

Digital Inclusion Survey

The Digital Services for Patients and the Public Programme recognises that about 7% of the population in Wales are digitally excluded, therefore its Patient's and Public Assurance Group wanted to use existing organisations such as Llais Cymru, NHS Wales, Digital Communities Wales and other third sector organisations to capture information; with the aim of informing people on how they can get help in their communities to obtain and use digital devices, including accessing the NHS Wales App.

This survey will support the programme to:

- Understand the needs of patients and the public to become digitally included;
- Inform support programmes and schemes to aid their access to digital health services, where possible;
- Get the information to individuals that is required to access the support needed.

Disclaimer: This information will only be used by Digital Services for Patients and Public program, to inform action plans to support you accessing digital services. It will only be used for this purpose and **NOT** to identify you or to share it with third party and/marketing parties.

All questions are voluntary, however it would help us if you can answer as many questions as possible.

This survey will take approximately 7 to 10 mins to complete.

Please return this Survey to an NHS Reception desk (E.g., GP Practice, Hospital reception), so it can be internally mailed to:

Document Scanning Team
Primary Care Services,
NWSSP
Cwmbran House
Mamhilad Park Estate,
Mamhilad,
Pontypool
NP4 0XS

Patients and Public Survey

Who are you?

Please select your County.

This will help the programme and partner organisations to identify where further support may be required.

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> Isle of Anglesey (Ynys Môn) | <input type="checkbox"/> Gwynedd | <input type="checkbox"/> Conwy | <input type="checkbox"/> Denbighshire (Sir Ddinbych) |
| <input type="checkbox"/> Flintshire (Sir y Fflint) | <input type="checkbox"/> Wrexham (Wrecsam) | <input type="checkbox"/> Ceredigion | <input type="checkbox"/> Powys |
| <input type="checkbox"/> Pembrokeshire (Sir Benfro) | <input type="checkbox"/> Swansea (Abertawe) | <input type="checkbox"/> Carmarthenshire (Sir Gaerfyrddin) | |
| <input type="checkbox"/> Neath Port Talbot (Castell-nedd Port Talbot) | <input type="checkbox"/> Bridgend (Pen-y-bont ar Ogwr) | | |
| <input type="checkbox"/> Vale of Glamorgan (Bro Morgannwg) | <input type="checkbox"/> Rhondda Cynon Taff | <input type="checkbox"/> Cardiff (Caerdydd) | |
| <input type="checkbox"/> Merthyr Tydfil (Merthyr Tudful) | <input type="checkbox"/> Caerphilly (Caerffili) | <input type="checkbox"/> Newport (Casnewydd) | |
| <input type="checkbox"/> Torfaen (Tor-faen) | <input type="checkbox"/> Blaenau Gwent | <input type="checkbox"/> Monmouthshire (Sir Fynwy) | |

Please enter at least the first part of your Postcode. (E.g., CF14, CH4)

This will help the programme and partner organisations to identify where, more accurately, further support may be required. No question is mandatory, and you may choose not to answer it, by leaving it blank.

Please enter your Postcode: _____

The following questions are in line the **Equality Act 2010**, to support a better understanding of how individuals under the protected characteristics, may experience digital exclusion. No question is mandatory, and you may choose not to answer by selecting 'Prefer not to say'.

What is your age group?

- | | | | | |
|-----------------------------------|-----------------------------------|-----------------------------------|-----------------------------------|--|
| <input type="checkbox"/> 12 to 14 | <input type="checkbox"/> 30 to 34 | <input type="checkbox"/> 50 to 54 | <input type="checkbox"/> 70 to 74 | <input type="checkbox"/> 90 and over |
| <input type="checkbox"/> 15 to 19 | <input type="checkbox"/> 35 to 39 | <input type="checkbox"/> 55 to 59 | <input type="checkbox"/> 75 to 79 | <input type="checkbox"/> Prefer not to say |
| <input type="checkbox"/> 20 to 24 | <input type="checkbox"/> 40 to 44 | <input type="checkbox"/> 60 to 64 | <input type="checkbox"/> 80 to 84 | |
| <input type="checkbox"/> 25 to 29 | <input type="checkbox"/> 45 to 49 | <input type="checkbox"/> 65 to 69 | <input type="checkbox"/> 85 to 89 | |

Do you consider yourself a disabled person due to the barriers you face?

- Yes No Prefer not to say

If yes, how does it affect you?

- Difficult speaking or communicating
- Hearing Loss – mild or moderate
- Hearing Loss – Severe or profound
- Learning disability
- Mental Health Problems
- Problems walking and getting around
- Visual impairment- Severely Sight Impaired/Bind
- Visual impairment- Sight impaired/Partially Sighted
- Other: _____

What is your sex?

This question refers to the sex assigned to you at birth.

- Male Female Prefer not to say

Is the gender you identify with the same as your sex registered at birth?

- Yes No Prefer not to say

If not, what is your gender identity? _____

How would you describe your national identity?

- Welsh English Scottish Northern Irish Prefer not to say
 Other: _____

What is your ethnic group?

Please tick your ethnic group and specify it (e.g., White - Welsh, English, Scottish; White and Black Caribbean; White and Asian)

- White : _____
 Mixed and Multiple ethnic Background: _____
 Asian, Asian Welsh or Asian British: _____
 Black, Black Welsh, Black British: _____
 Arab: _____
 Any other ethnic group: _____
 Prefer not to say

What is your religion?

- No religion Christian (all denominations) Buddhist Hindu Jewish
 Muslim Sikh Prefer not to say Any other religion: _____

Patients and Public Survey

Internet and Infrastructure access

Do you have consistent and reliable access to the Internet at home?

- Yes
- No

If not, do you have consistent and reliable access to the Internet outside of your home (e.g., relative's house, library, etc.)?

- Yes
- No

Do you have consistent and reliable access to a personal device that can connect to the internet? (e.g., Phone, tablet, computer)?

- Yes
- No

If not, do you have consistent and reliable access to a device, outside of your home, that can connect to the internet? (e.g., relative's house, library, etc.)

- Yes
- No

Do you use any specialist software or equipment to help you use the internet or mobile apps?

- Yes

If yes, what specialist software or equipment do you use to help you use the internet or mobile apps? (e.g., screen reader, large font, dictation software, switches) _____

- No

Are you able to access the internet as much as you would like? (e.g., Cost, absence of devices, signal issues) ?

- Yes
- No

If not, what are the main barriers, if any, to use the internet more?

- Cost
- Confidence
- My impairment stops me
- Privacy
- Device's availability
- Technology knowledge
- Website or application difficult to use or inaccessible
- Poor Internet speeds
- Other: _____

Patients and Public Survey

Digital Literacy (1)

On a scale of 1 to 5, where 1 would be 'Not confident at all' and 5 'Very Confident', please score your skills and confidence on the following statements:

How confident do I generally feel using the internet on my own.

1 2 3 4 5

I am able to turn on the device and enter any account login information, as required.

1 2 3 4 5

I am able to use the available controls on my device (e.g., mouse, Keyboard, touchscreen, trackpad)

1 2 3 4 5

I am able to use the different settings on my device to make it user to use (e.g., adjust font size, volume settings, brightness of screen, voice activation or screen readers)

1 2 3 4 5

I am able to find and open different applications/programmes/platforms on my devices (e.g. opening a web browser, messaging applications)

1 2 3 4 5

I am able to set up a connection to a Wi-Fi network on my devices (e.g. when at home, work, out in public or visiting family and friends)

1 2 3 4 5

I am able to open an Internet browser to find and use websites (e.g. Safari, Google Chrome, Mozilla Firefox, Internet Explorer, Microsoft Edge)

1 2 3 4 5

I am able to set up a new account to use a service online (e.g. online shopping, paying council tax, joining Facebook).

1 2 3 4 5

I am able to update and change my password when prompted to do so.

1 2 3 4 5

I am able to download an App on my smart phone, tablet or Smart device.

1 2 3 4 5

I'm confident that I know how to keep my login information and passwords secure.

1 2 3 4 5

Patients and Public Survey

Digital Literacy (2)

Please rate your ability to complete the following digital activities, where:

- 1- Can't Do/Don't know what it is 2- Would need help to do 3- Could do with Difficulty
4- Could Do 5 Expert (could teach others)

Send an email.

- 1 2 3 4 5

Delete spam emails

- 1 2 3 4 5

Find things using a search engine such as Google

- 1 2 3 4 5

Watch a video on YouTube or Iplayer

- 1 2 3 4 5

Fill out an application form or buy something online

- 1 2 3 4 5

Download and use a mobile app

- 1 2 3 4 5

Evaluate whether a website is safe/can be trusted

- 1 2 3 4 5

Order a prescription medication online

- 1 2 3 4 5

Request a medical appointment

- 1 2 3 4 5

Use Online banking to send money to someone

- 1 2 3 4 5

Upload photos to Facebook/Twitter

- 1 2 3 4 5

Patients and Public Survey

NHS Wales App

Are you registered at a GP Practice in Wales?

NHS Wales app is only available to those who are registered with a GP Practice in Wales

Yes No

Have you used the NHS Wales app yet?

Yes No

Do you need any support using the NHS Wales App/Website?

Or if you haven't used the NHS Wales App/Website, based on prior experiences using apps and online services, would you need any support to be able to use the NHS Wales App/ NHS Wales Website?

Yes

If yes, what Support would you need to be able to use the NHS Wales App/ NHs Wales Website?

- Access to reliable and consistent internet
- Access to a device
- Support on downloading the app
- Support on accessing the Website
- Support on navigating the App/Website
- Don't/Wouldn't require any support accessing the NHS Wales App/Website
- Other (Specify)_____

No

If you would like to receive further information about supporting yourself in accessing digital services, please provide your email address below.

Disclaimer: This information will only be used by Digital Services for Patients and Public program, to provide you with the information to access the help you need to digital services. It will only be used for this purpose and **NOT** to identify you or to share it with third party and/marketing parties.

If you don't want, or are unable, to leave your email address but still want to access support on getting online please visit the following websites:

Skills courses:

<https://www.learnmyway.com/>

<https://digital.wings.uk.barclays/our-digital-courses/>

Find help nearby:

<https://www.gov.wales/how-help-someone-you-know-get-online>

<https://www.onlinecentresnetwork.org/ournetwork/find-centre#/map>

Help with getting connected:

<https://www.goodthingsfoundation.org/data-poverty-lab/supporting-people-with-data-connectivity-broadband-and-mobile-data/>

To access support on using the NHS Wales App, please visit this page:

<https://apphelp.nhs.wales/>

Email Address: _____

