

## Have Your Say on Day Activities

**ELCCF is an independent user and carer-led organisation that helps people to 'have a say'.**

**The Community Action Research Team is a part of ELCCF, run by service users and carers who have designed this questionnaire and will carry out this consultation on behalf of East Lothian Council.**



**Have Your Say on Day Activities**

**East Lothian Council has sent out this questionnaire on our behalf. Accompanying this letter is a questionnaire you can fill in anonymously, a prepaid envelope, and a leaflet about our organisation.**

Although primarily for those in the 16-65 age group, the views of every disabled person will be appreciated. We want to find out about the day activities you take part in outside your home - social, recreational, educational or vocational - and any you might want to do. We want to gather views from service users and carers on the types of support they need.

The questionnaire is designed for you and any unpaid carers, such as family members or friends, to fill in together. Please send it back to us by **April 26**. Copies of the questionnaire are also available to download at [www.elccf.org](http://www.elccf.org).

After the response is received, a report will be put to the planning process to ensure your voice is heard in helping to improve services.

If you would like to talk further about the questionnaire, please choose the option to take part in either a one-to-one interview by phone or in person, or as part of a group (travel expenses will be paid).

**Any personal details you send in will not be disclosed to anyone.**

The more questionnaires we receive the more accurate a picture we will get about day activities and changing needs. We will post the conclusions and observations from this project on our website [www.elccf.org](http://www.elccf.org).

*Alan Brown*

Alan Brown, Convener, ELCCF.

East Lothian Community Care Forum, c/o Tynepark House, Poldrate, Haddington, East Lothian EH41 4DA. 01620 822 212. email: [info@elccf.org](mailto:info@elccf.org). Scottish charity NoSCO29791.

# Your help is needed... and it's important.



This questionnaire is primarily for people from 16-65 with a physical disability or sensory impairment. You can fill in this questionnaire with help from your carer - a family member or friend - or you can contact us and we will arrange for someone to visit you and help you fill it in. If you wish, please add another sheet.

**Have Your Say on  
Day Activities**

**Please mark options to the questions. Telling us more in the spaces provided will really help. Please answer honestly. Remember, you can fill this in anonymously.**

**Q1. Which town or village do you stay in, or near:**

I live in or near.....

**Q2. What kind of activities, outside the home, do you do during the day/evening/weekend? (D/E/W) (Please tick):**

- Sports & Leisure
- Social
- Arts & culture
- None (If ticked, answer questions **Q4b/c, Q6 and Q7b/c**)
- Other
- Voluntary work
- Employment
- Education & Learning

<b>What activities do you do? (please say)</b>	<b>Hours per week</b>	<b>D/E/W</b>
<i>(for example)</i> <b>Art class</b>	<b>2hrs</b>	<b>E</b>

**Q3. A Care Plan is worked out with a Social Worker. Have day activities been discussed as part of your Care Plan?**

- Yes     No     Don't know     I don't have a Care Plan

**Q4a. Are the activities you take part in what you really want to do?**

- Yes                       No

**Q4b. Are there activities you feel you are able to do but don't have the opportunity?**

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*(Please say what you think):*

**Q4c. What might help?**

***(Tick only the three most important to you.)***

- |  |  |
|--|--|
| <input type="checkbox"/> transport   | <input type="checkbox"/> accessible buildings      |
| <input type="checkbox"/> need support to go  | <input type="checkbox"/> knowing who to ask        |
| <input type="checkbox"/> more flexible care  | <input type="checkbox"/> times that fit in with me |
| <input type="checkbox"/> access to funding from my Care Plan (Self Directed Support) |  |
| <input type="checkbox"/> another reason  |  |

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*(Please give more detail about your answer):*

**Q5. Who provides the activities you take part in?**

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*(Please say):*

**Q6. How do/ would the activities make a difference to your life?  
(Tick only the three most important to you.)**

- They help me to be more independent
  - It's for the company & friendship
  - I just enjoy doing them
  - They have improved my health
  - I feel more confident
  - They help me develop skills and interests
  - Anything else. *(Please say below):*
- 
- 

**Q7a. How did you find out about the activities you participate in?**

- Care professional     Library     Online     Family carer
  - Local media     Word of mouth     Other *(Say below):*
- 
- 

**Q7b. How easy is it for you to find out about activities?**

- Easy     Quite easy     Quite difficult     Difficult

**Q7c. What's best way - for you - to find out:**

- Website     Library     Booklet     Care professional
  - Talking newspaper     Local media     Other *(Say below):*
- 
-

**Q8. For people who use services based at** *(Please circle):*

**Prestonpans Resource Centre or The Trinity Centre, Edinburgh**

How many days a week do you attend? *(Please circle):*

**1      2      3      4      5**

What activities do you do? *(Please say below):*

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How does the centre benefit you? *(Please say below):*

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**Q9. Final equalities question for all participants to answer.**

*(Please circle answers):*

**Gender:**            Male            Female

**Age:**            Under 16    16-25    25-45    45-65    Over 65

**Ethnic group:**

White    Mixed Race    Indian    Pakistani    Bangladeshi

Other Asian (*non-Chinese*)    Black Caribbean    Black African

Black (*others*)                            Chinese                            Other



**Thank you very much for taking the time to fill in this Questionnaire. Please return it to us by April 26.**

**Other formats of this questionnaire are available. Contact ELCCF at the address overleaf.**

If you would like to say more, we would be happy to meet with you or invite you to a focus group. If so, please fill in this last section.



Details will be kept confidential.

### Have Your Say on Day Activities

I would like to tell you or discuss with you in more detail.

- in a focus group (*costs refunded*)
- in a face-to-face chat
- interview by telephone
- by email

My name and address is:

.....

.....

.....

Postcode.....Tel:.....email .....

You can return this form along with the questionnaire in the freepost envelope provided. Or, post it to:

**Day Activities Questionnaire,  
East Lothian Community Care  
Forum,  
c/oTynepark House,  
Poldrate,  
Haddington EH41 4DA.**



You can also download the questionnaire in MS Word or Text format at [www.elccf.org](http://www.elccf.org), fill it in, save it, then return by email to [info@elccf.org](mailto:info@elccf.org)  
Call ELCCF on 01620 822 212.

ELCCF: Scottish charity No SCO29791.