

**Please complete the sections relevant to your child. I look forward to talking with you.**

**INFORMATION:**

Your name:

Your age:

Phone number:

Would you like to chat over the phone / FaceTime / Skype

Skype name (if wanting to chat by Skype. Mine is helena.mooney):

Name of your child:

Child's date of birth:

Age of child:

Age and gender of siblings:

Other people living at home:

**CONSULTATION**

What's your main reason for having this consultation:

What you would like to get from our session?

How would you like to feel at the end of the session?

**PARENTING APPROACH**

Have you much experience with Aware Parenting / Hand in Hand Parenting?

**PRENATAL AND BIRTH HISTORY:**

Did you experience any stress during your pregnancy?.

How was the birth? Natural / c-section / homebirth / forceps / induced? Any particular stresses or issues?

Did your baby need to go to NICU or be separated from you after birth?

**EARLY BONDING**

Describe the first few days after birth.

How did you feel?

Did you experience Post Natal Depression?

**STRESS HISTORY:**

Describe any stressful events that your baby or child has experienced, your child's age, and reactions to them.

**CRYING HISTORY:**

Within their first few months, when did your baby cry & for how long?

How do you feel when your baby cried?

What did you usually do when your baby cried?

How much does your child cry now? And how do you usually respond to their tears?

Does your child suck their thumb, have a dummy or a special blanket / toy they carry around with them?

**SLEEP HISTORY:**

How did your child usually fall asleep as a baby (first year)?

How did you respond to their crying during the night as a baby? e.g. fed to back to sleep, cry it out, self-soothing

Where has your child has slept, and where are they sleeping now?

How does your child usually fall asleep now?

How often does your child wake at night?

How do you deal with your child when they wake at night?

**FEEDING HISTORY:**

If you're currently breast-feeding, when do you feed?

**TANTRUMS / DISCIPLINE HISTORY:**

What does your child do that annoys you the most?(!)

How do you usually deal with conflicts / annoying behaviour with your child? Do you use Time Out, Counting, Naughty Step?

Do you use rewards and Star Charts?

How did your own parents discipline you?

**FEARS:**

Describe any major fears your child has had in the past, or has now:

Describe your fears you may have about your child.

**SCREEN TIME:**

How many hours per day/week does your child have screen time?

**DEVELOPMENT:**

Describe any physical issues, medical issues, or medications taken:

**CARE-TAKING ARRANGEMENT/SCHOOL:**

Describe your child's care taking arrangement during the first year:

Describe your child's current care-taking arrangement:

**HOW DO YOU DEAL WITH YOUR OWN FEELINGS?**

What do you do when you are feeling stressed, upset, angry, etc?

**ENJOYING BEING A PARENT:**

What do you enjoy the most about your child?

What do you do enjoy most about yourself as a parent?

**MISCELLANEOUS:**

Is there anything else you'd like to include?