

**COMMUNITY
CONNECTIONS**
**For Chelsea & Westminster NHS
Trust & Kensington & Chelsea PCT
Patient & Public Involvement
Forums**



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Strengthening public influence on health

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Health Link March 2006

1. Introduction and Background

Health Link was commissioned by the Chelsea and Westminster NHS Trust Patient and Public Involvement Forum (PPIF) and the Kensington and Chelsea Primary Care Trust Patient and Public Involvement Forum to undertake some research into the community and voluntary groups in the Royal Borough of Kensington and Chelsea which could be involved in the Patient and Public Involvement Forums' work. The PPIFs wish to engage with local groups to gather their views on health services. In addition, they wished to explore possibilities for partnership working, member recruitment and the promotion of their role and work. A specific focus of the project was access by physically-disabled people to GP surgeries in the borough, as this was an area of particular concern for the PPIFs.

The research had three objectives:

- a. To find, contact and survey local community groups in Kensington and Chelsea who may have an interest in local health issues.
- b. To gather from these groups more specific information relevant to the PPIFs.
For example:
 - The constituency served by the group (e.g. BME community, older people)
 - How they communicate with their members (e.g. newsletter, events)
 - What the main health needs of their members are
 - Groups' knowledge of the PPIFs
 - Their interest in promoting the PPIFs to members
 - Their interest in partnership working with the PPIFs
- c. To gather information about difficulties that any disabled members or their carers might have in accessing GP services.

2. Context:

Patient and public involvement derives from two important developments:

- In 2001 the Bristol Inquiry¹ recommended: "*The involvement of patients & the public must be embedded in the structures of the NHS & permeate all aspects of healthcare in the NHS.*"
- In 2002, the Wanless Report² required "*more effective partnership between health professionals & the public*"

There are a number of levers for Patient and Public Involvement in the NHS:

- Patient and Public Involvement Forums
- Disability and Race Equality Legislation
- The duties on the NHS on consultation and involvement

¹ *Learning from Bristol: the report of the public inquiry into children's heart surgery at the Bristol Royal Infirmary 1984 -1995*

² *Securing our future health, Taking a long-term view. London HM. Treasury:*

2.1 PPIFs were set up in 2004 and have built on the work of Community Health Councils. PPIFs are required to monitor services provided by the NHS organisation they work with, as well as check for any gaps in services. They must also seek the views of patients and carers on those services. PPIFs act as a voice for patients within the NHS, making recommendations on how the NHS should improve. The law requires PPIFs to explain how they obtained patients views when they make a report with recommendations. To help them fulfil this role, they have rights to:

- go and inspect wherever patients go within the NHS;
- ask for and be given information by the NHS
- get a response from the NHS to any recommendation they make.

The NHS cannot ignore PPIFs. The government requires the NHS to improve patients' experience.³ Trusts have to know what that experience is before they can improve it and PPIFs are one way that they can find out. The NHS is legally obliged to respond to its Forum 'promptly' and certainly within 20 working days. If a Trust decides to ignore or not to comply with a recommendation made by a Forum, it must explain why.

If PPIFs cannot resolve concerns with the Trust, they have powers to report them to a higher NHS authority, to the local authority or to any other authority the Forum considers appropriate. This does not mean that Trusts always have to do what PPIFs recommend, but it does mean that there should be an honest debate and that Trusts must give a rational explanation if they do not comply with PPIF recommendations. The NHS and PPIFs are expected to work constructively together on their shared goal of making things better for patients.

Forum members are volunteers and are supported by staff contracted by the Commission for Patient and Public Involvement in Health. PPIFs are completely independent of the NHS. The Commission supports PPIFs to help them meet national standards for Forum work.

2.2. New laws relating to Disability Discrimination⁴ & Race Equality⁵ have required very different delivery of public services, which is not possible without effective patient and public involvement:

2.2.1 The Disability Discrimination Act 1995 requires providers of services to change policies or procedures which make it difficult for disabled people to use a service. Disabled people have the right to equal access to health and social care irrespective of their disability. 'Services' include access to information and to means of communication as well as premises. People who are disabled may well be more likely than those who are not, to be users of health services and to exercise choice.

³ Objective 4 Improve the patient and user experience: *Spending Review Public Service Agreement 2004* HM Treasury

⁴ Disability Discrimination Act 1995

⁵ Race Relations (Amendment) Act 2000

The Disability Rights Commission describes disability discrimination in the health service context: *'When staff provide information, or ask questions, or need you to make decisions, you may need support to help you understand what is going on, or agree to what happens. If you have to wait for long periods, staff may need to check out your needs. When you are sent for tests, X-rays etc. in hospital, you may need support to get there. When you leave the hospital you may need help with transport. Many of these support issues apply to anyone using the NHS, but for a disabled person the problems that can be caused by not having this support may lead to you receiving a worse service under the DDA.'*

2.2.2 Race Relations (Amendment) Act 2000- As a public authority, the NHS is required to promote equality of opportunity as well as good relations between racial groups and eliminate unlawful discrimination. Specifically the NHS must

- assess whether their policies are relevant to race equality
- monitor their effect on race equality
- assess and consult on policies they are proposing to introduce
- publish the results of their consultations, monitoring and assessments
- make sure that the public have access to their information/services
- train their staff on the new duties

The Commission for Racial Equality describes how the race equality duty might work in practice in the NHS context: *'At the beginning of the year a PCT agrees with its Strategic Health Authority that it will review delivery of the Coronary Heart Disease National Service Framework from a race equality perspective. ...it gathers the relevant information and contacts appropriate stakeholders to understand current potential adverse impact and inequalities experienced by different ethnic groups in their health, and in access to, quality of and outcomes of care. The PCT acts on the inequalities it finds including for instance arrangements for public involvement, access to information and work with partners. It makes arrangements to improve the quality and completeness of data and ensure information flows allow reporting on progress so that in 6 months and one year specific progress is made and demonstrated not just to the Strategic Health Authority but also to service users.'*

2.3 The duties on the NHS on consultation and involvement - The Health and Social Care Act 2001 put in place two consultation requirements:

Section 7 requires consultation by the NHS with the local authority Overview and Scrutiny Committee on any major change in local health services (this replaced an earlier requirement to consult Community Health Councils)

Section 11 stipulates that the NHS must involve and consult patients and the public in service planning, service changes and any decisions affecting the operation of services, long before they even get to the stage of developing a proposal for formal consultation under Section 7.

3. The Royal Borough of Kensington and Chelsea

In mid-2003 Kensington and Chelsea had an estimated 174,400 residents. This compares with the 2001 Census figure of 158,919 residents. Other figures from the 2001 Census show:

- Average age of the population was 37.7 years, (38.7 years nationally)
- 6% of the population is under 5 (equal to the national average)
- 14% are over retirement age (19% nationally)
- 50.1 % of the population is White British (59.8% for London; 87.5% nationally).
- Life Expectancy for Males is 79.8, compared to 76 for London
- Life expectancy for Females is 84.8 compared to 80 for London

3.1 Deprivation: Kensington and Chelsea was ranked at 116/ 354 in the 2004 Index of Deprivation (1 being the most deprived area). Deprivation is calculated from a number of factors including:

- employment;
- education,
- skills and training;
- health;
- barriers to housing and services;
- the living environment;
- crime

3.2 Health Status: The following Table from the Office of National Statistics compares health status for the residents of Kensington and Chelsea with that of London and England and Wales respectively:

| OFFICE OF NATIONAL STATISTICS⁶ MOST RECENT DATA FOR 2001 | | | |
|--|---------------------------------|---------------|----------------------------|
| | Kensington & Chelsea | London | England & Wales |
| General health: Good | 75.2 | 70.8 | 68.6 |
| General health: Fairly good | 17.3 | 20.9 | 22.2 |
| General health: Not good | 7.5 | 8.3 | 9.2 |
| People with a limiting long-term illness | 13.6 | 15.5 | 18.2 |
| People of working age with a limiting long-term illness | 10.1 | 11.9 | 13.6 |
| Households with one or more person with a limiting long-term illness | 23.5 | 29.7 | 34 |

3.3 Health Inequalities within the borough: Kensington and Chelsea Primary Care Trust notes the health inequalities in the area⁷:

- *'Overall, Kensington & Chelsea is extremely healthy. As a borough, it contributes positively to the national health inequalities targets, having the*

⁶ All figures from the Office of National Statistics <http://neighbourhood.statistics.gov.uk> accessed 30.03.06

⁷ www.kc-pct.nhs.uk/aboutus/healthstatistics_kc_summary.htm accessed 31.03.06

highest life expectancy in London for men and in England & Wales for women and average or better than average rates for infant mortality, child poverty, teenage pregnancy, cancer, heart disease and accidents.

- However, some issues do exist at borough level regarding the delivery of disease prevention services, such as childhood immunisation, cervical screening and immunisation against Flu, which fall short of uptake targets. Also, oral health rates among five year olds are some of the worst in London and the borough has a reasonably high rate of suicide and undetermined injury (although actual numbers are small).
- The majority of Kensington & Chelsea's eighteen electoral wards exhibit a high level of good health. However, the 'spread' of health across the borough is vast, with an estimated 'gap' in life expectancy of five years between the worst ward and the borough average and ten years between the worst and best wards.
- Several wards consistently under-perform in comparison to London on a range of health indicators. These wards are Golborne and St Charles (with the poorest health in the borough), Notting Barns and (to a lesser extent) Cremorne and Colville. In most cases, Golborne & St Charles are positioned within the 20% worst wards in London. With the exception of Cremorne, these wards are located in the North of the borough. These areas should be targeted for health improvement work in order to maximise contribution to health inequalities targets.
- A fifth of Kensington & Chelsea's Census output areas fall into the worst fifth in London for 'not good' self-reported health and some of these output areas are situated within affluent wards. There is a strong correlation between areas of 'not good' health and areas with a high proportion of social housing; indeed, 'not good' health is three times higher among residents renting from the Local Authority or a housing association in comparison to owner-occupiers'.

4. Methodology

Health Link created a list of the categories of groups we needed to contact. This was done so that the final survey could reflect the needs of as diverse a range of service users as possible.

4.1 The Groups: We identified 21 categories of residents relevant to the work of the PPIFs, and searched for organisations supporting such residents. These categories were:

- BME groups;
- Carers;
- Children;
- Condition specific groups;
- Faith groups;
- HIV Positive groups;
- Homeless people;
- Learning disabled people;
- Lesbian and Gay groups;
- Mental Health service users;
- Older frail people living alone
- Older people;
- People on low incomes;
- People with Dementia;
- Physically disabled people;
- Refugees and asylum seekers;

- Residents of Care Homes;
- Sensory impaired people (hearing & sight);
- Those with Long Term Medical Conditions;
- Women's groups;
- Young people.

The PPIFs specifically asked that emphasis be placed on contacting groups from the South of the Borough therefore particular attention was taken to select organisations with relevant postcodes. Despite searching in a number of databases, no groups were found supporting Lesbian and Gay people, because there were no such groups based within those postcode areas.

4.2 The Surveys: Two self-completion paper surveys were developed in consultation with the PPIFs. The Data Protection Act principles were considered and appropriate methodology applied. The two surveys created were:

- Community Connections survey
- Disability survey

4.2.1 Community Connections survey: This survey was developed to gather information about the community groups. It was structured to identify:

- How groups communicate with their members
- How the organisation is staffed, i.e. paid staff or volunteers
- Age range and health needs of groups' service users
- Population group and geographical area served
- Groups' knowledge of PPIFs
- Their willingness to work in partnership with PPIFs and promote their work

4.2.2 Disability Survey: This survey was developed to find out about any difficulties that registered disabled people or their carers may have had in accessing GP services. Questions included:

- The nature of their disability
- If they are registered disabled
- If they have a carer
- Users experience of GP services including
 - Accessing information
 - Communication
 - Accessing GP surgery and facilities within it
 - Any other difficulties they may have had

4.3 Range of Methods of Response: A covering letter explaining the project and the role of the Forums, with a pre-paid envelope, was sent with the surveys. Copies of both surveys and the covering letter are included in Appendix 1. Information about Forums was also sent. In order to comply with the disability and race equality requirements, a range of response methods were offered, including telephone survey, completion face to face, assistance through signing or interpreting, use of Typetalk or Texttalk. In the event, 9 Community Connections

surveys and 1 Disability survey were conducted over the telephone and no requests were made for the use of any assistive technology or interpreting help.

4.4 Organisation consulted for the Community Connections and Disability survey:

128 organisations were contacted as listed in the Community Directory at Appendix 2. The organisations were identified from a range of sources including the local authority, advice from Forum members and the local Council for Voluntary Services. We have included the contact details for the organisations in the Community Directory so that the Forums may contact these groups in their future work.

5. Community Connections for PPIFs

5.1. Responses: 30 Organisations responded to the Community Connections survey. Numbers of respondent organisations by category are listed below.

| Category | No. | Category | No. |
|-----------------------------------|------------|--------------------------------------|------------|
| BME groups | 2 | Older frail people living alone | 0 |
| Carers | 1 | Older people | 2 |
| Children | 8 | People on low incomes | 0 |
| Condition specific support groups | 2 | People with Dementia | 0 |
| Faith groups | 1 | Physically disabled people | 2 |
| HIV Positive groups | 2 | Refugees and asylum seekers | 1 |
| Homeless people | 2 | Residents of Care Homes | 1 |
| Learning Disabled people | 1 | Sensory impairment (hearing & sight) | 1 |
| Lesbian and Gay Groups | 0 | Women's groups | 2 |
| Long Term Medical Conditions | 0 | Young People | 1 |
| Mental Health service users | 1 | Total | 30 |

Well over 110 phone calls were made to chase up responses, aiming for at least one response per category. It is consistent with Health Link's experience of this type of research that response rates are low and always require a great deal of follow up work, as voluntary sector groups are often poorly resourced and overloaded, staffed by part time staff and volunteers, with little spare capacity to respond to requests for involvement of this sort.

5.2 Health Needs identified by respondent groups: The groups contacted for the Community Connections Survey were selected to cover a very diverse constituency. It was disappointing and surprising that we had no responses from condition specific groups or those supporting people with long term medical conditions. However, the survey revealed a wide range of health needs among the service users supported by the respondent groups, as illustrated in the Table of health needs on the following page.

| Service Users Health Needs | No of groups with needs | Service Users Health Needs | No of groups with needs |
|-----------------------------------|--------------------------------|-----------------------------------|--------------------------------|
| Accessibility | 1 | Frailty | 1 |
| Age related disability | 1 | High Blood pressure | 1 |
| Autism | 1 | HIV | 2 |
| Back Problems | 1 | Hydrocephalus | 1 |
| Cancers | 1 | Learning disability | 1 |
| Dementia type illness | 1 | Mental Health/ Trauma | 6 |
| Depression | 1 | Mobility problems | 2 |
| Diabetes | 2 | Multiple Sclerosis | 1 |
| Diverse Health Needs | 8 | Physical Disability | 3 |
| Drug & alcohol abuse | 2 | Sensory impairments | 1 |
| Epilepsy | 2 | High Blood pressure | 1 |
| Food allergies | 1 | HIV | 2 |
| TOTAL HEALTH NEEDS | | | 44 |

The identity of the Groups associated with these health needs is indicated in the Community Directory at Appendix 2.

5.3 Future Community Connections of the PPIFs: The Survey to community groups has created new contacts in the community for the Forums. It has also revealed willingness on the part of groups to explore partnership work with the Forums in the future, despite the fact that several had not previously heard of PPIFs. This described in detail below.

5.3.1 Knowledge of PPIFs among respondent organisations

- Of the organisations surveyed 11 (37%) had heard of Patient and Public Involvement Forums (PPIFs).
- 17 (57%), had not heard of PPIFs. The remainder did not answer this question.
- 14 (47%) thought that the work of their organisation was relevant to the PPIFs' role of seeking the views of patients and carers.
- 16 (53%) stated that they would be willing to promote engagement with the forums to their users.
- 13 (43%) organisations expressed willingness to explore working in partnership with Patient and Public Involvement Forums in the future.

The identity of these groups is indicated in the Community Directory at Appendix 2

6. Detailed Findings

6.1 Community Connections Survey

6.1.1 Methods of Communicating with Service Users (Q2,3,5)

- Of the respondent organisations 29 (97 %) hold regular meetings with members or service users.
- 3 (10%) have meetings every term and 2(7%) of the organisations hold meetings quarterly and 11 (37 %) hold meetings monthly.
- Many of the organisations used more than one way of communicating. Out of the 30 responding organisations surveyed, 20 (67 %) communicate via a newsletter, 13 (43%) via the internet, 16 (53 %) communicate with leaflets and 14 (47%) of the total number used other ways of communicating, either in addition to these methods or instead of them.

6.1. 2 Staffing of Organisations (Q4)

- 10 (33%) of respondent are run by paid staff, 17% (5) are run by volunteers and 16 (53 %) are run by both volunteers and staff.

6.1. 3 Age Group of Service Users (Q6)

- The age group of service users ranged from under 16 to 70+.
- 10 (33%) of organisations reported that their members covered all age ranges.
- 8 (27%) of respondents had service users that were under 16.
- 4 (13 %) had members that were all over fifty.

6.1.4 Health Needs of Service Users (Q7)

- Within the consultation we found that 24 (80 %) organisations supported members with particular health needs. These included 24 different categories ranging from drug and alcohol abuse to diabetes. Full details of the results are given in the previous section.

6.1.5 Area Served (Q8)

- 24 (80%) of the respondent organisations surveyed served residents of a particular geographical area (Kensington and Chelsea).
- 20 (67%) of the voluntary groups were based in the Royal Borough of Kensington and Chelsea, 13 (43%) in the City of Westminster and 7 (23%) from the borough of Hammersmith and Fulham, although they served the residents to Kensington and Chelsea.

6.1.6 Type of population Served (Q9)

- 21 (70%) of respondent organisation served the needs of a particular group, e.g. mental health service users.

6.1.7 Serving Disabled People (Q10)

- 5 (17 %) of Community Connections respondents had members or service users who were registered disabled or were carers (whether a paid or informal carer).

6.1.8 Knowledge of Patient and Public Involvement Forums (Q11a and 11b))

- 11 (37%) of the organisations surveyed had heard of Patient and Public Involvement Forums (PPIFs).
- 27 % (8) of the Community Connections respondents found the Patient and Public Involvement Forum to be very relevant. 3% (1) found it to be fairly relevant and over 17% (5) found it to be relevant.

6.1. 9. Interest in promoting Patients Forums (Q12 a) and b))

- 16 (53%) of respondents said they would be willing to promote engagement with PPIFs to their members or service users. 5 (17%) said no and the remainder did not respond. More details of these findings can be found in section 5.3.1 above.

6.1.10 Interest in working with Patients Forums (Q13 a)

- 13 (43 %) of organisations would be willing to explore working in partnership with Patient and Public Involvement forums in the future.

6.2 Disability Survey

10 responses were obtained from individuals to the Disability Survey, 4 through postal responses, 1 over the telephone and 5 in face to face interviews kindly arranged by Action on Disability

6.2.1 Type of Disability and consequence of Disability (Qs 1, 2 and 3)

- Of the 10 respondents to the Disability Survey, 9 had a physical disability; 1 had a sensory impairment and one a visual impairment.
- The consequence of the disability was impaired mobility for 7 service users, coupled with impaired sight in two cases and solely impaired sight for the remaining one.
- All were registered disabled.

6.2.2 Carers (Q4)

- 9 respondents had carers.

One respondent commented that he objected to the word 'carer' as it emphasised his lack of control over his life. He preferred the term 'personal assistant.'

6.2.3 Accessible Information (Qs. 5a), b) and c))

- Of the 10 respondents, only 3 had received information from their GP about their condition or the service.
- Of these 3, 2 found it easy to read and one said “*only if read to me.*”
- Of the 2 respondents who answered the question on preferred alternatives, 1 would have preferred Braille and one would have preferred large print.

6.2.4 Accessible Communication (Qs. 6a), b), c) and d))

- 8 of the 10 respondents had been contacted by their GP.
- 3 of the 8 had been contacted only by letter, 3 by both phone and letter and 1 by phone and email.
- The 8th respondent had been contacted only by phone and their carer had gone to the surgery to discuss an issue.
- No respondents had been contacted through any assistive technology methods such as Typetalk
- 5 of the 8 contacted felt that the way they had been contacted was best,
- 2 who had been contacted by letter would have preferred larger print
- 1 respondent commented that it was unreasonable to expect a GP surgery to send letters in Braille but hoped this might be easier soon with new technology.
- 1 would have preferred her carer to be contacted also.

6.2.5 Physical Access into the GP surgery (Q7 a) and b))

- 5 respondents had experienced difficulty in gaining access to their GP surgery and 5 had not.
- 1 respondent would have found a ramp and a lift easier and would have also found it easier if the GP visited her at home
- 1 would have found a ramp with an automatic door easier (as she walked with two sticks). There were two steps up the entrance which caused difficulty, but she reported that there was a handrail.
- 1 reported difficulties for his carer in trying to operate the wheelchair at the same time as opening the door. Since the surgery had installed an automatic door, this was a lot easier.
- 2 respondents would have preferred an automatic door and the availability of a ramp, which she said was locked away within the surgery.

6.2.6 Physical Access within the GP surgery

- 5 of the 10 respondents had experienced difficulty in getting around within the surgery due to their disability, in some cases in more than one way
- 2 had difficulties using the toilet as in one case there was no disabled toilet at all and in another it was very small.
- 1 also had difficulty with access to the GP consulting room
- 2 reported difficulty getting round the corridors
- 1 reported difficulties with access within the waiting room

- 2 respondents reported difficulty with the stairs in the GP surgery.
- The first respondent with this difficulty was unable to use the surgery at all as she could not take her disabled daughter's wheelchair up the stairs. Her GP did home visits as a consequence
- The second respondent who experienced difficulty with stairs stated "*the GP is very understanding and will see the respondent downstairs if she is too stiff and unable to climb stairs.*"
- Other difficulties reported related to a very high countertop, which had since been lowered, and 'very limited' wheelchair access at reception, necessitating better design.

6.2.7. Staff Attitude (Q. 9)

- 3 respondents thought staff in the GP surgery understood their needs as disabled people very well, with 1 commenting that staff were not very understanding at first as she could not see the doctor if she was late for an appointment despite her impaired mobility. Staff now took a more understanding approach.
- 2 thought they understood them well
- 3 thought they understood them fairly well
- 2 thought they did not understand them at all (although one of these respondents commented that it depended on the receptionist concerned and some understood very well and the younger ones seemed better at communicating)

6.2.8 GP attitude

- 6 respondents thought their GP responded to their needs as a disabled person very well, with one commenting that he had had very positive experiences with his GP and was very happy to have been at the same surgery for the past 27 years.
- 1 thought they responded well, commenting that there needs to be a balance between professionalism and respect between the doctor and the patient
- 2 thought they responded fairly well
- 1 thought they did not respond at all well, commenting that her GP failed to keep track of her disabilities or show her how to cope

6.2.9 Other Difficulties in accessing GP services because of disability

- 1 respondent's difficulties as a disabled person were compounded by the fact that English is her second language.
- 1 respondent was "*not allowed*" to take her wheel chair into the waiting room and felt she experienced discrimination on account of her disability.

6.3 Demographics details of Respondents

8 respondents to the Disability Survey gave demographic details

| GENDER | | | | | | | |
|--------------------------|----------|----------------------|----------|------------------------|----------|------------------------|----------|
| Male | | | 1 | Female | | | 7 |
| ETHNIC BACKGROUND | | | | | | | |
| White British | 4 | Black British | 2 | Black Caribbean | 1 | Other (Iranian) | 1 |
| AGE RANGE | | | | | | | |
| Under 16 | 1 | 40-49 | 4 | 50-59 | 2 | Over 60 | 1 |

7. Conclusions

The Community Connections Project has set up a 'constituency' for the PPIFs of community groups across a broad range of residents. Between them, these groups offer access to the views of users of health services with 24 different conditions. The Project has also publicised PPIFs and their work with over 100 groups (full list attached at Appendix 3), creating the opportunity for them to develop partnership projects with some interested groups.

The Disability Survey findings indicate some shortcomings in the primary care services used by the small number of respondents, in particular:

- Lack of ramps and automatic doors
- Poor access and accessible facilities within GP surgeries, without even a disabled toilet in one case.
- The majority of respondents had positive views on the attitude of GPs and their staff to people with a disability, but there were a minority of bad experiences,
- Low expectations on the part of the respondents as to the sort of facilities and access they are entitled to expect

However, it is not possible to generalise these findings from such a small number and it would be important to conduct further systematic surveys with a large number of individuals to reach any firm conclusions about access to primary care premises for disabled people.

Although time constraints and a limited budget meant that more in depth face to face discussion with community groups and further discussions with disabled people were not possible, we hope that PPIFs can now build on the momentum of the Project to generate a dialogue with the community groups that will inform the PPIFs' role as the patient's voice inside the NHS, and to consider further work on disability.

APPENDIX ONE**DOCUMENTS SENT OUT****ACCOMPANYING LETTER**

21st March 2006

Dear

Health Link is an independent not for profit patient interest group, working in partnership with the Patients Forums for Chelsea and Westminster Hospital and Kensington and Chelsea Primary Care Trust, who monitor the NHS independently on behalf of patients. We are contacting community groups in Kensington and Chelsea, as both Forums are keen to gain a better understanding of local groups and their work, so that they can better represent their views on the NHS.

We enclose more information about Forums and their role, together with the Community Connections Survey which seeks your views on these issues. We would be very grateful if you would complete the short survey and return it in the FREEPOST envelope provided. We can conduct this survey by post, over the telephone, face to face, through a signer or interpreter, or using Typetalk or Texttalk if you would prefer. If you do not wish to respond to the survey by post, please let us know your preferred method by phone or email to the contact details below, so we can make the necessary arrangements.

A particular area of interest of the Forums is disabled access to GP surgeries in the borough. If you have disabled people or the carers of disabled people among your members or service users, please pass the enclosed disability survey onto them. Again we can conduct this by any of the methods described above, at the option of the participant concerned. Please call us on 0207 254 1582 or email us on info@health-link.org.uk, to let us know if alternative methods are required for completion of the Disability Survey and we will arrange this for your participants.

All replies are completely confidential and will only be seen by the Health Link survey team. No individual contact details will leave our

office and all findings will be anonymised before we report to the Forums on the Project.

If you have any queries or concerns, please do not hesitate contact us. We would appreciate your response to the Community Connections Survey by the **24th March** and details of any disabled or carer members or service users who might complete the Disability Survey **as soon as possible** and in any event by the **21st March**. As you will appreciate, we will need to allow sufficient time to make whatever arrangements participants specify for completion of the survey.

Yours sincerely

Petula Truscott
Project Worker
Community Connections Project

COMMUNITY CONNECTIONS SURVEY**Name of your group or organisation.....****Section A****About your group:**

1. What is the *main* activity of your organisation?

2. Do you hold regular meetings with your members or service users?

Yes No

3. If so, how often?

4. Is your group/organisation run by paid staff or volunteers?

Paid Staff Volunteers Both

5. How do you communicate with your members? (please tick more than one if applicable)

Newsletter Internet

Leaflet Other (please specify)

Section B**About your members or service users.**

6. What is the approximate age of your members? (please tick more than one if applicable)

Under 16 16-19 20-39 40-49 50-59 60-69 69+

7. a) Do your members / service users have any particular health needs?

Yes **No**

b) If yes, please give us some examples.

8. a) Do you serve the residents of a particular geographical area?

Yes **No**

b) If your answer is yes, which one(s)?

9. a) Do you serve the needs of a particular population group e.g. disabled people?

Yes **No**

b) If your answer is yes, which ones?

10. So far as you know, are any of your members or services users registered disabled or is a carer (this may be a paid carer or a relative).

Yes **No**

Section C

About the Patient and Public Involvement Forum.

11. a) Have you heard of Patient and Public Involvement Forums (PPIFs)? If your answer is yes then please go to 11b). If no, please go to question 12a.

Yes **No**

b) In your opinion, how relevant to your organisation's activity is the Forums' work of seeking the views of patients and carers.

Very relevant **Fairly relevant** **Relevant**

Not very relevant **Not at all relevant**

12. a) Would you be willing to promote engagement with Forums to your members or service users?

Yes **No**

b) Please add any comments you would like to make on promoting engagement with the Forums to your members in the box below.

13. a) Would you be willing to explore working in partnership with Patient and Public Involvement forums in the Future?

Yes **No**

b) Please add any comments you would like to make on working in partnership with the Forums in the box below.

14. Is there anything else that you would like to add that this survey has not covered which you would like the Forum to know about? Please use the box below to give us your comments:

Please record the following details:

Your Name :.....

Your Job Title :.....

Your phone no :.....

Your email address (if any):.....

- THANK YOU -

Please return this form to HEALTH LINK by post to:

Health Link

Freepost RLXR-EUYS-KEAH

62 Beechwood Road

Hackney

London

E8 3DY

Or send by Email to: info@health-link.org.uk

DISABILITY SURVEY

Section A

About your disability

1. What is the nature of your disability?

Physical disability

Learning disability

Mental health disability

Other (Please specify)

2. Please tick the box which best describes your disability. You may tick more than one box.

Impaired mobility

Multiple disabilities

Impaired sight

Other

Impaired hearing

(Please specify).....

Learning difficulty

Speech impairment

3. Are you registered disabled?

Yes

No.....

4. Do you have a carer (someone who looks after you) this may be a paid carer or a relative.

Yes

No.....

Section B

We use the word ACCESS several times in this section. By this we mean: getting into and around surgeries, the ways you receive information, the ways staff communicate with you.

Accessing information

5 (a) Have you received any information from your GP, (e.g. leaflets, brochures) This might have been about either the service or your condition.

Yes

No

(b) If so, did you find it easy to read?

Yes No

Please go to question 6 if YES

(c) If not, what would have made it easier for you to read?

Audio tape Large print.....

Braille Other

(Please specify).....

Communication

6 (a) Have you ever been contacted by your GP or staff at your surgery.

Yes No

(b) Were you contacted in any of the following ways? (You may tick more than one)

Phone Fax

Email Textphone

Letter RNID Typetalk

Other..... (Please specify).....

(c) Was this the best way to contact you?

Yes No

(d) If not, what would have been the best way to contact you?

Phone Fax

Email Textphone

Letter RNID Typetalk

Other..... (Please specify)

Accessing your GP surgery

7 (a) Have you experienced any difficulty getting into your GP surgery building due to your disability?

Yes No

(b) If yes, what would have made it easier for you to get into the surgery?

Ramp Handrail

Lift Bell/Buzzer to alert staff

Automatic door ... Other

(Please specify

8 (a) Have you experienced any difficulty getting around within the surgery due to your disability? e.g. are corridors wide enough are light switches at the right height, door handles easy to handle.

Yes No

(b) Using the toilet

Yes No

(C) GP consulting room

Yes No

(d) Getting around corridors

Yes No

(e) The waiting room

Yes No

(f) Any other difficulties you have had.

Reception and administrative staff attitude

9 Do you think staff members understood your needs as a disabled person?

Very well Fairly well

Not very well Not at all

Well

GP Attitude

10 (a) Do you think that the GP is responsive to your needs as a disabled person?

Very well Fairly well

Not very well Not at all

Well

(b) If you would like to give us more details, please do so in the box below.

10 Have you experience any other difficulties not mentioned above in accessing your GP services because of your disability?

Yes No

If yes, please tell us in what way.

11. Has someone has completed this form on your behalf?

Yes No

If so, please say what relationship is this person to you

All your replies will be kept confidential and we will make sure it is not possible to identify who gave which answers

THANK YOU
PLEASE RETURN TO HEALTH LINK by post to:

Health Link
FREE POST RLXR-EUYS-KEAH
62 Beechwood Road
Hackney
London
E8 3DY

Or by Email to: info@health-link.org.uk

Background Information

You are not obliged to tell us your name and address. However it would be useful. We would then be able to keep you informed as to the outcome of the survey.

Please tell us your name

Please provide a contact details

Gender:

Male Female

Age: 16-19 20-29 30-39 40-49 50-59 60+

What is your ethnic group?

A. White

British

Irish

Other White background

B. Mixed

White and black Caribbean

White and Asian

White and Black African

Any other mixed background

C. Asian/Asian British

Indian

Bangladeshi

Pakistani

Any other Asian background

D. Black/Black British

Caribbean

African

Any other black background

E. Chinese or other ethnic group

Chinese

Any other ethnic group

| ORGANISATION (BY CATEGORY) | MAIN ACTIVITY | MEETINGS | REGULAR CONTACT | HEALTH NEED | POP. GRP | RELEVANT TO PPIFS? | PROMOTE PPIFS? | PARTNERSHIP WORKING? |
|--|---|------------------|-----------------------------------|---|---|-----------------------|---|--|
| BME GROUPS | | | | | | | | |
| Al-Hasaniya Moroccan Women's Project | Advocacy information & referral advice for Moroccan and Arabic speaking women to enable them to access main stream services. | Monthly | Leaflet, telephone, word of mouth | Older women's mobility problems, medical condition and mental health problems | Moroccan and Arabic speaking women and young people | Yes | Yes | Yes Workshops promoting PPIFs at our premises if interpreters are provided |
| Angolan Community in London | Support the cultural & welfare needs of their community | Every four weeks | Leaflet, newsletter or internet | | Deprived Angolans (inc. refugees/ asylum seekers | NR | No | No |
| CARERS | | | | | | | | |
| London Care Connections (formerly KC Carers) | Homecare & respite services to carers. Homeshare services to older people (with long term health conditions). Advice, info, signposting | No | Newsletter, Leaflet, internet | Dementia-type illnesses, Multiple Sclerosis, epilepsy, cancer and other life limiting illnesses | No | Yes | Yes: 'it would provide an opportunity for users to have a voice and influence.' | Yes |

COMMUNITY DIRECTORY

Appendix Two

| ORGANISATION (BY CATEGORY) | MAIN ACTIVITY | MEETINGS | REGULAR CONTACT | HEALTH NEED | POP. GRP | RELEVANT TO PPIFS? | PROMOTE PPIFS? | PARTNERSHIP WORKING? |
|------------------------------|---|----------------------|----------------------|--|---|--------------------|----------------|----------------------|
| CHILDREN | | | | | | | | |
| Chelsea Playground | Play | No | Face to face | Physical disability, epilepsy autism | Disabled children | No | No | No |
| Denbigh Under 5s Group | To teach preschool children through play | Monthly | Newsletter | Food allergies | N/A | Yes | Yes | Yes |
| Colville Nursery Centre | We are a community nursery providing care and education for children aged 3 months to five years. | Monthly (management) | Newsletter; internet | One has special needs with hydrocephalus; Deputy Early Years Director is Registered disabled | Those on waiting list (including special needs) | Yes | Yes | Yes |
| Ilys Booker Under 5's Centre | Day Nursery | Termly | Newsletter | N/A | NR | No | NR | NR |
| Inspire Schools Project | Inspire schools | Monthly | Newsletter, internet | No | Young People | NR | NR | NR |
| unidentified | Day Nursery | Termly | Newsletter | No | Children and parents | NR | NR | NR |

| ORGANISATION (BY CATEGORY) | MAIN ACTIVITY | MEETINGS | REGULAR CONTACT | HEALTH NEED | POP. GRP | RELEVANT TO PPIFS? | PROMOTE PPIFS? | PARTNERSHIP WORKING? |
|---|--|-----------|---|--|--|--------------------|----------------|----------------------|
| Meanwhile Gardens Community Association | Community gardens- 4 acre site free under 5's drop in centre for parents and carers of children up to their sixth birthday. Skate park free- open access and community events activities | Quarterly | Newsletter, Leaflets, events and meetings | Healthy living, eating well, exercise, stop smoking etc. | Parents and Carers of young children and users of skate park and gardens of all ages | No | Yes | Yes |
| Worlds End Under 5's Centre | Drop in creche | Termly | Newsletter, leaflet, posters | No | Drop in (all ages are welcome) | No | NR | NR |
| CONDITION SPECIFIC GROUPS | | | | | | | | |
| Alcoholics Anonymous | To help people stop drinking and remain abstinent | Weekly | Internet, | Alcohol abuse | NR | Yes | No | No |

| ORGANISATION (BY CATEGORY) | MAIN ACTIVITY | MEETINGS | REGULAR CONTACT | HEALTH NEED | POP. GRP | RELEVANT TO PPIFS? | PROMOTE PPIFS? | PARTNERSHIP WORKING? |
|-------------------------------|---|-----------------------|--|---|-----------------|-----------------------|-------------------|-------------------------|
| Kensington and Chelsea Cruse | Bereavement care | daily | Newsletter, internet and leaflet | All conditions derived from bereavement | The bereaved | no | no | no |
| FAITH GROUPS | | | | | | | | |
| Latymer Christian Centre | Christian community centre | Yes, frequency varies | Notice board, Newsletter, Leaflet, meeting items | Back problems, general poor health | No | Yes | Yes | Yes |
| HIV POSITIVE GROUPS | | | | | | | | |
| Terrence Higgins Trust | Providing support services to people living and affected with HIV | Weekly | Newsletter, leaflet, telephone | HIV related | People with HIV | Yes | Yes | Yes |

| ORGANISATION (BY CATEGORY) | MAIN ACTIVITY | MEETINGS | REGULAR CONTACT | HEALTH NEED | POP. GRP | RELEVANT TO PPIFS? | PROMOTE PPIFS? | PARTNERSHIP WORKING? |
|---------------------------------|---|----------|---|---|---|--------------------|----------------|---|
| CARA Trust | Social welfare and health support services for people living with HIV | Weekly | Newsletter, internet, leaflet | HIV | People with HIV, predominantly gay men and African people | Yes | Yes | Yes 'You will need to have a very clear focus on what the purpose of the engagement is actually for from the user perspective as well as the statutory perspective.' |
| HOMELESS PEOPLE | | | | | | | | |
| Look Ahead Housing Association | Housing and support for homeless people | Monthly | Newsletter, Posters, Key workers, internal post, face to face | Slight mobility, mental health, substance misuse | Homeless | Yes | No | NR |
| Broadway | Supporting housing; homelessness housing | Weekly | Letter and word of mouth | All disabilities, mental health ,drug and alcohol abuse ("everything and anything") | NR | No | Yes | NR |
| LEARNING DISABLED PEOPLE | | | | | | | | |

| ORGANISATION (BY CATEGORY) | MAIN ACTIVITY | MEETINGS | REGULAR CONTACT | HEALTH NEED | POP. GRP | RELEVANT TO PPIFS? | PROMOTE PPIFS? | PARTNERSHIP WORKING? |
|---|--|------------|---|----------------------------------|------------------------------------|--------------------|----------------|----------------------|
| Equal People | Support worker help service users in their homes with shopping. We provide with learning disability. We provide housing and social activities (own flats and residential homes). | Monthly | Newsletter, other e.g Activity booklet sent our quarterly; daily contact with service users by support worker; service users visit office daily | Learning disability | Learning disability | No | No | No |
| MENTAL HEALTH SERVICE USERS GROUPS | | | | | | | | |
| Kensington & Chelsea Forum for the MH Service | Put forward the views of service users in Kensington and Chelsea to improve mental health services | Bi-monthly | Newsletter, leaflet | Mental Health and Physical needs | People with mental health problems | Yes | Yes | Possibly |
| OLDER PEOPLE | | | | | | | | |

| ORGANISATION (BY CATEGORY) | MAIN ACTIVITY | MEETINGS | REGULAR CONTACT | HEALTH NEED | POP. GRP | RELEVANT TO PPIFS? | PROMOTE PPIFS? | PARTNERSHIP WORKING? |
|-------------------------------------|--|-----------|-------------------------------|--|--|--------------------|---|----------------------|
| Eritrean Elders Welfare Association | Giving service to older people | Weekly | Internet; Letters; telephone | High blood pressure, diabetes; depression | London boroughs | No | Yes | No |
| Westway Community Transport | Provision of safe and affordable transport for voluntary and community groups in Kensington and Chelsea and Westminster. | Quarterly | Newsletter, Leaflet, internet | Mental health issues, mobility problems due to age or disability | Those who need safe and affordable transport but cannot use public transport through age or disability | Yes | Yes if safe and affordable transport is provided to and from events | Yes |
| PHYSICALLY DISABLED PEOPLE | | | | | | | | |
| Action Disability K&C | This Group was most helpful in facilitating interviews with their disabled members and would be willing to work further with the PPIFs | | | | | | | |
| PPI/ Voice of Golborne | We give patient feedback and modify some policy | Monthly | Newsletter, leaflet, internet | Older people, mentally ill patients, diabetics 'everything and anything' | Disabled people | Yes | Yes | Yes |

| ORGANISATION (BY CATEGORY) | MAIN ACTIVITY | MEETINGS | REGULAR CONTACT | HEALTH NEED | POP. GRP | RELEVANT TO PPIFS? | PROMOTE PPIFS? | PARTNERSHIP WORKING? |
|---|---|--|---|--|------------------------------------|--------------------|------------------|--|
| Threshold Housing | Community support to serve users in their own environment | Weekly | Internet, team meetings, communication book | Housing support, practical support, cleaning | Disabled (all) | Yes | Yes | Yes ('how can we access their support?') |
| REFUGEES AND ASYLUM SEEKERS | | | | | | | | |
| African Refugees Project | Support refugee and asylum seekers | Daily, weekly, monthly, annually (AGM) | Leaflet and Face to face meetings | Registration with GP, dentist and optician | African Refugee and asylum seekers | No | No Response (NR) | NR |
| RESIDENTS OF CARE HOMES | | | | | | | | |
| Inkerman Housing Association | Sheltered Housing | Daily (Quarterly house meetings) | NR | Age related disability and mental health needs | Older People with these problems | NR | NR | NR |
| SENSORY IMPAIRMENT (HEARING & SIGHT) | | | | | | | | |
| Sensory Impairment Team, K & C Social Services | Sensory impairment | Yes if necessary | Newsletter, Leaflet, internet | Sensory impairment | Deaf and visually impaired | No | Yes | Yes |
| WOMEN'S GROUPS | | | | | | | | |

| ORGANISATION (BY CATEGORY) | MAIN ACTIVITY | MEETINGS | REGULAR CONTACT | HEALTH NEED | POP. GRP | RELEVANT TO PPIFS? | PROMOTE PPIFS? | PARTNERSHIP WORKING? |
|--|--|-----------|-------------------------------|--|---------------|--------------------|----------------|----------------------|
| Organisation for the Advancement of African Women (ORGAAW) | To provide information and advice & support on issues relating to health, training and employment. Support we provide a series of workshops and seminars on health issues. | Quarterly | Newsletter, internet, leaflet | Physical disability and other health needs | No | Yes | Yes | Yes |
| Polish Women's Benevolent Association | To help women and children mainly from Poland | Monthly | Letter | No | Polish people | No | NR | NR |
| YOUNG PEOPLE | | | | | | | | |
| Unidentified | Youth Club | NR | Leaflet | No | No | NR | NR | NR |
| GAY AND LESBIAN PEOPLE | | | | | | | | |
| LONG TERM MEDICAL CONDITIONS | | | | | | | | |
| OLDER FRAIL PEOPLE LIVING ALONE | | | | | | | | |
| PEOPLE LIVING ON LOW INCOMES | | | | | | | | |
| PEOPLE WITH DEMENTIA | | | | | | | | |
| No responses from the groups identified as specifically working with the above groups, but respondent groups refer to these difficulties | | | | | | | | |

LIST OF ORGANISATIONS TO WHOM SURVEY WAS SENT

| Organisation | Address | Address | Address | Postcode |
|--|------------------------------|-------------------------|----------------------------|-----------------|
| Acet - Aids Care Education | 1 Carlton Gardens | Ealing | London | W5 2AN |
| Action Disability Kensington and Chelsea ADKC | The ADKC Centre | Whistable House | London | W10 6SB |
| Advocate for Mental Health | 99 Tachbrook Street | London | | SW1V 2QA |
| African Family Development Association | 10 Kingsley House | Beaufort Street | London | SW3 5BD |
| African Refugees Project | Dalgarno Way | London | | W10 5QB |
| After School Drama Club | The Tabernacle | Powis Square | London | W11 2AY |
| Age Concern Kensington and Chelsea | Kensington Charity House | Charles House | 375 Kensington High Street | W14 8QH |
| Alan Morkill House | 88 St. Marks Road | London | | W10 6BY |
| Alcohol Resource Centre | 314 Ladbrooke Grove | London | | W10 5NQ |
| Al-Hasaniya Moroccan Women's Project | Bays 4 -5 | Trellick Tower | Goldhawk Road | W10 5PL |
| Al-Noor Youth Association | Golborne Youth Centre | London | | W10 5QW |
| Al-Wafa Society | 118 Sinclair Road | Kensington & Chelsea | London | W14 0NL |
| Anglo Czech-Slovak Welfare Association | 22 Ladbrooke Square | London | | W11 3NA |
| Angolan Community in London | 2 Thorpe Close | London | | W10 5XL |
| Angolan Women's Group UMARU | Canalside House | London | | W10 5AA |
| Arab Women's Council | 8 Redcliffe Square | London | | SW10 9JZ |
| Arab Women's Voice | 2 Thorpe Close | London | | W10 5XL |
| Arabic Speakers Development Organisation P.D.T | Unit 26, 242 Acklam Road | London | | W10 5JJ |
| Asian Women's Association, Kensington | 49 Sheffield Terrace | London | | W8 7NB |
| Association of Bangladeshi Community | 2 - 4 Malton Road | London | | W10 5UP |
| Arthritis Care | Canalside House | 383 Ladbrooke Grove | London | W10 5AA |
| Bangladesh Association, Queen' Park | Third Avenue | London | | W10 4JL |
| Baraka Youth Association | Canalside House | London | | W10 5AA |
| Bereavement Support | 7 Thorpe Close | London | | W10 5XL |
| Black and Minority Ethnic Residents Group | 87 Powis Square | London | | W11 2BN |
| Black Unity Forum | Office 8 | 7 Thorpe Close | London | W10 5XL |
| Blackliners | Unit 46 Eurolink | Business Centre | 49 Effra Road | SW2 1BZ |
| Blenheim Project | 321 Portobello Road | | | W10 5SY |
| Boys Brigade (39th London) | Edith Grove Christian Centre | Edith Grove | London | SW10 0LB |
| British Arabs Resource Centre | Office 8, Beethoven Centre | 174 Third Avenue | London | W10 4JL |
| CARA Trust | Suite 1714 | 16-19 Southampton Place | London | WC1A 2AJ |
| Catholic Children's Society (Westminster) | | 73 St. Charles Square | | W10 6EJ |

LIST OF ORGANISATIONS TO WHOM SURVEY WAS SENT

| | | | | |
|---|-----------------------------|---------------------------|--------------------------------------|----------|
| Chelsea Adventure Playground - (HAPA) | Royal Hospital Gardens | London | | SW3 4SR |
| Chelsea Estates Youth Group | The Hut | Alpha Place | London | SW3 5SZ |
| Chelsea Youth Club | Blantyre Street | Worlds End Estate | London | SW10 1EQ |
| Citizens Advice Bureau (Chelsea) | Chelsea Old Town Hall | London | | SW3 5EE |
| Citizens Advice Bureau (Kensington) | Westway Info Centre | 140 Ladbroke Grove | London | W10 5ND |
| Colville Nursery Centre | 4/5 Colville Square | London | | W11 2BQ |
| Dadihiye Somali Development Organisation | Mailbox 31 | 235 Earls Court Road | London | SW5 9FE |
| Dale Youth Club | c/o Camden Charities | 27a Pembridge Villas | London | W11 3EP |
| Deaf Team | Sensory Impairment Team | Room G29, Social Services | Kensington Town Hall, Hornton Street | W8 7NX |
| Denbigh Under 5s Group | Etheline Holder Hall | 5 Denbigh Road | London | W11 2SJ |
| Disabled Living Foundation | 380- 384 Harrow Road | London | | W9 2HU |
| Earls Court Homeless Families Project | St Philips Church | London | | W8 6EB |
| Earls Court Youth Club | 120 Ifield Road | London | | SW10 9AF |
| Eaves Women's Aid | PO Box 26091 | London | | SW10 0XH |
| Egyptian Community Association in the UK | Redcliffe Gardens | London | | SW10 9HH |
| Equal People | 73 Charles Square | London | | W10 6EJ |
| Eritrean Elders Welfare Association | 2 Thorpe Close | London | | W10 5XL |
| Eritrean Parents and Children Association | 2 Thorpe Close | London | | W10 5XL |
| Ethiopian Refugee Community (formerly Amhara) | 2 Thorpe Close | London | | W10 5XL |
| European Senior Citizens Parliament | 5 Ashburnham Road | London | | SW10 0PF |
| Flexible Respite | Yarrow Housing Ltd | 216 Goldhawk Road | London | W12 9NX |
| Full of Life | 77 Princedale Road | London | | W11 4NS |
| Gate Youth Club | c/o Kensington Temple | Kensington Park Road | London | W11 3BY |
| Glory of the Lord Choir | Canalside House Office 2 | | London | W10 5AA |
| Gloucester Court Reminiscence Group | c/o 42 St Lawrence Terrace | London | | W10 5ST |
| Hand in Hand | St Francis of Assisi Church | Pottery Lane | London | W11 4QN |
| Homeshare | 155a Kings Road | | London | SW3 5TX |
| Hornimans Adventure Playground | c/o Kensal Community Centre | 1 Bosworth Road | London | W10 5EB |
| Ilys Booker Under 5's Centre | Lower Clarendon Walk | Lancaster West Estate | London | W11 |
| Immanuel Youth Club | Immanuel Church | 212 Latymer Road | London | W10 6QY |
| Independent Care Services (ICS) | 14-18 Nevern Road | London | | SW5 9PH |
| India Welfare Society | 32 Acklington Drive | Colindale | London | NW9 5WN |
| Inkerman Housing Association | 14-18 Nevern Road | London | | SW5 9PH |

LIST OF ORGANISATIONS TO WHOM SURVEY WAS SENT

| | | | | |
|--|----------------------------------|----------------------|--------------------|----------|
| Inspire Schools Project | 116 Bramley Road | London | | W10 6SU |
| K & C Forum for the Mental Health Service Users | 7 Thorpe Close | London | | W10 5XL |
| Kensington and Chelsea Macular Disease Society | 52, Kingston House | East Princes Gate | London | SW7 1LP |
| Kensington and Chelsea Shopper (KCCT) | 240 Acklam Road | London | | W10 5YX |
| KIDS (Kensington & Chelsea) | Notting Hill Methodist Church | 240 Lancaster Road | London | W11 4AH |
| Kongolese Centre for Information & Advice | Beauchamp Lodge | 453 Harrow Road | London | W10 4RG |
| Kurdish Exile Association | 2 Thorpe Close | London | | W10 5XL |
| Latin American Community Association | 75 Southern Row | London | | W10 5AL |
| Latymer Christian Centre | 116 - 118 Bramley Road | North Kensington | London | W10 6SU |
| Lebanese Muslim League | Freston Road | London | | W10 6TY |
| London Care Connections (formerly KC Carers) | Methodist Church | 155a Kings Road | London | SW3 5TX |
| Longridge Road Under 8s Centre | Basement | 46-48 Longridge Road | London | SW5 9SJ |
| Look Ahead Housing Association | 1 Derry Street | London | | W8 5HY |
| Lymphoedema Support Network (LSN) | St. Luke's Crypt | Sydney Street | London | SW3 6NH |
| Many Hands | Units 2 and 3 | 10 Acklam Road | London | W10 5QZ |
| Meanwhile Gardens Community Association | 156-158 Kensal Road | | London | W10 5BN |
| Migrant and Refugee Communities Forum | 2 Thorpe Close | London | | W10 5XL |
| MIND - Kensington and Chelsea | 7 Thorpe Close | London | | W10 5XL |
| Muslim Cultural Heritage Centre Trust | 244 Acklam Road | London | | W10 5YG |
| Nari Shanghatee Asian Women's Association | 49 Sheffield Terrace | London | | W8 7NB |
| North and North West London Vietnamese Assoc | 58b Bulwer Street | London | | W12 8AP |
| North Kensington Law Centre | 74 Golborne Road | London | | W10 5PS |
| North Kensington Womens Aid | P O Box 14231 | London | | W10 5GP |
| Notting Hill Methodist Church | 240 Lancaster Road | London | | W11 4AH |
| Octavia Housing and Care | Quest Centre | 85 Clarendon Road | London | W11 4XQ |
| Octavia Housing and Care | Kensington Day Centre | Convent Gardens | Kensington Park Rd | W11 1NJ |
| Opendoor Housing Trust | Open Door Community Support Team | Apex Court | 1 Woodger Road | W12 8NW |
| Organisation for the Advancement of African Women (ORGAAW) | Canalside House | 383 Ladbroke Grove | London | W10 5AA |
| Pae-Ben Women Association | 59 Westfield Close | London | | SW10 0RQ |
| Pepper Pot Day Centre | 1A Thorpe Close | Ladbroke Grove | London | W10 5XL |
| Polish Women's Benevolent Association | 16 Warwick Road | London | | SW5 9UD |
| Positive Youth | 51B Philbeach Gardens | London | | SW5 9EB |
| Refugee Advice Centre | 240 - 250 Ferndale Road | London | | SW5 9NR |

LIST OF ORGANISATIONS TO WHOM SURVEY WAS SENT

| | | | | |
|--|-----------------------------------|--------------------------------|---------------------|----------|
| Refugee Training/Employment Project | Kensington and Chelsea College | Hortensia Road | London | SW10 0QS |
| Riverpoint | 160 Conningham Road | London | | W12 8BY |
| Serbian Community Centre | 89 Lancaster Road | London | | W11 1QQ |
| Seventh Feathers Youth Club | North Kensington Community Centre | 1 Webb Close, off Dalgarno Way | London | W10 5QB |
| Sickle Cell Society | 54 Station Road | London | | NW10 4UA |
| Sixty Plus | 1 Thorpe Close | London | | W10 5XL |
| Somali Mothers and Children's Organisation | 7 Thorpe Close | London | | W10 5XL |
| Somali Supplementary School and Culture | 2 Thorpe Close | London | | W10 5XL |
| Somali Welfare Association | Kensington and Chelsea | Office 1 Canalside House | 383 Ladbrooke Grove | W10 5AA |
| Spanish Youth Service | 116 Bramley Road | London | | W10 6SU |
| Special Impairment Team | Room G29 Social Services | Kensington Town Hall | | W8 7NX |
| St Cuthberts Centre | The Philbeach Hall | London | | SW5 9EB |
| St Mary Abbots Carer and Toddler Group | Vicarage Gate | London | | W8 4HN |
| St Mungo Association (Head Office) | Atlantic House | London | | W14 0DJ |
| Sunday School of St Sava | 89 Lancaster Road | London | | W11 1QQ |
| Talking Newspaper (Kensington and Chelsea) | Central Library | London | | W8 7RX |
| Terrence Higgins Trust | Lighthouse West London | 111-117 Lancaster Rd | London | W11 1QT |
| The Insight Group | 105 Judge Street | London | | WC1 9NE |
| The Space KC | 4 Hogarth Road | London | | SW5 OPT |
| U Can Do I.T. | Highfield House | 4 Woodfall Street | London | SW3 4DJ |
| Warwick Pre-School | 76-78 Warwick Gardens | London | | W14 8PR |
| West London Action for Children | Ashburnham Community Centre | 69 Tetcott Road | London | SW10 0SB |
| West London Kensington Moroccan Widadia | Widadia Com Ass | 2 Thorpe Close | London | W10 5XL |
| Westminster Pastoral Foundation | 22 Kensington Square | London | | W8 5HN |
| Women's Trust | St Lukes Crypt | Sydney Street | London | SW3 6NH |
| Worlds End Under 5's Centre | 18 Blantyre Street | London | | SW10 0HE |