**Report: Analysis of Awareness and Usage of the Call4Concern (C4C) Programme**

Executive Summary

This report presents the findings from an analysis of the awareness, understanding, and usage of the Call4Concern (C4C) programme among patients in different wards. The data reveals significant variance in awareness and understanding of the programme across wards and highlights the impact of informational posters on the awareness and understanding of the C4C programme.

1. Awareness of C4C Programme

* **Overall Awareness:** The data indicates a balanced awareness of the C4C programme, with 50% of respondents aware and 50% unaware.
* **Awareness by Ward:** Awareness levels significantly vary by ward. Davidson ward shows the highest awareness (76.19%), whereas Friend Stroke ward has the lowest (9.09%). Mary Ray ward has moderate awareness (43.48%).
  + **Statistical Significance:** The chi-square test yields a statistic of 13.503 and a p-value of 0.0012, indicating significant variation in awareness across different wards.

2. Mention of C4C Programme in Escalation

* **Mention in Escalation:** Only 27.59% of those aware of C4C mention it when asked how they would escalate concerns, suggesting a gap in understanding or confidence in using the programme for its intended purpose.

3. Understanding and Confidence in C4C Programme

* **Understanding How to Access:** A majority (72.73%) accurately describe why they would use C4C, and all respondents (100%) correctly described how to contact C4C.
* **Confidence in Using C4C:** Responses vary with 51.72% feeling very confident, 27.59% moderately confident, and 20.69% not confident in using the programme.
  + **Statistical Significance:** The chi-square tests for understanding how to access, why to access, and confidence in using C4C yield p-values of 1.0, suggesting no statistically significant variance within these categories.

4. Impact of Informational Posters

* **Poster Visibility:** Overall, 62.07% have seen the informational poster. Davidson ward had the highest visibility (95.24%), while Friend Stroke had the lowest (27.27%).
* **Effectiveness in Understanding:** 66.67% of those who saw the poster state it helped them understand what C4C is.
  + **Statistical Significance:** The chi-square test for poster visibility by ward yields a statistic of 18.390 and a p-value of 0.0001, indicating significant variation in poster visibility across wards.

5. Performance of Poster Viewers in Understanding C4C Programme

* **Performance in Understanding:** Of those who saw the poster, 71.43% accurately described why they would use C4C, and all understood how to contact C4C. Confidence levels were similar to the overall sample.

6. Frequency of Being Asked About Concerns

* **Asked About Concerns:** 51.79% reported being asked about their concerns during the ward round, with 31.58% being asked every day.
  + **Statistical Significance:** The chi-square test for being asked about concerns on the ward round yields a statistic of 6.058 and a p-value of 0.1948, indicating no statistically significant variation in how often concerns are raised across different wards.

Conclusions

The analysis reveals that while there is a reasonable level of awareness of the C4C programme, there is room for improvement, especially in certain wards. The effectiveness of informational posters is evident, significantly impacting awareness and understanding of the programme. However, the variance in confidence levels and the frequency of discussing concerns indicate the need for enhanced communication and engagement strategies to ensure the effective use of the C4C programme across all wards.