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| **Help us to support you** | |
| Maghull (Parkhaven) Practice is committed to ensuring that the services we provide are accessible. By completing this form you will help us measure how effectively we reach all sections of the community we serve.  Answer as much or as little as want. Whatever information you give, we will not be able to identify you as an individual, so your identity is safe. Information you provide simply goes towards providing an overall profile of the ‘type’ of people that have responded to our engagement activity so we can ensure that we are considering the views of all our community/ patients/ service users and wider stakeholders.  **Thank you for your time** | |
| **Please enter the first part of your Postcode** (ie: the first 3 or 4 characters) | **Are you...**  Male  Female |
| **What is your age?**       years |
| **Disability: Do you have any of the following?**  Physical Impairment  Visual Impairment  Learning Difficulty  Hearing Impairment / Deaf  Mental Health/Mental distress  Long term illness that affects your daily activity  Other (please specify) | |
| **Do you consider yourself to be ‘disabled’? ...please read the following statement...**  If you have ticked any of the boxes above, or you have cancer, diabetes or if you are HIV positive, this would be classed as ‘disability’ under the legislation. Do you consider yourself to be ‘disabled’?  Yes  No | |
| **Which of these options best describes your ethnic background?**  Please select one box for each (the options are listed alphabetically) | |
| **Ethnicity – do you identify as...**  **Asian:**  Bangladeshi  Indian  Pakistani  Other Asian background (please specify if you wish)  **Black:**  African  Caribbean  Other Black background (please specify if you wish)  **Chinese:**  Chinese  Other Chinese background (please specify if you wish)  **PTO** | |
| **Mixed Ethnic Background:**  Asian & White  Black African & White  Black Caribbean & White  Other Mixed background (please specify if you wish)  **White:**  British  English  Irish  Scottish  Welsh Polish  Latvian  Gypsy / Traveller  Other White background (please specify if you wish) | |
| **Thank you**. The following questions are a little more personal and you can choose to stop here if you wish, however it would be really helpful if you would consent to complete them  **PLEASE NOTE: we have no way of identifying you individually, so answers are anonymous** | |
| **Which of these options best describes your situation?**  Full time work  Part time work  Self Employed  Government Scheme  Full time education  Unemployed but available for work  Fully retired  Unable to work due to illness/disability  Looking after the home/family  Other (please specify) | |
| **Do you have a religion or belief?**  Yes  No  If yes, please select...  Buddhist  Christian  Hindu  Jewish  Muslim  Sikh  Other (please specify if you wish) | |
| **How would you describe your sexual orientation?**  Heterosexual  Gay  Lesbian  Bisexual | |
| **Do you currently live in the gender you were given at birth?**  Yes | |