

**Cumberland Early Help Assessment Chronology**

Signs of Wellbeing is a solution-focused, strengths-based approach to working with children and families. Chronologies provide an understanding of strengths/needs and can help the family and the Team Around the Family, (TAF), identify the past circumstances where they coped well and how they can use those skills in other situations. They also help to highlight gaps that need further exploration.

**Children and Family Details – Can be copied from Early Help Assessment**

All who live in the household.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Relationship** | **Name** | **DOB** | **Gender** | **Address** | **Ethnicity** | **Contact number** | **Communication Needs (including language and disability)** | **Education Setting**  |
| Choose an item. |  |  |  |  | Choose an item. |  |  |  |
| Choose an item. |  |  |  |  | Choose an item. |  |  |  |
| Choose an item. |  |  |  |  | Choose an item. |  |  |  |
| Choose an item. |  |  |  |  | Choose an item. |  |  |  |
| Choose an item. |  |  |  |  | Choose an item. |  |  |  |
| Choose an item. |  |  |  |  | Choose an item. |  |  |  |
| Choose an item. |  |  |  |  | Choose an item. |  |  |  |



**Who is completing this chronology?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Role** | **Agency** | **Contact details** | **Date completed** |
|  |  |  |  |  |
|  |  |  |  |  |



|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Significant Event Date** | **Significant event Details** | **Impact on child or Young Person** | **Any Action taken** | **Outcome** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Significant Event Date** | **Significant event Details** | **Impact on child or Young Person** | **Any Action taken** | **Outcome** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

