

Part 1 - Information and Involvement

Information

In Worcestershire we have a two tier local authority system. This means that some services are provided by the County Council and others by your District and Parish Councils. You pay your council tax to the District Council but the County Council receives a share of that revenue. The services that Worcestershire County Council provide include: Libraries, Health and Social Care, Education, Public Transport, Highway Maintenance, Park and Ride, Street Lighting, Country Parks, Public Rights of Way, Trading Standards, Waste Management, Museums and Archaeology and Economic Development.

In this section we would like to find out about three main things:

How well informed you currently feel that you are about Worcestershire County Council and our services.

To what extent you would like to be informed about various services in the future.

Your overall opinion of the value for money provided by the county council

Q1 Generally, how much would you say you know about Worcestershire County Council?

Please tick **ONE** only

- a) Great deal
- b) Fair amount.....
- c) Just a little
- d) Hardly anything.....
- e) Never heard of/Don't know

Q2 How well informed does Worcestershire County Council keep residents about each of the following?

Please tick **ONE** for each a) to d)

	<i>Keeps us very well informed</i>	<i>Keeps us fairly well informed</i>	<i>Gives us a limited amount of information</i>	<i>Doesn't tell us much at all</i>	<i>Don't know</i>
a) The services and benefits it provides	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) The costs of those services and benefits.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) The improvements planned for its services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) The value for money it provides.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q3 How important is it to you to be informed about each of the following services?

Please rate each a) to m) on a scale of 0 to 5 where 0 means "Not at all important" and 5 means "Very Important"

	0	1	2	3	4	5
a) Libraries.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Health and Social Care.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Education.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Public Transport.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Highway Maintenance.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Park and Ride.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Street Lighting.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) Country Parks.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i) Public Rights of Way.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j) Trading Standards.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k) Waste Management.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l) Museums.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m) Economic Development.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q4 Have you used the following county council services in the last 12 months?

Please tick **ONE** only for each a) to m)

	Yes	No	Don't Know
a) Libraries.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Health and Social Care.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Education.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Public Transport.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Park and Ride.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Country Parks.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Public Rights of Way.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) Trading Standards.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i) Waste Disposal Sites.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j) Museums.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q5 Overall, how would you describe the quality of the services provided by Worcestershire County Council?

*Please tick **ONE** only*

- | | | | |
|-------------------|--------------------------|--------------------|--------------------------|
| a) Very good..... | <input type="checkbox"/> | d) Poor | <input type="checkbox"/> |
| b) Good | <input type="checkbox"/> | e) Very Poor | <input type="checkbox"/> |
| c) Average..... | <input type="checkbox"/> | f) Don't Know..... | <input type="checkbox"/> |

Q6 If you rate the county council services as poor or very poor, please explain briefly why you think this.

Please use the box below for your comments

Q7 If you rate the county council services as good or very good, please explain briefly why you think this.

Please use the box below for your comments

Q8 Thinking about county council services, what is your overall impression of the cost of these services?

*Please tick **ONE** only*

- | | | | |
|--|--------------------------|---------------------------|--------------------------|
| a) Very expensive..... | <input type="checkbox"/> | d) Inexpensive | <input type="checkbox"/> |
| b) Expensive..... | <input type="checkbox"/> | e) Very inexpensive | <input type="checkbox"/> |
| c) Neither expensive nor inexpensive | <input type="checkbox"/> | f) Don't Know..... | <input type="checkbox"/> |

Q9 How would you describe the value for money achieved by Worcestershire County Council services?

*Please tick **ONE** only*

- | | | | |
|-------------------|--------------------------|--------------------|--------------------------|
| a) Very good..... | <input type="checkbox"/> | d) Poor | <input type="checkbox"/> |
| b) Good | <input type="checkbox"/> | e) Very Poor | <input type="checkbox"/> |
| c) Average..... | <input type="checkbox"/> | f) Don't Know..... | <input type="checkbox"/> |

Influencing Decisions

In the June 2008 Citizens Panel survey we asked if you think you can influence decisions affecting your local area, that is the estate, village or streets immediately surrounding where you live; 60% of you do not think that you can have an influence. The questions in this section aim to explore this issue in more detail.

Q10 Would you like to be involved in the decisions that affect your local area?

Please tick **ONE** only

a) Yes..... Go to Q11

c) Don't Know..... Go to Q12

b) No Go to Q12

Q11 (If Yes) How would you like to have an influence on local decision making?

Please tick **ALL** that apply

a) Vote for a councillor.....

h) Respond to surveys.....

b) Stand for election as a councillor.....

i) Take part in focus groups

c) Contact my councillor

j) Be involved in allocating small grants

d) Attend a council meeting

k) Join a local action group.....

e) Write to a local newspaper

l) Attend regular community forums in my area

f) Sign a petition

m) Other action.....

g) Attend local community consultation events on specific issues.....

If Other, please specify

Q12 In the past three years, have you taken any of the following actions to try to influence decisions that affect your local area?

Please tick **ALL** that apply

a) Voted for a councillor.....

h) Responded to surveys.....

b) Stood for election as a councillor.....

i) Taken part in focus groups

c) Contacted a local councillor or MP

j) Joined a local action group.....

d) Attended a council meeting

k) Attended regular community forums in my area

e) Written to a local newspaper

l) Other action.....

f) Signed a petition.....

g) Attended local community consultation events on specific issues.....

If Other, please specify

Democracy

Local authorities such as Worcestershire County Council are an important part of the democratic system in this country. In a recent White Paper, Central Government signalled its intention to place a duty to promote democracy on local authorities and to give authorities the power to provide incentives for voting in local elections. In this section of the questionnaire we aim to explore the actions that would help us to promote democratic understanding and participation in local government.

Q16 Do you know who your local elected representatives are?

Please tick **ONE** for each a) to e)

	a) Yes	b) No
a) Your Parish Councillor	<input type="checkbox"/>	<input type="checkbox"/>
b) Your District Councillor	<input type="checkbox"/>	<input type="checkbox"/>
c) Your County Councillor	<input type="checkbox"/>	<input type="checkbox"/>
d) Your Member of Parliament (MP)	<input type="checkbox"/>	<input type="checkbox"/>
e) Your Member of the European Parliament (MEP).....	<input type="checkbox"/>	<input type="checkbox"/>

Q17 Did you vote at the last elections?

Please tick **ONE** for each a) to c)

	a) Yes	b) No	c) I was not eligible to do so
a) Parish elections (to elect parish councillors).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Local elections (to elect county and/or district councillors).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) National elections (to elect an MP)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q18 What, if anything, discourages you from voting in elections?

Please use the box below to enter your comments

Q19 What, if anything, would encourage you to vote in future elections?

Please tick ALL that apply

- a) Entry to a prize draw when you vote
- b) Recognition for voting, e.g. an "I've Voted" sticker
- c) Guide to the voting process.....
- d) Information on the implications of voting
- e) Media campaign to promote voting
- f) Frontline council staff well informed about local democratic system.....
- g) Opportunities for dialogue with councillors (e.g. via local radio, blogs etc.)
- h) Opportunity to vote online
- i) Polling stations in alternative locations (e.g. supermarket, library).....
- j) Nothing.....
- k) Other.....

If Other, please specify

Q20 What, if anything, would encourage you to stand for election as a local councillor?

Please tick ALL that apply

- a) Time off work for public duties.....
- b) Formal qualifications gained through service as a councillor.....
- c) Ability to participate in meetings remotely.....
- d) Discretionary localised budget to spend on needs of local community.....
- e) Positive profile of councillors in the media.....
- f) Shadowing opportunities to better understand the role of a councillor.....
- g) Guide to how Local Government works.....
- h) No incentive required
- i) Nothing.....
- j) Other.....

If Other, please specify

Belonging to the area

In response to the June 2008 Citizens Panel survey 62% of you said that you feel you belong very strongly or fairly strongly to your local area. The following question aims to explore what influences this feeling of belonging.

Q21 Which THREE of the following factors do you think most make you feel that you belong to your local area, or would make you feel that way?

Please tick up to **THREE** of the following

- a) Living in the area for a long time
- b) Having family in the area.....
- c) Having friends in the area.....
- d) Having grown up in the area
- e) Owning property in the area.....
- f) Participating in local groups
- g) Attending local events
- h) Having pride in the local area.....
- i) Feeling safe in the local area.....
- j) Being able to influence local decisions

Part 2 - Health and Well-being

Worcestershire County Council works in partnership with the local NHS Primary Care Trust (PCT) on issues of health and well-being. The PCT is the organisation responsible for commissioning and providing health services across the county

Joint Strategic Needs Assessment

Worcestershire has significantly changed how health and social care services are commissioned jointly between the County Council and the Primary Care Trust (PCT). We want to ensure that we are addressing the most important priorities and to inform this we are producing a Strategic Needs Assessment of Health and Well-being issues. The following questions ask for your opinions in relation to this work.

Q22 Which three of the following Health and Well-being issues do you consider to be the most important for the county council and PCT to address?

Please tick up to **THREE** issues

- a) Employment for people with learning disabilities or mental health problems
- b) Dementia.....
- c) Physical disabilities amongst older people
- d) End of life issues.....
- e) Mental health problems amongst vulnerable adults.....
- f) Alcohol misuse.....
- g) Child and adolescent mental health
- h) Teenage pregnancy and adolescent sexual health
- i) Disabled children.....

Q23 Do you currently provide significant help to family members, friends, neighbours or others because of their long-term ill health or disability? (Not including anything you do as part of paid employment)

*Please tick **ONE** only*

a) Yes..... Go to Q24

b) No Go to Q26

Q24 (If Yes) Who do you provide this help to?

*Please tick **ALL** that apply*

a) Adult(s).....

b) Child(ren) / young person(people).....

Q25 (If Yes) What is the nature of the long term health problem affecting the person or people that you help?

*Please tick **ALL** that apply*

a) Physical ill health or disability.....

b) Mental ill health or disability

c) Learning disability.....

Q26 In the last 12 months have you been aware of a relative or close friend who has suffered or is suffering from dementia?

*Please tick **ONE** only*

a) Yes.....

b) No

Q27 How concerned are you about each of the following potential changes in your circumstances as you get older?

Please rate each a) to e) on a scale of 0 to 5 where 0 means "Not at all concerned" and 5 means "Very Concerned"

	0	1	2	3	4	5
a) Worsening physical health.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Worsening mental health.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Becoming more dependent on others.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Worsening financial security.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If Other, please specify

In considering what support the Council and PCT should be providing, we need to understand your views regarding the nature of the palliative care you would expect at the end of your life. Palliative care is the management of pain and other symptoms and provision of psychological, social and spiritual support; this care aims to achieve the best quality of life for patients and their families.

Q28 If at the end of your life you were suffering from a condition that could be successfully managed without the need for acute medical care, where would you be most comfortable in spending your last days?

*Please tick **ONE** only*

- a) *In your own home*
- b) *In hospital*.....
- c) *In a hospice*.....
- d) *In a care home*.....
- e) *Other*.....
- f) *Don't Know*.....

If Other, please specify

Worcestershire Primary Care Trust

Colleagues at the local NHS Primary Care Trust would like to find out your opinions on local healthcare services.

Q29 Thinking about health services in your area, including any plans you are aware of, how do you expect these services to change over the next few years?

*Please tick **ONE** only*

- a) *Will get much better*.....
- b) *Will get better*
- c) *Will stay the same*
- d) *Will get worse*.....
- e) *Will get much worse*
- f) *Don't Know*.....

About You

To ensure that we are meeting the needs of all residents it is important that we ask you a few questions about yourself. As with all questions, your answers are completely confidential.

Q33 In which district do you live?

*Please tick **ONE** only*

- a) Bromsgrove c) Redditch..... e) Wychavon.....
b) Malvern Hills d) Worcester City..... f) Wyre Forest.....

Q34 Are you...?

*Please tick **ONE** only*

- a) Male b) Female

Q35 What was your age on your last birthday?

Please write your age in years in the box below

Q36 Do you personally have a long standing illness, disability or infirmity that limits your daily activities?

*Please tick **ONE** only*

- a) Yes..... b) No

Q37 How many years have you lived in your current local area?

*Please tick **ONE** only*

- a) Less than a year c) 4-5 years..... e) 11-20 years
b) 1-3 years..... d) 6-10 years f) 21 years or more

Q38 How would you describe your ethnicity?

Please tick **ONE** only

- | | | | |
|---|--------------------------|---|--------------------------|
| a) White - British..... | <input type="checkbox"/> | i) Black or Black British: Caribbean..... | <input type="checkbox"/> |
| b) White - Irish..... | <input type="checkbox"/> | j) Black or Black British: Other..... | <input type="checkbox"/> |
| c) White - Other..... | <input type="checkbox"/> | k) Asian or Asian British: Indian..... | <input type="checkbox"/> |
| d) Mixed - White and Black Caribbean..... | <input type="checkbox"/> | l) Asian or Asian British: Pakistani..... | <input type="checkbox"/> |
| e) Mixed - White and Black African..... | <input type="checkbox"/> | m) Asian or Asian British: Bangladeshi..... | <input type="checkbox"/> |
| f) Mixed - White and Asian..... | <input type="checkbox"/> | n) Asian or Asian British: Other..... | <input type="checkbox"/> |
| g) Mixed - Other..... | <input type="checkbox"/> | o) Chinese..... | <input type="checkbox"/> |
| h) Black or Black British: African..... | <input type="checkbox"/> | p) Other..... | <input type="checkbox"/> |

Q39 Which of the following best describes your current employment status?

Please tick **ONE** only

- | | | | |
|--|--------------------------|---|--------------------------|
| a) I work full time (over 30 hrs a week)..... | <input type="checkbox"/> | h) Between jobs..... | <input type="checkbox"/> |
| b) I work part time (less than 30 hrs a week)..... | <input type="checkbox"/> | i) Looking after the home or family or caring for someone else..... | <input type="checkbox"/> |
| c) Self employed..... | <input type="checkbox"/> | j) Unemployed less than 6 months..... | <input type="checkbox"/> |
| d) Doing temporary work..... | <input type="checkbox"/> | k) Unemployed more than 6 months..... | <input type="checkbox"/> |
| e) I am a full time student..... | <input type="checkbox"/> | l) Retired..... | <input type="checkbox"/> |
| f) Training..... | <input type="checkbox"/> | m) Permanently sick/disabled..... | <input type="checkbox"/> |
| g) Voluntary work..... | <input type="checkbox"/> | n) Other..... | <input type="checkbox"/> |

**Thank you for taking the time to complete this questionnaire.
Do you have any other comments relating to the services provided by Worcestershire
County Council?
If so, please use the box provided below.**

Please return in the pre-paid envelope provided to:

**Research and Intelligence Unit, Worcestershire County Council, County Hall, Spetchley
Road, Worcester. WR5 2BR**

By Friday 5th December