**Appendices**

1. **Example of participant information sheet**



**Are you receiving support from adult social care services?**

Healthwatch Bristol and Bristol City Council Adult Social Care would like to hear about your experiences of services you receive. **Your voice is very important to us and can help improve and plan future services**.

We would like to hear from a range of local voices, so you are invited to participate in two 1 hour 45 minute focus groups held online/via Zoom or in person on the **4th and 11th of May 2023** to discuss your experience of adult social care services.

The first focus group will involve talking about your experience of adult social care from your first contact with the service to your current experience.

The second focus group will involve you looking at proposed plans for different services including supported living, day opportunities, home care and other services. We would like to get your feedback on what you think a ‘good’ service looks like.

We will be giving all focus group participants £20 high street shopping vouchers for each focus group to acknowledge your time and work on this project. **All information shared by focus group participants will remain confidential and will be anonymised.**

Please let us know as soon as possible if you would like to get involved.

**Anna King, Engagement and Co-production Officer, Healthwatch Bristol 07821 860 517**

Anna@healthwatchbristol.co.uk

1. **Example of participant consent form**



**Adult Social Care Co-Production and Engagement Project**

**Informed consent form**

Thank you for agreeing to participate in a focus group discussion on the **10th of May 2023** organised by Healthwatch Bristol. The focus group will last 1 hour 45 minutes and we will be taking notes and audio recording the session. **All the information collected is confidential your feedback will be fully anonymised.** The aims of the project will be explained to you and you will have an opportunity to ask questions about the project.

**Consent forms**

**Consent form for the use of your data**

Please tick all appropriate boxes

|  |  |  |
| --- | --- | --- |
|   | **Yes**  | **No**  |
| I confirm that I have read and understood the participant information sheet for the project and have had the opportunity to ask questions.  |   |   |
| I understand that my participation is voluntary and that I am free to withdraw at any time without giving a reason. |   |   |
| I understand that all the information I provide will be treated in confidence and will be anonymised in any published reports. |   |   |
| I understand that I also have the right to change my mind about participating in the project for a short period after the project has concluded (within one week). |   |   |
| I agree to notes being taken/recording of the focus group about what I am saying as part of the project. |  |  |
| I agree to take part in the Adult Social Care Engagement and Co-Production project. |  |  |
| I agree to be contacted by the Project Officer, Anna King, by telephone after the focus group to follow up on my comments. |  |  |
| I understand that any personal information that can identify me, such as my name or where I live, will not be shared beyond the project team. |   |   |
| I give permission for the information that I provide to be archived and re-used.  |   |   |
| Name of Participant [IN CAPITALS]   Signature of Participant  Email of ParticipantTelephone number of ParticipantDateName of Project Officer [to be filled in by Project Officer]I confirm that all the information relating to this research was provided prior to consent  Signature of Project Officer Date  |

Consent form Version 1. 6.04.2023

1. **Focus group questions – experience of Adult Social Care**



**Questions developed from the co-production group meeting:**

**Adult Social Care experience focus group questions**

**(Focus Groups 1A, 2A, 3A)**

1. How were you referred to ASC? Were there any issues with that?
2. How was it for you when a social worker first contacted you? How was their response? Was the response of social workers timely?
3. Do you feel you have been offered a choice of care/were your choices taken in to account?
4. Have ASC services responded to your changing care needs?
5. How has it been for you in terms of Care Reviews and Care Reassessments?
6. Are you aware of who to contact and when in terms of your care needs?
7. Have you experience of Care Direct?
8. Do you feel like you get the support that you think you need?
9. What’s your experience of Direct Payments?
10. What things do you like about the support you get?
11. What could be better about the support you receive?
12. What are your future needs and support?
13. **Focus group questions – feedback on Adult Social Care services**

**Example of focus group questions – Focus group with people with physical and sensory impairment**

 **June 8th 2023**

We would like feedback on the following services:

* Direct Payment Support
* Advocacy

Questions:

1. What do you think a good service looks like?
2. What will enable you to have more choice over the care and support you receive?
3. What things do you like about the support you get?
4. What could be better about the support you receive?
5. Do you know what “self-advocacy” is and would you be interested in knowing more about it.
6. **Adult Social Care feedback – interview questions**





**Adult Social Care experience**

**Questions for participants – Chinese Community Wellbeing Society**



* 1. Can you please tell us about the Adult Social Care services you receive?
	2. How were you referred to Adult Social Care?

Were there any difficulties with that?

* 1. When a social worker first contacted you?

a. Was it quick or did it take a while after you were referred to Adult Social Care?

b. How did you find their response after they contacted you?

* 1. Do you feel the social worker understood your care needs?
	2. Do you feel the social worker offered you choices on how to meet your care needs?
	3. Do you feel your choices were taken into consideration?
	4. How did Adult Social Care services respond when, or if, your care needs changed?
	5. How has it been for you in terms of:
* Care Reviews
* Care Reassessments
	1. In terms of your care needs, are you aware of:
* *Who* to contact
* *When* to contact them
	1. Have you any experience of Care Direct? Please tell us about this.
	2. Have you any experience of Direct Payments? Please tell us about this.
	3. Do you feel you get the support that you think you need?
	4. What things do you like about the support you get?
	5. What could be better about the support you get?
	6. What are your thoughts about your future care needs and support?
	7. What three things are most important about the services you receive?
	8. What does a good service look like to you?

**Thank you very much for your feedback.**