

# CAPR Scotland Carers' Report Child

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. This part of the form is based on the BAAF Form CR-C with some modifications.
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.**

*NB. To insert the child's/young person's name and DoB on page two and subsequent pages, open the header, add the information and then close the header and save. This will copy the information onto every page.*

<b>Child's name</b>		<b>Date of birth</b>		<b>Age</b>	
<b>Profile completed by</b>		<b>Date</b>			
<b>Contact details:</b>					
<b>Relationship to child</b>		<b>Date of placement</b>			
<b>How long have you known him/her?</b>					

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

*For example, which aspects of caring for him/her bring the greatest joy/satisfaction? Which aspects are challenging? What makes him/her happy or unhappy? What helps him/her to engage?*

<b>Name of child</b>		<b>DoB</b>	
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Please describe a typical "day in his/her life", in terms of rewards and challenges

**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, 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, 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		

<b>Name of child</b>		<b>DoB</b>	
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**C Comment on whether this child, for age and ability, is:**

Unusually independent	[ ]	About the same as any other child	[ ]	Very dependent	[ ]
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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?*

**3. Relationships with adults**

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

Overly clingy	[ ]	About the same as any other child	[ ]	Hard to get close to	[ ]
Always wants to be in control/in charge	[ ]	About the same as any other child	[ ]	Looks to others to be in control/in charge	[ ]

*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	[ ]	About the same as any other child	[ ]	Overly friendly	[ ]
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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>Name of child</b>		<b>DoB</b>	
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b. your attempts to comfort

**D What helps him/her restore a sense of calm when upset?**

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**E Any other comments on relationships with adults (e.g. responses to females/males)**

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**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	[ ]
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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?*

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Sad or appears "flat"	[ ]	About the same as any other child	[ ]	Happier than would be expected	[ ]
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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?*

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Sensitive and easily upset	[ ]	About the same as any other child	[ ]	Doesn't show feelings – appears tough on outside	[ ]
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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?*

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<b>Name of child</b>		<b>DoB</b>	
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**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	[ ]
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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?*

*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	[ ]
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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 does this child display his/her feelings?**

Hides feelings away	[ ]	About the same as any other child	[ ]	By difficult or awkward behaviour	[ ]
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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?*

<b>Name of child</b>		<b>DoB</b>	
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**D Any further comments on behaviour (e.g. response to contact/unusual or challenging behaviour such as sexualised behaviour)**

**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	[ ]
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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?*

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

Overly controlled	[ ]	About the same as any other child	[ ]	Impulsive, acts without thinking	[ ]
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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	[ ]	About the same as any other child	[ ]	Less active than expected	[ ]
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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?*

<b>Name of child</b>		<b>DoB</b>	
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**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	[ ]	About the same as any other child	[ ]	Not interested in playing with other children	[ ]
Wants to play but struggles to get along with others	[ ]	About the same as any other child	[ ]	Appears isolated and alone	[ ]
Controlling/bossy with other children	[ ]	About the same as any other child	[ ]	Easily led by other children	[ ]

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

**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	[ ]
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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** Does this child have unusual routines, actions or obsessions?

YES	[ ]	NO	[ ]
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*If YES, please give an example to explain your answer. Have you seen any change in the time you have known him/her?*

<b>Name of child</b>		<b>DoB</b>	
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**8. Playgroup, nursery or primary school**

**A Does the child attend preschool or school?**

YES	[ ]	NO	[ ]
<i>If <b>NO</b>, why not?</i>			
If <b>YES</b> , is he/she: Reluctant to attend	[ ]	Doesn't mind either way	[ ]
		Looks forward to going	[ ]
<i>Please give an example to explain your answer. Have you seen any change in the time you have known him/her?</i>			

**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	[ ]
<i>Please give an example to explain your answer. Have you seen any change in the time you have known him/her?</i>					

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

YES	[ ]	NO	[ ]
<i>Please give an example to explain your answer. Have you seen any change in the time you have known him/her?</i>			

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

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Name of child		DoB	
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**9. Postscript**

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

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

Very concerned	[ ]	A little concerned	[ ]	Not concerned	[ ]
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**C** Do you have sufficient concerns about this child to think that extra help is needed?

YES	[ ]	NO	[ ]
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*If YES, please explain*

Signature		Date	
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