

## To everyone living with dementia, their carers, families, and friends

Milton Keynes Council has made a commitment to make Milton Keynes a dementia friendly city. This means that we want Milton Keynes to be a good place for people with dementia to live, where their views are listened to and where they feel part of their community.

To help us to shape our community services for the future we want to understand what services would be of most value to you. We are not able to promise that we can deliver everything that people want but we will take account of your views when new community services are being introduced and it may be possible to change some of our existing services too.

Please fill out this questionnaire so that your views become known to us. The survey is completely anonymous and confidential.

Our partners, Alzheimer's Society and Healthwatch, are available on the phone to help you to fill out the survey, their phone numbers are on the questionnaire. Your service providers can also help you to fill in the survey.

Please return the questionnaire by the end of December 2021. We will then analyse the results in early January. We have provided envelopes for you with the postage already paid. If you prefer you can hand your completed survey to your service provider and they will return it to us for you.

If you prefer to fill out the survey online the link is

**[forms.office.com/r/mWkNvSqXgu](https://forms.office.com/r/mWkNvSqXgu)**

If you have a problem accessing the link please ask for advice by emailing:

[dementiafriendlymk@milton-keynes.gov.uk](mailto:dementiafriendlymk@milton-keynes.gov.uk)

Thank you for your help. We look forward to hearing from you.

Kind regards,



Cathy Westlake  
Dementia Commissioner  
Milton Keynes Council

## Survey on Support after a Diagnosis of Dementia

Milton Keynes Council are committed to making Milton Keynes City Dementia Friendly. As part of this we want to understand what types of ongoing support you feel would help you most. We may not be able to provide everything that people ask for but knowing your preferences will help us to shape the services we provide in Milton Keynes.

This survey is for people with dementia, their carers and families. Please return the survey in the pre-paid envelope supplied or you can fill it in on-line at [www.miltonkeynes.gov.uk](#) If you would like to speak to someone about the survey or need telephone support to fill it in please contact the Dementia Information Service run by Alzheimer's Society (tel 01908 232612 ) or Healthwatch (tel 01908 698800).

If you need the survey in a different language please call Healthwatch (tel 01908 698800 )

1. Do you have dementia? **Please can you circle Yes or NO**

Yes or No

2. Are you a carer? **Please can you circle Yes or NO**

Yes or No

3. Please can you **circle Yes or NO** to the following questions

If one was available locally would you attend a Memory Club? Yes or No

If one was available locally would you attend a Memory Cafe? Yes or No

If one was available locally would you attend an activity group Yes or No

3.1 If the answer to all of the above is no, please can you advise us what you would like in place instead?

4. Would you prefer attendance to be for the person with dementia only or for carers to be included?

**Please tick the boxes below.**

Person with dementia only

Together with carer

Both for carers and those with dementia

5. Would you like more support for carers? **Please tick the boxes below.**

Yes

No

6. What form would you like this support to take? **Please tick the boxes below.**

- Zoom meetings
- Face to face group meetings
- Individual meetings
- Drop- in sessions

Other (**please advise below**)

7. At a carer support session what would be of most value to you? **Please tick the boxes below.**

- Time to talk to other carers
- Sessions designed to help with stress
- Fun activities
- Information sessions
- Chance to talk to an expert about problems

If you have any other ideas, **please write these below.**

8. What type of activities do you enjoy? **Please tick the boxes below**

- Time for social interaction
- Quizzes
- Seated exercises
- Music (listening)
- Music (playing)
- Singing
- Games
- Reminiscence activities
- Sports:
- Exercise
- Outdoor walks
- Crafts
- Painting
- Pet therapy visits
- Reading groups
- Visits to the library
- Visits to museums
- Opportunities to speak to knowledgeable professionals including Admiral Nurses and Dementia Support workers
- Separate carer support
- Films
- Dancing
- Zumba

If you have any other ideas, **please write these below.**

9. How long would you like sessions to be? **Please tick the boxes below.**

- 2 hours
- Half a day
- Whole day

10. How frequent would you like sessions to be? **Please tick the boxes below.**

- Weekly
- Every 2 weeks
- Every Month

11. When would you like your sessions to take place?

- Day Sessions
- Weekday Sessions
- Weekend Sessions

12. Is transport a problem for you? **Please can you circle Yes or NO**

Yes or No

If you answered no to the above, please can you provide more details:

13. Is there anything else you would like to tell us about?

You do not need to give your name but please do give your area **postcode** as this will help us to identify the areas where support is required.

**Name**..... (optional)

What is your area **postcode**.....

**Please place your completed survey into the prepaid envelope.**

**Thank you for filling in this survey.**