Sefton Families First Partnership

Sefton Families First Partnership Survey 13-18 and 18+





Our Survey

We want to work with you to improve services in Sefton. Your answers will help shape the Families First Partnership (FFP) so that support is easier to access, more joined-up, and better meets your needs.

Section 1: Tell Us About You

How Old Are You?

] 13-15 Years Old

) 16-18 Years Old

19-25 Years Old

] 26+ Years Old





Are you:



A Young Person



- An SEND Parent/Carer
- Other (please specify)

Have you or your family been involved with any of the following services in the last 2 years?

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Youth Services

Family Hubs

- -] None



Special Educational Needs and Disabilities Services

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- Social Care
- School Nurse
- Change Grow Live
- CAMHS (Child &
 - Adolescent
 - Mental Health
 - Services)

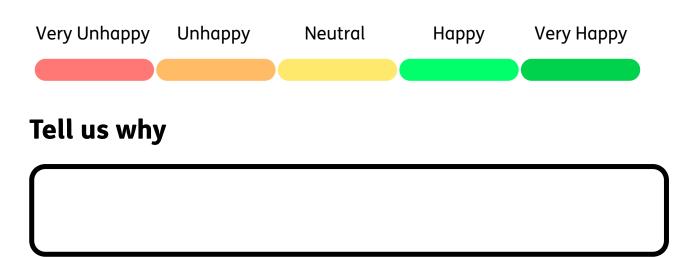






Section 2: What Works Well

How happy are you with the support available in Sefton? Circle one from 1 being very unhappy and 5 being very happy



Do you feel listened to by professionals? Circle one from 1 being never and 5 being always

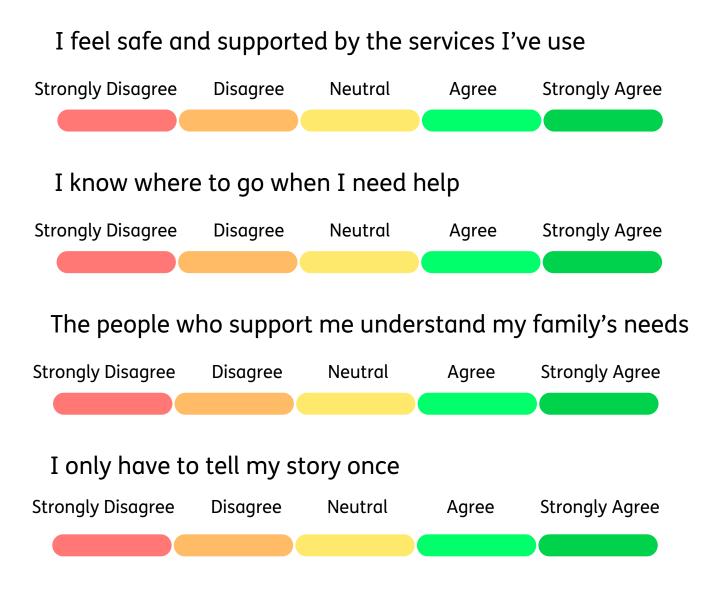
Very Unhappy	Unhappy	Neutral	Нарру	Very Happy	
Tell us why	y				
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Sefton Families

First Partnership



To what extent do you agree with the following statements? (Rate each from 1 = Strongly disagree to 5 = Strongly agree)







Section 4: What Could Be Better?

What would you most like to improve about current services? (Rank these 1-6, 1 being most important to you)



Getting Help Earlier



Having One Main Contact Person





...

- More Support For Parents/Carers
- More Support For Young People
- Easier To Find Where Help Is Available

Other (please specify)





Section 5: Looking Ahead

What would make it easier for you to get help when you need it? Tick all that apply



Single Place To Ask For Help



Quicker Response Times



More Support In Schools



More Support In The Community



Other (please specify)





How would you like to be involved in shaping services? (Tick as many as you like)



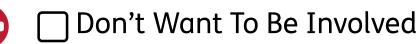
Surveys



- Focus Groups/Workshops
- Youth/Parent Panels



Creative Activities e.g. art, video



Other (please specify)





How would you like to see the results of this survey shared? (Tick as many as you like)



- Summary On Council Website
- 🗧 🗌 Animated Video



Newsletter/Email



Community Event



- Don't Want To See Results
- Other (please specify)





Final Thoughts

Is there anything else you'd like to tell us about your experience or ideas for change?

