

Therapeutic Life Story Work International Measurement Tool – adult version

Child's Name: _____

Child's Age: _____

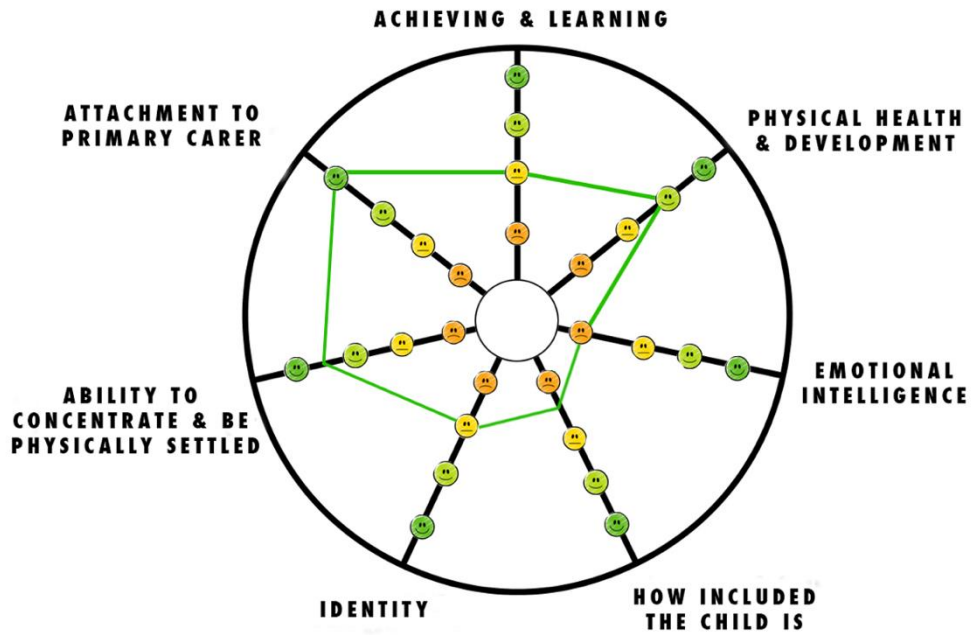
People supporting with this Life Story Work are:

Why now is a good time to do TLSW:

Child specific outcomes for this piece of TLSW:

This piece of TLSW is completed and up to date for now and these are some of the actual outcomes:

Example:



KEY:



No worries



Some worries



Worries



Very worried/Many worries

The 7 Areas:

Achieving & Learning



The child really enjoys school and has lots of friends there. They appear happy and included at break and lunchtimes, rather than finding more unstructured times difficult. They ask for help at appropriate times and in appropriate ways. They feel accepted and liked by their peers and look forward to going in the mornings. They have good relationships with the school staff and know who to go to if they feel worried or unsure about something. There is a general feeling that they are doing at least their best in subjects taught and they generally find the work not too difficult. Homework is completed and handed in on time. They are able to concentrate in lessons and on specific tasks rather than appearing pre-occupied with other thoughts or feelings. They are not disruptive to others and people are happy with their progress at school. They are achieving over their targets in some or all subjects. School is overall a positive and optimistic experience for them.



The child likes school, has a number of friends and mostly enjoys lessons. They do not find lessons too difficult and if something is more challenging, then they are not worried about asking a teacher for additional help. They are happy to go in the mornings and seem to cope well with the more unstructured break and lunchtimes. They are able to manage their homework without too much prompting and hand it in when it is due. They are achieving their potential.



The child often appears anxious about going to school, expressing that they would rather not go whilst accepting that they have to. They have a small number of friends but they also complain that they can feel a bit lonely and left out of things, especially at break times and lunchtime. They find lessons hard and can find it hard to concentrate whilst sometimes disrupting others in lessons. They are reluctant to ask for help. They are below target in some subject areas.



School is currently not working well for the child. They are unable to complete most/all of the work, which they say is too hard or too boring. Homework is consistently not completed or is handed in late. Their behaviour in school is often disruptive to themselves and others and they are regularly asked to leave lessons. They seem very pre-occupied with things other than learning in school and they may be on a behaviour plan. There are professional meetings currently being held to look at how to improve the situation in the existing provision or to move to somewhere that may better meet the child's needs. There is a general consensus that the child is not achieving academically and is not reaching their potential.

Attachment to Primary Carer



The child feels very safe and happy with the family that they are living with. They have secure attachments where they feel loved by their primary carers and they are able to love them back. They feel understood and listened to and they know how important and cared for they are. They have developed a conscience. They are able to seek comfort and affection when needed and feel that they are worthwhile and lovable, they have a sense of belonging and know that the world is not always a scary place. They are settled where they are and know that they are wanted. They are able to have time away from each other (to freely explore) with the reassurance that the carer will still be there for them and is keeping them emotionally in mind. The child has a positive internal working model.



The child has a fairly positive internal working model and feels that they can trust their primary carer who responds well to them. They like the family that they live with and they feel accepted. They have a consistent routine and know that they are going to be kept safe and cared for. They know that their carers want them and want them to be happy and to achieve. They seem to understand that they are staying within their current family for a long time and they are happy about that.



The child is either very 'clingy' to their primary carer, needing almost constant reassurance that they are there for them, or they appear ambivalent to needing care and are very self-reliant. There is still an overriding sense that the world can be a very unsafe place and they do not wholly trust their primary carers.



The child has a negative internal working model e.g. they feel that they are bad, unlovable, worthless, their carers are hurtful, unresponsive and untrustworthy and the world is an unsafe place and not worth living in. They show no empathy and do not seem to have a conscience. They retract and push away any love and care that the primary carer attempts to give them and the child may either be very controlling, angry or helpless. Their attachment style is largely disorganised.

Physical Health & Development



The child has good health and there are no major concerns. They have a healthy appetite and a balanced diet. There are no difficulties with going to bed and sleeping through the night. Regular appointments with the dentist and other health professionals take place when needed. They have respect for themselves and know that it is important to look after their body, they ask for and accept help with this when needed. They are very active and participate enthusiastically in sports both at and outside of school. There are no major concerns about their development.



There are no significant health concerns, the child has a good diet and exercises regularly. They usually sleep well at night time and know the importance of personal hygiene, having enough respect to look after their body in a normal way appropriate to their age and development.



There are some health concerns, which are either being managed or investigated. The child is not motivated or interested in partaking in physical exercise but will with encouragement. Their personal hygiene could be described as 'hit and miss', sometimes they forget to wash and keep themselves clean so they need reminders and a lot of support to do so. They can find it difficult getting to sleep and at times will have restless nights where they wake up a lot. They need help to relax and know that they are safe and protected at night time. Their diet is not that healthy and they probably eat too many foods that are not that nutritious in replace of healthier options.



Overall the child is not in good health and finds it difficult to look after themselves and also to accept help from others. They do not have or keep to regular dentist or doctors' appointments where needed. They have little motivation and energy to do any physical exercise. The child finds going to sleep at night very hard and when they do eventually sleep, they usually have broken nights, waking up regularly throughout the night. They appear anxious and disliking or afraid at night times. They do not care about their body and have little self-respect in what they look like. They are considered by some others as being unclean and scruffy and they have a poor self-image. Eating can be a difficult area and they may be significantly under or over weight. Some of the things that the child does are considered not in their best interest and a risk to their health and safety – for example obsessive eating patterns, misuse of substances, drinking alcohol, smoking. Others are concerned about the child's health and development.

Emotional Intelligence



The child is able to appropriately identify and express a range of feelings including happiness, sadness, disappointment, crossness etc to people who they trust. They can also identify other people's emotions and show empathy, having the ability to cheer up or calm down another person. Mostly the child feels happy and settled and enjoys life. They have a positive outlook and are looking forward to their future. They act responsibly and are fully aware of consequences to their choices and actions.



The child expresses that they are happy most of the time and when they do feel sad, cross or worried then they are able to tell others so that they can receive support. The child is able to reflect on their own actions and take responsibility for the choices that they make.



The child feels more sad, cross and worried than happy and consistently finds it hard to express how they are feeling to others. They sometimes have thoughts about hurting themselves or others, but don't usually carry this through. They can find it difficult to concentrate on what people ask them to do. It is rare that they take responsibility for their own actions.



The child avoids talking about their feelings and consistently feels angry and cross about most things. They keep this inside of themselves finding it difficult to manage, resulting in hitting out or being destructive, hurting themselves or others. The child does not consider how others are feeling and shows little or no empathy. They are not able to take responsibility for their own actions.

How included the child is



The child has lots of friends both in and outside of school and has some closer friends too. They are accepted and included in their peer group and are a member of some clubs. They are popular and friendships are appropriate to their age and are reciprocated. They are truly included in both their current family and the wider community. They receive invitations to different things. The child is not trying to act older or younger than their age. They have a sense of belonging to where they are now.



The child has quite a few friends but no one really close or a 'best friend'. They do go to clubs and participate well and also receive invitations to different events.



The child has few friendships but is known within their peer group. They do not receive invitations to different activities like birthdays or people's houses. It does not appear that they are truly included and they find it hard talking to people their own age. They spend more time on their own than with other people their age.



The child does not seem to have any friends and says that they feel left out and out of things most of the time. They feel disliked and rejected by their peers and feel that they are different to them. They find it difficult being with people their own age and knowing how to interact appropriately. Clubs they have joined have not gone well and they may have been excluded from them due to their behaviour. They usually spend time with others who are either a lot younger or older than them and this is causing a concern for the adults in their life who care about them. They have been described as a 'loner'.

Identity



The child has had help to understand why they are living where they are now and how and why life has changed for them. The questions they had previously have been answered and they have internalised why things happened and why people behaved in the way that they did. They have a sense of identity and culture and they have worked through all of the things that they were confused, cross and sad about. There are no longer big gaps in their knowledge and they are not demonstrating magical thinking. They have accepted their past and are able to live mostly in the here and now, without feeling that their past controls them – overall they have a healthy sense of self.



The child seems to know why they are living where they are now although they do have some questions. There are some gaps in their knowledge but they are aware of mostly all of the significant things that have happened in their life so far. They have quite a positive self-identity but need help and support with understanding their story.



The child has minimal information about what has happened in their past and how they came to live where they are now. They have a collection of stories from other people and they do not know which are true events and which are made up. They are confused about their past and they spend significant amounts of time thinking about it. They often feel sad, hurt and rejected and do not always express these appropriately.



The child has lots of questions about their past and many gaps in their knowledge. They consistently magically think, making up possible scenarios. They seem to be very confused and pre-occupied with their past and their behaviour is often a challenge to others. They do not understand why they are living where they are now and why they cannot live with other people from their birth family. They do not know who they are and appear very lost.

Ability to Concentrate and be Physically Settled



The child is able to concentrate well both in school and also more generally on everyday tasks. They are not constantly thinking about bad thoughts and do not appear to be preoccupied with their past or other things that they are worried about. They participate well in home life, school and in clubs and activities. They are able to be physically still and settled when it's needed as opposed to constantly moving and jumping around, talking and fidgeting.



The child is able to concentrate most of the time and can stay still and settled for fairly long periods. They are able to focus on a task and see it through to the end without too much difficulty.

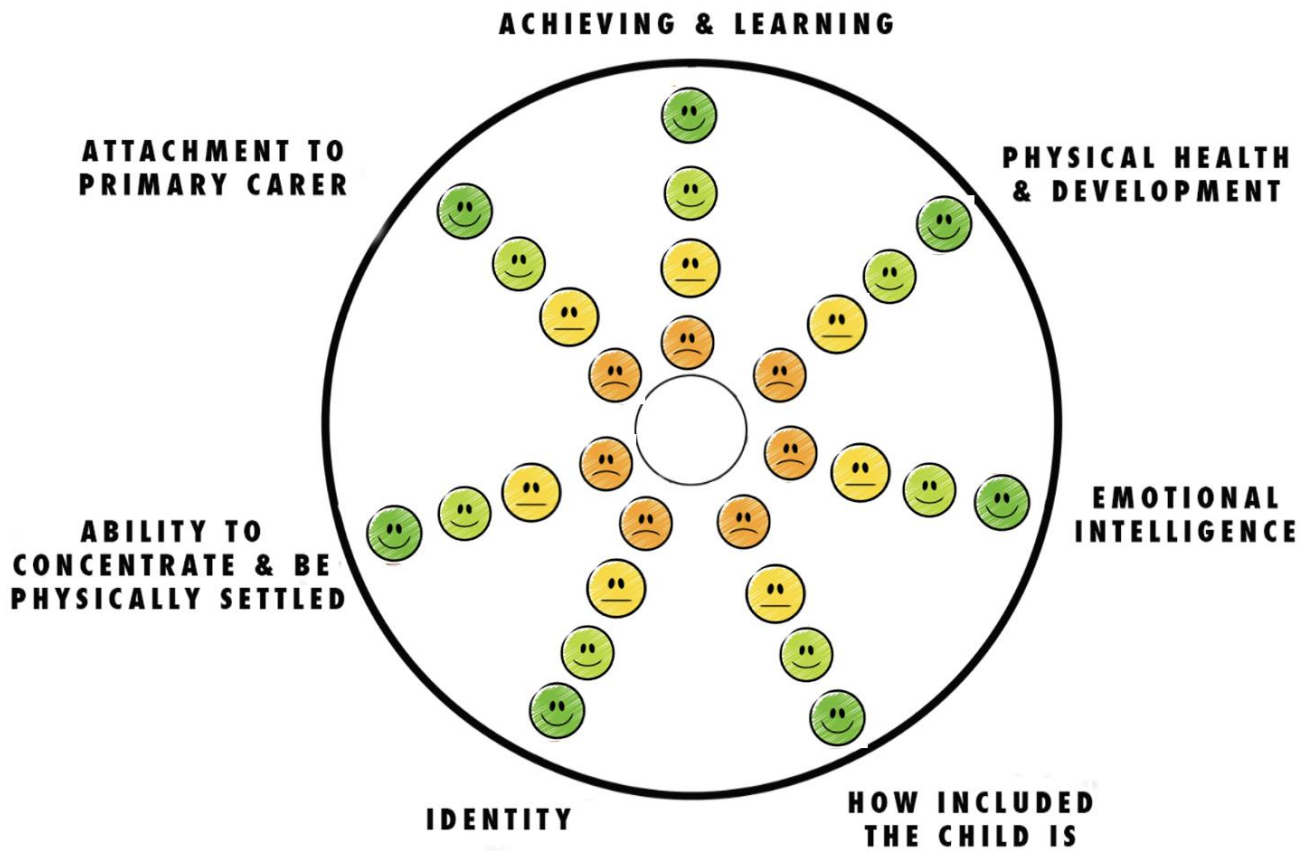


The child often finds it difficult to concentrate and 'flits' from one space or activity / subject of focus to another fairly frequently. They find sitting or being physically still a challenge, finding it easier to move in some way. Other people may describe them as a fidget. They may complain that bad or difficult thoughts come in to their head quite often and they can't get rid of them easily.



The child finds it incredibly difficult to concentrate on any activities, especially within school. They may complain of always having a head full of thoughts, mostly about bad or negative things or questions that they don't know the answer to. They find it almost impossible to sit still and be physically settled and usually need to move around and/or talk loudly. They present as being hypervigilant and anxious and wary of the environment around them. They can be seen as hyperactive, obstructive or very demanding by others.

Therapeutic Life Story Work Measurement Tool for:



Completed by:

Role in child's life:

Date:

Initial

Midway

End