



Defence
Children
Services

Early Help toolkit

part 1: My child and family



Section 1: Your child's details

Your child's details			
Child/young person's name(s) Family address		Date of birth	
		School or Early Years unit	
Name of person completing this form		Relationship to child	
Date		Signature	

Family composition: All those residing in the family home			
Name	Date of birth	Gender	Relationship to child

Other important people: Include details of any parent's not living with the child (not required where child has been adopted)		
Name	Relationship to child	Risks associated with contact

Section 2: Support needs

To provide you and your child with the best support possible, we need to understand more about what is going on for your family.

Please use the below scoring table to help you to complete the form.

Scoring					
0	1	2	3	4	5
We are confident, things are working well in this area – we require no support	We feel quite confident in this area, but it is something we might ask for advice about.	We sometimes feel confident, but it's an area we might need support with.	We are not sure how confident we feel in this area. We would appreciate more of a discussion about this.	We do not feel confident in this area and are likely to need support.	We know we are not confident in this area; we require support from agencies

Health and wellbeing: Wellbeing is strongly linked to resilience, happiness, and life satisfaction therefore it's important for professionals to understand your child's strengths and needs in this area. Is your child generally healthy and have access to regular dentist check-ups and appointments. When did your child last visit the dentist?	Score	What is working well
	What support do you need?	

	Score	What is working well?
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Emotional needs: This is the ability of your child to manage both their emotions and understand the emotions of those around them in an age developmentally appropriate manner.		
	What support do you need?	

Behaviour and choices: What impacts on your child's behaviour (positively and negatively). Does your child make positive choices that are developmentally appropriate.	Score	What is working well?
	What support do you need?	

Family: Who in the family does your child feel is important to them. Is there anyone they miss e.g. a grandparent / aunt / uncle they are close to. What wider family support do you have? Are there any tensions in relationships within your family unit? How does your child get on with their siblings, you, etc?	Score	What is working well
	What support do you need?	

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<p>If there is a parent that doesn't live with you and the child, what is your child's relationship with them? Does your child wish this was different? Whilst it might be a difficult subject to discuss it's important for us to know if there are any safeguarding risks attached to contact with a separated parent.</p> <p>In general, how do things feel at home calm or chaotic, would you like this to be different?</p>	
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<p>Friends and relationships: Who does the child feel is important to them, are there any tensions in relationships within the family or child's life.</p> <p>Does your child have children to play with at school and home, and do you feel your child has healthy peer relationships within their community?</p>	Score	What is working well
	What support do you need?	

<p>Education/Early Years: Does your child enjoy school or EYFS setting, is their attendance causing you any worries, do they enjoy learning, are there any additional needs we need to take into consideration?</p>	Score	What is working well?
	What support do you need?	

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Feeling safe: How safe your child feels in all their environments (home, school and community). Some of the things that might impact on your child's feelings of safety could include sibling fights, marital discord, bullying at school, living in a high crime area and online safety issues etc.	Score	What is working well?
	What support do you need?	

Mobility: Frequent moves are an integral part of military life for military families, this can result in children frequently moving school, changing friendships and changing homes. It's helpful for us to understand the impact mobility has on your child so we can ensure that any support provided helps your child overcome issues that might impact them in a positive way.	Score	What is working well?
	What support do you need?	

Goals/ambitions: What are your child's goals for the future are and what is working well or needs to change to help your child achieve their goals?	Score	What is working well?
	What support do you need?	

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Who can support you? Is there anyone in your social or family network that could support you achieve the changes. Tell us who this is, and how you think they could help

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Listening to your child/ren: How does the current situation impact? How do you think they feel currently?

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Your Story: What has impacted on your family in the past? Any previous experience of receiving support?

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Anything else: what else do you need us to know?

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Section 3 Information Sharing Consent

What is the purpose of this section?

When you or your family need help from us, you are the first and most important source of information about your circumstances. However, sometimes it is important to share that information with other agencies so we can provide co-ordinated and seamless services which are right for you, and/or your family. This form asks for your consent to share information with other organisations that may be or need to be involved with your family. It also allows them to share information with us.

Could the information be shared without my consent? Yes, sometimes we can share information without your consent, if in our judgement there is a lawful basis to do so, for example safeguarding children and individuals at risk. Where possible we share information with consent, and where possible we respect the wishes of those who do not give consent.

What will the information be used for? We will use the information to get a picture of your or your child's needs, so we can provide you with the services that are right for you. If you give consent, some personal details may be shared between services. We will only share information when it is appropriate to do so. Information shared is necessary, proportionate, relevant, adequate, accurate, timely and secure.

It will be kept confidential and secure so that we comply with the Data Protection Act 2018 and General Data Protection Regulations.

Who will be able to see my information? Access to the information will only be given to staff that have a reason to see it, for example some information may be shared with other involved professionals with your family for purpose of providing a service to you or your family members.

What are my rights? Your information is protected by the General Data Protection Regulations. Your information will be kept safe and secure, and you will have the right to see what information is being kept about you.

Withdrawing consent

If you have given consent to share and wish to withdraw this, please contact your lead professional by email explaining you are withdrawing consent to share or gather information.

STATEMENT OF CONSENT

Details of child/ren

Child Name	Date of birth

Statement of Consent

☐ I / We understand that personal information is gathered and held about me and my / our children

☐ I / We have had the opportunity to discuss the implications of sharing or not sharing information about me and my / our children

☐ I / We understand that if my / our children are supported appropriate information will be shared during team around the family meetings so we can provide co-ordinated and seamless services which are right for you, and/or your family.

☐ I / We agree that personal information about me and my / our children may be gathered from and shared between partner agencies (for example social care, education, health, and welfare) when appropriate and necessary.

Signature

To be signed by the person with parental responsibility.

Parent / carer details			
Name of parent / carer			
Relationship to child			
Signature		Date	

Parent / carer details	
Name of parent / carer	

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Relationship to child			
Signature		Date	