# Wellbeing Assessment of Need

## Basis for Assessment

|  |
| --- |
| Choose an item. |

## Child/Young Person’s Details

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Known as** | | **Date of Birth** | **Year Group** |
|  |  | |  | Choose an item. |
| CHI Number | | SWIFT Number | | |
| SEEMIS Number | | Scottish Candidate No. | | |
| Child and Family Centre/Nursery/School Currently attending (if appropriate) | | | | |
| *Child and Family Centre/Nursery* | *School* | | *Other:* | |
| Choose an item. | Choose an item. | |  | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Agencies already known to be involved (please specify in each case): | | | | | | | |
| Education |  | Health |  | Social Work |  | Housing |  |
| Police |  | Voluntary Sector |  | Other |  |  | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Contributors to the Assessment and Named Persons details**  *(to add a row – place cursor in the last box in the table and press tab ‘⭾’ on your keyboard)* | | | |
| **Job Title** | **Name** | **E-Mail Address** | **Telephone Number** |
|  |  |  |  |
|  |  |  |  |

## Reason for Assessment

|  |  |  |  |  |  |  |  |
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| *Please refer to the Wellbeing Indicators and select the outcomes which are most clearly at risk. Further guidance can be found by following this link* [*Using the Wellbeing Wheel*](http://www.gov.scot/Topics/People/Young-People/gettingitright/national-practice-model/observing-recording) | | | | | | | |
| Safe |  | Healthy |  | Achieving |  | Nurtured |  |
| Active |  | Respected |  | Responsible |  | Included |  |
| **Reason:** | | | | | | | |

## Development and Wellbeing

By following this link you can find helpful guidance on the [National Practice Model](http://www.gov.scot/Topics/People/Young-People/gettingitright/national-practice-model)

|  |  |
| --- | --- |
| * *Areas going well* | * *Concerns* |

Evidence informed assessment tools for use with children and families can be found by following this link to the Inverclyde GIRFEC toolkit [Inverclyde GIRFEC](http://www.inverclyde.gov.uk/health-and-social-care/support-for-children-families/getting-it-right-for-every-child-girfec)

All tools used from the kit should be attached as appendices to this assessment (e.g. Genogram, ecomap, shared chronology and the family pack of questionnaires and scales or Graded Care Profile).

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| **Growth and development** (*use the dimensions of the my world triangle to help identify needs; Health, education, emotional and behavioural development, identity, family and social relationships, social presentation, self-care skills*) |

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| --- |
| **Getting the care and support needed** (*use the dimensions of the my world triangle to help understand parenting capacity; Basic care, ensuring safety, emotional warmth, stimulation, guidance and boundaries, stability)* |

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| **The wider environment** *(use the dimensions of the my world triangle to help identify family and environmental factors; Family history and functioning, wider family, housing, employment, income, family’s social integration, community resources)* |

## Risks and Protective Factors

*Refer to the Resilience Matrix if helpful which can be found with other evidence informed tools by following this link* [*National Risk Framework*](http://www.gov.scot/Resource/0040/00408604.pdf)

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| --- |
| **What are the risks to the child/young person?** |

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| --- |
| **What protective factors and strengths, if any, support the child/young person’s resilience?** |

## Views

It is important to gather views of the child, young person and their parent or carer. Evidence informed tools which assist practitioners to communicate with children, young people and their parents or carers can be found by following the link [Inverclyde GIRFEC](http://www.inverclyde.gov.uk/health-and-social-care/support-for-children-families/getting-it-right-for-every-child-girfec)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **What are the views of the child/young person?** | | | | |
| **Has consent been given to share information?** | Yes |  | No |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **What are the views of the parent/carer?** | | | | |
| **Has consent been given to share information?** | Yes |  | No |  |

1. **Analysis of assessment**

Provide a summary analysis of the information and evidence gathered from all sources to bring meaning to the child’s story. Evaluate the data and draw conclusions that are clear and easy to follow. What **needs** arise, how do those needs impact on this child’s **outcomes** and what outline **plans (**interventions or offers of help)need to be put in place to ensure those outcomes are achieved.

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| **Summary analysis of child/young person’s needs based on information gathered:** |

## What Happens Next *(include an outline plan below)*

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| Maintain current support |  | Implement further actions (see outline plan below) |  | Initiate Child/Young Person’s Multi Agency Planning Meeting |  | Other (please specify) |  |
|  |
| **Reasons for decisions/Recommendations:** | | | | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Outline Plan arising from the Assessment**  *(to add another row - from the last box in any table press tab ‘⭾’ on your keyboard)* | | | |
| **Desired Outcomes** | **Agreed Action** | **By Whom?** | **By When?** |
|  |  |  |  |
|  |  |  |  |

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| --- | --- | --- | --- | --- | --- | --- |
| **Has a copy of the Wellbeing Assessment of Need been given to the parent/carer(s)?** | | | Yes |  | No |  |
| **Parent/Carer Name** | **Signature** | **Date** | | | | |
|  |  | Click here to enter a date. | | | | |

|  |  |  |
| --- | --- | --- |
| **Lead Professional completing the assessment** | **Job Title** | **Date** |
|  |  | Click here to enter a date. |