



Tenants' Survey 2012 General Needs Housing



Your unique reference number:

Be in with a chance to win one of three 24" flat screen televisions in our free prize draw.
(Closing date for Prize Draw 24 February 2012)

By completing this survey you have an opportunity to tell us about the housing service you receive. We intend to send you a survey every two years. Help us make a difference by taking the time to complete this survey (it should take around 10 minutes). If you have internet access you can complete the survey online at www.dacorum.gov.uk/star

Be a star and tell us what you think

If you would like help filling in this survey or would like it in another format, such as large print, audio tape or in another language, please call Sue Prowse on 01442 228966.

(The free Prize Draw Terms and Conditions are also available from Sue)

Overall Satisfaction

1. Taking everything into account, how satisfied or dissatisfied are you with the service provided by Dacorum Borough Council as your Housing Landlord?
(please tick one box only)

- Very satisfied
- Fairly satisfied
- Neither
- Fairly dissatisfied
- Very dissatisfied

2. How satisfied or dissatisfied are you with the overall quality of your home?
(please tick one box only)

- Very satisfied
- Fairly satisfied
- Neither
- Fairly dissatisfied
- Very dissatisfied

3. How satisfied or dissatisfied are you with your neighbourhood as a place to live? (please tick one box only)

- Very satisfied
- Fairly satisfied
- Neither
- Fairly dissatisfied
- Very dissatisfied

4. How satisfied or dissatisfied are you that your rent provides value for money? (please tick one box only)

- Very satisfied
- Fairly satisfied
- Neither
- Fairly dissatisfied
- Very dissatisfied

5. Generally, how satisfied or dissatisfied are you with the way Dacorum Borough Council as your Housing Landlord deals with repairs and maintenance? (please tick one box only)

- Very satisfied
- Fairly satisfied
- Neither
- Fairly dissatisfied
- Very dissatisfied

6. How satisfied or dissatisfied are you that Dacorum Borough Council as your Housing Landlord listens to your views and acts upon them? (please tick one box only)

- Very satisfied
- Fairly satisfied
- Neither
- Fairly dissatisfied
- Very dissatisfied

General Services

7. How satisfied or dissatisfied are you that Dacorum Borough Council as your Housing Landlord treats you fairly? (please tick one box only)

- Very satisfied
- Fairly satisfied
- Neither
- Fairly dissatisfied
- Very dissatisfied

8. How satisfied or dissatisfied are you with the way Dacorum Borough Council as your Housing Landlord deals with the following? (please tick one box in each row)

	Very Satisfied	Fairly Satisfied	Neither	Fairly Dissatisfied	Very Dissatisfied
Anti-social behaviour	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Complaints	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your enquiries generally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Moving or swapping your home (transfers and exchanges)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Perceptions

9. To what extent do you agree or disagree with the following? (please tick one box in each row)

	Strongly Agree	Agree	Neither	Disagree	Strongly Disagree
Dacorum Borough Council as my Housing Landlord is providing the service I expect from my landlord	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dacorum Borough Council as my Housing Landlord has a good reputation in my area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dacorum Borough Council as my Housing Landlord has friendly and approachable staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I trust Dacorum Borough Council as my landlord	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Advice and Support

10. Thinking about your rent and income, how satisfied or dissatisfied are you with the advice and support you receive from Dacorum Borough Council as your Housing Landlord with the following? (please tick one box in each row)

	Very Satisfied	Fairly Satisfied	Neither	Fairly Dissatisfied	Very Dissatisfied	Not Applicable
Claiming housing benefit and other welfare benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Managing your finances and paying rent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Contact and Communication

11. Have you contacted Dacorum Borough Council as your Housing Landlord in the last 12 months with a query other than to pay rent or services charges? (please tick one box only)

- Yes (Go to Q12)
 No (Go to Q13)

12. You have answered Yes to the above question. Please tell us:

	Easy	Difficult	Neither
12a. Was getting hold of the right person easy or difficult?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Helpful	Unhelpful	Neither
12b. Did you find the staff helpful?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Yes	No
12c. Was your query answered within a reasonable time?	<input type="checkbox"/>	<input type="checkbox"/>

13. Do you have access to the internet at home?

- Yes
 No

14. Please tell us what would be your preferred method of being kept informed and getting in touch with Dacorum Borough Council as your Housing Landlord (please tick all that apply)

	Being kept informed	Getting in touch
Email	<input type="checkbox"/>	<input type="checkbox"/>
Telephone	<input type="checkbox"/>	<input type="checkbox"/>
Text / SMS	<input type="checkbox"/>	<input type="checkbox"/>
In writing	<input type="checkbox"/>	<input type="checkbox"/>
Visit to the office	<input type="checkbox"/>	<input type="checkbox"/>
Visit to your home by staff	<input type="checkbox"/>	<input type="checkbox"/>
Open meetings	<input type="checkbox"/>	<input type="checkbox"/>
Newsletter (Housing News and Views)	<input type="checkbox"/>	<input type="checkbox"/>

Other (please specify below)

Being kept informed

Getting in touch

Your Neighbourhood

15. To what extent are any of the following a problem in your neighbourhood?
(please tick one box in each row)

	Major problem	Minor problem	Not a problem
Car parking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rubbish or litter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Noisy neighbours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pets and animals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disruptive children / teenagers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Racial or other harassment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drunk or rowdy behaviour	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vandalism and graffiti	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People damaging your property	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drug use or dealing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Abandoned or burnt out vehicles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other crime	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Noise from traffic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

16. In the last three years would you say your neighbourhood has improved or declined?
(please tick one box only)

- Greatly improved
- Slightly improved
- Stayed the same
- Slightly declined
- Greatly declined

17. Thinking about the area bordering your home, how satisfied or dissatisfied are you with the following? (please tick one box in each row)

	Very Satisfied	Fairly Satisfied	Neither	Fairly Dissatisfied	Very Dissatisfied
Grass cutting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintenance of planted areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Responsive Repairs

18. Have you had any repairs to your home in the last 12 months?

- Yes (Go to Q19)
 No (Go to Q22)

19. Thinking about the last repair completed, how satisfied or dissatisfied were you with the following? (please tick one box in each row)

	Very Satisfied	Fairly Satisfied	Neither	Fairly Dissatisfied	Very Dissatisfied
Being told when workers would call	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Being able to make an appointment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Time taken before work started	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The speed of completion of the work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The attitude of workers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The overall quality of work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Keeping dirt and mess to minimum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The repair being done 'right first time'	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The contractors doing the job you expected	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The repairs service you received on this occasion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. Did the contractor show proof of identity? (please tick one box only)

- Yes
 No

21. Was the repair appointment kept? (please tick one box only)

- Yes
 No

Estate Services

Please only answer Q22 if you live in a flat.

22. How satisfied or dissatisfied are you with the cleaning of the following? (please tick one box in each row)

	Very Satisfied	Fairly Satisfied	Neither	Fairly Dissatisfied	Very Dissatisfied	Not Applicable
Internal communal (shared) areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
External communal (shared) areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Your Priorities for the Future

We have to balance our budget by choosing how to spend your rent money, so we would like you, our tenants, to help us decide how to do this by letting us know what is most important to you.

Please rank the following in order of importance to you - with 1 being most important and 6 being least important. Please use each number from 1 to 6 once only or your responses will not be recorded.

23. **Improved Energy Performance (Helping to keep your costs down, 'greener' better for the environment)** For example improved cavity/loft insulation, more efficient boilers, solar panels.

Estate Improvement/Neighbourhood (The area around your home) For example improved parking, drying areas, landscaping.

Replacement Programme (Planned works) For example new front/back doors, more frequent replacement of bathrooms, kitchens, central heating.

Suitability of Accommodation (Improving our existing homes) For example installing mains powered smoke detectors and carbon monoxide detectors in all our homes. Redeveloping Sheltered Accommodation to change bedsits to flats.

New Homes (Helping to meet current and future housing needs) Spending less on any of the above in order to provide new homes. For example new builds, demolishing blocks of unsuitable flats to redevelop the area.

Something else Do you have another priority to those listed above?

Please tell us about your priority

About You

Now a few questions about you and other members of your household. These questions are asked here to ensure that the services the Council provides to residents are inclusive to everyone. They are not intended to be intrusive and will be processed in accordance with the Data Protection Act 1998.

If you have any queries about why we are asking for this information please contact Sue Prowse on 01442 228966.

24. Do you feel that Dacorum Borough Council has ever discriminated against you by treating you differently from other tenants or by failing to take any special circumstances into account?

- No
 Yes (please give details below)

Please note this question is intended to help us understand the needs of our tenants generally. We will not be able to respond to you individually.

25. The Government is proposing changes to the way benefits are paid. This will make it important that you have a bank or building society account. Do you have such an account that you can use?

- Yes (Go to Q27)
 No (Go to Q26)

26. If No, please can you tell us if you have ever experienced any difficulties in opening a bank or building society account?

- Yes
 No

If Yes, please can you give us details about the problems or reasons why you had difficulty opening a bank account or building society account?

27. What was your age last birthday? (please tick one box only)

- 25 and under 26-39 40-54 55-74 75 and over

28. Are you...?

- Male
 Female

*Please select either male or female for your gender. Transgender or transsexual: select the answer that you identify yourself as. You can select either 'male' or 'female', whichever you believe is correct, irrespective of the details recorded on your birth certificate. You do not need to have a Gender Recognition Certificate.

29. Are you or any household member's day-to-day activities limited because of a health problem which has lasted, or is expected to last, at least 12 months?

(please tick one box only)

- Yes, limited a lot Yes, limited a little Not applicable

30. How would you describe your sexual orientation? *(please tick one box only)*

- Heterosexual (Straight)
 Gay Man
 Gay Woman
 Bisexual
 Other
 Prefer not to say

31. What is your (and your partner's) ethnic group?

Main Tenant

Partner

White

- English / Welsh / Scottish / Northern Irish / British
 Irish
 Gypsy or Irish Traveller
 Any other White background
 Please specify _____

-

-

Mixed / multiple ethnic groups

- White and Black Caribbean
 White and Black African
 White and Asian
 Any other Mixed / multiple ethnic background
 Please specify _____

-

-

Asian / Asian British

- Indian
 Pakistani
 Bangladeshi
 Chinese
 Any other Asian background
 Please specify _____

-

-

Black / African / Caribbean / Black British

- African
 Caribbean
 Any other Black / African / Caribbean background
 Please specify _____

-

-

Other ethnic group

- Arab
 Any other ethnic group
 Please specify _____

-

-

32. What is your religion? (please tick one box only)

- No religion
- Christian (all denominations)
- Buddhist
- Hindu
- Jewish
- Muslim
- Sikh
- Any other religion
- Prefer not to say

33. How long have you/your household been a tenant of Dacorum Borough Council? (please tick one box only)

- Under 1 Year
- 1 up to 3 Years
- 3 up to 5 Years
- 5 up to 10 Years
- 10 up to 20 Years
- 20 Years or more
- Cannot recall

34. How long have you/your household lived in your current home? (please tick one box only)

- Under 1 Year
- 1 up to 3 Years
- 3 up to 5 Years
- 5 up to 10 Years
- 10 up to 20 Years
- 20 Years or more
- Cannot recall

35. Please tell us if you have any other comments about the service you receive from Dacorum Borough Council, your Housing Landlord. (Please note this question is intended to help us understand the needs of our tenants generally. We will not be able to respond to you individually).

Your Personal Details

36. The answers you have given so far are confidential and will not be linked to your tenancy without your permission. However, we wish to improve our tenancy records in the most cost-effective way possible. We would like to be able to update our own records to include your personal information. We will not release this information to anyone outside of Dacorum Borough Council and we will process the data in accordance with the Data Protection Act 1998.

Please tick this box if you are happy to allow us to use your previous answers in this way (Questions 29 – 32 only)

37. If you are happy to allow us to add the personal information to our tenancy records then please give us your name and address including postcode as it appears in your tenancy:

Name: _____
Address 1: _____
Address 2: _____
Town: _____
Postcode: _____

38. You and your household - If you are happy for us to update our tenancy records, please tell us the name, date of birth and gender of everyone living in your household:

Main Tenant	Name: _____	D.O.B://	Gender* <input type="checkbox"/> Female <input type="checkbox"/> Male
Partner	Name: _____	D.O.B://	Gender* <input type="checkbox"/> Female <input type="checkbox"/> Male
Person 3	Name: _____	D.O.B://	Gender* <input type="checkbox"/> Female <input type="checkbox"/> Male
Person 4	Name: _____	D.O.B://	Gender* <input type="checkbox"/> Female <input type="checkbox"/> Male
Person 5	Name: _____	D.O.B://	Gender* <input type="checkbox"/> Female <input type="checkbox"/> Male
Person 6	Name: _____	D.O.B://	Gender* <input type="checkbox"/> Female <input type="checkbox"/> Male

If there are more than six people in your household including children under 16, please continue on a separate sheet.

*Please select either male or female for your gender. Transgender or transsexual: Select the answer that you identify yourself as. You can select either 'male' or 'female', whichever you believe is correct, irrespective of the details recorded on your birth certificate. You do not need to have a Gender Recognition Certificate.

39. Would you be prepared to have your email address added to your contact details?
(please tick one box only)

- Yes (Go to Q40)
 No (Go to Q41)
 Do not have an email address (Go to Q41)

40. If Yes please give your email address below

41. Would you be prepared to have your telephone number(s) added to your contact details?
(please tick one box only)

- Yes (Go to Q42)
- No (Go to Q43)
- Do not have a telephone (Go to Q43)

42. If Yes please give your telephone number(s) below

Home:

Mobile:

Other:

43. Would you like us to contact you about further opportunities to comment on the Housing Service or getting involved in other consultations?

- Yes (If you have not already given us your contact details in Q37 then please do so below. These details will not used to update your tenancy records)
- No

44. Would you like to enter the Prize Draw for the opportunity to win one of three 24" flat screen televisions? Closing date for the Prize Draw is 24 February 2012. Questionnaires received after this date will not be included.

- Yes (If you have not already given us your contact details in Q37 then please do so below. These details will not used to update your tenancy records)
- No

Name:

Address:

Post Code:

Tel No:

**Thank you very much for taking part in the survey.
Look out for the summer issue of News and Views for the results of this consultation.**