

# Planning, Health and Environment Division

## Wyre Forest District Council

The Environmental Health and Licensing Section is currently undergoing a review of the services it offers and part of this review includes consulting with stakeholders to see what they think of our current level of service and where we could improve.

You have been identified as a key stakeholder and your opinion will be important in determining how the service develops in the future.

I would be grateful if you could spare a few minutes of your time to answer the following questions and any comments or suggestions you may have would be gratefully received:-

### Part A

**Q1 Do you have a clear understanding of the functions and role of the Environmental Health and Licensing section?**

Yes .....  No.....

**Q2 Have you had reason to use any of the services provided or contact the Environmental Health and Licensing Section over the last 2 years?**

Yes .....  No.....

*If the answer to A2 is YES, please answer the questions in Part B*

### Part B

When contacting / working with the Environmental Health and Licensing Section how did you rate:

**Q3 The ease in obtaining information or advice**

Very good.....  Good .....  Satisfactory ...  Poor .....  Not applicable

**Q4 The ease in contacting the person you need to speak to**

Very good.....  Good .....  Satisfactory ....  Poor .....  Not applicable

**Q5 The quality of advice / service you received**

Very good.....  Good.....  Satisfactory ....  Poor .....  Not applicable

**Q6 The quality of information on our website**

Very good.....  Good.....  Satisfactory ....  Poor .....  Not applicable

**Q7 Our promptness of reply**

Very good.....  Good .....  Satisfactory ....  Poor .....  Not applicable

**Q8 Our effectiveness in joint working with your organisation**  
*Very good.....*  *Good .....*  *Satisfactory....*  *Poor .....*  *Not applicable*

**Equal opportunities monitoring.** Please tick the descriptions which you would apply to yourself. It is not mandatory to complete this part of the form, but it is useful to us to determine if the services we deliver are addressing the needs of our stake holders.

**Q9 Sex**

	<i>Male</i>	<i>Female</i>
Sex	<input type="checkbox"/>	<input type="checkbox"/>

**Q10 Age**

	<i>16 - 24</i>	<i>25 - 34</i>	<i>35 - 44</i>	<i>45 - 54</i>	<i>55-64</i>	<i>65+</i>
Age	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q11 Mobility**

	<i>Disabled</i>	<i>Not Disabled</i>
Mobility	<input type="checkbox"/>	<input type="checkbox"/>

**Q12**

<i>African/Caribbean .....</i>	<input type="checkbox"/>	<i>Other Black or Asian .....</i>	<input type="checkbox"/>
<i>Bangladeshi.....</i>	<input type="checkbox"/>	<i>White European .....</i>	<input type="checkbox"/>
<i>Indian .....</i>	<input type="checkbox"/>	<i>Chinese.....</i>	<input type="checkbox"/>
<i>Pakistani .....</i>	<input type="checkbox"/>	<i>Other (including mixed).....</i>	<input type="checkbox"/>

Are there any additional comments that you wish to make about the service, or any improvement you would like to see and why?

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Please enter your name and address, should you require a response:

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Thank you for taking the time to complete this questionnaire. Please return to Mr M Kay, Environmental Health & Licensing Section of the Planning, Health and Environment Division, Duke House, Clensmore Street, Kidderminster, Worcestershire. DY10 2JX