



## **Assisted Transport Policy Questionnaire**

Under our current assisted transport process we do not specifically assess our customers for their eligible transport needs, including their ability to pay. Currently everyone pays the same amount regardless of the distance travelled and their ability to pay.

For statistical purposes, please only tick (✓) one of the boxes below to us which group you are in  □ Customer/service user □ Family/friend/unpaid carer □ Potential future customer/service user □ Provider organisation □ User representative group □ Partner organisation (e.g. PCT, Mental Health Trust) □ Other (please specify)	ell
Please specify:	
If you represent an organisation or group of people, please tell us the nation of the organisation or group if you are replying on behalf of the organisation or group if you are replying on behalf of the organisation or group if you are replying on behalf of the organisation or group if you are replying on behalf of the organisation or group of people, please tell us the national properties of the organisation or group of people, please tell us the national properties of the organisation or group if you are replying on behalf of the organisation or group if you are replying on behalf of the organisation or group if you are replying on behalf of the organisation or group if you are replying on behalf of the organisation or group if you are replying on behalf of the organisation or group if you are replying on behalf of the organisation or group if you are replying on behalf of the organisation or group if you are replying on behalf of the organisation or group if you are replying on behalf or the organisation or group if you are replying on behalf or the organisation or group if you are replying on behalf or the organisation or group if you are replying or the organisation or group if you are replying or the organisation or group if you are replying or the organisation or group if you are replying or	
<ol> <li>Should all customers be assessed for their assisted transport nee Please tick (✓) one box</li> </ol>	ds?
Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Don't know	



2.	Should every customer contribute the same rate regardless of their ability to pay? Please tick ( $\checkmark$ ) one box
	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Don't know
3.	Should every customer be assessed to see how much NCC can contribute towards their eligible assisted transport needs? Please tick (✓) one box
	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Don't know
4.	Some customers choose to access services outside of their local area even when a local service is available. Should these customers be charged an additional amount to cover the increased cost of travel arrangements? Please tick (<) one box
	Should be charged at the same cost Should be charged an additional cost Don't know
5.	If a customer meets the eligible needs for assisted transport should they have the option to use NCC's contribution to arrange their own transport to suit their needs? Please tick (✓) one box
	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Don't know





6. We recognise that the changes to the assisted transport policy may change how assisted transport is assessed and delivered in the future. We would like to understand the affect this may have on unpaid carers.

What affect do you feel this policy will have on informal carers?

Comments:
7. If you have any comments on any of the above questions or any part of the assisted transport policy please tell us these comments in the box below:
Comments:

## **CLOSING DATE FOR ALL RESPONSES: FRIDAY 31st JANUARY 2011**

Thank you for helping us by filling in this questionnaire.

If you require more detailed information about how we charge for our services, please telephone 01604 237977 or e-mail: HASSpublicengagement@northamptonshire.gov.uk

Please post it back to us in the envelope provided. You don't need to put a stamp on the envelope.





1) What gender	are you? (Please tic	k the appropriate bo	X)
Male F	emale		
2) How old are y	ou? (Please tick the	appropriate box)	
	to 17 18 to 3 5 to 74 75+	31 to 50	
3) Do you have a	a disability? (Please	tick the appropriate	box)
Yes N	o		
3a) If Yes, pleas	e tick the appropria	te boxes which bes	st describes your disability?
Mental Health Learning Disabilit	Physical Dis	sability Hear Othe	
4) What is your	religion? (Please tic	k the appropriate bo	x)
Christian Muslim Any other religion	Buddhist Sikh (please write in)	Hindu Non Stated	Jewish None
,	ou describe your etly within the option wh		your background
White		Asian or Asian	British
English	Welsh	Indian	Pakistani
Scottish Irish	Northern Irish Gypsy or	Bangladeshi Other Asian Bad	Chinese Ckground
Other White Back	Traveller		
			Duisi a la
White & Black	ethnic Background White & Black	Black or Black Caribbean	African
Caribbean	African		
White & Asian	Other mixed /	Other Black	
	multiple background	Background	
Other Ethnic gro	oup (please state)		
	or over which of the f? (Please tick the ap		best describes how you
Bisexual	Gay Man	Gay Woman/ Lesbian	Transgender
Heterosexual /	<b>└</b>		
Straight	Prefer not to say	Other	