

Form CR-C Carers' Report

Profile of behavioural and emotional wellbeing of a child aged 0–9 years

**To be completed by the child's main caregiver/s
(with support from social worker as needed)**

CONFIDENTIAL

Please note

1. As part of the permanent social care record, this valuable information should be used to inform social care planning for all children in public care, e.g. statutory reviews, permanence panels, family finding, preparing prospective carers. Professionals sharing the information should give due regard to the child's feelings, thoughts and wishes.

2. This report is an opportunity for you to share your knowledge of the child. The report will form part of the child's social care record. Please answer by ticking as appropriate and by adding any comments in the spaces provided.

3. In thinking about this child's behaviour and emotional wellbeing, please compare him/her with other children of similar age and ability.

4. This information should be updated and available to the health professional at statutory health assessments.

5. For infants under 12 months please complete only sections 1–5a and 9 of the form.

Child's name	Date of birth	Age
Profile completed by	Date	
Contact details		
Relationship to child	Date of placement	
How long have you known this child?		

1. What is this child like to live with and care for?

Please describe a typical "day in his/her life", in terms of rewards and challenges

Name of child

DoB

To insert the child's name and DoB, click on 'View', then 'header and footer', add the information and then close the header. This will copy the information onto every page.

2. Everyday living

A Do you have concerns about the child's behaviour in the following areas? Please give examples.
Have you seen any change in the time you have known him/her?

Behaviour Yes, No Examples/ comments	Yes, No, N/A	Examples/comments
Eating/feeding		
Sleeping		
Toileting (e.g. wetting, soiling, smearing)		
Hygiene/self care		

B In response to past experiences, does the child show any of the following behaviours?
Please give examples. *Have you seen any change in the time you have known him/her?*

Behaviour Yes, No Examples/ comments	Yes, No, N/A	Examples/comments
Nightmares		
Flashbacks – vivid and distressing memory of past experiences		
Jumpy, very on edge, quick to startle to normal experiences		
Frozen, seems shut down, but watchful and wary		

C Comment on whether this child, for age and ability, is:

Unusually independent []	About the same as any other child []	Very dependent []
<p><i>Please give an example to explain your answer. Have you seen any change in the time you have known him/her?</i></p>		

Name of child

DoB

3. Relationships with adults

A What is this child like with familiar adults? *Please provide an answer for each line*

Overly clingy	<input type="checkbox"/>	About the same as any other child	<input type="checkbox"/>	Hard to get close to	<input type="checkbox"/>
Overly demanding – attention seeking	<input type="checkbox"/>	About the same as any other child	<input type="checkbox"/>	Less demanding - detached	<input type="checkbox"/>
Always wants to be in control/in charge	<input type="checkbox"/>	About the same as any other child	<input type="checkbox"/>	Looks to others to be in control/in charge	<input type="checkbox"/>

Please give an example to explain your answer. Have you seen any change in the time you have known him/her?

B What is this child like with unfamiliar adults?

Overly fearful or unusually shy	<input type="checkbox"/>	About the same as any other child	<input type="checkbox"/>	Overly friendly	<input type="checkbox"/>
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Please give an example to explain your answer. Have you seen any change in the time you have known him/her?

C When this child is hurt or distressed, describe how he/she responds to:

a. the hurt/distress

b. your attempts to comfort

D Any other comments *(e.g. responses to females/males)*

Name of child

DoB

4. Emotional state

A Considering current circumstances, how would you describe this child?

No apparent anxieties	[]	About the same as any other child	[]	More anxious than other children	[]
<i>Please give an example to explain your answer. Have you seen any change in the time you have known him/her?</i>					
Sad or appears "flat"	[]	About the same as any other child	[]	Happier than would be expected	[]
<i>Please give an example to explain your answer. Have you seen any change in the time you have known him/her?</i>					
Sensitive and easily upset	[]	About the same as any other child	[]	Doesn't show feelings – appears tough on outside	[]
<i>Please give an example to explain your answer. Have you seen any change in the time you have known him/her?</i>					

B Any further comments on the child's emotional state?

5. Behaviour

A How would you describe this child's behaviour?

Easier to manage than other children	[]	About the same as any other child	[]	More difficult to manage than other children	[]
<i>Please give an example to explain your answer. Have you seen any change in the time you have known him/her?</i>					

Name of child

DoB

For infants under 12 months, please go to section 9.

B How does this child accept boundaries?

Accepts boundaries without fuss About the same as any other child Resists boundary setting

Please give an example to explain your answer. Have you seen any change in the time you have known him/her?

C How does this child display his/her feelings?

Hides feelings away Like any other child By difficult or awkward behaviour

Please give an example to explain your answer. Have you seen any change in the time you have known him/her?

D Any further comments on behaviour (e.g. response to contact/unusual or challenging behaviour such as sexualised behaviour)

(This section contains a large diagonal watermark reading "SAMPLE")

6. Concentration, impulsivity and activity

A How would you describe this child's concentration?

Loses concentration quickly About the same as any other child Concentration better than other children

Please give an example to explain your answer. Have you seen any change in the time you have known him/her?

Name of child

DoB

B How does this child manage to control his/her impulses?

Overly controlled	<input type="checkbox"/>	About the same as any other child	<input type="checkbox"/>	Impulsive, acts without thinking	<input type="checkbox"/>
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Please give an example to explain your answer. Have you seen any change in the time you have known him/her?

C How would you describe this child's activity levels?

Restless, highly active	<input type="checkbox"/>	About the same as any other child	<input type="checkbox"/>	Less active than expected	<input type="checkbox"/>
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Please give an example to explain your answer. Have you seen any change in the time you have known him/her?

7. Social and play skills

A How does this child get on with other children? Please provide an answer for each line.

Interested in playing with other children	<input type="checkbox"/>	About the same as any other child	<input type="checkbox"/>	Not interested in playing with other children	<input type="checkbox"/>
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Wants to play but struggles to get along with others	<input type="checkbox"/>	About the same as any other child	<input type="checkbox"/>	Appears isolated and alone	<input type="checkbox"/>
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Controlling/bossy with other children	<input type="checkbox"/>	About the same as any other child	<input type="checkbox"/>	Easily led by other children	<input type="checkbox"/>
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Please give an example to explain your answer. Have you seen any change in the time you have known him/her?

Name of child

DoB

B Considering his or her age, can the child engage in imaginative or pretend play?

Over-absorbed in imaginary world About the same as any other child Unable to play imaginatively

Please give an example to explain your answer. Have you seen any change in the time you have known him/her?

C Does this child have unusual routines, actions or obsessions?

YES NO

If YES, please give an example to explain your answer. Have you seen any change in the time you have known him/her?

8. Playgroup, nursery or primary school

A Does the child attend preschool or school?

YES NO

If NO, why not?

If YES, is he/she:
Reluctant to attend Doesn't mind either way Looks forward to going

Please give an example to explain your answer. Have you seen any change in the time you have known him/her?

B How well does he/she cope with preschool, nursery or primary school compared to other children?

Not as well About the same Better than other children

Please give an example to explain your answer. Have you seen any change in the time you have known him/her?

Name of child

DoB

C Has this child had problems with bullying, either as bully or victim?

YES NO
NO

Please give an example to explain your answer. Have you seen any change in the time you have known him/her?

D Do you have any other concerns about preschool or school?

Empty text box for concerns about preschool or school.

9. Postscript

A Is there anything else you want to mention, e.g. responses to birth family, including at contact?

Empty text box for postscript.

B How concerned overall are you about this child's emotional wellbeing and behaviour?

Very concerned A little concerned Not concerned

C Do you have sufficient concerns about this child to think that extra help is needed?

YES NO
NO

If YES, please explain

Signature Date