



CYNGOR BWRDEISTREF SIROL
COUNTY BOROUGH COUNCIL

Reviewing Conwy's Home and Mobile Library Services

We are reviewing the Home and Mobile Library services in Conwy to ensure we continue to deliver the service to those members of the community who need it most. A public consultation is being undertaken between January 28 and 10 March 2019 and we would like to hear your views and ideas.

1 In what role are you responding to this survey?

- Local resident
- Library customer
- Group / organisation
- Town Councillor / County Councillor
- Assembly Member / MP
- Other

Other please specify here: _____

Please specify the name of the group / organisation you represent (optional): _____

2 Please provide your home postcode: _____

Conwy Mobile Library is a 'library on wheels' that brings books, audio books and information to you in your community. It currently makes a total of 120 stops; calling at each stop every 4 weeks, for around 20 minutes.

Conwy Home Library is the service for Conwy residents who, due to age or infirmity, are unable to access a library or use the Mobile Library. The Home Library visits customers in their own home every 4 weeks. It offers access to the complete range of Conwy Library stock based on customers' individual reading preferences.

3 Do you currently use the Mobile Library?

- Yes
- No

4 Do you currently use the Home Library?

- Yes
- No

If you use the Mobile or Home Library, do you also use any of the area or community libraries on a regular basis?

- Yes
- No

Which library do you use on a regular basis? _____

5 Having read the consultation document and the options we are considering, please think about how much each of the options would impact on you?

	No impact	Small impact	Large impact	Very large impact
Option 1: Take no action and continue to provide existing Mobile and Home Library routes. As the vehicles become more unreliable, this results in loss of services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Option 2: Withdraw Mobile Library provision and identify customers who meet the criteria and can be served through the Home Library, or can visit library buildings / use the On-line Library	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Option 3: Amalgamate Mobile and Home Library service provision. Concentrate Mobile Library stops in communities which are remote from library buildings and have limited public transport. See Appendix for stops which may be retained or withdrawn if Option 3 is chosen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please use this space to explain your answer:

6 Having read the consultation document and the options we are considering, please score the suggestions below from 1-3 in order of preference, with 1 being your favourite:

Option 1: Take no action and continue to provide existing Mobile and Home Library routes. As the vehicles become more unreliable, this results in loss of services

Option 2: Withdraw Mobile Library provision and identify customers who meet the criteria who can be served through the Home Library service, or can visit library buildings / use the On-line Library

Option 3: Amalgamate Mobile and Home Library service provision. Concentrate Mobile Library stops in communities which are remote from library buildings and have limited public transport. See Appendix for stops which may be retained or withdrawn if Option 3 is chosen

Are you able to suggest another option which would maintain Mobile and Home Library services with a reduced budget?

7 If Option 3 is chosen, do you agree with the proposed criteria for future Mobile Library stops (see Appendix for mobile stops which may be retained or withdrawn)?

Yes

No

If you answer 'No' please use this space to explain your answer and suggest how the criteria should be changed:

8 Do you agree with the criteria for the Home Library?

Yes

No

If you answer 'No' please use this space to explain your answer and suggest how the criteria should be changed:

The following questions are entirely optional however they help us make sure that our services meet the needs of different types of people. You do not have to answer any of these questions if you don't want to.

Conwy County Borough Council collects, processes and stores a wide range of information, including some personal information, in order to deliver services to benefit the community. We are responsible for managing the information we hold and recognise that this information is important. We take our responsibilities seriously and will use personal information fairly, correctly and safely in line with the legal requirements set out by current Data Protection legislation.

Please access the Library Service Privacy Notice via the following link: <http://www.conwy.gov.uk/en/Council/Access-to-Information/Privacy-Notices/Conwy-Library-Service-Privacy-Notice.aspx>

9 What is your age range?

Under 16 year

16-24 years

25-44 years

45-59 years

60-74 years

75+ years

10 What is your gender?

- | | | | |
|--------------------------|-------|--------------------------|---------------------|
| <input type="checkbox"/> | Male | <input type="checkbox"/> | Female |
| <input type="checkbox"/> | Other | <input type="checkbox"/> | I prefer not to say |

11 Do you consider yourself to be a carer?

- | | | | | | |
|--------------------------|-----|--------------------------|----|--------------------------|---------------------|
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | I prefer not to say |
|--------------------------|-----|--------------------------|----|--------------------------|---------------------|

A carer is a person who cares for someone with a long term illness or disability or who is elderly and cannot manage on their own without support. This does not include support that is given as part of paid employment.

12 Do you consider yourself to have a disability according to the terms of the Equality Act 2010?

- | | | | | | |
|--------------------------|-----|--------------------------|----|--------------------------|---------------------|
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | I prefer not to say |
|--------------------------|-----|--------------------------|----|--------------------------|---------------------|

The Equality Act 2010 defines a disabled person as a person that has a physical or mental impairment, which has a substantial and long term adverse effect on the person's ability to carry out normal day-to-day activities (i.e. has lasted or is expected to last at least 12 months).

13 What is your preferred language? Please tick one box only

- | | | | | | |
|--------------------------|-----------------------|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | British Sign Language | <input type="checkbox"/> | Welsh | <input type="checkbox"/> | English |
| <input type="checkbox"/> | Other | <input type="checkbox"/> | Prefer not to say | | |

14 What is your national identity? Please tick one box only

- | | | | | | | | |
|--------------------------|---------|--------------------------|---------|--------------------------|-------------------|--------------------------|----------------|
| <input type="checkbox"/> | British | <input type="checkbox"/> | English | <input type="checkbox"/> | Scottish | <input type="checkbox"/> | Northern Irish |
| <input type="checkbox"/> | Welsh | <input type="checkbox"/> | Irish | <input type="checkbox"/> | Prefer not to say | | |

Other national identity, please specify here: _____

15 What is your ethnic group? Please tick one box only

- | | | | | | | | |
|--------------------------|-------|--------------------------|---------|--------------------------|-------------------|--------------------------|-------------------|
| <input type="checkbox"/> | White | <input type="checkbox"/> | Asian | <input type="checkbox"/> | Mixed | <input type="checkbox"/> | Prefer not to say |
| <input type="checkbox"/> | Black | <input type="checkbox"/> | Chinese | <input type="checkbox"/> | Gypsy / Traveller | | |

Other ethnic group, please specify here: _____

Thank you for taking time to respond to this consultation