

OceAn

HOUSING

Customer Survey 2016



You and your contact preferences



Q1 Have you contacted Ocean in the last 12 months?

Yes

No

GO TO Q4 →

Q2 What was your enquiry about?

Rent

Repair

My area

Shared Ownership

Other (please state):



Q3 How did you get in touch with Ocean?

Email

Website

Phone

Twitter

Facebook

In person

Letter

LiveChat

Other (please state):



Q4 What is your preferred method of contacting Ocean?

Email

Website

Phone

Twitter

Facebook

In person

Letter

LiveChat

Other (please state):



Q5 Have you used the Ocean website www.oceanhousing.com to contact us or find information?

Yes

No

GO TO Q7 →

Q6 What information or services did you access?

Rent

Repair

My area

Shared ownership

Other (please state):



Q7 Do you use MyOcean, our online tenant account portal?

Yes

GO TO Q9 →

No

Q8 To use MyOcean online tenant account portal, simply enter your email address here and we can register you:

.....

Q9 Did you know you can text Ocean to access rent account information?

Yes

GO TO Q12 →

No

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You can contact
Ocean on



Q10 Now you know you can text Ocean to access rent information, would you use this service?

Yes

No

GO TO Q12 →

Q11 To register for the Ocean text service, please enter your mobile number:

.....

Q12 Do you use the internet?

Yes

No

GO TO Q16 →

You can download the Allpay app to your phone to pay your rent conveniently

Q13 Which device do you use the most to go on the internet?

Computer

Tablet / iPad

Laptop

Mobile or smartphone

Smart TV

Other (please state):

✓
Please tick only one

IF YOU USE A SMARTPHONE OR TABLET/IPAD PLEASE ANSWER Q14 AND Q15. IF NOT PLEASE GO TO Q18 →

Q14 Do you prefer to use apps or websites to access information?

Apps

Websites

Don't use smartphone or tablet

Q15 Do you use mobile data to access the internet?

3G

4G

Wi-Fi

No signal in my area

Don't use smartphone or tablet

NOW PLEASE GO TO Q18 →

Q16 Please tell us why you don't use the internet?

Cost

Don't want to

Don't know how to

Don't have equipment

Other (please state):

✓
Please tick all that apply

Q17 Is there anyone who could help you to use the internet?

Yes, my partner

Yes, child/children

Yes, a relative

Yes, a friend

No

✓
Please tick all that apply

Q18 Does anyone else in your household access the internet?

Yes

No

GO TO Q21 →

Q19 Who uses the internet?

Partner

Child

Other relative

Friend

Other (please state):

✓
Please tick all that apply

Q20 And does the household member use?

Computer

Tablet

Laptop

Smartphone


Other (please state):

✓
Please tick all that apply

Even if you don't use the internet currently, please answer the following questions about online services and social media. It will help us to provide better services in the future.

Q21 Do you use any of the following?


Facebook Twitter Instagram Whatsapp Skype
 Facetime YouTube LinkedIn None of the above

 Please tick all that apply

IF YOU DON'T USE SOCIAL MEDIA SITES PLEASE ANSWER Q22. IF YOU DO PLEASE MOVE TO Q23 →

Q22 Is there a reason why you don't use social media sites?

I don't know what they are I don't know how to I don't want to
 Other reasons (please state):

 Please tick all that apply

Q23 Have you used LiveChat on the Ocean website?

Yes No Not yet

Q24 Is there anything else you would like Ocean to provide online access to?

.....

Q25 If Ocean made more services available online, would you use them?

Yes No

Q26 If Ocean had an app, would you use it?

Yes No

Q27 Would you like to get more involved in giving feedback and making decisions at Ocean?

Yes No

LiveChat


You can get your questions answered live on our website by typing them to a Customer Service Advisor, without having to wait for the phone to be answered. Look for the LiveChat "We are here" banner anywhere at www.oceanhousing.com

You and your money - changes to benefits

The Government is changing the way people receive benefits. The benefits mentioned in Q28 below will all be paid in one single sum, monthly, in arrears. They will be paid direct into your bank account and you will have to set up an online account in order to claim the benefits. There will be no change if you are turning 61 or older within the next six months.

Q28 Do you or does anyone in your household receive any of the following benefits?

Housing Benefit Income Support Working Tax Credit
 Child Tax Credit Universal Credit
 Jobseekers Allowance (JSA) Employment and Support Allowance (ESA)

 Please tick all that apply

Q29 Do you have a bank account?

Yes No

Q30 Do you feel you need help with budgeting and managing your payments?

Yes No

You and your census info

We need to regularly check this information with you for a variety of reasons, including planning services to support you and complying with government requirements. All of the information will be kept securely and we will be able to best assist you if you complete this section fully.

Q31 Is your home? _____

Rented Leasehold Shared Ownership

IF YOUR HOME IS RENTED, PLEASE ANSWER Q32, IF NOT PLEASE MOVE TO Q33 →

Q32 Did you find your home through? _____

Homechoice Direct Let

Q33 Contact Details: _____

	Tenant 1	Tenant 2
Home phone		
Mobile phone		
Email address:		

Q34 Do we have your name and address complete and correct? _____

Please see the cover letter for details

	Tenant 1	Tenant 2
Yes	<input type="checkbox"/>	<input type="checkbox"/>
No, please write your correct name and address		

Q35

	Tenant 1	Tenant 2
Age		
Date of Birth	<input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>	<input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>

Q36 Are you? _____

	Tenant 1	Tenant 2
Female	<input type="checkbox"/>	<input type="checkbox"/>
Male	<input type="checkbox"/>	<input type="checkbox"/>

Q37 Do you have a disability or any health conditions?



	Tenant 1	Tenant 2
Physical / mobility disability	<input type="checkbox"/>	<input type="checkbox"/>
Visual disability	<input type="checkbox"/>	<input type="checkbox"/>
Hearing disability	<input type="checkbox"/>	<input type="checkbox"/>
Learning difficulties	<input type="checkbox"/>	<input type="checkbox"/>
Mental health condition	<input type="checkbox"/>	<input type="checkbox"/>
Dyslexia	<input type="checkbox"/>	<input type="checkbox"/>
Other (please state):	<input type="text"/>	<input type="text"/>

Q38 How would you describe your ethnic origin?

	Tenant 1	Tenant 2
White		
Cornish/English/Welsh/Scottish/Northern Irish/British	<input type="checkbox"/>	<input type="checkbox"/>
Irish	<input type="checkbox"/>	<input type="checkbox"/>
Gypsy or Irish Traveller	<input type="checkbox"/>	<input type="checkbox"/>
Other White background (please state):	<input type="text"/>	<input type="text"/>
Mixed / Multiple ethnic groups		
White and Black Caribbean	<input type="checkbox"/>	<input type="checkbox"/>
White and Black African	<input type="checkbox"/>	<input type="checkbox"/>
White and Asian	<input type="checkbox"/>	<input type="checkbox"/>
Other Mixed / Multiple Background (please state):	<input type="text"/>	<input type="text"/>
Asian / Asian British		
Indian	<input type="checkbox"/>	<input type="checkbox"/>
Pakistani	<input type="checkbox"/>	<input type="checkbox"/>
Bangladeshi	<input type="checkbox"/>	<input type="checkbox"/>
Chinese	<input type="checkbox"/>	<input type="checkbox"/>
Other Asian background (please state):	<input type="text"/>	<input type="text"/>
Black / African / Caribbean / Black British		
African	<input type="checkbox"/>	<input type="checkbox"/>
Caribbean	<input type="checkbox"/>	<input type="checkbox"/>
Other Black/African/Caribbean background (please state):	<input type="text"/>	<input type="text"/>
Other ethnic group		
Arab	<input type="checkbox"/>	<input type="checkbox"/>
Other (please state):	<input type="text"/>	<input type="text"/>
Prefer not to say	<input type="checkbox"/>	<input type="checkbox"/>

Q39

Please tell us your work status: _____

	Tenant 1	Tenant 2
Full-time work, 30 hours or more per week	<input type="checkbox"/>	<input type="checkbox"/>
Part-time work, fewer than 30 hours per week	<input type="checkbox"/>	<input type="checkbox"/>
Government training	<input type="checkbox"/>	<input type="checkbox"/>
Jobseeker	<input type="checkbox"/>	<input type="checkbox"/>
Retired	<input type="checkbox"/>	<input type="checkbox"/>
Full-time student	<input type="checkbox"/>	<input type="checkbox"/>
Adult not seeking work	<input type="checkbox"/>	<input type="checkbox"/>
Unable to work because of long term sickness or disability	<input type="checkbox"/>	<input type="checkbox"/>
Other (please state):	<input type="text"/>	<input type="text"/>

Q40

Do you consider yourself to be: _____

	Tenant 1	Tenant 2
Heterosexual or straight	<input type="checkbox"/>	<input type="checkbox"/>
Gay or lesbian	<input type="checkbox"/>	<input type="checkbox"/>
Bisexual	<input type="checkbox"/>	<input type="checkbox"/>
Other (please state):	<input type="text"/>	<input type="text"/>
Prefer not to say	<input type="checkbox"/>	<input type="checkbox"/>

Q41

What is your religion? _____

	Tenant 1	Tenant 2
No religion	<input type="checkbox"/>	<input type="checkbox"/>
Christian	<input type="checkbox"/>	<input type="checkbox"/>
Buddhist	<input type="checkbox"/>	<input type="checkbox"/>
Hindu	<input type="checkbox"/>	<input type="checkbox"/>
Jewish	<input type="checkbox"/>	<input type="checkbox"/>
Muslim	<input type="checkbox"/>	<input type="checkbox"/>
Sikh	<input type="checkbox"/>	<input type="checkbox"/>
Other (please state):	<input type="text"/>	<input type="text"/>
Prefer not to say	<input type="checkbox"/>	<input type="checkbox"/>

Q42 Please tell us your national insurance number: *This will be stored securely* _____

Tenant 1

Tenant 2

Q43 What is your weekly income? *This will be stored securely* _____

Tenant 1

Tenant 2

You and your home - forward planning

Q44 Are you interested in finding out more about any of the following options? _____

	Yes - Now	Yes - Later this year	Yes - Next year	No
Moving into the private rented sector	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Moving into a shared ownership home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Buying an additional share of your home if you are already living in a shared ownership home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Buying your rented home outright "The Right to Buy"	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Buying a home outright on the open market	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please state): <input type="text"/>				

Thank you very much for completing our survey.

Please return the questionnaire in the freepost envelope supplied.

If you don't have the envelope to hand, please post the questionnaire to

Freepost RSXH-GRAB-JRJR, PFA Research Ltd,
Tremough Innovation Centre, Cornwall, TR10 9TA.

You do not need a stamp.

www.oceanhousing.com



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