

Your membership number is:

Your Living in Lancashire survey

1. Please read the instructions carefully.
2. Please use blue or black pen to fill in the questionnaire.
3. Please check you have answered all the appropriate questions.
4. Return your completed questionnaire in the reply-paid envelope provided.

Your priorities for health

1

How is your health in general? Would you say it is...

PLEASE TICK ONE BOX ONLY

Very good Good Fair Bad Very bad

2

Below is a list of things that people have said are important health problems in their neighbourhoods. What would you say are the three main health and wellbeing problems in your neighbourhood?

PLEASE TICK UP TO THREE BOXES ONLY

Poor housing

Poverty/lack of money

Drug misuse

Low confidence and/or self esteem

Obesity

Poor diet

Lack of exercise

Unemployment

Poor mental health

Alcohol misuse

Traffic accidents

Heart disease

Cancer

Loneliness or isolation

Other (please write in the box)

3

Below is a list of things that people have identified as priorities for improving health and wellbeing. What are the **three most important things** that could be done to **improve health and wellbeing in your neighbourhood**? PLEASE TICK UP TO THREE BOXES ONLY

- Improve childcare
- Improve the environment (eg reduce litter, more greenery)
- Improve public transport
- More support for children and families
- More activities for young people
- Increase community facilities (eg community centres, libraries)
- Improve GP services
- Provide opportunities to grown your own food
- Introduce traffic calming
- Reduce crime
- Improve hospital services
- Improve access to affordable healthy food
- Increase support for people with mental health problems
- More opportunities to get involved in the community or volunteer
- More support to keep healthy (eg stop smoking, weight management groups)
- More opportunities for physical activity (eg walking, cycling, leisure facilities)
- Improve drug and alcohol services
- More support for older people
- Support to find a job
- Help with finances
- Other (please write in the box)

Your community and neighbourhood

4

To what extent do you feel involved in your community and in community activities? PLEASE TICK ONE BOX ONLY

- Very involved
- Fairly involved
- Not very involved
- Not involved at all
- Don't know

5**To what extent do you think older people in your local area feel the threat of loneliness in their home, or in the area they live?**

PLEASE TICK ONE BOX ONLY

Feel very lonely Feel lonely sometimes Not very lonely Not lonely at all Don't know **6****Thinking about older people in your local area, how important do you think each of the following types of information are for older people locally? PLEASE TICK ONE BOX FOR EACH**

	Very important	Fairly important	Not very important	Not at all important	Don't know
Fire safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technical help in the home (eg changing plugs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Falling/accidents in the home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dealing with junk mail/ telephone calls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Information on crime and safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7**If you wanted to find information about public services, which of the following would you access as a source of information?**

PLEASE TICK AS MANY AS APPLY

Internet Telephone directory Contact Lancashire County Council Contact your local district council Direct.gov website Charitable organisation (eg Age Concern) Friends or relatives

Other (please write in the box)

None of these Don't know

Adult and community services

8

How much do you feel you know about the work of Adult and Community Services in Lancashire? PLEASE TICK ONE BOX ONLY

A great deal

A fair amount

A little

Nothing at all

9

How well informed do you feel about Adult and Community services in Lancashire? PLEASE TICK ONE BOX ONLY

Very well informed

Fairly well informed

Not very well informed

Not at all informed

Don't know

10

Which, if any, of the following services do you think Adult and Community Services provides? PLEASE TICK AS MANY AS APPLY

Support for people who have a learning disability

Running of care homes

Support for people who have a mental health problem

Support for drug users

Assessing benefit entitlement

Support for people who have a physical disability/sensory impairment

Support and rehabilitation of offenders

Support homeless people to find accommodation

Support for older people who come out of hospital and need help getting back on their feet

Responsibility for asylum seekers/illegal immigrants

Responsibility for travellers

Other (please write in the box)

None of these

Don't know

11**Have you heard of Help Direct?**

PLEASE TICK ONE BOX ONLY

Yes No Don't know **12****Which of the following, if any, would you contact first in each of the following situations? PLEASE TICK ONE BOX FOR EACH**

	Hospital	NHS Direct	GP or family doctor	Adult and community services	Police	Help Direct	Don't know	Wouldn't contact anyone
If you, or a relative, needed help to move around the home or help with personal care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If you knew a vulnerable or older person who was being abused	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If you needed advice about care for an older person	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If you needed advice about care for a disabled person	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13**Which of the following, if any, would you contact first for advice about the benefits you, or someone you know, are entitled to?**

PLEASE TICK ONE BOX ONLY

Welfare Rights Adult and Community Services Citizens Advice Help Direct

Other (please write in the box)

Don't know **14****In your area, do you think older people are able to get services and support they need to continue to live at home for as long as they want to? PLEASE TICK ONE BOX ONLY**Yes No Don't know

15**Do you think that there are enough opportunities for older people to get practical help in the home?**

PLEASE TICK ONE BOX ONLY

Yes No Don't know **16****Have you heard about people needing care in their home being given a budget to buy it themselves?**

PLEASE TICK ONE BOX ONLY

Yes No Don't know **17****Do you know who to contact if you needed information about...?**

PLEASE TICK ONE BOX FOR EACH

	Yes	No	Don't know
Benefit advice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home care or home help	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Day centres	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lunch clubs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Meals on wheels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aids and adaptations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Residential or nursing homes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

18**Do you provide care for a family member, friends or neighbours with long-term ill health or problems related to old age, other than as part of your job? Please tick one box for time spent in a typical week.**

PLEASE TICK ONE BOX ONLY

No Yes, for between 1 and 19 hours a week Yes, for between 20 and 49 hours a week Yes, for 50 hours or more a week **19****How much do you agree or disagree with the following statement? Overall, Adult and Community Services in Lancashire do a good job.**

PLEASE TICK ONE BOX ONLY

Strongly agree Tend to agree Neither agree nor disagree Tend to disagree Strongly disagree

Road safety

20

How safe do you feel on the roads today?

PLEASE TICK ONE BOX FOR EACH

	Very safe	Fairly safe	Not very safe	Not at all safe	Don't know/ does not apply
As a pedestrian	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
As a car passenger	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
As a car driver	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
As a cyclist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On buses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

21

Would you rate the following priorities for the authorities as high, medium or low? PLEASE TICK ONE BOX FOR EACH

	High priority	Medium priority	Low priority	Don't know
Better initial driver training and education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Encourage aids to safer driving (eg cruise control, lane departure warnings, blind spot sensors)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ensure driving standards/tests reflect the skills needed for driving today	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Government public awareness campaigns targeted at high risk groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Make roads safer (eg signage, visibility, markings)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
More emphasis on ensuring elderly people are safe to drive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
More emphasis on helping young people drive more safely	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Requiring all drivers to re-take their driving tests periodically	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
More emphasis on supporting parents to keep their children safe on the roads	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

22

Which of the following services provided by Lancashire County Council's Road Safety Group, if any, have you seen or heard of?

PLEASE TICK AS MANY AS APPLY

- Right Start Practical Pedestrian Scheme
- Passport to Safer Cycling
- Advisory service for educational establishments
- Occupational road risk advice and Fleet Training
- Pre Pass Support Scheme for accompanying learner drivers
- Post test motorcycling training courses
- Don't know
- None of these

23**And how much do you agree or disagree with each of the following statements?** PLEASE TICK ONE BOX FOR EACH STATEMENT

	Strongly agree	Tend to agree	Neither agree nor disagree	Tend to disagree	Strongly disagree	Don't know
Cars are safer today than they used to be	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The authorities are more interested in road safety than they used to be	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drivers are more safety conscious today than they used to be	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drivers are better today than they used to be	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Roads are safer today than they used to be	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

24**How many years ago did you pass your driving/riding test?**

PLEASE TICK ONE BOX ONLY

Less than 10 years → go to Q2510-19 years → go to Q2520-29 years → go to Q2530-40 years → go to Q25More than 40 years → go to Q25I hold a Provisional Driving Licence → go to Q25I have never had a driving licence → go to Q34**25****If you wanted to take further driver or motorcycle training would you contact the...?** PLEASE TICK AS MANY AS APPLYPolice Royal Society for the Prevention of Accidents (ROSPA) Drivers Instructors Agency (DIA) Local Authority Driving Standards Agency (DSA)

26**Where would you look for information about further driver or motorcycle training?** PLEASE TICK AS MANY AS APPLYInternet search engine County council website Local newspapers Council publications Telephone directory None of these

Other (please write in below)

27**a) What types of driver or rider training, if any, have you ever had since passing your driving test?****b) And what types of driver or rider training would you consider attending in the future?**

PLEASE TICK AS MANY AS APPLY IN EACH COLUMN

a) Training received

b) Future training

Advanced driver training Refresher driver training Company fleet training MIDAS (minibus training) Speed Awareness Course Pre Pass Support Scheme Pass Plus

Other (please write in below)

28**When, if at all, will you to take some driver or rider training in the future?**

PLEASE TICK ONE BOX ONLY

Within 6 months → go to Q296-12 months → go to Q291-2 years → go to Q29More than 2 years → go to Q29I will not take further training → go to Q30Don't know → go to Q30

29**How much would you be willing to pay for a driver or rider training course?**

PLEASE TICK ONE BOX ONLY

Less than £25 £25 to £49 £50 to £74 £75 or more Don't know **30****Do you currently take a learner driver out for extra practice sessions?**

PLEASE TICK ONE BOX ONLY

Yes → go to Q31No → go to Q32**31****Would you consider going on a free course to update your skills and support your learner?** PLEASE TICK ONE BOX ONLYYes No Don't know **32****Do you ever drive for work (including casual and occasional driving eg driving to meetings, training etc)?** PLEASE TICK ONE BOX ONLYYes → go to Q33No → go to Q34I don't work/does not apply → go to Q34**33****Does your employer make regular vehicle and licence checks?**

PLEASE TICK ONE BOX ONLY

Yes No Don't know

Road safety education for children

34**How much do you agree or disagree with each of the following statements...?** PLEASE TICK ONE BOX FOR EACH STATEMENT

	Definitely agree	Tend to agree	Tend to disagree	Definitely disagree	Don't know
Road safety education and training is an important part of a child's development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Road safety education and training should be taught as part of the school curriculum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

35**Which of the following, if any, do you think should provide road safety education to children?** PLEASE TICK AS MANY AS APPLYChildren's parent/guardian Children's school Lancashire County Council Don't know **36****Do you have children under the age of 16?**

PLEASE TICK ONE BOX ONLY

Yes → go to Q37No → go to Q43**37****How worried are you about the safety of your children on the roads?**

PLEASE TICK ONE BOX ONLY

Very worried

Fairly worried

Not very worried

Not at all worried

Don't know

38**Has your child received any road safety training?**

PLEASE TICK ONE BOX ONLY

Yes → go to Q39No → go to Q41**39****What type of road safety training has your child had?**

PLEASE TICK AS MANY AS APPLY

Classroom sessions at school Practical sessions at school I have taught my child about road safety Don't know **40****How satisfied are you with the road safety training your child has had?**

PLEASE TICK ONE BOX ONLY

Very satisfied

Fairly satisfied

Neither satisfied nor dissatisfied

Fairly dissatisfied

Very dissatisfied

Don't know

41

The county council's Road Safety Group are looking at how they provide road safety training for children. Would you like more information on road safety for you and your children? PLEASE TICK ONE BOX ONLY

Yes → go to Q42No → go to Q43**42**

What type of road safety information would be helpful?

PLEASE TICK AS MANY AS APPLY

Booklets Activity books CD rom Information on a website Don't know

Promoting road safety

43

The Road Safety Group are considering producing a free road safety magazine featuring road safety information that is available in public areas (eg libraries). If one was available, how much of it would you read?

PLEASE TICK ONE BOX ONLY

Read all, or nearly all, of it Read a few articles Just glance at it Wouldn't look at it Don't know **44**

How effective do you consider road safety campaigns are in changing your attitudes or behaviour? PLEASE TICK ONE BOX ONLY

Very effective Fairly effective Not very effective Not at all effective Don't know

Please return the questionnaire in the reply-paid envelope.
Thank you for being part of Living in Lancashire.