|  |
| --- |
| **You can get this document on tape, in Braille, large print and various computer formats if you ask us. Please contact Interpretation and Translation Service (ITS) at** [its@edinburgh.gov.uk](mailto:its@edinburgh.gov.uk)  **quote reference number 23-8523. ITS can also give information on community language translations.** |



**Reference number: 23-8523**

**Self-Directed Support Contracts Review**

We are doing a review of current contracts that support Self Directed Support Options, specifically Option 1 Direct Payments and we need your help.

It is essential that we gain views from people who have used or helped someone to use any of the services outlined below.

We would appreciate your feedback to help us understand how useful the services are in enabling people to have choice and control on the lifestyle they want. It will help us identify areas of good practice and areas for improvement.

**Please give us your views**

1. Have you used any of the services below? (Please tick all that apply)

Lothian Centre for Inclusive Living ( LCiL)

|  |
| --- |
|  |
|  | Independent support service |
|  | Grapevine Service |
|  | Payroll / Financial Management Service |

Fife Business Services

|  |  |
| --- | --- |
|  | Payroll / Financial Management Services |

Accountability

|  |  |
| --- | --- |
|  | Payroll / Financial Management Services |

1. How did you hear about the service/s you used?

|  |  |  |
| --- | --- | --- |
|  |  | |
|  | A medical professional | |
|  | A Council worker | |
|  | A support worker | |
|  | The internet | |
|  | An organisation | |
|  | Family member or friend | |
|  | Other (please use box below) |

1. What has changed for you by using the services? (Please use the box below)
2. Overall, how satisfied or dissatisfied are you with the service provided?

|  |  |
| --- | --- |
|  | Very satisfied |
|  | Satisfied |
|  | Neither satisfied nor dissatisfied |
|  | Dissatisfied |
|  | Very dissatisfied |

1. Is there anything you would like to tell us about the service? (Please use the box below)
2. Do you think you had choice and control over your decision to use a payroll organisation? (Please tick one answer only)

|  |
| --- |
|  |
|  | Yes |
|  | No |
|  | Don’t know |

1. Please provide reasons for your answer using the box below.

|  |
| --- |
|  |

Support from others

We value the views of anyone who has supported you in accessing the above service. Please refer them to this section so that they can contribute their comments.

1. Please indicate what service you have supported someone to access (Please tick all that apply)

|  |  |
| --- | --- |
|  | Lothian Centre for Inclusive Living (LCiL) |
|  | Independent support service |
|  | Grapevine Service |
|  | Payroll / Financial Management Service |

Fife Business Services

|  |  |
| --- | --- |
|  | Payroll / Financial Management Services |

Accountability

|  |  |
| --- | --- |
|  | Payroll / Financial Management Services |

1. Please provide any comments about the service in the box below.

You can complete this questionnaire online by going to: <https://edinburgh.gov.uk/SDS>

**Please respond** **by 10th July 2023**

Thank you for taking the time to complete this survey.