

# **Early Help Assessment Form**

Please complete this form for support with a child/ young person. If you need help with this please call 01803 208525.

Date of Assessment:

16.10.15

Once Completed send by post to: Early Help Torbay, c/o Town Hall, Torquay, TQ1 3DR OR scan and email to <u>earlyhelp@torbay.gcsx.gov.uk</u>.

This form is available on the Torbay Council website and can be made available in other languages on request.

NOTE: If you have a safeguarding concern about a

| Details of child or young person (YP) (including any alternative or previous names) |                       |                 |                           |                             |  |  |
|---|-----------------------|-----------------|---------------------------|-----------------------------|--|--|
| Child/ YP Name:   | D.O.B / E.D D         |                 | Gender                    |                             |  |  |
| Α   | 28.01.11              |                 | Male 🛛 🛛 Fer              | nale 🗌 Unborn 🗌             |  |  |
| Ethnicity   | Religion              |                 | First Language            | Is an interpreter required? |  |  |
|   |                       |                 |                           | Yes 🗌 🛛 No 🖂                |  |  |
| White British   | None                  |                 | English                   |                             |  |  |
| Name of Early Years Setting / School / College                                      |                       | Year Group      | Is school attendance      | School attendance % (if     |  |  |
|   |                       |                 | a problem?                | known)                      |  |  |
| Primary School  |                       | Foundation      | Yes 🗌 No 🖂                | 100%                        |  |  |
| How many (if any) fixed   | Has the child / YP be | een assessed as | Is the child / YP a young | g carer?                    |  |  |
| term exclusions has the   | having Special Educ   | ational Needs?  |                           |                             |  |  |
| child / YP had in the past  | Yes 🗌 🛛 No            | $\sim$          | Yes 🗌 No                  | $\boxtimes$                 |  |  |
| 12 months?  |                       |                 |                           |                             |  |  |
| 0   |                       |                 |                           |                             |  |  |
| G.P Name: Dr GP   |                       |                 | GP Surgery: Paignton      |                             |  |  |

Why is this Assessment being made?

What is happening and is it ongoing or

What has been tried? Has it helped?

#### A Child

A is a 4 year old boy in Foundation. He has a brother in the same school in Year 1. He lives with his mum and mums partner who he refers to as 'Daddy Tony', they are currently living with grandparents as a new house is being renovated. A sees his biological dad 'Daddy David' every Wednesday for 2 hours and alternate weekends. There is a court order in place and his biological dad cannot pick A up from school or have any other contact with mum or the boys outside of these contact hours.

When mum was pregnant with A she was in an abusive relationship and dad was a cocaine addict. A was born at 38 weeks – planned C section due to mums epilepsy. After the birth she went straight to intensive care. Mum said she breast fed A's Brother but feels there was no instant bonding with skin to skin. 6 months later there was a court order put in place and dad could no longer have any contact with mum.

#### **Referral being made because:**

- Behaviour at home
- A has been displaying aggressive behavior coming into school since he started in September. Mum has rung the school on several occasions and asked for support to get him into school.
- Mum stated that A is struggling emotionally, displaying signs of aggression and cannot control it.

What is happening?

- A is frequently aggressive towards mum and his brother.
- He has episodes of rage that are frequent. Mum is reluctant to restrain A.
- He hits, kicks, bites and spits in mums face.
- He destroys any environments once 'he kicks off'.

What has been tried?

- Strict rules. Emotional reinforcement.

| Details of person completing this Assessment |  |  |  |  |  |  |
|--|--|--|--|--|--|--|
| Name: Assistant Head                         | Agency / Role: Assistant Head              |  |  |  |  |  |
| Telephone No: 01803 xxxxxx                   | Email: assistanthead@primary.torbay.sch.uk |  |  |  |  |  |

| What support is in place for the Child/ Young Person, siblings and/or adults in the family?<br>For example: Parenting Support, Young Carers, Substance Misuse Support, Mental Health Services, Pediatrician |   |                 |                              |                               |  |  |  |  |
|---|---|-----------------|------------------------------|-------------------------------|--|--|--|--|
| Agency  | Contact person                              | Contact details | Current<br>Input<br>Yes / No | Previous<br>Input<br>Yes / No | Took part in this<br>Assessment?<br>Yes / No |  |  |  |
| Health Visitor  | H Visitor (Involved<br>when he was younger) | Paignton        | No                           | Yes                           | Νο   |  |  |  |
|   |   |                 |                              |                               |  |  |  |  |
|   |   |                 |                              |                               |  |  |  |  |
|   |   |                 |                              |                               |  |  |  |  |

| Parent / Carer Details 1                            |                        |  |                             |  |  |  |  |
|---|------------------------|--|-----------------------------|--|--|--|--|
| Name:   | D.O.B                  |  | Relationship to child / YP  |  |  |  |  |
|   |                        |  |                             |  |  |  |  |
| A's Mother  | 24.06.88               |  | Mother                      |  |  |  |  |
| Address: Paignton                                   |                        |  |                             |  |  |  |  |
| Telephone No: 0777777777777777777777777777777777777 |                        | Email address: achildsmother@hotmail.co.uk |                             |  |  |  |  |
| Parental Responsibility for child / YP?             |                        | First Language                             | Is an interpreter required? |  |  |  |  |
| Yes 🗌 No 🖂  |                        | English                                    | Yes 🗌 No 🖂                  |  |  |  |  |
| Are you entitled to benefits?                       |                        | Are you receiving benefits?                |                             |  |  |  |  |
| Yes 🗌 No 🖂  |                        | Yes 🗌 No 🖂                                 |                             |  |  |  |  |
| GP: <b>Dr GP</b>                                    |                        | GP Surgery: Paignton                       |                             |  |  |  |  |
| Long term illness / disability?                     | If YES please give det | ails                                       |                             |  |  |  |  |
| Yes 🗌 No 🖂  |                        |  |                             |  |  |  |  |

| Parent / Carer Details 2                |                        |                             |                             |  |  |  |  |
|---|------------------------|-----------------------------|-----------------------------|--|--|--|--|
| Name:                                   | D.O.B                  |                             | Relationship to child / YP  |  |  |  |  |
|   |                        |                             |                             |  |  |  |  |
|   |                        |                             |                             |  |  |  |  |
| Address:                                |                        |                             |                             |  |  |  |  |
| Telephone No:                           |                        | Email address:              |                             |  |  |  |  |
| Parental Responsibility for child / YP? |                        | First Language              | Is an interpreter required? |  |  |  |  |
| Yes No                                  |                        |                             | Yes No                      |  |  |  |  |
| Are you entitled to benefits?           |                        | Are you receiving benefits? |                             |  |  |  |  |
| Yes No                                  |                        | Yes No                      |                             |  |  |  |  |
| GP:                                     |                        | GP Surgery:                 |                             |  |  |  |  |
| Long term illness / disability?         | If YES please give det | ails                        |                             |  |  |  |  |
| Yes No No                               |                        |                             |                             |  |  |  |  |

|   | Other family / ho                         | ousehold m             | embers or s               | ignificant oth                   | ers                             |                         |
|---|---|------------------------|---------------------------|----------------------------------|---------------------------------|-------------------------|
| Name  | Relationship to child / YP                | D.O.B                  | Living with               |                                  | Aware of assessment?            | Took part in assessment |
| Tony  | 'Daddy T'<br>mum's partner                | 23.02.88               | Yes 🖂                     | No 🗌                             | Yes 🛛 No 🗌                      | Yes 🗌 No 🔀              |
|   |   | Health                 |                           |                                  |                                 |                         |
| How is your child's health?<br>they need treatment? Wh  |   | medical cor            |                           |                                  |                                 |                         |
| Concerns:   |   |                        |                           |                                  |                                 |                         |
| - Health  |   |                        |                           |                                  |                                 |                         |
| - Very healthy.   |   |                        |                           |                                  |                                 |                         |
| - Attends doctors and   | dentist when need                         | ded.                   |                           |                                  |                                 |                         |
| - No medical condition  | ns.                                       |                        |                           |                                  |                                 |                         |
| Positives:  |   |                        |                           |                                  |                                 |                         |
| Positives.  |   |                        |                           |                                  |                                 |                         |
| - Good diet 'they eat   |   |                        |                           |                                  |                                 |                         |
| <ul> <li>Fit and healthy and a</li> </ul>   | active weekends.                          |                        |                           |                                  |                                 |                         |
| How are things currently?   |   |                        |                           |                                  |                                 |                         |
| Unmanageable 01_  | <u>2 3</u>                                | 4 5                    | 6                         | 7 &                              | 9 <u>10</u> ,E                  | verything fine          |
|   |   |                        |                           |                                  |                                 |                         |
|   | Edu                                       | cation and             | learning                  |                                  |                                 |                         |
| Does your child go to nurs  |   |                        |                           | attendance? I                    | Do they enioy lea               | arning?                 |
|   | ur child want to do                       |                        |                           |                                  |                                 |                         |
| Concerns:   |   |                        |                           |                                  |                                 |                         |
| <ul> <li>No concerns once he has come into school – he cries and is a clingy in the mornings.</li> <li>He has refused to come into school and has had tantrums.</li> <li>Teachers and LSAs have had to 'peel' him off mum.</li> <li>Mum has reported to school that he pulls his own hair out and hits her – he hasn't displayed any of this behavior in school.</li> </ul> |   |                        |                           |                                  |                                 |                         |
| Positives:  |   |                        |                           |                                  |                                 |                         |
| <ul> <li>Good relationships v</li> <li>Engages with learnir</li> <li>Enjoys outdoor &amp; ph</li> <li>Overall age related a</li> <li>100% attendance</li> </ul>   | ng activities.<br>Tysical activities – v  | vater play.            | Has specific              | close friends                    | – H, L and C.                   |                         |
| How are things currently?   |   |                        |                           |                                  |                                 |                         |
| Unmanageable 0 1  | 2 3                                       | 4 5                    | 6                         | 78                               | 9 10 E                          | verything fine          |
|   |   |                        |                           |                                  |                                 |                         |
| <b>Behaviour and Relationships</b><br>What's your child's behaviour like at home and school?<br>Do you feel you are able to give your children clear boundaries with praise and consequences?<br>What's your child's relationship like with their parents/carers, siblings and friends? What activities do you do<br>together?  |   |                        |                           |                                  |                                 |                         |
| Concerns:   |   |                        |                           |                                  |                                 |                         |
| <u>School</u>   |   |                        |                           |                                  |                                 |                         |
| - No concerns.<br>Home  |   |                        |                           |                                  |                                 |                         |
| - Mum says behaviou   |   |                        |                           |                                  |                                 | en 'Daddy               |
| David'. After he has<br>- When he cuddles T (<br>- When mum says no<br>immediately flipped  | mum's partner) he<br>– he flips. E.g. whe | says dadd<br>n mum put | y D says hor<br>the wrong | rible things al<br>sunglasses in | bout mummy.<br>his bag yesterda |                         |

### way to school), threw stones, kicked and hit mum. When he can find a stick he will hit with that.

- Mum has bruises because of him kicking her.
- He will pull his hair out when he is angry.
- He is aggressive towards his brother he will corner Brother and hit and kick him. His brother is very scared of him when 'he is on one'.
- He has smashed a huge glass mirror at home in the summer holidays (after he spent a week with dad) with his hands when he became angry.
- Whenever he is angry he will trash the environment. Smash up his bedroom etc.

**Triggers** 

- When he is told no, he will flip.
- Worse after he has seen his dad.
- Calming down sometimes it will take 5 minutes and other times it can take a lot longer.

Consequences & boundaries.

- Mum feels she has firm consequences.
- Reward chart A gets a sticker for getting dressed and coming to school nicely If he gets 8/10 stickers in a
  week he gets a toy.
- Mum has a secret bag toys in there and the boys pick a toy out if they have achieved their stickers.
- Same rules for both boys.
- Mum uses consequences such as not riding scooter, not allowed time on a leap pad for an evening.
- Bedtime 7.30pm chn to go to bed. A sleeps with daddy D when he sees dad. At home with mum he sleeps in his own bed and doesn't sleep with mum. In general goes to bed well and sleeps 12 hours.

- Dinnertime – 5pm – A will eat everything and sits up at the table.

**Relationship** 

- Mum feels they have a loving relationship – A will tell mummy he loves her lots. Affectionate family – with mummy and Daddy D. Grandparents – sees both sets. Daddy T lives with his parents. Pass over from mum to dad is always through childminder (due to court order).

**Activities** 

- Mum says they are always visiting different places at the weekends i.e. model village, zoo, skate park (mum has a scooter and joins in with the boys), cinema. Mum feels they are very lucky boys to go to all these different places frequently and says they have a great family relationship.
- He does lots of activities with Daddy David too.
- Mum says his favourite activity would be skateboard park or go to Woodlands.
- At home A enjoys reading.

#### Positives

<u>School</u>

- A talks to mum about school a little bit. He enjoys the water play.
- His has close specific friends.
- Once settled he enjoys school
- Compliant to rules.
- Follows instructions.

Home:

Mum says:

- Loving family.
- Daddy D is a great parent.
- Consistent rules between mum and Daddy D.
- Mum was clear that her partner is a great support to her.

| How are things  | curren                         | tly?    |                      |                      |                        |          |                                   |     |   |         |                    |
|---|--------------------------------|---------|----------------------|----------------------|------------------------|----------|-----------------------------------|-----|---|---------|--------------------|
| Unmanageable  | 0                              |         | 2                    | 3                    | 4                      | 5        | 6                                 | 7   | 8 | 9       | 10 Everything fine |
|   |                                |         |                      |                      |                        |          |                                   |     |   |         |                    |
| <b>Keeping your family safe</b><br>Is your home safe? Do you and your child use mobile phones and internet safely?<br>Are you and your children safe from bullying, harassment, domestic abuse and other crime? |                                |         |                      |                      |                        |          |                                   |     |   |         |                    |
| - Mum is<br>- Mum is  | s 'not v<br>s worri<br>s conce | ed abou | nical' a<br>t A hurt | nd does<br>ing his k | n't use t<br>prother a | and othe | net / ph<br>er childro<br>be able | en. | • | he time | he reaches 9 or 10 |

- Mum feels they are safe now court order in place since A was 6 months old (June2011).
- Daddy D cannot have any contact with Mum or both children. He can only have contact with A during contact hours. Joint PR.

| <ul> <li>Unsupervised Contact – every Wednesday for 2 hours and every alternate weekend – Saturday overnight until Sunday.</li> <li>Mum is worried about what Daddy T says to A. Mum thinks Daddy T is emotionally abusing him (she states this has been proved in court). Daddy T says to A he is going to pick him up from school but isn't allowed to. He tells A than his Brother isn't his real brother.</li> </ul>  |  |  |  |  |  |
|---|--|--|--|--|--|
| Positives   |  |  |  |  |  |
| - Mum says they live in a safe and loving environment. 'It's a happy home'.   |  |  |  |  |  |
| How are things currently?   |  |  |  |  |  |
| Unmanageable 0 1 2 3 4 5 6 7 8 9 10 Everything fine   |  |  |  |  |  |
| <b>Parent/Carer well-being</b><br>How do you feel? How do you cope with difficulties? Are you depressed or anxious?<br>Do you have problems with drugs or alcohol, domestic abuse or mental health?<br>Do you have a long term illness / disability? What support do you have?  |  |  |  |  |  |
| Concerns:   |  |  |  |  |  |
| <ul> <li>Mum is finding it really tough.</li> <li>Mum has suffered from depression in the past after being in abusive relationship.</li> <li>When A spat in mum's face it reminded her of dad's behaviour, as this happened regularly.</li> <li>A's behaviour is affecting Mum's emotional well-being.</li> <li>Mum cries to her partner Daddy D frequently after A has 'kicked off'.</li> <li>Mum is anxious when she takes A out and worries that he will hurt other children. Very anxious when he kicks off in public.</li> </ul> |  |  |  |  |  |
| <ul> <li>Daddy D is very supportive.</li> <li>Brilliant friends and a supportive family.</li> <li>School – mum feels supported with school. Feels Miss Teacher is a nurturing teacher and has had a good relationship with sibling Brother and now A.</li> <li>Mum feels like she can ring for support.</li> </ul>  |  |  |  |  |  |
| <ul> <li>Epilepsy – mum is controlled with medication – the condition is something mum has had since having the children.</li> <li>Needs to be controlled with a strict diet at the right times.</li> <li>Mum feels this is under control with medication now.</li> <li>The children have witnessed mum fitting but deal with it well.</li> <li>Once mum has a fit after a she recovers.</li> </ul>   |  |  |  |  |  |
| <ul> <li>Positives</li> <li>Supportive family network.</li> <li>Great friends</li> <li>Mum loves her children very much.</li> <li>Supportive and loving relationship with Daddy D (mums partner)</li> </ul>   |  |  |  |  |  |
| How are things currently?   |  |  |  |  |  |
| Unmanageable 0 1 2 3 4 5 6 7 8 9 10 Everything fine   |  |  |  |  |  |
| Home and Money<br>Is your home private rent / housing association or owned? Are you at risk of eviction? Is your home suitable for your<br>needs? Are your finances enough to meet your family's needs eg mortgage/rent and food? Are you accessing<br>training / work experience?  |  |  |  |  |  |
| Concerns:   |  |  |  |  |  |
| <ul> <li>At the moment living with Mum's dad (grandparents).</li> <li>Mums house is being built. The house that is being built is rented.</li> <li>No risk of eviction.</li> <li>House suitable for current needs.</li> <li>Reason for moving – housing being built – need a garden.</li> </ul>   |  |  |  |  |  |
| Positives   |  |  |  |  |  |
| <ul> <li>No problem with finance.</li> <li>No training or work experience.</li> <li>Mum is in part-time work at the moment</li> </ul>   |  |  |  |  |  |

| How are things currently  | y?   |  |  |                  |   |   |                    |
|---|--|--|--|------------------|---|---|--------------------|
| Unmanageable 0  |  | 3 4  | 5  |                  | 8 | 9 | 10 Everything fine |
| Parent/Carer - What do you want to change and how will you know when it's happened?   |  |  |  |                  |   |   |                    |
| What mum wants to cha   | ange:  |  |  |                  |   |   |                    |
| <ul> <li>Mum wants A to</li> <li>Mum wants him</li> <li>To come into sch</li> <li>Healthy relations</li> </ul> How will you know this I <ul> <li>A will be able to</li> <li>They will be no c</li> <li>Sibling will have</li> <li>A will come into</li> </ul> | n to be less an<br>hool happily<br>hship with his<br>has happened<br>o manage his e<br>or less freque<br>e a good relati | gry. Less violer<br>brother, wants<br>d?<br>emotions bette<br>nt aggressive e<br>onship with his | it episodes.<br>Finley not<br>r.<br>pisodes. | . Not fly off th |   |   |                    |
| Child / Young Person – What do you want to change and how ill you know when it's happened?  |  |  |  |                  |   |   |                    |

N/A

## Consent for information storage and information sharing

In order to ensure that you and your family are provided with the most effective available support it may be appropriate to share personal information about you and your family between agencies / community groups, such as Children's Services, the NHS and other health providers (including G.Ps), Department of Works and Pensions, police, probation services, schools and the Youth Offending Team.

This information may include details about your child/ren, you or other significant family member's involvement with Children's Services, police, courts and probation services, aspects relating to your employment, anti-social behaviour, violence in the home, substance misuse, educational attendance and behaviour and health issues.

This information may also be shared with the Department for Communities and Local Government under the national Troubled Families Programme.

In some circumstances, information can be shared between agencies without consent, for example where sharing information might prevent a crime or safeguard the welfare of a child or young person. Even in these circumstances, it is normal practice to obtain consent where possible.

If you have concerns about information being shared with particular agencies or individuals please give information overleaf.

| I understand the information in this form   | Yes 🛛 No 🗌 |
|---|------------|
| I have had the reasons for information sharing explained to me and I understand those reasons.  | Yes 🛛 No 🗌 |
| I give my permission for the information in this form to be shared with appropriate agencies / community groups so that I can be contacted about support available to me. | Yes 🔀 No 🗌 |
| I understand that information on this form will be entered onto the Torbay database which is secure and covered by the Data Protection Act 1998 (DPA)                     | Yes 🔀 No 🗌 |
| I understand that in exceptional circumstances this information will be shared without my permission.   | Yes 🔀 No 🗌 |
|   |            |

I do not want my information shared with (list):

Yes No

| Parent / Carer Name (Print) | Relation to Child/Ye | oung Person | Signature |
|-----------------------------|----------------------|-------------|-----------|
|                             |                      |             |           |
|                             |                      |             |           |
| Child / Young Person Name   | (Print)              |             | Signature |
|                             |                      |             |           |
|                             |                      |             |           |