

Practice guidance for compiling chronologies

1. Introduction

The purpose of this practice guidance is to provide practitioners with an outline of what a chronology is, how they can be used to consider the impact of an event in the child's life and what their limitations are.

Findings from numerous Serious Case Reviews enquiries and reports into the care of children have concluded that a chronology could have supported the earlier identification of risks to the child.

2. What is a chronology?

A chronology is a tool that practitioners can use to help them understand what is happening in the life of a child, parent or family. The chronology affords the opportunity to illustrate the impact of an event on a child and consequently why that event is deemed significant in the child's world. Simplistically it is a list, in date order of all the major changes and significant events in a child's or family's life. It provides a brief and summarised account of events to give an immediate overview.

Chronologies in themselves are not an assessment; however they are a useful part of an assessment. The chronology should not replace case notes or records which include more detailed and sensitive information. There should be a clear distinction between the case record and the chronology.

3. The purpose of a chronology

- To give a snap shot of a child's journey
- To capture the child's lived experience
- To understand the impact of experiences and events on the child.
- To identify:
 - Patterns of behaviour
 - Risks, vulnerability and the impact on the child.
 - Times of heightened risk, i.e. trauma memory.
- As a tool for:
 - Assessments
 - Child protection
 - Direct work
 - Impact analysis
 - Reflection in supervision
- Supports life story work for children and young people
- Record and recognise positive outcomes, achievement, successes

- Provides a historical overview so reducing the need for children and families to retell their stories repeatedly
- Evidences periods without social care involvement and what was working well during those times
- Record of services offered and taken up and the impact of those interventions

4. Key Factors for an effective chronology

4.1 Accurate

A chronology must be based on up-to-date, factual and accurate case recording. Any inaccuracies or deficiencies will impact on the composition of the chronology and limit its usefulness. If any inaccuracies are discovered and if required the chronology amended.

4.2 Up to date

Chronologies should reflect the best knowledge about a child's or adult's history at a point in time. It will need to be amended and updated in light of any new information received. Each agency should review and update their chronology on a regular basis, best practice is to add the information about the event or change as they occur and identify the impact of the event or change in order to show why it is considered a significant event for the child.

4.3 Detail

The chronology should contain sufficient details about a significant event or change but it should not be a substitute for recording in a case file or professional records. Chronologies should NOT be repeats of the case file, be time consuming to compile, so detailed they are difficult to read or so overwhelming that important issues or patterns are lost amongst the detail. Deciding detail of an incident or change is a matter of professional judgement based on the impact that the incident had on the child.

4.4 Involving the child and family

Chronologies are a part of recording and as such should be available to the person they are about. Involving the family in the chronology provides opportunity to check and ensure accuracy of information in a chronology. It also promotes and strengthens working together with children, adults and their families, as it helps to obtain family members perspectives on events and develops an understanding of their impact on individuals in the family. Sharing the chronology with the family can support them to reflect on the content and help develop their understanding of the child/adult/family as well as identify progress or lack of progress.

5. What to include in a chronology

A number of core issues should always be considered but may not be relevant for every case. The chronology should focus on events and changes in circumstances that had a positive or negative impact on the child.

Home visits should only be included if something significant happened or concerns identified. The chronology should not include all telephone conversations and should focus on the main events and the analysis of the impact it had on the child.

Record when events actually happened (not only when they were recorded).

Practitioners must use their professional judgement regarding the significance of the events outlined below and consider the impact on the child:

Family and Environmental Factors:

- Changes in family care structure e.g. through birth separation, divorce, bereavement, custodial sentence
- Information relating to health or parental lifestyles of parents/carers that significantly impact on the child
- Information relating to people moving in and out of household
- Changes in family circumstances e.g. housing (including the need for emergency accommodation), employment, pregnancy, birth of a sibling, emotional wellbeing
- Significant events where a child or young person is victim of or witness to a crime
- Police logs detailing pertinent info re family members/family home e.g. reported incident of domestic violence, drunken behaviour of carers etc.
- Reports of anti-social behaviour on the child or parents
- Incidents of the child going missing/being found
- Any incidents of cruelty or mistreatment of animals

Health

- Positive or negative changes in health related problems in relation to the child or their parents/carers, such as disability, substance related issues, mental health issues etc
- Changes to child's physical or emotional wellbeing
- Kept or missed appointments for ante-natal, post-natal appointments, immunisations, child health surveillance, hospital appointments
- Incidences of hospital admissions
- Change in GP (e.g. this could be particularly significant in cases of Fabricated and induced illness)

- Incidents of domestic abuse and/or injuries
- Attempted suicide or overdose

Education

- Positive or negative changes in school performance, attainment or achievement
- Significant periods of absence e.g. illness, pregnancy, truancy
- Positive or negative changes to school attendance
- Social inclusion within the school setting including evidence of bullying or positive support networks
- Any threats or actual incidents of violence to staff by parents or child
- Children being taken out of school to be home educated
- Positive or negative changes in parental presence, engagement or support with child's learning

Assessment, Intervention and local authority involvement

- Referral history and outcomes
- Allegations/disclosures made by the child
- Assessments e.g. child and family assessments, risk assessments
- Strategy discussions/meetings
- Section 47 investigations
- Child becoming subject to a CP plan/CP plan ending
- Referrals to other agency's about the child and/or family.
- Dates and reasons for child being looked after and discharges from the care of a local authority accommodated
- Details of work agreements
- Key professional interventions
- Significant assessments by other professional agency (e.g. SEN)
- Significant referrals to key partner agencies (e.g. youth inclusion services)
- Criminal proceedings
- Evidence of engagement and non engagement with agencies
- Court appearances, hearings and orders
- Any other relevant concerns or positive events