Making best use of the Mobile Library Service

Questionnaire
Tell us your views about the Mobile Library Service across Kent

Kent.gov.uk/mobilelibraryservice
Tell us what you think before 4 March 2016
Questionnaire
Tell us what you think by 4 March 2016

Please tell us your postcode to help us understand who is responding to our consultation:

Data Protection
Kent County Council collects and processes personal information in order to provide a range of public services. Kent County Council respects the privacy of individuals and endeavours to ensure personal information is collected fairly, lawfully, and in compliance with the Data Protection Act 1998.

Q1. Are you completing this questionnaire on behalf of:
Please select one option

☐ Yourself (as an individual)
☐ Yourself (as a relative or friend of a Mobile Library Service user)
☐ Yourself as a member of Kent County Council staff
☐ A District/Town/Parish Council
☐ A Business
☐ A Voluntary or Community Sector Organisation (VCS)
☐ Other, please specify:

Q1a. If you are responding on behalf of a Council / Business / VCS, please tell us the name of the organisation:

Go to kent.gov.uk/mobilelibraryservice if you prefer to fill in this questionnaire online
## Q2. Do you currently use the Mobile Library Service?

*Please select one option*

| Yes | No |

## Q2a. If 'yes', please give the name of the Mobile Library Stop that you currently use


## Q3. When did you last use the Mobile Library Service?

*Please select one option*

| Within the last month | Within the last three months | Within the last year | More than a year ago |
Q4. We are proposing to use one criterion to assess the future of mobile library stops:

Criterion: Stops that have had 2 or less visitors on average over the period October 2014 to September 2015

To what extent do you agree or disagree with these proposed criteria? Please indicate by placing an X in appropriate box below:

- [ ] Strongly Agree
- [ ] Agree
- [ ] Neither agree nor disagree
- [ ] Disagree
- [ ] Strongly disagree
- [ ] Don’t Know

Q4a. Are there alternative or other criteria you think we should use?
Q5. Frequency of visits to each location
We are proposing to change the frequency of visits to each location to every two weeks.

To what extent do you agree or disagree with this proposed change?

☐ Strongly agree
☐ Agree
☐ Neither agree nor disagree
☐ Disagree
☐ Strongly disagree
☐ Don’t know

Q6. Changing the days we operate
We are proposing to change the days we operate the Mobile Library Service from Monday to Friday to Tuesday to Saturday.

To what extent do you agree or disagree with this proposed change?

☐ Strongly agree
☐ Disagree
☐ Agree
☐ Strongly disagree
☐ Neither agree nor disagree
☐ Don’t know
Q7. Increasing the minimum stopping time
We are proposing to change the minimum stop time, increasing this from 10 minutes to 30 minutes.
To what extent do you agree or disagree with this proposed change?

☐ Strongly agree  ☐ Disagree
☐ Agree  ☐ Strongly disagree
☐ Neither agree nor disagree  ☐ Don’t know

Q7a. Please tell us the reasons for your answers in response to questions 5, 6 and 7

Go to kent.gov.uk/mobilelibraryservice if you prefer to fill in this questionnaire online
Q8. Having read about the different ways to access KCC library services, which of the following options would be best for you?  
(please select as many as you wish)

- [ ] Home Library Service
- [ ] Online Library Services
- [ ] Touch a New World
- [ ] Visit to a library building
- [ ] None of the above

Q8a. After considering our proposal will you still be able to access library services?

- [ ] Yes
- [ ] No
- [ ] Don't know

(Information on these services can be found on page 10 and 11 of the consultation document)

Q9: Equality Impact Assessment  
We have completed an Equality Impact Assessment on the review of the Mobile Library Service and we welcome your views on the assumptions we have made. To view the document, go to kent.gov.uk/mobilelibraryservice or ask to see a copy on your mobile library. Please write your comments here:

Go to kent.gov.uk/mobilelibraryservice if you prefer to fill in this questionnaire online
Q10. Anything Else?
If you still have concerns about how you would access the library service in the future, or have any other comments, please let us know.
About You...

If you are responding as an individual, please answer the following questions:

We want to make sure that everyone is treated fairly and equally, and that no one gets left out. That's why we're asking you these questions.

We won't share the information you give us with anyone else. We'll use it only to help us make decisions, and improve our services.

If you would rather not answer any of these questions, you don't have to.

Q11. Are you....? Please select one box.

☐ Male    ☐ Female    ☐ I prefer not to say

Q12. Which of these age groups applies to you? Please select one box.

☐ 0 - 15   ☐ 25 - 34   ☐ 50 - 59   ☐ 65 - 74   ☐ 85 + over

☐ 16 - 24   ☐ 35 - 49   ☐ 60 - 64   ☐ 75 - 84   ☐ I prefer not to say

Go to kent.gov.uk/mobilelibraryservice if you prefer to fill in this questionnaire online
### Q13. To which of these ethnic groups do you feel you belong? (Source: 2011 census) Please select one box.

<table>
<thead>
<tr>
<th>White</th>
<th>Mixed</th>
<th>Asian or Asian British</th>
<th>Black or Black British</th>
</tr>
</thead>
<tbody>
<tr>
<td>English</td>
<td>White &amp; Black Caribbean</td>
<td>Indian</td>
<td>Caribbean</td>
</tr>
<tr>
<td>Scottish</td>
<td>White &amp; Black African</td>
<td>Pakistani</td>
<td>African</td>
</tr>
<tr>
<td>Welsh</td>
<td>White &amp; Asian</td>
<td>Bangladeshi</td>
<td>Other*</td>
</tr>
<tr>
<td>Northern Irish</td>
<td>Other*</td>
<td>Other*</td>
<td>I prefer not to say</td>
</tr>
<tr>
<td>Irish</td>
<td>Arab</td>
<td>Chinese</td>
<td></td>
</tr>
<tr>
<td>Gypsy/Roma</td>
<td><em>If your ethnic group is not specified in the list, please describe it here:</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Irish Traveller</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other*</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The Equality Act 2010 describes a person as disabled if they have a long-standing 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.

**Q14. Do you consider yourself to be disabled as set out in the Equality Act 2010? Please select one box.**

- [ ] Yes
- [ ] No
- [ ] I prefer not to say

**Q14a. If you answered Yes to Q14, 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 applies to you, please select Other, and give brief details of the impairment you have.

- [ ] Physical impairment
- [ ] Mental health condition
- [ ] Sensory impairment (hearing, sight or both)
- [ ] Learning disability
- [ ] Longstanding illness or health condition, such as cancer, HIV/AIDS, heart disease, diabetes or epilepsy.
- [ ] Other*
- [ ] I prefer not to say

*If Other, please specify: ____________________________

*Go to kent.gov.uk/mobilelibraryservice if you prefer to fill in this questionnaire online*
Q15. Do you regard yourself as belonging to any particular religion or belief? *Please select one box.*

- [ ] Yes
- [ ] No
- [ ] I prefer not to say

Q15a. If you answered Yes to Q15, which of the following applies to you? *Please select one box.*

- [ ] Christian
- [ ] Hindu
- [ ] Muslim
- [ ] Any other religion, please specify:  
- [ ] Buddhist
- [ ] Jewish
- [ ] Sikh

Q16. Are you? *Please select one box.*

- [ ] Heterosexual/Straight
- [ ] Gay woman/Lesbian
- [ ] Other
- [ ] Bi/Bisexual
- [ ] Gay man
- [ ] I prefer not to say

Q17. If you would like to receive updates about the development of our proposal and future engagement activities or would like us to contact you regarding alternative library service options please provide your contact details below. *Please select one box.*

Our preferred method of communication is by email, however if you do not have an email address then please provide your postal address.

- [ ] Full Name
- [ ] Email Address
- [ ] Postal Address

Thank you for taking the time to complete this questionnaire.

Please post your complete questionnaire to:
Freepost LRA Consultation

Or return it to your mobile library driver.

*Go to kent.gov.uk/mobilelibraryservice if you prefer to fill in this questionnaire online*
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Alternative formats
If you require this document in any other format or language, please email alternativeformats@kent.gov.uk or call 03000 421553 (text relay service number: 18001 03000 421553). This number is monitored during office hours, and there is an answering machine at other times.

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