Results

Survey 696915

Number of records in this query:	501
Total records in survey:	501
Percentage of total:	100.00%

Field summary for NHSSECTOR

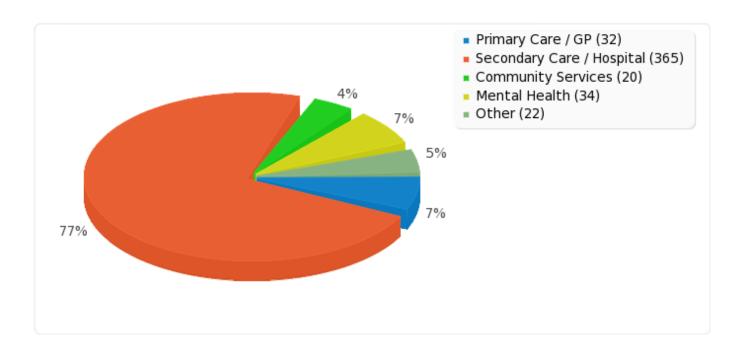
Which part of the NHS do you mainly work in?

Answer	Count	Percentage
Primary Care / GP (1)	32	6.77%
Secondary Care / Hospital (2)	365	77.17%
Community Services (3)	20	4.23%
Mental Health (4)	34	7.19%
Other	22	4.65%
No answer	0	0.00%

ID	Response
1238	Records
991	Admin
56	Trust
947	CSU
916	Combined provider
1023	Area Team
587	Coporate Services
1121	All of these - serve all staff in the Trust
632	test
1111	Commissioning support unit
1101	corporate services
691	Administration
1191	Patient services
1068	Mixed Acute Community
1189	Acute
1506	Prison
1394	Northern Ireland HSC Trust, South Eastern HSC Trust
1494	Paramedic
1426	Medical education
1443	HSCIC
1558	HSN
1572	acute and community and MH

Field summary for NHSSECTOR

Which part of the NHS do you mainly work in?



Field summary for JOBROLE

What is your main job/role within the NHS?

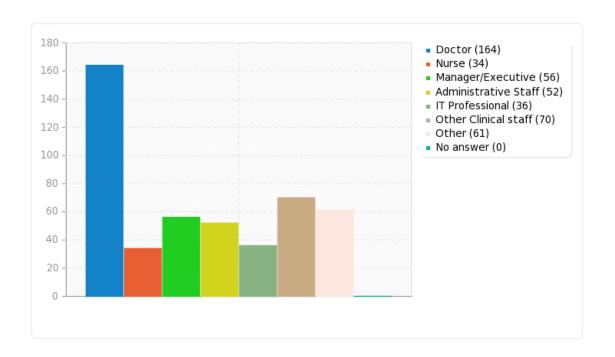
Answer	Count	Percentage
Doctor (A1)	164	34.67%
Nurse (A2)	34	7.19%
Manager/Executive (A3)	56	11.84%
Administrative Staff (A4)	52	10.99%
IT Professional (A5)	36	7.61%
Other Clinical staff (A6)	70	14.80%
Other	61	12.90%
No answer	0	0.00%

ID	Response
14	Library
1525	Technical
67	Clinical Scientist
83	Librarian
96	SCIENTIST
97	Library Services Manager
98	Librarian
114	Librarian
119	librarian
1260	Communications
131	Clinical Scientist
152	librarian
164	Library service manager
184	library
916	Health Informatics/CSO
907	Clincical Governcance
223	Librarian
233	Librarian
1021	head bms
293	Librarian and electronic services officer
1016	
	Midwife
351 352	Clinical scientist in Pathology
	Librarian Thenke but I'd prefer net to say
1582	Thanks, but I'd prefer not to say.
1169 1166	Midwife Midwife
1151 1142	Dental Student
	Library and Knowledge Manager
1139	Librarian
1138	Librarian
1136	Librarian
1135	Librarian
1134	. Hanning
1133	librarian
1127	Library manager
1121	Library staff
632	test
1103	Library Manager
671	Pathology Staff
1579	Knowledge Services
1082	Librarian
783	Librarian
1057	Clinical Scientist
1056	Librarian Riamatical Cainatics
1049	Biomedical Scientist
1189	Human Resources

1187	Library Services Manager
1267	Librarian
1270	PHARMACY
1347	Service User
1349	Librarian
1350	Pharmacist
1354	Librarian
1384	Laboratory Scientist
1393	Clinical Coder
1397	Clinical Scientist
1424	Medical Student
1426	Medical student
1437	Library Manager
1442	Healthcare Assistant
1550	Library

Field summary for JOBROLE

What is your main job/role within the NHS?



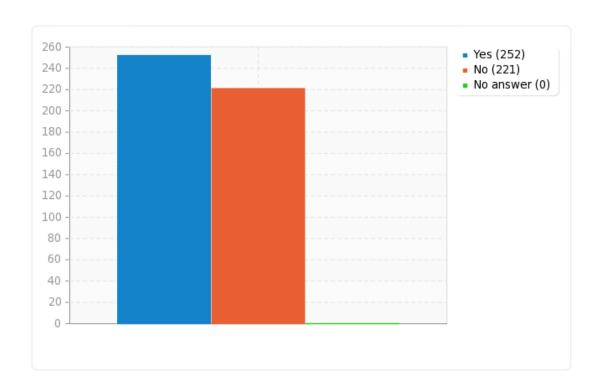
Field summary for YESNOWIFI

Can you access WiFi in your place of NHS work?

Answer	Count	Percentage
Yes (Y)	252	53.28%
No (N)	221	46.72%
No answer	0	0.00%

Field summary for YESNOWIFI

Can you access WiFi in your place of NHS work?



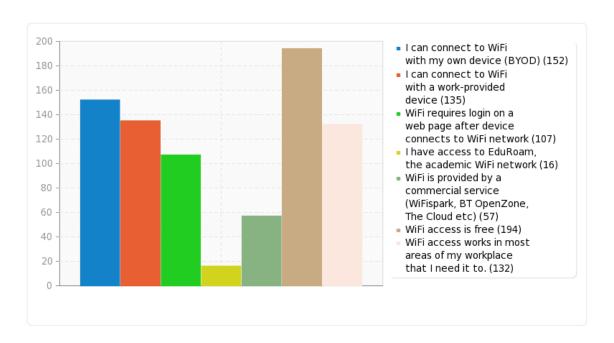
Field summary for YESWIFI

Which of the following apply to your experience of WiFi access at your usual place of NHS work?

Answer	Count	Percentage
I can connect to WiFi with my own device (BYOD) (SQ001)	152	60.32%
I can connect to WiFi with a work-provided device (SQ002)	135	53.57%
WiFi requires login on a web page after device connects to WiFi network (SQ003)	107	42.46%
I have access to EduRoam, the academic WiFi network (SQ004)	16	6.35%
WiFi is provided by a commercial service (WiFispark, BT OpenZone, The Cloud etc) (SQ005)	57	22.62%
WiFi access is free (SQ006)	194	76.98%
WiFi access works in most areas of my workplace that I need it to. (SQ007)	132	52.38%

Field summary for YESWIFI

Which of the following apply to your experience of WiFi access at your usual place of NHS work?



Field summary for NOWIFI

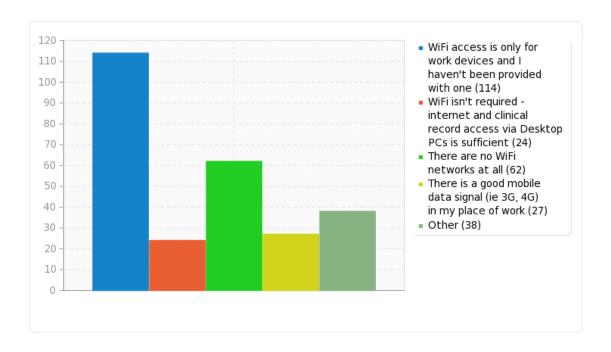
Please provide some further information:

Answer	Count	Percentage
WiFi access is only for work devices and I haven't been provided with one (SQ001)	114	52.29%
WiFi isn't required - internet and clinical record access via Desktop PCs is sufficient (SQ002)	24	11.01%
There are no WiFi networks at all (SQ003)	62	28.44%
There is a good mobile data signal (ie 3G, 4G) in my place of work (SQ004)	27	12.39%
Other	38	17.43%

ID	Response
1238	Available to patients but not to staff
980	wifi access is only for work devices but i have been provided with one
67	WiFi access is available when required
966	not much wifi anywhere in trust
1254	Wifi is available for patients at a cost.
161	The wifi provided is so poor that no-one can use it.
164	Trust WIFI is available for Trust devices BUT the WIFI infrastructure is not installed in my building
203	Wifi is in the process of being installed currently
267	upcoming access is promised
1201	staff & patients have to pay for wifi
293	The mobile data signal is very poor
1236	There are several networks which pop up but I don't know how to get access to them
323	WiFi access is only available in certain areas
324	Good mobile data signal available but the internal WiFi network is good but secure and
	restricted. I have a blackberry that uses it but my work laptop is not configured to use it.
1582	This trust considers only med. students & med staff (+ the senior management team &
	their admin staff) are able to be trusted with wi-fi access. The rest of us are obviously
	people of dubious ethics/morals etc.
1225	There is wifi for the university, but staff not permitted to use it. There is no internet access
	in clinical areas due to the layout of the building
481	There is wifi but only just installed and no access to it yet
1126	No mobile signal or 2G at hospital site
659	Apparently there is WIFI in our building but it doesn't work at the moment.
1195	At my hospital patients get wifi access via trust number, employees do not. Annoying!
1063	Always difficult to access wifi and appears to be password protected.
1281	internittent areas with wi-fi-not all areas
1288	There are wifi networks, but normal staff are not allowed access
1291	work in a prison
1303	Uni wifi
1305	Pwifi which is utterly useless!
1307	there is wifi, but not for clinical staff, just cleaning
1320	Very poor 3G signal
1334	Wifi only for managers, paediatric patients and some long stay patients. There are some
	laptops for juniors but most of them don't work properly (heavy, slow, malfunction
	regularly).
1361	Wi-fi is, I was told, 'for management'
1501	except on the lower ground floor
1500	i havent bothered to sign up to wifi
1420	There is terrible network coverage in my place of work
1424	Open wifi only available in one building
1431	no wifi available to clinical staff only managers and 3G is rubbish
1435	It's only for patients
1550	Use Ethernet at work.
1565	Wi Fi available in some areas - not where I usually work

Field summary for NOWIFI

Please provide some further information:



Field summary for CAREQUALITY

Do you think access, or lack of access, to WiFi during your NHS work affects the care you can provide for your patients?

Answer	Count	Percentage
Access to WiFi would improve the care I provide (1)	327	69.13%
I am not sure what effect access to WiFi would have (2)	82	17.34%
Access to WiFi would have no effect (4)	53	11.21%
Access to WiFi would worsen the care I provide (3)	8	1.69%
Comments	131	27.70%
No answer	3	0.63%

ID	Response
9	as its not allowed you can have no idea what effect it would have
13	At present I use the patient wifi using our team device not on the trust network but a device on the trust network would be preferable.
1237	Especially when there is no cellular data. Checking nice guidelines. Up to date. Etc.
1238	I am not patient-facing
1240	Latest e-textbooks, journals and drug encyclopaedias - Trust computers are in use or too slow
1242	Able to source drug info, check anatomy,teaching excellent
980	Access to wifi would improve how everyone works, as long as you have the technology to go with it.
1246	Education/training can be better done on the go with mobile devices (not necessarily big computers on trollies). Personal devices are often much quicker than out of date hardware/software on hospital computers, eg. for accessing educational/research media.
1252	Desktop computer availability being poor in some areas
1255	Almost no phone signal in any of our operating theatres, limited access to computers even for trust systems
83	Users of the Library have commented that it is very inconvenient not to be able to have WiFi but not sure if that would impact on patient care.
95	I've been asking IT for some time why our Trust can't provide Wi-Fi to staff when
	McDonald's can provide it free to customers.
96	Poor systems mean spending too much time retrieving data which means less time doing appropriate work
97	Access for staff, students and patients vistors currently very good
106	I don't use it for work.
112	Wifi is currently only in the hospital education centres where i work rather than throughout the whole hospital. We would like to be able to support clinicians by taking ipads into wards to support evidence based practice.
114	We are frequently asked about WiFi access and it is difficult to assist staff who want to use resources on theor BYOD when there is no WiFi. The one tablet we have connected to Trust WiFi is so locked down to render it useless
119	Provide many online resources which could be consulted at the point of care if wifi available
1260	I manage the Trust website, intranet and social media accounts. Access to WiFi would enable me to test website and apps more efficiently, and would allow me to monitor social media on the move.
947	5th option needed ACCESS improves my ability to work
136	I can access many networked and wireless devices on the wards. These provide access to the clinical record though internet only directly available from networked PCs. Reality is this is not an issue.
140	We have glucometers from which results could be instantly uploaded and the devices could be tracked via WiFi but is not permitted
152	i would be able to use a range of devices anywhere in the hospital rathe than the trust owned devices which are old and slow.
156	The current encrypted wifi system is heavily restricted due to the patient data that can be accessed. All mobile devices (laptops, tablets) must be encrypted before use and thus visitors or most staff are restricted from accessing information if this hasn't been enabled.

161	It could help clinicians with their own devices but isn't relevant otherwise to my immediate area of work.
1035	because patients and their relatives are constantly asking for it.
184	question's not relevant; it's available
1030	Desktop connection for GP adequate but would be great to be able to access on personal device.
907	Not involved directly with patietnes but this is what clinical staff tell me
203	We generally deal ambulatory, students, nurses and othe professionals
204	We provide access to WIFI to library members to use while they are in the library via a commercial service. WIFIspark. The library pays for a subscription for 10 concurrent users across two libraries. Library users can connect to this with any device. The Trust WiFi allows to connect to it with Trust devices such as iPads and laptops.
903	No direct patient care but better WiFi connectivity would enable the better use of encrypted electronic devices and improve efficiency. We have some access but thi is oftne limited and drops out frequently IT are working on it but it is s slow progress
227	I do not have patient contact in my day to day work
235	Being able
892	I can not always get wofi access at work as the signal is not very strong in some areas. But when I can connect, it does definitely improve the care
1023	I can access WiFi on my own lap top but it is hit and miss. it only works 50% of the time
876	without access to wifi, i could not do my job
1021	Currently, 2 wifi, clinical and devices. rest is wired network - saturated and costs a fortune for additional ports. wifi could save money, increase flexibility, but also be a distraction without adequate controls.
293	I do not provide care. There should be that option in the survey, but I provide information to care givers. Lack of wifi impacts on access to online books that they might otherwise access on their mobile devices, especially placement students and junior doctors.
866	Does, not would
865	As a library and knowledge professional I read "customers" or "service users" in place of patients but yes as at present we have to run laptops from a separate MiFi device via EE at certain locations in order to provide training on HDAS information searching.
1236	I would use it to look stuff up, eg the BNF online, to access the college eportfolio, and to do mandatory elearning using my ipad. This would then free up work PCs for stuff like looking up patient results, ordering tests, theatre management systems etc
314	n/a: I do not provide care
324	The provision of network PCs is excellent and functionallity is uniform throughout the trust
332	Especially for meetings moving about the building.
	On clinical session need knowledge access
351	Still struggle to access the laboratory results by tablet or lap top if roaming on to wards or MDTs and this would definitely help for those results apparently missing from the ward order system.
358	still using paper notes in clinic
1582	I am not a member of the clinical staff; my role is backroom. However, there are times
	when wi-fi access would definitely help me in my work, eg. allow me to access sites [valid for work purposes] that are blocked when using a computer attached to the Trust network.
377	Online resources would be so much easier to demonstrate to staff if we had wi-fi in the library / building.
1225	I have apps on my phone for clinical matters. I would be able to access my portfolio or look things up easily. There are a few computers, but it takes time to log on, it is shared amongst many, and if i am called away suddenly, I don't get the opportunity to log out.
1220	A handheld device with wifi would be best
1581	I work in the health library and would love to be able to test apps for students and staff and provide them with updated information on the best evidence-based apps available for both Android and iPhone/iPad and despite winning funding to purchase an iPad the IT department would not provide me with one.
416	Not on electronic records yet, desktops available but slow. No budget to replace or upgrade
1211	There is huge unused potential is staff members pockets - their own smartphones. Let us use them!
1169	Makes my work more efficient. I don't have to wait for a computer to be available. I can plan my day in advance on my smartphone and then use it all day to stay on track. It helps me access work emails instantly.
1166	Sometimes there are no available computers and I would show patients evidence based practice on my phone also the language barrier could be broken with mobile access to

Although I don't deliver direct patient care, access to Wi Fi would improve the service that teh admin functions can provide, and so by extension, positively impact patient care

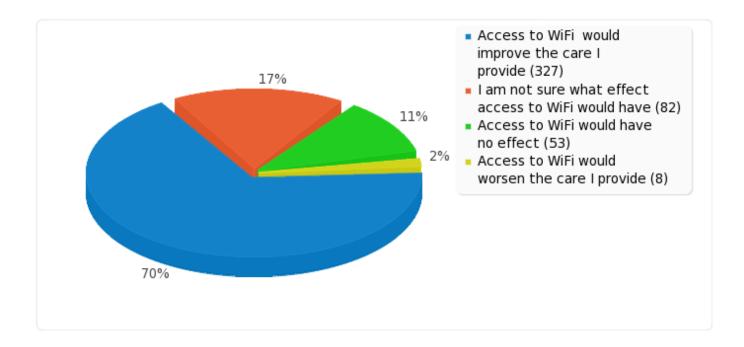
1189

828	Wifi would be useful but the bandwidth we get for connected devices is already so poor that if wifi was added the whole system would probably crash. [as an example, it can take 20 seconds to load a page from the daily mail]. At home it takes me 10 seconds - and we live 8 miles from an exchange and are looking at paying £20K to install a bale because BT
1187	can't provide any more than 750KBaud! WiFi would permit instant access by staff to a huge number of evidence, learning and training resources, both to answer clinical questions and to keep up to date. Another major barrier is blocked access to sites like YouTube which has many excellent educational
	resources. Makes outreach training very difficult.
1206	nice to use some of the medical apps
855	I don't directly care for patients
1269	when at meetings away from the desk - WIFI could be used to respond to emails etc when there is dead time
1276	There are no computers in the anaesthetic rooms either, the one in theatre for peri op use to access databases and positioned purposely behind the anaesthetic machine so it cannot be used whilst viewing the monitor
1277	At present in order to perform any literature search I need to have an available hospital computer. Wifi would enable me to work on my ipad/laptop anywhere without the need of a
4004	hospital computer.I would find that very helpful.
1291	not possible as a prison
1293	Got it recently, has transformed educational experience of out M&M meetings
1305	Essential for a modern nhs
1307	there is ok access through desktops. The trust blocks google translate, which means that they waste cash when I need odd words interpreted
1320	A lot of clinical guideline apps require a connection to remote databases. They've removed the paper BNF copies from the wards and there aren't enough computers to just sit down and write. The trust have stated that if we want wifi access for our own devices we have to
	pay a 50 quid license fee!!
1321	Have Wi-Fi. Use it all the time.
1324	I could access apps and emails which would improve my productivity.
1325	Ability to use apps on phone has transformed care. Instant access to BNFs, emergency drug calculators and NICE guidelines for example But no access to trust intranet to bring up guidelines/proformas hinders care. Very limited 3G in department. It is impractical, in an ED, to have to keep going to a PC to look up stuff then back to the patient. Being able to look at notes/results/order investigations from my phone is a step too far
1332	I don't think it would improve care, but would make things easier like updating logbook, looking up resources during teaching in middle of a case.
1334	I would like to be able to use wifi on my mobile phone while I am moving around the hospital. This way I can access information and process it without the constant interruptions of trying to access a ward dekstop computer (assuming said ward computer is working)
1335	I wouldn't keep either having to go to desktop computer or outside to get mobile wifi signal
1339	Should be available to patients
1347	I find people are to afraid to embrace Wi-Fi for risk of a security breach.
1348	it enables extra laptop to be connected during review meetings which in turns expedites review of notes/information to support the clinical care
1350	Up to the minute information on drugs is only available via wifi e.g. BNF
1353	With a WiFi setup we could use questionnaires on tablets/phones that patients could do
	whilst waiting. Would also allow easier ttransfer of information - such as superviisng trainees.
1380	Lack of access would be problematic. I can use 2 networks. Wifispark for BYOD & the trust secure network for secure pt info on trust certified devices
1388	Access is already universal
1496	Connecting to wifi is slow and in fact, because the wireless provider (thecloud) hijacks one's connection and redirects all traffic to a login page, it actually slows down accessing internet resources rather than speeds it up.
1398	Better access would be very useful
1401	wifi access is present but slow due to traffic ? / signal strength
1410	Especially for junior doctors it would be helpful to be able to access online resources or
1418	apps that require an internet connection. We can google clinical questions and get answers ASAP.
	Also useful for showing patients pictures/diagrams which helps to explain and inform them!
1424 1431	Better access to resources, better communication with colleagues I use many work apps such as online BNF, paediatrics drug calculator as well as using my

	devised to download and read papers on ipad/iphone while in theatre - last of wifi means I have to plan to download everything at home before i come in and can't then access other links.reference/resources
1435	Communicate with colleagues as there is no mobile reception in the hospital.
1489	Specifically to allow for networked devices to upload patient data to the cloud.
1448	Xxx
1449	would enable the use of technology in therapy session with patients.
1486	we can setup smartphone to check nhs mail and browse nhs website
1459	access is now available in all locations and has improved the care provided to patients.
1461	Ease of accessing BNF, scoring systems, guidelines etc - Hospital PCs take too long and sometimes relevant sites for information are blocked
1467	Our Wifi access is unreliable and the devices we use on the wifi network often crash, causing delays in patient care. As a result, we have scrapped the use of wifi devices and reverted back to using a PC in the treatment room, reserving the wifi device for conducting patient information chats only, which are embarassingly slow. The introduction of another computer device has resulted in a near miss incident and a rapid change to the method of IDing patients to ensure the same patient is open across the three electronic data sources used - this would only be 2 sources if a wifi device is used, thereby reducing the risk of an error.
1553	as the patient would still be able to access from their bed instead of going out off the ward
1575	We are rolling out wifi across all 70 GP practices (85 locations) in my CCG over the next few months. This will have both staff-only (via N3) and public available (via Broadband) wifi
1556	Yes, as BNF has moved online, and only up to date BNFs' allowed on wards, poor access to resources due too few PCs. WiFi would improve access as would use own device.
1560	if i could use my own device on wifi it would save printing of papers for meeting - saving time and money

Field summary for CAREQUALITY

Do you think access, or lack of access, to WiFi during your NHS work affects the care you can provide for your patients?



Field summary for DOWITHWIFI(1)

OPTIONAL: What can you already do, and what would you like to be able to do with WiFi access at your workplace? [Medical knowledge resources]

Answer	Count	Percentage
I can do this already (SQ001)	201	42.49%
I want to be able to do this (SQ002)	196	41.44%
I don't need to do this (SQ003)	45	9.51%
No answer	31	6.55%

Field summary for DOWITHWIFI(2)

OPTIONAL: What can you already do, and what would you like to be able to do with WiFi access at your workplace? [Personal email]

Answer	Count	Percentage
I can do this already (SQ001)	207	43.76%
I want to be able to do this (SQ002)	143	30.23%
I don't need to do this (SQ003)	89	18.82%
No answer	34	7.19%

Field summary for DOWITHWIFI(3)

OPTIONAL: What can you already do, and what would you like to be able to do with WiFi access at your workplace? [Trust Intranet access]

Answer	Count	Percentage
I can do this already (SQ001)	213	45.03%
I want to be able to do this (SQ002)	199	42.07%
I don't need to do this (SQ003)	27	5.71%
No answer	34	7.19%

Field summary for DOWITHWIFI(4)

OPTIONAL: What can you already do, and what would you like to be able to do with WiFi access at your workplace? [Work email/NHSMail]

Answer	Count	Percentage
I can do this already (SQ001)	256	54.12%
I want to be able to do this (SQ002)	175	37.00%
I don't need to do this (SQ003)	15	3.17%
No answer	27	5.71%

Field summary for DOWITHWIFI(5)

OPTIONAL: What can you already do, and what would you like to be able to do with WiFi access at your workplace? [Mobile electronic medical record access]

Answer	Count	Percentage
I can do this already (SQ001)	71	15.01%
I want to be able to do this (SQ002)	188	39.75%
I don't need to do this (SQ003)	168	35.52%
No answer	46	9.73%

Field summary for DOWITHWIFI(6)

OPTIONAL: What can you already do, and what would you like to be able to do with WiFi access at your workplace? [Order tests for patients]

Answer	Count	Percentage
I can do this already (SQ001)	77	16.28%
I want to be able to do this (SQ002)	146	30.87%
I don't need to do this (SQ003)	204	43.13%
No answer	46	9.73%

Field summary for DOWITHWIFI(7)

OPTIONAL: What can you already do, and what would you like to be able to do with WiFi access at your workplace? [Getting results of patients' tests]

Answer	Count	Percentage
I can do this already (SQ001)	111	23.47%
I want to be able to do this (SQ002)	156	32.98%
I don't need to do this (SQ003)	164	34.67%
No answer	42	8.88%

Field summary for DOWITHWIFI(8)

OPTIONAL: What can you already do, and what would you like to be able to do with WiFi access at your workplace? [Patients' demographic details & location tracking]

Answer	Count	Percentage
I can do this already (SQ001)	95	20.08%
I want to be able to do this (SQ002)	148	31.29%
I don't need to do this (SQ003)	188	39.75%
No answer	42	8.88%

Field summary for DOWITHWIFI(9)

OPTIONAL: What can you already do, and what would you like to be able to do with WiFi access at your workplace? [Social Media/Social Networking]

Answer	Count	Percentage
I can do this already (SQ001)	129	27.27%
I want to be able to do this (SQ002)	121	25.58%
I don't need to do this (SQ003)	187	39.53%
No answer	36	7.61%

Field summary for Q0009

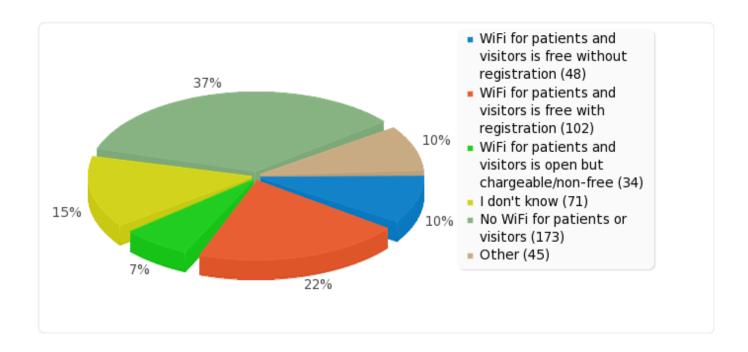
Which of the following best describes Patient/Visitor access to WiFi at your place of NHS work:

Answer	Count	Percentage
WiFi for patients and visitors is free without registration (1)	48	10.15%
WiFi for patients and visitors is free with registration (2)	102	21.56%
WiFi for patients and visitors is open but chargeable/non-free (3)	34	7.19%
I don't know (4)	71	15.01%
No WiFi for patients or visitors (5)	173	36.58%
Other	45	9.51%
No answer	0	0.00%

ID	Response
9	Not allowed
15	None
17	No wifi for patients/visitors
56	There's no WiFi
62	Not available trialling this
84	Not available for patients
95	No Wi-Fi available for patients.
112	Patients / visitors have no access - only staff in education centres
114	I am unaware of WiFi access for patients visitors
119	not available
1260	Currently being trialled
947	bullt 1 - chargeable at GP's, bullet 4 - free at our sites
136	WiFi only available for free in certain key areas e.g. dialysis suite, dining room.
140	WE have WiFi but don't who it's for
141	not available
161	No patient/visitor wifi
164	Nil
174	Wi-Fi is unavailable
916	WiFi is available for official visitors to the organisation
203	Free if in the restaurant. Non existant elsewhere. Being installed.
293	I believe wifi is available to patients off our N3 spine, quarantined from the staff system. I
	am not sure if it is charged
314	requires visitor to agree to t&c but is free
320	NONE
326	Not available
1542	Free for staff patients and visitors In Restaurant area only
1142	WiFi is available in certain parts of the hospital
545	Wifi in canteen only, no ward access
1121	Free WiFi available for visitors; patients don't use our building but would be restricted on some other parts of our site (2 forensic psychiatry facilities)
1117	Not relevant community trust
1111	Password but no patients in my place of work
1191	not a patient area
822	Access to my place of work is for NHS staff only.
1271	Wifi available for data - used by management and on some mobile carts.
1290	that I am aware of
1305	Pwifi, utterly useless
1317	Wifi present but unreliable and poor network
1334	Available for certain groups.
1344	Only certain wards have wifi access
1424	In the process of becoming free
1425	intermittent wifi for patients with registration
1457	Process of clinical ownership/suitability
1575	Presently none but free without registration coming soon

Field summary for Q0009

Which of the following best describes Patient/Visitor access to WiFi at your place of NHS work:



Field summary for POSTCODE

OPTIONAL: What is the postcode of the NHS organisation at which you do most of your work?

Answer	Count	Percentage
Answer	391	82.66%
No answer	82	17.34%
	-	
ID	Response	
1263	OX37LJ	
9	HU3	
1262	SO22 5DG	
13	so22 5dg	
14	RG30 4EJ	
15	SO30 3JB	
16	RG1	
17	PO30 5TG	
18	BH15 2JB	
19	SL2 4HL	
1237	Gu27xx	
998	WA3 3EG	
1238	RG1 5AN	
1239	PR6	
991	SL2 4HL	
1240	pr7	
1242	RG26	
1526	SW15 5PN	
1244	LE15WW	
1245	Gu2 7xx	
980	NE33XT	
1209	SE5 9RS	
1055	SL5 8AA	
62	LS12 3QE	
1247	HU3 2JZ	
1525	DT12JY	
67	CV22DX	
966	ne311at	
1523	NE7 7DN	
78	CM1 7ET	
1255	BT9 7JB	
84	IG38YB	
1256	RG24 9NA	
87	SO40 2RZ	
90	rg249na	
93	ch2 1ul	
94	OX4 4XN	
95	BT9 7AD	
96	BL4 0JR	
97	pl6 8dh	
100	rg24 9na	
102	L97LJ	
1257	SO22 5DG	
106	NR4 7UY	
956	SR4 7TP	
1258	rg24 9na	
954	SL2 4HL	
112	gl1 3nn	
114	BH15 2JB; BH7 7DW	
119	hx3 0pw	
124	IG3 8YB	
0.47		

947

ne15 8ny

404	NIDOO OLID
131	NP20 2UB
1004	TQ2 7AA
140	WC1N 3JH
141	w6 7bl
1006	W12 0HS
1007	Po6 3ly
1008	CW10 9BE
152	bh15
1010	m6 8hd
156	WV10 0QP
158	NW3 5BA
1012	LA2 7JP
161	DH15RD
165	BN21 2UD
1207	CH49 5PE
174	HA1 3UJ
922	NE3 3XT
177	Po30 5TG
1035	W2
1034	dd5
184	TQ7
917	LN2 2RS
187	g40sf
916	DH1 5TW DL3 6HX DH1 1TW
915	SL5 8AA
1032	Sk14 1jy
1031	pl68dh
1030	ST6
907	NE3 3XT
1205	TS4 3BW
203	EX31 4JB
204	SM5 1AA
1538	SE1 9RT
223	S60 2UD
227	SE18
232	SL2 4HL
1024	So16 6yd
235	rg1 5an
892	sl2 4hl
239	SP^3NL
884	bb9 7sr
882	SL24HL
1023	PR2 8DY
1022	Cb61dn
267	BS10 5NB
876	SL2 4HL
1021	bt41 2rl
1201	DE13 0RB
1200	rg1 5bs
1018	SL24HL
293	TS4 3AF
294	M13 9WL SL2 4HL
866	
865	LS2 9LN
1016	M13
1052	ne29 8NH
1051	sl2 4hl
1236	LS1 3EX
314	E9 6SR
320	EH40 3DP
321	LN2 5QY
323 324	PR2 9HT B15 2WB
324 326	TN24
1234	Ne1
1 4) 1	INCI

330	Ss00ry
332	CF and NP
335	de22 3lz
343	WF1 4DG
1228	cv2 2dx
345	ME16 9PH
351	M13 9WL
356	PR2
358	HR2 7RL
1582	PR2 9HT
365	WR5 1DD
377	BS4 5BJ
1225	dd2
1223	CM1 7ET
1220	dg14ap
1218	EN5 3DJ
407	B15 2Th
1217	Dn20 8gs
1216	EN5 3DJ
416	ca28 8jg
1213	sk11 6jl
1212	rg9
1211	Wc1n3jh
1210	RG1 5AN
1169	Se5 9rs
1166	Fy3 8nR
456	DN2 5LT
1163	NE63 9JJ
1162	ts4 3bw
1160	Wv100qp
1171	SS16 5NL
473	L7
1156	ha74lp
481	Me75ny
1153	st4 6ta
1175	SE5 7UD
1151	LS2 9LU
499	HU3 2JZ
1149	NN10 0AE
502	CM1 7ET
1177	PL14
1180	BD9 6RJ
1144	IP33 2QZ
1142	SS0 0RY
1141	PE30 4ET
1139	LS16 1PF
1138	MK42 9DJ
1181	SE18 4QH
545	Da2 8da
1136	WD18 0HB
1135	CO4 5JL
1134	CM20 1QX
1133	LU4
563	CM1 7ET
1132	CB21 5EZ
1182	L17 0BY
1127	WC1E 6EB
579	HU3 2JZ
586	b9 5pu
587	dh1 5tw
1126	DD9 7QA
1125	ne3 3xt
1124	FY1 6JX
1183	RG1 5AN
1122	LE3 9QP

1121	SO40 2RZ
1120	SL2 4HL
1119	st7
1116	L134aw
1115	EH16 4SA
1114	Ts4 3bw
1112	cf14 5du
1111	NE15
1184	RG1 5AN
1199	SW10 9NH
1104	SL2 4BL
1103	ba1
1578	BS23 4TQ
659	BA1 3NG
660	PO305TG
662	hu3
665	DE22 3NE
1101	ne3 3xt
671	DE223NE
672	Rh193dz
674	DN2 5LT
1098	BS2 8HW
679	BD20 6TD
1096	
	\$60 HAR
687	HA8
1094	SL2 4HL
1090	IP4 5PD
1197	NE11 9AD
1195	BS2 8HW
1579	PR8 6PN
1081	SL2 4HL
1079	SL2 4HL
1192	PR7 1PP
1191	rg15an
728	EH3
1076	M13 9WL
1075	SL2 4HL
1540	CV11
1072	M13 9WL
1070	SL2 4HL
1067	Tq2 7bz
764	hu3
1063	sl2 4hl
1062	sl4
783	SW9 9NT
1061	L7 8XP
1059	ws2
1057	wv10 0qp
1056	RG1 5AN
1049	OX3 7LE
1048	sl24hl
1047	pl6 8dh
820	Fy3 8nr
1188	sw17 Oqt
822	IG3 8XJ
1189	RG1 5AN
828	DE13 0RB
1043	SL24HL
1187	NE31 1AT
835	UB8 3NN
1038	PE21 9QS
1206	BS10 5NB
854	SL2 4HL
855	SE13 6Lh
1521	So41
1041	0071

1267	IP45PD
1268	RG1 5AN
1269	EC1A
1270	RG24 9NA
1271	SA612PZ
1272	NW3 2QG
1275	RG1 5AN
1276	Ls1 3EX
1277	CO45JL
1278	b15 2wb
1520	TR1 3LJ
1281	RG1 5AN
1519	KT6 6EZ
1284	W12 0HS
1285	SO22 5DG
1286	BN2 5BE
1288	Ne1 4lp
1289	OX2 9DU
1290	co5 4jl
1293	IL57 2pw
1294	PE3 9GZ
	II13 7td
1297	
1298	Colchester
1300	DH1 5TW
1301	NE1
1302	ST16 3SA
1303	Se5
1304	EH16 4SA
1305	G51 4tf
1307	James Paget Hospitals NHS trust
1513	SP2 7FD
1310	B15 2WB
1311	se5
1315	F11BB
1315	E11BB
1318	mk65ld
1318 1320	mk65ld BD20
1318 1320 1321	mk65ld BD20 G81 4DY
1318 1320	mk65ld BD20
1318 1320 1321	mk65ld BD20 G81 4DY BS10 5NB
1318 1320 1321 1323 1324	mk65ld BD20 G81 4DY BS10 5NB St46qg
1318 1320 1321 1323 1324 1325	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF
1318 1320 1321 1323 1324 1325 1326	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz
1318 1320 1321 1323 1324 1325 1326 1327	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD
1318 1320 1321 1323 1324 1325 1326 1327 1330	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP
1318 1320 1321 1323 1324 1325 1326 1327 1330 1329	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP Ca2 7hy
1318 1320 1321 1323 1324 1325 1326 1327 1330	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP
1318 1320 1321 1323 1324 1325 1326 1327 1330 1329 1332	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP Ca2 7hy GL1 3NN
1318 1320 1321 1323 1324 1325 1326 1327 1330 1329 1332	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP Ca2 7hy GL1 3NN SK2 7JE
1318 1320 1321 1323 1324 1325 1326 1327 1330 1329 1332 1333 1334	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP Ca2 7hy GL1 3NN SK2 7JE SO16
1318 1320 1321 1323 1324 1325 1326 1327 1330 1329 1332 1333 1334 1335	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP Ca2 7hy GL1 3NN SK2 7JE SO16 bh7 7dw
1318 1320 1321 1323 1324 1325 1326 1327 1330 1329 1332 1333 1334 1335 1508	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP Ca2 7hy GL1 3NN SK2 7JE SO16 bh7 7dw NE2
1318 1320 1321 1323 1324 1325 1326 1327 1330 1329 1332 1333 1334 1335 1508 1337	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP Ca2 7hy GL1 3NN SK2 7JE SO16 bh7 7dw NE2 cv34 5bw
1318 1320 1321 1323 1324 1325 1326 1327 1330 1329 1332 1333 1334 1335 1508	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP Ca2 7hy GL1 3NN SK2 7JE SO16 bh7 7dw NE2
1318 1320 1321 1323 1324 1325 1326 1327 1330 1329 1332 1333 1334 1335 1508 1337	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP Ca2 7hy GL1 3NN SK2 7JE SO16 bh7 7dw NE2 cv34 5bw SE1 9RT
1318 1320 1321 1323 1324 1325 1326 1327 1330 1329 1332 1333 1334 1335 1508 1337 1338 1339	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP Ca2 7hy GL1 3NN SK2 7JE SO16 bh7 7dw NE2 cv34 5bw SE1 9RT B18 7qh
1318 1320 1321 1323 1324 1325 1326 1327 1330 1329 1332 1333 1334 1335 1508 1337 1338 1339 1342	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP Ca2 7hy GL1 3NN SK2 7JE SO16 bh7 7dw NE2 cv34 5bw SE1 9RT B18 7qh S60 2UD
1318 1320 1321 1323 1324 1325 1326 1327 1330 1329 1332 1333 1334 1335 1508 1337 1338 1339 1342 1343	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP Ca2 7hy GL1 3NN SK2 7JE SO16 bh7 7dw NE2 cv34 5bw SE1 9RT B18 7qh S60 2UD B4 6NH
1318 1320 1321 1323 1324 1325 1326 1327 1330 1329 1332 1333 1334 1335 1508 1337 1338 1339 1342 1343 1344	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP Ca2 7hy GL1 3NN SK2 7JE SO16 bh7 7dw NE2 cv34 5bw SE1 9RT B18 7qh S60 2UD B4 6NH SP2
1318 1320 1321 1323 1324 1325 1326 1327 1330 1329 1332 1333 1334 1335 1508 1337 1338 1339 1342 1343 1344 1345	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP Ca2 7hy GL1 3NN SK2 7JE SO16 bh7 7dw NE2 cv34 5bw SE1 9RT B18 7qh S60 2UD B4 6NH SP2 NG7 2UH
1318 1320 1321 1323 1324 1325 1326 1327 1330 1329 1332 1333 1334 1335 1508 1337 1338 1339 1342 1343 1344 1345 1506	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP Ca2 7hy GL1 3NN SK2 7JE SO16 bh7 7dw NE2 cv34 5bw SE1 9RT B18 7qh S60 2UD B4 6NH SP2 NG7 2UH M60 9ah
1318 1320 1321 1323 1324 1325 1326 1327 1330 1329 1332 1333 1334 1335 1508 1337 1338 1339 1342 1343 1344 1345	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP Ca2 7hy GL1 3NN SK2 7JE SO16 bh7 7dw NE2 cv34 5bw SE1 9RT B18 7qh S60 2UD B4 6NH SP2 NG7 2UH
1318 1320 1321 1323 1324 1325 1326 1327 1330 1329 1332 1333 1334 1335 1508 1337 1338 1339 1342 1343 1344 1345 1506 1347	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP Ca2 7hy GL1 3NN SK2 7JE SO16 bh7 7dw NE2 cv34 5bw SE1 9RT B18 7qh S60 2UD B4 6NH SP2 NG7 2UH M60 9ah BL0 0QH
1318 1320 1321 1323 1324 1325 1326 1327 1330 1329 1332 1333 1334 1335 1508 1337 1338 1339 1342 1343 1344 1345 1506 1347 1348	mk65Id BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP Ca2 7hy GL1 3NN SK2 7JE SO16 bh7 7dw NE2 cv34 5bw SE1 9RT B18 7qh S60 2UD B4 6NH SP2 NG7 2UH M60 9ah BL0 0QH different sites souteast London
1318 1320 1321 1323 1324 1325 1326 1327 1330 1329 1332 1333 1334 1335 1508 1337 1338 1339 1342 1343 1344 1345 1506 1347 1348 1350	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP Ca2 7hy GL1 3NN SK2 7JE SO16 bh7 7dw NE2 cv34 5bw SE1 9RT B18 7qh S60 2UD B4 6NH SP2 NG7 2UH M60 9ah BL0 0QH different sites souteast London RG1 5AN
1318 1320 1321 1323 1324 1325 1326 1327 1330 1329 1332 1333 1334 1335 1508 1337 1338 1339 1342 1343 1344 1345 1506 1347 1348 1350 1351	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP Ca2 7hy GL1 3NN SK2 7JE SO16 bh7 7dw NE2 cv34 5bw SE1 9RT B18 7qh S60 2UD B4 6NH SP2 NG7 2UH M60 9ah BL0 0QH different sites souteast London RG1 5AN Bn213qj
1318 1320 1321 1323 1324 1325 1326 1327 1330 1329 1332 1333 1334 1335 1508 1337 1338 1339 1342 1343 1344 1345 1506 1347 1348 1350 1351 1352	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP Ca2 7hy GL1 3NN SK2 7JE SO16 bh7 7dw NE2 cv34 5bw SE1 9RT B18 7qh S60 2UD B4 6NH SP2 NG7 2UH M60 9ah BL0 0QH different sites souteast London RG1 5AN Bn213qj RG24 9NA
1318 1320 1321 1323 1324 1325 1326 1327 1330 1329 1332 1333 1334 1335 1508 1337 1338 1339 1342 1343 1344 1345 1506 1347 1348 1350 1351 1352 1353	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP Ca2 7hy GL1 3NN SK2 7JE SO16 bh7 7dw NE2 cv34 5bw SE1 9RT B18 7qh S60 2UD B4 6NH SP2 NG7 2UH M60 9ah BL0 0QH different sites souteast London RG1 5AN Bn213qi RG24 9NA BL5 3UB
1318 1320 1321 1323 1324 1325 1326 1327 1330 1329 1332 1333 1334 1335 1508 1337 1338 1339 1342 1343 1344 1345 1506 1347 1348 1350 1351 1352 1353 1354	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP Ca2 7hy GL1 3NN SK2 7JE SO16 bh7 7dw NE2 cv34 5bw SE1 9RT B18 7qh S60 2UD B4 6NH SP2 NG7 2UH M60 9ah BL0 0QH different sites souteast London RG1 5AN Bn213qj RG24 9NA BL5 3UB NR6 5BE
1318 1320 1321 1323 1324 1325 1326 1327 1330 1329 1332 1333 1334 1335 1508 1337 1338 1339 1342 1343 1344 1345 1506 1347 1348 1350 1351 1352 1353	mk65ld BD20 G81 4DY BS10 5NB St46qg LA14 4LF nn16 8uz LL13 7TD NE1 4LP Ca2 7hy GL1 3NN SK2 7JE SO16 bh7 7dw NE2 cv34 5bw SE1 9RT B18 7qh S60 2UD B4 6NH SP2 NG7 2UH M60 9ah BL0 0QH different sites souteast London RG1 5AN Bn213qi RG24 9NA BL5 3UB

4505	10.7-1
1505 1358	I9 7al TN2 4QJ
1359	nr4 7uy
1361	Bn21 2ud
1362	BA21 4AT
1503	Wa10idh
1366	bs23 4tq
1501	ol1 6rj
1372	ME8 0QG
1375	S022 6PS
1377	EN5 3DJ
1498	BS34 6BQ
1380	Se5 8az
1384	B71 4HJ
1388	WA2 8WA
1496	CF14 4XW
1393 1394	EX2 5DW BT16 1RH
1396	SE1
1397	OL6 9RW
1398	pl68dh
1400	RH1 5RH
1401	RH2 8HS
1493	s10 2th
1406	so22 5dg
1405	RH15RH
1408	la9 7rg
1409	RH1
1410	CV2 2DX
1411	Bt23 4as
1492	ST46QG
1415 1418	CV2 2DX CV2 2DX
1419	CV2 2DX
1420	Ls1 3ex
1421	RH1 5RH
1422	Dn33
1424	CV2 2DX
1425	cv2 2dx
1426	Cv2 2dx
1427	G42 9TY
1428	Cv10 7jd
1490	BT161RH
1431	rm7 0ag
1432	TR1 3LJ
1434 1435	RH1 5RH CV2 2DX
1489	BN21 3QJ
1437	s10 2th
1438	co3 3nb
1439	nottingham
1440	RH1 5RH
1442	RG1 5AN
1443	LS1 6AE
1448	So15 7qw
1449	RG1 5AN
1486	gu2 7xx
1451	NE29 8NH
1485	pr8 6pn
1484	AB25 2ZN
1457 1458	S10 3TH Se13 6lf
1459	ST16 3SR
1461	CF37 3BW
1467	RH1 5RH

1468	GU2 7XX
1477	GU2 7XX
1471	GU27XX
1476	ls13ex
1474	GU2 7xx
1576	ne28 6bb
1550	WV10 0QP
1553	S75 5AE
1556	SW36NP
1558	se1 9rt
1562	GL53 7AN
1565	E9 6SR
1594	DA5 1HU
1605	Eh221jp

Field summary for COMMENTS

OPTIONAL: do you have any comments on WiFi access for staff or patients in the NHS?

Answer	Count	Percentage
Answer	171	36.15%
No answer	302	63.85%

ID	Response
1263	Currently un-secure access therefore warning comes up at every log in - does restrict what information I will access
13	Trust wifi access must be with a trust device and our IT team are slow to offer advice about what devices they will support so we gave up and once the patient wifi came along we decided to have devices which we connect to the patient wifi as it was simpler and didn't involve IT team!
14	It would be useful to have access to WiFi so that I can demon
15	I think for patients it would be good
19	The most important thing to say about the Trust's WiFi is that it is a strong but slow signal and therefore my mobile device automatically disconnects whenever it runs too slowly (i.e. it disconnects frequently)
1244	WiFi should be free to all
1055	Although I do have access to WiFi at work, it is incredibly slow!
1523	Wifi is very expensive and very difficult to attain for patients. Staff and patients should be able to access Wifi free anytime and anywhere within the NHS.
1055	If the local traders and McDonalds can supply Wifi free why can't the NHS
1255 95	It would improve effiency We need it, likeuhm5 years ago! Please enter the 21st Century with the rest of
	mankind! (note to my Trust).
98	It should definitely be free. Being in hospital can be terribly lonely and boring. Free WiFi can go a small way to improving the patient experience and improving quality of life for in-patients.
106	It should be free for staff and patients alike. It enables everyone to feel connected to the rest of the world, access up to date info (even if it's only the travel/weather situation).
956	Hi Strcitly speaking we can do al,ot of the above on obile laptops on the wards, which use wifi
	However, i have answered no - meaning that I would like to be bale to do much more with wifi woith a more mobile devive such as a tablet or blackberry etc
112	There is a project going on in the Trust at the moment to bring in free wifi for staff, visitors and patients. People have come to expect free wifi everywhere these days.
114	There is an expectation from new professionals that there should be free WiFi at least in the library if not across the whole Trust. Lack of WiFi now severley hinders how we can go about providing access to the evidence base. We pay thousands for high quality electronic resources that due to lack of WiFi most staff can't access. (Responses relate to two hospital sites as we are a cross Trust service)
119	WiFi is installed throughout the hospital and has been ready for use for over a year but has not been enabled.
1260	The NHS needs all the advantages it can get in trying to maintain a high standard of care. In the modern climate, this needs to include effective communication across a broad range of channels - online communication in all its forms is increasingly important. Lack of access to what is now fairly basic technology is an essential part of ensuring that all channels of communication are as accessible as possible.
136	I am really keen on ensuring good WiFi network coverage for clinical use. We have wifi phones and other wireless devices but there are still occasional issues with the science of WiFi. You can tell and show me that ward areas have good coverage but I can demo that I lose it regularly in certain areas. Newer technologies will no doubt help but the wireless bands are increasingly being used by more devices. So for me clinical use with provided

	devices is first priority.
	I probably belong in the cynical camp - if I have medical colleagues on the ward then I want
	them looking at the patient not their emails during a ward round. My anaesthetic colleagues
	- I do not want them looking at their emails, scanning the internet or completing mandatory
	training while responsible for a patient in theatre.
140	WiFi shoudl be freely available to staff and visitors
1006	Near universally terrible. Would be great to have more accessible and available WiFi.
1010	Free wifi access should be available for all staff, patients and visitors.
1208	If WiFi were available in every hospital for staff there are a lot of extra services that could
	be used that would enhance clinical work and patient care.
156	There are two WiFi systems in use; an ecrypted system that staff can access with
	permission and an open system for patients. However staff do not have access to the open
	system for personal e-mails or social media access. This system is alo limited in its
4040	geographical availability on the hospital site.
1012	The need for WiFi access is role and location dependent. Like anything else there must be
	a reasonable business case. Where the business case is satisfactory WiFi access should
404	be available.
161	If it is offered it has to be strong, reliable, and thoroughly tested for 'dead spots'. Just
	having wifi doesn't mean that everyone can use it - and a weak signal is sometimes worse
1207	than no signal at all. I am office based and have Internet access from my desktop, which I use most of the time.
1207	My Trust has trialled BYOD tablet access to the main hospital network, which I have used,
	as well as offering staff/patients/visitors free WiFi access. When I go to an MDT at a
	neighbouring trust, WiFi access from my laptop/tablet is impossible (or so I have been
	told).
174	Wi-Fi in my Trust is restricted to those with Trust-allocated devices which are few in
177	number. Actual coverage is good, though slow at times. Many healthcare professionals
	and students of various types want to legitimately use Wi-Fi but cannot. Similarly, it is not
	unreasonable for patients, who may be in hospital for some time, to be able to use their
	own laptops.
177	We havew free WiFi in the hospital for staff, but it is very unreliable - you keep losing the
	internet while on web-pages.
907	Survey shoul not just be about place of work - most of our staff are community based -
	access to Wifi is as important for them
203	WiFi has been a long time coming. But it is being delivered by an excellent band of network
	people and outside contractors. They are giving it a good shot and are doing well.
903	Wifi access is a great thing but connectivity needs to be good too
1024	We used to be able to get wifi access for patients in the hospital. This was enormously
	helpful for those with complex problems or people who were staying in for a long time.
	For pain management we used to be able to access them various apps and tools that
	would help them in hospital . This was stopped over fears of security. We know can't help
	people with their difficult to manage pain nearly as well.
892	the signal is not strong enough to cover all areas of the hospital site. This must improve if
	our employers want us to improve care.
884	I see the biggest benefit being the opportunity to promote self care and recruit patients to
	the concept that they can play a more active roll in managing their long term condition . We
	have lots of health info available online. Wouldnt it be so much easier to give an
	information prescription if the patient could access the info whilst they are in the GP
000	surgery ? @stuartberry1
882	Staff and patients both benefit from it.
1023	If I was a patient I would put access to a reliable WiFi as very important. Being able to
	access my email and communicate with the outside world would aid my recovery. Also hospitals have a reputation for long waits in out patients, to be able to access WiFi would
	mean that waiting time was not wasted time
1022	This just for my patients in my clinic, not the whole hospital, i pay for a Bt broadband
1022	connection, it's not provided by my employer, but it means my own team are all connected,
	and my patients too
1021	extends connectivity using personal devices at low cost but security could be a problem.
1201	patients often comment that they would like free wifi
293	The wifi should be provided away from N3 networks which are already overused. A private
	supplier should be chosen with free access to staff, visitors, patients and placement
	students. If a supplier such as BT (with btfon) or the Cloud were to be chosen users would
	already have logins which would facilitate use of the resources and may allow a reduction
	in provision costs.
866	There are two WiFi networks at this hospital: free open-access "visitor" network which

anyone can log on to. And closed hospital network giving access to patient details, password protected only accessible from a Trust supplied device. Therefore questions above are bit difficult to answer Access is becoming an expectation particularly for younger patients and new staff or students on placement who take it as a given within the Higher education environment. As usual the NHS is lagging behind but needs to catch up now. Not sure what your questionnaire is trying to get at. Are you looking for the ability of staff to do their tesco shop whilst at work or to have agile access to the apps they need where they need them it is a confusing and poorly structured sure; 1016 Should be for everyone. Mc Donald's and Starbucks have free wift for all Next step nhs Paper free campaign could certain be progressed if wiff implemented fully. Using patient related programs or apps could improve efficiency and patient care 11 tend to feet the lack of Wiff access most keenly when presenting in my own department, travelling to present in others or hosting speakers from other areas. Transferring data from PC to PC and inbox to inbox etc. would be much easier if WiFi access were a little more widespread. As a consultant I have been issued a laptop with wifi access. But it is huge and too big to carry around. My phone in my pocket is far superior but not allowed to connect to wifi. And via mobile it is very slow and not connected to the clinical networks 332 Both Free Internet and Work Intranet need to be made available in all areas of the NHS-Wales and other NHS orhanisations in all their estates. Nothing worse than these made available in some and not others. Also mobile workers need Extremely good WiFi connection especially in country rural areas. This is over and above NHS and is a UK Government/Regional responsibility. Speed for all connections is especially important. Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. WiFi is needed with		
above are bit difficult to answer Access is becoming an expectation particularly for younger patients and new staff or students on placement who take it as a given within the Higher education environment. As usual the NHS is lagging behind but needs to eatch up now. Not sure what your questionnaire is trying to get at. Are you looking for the ability of staff to do their tesco shop whilst at work or to have agile access to the apps they need where they need them it is a confusing and poorly structured survey 1016 Should be for everyone. Mc Donalds and Starbucks have free wiff for all Next step nins Paper free campaign could certain be progressed if wiff implemented fully. Using patient related programs or apps could improve efficiency and patient care Free wi-fi is only available in certain areas of the hospital 1 tend to feel the lack of WHF access most keenly when presenting in my own department, travelling to present in others or hosting speakers from other areas. Transferring data from PC to PC and inbox to inbox etc. would be much easier if WiFi access were a little more widespread. Apparently wiff is coming in 6 months. 326 Apparently wiff is coming in 6 months. 327 As a consultant I have been issued a laptop with wiff access. But it is huge and too big to carry around. My ophone in my pocket is far superior but not allowed to connect to wiff. And via mobile it is very slow and not connected to the clinical networks 328 Both Free Internet and Work Intranet need to be made available in all areas of the NHS-Waleas and other NHS ofmanisations in all their estates. Nothing worse than these made available in some and not others. Also mobile workers need Extremely good WiFi connection especially in country rural areas. This is over and above NHS and is a UK Government/Regional responsibility. Speed for all connections is especially important. Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. Access to WHF can be difficult at times b		
students on placement who take it as a given within the Higher education environment. As usual the NHS is lagging behind but needs to catch up now. Are you looking for the ability of staff to do their tesco shop whilst at work or to have agile access to the apps they need where they need them it is a confusing and poorly structured survey. Should be for everyone. Mc Donald's and Starbucks have free wift for all Next step rins Paper free campaign could certain be progressed if will implemented fully. Using patient related programs or apps could improve efficiency and patient care Free wif-li is only available in certain areas of the hospital 1 tend to feel the lack of Wiff access most keenly when presenting in my own department, travelling to present in others or hosting speakers from other areas. Transferring data from PC to PC and inbox to inbox etc. would be much easier if WiFi access were a little more widespread. Apparently wiff is coming in 6 months 236 Apparently wiff is coming in 6 months 337 As a consultant I have been issued a laptop with wifi access. But it is huge and too big to carry around. My phone in my pocket is far superior but not allowed to connect to wifi. And via mobile it is very slow and not connected to the clinical networks Both Free Internet and Work Intranet need to be made available in all areas of the NHS-Wales and other NHS orhanisations in all their estates. Nothing worse than these made available in some and not others. Also mobile workers need Extremely good WiFi connection especially in country rural areas. This is over and above NHS and is a UK Government/Regional responsibility. Speed for all connections is especially important. Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. Access to WIFI can be difficult at times but we understand improvements are underway. WiFi is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social m		
usual the NHS is lagging behind but needs to catch up now. Not sure what your questionnaire is trying to get at. Are you looking for the ability of staff to do their tesco shop whilst at work or to have agile access to the apps they need where they need them it is a confusing and poorly structured survey Should be for everyone. Mc Donald's and Starbucks have free wifi for all Next step nts Paper free campaign could certain be progressed if wifi implemented fully. Using patient related programs or apps could improve efficiency and patient care Free wi-fi is only available in certain areas of the hospital stravelling to present in others or hosting speakers from other areas. Transferring data from PC to PC and inbox to inbox etc. would be much easier if WiFi access were a little more widespread. Apparently wifi is coming in 6 months As a consultant I have been issued a laptop with wifi access. But it is huge and too big to carry around. My phone in my pocket is far superior but not allowed to connect to wiff. And via mobile it is very slow and not connected to the clinical networks Both Free Internet and Work Intranet need to be made available in all areas of the NHS-Wales and other NHS orhanisations in all their estates. Nothing worse than these made available in some and not others. Also mobile workers need Extremely good WiFi connection especially in country rural areas. This is over and above NHS and is a UK Goverment/Regional responsibility. Speed for all connections is especially important. Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. Access to WIFI can be difficult at times but we understand improvements are underway. WiFi is needed with sufficient bandwidth for it to be usable for patients to Stype (etc.) with family and friends, use social media, and maintain the same regime as when at home. This is particularly important to these require WiFi necessality but WiFi makes life so much easier and more practical than w	865	Access is becoming an expectation particularly for younger patients and new staff or
Not sure what your questionnaire is trying to get at. Are you tooking for the ability of staff to do their tesco shop whilst at work or to have agile access to the apps they need where they need them it is a confusing and poorly structured survey Should be for everyone. Mc Donald's and Starbucks have free wifi for all Next step nhs Paper free campaign could certain be progressed if wifi implemented fully. Using patient related programs or apps could improve efficiency and patient care 114 Free wi-fi is only available in certain areas of the hospital 115 Itend to feet the lack of WFI access most keenly when presenting in my own department, travelling to present in others or hosting speakers from other areas. Transferring data from PC to PC and inbox to inbox etc. would be much easier if WiFi access were a little more widespread. 126 Apparently wifi is coming in 6 months 127 As a consultant I have been issued a laptop with wifi access. But it is huge and too big to carry around. My phone in my pocket is far superior but not allowed to connect to wifi. And via mobile it is very slow and not connected to the clinical networks 127 Both Free Internet and Work Intranet need to be made available in all areas of the NHS-Wales and other NHS orhanisations in all their estates. Nothing worse than these made available in some and not others. Also mobile workers need Extremely good WiFi connection especially in country rural areas. This is over and above NHS and is a UK Goverment/Regional responsibility. Speed for all connections is especially important. 138 Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. 139 Access to WiFI can be difficult at times but we understand improvements are underway. WiFi is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social media, and maintain the same regime as when at home. This is particularly important for patients needing to stay for extended		
Are you looking for the ability of staff to do their tesco shop whilst at work or to have agile access to the apsp they need where they need them it is a confusing and poorly structured survey Should be for everyone. Mc Donald's and Starbucks have free wifi for all Next step nhs Paper free campaign could certain be progressed if wifi implemented fully. Using patient related programs or apps could improve efficiency and patient care Free W-H is only available in certain areas of the hospital 11 tend to feel the lack of WiFi access most keenly when presenting in my own department, travelling to present in others or hosting speakers from other areas. Transferring data from PC to PC and inbox to inbox etc. would be much easier if WiFi access were a little more widespread. Apparently wifi is coming in 6 months As a consultant I have been issued a laptop with wifi access. But it is huge and too big to carry around. My phone in my pocket is far superior but not allowed to connect to wifi. And via mobile it is very slow and not connected to the clinical networks Both Free Internet and Work Intranet need to be made available in all areas of the NHS-Wales and other NHS orhanisations in all their estates. Nothing worse than these made available in some and not others. Also mobile workers need Extremely good WiFi connection especially in country rural areas. This is over and above NHS and is a UK Government/Regional responsibility. Speed for all connections is especially important. Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. Access to WiFI can be difficult at times but we understand improvements are underway. WiFi is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social media, and maintain the same regime as when at home. This is particularly important for patients needing to stay for extended periods or who have been detained (mental health) and recovering from being	004	· ·
access to the apps they need where they need them it is a confusing and poorly structured survey 1016 Should be for everyone. Mc Donald's and Starbucks have free wifi for all Next step rihs Paper free campaign could certain be progressed if wifi implemented fully. Using patient related programs or apps could improve efficiency and patient care 114 Free wi-fi is only available in certain areas of the hospital 115 I tend to feel the lack of WiFi access most keenly when presenting in my own department, travelling to present in others or hosting speakers from other areas. Transferring data from PC to PC and inbox to inbox etc. would be much easier if WiFi access were a little more widespread. 115 Apa a consultant have been issued a laptop with wifi access. But it is huge and too big to carry around. My phone in my pocket is far superior but not allowed to connect to wifi. And via mobile it is very slow and not connected to the clinical networks. 115 Both Free Internet and Work Intranet need to be made available in all areas of the NHS-Wales and other NHS orhanisations in all their estates. Nothing worse than these made available in some and not others. Also mobile workers need Extremely good WiFi connection especially in country rural areas. This is over and above NHS and is a UK Goverment/Regional responsibility. 116 Speed for all connections is especially important. 117 Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. 118 Access to WiFi can be difficult at times but we understand improvements are underway. WiFi is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social media, and maintain the same regime as when at home. This is particularly important for patients needing to stay for extended periods or who have been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more lieshiph these days, the boundarise between work	864	
tit is a confusing and poorly structured survey Should be for everyone. Mc Donald's and Starbucks have free wifi for all Next step nhs Paper free campaign could certain be progressed if wifi implemented fully. Using patient related programs or apps could improve efficiency and patient care Free wi-fi is only available in certain rease of the hospital 314 Free wi-fi is only available in certain rease of the hospital 325 I tend to feel the lack of WiFi access most keenly when presenting in my own department, travelling to present in others or hosting speakers from other areas. Transferring data from PC to PC and inbox to inbox etc. would be much easier if WiFi access were a little more widespread. Apparently wifi is coming in 6 months As a consultant I have been issued a laptop with wifi access. But it is huge and too big to carry around. My phone in my pocket is far superior but not allowed to connect to wifi. And via mobile it is very slow and not connected to the clinical networks Both Free Internet and Work Intranet need to be made available in all areas of the NHS-Wales and other NHS orhanisations in all their estates. Nothing worse than these made available in some and not others. Also mobile workers need Extremely good WiFi connection especially in country rural areas. This is over and above NHS and is a UK Government/Regional responsibility. Speed for all connections is especially important. Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. Access to WiFi can be difficult at times but we understand improvements are underway. WiFi is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social media, and maintain the same regime as when at home. This is particularly important for patients needing to stay for extended periods or who have been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more flexibly these days,		
Should be for everyone. Mc Donald's and Starbucks have free wifi for all Next step nhs Paper free campaign could certain be progressed if wifi implemented fully. Using patient related programs or apps could improve efficiency and patient care Free wi-fi is only available in certain areas of the hospital I tend to feel the lack of WiFi access most keenly when presenting in my own department, travelling to present in others or hosting speakers from other areas. Transferring data from PC to PC and inbox to inbox etc. would be much easier if WiFi access were a little more widespread. Apparently wifi is coming in 6 months As a constitutant I have been issued a laptop with wifi access. But it is huge and too big to carry around. My phone in my pocket is far superior but not allowed to connect to wifi. And via mobile it is very slow and not connected to the clinical networks. Both Free Internet and Work Intranet need to be made available in all areas of the NHS-Wales and other NHS orhanisations in all their estates. Nothing worse than these made available in some and not others. Also mobile workers need Extremely good WiFi connection especially in country rural areas. This is over and above NHS and is a UK Governmen/Regional responsibility. Speed for all connections is especially important. Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. Access to WiFi can be difficult at times but we understand improvements are underway. WiFi is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social media, and maintain the same regime as when at home. This is particularly important for patients needing to stay for extended periods or who have been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more flexibly these days, the boundaries between work and home become more blurred and we should seriously consider options for work/home int		
Paper free campaign could certain be progressed if wifi implemented fully. Using patient related programs or apps could improve efficiency and patient care Free wi-fl is only available in certain areas of the hospital 1 tend to feel the lack of WiFi access most keenly when presenting in my own department, travelling to present in others or hosting speakers from other areas. Transferring data from PC to PC and inbox to inbox etc. would be much easier if WiFi access were a little more widespread. 326 Apparently wifi is coming in 6 months As a consultant I have been issued a laptop with wifi access. But it is huge and too big to carry around. My phone in my pocket is far superior but not allowed to connect to wifi. And via mobile it is very slow and not connected to the clinical networks. 332 Both Free Internet and Work Intranet need to be made available in all areas of the NHS-Wales and other NHS orhanisations in all their estates. Nothing worse than these made available in some and not others. Also mobile workers need Extremely good WiFi connection especially in country rural areas. This is over and above NHS and is a UK Governent/Regional responsibility. Speed for all connections is especially important. Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. 433 Access to WiFI can be difficult at times but we understand improvements are underway. WiFi is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social media, and maintain the same regime as when at home. This is particularly important for patients needing to stay for extended periods or who have been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more flexibly these days, the boundaries between work and home become more blurred and we should seriously consider options for workfhome integration as part of the work/home balance. Again, the ability to maintain da	1016	
related programs or apps could improve efficiency and patient care Free wi-fi is only available in certain areas of the hospital I tend to feel the lack of WiFi access most keenly when presenting in my own department, travelling to present in others or hosting speakers from other areas. Transferring data from PC to PC and inbox to inbox etc. would be much easier if WiFi access were a little more widespread. Apparently wifi is coming in 6 months Aparently wifi is coming in 6 months As a consultant I have been issued a laptop with wifi access. But it is huge and too big to carry around. My phone in my pocket is far superior but not allowed to connect to wifi. And via mobile it is very slow and not connected to the clinical networks. Both Free Internet and Work Intranet need to be made available in all areas of the NHS-Wales and other NHS orhanisations in all their estates. Nothing worse than these made available in some and not others. Also mobile workers need Extremely good WiFi connection especially in country rural areas. This is over and above NHS and is a UK Goverment/Regional responsibility. Speed for all connections is especially important. Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. Access to WiFl can be difficult at times but we understand improvements are underway. WiFi is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social media, and maintain the same regime as when at home. This is particularly important for patients needing to stay for extended periods or who have been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more flexibly these days, the boundaries between work and home become more blurred and we should seriously consider options for work/home integration as part of the work/home balance. Again, the ability to maintain daily living activities becomes important. Neither of these requ		Next step nhs
related programs or apps could improve efficiency and patient care Free wi-fi is only available in certain areas of the hospital I tend to feel the lack of WiFi access most keenly when presenting in my own department, travelling to present in others or hosting speakers from other areas. Transferring data from PC to PC and inbox to inbox etc. would be much easier if WiFi access were a little more widespread. Apparently wifi is coming in 6 months Aparently wifi is coming in 6 months As a consultant I have been issued a laptop with wifi access. But it is huge and too big to carry around. My phone in my pocket is far superior but not allowed to connect to wifi. And via mobile it is very slow and not connected to the clinical networks. Both Free Internet and Work Intranet need to be made available in all areas of the NHS-Wales and other NHS orhanisations in all their estates. Nothing worse than these made available in some and not others. Also mobile workers need Extremely good WiFi connection especially in country rural areas. This is over and above NHS and is a UK Goverment/Regional responsibility. Speed for all connections is especially important. Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. Access to WiFl can be difficult at times but we understand improvements are underway. WiFi is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social media, and maintain the same regime as when at home. This is particularly important for patients needing to stay for extended periods or who have been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more flexibly these days, the boundaries between work and home become more blurred and we should seriously consider options for work/home integration as part of the work/home balance. Again, the ability to maintain daily living activities becomes important. Neither of these requ		
1323 I tend to feel the lack of WiFi access most keenly when presenting in my own department, travelling to present in others or hosting speakers from other areas. Transferring data from PC to PC and inbox to inbox etc. would be much easier if WiFi access were a little more widespread. 326 Apparently wifi is coming in 6 months 327 Aparently wifi is coming in 6 months 328 Aparently wifi is coming in 6 months 329 Aparently wifi is coming in 6 months 330 As a consultant I have been issued a laptop with wifi access. But it is huge and too big to carry around. My phone in my pocket is far superior but not allowed to connect to wifi. And via mobile it is very slow and not connected to the clinical networks. 332 Both Free Internet and Work Intranet need to be made available in all areas of the NHS-Wales and other NHS orhanisations in all their estates. Nothing worse than these made available in all areas of the NHS-Wales and other NHS orhanisations in all their estates. Nothing worse than these made available in some and not others. Also mobile workers need Extremely good WiFi connection especially in country rural areas. This is over and above NHS and is a UK Governmert/Regional responsibility. 340 Speed for all connections is especially important. 341 Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. 342 Access to WiFI can be difficult at times but we understand improvements are underway. 343 WiFI is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social media, and maintain the same regime as when at home. 344 This is particularly important for patients needing to stay for extended periods or who have been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more flexibly these days, the boundaries between work and the work of th		
I lend to feel the lack of WiFi access most keenly when presenting in my own department, travelling to present in others or hosting speakers from other areas. Transferring data from PC to PC and inbox to inbox etc. would be much easier if WiFi access were a little more widespread. Apparently wifi is coming in 6 months As a consultant I have been issued a laptop with wifi access. But it is huge and too big to carry around. My phone in my pocket is far superior but not allowed to connect to wifi. And via mobile it is very slow and not connected to the clinical networks Both Free Internet and Work Intranet need to be made available in all areas of the NHS-Wales and other NHS orhanisations in all their estates. Nothing worse than these made available in some and not others. Also mobile workers need Extremely good WiFi connection especially in country rural areas. This is over and above NHS and is a UK Goverment/Regional responsibility. Speed for all connections is especially important. Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. Access to WiFi can be difficult at times but we understand improvements are underway. WiFi is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social media, and maintain the same regime as when at home. This is particularly important for patients needing to stay for extended periods or who have been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more flexibly these days, the boundaries between work and home become more blurred and we should seriously consider options for work/home integration as part of the work/home balance. Again, the ability to maintain daily living activities becomes important. Neither of these require WiFi necessarily but WiFi makes life so much easier and more practical than wired connections - particularly on wards and when using BYOD devices. WiFi is needed to su	314	
travelling to present in others or hosting speakers from other areas. Transferring data from PC to PC and inbox to inbox etc. would be much easier if WiFi access were a little more widespread. Apparently wifi is coming in 6 months As a consultant I have been issued a laptop with wifi access. But it is huge and too big to carry around. My phone in my pocket is far superior but not allowed to connect to wifi. And via mobile it is very slow and not connected to the clinical networks Both Free Internet and Work Intranet need to be made available in all areas of the NHS-Wales and other NHS orhanisations in all their estates. Nothing worse than these made available in some and not others. Also mobile workers need Extremely good WiFi connection especially in country rural areas. This is over and above NHS and is a UK Governent/Regional responsibility. Speed for all connections is especially important. Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. 343 Access to WiFI can be difficult at times but we understand improvements are underway. WiFi is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social media, and maintain the same regime as when at home. This is particularly important for patients needing to stay for extended periods or who have been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more flexibly these days, the boundaries between work and home become more blurred and we should seriously consider options for work-home integration as part of the work/home balance. Again, the ability to maintain daily living activities becomes important. Neither of these require WiFi necessarily but WiFi makes life so much easier and more practical than wired connections - particularly on wards and when using BYOD devices. WiFi is needed to support flexible use of buildings and modern ways of working. Examples include reconfig		
 widespread. Apparently wiff is coming in 6 months 1234 As a consultant I have been issued a laptop with wiff access. But it is huge and too big to carry around. My phone in my pocket is far superior but not allowed to connect to wiff. And via mobile it is very slow and not connected to the clinical networks 332 Both Free Internet and Work Intranet need to be made available in all areas of the NHS-Wales and other NHS orhanisations in all their estates. Nothing worse than these made available in some and not others. Also mobile workers need Extremely good WiFri connection especially in country rural areas. This is over and above NHS and is a UK Goverment/Regional responsibility. Speed for all connections is especially important. Individuals need to register for guest wiff access if not using a Trust device. This would be better if freely available. Access to WIFI can be difficult at times but we understand improvements are underway. WiFi is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social media, and maintain the same regime as when at home. This is particularly important for patients needing to stay for extended periods or who have been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more flexibly these days, the boundaries between work and home become more blurred and we should seriously consider options for work/home integration as part of the work/home balance. Again, the ability to maintain daily living activities becomes important. Neither of these require WiFi necessarily but WiFI makes life so much easier and more practical than wired connections - particularly on wards and when using BYOD devices. WiFi is needed to support flexible use of buildings and modern ways of working. Examples include reconfiguring rooms, the use of hot-desk areas, support for electronic wor		
Apparently wifi is coming in 6 months As a consultant I have been issued a laptop with wifi access. But it is huge and too big to carry around. My phone in my pocket is far superior but not allowed to connect to wifi. And via mobile it is very slow and not connected to the clinical networks Both Free Internet and Work Intranet need to be made available in all areas of the NHS-Wales and other NHS orhanisations in all their estates. Nothing worse than these made available in some and not others. Also mobile workers need Extremely good WiFi connection especially in country rural areas. This is over and above NHS and is a UK Goverment/Regional responsibility. Speed for all connections is especially important. Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. Access to WIFI can be difficult at times but we understand improvements are underway. WiFi is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social media, and maintain the same regime as when at home. This is particularly important for patients needing to stay for extended periods or who have been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more flexibly these days, the boundaries between work and home become more blurred and we should seriously consider options for work/home integration as part of the work/home balance. Again, the ability to maintain daily living activities becomes important. Neither of these require WiFi necessarily but WiFi makes life so much easier and more practical than wired connections - particularly on wards and when using BYOD devices. WiFi is needed to support flexible use of buildings and modern ways of working. Examples include reconfiguring rooms, the use of hot-desk areas, support for electronic working in meeting rooms. I am often frustrated by attending a meeting at another organisation or using another organisation's facilitit		PC to PC and inbox to inbox etc. would be much easier if WiFi access were a little more
As a consultant I have been issued a laptop with wifi access. But it is huge and too big to carry around. My phone in my pocket is far superior but not allowed to connect to wifi. And via mobile it is very slow and not connected to the clinical networks Both Free Internet and Work Intranet need to be made available in all areas of the NHS-Wales and other NHS orhanisations in all their estates. Nothing worse than these made available in some and not others. Also mobile workers need Extremely good WiFi connection especially in country rural areas. This is over and above NHS and is a UK Goverment/Regional responsibility. Speed for all connections is especially important. Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. Access to WiFl can be difficult at times but we understand improvements are underway. WiFi is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social media, and maintain the same regime as when at home. This is particularly important for patients needing to saly for extended periods or who have been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more flexibly these days, the boundaries between work and home become more blurred and we should seriously consider options for work/home integration as part of the work/home balance. Again, the ability to maintain daily living activities becomes important. Neither of these require WiFi necessarily but WiFl makes life so much easier and more practical than wired connections - particularly on wards and when using BYOD devices. WiFi is needed to support flexible use of buildings and modern ways of working. Examples include reconfiguring rooms, the use of hot-desk areas, support for electronic working in meeting rooms. I am often frustrated by attending a meeting at another organisation or using another organisation's facilities and finding myself hamstrung by lack of		·
carry around. My phone in my pocket is far superior but not allowed to connect to wifi. And via mobile it is very slow and not connected to the clinical networks 332 Both Free Internet and Work Intranet need to be made available in all areas of the NHS-Wales and other NHS orhanisations in all their estates. Nothing worse than these made available in some and not others. Also mobile workers need Extremely good WiFi connection especially in country rural areas. This is over and above NHS and is a UK Goverment/Regional responsibility. Speed for all connections is especially important. Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. Access to WIFI can be difficult at times but we understand improvements are underway. WiFi is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social media, and maintain the same regime as when at home. This is particularly important for patients needing to stay for extended periods or who have been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more flexibly these days, the boundaries between work and home become more blurred and we should seriously consider options for work/home integration as part of the work/home balance. Again, the ability to maintain daily living activities becomes important. Neither of these require WiFi necessarily but WiFI makes life so much easier and more practical than wired connections - particularly on wards and when using BYOD devices. WiFi is needed to support flexible use of buildings and modern ways of working. Examples include reconfiguring rooms, the use of hot-desk areas, support for electronic working in meeting rooms. I am often frustrated by attending a meeting at another organisation or using another organisation's facilities and finding myself hamstrung by lack of connectivity. The fear of abuse of social networking and similar resources (e.g. YouTub		
soft Free Internet and Work Intranet need to be made available in all areas of the NHS-Wales and other NHS orhanisations in all their estates. Nothing worse than these made available in some and not others. Also mobile workers need Extremely good WiFi connection especially in country rural areas. This is over and above NHS and is a UK Goverment/Regional responsibility. Speed for all connections is especially important. Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. Access to WiFi can be difficult at times but we understand improvements are underway. WiFi is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social media, and maintain the same regime as when at home. This is particularly important for patients needing to stay for extended periods or who have been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more flexibly these days, the boundaries between work and home become more blurred and we should seriously consider options for work/home integration as part of the work/home balance. Again, the ability to maintain daily living activities becomes important. Neither of these require WiFi necessarily but WiFI makes life so much easier and more practical than wired connections - particularly on wards and when using BYOD devices. WiFi is needed to support flexible use of buildings and modern ways of working. Examples include reconfiguring rooms, the use of hot-desk areas, support for electronic working in meeting rooms. I am often frustrated by attending a meeting at another organisation or using another organisation's facilities and finding myself hamstrung by lack of connectivity. The fear of abuse of social networking and similar resources (e.g. YouTube) stops them being available on the network as well as by wifi but there are some really good teaching and training resources. The position of the trust management	1234	···
Both Free Internet and Work Intranet need to be made available in all areas of the NHS-Wales and other NHS orhanisations in all their estates. Nothing worse than these made available in some and not others. Also mobile workers need Extremely good WiFi connection especially in country rural areas. This is over and above NHS and is a UK Goverment/Regional responsibility. Speed for all connections is especially important. Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. Access to WiFi can be difficult at times but we understand improvements are underway. WiFi is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social media, and maintain the same regime as when at home. This is particularly important for patients needing to stay for extended periods or who have been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more flexibly these days, the boundaries between work and home become more blurred and we should seriously consider options for work/home integration as part of the work/home balance. Again, the ability to maintain daily living activities becomes important. Neither of these require WiFi necessarily but WiFi necessarily but WiFi so much easier and more practical than wired connections - particularly on wards and when using BYOD devices. WiFi is needed to support flexible use of buildings and modern ways of working. Examples include reconfiguring rooms, the use of hot-desk areas, support for electronic working in meeting rooms. I am often frustrated by attending a meeting at another organisation or using another organisation's facilities and finding myself hamstrung by lack of connectivity. The fear of abuse of social networking and similar resources (e.g., YouTube) stops them being available on the network as well as by wifi but there are some really good teaching and training resources. The position of the trust m		
made available in some and not others. Also mobile workers need Extremely good WiFi connection especially in country rural areas. This is over and above NHS and is a UK Goverment/Regional responsibility. Speed for all connections is especially important. Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. Access to WiFi can be difficult at times but we understand improvements are underway. WiFi is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social media, and maintain the same regime as when at home. This is particularly important for patients needing to stay for extended periods or who have been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more flexibly these days, the boundaries between work and home become more blurred and we should seriously consider options for work/home integration as part of the work/home balance. Again, the ability to maintain daily living activities becomes important. Neither of these require WiFi necessarily but WiFI makes life so much easier and more practical than wired connections - particularly on wards and when using BYOD devices. WiFi is needed to support flexible use of buildings and modern ways of working. Examples include reconfiguring rooms, the use of hot-desk areas, support for electronic working in meeting rooms. I am often frustrated by attending a meeting at another organisation or using another organisation's facilities and finding myself hamstrung by lack of connectivity. The fear of abuse of social networking and similar resources (e.g., YouTube) stops them being available on the network as well as by wifi but there are some really good teaching and training resources. only work related wifi access, no wireless access, no personal access. Work is paper led, not paperless. The position of the trust management team, the IG dept and the IT dept on this and many other IT	332	Both Free Internet and Work Intranet need to be made available in all areas of the
connection especially in country rural areas. This is over and above NHS and is a UK Goverment/Regional responsibility. Speed for all connections is especially important. Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. Access to WIFI can be difficult at times but we understand improvements are underway. WiFi is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social media, and maintain the same regime as when at home. This is particularly important for patients needing to stay for extended periods or who have been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more flexibly these days, the boundaries between work and home become more blurred and we should seriously consider options for work/home integration as part of the work/home balance. Again, the ability to maintain daily living activities becomes important. Neither of these require WiFi necessarily but WiFI makes life so much easier and more practical than wired connections - particularly on wards and when using BYOD devices. WiFi is needed to support flexible use of buildings and modern ways of working. Examples include reconfiguring rooms, the use of hot-desk areas, support for electronic working in meeting rooms. I am often frustrated by attending a meeting at another organisation or using another organisation's facilities and finding myself hamstrung by lack of connectivity. The fear of abuse of social networking and similar resources (e.g., YouTube) stops them being available on the network as well as by wifi but there are some really good teaching and training resources. only work related wifi access, no wireless access, no personal access. Work is paper led, not paperless. The position of the trust management team, the IG dept and the IT dept on this and many other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious st		
Goverment/Regional responsibility. Speed for all connections is especially important. Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. Access to WIFI can be difficult at times but we understand improvements are underway. WiFi is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social media, and maintain the same regime as when at home. This is particularly important for patients needing to stay for extended periods or who have been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more flexibly these days, the boundaries between work and home become more blurred and we should seriously consider options for work/home integration as part of the work/home balance. Again, the ability to maintain daily living activities becomes important. Neither of these require WiFi necessarily but WiFI makes life so much easier and more practical than wired connections - particularly on wards and when using BYOD devices. WiFi is needed to support flexible use of buildings and modern ways of working. Examples include reconfiguring rooms, the use of hot-desk areas, support for electronic working in meeting rooms. I am often frustrated by attending a meeting at another organisation or using another organisation's facilities and finding myself hamstrung by lack of connectivity. The fear of abuse of social networking and similar resources (e.g. YouTube) stops them being available on the network as well as by wifi but there are some really good teaching and training resources. only work related wifi access, no wireless access, no personal access. Work is paper led, not paperless. most patients seem to have their own phones and regularly use them in clinic areas. The position of the trust management team, the IG dept and the IT dept on this and many other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious sta		· ·
Speed for all connections is especially important. Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. Access to WIFI can be difficult at times but we understand improvements are underway. WiFi is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social media, and maintain the same regime as when at home. This is particularly important for patients needing to stay for extended periods or who have been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more flexibly these days, the boundaries between work and home become more blurred and we should seriously consider options for work/home integration as part of the work/home balance. Again, the ability to maintain daily living activities becomes important. Neither of these require WiFi necessarily but WiFI makes life so much easier and more practical than wired connections - particularly on wards and when using BYOD devices. WiFi is needed to support flexible use of hot-desk areas, support for electronic working in meeting rooms. I am often frustrated by attending a meeting at another organisation or using another organisation's facilities and finding myself hamstrung by lack of connectivity. The fear of abuse of social networking and similar resources (e.g. YouTube) stops them being available on the network as well as by wifi but there are some really good teaching and training resources. only work related wifi access, no wireless access, no personal access. Work is paper led, not paperless. most patients seem to have their own phones and regularly use them in clinic areas. The position of the trust management team, the IG dept and the IT dept on this and many other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious state of the network make work a constant struggle to perform one's job effectively. This also applies to doing private things		
Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. Access to WIFI can be difficult at times but we understand improvements are underway. WIFI is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social media, and maintain the same regime as when at home. This is particularly important for patients needing to stay for extended periods or who have been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more flexibly these days, the boundaries between work and home become more blurred and we should seriously consider options for work/home integration as part of the work/home balance. Again, the ability to maintain daily living activities becomes important. Neither of these require WiFi necessarily but WiFI makes life so much easier and more practical than wired connections - particularly on wards and when using BYOD devices. WiFi is needed to support flexible use of buildings and modern ways of working. Examples include reconfiguring rooms, the use of hot-desk areas, support for electronic working in meeting rooms. I am often frustrated by attending a meeting at another organisation or using another organisation's facilities and finding myself hamstrung by lack of connectivity. The fear of abuse of social networking and similar resources (e.g. YouTube) stops them being available on the network as well as by wifi but there are some really good teaching and training resources. only work related wifi access, no wireless access, no personal access. Work is paper led, not paperless . most patients seem to have their own phones and regularly use them in clinic areas. The position of the trust management team, the IC dept and the IT dept on this and many other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious state of the network make work a constant struggle to perform one's job effectively. This		Government/Regional responsibility.
Individuals need to register for guest wifi access if not using a Trust device. This would be better if freely available. Access to WIFI can be difficult at times but we understand improvements are underway. WIFI is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social media, and maintain the same regime as when at home. This is particularly important for patients needing to stay for extended periods or who have been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more flexibly these days, the boundaries between work and home become more blurred and we should seriously consider options for work/home integration as part of the work/home balance. Again, the ability to maintain daily living activities becomes important. Neither of these require WiFi necessarily but WiFI makes life so much easier and more practical than wired connections - particularly on wards and when using BYOD devices. WiFi is needed to support flexible use of buildings and modern ways of working. Examples include reconfiguring rooms, the use of hot-desk areas, support for electronic working in meeting rooms. I am often frustrated by attending a meeting at another organisation or using another organisation's facilities and finding myself hamstrung by lack of connectivity. The fear of abuse of social networking and similar resources (e.g. YouTube) stops them being available on the network as well as by wifi but there are some really good teaching and training resources. only work related wifi access, no wireless access, no personal access. Work is paper led, not paperless . most patients seem to have their own phones and regularly use them in clinic areas. The position of the trust management team, the IC dept and the IT dept on this and many other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious state of the network make work a constant struggle to perform one's job effectively. This		Speed for all connections is especially important.
Access to WİFI can be difficult at times but we understand improvements are underway. WiFi is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social media, and maintain the same regime as when at home. This is particularly important for patients needing to stay for extended periods or who have been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more flexibly these days, the boundaries between work and home become more blurred and we should seriously consider options for work/home integration as part of the work/home balance. Again, the ability to maintain daily living activities becomes important. Neither of these require WiFi necessarily but WiFI makes life so much easier and more practical than wired connections - particularly on wards and when using BYOD devices. WiFi is needed to support flexible use of buildings and modern ways of working. Examples include reconfiguring rooms, the use of hot-desk areas, support for electronic working in meeting rooms. I am often frustrated by attending a meeting at another organisation or using another organisation's facilities and finding myself hamstrung by lack of connectivity. The fear of abuse of social networking and similar resources (e.g. YouTube) stops them being available on the network as well as by wifi but there are some really good teaching and training resources. only work related wifi access, no wireless access, no personal access. Work is paper led, not paperless. most patients seem to have their own phones and regularly use them in clinic areas. The position of the trust management team, the IG dept and the IT dept on this and many other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious state of the network make work a constant struggle to perform one's job effectively. This also applies to doing private things at work. Other organisations (most of them hospitals) in which I have worked have allow	335	Individuals need to register for guest wifi access if not using a Trust device. This would be
WiFi is needed with sufficient bandwidth for it to be usable for patients to Skype (etc.) with family and friends, use social media, and maintain the same regime as when at home. This is particularly important for patients needing to stay for extended periods or who have been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more flexibly these days, the boundaries between work and home become more blurred and we should seriously consider options for work/home integration as part of the work/home balance. Again, the ability to maintain daily living activities becomes important. Neither of these require WiFi necessarily but WiFI makes life so much easier and more practical than wired connections - particularly on wards and when using BYOD devices. WiFi is needed to support flexible use of buildings and modern ways of working. Examples include reconfiguring rooms, the use of hot-desk areas, support for electronic working in meeting rooms. I am often frustrated by attending a meeting at another organisation or using another organisation's facilities and finding myself hamstrung by lack of connectivity. The fear of abuse of social networking and similar resources (e.g. YouTube) stops them being available on the network as well as by wifi but there are some really good teaching and training resources. only work related wifi access, no wireless access, no personal access. Work is paper led, not paperless most patients seem to have their own phones and regularly use them in clinic areas. The position of the trust management team, the IG dept and the IT dept on this and many other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious state of the network make work a constant struggle to perform oncis job effectively. This also applies to doing private things at work. Other organisations (most of them hospitals) in which I have worked have allowed people to access a range of websites to do things such as pay bills, purchase gifts et		•
family and friends, use social media, and maintain the same regime as when at home. This is particularly important for patients needing to stay for extended periods or who have been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more flexibly these days, the boundaries between work and home become more blurred and we should seriously consider options for work/home integration as part of the work/home balance. Again, the ability to maintain daily living activities becomes important. Neither of these require WiFi necessarily but WiFI makes life so much easier and more practical than wired connections - particularly on wards and when using BYOD devices. WiFi is needed to support flexible use of buildings and modern ways of working. Examples include reconfiguring rooms, the use of hot-desk areas, support for electronic working in meeting rooms. I am often frustrated by attending a meeting at another organisation or using another organisation's facilities and finding myself hamstrung by lack of connectivity. The fear of abuse of social networking and similar resources (e.g. YouTube) stops them being available on the network as well as by wifi but there are some really good teaching and training resources. 358 only work related wifi access, no wireless access, no personal access. Work is paper led, not paperless. most patients seem to have their own phones and regularly use them in clinic areas. The position of the trust management team, the IG dept and the IT dept on this and many other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious state of the network make work a constant struggle to perform one's job effectively. This also applies to doing private things at work. Other organisations (most of them hospitals) in which I have worked have allowed people to access a range of websites to do things such as pay bills, purchase gifts etc., so long as these activities have not been carried out during work time. This Trust bl		
This is particularly important for patients needing to stay for extended periods or who have been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more flexibly these days, the boundaries between work and home become more blurred and we should seriously consider options for work/home integration as part of the work/home balance. Again, the ability to maintain daily living activities becomes important. Neither of these require WiFi necessarily but WiFI makes life so much easier and more practical than wired connections - particularly on wards and when using BYOD devices. WiFi is needed to support flexible use of buildings and modern ways of working. Examples include reconfiguring rooms, the use of hot-desk areas, support for electronic working in meeting rooms. I am often frustrated by attending a meeting at another organisation or using another organisation's facilities and finding myself hamstrung by lack of connectivity. The fear of abuse of social networking and similar resources (e.g. YouTube) stops them being available on the network as well as by wifi but there are some really good teaching and training resources. only work related wifi access, no wireless access, no personal access. Work is paper led, not paperless. most patients seem to have their own phones and regularly use them in clinic areas. The position of the trust management team, the IG dept and the IT dept on this and many other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious state of the network make work a constant struggle to perform one's job effectively. This also applies to doing private things at work. Other organisations (most of them hospitals) in which I have worked have allowed people to access a range of websites to do things such as pay bills, purchase gifts etc., so long as these activities have not been carried out during work time. This Trust blocks access to so many things and takes the attitude that Trust computers and the IT net	345	
been detained (mental health) and recovering from being acutely unwell. For staff, who we might ask to work more flexibly these days, the boundaries between work and home become more blurred and we should seriously consider options for work/home integration as part of the work/home balance. Again, the ability to maintain daily living activities becomes important. Neither of these require WiFi necessarily but WiFI makes life so much easier and more practical than wired connections - particularly on wards and when using BYOD devices. WiFi is needed to support flexible use of buildings and modern ways of working. Examples include reconfiguring rooms, the use of hot-desk areas, support for electronic working in meeting rooms. I am often frustrated by attending a meeting at another organisation or using another organisation's facilities and finding myself hamstrung by lack of connectivity. The fear of abuse of social networking and similar resources (e.g. YouTube) stops them being available on the network as well as by wifi but there are some really good teaching and training resources. only work related wifi access, no wireless access, no personal access. Work is paper led, not paperless. most patients seem to have their own phones and regularly use them in clinic areas. The position of the trust management team, the IG dept and the IT dept on this and many other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious state of the network make work a constant struggle to perform one's job effectively. This also applies to doing private things at work. Other organisations (most of them hospitals) in which I have worked have allowed people to access a range of websites to do things such as pay bills, purchase gifts etc., so long as these activities have not been carried out during work time. This Trust blocks access to so many things and takes the attitude that Trust computers and the IT network should only be used for work purposes. You feel like a criminal for even wanting to pay		
become more blurred and we should seriously consider options for work/home integration as part of the work/home balance. Again, the ability to maintain daily living activities becomes important. Neither of these require WiFi necessarily but WiFI makes life so much easier and more practical than wired connections - particularly on wards and when using BYOD devices. WiFi is needed to support flexible use of buildings and modern ways of working. Examples include reconfiguring rooms, the use of hot-desk areas, support for electronic working in meeting rooms. I am often frustrated by attending a meeting at another organisation or using another organisation's facilities and finding myself hamstrung by lack of connectivity. The fear of abuse of social networking and similar resources (e.g. YouTube) stops them being available on the network as well as by wifi but there are some really good teaching and training resources. only work related wifi access, no wireless access, no personal access. Work is paper led, not paperless. most patients seem to have their own phones and regularly use them in clinic areas. The position of the trust management team, the IG dept and the IT dept on this and many other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious state of the network make work a constant struggle to perform one's job effectively. This also applies to doing private things at work. Other organisations (most of them hospitals) in which I have worked have allowed people to access a range of websites to do things such as pay bills, purchase gifts etc., so long as these activities have not been carried out during work time. This Trust blocks access to so many things and takes the attitude that Trust computers and the IT network should only be used for work purposes. You feel like a criminal for even wanting to pay your council tax during your lunch break. They have a		
as part of the work/home balance. Again, the ability to maintain daily living activities becomes important. Neither of these require WiFi necessarily but WiFI makes life so much easier and more practical than wired connections - particularly on wards and when using BYOD devices. WiFi is needed to support flexible use of buildings and modern ways of working. Examples include reconfiguring rooms, the use of hot-desk areas, support for electronic working in meeting rooms. I am often frustrated by attending a meeting at another organisation or using another organisation's facilities and finding myself hamstrung by lack of connectivity. The fear of abuse of social networking and similar resources (e.g. YouTube) stops them being available on the network as well as by wifi but there are some really good teaching and training resources. only work related wifi access, no wireless access, no personal access. Work is paper led, not paperless. most patients seem to have their own phones and regularly use them in clinic areas. The position of the trust management team, the IG dept and the IT dept on this and many other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious state of the network make work a constant struggle to perform one's job effectively. This also applies to doing private things at work. Other organisations (most of them hospitals) in which I have worked have allowed people to access a range of websites to do things such as pay bills, purchase gifts etc., so long as these activities have not been carried out during work time. This Trust blocks access to so many things and takes the attitude that Trust computers and the IT network should only be used for work purposes. You feel like a criminal for even wanting to pay your council tax during your lunch break. They have a		
becomes important. Neither of these require WiFi necessarily but WiFI makes life so much easier and more practical than wired connections - particularly on wards and when using BYOD devices. WiFi is needed to support flexible use of buildings and modern ways of working. Examples include reconfiguring rooms, the use of hot-desk areas, support for electronic working in meeting rooms. I am often frustrated by attending a meeting at another organisation or using another organisation's facilities and finding myself hamstrung by lack of connectivity. The fear of abuse of social networking and similar resources (e.g. YouTube) stops them being available on the network as well as by wifi but there are some really good teaching and training resources. only work related wifi access, no wireless access, no personal access. Work is paper led, not paperless. most patients seem to have their own phones and regularly use them in clinic areas. The position of the trust management team, the IG dept and the IT dept on this and many other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious state of the network make work a constant struggle to perform one's job effectively. This also applies to doing private things at work. Other organisations (most of them hospitals) in which I have worked have allowed people to access a range of websites to do things such as pay bills, purchase gifts etc., so long as these activities have not been carried out during work time. This Trust blocks access to so many things and takes the attitude that Trust computers and the IT network should only be used for work purposes. You feel like a criminal for even wanting to pay your council tax during your lunch break. They have a		
easier and more practical than wired connections - particularly on wards and when using BYOD devices. WiFi is needed to support flexible use of buildings and modern ways of working. Examples include reconfiguring rooms, the use of hot-desk areas, support for electronic working in meeting rooms. I am often frustrated by attending a meeting at another organisation or using another organisation's facilities and finding myself hamstrung by lack of connectivity. The fear of abuse of social networking and similar resources (e.g. YouTube) stops them being available on the network as well as by wifi but there are some really good teaching and training resources. only work related wifi access, no wireless access, no personal access. Work is paper led, not paperless. most patients seem to have their own phones and regularly use them in clinic areas. The position of the trust management team, the IG dept and the IT dept on this and many other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious state of the network make work a constant struggle to perform one's job effectively. This also applies to doing private things at work. Other organisations (most of them hospitals) in which I have worked have allowed people to access a range of websites to do things such as pay bills, purchase gifts etc., so long as these activities have not been carried out during work time. This Trust blocks access to so many things and takes the attitude that Trust computers and the IT network should only be used for work purposes. You feel like a criminal for even wanting to pay your council tax during your lunch break. They have a		
WiFi is needed to support flexible use of buildings and modern ways of working. Examples include reconfiguring rooms, the use of hot-desk areas, support for electronic working in meeting rooms. I am often frustrated by attending a meeting at another organisation or using another organisation's facilities and finding myself hamstrung by lack of connectivity. The fear of abuse of social networking and similar resources (e.g. YouTube) stops them being available on the network as well as by wifi but there are some really good teaching and training resources. only work related wifi access, no wireless access, no personal access. Work is paper led, not paperless. most patients seem to have their own phones and regularly use them in clinic areas. The position of the trust management team, the IG dept and the IT dept on this and many other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious state of the network make work a constant struggle to perform one's job effectively. This also applies to doing private things at work. Other organisations (most of them hospitals) in which I have worked have allowed people to access a range of websites to do things such as pay bills, purchase gifts etc., so long as these activities have not been carried out during work time. This Trust blocks access to so many things and takes the attitude that Trust computers and the IT network should only be used for work purposes. You feel like a criminal for even wanting to pay your council tax during your lunch break. They have a		
include reconfiguring rooms, the use of hot-desk areas, support for electronic working in meeting rooms. I am often frustrated by attending a meeting at another organisation or using another organisation's facilities and finding myself hamstrung by lack of connectivity. The fear of abuse of social networking and similar resources (e.g. YouTube) stops them being available on the network as well as by wifi but there are some really good teaching and training resources. only work related wifi access, no wireless access, no personal access. Work is paper led, not paperless. most patients seem to have their own phones and regularly use them in clinic areas. The position of the trust management team, the IG dept and the IT dept on this and many other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious state of the network make work a constant struggle to perform one's job effectively. This also applies to doing private things at work. Other organisations (most of them hospitals) in which I have worked have allowed people to access a range of websites to do things such as pay bills, purchase gifts etc., so long as these activities have not been carried out during work time. This Trust blocks access to so many things and takes the attitude that Trust computers and the IT network should only be used for work purposes. You feel like a criminal for even wanting to pay your council tax during your lunch break. They have a		
include reconfiguring rooms, the use of hot-desk areas, support for electronic working in meeting rooms. I am often frustrated by attending a meeting at another organisation or using another organisation's facilities and finding myself hamstrung by lack of connectivity. The fear of abuse of social networking and similar resources (e.g. YouTube) stops them being available on the network as well as by wifi but there are some really good teaching and training resources. only work related wifi access, no wireless access, no personal access. Work is paper led, not paperless. most patients seem to have their own phones and regularly use them in clinic areas. The position of the trust management team, the IG dept and the IT dept on this and many other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious state of the network make work a constant struggle to perform one's job effectively. This also applies to doing private things at work. Other organisations (most of them hospitals) in which I have worked have allowed people to access a range of websites to do things such as pay bills, purchase gifts etc., so long as these activities have not been carried out during work time. This Trust blocks access to so many things and takes the attitude that Trust computers and the IT network should only be used for work purposes. You feel like a criminal for even wanting to pay your council tax during your lunch break. They have a		
meeting rooms. I am often frustrated by attending a meeting at another organisation or using another organisation's facilities and finding myself hamstrung by lack of connectivity. The fear of abuse of social networking and similar resources (e.g. YouTube) stops them being available on the network as well as by wifi but there are some really good teaching and training resources. only work related wifi access, no wireless access, no personal access. Work is paper led, not paperless. most patients seem to have their own phones and regularly use them in clinic areas. The position of the trust management team, the IG dept and the IT dept on this and many other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious state of the network make work a constant struggle to perform one's job effectively. This also applies to doing private things at work. Other organisations (most of them hospitals) in which I have worked have allowed people to access a range of websites to do things such as pay bills, purchase gifts etc., so long as these activities have not been carried out during work time. This Trust blocks access to so many things and takes the attitude that Trust computers and the IT network should only be used for work purposes. You feel like a criminal for even wanting to pay your council tax during your lunch break. They have a		
using another organisation's facilities and finding myself hamstrung by lack of connectivity. The fear of abuse of social networking and similar resources (e.g. YouTube) stops them being available on the network as well as by wifi but there are some really good teaching and training resources. only work related wifi access, no wireless access, no personal access. Work is paper led, not paperless. most patients seem to have their own phones and regularly use them in clinic areas. The position of the trust management team, the IG dept and the IT dept on this and many other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious state of the network make work a constant struggle to perform one's job effectively. This also applies to doing private things at work. Other organisations (most of them hospitals) in which I have worked have allowed people to access a range of websites to do things such as pay bills, purchase gifts etc., so long as these activities have not been carried out during work time. This Trust blocks access to so many things and takes the attitude that Trust computers and the IT network should only be used for work purposes. You feel like a criminal for even wanting to pay your council tax during your lunch break. They have a		
The fear of abuse of social networking and similar resources (e.g. YouTube) stops them being available on the network as well as by wifi but there are some really good teaching and training resources. 358 only work related wifi access, no wireless access, no personal access. Work is paper led, not paperless. most patients seem to have their own phones and regularly use them in clinic areas. The position of the trust management team, the IG dept and the IT dept on this and many other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious state of the network make work a constant struggle to perform one's job effectively. This also applies to doing private things at work. Other organisations (most of them hospitals) in which I have worked have allowed people to access a range of websites to do things such as pay bills, purchase gifts etc., so long as these activities have not been carried out during work time. This Trust blocks access to so many things and takes the attitude that Trust computers and the IT network should only be used for work purposes. You feel like a criminal for even wanting to pay your council tax during your lunch break. They have a		
being available on the network as well as by wifi but there are some really good teaching and training resources. 358 only work related wifi access, no wireless access, no personal access. Work is paper led, not paperless. most patients seem to have their own phones and regularly use them in clinic areas. The position of the trust management team, the IG dept and the IT dept on this and many other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious state of the network make work a constant struggle to perform one's job effectively. This also applies to doing private things at work. Other organisations (most of them hospitals) in which I have worked have allowed people to access a range of websites to do things such as pay bills, purchase gifts etc., so long as these activities have not been carried out during work time. This Trust blocks access to so many things and takes the attitude that Trust computers and the IT network should only be used for work purposes. You feel like a criminal for even wanting to pay your council tax during your lunch break. They have a	351	• • • • • • • • • • • • • • • • • • • •
only work related wifi access, no wireless access, no personal access. Work is paper led, not paperless. most patients seem to have their own phones and regularly use them in clinic areas. The position of the trust management team, the IG dept and the IT dept on this and many other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious state of the network make work a constant struggle to perform one's job effectively. This also applies to doing private things at work. Other organisations (most of them hospitals) in which I have worked have allowed people to access a range of websites to do things such as pay bills, purchase gifts etc., so long as these activities have not been carried out during work time. This Trust blocks access to so many things and takes the attitude that Trust computers and the IT network should only be used for work purposes. You feel like a criminal for even wanting to pay your council tax during your lunch break. They have a		
not paperless . most patients seem to have their own phones and regularly use them in clinic areas. The position of the trust management team, the IG dept and the IT dept on this and many other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious state of the network make work a constant struggle to perform one's job effectively. This also applies to doing private things at work. Other organisations (most of them hospitals) in which I have worked have allowed people to access a range of websites to do things such as pay bills, purchase gifts etc., so long as these activities have not been carried out during work time. This Trust blocks access to so many things and takes the attitude that Trust computers and the IT network should only be used for work purposes. You feel like a criminal for even wanting to pay your council tax during your lunch break. They have a		
most patients seem to have their own phones and regularly use them in clinic areas. The position of the trust management team, the IG dept and the IT dept on this and many other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious state of the network make work a constant struggle to perform one's job effectively. This also applies to doing private things at work. Other organisations (most of them hospitals) in which I have worked have allowed people to access a range of websites to do things such as pay bills, purchase gifts etc., so long as these activities have not been carried out during work time. This Trust blocks access to so many things and takes the attitude that Trust computers and the IT network should only be used for work purposes. You feel like a criminal for even wanting to pay your council tax during your lunch break. They have a	358	
The position of the trust management team, the IG dept and the IT dept on this and many other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious state of the network make work a constant struggle to perform one's job effectively. This also applies to doing private things at work. Other organisations (most of them hospitals) in which I have worked have allowed people to access a range of websites to do things such as pay bills, purchase gifts etc., so long as these activities have not been carried out during work time. This Trust blocks access to so many things and takes the attitude that Trust computers and the IT network should only be used for work purposes. You feel like a criminal for even wanting to pay your council tax during your lunch break. They have a		
other IT dependant issues is positively dreadful. The stupid restrictions and the atrocious state of the network make work a constant struggle to perform one's job effectively. This also applies to doing private things at work. Other organisations (most of them hospitals) in which I have worked have allowed people to access a range of websites to do things such as pay bills, purchase gifts etc., so long as these activities have not been carried out during work time. This Trust blocks access to so many things and takes the attitude that Trust computers and the IT network should only be used for work purposes. You feel like a criminal for even wanting to pay your council tax during your lunch break. They have a	1582	
state of the network make work a constant struggle to perform one's job effectively. This also applies to doing private things at work. Other organisations (most of them hospitals) in which I have worked have allowed people to access a range of websites to do things such as pay bills, purchase gifts etc., so long as these activities have not been carried out during work time. This Trust blocks access to so many things and takes the attitude that Trust computers and the IT network should only be used for work purposes. You feel like a criminal for even wanting to pay your council tax during your lunch break. They have a		
which I have worked have allowed people to access a range of websites to do things such as pay bills, purchase gifts etc., so long as these activities have not been carried out during work time. This Trust blocks access to so many things and takes the attitude that Trust computers and the IT network should only be used for work purposes. You feel like a criminal for even wanting to pay your council tax during your lunch break. They have a		state of the network make work a constant struggle to perform one's job effectively. This
as pay bills, purchase gifts etc., so long as these activities have not been carried out during work time. This Trust blocks access to so many things and takes the attitude that Trust computers and the IT network should only be used for work purposes. You feel like a criminal for even wanting to pay your council tax during your lunch break. They have a		
work time. This Trust blocks access to so many things and takes the attitude that Trust computers and the IT network should only be used for work purposes. You feel like a criminal for even wanting to pay your council tax during your lunch break. They have a		
computers and the IT network should only be used for work purposes. You feel like a criminal for even wanting to pay your council tax during your lunch break. They have a		
criminal for even wanting to pay your council tax during your lunch break. They have a		
Twitter feed on their website, but we can't access it from work, nor can we [individual		
		Twitter feed on their website, but we can't access it from work, nor can we [individual

employees/unit staff] use any networking tools to reach our service uses - how stupid is

	that!? The network performance is so poor you find yourself many times each day wasting so much time and getting so frustrated that you dream of taking a hammer to the computer. The draconian security software they have on the network frequently blocks you from accessing valid work related information, eg. you want to look at a particular page on the DH website that contains a report looking at feedback from service users; oops, no you can't' it's blocked.(must have one of those nasty words in it like 'alcohol' or 'intercourse'). Retirement can't come soon enough!
1225 1223	In a previous trust where I worked (in England) phones are banned in clinical areas. Think our IT is very tricky. It is unreliable and the hardware is so slow and old fashioned.
	My desktop is over 10 years old. I'm not allowed a laptop or mobile as my manager thinks that because I am often in the treatment room I don't need to be able to work anywhere else. The signal on the site for 3G is appalling and my personal phone will not load emails when I am there. It's ok because I work part time there I also have another job with a different NHS organisation where signal is better and we all have mobiles to use in the hospital. This is much easier and enables you to be found and talk to people when you aren't in the clinic. The IT people are lovely but they aren't on site and sometimes you just need to have someone look at something in person. I work for a social enterprise but embedded in a nhs hospital and this leads to all sorts of issues with firewalls. My other job is with a foundation trust and I think things are streets ahead here. The systems are also peculiar. I wish systmone was everywhere rather than having to negotiate lots and lots of different systems to get the same info in different ways from different organisations. Numbers of passwords that you have to remember is daft too. My husband is a director of a mental health trust and it is annoying to see that they have ipads and iphones and wifi and encrypted password stores but clinical staff like me are working with a nokia that is 4th hand and 10 years old and I am not allowed wifi or even a laptop. Why is there no choice about what you can use that will suit you individually. Quite honestly I would like to buy and use my own machine and have an allowance to have the phone I want and wifi rather than have IT solutions imposed on me by people who have never asked me what I want and need to do my job and have no insight into the issues that I have. Sorry bit of a rant!
1220	Wifi is fine it is the use of it to prevent replication of documents & new technology which
1218	would help NHS is in the stone age regarding IT
1214	The Trust is currently working on Patient WiFi
1211	Access for patients and families is unnecessarily difficult to access and very bureaucratic. In this age, it should be simple and quick.
1210	I was recentley an inpatient at a local private hospital which provided free Wi-Fi for patients. My stay in hospital was greatly enhanced by being able to use my tablet to communicate by email and social media during my stay. I think it is appalling that patients in this hospital should be charged for this service
1169	It is essential. In some areas of our hospital it is provided by the university. Other areas have trust wifi. It can be patchy. But it makes my day so much easier. I would love it though, if we had a trust app to access policies and guidelines.
1166	Yes it seems to be a hierarchical system - senior nurses and clinicians have access but not
	other staff - should be equal as the main issue is to improve care which Wi-fi would be an integral part of
456	Clinical use of wifi needs very careful planning and intelligent installation. Our phlebotomy staff use a module in the ICE order comms package to scan ID bands, obtain demographics & test details wirelessly from the server then label sample tubes. Initially this was a big patient safety problem because the IT team did not appreciate the impact of placing a PC and it's wifi antenna inside a metal cart. Where wifi signal is blotted out there were examples of the server access failing and samples being labeled with the previous patient's details. Needs a software re-write so it fails safe but is already safer with more sensible antenna positioning and a strong wifi signal. Battery life is also a major problem when the devices are used all day. Certainly cannot manage 24/7.
1156 499	Thanks. This is really useful! Trust requires a significant investment in network infrastructure before ubiquitous wifi and
1149	function available. On IM&T road map but not for 12 months. working with children and young people and their families it is apparent that alot of
	communication could be improved with WiFi access and if they could access this in waiting rooms etc they could link to health promotion sites/ give instant feedback etc.
1542	Whilst I personally have extremely good WiFi and network access at both sites I work at on work provided iphone and notebook. As an integrated Acute and Community Provider covering one of the largest rural counties in England the challenge is for our Community Staff as many areas in which they work do not even have access to basic G2 mobile phone

	signal let alone Network/WiFi access once they are away from their community hospital bases.
	We have flexible working policy, and many senior staff are able to work from home, but again the speed of broadband connection provided by BT across the county is dire. I am extremely lucky as my husband is self employed and works from home and his business provides us with excellent secure Satellite Broadband.
1180	In our trust we have two WiFi connection. One is purely for hospital devices and can only
.,,,,	be connected by IT staff (password is not available to any staff other than IT). The second WiFi connection is for general use and is used by staff/members of public on their personal devices.
1141	I think wi-fi is an essential part of the new workplace.
1181	I think it's really important that staff are able to have wifi access in the main hospital wards as it is problematic to access PCs which means staff have difficulty making the most of information resources to support patient care. Our information governance team has draconian and unrealistic attitudes toward wifi which stifles innovation and improved ways of working.
545	I think wifi would be really beneficial for patient care. It would also be nice to have access for personal use during breaks though I do understand the objections to this we all work very hard so doesn't seem like a huge ask
1136	At the moment we have WiFi for staff in the library. There is WiFi in the restaurant for visitors which we presume to be free.
	WiFi throughout the hospital for clinical use is something which is planned for the near future (surveyors have been in this week)
1135	The WiFi I have access to is for the PostGrad Building only and we give the password to staff and students from the local Trusts in the Colchester area. We have a work provided device network but most staff still use desk based machines on the ordinary network.
1126	The mobile access on site is abysmal and within the grounds of the hospital we do not get
	mobile data signal on most networks, nor even a cellular connection. Despite this, the NHS Tayside wifi signal is readily findable on all mobile devices, but access is not permitted. Managers do have iPad access, but clinicians are tied to physical desktops or a laptop that works in only some areas of the ward.
1122	Wifi should be as much part of modern healthcare as handwash has become: it has mutual health benefit in lowering anxiety, increasing access to knowledge and improving understanding
1119	Managed by ICT department. connections can be unreliable and ICT the same
1104	Very slow
660	Given the very severe state of the Trust's finances I do not think it would be appropriate to offer free wi-fi to patinets & visitors at the moment. We're bankrupt!
671	Free WiFi should be available for everyone (staff & visitors) in all hospitals. My trust has blocked many websites (non-work related) on Trust PCs, but there are times when staff are at work (e.g. before/after shifts or during breaks) when it would be helpful to be able to access these sites. For example, to contact companies that are only open during work hours. The hospital I work in also has virually no phone signal inside the building.
672	Free access for guests is in the pipeline but it's a slow process hampered by IG concerns and security concerns.
674	I think that the wi-fi access for staff is very good - it is well used within our department. It would be nice if patients and visitors could be afforded wi-fi access in our Trust.
1096	I am currently trying to get eduroam via WiFi access for medical students at this hospital
687	Wifi access is the future must-necessity; I do wonder how long the NHS would be able to resist this facality.
1094	- it appears to be very slow at times - enables contact with "outside world" for long-term patients
691	For staff it may be helpful. For patients, it might get in the way given that most electronic access takes precedence over everything else, treatment and care notwithstanding. Also, WIFI devices may interfere with hospital equipment.
1197	would be extremely useful to be able to access WIFI when visiting other sites. For my CCIO role visit a number of hospitals and other sites and cannot access WIFI which does hinder my ability to deliver non-clinical work effectively and efficiently
1196	We have shockingly bad internet access, let alone wifi! Ancient computers & operating systems and blocked access to many educational websites. I am mainly dependent on 3G via my mobile but the signal throughout the hospital is variable
1191	There is wi fi but asks for an access cose this has never openly been given to me.l have
728	not asked for it either. In NHS Lothian, the biggest barrier to tablet and wifi use appears to be data security and protection.

	NHS Lothian currently have a stance that blocks the use of tablets and wifi with patients.
	I strongly believe that each situation needs to be assessed for risk of breech of data
	security rather than the current blanket 'no' use of tablets 'no' wifi with patients policy.
1072	Wi-Fi is a critical component of future healthcare. 1. There are increasing numbers of wi-fi
	enabled point of care devices, and it will enghance patient safety when all POCT devices
	are able to communicate with lab systems/HIS without the need for cables. 2. It is hugely
	helpful for patients for staff to have access to real-time information on test ordering and test
	results, with clickable links to enable better interpretation. 3. We can't fully exploit useful
	ways to use data from different systems (e.g. pharmacy and lab for theraputic drug
1067	monitoring)near the patient for maximum impact Is brilliant at Torbay Hospital!
1063	Can this be extended to staff as well as pateints.
1062	WiFi on BYOD is not always reliable
1061	I think that mobile working with clinicians' own portable devices is the only way to solve the
	conflicts between mobility, login times, security all at acceptable cost. Consequently
	comprehensive WiFi is absolutely necessary.
1056	I worked in another trust that had free wifi on seperate streams/bands for staff and patients
	and this was great. It made it easy for staff to access mobile information resources from
	their own devices or access web-based tools quickly and easily wherever they were. Why
	can't every trust have access to this in the 21st century?!
1188	should be a universal right and centrally funded
1043	CQC mark of inspection
1043	WIFI access for staff is the same as for the patients. Whilst I am grateful that we are provided with free WIFI it is sporadic and often slow and is no better than standard mobile
	phone 3G.
1187	Think WiFi should be available for all staff and patients (within restrictions on use of
1101	devices in certain areas)at least on all main sites of service delivery; at a mimimum it
	should be available to clinical staff for using point of care and decision making tools.
	We used to work in PCTs where WiFi was available at all the HQ sites but since being
	moved into an acute trust we seem to have gone backwards in an IT time warp.
835	WiFi is imminent for Trust staff. Medical students already have access to WiFi from their
	university.
1040	access for service users would be good but there are problems with providing and
	monitoring this. I cannot get intranet when connevcted by G3
1038	If you can get it at Starbucks then patients should be able to access while in hospital and at
	minimal cost (should cover setup/maintenance). BYOD staff wi-fi on a separate network,
	encrypted and without access to Facebook etc so as not to clog the system.
1206	Why not; it's so cheap!
1037	The wifi access is not reliable which makes it difficult to provide the level of digital working
	that is required.
1266	I work on mobile units 4 out of 5 days. One day is here at Winchester where the WIFI is
	excellent,easy to connect to and as am studying as well i can connect my own laptop
4000	which has all my info on it that i need.
1268	Hospital is a boring and often frightening place for patients. Many have phones & ipads etc, but 3G signal is useless in most hospital buildings. Free wifi would make a huge difference
	to patients.
1270	Its not very easy to conecked Kindles to the wifi
1271	Management, inevitably, have access but to what extent I'm not sure. Wifi is available but
	only to connect mobile carts to data streams eg radiology.
	It would be a great step forward although with the general network blocks on any type of
	non work related site (even train ticketing websites), I'm not sure we'd benefit that much
	here.
1275	The WiFi access we have as staff is very poor and I consider it a huge failure, in this day
1076	and age that patients and visitors have no access to WiFi at all!
1276	Why is it that the Canadian healthcare (free at the point of care too) has free wifi and this is
	thought important to practice evidence based care?
	My current hospital has very variable 3G 4g signal so very unreliable.
1520	Patient Wifi is limited to outpatient and public areas due to the contract with the television
	service on the wards.
1281	There are some parts of the hospital who are able to access WiFi-not all. Patients often
	ask for access, but have to pay an external company (who also supply TV & telephone at
	HUGE expense for the patients, but especially to those who call in)

1290	We have a state of the art Department which opened recently with no Wi-Fi access for staff
	or patients.
	Unless we get WiFi access we cannot undertake many of the developments required to
	move the service forward and into the 21st Century.
	We would like to improve patient safety (& save the Trust money) by going paperless, but this is impossible with out the investment in the technological infastructure including Wi-Fi.
1293	Should be mandatory
1300	Rapidly becoming an essential tool for on-the-spot clinical decision making
1303	Social media access essential for #foamed
1305	NHS is light years behind in terms of connectivity
	It is far worse in rural areas
1307	I also work at the Norfolk and Norwich, where there is a guest network for patients and
1007	staff throughout most of the hospital
1310	Trust uses a WiFi network for Trust Blackberries which is not available to those without
	these devices. Desktop computers are plentiful. 3G/4G network coverage is patchy.
1214	Available in some theatres but not most
1314	in ICU wifi access would make a huge difference to patients who are recovering but still struck in bed e.g. help with reorientation and improve interest in the world around them in
	general
1318	Totally pathetic. No Internet or phone signal of any kind in the workplace in 2014
1320	This is the 21st century. You can get free wifi pretty much anywhere other than at ones
	place of work. A wifi network is easy to set up and cheap to run. A separate non clinical wifi
	with limited filtering should be available with another network for clinical details that is locked down. Our current internet access policy limits the availability of some gynae/sexual
	health clinical sites due to "lewd content".
1321	The Wi-Fi access is separate from the hospital system of servers. That means we have full
	access to the web within the terms and conditions i.e. decency
1323	Almost no mobile signal either!
1324	Wifi should be available for staff and patients. It would improve patient experience, enhance patient care and increase staff productivity
1325	Pls see above wrt staff
	But as for patients/public access It is frustrating to be sat waiting with no internet access
	It is also frustrating to try to manage patients when they (or their relatives) are constantly
	on the phone.
	I have no idea how much of a headache it would be to police wifi if it were free in hospital- some places must have gone down this route
	como piacco mascriavo gono acum ano roato
1327	The coverage though improving is still a little patchy.
1332	I think there is wifi in some area's but don't know the password, I assume it's not for
1334	medical staff Rubbish. I have never worked in a hospital where staff have decent access to hospital wifi
1334	(i.e on their own, functional devices). I am fed up with the shite technology in the NHS. It is
	so poor that a program I wrote with a colleague in a few spare hours 5 years ago to assist
	with obtaining and ordering blood results is still in use by the junior doctors in that hospital.
	They have a pile of IT employees in a shiny building who seem to do nothing. I am quite
	sure that the introduction of electronic discharges and prescribing is a tool purely designed to demoralise and control us. No one could seriously use these systems with the intent of
	improving care unless they were operating under North Korean style levels of self delusion.
1335	its pathetic in this era that it is not available for both staff and patients
1338	Both patient and staff benefit from access via wi-fi
1342	the lack of wi-if, technology in general is lacking for the technological age we are in already
	and does not have a stable foundation to develop with new technologies, which can only slow down and even impede patient care.
1345	It should be free for all, although a secure network should exist for clinical use. Would be
	helpful as no phone signal at work to use my mobile.
1349	I think that Wifi needs to be much more available than it currently is - very restricted.
1353	I think Wifi for both staff and patients would be useful.
	It would allow patients to use apps or browse relevant websites on their phone (for
	example - if we saw that they needed a PHQ9, Epworth etc score) in advance of an appointment.
	Access could be limited to health-based websites.
	For staff it would help bring technology and web resources more into consultatiosn. Ive had
	limited experience of EMIS Web Mobile on home visits and this works well (when there is

1070	3G signal).
1372	IG issues and use of N3 are holding things back, our public access is made available by our local Council
1375	We have WIFI in a certain part of the hospital but for the rest of the buildings we cannot get
4000	access, when staff should.
1380	Allowing young people access on adolescent psych wards can increase opportunities for covert bullying, pt to pt confidentiality breaches and opportunities to plan negative as well as positive group actions.
1384	Important as it is for staff (especially in clinical areas) to have access to WiFi, I think it would make a really significant difference to patient experience in hospital.
1388	WiFi is available, as described above, at all 5BP's locations (about 50 of them, including several hospital sites shared with Acute Trusts).
1496	Free wifi allows internet access but not intranet access. Internet access requires a manual
1202	step to login using a web form. As such, we currently cannot access intranet based applications (e.g. patient record systems) without having to jump through another hoopusing the Good application. Therefore, it might take 5 minutes to actually get a proper connection. Awful!
1393	WiFi should be available to patients, especially inpatients and regular day case to avoid them having to use expensive mobile data. WiFi isn't very important in my job day to day, but would make things easier in meetings
1001	and training sessions, e.g. being able to make full use of a laptop for note taking.
1394	It should free to all staff and patients, across all NHS facilities.
1397	With increasing personal technology (smartphone, tablets, etc) such access would certainly improve the quality of service to patients and improve the patient experience.
1398	our current wifi is slow, tempermental and liable to disconnect you without warning!
	Although obviously it's better than nothing, since there is no mobile phone signal in 90% of the hospital
1400	As the Director responsible for WiFi (amongst other things) we wanted to provide 100% free ubiquitous WiFi for patients, visitors and staff which we have done. I wish it were more common as I cant usually access Wifi in other hospitals, GP practices etc. Ian Mackenzie
1493	Why not?
1405	WiFi access is very good in this trust: On trust provided equipment we have access to full patient records etc. On personal devices this is restructed to Non-clinical use (no patient identifiable material
1410	Many WiFi networks around, however doctors and nurses do not get given a password. Instead we have to use the patients network where you have to agree to a disclaimer every single time the device connects to the wifi. It is rather tedious and time consuming. There is no 3G or 4G signal at all in the hospital unless you're partly hanging out of an open window. For both staff and patients this is extremely inconvenient at the best of times.
1492	Poor,availability
1418	Internet is an integral part of today's society, and NHS should keep up with the time! You would not think of a major corporate office in New York or London without high speed internet access, then why can we have the same when we can put them to good use?!
1420	Wifi access is just one part of the solution. Integrated electronic records, ePrescribing, single sign on, mobile device management software, hardware that can be sanitised, BYOD abilities, etc are all part of the considerable IT healthcare challenge.
1424	Widening availability is desperately needed. Medicine is stuck in the dark ages when it comes to connectivity despite almost everyone walking around with high-tech smartphones.
1426	dont forget there is a need to support medical education as well as delivering clinical services
1490	These days both Staff and especially patients can benefit from the provision of WiFi, but needs to be carefully planned, the only thing worse than no WiFi is BAD WiFi!
1434	It needs to be faster
1437	Wi fi access is only available if you take your device to IT and have password loaded on.
1440	no guest Wi fi access for visiting NHS staff at conferences I'm very proud of the service we have here at East Surrey Hospital. I think wifi access (free, not some ghastly "The Cloud" version) is needed by patients and visitors more here than almost anywhere else. Our trust has been very forward thinking and ambitious and I think we should celebrate that. And no, I'm not a manger - just an ordinary doctor who works here.
1448	Lots of users want high bandwidth services to stream data. They cannot have that.
1486	There is conflict with services such as Hospedia if we have wifi access we are less dependent on the availablity of hospital network

computer which makes staff more flexible and increase efficient 1459 I am the project manager for the wireless deployment across all sites in our Trust. I can also confirm that as a part of this project our other sites have been connected to the same Guest Wireless and Corporate Wireless network at the following post codes owned and operated by South Staffordshire and Shropshire Healthcare NHS Foundation Trust. ST16 3SR B78 3NG DE13 0TE ST17 9JW B79 7JN B77 3EW DE14 1JS **DE13 0RB DE14 1BG** ST16 1PD ST14 8JG **ST18 0WL** ST17 0AA WS13 6EF B79 7EA B79 7EE WV5 0AX **DE14 1EG** WV8 1AA **DE14 3WH DE13 0RB** B77 2ED WV5 9HA B77 5HP B78 3NG SY3 8DS **WV16 4EN** TF4 3AL **SY11 1GA** SY8 1QX TF1 3BX **SY3 8XQ SY11 1JR** TF9 3AH SY8 1DA **SY11 2NQ** TF4 2HQ SY2 6AX TF2 7AS TF9 3DQ SY2 6LG TF2 6EU SY2 5PE CB7 4LS CB4 2JS **PE29 3NR** CB1 3DF **PE19 2AR** B30 3ES If you require any more information please don't hesitate to contact me, Martyn.perry@sssft.nhs.uk 1468 good for the use of ipad to take notes. need to sort out PSN vs Coin Access... Our N3 is not the fastest via copper and the 1576 prospect of patients streaming via this service would impact on clinical service .. that is why we have a separate BT service Need the gateway from N3 as a larger "pipe" if this is t work. Great work Marcus Mark Westwood @geordiemedic

Possible security / information governance risks? Unsure?

1550

1553	yes it is well documented in the NHS that the Wi-fi Medical trolley for patient information is useful
	But I have an Hand held ASUS and input the medical symptoms and it gives you the diagnosis and also if i scan the patient tag it tells me results of tests and medication Given
1556	Should be available, could block social media sites as not needed for work.
1558	I think WiFI access is now a basic requirement for both patients and staff. Free basic
	coverage should be available for simple tasks and a premium service for higher demand
	usages.
1572	should be available to all (staff and patients/guests) at no cost for a basic service
1565	Wifi access keeps some patients from getting bored. When available, it should be
	advertised as a "customer benefit"
1605	Patients should get it.
	Staff would soon log onto that .
	Not convinced the distraction of wi fi in operating theatres is a good idea from patient
	safety standpoint.
	sarety standpoint.