

## Recording a visit to a child or young person

### Practice Guide

The details regarding the frequency for visits to all children and young people is set out in the Practice Standards. This practice guide sets out good practice in relation to seeing children and young people.

#### Purpose of the visit

Statutory and child in need visits give an opportunity to see the child or young person in their home environment with the people who care for them, to ensure their welfare is being protected and promoted. The main purpose of the visit is to speak to the children and young people on their own and review the progress of the plan with them, but it is important to consider whether visits can also be used to complete planned work with parents or children and young people.

#### Seeing children and young people alone

On a statutory visit, all children over 3 should be seen alone, and reasons recorded if not. Visits should be planned to ensure children under 3 are awake. Where parents refuse to allow children and young people to be seen alone on a statutory visit, concerns should be shared with the team manager.

Seeing children and young people alone means without siblings and other family members present as well as parents. Social workers must take care to identify the individual voices of the family group.

Please ensure tick boxes on the visit pro forma on LCS are completed to confirm whether children and young people have been seen alone.

#### If the child or young person is not seen

Only if the child or young person is seen, can the record be considered as a visit to a Child in Need/on a Child Protection Plan/in Care. If the child or young person is not seen, the record should be recorded as a home visit. The social worker should record the reason the visit did not go ahead and the follow up plan to complete the visit. If this is a statutory visit the follow up plan must be agreed by the Team Manager and their footprint recorded on file. For a visit to meet the criteria for a statutory visit, the child or young person **must** be seen at home. In addition to this, the child or young person should be spoken to alone and their bedroom and sleeping arrangements should be observed and recorded.

Care must be taken when recording a visit to multiple children (eg sibling group). Any child within this group who was not physically seen, should not be recorded as such.

## Assessing the home environment

For children and young people subject to a Child protection plan, the child or young person's environment should be assessed according to the issues of concern.

The sleeping arrangements of children and young people subject to Child Protection Plans and children and young people in care should be assessed and recorded at each statutory visit. For older children and young people permission should be sought before going into their bedroom.

## Children in Need

Visits to children in need are not classed as 'statutory', but are still required to ensure their needs are being met. The areas to be covered in the visit should be defined in the plan or in the parameters of the assessment (with the agreement and consent of the parents and/or the child or young person): i.e. if there is a concern about the household conditions these should be observed. Ideally, children and young people should still be seen alone, but this will be subject to parental consent.

For children in need with complex health needs and disabilities, visit frequency and the proportion of visits that should take place at the family home (instead of, say, school) should be stated in the plan and in the case summary.

## Direct work with children and young people

It is vital to explore **in detail** the child or young person's views and wellbeing. Social workers must work hard to engage children and young people and develop trusted relationships. If social workers do not have open conversations with children and young people about the issues that are impacting them, it is not possible to know that the harm has reduced.

Where children and young people are struggling to express themselves beyond "everything's fine", workers should use direct work tools that are appropriate to their interests, age, need and level of understanding.

To ensure variety and to access specialist materials use signs of safety worksheets or see [www.socialworkerstoolbox.com](http://www.socialworkerstoolbox.com). Worksheets should be uploaded to LCS (a photo is acceptable if children want to keep their work).

***The case record should be completed within a maximum 48 hours of the visit. Significant events should be recorded immediately.***

## LCS visit pro-forma

When recording case notes it is important to distinguish between what was observed, information shared by the family and professional opinion. Any facts provided by family members should be checked with other sources wherever possible.

The screenshot shows a software interface for recording a case note. On the left, there is a sidebar with 'Case Note' and 'Audit' tabs. The main area is titled 'Part 1 - Contact'. It includes fields for 'From Context Of', 'Contact Date' (21-May-2020), and 'Type of Contact' (Visit to a Child in Need). Below this is a table for recording contact details. The table has columns: 'Contact Regarding', 'Relation', 'Name', 'Age', 'At Contact', 'Interviewed?', 'Seen?', 'Alone?', 'Bedroom?', and 'Regarding Assessment'. There are two sections: 'Children / Young People involved in this Case Note' and 'Adults also present / interviewed'. The 'Self' row is highlighted in green, with 'Yes' in the 'Interviewed?' column. The 'Adults also present / interviewed' section shows 'No Adults recorded...'.

Contact Regarding	Relation	Name	Age	At Contact	Interviewed?	Seen?	Alone?	Bedroom?	Regarding Assessment
<b>Children / Young People involved in this Case Note</b>									
	Self				Yes	Yes	Yes	Yes	None
<b>Adults also present / interviewed</b>									
No Adults recorded...									

### Reason for contact

The worker should briefly state what the visit will cover with reference to work identified in the child or young person's plan or required for the assessment. i.e. "Complete 'This is my world' activity sheet" or "Domestic abuse safety plan"

### Detailed notes

#### Time and duration of visit

#### Present:

- The family (children and young people, parents/carers, etc.)
- Anyone else present - both members and non-members of the household (relatives, neighbours, partners etc.) Ensure full names and relationships are included for non-household members, so they can be traced if required.
- Other professionals (interpreters etc.).
- Are any family/household members missing?

**Child or young person's views/presentation/lived experience today:** *This section of the case note should be recorded in **Bold and BLUE**.*

- Ask children and young people specifically about the concerns that have led to the plan. Are things better or worse? Use their own words wherever possible to describe their situation and ensure it is clear what are the child or young person's own words and what is your interpretation.
- Give details of activities completed during the visit to ascertain the child or young person's views; record their responses and comment about the quality of your interactions.
- Assess the child or young person's mood, the response to them by their caregivers and their relationships with other members of the household.
- Is the child or young person in good health, clean, appropriately dressed? Are their health, welfare and social needs being met? Give examples to provide evidence.
- Where children are under 3, observations should be recorded about their presentation and interaction with their caregivers. With the parent present, the SW should engage even very small babies in play to understand their alertness, mobility, physical development and well-being, and attachment to carers.
- A separate record must be created for each child or young person in a sibling group

### Discussion with parents/carers/significant adults

- Progress against the plan – are they completing their actions?
- Information shared by them – concerns and positives;
- Their views and presentation (including their response towards you);
- The quality of the home environment;
- Outcome of any direct work completed with them today

### Risks/safeguarding concerns identified today: *This section of the recording should be completed in **Bold and RED***

- Consider: neglect, emotional/ sexual/ physical abuse, parental mental health, substance misuse, domestic abuse, toxic trio, sexual exploitation, gang affiliation, FGM, trafficking, modern slavery
- Explore any new incidents or injuries with parents and children and young people;
- Record safety plan discussions
- If there are no new incidents, say so.

### Analysis

- Has new information gathered today changed your assessment of the situation?
- Is the plan working? Has progress been made or sustained or has the situation deteriorated?
- Record areas of disagreement or concern, disguised compliance, including anything you found unusual or unexplained, anything that made the visit difficult for you.
- Use theory where appropriate to support analysis.

### Action

Next steps; date of next visit

Desired outcome	SMART Action	By whom	By when