

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

Survey for parents



This survey is anonymous and is for parents of children and young people subject to compulsory supervision orders and living at home with their parents. You will be offered help from someone you already know to fill in this survey, this may be a worker, friend, or advocate, it is up to you.

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

It should take no longer than ten minutes to complete.

There are no wrong answers.

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 write a report about what we have found. When we talk about what parents have told us in these reports, this includes what we have heard from surveys like this one.

1. Who is completing this survey?

☐

I am a parent

☐

I am a worker and I am helping the parent to complete the form.



Your general views on the support you receive – there is an opportunity to make comments about specific services in later questions.

2. Overall, the staff working with me and my family...(tick all that apply)

- ☐ Try to improve things for me or my family
- ☐ Support me and my family well
- ☐ Responded quickly when concerns were first identified about my child(ren)
- ☐ Spoke clearly to me
- ☐ Helped me to understand what needed to change to keep my child(ren) safe
- ☐ Know me and my family well
- ☐ I get on well with them
- ☐ They have the time they need to support my family
- ☐ They are honest with me and my family
- ☐ Not sure
- ☐ None of the above.

”

Listening to parents

3. I know why staff are involved with me or my family.

- ☐ Strongly agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly disagree
- ☐ Not sure

4. I understand why decisions have been made about me or my family.

- ☐ Strongly agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly disagree
- ☐ Not sure

5. In what ways have you been listened to and supported to take part in planning and decision making: (tick all that apply)

- ☐ I am involved in meetings where we talk about plans for my child(ren)
- ☐ I have been listened to and my views taken seriously
- ☐ I have been kept informed by workers
- ☐ I know how I can raise concerns about the support we receive
- ☐ I know how to raise concerns for my family
- ☐ When I have raised concerns these have been acted upon
- ☐ I have had an opportunity to meet an independent advocate
- ☐ I have been asked for my views about the services who support my family
- ☐ I know what happens with the feedback I have given services
- ☐ Not sure
- ☐ None of the above.

What has changed as a result of the support received

6. My child(ren) has had the right help to keep loving and supportive relationships with people who they care about?

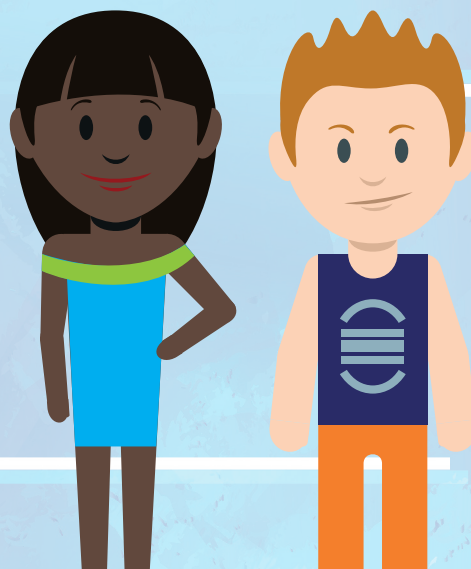
- ☐ Strongly agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly disagree
- ☐ Not sure

7. My child(ren) is safer because of the help and support they received from workers.

- ☐ Strongly agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly disagree
- ☐ Not sure

8. The help my child(ren) received has made their life/lives better.

- ☐ Strongly agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly disagree
- ☐ Not sure



9. The help and support we have received has made our lives better

- ☐ Strongly agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly disagree
- ☐ Not sure

10. Without naming specific workers, please tell us which, if any services, you found helpful (Please briefly describe what made them helpful)?

11. Without naming specific workers, please tell us which, if any, services you did not find helpful (Please briefly describe what made them unhelpful)?

Any other comments

12. Do you want to say more about your experience of the services working with you and your family?

☐ Yes

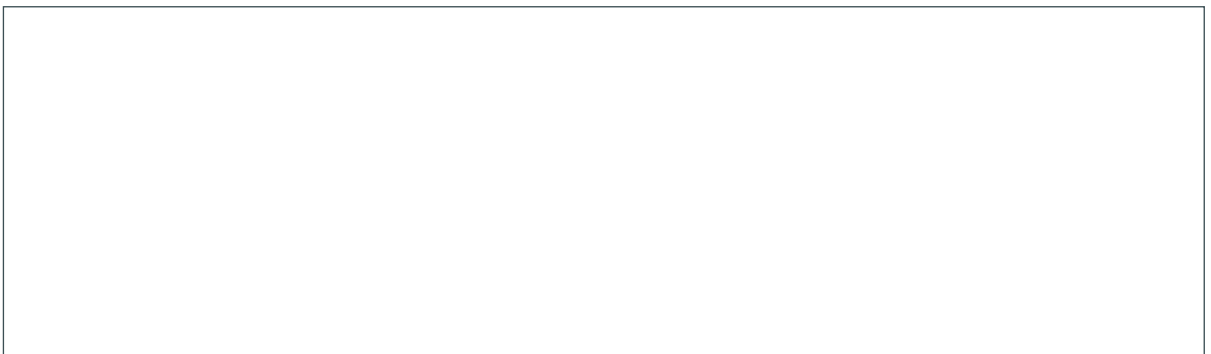
☐ No

Please describe your experiences

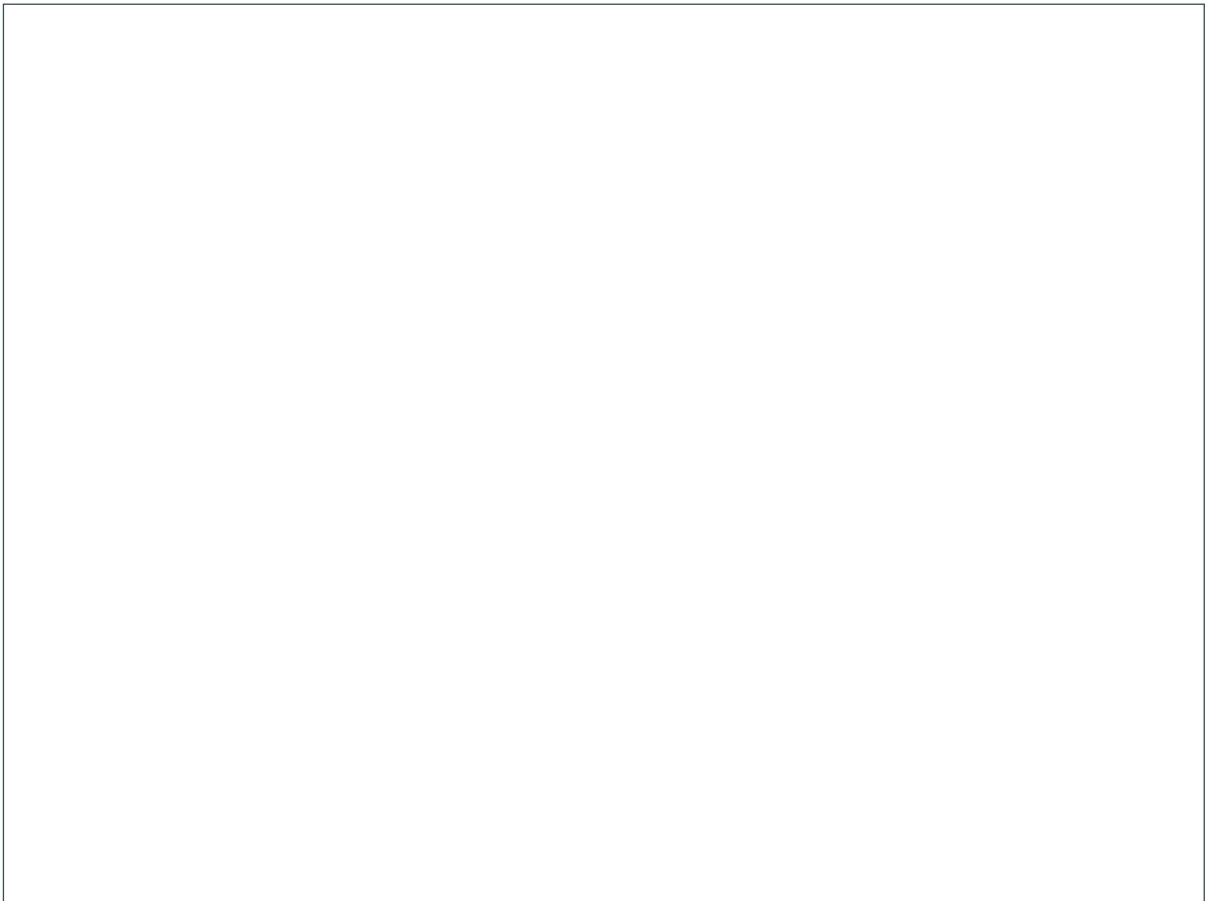
13 Did you need help to complete this survey?

A large, empty rectangular box with a thin black border, intended for the respondent to provide an answer to question 13.

14. What kind of help did you get?

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15. Please tell us what could make this survey better?

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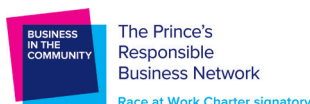


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