

1. What organisation do you work in?

2. How often do you interact with children and young people in your role?

- |                                       |                                   |
|---------------------------------------|-----------------------------------|
| <input type="radio"/> Very Frequently | <input type="radio"/> Rarely      |
| <input type="radio"/> Frequently      | <input type="radio"/> Very Rarely |
| <input type="radio"/> Occasionally    | <input type="radio"/> Never       |

3. How much of your learning and development over the past 12 months has related to CYP?

- |                            |                                                                                      |
|----------------------------|--------------------------------------------------------------------------------------|
| <input type="radio"/> All  | <input type="radio"/> A little                                                       |
| <input type="radio"/> Most | <input type="radio"/> None                                                           |
| <input type="radio"/> Some | <input type="radio"/> I have had no training and development over the past 12 months |

4. What is your role

- |                                                    |                                                |
|----------------------------------------------------|------------------------------------------------|
| <input type="radio"/> GP Principal                 | <input type="radio"/> Practice Nurse           |
| <input type="radio"/> Salaried GP                  | <input type="radio"/> School Nurse             |
| <input type="radio"/> Locum GP                     | <input type="radio"/> Clinical Pharmacist      |
| <input type="radio"/> GP Trainee                   | <input type="radio"/> Healthcare Assistant     |
| <input type="radio"/> Practice Manager             | <input type="radio"/> Practice Physiotherapist |
| <input type="radio"/> Receptionist/Clerical worker | <input type="radio"/> Practice MH Therapist    |
| <input type="radio"/> Medical Assistant            | <input type="radio"/> Physician Associate      |
| <input type="radio"/> Other (non-clinical)         | <input type="radio"/> Other (Clinical)         |
| <input type="radio"/> Health Visitor               |                                                |



6. Which are you three favourite methods of learning?

- |                                                        |                                                     |
|--------------------------------------------------------|-----------------------------------------------------|
| <input type="radio"/> Structured face to face learning | <input type="radio"/> Lectures                      |
| <input type="radio"/> Workshops                        | <input type="radio"/> Group discussions & tutorials |
| <input type="radio"/> Podcasts                         | <input type="radio"/> Role playing                  |
| <input type="radio"/> Medical journals                 | <input type="radio"/> Management games              |
| <input type="radio"/> e-learning                       | <input type="radio"/> Outdoor training              |
| <input type="radio"/> Professional conversations       | <input type="radio"/> Films & videos                |
| <input type="radio"/> Simulators                       | <input type="radio"/> Case studies                  |
| <input type="radio"/> On-the-job training              | <input type="radio"/> Planned reading               |
| <input type="radio"/> Coaching/mentoring               |                                                     |
| <input type="radio"/> Other (please specify)           |                                                     |

7. To what extent do you agree or disagree with the following statements?

Further learning and development in CYP could help me to...

	Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree	I don't know
...do my job more effectively	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...feel more confident when interacting with CYP in my role	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...stay up-to-date with professional requirements surrounding CYP	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...deliver a better patient experience for CYP	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8. What motivates you to do online training?

- For personal development/learning
- To improve patient care
- To meet appraisal needs
- Other (please specify)

9. I would most like to do face-to-face training as a:

- Full day session
- Half day session morning
- Half day session afternoon
- Evening session
- Other (please specify)

10. What are your main concerns or issues that you feel you currently face in terms of CYP?

11. Are there any other areas where you feel there are gaps in your knowledge relating to CYP?

- No
- Don't know
- Yes (please specify)