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Ref:

# Shaping Poole Survey 2011

Poole  
Partnership



Shaping our future

Dear local resident,

We are writing to you to ask for your views.

Poole Council works closely with other public services such as the police, health and community representatives to make decisions about services for local people.

This questionnaire asks for your opinions about aspects of the quality of life in your local area, including community safety and local services. By your local area, we mean the area within 15-20 minutes walking distance from your home. The findings will be used to see how well Poole Council and its partners are doing at delivering the services that matter to you and to decide what needs doing differently.

Please take this opportunity to have your say. It doesn't matter if you've only just moved into the area or if you don't pay council tax. It's important that we hear everybody's views.

If you have any questions or concerns about this survey please do not hesitate to contact the Corporate Research Team on 01202 633086 or email [research@poole.gov.uk](mailto:research@poole.gov.uk)

Please return the completed questionnaire in the pre-paid envelope provided with this questionnaire. Alternatively, you can help us save postage and administration time by filling in the survey online at [www.boroughofpoole.com/shapingpoole](http://www.boroughofpoole.com/shapingpoole). You will need to enter your reference number in the box at the top of this page. **Please return your survey as soon as possible, or by 11 October 2011.**

All the information you provide will be treated in confidence and stored securely in accordance with the Data Protection Act 1998. Responses will only be used by the Council and its partner organisations to monitor services and assess how well they are performing. No individuals will be identifiable in any report.

Thank you for your help in advance.

Yours sincerely,

John McBride  
Chief Executive, Borough of Poole

Richard Dimbleby  
Chairman, Poole Partnership





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## Helpful hints for completing this questionnaire

Your household has been selected at random to take part in the survey. The questionnaire should be completed by any resident aged 18 or over living at this address.

Please use a black pen to complete this questionnaire and write in BLOCK CAPITALS.

Please read each question carefully and put a cross  in a box to indicate your answer. If you make a mistake, shade in the box and put a cross in the box you want.

Once you have finished please take a minute to check you have answered all the questions that you should have answered.

This questionnaire should take no longer than 15 minutes to complete.

Once you have completed the questionnaire please return in the pre-addressed envelope supplied. You do not need to add a stamp.

If you cannot find, or did not receive, the pre-addressed envelope please send to:  
Shaping Poole Survey, Freepost SWB21053,  
Borough of Poole, Civic Centre, Poole, BH15 2ZZ.

Alternatively you can help us save postage and administration time by filling in the survey on-line at [www.boroughofpoole.com/shapingpoole](http://www.boroughofpoole.com/shapingpoole). You will need to enter your reference number at the top of this page.

Please return your survey as soon as possible or by Tuesday 11 October 2011.

Survey findings will be published in Poole News and on [www.boroughofpoole.com](http://www.boroughofpoole.com) and [www.poolepartnership.info](http://www.poolepartnership.info) when they are available.



We can give you help to read or understand this information. Please contact us if you need help in completing this form.



Please call: 01202 633 086  
Text Relay: 18001 01202 633 086



Email: [research@poole.gov.uk](mailto:research@poole.gov.uk)  
Visit: [www.boroughofpoole.com/accessibility](http://www.boroughofpoole.com/accessibility)



## Section 1: About Your Local Area

Throughout the questionnaire we ask you to think about 'your local area'. When answering, please consider your local area to be the area within 15-20 minutes walking distance from your home.

**Q1 Thinking generally, which of the things below would you say are most important in making somewhere a good place to live?** Please X up to five boxes only in the left hand column below.

**Q2 And thinking about this local area, which of the things below, if any, do you think most need improving?** Please X up to five boxes only in the right hand column below.

	Q1 Most important in making somewhere a good place to live	Q2 Most needs improving in this local area
a) Access to nature	<input type="checkbox"/>	<input type="checkbox"/>
b) Affordable decent housing	<input type="checkbox"/>	<input type="checkbox"/>
c) Clean streets	<input type="checkbox"/>	<input type="checkbox"/>
d) Community activities	<input type="checkbox"/>	<input type="checkbox"/>
e) Cultural facilities (e.g. libraries, museums)	<input type="checkbox"/>	<input type="checkbox"/>
f) Education provision	<input type="checkbox"/>	<input type="checkbox"/>
g) Facilities for families with young children aged 0-4	<input type="checkbox"/>	<input type="checkbox"/>
h) Facilities for children aged 5-12	<input type="checkbox"/>	<input type="checkbox"/>
i) Facilities / activities for young people aged 13-19	<input type="checkbox"/>	<input type="checkbox"/>
j) Health services	<input type="checkbox"/>	<input type="checkbox"/>
k) Job prospects	<input type="checkbox"/>	<input type="checkbox"/>
l) The level of crime	<input type="checkbox"/>	<input type="checkbox"/>
m) The level of pollution	<input type="checkbox"/>	<input type="checkbox"/>
n) The level of traffic congestion	<input type="checkbox"/>	<input type="checkbox"/>
o) Parks and open spaces	<input type="checkbox"/>	<input type="checkbox"/>
p) Public transport	<input type="checkbox"/>	<input type="checkbox"/>
q) Race relations	<input type="checkbox"/>	<input type="checkbox"/>
r) Road and pavement repairs	<input type="checkbox"/>	<input type="checkbox"/>
s) Services / support for older people	<input type="checkbox"/>	<input type="checkbox"/>
t) Shopping facilities	<input type="checkbox"/>	<input type="checkbox"/>
u) Sports and leisure facilities	<input type="checkbox"/>	<input type="checkbox"/>
v) Wage levels and local cost of living	<input type="checkbox"/>	<input type="checkbox"/>
w) Other <i>please X box and write in below</i>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>		
x) Don't know	<input type="checkbox"/>	<input type="checkbox"/>







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Poole Council is responsible for adult social care services, benefits administration, local tax collection, children and young people's services, community safety, culture and community learning services including libraries, environmental health, highways services including maintenance of roads, street lighting and parking, housing, parks and open spaces, planning and economic development services, public transport, sport facilities, street cleaning, tourism and waste and recycling services.

**Q10 To what extent do you agree or disagree that Poole Council provides value for money?**

*Please X one box only.*

Strongly agree	Tend to agree	Neither agree nor disagree	Tend to disagree	Strongly disagree	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q11 And now taking everything into account, how satisfied or dissatisfied are you with the way Poole Council runs things? Please X one box only.**

Very satisfied	Fairly satisfied	Neither satisfied nor dissatisfied	Fairly dissatisfied	Very dissatisfied	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Section 3: Information**

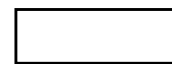
**Q12 How well informed do you feel about each of the following?**

*Please X one box only for each statement.*

	Very well informed	Fairly well informed	Not very well informed	Not well informed at all	Don't know
a) How and where to register to vote	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) How your council tax is spent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) How you can get involved in local decision-making	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) What standard of service you should expect from local public services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) How well local public services are performing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) How to complain about local public services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) What to do in the event of a large-scale emergency e.g. flooding, human pandemic flu	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) How you can get involved in delivering services in your local area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i) Overall, how well informed do you feel about local public services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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## Section 4: Local Decision Making

As with the previous questions, when answering, please consider your local area to be the area within 15-20 minutes walking distance from your home.

**Q13 Do you agree or disagree that you can influence decisions affecting your local area?**

*Please X one box only.*

Definitely  
agree

Tend to  
agree

Tend to  
disagree

Definitely  
disagree

Don't  
know

**Q14 Generally speaking, would you like to be more involved in the decisions that affect your local area?** *Please X one box only.*

Yes

No

Depends on the issue

Don't know

## Section 5: Helping Out

We are interested to know about the unpaid help people give.

Please think about any group(s), club(s) or organisation(s) that you've been involved with during the last 12 months. That's anything you've taken part in, supported, or that you've helped in any way, either on your own or with others. For example, helping at a youth or day centre, helping to run an event, campaigning or doing administrative work.

Please exclude giving money and anything that was a requirement of your job.

**Q15 Overall, about how often over the last 12 months have you given unpaid help or been a volunteer to any group(s), club(s) or organisation(s)?**

**Please only include work that is unpaid and not for your family.**

*Please X one box only.*

At least once a week

Less than once a week but at least once a month

Less often

I give unpaid help as an individual only and not through groups(s), club(s) or organisation(s)

I have not given any unpaid help at all over the last 12 months

Don't know

**Q16 Would you like to give unpaid help to any group(s), club(s) or organisation(s) in the future?**

*Please X one box only.*

Yes

No

Don't know



## Section 6: Getting Involved

We are interested in whether you play an active part in the local area and whether you would like to be involved. Please think about the forums, groups or organisations you are involved in that affect and/or deliver services in your local area. Please exclude anything that was a requirement of your job.

### Q17 In the past 12 months have you been involved...

Please X one box for each statement.

	Yes	No	No, but I would like to
a) as a local councillor or held another position of responsibility in your local area, for example a school governor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) in a tenants' group, for example Poole Housing Partnership or a Housing Association	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) in a forum, group or organisation concerning local health and/or social care, for example LINKs, Hospital Trust, Poole Involvement Network	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) in improving community safety / tackling crime in the local area, for example Neighbourhood Watch, Safer Neighbourhood Meetings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) in providing services/activities for children and young people in the local area, for example, toddler group, sports, youth club, Scouts/Brownies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) in providing sports, adult learning, cultural or arts facilities/activities for adults (aged over 18) in the local area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) in improving the local environment, parks or open spaces	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) in another forum, group or organisation set up to improve the local area or help local people. Please write in below	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[ ]

## Section 7: Respect and Consideration

### Q18 To what extent do you agree or disagree that your local area is a place where people from different backgrounds get on well together? Please X one box only.

Definitely agree	Tend to agree	Tend to disagree	Definitely disagree	Don't know	Too few people in local area	All the same background
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Q19 In your local area, how much of a problem do you think there is with people not treating each other with respect and consideration? Please X one box only.

A very big problem	A fairly big problem	Not a very big problem	Not a problem at all	Don't know / no opinion
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Q20 In your opinion, are older people in your local area able to get the services and support they need to continue to live at home for as long as they want to?

(This could include help or support from public, private or voluntary services or from family, friends and the wider community). Please X one box only.

- Yes       No       Don't know







## Section 9: About Yourself

Please complete these questions which will help us to see if there are differences between the views of different residents. All the information you give will be kept completely confidential.

**Q24 Are you male or female? Please X one box only.**

- Male  Female

**Q25 What was your age on your last birthday? Please write in the box below.**

Years

**Q26 In which of these ways does your household occupy your current accommodation? Please X one box only.**

- Owned outright  Rent from Housing Association / Trust  
 Buying on mortgage  Rent from private landlord  
 Rent from Council / Poole Housing Partnership  Other

**Q27 How many children aged 17 or under are living here? Please X one box only.**

- None  One  Two  Three  Four  More than four

**Q28 And how many adults aged 18 or over are living here? Please X one box only.**

- None  One  Two  Three  Four  More than four

**Q29 Which of these activities best describes what you are doing at present? Please x one box only.**

- Employee in full-time job (30 hours plus per week)  Wholly retired from work  
 Employee in part-time job (under 30 hours per week)  Unemployed and available for work  
 Self employed full or part-time  Permanently sick/disabled  
 On a government supported training programme (e.g. Modern Apprenticeship/Training for Work)  Looking after the home  
 Full-time education at school, college or university  Doing something else

**Q30 How is your health in general? Would you say it is...? Please X one box only.**

- Very good  Good  Fair  Bad  Very bad

**Q31 Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months? Include problems related to old age.**

- Yes, limited a lot  Yes, limited a little  No



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**Q32 Do you receive support from someone else to help you with your daily life? If so, is this help from...? Please X all that apply.**

- Family member
- Neighbour or friend
- Health professional (e.g. District Nurse)
- Home help
- Voluntary organisation
- Other (Please X and write in)
- None

**Q33 Do you look after, or give any help or support to family members, friends, neighbours or others because of: a) long term physical or mental ill-health or disability, or b) problems related to old age?**

*Do not count anything you do as part of your paid employment.*

*Please X one box only.*

- No
- Yes, 1-19 hours per week
- Yes, 20-49 hours per week
- Yes, 50+ hours per week

**Q34 Which of these groups do you consider you belong to?**

*Please X one box only and write in below*

- White British
- White Irish
- Gypsy or Irish Traveller
- Any other White background, please X and write in below
- Mixed ethnic groups (White and Black Caribbean, White and Black African, White and Asian, Any other Mixed ethnic background)
- Asian/Asian British (Indian, Pakistani, Bangladeshi, Chinese, Any other Asian background)
- Black/African/Caribbean/Black British/any other Black/African/Caribbean background
- Other ethnic group (Arab/Other ethnic group) write in below



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### Your Comments - please use the space below

### Join the Poole Opinion Panel

Poole Council runs a Citizen's Panel, the Poole Opinion Panel, to involve local residents in decisions about local services. Panel members take part in surveys and may be invited to take part in discussion groups. If you would like to be considered to join the Poole Opinion Panel please provide your name, a contact telephone number and email address below (*we already have your address*).

Title  Mr  Mrs  Ms  Miss  Other, please write in

First Name

Surname

Home Telephone number (  )

Mobile number

E-mail address

How would you like to take part in panel surveys?

- By Post  Complete on-line via the Internet (this helps to reduce our costs)

The personal information you have provided will only be used for the administration and analysis of the Poole Opinion Panel by the Corporate Research Team, Borough of Poole.

I agree that my information can be used for this purpose.

Signature  Date  /  /

We would also like to inform you of other research and consultations that you can take part in. If you would like to notified about these, please cross this box.

Thank you very much for taking part in this survey.