





Survey for Parents and Kinship Carers





This survey will ask you about your experience of the services working with you and your family.

It should take no longer than five minutes to complete.

There are no wrong answers.

You can get someone to help fill it out.

It's confidential. You are not asked for your name.

## **Important**

This means that we cannot contact you about anything you put in the survey. If you have any concerns for anyone's safety, you must contact social work services in your local area or contact the police on 101. In an emergency, always dial 999.

#### 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 what could be improved about the care and support for children and young people. At the end of the inspection we publish a report about what we have found.

1.	Please	e tell us where your child(ren) lives most of the time.
	$\bigcirc$	With a parent(s)
	$\bigcirc$	With other family member(s)
	$\bigcirc$	With foster carer(s)
	$\bigcirc$	Residential care or secure care
	$\bigcirc$	Other

# Helping to Keep Your Child(ren) Safe

In some of the following statements we refer to 'workers'. We mean people who are employed to support you and your family.

2.	Work	ers responded quickly when concerns were first identified about my child(ren).
	$\bigcirc$	Yes
	$\bigcirc$	No
	$\bigcirc$	Not sure
3.		nild(ren) is safer because of the help and support they received workers?
	$\bigcirc$	Yes
	$\bigcirc$	No
	$\bigcirc$	Not sure
4.		our child(ren) had the right help to keep loving and supportive relationships people who they care about?
	$\bigcirc$	Yes
	$\bigcirc$	No
	$\bigcirc$	Not sure
5.	My cł	nild(ren) had enough contact with workers during COVID-19 lockdown.
	$\bigcirc$	Yes
	$\bigcirc$	No
	$\bigcirc$	Not sure

# Views, Rights and Relationships

7.		Workers communicated well and helped me to understand what needed to change to keep my child(ren) safe.			
	$\bigcirc$	Yes			
	$\bigcirc$	No			
	$\bigcirc$	Not sure			
8.		ers listened to me and took my views seriously when decisions were made lp keep my child(ren) safer.			
	$\bigcirc$	Yes			
	$\bigcirc$	No			
	$\bigcirc$	Not sure			
9.	I have	e had an opportunity to speak with an independent advocacy worker.			
	$\bigcirc$	Yes			
	$\bigcirc$	No			
	$\bigcirc$	Not sure			
10.	I have	e found the involvement of services helpful.			
	$\bigcirc$	Yes			
	$\bigcirc$	No			
	$\bigcirc$	Not sure			
11.	Pleas	e tell us which, if any services, you found helpful.			

12.	Please tell us which, if any, services you did not find helpful.
13.	Do you have any other views or comments you would like to share with the inspection team?
:/!	

# Finally, a few questions about this survey

14.	Was i	t easy to complete this survey?
	$\bigcirc$	Not at all
	$\bigcirc$	Not really
	$\bigcirc$	Quite easy
	$\bigcirc$	Very easy
15.	Please	e tell us what could make this survey better:

Thank you very much for taking the time to complete this survey.



### Headquart

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