

**44 High Street, Laurencekirk AB30 1AB Tel: 01561 378130 Email: office@mchln.org.uk**

**SERVICES AND ACTIVITIES SURVEY**

Thank you for answering our short survey. Your answers will help us to better promote our services and activities, and identify and develop new services and groups in response to your ideas and suggestions.

Please indicate whether you know about, or have used, any of the following services and groups:

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Have used** | **Know about** | **Don’t know about** |
| **Transport Service to healthcare appointments and social activities** |  |  |  |
| **Shopping Service – home delivery or accompanied**  |  |  |  |
| **Garden Maintenance - grass cutting and weeding** |  |  |  |
| **Friendly Call Telephone Service** |  |  |  |
| **Social Gardening groups in Laurencekirk and Portlethen** |  |  |  |
| **Health Walks in St Cyrus, Laurencekirk and Stonehaven** |  |  |  |
| **Past Times Group – for people living with dementia and cognitive impairment** |  |  |  |
| **Memory Café – for people with dementia, carers, friends and the community** |  |  |  |

**Continued below**

**Mearns and Coastal Healthy Living Network is a Company registered in Scotland with the number 325854.**

**Scottish Charity number SCO38980**

Please indicate whether you know about, or have used, any of the following services and groups:

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Have used** | **Know about** | **Don’t know about** |
| **Lunch Clubs in Stonehaven and Auchenblae** |  |  |  |
| **Dementia-friendly film screenings** |  |  |  |
| **Gentle Exercise Classes** |  |  |  |
| **Connecting Scotland project – 1:1 support to use iPads and Chromebooks** |  |  |  |
| **Volunteering – volunteers help to deliver our full range of services and activities** |  |  |  |

As groups and activities restart after COVID-19, do you have any ideas and suggestions for new activities, or in different locations in Kincardine and Mearns? For example, computer skills, singing/choir, dementia-friendly film club in Stonehaven, etc.

|  |
| --- |
| Add your suggestions here: |

**Your age:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 50-60 | 60-70 | 70-80 | 80-90 | 90+ | Prefer not to say |
|  |  |  |  |  |  |

**Your gender:**

|  |  |  |
| --- | --- | --- |
| Female | Male | Prefer not to say |
|  |  |  |

**Your postcode:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| AB30 | AB39 | AB12 | DD10 | DD9 | Prefer not to say |
|  |  |  |  |  |  |

**Please return to us at 44 High Street, Laurencekirk AB30 1BP, or to office@mchln.org.uk. Thank you.**