

Family Report

Your input is essential to targeting developmental skills that are important for your child. Section 1 asks general questions designed to help program staff get to know your child and family. Section 2 asks specific questions about daily routines and activities.

You may complete this form independently or with assistance from program staff. Thank you for sharing this information, and please let us know if you have any questions.

Date(s) completed: September 13, 2021

Child's name: Marcus Greene

Child's date of birth: May 24, 2017

Family's name and address: Veronica Greene

3873 Red Run Road, Baltimore, MD 21211

Person completing form: Veronica Greene

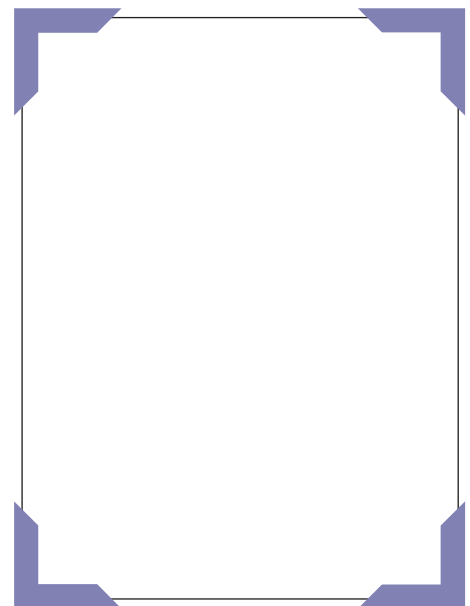
Relationship to child: Mother

Phone/text number: 443-123-6789

E-mail address: greene.veronica@gmail.com

Preferred method(s) of contact: Email

Language(s) spoken at home: English



Insert a picture (child or family photos or drawing), if desired.

Section 1: Child and Family Information

Tell us about your child.

Child's name: Marcus Greene

How would you describe your child in a few words?

Full of energy, happy, loving, friendly

What are some of your child's strengths?

He loves to make friends and play with his classmates.

Do you have any concerns about your child's development or behavior? If yes, please explain.

Marcus doesn't seem interested in reading books with me. And sometimes he has a A LOT of energy.

Tell us about your family.

Whom do you include as part of your family (parents, siblings, relatives, close friends, caregivers)?

His father, sister, aunt and uncle, and grandma and grandpa

What would you like program staff to know about your family's traditions and values?

We have a very strong sense of community within our family

What other information you would like us to know about your family (strengths, concerns, needs)?

Marcus' father and I work very long hours, so we rely on our relatives frequently for child care

Tell us about services you and your child currently receive and how our program can best support your family.

What is your preferred location and time to meet?

At our home, later in the evenings

Are there other people you would like to include in meetings about your child? If yes, please list.

Grandma and grandpa should attend our meetings

What services do you or your child receive? What other programs does your child attend?

None

What medical providers or specialists does your child see (doctor, physical therapist, occupational therapist, speech therapist)?

He sees his pediatrician

Would an interpreter or cultural guide help us to better serve your child and family?

No

Date reviewed: _____ Noted changes:

Date reviewed: _____ Noted changes:

Section 2: Activities

Please provide information about your child's participation in the following routines and activities.

Participating with Family

1. What family activities usually involve your child? Check all that apply:

- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> Meals | <input type="checkbox"/> Chores | <input checked="" type="checkbox"/> TV/movie watching |
| <input checked="" type="checkbox"/> Games | <input checked="" type="checkbox"/> Vacations | <input checked="" type="checkbox"/> Shopping |
| <input type="checkbox"/> Other: | | |

2. Would you like your child to participate in other family activities? If so, please explain.

When Marcus is able to, it would be great for him to participate in chores around the house

3. What makes your child's participation in family activities enjoyable?

He is so joyful and loves to be around his family

4. Are there things that make your child's participation in family activities difficult? If yes, please explain.

Sometimes Marcus can be stubborn and resistant to family plans or sudden changes

5. Would you like help improving your child's participation in family activities? If yes, please explain.

We'd like to see him be more agreeable to all family activities, not just the ones that he chooses

Date reviewed: _____ Noted changes:

Date reviewed: _____ Noted changes:

Eating

1. Where, when, and with whom does your child usually eat?

He usually eats at home with our family

2. What kinds of foods does your child eat?

He likes cheerios and French toast for breakfast. For lunch and dinner, he prefers chicken nuggets or hot dogs.

3. What makes nursing/meals enjoyable?

Marcus enjoys mealtime and is always happy to eat his favorite foods.

4. Are there things that make nursing/meals difficult? If yes, please explain.

No, mealtime usually goes very well.

5. Would you like support with your child's eating skills or routines? If yes, please explain.

No, support is not needed here.

Date reviewed: _____ Noted changes:

Date reviewed: _____ Noted changes:

Sleeping

1. What is your child's daytime sleep routine?

Marcus will usually take a nap after lunchtime.

2. What is your child's bedtime routine?

We'll help Marcus get into his pajamas, brush his teeth, and then get into bed. Sometimes we'll read a book together, but Marcus isn't always interested in reading.

3. How long does your child usually sleep during the day? At night?

His afternoon nap is usually 30-45 minutes. At night, Marcus usually sleeps for 10 hours.

4. What makes naps/bedtime enjoyable?

The time that we can spend close together, reading and talking and snuggling before bedtime.

5. Are there things that make naps/bedtime difficult? If yes, please explain.

When Marcus has a lot of energy, it can be difficult to get him ready for and in bed.

6. Would you like support with your child's sleeping routines? If yes, please explain.

Marcus needs some more support with getting dressed/undressed, bathing and brushing his teeth.

Date reviewed: _____ Noted changes:

Date reviewed: _____ Noted changes:

Dressing and Toileting

1. What is your child's routine for dressing (dressing, changing clothes, undressing)?
marcus has some trouble with larger clothing like sweatshirts and jackets, but he is able to take off smaller items more easily. Putting on and fastening clothes is more difficult for him.
2. What is your child's routine for toileting?
marcus is fully independent when he goes to the bathroom.
3. What makes dressing and diapering/using the toilet enjoyable?
sometimes marcus is able to fasten buttons and zippers, which we like to celebrate.
4. Are there things that make dressing and diapering/using the toilet difficult? If yes, please explain.
marcus has trouble getting dressed on his own, so it can take more time to help him get dressed and ready.
5. Would you like support with your child's dressing or toileting skills or routines? If yes, please explain.
we'd like to work on him becoming more independent when he gets dressed/undressed.

Date reviewed: _____ Noted changes:

Date reviewed: _____ Noted changes:

Bathing

1. What is your child's routine for bathing?
we start a bath, fill up the tub, get a few floating toys, and bubbles if marcus wants them. We help him bathe and dry off.
2. What makes bath time enjoyable?
he loves playing with his toys in the water and splashing around in the bath.
3. Are there things that make bath time difficult? If yes, please explain.
marcus has trouble bathing himself, so we need to help him throughout bath time. sometimes he will protest bath time, too.
4. Would you like support with your child's bathing skills or routines? If yes, please explain.
yes, we'd like to help marcus become more independent during bath time.

Date reviewed: _____ Noted changes:

Date reviewed: _____ Noted changes:

Traveling

1. How do you and your child get to appointments, meetings, or activities (walk, ride the bus, take a cab, drive a car)?

We typically drive in our car to appointments, meetings, and other activities.

2. What makes traveling with your child enjoyable?

Marcus likes to point out interesting sights and vehicles as we drive from place to place.

3. Are there things that make traveling with your child difficult? If yes, please explain.

No, Marcus is a very good traveler.

4. Would you like suggestions to help your child travel more easily? If yes, please explain.

No, Marcus is OK with traveling.

Date reviewed: _____ Noted changes:

Date reviewed: _____ Noted changes:

Playing

1. What are your child's favorite play activities?

Marcus likes to play and build with blocks and play with stuffed animals. He also really enjoys pretend play.

2. When and where does your child play with others (adults, siblings, relatives, friends)?

Throughout the day Marcus will play at home and in his childcare program. If it's nice outside, we'll play outside, too.

3. What makes playing enjoyable?

You can tell how much he enjoys playing with his friends and it puts the biggest smile on his face. He gets along very well with peers.

4. Are there things that make playing difficult? If yes, please explain.

The hardest part is getting him to stop playing when time is up.

5. Would you like support with your child's play skills? If yes, please explain.

No, Marcus is great here.

Date reviewed: _____ Noted changes:

Date reviewed: _____ Noted changes:

Communicating

1. How well does your child understand what you say?

Marcus understands what others say to him very well.

2. How does your child communicate (using words, making sounds, pointing, nodding, crying, moving toward something)?

Marcus talks in complete sentences.

3. Do others understand what your child says?

Yes other adults and children can understand him..

4. What makes talking to your child enjoyable?

He's very expressive, and hearing him improve his speech and vocabulary is always exciting.

5. Are there things that make talking to your child difficult? If yes, please explain.

He occasionally has trouble following longer, multi-step instructions. He also sometimes struggles with asking questions.

6. Would you like support with your child's communication skills? If yes, please explain.

We'd like Marcus to work on asking questions to get information he wants. And he could use some support on his conversational rules, too.

Date reviewed: _____ Noted changes:

Date reviewed: _____ Noted changes:

Making Changes

1. Does your child have difficulty changing from one activity to another? If yes, please explain.

Sometimes a quick unexpected transition can cause him to become upset. But it's not very common.

2. Would you like help supporting your child changing between activities? If yes, please explain.

No we're working on it at home. But if it becomes more common we may need additional support.

Date reviewed: _____ Noted changes:

Date reviewed: _____ Noted changes:

Participating in the Community

1. What community activities usually involve your child? Check all that apply:
- Movies
 Park visits
 Sports
 Worship services
- Other:

2. Would you like your child to participate in other community activities? If yes, please explain.

marcus does well in almost all community activities. movies can be tough because he has a hard time sitting quietly for longer periods of time.

3. What makes your child's participation in community activities enjoyable?

He loves to be involved in things, especially if there are other children there for him to play with. It's so nice to see him enjoying social interaction.

4. Are there things that make your child's participation in community activities difficult? If yes, please explain.

As most kids do, marcus has some trouble sitting still and quietly for a longer period of time.

5. Would you like support to help improve your child's participation in community activities? If yes, please explain.

If we could work on skills that help him attend things like the movies, that would be excellent.

Date reviewed: _____ Noted changes:

Date reviewed: _____ Noted changes:

Is there anything else about your child you would like to share or discuss?

Nothing else that I can think of