***Appendix 1***

**Early help assessment for**

*(Duplicate forms can be found in the appendices for additional children.)*

**Section One: What is going well?**

**What does the child/young person think is going well (with reasons)?** *(or what might your unborn child say?)*

**At home:** *(consider* *home environment, condition, area, shared bedroom, privacy, outside space, area)*

|  |
| --- |
|       |

**Family relationships and parenting:** *(consider siblings, family rules, parents, extended family)*

|  |
| --- |
|       |

**Friendships:** *(consider activities, clubs/groups, who, where, frequency)*

|  |
| --- |
|       |

**In school / setting / training / work:** *(consider engagement, aspirations, enjoyment, motivation)*

|  |
| --- |
|       |

**Health/development (Including mental and emotional health):** *(consider fitness, diet, happiness, wellness,resilience, access to services; hygiene)*

|  |
| --- |
|       |

**Other:** *(consider family background and ethnicity, diversity and cultural considerations)*

|  |
| --- |
|       |

**Early help assessment for**

*(Duplicate forms can be found in the appendices for additional children.)*

**What do mothers/fathers/carers think is going well (with reasons)?**

**At home:** *(consider security, comfort, space, condition)*

|  |
| --- |
|       |

**Family relationships and parenting:** *(consider communication, caring, engaging, warmth, trust, disagreement/conflict)*

|  |
| --- |
|       |

**Friendships:** *(consider positive influences, role models, behaviour)*

|  |
| --- |
|       |

**In school setting/training/work:** *(consider attendance, attainment, engagement, enjoyment, attitude, home/school communication)*

|  |
| --- |
|       |

**Health/development (Including mental and emotional health):** *(consider stability, medical conditions/diagnoses, emotional wellbeing, resilience, self-care, mood)*

|  |
| --- |
|       |

**Other:** *(consider family background and ethnicity, diversity and cultural considerations)*

|  |
| --- |
|       |

**Early help assessment for**

*(Duplicate forms can be found in the appendices for additional children.)*

**What does the person co-ordinating the assessment think is going well (with reasons)?**

**At home:** *(consider atmosphere, suitability, tenancy)*

|  |
| --- |
|       |

**Family relationships and parenting:** *(consider emotional warmth, responsiveness, boundaries)*

|  |
| --- |
|       |

**Friendships:** *(consider appropriateness, peer group, influence)*

|  |
| --- |
|       |

**In school / setting / training / work:** *(consider attendance, attainment, behaviour, relationships, aspirations)*

|  |
| --- |
|       |

**Health/development (Including mental and emotional health**): *(consider engagement with services, management of medical conditions)*

|  |
| --- |
|       |

**Other:** *(family background and ethnicity, diversity and cultural considerations, also community resources, places of worship, transport, crime/ASB)*

|  |
| --- |
|       |

**Early help assessment for**

*(Duplicate forms can be found in the appendices for additional children.)*

**Section Two: What is not going so well?**

**What does the child/young person think is not going well (with reasons)?** *(or what might your unborn child say?)*

**At home:** *(consider* *home environment, condition, area, shared bedroom, privacy, outside space, area)*

|  |
| --- |
|       |

**Family relationships and parenting:** *(consider siblings, family rules, parents, extended family)*

|  |
| --- |
|       |

**Friendships:** *(consider activities, clubs/groups, who, where, frequency)*

|  |
| --- |
|       |

**In school / setting / training / work:** *(consider engagement, aspirations, enjoyment, motivation)*

|  |
| --- |
|       |

**Health/development (Including mental and emotional health):** *(consider fitness, diet, happiness, wellness,resilience, access to services; hygiene)*

|  |
| --- |
|       |

**Other:** *(consider family background and ethnicity, diversity and cultural considerations)*

|  |
| --- |
|       |

**What is the risk if things don’t improve?** *(what might your life look like if things stay the same?)*

|  |
| --- |
|       |

**Early help assessment for**

*(Duplicate forms can be found in the appendices for additional children.)*

**What do mothers/fathers/carers think is not going well (with reasons)?**

**At home:** *(consider security, comfort, space, condition)*

|  |
| --- |
|       |

**Family relationships and parenting:** *(consider communication, caring, engaging, warmth, trust, disagreement/conflict)*

|  |
| --- |
|       |

**Friendships:** *(consider positive influences, role models, behaviour)*

|  |
| --- |
|       |

**In school setting/training/work:** *(consider attendance, attainment, engagement, enjoyment, attitude, home/school communication)*

|  |
| --- |
|       |

**Health/development (Including mental and emotional health):** *(consider stability, medical conditions/diagnoses, emotional wellbeing, resilience, self-care, mood)*

|  |
| --- |
|       |

**Other:** *(consider family background and ethnicity, diversity and cultural considerations)*

|  |
| --- |
|       |

**What is the risk if things don’t improve?** *(what are you worried might happen?)*

|  |
| --- |
|       |

**Early help assessment for**

*(Duplicate forms can be found in the appendices for additional children.)*

**What does the person co-ordinating the assessment think is not going well (with reasons)?**

**At home:** *(consider atmosphere, suitability, tenancy)*

|  |
| --- |
|       |

**Family relationships and parenting:** *(consider emotional warmth, responsiveness, boundaries)*

|  |
| --- |
|       |

**Friendships:** *(consider appropriateness, peer group, influence)*

|  |
| --- |
|       |

**In school / setting / training / work:** *(consider attendance, attainment, behaviour, relationships, aspirations)*

|  |
| --- |
|       |

**Health/development (Including mental and emotional health**): *(consider engagement with services, management of medical conditions)*

|  |
| --- |
|       |

**Other:** *(family background and ethnicity, diversity and cultural considerations, also community resources, places of worship, transport, crime/ASB)*

|  |
| --- |
|       |

**What is the risk if things don’t improve?** *(consider short, medium and long term impact/outcomes for the young person)*

|  |
| --- |
|       |

**Early help assessment for**

*(Duplicate forms can be found in the appendices for additional children.)*

**Section Five: Family summary**

Please tick all the areas of need identified, and then rank them in order of the 3 highest priorities
(1 being the highest priority) that need to be addressed to improve the unborn baby’s/child’s/young person’s current situation. Consider the significance of points of agreement and disagreement.

|  |  |  |  |
| --- | --- | --- | --- |
| **Need** | **Child**  | **Parent** | **Assessor** |
| Acrimonious relationship between parents/carers or other members of the household/family |       |       |       |
| Alcohol misuse[Audit C Screening Tool](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/684826/Alcohol_use_disorders_identification_test_for_consumption__AUDIT_C_.pdf)[Drink Think Tool](http://www.bathnes.gov.uk/sites/default/files/siteimages/drink_think_tool.pdf) |       |       |       |
| Anti-social behaviour (perpetrator) |       |       |       |
| Anti-social behaviour (victim) |       |       |       |
| Bereavement |       |       |       |
| Care Leaver - request for service |       |       |       |
| Care leaver - request to access records |       |       |       |
| Child Sexual Exploitation (risk of)Please attach [SERAF](http://www.bathnes.gov.uk/sites/default/files/sitedocuments/Children-and-Young-People/ChildProtection/cse_seraf_risk_assessment_3may_2016_final_docx.docx) (sexual exploitation risk assessment form) |       |       |       |
| Criminal behaviour / risk of offending (*please state whether adult or young person)* |       |       |       |
| Cyber-bullying |       |       |       |
| Disability (formally diagnosed) |       |       |       |
| Domestic abuse (perpetrator) *Please indicate if child to adult or adult to child or adult to adult* |       |       |       |
| Domestic abuse (victim) Please attach [DASH risk checklist](http://www.safelives.org.uk/sites/default/files/resources/Dash%20for%20IDVAs%20FINAL.pdf) |       |       |       |
| Education * not accessing education
* not meeting expected education outcomes

- risk of education breakdown |       |       |       |
| Exploitation e.g. criminal / county-lines / gangs |       |       |       |
| Fabricated or induced illness |       |       |       |
| Family breakdown / risk of |       |       |       |
| Female Genital Mutilation (FGM) |       |       |       |
| Financial Hardship / Debt |       |       |       |
| Gang involvement |       |       |       |
| Harmful Sexual Behaviour |       |       |       |
| Hate crime / discrimination |       |       |       |
| Home conditions (inadequate)  |       |       |       |
| Homelessness (young person) |       |       |       |
| Homelessness or risk of eviction (family)  |       |       |       |
| Honour based abuse / forced marriage |       |       |       |
| Hospital admission |       |       |       |
| Learning needs including learning disabilities/difficulties (EHC/SEN) or below age related expectations |       |       |       |
| Mental health issues / emotional well-being Concerns re attachment |       |       |       |
| Adult: Long term/complex |       |       |       |
| Adult: Short term/low mood or anxiety |       |       |       |
| Child: Difficulty regulating emotions |       |       |       |
| Missed appointments / immunisations |       |       |       |
| Missing young person |       |       |       |
| No recourse to public funds |       |       |       |
| Non-engagement or resistant to working with services |       |       |       |
| Not in education, employment or training (NEET) young people |       |       |       |
| Parenting capacity to meet needs of child(ren)/routines and boundaries |       |       |       |
| Physical health issues including limiting long term illness |       |       |       |
| Police involvement or numerous call-outs |       |       |       |
| Prison (Children affected by Parental Imprisonment (CAPI ) – parent / carer / family member has a custodial sentence or recently released) |       |       |       |
| Private fostering |       |       |       |
| Private fostering (overseas student) |       |       |       |
| Radicalisation / risk of[Prevent information](http://www.bathnes.gov.uk/services/neighbourhoods-and-community-safety/crime-prevention-and-community-safety/prevent) (**Please note you have a duty to refer**) |       |       |       |
| Self-Harm |       |       |       |
| Social isolation |       |       |       |
| Substance / drug misuse |       |       |       |
| Suicide (risk of) |       |       |       |
| Teenage pregnancy / risk of |       |       |       |
| Toxic Trio (domestic abuse, parental mental ill health & substance misuse)  |       |       |       |
| Trafficking and modern slavery |       |       |       |
| Worklessness |       |       |       |
| Young Carer |       |       |       |

*Please add in appendix 1 for any additional children being assessed.*

***Appendix 2***

**Early help assessment for**

*(Duplicate forms can be found in the appendices for additional children.)*

**Section Three: Information from others working with the unborn baby, child(ren), young person or family**

*We aspire that all children living in B&NES are safe, healthy, prepared for adult life and making a positive contribution*

|  |  |  |
| --- | --- | --- |
| **Your name/agency/contact details:** | **Who are you working with?**(i.e. name of child(ren) or family)**:** | **Outline involvement, including dates:** |
|       |       |       |
|       |       |
|       |       |

**What is going well for this unborn baby, child(ren), young person or family?**

*(Consider home, family relationships, parenting, friendships, school/college/training, health (including mental health, development etc.)*

|  |
| --- |
|        |

**What is not going well for this unborn baby, child(ren), young person or family?**

*(Consider home, family relationships, parenting, friendships, school/college/training, health (including mental health, development etc.)*

|  |
| --- |
|       |

**What is the risk for this unborn baby, child(ren), young person or family if things don’t improve?**

*(Consider short, medium and long term impact/outcomes for the young person)*

|  |
| --- |
|       |