

# Libraries for the future - we want your views



Croydon Council is experiencing substantial funding cuts over the next eight years. This means we have to look at different and modern ways to deliver services including libraries. We want to hear the views and ideas of local people about how they want their library services to run.

Once you have completed the questionnaire you can ask your local library staff to scan and email it to [allan.nimmo@croydon.gov.uk](mailto:allan.nimmo@croydon.gov.uk) to be added to our electronic survey results. You may also post it back to me at Croydon Council, 4<sup>th</sup> Floor Bernard Weatherill House, Mint Walk, Croydon. CR0 1EA.

## **Ambitious for the Library Service in Croydon**

1: Which ward do you live in?

Please tick one option only

- |  |  |
|--|--|
| <input type="checkbox"/> Addiscombe Ward                   | <input type="checkbox"/> Ashburton Ward          |
| <input type="checkbox"/> Bensham Manor Ward                | <input type="checkbox"/> Broad Green Ward        |
| <input type="checkbox"/> Coulsdon East Ward                | <input type="checkbox"/> Coulsdon West Ward      |
| <input type="checkbox"/> Croham Ward                       | <input type="checkbox"/> Fairfield Ward          |
| <input type="checkbox"/> Fieldway Ward                     | <input type="checkbox"/> Heathfield Ward         |
| <input type="checkbox"/> Kenley Ward                       | <input type="checkbox"/> New Addington Ward      |
| <input type="checkbox"/> Norbury Ward                      | <input type="checkbox"/> Purley Ward             |
| <input type="checkbox"/> Sanderstead Ward                  | <input type="checkbox"/> Selhurst Ward           |
| <input type="checkbox"/> Selsdon & Ballards Ward           | <input type="checkbox"/> Shirley Ward            |
| <input type="checkbox"/> South Norwood Ward                | <input type="checkbox"/> Thornton Heath Ward     |
| <input type="checkbox"/> Upper Norwood Ward                | <input type="checkbox"/> Waddon Ward             |
| <input type="checkbox"/> West Thornton Ward                | <input type="checkbox"/> Woodside Ward           |
| <input type="checkbox"/> I'm not sure which ward I live in | <input type="checkbox"/> I don't live in Croydon |

2: Have you ever used a Croydon library?

Please tick one option only

☐  
Yes

☐  
No

**If you answered "No" to question 2 then go to question 4**

3: To you – what are the most important things in our current library offer?

Please tick all that apply

- |   |  |
|---|--|
| <input type="checkbox"/> Library staff                    | <input type="checkbox"/> Access to books                     |
| <input type="checkbox"/> Quiet space                      | <input type="checkbox"/> Group activities                    |
| <input type="checkbox"/> Places for children's activities | <input type="checkbox"/> Access to Wi-Fi                     |
| <input type="checkbox"/> Safe space                       | <input type="checkbox"/> A place to study                    |
| <input type="checkbox"/> Meeting people                   | <input type="checkbox"/> Doing crafts and activities         |
| <input type="checkbox"/> Getting job search help          | <input type="checkbox"/> Access to computer and printer      |
| <input type="checkbox"/> Getting information              | <input type="checkbox"/> Getting advice                      |
| <input type="checkbox"/> Getting homework help            | <input type="checkbox"/> Other (please tell us in box below) |

3.1: Please tell us

4: Thinking about libraries in the future, what would you like to see as part of your library service?

Please tick all that apply

- |  |  |
|--|--|
| <input type="checkbox"/> Learning and study spaces for children and adults                         | <input type="checkbox"/> Somewhere to read and/or to borrow books  |
| <input type="checkbox"/> Free Wi-Fi  | <input type="checkbox"/> A place to use computers and printers   |
| <input type="checkbox"/> Online books and magazines  | <input type="checkbox"/> A place to get training and learn new skills  |
| <input type="checkbox"/> A place to access to digital learning courses and training                | <input type="checkbox"/> A community space for meetings  |
| <input type="checkbox"/> A place to meet and talk to people  | <input type="checkbox"/> More community support services such as access to voluntary organisations help groups and advice services |
| <input type="checkbox"/> A place to shop and / or eat  | <input type="checkbox"/> A place that is open every day and in the evening   |
| <input type="checkbox"/> To be able to access other Council services either face to face or online | <input type="checkbox"/> A place where I contribute to the running of the service  |
| <input type="checkbox"/> A place to get help with finding a job                                    | <input type="checkbox"/> Other (please tell us in box below)   |

4.1: Please tell us

### **Delivering the library service in partnership with local communities**

5: We believe that our libraries are important community hubs and that they should be relevant, accessible and part of your neighbourhood. Would you be willing to be involved in the running of your local library? This could be as a day to day volunteer, a homework helper, help in the running of activities at your neighbourhood library or even as a group taking over the delivery of an entire local branch.

Please tick one option only

☐  
Yes

☐  
No

**If you answered "No" to question 5 then go to question 10**

6: Please provide details of how you would be prepared to volunteer i.e. one day a week helping at a library, helping at a homework help club, supporting a specific group or helping in the delivery of other activities etc.

7: We also welcome any ideas from individuals, groups or organisations who may be interested in taking on the running of one of our branch libraries. Please provide details of your proposal.

8: If you are interested in volunteering or delivering a library as an individual, group or an organisation, please provide us with your contact details. Please note that these will only be used for contacting you about your interest in library services.

9: Please also provide your email address (if you have one) so that we may contact you about your offer. Please note that this will only be used for contacting you about your interest in library services.

### **Equalities monitoring**

We want to make sure that we hear from a variety of people, to help us do this please answer the following questions about yourself. If you would rather not, there are 'prefer not to say' options for each question.

10: Are you?

Please tick one option only

☐ Male

☐ Female

☐ Prefer not to say

11: What age group are you in?

Please tick one option only

☐ Under 16

☐ 25 - 34

☐ 45 - 54

☐ 65 and over

☐ 16 - 24

☐ 35 - 44

☐ 55 - 64

☐ Prefer not to say

12: Which of the following best describes your ethnic background?

Please tick one option only

- |  |  |
|--|--|
| <input type="checkbox"/> White British                           | <input type="checkbox"/> White Irish                             |
| <input type="checkbox"/> White European                          | <input type="checkbox"/> Other white                             |
| <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"/> Other Mixed background                  |
| <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"/> Asian or Asian British: Chinese         |
| <input type="checkbox"/> Other Asian or Asian British Background | <input type="checkbox"/> Black or Black British: Caribbean       |
| <input type="checkbox"/> Black or Black British: African         | <input type="checkbox"/> Other Black or Black British background |
| <input type="checkbox"/> Arab                                    | <input type="checkbox"/> Prefer not to say                       |
| <input type="checkbox"/> Other                                   |  |

12.1: Please Specify

13: Do you consider yourself to have a disability?

Please tick one option only

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

14: If yes, in what way(s)?

Please tick all that apply

- |                          |                          |                          |                          |                          |                          |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Visually Impaired        | Hearing Impaired         | Mobility disability      | Learning disability      | Communication difficulty | Other                    |

14.1: Please state

Thank you for taking part in this survey. Your views are important.. A report on future plans will be going to cabinet in July 2016. Papers for this will be available on our website.