

URH Anti-Social Behaviour (ASB) Satisfaction Survey

We value your views and feedback on how we handled your Anti-Social Behaviour case. Please answer the following questions so that we may constantly improve our service to you.

Q1 Which TMO Estate do you live on?

- | | |
|--|--|
| <input type="checkbox"/> <i>Blenheim Gardens RMO</i> | <input type="checkbox"/> <i>Roupell Park RMC</i> |
| <input type="checkbox"/> <i>Loughborough EMB</i> | <input type="checkbox"/> <i>Waltham RMO</i> |

Q2 Name

Address

Contact number

E-mail address

Q3

Nature of Anti-Social Behaviour

Q4

Date form completed

Q5 How did you report your concern to the estate office? Please tick only one box.

- | | |
|--|---|
| <input type="checkbox"/> <i>In person</i> | <input type="checkbox"/> <i>By e-mail</i> |
| <input type="checkbox"/> <i>By telephone</i> | <input type="checkbox"/> <i>Other</i> |
| <input type="checkbox"/> <i>In writing</i> | |

Q6 At the beginning how easy was it to contact a member of staff to report your complaint? Tick only one box.

- | | |
|---|--|
| <input type="checkbox"/> <i>Very easy</i> | <input type="checkbox"/> <i>Fairly difficult</i> |
| <input type="checkbox"/> <i>Fairly easy</i> | <input type="checkbox"/> <i>Very difficult</i> |
| <input type="checkbox"/> <i>Neither easy or difficult</i> | |

Q7 How satisfied were you with the support given to you by staff members throughout your case? Tick only one box.

- | | |
|---|---|
| <input type="checkbox"/> <i>Very satisfied</i> | <input type="checkbox"/> <i>Dissatisfied</i> |
| <input type="checkbox"/> <i>Satisfied</i> | <input type="checkbox"/> <i>Very dissatisfied</i> |
| <input type="checkbox"/> <i>Neither satisfied or dissatisfied</i> | |

Q8 Was your complaint dealt within the appropriate category time scale? Category A (24 hrs) Category B (5 working days) Category C (15 working days)

- Yes No

Q9 How satisfied were you with the speed in which your concerns were investigated? Tick only one box.

- | | |
|---|---|
| <input type="checkbox"/> <i>Very satisfied</i> | <input type="checkbox"/> <i>Dissatisfied</i> |
| <input type="checkbox"/> <i>Satisfied</i> | <input type="checkbox"/> <i>Very dissatisfied</i> |
| <input type="checkbox"/> <i>Neither satisfied or dissatisfied</i> | |

Q10 How satisfied were you with the way you were kept up to date with the case development? Tick only one box.

- | | |
|---|---|
| <input type="checkbox"/> <i>Very satisfied</i> | <input type="checkbox"/> <i>Dissatisfied</i> |
| <input type="checkbox"/> <i>Satisfied</i> | <input type="checkbox"/> <i>Very dissatisfied</i> |
| <input type="checkbox"/> <i>Neither satisfied or dissatisfied</i> | |

Q11 Overall, how satisfied were you with the conclusion of the case? Tick only one box.

- | | |
|---|---|
| <input type="checkbox"/> <i>Very satisfied</i> | <input type="checkbox"/> <i>Dissatisfied</i> |
| <input type="checkbox"/> <i>Satisfied</i> | <input type="checkbox"/> <i>Very dissatisfied</i> |
| <input type="checkbox"/> <i>Neither satisfied or dissatisfied</i> | |

Q12 Are you willing to report Anti-Social Behaviour to us in the future?

- Yes No

Do you have any further comments on how we can improve this service?

Q13 Would you like the Estate Director to contact you regarding this case?

- Yes No

We are trying to find out a bit more about our residents to ensure our services best suit your needs.

Please can you spare a couple of minutes to answer a few more questions to help us? You could win £50 in vouchers

Q14a What is your gender identity?

- Male (including trans male) Female (including trans female)
- Other gender identity: _____

Q14b Is your gender identity the same as the gender you were assigned at birth?

- Yes No

Q15 What is your sexual orientation?

| | | | |
|--------------------------|-------------------------|--------------------------|------------------------|
| <input type="checkbox"/> | Heterosexual / Straight | <input type="checkbox"/> | Lesbian / Gay woman |
| <input type="checkbox"/> | Bisexual | <input type="checkbox"/> | Other: _____ |
| <input type="checkbox"/> | Gay | <input type="checkbox"/> | Prefer not to disclose |

Q16 What is your current work status?

| | | | |
|--------------------------|----------------|--------------------------|------------------------|
| <input type="checkbox"/> | Work full-time | <input type="checkbox"/> | Full-Time Student |
| <input type="checkbox"/> | Work part-time | <input type="checkbox"/> | Retired |
| <input type="checkbox"/> | Self-employed | <input type="checkbox"/> | Other: _____ |
| <input type="checkbox"/> | Unemployed | <input type="checkbox"/> | Prefer not to disclose |

Q17 What is your ethnic group?

| | | |
|-------------------------------|--------------------------|---|
| White | <input type="checkbox"/> | White British |
| | <input type="checkbox"/> | White Irish |
| | <input type="checkbox"/> | White Portuguese |
| | <input type="checkbox"/> | White East European |
| | <input type="checkbox"/> | White Gypsy/Roma |
| | <input type="checkbox"/> | Any other white background |
| Mixed | <input type="checkbox"/> | Mixed white and black Caribbean |
| | <input type="checkbox"/> | Mixed white and black African |
| | <input type="checkbox"/> | Mixed white and Asian |
| | <input type="checkbox"/> | Any other mixed background |
| Black or black British | <input type="checkbox"/> | Black or black British Caribbean |
| | <input type="checkbox"/> | Black or black British African |
| | <input type="checkbox"/> | Any other black background |
| Asian or Asian British | <input type="checkbox"/> | Asian or Asian British Indian |
| | <input type="checkbox"/> | Asian or Asian British Pakistani |
| | <input type="checkbox"/> | Asian or Asian British Bangladeshi |
| | <input type="checkbox"/> | Chinese |
| | <input type="checkbox"/> | Any other Asian background |
| Other | <input type="checkbox"/> | Any other ethnic background (please state): _____ |
| | <input type="checkbox"/> | I prefer not to disclose |

Q18 Do you need us to contact you in a language other than English?

Yes (which language): _____ No

Q19 What is your faith / religion?

No religion
 Buddhist
 Christian
 Hindu
 Muslim

Sikh
 Jewish
 Prefer not to disclose
 Other (please state): _____

Q20 Do you have pets in your household?

Yes (please list): _____ No

The Disability Discrimination Act 1995 defines disability as "a physical or mental impairment which has a substantial and long-term adverse effect on a person's ability to carry out normal day-to-day activities".

Q21 Do you consider yourself to have a disability?

Yes No

If "Yes" what is the nature of the disability? Please tick all that apply:

Physical Disability
 Wheelchair User
 Other Mobility or Access Needs
 Blind
 Partially Sighted
 Deaf
 Hearing Impairment
 Speech Impediment
 Literacy Problems
 Other Disability (please specify) _____

Q22 Do you have a support/social worker/emergency contact? If so, please give their details below along with any other details about your disability relevant to the services you receive from URH:

Q23 Please tell us if there is anything else we should know about you or your household to provide better access to our services and improve their quality:

Data Protection and Declaration

I understand that the information recorded on this form will be used by United Residents Housing to provide good service to residents. This information will also be used for monitoring purposes to help to ensure equality of access to services for all URH residents. I understand that this information will not be given to third parties without my prior consent.

Signed (resident): _____

Date: _____

Thank you for taking your time to complete this survey, please return it to your estate housing office.

Spanish

Si desea esta información en otro idioma, rogamos nos llame al

Portuguese

Se desejar esta informação noutro idioma é favor telefonar para

French

Si vous souhaitez ces informations dans une autre langue veuillez nous contacter au

If you would like this information in large print, Braille, audio tape or another language, please contact us on

Bengali

এই তথ্য অন্য কোনো ভাষায় আপনার প্রয়োজন হলে অনুগ্রহ করে ফোন করুন

Twi

Se wope saa nkaeboy yi wo kasa foforo mu a fre

Yoruba

Tí ẹ ba ẹ imoràn yíí, ní èdè Òmíràn, ẹjǫ, ẹ kàn wà l'ágogo

020 7733 9929

Our shared purpose, combined with our passion for improvement, will stand us out as a centre of excellence for resident managed services.

