

## HAVE YOUR SAY

How often do YOU get asked for your opinions about things that matter to YOU?

Always  Most of the time  Sometimes  Never

Do adults involve you in decisions when changes are going to happen in your life?

Yes  No

Do you know how to make a complaint?

Yes  No

Do you know how to get an advocate if you need one?

Yes  No

Do you know how you can get involved with your Children in Care Council (VMC)?

Yes  No

How much difference does the Children in Care Council (VMC) make to what happens for children in care in your area?

None  A little  Quite a bit  A lot  I don't know

Are you aware of the MOMO Advocacy system?

Yes  No

If yes, were you given any feedback?

Yes  No

Is there any way that your council having less money these days has actually affected you personally?

Yes  No

If yes, please explain:

.....  
 .....  
 .....

Is there anything that you think Northumberland County Council should improve for children and young people this year?

.....  
 .....



**Northumberland**  
 Northumberland County Council

**WHAT DO YOU THINK?**



To receive your £10 voucher the questionnaire must be **fully** completed and we need your name and address added below:



Name: .....

Address: .....

.....

Date: .....

**THANK YOU**  
**FOR COMPLETING THIS SURVEY,**  
**YOUR VIEWS ARE VERY IMPORTANT**

## YOUR VIEWS COUNT

Your views about your care experiences are important and help improve all the services you receive; whether it's about your worker, carer, school or placement.

Please take the time to complete the following questionnaire, return it in the FREEPOST envelope provided and for completed surveys a £10 voucher will be sent to you in the post.



If you would prefer to do this survey online please enter the following into your address bar:  
<https://www.surveymonkey.com/s/VMCSurvey2016>



**PLEASE TICK YOUR ANSWERS AND**

**WRITE YOUR COMMENTS IN THE SPACES SUPPLIED:**



### DO YOU LIVE IN?

A residential home  Supported accommodation  With parents   
 With a foster carer  Own accommodation  Other

### KEEPING SAFE

Do you feel safe at school or college? Yes  No

Do you feel safe where you live? Yes  No

Who would you go to for help if you needed support?  
 Social Worker  Advocate  Independent Reviewing Officer (IRO)   
 Support worker  Teacher  Friend  Family  Carer  Other

Have you ever been bullied? Yes  No

If yes, in what way?  
 On line  Physical  Phone   
 Name calling  Emotional  Other ways

### EDUCATION

How well do you think you are coping in school/college?  
 Very well  Well  OK  Not well

Do you get enough help at school/college? Yes  No

Do you know your designated teacher in school? Yes  No   
 I don't know what a designated teacher is

Do you have access to a PC? Yes  No

If you will soon be school leaving age, what kind of help and support are you getting to help you prepare for the future?  
 .....

### WHERE YOU LIVE

How happy are you with the care you are getting at the moment?  
 Very happy  Quite happy  It is OK  Not happy

Do you understand why you live where you are? Yes  No

When your worker visits you, do they talk to you on your own, without anyone listening? Yes  No

Are you aware that personal info is kept private? Yes  No

Do you know what a care plan is? Yes  No

If yes, do you know what is in your care plan? Yes  No

Do you read your reports & discuss the contents before your review? Yes  No

Is your review in the right setting? Yes  No

Do you have a say in what is in your care plan? Yes  No

Do you know what an Independent Reviewing Officer (IRO) is? Yes  No

Do you know who your IRO is? Yes  No

Can you get in touch with your IRO if you need to? Yes  No  I don't know

Do you get to speak to your IRO before your meetings? Yes  No

Does your IRO help improve things for you? Yes  No

### HOME

Do you think the place you are living in now is the right place for you? Yes  No

The last time you moved to live in a new placement, do you think this move was right for you? Yes  No

Were you involved in the decision to move placement? Yes  No

Were you given any information about your new placement before you moved there? (e.g. Foster carer profile or handbook) Yes  No

Did you visit the placement before you moved there? Yes  No

Do you have any brothers or sisters who are in care now? Yes  No

If yes, do you all live in the same placement? Yes  No

Are you happy about this? Yes  No

And finally, what did you think of this questionnaire?  
 Just right  Too short  Too long

Any other comments:  
 .....  
 .....  
 .....  
 .....  
 .....