

## Bi-Monthly VCSE Monitoring Return Template

**Total Participants:** \_\_\_\_\_

**Sex**

| Sex               | Number |
|-------------------|--------|
| Female            |        |
| Male              |        |
| Other             |        |
| Prefer not to say |        |

**Ethnicity**

| Ethnicity                             | Number |
|---------------------------------------|--------|
| White British                         |        |
| White Other                           |        |
| Asian/Asian British                   |        |
| Black/African/Caribbean/Black British |        |
| Mixed/Multiple Ethnic Groups          |        |
| Other Ethnic Group                    |        |
| Prefer not to say                     |        |

**4. Awareness Outcomes**

Based on completed participant questionnaires:

| Outcome Measure                                             | Number | % |
|-------------------------------------------------------------|--------|---|
| Participants completing questionnaires                      |        |   |
| Reported increased awareness of CVD-RM                      |        |   |
| Reported awareness improved 'quite a lot' or 'a great deal' |        |   |
| Reported increased confidence managing heart health         |        |   |
| Would recommend the activity to others                      |        |   |

**5. Intended Actions**

Following participation, how many people reported that they intend to:

| Intended action                    | Number |
|------------------------------------|--------|
| Have a blood pressure check        |        |
| Attend an NHS Health Check         |        |
| Speak to a GP, Nurse or Pharmacist |        |
| Improve diet                       |        |
| Increase physical activity         |        |
| Reduce alcohol consumption         |        |
| Make a quit attempt (smoking)      |        |
| Learn more about CVD risk          |        |

## 6. Signposting and Referrals

| Service                           | Number Signposted |
|-----------------------------------|-------------------|
| NHS Health Checks                 |                   |
| Community Pharmacy BP Checks      |                   |
| GP Practice                       |                   |
| Weight Management Services        |                   |
| Smoking Cessation Services        |                   |
| NHS Diabetes Prevention Programme |                   |
| Other Services                    |                   |

Please specify any other services:

|  |
|--|
|  |
|--|

## 7. Success Stories and Learning

### Case Study / Success Story

Please provide one example of how the project has improved awareness of CVD-RM or encouraged action. Include detail on the individual's circumstance, what worked well, details of challenges and outcome.