

Developing social care and support options in your local area

Would you like to help shape the support or assistance that is available where you live? We are working with local voluntary organisations, social enterprises and micro businesses across the county to develop more choice for people who need social care and support to maintain their independence.

Please tell us about:

- the existing services you use that support your independence
- other things that could help you in your local area.

Who can take part?

Adults of working age and older people living in East Sussex who need social care and support and their carers. This includes

- people who have support arranged and funded by Adult Social care
- people who arrange and pay for their own social care and support services.

Background information

Social care and support can be described as help given to support older people and younger adults in their daily lives. This includes services which they are unable to provide for themselves, or which family members are unable to provide without additional help. Support can meet high levels of need or can be that 'extra bit of help' that makes a difference to daily living.

Overall, social care and support should help improve people's quality of life and enable them to be independent. It is important that there are a range of options in local areas to choose from so that people's needs are met through services that are right for their situation.

This survey will help to identify the help and activities that are currently available and any gaps that may exist in different areas.

How to take part?

Please print out this document, complete the survey and post it to:

Samantha Tullett
East Sussex County Council
County Hall, St Anne's Crescent
Lewes, East Sussex, BN7 1UE

The consultation period will close at the end of Tuesday 31 May 2011.

What happens next?

We will share this information with existing and new providers so that your ideas can help shape future social care and support provision in your area.

Enquiries

If you have any queries about this survey, or you need a copy of it in a different format – such as large print, braille, or in a different language – please contact:

Samantha Tullett, Putting People First programme
Phone: 01323 463 410, or email: samantha.tullett@eastsussex.gov.uk

What support do you currently get?

Please tell us about any support you currently receive, for example this could be as part of a support package arranged by Adult Social care or services that you have organised and paid for yourself.

Q1 Which of the following do you receive help with and who provides that help?

Please select one answer in each row

	I don't need help with this	Help is provided by family and friends	Help is provided by a paid professional	Help is provided by a volunteer
Shopping	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cleaning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Preparing food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Eating	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Your medication	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Washing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dressing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Paperwork (e.g. bills)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
DIY jobs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gardening	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Transport to places you need to get to	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Community and Social activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Education and training	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q2 Are there any other activities you are getting help with that haven't been included above?

Please provide details

Q3 Do you take part in any of the following activities in your local area? If so how often do you take part.

Please select one answer in every row

	daily	weekly	monthly	less frequently	never
Exercise and keep-fit activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Clubs, for example book or film clubs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hobbies, for example knitting or photography	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Friendship and Good Neighbour schemes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Activities in a place of worship	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Leisure activities, for example acting or singing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q4 Are there any other activities that you take part in that haven't been included above, if so please provide details.

Q5 If you do take part in any of these activities, where do you take part and who organises them?

Please provide details of the location and the organiser.

Is there anything missing in your local area?

It is important that people's needs are met through services that are personal to their situation. Please tell us about any 'extra bits of help' that could make a difference to your quality of life.

Q6 Are there any services or activities that you would like to have access to, but haven't been able to?

If so please provide details

Q7 Have any of these reasons prevented you from accessing the things you described above?

Please select all answers that apply to you

- There's nothing provided in my area
- Its too expensive
- I'm having trouble finding out about them
- I can't get to the venue
- I don't think I'd fit in
- I don't have anyone to take me or to go with
- They aren't very good
- They aren't at a time that suits me
- They aren't on a day that suits me
- I don't have the confidence to go
- My state of health makes it difficult
- Other

Please specify

About you...

The following questions help us to understand more about the make-up of our community, which in turn helps us make decisions and target services where they are needed. We have a statutory duty to collect this information to show that we are eliminating unlawful discrimination, promoting equality of opportunity and good race relations. You do not have to complete this section of the survey but it really helps us if you do. Any responses you give will be treated in strictest confidence.

Q8 Which of the following options best describes you? Please select one answer

- I receive social care which is paid for in full, or in part, by the County Council (including personal budgets)
- I pay for and organise my own social care services
- I am an unpaid carer, for example a family member or friend of someone who needs social care help
- None of the above
- Prefer not to say

Q9 Are you.....? Please select one answer

- Male
- Female
- Prefer not to say

Q10 Is your gender identity the same as the gender you were assigned at birth? Please select one answer

- Yes
- No
- Prefer not to say

Q11 Which of these age groups do you belong to? Please select one answer

- under 18
- 18-24
- 25-34
- 35-44
- 45-54
- 55-59
- 60-64
- 65-74
- 75+
- Prefer not to say

Q12 What is your postcode?

The Equality Act 2010 describes a person disabled if they have a longstanding physical or mental condition that has lasted or is likely to last at least 12 months; and this condition has a substantial adverse effect on their ability to carry out normal day to day activities. People with some conditions (cancer, multiple sclerosis and HIV/AIDS, for example) are considered to be disabled from the point that they are diagnosed.

Q13 Do you consider yourself to be disabled as set out in the Equality Act 2010?

Please select one answer

- Yes
- No
- Prefer not to say

Q13a If you answered yes to Q13, please tell us the type of impairment that applies to you.

You may have more than one type of impairment, so please select all that apply. If none of these apply to you please select other and write in the type of impairment you have.

- Physical impairment
- Sensory impairment (hearing and sight)
- Long standing illness or health condition, such as cancer, HIV, heart disease, diabetes or epilepsy
- Mental health condition
- Learning disability
- Prefer not to say
- Other

If other, please specify

Q14 To which of these ethnic groups do you feel you belong? (source: 2001 census)

Please select one answer

- | | | |
|---|--|--|
| <input type="radio"/> White British | <input type="radio"/> Mixed White and Asian | <input type="radio"/> Black or Black British Caribbean |
| <input type="radio"/> White Irish | <input type="radio"/> Asian or Asian British Indian | <input type="radio"/> Black or Black British African |
| <input type="radio"/> White Gypsy/Roma | <input type="radio"/> Asian or Asian British Pakistani | <input type="radio"/> Chinese |
| <input type="radio"/> White Irish Traveller | <input type="radio"/> Asian or Asian British Bangladeshi | <input type="radio"/> Prefer not to say |
| <input type="radio"/> Mixed White and Black Caribbean | | <input type="radio"/> Other ethnic group* |
| <input type="radio"/> Mixed White and Black African | | |

*If your ethnic group was not specified in the list please describe your ethnic group.

Q15 Do you regard yourself as belonging to any particular religion or belief? Please select one answer

- Yes
- No
- Prefer not to say

Q15a if you answered yes to Q15 which one? Please select one answer

- Christian
- Buddhist
- Hindu
- Jewish
- Muslim
- Sikh
- Any other religion

Please specify

Q16 Are you... Please select one answer

- Bi/Bisexual Gay woman/Lesbian Other
 Heterosexual/Straight Gay Man Prefer not to say

Would you like to be kept up to date with this project?

If you would like to be kept up to date or would like to get more involved as the project develops please provide your contact details below.

Your name and title	<input type="text"/>
Address (including postcode)	<input type="text"/>
Telephone number	<input type="text"/>
Email address	<input type="text"/>

Thank you for taking the time to fill in this survey.