Footway Crossing - Policy Consultation

Overview

Welcome, and thank you for taking the time to provide feedback by completing this consultation.

Birmingham City Council has a Footway Crossing Policy that was implemented in 2006 and we have now produced the attached draft Policy which we intend to publish in May 2021.

Prior to the publication Birmingham City Council invites your comments in relation to this draft Policy. It should take only a few minutes to complete and there is space available to make comments about the Policy and service.

The draft Policy is attached below.

Pο	licy	SIII	nr	าด	rt
	поу	Ju	\sim 10	\sim	, ,

How strongly do you agree or disagree with the proposed Policy document?
Please select only one item
Strongly agree
Agree
Neither agree nor disagree
Disagree
Strongly Disagree
O Don't know / no opinion
O Bort know / no opinion
2 If you disagreed with any of the Policy could you please provide details of why you disagree and which you feel should be changed.
3 Do you feel that the information provided has enabled you to make an
informed comment on the Policy proposal?
Please select only one item
Yes
○ No
O Don't know
4 What additional information would have helped you to comment on the proposal?
Additional information
Additional information

Service Feedback

5	What is your overall satisfaction with the current Footway Crossing service?
Ple	pase select only one item
	Very satisfied
2	Satisfied
	Neither satisfied nor dissatisfied
	Dissatisfied
	Very dissatisfied
	y very dissatisited
6	Do you feel that the service provides good value for money?
Pl	pase select only one item
	Strongly agree
	Agree
(Neither agree nor disagree
Ò	Disagree
Ò	Strongly Disagree
Collec	ut you ting this information will allow us to identify any patterns or trends, particularly ones that show that there might be a potential negative impact on a particular group or s. We can then investigate the issues further or take action (if appropriate).
7	Age: Which age group applies to you?
	pase select only one item
	0 - 4
)5-9
) 10 - 14) 45 - 47
) 15 - 17) 15 - 17
) 18 - 19 Day and
	20 - 24
	25 - 29
	30 - 34
	35 - 39
	40 - 44
) 40 - 44) 45 - 49
) 40 - 44) 45 - 49) 50 - 54
) 40 - 44) 45 - 49) 50 - 54) 55 - 59
) 40 - 44) 45 - 49) 50 - 54
) 40 - 44) 45 - 49) 50 - 54) 55 - 59
) 40 - 44) 45 - 49) 50 - 54) 55 - 59) 60 - 64
	40 - 44 45 - 49 50 - 54 55 - 59 60 - 64 65 - 69
) 40 - 44) 45 - 49) 50 - 54) 55 - 59) 60 - 64) 65 - 69) 70 - 74
	40 - 44 45 - 49 50 - 54 55 - 59 60 - 64 65 - 69 70 - 74 75 - 79

8 Sex/Gender: What is your sex?
Please select only one item
○ Male
Female
Prefer not to say
9 Ethnicity: What is your ethnic group?
Please select only one item
White: English/Welsh/Scottish/Northern Irish/British
Other White background (please specify)
Please select only one item
Mixed/multiple ethnic groups
Asian/Asian British
Black African/Caribbean/Black British
Other ethnic group (please specify)
10 Religion: What is your religion or belief?
Please select only one item
No Religion
Christian (including church of England, Catholic, Protestant, and all other Christian denominators)
Buddhists
Hindu
Jewish
Muslim
Sikh
Any other religion (please specify below)
Prefer not to say
11 Sexual Orientation: What is your Sexual Orientation?
Please select only one item
Bisexual
Gay or Lesbian
Heterosexual or Straight
Other
Other Prefer not to say

12 Disability: Do you have any physical or mental health conditions or illnesses lasting or expected to last for 12 months or more?
Please select only one item
Yes
○ No
Prefer not to say