



## Example letter to send out with LTC6 Questionnaire

### ***What is this survey about?***

This questionnaire is about your experience and understanding about the health care you received over the last 12 months

### ***Why should I complete the survey?***

Understanding your views is vital to help us improve our services for people with long term conditions.

### ***Who is carrying out the survey?***

The survey is being carried out by .....

### ***Your participation in this survey is voluntary***

If you choose not to take part in this survey; it will not affect the care and support you receive in any way. If you do not wish to take part, or do not want to answer a particular question, you do not have to give us a reason.

### ***Your answers will be treated in confidence***

Please do not give your name or address anywhere on the questionnaire. No information will be shared in a way that allows you to be identified.

### ***How to complete the survey***

There are 6 questions and will take about 5 or 10 minutes to complete.

### ***Questions or Help?***

If you need any help in answering the questionnaire, please call .....



## LTC 6 Template

Thinking about the last 12 months, when you received care and support for your condition(s)...

1. Did you discuss what was most important to *you* in managing your own health?

Not at all	
Rarely	
Some of the time	
Almost always	

2. Were you involved as much as you wanted to be in decisions about your care or treatment?

Not at all	
To some extent	
More often than not	
Almost always	

3. How would you describe the amount of information you receive to help you to manage your health?

I didn't receive any information	
I rarely received enough information	
I sometimes received enough information	
I always received enough information	

4. Have you had enough support from you health and social care team to help you manage your health?

I have had no support	
I have not had enough support	
I have sometimes felt supported	
I have always felt supported	

5. Do you think the support and care you receive is joined up and working for you?

Never	
Rarely	
Sometimes	
Always	

6. How confident are you that you can manage your own health?

Not at all confident	
Not too confident	
Somewhat confident	
Very confident	