

Appendix 2

Evidence-based assessment tools for use with children and their families

The Family Pack of Questionnaires and Scales

(Department of Health, Cox & Bentovim, 2000) provide an economical and effective way of gathering information about emotional and behavioural strengths and difficulties in both children and adults, parenting problems, recent life events, mental health difficulties, alcohol problems and the quality of family life.

This can be downloaded from Department of Health website:

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4008144

Daniel and Wassell (2002)

Three workbooks for *Assessing and Promoting Resilience in Vulnerable Children*

1. The Early Years
2. The School Years
3. Adolescence

Published by Jessica Kingsley Publishing.

Appendix 3

Filling in the record of concerns

This appendix gives a draft of a record of concerns which is being developed for the Pathfinder in Highland.

Getting it Right for Every Child Completion of child record of concerns	
1	Form to be completed when there is : <ul style="list-style-type: none"> • Child Protection or Welfare concerns. • Domestic Incidents (including victims that are Pregnant). • Child/Parent/Carer is substance misusing. • Parent/Carer is drunk in charge of a child. • Child places themselves at risk.
2	<ul style="list-style-type: none"> • Full names, D.O.B. of all persons present to be noted. Details of absent siblings and parents also to be noted. • Ethnicity to be sought from all persons. • Details of GP, HV, Nursery, School <u>MUST</u> be noted. • Details of any Voluntary Organisation (NCH, Sure Start, Barnardos etc) to be noted.
3	Record the following : <ul style="list-style-type: none"> • Adequate heating, lighting, furnishings, bedding, appropriate toys, cleanliness of the home. • Obvious dangers (open fires, exposed wiring, no stair gates, evidence of drug misuse etc.) • Interaction of Parent/Carer with child. • Interaction of Parent/Carer with officers. • Appearance of child (well nourished, tired, withdrawn, upset etc.)
4	Where there is an immediate risk to the child officers will invoke their Emergency Powers and remove the child to a place of safety. Accurate details of those providing care must be noted and checks are carried out to ensure that they are suitable. Social Work Services must be contacted.
5	Details of all children that were seen to be safe and well to be recorded. Where children have not been seen i.e. sleeping and not to be disturbed, reasons to be recorded.

The seven well-being indicators

The seven well-being indicators are an important part of the assessment materials in their own right. They are used to provide a template for recording the record of concerns

Safe: protected from abuse, neglect or harm at home, at school and in the community;

Healthy: having the highest attainable standards of physical mental health, access to suitable health care, and support in learning to make healthy and safe choices;

Achieving: being supported and guided in their learning and in the development of their skills, confidence and self-esteem at home, at school and in the community;

Nurtured: having a nurturing place to live in a family setting with additional help if needed, or, where this is not possible, in a suitable care setting;

Active: having opportunities to take part in activities, such as play, recreation and sport, which contribute to healthy growth and development at home and in the community;

Respected and responsible: should be involved in decisions that affect them, should have their voices heard and should be encouraged to play an active and responsible role in their schools and communities;

Included: having help to overcome social, educational, physical and economic inequalities and being accepted as part of the community in which they live and learn.

Recording concerns

Where a parent, professional or other member of the child's community is concerned that a child/ young person is not developing as they should be, or identifies factors in the child's family, home or wider environment which they believe might be having an adverse effect on the child's development, these concerns can be expressed in terms of the child not being safe, healthy, achieving, nurtured, active, of not being respected and responsible, or not being included. Where concerns are voiced in other terminology, they can be easily translated into the well-being indicators providing a common language which is easily understood by all involved.

Where such a concerns factor is identified, it is necessary to record the concern, assess its likely impact on the child, decide if actions need to be taken to safeguard or promote the child's well-being, and, if so, what and by whom. In noting the concerns and reasons for the concerns, the practitioner begins to identify possible strengths and pressures in the different dimensions which make up the *My World Triangle*, and contribute to the child's development and well-being.

The practitioner identifying a concern, in conjunction with the child's named person or lead professional, the child, parent(s) and others, as appropriate, will consider and record:

What is the main concern(s) I have about this child?

These should be framed in the language of the seven well-being indicators of safe, healthy, achieving, nurtured, active, respected and responsible and included.

Why am I concerned?

This should include evidence/ information, based on accounts, observations, the child's, parent(s)', and other appropriate peoples' views, proportionately, which relate to the three dimensions of The *My World Triangle*:

- How I grow and develop
- What I need from people who look after me
- My wider world

Brief analysis of the significance of the above, (incorporating evidence from research where appropriate) and its impact/ likely impact on the child in terms of the child's need to be safe, healthy, achieving, nurtured, active, respected and responsible, and included.

Are we still concerned?

It might be that the concern represented a one off incident, that the child is developing appropriately, the child's needs are being met by the parent(s), support by inputs from the child's wider world, or that the intervention of an agency, for example, a visit by the police has been the catalyst for change.

Taking action based on the concerns

This can happen in many ways which are detailed in Part 5 of the guidance.