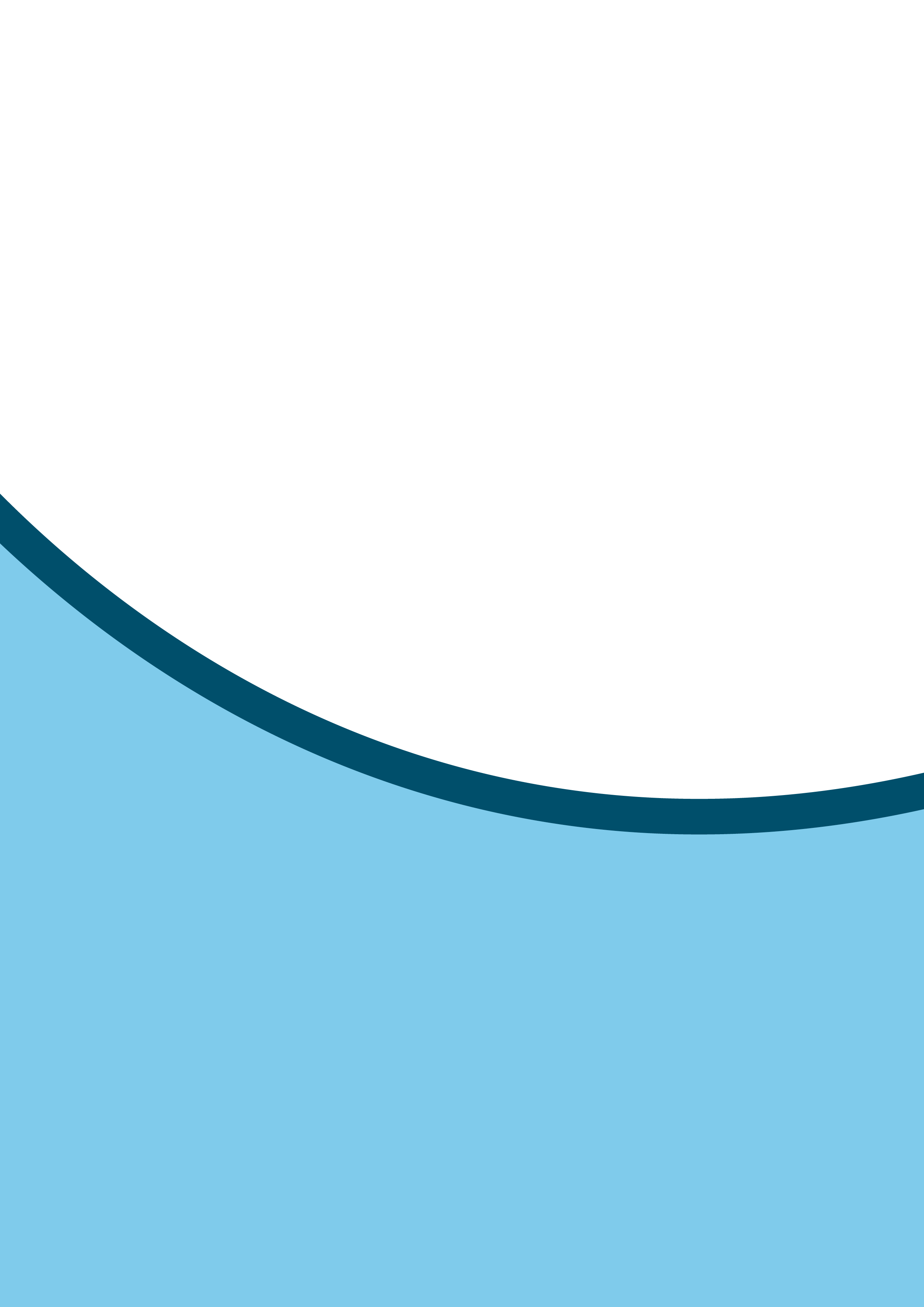
|  |  |
| --- | --- |
| Cost of living  Template survey and guidance | |
| Healthwatch-logo_RGB.png |



Contents

Contents 1

About this guidance 2

Background 2

Template survey 2

How to undertake engagement 3

Sharing your findings 5

Taking your insight forward 6

Template survey 9

About this guidance

In response to demand from Healthwatch, this guidance provides:

* Ideas of how to broach cost of living issues in general engagement that you are doing on health and social care
* A template survey to find local views/experiences
* Ideas of how to take your engagement and survey findings forward with commissioners and survey providers

We also explain why sharing your findings with Healthwatch England is important and how you can do so.

Background

The rising cost of living is an issue that is likely to dominate the national policy debate for the next 18 months. We want to help decision-makers understand the impact on people's physical and mental health. We are also committed to helping you to develop expertise in this area so you can support your communities to speak about the impacts of the cost of living crisis.

We are conducting regular polling of a representative sample of people via a polling company on the cost of living crisis. The data we gather will inform a series of long-read blogs on our website.

Template survey

The questions in the survey template at the end of this document are based on the questions in our poll. This template is a guide for you to adapt according to the needs of your local area, your interests and your resources.

As such, you can either use the survey as is or:

* Add questions
* Remove questions
* Change the number of options for multichoice questions (we have provided an extensive list; you may want to reduce this according to your local needs).
* Change the wording of questions

We recommend keeping the suggested demographic questions as this will help collate data – please feel free to add more demographic questions should you see fit. It will be essential to analyse your findings by demographics to find out which groups are most affected.

If you have a SmartSurvey licence in our Enterprise Plus account, we’ve shared a template survey with you.

You can find it in your “My Survey” list. You’ll need to copy the survey to customise it to your needs. To copy the survey, click on the three dots under Options and select “Create a copy” from the dropdown menu. You can then customise it.

Research guidance and e-learning that you might find useful:

[E-learning on using Excel to analyse your data](https://network.healthwatch.co.uk/e-learning/2022-11-02/how-to-use-microsoft-excel)

[E-learning on using the analysis tools in SmartSurvey](https://network.healthwatch.co.uk/guidance/2022-07-27/how-to-use-analysis-tools-smart-survey)

[Guidance on developing a survey, including the question bank](https://network.healthwatch.co.uk/guidance/2022-03-21/how-to-develop-survey)

[Guidance on using demographic data](https://network.healthwatch.co.uk/guidance/2022-04-06/using-demographic-data)

Should you need further guidance in developing your cost of living research, or analysing your data, please get in touch with the Research Team at: research@healthwatch.co.uk.

How to undertake engagement

General engagement (impromptu one-to-one conversations)

You might find it helpful to broach cost of living issues when you are undertaking general engagement with people on their experience of health and care services. This will lessen the risk of people simply telling you what they’ve heard in the media instead of their own reflections and experience.

Ideally, use a mix of open and closed questions. Start the conversation with "What matters to you?" (Prompts: what's most important, what worries you, your plans).

Let the person speak without interruption until they come to a natural end. At this point, bring in open questions about specific things they've mentioned. It may help to begin a question with Tell, Explain, Describe. This will allow you to understand what people are feeling at that moment. A relaxed conversation is more likely to uncover what people think than a list of questions.

At some point, ask if you can record what the person is telling you. Use your judgement as to when to do this. You may want to wait to do it as it's off-putting and can spoil the flow. You are also filtering the information, which leaves a risk of misinterpreting what is said. However, it is powerful to write what people tell you in their own words when the person has invested time into talking to you.

Group engagement (focus groups, workshops with stakeholder groups)

A group discussion is suitable for generating a deeper conversation on the topic. This is because individuals will share different experiences that prompt further exploration.

Start the conversation as you would with a one-to-one exchange, "what matters to you?" (Prompts: what's most important, what worries you, your plans). Then you can explore in depth the following issues about people’s circumstances:

Personal circumstances

Possible prompts include:

* People’s general health and wellbeing
* Their physical and mental health
* Whether anything has changed that affects their finances
* Are they a carer or being cared for?
* Do they have family and friends close by?

Economic circumstances

Possible prompts include:

* The condition of their geographical community
* Whether they have enough money if something happens or if they would struggle
* Employment and volunteering opportunities
* Access to services, housing, transport, and internet access

Societal circumstances

Possible prompts include:

* A community of interest
* Protected characteristic
* Feelings of power/powerlessness
* To be able to have or make choices

Activities you could do

Example one

Draw a life-size shape of a person on a large sheet of paper. Ask the group to imagine that the person on the paper is someone in their community impacted by the cost of living crisis. Get the group to draw and write about the person on the paper, of what they are going through.

For example:

* **Hat, gloves, scarf** - they are cold because they cannot afford to put the heating on.
* **Sickness, bad skin and nails** - they are hungry, eating poor quality food, and have food poisoning because they cannot afford fresh food or cannot afford to run the fridge or freezer.

Example two

You can follow from example one or use it on its own. Divide the group into three and give each group a flipchart with one heading from the list above (personal, financial, societal). Use the groups to write their thoughts on each, swapping the sheets around.

Invite the groups to feedback for further discussion.

Remember to use the prompts to unpick and clarify what people are saying.

Asking the group to record their answers provides more authentic evidence, but this depends on how much or how well they write. You can throw in prompts and sense-check what they are telling you. This minimises the risk of misinterpretation.

However, you need to be clear on who said what, and the dominant person may lead the group. Careful facilitation is necessary to keep the group on the topic. They may only open up if you have an existing relationship with the group. In this case, consider asking a stakeholder they trust to lead the facilitation.

**Top tip** - Have a general understanding of your discussion guide questions in your head but don't ask as a list of questions; treat them more as prompts for further discussion.

Sharing your findings

Please share your survey or engagement findings with us as soon as possible. We don’t often hear about the cost of living crisis, despite it becoming a pressing issue. We want to hear back from you on this to feedback to policymakers.

Please analyse your data before sharing your findings with us. Or, if you have access to a licence in the Healthwatch England SmartSurvey account, you can also share your results this way. In the survey introduction, you'll need to tell participants that you'll share the data with Healthwatch England.

To share the data within SmartSurvey, you need to:

* Select “My surveys” from the toolbar
* Select the survey to share with us
* Click on the three dots under “Options” and select permissions. This will bring up a list of users to the left. You'll need to highlight the following accounts:
  + Sue Edwards - licence no 366748
  + Will Howard – licence no 367325
* To the right, there is a list of access options. Click "Results"
* Then select "Apply changes."

Please ensure all identifiable data is removed and email [research@healthwatch.co.uk](mailto:research@healthwatch.co.uk) to let us know you have shared the survey results.

Taking your insight forward

Gathering your insight

You may have collected insight in a variety of ways:

* Targeted collection - for example, if the Health and Wellbeing Boards ask for insight around a specific issue or service
* Solicited insight – when you go out to ask people about the impact of the cost of living crisis or conduct a survey
* Unsolicited insight – when people spontaneously tell you about the effect of the cost of living crisis. For example, when asking about a local service, they tell you about financial issues affecting them.

No one form of insight is better than others, and you may want to use a mixture of information to make your case. You may want to use your insight for different audiences, so remember the COUNT principle: Collect Once, Use Numerous Times.

Understanding your insight

Before using your insight with partners, you need to be sure that you have a view of what it is telling you and what this means for partners. You should consider how best to make it useful for partners at this stage.

Some things to think about:

* Can you identify any issues that disproportionately affect specific groups – directly or indirectly?
* Is the issue raised ‘typical’ or a ‘worst case scenario’?
* Is this something services will already be aware of, or is it new?
* Does your insight back up what other people are hearing/saying?

Choosing where to influence

The cost of living crisis impacts organisations as well as individuals, and public sector organisations will not be able to rely on substantial financial reserves. Any proposals that depend on significant funding may be more difficult to take forward, but many issues you would want to raise may be significant as part of business as usual.

Some things to consider:

* Are organisations already looking at issues that come up in your insight? For example, if people tell you about difficulties getting to appointments, are organisations raising the issue of missed appointments?
* What works have organisations already planned to respond to the cost of living crisis, and what value can you add?
* Are people telling you things that might give advance notice of difficulties ahead; for example, concerns about mental health and increased smoking?
* Can you influence future planning taking into account what people are telling you? For example, improving access to preventive services and increasing access to early intervention for mental health.
* Can you collaborate with others who have similar/complementary insight?
* Are there opportunities for better communication? For example, is support available but not widely known?

Planning your influence

Although producing a comprehensive report may be valuable, it may be best to tailor your insight for different audiences and base your approach on that. Although some discussion will take place in public settings, it's likely that a lot of work is taking place behind the scenes. If you don't already know, find out – that may be where you have the most impact.

You may want to use your place on the Health and Wellbeing Board to tease out what other organisations are doing if you don't already know. It may also be a valuable opportunity to build an alliance if there isn't one already.

Things to consider:

* Are you bringing new information or reiterating what is already known? (What value are you adding?)
* Are you providing robust recommendations? (Ideally developed with partners)
* Are you making links between organisational priorities and your findings where you can? (Is there a best time to present your findings and recommendations?)
* Can you present this in a positive way?

Follow-up

Organisations and services are dealing with a lot. They are dealing with winter pressures as well as the cost of living. You may not get your message over the first time, so be ready to raise your findings at appropriate times to keep this on the agenda.

Template survey

1. **How would you describe your current financial situation? (select one answer)**

* Very comfortable (I have more than enough money for living expenses and a lot spare to save or spend on extras or leisure)
* Quite comfortable (I have enough money for living expenses and a little spare to save or spend on extras or leisure)
* Not very comfortable (I have just enough money for living expenses and little else)
* Not at all comfortable (I don’t have enough money for living expenses and sometimes or often run out of money)
* Prefer not to say
* Not known

1. In the past six months, would you say your financial situation has…? (select one answer)

* Got a lot better
* Got a little better
* Not changed at all
* Got a little worse
* Got a lot worse
* Prefer not to say
* Don’t know

1. **Thinking about your health in the last two months, how has your mental and physical health been? (when we talk about mental health, we mean low mood, stress, anxiety and inability to concentrate as well as more severe mental health problems) [Select only one option per row]**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Got a lot worse | Got a bit worse | Not changed | Got a bit better | | Got a lot better | Don’t know/ Prefer not to say |
| My physical health has… |  |  |  | |  |  |  |
| My mental health has… |  |  |  | |  |  |  |

1. Have you made, or are you anticipating making, any of the following changes as a result of the current rising cost of living? [Select one option per row]

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | I have made this change | I anticipate making this change | Not applicable | Don’t know/prefer not to say |
| Not travelling to see friends or family |  |  |  |  |
| Putting on more clothes than usual to stay warm |  |  |  |  |
| Not turning on the heating when I usually would |  |  |  |  |
| Using a local warm hub to avoid putting on the heating at home |  |  |  |  |
| Not being able to get to work because of the cost of fuel or public transport |  |  |  |  |
| Cutting down or stopping social or entertainment expenditure |  |  |  |  |
| Going to bed earlier than I usually would to save energy costs |  |  |  |  |
| Turning off or avoiding using essential appliances to save energy costs (e.g. not using the oven) |  |  |  |  |
| Cancelling or moving to a cheaper broadband or mobile contract |  |  |  |  |
| Reducing how much food I eat and buy |  |  |  |  |
| Using a food bank |  |  |  |  |
| Going into debt for the first time or further into debt |  |  |  |  |
| Buying less healthy food than I would usually |  |  |  |  |
| Cutting down or stopping things that make me stay fit and healthy (e.g. cancelled gym membership) |  |  |  |  |
| Needing to find cheaper accommodation because I can’t afford my rent or mortgage |  |  |  |  |

1. Have you made or are you anticipating making any of the following changes to your health and social care due to the rising cost of living? [Select one option per row]

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | I have made this change | I anticipate making this change | Not applicable | Don’t know/prefer not to say |
| Avoiding booking an NHS appointment because I can’t afford the associated costs (e.g. access to the internet or the cost of the phone call) |  |  |  |  |
| Avoiding attending an NHS appointment because I can’t afford to travel to the appointment |  |  |  |  |
| Avoiding seeking help from the NHS because I can’t afford to take time off work |  |  |  |  |
| Avoiding buying over-the-counter medication that I usually rely on |  |  |  |  |
| Avoiding taking one or more items on an NHS prescription because of the cost |  |  |  |  |
| Avoiding going to the dentist because of the cost of check-ups or treatment |  |  |  |  |
| Cutting down on the use of medical equipment at home because of the running costs (e.g. ventilators or dialysis) |  |  |  |  |
| Cutting down or stopping support from services that I pay privately for, such as physiotherapy, earwax removal or counselling |  |  |  |  |
| Stopping a special diet needed for a medical condition |  |  |  |  |
| Changing, cutting down on or stopping support from paid for carers (e.g. people coming into my home to help me with preparing meals or washing or dressing) |  |  |  |  |

1. Thinking specifically about the changes you have already made, what impact have they had on the following areas of your life? Choose the answer most applicable to you. [Select one option per row]

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Very negative impact | Negative impact | Neither positive nor negative impact | Quite a positive impact | Very positive impact | Not applicable | Don’t know/ Prefer not to say |
| Your ability to work (e.g. your fitness levels) |  |  |  |  |  |  |  |
| Your ability to care for others |  |  |  |  |  |  |  |
| Your mental health (e.g. your level of stress and anxiety) |  |  |  |  |  |  |  |
| Your ability to manage an existing long-term condition (e.g. diabetes) |  |  |  |  |  |  |  |
| Any feelings of physical pain |  |  |  |  |  |  |  |
| Isolation from friends and family (e.g., how often you see friends or family) |  |  |  |  |  |  |  |

1. We also want to know about things that are impacting you other than the changes you have made. How much do the statements below apply to you? [Select one option per row]

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Not at all | A little | Somewhat | A lot | Greatly | Not applicable | Don’t know/ prefer not to say |
| Hearing about the rising cost of living is causing me to worry/feel anxious more often than before |  |  |  |  |  |  |  |
| It has become harder for me to get to medical appointments (e.g. due to cuts in bus routes, lack of community transport etc.) |  |  |  |  |  |  |  |
| I pay for or contribute to paying for social care support for myself, and the cost has increased. |  |  |  |  |  |  |  |
| I pay for, or contribute to paying for, social care support for someone else and the cost has increased. |  |  |  |  |  |  |  |

1. Do you have any additional comments about the cost of living crisis and its impacts on your life and health? (Free text box)

Demographic Questions

1. What is your gender? [select one answer only]

* Woman
* Man
* Non-binary
* Prefer to self-describe [please specify]
* Prefer not to say
* Not known

1. Please tell us which age category you fall into: [select one answer only]

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

1. How many dependent children (18 and under) live in your home? [select one answer only]

* None
* 1-2
* 3-4
* More than 4
* Prefer not to say

1. Besides you, what other adults (18 or over) live in your home? [select one answer only]

* I’m the only adult (18 or over)
* My partner only
* I live with other adults who are not related to me and who are not my partner (e.g., co-tenants)
* I live with members of my family (e.g., parents, siblings, and other relatives)
* I live with my partner and other adults
* Prefer not to say
* Other (write-in)

1. From which of the following sources do you receive income? [Tick all that apply]

* Wages/salary
* Income from self-employment
* Disability benefits (e.g., Attendance Allowance or Personal Independence Payments)
* Means-tested benefits (e.g., Universal Credit, Tax Credits, Housing Benefit, Pension Credit)
* State retirement pension
* Other benefits
* Student loan
* Occupational/private pension
* Other (please specify)
* Prefer not to say

1. How would you describe your ethnicity? [select one answer only]

* White – British
* White – Irish
* White – Gypsy / Traveller / Irish traveller
* White – Other
* Asian or Asian British – Indian
* Asian or Asian British – Pakistani
* Asian or Asian British – Bangladeshi
* Asian or Asian British – Chinese
* Asian or Asian British – Other
* Black or Black British – Caribbean
* Black or Black British – African
* Black or Black British – Other
* Mixed / Multiple – White and Black Caribbean
* Mixed / Multiple – White and Black African
* Mixed / Multiple – White and Asian
* Mixed / Multiple – Other
* Arab
* Other ethnicity
* Prefer not to say

1. Do you consider yourself to be a carer, have a disability or a long-term health condition? [Please select all that apply]:

* Yes, I consider myself to be a carer
* Yes, I consider myself to have a disability
* Yes, I consider myself to have a long-term condition
* None of the above
* I’d prefer not to say

Healthwatch England

National Customer Service Centre

Citygate

Gallowgate

Newcastle upon Tyne

NE1 4PA

www.healthwatch.co.uk 

t: 03000 683 000

e: enquiries@healthwatch.co.uk

 @HealthwatchE

 Facebook.com/HealthwatchE