

DISABILTIES ENGAGEMENT

**Introduction**

The aim of this questionnaire is to gather your thoughts and feedback on the disability services offered in Inverclyde. We would also like to know what you feel can be improved, what is good practice/works well for people with disabilities and what other resources individuals with disabilities can benefit from with regards to Inverclyde as a whole.

You may wish to remain anonymous, however we do ask for you to provide a post code.

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Post Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Gender: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Would you like to be notified of future events?**

**Yes No**

# How often do you get out and about just now?

Daily Weekly 2-3 Times per week Every 2 Weeks Monthly

Comment:

# Do you use the Shopmobility Service?

Yes No Sometimes Not Aware of the Service

Comment:

If No, Why?

1. **What do you define as a disability?**

**Comment:**

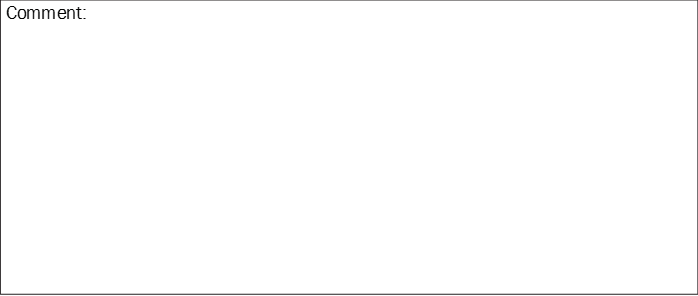
# Have you had experience of living with a disability or living with someone who has one?

Comment:

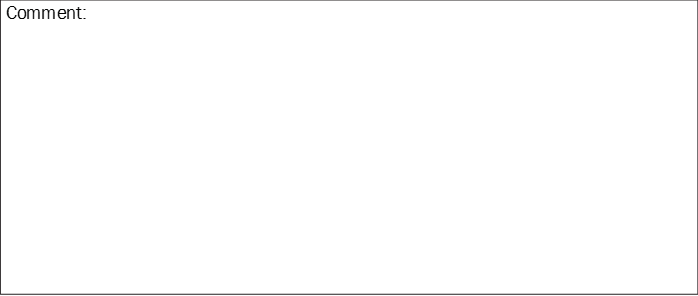
1. **Do you have knowledge of what services are available in Inverclyde to support people living with disabilities?**

Comment:

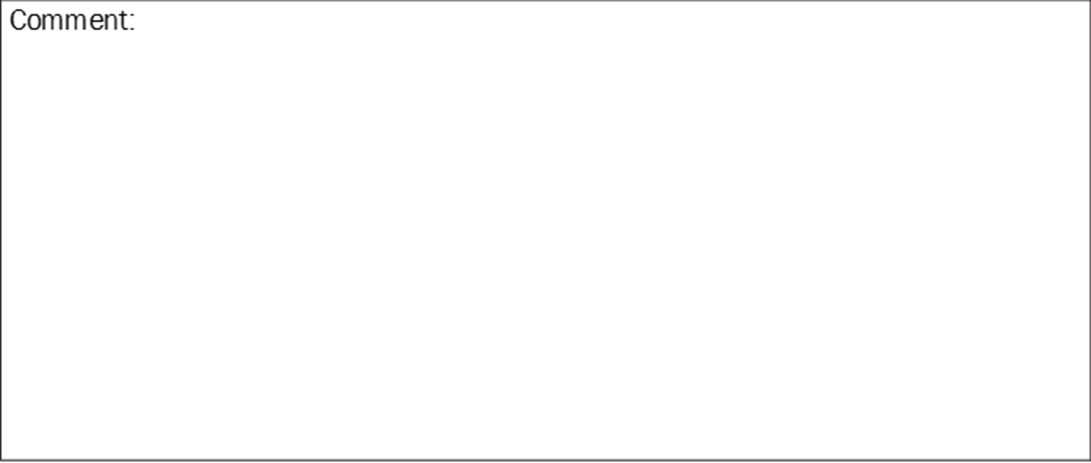
1. **What works well for people in Inverclyde with disabilities? i.e. good practice.**

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1. **What barriers do people with disabilities face in Inverclyde? Are there any gaps that you think can be resolved?**

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1. **Can you think of potential solutions for these gaps/barriers?**

****

1. **Is there anything missing from this questionnaire?**



**Which format would you like to receive communication from us?**

BSL Large Print Braille Standard Print

**We are looking for volunteers to take this questionnaire into the community, if you are interested please pass your name to Ashley or Patricia.**

*Thank you for taking the time to fill in this questionnaire.*