

The survey will ask you about your experience of the services working with you and your family. Some things you should know about the survey:

Should take no longer than 5 minutes

There are no wrong answers

You can get someone to help fill it out

You are not asked for your name. We won't know who you are.

Important

This means that we cannot contact you about anything you put in this survey.

What will we do with what you tell us

- We will use the results of the survey to help us find out what is working well and where things can be improved.
- At the end of the inspection we write a report and we will feedback to children and young people about what we found.

1.	Wher	re do you live most of the time?
	\bigcirc	With parent(s)
	\bigcirc	With other family member(s)
	\bigcirc	With foster carer(s)
	\bigcirc	Residential care or secure care
		Other

Views, Rights and Relationships

When we say 'your worker' we mean people who are employed to work with you.

Please answer these questions about the worker who gives you most of

	the	help you need.
	is th	is your:
	\bigcirc	Social worker
	\bigcirc	Support worker
	\bigcirc	Key worker (residential)
	\bigcirc	Teacher
	\bigcirc	Health worker
	\bigcirc	Outreach worker (such as WhoCares? Scotland, Barnardos etc)
	\bigcirc	Youth worker
	\bigcirc	Other
3.	l kno	w why my worker is involved with me and my family
	\bigcirc	Yes
	\bigcirc	No
	\bigcirc	Not sure
4.	My w	orker listens to my views and opinions about what matters to me
	\bigcirc	Yes
	\bigcirc	No
	\bigcirc	Not sure

5.	Can	you say more about your answer to question 4			
	Enter your answer				
6.	My w	orker spends time with me and gives me the help I need			
	\bigcirc	All of the time			
	\bigcirc	Most of the time			
	\bigcirc	Some of the time			
	\bigcirc	None of the time			
7.	l had	enough contact with my worker during Covid-19 lockdown			
	\bigcirc	All of the time			
	\bigcirc	Most of the time			
	\bigcirc	Some of the time			
	\bigcirc	None of the time			
	ese 1 get	next questions are about the support			
8.	I have	e someone who has explained my rights to me			
	\bigcirc	Yes			
	\bigcirc	No			
	\bigcirc	Not sure			

9.		the right help to make and keep loving and supportive relationships people who I care about
	\bigcirc	All of the time
	\bigcirc	Most of the time
	\bigcirc	Some of the time
	\bigcirc	None of the time
10.		e an adult I can trust to talk to about things that are important ne, or when I am not happy about something
	\bigcirc	Yes
	\bigcirc	No
	\bigcirc	Not sure
11.	l hav	e someone who can help me to express my views
	\bigcirc	Yes
		No
		Not sure
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Keeping me safe

12.	I feel	safe where I live now?
	\bigcirc	All of the time *(tick and move to question 14)
	\bigcirc	Most of the time *(please answer Question 13)
	\bigcirc	Some of the time *(please answer Question 13)
	\bigcirc	None of the time *(please answer Question 13)
13.	What	would need to change to help you to feel safer?
	Ent	er your answer
14.	I have	e an adult I can talk to if I don't feel safe
	\bigcirc	Yes
	\bigcirc	No
	\bigcirc	Not sure
15.	Durin	g Covid-19 lockdown I felt
	\bigcirc	More safe
	\bigcirc	Less safe
	\bigcirc	About the same
16.	Pleas	se tell us more to your answer for number 15

Finally, a few questions about this survey

17.	Was it easy to complete this survey?
	Not at all
	Not really
	Quite easy
	Very easy
18.	Please tell us what would make this survey better
	Enter your answer

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