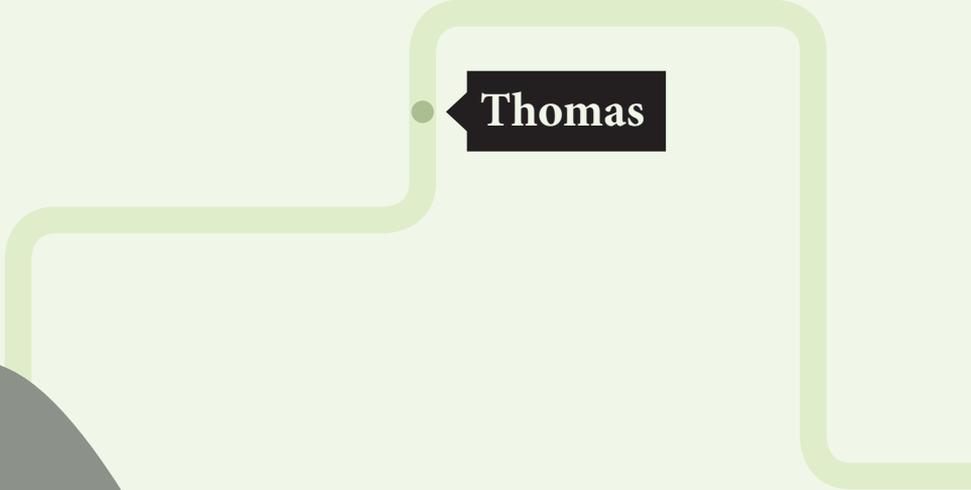


Thomas is a 37 year old male supported by NHS Lanarkshire Alcohol and Drugs Service on a reducing methadone programme with the aim of detox. He is living with his partner and 3 children, one of which is his biological child.



Thomas

Exemplar 1

Promoting Well-being Assessment

NHS Lanarkshire LAADS Team

1	Substance Misuse/Addictions Services				Date started/ reviewed: <i>06/09/13</i>		Joint working with another agency						
	THOMAS				Date completed: <i>13/09/13</i>		Integrated Working						
						Statutory Intervention							
SECTION 1. PERSONAL DETAILS						SECTION 2. REASON FOR ASSESSMENT							
Parent/Carer (adult service user) name: <i>Thomas B****</i>			Date of Birth/CHI if known: <i>**/**/1976</i>			1. Routine as part of the service							
Nature of caring responsibility for a child/children: <i>Thomas is the biological father of 4 year old Josh and parent to two daughters, aged 12 and 16 to his partner's previous relationship</i>								2. To share information with the Named Person					
Current known address: <i>** M***** ***, Airdrie</i>			Telephone numbers: <i>01234*****</i>							3. To ask another service to help the service user			
Parent/carer 2 name and DOB if known: <i>Diane B****</i>			Telephone numbers: <i>0987*****</i>									4. As part of an Integrated Assessment and Child's Plan	
Address of parent /carer 2 if known and different from above: <i>as above</i>													
Named Person/s (full contact details): <i>Head Teacher, Airdrie Town Centre Primary School (he is not sure of the name of his Named Person) Guidance Teacher Airdrie Secondary School</i>						Current situation including substance related issues: <i>Thomas is a 37 year old male on a life license. He withdrew from heroine and was stabilised on methadone whilst in prison. LAADS are now working with him to reduce his methadone prescription, aiming for detox. Thomas is parenting 3 children, as the biological father of a 4 year old boy and two daughters aged 16 and 12 to his partner's previous relationship. He has attended all appointments and engages well with his support programme. There are no immediate concerns about how Thomas promotes the children's well-being.</i>							
Lead Professional/s if any (full contact details): <i>Thomas is not sure whether Josh has a Lead Professional but is sure the girls do not</i>													
SECTION 3. STATUS													
How many contacts is this assessment based on?		Informed Consent in place			Yes			No	Date:				
Please indicate number of home visits, if any		Reason for sharing without consent:											
The parent is currently receiving a service from our agency		SECTION 4. RELEVANT CHILDREN											
		Name:		D.O.B.		Address if different		Educational Establishment					
I have been asked to support the adult because of the needs of the child		Yes		Josh B*****		<i>**/**/2010</i>		<i>As above</i>		<i>Airdrie Central Primary</i>			
		No		Amy B*****		<i>**/**/2001</i>		<i>As above</i>		<i>Airdrie High School</i>			
		No		Dee B*****		<i>**/**/1997</i>		<i>As above</i>		<i>As above</i>			
Continue on separate sheet if necessary													

SECTION 5. HOW THE SERVICE USER IS PROMOTING THE CHILD/CHILDREN'S WELL-BEING			
SAFE	<p>This is about the care giver promoting safety by protecting from abuse, neglect or harm, at home and in the community</p>		HEALTHY
	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • <i>Thomas has been involved in violent crime in his youth and served a prison sentence and is now on a life license</i> • <i>He reflects on his past life as the mistakes he made in his youth, expresses regret and demonstrates awareness of safe behaviours now</i> • <i>Thomas has reported advising family members of the risks of substance misuse and the consequences</i> • <i>Thomas reports that his partner has no issues with substance misuse</i> 	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • <i>Thomas is free from illicit drug use evidenced by weekly urine tests</i> • <i>Thomas attends all health appointments, has no other known health issues and shows awareness of nutrition and healthy eating</i> • <i>Thomas developed an interest in the gym whilst in prison</i> • <i>Thomas takes regular exercise which involves his 4 year old son</i> • <i>Thomas's physical presentation is good</i> 	
ACHIEVING	<p>This is about the care promoting achievement by encouraging learning and development with support and guidance to acquire skills, confidence and self esteem</p>		NURTURED
	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • <i>Thomas has completed a plumbing course during his prison sentence and is now proactively seeking employment. He has recently completed a number of casual shifts with a local firm</i> • <i>Thomas reports that he and his partner suspected that Josh may have additional needs and both have persevered to have an assessment and plan for Josh which is now in place. Josh has a diagnosed learning difficulty</i> • <i>Thomas has engaged with the discussion on promoting children's well-being and shown understanding of the eight indicators</i> 	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • <i>Thomas reports that he has a supportive relationship with his partner and they have been together for 7 years</i> • <i>He talks expansively about his own experience of nurture in a close family and talks affectionately about family members particularly his mother, grandmother and sister</i> • <i>Josh attends appointments with dad weekly on his way to swimming and a warm and affectionate relationship has been observed</i> • <i>Thomas describes a positive relationship with Josh's sisters</i> 	

SECTION 5. HOW THE SERVICE USER IS PROMOTING THE CHILD/CHILDREN'S WELL-BEING			
ACTIVE	<p>This is about the care giver promoting an active lifestyle by ensuring that the child is stimulated and has opportunities to engage in activities such as play and hobbies that will contribute to healthy growth and development</p>		RESPECTED
	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p>	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p>	
	<ul style="list-style-type: none"> • <i>Thomas swims weekly with Josh and walks the dogs daily with the older girls (the writer sees Thomas on the same day as he takes Josh swimming and has witnessed the child talking about what he has been doing)</i> 		<ul style="list-style-type: none"> • <i>Thomas has been observed communicating effectively with Josh at an age appropriate level</i> • <i>He engages respectfully with treatment by maintaining appointments or texting to re-arrange</i>
RESPONSIBLE	<p>This is about the care giver promoting responsibility by providing structures, boundaries, regular routines and consistent expectations of the child's behaviour including discipline</p>		INCLUDED
	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p>	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p>	
	<ul style="list-style-type: none"> • <i>Thomas reports that he supports the family routines set up by his partner whilst he wasn't there</i> • <i>Josh appears at the clinic as well behaved and polite</i> • <i>Thomas has talked about his expectations of the children's behaviour such as being home on time. He has been challenged by his teenage daughter who questioned his authority because of his own past and Thomas reported that he understood this challenge but held his ground on the boundary with Dee</i> 		<ul style="list-style-type: none"> • <i>Thomas reports that the family is making a new start in the community and there are no issues with prejudice or stigma</i> • <i>He reports that the children are included in their learning settings and Josh has developed a friendship with two boys who share his transport to school</i> • <i>Thomas reports regularly engaging with his extended family about whom he talks warmly</i>

SECTION 6. SUMMARY AND RECOMMENDATIONS

What is your analysis of how the service user is promoting the child/children's well-being? (using the information against well-being indicators)

Thomas has engaged positively with his methadone reduction programme. He demonstrates insight and appropriate responses to promote the children's well-being. There are no known risks to the children's well-being but Thomas is happy to share information with the Named Person/Lead Professional if necessary.

What are you as substance misuse/addictions practitioner doing to encourage the service user to promote well-being?

LAADS is supporting reduced methadone with the aim of detox. Engaged in discussion about children's services, the Named Person and Lead Professional and provided written information about well-being. LAADS has reinforced Thomas's positive progress and observed interest in his children's well-being. He knows he can talk about his children and they are part of discussions

Do you have all the information you need to help the service user promote their child's well-being?

YES

NO

What additional help, if any, may be needed from within your service?

A managed detox programme when Thomas reaches this point

What additional help, if any, may be needed from professionals in an external agency?

None at present

Please circle the course of action you have discussed and agreed with the service user as a result of this assessment (please circle any that apply)

Continue to work together on relevant issues affecting the adult's life which may impact on how they promote their child's well-being

Work together on a specific goal which may positively impact on the child's well-being

Request assistance from within agency to support service user to promote their child/children's well-being

Request assistance from an external agency to support service user to promote their child/children's well-being

Share assessment with the Named Person to make sure the child has the help they need

Share assessment with the Lead Professional as one of the Child's Plan actions

Other e.g. planned closure of service

What are the service user's views about how they promote the child/children's well-being? *I think it's been as hard for Diane and the kids getting used to me being there as it has for me but we're all getting there and things are looking up. It's not great that I haven't been there all the time but it's working out. I just want to get a steady job now and for all of us to get on with things. It's easier being somewhere new where nobody knows anything except what I want to tell them. I think I'm doing well on the methadone and Susan agrees. The kids are doing fine too, especially now Josh has got some help and we are beginning to understand a bit more about what he will need and how to talk to him. I'm getting on better with the girls as well.*

Parent/Carer 2 view:

Practitioner Name:

Susan Sharkey

Designation:

LAADS Nurse

Signature:

Date:

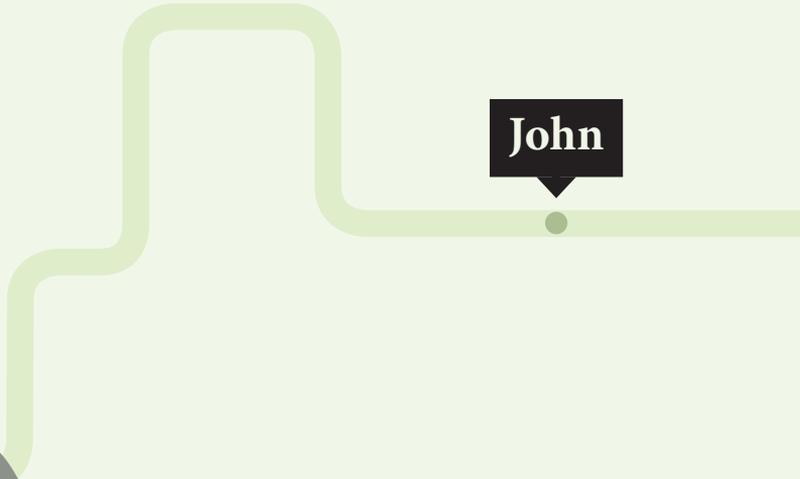
I have seen the assessment and I have had the opportunity to give my views

Service User signature:

Name and contact details of staff member signing off the assessment if different from above

Signature of the Line Manager signing off the Promoting Well-being Assessment where applicable

John is a 35 year old male engaged in a medical detox programme in order to regain access to his four year old daughter.



John

Exemplar 2

Promoting Well-being Assessment

NHS Lanarkshire LAADS Assessment

<h1 style="font-size: 48px; margin: 0;">2</h1>	<h2 style="margin: 0;">Substance Misuse/Addictions Services</h2>			Date started/ reviewed: 05/08/13	Joint working with another agency Integrated Working			
	<h1 style="font-size: 48px; margin: 0;">JOHN</h1>			Date completed: 23/08/13	Statutory Intervention			
SECTION 1. PERSONAL DETAILS					SECTION 2. REASON FOR ASSESSMENT			
Parent/Carer (adult service user) name: <i>John B*****y</i>			Date of Birth/CHI if known: <i>**/**/**78 ****781234</i>			1. Routine as part of the service 2. To share information with the Named Person 3. To ask another service to help the service user 4. As part of an Integrated Assessment and Child's Plan 5. As a review of progress		
Nature of caring responsibility for a child/children: <i>John is the biological father of his daughter, Amy, aged 4 years who lives with her mother. His wife is preventing contact as a result of John's drinking and he is attempting to become sober to re-gain contact</i>								
Current known address: <i>* **** * ****, Calderwood, East Kilbride, ML****</i>			Telephone numbers: ***** ***** (partner)					
Parent/carers 2 name and DOB if known: <i>Isabel B*****y</i>			Telephone numbers: *****					
Address of parent /carer 2 if known and different from above: <i>*** L**** * ****, Eddlewood, East Kilbride ML* ***</i>								
Named Person/s (full contact details): <i>Sandra Patterson, Health Visitor, East Kilbride Public Health Nursing Team Sandra.patterson@nhs.net tel 015571234567</i>					Current situation including substance related issues:			
Lead Professional/s if any (full contact details): <i>N.A.</i>					<i>John has been undergoing a supported home detox from alcohol through the LAADS service and is now 5 days sober reducing from 300 units per week. John is determined to continue abstinence in order to negotiate access to his daughter who is pre-school age. John's ex-wife is the sole carer for Amy at present and she also attends nursery 5 mornings a week. John states he has total confidence in his ex-wife's parenting ability and he reports that Amy is well cared for and a 'happy wee thing'. His primary motivation to detox is to regain access to his daughter. The writer has never met Amy or John's ex wife Isabel and can only report on information provided by John in the course of his treatment. John lives with a non-drinking partner, Michelle whom the writer has met on 5 occasions.</i>			
SECTION 3. STATUS								
How many contacts is this assessment based on? <i>6</i>		Informed Consent in place				Yes	No	Date:
Please indicate number of home visits, if any <i>5</i>		Reason for sharing without consent: <i>Sharing with the Named Person to ensure that Amy can be supported appropriately, no matter the outcome of the medical detox.</i>						
The parent is currently receiving a service from our agency		Yes		SECTION 4. RELEVANT CHILDREN				
No		Name:					D.O.B.	Address if different
I have been asked to support the adult because of the needs of the child		Yes		<i>Amy B*****y</i>	<i>**/**/2009</i>	<i>* ** * ** * ** * ** * Eddlewood, East Kilbride ML****</i>		
No		No						
Continue on separate sheet if necessary								

SECTION 5. HOW THE SERVICE USER IS PROMOTING THE CHILD/CHILDREN'S WELL-BEING

SAFE	<p>This is about the care giver promoting safety by protecting from abuse, neglect or harm, at home and in the community</p> 	HEALTHY	<p>This is about the care giver promoting the highest attainable standards of physical and mental health by accessing suitable health care and supporting with any medical issues</p> 
	<p>Strengths/Achievements (Well-Being) Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • <i>John's ex-wife has taken the decision not to allow John to see his daughter at the moment because she doesn't think it is safe to expose the child to John's level of intoxication</i> • <i>John has demonstrated some awareness of the safety issues around his child by actively seeking support for a medical detox from alcohol</i> • <i>John's partner of 6 months, Michele, a non-drinker, is supporting John to remain sober and re-gain contact with his daughter</i> • <i>John's flat was previously used to host drinking parties and he feels that it needs a bit of a clean with a view to letting Amy visit as he has been having people over and using it as a 'drinking den'. He reports having told previous drinking acquaintances that they are no longer welcome at his house</i> • <i>John states that Amy is safe as her mother does not misuse substances and provides a safe environment</i> 		<p>Strengths/Achievements (Well-Being) Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • <i>John has alcohol dependency issues affecting physical and emotional health. His physical health has been affected by lack of regular food, sleep and exercise, He is malnourished and lacks muscle tone. He has been consuming approximately 300 units of alcohol per week for three years in response to unemployment and stress and acknowledges that he has become psychologically and physically dependent.</i> • <i>John has participated in a discussion about the importance of improving his physical and emotional health which is essential to his own well-being and that of his daughter</i> • <i>He acknowledges that he will be a much better carer if he is physically strong and free from alcohol dependency and he will be a better role model</i> • <i>John reports that Amy has achieved all milestones and suffers from no significant health problems in the care of her mother</i>
ACHIEVING	<p>This is about the care promoting achievement by encouraging learning and development with support and guidance to acquire skills, confidence and self esteem</p> 	NURTURED	<p>This is about promoting nurture by providing a suitable environment in a family setting with additional help if needed, with love, attachment, emotional warmth and encouragement</p> 
	<p>Strengths/Achievements (Well-Being) Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • <i>Contact to date has not permitted any discussions about John's own experience of or attitude towards learning</i> • <i>John has been unemployed as a kitchen fitter for three years but worked for five years before that</i> • <i>John has received information about well-being including 'achieving' and reports having read the information. John reports that he would like to use the money he saves from the purchase of alcohol to make the house more child friendly including a few toys</i> • <i>John reports that Amy attends nursery every day and her mother has told him that she loves the company and shows a good level of concentration and socialisation skills</i> 		<p>Strengths/Achievements (Well-Being) Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • <i>Amy's mother does not want John to see Amy when he is under the influence of alcohol and John reports that he agrees with this decision as "it's no good for the wee one"</i> • <i>The writer has observed a supportive relationship between John and his girlfriend who doesn't drink and she will help him to clean up his house and buy new bedding etc for the room in which Amy will sleep</i> • <i>Amy's mother has agreed to initially allow John contact with Amy during the day and when he achieves a couple of months of sobriety she will consider letting Amy stay overnight at the weekend</i> • <i>John has participated in a discussion about the needs of children to be nurtured</i> • <i>John states that Amy's mother 'dotes on her' but he would like to be more supportive in helping out to allow his ex-wife some time on her own to have a night out</i>

SECTION 5. HOW THE SERVICE USER IS PROMOTING THE CHILD/CHILDREN'S WELL-BEING			
ACTIVE	<p>This is about the care giver promoting an active lifestyle by ensuring that the child is stimulated and has opportunities to engage in activities such as play and hobbies that will contribute to healthy growth and development</p> 	RESPECTED	<p>This is about the care giver promoting respect by ensuring that the child is seen and heard as an individual and encouraged to communicate and express themselves including their views</p> 
	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> John's main activity for a number of years has been to engage in drinking parties. He reflects understanding that replacing this activity with physically exerting activities and things that occupy his mind will help him to remain sober John has reported that he intends to become more active as a positive way of using his time. He has talked about going swimming with his partner as he knows his daughter likes swimming He reports that as well as attending nursery Amy is regularly taken to swimming and soft play by her mum 		<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> John has engaged respectfully with the LADS service communicating openly and responding to advice without aggression or abuse John reports that he and Amy's mother are able to communicate with each other about Amy's needs with the exception of the last two months before ending contact when the relationship broke down The writer is not aware of any issues related to aggression or violence John reports that Amy's mother was not happy about the effect of his drinking on Amy, worrying that it would have an adverse effect on Amy's emotional state and cause her undue anxiety about her dad. She did not believe it was respectful behaviour to expose her daughter to drinking or intoxication
RESPONSIBLE	<p>This is about the care giver promoting responsibility by providing structures, boundaries, regular routines and consistent expectations of the child's behaviour including discipline</p> 	INCLUDED	<p>This is about the care giver promoting inclusion by establishing positive connections for their child with the outside world, including extended family, neighbours and the wider community</p> 
	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> John's own life has lacked structures and routines except those of purchasing and consuming alcohol. John acknowledges that remaining sober will depend on getting in to new, positive routines for eating, sleeping and exercise. Introducing structure and new routines will be a significant factor in determining whether John is able to maintain his abstinence programme During his intervention programme, John has acknowledged the link between his own need for structure in his life and his child's needs. He accepts that Amy needs to know what's happening when she visits and that it will make her more secure to have a regular routine. Whether John will be able to act on his understanding remains to be seen but his increasing awareness is a step in the right direction John reports that his current partner Anne who doesn't drink alcohol seems to be a positive influence on his life. They are finding it easier to get in to a routine over the last five days now that alcohol is not used. She has also been a factor in his decision to detox. Amy's mother has demonstrated a responsible approach to her child by restricting access because of his level of alcohol consumption. John reports that Amy has good structure ,boundaries and routine through her mother 		<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> Apart from his partner, John's main connections were with people who drank alcohol with him He acknowledges that establishing positive contacts and making new relationships with people who don't drink will help him to stay free of alcohol. It has also been explained to him that Amy will benefit from positive contacts also, especially with people who have children her own age John has reported that he would like to re-connect with his brother and sister once he gets on his feet and he feels sorry that he lost touch with them but reports they got sick of lending him money for drink John states that Amy is well supported by others although currently missing a father figure due to her mother excluding him from her life. He does seem optimistic that he will feature in her life again if he manages to stay sober John reports that Amy socialises with his ex-wife's extended family- nieces, nephews etc.

SECTION 6. SUMMARY AND RECOMMENDATIONS

What is your analysis of how the service user is promoting the child/children's well-being? (using the information against well-being indicators)

John accepts that he will be more able to support Amy's well-being once he is sober and maintaining an abstinence programme and demonstrates some understanding of well-being as explained by the writer. He appears well motivated to see his child and take part in her care but it is unknown yet whether he will be able to maintain his alcohol free goals after three years of dependence. John reports Amy's mother as responsible and protective towards her daughter and the relationship between the parents permits communication about Amy although latterly it broke down due to the alcohol. John is unsure about the health visitor (Named Person) being informed but the writer has explained the decision to share. John understands that Amy's health visitor will be more able to support Amy's well-being if she understands fully what's happening at home for the child. Although there is no immediate risk to Amy's well-being whilst contact is restricted, it is not known how long John will sustain his alcohol free goals and whether Amy's mother will permit contact in the near future, therefore, Amy's development should be monitored. LAADS will share information with the Named Person and continue to support John to understand that this is in the best interest of his daughter and a positive support to himself.

What are you as substance misuse/addictions practitioner doing to encourage the service user to promote well-being? *The LAADS role has been to support a medical detox programme encouraging John to maintain motivation which appears to centre around having more contact with his child. LAADS has encouraged Amy as the motivation to stay sober and to become an active part of her life. LAADS has engaged in a conversation about the effects of parental alcohol misuse on children and provided verbal and written information about children's well-being.*

Do you have all the information you need to help the service user promote their child's well-being?

Yes

No

What additional help, if any, may be needed from within your service?

LAADS now needs to manage the transition to South Lanarkshire social work substance misuse service and make sure the new worker has all the information they need

What additional help, if any, may be needed from professionals in an external agency? *A follow on service to support John in continuing his abstinence programme from South Lanarkshire Social Work Substance Misuse Service*

Please circle the course of action you have discussed and agreed with the service user as a result of this assessment (please circle any that apply)

<i>Continue to work together on relevant issues affecting the adult's life which may impact on how they promote their child's well-being</i>	Work together on a specific goal which may positively impact on the child's well-being	Request assistance from within agency to support service user to promote their child/children's well-being	Request assistance from an external agency to support service user to promote their child/children's well-being	Share assessment with the Named Person to make sure the child has the help they need	Share assessment with the Lead Professional as one of the Child's Plan actions	Other e.g. planned closure of service
--	--	--	---	--	--	---------------------------------------

What are the service user's views about how they promote the child/children's well-being?

*It will be better for Amy if I can keep off the drink and get to spend some time with her, I think she needs a dad but I don't want her to grow up with bad memories so I am trying my best to get sober. Me and Michele are trying to clean up the flat so it will be right for Amy once she starts to come over. I'd rather get things sorted out before the health visitor gets told about me.
Now John knows I'm serious, I don't want to keep Amy away, but she's not running about all that drinking and being ignored and left to her own devices. If I can't be there for her and he's drinking then she can't be over. I'm still not sure about Michele but she seems to be good for him. When he's off the drink Amy can see him but we'll wait to see if that happens – he's promised before (gained over the phone whilst writer was in house)*

Parent/Carer 2 view:

Practitioner Name: *Trisha Rhodie*

Designation: *LAADS Nurse*

Signature:

Date:

I have seen the assessment and I have had the opportunity to give my views Service User signature:

Name and contact details of staff member signing off the assessment if different from above

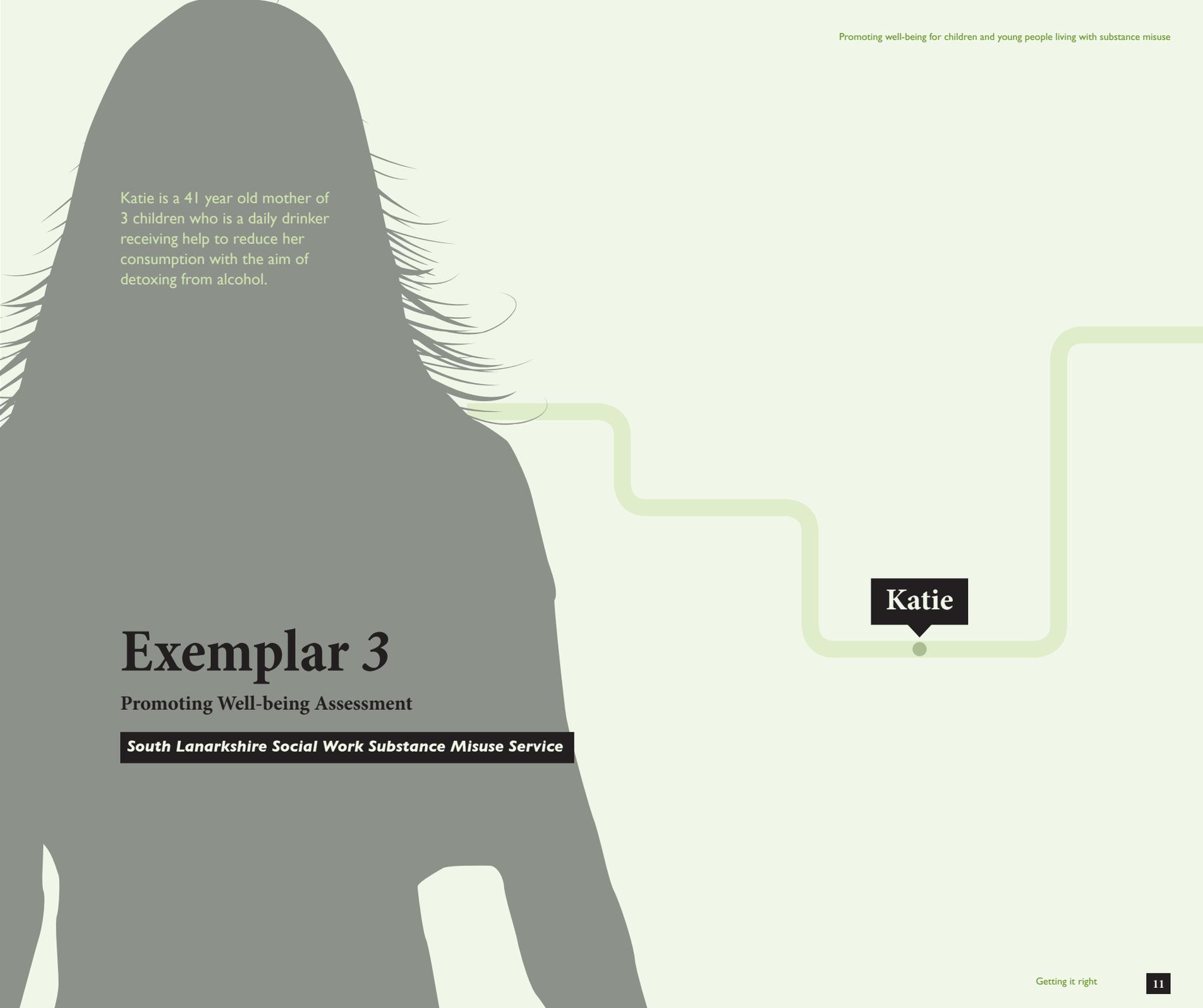
Signature of the Line Manager signing off the Promoting Well-being Assessment where applicable

Katie is a 41 year old mother of 3 children who is a daily drinker receiving help to reduce her consumption with the aim of detoxing from alcohol.

Exemplar 3

Promoting Well-being Assessment

South Lanarkshire Social Work Substance Misuse Service



Katie

3	Substance Misuse/Addictions Services				Date started/ reviewed: <i>01/07/13</i>		Joint working with another agency						
	KATIE				Date completed: <i>24/07/13</i>		Integrated Working Statutory Intervention						
SECTION 1. PERSONAL DETAILS						SECTION 2. REASON FOR ASSESSMENT							
Parent/Carer (adult service user) name: <i>Katie W*****</i>			Date of Birth/CHI if known: <i>**/**/72</i>			1. Routine as part of the service							
Nature of caring responsibility for a child/children: <i>Katie is the full time, sole carer for her three children aged 7,9 and 11</i>								2. To share information with the Named Person					
Current known address: <i>** B**** ******, Hamilton MLI ***</i>			Telephone numbers: <i>0785*****</i>							3. To ask another service to help the service user			
Parent/carer 2 name and DOB if known: <i>Katie has no contact with the children's biological father</i>			Telephone numbers: <i>N.A</i>									4. As part of an Integrated Assessment and Child's Plan	
Address of parent /carer 2 if known and different from above: <i>N.A</i>													
Named Person/s (full contact details): <i>Patricia Wright, Depute Head, Castle Primary, Hamilton, 01698 273501 / Mark Brown, Guidance Teacher, Park Secondary School Hamilton, 0169277811</i>						Current situation including substance related issues: <i>Katie was a looked after child and adopted at aged nine years. She has five children aged between 24 and 7 years. The eldest 2 boys were adopted in 1996 due to her inability to care for them, following a 3 years period of homelessness and alcohol abuse. Katie began another relationship 12 years ago and has 3 children to this union which ended 5 years ago. The father has no contact with the three children. She is now the sole carer of these children aged 7, 9 and 11 years. Katie has experienced alcohol addiction previously 1994 -1997 followed by a 10 year period of abstinence. However, Katie has relapsed and has been drinking daily for a period of 4 years. This has increased significantly in the last year with daily consumption at between 2 – 3 litres of cider (12 – 24 units per day, 72 – 168 per week). Katie also experiences poor mental health. She is being supported by social work substance service and children and families and has been referred for a medical detox.</i>							
Lead Professional/s if any (full contact details): <i>Darren</i>													
SECTION 3. STATUS													
How many contacts is this assessment based on? <i>5</i>		Informed Consent in place		Yes	No			Date:					
Please indicate number of home visits, if any <i>3</i>		Reason for sharing without consent: <i>Katie is aware that information is being shared to promote, support and safeguard her children's well-being</i>											
The parent is currently receiving a service from our agency		Yes		SECTION 4. RELEVANT CHILDREN									
		No		Name:		D.O.B.		Address if different					
I have been asked to support the adult because of the needs of the child		Yes		<i>Claire W*****</i>		<i>**/**/2004</i>		<i>as above</i>					
		No		<i>Andrew W*****</i>		<i>**/**/2002</i>		<i>as above</i>					
Continue on separate sheet if necessary				<i>Anna W*****</i>		<i>**/**/2006</i>		<i>as above</i>					

SECTION 5. HOW THE SERVICE USER IS PROMOTING THE CHILD/CHILDREN'S WELL-BEING

SAFE	This is about the care giver promoting safety by protecting from abuse, neglect or harm, at home and in the community		HEALTHY	This is about the care giver promoting the highest attainable standards of physical and mental health by accessing suitable health care and supporting with any medical issues	
	Strengths/Achievements <Well-Being> Pressures/Areas for Improvement	Strengths/Achievements <Well-Being> Pressures/Areas for Improvement			
	<ul style="list-style-type: none"> <i>Katie was looked after as a child and adopted at age nine as a result of her parents' alcohol problems. She maintains a relationship with her adoptive parents</i> <i>The writer has carried out home visits and Katie's home was well maintained with no obvious hazards</i> <i>Children and families social work have been involved in this episode and on a previous occasion in 2011 where concerns for Katie's children's were raised by a neighbour. This has not been escalated to statutory intervention and Katie works with a family support worker on a voluntary basis. An interagency meeting is due to be held in August 2013 where the risks to Katie's children and future intervention will be discussed</i> <i>Katie uses alcohol from tea time most days, consuming between 2 -3 litres of strong cider (12 – 24 units) and her children regularly witness her under the influence of alcohol. Katie recognises that she is putting her children's safety at risk however continues to minimise the effects that her alcohol use has on her ability to keep them safe</i> <i>Although she has rules and boundaries in place for her children playing outside in the community the writer has questioned the extent of these being put into place when Katie is under the influence of alcohol in the evenings</i> <i>Katie has minimal support from family and friends in helping to ensure safety and provide supervision for the children. Katie appears to be isolated in the community naming one friend who she considers as helpful and supportive. This appears to be a positive relationship and Katie advises that this friend does not use substances</i> 			<ul style="list-style-type: none"> <i>Katie reports that she attends all appointments when required for her children and ensures that their health needs are met</i> <i>Katie reports that she does not eat regularly due to her alcohol use however provides home cooked meals for her children</i> <i>Katie shows concern that her son Andrew is experiencing anger at times and struggles with his mood. At present she plans to discuss this with her GP at an upcoming appointment. Katie recognises that the impact of her alcohol use and unpredictable behaviour may be influencing Andrew's mood</i> <i>Katie has previously reflected on emergency health needs and understands that being under the influence of alcohol when her children are in her sole care could endanger their health</i> <i>Katie struggles to understand her own emotions and is experiencing poor mental health. She acknowledges that she is not currently in the strongest position to support positive emotional wellbeing for her children</i> <i>It is the writer's view that an area for future improvement would be for Katie to demonstrate understanding that her children's emotional health is just as important as their physical health and begin to engage in activities which may improve their emotional health</i> 	

SECTION 5. HOW THE SERVICE USER IS PROMOTING THE CHILD/CHILDREN'S WELL-BEING

ACHIEVING	<p>This is about the care promoting achievement by encouraging learning and development with support and guidance to acquire skills, confidence and self esteem</p>		NURTURED	<p>This is about promoting nurture by providing a suitable environment in a family setting with additional help if needed, with love, attachment, emotional warmth and encouragement</p>	
	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p>	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p>			
	<ul style="list-style-type: none"> • <i>Katie has discussed her children's future with the writer on more than one occasion and appears to hold schooling in high regard. Katie advises that she encourages homework however struggles with some of the more advanced areas of learning that her children are progressing to</i> • <i>Katie encourages her son Andrew to help his sisters and advises that this works well. Katie talks about her aspirations for her children during a home visit where Andrew was discussing plans for his future with the writer</i> • <i>Katie describes an unsettled childhood for herself where she was moved between foster carers and care homes before being adopted. This would reflect an unsettled education however Katie has never expressed any difficulties in this area to the writer</i> 			<ul style="list-style-type: none"> • <i>Although Katie had an unsettled start to life she describes a loving relationship with her adoptive mother and father. She advises that she focuses on replicating this with her own children and shows that they are cared for and loved by showing affection with cuddles and kisses and telling them that they are loved which has been observed</i> • <i>Katie struggles to recognise the impact that her alcohol use has on her children's feeling of being nurtured</i> • <i>Katie recognises that her behaviour may be unpredictable when under the influence of alcohol but she does not make the connection between this and her children's experience of nurture being inconsistent</i> • <i>It is the writer's view that when Katie's children are seeing her under the influence of the quantity of alcohol she consumes, they may not feel secure and nurtured as their mother's behaviour is unpredictable</i> 	

SECTION 5. HOW THE SERVICE USER IS PROMOTING THE CHILD/CHILDREN'S WELL-BEING

ACTIVE	This is about the care giver promoting an active lifestyle by ensuring that the child is stimulated and has opportunities to engage in activities such as play and hobbies that will contribute to healthy growth and development		RESPECTED	This is about the care giver promoting respect by ensuring that the child is seen and heard as an individual and encouraged to communicate and express themselves including their views	
	Strengths/Achievements <Well-Being> Pressures/Areas for Improvement			Strengths/Achievements <Well-Being> Pressures/Areas for Improvement	
	<ul style="list-style-type: none"> • <i>Katie advises that her children are constantly active and spend a lot of their time out playing with friends. The writer has witnessed this on home visits with Andrew playing on his bike with friends and Anna having fun with water balloons</i> • <i>Katie admits that her available income for activities with her children is compromised due to amount of money she spends on alcohol. Katie recognises that this is an area for improvement and contributes to her being motivated to make lifestyle changes</i> • <i>The family do not always have disposable income for activities out with the family home. The writer has encouraged low income or free activities however the writer is not aware that Katie's children have been beyond their street during the six week summer holidays</i> 			<ul style="list-style-type: none"> • <i>Katie reports that she was respected by her adoptive parent's however through different life events did not respect herself at times and instead felt that she did not deserve to be respected and instead had to be punished</i> • <i>Katie feels strongly that her children should feel respected as she would not wish them to relive her experiences and also promotes that they should respect each other</i> • <i>Katie is struggling with Andrew's behaviour at present and at times feels that he is not respecting her or his siblings. It is not known how Claire and Anna may be responding to this</i> • <i>An area to explore may be the extent to which the children are feeling heard whilst Katie is under the influence of alcohol in the evenings</i> • <i>The writer believes that it may help the family to understand Andrew's anger and the reasons for it</i> 	

SECTION 5. HOW THE SERVICE USER IS PROMOTING THE CHILD/CHILDREN'S WELL-BEING			
RESPONSIBLE	<p>This is about the care giver promoting responsibility by providing structures, boundaries, regular routines and consistent expectations of the child's behaviour including discipline</p>		INCLUDED
	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p>	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p>	
	<ul style="list-style-type: none"> • <i>The writer has witnessed Katie and her children being up and dressed at 9 am in the morning which provide a morning routine</i> • <i>Although Katie does not eat with her children in the evening she reports that she ensures that a home cooked meal is prepared prior to using alcohol which shows a level of responsibility (this was recently verified by the family support worker when she made an unannounced home visit and witness meal preparations)</i> • <i>At present Katie's behaviour is changeable and inconsistent due to her level and pattern of alcohol use while her children are in her care.</i> • <i>Bed time routine may be an area to explore as Katie reports being under the influence of alcohol most evenings and her ability to supervise and monitor bed time may be compromised depending on her use of alcohol</i> 	<ul style="list-style-type: none"> • <i>Katie has been observed actively encouraging her children to make connections with other children in the community</i> • <i>The children have relationships with Katie's adoptive parents, their maternal grandparents however their mother's isolation may impact on the links that they have with family, friends and the wider community</i> • <i>Katie's children do not have relationships with their paternal extended family which may restrict the children's inclusion</i> • <i>Katie recognises the above and sees this as contributing to her motivation to change her lifestyle</i> • <i>Katie also sees that in her addressing her low mood and isolation the children will benefit and become more included in the wider community</i> • <i>While the writer has been present the children's friends have called round for them and they have been allowed out to play</i> • <i>Katie feels stigma in her local community as she feels that people know she uses alcohol and judge her for this. She does not want this to impact on her children's friendships and social aspects of their lives. This insight shows that Katie is reflective of the effect that other parent's attitudes to her alcohol use may have on her children</i> 	

SECTION 6. SUMMARY AND RECOMMENDATIONS

What is your analysis of how the service user is promoting the child/children's well-being? (using the information against well-being indicators)

- This assessment has highlighted that there are positive examples of Katie promoting her children's well-being such as encouragement to learn, nourishing food, morning routines, affection, positive attention and providing opportunities to play. However, at present the writer is concerned about consistent promotion of the children's safety, health, nurture and routines when she is using alcohol while they are in her care. This is being monitored on an ongoing basis and will be discussed at an inter agency meeting in the near future. It is a concern that Katie minimises the effect of alcohol use on her children's emotional health, safety and consistency of care and requires to develop further insight into the impact of alcohol use on her children's development. At times she reflects on the improvements that would be made if she was alcohol free and understands that she would be better able to care for her children
- Despite this Katie continues to use alcohol on a daily basis to deal with stressful situations and as a coping mechanism for how she feels which is in turn giving her children messages about how to cope. It is the writer's view that in addressing her alcohol use and poor mental health Katie would be in a stronger position to promote her children's well-being.
- Although a warm relationship has been witnessed between Katie and her children, inconsistent care could present difficulties for the children and Andrew's anger could be an indication that he is struggling and should be explored
- It is the view of the writer that in Katie continuing her road to recovery and improving areas of her own life that this in turn will benefit the children's well-being. They will hopefully be able to experience more consistency and predictability in their care
- It is important that the children have the opportunity to express how they feel and what support they might need

What are you as substance misuse/addictions practitioner doing to encourage the service user to promote well-being? The writer has completed an assessment and initial action plan and is in the early stages of carrying out focussed work on the impact of Katie's alcohol use within the home on her children. Katie has engaged with the writer and acknowledges that she wants to make changes to her behaviour in order to improve the safety of her children and their overall well-being. The writer will continue to work with Katie on focussed intervention highlighting areas for development as we progress. The writer and Katie will discuss available resources in the wider community and make links where appropriate to engage Katie in activities in the hope of reducing social isolation. A referral has been made for home detoxification where the purpose will be for the physical withdrawal symptoms of alcohol to be alleviated at the same time as Katie received emotional support. Alongside this a robust relapse prevention plan will be developed with Katie in order for her to develop alternative coping mechanisms to using alcohol in times of stress. The writer is liaising with other agencies to prepare an Integrated Assessment and Child's Plan for each of the children.

Do you have all the information you need to help the service user promote their child's well-being?

YES

NO

What additional help, if any, may be needed from within your service? *More information from the Family Support Worker on services available for this age group of children*

What additional help, if any, may be needed from professionals in an external agency? *Referral to LAADS for medical detoxification programme. Information from the Named Person in education on any way the writer can reinforce goals for the children*

Please circle the course of action you have discussed and agreed with the service user as a result of this assessment (please circle any that apply)

Continue to work together on relevant issues affecting the adult's life which may impact on how they promote their child's well-being	Work together on a specific goal which may positively impact on the child's well-being	<i>Request assistance from within agency to support service user to promote their child/ children's well-being</i>	Request assistance from an external agency to support service user to promote their child/ children's well-being	Share assessment with the Named Person to make sure the child has the help they need	Share assessment with the Lead Professional as one of the Child's Plan actions	Other e.g. planned closure of service
---	--	--	--	--	--	---------------------------------------

What are the service user's views about how they promote the child/children's well-being? *I think I'm doing much better with Andrew, Claire and Anna than I did before as a very young mum and I don't want to go there again. The teachers say they're doing fine at school. Andrew's anger can be stressful at times, especially the way he speaks to me and his sisters but he's at that age and maybe he feels out of it being the only boy in the family. I know I need to cut down on the cider but it helps me to get through things in the past and cope with the days ahead. I'm getting good support though and I think I'm getting better.*

Parent/Carer 2 view:

Practitioner Name:

Designation:

Signature:

Date:

I have seen the assessment and I have had the opportunity to give my views/ Service User signature:

Name and contact details of staff member signing off the assessment if different from above

Signature of the Line Manager signing off the Promoting Well-being Assessment where applicable

Peter is a 31 year old father of three children in the process of completing his programme of counselling with the Lanarkshire Meridian Project who have supported him to achieve his substance goals.

Exemplar 4

Promoting Well-being Assessment

The Lanarkshire Meridian Project



Peter

4	Substance Misuse/Addictions Services				Date started/ reviewed: 25/06/13		Joint working with another agency				
	PETER				Date completed: 18/09/13		Integrated Working Statutory Intervention				
SECTION 1. PERSONAL DETAILS						SECTION 2. REASON FOR ASSESSMENT					
Parent/Carer (adult service user) name: Peter P*****				Date of Birth/CHI if known: **/**/82				1. Routine as part of the service			
Nature of caring responsibility for a child/children: Peter is the biological father of the children who are in the full time care of their mother with whom he is separated but he provides daily care for the children								2. To share information with the Named Person			
Current known address: ***** Way, Coatbridge ML5***				Telephone numbers: 01236 *****				3. To ask another service to help the service user			
Parent/carer 2 name and DOB if known: .Jane Piper (biological Mother)				Telephone numbers: 01236 *****				4. As part of an Integrated Assessment and Child's Plan			
Address of parent /carer 2 if known and different from above: ** ***** Grove, Caldercruix								5. As a review of progress			
Named Person/s (full contact details): Public Health Nurse, Airdrie Health Centre, Depute Head Teacher All Saints Primary School, PT Guidance Airdrie High School								Current situation including substance related issues:			
Lead Professional/s if any (full contact details): N.A.								<p>Peter attends substance misuse counselling voluntarily for support to reduce his consumption of alcohol and cocaine which he has achieved reducing use to one evening per week or less.</p> <p>Peter lives apart from his wife but spends time with children six days a week and they often spend the night. Their mother suffers from severe depression and has attempted suicide on more than one occasion within the past year. She works with CPN on this.</p> <p>Peter presents as a committed parent determined to do the best by his children as they feature regularly in discussions. This Promoting Well-being Assessment is the final review of progress as part of a planned closure with the service user.</p>			
SECTION 3. STATUS											
How many contacts is this assessment based on? 12		Informed Consent in place			Yes	No	Date:				
Please indicate number of home visits, if any 0		Reason for sharing without consent:									
The parent is currently receiving a service from our agency		Yes	SECTION 4. RELEVANT CHILDREN								
		No	Name:	D.O.B.	Address if different	Educational Establishment					
I have been asked to support the adult because of the needs of the child		Yes	Eve P*****	**/**/06	Mother's address	Airdrie High School					
		No	Emily P*****	**/**/02	Mother's address	All Saints Primary School					
			Emma P*****	**/**/10	Mother's address	Farmyard Nursery					
Continue on separate sheet if necessary											

SECTION 5. HOW THE SERVICE USER IS PROMOTING THE CHILD/CHILDREN’S WELL-BEING

SAFE	<p>This is about the care giver promoting safety by protecting from abuse, neglect or harm, at home and in the community</p> 	HEALTHY	<p>This is about the care giver promoting the highest attainable standards of physical and mental health by accessing suitable health care and supporting with any medical issues</p> 
	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • <i>Peter presents as a devoted parent who places the wellbeing of his family at the top of his priorities including their safety</i> • <i>Children have their own rooms in Peter’s new house and previously had their own space at Grandmother’s house.</i> • <i>He reports that the children’s food and clothing is provided by both parents with support from paternal grandparents</i> • <i>Peter regularly supervises activities with children – sports etc.</i> • <i>Peter reports that his use of alcohol and drugs is restricted to evenings when he does not see the children. He reports that when he was living with his wife, it was always ‘when they were in bed’</i> • <i>He expresses concerns about the situation at the children’s mother’s home and about the level of commitment of wife’s family towards children. Has little control over environment at mother’s home.</i> 		<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • <i>Peter demonstrates understanding of the need for healthy food, exercise etc during counselling sessions</i> • <i>Peter reports that the children are involved in a variety of sport/leisure activities, with transport and support from Peter</i> • <i>Peter reports that he takes the children to health appointments – he recently missed an appointment at Meridian due to daughter’s optician visit</i> • <i>Peter reports that he took time off work to care for children when they all came down with a viral infection</i>
ACHIEVING	<p>This is about the care promoting achievement by encouraging learning and development with support and guidance to acquire skills, confidence and self esteem</p> 	NURTURED	<p>This is about promoting nurture by providing a suitable environment in a family setting with additional help if needed, with love, attachment, emotional warmth and encouragement</p> 
	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • <i>Peter states that the children are doing well at school, particularly Emily, the oldest, whom he describes as a thoughtful girl.</i> • <i>Peter has talked about dialogue with school – keeping abreast of the children’s progress</i> • <i>Peter demonstrates a strong work ethic in relation to his own employment</i> • <i>Peter expresses concerns about the negative influence of his wife’s family members and the model they provide for the children</i> • <i>It is not known whether the mother’s unstable mental health and the destabilising effect of events – splits, suicide attempt etc – have had any impact on children’s school work etc</i> 		<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • <i>Peter reports a stable family background as a child and good relationships with family members</i> • <i>Peter presents as caring and affectionate when he discusses his children and demonstrates understanding of their needs</i> • <i>Peter reports that he has good support from his side of the family. The children lived full-time with Peter and grandparents over a period of weeks following his wife’s recent suicide attempt</i> • <i>Peter’s describes the relationship with the children’s mother as erratic but hopes to get back together when they have sorted their problems out</i> • <i>He describes his wife’s family as “not really caring about the children, only about Jane.” He believes that his mother-in-law would like to keep the children away from him which indicates some tension in the relationship with in-laws</i>

SECTION 5. HOW THE SERVICE USER IS PROMOTING THE CHILD/CHILDREN'S WELL-BEING			
ACTIVE	<p>This is about the care giver promoting an active lifestyle by ensuring that the child is stimulated and has opportunities to engage in activities such as play and hobbies that will contribute to healthy growth and development</p>		RESPECTED
	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • <i>Peter reports that he takes the children to weekly sports activities and encourages participation in swimming, skating – he talks about children's progress.</i> • <i>Takes children on holiday to outdoor activity centres, with the support of his own parents.</i> • <i>He has expressed concerns about opportunities for the children to go out to play and make friends at his new house.</i> 		
RESPONSIBLE	<p>This is about the care giver promoting responsibility by providing structures, boundaries, regular routines and consistent expectations of the child's behaviour including discipline</p>		INCLUDED
	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • <i>Peter appears to take his responsibilities as a parent seriously talking openly about their needs and organising his life around this</i> • <i>He reports that he maintains regular daily contact with the children and overnight care</i> • <i>Have not discussed in detail but Peter has mentioned bedtimes and routines when children with him</i> • <i>Peter has talked about maintaining access to health care when he has responsibility for the children</i> 		
	<p>This is about the care giver promoting respect by ensuring that the child is seen and heard as an individual and encouraged to communicate and express themselves including their views</p>		
	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • <i>Peter is a skilled communicator who has engaged respectfully with his counsellor throughout contact</i> • <i>Peter reports that he has taken time and care to explain changes in circumstances to the girls, taking differences in personality, ages and level of understanding into account</i> 		
	<p>This is about the care giver promoting inclusion by establishing positive connections for their child with the outside world, including extended family, neighbours and the wider community</p>		
	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • <i>Peter has talked about accommodating sleepovers, parties and going out to play for his children</i> • <i>Peter maintains that his children have friends at his parents' house.</i> • <i>Peter reports that he and the children are known as part of a family in the community</i> • <i>Peter has reported attending family events and that he is happy not to take part in drinking etc because he is driving.</i> • <i>Peter reports that the children have lots of contact with paternal grandparents.</i> • <i>Little evidence here apart from links with school – has talked of communication with school re: family situation</i> • <i>Peter's children have experienced a number of house moves because of the changing circumstances between himself and his wife</i> 		

SECTION 6. SUMMARY AND RECOMMENDATIONS

What is your analysis of how the service user is promoting the child/children's well-being? (using the information against well-being indicators)

On the evidence available through the counselling relationship, Peter appears to value his relationship with his children very highly and reports that he constantly prioritises his responsibility to care and provide for them, often in challenging circumstances. Appears to take steps to minimise impact of substance use but recognises that past behaviours were harmful to the children's well-being. Peter cites his desire to provide a stable family life as a prime motivator in his own recovery. He reports that his efforts are threatened by influence and possible undermining by his wife's family, particularly the mother in law. Peter has been asked for Informed Consent to let his children's Named Person's know that he is no longer receiving substance support from Meridian – he has agreed but wishes no detail of his wife's illness to be shared. He is not sure who his wife has told about her situation and believes it is up to her to decide if people will be told. He has been receptive to information on well-being and discusses his children's needs openly and intelligently. Peter has agreed to engage with 'Connect' to better understand mental illness and the possible impacts on children. He also understands that Meridian will make contact with Adult Mental Health to ensure that the children's well-being is supported, promoted and safeguarded.

What are you as substance misuse/addictions practitioner doing to encourage the service user to promote well-being?

Meridian takes a client centred approach and counselling is guided by Peter's primary driver to provide a more stable home life for his children and do everything he can to support their well-being. As such this is the main theme during counselling and we support Peter in his goal setting for his children as well as working towards abstinence.

Do you have all the information you need to help the service user promote their child's well-being?

YES

NO

What additional help, if any, may be needed from within your service?

Peter's wife has been offered support through the Family Support group and one to one counselling but has not taken up this offer as yet.

What additional help, if any, may be needed from professionals in an external agency? Peter

may benefit from support from CONNECT who support relatives of adults with mental health problems so that he has the information he needs to ensure the children's well-being is promoted and supported appropriately. Information shared with Adult Mental Health to safeguard children's well-being.

Please circle the course of action you have discussed and agreed with the service user as a result of this assessment (please circle any that apply)

Continue to work together on relevant issues affecting the adult's life which may impact on how they promote their child's well-being	Work together on a specific goal which may positively impact on the child's well-being	Request assistance from within agency to support service user to promote their child/children's well-being	<i>Request assistance from an external agency to support service user to promote their child/children's well-being</i>	<i>Share assessment with the Named Person to make sure the child has the help they need</i>	Share assessment with the Lead Professional as one of the Child's Plan actions	<i>Other e.g. planned closure of service</i>
---	--	--	--	---	--	--

What are the service user's views about how they promote the child/children's well-being?

I have worked with my counsellor on what I am in control of and can do to support my children. I worry about how ill my wife is and know the children need me to be there for them as much as possible. For me that means getting alcohol and drugs out of my life completely and that's my goal so that I am always there for them if they need me. I am not keen to share information with the school about my personal life but if it will help the girls, then I'll go through with it but they shouldn't know about my wife unless she wants to tell them, it's not up to me. I understand that it could mean that I can talk to the kids main person if I'm ever worried about them. It might be a good idea to understand my wife's illness better and I'm happy to give that a go.

Parent/Carer 2 view:

Practitioner Name: <i>Brenda Patterson</i>	Designation: <i>Counsellor</i>	Signature:	Date:
---	-----------------------------------	------------	-------

I have seen the assessment and I have had the opportunity to give my views

Service User signature:

Name and contact details of staff member signing off the assessment if different from above

Signature of the Line Manager signing off the Promoting Well-being Assessment where applicable

Matthew is a 52 year old male who was received as an emergency admission to hospital as a result of withdrawal symptoms.

Exemplar 5

Promoting Well-being Assessment

Hospital Medical Admission

Matthew

<h1 style="font-size: 48px; margin: 0;">5</h1>	<h2 style="margin: 0;">Substance Misuse/Addictions Services</h2>			Date started/ reviewed: 03/09/2013		Joint working with another agency Integrated Working Statutory Intervention	
	<h1 style="font-size: 48px; margin: 0;">MATTHEW</h1>			Date completed: 04/09/2013			
<h3 style="margin: 0;">SECTION 1. PERSONAL DETAILS</h3>						<h3 style="margin: 0;">SECTION 2. REASON FOR ASSESSMENT</h3>	
Parent/Carer (adult service user) name: Matthew Mc***** (Parent)			Date of Birth/CHI if known: **/**/1961			1. Routine as part of the service 2. To share information with the Named Person 3. To ask another service to help the service user 4. As part of an Integrated Assessment and Child's Plan 5. As a review of progress	
Nature of caring responsibility for a child/children: Weekly contact arrangement with 13 year old daughter							
Current known address: ** ***** Crescent Shotts ML****			Telephone numbers: .*****				
Parent/carer 2 name and DOB if known: Susan D**** (carer)			Telephone numbers:				
Address of parent /carer 2 if known and different from above: I B***** Crescent, Kilsyth, G65							
Named Person/s (full contact details): Not Known – likely secondary school contact						Current situation including substance related issues: Emergency admission in acute alcohol withdrawal. Daily/ Most days alcohol consumption – 305 ul/week approx. Currently on medication to alleviate alcohol withdrawal symptoms.	
Lead Professional/s if any (full contact details):							
<h3 style="margin: 0;">SECTION 3. STATUS</h3>							
How many contacts is this assessment based on? 2		Informed Consent in place			Yes	No	Date:
Please indicate number of home visits, if any 0		Reason for sharing without consent:					
The parent is currently receiving a service from our agency		Yes		<h3 style="margin: 0;">SECTION 4. RELEVANT CHILDREN</h3>			
		No		Name:	D.O.B.	Address if different	Educational Establishment
I have been asked to support the adult because of the needs of the child		Yes		Megan	**/**/2000	41 Bryce Crescent, Kilsyth	St Morris's High School Cumbernauld
		No		Mc*****			
Continue on separate sheet if necessary							

SECTION 5. HOW THE SERVICE USER IS PROMOTING THE CHILD/CHILDREN'S WELL-BEING			
SAFE	<p>This is about the care giver promoting safety by protecting from abuse, neglect or harm, at home and in the community</p> 	HEALTHY	<p>This is about the care giver promoting the highest attainable standards of physical and mental health by accessing suitable health care and supporting with any medical issues</p> 
	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • <i>Matthew admits that he has neglected his responsibilities as a parent. He protects his daughter by staying away from her while he is drinking, and under the influence of alcohol. Other protections are his sister (with whom Megan lives) who does not allow him contact if he is intoxicated</i> • <i>Matthew appears to realise that his lifestyle is not contributing to Megan's development and he has stated that following admission to hospital and subsequent discharge that he will improve his lifestyle for both himself and Megan. He states he will do this by accepting a referral to Community Supports.</i> 		<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • <i>Mathew's state of health on admission was poor requiring x milligrams of xxxxxxxx</i> • <i>Matthew's reports his sister looks after Megan 'like she's her own daughter'. He states that Megan is happy there, is well fed and has no physical or emotional problems.</i> • <i>Writer has had no opportunity to verify this</i> • <i>Writer has no way of knowing if Megan is impacted by her father's health difficulties</i>
ACHIEVING	<p>This is about the care promoting achievement by encouraging learning and development with support and guidance to acquire skills, confidence and self esteem</p> 	NURTURED	<p>This is about promoting nurture by providing a suitable environment in a family setting with additional help if needed, with love, attachment, emotional warmth and encouragement</p> 
	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • <i>Matthew states that his sister is a responsible adult and encourages Megan appropriately and with care. This includes regular attendance at the school</i> • <i>Matthew has received written information about children's well-being but reports that he has not had time, as yet to read the information</i> • <i>It should be noted that writer has had no opportunity to meet with Matthew's sister and time has not allowed any exploration of this area with Matthew</i> 		<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • <i>Matthew states that Megan has resided with his sister since she was 4 years old and has been welcomed into her family. He states that Megan views her cousins – 'more like sisters and brothers'</i>

SECTION 5. HOW THE SERVICE USER IS PROMOTING THE CHILD/CHILDREN'S WELL-BEING

ACTIVE	<p>This is about the care giver promoting an active lifestyle by ensuring that the child is stimulated and has opportunities to engage in activities such as play and hobbies that will contribute to healthy growth and development</p>		RESPECTED	<p>This is about the care giver promoting respect by ensuring that the child is seen and heard as an individual and encouraged to communicate and express themselves including their views</p>	
	<p style="text-align: center;">Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • <i>Matthew reports that Megan attends a variety of sports and musical interests out with school and thoroughly enjoys these</i> • <i>He hopes to be able to join in with seeing her take part in these if he gains control</i> 	<p style="text-align: center;">Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • <i>Matthew reports that Megan asks his sister about him and appears to worry. He states his sister allows her to contact him on occasions.</i> • <i>He is regretful of this however and wants to put his own lifestyle back on track to benefit Megan</i> 			
RESPONSIBLE	<p>This is about the care giver promoting responsibility by providing structures, boundaries, regular routines and consistent expectations of the child's behaviour including discipline</p>		INCLUDED	<p>This is about the care giver promoting inclusion by establishing positive connections for their child with the outside world, including extended family, neighbours and the wider community</p>	
	<p style="text-align: center;">Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • <i>Matthew reports that his sister is a responsible parent but it should be noted writer has had no opportunity to verify this information</i> 	<p style="text-align: center;">Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • <i>Matthew reports that Megan has regular attendance at school, and is involved with many extended family events.</i> • <i>He regrets not taking part in these with Megan due to his alcohol misuse – and hopes to make positive changes</i> 			

SECTION 6. SUMMARY AND RECOMMENDATIONS

What is your analysis of how the service user is promoting the child/children's well-being? (using the information against well-being indicators)

At present it would appear that Matthew is not promoting his daughter Megan's well-being. This mainly being carried out by his sister Susan. Matthew hopes to make positive changes by addressing his alcohol use and becoming a responsible parent to Megan. Matthew has agreed to the Named Person being informed that he has received hospital treatment but wishes no further details to be shared at this time. Although Matthew has received information on well-being he reports that he has not had time to read it.

What are you as substance misuse/addictions practitioner doing to encourage the service user to promote well-being? *While Matthew is in hospital our service will safely detox him from alcohol. We will refer Matthew to Community supports upon discharge, and liaise with these services in relation to his desire to be more active in Megan's life.*

Do you have all the information you need to help the service user promote their child's well-being?

YES

NO

What additional help, if any, may be needed from within your service?

Advice/ Signposting

What additional help, if any, may be needed from professionals in an external agency? *More information gathering in regard to the accurate assessment of Megan's needs*

Please circle the course of action you have discussed and agreed with the service user as a result of this assessment (please circle any that apply)

Continue to work together on relevant issues affecting the adult's life which may impact on how they promote their child's well-being

Work together on a specific goal which may positively impact on the child's well-being

Request assistance from within agency to support service user to promote their child/children's well-being

Request assistance from an external agency to support service user to promote their child/children's well-being

Share assessment with the Named Person to make sure the child has the help they need

Share assessment with the Lead Professional as one of the Child's Plan actions

Other e.g. planned closure of service

What are the service user's views about how they promote the child/children's well-being?

Matthew was not in a position to offer his view on the day arranged to do this. Matthew understands the need to consider Megan in relation to his own lifestyle. He appears to be regretful of his missed opportunities as a parent and appears motivated to make positive changes in his own lifestyle and subsequently Megan's.

Parent/Carer 2 view:

Practitioner Name:

John Bogie

Designation:

Substance Misuse Liaison Nurse

Signature:

Date:

04/09/2013

I have seen the assessment and I have had the opportunity to give my views

Service User signature:

Name and contact details of staff member signing off the assessment if different from above

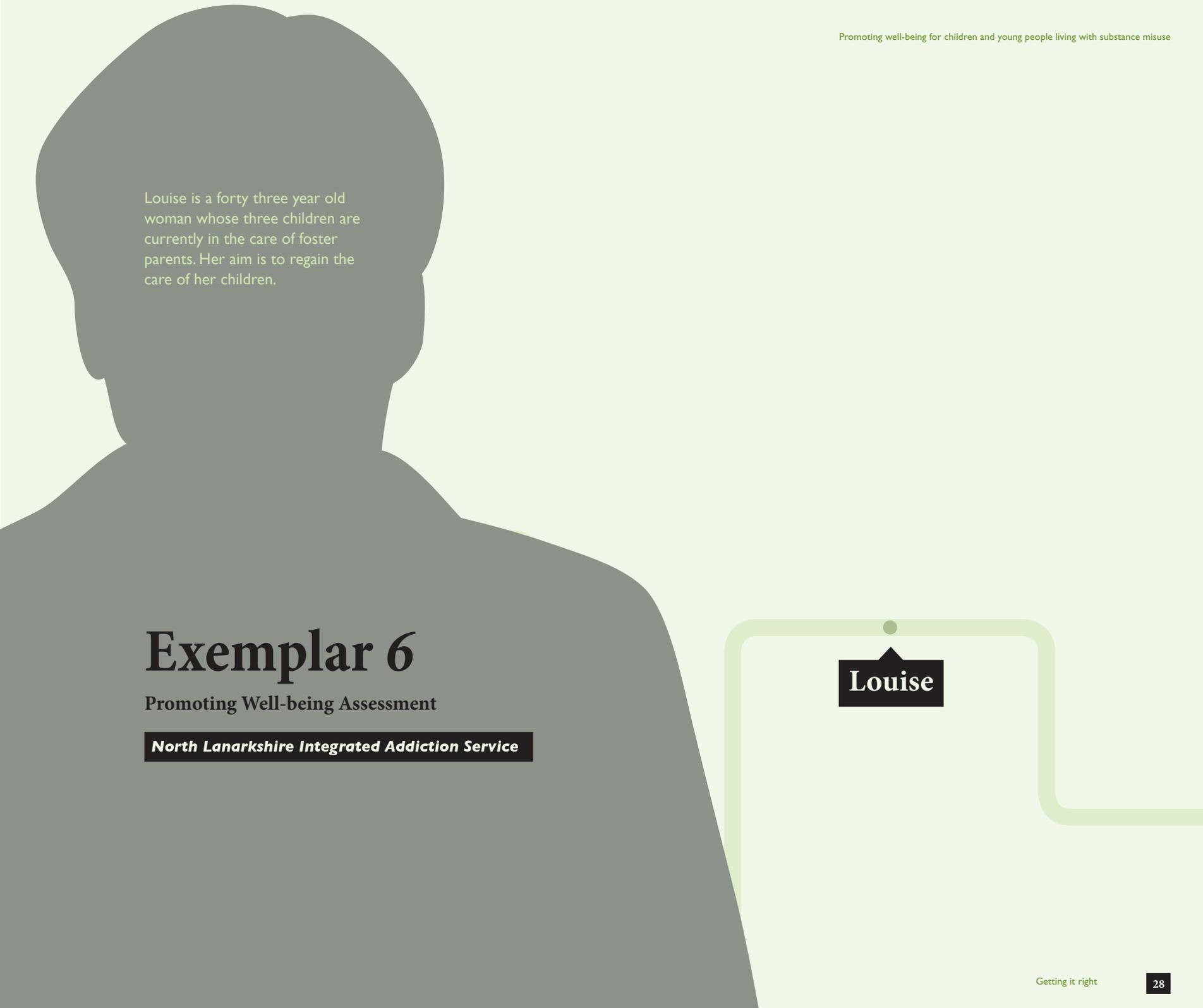
Signature of the Line Manager signing off the Promoting Well-being Assessment where applicable

Louise is a forty three year old woman whose three children are currently in the care of foster parents. Her aim is to regain the care of her children.

Exemplar 6

Promoting Well-being Assessment

North Lanarkshire Integrated Addiction Service



Louise

<h1 style="font-size: 48px; margin: 0;">6</h1>	<h2 style="margin: 0;">Substance Misuse/Addictions Services</h2>			Date started/ reviewed: 09/09/13		Joint working with another agency Integrated Working	
	<h1 style="font-size: 48px; margin: 0;">LOUISE</h1>			Date completed: 30/09/13		Statutory Intervention	
SECTION 1. PERSONAL DETAILS						SECTION 2. REASON FOR ASSESSMENT	
Parent/Carer (adult service user) name: Louise T*****			Date of Birth/CHI if known: **/**/1970			1. Routine as part of the service 2. To share information with the Named Person 3. To ask another service to help the service user 4. As part of an Integrated Assessment and Child's Plan 5. As a review of progress	
Nature of caring responsibility for a child/children: Louise is the biological mother of her 3 children, aged 4, 7 and 9. She agreed voluntarily for the children to be placed with previous foster carers to allow her to recover from a recent relapse							
Current known address: *** H**** ***, Motherwell ML2 ***			Telephone numbers: 0777*****				
Parent/carers 2 name and DOB if known: N.A.			Telephone numbers: N.A.				
Address of parent /carer 2 if known and different from above: N.A.							
Named Person/s (full contact details): Avril Taylor, Public Health Nurse, Motherwell (Poppy) Anne Swinton, Beaton Primary School, Motherwell (Honey and Tyler)						Current situation including substance related issues: Louise has previously been supported by substance services and children and families social work to achieve abstinence and have her children returned to her care full time. Whilst the family remained supported voluntarily by the department, addiction services withdrew due to sobriety. However following a domestic abuse incident whereby Louise was assaulted by her ex-partner, Louise relapsed and returned to alcohol use, resulting in further deterioration in her emotional well-being. As this placed the children at risk, Louise voluntarily agreed for the children to be placed in a safe environment and return to their previous foster care placements. Louise at point of re-referral was consuming 2-3 bottles of table wine daily and was requesting detox. Louise has also recently been diagnosed with personality disorder and has childhood history of sexual abuse. Diagnosed with depression and a history of suicidal ideation and domestic abuse incidents have further impacted upon emotional well being of Louise. Louise has completed a medical detox programme in hospital and is maintaining sobriety with support from the writer since March.	
Lead Professional/s if any (full contact details): Brydon Walters, Motherwell Children and Families Social Work Team brydonw@northlan.gov.uk tel 08556*****							
SECTION 3. STATUS							
How many contacts is this assessment based on? 20		Informed Consent in place			Yes	No	Date:
Please indicate number of home visits, if any 5		Reason for sharing without consent: Louise is aware that information is being shared as part of multi-agency working					
The parent is currently receiving a service from our agency		SECTION 4. RELEVANT CHILDREN					
		Name:	D.O.B.	Address if different	Educational Establishment		
I have been asked to support the adult because of the needs of the child		Yes	Poppy T*****	**/**/2009	Foster Carers house	Clap Hands Nursery	
		No	Honey T*****	**/**/2005	Foster Carers house	Braehead Primary	
		No	Tyler T*****	**/**/2008	Foster Carers house	Braehead Primary	
Continue on separate sheet if necessary							

SECTION 5. HOW THE SERVICE USER IS PROMOTING THE CHILD/CHILDREN'S WELL-BEING

SAFE	<p>This is about the care giver promoting safety by protecting from abuse, neglect or harm, at home and in the community</p> 	HEALTHY	<p>This is about the care giver promoting the highest attainable standards of physical and mental health by accessing suitable health care and supporting with any medical issues</p> 
	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • Louise displays insight with regards to safety and in ensuring a safe environment for her children. This is evidenced by her voluntarily agreeing to her children being removed from her care to ensure safety. Louise has previously worked alongside social work services towards child protection plan, resulting in CP procedures ceasing in 2012 • Louise is aware that her alcohol use impacts on the extent to which she can protect her children. Louise is currently abstinent and this has been evidenced in her presentation at appointments • Living conditions have also been observed to a high standard, as have the children's physical presentation. Writer has evidenced this in home visits and in meeting the children previously • Louise does report that as a child she never experienced a high degree of safety, both environmentally and emotionally and reports childhood sexual abuse. Louise is a survivor of domestic violence and requires further support regarding this • Louise struggles to recognise the impact that her own emotional well-being has on her ability to safeguard her children. 		<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • Louise reflects some insight and awareness of the physical health needs of her children reporting that all health appointments are kept/attended, even whilst the children remain looked after and accommodated (verified by other professionals) • Louise shows insight with regards to a healthy diet and nutrition for her children. This is not reflected in her own eating habits, however. Louise advises that she struggles to do food shopping and prepare meals for one when she has been used to prioritising her food shop around her children's likes and needs • Whilst Louise is attentive to physical and nutritional health needs, there is a lack of insight with regards to the emotional health needs of her children. Louise has been unable to recognise the impact of her poor emotional well-being and unpredictable emotions can have upon her children's emotional health. Louise is unable to recognise through focused discussion why Honey has been offered individual play therapy • Social work report that a number of concerning presentations of the children in their foster care placements. When the writer raises this with Louise she struggles to understand the links with her own difficulties
ACHIEVING	<p>This is about the care promoting achievement by encouraging learning and development with support and guidance to acquire skills, confidence and self esteem</p> 	NURTURED	<p>This is about promoting nurture by providing a suitable environment in a family setting with additional help if needed, with love, attachment, emotional warmth and encouragement</p> 
	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • In discussions with the writer, Louise recognises the importance of regular school/nursery attendance and takes an active role in promoting this • From more recent behaviours, however, it has been demonstrated that the educational/ developmental needs of her children can fall secondary to her own status if emotional well-being is poor and Louise is experiencing crisis. Louise regularly changes her mind with regards to which educational establishment the children should attend and whether the children will participate in developmental activities • Louise declines to discuss in depth her own schooling experiences and reports she was "never really bothered by it all" 		<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> • Louise openly displays warmth and a strong loving bond with her children's observed during home visits. Children and families social work have also witnessed this in terms of offering comfort and responding appropriately to their needs • Louise has begun to acknowledge that a decline in her own emotional well-being determines how she feels about the children • Stability and contact for the children can be infrequent depending upon Louise's emotional well-being • Louise appears to struggle with understanding that her children can experience the same emotions and that it is important they are taught appropriate ways to express feelings and cope with pressures • Louise has advised of her own experience growing up whereby "you just got on with it and didn't talk about it"

SECTION 5. HOW THE SERVICE USER IS PROMOTING THE CHILD/CHILDREN'S WELL-BEING			
ACTIVE	ACTIVE	<p>This is about the care giver promoting an active lifestyle by ensuring that the child is stimulated and has opportunities to engage in activities such as play and hobbies that will contribute to healthy growth and development</p> 	RESPECTED
	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> <i>Louise has previously displayed insight with regards to the importance of ensuring her children are stimulated and included in activities and hobbies by taking her children to swimming, soft play and parks.</i> <i>Social work reports that Louise continues to demonstrate this by taking along games and toys and planning appropriate activities for contact sessions.</i> <i>Louise reports that she has encouraged Honey to continue with her faith and planned a Christening for Honey, Poppy and Tyler. Louise has requested the foster carers support continued involvement with their faith including regular attendance at Mass on a Sunday.</i> <i>Louise has discussed her previous involvement with activities such as attending the gym, aerobics and walking and reports that she would like to re-engage with such</i> <i>Decline in emotional well being for Louise can diminish her interest in stimulating the children</i> 	<p>This is about the care giver promoting respect by ensuring that the child is seen and heard as an individual and encouraged to communicate and express themselves including their views</p> 	
RESPONSIBLE	RESPONSIBLE	<p>This is about the care giver promoting responsibility by providing structures, boundaries, regular routines and consistent expectations of the child's behaviour including discipline</p> 	INCLUDED
	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> <i>Louise openly admits that she struggles to provide structure and boundaries when her emotional well being is poor and also in times of crisis</i> <i>Louise reports that Honey will "test and push" boundaries with regards to rules set at bedtime and in playing games</i> <i>Louise reports that she struggles to maintain consistency in consequences for her children's behaviour and reports responding erratically at times</i> <i>Louise will regularly prioritise her children's needs over her own evidenced by cancelled appointments if unhappy about decisions in relation to her children</i> <i>Social Work reports that this in turn impacts upon her children's ability to feel balanced, confident and organised. Tyler and Poppy however are noted as settling in and adjusting well to regular routines and boundaries in place by foster carers</i> 	<p>This is about the care giver promoting inclusion by establishing positive connections for their child with the outside world, including extended family, neighbours and the wider community</p> 	
		<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> <i>Louise reports a poor relationship with her own mother and reports little support. Louise states that she has always had "to get on with it" and has never been confident in "asking for help". She reports that this formative experience is transferred to her motivation to listen to and understand her children</i> <i>Louise has advised that she struggles to accept the intensive support offered by services as she has always "managed on her own"</i> <i>Louise herself is unable to express herself confidently and appropriately and therefore struggles to give and accept constructive feedback, express and recognise emotions and use appropriate language. Due to this Louise struggles to feel respected, accepted and valued</i> 	
		<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p> <ul style="list-style-type: none"> <i>Louise reports that she recognises the importance of her children's engagement with education and friends, however as someone with limited support from family and friends, she struggles to actively promote this and realise the benefits for her children.</i> <i>Louise struggles to accept support from services and to feel secure and confident in her children also accessing appropriate supports</i> 	

SECTION 6. SUMMARY AND RECOMMENDATIONS

What is your analysis of how the service user is promoting the child/children's well-being? (using the information against well-being indicators) *When emotionally stable and well, Louise demonstrates strengths in promoting and supporting her children's well being evidenced by her insights and reports of her actions which are substantiated by children and families social work. However, when emotional well being is low, Louise struggles to prioritise her children's needs and to recognise the need for support and the link between her own well-being and her children's. Joint working has been very helpful in monitoring and verifying what the writer has experienced with Louise and when she is at her lowest she is least inclined to reach out and begins to miss appointments and needs extra help to re-connect. Louise does not wish a physical copy of her assessment.*

What are you as substance misuse/addictions practitioner doing to encourage the service user to promote well-being? *The writer has supported Louise through assessment and engagement in her adult recovery programme since March 2013 and a positive and trusting relationship is developing. The writer is supporting Louise to maintain sobriety, increase periods of consistency, reach out when she is in difficulty and to engage with emotional well-being support services and one to one focused work. Louise has expressed a keen interest in exploring anger management and emotion regulation. This work has now commenced. Also maintaining close communication with social work to make sure we are consistent in our support to Louise.*

Do you have all the information you need to help the service user promote their child's well-being? YES NO

What additional help, if any, may be needed from within your service?
Louise receives all support services available within the integrated team. Specific work on her emotional well-being is supported through the team

What additional help, if any, may be needed from professionals in an external agency?
Louise receives support from children and families social work

Please circle the course of action you have discussed and agreed with the service user as a result of this assessment (please circle any that apply)

<i>Continue to work together on relevant issues affecting the adult's life which may impact on how they promote their child's well-being</i>	<i>Work together on a specific goal which may positively impact on the child's well-being</i>	Request assistance from within agency to support service user to promote their child/children's well-being	Request assistance from an external agency to support service user to promote their child/children's well-being	Share assessment with the Named Person to make sure the child has the help they need	<i>Share assessment with the Lead Professional as one of the Child's Plan actions</i>	Other e.g. planned closure of service
--	---	--	---	--	---	---------------------------------------

What are the service user's views about how they promote the child/children's well-being? *Since the workers are meeting together, they help me to understand that if I feel bad of a day, I can make the kids feel the same and that's when they play up and I get mad. I don't want them to grow up feeling how I do. I need a lot of help to stay on an even keel – it comes from nowhere and there's nothing I can do about it, those are the hardest times for me. I can see things more clearly now but I can only do something about it when I feel strong. It's not easy for me to talk things over all the time, it's just not something I've been used to and sometimes it stirs things up but I know I have to keep going with this because it might help me. I'm going to carry on with all of this and prove I am a good mum and get the kids back. I rather this assessment is kept on the computer, I don't want a copy in the house.*

Parent/Carer 2 view:

Practitioner Name: <i>Lynzie Turner</i>	Designation: <i>Social Worker, Integrated Addictions Service</i>	Signature:	Date:
---	--	-------------------	--------------

I have seen the assessment and I have had the opportunity to give my views

Service User signature:

Name and contact details of staff member signing off the assessment if different from above

Signature of the Line Manager signing off the Promoting Well-being Assessment where applicable

Samantha is a twenty nine year old woman with full time care of a 9 year old child. She has a history of misusing amphetamine and cannabis and attends the South Lanarkshire Substance Misuse Team.

Exemplar 7

Promoting Well-being Assessment

South Lanarkshire Substance Misuse Team



Samantha

7	Substance Misuse/Addictions Services			Date started/ reviewed: <i>21/02/13</i>		Joint working with another agency							
	SAMANTHA			Date completed: <i>21/02/13</i>		Integrated Working Statutory Intervention							
SECTION 1. PERSONAL DETAILS					SECTION 2. REASON FOR ASSESSMENT								
Parent/Carer (adult service user) name: <i>Samantha B****</i>			Date of Birth/CHI if known: <i>**/**/82</i>		1. Routine as part of the service								
Nature of caring responsibility for a child/children: <i>Samantha is the biological mother of 9 year old Sam who is an only child and lives with his mother and her partner.</i>							2. To share information with the Named Person						
Current known address: <i>* **** Lane, Lanark</i>			Telephone numbers: <i>0123456789</i>						3. To ask another service to help the service user				
Parent/carer 2 name and DOB if known: <i>James J*****</i>			Telephone numbers: <i>101112131415</i>								4. As part of an Integrated Assessment and Child's Plan		
Address of parent /carer 2 if known and different from above: <i>As above</i>													5. As a review of progress
Named Person/s (full contact details): <i>Not known at this point but Lanark Primary School is the contact on 0**** *</i>					Current situation including substance related issues: <i>This information has been completed following a discussion with children and families under child protection. The Promoting Well-being Assessment will be attached to a written Notification of Concern. Sam has returned to live with his mother and her partner in rented accommodation after a period of living with his grandparents due to his mother's misuse of drugs and was referred to SMT. He continues to have overnight stays with his grandparents but has no contact with his biological father. Samantha and her partner have a history of amphetamine use and both admit to using cannabis and ecstasy in the past. Samantha has mental health issues caused by her drug misuse but has disengaged from services that would support this. Samantha and her partner present highly agitated or tired although both advised that they are not using drugs at present. Writer has concerns around Samantha and her partner's lifestyle and behaviours and the impact on Sam's well-being. There is also current activity by housing in relation to eviction as a result of anti-social behaviour.</i>								
Lead Professional/s if any (full contact details):													
SECTION 3. STATUS													
How many contacts is this assessment based on? <i>8</i>		Informed Consent in place		Yes			No	Date:					
Please indicate number of home visits, if any <i>2</i>		Reason for sharing without consent: <i>Samantha is aware the writer is gathering information and referral will be made to children and families social work team and she is happy with this and is looking for extra support</i>											
The parent is currently receiving a service from our agency		SECTION 4. RELEVANT CHILDREN											
		Name:		D.O.B.	Address if different	Educational Establishment							
I have been asked to support the adult because of the needs of the child		Yes		<i>Sam B****</i>	<i>**/**/2003</i>	<i>As above</i>	<i>Lanark Primary School</i>						
		No											
Continue on separate sheet if necessary		Yes											
		No											

SECTION 5. HOW THE SERVICE USER IS PROMOTING THE CHILD/CHILDREN'S WELL-BEING

SAFE	<p>This is about the care giver promoting safety by protecting from abuse, neglect or harm, at home and in the community</p>		HEALTHY	<p>This is about the care giver promoting the highest attainable standards of physical and mental health by accessing suitable health care and supporting with any medical issues</p>	
	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p>			<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p>	
	<ul style="list-style-type: none"> • <i>Sam's grandparents are supportive and provide a safe place for Sam to be if Samantha is unwell</i> • <i>At present neither Samantha nor her partner demonstrate an awareness of how their drug misuse and lifestyle impact on Sam's well-being or their capacity to keep him safe</i> • <i>The home environment has 2 dogs that Samantha advised the writer are trained to attack but she does not associate this with a risk for Sam</i> • <i>Samantha and her partner are often involved in anti-social behaviour in the current home causing housing to threaten eviction which would leave the family at risk of becoming homeless. Samantha has not reported this to the writer</i> • <i>Samantha has mental health issues which include anxiety and paranoia as a result of amphetamine use in the past and has kept dangerous weapons at home that the child has access to, however, Samantha sees nothing wrong in this</i> • <i>Writer has been advised by Sam's head teacher that Sam has attended school late and without breakfast, Samantha denies this</i> • <i>Samantha often feels tired and the school has advised that Sam has disclosed that he will be out or looking after himself during this time often late at night, Samantha advises this is untrue</i> • <i>Housing has advised the writer that Samantha leaves Sam alone with her partner but Samantha does not accept this reporting as truthful</i> • <i>There is no social work support in place for Sam at present</i> 			<ul style="list-style-type: none"> • <i>Samantha reports that she and her partner are not using any drugs at present, however, their presentation suggests otherwise</i> • <i>Samantha herself suffers from mental ill health including anxiety and paranoia as a result of consistent use of amphetamines</i> • <i>The school has advised that Sam attends school tired and hungry and he has disclosed that he is often out late at night alone</i> • <i>Sam's choice of play toys are related to violence. Samantha advises that she sees this as normal</i> • <i>Samantha advises that Sam sees and speaks to dead people and sees this as a gift that should be encouraged</i> • <i>Samantha has advised that she feels that Sam may have a learning difficulty but has not sought help to make sure supports are in place for his learning (contradicts information provided elsewhere)</i> 	

SECTION 5. HOW THE SERVICE USER IS PROMOTING THE CHILD/CHILDREN'S WELL-BEING

ACHIEVING	This is about the care promoting achievement by encouraging learning and development with support and guidance to acquire skills, confidence and self esteem		NURTURED	This is about promoting nurture by providing a suitable environment in a family setting with additional help if needed, with love, attachment, emotional warmth and encouragement	
	Strengths/Achievements <Well-Being> Pressures/Areas for Improvement	Strengths/Achievements <Well-Being> Pressures/Areas for Improvement		Strengths/Achievements <Well-Being> Pressures/Areas for Improvement	
	<ul style="list-style-type: none"> • <i>The school reports poor attendance and lateness. Samantha admits that she will sleep in on occasion and is trying to avoid this happening again. Sam will often get himself to school resulting in him being late and afraid to go in. Samantha denies this and states that she watches him leaving from the window</i> • <i>The Head Teacher advises that Samantha does not attend parent's evenings for Sam. Samantha agrees with this and advises the writer that she will in future</i> • <i>According to the school, Sam displays low level behaviour issues and needs additional support. Samantha reports that she informed the school of her concerns that Sam may be dyslexic but this has not been followed up. The school has no record of a conversation reporting concern that Sam may have a learning difficulty</i> • <i>Samantha is of the opinion that Sam has everything he could want with regards to play station and technical toys but does not acknowledge that spending time playing with him may benefit his learning</i> • <i>No opportunity to witness interaction between Sam and his mother, including praise and encouragement</i> • <i>Nothing is known about Samantha's own experience of learning and achievement</i> 	<ul style="list-style-type: none"> • <i>Sam's grandparents are reported to provide Sam with experience of nurture during his time with them</i> • <i>Samantha's family provide good support to her emotionally and financially and will often provide respite support for the child which is positive for Sam and Samantha</i> • <i>Samantha has recently been decorating the family home to make it more welcoming and Sam's room is more appropriate for him</i> • <i>Samantha advises the writer that she loves Sam very much, however, the writer has not had the opportunity to witness how Samantha and Sam interact and if warmth, understanding and affection are in evidence</i> • <i>Samantha reports that her family will often have Sunday's together to spend time going out for lunch, however, if Samantha is not feeling great, Sam will miss out on these occasions as she will not take him</i> • <i>Samantha does not appear to understand the connection between her current lifestyle and Sam's feelings of security and well-being</i> • <i>Sam's paternal father is in currently in prison. Samantha reports that Sam loves his father but she does not allow contact with the family as they are not good role models</i> 			

SECTION 5. HOW THE SERVICE USER IS PROMOTING THE CHILD/CHILDREN'S WELL-BEING

ACTIVE	<p>This is about the care giver promoting an active lifestyle by ensuring that the child is stimulated and has opportunities to engage in activities such as play and hobbies that will contribute to healthy growth and development</p>		RESPECTED	<p>This is about the care giver promoting respect by ensuring that the child is seen and heard as an individual and encouraged to communicate and express themselves including their views</p>	
	<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p>			<p>Strengths/Achievements <Well-Being> Pressures/Areas for Improvement</p>	
	<ul style="list-style-type: none"> • <i>The school reports that Sam is not involved in any out-of-school activities. Samantha advises that Sam is happier playing out with friends or with electronic games and does not wish to attend these activities, therefore, she does not encourage him to do so</i> • <i>Samantha admits to being too tired or run down a lot of the time, and not able to engage with Sam herself in play</i> • <i>The school reports information from other parents to the effect that Sam is often left to his own devices to play with older children. Samantha sees this as normal and believes that older peers have a positive influence.</i> • <i>Samantha advises the writer that she is not interested in any of the activities suggested by the writer to engage in play with Sam.</i> 			<ul style="list-style-type: none"> • <i>Samantha reports a positive upbringing with 2 supportive parents with whom she continues to have a positive relationship</i> • <i>The Head Teacher reports Sam as a 'lovely, well-mannered boy' indicating that someone is communicating with him respectfully and politely</i> • <i>The writer has not had the opportunity to witness the relationship Sam has with his mother or whether he is able to express his feelings and have his viewed listened to</i> • <i>Samantha and her partner are well known in the area for anti-social behaviour and drug misuse and it is unclear at present how Sam feels about this and how this communication may affect him</i> • <i>The writer has been informed by the maternal grandparents that Sam has been exposed to domestic abuse and substance misuse in the past. Samantha is of the view that her past behaviour in relation to substance misuse has had no negative impact on Sam.</i> • <i>Samantha has advised the writer of early influences by her parents that could impact on her own parenting skills which will require further exploration</i> 	

SECTION 5. HOW THE SERVICE USER IS PROMOTING THE CHILD/CHILDREN'S WELL-BEING

	This is about the care giver promoting responsibility by providing structures, boundaries, regular routines and consistent expectations of the child's behaviour including discipline			This is about the care giver promoting inclusion by establishing positive connections for their child with the outside world, including extended family, neighbours and the wider community	
RESPONSIBLE	Strengths/Achievements <Well-Being> Pressures/Areas for Improvement		INCLUDED	Strengths/Achievements <Well-Being> Pressures/Areas for Improvement	
	<ul style="list-style-type: none"> • <i>Samantha attends some appointments with the SMT but also misses regularly for appointments</i> • <i>Sam reports to the school that boundaries and behaviour expectations are in place at his maternal grandparents house</i> • <i>The school has received reports from other parents that Sam has been seen out on his own late at night which may indicate a lack of boundaries</i> • <i>Sam has been exposed to watching inappropriate media for a young child and unsuitable for his age and stage. Samantha advises writer that she was not responsible for this and it was the influence of a peer and shows no insight that inappropriate images displayed in the home environment (violent themes) were unsuitable for a child.</i> • <i>Sam will often play with older children in the community and becomes involved in criminal activity that Samantha advises is a normal part of childhood</i> • <i>Housing has reported to the writer that staff have observed a lot of comings and goings to the household and it is unclear the extent to which Sam is being exposed to inappropriate adult behaviour</i> • <i>During a home visit by writer, it was noted that Sam is allowed to watch inappropriate material for his age and this is not monitored by Samantha or partner. On being challenged, Samantha advises that this is a result of peer influence and showed a lack of interest/authority in controlling Sam's viewing</i> • <i>The writer has been informed by Sam's grandparents that Samantha is not in a good routine and boundaries are not in place</i> • <i>The school advises that homework is often not completed and Samantha admits that she doesn't always check this but will be more pro-active in the future</i> • <i>Samantha will not always use supports for advice when required</i> • <i>Housing has informed the writer that Sam is involved behaviours which are seen as anti-social and that neighbours are afraid of him. Samantha denies this</i> 	<ul style="list-style-type: none"> • <i>Sam has extended family, some of whom provide positive care and others do not</i> • <i>Sam's grandparents are protective factors for Sam and include him in numerous extended family activities</i> • <i>Samantha and her partner are often involved in anti-social behaviour which may result in stigmatisation for Sam</i> • <i>Housing report that Samantha and her partner are regularly involved in anti-social behaviour and avoided by some neighbours who are afraid</i> • <i>Sam has no contact with his father who is in prison or father's extended family as they are seen as a bad influence</i> • <i>Housing reports possible eviction as a result of anti-social behaviour</i> 			

SECTION 6. SUMMARY AND RECOMMENDATIONS

What is your analysis of how the service user is promoting the child/children's well-being? (using the information against well-being indicators)

The extent to which Samantha is promoting Sam's well-being is of significant concern to the writer. Although she reports no use of amphetamines at present, Samantha's physical presentation suggests otherwise and causes concern to the writer as it is unclear exactly what use of substance is taking place. There are concerns across all of the indicators of well-being for Sam, in particular his safety, lack of structure and boundaries in his life and lack of attention to his individual needs. Although Samantha attends some appointments there is not a lot of evidence of motivation to change her lifestyle and evidence to suggest she does not accept responsibility for the impact of her lifestyle choices on Sam. Samantha is withholding information from the writer such as the difficulties with housing, anti-social behaviour and possible eviction and coupled with very different views to the school and her own parents of Sam's needs, there are clear indications that Samantha is at an early stage in her recovery from her substance use. On learning of the writer's concerns Samantha insists that she loves Sam very much and did not realise the impact her lifestyle could have on Sam and is willing to engage with other agencies and supports to assist her to make lifestyle changes to promote Sam's well-being in the future. Due to the level of concern the writer spoke directly to colleagues in children and families social in Lanark under child protection and agreed to follow up by completing the Promoting Well-being Assessment and attaching to a written Notification of Concern.

What are you as substance misuse/addictions practitioner doing to encourage the service user to promote well-being? My role is to see Samantha on a weekly basis alternating between home and office appointments. We will continue with the action plan that was mutually agreed which included a CBT approach to identify and address underlying causes for substance use and motivational interviewing to support changes in lifestyle choices. During initial engagement phase with Samantha, I identified concerns about Sam's well-being, therefore, I contacted Sam's Named Person in education and clarified that they also have concerns about Sam's well-being. This prompted my referral to children and families. I referred Samantha to LAADS for assessment and screening, however she has failed to attend these appointments. The writer will re-refer and accompany Samantha to support engagement. I will continue to liaise with all other involved agencies, including continuing to share any concerns about Sam's well-being with children and families social work and Sam's Named Person in education.

Do you have all the information you need to help the service user promote their child's well-being?

YES

NO

What additional help, if any, may be needed from within your service?

To support any multi-disciplinary activity contributing to discussions about concerns to fully understand Sam's needs and agree a plan to support, promote and safeguard his well-being

What additional help, if any, may be needed from professionals in an external agency?

*An assessment by children and families social work to establish whether Sam needs a child protection plan
A multi-disciplinary meeting including education, housing, the police, LAADS, GP, social work and substance misuse to agree an integrated assessment and child's plan*

Please circle the course of action you have discussed and agreed with the service user as a result of this assessment (please circle any that apply)

Continue to work together on relevant issues affecting the adult's life which may impact on how they promote their child's well-being

Work together on a specific goal which may positively impact on the child's well-being

Request assistance from within agency to support service user to promote their child/children's well-being

Request assistance from an external agency to support service user to promote their child/children's well-being

Share assessment with the Named Person to make sure the child has the help they need

Share assessment with the Lead Professional as one of the Child's Plan actions

Other e.g. planned closure of service

What are the service user's views about how they promote the child/children's well-being?

I love Sam and everybody who knows me will say the same and he loves me too. I didn't realise about some of the things about how Sam is until we had to fill this in. I do understand that things need to change and I've said I'll work with people so that we can sort some things out. My mum and dad will be there to help get things sorted cause they've always stood by me.

Parent/Carer 2 view:

Practitioner Name:

Carol Carr

Designation:

Signature:

Date:

I have seen the assessment and I have had the opportunity to give my views

Service User signature:

Name and contact details of staff member signing off the assessment if different from above

Signature of the Line Manager signing off the Promoting Well-being Assessment where applicable