

Supported Living Service User Survey – Your Home Your Say.



The main reason for Supported Living is for people with an **eligible care need** to live in their own home and have control over the support they receive.



Supported Living can look different for different people. For one person, a few hours support a week may meet their needs.

For another person they may require support all day every day to assist them.



We would like to hear from:

- People in Sefton who are currently living in Supported Living accommodation.
This survey.
- Carers who currently support someone who is living in Supported Living in Sefton.
A different survey.
- Carers who currently support someone who may consider Supported Living home options in Sefton in the future.
A different survey.



We would appreciate your time in completing this survey. This will give us information to develop the draft Supported Living Strategy and future services.

We want to work with our key partners in Sefton including those who provide services and people with lived experience and their carers.





This is nothing to worry about.

The information will help the Council to make sure that Supported Living services are good quality.



Services need to meet the requirements of the [Care Act 2014](#). The Care Act is a law about care and support for adults in England.

We want to co-produce a range of high quality accommodation with support across Sefton by 2025 for both older adults and young adults with disabilities.



The co-produced services will better meet people's care and support needs, whilst promoting their health, wellbeing, and independence.

When will the survey start and finish?



The engagement will **start on Monday 12th December 2022 and finish on Sunday 29th January 2023.**

How can I give my ideas?

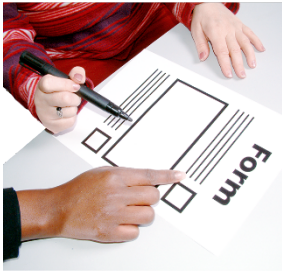
You can get involved by [filling in the survey](#) on the computer.

You can use your phones camera to scan this QR code and follow the web link.



Go to the website [Your Sefton Your Say](#) and look for Supported Living Service User Survey - Your Home Your Say in the list.





You can fill in a paper copy, to get one please call **0151 934 2888** or email yourhomeyoursay@sefton.gov.uk and ask for one to be sent to you.

Paper copies will have a freepost envelope to send it back to us.



You can give us your views over a phone call **0151 934 2888**.



You can give us your views in an email yourhomeyoursay@sefton.gov.uk

You can share your views with a friend, family member or social worker. They can tell us your ideas or help you to complete the survey on paper or online.



You can collect and return paper copies of the survey from:



Sefton Carers Centre

27 - 37 South Road
Waterloo
Liverpool
L22 5PE



Life Room Southport

The Life Rooms Southport
23 - 25 Scarisbrick Avenue
Southport
PR8 1NW



What we do with what you tell us

Updated information is on Sefton Council's website. Search for your home your say.

[Your Home, Your Say \(sefton.gov.uk\)](http://sefton.gov.uk)



We have started to make a draft strategy. This is a plan of how service will work.

The information and answers that you share with us will be put into a report.



This report will be available in accessible formats.

The information we are given will be part of the strategy or a plan of how we will work.



This survey is for people who use Supported Living services. There are also surveys for carers who support someone who currently lives in supported living and for carers who may be considering supported living.

Please answer the following questions and send your answers back to us.



If you have any questions or need any help answering, please call or email us.



1. Are you completing this form as:

Someone who lives in supporting living.

On behalf of someone who lives in supported living.

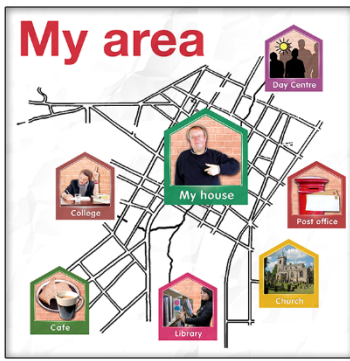
If for someone else, please explain why in the box below.



2. Are you happy with the accommodation that you live in?

Yes – Please let us know what you are happy with.

No – Please let us know what you are not happy about and how you feel it can be changed/improved?



3. Are you happy with the location of your accommodation?

Yes – please tell us what you are happy with.

No – Please tell us why you are not happy about the location of your accommodation and how you feel it can be improved?



4. Are you asked your views about:

Furnishings Yes No

Decoration Yes No

Activities Yes No

Meals Yes No

Bedtimes Yes No

New staff Yes No

Who you live with eg. male or female

Yes No





5. Are you happy with the support that is provided in your supported living accommodation?

Yes – please tell us what you are happy with.

No – Please let us know what you are not happy about and how you feel it can be changed / improved?



6. Are you happy that the support you receive helps you to live a full and independent life?

Yes – please tell us what you are happy with.

No – Please let us know what you are not happy about and how you feel it can be changed or improved?



7. Do you or a family member look after your money? Your money includes benefit payments.

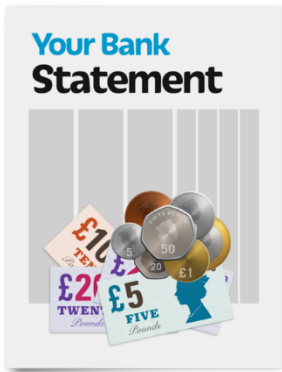
I look after my money.

Family member looks after my money.

Other.



If you have selected other, please say who looks after your money.



8. If yourself – do you fully understand what you must pay for in your supported living service?

Yes

No



9. If the care provider supports you with your money, do they explain to you what your money is being used for?

Yes

No





10. Do you have any concerns about the increase in cost of living expenses and energy costs?

Yes

No

If yes, please add what your concerns are:



11. Is there anything we can do to improve supported living accommodation in the future?



12. Would you like to be a part of a group that will help make improvements for Supported Living services?

Yes

No

If yes, what is the best way to contact you:

Name - Email, phone number or address?



Thank you for filling in this survey

Some Questions About You



These questions are optional, you do not have to answer them. Filling in this form will help us make sure we are reaching everyone in Sefton. All this information is private. We bring together the answers.

1. How old are you?



Under 18	<input type="checkbox"/>	18-29	<input type="checkbox"/>	30-39	<input type="checkbox"/>
40-49	<input type="checkbox"/>	50-59	<input type="checkbox"/>	60-69	<input type="checkbox"/>
70-79	<input type="checkbox"/>	80-84	<input type="checkbox"/>	85+	<input type="checkbox"/>
Prefer not to say	<input type="checkbox"/>				

2. Gender







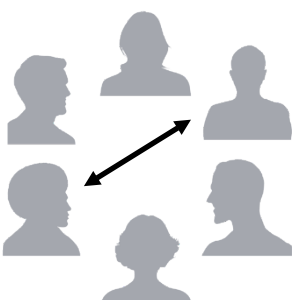
Male

Female

Prefer not to say

People who are planning to, started to or have changed their sex are protected by the Equalities Act.

3. Are you planning to, started to, or have changed your sex? This is called gender reassignment.



Yes

No



Prefer not to say

3a If you answered Yes to question 3.

Do you currently live as the sex you were given when you were born?



Yes

No



Prefer not to say

3b If you do not live as the sex you were given at birth, are you?



Transgender



Nonbinary



I identify differently



Prefer not to say

4. Relationships - How would you describe your sexual orientation?



Heterosexual/ Straight <input type="checkbox"/>	Gay <input type="checkbox"/>
Lesbian <input type="checkbox"/>	Bisexual <input type="checkbox"/>
I identify differently	Prefer not to say <input type="checkbox"/>

Please tell us how you identify.

5. Disability - Do you have any of the following?

 <p>Physical Impairment</p> <input type="checkbox"/>	 <p>Visual Impairment</p> <input type="checkbox"/>
 <p>Learning difficulty</p> <input type="checkbox"/>	 <p>Hearing impairment / Deaf</p> <input type="checkbox"/>
 <p>Learning disability</p> <input type="checkbox"/>	 <p>Long-term illness that affects you daily life</p> <input type="checkbox"/>
 <p>Autism Spectrum Condition</p> <input type="checkbox"/>	 <p>Dementia</p> <input type="checkbox"/>
 <p>Mental Health condition</p> <input type="checkbox"/>	 <p>Prefer not to say</p> <input type="checkbox"/>

If you have Cancer, diabetes, or HIV this is seen as a disability under the Equalities Law.
 Or you have selected any of the boxes in question 20.

6. Do you think of yourself as disabled?









Yes

No

Prefer not to say

7. What is your religion or belief?

No religion or belief <input type="checkbox"/>	Christian  <input type="checkbox"/>
Hindu  <input type="checkbox"/>	Muslim  <input type="checkbox"/>
Jewish  <input type="checkbox"/>	Sikh  <input type="checkbox"/>
Other: <input type="checkbox"/>	Prefer not to say <input type="checkbox"/> 

8. Race and ethnicity - do you identify as

Prefer not to say



White



English Welsh Scottish Northern Irish British	<input type="checkbox"/>	Irish	<input type="checkbox"/>
Gypsy or Irish Traveller	<input type="checkbox"/>	Roma	<input type="checkbox"/>
Polish	<input type="checkbox"/>	Portuguese	<input type="checkbox"/>
Latvian	<input type="checkbox"/>		
Other white background		_____	

Mixed/Multiple ethnic groups



White and Black Caribbean	<input type="checkbox"/>	White and Black African	<input type="checkbox"/>
White and Asian	<input type="checkbox"/>		
Other mixed ethnic backgrounds	<input type="checkbox"/>	_____	

Asian or Asian British



Indian	<input type="checkbox"/>	Bangladeshi	<input type="checkbox"/>
Pakistani	<input type="checkbox"/>	Black	<input type="checkbox"/>
Chinese	<input type="checkbox"/>	Other Asian background	<input type="checkbox"/>

Black or Black British



African	<input type="checkbox"/>	Caribbean	<input type="checkbox"/>
British	<input type="checkbox"/>	Asian	<input type="checkbox"/>
Other Black Background	<input type="checkbox"/>	_____	

Other Ethnic Group



Gypsy or Irish Traveller	<input type="checkbox"/>	Roma	<input type="checkbox"/>
Polish	<input type="checkbox"/>	Latvian	<input type="checkbox"/>
Portuguese	<input type="checkbox"/>	Arab	<input type="checkbox"/>
Other Ethnic background	<input type="checkbox"/>	_____	



Thank you for filling in this form.
 This information will **not** be able to tell us who you are.
 But it will help us to understand if we are missing people out.

Supported Living Survey

Privacy Notice

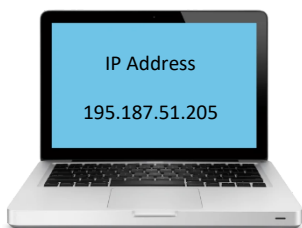


Sefton Council would like to tell you about our Privacy Notice for the consultation about Supported Living.



This Easy Read privacy notice for the Supported Living consultation will explain **the personal information we collect.**

In this questionnaire we will collect information about:



- IP addresses (this is a computer code to show what computer the information comes from)
- Equality questions.



What personal information we collect.

In this consultation we collect

- IP address.
- Age.
- Sexuality.
- Gender.
- Disability.
- Religion.
- Race or ethnicity.





Why we collect and use this information.

Sefton Council are asking people to have their say about their Supported Living services.



IP addresses that identify computers.

- The IP addresses are collected to make sure only one response per resident is received.
- Once this is checked the IP address information is deleted.



Personal information.

- Your name
- Email information
- Contact number



This will help the Council to contact you if you have said that you would like to be involved in the Supported Living Reference Group to help design and improve the service.



Equalities Questions.

These are collected to show what groups of people are responding to the questionnaire.

This also lets us know if we need to use different ways to contact groups of people who are not responding.



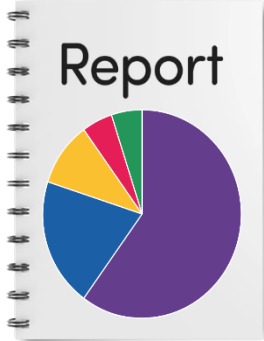
How long we keep your information.

The IP address will be deleted immediately after the checks are done.



The equalities and postcode information will be kept until the information has been looked at and a report written.

How we use the information and who we share the information with.



The information collected in this questionnaire will only be used as numbers in the report.

No information is collected that tells us who you are.



Storing the information.

All information is kept safe.

Sefton Council follows the laws around data protection.

The laws.

We need to make sure we



- Only ask the questions we need to in the questionnaire.
- Ask equalities questions.



The law says we must ask and act on this information.

It helps us to know what groups of people are responding to the questionnaire.

It also helps us to know that we are not missing groups of people.



Confidential.

Your answers will not tell us who you are.

The answers will be collected to help us know what people think.



Who will we share this information with?

Your information will not be shared with any other organisations.

Asking to see your personal information.



You can ask to see what personal information we keep about you.

Be aware there are some rules about why some information cannot be shared.



You can refuse to answer any questions in the questionnaire.



If you want to ask to see your personal information you can. Use the Council [website to complete a request form.](#)

Or you can call Sefton Council on
0345 140 0845

Contacts

For more information about this privacy notice please contact:



Adult Social Care

0151 934 2888



Sefton's Data Protection Officer

Ino.information@sefton.gov.uk

0345 140 0845



Contact for the Supported Living consultation is

yourseftonyoursay@sefton.gov.uk

0151 934 2888