

Q4 Please tell us why the home library service is important to you.

Q5 **What do you borrow from the home library service? (Please select all that apply)**

- Books
- Large print books
- Audio books
- Jigsaws
- CDs
- DVDs.....

Q6 **Do you use any of our online library services? (Please select all that apply)**

- No.....
- Yes - e books - BorrowBox.....
- Yes - e audio books - BorrowBox.....
- Yes - e newspapers - BorrowBox.....
- Yes- e magazines - Libby app

Q7 **Would you be interested in accessing the library resources online?**

- Yes,
- No
- Don't know.....

Q8 **Would you need help to access the online library resources?**

- Yes
- No.....
- Don't know.....

Q9 **Why do you use the home library service? (Please select all that apply)**

- I am unable to visit the library in person because of my age
- I am unable to visit the library in person because of a disability
- I am unable to visit the library in person because I'm a carer for someone
- I don't have anybody who can go to the library for me
- I am unable to visit the library because I'm recuperating from illness / hospital stay
- Other

If other, please state

Q10 Do you get support to use any other council service? Please use this space to tell us which ones?

Q11 What could be done to improve the home library service for you in the future?

About you

Q12 **Please tell us your full postcode.** This will help us understand how residents living in different areas across Bournemouth, Christchurch and Poole use the library service.

It is important that we understand how the library service is used / not used by different people within our community which is why we ask you personal questions about yourself. If you do not feel comfortable providing this data then please select 'prefer not to say'. The information we collect will be confidential and any data published cannot be traced back to you.

Q13 **Are you aged:**
(Please select one option)

| | | | | | |
|--------------------|--------------------------|--------------------|--------------------------|-------------------------|--------------------------|
| 16 - 24 years..... | <input type="checkbox"/> | 45 - 54 years..... | <input type="checkbox"/> | 75 - 84 years..... | <input type="checkbox"/> |
| 25 - 34 years..... | <input type="checkbox"/> | 55 - 64 years..... | <input type="checkbox"/> | 85+ years | <input type="checkbox"/> |
| 35 - 44 years..... | <input type="checkbox"/> | 65 -74 years..... | <input type="checkbox"/> | Prefer not to say | <input type="checkbox"/> |

Q14 **What is your sex?**
(Please select one option)

| | | | | | |
|--------------|--------------------------|-----------|--------------------------|-------------------------|--------------------------|
| Female | <input type="checkbox"/> | Male..... | <input type="checkbox"/> | Prefer not to say | <input type="checkbox"/> |
|--------------|--------------------------|-----------|--------------------------|-------------------------|--------------------------|

Q15 **Are your day-to-day activities limited because of any physical or mental health conditions or illnesses, lasting or expected to last 12 months or more?**
(Please select one option)

| | | | |
|------------------------------|--------------------------|------------------------|--------------------------|
| Yes - limited a lot | <input type="checkbox"/> | No..... | <input type="checkbox"/> |
| Yes - limited a little | <input type="checkbox"/> | Prefer not to say..... | <input type="checkbox"/> |

**Q16 What is your ethnic group?
(Please select one option)**

- White English / Welsh / Scottish / Northern Irish / British
- White Irish
- White Gypsy or Irish Traveller
- Roma.....
- Any other White background (please specify below if you wish)
- Mixed White & Black Caribbean
- Mixed White & Black African
- Mixed White & Asian
- Any other Mixed/ Multiple ethnic background (please specify below if you wish)
- Black / British Caribbean.....
- Black / British African
- Any other Black / African / Caribbean background (please specify below if you wish)
- Asian / British Indian.....
- Asian / British Pakistani.....
- Asian / British Bangladeshi.....
- Asian / British Chinese
- Any other Asian background (please specify below if you wish)
- Arab.....
- Any other ethnic group (please specify below if you wish)
- Prefer not to say.....

**Q17 Do you look after, or give any help or support to, anyone because they have long-term physical or mental health conditions or illnesses, or problems related to old age? (Exclude anything you do as part of your paid employment)
(Please select one option)**

- Yes
- No.....

Q18 Which of the following do you have at home? (Please tick all that apply)

- | | |
|--|--|
| PC computer / laptop..... <input type="checkbox"/> | Smart TV <input type="checkbox"/> |
| Tablet <input type="checkbox"/> | None of the above <input type="checkbox"/> |
| Smart phone <input type="checkbox"/> | |

Q19 Do you have access to the internet at home? (Please tick one option)

- Yes.....
- No

**Thank you for taking part in this survey.
Please hand back your survey to the home library service volunteer**