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Assessment Form

Assessor	Date	
Child's name	Sex	DoB
Family composition	Position in	n famil <u>y</u>
School	Tutor gro	up/class
Parents'/Young person's perception of the difficulty an child/young person:	d expectation	ons of the
Parents'/Young person's perception of normal behavio	ur:	
Parents'/Young person's previous and current manage punishment, coercion:	ment of diff	iculty, e.g., praise,
Child's/Young person's medical/social/emotional history. 1. Pregnancy, birth history, birthweight, early childhood. What How did the mother and baby bond?		nancy and birth like?
2. Health issues: any current medication?		

3.	Developmental status, e.g., language skills, hearing, comprehension, concentration span?
4.	Recent life changes, e.g., new baby, family bereavement, change of carer?
5.	What are the family routines, e.g., day care, meals, sleep? Does the family have routines?
6.	What are the main features of concern?
7.	Are there any patterns to the child's/young person's difficulty? What triggers the difficulty?
8.	What do they think started the difficulty?
9.	Are the child's/young person's carers working consistently with the child/young person and do all carers agree about the problem?

10. Do the parents/young person understand the developmental norms of behaviour and the emotional development of the young person/child? (See 'Developmental and emotional milestones'.)
11. What does the mother/father think about the child/young person generally?
12. Do you think that the child/young person is using his/her behaviour to express distress or anger?
13. Do the parents have their own issues around management of the difficulty?
14. What are the parents'/child's/young person's view of family life?
15. What are the parents'/child's/young person's view of school life and friendships?
16. What are the parents'/young person's goals for improvement?