

Joint inspection of children's services in Fife

Survey for children and young people
16+ age group



HAPPY TO TRANSLATE

The Care Inspectorate is inspecting services for children, young people and families in the area where you live. This includes the work of the people who work with you.



We want to hear from care experienced children and young people and those who need support and extra help to keep safe.

When we say 'care experienced', we mean children and young people currently or previously looked after and living with parents, with other family or friends, with foster carers, in residential care or receiving regular overnight short breaks.

The survey will ask you about how you have been feeling (some people call this your 'wellbeing') and your experience of the services working with you and your family. Some things you should know about the survey.... →

Should take no longer than **10 minutes**

There are **no wrong answers** or trick questions

You can **get someone to help** fill it out

Once completed return **in the envelope provided**

It is confidential. You are not asked for your name or any other information that may identify you. **Important:** This also means that we cannot contact you about anything you put in the survey. If you have any concerns for your own safety or for anyone else you must contact protection services in your area or Childline on 08001111. We have a duty to pass on concerns about safety of an individual.



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 in the area where you live. At the end of the inspection we write a report and produce a short video about what we found.

Prefer to talk to someone? If you would prefer to talk to someone please return the slip provided at the end or use the contact details. You could talk to a Young Inspection Volunteer.

YOUNG INSPECTION VOLUNTEERS

Young people with experience of care services aged 18-26 who help us with our inspections.



Mobile (text or leave message):
07976 864505

Email:
CYPinspection@careinspectorate.com

In the survey we refer to 'your worker', we mean people who are employed to work with you and your family. Who will you be referring to when you answer questions about 'your worker' in this questionnaire? (Please circle)

Social worker

Support worker

Health visitor

Teacher

Outreach worker

Youth worker

Other: (please give job title)

Circle **one answer** for each question and add comments where asked

1. Do you feel settled where you live now? By 'settled' we mean comfortable and cared for?

Not at all

Not really

Just about

Yes definitely

Comments:

2. What would need to change for you to feel completely settled?

3. Do you know why your worker is involved with you and your family?

Not at all

Not really

Yes but I want to know more

Yes definitely

4. Has anyone talked to you about the help you need to make things better?

Not at all

Not really

Yes but I want to know more

Yes definitely

5. Is your worker there for you when you need them?

Not at all

Not really

Some times

Yes always

6. Are the things you want included in your child's plan*?

Not at all

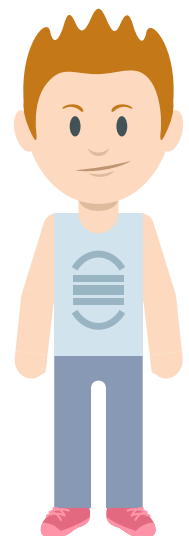
Not really

Some times

Yes always

I don't know what this is

* What is a 'child's plan'? This may have different names but it is usually a document which talks about what you need in different parts of your life. For example, this could mean extra support you need at school or with your health. The plan should say what help it is you or your family need, who will provide it and what it is hoped will happen as a result of this support, for example 'improved health'. Your plan will normally be agreed at a meeting where you would sit down with staff with different roles and responsibilities, for example - social worker, family support worker, pastoral teacher, nurse.



7. Have you been involved in agreeing your child's plan?	Not at all	Not really	Some things	Yes definitely
8. Are your views and opinions listened to by your worker?	Not at all	Not really	Some things	Yes always
9. Does your worker care about what happens to you?	Not at all	Not really	Sometimes	Yes always
10. Does your worker want the best for you?	Not at all	Not really	Sometimes	Yes always
11. Does your worker treat you with respect?	Not at all	Not really	Sometimes	Yes always
12. Do you feel you can trust your worker?	Not at all	Not really	Sometimes	Yes always
13. Are you in the right place to get the care and help you need?	Not at all	Not really	Yes, for some things	Yes definitely
14. Are things getting better for you?	Not at all	Not really	Yes, for some things	Yes definitely
15. Does the help you receive support and encourage your connection and relationship with your family?	Not at all	Not really	A little but I need more	Yes as much as I need
16. Do you get the help you need with your schoolwork?	Not at all	Not really	Yes, for some things	Yes definitely
17. Do you have an adult you trust and can talk to about things important to you?	Not at all	Not really	Yes, for some things	Yes definitely
18. Do you know if you are not happy about something, you can get help to ask for changes or make a complaint?	Not I didn't	No but I would like to know how to	Yes, i do know	Yes and I feel able to ask for changes

19. Have you had an opportunity to speak with an independent advocacy worker?	No	No but I would like to	Yes, but not used it	Yes and I have done this	I don't know what this is
---	----	------------------------	----------------------	--------------------------	---------------------------

What is independent advocacy? The purpose of advocacy is to support and empower young people to be able to express their views and assist them in making informed decisions on matters. When we describe it as 'independent' we mean that the person providing advocacy is not involved in the services provided to you. In your area independent advocacy is available from Who Cares? Scotland on 0141 226 4441 (www.whocarescotland.org)



20. Do you get enough help to make decisions about your future?	Not at all	Not really	Some but I need more	Yes as much as I need
21. Do you get the help with managing your money?	Not at all	Not really	Some but I need more	Yes as much as I need
22. Do you get enough help with keeping healthy?	Not at all	Not really	Some but I need more	Yes as much as I need
23. Do you get enough help with learning household skills like cleaning and cooking meals?	Not at all	Not really	Some but I need more	Yes as much as I need
24. Do you get enough help with: housing or accommodation?	Not at all	Not really	Some but I need more	Yes as much as I need

The following questions are only relevant where you or others have been concerned about your safety. Circle one answer for each question:

25. Do you feel safe where you live now?	Not at all	Not really	Just about	Yes always
--	------------	------------	------------	------------

26. What would need to change for you to feel completely safe?

Comments:

27. Do you know what to do if you don't feel safe?

Not at all	Not really	Sometimes not always	Yes definitely
------------	------------	----------------------	----------------

Next, a few questions about the services provided to you

28. Have you been asked for your views on services?

Not at all	Not really	A few times	Yes a lot
------------	------------	-------------	-----------

29. My views have been used to make changes.

Not at all	Not really	A few times	Yes a lot
------------	------------	-------------	-----------

Here are some statements or descriptions about how you might have been feeling or thinking about things over the past couple of weeks¹. For each one, please circle the number which best describes your thoughts and feelings; there are no right or wrong answers.

<i>Statements</i>	<i>Never</i>	<i>Not much of the time</i>	<i>Some of the time</i>	<i>Quite a lot of time</i>	<i>All of the time</i>
30. I've been feeling optimistic about the future.	1	2	3	4	5
31. I've been feeling useful.	1	2	3	4	5
32. I've been feeling relaxed.	1	2	3	4	5
33. I've been feeling interested in other people.	1	2	3	4	5
34. I've had energy to spare.	1	2	3	4	5
35. I've been dealing with problems well.	1	2	3	4	5
36. I've been thinking clearly.	1	2	3	4	5
37. I've been feeling good about myself.	1	2	3	4	5
38. I've been feeling close to other people.	1	2	3	4	5

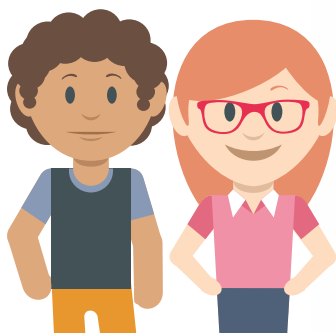
¹ Statements 31 to 44 from the Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS)

<i>Statements</i>	<i>Never</i>	<i>Not much of the time</i>	<i>Some of the time</i>	<i>Quite a lot of time</i>	<i>All of the time</i>
39. I've been feeling confident.	1	2	3	4	5
40. I've been able to make up my own mind about things.	1	2	3	4	5
41. I've been feeling loved.	1	2	3	4	5
42. I've been interested in new things.	1	2	3	4	5
43. I've been feeling cheerful.	1	2	3	4	5

Finally, a few questions about this survey

44. Was it easy to complete this survey?	Not at all	Not really	Quite easy	Very easy
45. Was the information you were given about the survey useful?	Not at all	Not really	Quite useful	Very useful
46. Do you have anything to say that would make the survey better?	No	Yes		

Comments:



”

Thank you very much for taking the time to complete this questionnaire. If you want to find out more about what we have been doing during the inspection or if you want to hear what we have found please go online at www.careinspectorate.com

When you have finished, please put this form in the stamped addressed envelope and send it back through the post.

“

Reply slip

Would you rather talk with a member of the inspection team?

If you have not completed the survey and would rather arrange a time to talk to someone involved in the inspection please complete this slip and return in the enclosed envelope by 16 November 2018.

(We may need your name for contact purposes but the record of any discussion will not include any identifying details.)

Best way to contact you to arrange: (you can suggest more than 1)

Method	Contact details
Phone	
Text	
Email	
Post	
Other	

Competition

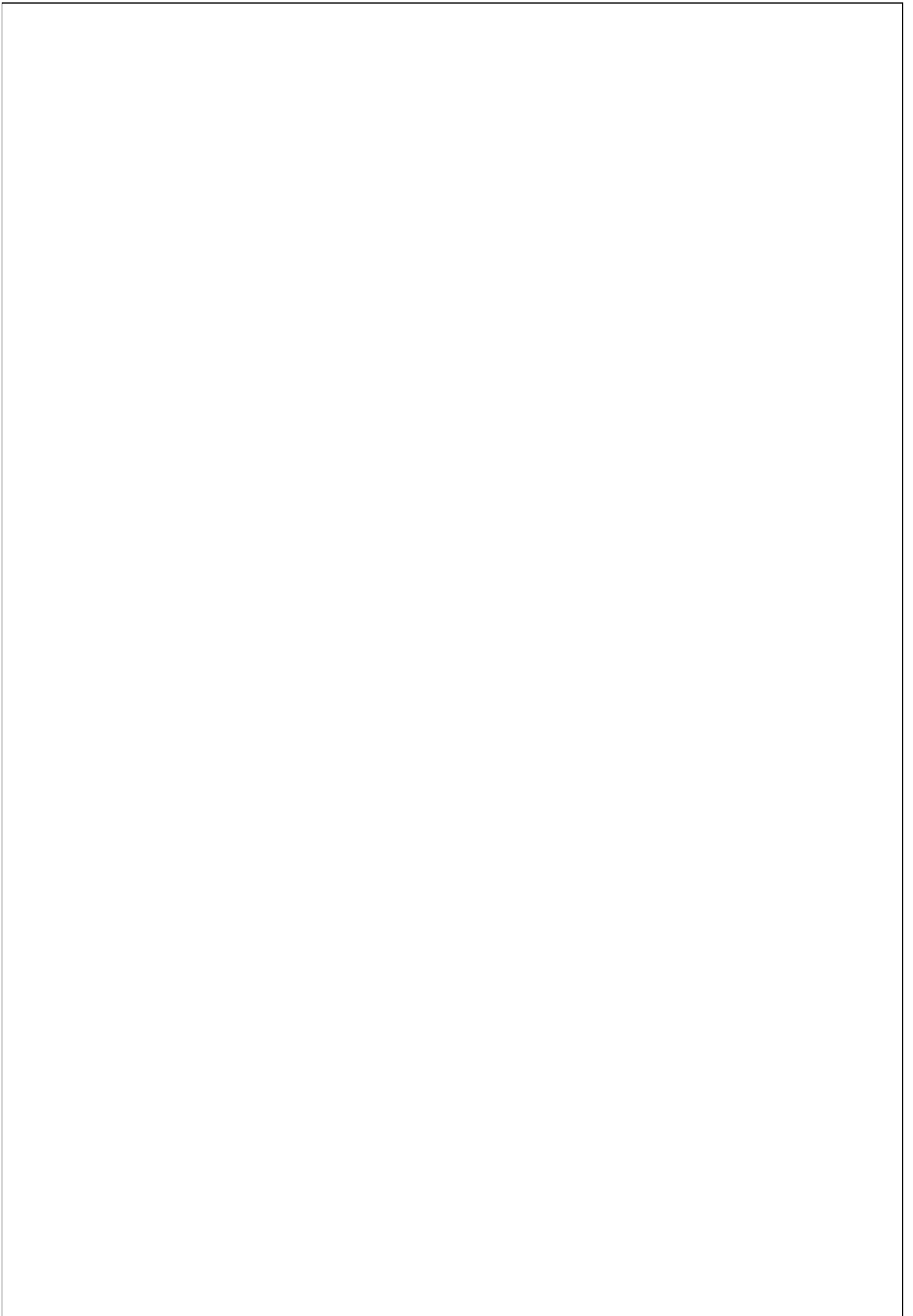
WIN A £50 GIFT VOUCHER

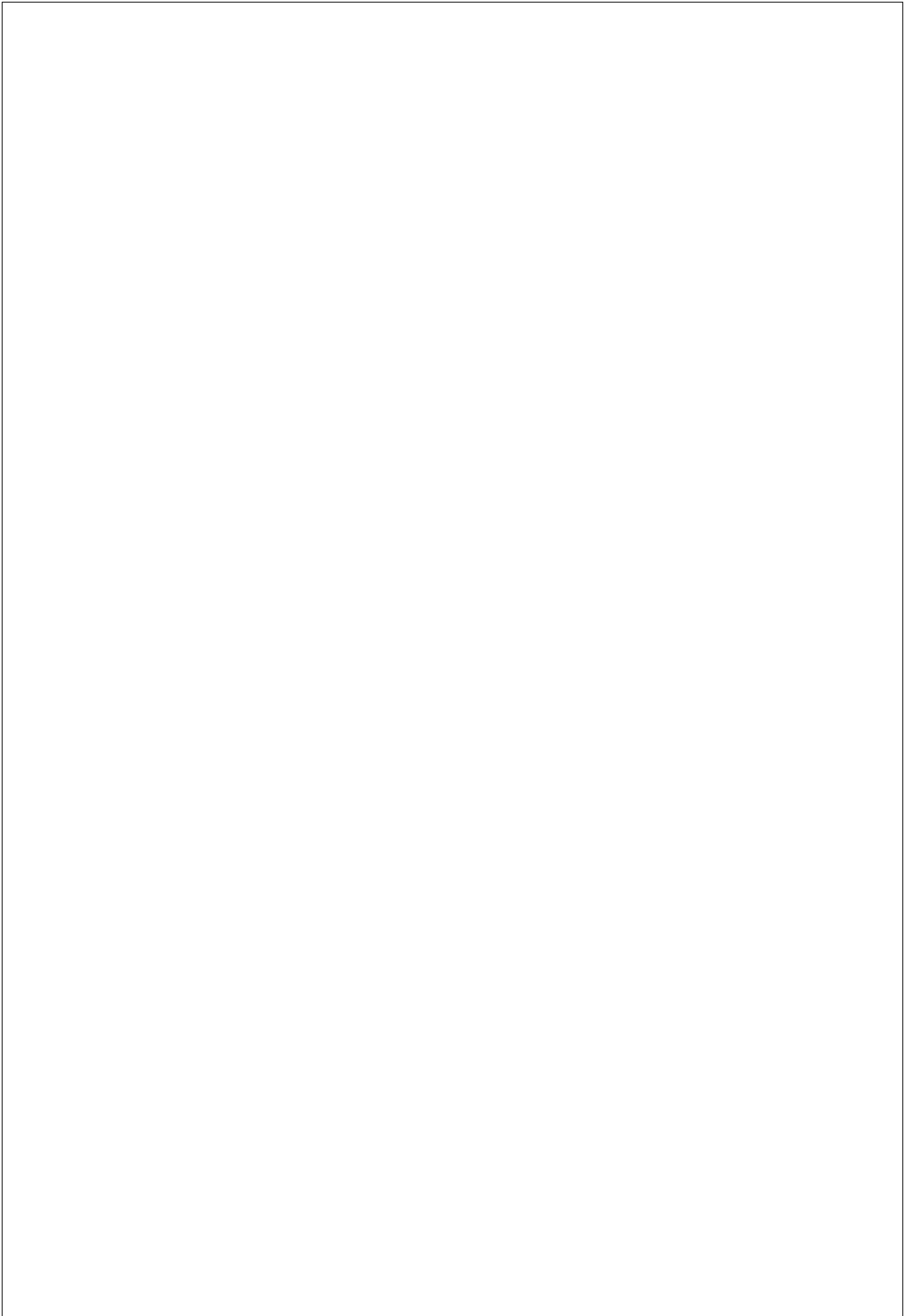
Use the space on the opposite page to design the front cover of our published inspection report. You can design anything that relates to the area where you live.

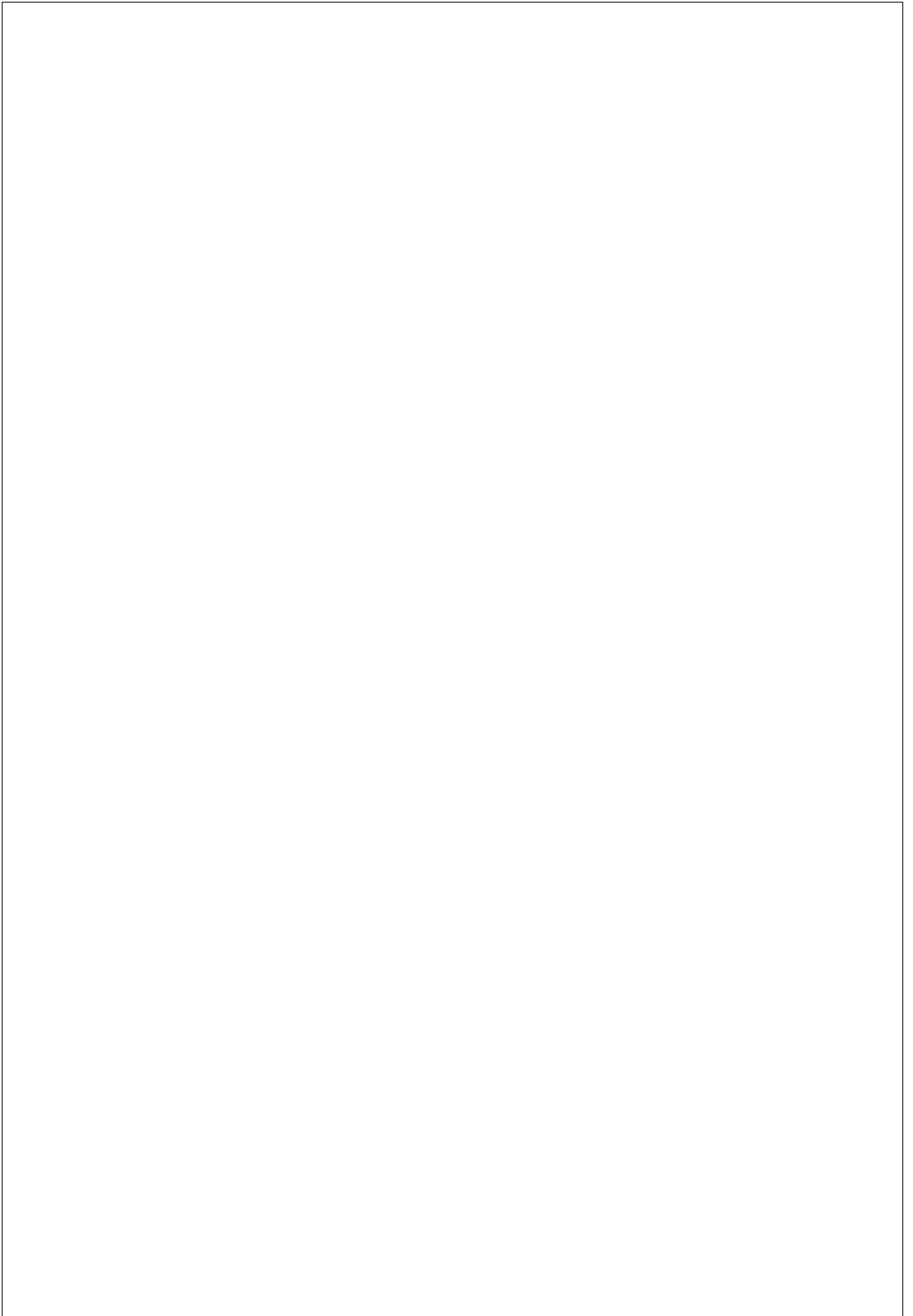
If you choose to enter our competition. This means that you will need to give your contact details. We will only use these for the purposes of this competition. Your survey response remains confidential.

Return your entry in the addressed envelope.

Name		Contact details for competition only	
------	--	--------------------------------------	--





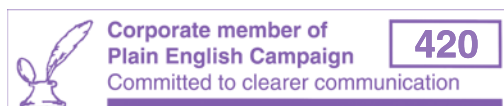


Headquarters

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY
Tel: 01382 207100
Fax: 01382 207289

Website: www.careinspectorate.com

This publication is available in alternative formats on request.



© Care Inspectorate 2018 | Published by: Communications | COMMS-0718-244

 @careinspect  careinspectorate

Illustrations designed by © Freepik

