment

"The staff and doctors in A&E, Ward 17, Radiology, Ward 29 and the paramedics have all treated my Mum with so much love and care. Paul from Ward 17 have been unbelievable, and Chris from Ward 29, in caring for my mum. Michael (Macmillan Nurse) too. Nothing has been a trouble." Family member, Aintree

"Top quality care from an experienced and knowledgeable professional" Patient, Aintree

"I have always been treated with care and dignity by the staff in all the hospitals (Aintree, Broadgreen, Royal)" Patient, Aintree

"The day ward was welcoming. The staff friendly and attentive. Consultant, doctors, and nursing staff in the theatre were very professional and reassuring. There was a clerk on reception desk at all times." Patient, Aintree

"Staff were very pleasant and knowledgeable. Felt comfortable and welcomed. Clinic was very organised, waiting area was great. Well-designed and modern." Family member, Broadgreen

"All good. My son has autism, so they work hard with the Learning Disability team. Everything you need is here, it's quiet which is good re. autism. Waiting lists not bad. All running pretty good." Family member, Broadgreen

"I had an ankle replacement. Admission was very efficient, the staff were lovely on the ward, and outpatients has been very efficient and quick as well." Patient, Broadgreen

"The physical care has been 1st class. A lot of support from staff, never had cancelled appointments, and a good relationship with the therapists." Family member, Broadgreen

"Took to hospital by volunteer, very good, and helpful. Welcomed to clinic by reception and didn't wait long, in fact only 1 minute. Spotless. Volunteer staff excellent." Patient, Royal

"Fantastic hospital. Great. Nurses brilliant. 10/10 excellent." Family member, Royal

"Couldn't be better/staff deserve medal." Patient, Royal

"The nursing staff (are good). One particular health care assistant was so approachable, always willing to help. They saved my life on numerous occasions." Patient, Royal

"It's been brilliant, couldn't have done without it. The care with the nurses, the way they calm you down." Patient, Royal

"Everything, I couldn't fault them. The specialist nurses are brilliant, I can ring them up any time, 24 hours per day, any emergency. Even with the Covid they were so careful with me. At Outpatients appointments they'd keep me separate because I'm on immunosuppressants. They treat me with kid gloves. They phone to check how I am. They tell me everything, what tablets are for etc. Everybody is informative, they tell me. I've never come across the Royal being dirty. They've always been spot on, straight there. All staff are so careful with what they are doing all the time. St Paul's dealt with my cataracts, also all fine." Patient, Royal

"The staff at the Royal were absolutely fantastic. From the cleaner to the surgeon, nothing was too much trouble. They explained my procedure very well. They put me at ease." Patient, Royal

"My husband received an emergency operate to remove a cataract. The care he received was faultless. The attention he received could not have been better." Family member, Royal

"Although the department is in the basement and dull and gloomy, the staff are always bright and pleasant." Patient, The Royal

"Very attentive and had multiple positive experiences." Patient, The Royal

In one case, even though a patient had a poor experience they felt that they had been supported and the matter had been dealt with.

"One person was rude to me, and I was quite upset by that. The specialist nurse said I could put in a complaint, or they would have a word with that doctor. Next time the doctor said it had been taken care of, it wasn't covered up." Patient, Royal

4b) What, if anything, could be improved?

Patients and family members made a number of comments about potential improvements which could have been made to their experience. This section includes a representative selection of the less positive feedback that we received from patients and family members at the three LUHFT sites.

Waiting Times

"I think the waiting times (could be improved), and more communication between patient and doctors and consultants." Patient, Aintree

"Using in house pharmacist. Waiting times equal increased parking fees." Patient, Aintree

"Better system in place in regards to waiting times on A&E." Family member, Aintree

"Letters come all the time – but they're all cancellations." Patient, Broadgreen

"Cancelled appointment – three times." Patient, Broadgreen

"Waiting times. Since the original treatment I have had to wait a long time in quite a bit of pain." Patient, Broadgreen

"I've been waiting three and a half years – surgery is now due 1st June. Delays are due to more urgent cases and Covid impact. My other knee's gone, but I can't get a doctor's appointment for a referral. Weekend surgeries would help (not just for private patients), or 24-hour surgery lists." Patient, Broadgreen

"My relative (the patient) is an NHS worker, and Covid has impacted on patients. She had to wait 6 months in pain for the surgery, and has been waiting a long time for appointments. She was told she would get an operation after 3 months if the fracture hadn't healed, but she saw 3 consultants and it took 6 months to arrange, the scan results took months. There was no continuity. This has been going on since July 2021. Masses of people are waiting." Family member, Broadgreen

"Waiting times – 45 months!" Family member, Royal

Staff attitude – and staffing levels

As noted above, staff were generally praised for their attitude towards patients, and for their levels of commitment and professionalism. However, concerns were raised about staffing levels and workload, which potentially leads to concerns about safety and whether issues will be picked up promptly. A minority of staff were felt to have an unhelpful or unprofessional attitude.

"Not enough nurses, doctors etc. Nurses overworked. Underpaid. Nurses should not pay parking fees, an utter disgrace." Patient, Aintree

"Maybe seeing the consultant more." Patient, Aintree

"Staff training. Appropriate behaviour of staff." Patient, Aintree

"I have to say that a so-called manager of my loved one, in charge of the room in question, was not helpful or showed any compassion for my loved one. Told me lies about my loved one and did not know enough about her." Family member, Aintree

"I was not happy with the care received leading up to her death with dementia." Family member, Aintree

"Couldn't sleep due to noise, light. TV very noisy, nurses not always paying attention to patients." Patient, Broadgreen

"I gave 4 stars out of 5 because there have been some gaps. You don't get much feedback from consultants. It's functional but there isn't much empathy." Family member, Broadgreen

"The ward was too hot, no windows. Staff were rarely in the ward, buzzers either not working or were ignored by staff. Hardly slept. Hardly any staff at night. Just auxiliaries and student nurses. Some of them were very rude. Wards were dirty. Doctors were great!" Patient, Royal

“Staff at the Royal not interested. Nurse was rude. I was left in pain for 2 hours and had to rely on my daughter to give pain relief. No visitors allowed even though I was in only 2 months ago.” Patient, Royal

“Staffing levels – I feel sorry for the nurses, they want to spend more time with you, but their workload won’t let them. You can see the frustration.” Patient, Royal

“More nursing staff in A&E and stroke ward.” Family member, Royal

Communication

Communication issues related not only to a request that staff use Plain English, and to the language support needs of people who don’t speak English as a first language, but also to communication between staff and departments. Some people also felt frustrated that their expert knowledge about their own condition, or that of their loved ones, was not utilised by professionals.

“Nobody knows anything about my wife. Nobody asks about medication she is already on.” Family member, Aintree

“Everything (could be improved). When a patient is asked to stay in hospital as the consultant did not want her to leave. Since it’s been done, she’s not been kept safe. And her medical problems. The staff do not pass on the nature of the problems, sent to 4 different wards and little or no progress.” Family member, Aintree

“Speaking in plain language that I can understand. They’re still trying to work out what cancer I have exactly and what treatment I need. Lots of tests. My family are trying to find out for me what is happening. I almost know now, hopefully after this (blood) test, and the next test. I want to know how long I’ve got. They’re doing everything... tip top.” Patient, Royal

“Sometimes there’s been a language barrier with staff or patients who can’t speak fluent English, communication issues, patients get frustrated.” Patient, Royal

“See too many different doctors and stories. Some say they have kidney stones/some say they don’t. Some doctors have said they should be under renal, and we need to know.” Family member, Royal

“An Out of Hours contact number would be helpful.” Patient, Royal

“Listening to the needs of the patient. I had a bowel operation for a hernia, and the surgeon has not given the correct information. Now I have to have another operation.” Patient, Royal

Accessibility

Concerns about accessibility related mostly to inadequate parking facilities at all sites, making access particularly difficult for people with disabilities, and to signage/wayfinding. The transport needs of people travelling from some distance away were also mentioned.

“Parking and access could be improved.” Family member, Broadgreen

“The area outside of reception (entrance) is not monitored properly, and it can get congested by traffic and car parking there. Location is not suitable for people who have mobility issues, especially from the car park as I have to push my husband (patient) in his wheelchair up the hill to get to hospital. A friendly signposted route for wheelchair users to the hospital from the car park would be a good idea.” Family member, Broadgreen

“Transport has been a problem travelling from the Fylde coast (about 2 hours to hospital) and needing to be at hospital at 7.30am. We were told we could arrange transport with the hospital transport department, but their work time starts at 8.00am!” Family member, Broadgreen

“The signage, I’m getting lost in the hospital” (This patient was accompanied by another patient to make sure they could find their way back to the ward again). Patient, Royal

“Minibus to collect patients instead of getting individual taxis or ambulances.” Patient, Royal

“Clear signposting, it’s hard to find where to go, maybe send a map with appointments?” Patient, Royal

5) How long ago did it take place?

The vast majority of feedback was about recent care received at LUHFT, with 60% of people telling us about care or treatment within the previous month. However, some people also told us about experiences of treatment which had happened longer ago.

	Aintree	Broadgreen	Royal	Total
Within the last month	22	13	24	59
1-3 months ago	3	3	6	12
3-6 months ago	0	3	1	4
6-12 months ago	2	1	2	5
1-2 years ago	1	0	1	2
Longer than 2 years ago	2	3	3	8
Unknown	0	4	5	9

6) How would you rate your experience overall?

We asked people to give a star rating for their overall experience of LUHFT. Percentages have been rounded up or down to the nearest whole number.

Overall ratings for LUHFT were as follows, with 78% of patients and family members telling us that their experience of LUHFT had been either Very Good (57%) or Good (21%). A total of 8% said their experience had been Very Poor (4%) or Poor (4%).

The ratings for each individual site were:

	Aintree	Broadgreen	Royal	Total
1 - Very Poor	1	0	3	4
2 - Poor	3	0	1	4
3 - OK	1	3	3	7
4 - Good	5	7	9	21
5 - Very Good	19	13	24	56
Not Known	0	4	2	6

The average ratings for each site were as follows:



A slight concern from our perspective is that the majority of people we spoke to at The Royal were St Paul's Eye Clinic patients – probably because of our location. Whilst it's good to know that people are broadly happy with that particular service, it would have been interesting to get wider representation from people using a range of departments.

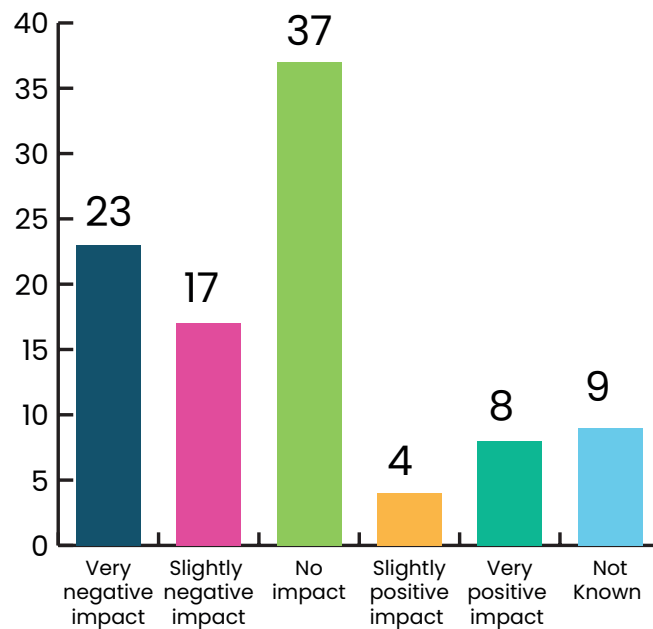
At Broadgreen, we were positioned next to the entrance to the Heart and Chest Hospital which meant we also attracted the interest of their patients and staff. It had previously been suggested that we could perhaps position some of our team at the Alexandra Wing but, on the day, we didn't have enough information and equipment with us to facilitate this. Perhaps on a future visit we could base ourselves at the entrance to the Alexandra Wing instead, if we are still not allowed onto wards or into Outpatient areas.

At Aintree, we were asked to use the Hotel entrance. This was a small entrance area, and the location meant that we couldn't stop patients and their visitors to talk to them. We therefore handed out surveys and provided Freepost envelopes, asking patients to return their completed surveys to us.

The main entrance had been booked up and for health and safety reasons, we were not allowed to use the reception space in the Elective Care Centre. For future visits to the Aintree site, having access to the main entrance would be helpful.

7) Do you feel that the Covid-19 pandemic has had an impact on the standard of care or treatment you or your family member or loved one has received today or recently?

We were interested to know whether people felt that the Covid-19 pandemic had affected the level of care or treatment that they received at LUHFT. Percentages have been rounded up or down to the nearest whole number. Overall ratings for LUHFT were as follows:



Whilst an encouraging 38% thought there had been no impact, the combined ratings of those who felt the impact of Covid-19 had been 'negative' or 'very negative' in relation to the standard of their treatment or care account for 50% of responses.

The ratings for each individual site were:

	Aintree	Broadgreen	Royal	Total
Yes - Very negative impact	5	9	9	23
Yes - Slightly negative impact	6	5	6	17
No - No impact	11	8	18	37
Yes - Slightly positive impact	2	0	2	4
Yes - Very positive impact	4	1	3	8
Not Known	1	4	4	9

Please tell us more about this if you wish

Additional comments received included the following from those who felt COVID-19 had had a very negative impact:

"Very negative impact. Waited over 1 year to see a consultant." Patient, Aintree

"I was once told certain things about a certain procedure were a big mistake, the healthcare professional altered this to say that this was common in these cases." Patient, Aintree

"Delayed foot operation for two years – plus the mental health impact has been big for my wife and family. GP appointments are hard to get. Delays to services at Aintree are huge. Patients are fed up." Patient, Broadgreen

"1. hard to make an appointment to see GPs 2. waiting long for hospital appointments 3. service gone worse 4. although reception area is very clean, the wards upstairs are not." Patient, Royal

"Even though there were no Covid patients and lockdown lifted, no visitors were allowed, not even my husband. Felt staff used Covid as an excuse. Staff behaved differently when they learned I was a nurse." Patient, Royal

People who said the pandemic had a slightly negative impact told us:

"I understand they were very hard times for the hospitals/staff but some people felt they were forgotten. I did receive phone calls in place of appointments, but I would say I was ok when I wasn't." Patient, Aintree

"Phone appointments are not appropriate. Face to face would be better." Patient, Broadgreen

"Long wait times for appointments due to Covid. Prefer face-to-face rather than calls." Patient, Royal

A patient who felt there had been no noticeable impact on their experience said:

"For myself, no impact. Such good care. But aware it's been hard for staff and patients as so much extra pressure. People are scared." Patient, Aintree

"I was in with Covid at the Royal. I had the transplant in Birmingham during the pandemic. They've been unbelievable." Patient, Royal

Someone whose experience had been very positive said:

"Still looked after during Covid. Staff are fantastic." Patient, Aintree

One family member did not wish to give a ranking but said:

"Staff I have met do not seem to worry about it and only do when you want to visit your loved one and stop you. I'm not allowed but other people are. Why? I have been told by this manager that I cannot expect 5-star treatment, suggesting that I should go private. I was told my loved one had had food which was untrue as she was unable to eat or swallow a Weetabix for breakfast. Lunch was horrible and she could not eat it, that should have been accepted. And she was offered nothing else. Why was she not offered soup or yogurt? And when I discovered that she had not had anything to eat all day I told the manager even a yogurt would do and this was 3.30 pm. The staff in all wards do not like you complaining and try to accuse me of being abusive, so all then surround me and show no respect or concern and gang up on me. I have no trust in the NHS and will hold this hospital (accountable)

if anything happens to my loved one.” Family member, Aintree

Although, patients and family members were also sympathetic to the impact that the pandemic has had on staff and services. As one patient told us:

“Judgements on current services, I think, are somewhat unfair, as the pandemic took top priority for years.” Patient, Aintree

8) First part of your postcode

We were interested to know about the areas in which the patients and family members that we engaged with lived. These included the Wirral, Isle of Man, Lytham St. Annes, West Lancashire, Carlisle, Workington (Cumbria), Tarporley (Cheshire), Wigan, Warrington, Widnes and Runcorn but, as we would expect, are largely within the ‘North Mersey’ area. People using Aintree hospital were more likely to come from areas such as Aintree, Fazakerley, Orrell Park, Walton and the Sefton borough. People using the Royal were more likely to come from central or south Liverpool, although some were from the North Sefton area around Southport, as were people using Broadgreen. The vast majority of people who came from further afield were patients rather than family members.

9) LUHFT STAFF MEMBERS ONLY – Is there any feedback you’d like to share with us anonymously?

The main issue of concern raised by a staff member related to staff attitudes and care quality at The Royal. The staff member did not say which department they worked in, but their comments included:

“Care is poor”

“Staff attitudes. Management. Bullying culture. Lack of compassion and empathy.”

“I am utterly disgusted about the way I was treated. Horrendous bullying culture. No compassion. Failure to act on complaints. Grievance policy just a joke.”

They said this experience had been going on for over 2 years. They also said that the Covid-19 pandemic has had a very negative impact on the standard of care and treatment provided by the hospital.

Issues raised by staff at Broadgreen included:

- Urology staff we spoke to were upset that they’ll have to move to The Royal as part of a planned realignment of LUHFT services to avoid duplication across sites. They would prefer to stay at Broadgreen.
- Reception staff raised the issue of lack of wheelchairs at the main entrance – they said there are never any wheelchairs there. They also said that this has been raised consistently but nothing has been done. They also praised the work done by the porters who they said were “very good”.
- Porters themselves also raised the issue of the lack of wheelchairs and the condition of the few existing chairs. They said that funding for new chairs had been promised by both LUHFT and the Heart and Chest Hospital but the promise had now been withdrawn. This seemed

to be because responsibility for this equipment was moving from LUHFT to ISS. There was a concern that “the buck is being passed”, whilst patients received a sub-standard service. Wards don't have their own chairs so the chairs that should be kept at the entrance end up all over the site. Healthwatch staff also noticed family members and taxi drivers, as well as porters, having to wait for chairs to be found throughout the day.

- Another issue raised by porters was the increase in people arriving at the hospital in need of mental health support. They reported that these patients were often reluctant to go to A&E at The Royal or Aintree, and that Mersey Care's Broadoak Unit said they were outside their remit. Porters added that nurses at Broadgreen were also reluctant to help as they were not mental health specialists. This left porters to cope with people experiencing mental distress without any mental health training, and with no idea where to signpost them.
- Staff on a rehab ward wanted visiting hours/rules to return to pre-pandemic 'normality'.

“Our patients are here for months. It's quite sad and unfair for them. We still have the rule of 1 visitor for 1 hour. It's unfair on the patients.” Staff member, Broadgreen

10) Would you like us to contact you about your feedback?

A small minority of people provided us with contact details so that they could speak to us at greater length. These contacts have been followed up and additional information has been provided, as appropriate.

4) Equality, Diversity and Inclusion

We asked people to share anonymous details in answer to five questions developed by Healthwatch England, aimed at collecting the minimum useful data about the people we spoke with. We did this because we are interested in knowing whether different groups of people feel they have received the same standards of care from LUHFT. We did not gather any information which suggested that anyone we engaged with on the dates covered in this report had received less-favourable care or treatment on the grounds of their specific characteristics.

Where known, the people we engaged with were most likely to be in the 65-79 age group (38%) and were slightly more likely to be women (45%) than men (39%).

People overwhelmingly described their ethnic group as 'White: British / English / Northern Irish / Scottish / Welsh', with 70% placing themselves in this category.

Overall, over a third (35%) told us that they had a disability, and almost half (47%) said that they had a long-term health condition.

Further details are available below.

a) What age group are you in?

Age	Broadgreen	Royal	Aintree
12 and under	0	0	0
13 - 15	0	0	0
16 - 17	0	0	0
18 - 24	0	1	0
25 - 49	5	3	5
50 - 64	2	11	7
65 - 79	11	15	11
80+	4	3	5
Prefer not to say	1	0	1
Not known	4	9	0

b) Are you?

Gender	Broadgreen	Royal	Aintree
Woman	12	17	15
Man	10	14	14
Non-binary	0	0	0
Prefer not to say	1	0	0
Not known	4	11	0
Prefer to self-describe	0	0	0

3) How would you describe your ethnic group?

Ethnic Group	Broadgreen	Royal	Aintree
Arab	1	0	0
Asian	0	0	0
Asian British: Bangladeshi	0	0	0
Asian / Asian British: Chinese	0	0	0
Asian / Asian British: Indian	0	0	0
Asian / Asian British: Pakistani	0	0	0
Asian / Asian British: Any other Asian British background (please specify)	0	0	0
Black / Black British: African	1	0	0
Black / Black British: Caribbean	0	0	0
Black / Black British: Any other Black / Black British background (please specify)	0	0	0
Mixed / Multiple ethnic groups: Asian and White	1	0	0
Mixed / Multiple ethnic groups: Black African and White	0	0	0
Mixed / Multiple ethnic groups: Black Caribbean and White	0	0	0
Mixed / Multiple ethnic groups: Any other Mixed / Multiple ethnic groups background (please specify)	0	0	0
White: British / English / Northern Irish / Scottish / Welsh	20	28	21
White: Irish	0	0	1
White: Gypsy, Traveller, or Irish Traveller	0	0	0
White: Roma	0	0	0

White: Any other White background (please specify)	0	0	0
Any other ethnic group (please specify)*	0	0	6
Prefer not to say	0	1	0
Not known	4	12	1

*Any other ethnic group (please specify): British x 1, English x 2, British/English x 1, White x 2

4) Do you have a disability?

Disability	Broadgreen	Royal	Aintree
Yes	10	14	10
No	13	15	19
Prefer not to say	0	1	0
Not known	4	12	0

5) Do you have a long-term health condition?

Long-term condition	Broadgreen	Royal	Aintree
Yes	11	20	15
No	12	9	13
Prefer not to say	0	1	1
Not known	4	12	0

5) Comments and Recommendations

a) Waiting times

Although this is a national issue and has undoubtedly been impacted by the Covid-19 pandemic, we would be interested to know how LUHFT is using the NHS Waiting Well quality principles to address this issue locally, and how this fits within wider partnership working within the health and care sectors to reduce waiting times.

b) Staffing Levels

What plans does LUHFT have to improve staffing levels, including recruitment and retention of staff, and to reassure patients and family members that staffing levels will be appropriate across all Trust sites?

c) Mental Health First Aid training

Does LUHFT have any plans to provide Mental Health First Aid training to porters and reception staff across the Trust? These staff are at the frontline when dealing with distressed individuals and can potentially make a real difference to their experience.

d) Mental Health Signposting

It would also be useful to provide frontline staff (both clinical and non-clinical) with a list of potential referral points for those with mental health support needs. One example of an alternative to A&E might be Liverpool Light which is close to The Royal site and provides mental health support between 6.00pm and 1.00am every day www.liverpool-light.org.uk Further information can be found at www.thelivewelldirectory.com/Search?keywords=mental+health+crisis

e) Signage

This was a particular issue at Broadgreen, and we would be interested to know how regularly this is reviewed and whether patients or visitors are engaged in this process. We are aware that patients have been/will be involved in signage and 'wayfinding' development at the new Royal but it's important that this is kept under review at all sites to improve patient and family experience at what can be stressful times.

f) Wheelchair availability

This is another issue that was specially raised at Broadgreen. Investment in additional wheelchairs would improve the experience of patients, family members and staff across the site, and could be a partnership project with Liverpool Heart and Chest Hospital.

g) Food/nutrition

Food quality was mainly raised at the Royal and it will be interesting to note whether any improvements are reported once the new Royal opens to the public. It would be helpful to patients if staff made sure they were clear about how to order food and whether alternative options are available. If patients are being provided with particular diets, in line with their treatment, it would also be helpful if this is discussed fully with them and their families, to allay any concerns.

6) Response from LUHFT



Liverpool University Hospitals
NHS Foundation Trust

ROYAL LIVERPOOL HOSPITAL

Prescot Street
Liverpool
L7 8XP

Healthwatch Liverpool
Healthwatch Sefton
Healthwatch Knowsley

30th November 2022

Dear Healthwatch Leads

Joint Healthwatch Listening Events Report

I would like to express sincere gratitude on behalf of Liverpool University Hospitals NHS Foundation Trust (LUHFT) for the joint Listening Events Report produced by Healthwatch Liverpool, Healthwatch Sefton and Healthwatch Knowsley.

We are extremely grateful to the Healthwatch staff and volunteers who attended our sites at Aintree, Royal Liverpool and Broadgreen Hospitals in May 2022 to speak with patients, visitors and staff about their experiences. The joint Listening Events report has given us valuable opportunity to gain insight into the experiences of both people who use our services and also our staff working across our sites.

We were delighted to read the many examples in the report of the praise from patients and their families about the care and compassion from our staff. We were pleased that 78% of patients and family members said that their experience at LUHFT had been positive.

While there were many areas of good practice outlined in the Listening Events report, we recognise that there were many areas for improvement highlighted in the feedback. We agree with the comments and recommendations outlined in the report relating to:

- Waiting times
- Staffing levels
- Mental health first aid training
- Mental health signposting
- Signage
- Wheelchair availability
- Food and nutrition

We have engaged with various teams across LUHFT to provide assurance about the actions we have taken, and are continuing to undertake, to address the issues raised. Please find enclosed our detailed response to each of recommendations included in the report. The Listening Events

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report and our response to the recommendations have been reviewed at the Quality and Safety meetings at each of the Aintree, Royal and Broadgreen sites.

The themes in the report were consistent with other feedback we have received from patients, families and staff. We hope that the responses to each of the recommendations provides assurance that the feedback from patients, families and staff have been taken seriously and incorporated into how we monitor and improve our services.

We value our relationship with each of the Healthwatch organisations for Liverpool, Sefton and Knowsley. May I reiterate our gratitude for working so closely with us in partnership to help us understand and act upon the voices of people in our communities.

We look forward to continuing this valued partnership with Healthwatch.

Yours sincerely



Fiona Murphy MBE
Director of Nursing, Corporate Services



Healthwatch Liverpool, Knowsley & Sefton
Listening Events Report, May 2022
Liverpool University Hospitals NHS Foundation Trust (LUHFT)

Listening Events:

- The Royal Liverpool Hospital - 17 May 2022
- Aintree University Hospital - 19 May 2022
- Broadgreen Hospital - 19 May 2022

Healthwatch Recommendation Themes	Healthwatch Comments	Trust Response
Waiting times	Although this is a national issue and has undoubtedly been impacted by the Covid-19 pandemic, we would be interested to know how LUHFT is using the NHS Waiting Well quality principles to address this issue locally, and how this fit within wider partnership working within the health and care sectors to reduce waiting times.	<p>The Trust have reviewed the online content for all Trust hospitals and recognise that there is a need to improve our patient communications. We are aware of National guidance regarding communicating with patients while they wait, particularly where waiting times are extended due to the impact of National issues like, for example, Covid.</p> <p>Currently, the Trust have a programme of work to standardise and improve the delivery of Outpatient services, which includes a focus on patient engagement and communication. We have digital tools to support communications with patients via text message.</p> <p>The Trust are working hard with our colleagues within the Clinical Specialties and Corporate services, to co-ordinate our efforts to review,</p>

Healthwatch Recommendation Themes	Healthwatch Comments	Trust Response
Staffing Levels	What plans does LUHFT have to improve staffing levels, including recruitment and retention of staff, and to reassure patients and family members that staffing levels will be appropriate across all Trust sites?	<p>update and make available LUHFT wide communications to support patients and inform them of their care pathways. This includes consideration and support for patients with different needs.</p> <p>We do face a number of challenges as we integrate services, adjust to a new hospital and establish a LUHFT way of working.</p> <p>Over the last 12 months the Trust has been focusing significant efforts to support workforce capacity across LUHFT. The purpose of this was to confirm a safe move to the new Royal Hospital and ensure the integration of key services across all hospital sites were positive for the care of patients.</p> <p>The Trust set up an Integration & New Hospital Programme with a governance structure reporting into the LUHFT Board. The programme covered all aspects of the changes including clinical and operational requirements, finance, safety, estates & facilities, digital and workforce was a key part of the programme:</p> <p>Investment in workforce</p> <p>From a workforce planning perspective, a safe staffing review was carried out across the Trust focusing primarily on nursing posts (registered and unregistered) and other key clinical roles. This was led by Nurse Directors to ensure the number of nurses met the safe clinical requirements for patients and numbers needed to</p>

Healthwatch Recommendation Themes	Healthwatch Comments	Trust Response
		<p>nurse patients in single rooms in the New Royal. The review highlighted that additional posts were required both for the New Hospital and other hospital sites.</p> <p>The proposals for the integration of services across the city (Stroke, Nephrology, Urology, Breast, General Surgery and Vascular), were clinically led to ensure improved patient pathways. Business cases were produced detailing the proposed improvements and where appropriate, additional funding was requested for additional posts to deliver the integrated services.</p> <p>The additional funding was requested through the business cases and the Safe Staffing Review at Trust Board and the wider System Integration Board. This funding for the additional workforce required to deliver the changes was approved.</p> <p>Recruitment</p> <p>It was noted that there have been difficulties nationally recruiting nurses for a number of years, and this has been compounded following the pandemic. LUHFT invested in a recruitment campaign to market the Trust and the new posts available. Vacancies were advertised through a range of mediums on social media, public transport and posters across the city.</p> <p>Following the investment for the recruitment of new posts, the Trust' Recruitment and Nursing</p>

Healthwatch Recommendation Themes	Healthwatch Comments	Trust Response
		<p>Teams have been focusing on the range of activities to fill vacancy gaps including, recruitment of international nurses and working with local Universities for newly qualified nurse associates. The Trust also has offered apprentice health care assistant (HCA) roles.</p> <p>Additional bulk recruitment events for nurse / HCA posts were set up during 2022 to attract both registered and unregistered nurses. Events that took place in June and August 2022 were successful in making offers to circa 200 potential HCAs at each event. An additional event has taken place in November.</p> <p>Recruitment for other clinical posts funded through business cases for the integrating services has continued over the last 6 months and the marketing campaign and social media has supported the recruitment for these posts.</p> <p>Retention</p> <p>The People and OD Team in LUHFT have been focusing on a number of engagement activities to aim to reduce turnover to improve retention.</p> <p>Engagement with employees through an integrated OD programme, pulse checks, Big Conversation Programme and Clever Together. These help to understand what issues are affecting employees and enable the Trust to address issues, where appropriate.</p>

Healthwatch Recommendation Themes	Healthwatch Comments	Trust Response
		<p>Improving onboarding and induction programmes for new recruits.</p> <p>Reviewing development and career planning for employees</p> <p>Improvement of the appraisal process</p> <p>Adoption of flexible working best-practice</p> <p>Review of rostering practices across the Trust to ensure employees have rosters in advance.</p> <p>Considerable work has gone into health and wellbeing of employees. Psychological, OT and Physiotherapy services are available to staff.</p>
Mental Health First Aid training	<p>Does LUHFT have any plans to provide Mental Health First Aid training to porters and reception staff across the Trust? These staff are at the frontline when dealing with distressed individuals and can potentially make a real difference to their experience.</p>	<p>The role of a Mental Health First Aider in the workplace is to be a point of contact for an employee who is experiencing a mental health issue. They are not trained therapists, psychiatrists or counsellors, but they can offer initial support through non-judgemental listening and guidance. This sits within the remit of the Trust's Occupational Health and Wellbeing (OHWB) team who support our employees. The OHWB leadership team determined that as our staff have access to a Staff Psychologist, any colleague who was distressed or mentally unwell could be signposted by our Wellbeing Champions or their managers to this internal staff support offer. If any staff member was in a mental health crisis situation, they would be supported by signposting them to A&E where they would receive a Mental Health assessment by a professional practitioner.</p>

Healthwatch Recommendation Themes	Healthwatch Comments	Trust Response
		<p>In addition, for staff including porters and receptionists, we currently have the training detailed below available to them:</p> <p>Mandatory training – Safeguarding Adults Level 3 includes mental health, E-Learning (renewed every 3 years)</p> <p>Short course – Confident conversations, E-Learning and Face to Face (one off course booked by individual)</p> <p>Core Skills Framework – Mental Health Awareness – Currently being developed.</p> <p>The Hospital Leadership Teams across sites currently have no record of this issue being escalated outside of the Healthwatch report however, all staff should be prepared and trained to offer supportive interactions with patients suffering from mental health problems. This is for the benefit of our patients, and for the safety and wellbeing of our staff. This will be explored further to understand what training can be provided so that our colleagues can confidently signpost patients and their families to the appropriate support.</p> <p>The Trust's Psychology Department offer a Mental Health Support Service to staff. Any member of staff can self-refer or be referred by their manager, another colleague or via</p>

Healthwatch Recommendation Themes	Healthwatch Comments	Trust Response
		Occupational Health. Staff receive a triage phone call, from where they will be referred to our in-house counselling and Psychology services or signposted elsewhere, as appropriate to their needs. The Associate Psychological Practitioner for triage maintains a comprehensive database of local resources for staff to access if required
Mental Health Signposting	It would be useful to provide frontline staff (both clinical and non-clinical) with a list of potential referral points for those with mental health support needs. One example of an alternative to A&E might be Liverpool Light which is close to The Royal site and provides mental health support between 6.00pm and 1.00am every day www.liverpool-light.org.uk Further information can be found at www.thelivewelldirectory.com/Search?keywords=mental+health+crisis&udg=True&distance=&Lat=&Lon=&location=	There are a number of services that staff in AED signpost to: <ul style="list-style-type: none"> • Merseycare 24/7 Crisis Team - Can be contacted 24/7 as an alternative option to attending AED on 0800 145 6570 (Liverpool and Sefton for adults aged 16 and over) and 0800 051 1508 (Halton, Knowsley, St Helens or Warrington for all ages). • IAPT services for talking therapies for common mental health difficulties (i.e., anxiety, depression, stress and panic), including Talk Liverpool, Talking Matters Sefton, Think Wellbeing Knowsley. • Merseycare Life Rooms - provide courses for positive mental and physical health and social prescribing for employment, housing and debt support. • Third sector services that offer longer term support in the community rather than crisis support, e.g., MIND, Swan Women's Centre, Rape and Sexual Assault (RASA) centre, Women's Health Information and Support (WHISC).

Healthwatch Recommendation Themes	Healthwatch Comments	Trust Response
Signage	This was a particular issue at Broadgreen, and we would be interested to know how regularly this is reviewed and whether patients or visitors are engaged in this process. We are aware that patients have been/will be involved in signage and 'wayfinding' development at the new Royal but it's important that this is kept under review at all sites to improve patient and family experience at what can be stressful times.	<p>The signage is reviewed at the Estates Walk About meeting, which take place every two to four weeks. The Trust also make changes when there is a change in departmental use.</p> <p>A review of signage took place week beginning 31.10.22 at Broadgreen Hospital, with the sign company: Improved site maps have been requested for the old surgical corridor to show hospital coloured zone locations. There was also a review of signs in the main hospital entrance to reflect the move of Urology and the opening of ward 7 Reablement Assessment Hub and Ward 10 the Medical Day Ward (Formally 4x in Royal and Gastro Day Ward 7) There was also a review of signs external to the Alexandra wing to reflect the above changes and move of the Chronic Fatigue Service out of ward 10. There is now improved signage from the Alexandra Wing to Radiology as patients were frequently asking where Xray was located</p> <p>The Trust Patient Experience and Engagement Team have an ongoing programme of engagement to ensure that patients, relatives and carers are involved in the coproduction of service developments and quality improvements across all sites of the Trust. They work in</p>

Healthwatch Recommendation Themes	Healthwatch Comments	Trust Response
		collaboration with other Departments and specialties including Estates to ensure that the patient and family voice is integral to services and care provided at the Trust. Any patient feedback is used to inform changes to the signs on site.
Wheelchair availability	This is another issue that was specially raised at Broadgreen. Investment in additional wheelchairs would improve the experience of patients, family members and staff across the site, and could be a partnership project with Liverpool Heart and Chest Hospital.	At the time of the Healthwatch Listening Event at Broadgreen Hospital (19.05.22) there were a reduced number of wheelchairs out of service due to the brakes not working efficiently. All wheelchairs were reviewed and surveyed, and chairs were removed for repair. We can confirm that the wheelchairs have now been repaired with new wheels with brakes attached and these are now back on site and all porters' chairs are now back in service.
Food/nutrition	Food quality was mainly raised at the Royal and it will be interesting to note whether any improvements are reported once the new Royal opens to the public. It would be helpful to patients if staff made sure they were clear about how to order food and whether alternative options are available. If patients are being provided with particular diets, in line with their treatment, it would also be helpful if this is discussed fully with them and their families, to allay any concerns.	<p>Patient Experience Feedback has highlighted an issue with food quality at The Trust, over the past months and this has been escalated to the Senior Teams. The negative feedback highlighted by both the hotel services team and ISS audits at the Royal Liverpool Hospital has led to the decision for ISS to put their food suppliers out to tender. Following a very strict procurement process we can now confirm that the contract has been awarded to a contract to a new supplier.</p> <p>Patients with specific dietary needs are identified by the Trust dietetics Department who would then support patients with their appropriate</p>

Healthwatch Recommendation Themes	Healthwatch Comments	Trust Response
		<p>menus. These are supplied by the Catering Teams to ensure patients have the correct menu for their dietary needs and allow patients to order appropriately.</p> <p>The Trust Patient Experience and Engagement Team are currently revising the local inpatient survey in response to patient experience feedback in FFT and the National inpatient survey. This will include questions relating to the quality and availability of food and nutrition and access to special menus to meet specific dietary requirements. This will ensure that this issue can be monitored moving forwards with any concerns escalated to the relevant providers and catering teams across sites.</p>

7) About Healthwatch

Healthwatch is the independent champion for people who use health and social care services. We're here to make sure that those running services put people at the heart of care. One of our main purposes is to understand the needs, experiences and concerns of people who use health and social care services and to speak out on their behalf. Healthwatch Liverpool, Healthwatch Sefton and Healthwatch Knowsley are part of a national network made up of local Healthwatch organisations in every local authority area of England (and Healthwatch England, the national body). Our work contributes to a nationwide perspective on health and social care services. We also work with neighbouring local Healthwatch to gather patient experiences from a wider local footprint when it is useful to do so. Healthwatch also provides an information and signposting service which helps to put people in touch with services and activities that can help maintain and improve their health and wellbeing.

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Appendix A: Survey



Please tell us your hospital story

Please tell us, in confidence, about your hospital experience – we want to know what's been good and what, if anything, could be improved. You can help make health and care services better by sharing your experiences and ideas.

We'll share your anonymous responses with Liverpool University Hospitals Foundation Trust (LUHFT) and NHS commissioners to improve the experience of patients and their families.

1) What part of Liverpool University Hospitals Foundation Trust (LUHFT) would you like to tell us about? Please select the hospital that you would like to share your views on from the list below

- a. Aintree University Hospital
- b. Broadgreen Hospital
- c. Royal Liverpool University Hospital (The Royal)
- d. Liverpool University Dental Hospital

NB If you would like to tell us about any OTHER health or social care service you can do so at www.healthwatchliverpool.co.uk/have-your-say

2) Is your story about

- a) Treatment that you've received or are waiting for
- b) Treatment that a family member or loved one has received or is waiting for

3) Is your story about *Select as many as apply*

- a) Inpatient treatment (Ward/department, if known _____)
- b) Outpatient treatment (Clinic/department, if known _____)
- c) Accident and Emergency (A&E) Department
- d) The way the hospital communicated with you/your loved ones about treatment
- e) Staff attitude
- f) Equality, diversity and inclusion
- g) Cleanliness or hygiene
- h) Accessibility
- i) Safety
- j) Discharge from hospital
- k) Waiting times
- l) Something else

Tell us more about Liverpool University Hospitals Foundation Trust (LUHFT) services that you have used recently or are waiting to use

4a) What was/is good about the care that you or your loved one has received?

4b) What, if anything, could be improved?

5) How long ago did it take place?

- a) Within the last month
- b) 1-3 months ago
- c) 3-6 months ago
- d) 6-12 months ago
- e) 1-2 years ago
- f) longer than 2 years ago

6) How would you rate your experience overall?

1 = Very Poor - 5 = Very Good

- 1 - Very Poor
- 2 - Poor
- 3 - OK
- 4 - Good
- 5 - Very Good

7) Do you feel that the Covid 19 pandemic has had an impact on the standard of care or treatment you or your family member or loved one has received today or recently?

- a) Yes - **Very negative** impact
- b) Yes - **Slightly negative** impact
- c) No - **No** impact
- d) Yes - **Slightly positive** impact
- e) Yes - **Very positive** impact

Please tell us more about this if you wish

8) First part of your postcode (e.g. L12, L19 etc) _____

9) LUHFT STAFF MEMBERS ONLY – Is there any feedback you’d like to share with us anonymously?

10) Would you like us to contact you about your feedback?

By sharing your story you are helping to highlight improvements that can be made to health and care services in Liverpool. If you would like us to contact you further about your feedback, let us know below.

Yes – Please share your phone number and/or email

address _____

No

We will only contact you for the purposes indicated. By entering your contact information on this survey, you are confirming that you consent to Healthwatch Liverpool contacting you for these purposes. If you share your details with us they will be kept separately from the other information you share here. You have the right to withdraw your consent at any time. All personal data will be stored in accordance with Healthwatch Liverpool’s Privacy/Data Retention policy.

Some details about you. We don’t ask for your name, so any information you give is anonymous.

What age group are you in?

- 12 and under
- 13 to 15 years
- 16 to 17 years
- 18 to 24 years
- 25 to 49 years
- 50 to 64 years
- 65 to 79 years
- 80+ years
- Prefer not to say
- Not known

Are you?

- A woman
- A man
- Non-binary
- Prefer not to say
- Not known
- Prefer to self-describe (please specify) _____

How would you describe your ethnic group?

Arab

Asian

Asian British: Bangladeshi

Asian / Asian British: Chinese

Asian / Asian British: Indian

Asian / Asian British: Pakistani

Asian / Asian British: Any other Asian British background (please specify)

Black / Black British: African

Black / Black British: Caribbean

Black / Black British: Any other Black / Black British background (please specify)

Mixed / Multiple ethnic groups: Asian and White

Mixed / Multiple ethnic groups: Black African and White

Mixed / Multiple ethnic groups: Black Caribbean and White

Mixed / Multiple ethnic groups: Any other Mixed / Multiple ethnic groups background (please specify) _____

White: British / English / Northern Irish / Scottish / Welsh

White: Irish

White: Gypsy, Traveller, or Irish Traveller

White: Roma

White: Any other White background (please specify) _____

Any other ethnic group (please specify) _____

Prefer not to say

Not known

Do you have a disability?

Yes

No

Prefer not to say

Not known

Do you have a long-term health condition?

Yes

No

Prefer not to say

Not known

Appendix B: Survey Data

Full data from the three hospital sites visited can be downloaded from the Healthwatch Liverpool website: www.healthwatchliverpool.co.uk/LUHFT-report-2022.

To request copies of the data in another format contact Healthwatch Liverpool using the details on page 32.