Dementia questionnaire

West Berkshire

Dementia Action This questionnaire has been created to assess services available to people living with dementia in our local communities. Your answers will help us to understand

1. Please read the following statements and tick the <u>one</u> that applies to you:

Working to become

how effective services are, what kind of difference they're making, and how they could be improved.

Taking part is voluntary and you do not have to answer the questions if you do not want to. We will not report results for any individual.

If you can't answer a question, feel free to ask for clarification, or just leave it and go on to the next one. If you have any further questions please contact: Sue Butterworth on 01635 503410 or sue.butterworth@westberks.gov.uk

I am a person living with dementia I am a carer or helper reading out the with dementia and filling in their resp I am a carer / family member complet behalf of someone with dementia	onses.	•			
2. I agree to take part in this research by com	pleting the q	uestionnaire	e (pleas	e tick)	
3. My town and local area. Please tick the box which best describes how	you feel abo	ut the follov	ving sta	tements:	:
	Strongly Disagree	Disagree	Not Sure	Agree	Strongly Agree
a) I have easy access to my local town/village using public transport					
b) I know how I can access mobility aids in my local town/village					
c) I feel comfortable socialising in my local town/village					
d) I am aware of social activities in my local town/village for people with dementia					
e) I know where I can find information about activities for people with dementia in my local town/village					
f) I have easy access to my GP or health services in my local town/village					
g) I have a network of health professionals including GP's to support me in my local area					
 I have good communication with health professionals that support me in my local area 					
i) I find blue badge or other convenient					

parking spaces easily in my town/village? There are no obstacles (signage, physical, poor lighting, narrow paths) stopping me from moving around my town/village

4. Awareness.

Please tick the box which best describes how you feel about the following statements:

		Strongly Disagree	Disagree	Not Sure	Agree	Strongly Agree
a)	Businesses including restaurants have a good understanding of dementia where I am					
b)	Visual and hearing impairments are well catered for in my local businesses including restaurants					
c)	The population in my town/village have a good understanding of dementia					
d)	Public transport in my town/village is dementia friendly					
e)	I know where the nearest W/C is in my town/village					
f)	There are places to sit and rest outside and inside of shops in my local village					

5) Can you suggest anything that can be improved to increase dementia friendliness of your town/village and services locally? This can be in relation to transport, services, signposting, businesses and restaurants, the built environment or anything else you feel we need to know about.
6) Can you suggest anything that can be improved to increase dementia friendliness and awareness in you local community? This can be in relation to raising awareness and communication.
6) What is the name of your local town/village?

PLEASE RETURN COMPLETED QUESTIONNAIRES BY 28TH FEBRUARY 2019

TO: The place or person that gave it to you or Sue Butterworth, Public Health & Wellbeing, West Berkshire Council, West Street House, West Street, Newbury, RG14 1BZ