

## North Ayrshire Community Planning Partnership People's Panel Questionnaire 2020



North Ayrshire  
Community Planning Partnership

Dear People's Panel member,

I would like to welcome People's Panel members, old and new, to the 2020 People's Panel survey.

This biannual survey plays a significant role in our work with the communities of North Ayrshire. It allows us to find out what you think about a range of public services and helps to make sure that the Community Planning partners understand what is important to you!

Community Planning is about working together to plan and deliver better services. The Partnership includes North Ayrshire Council, NHS Ayrshire and Arran, Scottish Enterprise, Skills Development Scotland, Scottish Fire and Rescue Service, Strathclyde Partnership for Transport, Police Scotland, North Ayrshire Health and Social Care Partnership, Department for Work and Pensions, Ayrshire College, KA Leisure and representatives of the community and voluntary sector.

This questionnaire covers a range of themes that the Community Planning partners in North Ayrshire are working towards:

- A working North Ayrshire
- A healthier North Ayrshire
- A safer North Ayrshire
- A thriving North Ayrshire

It should only take a fairly short time to complete the questionnaire. For most questions you will only need to tick a box in order to respond. When you have done so, please send your completed questionnaire back in the Reply Paid Envelope provided. There is no need to put a stamp on the envelope.

If you prefer, you can complete the questionnaire online by visiting the following web address:

[www.lowland-research.co.uk/northayrshire2020](http://www.lowland-research.co.uk/northayrshire2020)

The more people who complete the questionnaire the better the results will be and it will ensure that the opinions of people throughout North Ayrshire are heard. Results of previous surveys and other information about the Community Planning Partnership is available at: [www.north-ayrshire.gov.uk/communityplanning](http://www.north-ayrshire.gov.uk/communityplanning). Details of how we used the previous feedback are available at: <http://www.northayrshire.community/wp-content/uploads/sites/60/2020/01/190207-PP-Action-Plan-FINAL.pdf>

If you have any questions regarding the questionnaire please do not hesitate to contact either the Community Planning Team at North Ayrshire Council on [communityplanning@north-ayrshire.gov.uk](mailto:communityplanning@north-ayrshire.gov.uk) 01294 324 024 or Jeremy Quinn, Lowland Market Research on 01360 311125 ([info@lowland-research.co.uk](mailto:info@lowland-research.co.uk)).

We look forward to receiving your completed questionnaire and thank you again for being part of our People's Panel.

**Councillor Joe Cullinane**  
**Chair of Community Planning Partnership**

### **Using your personal information:**

Personal information which you supply will be used for statistical analysis and research purposes only and will be held in line with the General Data Protection Regulation 2018. Information provided by you will be held in a database and will be removed at any time you so notify us. We will not disclose any information to any company other than Lowland Market Research and North Ayrshire Community Planning Partnership unless required to do so by law.

To know more about how we use your information and how we maintain security of your information and your rights to access information we hold on you please contact North Ayrshire Community Planning Partnership at [communityplanning@north-ayrshire.gov.uk](mailto:communityplanning@north-ayrshire.gov.uk) or telephone 01294 324024.

1. Do you currently have access to e-mail or the internet?

Yes  If yes, go to Q1a      No

1a. **If yes, where?** – tick all that apply

Work	<input type="checkbox"/>	Community learning centre	<input type="checkbox"/>
Community centre	<input type="checkbox"/>	Internet café	<input type="checkbox"/>
Local library	<input type="checkbox"/>	College / university	<input type="checkbox"/>
From home	<input type="checkbox"/>	Other community facility	<input type="checkbox"/>
School	<input type="checkbox"/>	Mobile phone	<input type="checkbox"/>

Other (Please specify)

2. Thinking of how accessible food for good health is in your immediate local area, please tick all that apply.

I have access to lots of food	<input type="checkbox"/>	Food is available but too expensive	<input type="checkbox"/>
I have access to some food	<input type="checkbox"/>	I physically can't access food but have support to do so	<input type="checkbox"/>
I have no access to food	<input type="checkbox"/>	I physically can't access food and have limited support to do so	<input type="checkbox"/>
I eat food which I grow myself	<input type="checkbox"/>	I don't grow my own food but would like to learn	<input type="checkbox"/>

3. What statements about cooking apply to you and your household. Tick all that apply

I can cook home-made meals from raw ingredients and do so regularly	<input type="checkbox"/>
I use ready meals but would like to learn to cook more home-made meals	<input type="checkbox"/>
I can cook home-made meals but I use ready meals and am not interested in cooking home-made meals	<input type="checkbox"/>
I mostly eat ready meals	<input type="checkbox"/>
I can cook home-made meals but don't have the time	<input type="checkbox"/>
I don't have a kitchen to prepare home-made meals	<input type="checkbox"/>

4. How many main meals per week do you prepare yourself (from a max of seven main meals)

Write number in the box between 1 and 7

5. Tell us about your food consumption over the course of a typical day (Tick all statements that apply) Examples of a portion of fruit and veg are: 1 banana, 2 plums, 3 heaped tablespoons beans.

*(Fruit and veg can be either fresh, frozen, tinned, dried or juiced), (Starchy foods are potatoes, breads, cereals, rice and pasta), (Pulses are beans, peas, lentils)*

I eat 5 or more portions of fruit and vegetables	<input type="checkbox"/>	I eat from some of the major food groups: fruit & veg, starchy foods, milk & dairy, pulses, fish, eggs, meat, fats	<input type="checkbox"/>
I eat between 2-4 portions of fruit and veg	<input type="checkbox"/>	I eat from one of the major food groups: fruit & veg, starchy foods, milk & dairy, pulses, fish, eggs, meat, fats	<input type="checkbox"/>
I eat between 1-2 portions of fruit and veg	<input type="checkbox"/>	I eat from all the major food groups: fruit & veg, starchy foods, milk & dairy, pulses, fish, eggs, meat, fats	<input type="checkbox"/>
I eat no portions of fruit & veg	<input type="checkbox"/>		
I mostly eat food from takeaways	<input type="checkbox"/>		

6. The Community Planning Partnership are keen to assess and monitor the mental wellbeing of the North Ayrshire population. The Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS) is a 14 item scale in which individuals respond to questions about their thoughts and feelings. By incorporating WEMWBS into the People's Panel Survey, this will allow the Community Planning Partnership to assess the mental health of the North Ayrshire population. The WEMWBS questions and scale are outlined below. Please tick the box that best describes your experience of each over the last 2 weeks.

	None of the time	Rarely	Some of the time	Often	All the time
I've been feeling optimistic about the future	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been feeling useful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been feeling relaxed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been feeling interested in other people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've had energy to spare	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been dealing with problems well	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been thinking clearly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been feeling good about myself	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been feeling close to other people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been feeling confident	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been able to make up my own mind about things	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been feeling loved	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been interested in new things	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been feeling cheerful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Look at the following statement and choose the option which best describes how you feel

During the last week I have felt lonely...

- none or almost none of the time
- some of the time
- most, almost all, or all of the time

8. How safe or unsafe do you feel when you are outside in your neighbourhood after dark?

Very Safe  go to Q10      Fairly Safe  go to Q10      A Bit Unsafe  go to Q9      Very Unsafe  go to Q9

9. Please give brief reasons as to why you sometimes feel unsafe

10. In your neighbourhood, how much of an issue are each of the following? Please tick one box only for each issue.

	Very big issue	Fairly big issue	A minor issue	Not an issue
Noisy neighbours or loud parties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adults hanging around on the street	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Young people hanging around on the street	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People drinking in the street	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rubbish or litter lying in the street	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vandalism, graffiti or other deliberate damage to property	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People being attacked or harassed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People using or dealing drugs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Abandoned or burnt out cars	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Discarded needles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Antisocial residents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grass / bin fires	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aggressive dogs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dog fouling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other (please say what below)

11. Do you have any concerns about fire safety in your home?

Yes  Go to Q11a No  Go to Q12

11a. If yes, please tell us what your concerns are

12. Have you ever been worried that a child is or might be, being abused or neglected?

Yes  No

13. Have you ever been worried that a vulnerable adult is or might be, being neglected?

Yes  No  If you answered No to both Q12 & Q13, please go to Q16

14. Who did you report it to? Please tick all that apply in each column that applies  
(i.e. whether this was a child or vulnerable adult).

	Child	Vulnerable adult
Did not report this	<input type="checkbox"/>	<input type="checkbox"/>
Police	<input type="checkbox"/>	<input type="checkbox"/>
Social Services	<input type="checkbox"/>	<input type="checkbox"/>
Family / friends	<input type="checkbox"/>	<input type="checkbox"/>
Housing Department	<input type="checkbox"/>	<input type="checkbox"/>
Priest / Minister	<input type="checkbox"/>	<input type="checkbox"/>
School	<input type="checkbox"/>	<input type="checkbox"/>
MP / local Councillor	<input type="checkbox"/>	<input type="checkbox"/>
GP / Doctor	<input type="checkbox"/>	<input type="checkbox"/>
Other (please say whom below)	<input type="checkbox"/>	<input type="checkbox"/>

15. If you did not report it, why did you not report the concern?  
(Please tick all that apply in each column whether this was a child or vulnerable adult).

	Child	Vulnerable adult
Fear I would not remain anonymous	<input type="checkbox"/>	<input type="checkbox"/>
Fear of being wrong	<input type="checkbox"/>	<input type="checkbox"/>
Felt it was none of my business	<input type="checkbox"/>	<input type="checkbox"/>
Fear of retaliation	<input type="checkbox"/>	<input type="checkbox"/>
Didn't want to get involved	<input type="checkbox"/>	<input type="checkbox"/>
Worried that the child might be taken into care	<input type="checkbox"/>	not applicable
Didn't know who to contact	<input type="checkbox"/>	<input type="checkbox"/>
Other (please say what below)	<input type="checkbox"/>	<input type="checkbox"/>

16. How likely or unlikely do you think it is that the following types of sentence would make an offender less likely to commit a crime in the future?

	Very Likely	Fairly Likely	Fairly Unlikely	Very Unlikely	Haven't heard of it
Community Payback Order	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compensation Order	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Deferred Sentence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drug Treatment & Testing Order	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electronic Tagging	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prison	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. What do you think the main priorities for working with offenders in the community should be? Please look at this list and rank the priorities from 1 to 3, with 1 being the most important.

- Tackling the underlying causes of crime, such as drugs and alcohol
- Working with offenders so they can understand the impact of their crime on victims
- Finding offenders meaningful training or employment opportunities
- Providing stability for offenders by addressing issues such as homelessness
- Ensuring that offenders carry out unpaid work of value to the community in order to pay something back

18. Are you aware of unpaid work carried out in North Ayrshire by individuals who are sentenced to community service?

Yes  No

19. What do you think the main priorities should be for the type of unpaid work carried out by offenders? Please look at this list and rank the priorities from 1 to 3, with 1 being the most important.

- Gardening / landscaping
- Litter-picking
- Large scale environmental work e.g. beach cleaning
- Painting / decorating
- Joinery and building work
- Helping with removals
- Other (please say what below)

A lot of people have heard of **Criminal** Justice and think they know what that is. They generally automatically think about people committing offences, police, courts and prisons but this is where **Community** Justice is different.

Community Justice helps to connect people who have been in trouble (and their families) and victims of crime back in to their communities and includes a wide range of community based services which also help in reducing reoffending, not just Justice Social Work, Police, Courts and Prison.

20. Do you think that communities have a role to play in justice?

Yes  Go to Q21 No  Go to Q22

21. If so, what would that role be?

22. It is estimated that up to 27,000 children are affected by a parent being in prison in Scotland each year. Do you feel that additional support should be available for these families?

Yes  Go to Q23

No  Go to Q24

23. If yes, what would this comprise of?

24. How satisfied are you with open space maintenance in your locality, for example, large park areas and cemeteries.

Very Satisfied

Fairly satisfied

Not very satisfied

Dissatisfied

24a. If you are not satisfied please state why

25. How would you rate your neighbourhood as a place to live?

Very Good

Fairly satisfied

Fairly Poor

Very Poor

25a. If you think it is poor please state why

26. Would you be interested in taking part in tenancy participation activities?

Yes  No  Not applicable (not a tenant)

27. Do you spend any time as a volunteer or organiser or attend any clubs or local community groups organisations (such as bowling clubs, Scouts, Guides, play groups, school parent helper, tenants' associations, community councils, etc.)?

Yes, as a volunteer / organiser  Yes, I attend as a member  No

28. Are you involved in or aware of opportunities to: (please tick any that apply)

	Involved	Aware of
transfer council assets, like community centres, into community ownership	<input type="checkbox"/>	<input type="checkbox"/>
secure funding through participatory budgeting where local people allocate money by popular vote	<input type="checkbox"/>	<input type="checkbox"/>
take part in local decision making through locality partnerships	<input type="checkbox"/>	<input type="checkbox"/>
participate in community organisations like community associations or community councils	<input type="checkbox"/>	<input type="checkbox"/>

29. Do you consider that people from different backgrounds (for example, people of different ethnicities, religious or other social groupings) get on well together in your local area? Please tick one response from the scale below, where 1 is not at all and 5 is definitely.

Not at all 2 3 4 yes, definitely  
1 2 3 4 5

30. If you answered '1' or '2' in Question 29, please give brief reasons for your answer below.

31. Thinking of your neighbourhood how strongly would you agree or disagree with the following statements?

	Strongly Agree	Tend to agree	Neither agree nor disagree	Tend to disagree	Strongly disagree
This is a neighbourhood where people are kind to each other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
This is a neighbourhood where most people can be trusted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There are welcoming places and opportunities to meet new people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There are places where people can meet up and socialise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
This is a neighbourhood where people take action to help improve the neighbourhood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Community Planning is about working together to plan and deliver better services. The Partnership includes North Ayrshire Council, NHS Ayrshire and Arran, Scottish Enterprise, Skills Development Scotland, Scottish Fire and Rescue Service, Strathclyde Partnership for Transport, Police Scotland, Department for Work and Pensions, KA Leisure, Ayrshire College and representatives of the community and voluntary sector. (Find out more at [www.northayrshire.community](http://www.northayrshire.community))

32. Overall, how well do you think these organisations work together to plan and deliver better public services?

Very Well

Quite Well

Neither / Nor

Quite Poorly

Very Poorly

If you answered "poorly" please state why

33. Overall, how satisfied or dissatisfied are you with local council services?

Very Satisfied

Fairly Satisfied

Neither / Nor

Fairly Dissatisfied

Very Dissatisfied

34. How would you rate North Ayrshire Council (NAC) for keeping you informed about its performance?

Very Good

Good

Neither / Nor

Poor

Very Poor

35. Are you aware that NAC publishes an annual report?

Yes (Go to Q34a)

No (Go to Q35)

35a. If you answered yes did you find the report informative and to contain all of the information you would expect?

Yes (Go to Q35)

No (Go to Q34b)

Have not read the report (Go to Q36)

35b. If you answered no what could we include in the report to do better?

36. What type of information would you like to receive regarding the performance of NAC? (please tick all that apply)

- Plans to improve service
- Specific service targets and progress on meeting these targets
- Information on the councils partners such as police and health services
- How well the council is performing against other councils
- Financial information (How well is the council spending money and using resources)
- How well is the council performing against the national average

Information about specific services (Please state which)

37. What would be your preferred method of receiving information about performance of North Ayrshire Council?  
(Please tick all that apply)

- |         |                          |                    |                          |
|---------|--------------------------|--------------------|--------------------------|
| Text    | <input type="checkbox"/> | Facebook           | <input type="checkbox"/> |
| Twitter | <input type="checkbox"/> | Leaflets / posters | <input type="checkbox"/> |
| Website | <input type="checkbox"/> | Local newspaper    | <input type="checkbox"/> |
| Email   | <input type="checkbox"/> |                    |                          |

38. Thinking of your involvement with other people in your neighbourhood would you agree or disagree with the following statements?

- |   | Agree                    | Disagree                 |
|---|--------------------------|--------------------------|
| I could rely on someone in my neighbourhood for help              | <input type="checkbox"/> | <input type="checkbox"/> |
| I could rely on someone in my neighbourhood to look after my home | <input type="checkbox"/> | <input type="checkbox"/> |
| I could turn to someone in my neighbourhood for advice or support | <input type="checkbox"/> | <input type="checkbox"/> |
| I would offer help to neighbours in an emergency                  | <input type="checkbox"/> | <input type="checkbox"/> |

39. To what extent do you think inequalities are an issue in your own locality? By inequalities, we mean any measurable differences in people's health and life expectancy, educational attainment, or employment which are caused by having a low income and savings. Socio-economically disadvantaged households have a higher risk of experiencing poor outcomes.

- Definitely an issue
- Somewhat of an issue
- Definitely not an issue

40. What sort of things would you like to see your Locality Partnership look at in the future to reduce inequalities and improve outcomes for your community? (A Locality Partnership involves community representatives, Elected Members and Community Planning partners working together to address local issues)

41. Thinking of your community please look at the following statements and rate each of them from 1 – 5 with 1 meaning there is a lot of room for improvement and 5 meaning very little room for improvement

Can you easily walk and cycle around using good-quality routes?

Does public transport meet your needs?

Do traffic and parking arrangements allow people to move around safely and meet the community's needs?

Do buildings, streets and public spaces create an attractive place that is easy to get around?

Can you regularly experience good-quality natural space?

Can you access a range of space with opportunities for recreation?

Do facilities and amenities meet your needs?

Is there an active local economy and the opportunity to access good-quality work?

Do the homes in your area support the needs of the community?

Does your community have a positive identity and do you feel you belong?

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

Please return it to Lowland Market Research in the FREEPOST envelope provided.

If the envelope is missing, please use the following address (you do not need a stamp):  
Freepost RSSR-UALB-JRXC, Lowland Market Research, 5 Skimmers Hill, Milton of Campsie, GLASGOW, G66 8JB.