Dundee City Council
Social Work

Unique Reference Number | 9 | 1 | 0 | 1 | 8 | 4 | 4 | 4 | | |

Looking After Children in Scotland:
Good Parenting, Good Outcomes

REVIEW OF THE CARE PLAN

PART 1
Social Worker's Report

When recording the child/young person's forename(s) and family name, please state the names recorded on his/her birth certificate. If the child/young person is known by a different name(s) also record this name(s)

1 Forename(s): *William*

Family Name: *Tarbett*

Known as:

2 Date of Birth: Day 0 9 Month 0 7 Year 1 9 9 1

3 Date when child/young person started to be looked after away from home: Day 2 2 Month 0 9 Year 1 9 9 4

4 Date of last Review meeting (if appropriate): Day 1 8 Month 0 6 Year 2 0 0 2

5 Date of this Review meeting: Day 0 3 Month 1 2 Year 2 0 0 2

6 Reason for Review

	Tick
Child/young person looked after for 6 weeks	
Child/young person looked after for 4½ months	
Six monthly review	✓
Other (Please specify)	

Placement type: Please use the following categories: with friends/ relatives; with foster carers; with prospective adopters; other community (specify); local authority home; voluntary home; residential school; secure accommodation; other residential (specify).

7 Current placement type: *Permanent Fostering*

Name of carer(s)/ keyworker: [redacted]

Relationship to child/young person (if any): *Foster carers*

Address (including postcode): [redacted]

8 Please state whom you have consulted before the Review, who has been invited to the Review, and who has been invited to submit a report:

	CONSULTED *(Please tick if applicable)*	INVITED *(Please tick if applicable)*	REPORT REQUESTED *(Please tick if applicable)*
Child/young person	✓	✓	✓
His/her mother		✓	✓
His/her father		✓	✓
His/her carer(s)/residential keyworker	✓	✓	✓
Health professionals (please specify)			
Other interested persons (please specify)			
Headteacher/class teacher	✓	✓	✓
Dr Esparon, Child & Fam Psychiatry	✓		

9 How often has the social worker visited the child/young person since the last Review or, if first Review, since the child started to be looked after away from home?

4 Times

Is this is as frequent as agreed in the Day to Day Placement Arrangements

Yes [ ] No [✓]

If **NO**, please explain

Social worker has visited approximately once monthly except when on annual leave (July + October)

Does this frequency meet statutory requirements?

Yes [✓] No [ ]

If **NO**, please explain

10 How often has the social worker visited the following? (If parent(s) deceased or whereabouts unknown, please state).

Mother | *no meetings* | Father | *no meetings*

Other relatives, including siblings, or friends. (Please state whom).

11 Was a full assessment of the child/young person's needs completed either before being looked after away from home, or since?

Yes [✓] No [ ]

12 Has an Assessment and Action Record been completed since the last Review?

Yes [ ] No [✓] If yes, attach a copy of the summary sheet from the Assessment and Action Record in Part 5 of this Review folder

Not yet applicable [ ]

13 What is the child/young person's legal status?

Section 70 (away from home)

Has this changed, or have there been any other legal developments eg referral to the Reporter, since starting to be looked after away from home/last Review?

Yes [ ] No [✓]

If yes, please give brief details.

Mr Tarbett's Section 11 Specific conditions application was heard in June/August 2002 and was rejected. There has been no appeal

14 Is the child/young person's name on the Child Protection Register?

Yes [ ] No [✓]

If yes, and the Reviews are not being held simultaneously, attach the decisions/recommendations of the most recent child protection review in Part 5 of this Review folder.

Has there been a change in child protection status since the child/young person started to be looked after away from home/last Review

Yes [ ] No [✓]

If yes, please explain

15 Please list the recommendations/decisions of the last Review and indicate if each is fully met/ partly met/not met. Where 'not met' or only 'partly met', please explain. If this is the first Review, add here a copy of Questions 16 and 17 from the Care Plan.

Recommendations/Decisions and Action to be taken	By Whom?	By When?	Fully Met/Partly Met/ Not Met. Please explain
William to continue in placement with Mr and Mrs [redacted]	*All parties*	*Ongoing*	*Fully met*
William to continue to attend Auchterhouse PS	***All parties***	***Ongoing***	***Fully met***
Review Officer to speak with Rosemary Crowe re help with maths	***Mr Chalmers***		*?*
Lifestory work to contine	*I von Arnim*	*Ongoing*	*Partly met. See below*
William to be supported in his interests eg ice hockey, football	*All relevant parties*	***Ongoing***	***Partly met. See below***
Planned contact to continue as arranged with family members	***All relevant parties***	*Ongoing*	***Partly met. See below***
The Department will offer Mr Tarbett and Ms Robertson the opportunity to discuss the concerns about unplanned contact with William.	*I von Arnim*	***On appointment***	***Not met. See below***

ADD ADDITIONAL PAGES IF REQUIRED

16 **Please describe what has happened in the child/young person's placement since the last Review.** (If this is the first Review, describe what has happened since the child/young person started to be looked after away from home). Make sure you describe positive developments as well as any problems. Always record something under each heading.

i Has there been a change of placement? If yes, describe the circumstances and the effects on the child/young person.

No change of placement

ii Have there been any significant changes within the current placement which have affected the child/young person eg someone arriving or leaving?

In July 2002 a 13 year old boy was placed with Mr and Mrs [redacted] on an emergency basis. The child has a diagnosis of ADHH. Although this was intended as a short-term placement until other arrangements were made, the placement has contined. I understand that the child will remain in this placement at least until July 2003.

This placement has had a significant impact on William's sense of 'belonging' to the [redacted] family and his perception of the amount of positive attention that he feels he receives. There has been a consequent reduction in his responsiveness within the family and a deterioration in his behaviour. Mr and Mrs [redacted] stress that there were already difficulties in this respect prior to July, but it would appear that the arrival of the new child has increased and highlighted the problems William is presenting within the family.

iii What are the child/young person's relationships like with adults and other children/young people in the placement?

Despite onging concerns about William's low level of responsiveness within the family, at the last review in June Mr and Mrs [redacted] were reporting that there was an underlying trusting and affectionate relationship between William and themselves and that there was a solid relationship between William and their own children. William reported feeling very much 'part of the family'. These relationships appear to have deteriorated over the last six months. There is a lower level of trust between William and his carers. William has stated that he feels his carers do not love him. Mr and Mrs [redacted] have become increasingly frustrated by William's withdrawal of emotional participation in the family.

ADD ADDITIONAL PAGES IF REQUIRED

iv Does the child/young person understand and accept the rules and guidance provided by staff/ carers? Has s/he been subject to any sanctions? If so, what, how often and with what result?

William has had to learn to cope with the cooperative basis of the rules operating in the [redacted] household, which has given him greater responsibility to deal with. Until recently he has appeared to be learning, by trial and error, and generally his behaviour was not regarded as a problem by Mr and Mrs [redacted] He has been subject to sanctions when required eg hitting [redacted] having a tantrum or huff.

William is aware that some of his behaviours are unacceptable within the household, particularly physical violence. Until recentl he has worked hard, and generally successfully, to reduce such behaviours.

However, recently he has made it increasingly clear that he does not accept the rules of behaviour in the household, and also unaccepting of any sanctions eg going to his room to cool off. As a result his behaviour has been increasingly difficult to control. Mr and Mrs [redacted] feel that William's current behaviour is having a negative impact on the whole family.

v How does the child/young person spend his/her leisure time? Are there activities s/he would like to be able to do which s/he is not doing?

Although William's team ice hockey sessions have had to end because of inappropriate timing, William continues to ice skate, play football and go swimming with other family members. He has a good circle of schoolfriends within the village whom he plays with out of school. However, recent aggressive incidents between William and some of his friends have threatened these friendships. William is aware of this and has made a sustained effort to improve his social behaviour.

vi Are there any concerns about the child/young person's safety either because of his/her own or other people's actions? If yes, describe what will be done to protect him/herself.

Yes. William's explosive and violent outbursts threaten the safety of others and himself. Not only is he open to possible physical retaliation, it is also possible that he may hurt himself in the heat of the moment. Attempts are being made to help William learn how to control his impulsive outbursts. See below.

ADD ADDITIONAL PAGES IF REQUIRED

vii Does the child/young person feel safe in the placement? If not, describe why and outline what is being done to help him/her feel safer.

William has felt very safe in placement, but it is clear, both from his recent behaviour and discussions with myself that he feels quite insecure at present in terms of his 'place' in the family. William has been encouraged to (a) use strategies to curb his impulsive behaviour and (b) communicate more with Mr and Mrs [redacted] It has been made quite clear to him what is required to keep the placement secure. Although William understands this, he is having great difficulty translating this into practice.

viii Is the placement appropriate for the child/young person? Is the placement stable, fragile or approaching breakdown? Is a move needed for other reasons eg a time limited placement? If the placement might need to end, what alternative(s) has/have been considered and what needs to be done to achieve it?

William's placement has been seen as entirely appropriate to meet William's short and longer term needs and has been stable and successful for nearly three years. However, at present the placement must be seen as extremely fragile and requiring sustained support. The writer has previously expressed concern regarding the possible permanent placement of a child in the family, and the care that would be needed in such an event to ensure that any such placement did not jeopardise William's sense of security and belonging within the family and/or result in a diminution of family activities and stimulation and attention to William's needs. In the event, the family has recently had to incorporate an unplanned and unmatched placement of uncertain duration, and while this may not be the only cause of the deterioration observed, there is little doubt that this event has seriously destabilised William. A planning meeting is being held on 27th November to explore possibilities and options to support William and the family.

17 **Please describe the child/young person's development since the last Review.** (If this is the first Review, describe what has happened since the child/young person started to be looked after away from home). Make sure you describe positive developments as well as any problems. Always record something under each heading. Attach copies of any relevant reports at Section 5 of the Review folder.

i How is the child/young person's health? Has the child/young person had or refused any assessments or treatment? If the child/young person is disabled, are there any specific needs or issues arising for him/her or his carer(s)?

William's general physical health is excellent.

William's secondary teeth are either not coming through or are coming through incorrectly. He is currently undergoing orthodontic investigation to correct the problem.

A consultation meeting with Dr Esparon, Child & Family Psychiatry, attended by Mrs [redacted] the [redacted] resource worker and social worker on January 23rd 2002 discussed strategies for helping William cope with anxiety-produced behaviours at home and socially. A further meeting to assess his progress took place on 12th June 2002, at which Mrs [redacted] reported a significant improvement in William's behaviour within the family. Consequently, it is was not anticipated that any further consultations would be required. However, in view of the deteriorating situation within the household a further consultation with Child and Family Pyschiatry was held on 20th November in order to try and clarify the nature of William's problems, the nature of the interaction within the family, and possible ways forward.

ADD ADDITIONAL PAGES IF REQUIRED

ii How is the child/young person progressing in pre-school provision/school/training/college/ work? Are there barriers to him/her achieving his/her potential? If so, describe them. Does the child/young person have an education plan? If so, what date was it or will it be reviewed?

William is in a small, composite class at Auchterhouse Primary school, where he is in P7 He has integrated well and gets on well with his classmates and teachers. Both he, [redacted] are well integrated into the social life of the school and village. Auchterhouse PS has taken a proactive and pragmatic approach to William's slow educational development and has produced an IEP for 2002-3 to focus on his mathematical and language/conceptual development. The school has concentrated on building up his confidence and William has been responsive to appreciation of his efforts. William's Head Teacher has taken Learning Support advice and has incorporated this into her teaching of William, so that he continues to receive a significant level of one-to-one attention. There continues to be slow but significant improvement in educational attainment in all basic areas, ie reading, writing and arithmetic. The Head Teacher is communicating with Monifieth High School in preparation for William's move there in 2003. Wiliam will initially be placed within a small unit and receive learning support to assist his integration into the school.

iii What sense does the child/young person have of his/her identify eg concerning gender, disability, sexuality, religion, culture, ethnicity, language, self worth, knowledge and understanding of own and family circumstances? What is being done to support the child/young person to achieve a positive sense of identity?

Social Worker has continued lifestory work with William, which is now in the final stages of completion William has an increasingly good sense of his birth family identity and history. He has expressed curiosity about his family history and actively developed questions to ask his parents.

William has regular contact with both his birth parents and immediate siblings, which is viewed positively by Mr and Mrs [redacted] William has stated that he wishes to maintain birth family contact at the current level.

William's self-esteem, which appeared to be developing up until the summer, appears to have dropped rather disastrously since, with William perceiving himself as the cause of the problems relating to physical violence at home, school and socially, even when this is not in reality the case on some occasions, and feeling a loss of ability to control own behaviour or alter the home situation. William needs to engage in some activity which he can claim some success in, as a matter of urgency.

iv With whom is contact taking place? Is it taking place as often as planned? What effect is it having on the child/young person? What contribution do the parent(s) or people with parental responsibilities make to the child/young person's day to day care?

Contact continues to be planned on a monthly basis with each parent individually, and contact with both parents is generally good, though superficial. Over the last six months Mr Tarbett has been generally reliable in his attendance, while Ms Robertson's reliability has decreased. William presents as sanguine when his parent does not turn up, but the cumulative effect on William of parental unreliability is concerning, as it is likely to feed into his feelings of poor self-worth.

William continues to have contact with [redacted] during the school holidays, although contact with [redacted] is sometimes difficult to arrange because of his carers' busy lifestyle. The Department has taken a proactive approach to ensuring that regular contact with [redacted] is maintained, as both [redacted] and William wish this to be the case.

ADD ADDITIONAL PAGES IF REQUIRED

v How does the child/young person relate with members of his/her family? Have there been any changes in these relationships or of family membership? How have these affected the child/young person?

See above.

William enjoys meeting with his mother. He also enjoys seeing his younger half-brothers [redacted] but they are now rarely brought to William's contacts with his mother. He is ambivalent about his relationship with his father, which is fairly superficial, but the anxiety and anger which used to precede contact with his father, because of his unreliability, has disappeared. William continues to have a strong relationship with [redacted] less so with [redacted]

vi How does the child/young person present himself in social situations? What impression does s/he make on other people?

William is becoming increasingly socially adept in different social situations and generally behaves appropriately. He is popular with his peers and well-liked by his workers and teachers.

vii Describe the child/young person's behaviour. How is s/he developing emotionally? Have there been any changes? If so, give details and possible reasons why you think they happened.

At the last review I noted that: - 'William's behaviour is generally appropriate and he presents no particular problems in this regard, either at home or at school. William's carers note that he can be moody at times at home, but this does not present a major problem in the family. William's emotional development continues to require careful monitoring by all parties. William is developing significant attachments within his foster family and is also developing the ability to self-reflect on his actions and its impact and consequences for others. He is profiting from the high level of behavioural and emotional skills available to him within his foster family'.

Since then there has been the deterioration in the family situation noted above. The same problems are not noted at school. Dr Esparon and Ms Sherrard, Child & Family Psychiatry are of the view that there is a significant disparity in the level of William's cognitive and emotional development at present, which is increasingly difficult both for William and his carers to cope with. Ms Sherrard has also expressed concern about William's increasing use of impulsive aggression as a means of expressing himself. Dr Esparon and Ms Sherrard are of the view that William requires intensive work over a period of time to resolve his cognitive/emotional difficulties and queries whether this can take place within a family setting.

ADD ADDITIONAL PAGES IF REQUIRED

viii What self care skills does the child/young person have? Are there any barriers to the child/young person achieving appropriate self care skills? If so, describe them.

William is fully self-caring, although like all boys of his age, he requires constant reminders. William is becoming quite fashion conscious and his personal presentation is excellent. He has recently had his ear pierced, with his mother's consent and carers' agreement.

18 Please describe the child/young person's, and his/her family's, relationship with you since the last Review. (If this is the first Review, describe what has happened since the child/young person started to be looked after away from home). If there has been a change of social worker, what effect has this had on the child/young person and his/her family? Make sure you record positive developments as well as any problems.

William and I have met on a regular basis to discuss his progress in placement, his carer and family relationships and to work on issues around eg emotional development, life story etc. William generally has a comfortable and open relationship with myself and Maureen Petrie, who supervises family contact. William is well able to use his time with me, using it as a time to self-reflect.

Other than by letter I have had not contact with either Mr Tarbett or Ms Robertson since the last review, although meetings have been offered to keep them up to date with developments and discuss the contact issues which were raised at the last review. However, there has been regular contact with the Department through Mrs Petrie.

19 Are there any other significant developments for the child/young person not outlined in Questions 16-18 above?

No

20 I have checked this report for accuracy and completeness. [If applicable] The following questions have not been fully completed because:

Signed _____ Name *INGRID VON ARNIM* (BLOCK CAPITALS)

Date *26th November 2002* Designation *SOCIAL WORKER*

Dundee City Council Social Work

Unique Reference Number

Looking After Children in Scotland:
Good Parenting, Good Outcomes

REVIEW OF THE CARE PLAN

PART 2
Carers'/Key Worker's Report

Name of the child/young person: WILLIAM TARBETT

Current Placement Address: [redacted]

Date of Review: Day 03 Month 12 Year 2002

1 **Please describe what has happened in the child/young person's placement since the last Review.** (If this is the first Review, describe what has happened since the child or young person started to be looked after away from home). Make sure you describe positive developments as well as any problems. Always record something under each heading.

i Has there been a change of placement? If yes, describe the circumstances and the effects on the child/young person.

NO CHANGE

ii Have there been any significant changes within the current placement which have affected the child/young person eg someone arriving or leaving?

ANOTHER PLACEMENT HAS STARTED, INITIALLY ON A TEMPORARY BASIS, IN AUGUST 2002. BOY, AGED 13 YRS, WITH ADHD. ALTHOUGH WILLIAM AND HIM SUPERFICIALLY GET ON TOGETHER. THIS PLACEMENT HAS MADE WILLIAM FEEL LESS SECURE AND THROWN SOME OF HIS BEHAVOURAL PROBLEMS INTO SHARP RELIEF.

ADD ADDITIONAL PAGES IF REQUIRED

iii What are the child/young person's relationships like with adults and other children/young people in the placement?

WILLIAMS RELATIONSHIPS WITH OTHERS TEND TO BE PATCHY, DEPENDING ON HIS MOOD AND LEVEL OF CO-OPERATION. HE DOES NOT HAVE A PARTICULARLY GOOD RELATIONSHIP WITH [redacted] AT THE MOMENT.

iv Does the child/young person understand and accept the rules and guidance provided by staff/carers? Has s/he been subject to any sanctions? If so, what, how often and with what result?

GENERALLY YES, ALTHOUGH THERE HAVE BEEN MORE AND MORE FREQUENT INSTANCES OF WILLIAM DEFYING RULES, REFUSING TO CO-OPERATE AND THREATENING TO DESTROY PROPERTY OR HURT OTHERS. THIS OFTEN MAKES SANCTIONS MORE DIFFICULT. WILLIAMS REFUSAL TO ACKNOWLEDGE OR ACCEPT RESPONSIBILITY FOR THINGS ALSO ADDS TO THIS.

v How does the child/young person spend his/her leisure time? Are there activities s/he would like to be able to do which s/he is not doing?

WILLIAM STILL ENJOYS AN ACTIVE LEISURE TIME. PLAYING FOOTBALL, ICE SKATING, GOLF DRIVING RANGE, OCCASIONAL TRIPS TO SKATEPARK, SWIMMING, CINEMA ETC. HE HAS RECENTLY BEGAN ATTENDING THE VILLAGE SUNDAY SCHOOL.

vi Are there any concerns about the child/young person's safety, either because of his/her own or other people's actions. If yes, describe what will be done to protect him or her.

WILLIAMS TEMPER AND AGGRESSION ARE OFTEN OUTWITH HIS CONTROL. HE HAS BEEN IN FREQUENT FIGHTS WITH FRIENDS AND OTHERS IN THE HOUSE, ON OCCASIONS, THIS HAS INVOLVED PHYSICAL INTERVENTION BY OTHER PEERS TO SEPARATE HIM. ONE ONE OCCASION THIS RESULTED IN HIM HAVING A GRAZED SHOULDER THROUGH FIGHTING.

ADD ADDITIONAL PAGES IF REQUIRED

vii Does the child/young person feel safe in the placement? If not, describe why and outline what is being done to help him or her feel safer.

WILLIAM FEELS PHYSICALLY SAFE IN THE PLACEMENT BUT HIS BEHAVIOR HAS LED TO HIM FEELING LESS SECURE EMOTIONALLY. THIS IS DIFFICULT TO BALANCE BECAUSE WILLIAM FINDS IT HARD TO EXPRESS HIMSELF AND ACKNOWLEDGE HIS RESPONSIBILITY.

viii Is the placement appropriate for the child/young person? Is the placement stable, fragile or approaching breakdown? Is a move needed for other reasons eg a time limited placement? If the placement might need to end, what alternative(s) has/have been considered and what needs to be done to achieve it?

PLACEMENT IS PROBABLY STILL APPROPRIATE BUT POTENTIALLY VERY FRAGILE. EVERY TIME WILLIAM USES VIOLENCE IN THE HOUSE, REFUSES TO CO-OPERATE AND IS DEFIENT, THIS ADDS TO THIS.

2 **Please describe the child/young person's development since the last Review.** (If this is the first Review, describe what has happened since the child/young person started to be looked after away from home). Make sure you describe positive developments as well as any problems. Always record something under each heading.

i How is the child/young person's health? Has the child/young person had or refused any health assessments or treatment? If the child/young person is disabled, are there any specific needs or issues arising for him/her or you as carer(s)?

WILLIAM HAS ENJOYED GOOD HEALTH. HE IS UNERGOING ORTHODONTIC ASSESSMENT TO LOOK AT THE DELAY IN HIS ADULT TEETH EMERGING, ALTHOUGH HE HAS LOST 2 OR 3 BABY TEETH IN THE PAST 3-4 MONTHS. WILLIAM RECENTLY HAD HIS EAR PIERCED.

ADD ADDITIONAL PAGES IF REQUIRED

ii How is the child/young person progressing in pre-school provision/school/training/college/work? Are there barriers to him/her achieving his/her potential? If so, describe them. Does the child/young person have an education plan? If so, has it been reviewed or does it need to be reviewed?

WILLIAM APPEARS TO ENJOY SCHOOL BUT STRUGGLES ACADEMICALLY. ANY PROGRESS IS VERY SLOW. HE IS DUE TO MOVE UP TO S1 NEXT YEAR AND WILL CONTINUE TO NEED LEARNING SUPPORT TO DO THIS.

iii What sense does the child/young person have of his/her identity eg concerning gender, disability, sexuality, religion, culture, ethnicity, language, self worth, knowledge and understanding of own or family circumstances? What is being done to support the child/young person to achieve a positive sense of identity?

WILLIAM IS VERY MUCH A TARGET AND HAS BEEN UNDERTAKING LIFE STORY WORK RECENTLY. AT TIMES THIS HAS BEEN VERY TRAUMATIC FOR HIM.

iv With whom is contact taking place? Is it taking place as often as planned? What effect is it having on the child/young person? What contribution do the parent(s) or people with parental responsibilities make to the child/young person's day to day care?

WILLIAM STILL SEES HIS MUM & DAD EVERY 4 WEEKS AND HAS BEEN UPSET WHEN HIS MUM WAS UNABLE TO ATTEND CONTACTS. THE APARTMENT ORGANISE [redacted] CONTACTS AND HE HAS SEEN [redacted] TWICE SINCE AUGUST ORGANISED BY CARERS.

ADD ADDITIONAL PAGES IF REQUIRED

v How does the child/young person relate with members of his/her family? Have there been any changes in these relationships or of family membership? How have these affected the child/young person?

WILLIAM HAS HAD RELATIVELY SUPERFICIAL CONTACTS WITH FAMILY MEMBERS AND DOES NOT TALK ABOUT THEM IN BETWEEN VISITS. CONTACTS WITH [redacted] HAVE NOT BEEN GREAT, AND HE STILL TALKS ABOUT [redacted] & PATTERNS OF BEHAVIOR AS IF HAPPENING 5-6 YEARS AGO.

vi How does the child/young person present him/herself in social situations? What impression does s/he make on other people?

WILLIAM CONTINUES TO MAKE GOOD SOCIAL IMPRESSIONS ON OTHERS AND IS OFTEN INVITED ROUND TO FRIENDS HOUSES. ETC. HOWEVER, WHEN OUT ON TRIPS WITH CARERS/ HOLIDAYS ETC HE CAN BE SULLEN RUDE AND ARGUMENTATIVE.

vii Describe the child/young person's behaviour. How is s/he developing emotionally? Have there been changes? If so, give details and possible reasons why you think this happened.

WILLIAM'S BEHAVIOR CAN BE UNPREDICTABLE. WHEN IN A GOOD MOOD HE IS WELL-BEHAVED BUT WHEN THINGS DO NOT APPEAR TO BE GOING HIS WAY HE CAN BE VERY DIFFICULT, VERBALLY ABUSIVE AND PHYSICALLY UNCO-OPERATIVE ELEMENTS OF WILLIAMS EMOTIONAL BEHAVIOR ARE MORE DEVELOPED THAN OTHERS.

ADD ADDITIONAL PAGES IF REQUIRED

viii What self care skills does the child/young person have? Are there any barriers to the child/young person achieving appropriate self care skills? If so, describe them.

WILLIAM HAS GOOD SELF CARE SKILLS AND TAKES PRIDE IN HIS APPEARANCE.

3 **Please describe the child/young person's and his/her family's relationship with the social worker since the last Review?** (If this is the first Review, describe what happened since the child/young person started to be looked after away from home). If there has been a change of social worker, what effect has this had on the child/young person, his/her family and you as carer(s)? Make sure you record positive developments as well as any problems.

WILLIAM CONTINUES TO HAVE GOOD RELATIONSHIPS WITH HIS SOCIAL WORKER

4 I have checked this report for accuracy and completeness. [If applicable] The following questions have not been fully completed because:

Signed [signature] Name DEBBIE BOOTH (BLOCK CAPITALS)

Date 1/10/02 - Designation CARER