

“
Joint inspection of services
for children and young people
subject to compulsory
supervision orders and living
at home with their parents
”

Survey for children and young people



This survey is anonymous and is for children and young people subject to compulsory supervision orders and living at home with their parents.

Should take no longer than *ten minutes* to complete

There are *no wrong answers*

You can *get someone to help* fill it out

It is confidential. You are not asked for your name.

Important

We cannot contact you about anything you put in this survey. If you have any concerns for your own safety or for anyone else, please talk to an adult you trust or call Childline (08001111)

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 write a report and we will feedback to children and young people about what we have found.

Q1. Tell us about who is filling in this form (tick one)

- ☐ I am a child or young person
- ☐ I am a worker, parent (I am helping the child or young person to complete the form).



Questions about the people supporting you and your family - These first questions are about the workers helping you and your family (there are questions about family later in the survey).

2. Who gives you most of the help you need
(this should be someone who is not a family member)

- ☐ Social worker
- ☐ Family support worker
- ☐ Teacher
- ☐ Youth worker
- ☐ Health worker
- ☐ Other

3. I know why my worker is working with me and my family

- ☐ Agree
- ☐ Disagree
- ☐ Not sure
- ☐ I don't have a 'worker'

Questions about your rights

*If you are unsure what we mean by your rights please ask whoever is helping you with this survey - you can also watch one of these short videos:

under 8 - <https://www.youtube.com/watch?v=fS-fdWNfgOo> ;

under 12 - <https://www.youtube.com/watch?v=ZMz5Esm9tRk> ;

older children and young people - <https://www.youtube.com/watch?v=5KQGz-toMnk> .

This question asks you how your rights have been respected by the people working with you and your family.

4. In the last couple of years people working with me have:

	Always	Never	Sometimes	Most of the time	Prefer not to say
Explained what my rights are	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Listened to me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Explained decisions to me in a way I understand	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Helped me to say what I want	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Treated me with respect	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Included me in making plans for my support	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Included me in any meetings where decisions are made which affect me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Asked me what help I need for things to get better	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Your wellbeing

When we speak about wellbeing, we mean how you are safe; healthy; achieving; nurtured; active; respected; responsible; and included.

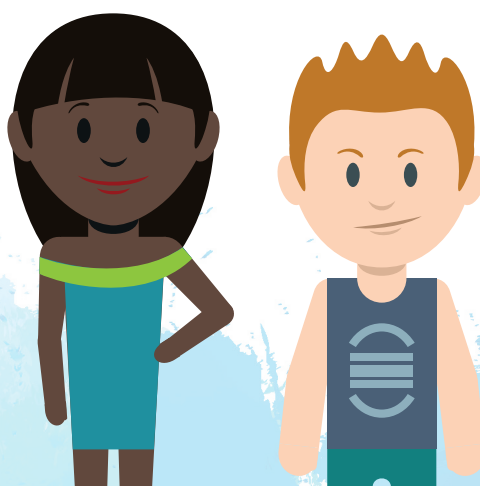
These questions are about the help you have needed and received to support your wellbeing.

5. In the last couple of years have you needed help to feel safer?

- ☐ Yes
- ☐ No
- ☐ Sometimes
- ☐ I don't want to answer the question

6. Where do you feel safe:

	I feel safe all the time	I feel safe most of the time	I feel safe some of the time	I hardly ever feel safe	I don't want to say
At home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In the community where I live	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
At school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Online (internet, social media)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



7. I have an adult I can talk to if I don't feel safe.

- ☐ Yes
- ☐ No
- ☐ I don't want to answer this question

8. Have you received the help you needed in the last couple of years to help improve your:

	I received all the help I needed	I received some help	I have not received any of the help I needed	I did not need any help with this	I don't want to say
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Physical health

(your body and how well it works, like having strong muscles, good eyesight, and enough energy to play)

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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Mental health

(how you feel and think, including your emotions, how you handle stress, and how you get along with others)

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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Engagement at school

(how much you get involved and enjoy school)

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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Physical activity

(play, sport, exercise)

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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Relationships with family

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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Relationships with peers

(including friends)

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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9. Due to the support you have received or are receiving how hopeful are you for the future.

- ☐ Very hopeful
- ☐ Somewhat hopeful
- ☐ Not hopeful at all
- ☐ I don't want to say

”

“

The people who are important to you

It can be difficult to think about the people you care about and answer questions about the relationship you have with them.

10. Do you want to answer a question about the people you care about?

☐

Yes

☐

No (if you answer No, please go to question 12)



Question about the people who are important to you

Some children and young people cannot always be in touch, as much as they want to, with the people they care about - sometimes they need help from others to keep in touch. For example, social workers can take children to go and spend time with their brother or sister, or arrange for phone calls or letters to be sent to grandparents or aunts and uncles.

The following question is asking whether you needed and received help like this.

11. I get the right help to make and keep loving and supporting relationships with the following people I care about.

	Agree	Disagree	Neutral	I don't need help with this	I don't want to say
Parent	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Carer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Grand parent	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Brother	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sister	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other family	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Friend	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other trusted adult	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Any final comments - Did you want to say more?

This is your opportunity to say more if you want to.

12. Do you want to say more following on from the questions you have answered in this survey

☐

Yes

☐

No (if you answer No please go to question 13)

13. Please add your comments below

This survey - These last questions are about completing this survey. We will use this feedback to improve future surveys and we are very grateful for your comments

14. On a scale of 1-5 (1 being not very easy at all and 5 being very easy) - how easy was it to complete this survey.

☐ 1

☐ 2

☐ 3

☐ 4

☐ 5

15. How do you think we could improve this survey? (comment below)



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