

**Carers Written Summary of Indirect Contact**

**Name of child/young person: -**

**Details of birth family member**

**(*mother, father, maternal grandfather, paternal grandmother, sister, brother etc.): -***

**Week commencing: -**

**Significant events or observations: -**

***(Some prompts are listed below in order to help you. Please note that you are only required to provide a summary overview. Not everything listed will be relevant each time).***

* *Your overall observations regarding the quality of contact i.e. interaction, affection and the child’s responses.*
* *Did the birth family member adhere to the indirect contact time as agreed in the (revised) contact schedule?*
* *Did indirect contact last for the agreed duration or did any factors arise that impacted this e.g. the child or birth family member’s level of engagement/interaction, distractions?*
* *Any observations regarding the birth family member’s preparation for indirect contact.*
* *Any comments regarding the preparation that you undertook on behalf of the child that you are looking after.*
* *Was there any specific intervention or advice needed from you as the carer during indirect contact?*
* *What was your observation of the ending of indirect contact (or goodbyes)?*
* *How did you experience the child’s behaviour before and after their indirect contact took place?*

|  |  |
| --- | --- |
| Day/Date | *Record your summary under the day of the week it occurred putting a date and time in the left-hand box* |
| Sunday |  |
| Monday |  |
| Tuesday |  |
| Wednesday |  |
| Thursday |  |
| Friday |  |
| Saturday |  |

**Areas of specific concern or worry**

***This might include the following points if they haven’t already been addressed above:-***

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| --- |
| * *How successful was the log-in process? Was the technology supportive? Did any issues arise with the technology that hindered indirect contact or had any implications for the quality e.g. dropping out or network connection etc?* * *Was there any worrying behaviour or comments from the birth family member that you considered to be inappropriate, or concerning for the child that you are looking after?* * *Were you required to step in and end contact prematurely for any reason related to this behaviour or comments?* * *Have you observed any worrying behaviour from the child you are looking after in response to indirect contact?* |

Signed ……………………………………………………………………………. Carer

Signed ……………………………………………………………………………. Young Person

Date ……………………………………………………………………………

SSW …………………………………………………………………………..

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| **Review / Contacts / References** |  |
| Document title: | Carers written account |
| Date approved: | 17 April 2020 |
| Approving body: | Policy & Practice and QA Steering Group |
| Last review date: |  |
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| Document owner: | AD Corporate Parenting |
| Lead contact / author: | Heidi Luck  Sarah Spoard |