

Consultation Questionnaire

2020 Community Partnership Community Engagement Framework

lune 2008

What are we asking you to do?

Please read the full consultation document and give your views by completing this questionnaire.

We must stress that the information presented in the document is for consultation and has been put together based on the wealth of information and views already given by a wide range of groups, organisations and communities through previous consultation activity.

Our aim with the document is to facilitate debate that leads to recommendations about the content of the framework. This may differ from those proposed in the consultation document.

No commitment has been made to any of the proposals in the consultation document.

Please feel free to return your comments either as a hard copy via our free post address (no stamp required) or electronically via the email address below. Whilst we are targeting groups and organisations for their responses, we do welcome responses from individual citizens.

The consultation document and the questionnaire are also available on line at www.2020community.org/cef

We would be grateful if you could return your views by 5th September 2008 either to:

FAO Emma McDermott FREEPOST RRLX-UJYA XLJK Brighton & Hove City Council Research & Consultation Team Room 220 Kings House Grand Avenue Hove BN3 2LS

No stamp required

The Questions.....

Question	Question	Page No.
No.		in
		Consultati
		on
		Document
1a)	Is this the right range of community engagement for Brighton and Hove?	7
1b)	Are there any other overarching terms that should be included in the range?	7
1c)	What other examples of activities might you include under each term in the range of engagement?	7
2a)	Do these adequately reflect appropriate definitions of communities in Brighton and Hove?	8
3a)	Do you think this is the right vision for the community engagement framework?	9
36)	Is there anything that should be included or removed from the vision?	9

4a)	Are these the right objectives for the Framework?	10
4b)	Are there any objectives that should be included or removed?	10
5a)	Are these the right standards?	11
5b)	Are there any other standards that should be included?	11
6a)	What would your top five priority actions be? These could be from the suggestions listed or any news ones you would like to suggest.	13
7a)	Do you have any other comments to make about the framework?	15

CONTACT FORM

We would be grateful if you could provide us with your contact details in order that we can send you / your group/organisation a copy of the feedback report from this consultation.

Name:

Address:

Postcode:

Telephone number:

Email address:

Please tell us if you are responding as:

- † A representative of a group/organisation/partnership
- + An individual member of the group/organisation/partnership
- † An individual

Please tell us the name of your group/organisation/partnership, if applicable:

Please tell us your preferred method of receiving information:

- t email
- † post

Please tell us if we can contact you if we want to discuss your answers in more detail?

- t yes
- t no

Please tell us how you would prefer to be contacted?

- telephone
- t email

MONITORING FORM

Whilst the City Council is committed to monitoring all aspects of diversity, it is acknowledged that some people may be unwilling to disclose their details. Therefore we would be grateful if you would complete our monitoring form.

Question1: Are you

† Male

† Female † Transgender (please tick if you also identify as

Transgender)

Question 2: Do you consider yourself to be disabled or to have a long-standing illness or health condition? (long standing means anything that has troubled you over a period of time or that is likely to affect you over a period of time for example 12 months)

† Yes † No

Question 3: How old were you on your last birthday?

Question 4: To which of these ethnic groups do you consider you belong? Please tick only one

White † British † Irish Other White background (please state)	Black or Black British † Caribbean † African Other Black background (please state)			
Mixed † White & Black Carribean † White & Black African † White & Asian Other mixed background (please state)	Asian or Asian British † Indian † Pakistani † Bangladeshi Other Asian background (please state)			
† Chinese	Other ethnic group (please state)			
Question 4: What is your religion/belief?				
† None † Christian † Buddhist				

- † Buddhist
- † Hindu
- † Jewish
- † Muslim
- † Sikh
- † Other (please state).....

Question 5: Sexual orientation, are you

- Heterosexual
- Bisexual
- † † † † Gay Lesbian
- Other (please state)..... †