

# REPORT ON THE DOMICILIARY CARE LAY MONITORING PILOT PROJECT

Undertaken between April and July 2014

a partnership initiative between Healthwatch Northamptonshire and Northamptonshire County Council

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### Summary

Across Northamptonshire it is estimated that 4,500 people received care from paid care workers in their own homes in the financial year 2013/14. Of this total number, 2,614 people accessed their support via Northamptonshire Council Adult Social Care and an estimated 1,886 people purchased a service independently<sup>1</sup>. This is known as domiciliary care and usually involves paid care workers providing assistance with washing, dressing, meals and help with taking medicines. It is provided by home care workers from a range of social care provider organisations.

Domiciliary care provides people with practical help and support so that they can continue living in their own homes for longer. In recent years there has been an emphasis on providing short term domiciliary care support to enable people to avoid admission to a care home or following a period in hospital. This has been key to helping people regain confidence and skills so that they can undertake personal care and other basic daily living tasks which enable them to be as independent as possible. If longer term support is required, an individual plan is agreed to meet the person's ongoing personal care and wellbeing needs.

The demand for domiciliary care will rise as the number of older people in the County increases at a pace. The number of people aged over 85 is expected to increase from 13,800 in 2010 to 23,900 by 2025. The number of people aged over 65 with dementia in the County is expected to be 14,000 by 2030, double the 2010 number.<sup>1</sup>

Health and social care decision makers in Northamptonshire are committed to supporting people to live in their homes longer and want to reduce the number of people having to go into hospital or live in residential or nursing

The quality of domiciliary care is a very important issue. In the last year, there has been a lot of concern about the quality of domiciliary care raised by organisations such as Leonard Cheshire, which had campaigned to end 15 minutes visits. As the independent champion for health and social care in the county, Healthwatch Northamptonshire (HWN) have been working with Northamptonshire County Council to find out what people who use domiciliary care and their families think

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about the quality of this essential service. HWN is one of the initial Healthwatch organisations in the country to look at the quality of this provision from the point of view of people who use the service or their families (many of whom are also referred to as family or informal carers).

More recently, the Chief Executive of NHS England has sparked interest and debate as a result of comments made at a recent Age UK Later Life Conference. He said "We need to do a better job of keeping people out of care homes. Each year about 90,000 people who live at home are admitted to hospital and then discharged to a care home. Some of these folks clearly will need to be supported in a care home, but probably many could be supported at home." If people are going to be offered real choice through personalisation, and admissions to care homes reduced, it is evident that there will need to be radical development and improvements to home care provision.

We conducted a pilot involving 7 Healthwatch Northamptonshire volunteers talking individually, by telephone, to 76 service users or carers/family members who agreed to take part in the survey between March and June 2014. We found high levels of satisfaction with the individual care workers, but there were serious concerns about the timing of care visits, continuity of staff and the lack of information about such changes. It was clear this uncertainty has an extremely negative impact on people's lives. A significant number of respondents really emphasised the difference between their regular frontline paid care worker(s), for whom they had a high regard, and "the office" who they felt did not communicate enough.

# Introduction and Background

Healthwatch Northamptonshire has a Social Care Working Group leading the planning and delivery of work on the care of vulnerable adults and carers. For some time the group has been concerned there was a gap in the assessment of the quality of domiciliary care from the point of view of service users and their informal, unpaid carers (ie families). The Care Quality Commission (CQC) is the independent regulator of health and social care in England and has a remit to inspect the quality of home care services. However, there are limitations on the CQC's approach and they cannot actually go into individual people's homes in the same way they can go into residential and nursing homes to inspect the quality of services.

Since the introduction of a more personalised and individual approach to social care, more and more people are now given a personal budget which they can choose to spend in a range of ways, including employing a personal assistant to help with their day to day personal care needs, as well as negotiating an individual contract with a domiciliary care agency. There will also be people who don't have personal budgets but who buy in their own home care. However, there have been rising concerns about the lack of monitoring of services provided in people's own homes to ensure that vulnerable adults receive a good quality service which is caring and safe. As a result, there was a real imperative for Healthwatch Northamptonshire to develop new ways of gathering the views of service users, carers and their families.

# Planning the Project - Working in partnership with our Volunteers and Northamptonshire County Council

During 2013, Healthwatch Northamptonshire and Northamptonshire County Council discussed the potential for a collaborative pilot project. It was agreed the pilot would initially involve Healthwatch Northamptonshire volunteers making phone contact with service users of two local care agencies - one serving a predominantly rural area and another serving a mixture of urban, semi-rural and rural areas.

Regular meetings took place between the Northamptonshire County Council Commissioning Officer for Domiciliary Care and the Healthwatch Officer leading on the project, to confirm the project plan and time scale. Contact was made with Healthwatch Wiltshire and Healthwatch Staffordshire, who had already conducted engagement activity with people using domiciliary care services.

7 volunteers were recruited for the project. They were involved in the planning process as well as the telephone interviews with service users, family carers and other family members. 1 person was from within the Healthwatch volunteer community and 6 people came from user and carer groups involved with Northamptonshire County Council. They came from a range of backgrounds and communities across the County, and had considerable knowledge and experience to offer the project. One person was a service user and the majority of the group were family carers or had previously been family carers.

The volunteers demonstrated great commitment to the project and significantly influenced aspects of the project. This included, asserting the need for the letter to service users advising of the project, to be sent by the County Council and not the service providers. They also felt very strongly that the phone calls to service users or unpaid/family carers should be made from the Healthwatch Northamptonshire office and not the provider offices. These two recommendations were fully accepted and implemented.

3 of the volunteers were involved in a visit to Healthwatch Staffordshire, where valuable insight was gained about what did and didn't work, and some pitfalls to avoid. Healthwatch Staffordshire had developed a questionnaire and undertaken a mix of visits to local groups and centres to talk to individuals and groups of people face-to-face, telephone calls to individuals and home visits to those in receipt of substantial care packages.

Working with the volunteers on this project confirmed the value of involving local people in the work of HWN, and the range of skills, knowledge and life experience they bring. However, it is important that volunteers are appropriately trained and briefed about their area of work, as well as knowing there is help and support from a paid staff member should the need arise.

The intention for HWN is to focus the second phase of the pilot on face-to-face interviews. These will be undertaken in a range of community, user and carer groups across the county, as well as with people in their own homes. There will be a mixture of one-to-one interviews and focus group sessions. Delivery for Phase 2 of the pilot is planned from mid September - December 2014.

# Survey and Analysis

A survey was developed by the Healthwatch officer with support from the lead Healthwatch officer for Research and Reporting. It was designed to capture quantitative and qualitative responses (ie numbers and then other comments).

Inputting of responses was undertaken by a Healthwatch Northamptonshire Administrative Assistant and two Volunteers. Quality assurance of the data was carried out by one of the Healthwatch Associates.

### **Delivery of the Project**

The phone calls to service users and unpaid/informal carers ran from March to the end of June 2014. Where there was no answer to our phone call, a note was made on the questionnaire and up to a maximum of 3 attempts were made to make contact.

Early feedback from volunteers was that in addition to finding people not in, there was some reluctance to take part in the project because of the following reasons:

- Difficulty with hearing over the phone
- Communication problems because of speech impairment/issues
- Confusion/memory problems/dementia was apparent
- Suspicion/reluctance to speak with someone unknown to them
- Annoyance at yet another unsolicited phone call

Of the 142 attempted contacts, 41 were either no answer or no contact and 25 refused to participate.

This has reinforced our view that it is essential to identify some face to face opportunities for service users and unpaid/informal carers to give their views on domiciliary care. As mentioned earlier, in Phase 2 of the pilot it is intended to do this by meeting people in day centres, carers groups and other community settings.

When contact was actually made, the majority of respondents were very willing to participate and give their views of the service. Not all were the actual users of service. 12 were unpaid/informal carers or other family members, and it was clear from conversations with them that the support from the domiciliary care workers was of great benefit to the users and their carers or other family members.

# **Analysis of Responses**

Responses were received from 76 people in total. 64 were direct users of the service and 12 were carers, or other family members of someone using the service.

There is a clear picture emerging from this first phase of the pilot. The majority of comments about the quality of domiciliary care were positive - particularly about the care workers themselves and the general standard of care.

Question: Overall, how satisfied are you with the care provided by the home care agency to you in your own home?

Very Satisfied	Quite Satisfied	Neither Satisfied nor Dissatisfied	Quite Dissatisfied	Very Dissatisfied	Don't know/ No Answer
42%	47%	2%	0%	1%	<b>8</b> %

### Comments from respondents:

Question: Are you happy with the way your care workers treat you? (e.g. do they understand you and your needs and treat you with respect and dignity?)

Yes, Very	Yes Fairly	No, fairly	No, very	Don't know/
Happy	Happy	unhappy	unhappy	No answer
79%	17%	1%	0%	3%

# Comments from respondents:

<sup>&</sup>quot;Most of the time"

<sup>&</sup>quot;Quite satisfied with care staff but do not like the agency staff"

<sup>&</sup>quot;Most of them are okay"

<sup>&</sup>quot;Yes very happy - they are nice to me"

<sup>&</sup>quot;Treat my wife with respect and dignity usually. They are jovial and help calm her down. Don't like to see her out of sorts"

<sup>&</sup>quot;Training is lacking but they do their best"

# Question: Do you feel that the home care you receive meets your needs and helps you to live the way you would like to?

Yes	Partially	No	Don't know/ No answer
76%	12%	5%	7%

# Comments from respondents:

# Question: Does your home care meet your medication management needs?

Yes	Partially	No	Don't know/ No answer
33%	4%	43%*	20%

<sup>\*</sup>all those who answered no did not require any help with medication management

# Comments from respondents:

# Question: Do your care workers do the things that are set out in your care plan?

Yes, always	Yes, usually	No, not always	No, never	Don't know/ No Answer
72%	17%	3%	1%	7%

<sup>&</sup>quot;Very happy with the service. Good as, if not better than previous agency in another area"

<sup>&</sup>quot;Very positive - yes"

<sup>&</sup>quot;Would like more help as health is deteriorating"

<sup>&</sup>quot;I am an amputee - in bed most of the time"

<sup>&</sup>quot;Weekends are a problem"

<sup>&</sup>quot;I do my own medication"

<sup>&</sup>quot;Daughter and district nurse management the medicines"

<sup>&</sup>quot;My wife does my medication"

<sup>&</sup>quot;The carer reads the dosage to me, as I am registered partially sighted and can't do it myself"

In recent years there has been move to a more personalised approach to social care, with the aim of giving people more choice and control over their lives. The opportunity was taken to find out how involved users of domiciliary care felt in the planning of their care.

# Question: Has your home care provider involved you in the planning of your care as much as you would like to be?

Yes	No	Sometimes	Don't know/ No answer
66%	25%	0%	9%

# Comments from respondents:

# Question: Has your home care agency checked that the level of care you receive continues to meet your needs?

Yes	Partially	No	Don't know/ No answer
43%	4%	40%	13%

<sup>&</sup>quot;Yes all the time"

<sup>&</sup>quot;Often care workers don't look at the plan"

<sup>&</sup>quot;Sometimes miss things and don't seem to consult the care plan that often, but are always kind and caring"

<sup>&</sup>quot;No care plan - wife has not seen one at all"

<sup>&</sup>quot;transferred from Leicestershire with same care plan

<sup>&</sup>quot;there was consultation and we agreed things"

<sup>&</sup>quot;I did not feel involved"

<sup>&</sup>quot;yes I was involved in the decision about the level of care"

<sup>&</sup>quot;28.08.23 - this was the date the plan was set up with very little consultation"

- "No review yet"
- "no review since new agency took over"
- "They review every 6 months"
- "Don't remember any reviews"
- "Every few months"

There has been much debate about the level of support allocated to service users, both in terms of the number of visits and the length of individual visits. There have been particular concerns about 15 minute visits - particularly for people with dementia and other vulnerable people who may become confused and/or distressed if they are rushed. In addition, many people receiving home care support live alone and their only social interaction may be their home care worker, so having the time for a chat could be crucial to maintaining their emotional wellbeing.

It was, therefore, decided to find out how much time was allocated and the views of respondents about this.

Question: How much care do you receive and when do your care workers come? (e.g. 30 minutes, 4 times a week)

Responses revealed the following:

- 96% received care every day
- 47% received care once a day
- 53% received care more than once a day
- The number of visits per day ranged from 1 to 6, with an average of 2 visits a day.

Responses in relation to the length of visits showed:

- 25% said some of their visits were 15 minutes long
- 25% said their visits were between 45 minutes and an hour
- 75% said some of their visits were 30 minutes long

The above figures show the majority of people had different length visits at different times of the day.

# Comments from respondents:

- They come every day 10am 10.45 am
- 2 workers 4 times a day as long as needed

- I get 30 minutes in the morning and 15 minutes at night
- The come daily 1 hour in the morning and 15 minutes in the evening

Question: Do your care workers come at times that suit you? (e.g. are you happy with the times and number of visits?)

Yes, always	Yes, usually	No, not always	No, never	Don't know/ No answer
32%	42%	21%	1%	4%

# Comments from respondents:

Question: Do your care workers arrive on time?

Yes, always	Yes, usually	No, not always	No, never	Don't know/ No answer
17%	45%	36%	1%	1%

# Comments from respondents:

# Question: Do your care workers spend the full time with you that they are supposed to?

Yes, always	Yes, usually	No, not always	No, never	Don't know/ No Answer
51%	24%	17%	3%	5%

<sup>&</sup>quot;I did have a problem with the evening carer, but now sorted out"

<sup>&</sup>quot;10am for carers to get me up is too late and makes me have a very long night"

<sup>&</sup>quot;I would like them to come about 7pm to get me to bed - not 5pm"

<sup>&</sup>quot;Not happy that they come before 7.30 am. I am paying for this"

<sup>&</sup>quot;It depends on what happened during the day before me"

<sup>&</sup>quot;Provided people before are on time then I am"

<sup>&</sup>quot;50% of the time the carers are late - as much as 10 - 15 minutes, but there is a 15 minutes allowance - have had many arguments"

### Question: Does it seem like care workers are in a rush?

Yes, always	Yes, usually	No, not always	No, never	Don't know/ No Answer
<b>7</b> %	11%	24%	57%	1%

There were some comments related to problems with how the care was delivered, but the majority of respondents reported care workers did all their duties and more. Many of the difficulties highlighted were related to scheduling of visits, changes in staffing at weekend, or because regular staff on leave or general turnover of staff and people not being informed of changes.

# Question: Do you always see the same care workers unless they are on holiday or ill?

Yes, always	No, but nearly always	No, hardly ever	No, never	Don't know/ No Answer	
22%	44%	21%	1%	12%	

# Comments from respondents:

Question: Are you kept informed by your home care agency about changes in your care? (e.g. your visit will be late or you'll have a different carer?)

<sup>&</sup>quot;Sometimes spend a little more time depending on need"

<sup>&</sup>quot;No complaints"

<sup>&</sup>quot;Long enough to get the job done"

<sup>&</sup>quot;middle two visits (lunch and early evenings) often seem a bit short

<sup>&</sup>quot;Yes, except for Saturdays sometimes"

<sup>&</sup>quot;Always different, always very helpful"

<sup>&</sup>quot;Varies at weekends and holidays - otherwise they are okay"

<sup>&</sup>quot;Since hospital stay in September 2013 seems to be a variety of carers, although first thing in the morning seems reasonably regular"

<sup>&</sup>quot;In last we weeks have had 12 carers"

<sup>&</sup>quot;Prefer the same carers and often cancel if carer on leave or ill"

Yes, someone always lets me know about changes	Yes, someone always lets me know about changes	No, they hardly ever let me know about changes	No, they never let me know about changes	Don't know/ No Answer
22%	28%	23%	21%	6%

# Question: Is there anything else, good or bad, that you would like to tell us about your care and support?

# The following comments were made:

- "I am pleased with them they look after my husband very well"
- "My carers always put a smile on to my face"
- "I like my care at home and my son and daughter come and help me out quite a lot, so all is well"
- "The office says I am too far out so they cannot get staff to me on time as in the care plan"
- "Very happy with the main carer, but choose sometimes to manage without support when the carer is of sick or on holiday, as relief carer is rushed and often late because of the increased workload"
- "My main complaint is the times of visits. I am a diabetic and need routine about mealtimes. A late start and often early evening call, means that mealtimes are not evenly spread out"

# **Key Concerns Raised by Respondents:**

- Changes of staffing and lack of notice or information about this
- Timing and punctuality, although there is a high level of awareness of the lack of travel time allowed, so users and carers often just accept the situation
- Changes in schedules and staffing particularly difficult for people with dementia to cope with.

<sup>&</sup>quot;Yes someone usually lets me know about changes"

<sup>&</sup>quot;No, they never let me know about changes - very seldom get a phone call re changes.

<sup>&</sup>quot;Someone always let me know about changes"

- Concerns about security and safety of individual if lots of different people come into people's homes.
- There doesn't appear to be a very personalised approach

# Recommendations for Improvement in the Quality of Domiciliary Care from the Initial Phase of the Pilot

What is apparent from this study and also from a meeting of the Domiciliary Care Providers Forum held earlier in 2014, is that there are some significant issues which need to be resolved before any significant improvement can be achieved. The primary areas for review were identified in the following areas.

- Information/Communication processes particularly in relation to staff absences and changes. A number of respondents reported very poor communication with the care agency in relation to changes of staffing. Users and carers stressed they needed more information about changes in staffing. However, there was an understanding that staff might change and the majority of respondents said they would be satisfied to have a small team of care workers allocated to them, so that there was usually a familiar face calling. Having a constant stream of new people was not acceptable.
- A review of the support planning/review processes and the greater involvement of users and carer to ensure a more personalised approach.
- Recruitment and retention of staff are significant issues, both at a local and a national level.
- Level of pay and status of care staff are barriers to attracting and retaining people in this area of work.
- Training and ongoing support for staff particularly as the number of people with more complex needs who are living in the community is increasing.
- Development of a more personalised and enabling approach by care workers, which helps those receiving home care services to develop confidence, maintain skills and retain independence for longer.
- There needs to be a serious discussion between stakeholders about the minimum length of a home care visit, and whether 15 minute calls are acceptable.

#### Recommendations for Phase 2 of the Pilot:

- Conduct face to face interviews with users in day centres or other community centres. Those involved in the pilot feel it is worthwhile having a second pilot phase where some face to face interviews with individual users and groups of users can take place. This will provide the opportunity to ensure to involve users from a wider age range, different ethnic communities and with a greater diversity of impairments and needs to be included in the pilot.
- Conduct face to face interviews with carers contact has already been made with Northamptonshire Carers about access to a number of carers groups in different localities of the county. This will provide the opportunity to develop a specific section of the questionnaire dedicated to carers and how domiciliary care services impact on them.

#### Conclusion

This initial pilot has identified positives, as well as areas for improvement, in domiciliary care. The response from the people with whom we made contact to participate was very positive, with a readiness to give their views and a hope that they could influence changes and improvements which they felt were needed. For commissioners, it is hoped feedback from users and carers will have an impact on the development of future contract specifications, so that quality services are always delivered.

HWN would also urge commissioners to work with us and with user and carer groups to develop and implement a strategy for the full involvement of users and carers throughout the commissioning cycle.

### **Next Steps**

- A copy of this report will be published on the Healthwatch Northamptonshire website.
- Healthwatch Northamptonshire will highlight the areas of concern highlighted by respondents to Northamptonshire County Council and call for responses to them.

- Phase 2 of the pilot, with face to face interviews of users and carers, will begin in mid September 2014. It is intended to produce a report by the end of December 2014.
- Healthwatch Northamptonshire will develop proposals to roll out an ongoing programme of lay monitoring of home care services across the County, subject to discussion about funding with Northamptonshire County Council.

### Thanks and Acknowledgements

We would like to thank the following who have been instrumental in enabling this pilot to happen:

Users and Carers who gave their time to respond to questions Healthwatch Volunteers involved in both planning and delivery of the pilot

Healthwatch Volunteers who inputted data from the questionnaires Northamptonshire County Council Commissioning Staff Healthwatch Staffordshire

The two domiciliary care provider organisations whose clients were involved

# Domiciliary Care Users Experience Monitoring Questionnaire

I would like to start by asking you questions about your care and	d support.
1. How much care do you receive and when do your care workers e.g. 30 minutes, 4 times a week.	s come?
2. Do your care workers come at times that suit you?	Ask:
Comment - e.g. are they happy with the times and number of visits?	Yes, always
	Yes, usually
	No, not always
	No, never
	Don't know/No answer
3. Do your care workers arrive on time?	
Comment - bear in mind that some users may have two carers coming at the same time who differ in punctuality.	Yes, always
	Yes, usually
	No, not always
	No, never
	Don't know/No answer
4. Do your care workers spend the full time with you that they a	re supposed to?
Comment	Yes, always
	Yes, usually
	No, not always
	No, never
	Don't know/No answer

5. Does it seem like your care workers are in a rush?				
Comment		Yes, always		
		Yes, often		
		Sometimes		
		No		
		Don't		
		know/No		
		answer		
<ol><li>Do your care workers do the things that are care you agreed with your home care agency</li></ol>	-	e plan (the li	st of	
Comment		Yes,		
		always		
		Yes,		
		usually		
		No, not		
		always		
		No, never		
		Don't		
		know/No		
		answer		
7. Do you always see the same care workers unless they are on holiday or ill?				
Comment - ask how many different carers they	have had in the	Yes,		
last 4 weeks, if they know.		always		
		No, but		
		nearly		
		always		
		No, hardly ever		
		No, never		
		Don't		
		know/No		
		answer		
8. Are you kept informed by your home care as (e.g. your visit will be late or you'll have a		es in your car	e?	
Comment	Yes, someone alw	•		
	Yes, someone usu			
	know about chang			
	No, they hardly e know about chan			
	No, they never le	•		
	about changes			
	Don't know/No a	nswer		

understand you and your needs and treat you with respect to ment - why did they answer the way they did?		
Comment - why did they answer the way they did:	Yes, very happy	
	Yes, fairly happy	
	No, fairly unhappy	
	No, very unhappy	
	Don't know/No answer	
I would now like to ask you about how your care and supp	ort meets your nee	ds.
10. Has your home care provider involved you in the planning as you would like to be?	ng of your care as m	uch
Comment - how have they been involved?	Yes	
	No	
	Sometimes	
	Don't know/No answer	
11. Does your home care meet your medication managemen	t needs if appropria	ite?
Comment	Yes	
	Partially	
	No	
	Don't know/No answer	
12. Has your home care agency checked that the level of ca continues to meet your needs?	re you received	
Comment - Have they had a review? Has any action been taken?	Yes	
	Partially	
	No	

Don't know

If yes, how often do they check? 6 months, annually, only afte receiving services, etc.	r the first wee	k of
13. Do you feel that the home care you receive meets your need live the way you would like to?	ds and helps yo	ou to
E.g. Are they able to do what they want when they want to, such as having meals, going to bed and getting up, going out, etc.? Are their cultural needs met (e.g. food requirements)?	Yes	
Are they always as clean as they would like to be? Do they feel safe at home? Do they have as much contact with people	Partially	
as they would like? Why have they answered the way they have?	No	
	Don't know/No answer	
14. Overall, how satisfied are you with the care provided by the to you in your own home?	home care ag	ency
Comment	Very satisfied	
	Quite satisfied	
	Neither	
	satisfied nor dissatisfied	
	Quite dissatisfied	
	Very dissatisfied	
	Don't	
	know/No	
15. Is there <b>anything</b> else, <b>good or bad</b> , that you would like to care and support?	answer tell us about y	our
• • • • • • • • • • • • • • • • • • • •		
Have they raised any concerns about their care to their care we agency? If so, did they feel listened to and were their concerns		care
Do they have any other positive or negative comments about the		ers?
Do they have any suggestions about how their home care agence	cy could improv	e the

About you (all information you give us is anonymous and confidential).									
Which age ra	nge des	cribes you?							
Under 65		65-74	75-84				85 or over		
What gender do you consider yourself to be?									
Male		Female					Transgender		
16. Which eth	16. Which ethnic group to you consider yourself to belong to?								
White (British, Irish, any other white background)					Chinese				
Mixed (White and Black Caribbean, white and Black African, White and Asian, any other mixed background)				Any other ethnic group					
Asian or Asian British (Indian, Pakistani, Bangladeshi, any other Asian background)									
Black or Black British (Caribbean, African or any other Black background)									

Thank you very much for taking part in our survey.