Children’s Services

Pre-birth Assessment

**Pre-birth Assessment of**

[parent’s full name] (mother/father) D.O.B xx/xx/xxxx

and

[parent’s full name] (mother/father) D.O.B xx/xx/xxxx

**In respect of**

[Baby] E.D.D. xx/xx/20xx

**Author:** [full name, job title]

**Signed**

**Date of report:** xx/xx/202x

**CONFIDENTIAL REPORT -** This report should be treated as **confidential**. It must not be shown, nor its contents revealed, to anyone other than a legal party or a legal advisor to such party.

***Prompts in blue should be deleted before filing or sharing the assessment***

**INTRODUCTION**

# 1 Author of Report

1.1 This pre-birth assessment report has been written by [name], social worker. The report has been authorised by team manager, [name]

1.2 I, [name], am a Social Worker within Torbay Council Children’s Social Care, based at [professional address]. I obtained a [degree/qualification] in Social Work from [university]. I have [number] years’ experience working as a social worker with children and their families. I am registered with the Social Work England and my registration number is [number]. I have worked for Torbay Council since [date] in the [team].

**2 Purpose of Assessment including Current Concerns**

*(Why is this pre-birth assessment being undertaken? What are the circumstances? What are the key concerns?)*

2.1 The purpose of this pre-birth assessment is to assess .....

**3 Family Composition**

**3.1 Parents**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **DOB** | **Relationship** | **Living in Family Home?** |
|  |  |  | Yes/No |
|  |  |  | Yes/No |

**3.2 Any Other Child(ren)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **DOB** | **Relationship** | **Living in Family Home?** |
|  |  |  | Yes/No |
|  |  |  | Yes/No |

**3.3 Significant Others**

*(You must include any new partner(s) for either parent who are not biologically related to unborn baby here).*

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **DOB** | **Relationship** | **Living in Family Home?** |
|  |  |  | Yes/No |
|  |  |  | Yes/No |

**4 Sources of Information / Tools used in Assessment**

4.1 The matters referred to in this report are from information obtained via interview with [parent(s)’s name(s)], documents held in Torbay Children’s Social Care files in respect of the family, and liaison with professionals including the midwife, as well as;

**4.2 Assessment sessions**

|  |  |  |
| --- | --- | --- |
| **Date** | **Parent(s) / Child(ren) Involved** | **Purpose of Session or Reason if session cancelled (delete if not relevant)** |
|  |  |  |
|  |  |  |

**5 Adaptations to Promote and Support Participation**

*(Consider learning disability or difficulties, physical disability and/or communication difficulties. What support has been provided or adjustments made to enable the parent to participate in the assessment? For example, any practical support to attend sessions, how have we been flexible around their commitments, use of interpreters, adaptations to meet additional learning needs, etc. You must refer to how any recommendations from any cognitive assessment have been followed.)*

5.1

5.2 Specific Special Measures

**SUMMARY**

**6 Summary of Key Findings**

*(This should be a summary only, as the more detailed conclusions and recommendations section is at the end of the assessment)*

6.1

**ASSESSMENT**

**7. Parental Views about the Pregnancy and Parenting, and their Plans for their Baby**

*(What are the parent(s)’s views about the pregnancy and the baby? Are there any concerns about how the pregnancy came about, how the parent perceives the pregnancy or baby, or the parents’ plans for the future? It may be relevant to consider the views of other significant people within their network, whether positive or negative).*

7.1

**8. Summary of Antenatal and Health Information**

*(Summarise and analyse information from midwifery/health colleagues, including parental engagement in ante-natal care/support and any health issues or complications for parent(s) or baby, and how these may impact on the care the baby will need / care that the parent will be able to provide.)*

8.1

**9 Summary of the Parent(s)’ Prior Experience of Parenting, including any Previous Children’s Services Involvement**

*(This should be an analytical summary of key historical events and concerns, not a repetition of the chronology. For example, are their children in their care? Do they have regular contact? Set out previous Children’s Services involvement. For each parent, consider the length and level of Children’s Services involvement with any siblings up to the present day. Set out concisely the reasons for Local Authority involvement; are there recurring patterns? Have there been any previous care proceedings? Remember to consider connected families i.e. partners who have been involved in care proceedings as well as mothers/ fathers.)*

9.1

**10 Understanding and Views about any Previous Children’s Services Interventions and the Current Involvement and Concerns, including Participation with this Assessment**

*(What has the parent(s)’ view been of the need for this assessment? How has the parent(s) presented and participated during the assessment and more widely with professionals? If there has been prior involvement with the family, what is the parent(s)’ views about the previous interventions? Does the parent(s) understand / acknowledge / take responsibility for the previous and current concerns?)*

10.1

**11.** **Factors which may Impact Parenting Capacity**

*(****From the list below, analyse only those factors that are relevant to the parent who is being assessed and remove those which aren’t relevant******(points 10.1-10.3 should always be considered).*** *Analyse how these impact on the parent, the care they provide, and the impact on the baby. Consider what support is being accessed or might be needed for the parent in their own right. Consider interactions between the factors relevant to each parent.)*

* 1. **Own Experience of Childhood/Adolescence and Being Parente****d, including any Experience of Abuse or Neglect**
	2. **Previous and Current Relationships, Domestic Abuse, and Understanding of Healthy and Unhealthy Relationships**
	3. **Parental Learning Needs or Disability**
	4. **Parental Physical Health**
	5. **Parental Mental Health, Self-Esteem, and Emotional Wellbeing**
	6. **Parental Substance and/or Alcohol Use (including before or during the pregnancy)**
	7. **Parental Involvement in the Criminal Justice System and/or other Violent and/or Anti-Social Behaviour(s)**
	8. **Any Other Relevant Factor(s)**

*(If relevant, impact of teenage pregnancy should be explored here)*

1. **Parenting Capacity: Understanding of and ability to meet the needs of the baby once born and as they grow and develop**

*(Consider within this section whether the parent(s) understand the baby’s needs and are able (skills, knowledge, and motivation) to meet these needs, including any impact of the factors identified in s11.)*

**12.1 Basic Care**

**12.2 Ensuring Safety**

**12.3 Emotional warmth**

**12.4 Stimulation**

**12.5 Guidance and Boundaries**

**12.6 Stability**

**13 Family and Environmental Factors**

*(Analyse how the following factors may impact the parent, the care they provide, and impact on the baby. Refer to the Genogram and networks outside of the family – considering both protective and risk factors.)*

**13.1 Family History and Functioning**

* 1. **Wider Family and Support Network**

**13.3 Housing and Home Conditions**

**13.4 Employment and Income**

**13.5 Family’s Social Integration and Access to Community Resources**

**14 Parental Motivation and Capacity to Make and Sustain Change(s)**

*(If there are changes needed, what stage of change you consider the parent(s) to be in? Are they able to and motivated to make and sustain the required changes before the baby’s birth or within the baby’s timescales? This should be based on discussions with the parent(s)* ***and*** *other sources, such as the chronology and liaison with professionals.)*

14.1

**15 Any other Factors to be Considered**

15.1

**ANALYSIS, CONCLUSIONS AND RECOMMENDATIONS**

**16 Identified strengths and protective factors, and their impact on the** **baby pre-birth, once born, and/or as they grow and develop**

16.1

**17 Identified vulnerabilities and risk factors, and their impact on the baby pre-birth, once born, and/or as they grow and develop**

17.1

**18 Conclusion**

*(An evidence-based, robust* ***analysis*** *of the key issues identified within the assessment, drawing together the risks and protective factors to a conclusion as to whether (or not) the parent(s) has the capacity, knowledge, skills, and support network to care for the baby safely once born. What are the risks, and are these mitigated by the protective factors or can these otherwise be safely managed? If changes are needed, assess the parent(s)’s capacity to make and sustain these changes, alongside what support may be needed, and whether this can be achieved within the baby’s timescales.)*

18.1

**19 Recommendations**

*(Clearly state your overall recommendation in terms of care of the baby once born, with clear reasons why briefly summarised. State any safeguarding actions that need to be taken once baby is born and any recommendations for interventions and/or support needed to mitigate the risks and/or benefit the baby, as well as the timescales for these. Set out any recommendations about family time/contact, especially if you are recommending separation at birth.)*

19.1

**APPENDIX**