



# Public Services Panel Questionnaire Spring 2008



Renfrewshire  
Council

CUSTOMERSMATTER

# Public Services Panel Feedback Questionnaire



Thank you for being part of the Renfrewshire Public Services Panel. The panel plays an important role in our work with the community, and as a member you are part of an exciting initiative in Renfrewshire. We would be grateful if you would complete this questionnaire - it should only take a short time to complete. You will normally only need to tick a box to answer each question.

When you have completed the questionnaire, please send it back in the FREEPOST envelope provided, there is no need to put a stamp on the envelope. The more people who complete the questionnaire the better the results will be and it will ensure that the opinions of people throughout the Renfrewshire area are heard.

Should you have any questions regarding the questionnaire, please do not hesitate to contact either:

Craig Glover (0141 840 3251) at Renfrewshire Council or  
Jeremy Quinn (0141 775 2111) at Lowland Market Research.

We look forward to receiving your completed questionnaire, thank you for being part of our Public Services Panel.

## Public Services Panel

A lot of work goes on behind the scenes to produce each Public Services Panel questionnaire and newsletter. It is important to us that you find these easy to follow, interesting to complete and read, and of course not too long to fill out.

This is your chance as a member of the Panel to let us know what you think and to make any suggestions for improvement.

## About the Questionnaire

**1. We send you four questionnaires to complete each year. Do you think this is:**

Just right  Too many  Too few

**2. Thinking of a Panel questionnaire that you have received recently, please state the extent to which you agree or disagree with the following statements:**

	Strongly Disagree	Agree	Neither/Nor	Disagree	Strongly Agree
The questions are easy to understand	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The layout of the questionnaire is easy to follow	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The topics covered within the questionnaires are usually of interest to me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**3. Questionnaires are usually around 12 pages long. Do you think that this is:**

Just right  Too long  Too short

**4. Overall how satisfied are you with the questionnaires?**

Very Satisfied  Satisfied  Neither / Nor  Dissatisfied  Very Dissatisfied

**5. How do you think we could improve the questionnaires?**

**6. How would you prefer to complete Panel questionnaires?**

Online

Postal Survey

**About the Newsletter**

**7. Thinking of the newsletters that you have received recently, please tell us how much you agree with the following statements. The newsletter:**

	Strongly Agree	Agree	Neither/Nor	Disagree	Strongly Disagree
Is Easy to understand	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provides enough detail about the results of the last Panel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lets me know how my views have been used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contains information which is of interest of to me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**8. The panel newsletter is usually between 2-4 pages in length. Do you think this is:**

Just right

Too long

Too short

**9. How do you think we could improve the newsletter?**

**10. We would like to publicise the valuable role that you, as a member of the Public Services Panel, play in giving up your time to tell us what you think about our services and any other issues which are relevant. Would you be willing to help us do this e.g. by being included in a feature in the Renfrewshire Magazine?**

Yes

No

Don't know

## Reporting our performance

In every edition of the Renfrewshire Magazine there is a section called 'How are we doing?' This lets you know how well the council gets things done or how it spends its money. We also provide this information, called performance information, on our website, in our libraries and at all our public reception areas. We would now like to ask you some questions about how useful this information is to you.

**11. We think it is important to let you know how we are performing as a council. To what extent would you agree that we keep you informed about how well we provide our services, where 1= agree strongly and 5=disagree strongly. (please circle)**

1                      2                      3                      4                      5

**12. To what extent do you agree / disagree that the performance information that we provide you with is easy to understand, where 1= agree strongly and 5=disagree strongly. (please circle)**

1                      2                      3                      4                      5

**13. What kind of information is important to you? (please tick all that apply)**

- |  |                          |                                       |                          |
|--|--------------------------|---------------------------------------|--------------------------|
| The kind of services that the council provides | <input type="checkbox"/> | What the councils main priorities are | <input type="checkbox"/> |
| How many people the council employs            | <input type="checkbox"/> | How each department performs          | <input type="checkbox"/> |
| How the money is spent                         | <input type="checkbox"/> | How we compare to other councils      | <input type="checkbox"/> |
| How long it takes for us to provide a service  | <input type="checkbox"/> |                                       |                          |

**14. We try to provide you with information that is written in 'plain English' (information that is easy to read and understand). How important is this to you where 1= very important and 5 = not important at all (please circle)**

1                      2                      3                      4                      5

## Access to Financial Services

**15a. Do you or your partner have any of the following? (please tick all that apply)**

- Bank Account       Building Society Account       Credit Union Account

**15b. If you don't you have a bank account, why is this?**

- |   |                          |   |                          |
|---|--------------------------|---|--------------------------|
| No money/little money to put in an account      | <input type="checkbox"/> | No bank in local area                   | <input type="checkbox"/> |
| Have had difficulties trying to open an account | <input type="checkbox"/> | Can't prove identity to open an account | <input type="checkbox"/> |
| Have been refused access to account             | <input type="checkbox"/> | No point - on benefits/state pension    | <input type="checkbox"/> |
| No point - get paid cash                        | <input type="checkbox"/> | Afraid I might get overdrawn            | <input type="checkbox"/> |
| There might be too many charges                 | <input type="checkbox"/> | Prefer dealing in cash                  | <input type="checkbox"/> |
| Religious or ethical reasons                    | <input type="checkbox"/> |   |                          |
| Other reasons (please give details)             | <input type="checkbox"/> |   |                          |

**16a. Do you have contents insurance to cover items in your home such as furniture and electrical goods etc?**

Yes  No  Not sure

**16b. If not, why not?**

Too expensive  Can't afford it  Not got round to it  Don't bother   
 No need  Don't know how to access it  Refused it   
 Other (please specify)

**17a. Do you or your partner have life insurance?**

Yes  No  Not sure

**17b. If not, why not?**

Too expensive  Can't afford it  Not got round to it  Don't bother   
 No need  Don't know how to access it  Refused it   
 Other (please specify)

**18. During the last year, have you applied for any of the following financial services and what was the outcome?**

	Applied and turned down	Applied and accepted	Not applied/ have already	Not applied/ didn't want
Life assurance/insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A current or cheque book account with a bank or building society	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any other type of account with a bank or building society	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A credit or store card	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hire Purchase	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insurance (house, contents, car or other possessions)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A loan (personal loan or mortgage)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Savings

### 19. Do you use any of the following ways to save money? Please tick all that apply

- Bank or Building Society savings or deposit account
- Credit Union
- A Christmas Club or similar run by a local shop
- Informally with work colleagues, friends or the committee system
- Putting money in a jar or envelope
- Asking relatives or friends to save or look after money for you

### 20. How much roughly do you hold as savings?

- No savings at all  Under £100  £101 - £500
- £501 - £1,000  £1,001 - £5,000  More than £5,000
- Don't want to say but have savings

### 21. How often do you put money into a savings account or save money?

- Don't save/never  I save regularly at least once a month
- I save regularly less than once a month  I put money in as and when I can
- Paid in money before but not in the past 12 months  Not added any money since the account was opened
- Not sure

## Loans and Credit

### 22. Do you have any of the following types of credit? (Please tick all that apply)

- Mortgage  Overdraft at Bank
- Hire Purchase  Interest free loan from a store
- Credit card account not paid off  Store card not paid off
- Loan from a bank/building society  Student loan
- Credit union loan  Loan from a money lender (unlicensed)
- Loan from a licensed finance company such as Provident or Home Credit where weekly repayments are made, often on the doorstep  Pawnbrokers or Cash Converters
- Cashchequers  Social Fund Loan
- Loan from family  Loan from friends
- None of these

**23. How did you find out about these lenders?**

- |                             |                          |                             |                          |                                      |                          |
|-----------------------------|--------------------------|-----------------------------|--------------------------|--------------------------------------|--------------------------|
| Bank or Building Society    | <input type="checkbox"/> | A shop or retail outlet     | <input type="checkbox"/> | Mail order                           | <input type="checkbox"/> |
| Door step caller            | <input type="checkbox"/> | From a family member/friend | <input type="checkbox"/> | Credit Union                         | <input type="checkbox"/> |
| Advertisement in newspaper  | <input type="checkbox"/> | Advertisement on TV         | <input type="checkbox"/> | Advertisement (through the internet) | <input type="checkbox"/> |
| Other (please give details) | <input type="checkbox"/> |                             |                          |                                      |                          |

**24. If you wanted to take out a personal loan, who would you get this from? (please tick all that apply)**

- |  |                          |                                 |                          |
|--|--------------------------|---------------------------------|--------------------------|
| Bank                                       | <input type="checkbox"/> | Building Society                | <input type="checkbox"/> |
| Credit Card                                | <input type="checkbox"/> | Credit Union                    | <input type="checkbox"/> |
| Doorstep Lender (licensed finance company) | <input type="checkbox"/> | Moneylender (unlicensed lender) | <input type="checkbox"/> |
| Family or friend                           | <input type="checkbox"/> | Shop/retailer (hire purchase)   | <input type="checkbox"/> |
| Store Card                                 | <input type="checkbox"/> | Other (please specify)          | <input type="checkbox"/> |

**Managing your money**

**25. At present how well do you think you manage your money?**

- |                           |                          |                  |                          |
|---------------------------|--------------------------|------------------|--------------------------|
| Managing well             | <input type="checkbox"/> | Just getting buy | <input type="checkbox"/> |
| Getting into difficulties | <input type="checkbox"/> | Don't know       | <input type="checkbox"/> |

**26. At present, how worried are you about getting into or being in debt?**

- |                    |                          |                |                          |                  |                          |
|--------------------|--------------------------|----------------|--------------------------|------------------|--------------------------|
| Very worried       | <input type="checkbox"/> | Fairly worried | <input type="checkbox"/> | Not very worried | <input type="checkbox"/> |
| Not at all worried | <input type="checkbox"/> | Not sure       | <input type="checkbox"/> |                  |                          |

**27. How easy would you say you find it to manage your fuel bills at the moment?**

- |                |                          |              |                          |                      |                          |
|----------------|--------------------------|--------------|--------------------------|----------------------|--------------------------|
| Very easily    | <input type="checkbox"/> | Quite easily | <input type="checkbox"/> | Have some difficulty | <input type="checkbox"/> |
| Very difficult | <input type="checkbox"/> | Not sure     | <input type="checkbox"/> |                      |                          |

**28. How do you pay your fuel bills?**

- |                                       |                          |                             |                          |
|---------------------------------------|--------------------------|-----------------------------|--------------------------|
| Card meter or card that you charge up | <input type="checkbox"/> | Key meter/token meter       | <input type="checkbox"/> |
| Coin meter                            | <input type="checkbox"/> | Cash                        | <input type="checkbox"/> |
| Cheque                                | <input type="checkbox"/> | Direct debit/standing order | <input type="checkbox"/> |
| Other (please give details)           | <input type="checkbox"/> |                             |                          |

**29. How do you pay your other bills?**

Cash  Cheque  Direct debit/standing order   
Other (please give details)

**30. In the past have you had financial difficulties for any of the following reasons? (Please tick all that apply)**

Unemployment, redundancy, short time working	<input type="checkbox"/>	Gained Employment	<input type="checkbox"/>
Retirement	<input type="checkbox"/>	Ill health/disability	<input type="checkbox"/>
Bereavement	<input type="checkbox"/>	Having children	<input type="checkbox"/>
Family break up	<input type="checkbox"/>	Relationship breakdown	<input type="checkbox"/>
Income is not enough to cover all expenses	<input type="checkbox"/>	Unable to keep up-to-date with repayments	<input type="checkbox"/>
Problems managing money	<input type="checkbox"/>	Taken on first home/tenancy	<input type="checkbox"/>
Delays/Errors in Benefits	<input type="checkbox"/>	Business related problems	<input type="checkbox"/>
Other (please say what)	<input type="checkbox"/>		

**31. Which debts do you consider to be the most important to deal with? (Please tick all that apply)**

Personal/unsecured Loan (eg. Bank loan)	<input type="checkbox"/>	Cash Loan (Doorstep loan, family loan)	<input type="checkbox"/>
Secured Loan	<input type="checkbox"/>	Moneylender (unlicensed lender)	<input type="checkbox"/>
Hire Purchase Agreement	<input type="checkbox"/>	Overdraft	<input type="checkbox"/>
Credit Card	<input type="checkbox"/>	Store Card	<input type="checkbox"/>
Catalogue	<input type="checkbox"/>	Other Consumer Debt	<input type="checkbox"/>
Credit Union	<input type="checkbox"/>	Student Debt	<input type="checkbox"/>
Council Tax	<input type="checkbox"/>	Utilities	<input type="checkbox"/>
Social Fund	<input type="checkbox"/>	Rent Arrears	<input type="checkbox"/>
Repayment of Benefit/Tax Credit Overpayment	<input type="checkbox"/>	Mortgage Arrears	<input type="checkbox"/>
Other (please say what)	<input type="checkbox"/>		

## Financial Information and Advice

**32. Over the past couple of years, have you been anywhere for advice about money matters? (Please tick all that apply)**

No, nowhere

Citizens Advice Bureau

Advice Works (Renfrewshire Council)

Renfrewshire Council -  
Housing and/or Benefits staff

Other advice centre in local area

Bank

Building Society

Financial Advisor

DSS

Social Worker

Solicitor

Paisley Law Centre

Credit Union

Place of Worship

Family member or friend

Other

**33. How interested would you be in any of the following: (Please tick all that apply)**

Advice on welfare benefits

Advice about money matters

Advice about managing debts

Somewhere to take out credit  
or loan at reasonable interest

Somewhere local to cash a cheque

Somewhere local to save small amounts of money

Bill paying services

Insurance Cover - home and life

Savings accounts for children

More information about financial matters

**34. Which of the following services would you like to be provided locally? (please tick all that apply)**

Advice on financial management

Bill paying services

Convenient savings facilities

Financial Services for people on low incomes

Loans at a reasonable cost

Short term/crisis loans

Non contributory savings and loan insurance

Volunteering opportunities

Access to insurance products

Money advice and debt counselling

Other (please specify)



**35. Are you aware of how much money you owe to different creditors, and do you know who you owe it to?**

Very Aware

Quite Aware

Not Very Aware

Not Aware At All

**36. How aware are you of the consequences of not paying different debts?**

Very Aware

Quite Aware

Not Very Aware

Not Aware At All

**37. How confident are you that you are receiving all the different tax or welfare benefits that you might be entitled to?**

Very Confident  Quite Confident  Not Very Confident  Not At All Confident

**38. How aware are you of the local Credit Unions in Renfrewshire?**

Very Aware  Quite Aware  Not Very Aware  Not Aware At All

## Social Work Services

### Child Protection

Renfrewshire Child Protection Committee (RCPC) is a multi-agency body involving Renfrewshire Council, Renfrewshire Community Health Partnership, Strathclyde Police and other organisations. It works to ensure children in Renfrewshire are safe from harm and neglect and get help when they need it.

We strive to ensure that the protection of children is a responsibility that is shared by all our staff in partnership with the community. We believe it's everyone's job to make sure that children in Renfrewshire are safe.

**39a. Have you ever been worried that a child or young person you know is at risk of harm or neglect?**

Yes  No

If no, go to question 40

**39b. If yes, did you raise your concerns with anyone?**

Yes  If yes, go to question 39c

No  If no, go to question 39f

**39c. Who did you raise your concerns with?**

**39d. What method did you choose to raise your concerns?**

In person  By telephone  By email  By letter

Other (please specify)

**39e. If you chose to give your name and contact details, did you get any feedback about what happened after you raised your concerns?**

Yes  No

Comments

**39f. Why did you choose not to raise your concerns?**

**40. If you were worried that a child or young person was at risk, who would you be most likely to raise your concerns with?**

Social Worker  Police Officer  Teacher   
Doctor  Health Visitor   
Other (please specify)

**41. Which method of reporting your concerns would you prefer?**

In person  By telephone  By email  By letter   
Through a form on our websites   
Other (please specify)

**42. Would you prefer to give your name and contact details?**

Yes  No

**43a. Have you seen any publicity about child protection in the last 12 months?**

Yes  No   
If no, go to question 44

**43b. If yes, where did you see this information (Please tick all that apply)**

Television advertising in shopping centres  Advertising on local buses   
Newspapers  Renfrewshire Magazine   
Leaflets  Posters   
www.renfrewshire.gov.uk   
Other (please specify)

**44. In your opinion, what would be the best method of communicating with local people about child protection?**

Television advertising in shopping centres  Advertising on local buses   
Newspapers  Renfrewshire magazine   
Leaflets  Posters   
www.renfrewshire.gov.uk   
Other (please specify)

**45. Do you know the phone numbers to call to report concerns about a child?**

Yes  No

## Advice Works

### 46. If seeking advice on debt and benefits where would you go? (please tick all that apply)

Advice Works  Citizens Advice Bureau  Solicitor   
Friends / Relatives  Commercial Debt Consultant   
Other voluntary organisations (please specify)

### 47. Why would you choose the above ?

Recommendation (from whom)

Convenience (in what way)

Prefer to pay for service

Advertising

Other (please specify)

### 48a. Are you aware of the type of work which Advice Works does?

Yes  No

If no, go to question 49

### 48b. If yes, how did you get to know about Advice Works?

Media

Leaflets / posters

Renfrewshire Magazine

Referral from another another council department

Relative / friend

Other (please specify)

### 49. Are you aware of the location of your local Advice Works?

Yes  No

### 50. What other service would you use/like to see in Advice Works Shops?

### 51. Your views/comments

Please use the space below to tell us what you think of this questionnaire. You can also use this space if you have any other comments or suggestions.

Thank you for taking the time to complete this questionnaire.