

Insight Report

Patient Experience:

Latham House Medical Practice

June 2026



Executive Summary



Healthwatch Leicester and Leicestershire gathered feedback from 672 patients about their experiences of accessing and using services at Latham House Medical Practice.

People told us that while the quality of care is often positive once they are able to speak to a clinician, many face significant challenges accessing that care in the first place.

The most common issues raised were long waits for appointments, difficulties contacting the practice by phone and frustrations with the online triage system. While some people find digital services are working, others feel excluded or unable to use them.

Staff were consistently described as caring and doing their best in a pressured system. However, many patients feel the current model is not meeting demand.

Introduction

Latham House Medical Practice serves a large and growing population in Melton Mowbray and Asfordby. As a single GP practice supporting over 36,000 registered patients, understanding patient experience is essential to improving access, quality of care and ensuring services are responsive to local need.

Following our Enter and View visit in November 2021¹, where we made nine recommendations, Healthwatch has continued to gather patient feedback. The most common and consistent theme by far is access, including difficulties booking appointments, long waiting times and challenges navigating different routes into services. Other feedback includes issues with medication and prescriptions, the quality of care and treatment received and the kindness of staff.

This ongoing feedback is particularly important in the context of sustained pressure on primary care locally. With no second GP practice currently in place in Melton Mowbray, Latham House remains the sole provider for the town, meaning demand, capacity and access are closely linked. Understanding people's experience helps to identify where pressures are most acute and where improvements could make the greatest difference.

¹ [Latham House Enter & View visit November 2021](#)

Why we did the survey

We carried out this survey to build a clearer and more current picture of how people are experiencing GP access in Melton Mowbray. While we regularly hear feedback through ongoing engagement, we wanted to capture a broader range of voices in a structured way to understand:

- how easy or difficult people find it to get an appointment
- what barriers people are facing when trying to access care
- whether people are turning to alternative services when they cannot access their GP
- what impact access issues are having on people's health and wellbeing.

This evidence will support discussions about service improvement and help ensure that patient experience is central to future planning and decision-making.

What we did

Between January and February 2026, we carried out a survey for people living in Melton to understand their experiences of accessing GP services at Latham House.

- **672 responses received**
- Feedback reflects recent experiences, with **62%** of people having visited within the last 3 months, **17%** in the last 6 months, **11%** in the last year, **6%** within 2 years and **3%** over 2 years ago.

Who we heard from

- **99.5%** of people live in Melton
- **56%** were aged 55 or over
- **59%** live with a long-term condition
- **21%** reported having a disability
- **15%** identified as carers

This indicates strong engagement from people who are more likely to use GP services regularly.

Disclaimer

The findings in this report reflect the opinions of the individuals who took part in the survey and their experiences of accessing services. The sample is not representative of all people in Leicester and Leicestershire and therefore provides a snapshot of their views.

Percentages may not total 100% due to rounding.

Key findings

- **Accessing appointments is the biggest challenge**
Many people reported waiting several weeks or months for appointments, with limited availability and difficulty securing same-day care.
- **Telephone systems are a major barrier**
Patients experience long wait times, difficulty getting through and limited alternatives when calls are not answered.
- **Online systems work well for some but exclude others**
While some patients value convenience, others find the system difficult to use, restrictive, or inaccessible, particularly those without digital skills or access.
- **Staff are caring and committed**
Patients consistently describe clinicians and reception staff as helpful, supportive and doing their best in a pressured environment.
- **Delays and cancellations are affecting trust**
Repeated cancellations, long waits and lack of continuity leave patients feeling uncertain and frustrated.
- **People often seek help elsewhere when they cannot access GP services**
Difficulties getting appointments lead some patients to use urgent care, Emergency Departments or other services instead.



The highest rated services (receiving the best excellent and good ratings) were repeat prescription services (64%), quality of medical care and treatment (44%) and reception services (37%).

Telephone services (56%), face to face appointments (42%) and telephone appointments (39%) received the lowest satisfaction rate amongst patients.

Answer Choices	Excellent	Good	Neutral	Poor	Very poor	Not applicable/ Not used	Response Total
Telephone service to book appointments	4% 24	14% 89	15% 94	22% 142	35% 224	12% 75	648
Practice Opening hours	6% 40	30% 196	38% 246	15% 95	9% 60	1% 9	646
Reception Service	9% 61	28% 183	27% 177	18% 118	15% 97	2% 11	647
Repeat prescription service	23% 150	41% 264	14% 93	7% 42	5% 32	10% 65	646
Quality of medical care and treatment	11% 71	33% 215	26% 170	17% 112	11% 72	1% 6	646
Face to face appointments	12% 80	27% 173	16% 105	16% 101	26% 168	3% 19	646
Online appointments	5% 29	12% 74	20% 129	19% 121	19% 122	26% 168	643
Telephone appointments	5% 32	14% 89	23% 151	18% 118	20% 130	19% 123	643
Ease of accessing information (website, emails, SMS reminders)	8% 50	31% 200	28% 183	15% 99	14% 92	4% 24	648
						answered	649
						skipped	23

What Is working well

1. Positive care once accessed

Many people told us they receive good care when they are able to see or speak to a healthcare professional. People described clinicians as thorough, reassuring and responsive, particularly when care is urgent or follow-up is arranged.

“Phoned for emergency appointment for my son. Reception lady went away to find out the best course of action. Told to come to minor injuries and seen almost immediately. Fantastic caring nurse and seen the following day by another fantastic nurse. Efficient and excellent care and advice from start to finish.”

Female, 35-44 years old

“My GP is excellent. She is caring, listens and tries hard to work to a solution with you, not just telling you what should happen. However, you can't get an appointment with her for about 3 months.”

Male, 45-54 years old

“Just keep on doing the great work. I've been seeing the doctors for over a year with my medical issues and always got an appointment straight away. Very caring too.”

Female, 55-64 years old

“Prompt response of the doctors to my issue.”

Male, 35-44 years old

“I saw a locum. He was outstanding! Best experience I have had in years... Pro-active and as a result I had an X-ray and a dermatologist appointment within 48 hours.”

Female, 45-54 years old

2. Kind and supportive staff

Staff across the practice were frequently described as helpful, caring and working hard under pressure. Many people recognised the pressures staff are working under and expressed appreciation for their efforts.

“Staff always kind and helpful.”

Female, 35-44 years old

“The people on receptions or desks within the practice are fab. No matter what they always try to help you.”

Female, 25-34 years old

“I’ve always found reception take the time to listen and take in my concerns or worries.”

Female, 45–54 years old

“My son has a severe learning disability. Latham House staff are always excellent when dealing with him. They ensure he is seen quickly and in a way that suits him while still ensuring the best care.”

Female, 35–44 years old

“Everyone works super hard in difficult situations.”

Female, 55–64 years old

3. Digital services working for some people

Some patients reported positive experiences using online systems, particularly for routine tasks. Some also told us that online services can be convenient for tasks like ordering prescriptions and receiving updates.

“I find that the more information I share in the online form, the better outcome I receive. I do worry that my elderly parents may struggle with the technology in place but then again, there is also online booking when you attend Loughborough walk in, so I do think it’s important that everyone at least try and get used to this as it’s happening everywhere.”

Female, 45–54 years old

“Online prescription ordering is very easy to use.”

Female, 65+ years old

“I liked that I was receiving regular updates and results via text message.”

Female, 35–44 years old

“I like that my doctor gets back to me personally when I message on the app.”

Female, 45–54 years old

“If one uses the correct stream (online first for routine queries / appointment request, and phone for same-day issues) then it is excellent. They are doing their best to help those without digital skills but still need to try harder.”

Female, 55–64 years old

However, everyone did not share these positive experiences.

What needs to improve

1. Access to appointments

The most common issue raised was difficulty getting an appointment, with many people reporting long waits.

The last time you requested an urgent same-day appointment, what was the outcome?

Answer Choices		Response Percent	Response Total
1	I was offered a same day appointment at my GP practice with a doctor	7%	28
2	I was offered a same day appointment at my GP practice with a different professional	16%	67
3	I was offered a same day appointment elsewhere (such as at a nearby practice or healthcare hub)	4%	19
4	I was offered an appointment for another day	15%	65
5	I was signposted to an alternative service	22%	95
6	I was asked to call back later or the following day	8%	36
7	I was not offered an appointment or any of the alternatives listed above	28%	120
		Answered – 649	Skipped – 23

People described waiting weeks or months for routine appointments and difficulty accessing timely care when needed.

“Takes ages to get through on the phone. Lack of privacy/confidentiality when having blood tests. Attitude of some staff leaves a lot to be desired whereas others are lovely. Have to wait weeks for blood test and appointments with GP.”

Female, 65+ years old

“8 week wait for an appointment is absolutely unacceptable. Multiple times my appointment was cancelled on the day of but given an appointment 8 weeks later. 16 week wait is not acceptable.”

Female, 25–34 years old

“Appointment times to see a GP even a locum are shockingly long. Usually 6 weeks whenever I’ve tried. You get palmed off to other staff to cut wait times but sometimes you need to see a GP sooner.”

Male, 45–54 years old

“It’s impossible to book appointment in the same week, we always need wait 3–4 weeks to have appointment where doctors only send referrals to hospital or bloods to be done. If somebody is serious ill it will die sooner than having appointment. Phone and person booking not exist, receptions say to everyone to do it online and wait 2–3 days to respond from GP practice. It’s ridiculous.”

Female, 25–34 years old

“Having to wait 2 months for an appointment is beyond a joke. Had a blood test and then was called up months later asking for another, then the cycle repeated. I’ve now given up due to the wait for an appointment. Makes the service a waste of time to use.”

Male, 25–34 years old

“I had to wait 9 weeks for the most recent GP appointment that I requested which I do not feel can surely be safe. I appreciate that my issue must have been triaged as low risk but even so, I was left uncomfortable and worried about my issue for over 2 months before I was able to see somebody.”

Female, 25–34 years old

2. Contacting the practice



Many people reported long waits on the phone and challenges getting through. Just 22% of patients reported that they got through to the practice in under 10 minutes in the last time they tried calling. Whereas the largest group of patients (31%) reported it took them up to an hour to get through to the practice, with some (12%) reporting over an hour spent in telephone queues.

Only a small proportion of patients reported getting through quickly, with many waiting over 15 minutes or longer. This creates barriers for those who rely on telephone access, particularly people who are not able to use online systems. Patients who used the call back function described it as 'good', 'works well' and 'usually fairly quick'. However, some noted that appointments are not always available as soon as they would like.

“Latham house is surely one of the most disappointing medical practices in the country, caller number 48 is the usual response on phoning and after all that wait you are met with a rude receptionist who is rarely helpful.”

Female, 45–54 years old

“48 mins on hold is not acceptable. Receptionist couldn't tell me if I needed an appointment for repeat contraceptives as my survey had not been reviewed yet, so I booked one anyway to save having to wait another 48 mins on hold if I did. This was in October – my appointment needed to be on a certain day of the week due to my work. First available appointment with a nurse on that day was mid-January.”

Female, 45–54 years old

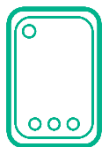
“Nightmare to get through on phone 20 in the queue.”

Male, 55–64 years old

“Popping in to LHMP to further my telephone conversation in the morning, and having held the line for 42 minutes, and constantly being informed that the practice was 'extremely busy' and then being cut off. When I entered into reception, there were 4 staff, all chatting with each other, and absolutely no patients waiting! When I asked for help with actually getting to see my GP, I was told, and this was confirmed by the other 3 staff members, that I would need to go online, or phone the practice! I was there, speaking with them! Why oh why did I feel dejected and belittled by this. I bit my tongue and walked out in total disbelief. “

Male, 65+ years old

3. Online system and digital exclusion



Over half (52%) of the respondents stated that they used some form of digital services, i.e. the NHS app or online booking services, to book their last appointment. While online triage works well for some, others find it difficult, restrictive, or inaccessible.

People told us that they cannot always choose appointment times, response times can be slow and the system does not work for everyone. This particularly affects older people, people who do not have reliable internet access and people with additional needs.

“Not everyone is tech savvy, having receptionists not able to make an appointment and being forced to do online, when a person has visited the practice seems insane.”

Female, 45–54 years old

“The online system can only be used during opening hours, this creates problems for those who are unable to. It’s very inconvenient, but a nice idea for have. Just make it more accessible.”

Female, 35–44 years old

“Not all people have the Internet or can use it. It was easier when you could go to the desk and sort appointments or prescriptions out, you just feel that you are being fobbed off.”

Female, 45–54 years old

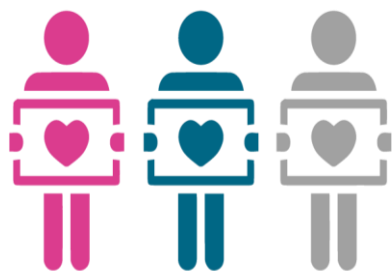
“I find having to fill a form in to try and make an appointment very anxiety inducing. I suffer with health anxiety and the difficulty of trying to be seen has seen my anxiety worsen.”

Female, 35–44 years old

“The online booking system is terrible. You fill in the form then wait for an appointment. You get a text message with an appointment that may or may not be convenient. Not everyone is able to drop everything to attend an appointment (for example if you work out of town). There is no option to change the date.”

Female, 45–54 years old

4. Communication and coordination



People told us communication is not always clear or timely. Some people described having to repeat information or experiencing delays due to lack of coordination between services.

“Communication with one another in the service is poor, cancelling appointments constantly before being seen up to 3 times then from booking to being seen 5 months.”

Female, 35–44 years old

“Recently I, and my family have experience of how incredibly difficult the processes and lack of communication make things. Being triaged by a nurse when you have advised that you have a bad chest, to then get a phone call to then be told you need to be seen in person surely is doubling up on the time that it takes to be seen.”

Female, 45–54 years old

“Why are my letters from specialists not on the app? Still waiting for an over 40s check, diabetes check, etc. No one follows up. Like no one cares.”

Female, 45–54 years old

“Takes too long to see anyone, Latham House only offering blood tests at Asfordby Surgery when I live in Melton and can walk to Latham House, had to go in to Latham House to book a blood test in Melton. Why would I want to walk to Asfordby?”

Female, 65+ years old

“Constantly told to drive all the way to Loughborough for urgent care when I'm bed bound with blinding migraines. No joined up care, details wrong, meaning health advice wrong and sometimes inappropriate for my medical conditions. A feeling that I'm just a bother and should go away, even when very ill.”

Female, 45–54 years old

5. Cancellations and continuity of care



Cancelled appointments and lack of continuity were common concerns. Some people said they arrived for appointments that had been cancelled without being told. Others described seeing different clinicians and needing to repeat their history, which could affect continuity of care.

“My last 2 appointments have been cancelled on the day.”

Female, 65+ years old

“The wait for appointments and the amount of times they cancel my appointments is terrible. 6 to 8 weeks to see my Dr, if I'm not ok in 6 to 8 weeks then I think I need more than a GP.”

Male, 45-54 years old

“Asked for an appointment via online system. Was given a date for 7 weeks later, which is a very long time to wait. Turned up on the day. Had been waiting about 30 mins, when people who had been there longer went to see what the delay was. Turned out doctor was not there and patients had not been informed. To be fair, someone rang within a couple of hours and was able to arrange an appt with a different doctor for the following week. But very poor that people were able to check in and sit waiting when the doctor was not there.”

Female, 45-54 years old

“I don't know who my doctor is. I have never been able to see my doctor. My last appointment was for a review. It was cancelled on the morning of the appointment. The next available appointment was a month later even though I phoned and said I needed to see someone sooner. An actual doctor's appointment was not available for over a month.”

Female, 65+ years old

“If you want an appointment, it can be 10/12 weeks before you get one. If that appointment is cancelled - yet another 12 week wait before you can get another one.”

Female, 65+ years old

6. Face-to-face appointments



Many people value face-to-face appointments but report they are difficult to access.

This is particularly important for people with complex conditions, ongoing health issues and situations where physical assessment is needed.

“Trying to get a face-to-face appointment with a GP is almost impossible. My last attempt offered an appointment over a month away even after I explained I really needed to speak with someone.”

Female, 65+ years old

“Very hard to get a face-to-face appointment. Went too Loughborough walk in at the weekend they put a request through for a chest x-ray as soon as possible and had to wait over a week for an appointment plus another four days for results. Very poor customer service.”

Female, 55-64 years old

“Telephone appointments do not always show how ill someone is, when I finally got a face to face appointment after over a month, I was told ‘Oh, your worse than we thought you were’ and then my follow up appointment was for three months time, even though my GP told me it should be within a month.”

Female, 35-44 years old

“When living with chronic illness and you are only able to book one (7-10 min) face to face appt at a time to discuss 10 things that are concerning you - as THE PATIENT you have to choose which two things seem the most serious to discuss before your allotted time is over.”

Female, 65+ years old

“There is zero continual care. I have lifelong autoimmune issues and in the last five years have had no continued care to help with this. I get passed off to whatever locum is available where I then have to spend the whole appointment explaining my last twenty years of treatment for them to come to the same result and prescribe medication that is not a long term solution, just a quick fix for them to get me out of the door and not be their problem anymore.”

Female, 25-34 years old

7. System pressures

Many respondents recognised that the practice is under significant pressure.

“There is an urgent need for more permanent GPs (especially full-time) and resulting available appointments. Since moving to this practice 4 years ago my husband and I both feel we don't have the umbrella of an adequately staffed and hence high- functioning practice to protect us and being in our seventies this is a real worry. I recently sought to move to a village practice (but declined due to post code restrictions). Such are my genuine concerns. You just can't get appointments when you need them!! Getting additional help via locum doctors is a quick temporarily fix but doesn't address the real problem.”

Female, 65+ years old

“The practice needs to grow with the rapidly enlarging town.”

Male, 65+ years old

“We need more GP surgery in Melton and more doctors and appointments available to people.”

Female, 25–34 years old

“This surgery patient list is far too big and the surgery needs splitting. The GPs seem to be too busy triaging a list, rather than seeing patients face to face.”

Female, 55–64 years old

“Latham House is not fit for purpose. The level of care it delivers is dangerous to all those who need health care in Melton. I was recently told there was a high possibility I had inflammatory breast cancer, when I saw the GP, he refused to refer me to the breast care clinic at LGH. We need more GPs who are prepared to offer follow up care after the initial appointment.”

Female, 35–44 years old



Conclusion

People value the care they receive from Latham House Medical Practice and recognise the dedication of staff.

However, many are struggling to access that care in a timely and convenient way. The gap between quality of care and access to care is a key issue. This is leading to frustration, anxiety and in some cases, people seeking help elsewhere.

Improving access, communication and flexibility will be essential to restoring confidence and ensuring people can get the support they need when they need it.

“We reached out to the people of Melton for their feedback on their GP service and the people are clear: care at Latham House works well when they can access it. People clearly value the care they receive, but confidence in accessing that care is low. Improving access is the key priority for improving patient experience overall.”

Harsha Kotecha, Chair of Healthwatch Leicester and Leicestershire

Recommendations

Based on what people told us, we recommend Latham House Medical Practice:

1. Look to increase the availability of bookable GP appointments, including more pre-bookable options and ensure patients can amend or rebook appointments easily.
2. Where appointments are cancelled by the practice, ensure patients are offered a suitable alternative within an appropriate timeframe and that booking systems are aligned to prevent repeated delays.
3. Review and improve telephone access by reducing waiting times, increasing capacity at busy periods and strengthening call-back arrangements (including clearer communication about expected response times).
4. Review the online triage system to ensure it is flexible, easy to use and allows patients more choice and quicker responses.
5. Ensure people who cannot use digital systems can access services easily through alternative booking methods (for example, supported booking via reception, a dedicated phone line for non-digital users or booked call-back appointments).

6. Improve communication with patients by providing clear, timely updates and consistent follow-up.
7. Reduce last-minute cancellations and improve continuity of care by ensuring patients are offered suitable alternative appointments quickly.
8. Work with system partners to address capacity pressures and ensure services keep pace with local population growth.

Service Provider response

Response to Healthwatch Leicester and Leicestershire Patient Survey from CEO GP Partner Dr Matthew Riley, Latham House Medical Practice:

On behalf of the Practice, I would like to thank Healthwatch Leicester and Leicestershire, and all the patients who took the time to participate in this survey and share their experiences.

We welcome the report and are pleased that patients continue to recognise the dedication, professionalism, and compassion of our staff. It is reassuring to hear that patients value the quality of care they receive when they are able to access our services.

We also acknowledge the concerns raised regarding access to care. We recognise that many patients have experienced difficulties obtaining appointments in the way or timeframe they would prefer and understand the frustration and anxiety this can cause. The report's conclusion that there is a gap between the quality of care provided and the ease of accessing that care resonates with our own understanding of the challenges facing general practice both locally and nationally.

Latham House serves one of the largest patient populations in the country, and demand for appointments continues to increase year on year. At the same time, like many practices across the NHS, we have experienced workforce challenges, including GP retirements, changes in clinical staffing and increasing complexity of patient need. While these factors provide important context, we recognise that patients judge their experience on whether they can access the care they need when they need it.

We are therefore actively investing in both our workforce and our facilities to improve access and increase capacity.

Over recent months we have welcomed three new salaried GPs to the Practice: Dr Mayank Patel, Dr Abi Ludlow and Dr Tochukwu Uzochukwu. We are also delighted to be recruiting a further three salaried GPs together with First Contact Physiotherapist Alex Roberts. Whilst some of these appointments replace clinicians who have moved on, others represent genuine growth in our workforce and will help reduce our reliance on temporary locum cover.

Alongside this recruitment programme, we are investing in additional clinical space. Refurbishment works are underway to create eight new clinical consulting rooms across two suites within the Practice. These additional rooms will allow us to maximise the availability of appointments offered by our expanding clinical team and support future service growth.

In response to the recommendations outlined in the report:

Increasing Appointment Availability

Improving access remains one of our highest priorities. The recruitment of additional GPs and allied healthcare professionals, combined with the creation of new consulting rooms, will increase appointment capacity, and provide patients with greater opportunities to access care. We continue to review our appointment model to ensure it reflects patient need whilst balancing urgent and pre-bookable demand.

Improving Telephone Access

We recognise that telephone access remains a source of frustration for some patients, particularly during periods of high demand.

Improving the experience of contacting the Practice by telephone has therefore been a key area of focus.

Over the past year, we have increased the number of staff available to answer calls during our busiest periods to help reduce waiting times and improve responsiveness. We have also invested in a new telephony system which offers patients the option of a queue call-back service. This allows callers to retain their place in the queue without having to remain on the phone. Once they reach the front of the queue, a member of the team will call them back.

For patients calling from a mobile phone, the system also provides text message updates showing their position in the queue, helping them understand when they can expect to receive their return call.

Whilst we are encouraged by the benefits these improvements have delivered, we recognise that some patients continue to experience difficulties accessing us by telephone. We will therefore continue to monitor demand, review performance, and explore further opportunities to improve the patient experience.

Reviewing Online Access

We recognise that patients have differing views and experiences of online consultation systems. In response to growing demand and the need to ensure requests are managed safely and efficiently, the Practice introduced AccuRx, a GP-led triage system for non-urgent clinical requests.

Patients can submit details of their health concern online, which are then reviewed by their own GP, or another GP if their own is not available. The clinician will assess the request and respond within two working days with appropriate advice, investigations, treatment, or an appointment where required. This approach helps ensure that patients receive care based on clinical need and that available appointments are used effectively and safely.

We will continue to review patient feedback and system performance to ensure our online access arrangements remain responsive, inclusive, and clinically effective.

Supporting Patients Who Are Not Digitally Confident

We recognise, however, that digital services do not suit everyone. It is important to us that patients who are unable to access or use online systems are not disadvantaged. To support this, we have provided a dedicated private computer within the Practice that patients can use to complete online requests, either independently or with assistance from a member of staff if required.

In addition, our reception and care navigation teams can complete online requests on behalf of patients over the telephone, ensuring that those who are less confident with technology, do not have internet access, or have additional support needs can still access care through alternative routes.

Communication and Continuity of Care

We acknowledge the importance of clear communication, particularly when appointments need to be changed or cancelled. We are reviewing our processes to ensure patients are informed promptly and offered suitable alternatives wherever possible. We also recognise the value patients place on continuity of care and hope that the expansion of our permanent clinical workforce will support stronger and more consistent patient-clinician relationships.

Working with System Partners

We agree that addressing long-term capacity pressures requires collaboration across the wider health and care system. We continue to work closely with our Primary Care Network, NHS Leicester, Leicestershire and Rutland Integrated Care Board, local providers and community partners to ensure services evolve alongside the needs of our growing population.

We are grateful to Healthwatch for undertaking this work and to our patients for sharing their views. Their feedback helps shape our priorities and supports our ongoing efforts to improve services. Whilst we recognise there is more work to do, we are confident that the significant investment being made in our workforce, estate and service delivery will help improve access and strengthen patient experience in the months and years ahead.

CEO GP Partner Dr Matthew Riley, Latham House Medical Practice

Demographic Questions

Are you...?

Response		%	Total
1	A woman	78%	504
2	A man	21%	134
3	Prefer not to say	1%	7
4	Prefer to self-describe:	1%	4

Answered – 649 Skipped – 23

What is your age group?

Response		%	Total
1	16-17 years	0.31%	2
2	18-24 years	2%	13
3	25-34 years	8%	54
4	35-44 years	14%	88
5	45-54 years	19%	123
6	55-64 years	29%	186
7	65 or older	27%	176
8	Prefer not to say	1%	7
















Answered – 649 Skipped – 23

Where do you live?




Response		%	Total
1	Melton	99.5%	646

2	Rutland		0.5%	3
Answered – 649 Skipped – 23				




What is your ethnicity?

Response			Response Percent	Response Total
1	Arab		0.2%	1
2	Black/Black British: African		0.2%	1
3	Mixed/Multiple Ethnic groups: Any other Mixed/Multiple ethnic groups background		0.5%	3
4	White: Irish		1%	4
5	Asian/Asian British: Indian		0.3%	2
6	Asian/Asian British: Any other Asian/Asian British background		0.2%	1
7	Black/Black British: Caribbean		0.2%	1
8	Mixed/Multiple Ethnic backgrounds: Asian and White		0.5%	3
9	Mixed/Multiple Ethnic groups: Black Caribbean and White		0.2%	1
10	White: British/English/Northern Irish/Scottish/Welsh		83%	537
11	White: Gypsy/Traveller/Irish Traveller		0.2%	1
12	White: Any other White background		8%	50
13	Any other ethnic group		0.2%	1
14	Prefer not to say		4%	24
15	Other		2%	16
Answered – 646 Skipped – 26				




Do you have a disability?

Response			Response Percent	Response Total
1	Yes		21%	134
2	No		75%	485
3	Prefer not to say		4%	28
Answered – 647 Skipped – 25				

Do you have a long-term condition?

Response			Response Percent	Response Total
1	Yes		59%	384
2	No		37%	241
3	Prefer not to say		4%	23
			Answered – 648	Skipped – 24

Are you a carer?

Response			Response Percent	Response Total
1	Yes		15%	97
2	No		82%	529
3	Prefer not to say		4%	23
			Answered – 649	Skipped – 23

healthwatch

Leicester and
Leicestershire

Healthwatch Leicester Healthwatch Leicestershire

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