******Writing directly to the child**

**in case recording**

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This guidance should be read in conjunction with the [Case Records for Children in Care (Including Retention)](https://kentchildcare.proceduresonline.com/p_case_rec_lac.html?zoom_highlight=record) and [Recording Policy and Guidelines](https://kentchildcare.proceduresonline.com/g_recording_guide.html?zoom_highlight=recording).

## **Introduction**

As professionals, we are all ‘writers’ and spend a huge amount of time conveying our thoughts through the written word. To keep our work and decision making focussed on the child, our record keeping (as much as possible) should be written directly to them.

## **Why should we direct our record keeping directly to the child?**

There are huge benefits of writing directly to children in our case records. When practitioners break down information and imagine they are having a direct conversation the child, they remove professional jargon and best explain why decisions and/or plans were made. This is particularly important if children decide to gain access to their records when they become adults.

[The MIRRA (Memory – Identity – Rights in records – Access) study](https://www.ucl.ac.uk/news/2019/oct/childrens-voices-omitted-care-records-ucl-study-finds) (2019) identified that the voices of children and young people are largely absent from their care records leaving them with ‘feelings of blame and a lack of self-worth’. Professor Elizabeth Shepherd, who led the study, suggests social care records are vital for ‘memory-making and identity’ for adults who were in care as children, she adds ‘we must ensure care records put the experiences of the child at her heart of them’.

## **When is it appropriate to direct my record keeping to the child?**

The practitioner should imagine they are writing to the child, who will one day see their record. Where this is not possible, it may still be a powerful tool to write directly to parents or other family members.

Case recording directly to the child should be completed in the following circumstances (the list is not exhaustive):

* Case summary
* Case notes for the individual child (being careful not to link to other siblings) (including QA oversight)
* Child Protection Conference reports and plans
* Child and Family Assessments and plans
* Joint [Housing] Assessments
* Early Help Assessments and plans
* CLA care plan Part 1 and Part 2
* Pathway plans
* Supervision – there should be a section written to the child
* Pen Pictures of children
* Front Door Service, Request for Support – Next steps rationale for decision should be written to the child
* Child Permanence Report
* Agency Decision Maker Decision- Case note summary of why the decision has been made
* Return Interview following a period of missing
* Looked After Child Reviews

**When is it NOT appropriate to direct my record keeping to the child?**

* Where a child has sadly died
* Where we are **not** making a decision or undertaking any meaningful enquiries about safeguarding, such as;

-Any information requests, unless we identify safeguarding concerns relating to them

-Court requests

-Occupational Therapy requests, in which there are no obvious safeguarding concerns

-Identifying we need to complete a Missing Interview for a young person. We are not making a decision; this action is enabling the case worker to complete a conversation with the young person on their return home and triangulate the information obtained

* Reflective supervision
* Court reports
* Chronologies
* Front Door Service – Initial Triage comments
* ARP and CIC Panel referrals and minutes of actions- this information will be included in the child/ young person assessments
* Safeguarding alerts
* Audits and moderations

There are instances where we are managing a significant amount of information and from different professionals in a short space of time. Examples include:

* Initial triage comment’s part 2 in which case direction is being recorded
* Strategy discussions and S47 Outcome forms and plans
* All meeting minutes/summaries including Child in Need, Child Protection, CAHMs and DCSMs, Permanency Planning Meetings and Placement Stability Meetings

In these instances, there should be a section within the form/minutes written to the child which summarises the discussion/actions/rationale for decisions, rather than writing the whole document to the child.

NB: Reports and statements written during the Public Law Outline process (either pre or post application) should continue to be written in the third person. For example, Letter Before Proceedings, Social Work Evidence Template, Viability Assessments.

In addition, chronologies within documents should not be written directly to the child. Chronologies within Liberi are formulated from case notes. However, if case notes are written to the child, these will pull through to the chronology. Therefore, the first box of the case note should include information for the chronology and NOT be written to the child. The main body of the case note, would then be written to the child.

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| --- |
| Reason for contact  Home visit by Sarah Brown SW. George was seen and everything is going well. |
| Detailed notes  George, I came to see you today and we spent some time talking in your bedroom. You seemed happy today and you were laughing and joking. You told me that you’re getting on much better with your mum and there haven’t been any arguments. You said school was going well to and you’d managed to stay in school for the last 3 days, which is a big achievement for you. I was really pleased to her this. |
| Part 2 Write Up  There was a definite change in George today and I could see that the work that has been done with George and his mum is starting to improve their relationship. George was definitely calmer and happier than I have seen him for a while. We need to continue to build on this and continue the sessions to embed what we’ve done already. |

## **Tips for workers on writing to the child in case recording and record keeping**

1. It is easy to worry about the level of understanding the child has at this moment in time, at their current age, but they may not be reading it until they are an adult. You can write to the child as they are now or as if they are a young adult reading their file. Whichever you do, the key point is to use simple language, short words and sentences, avoiding jargon, and explain anything a non-professional would not understand. Using more common words does not mean being patronising or missing out important information.  A key test of how well you understand something is being able to explain it to someone else.
2. Be sensitive, warm and empathic and use a gentle tone.
3. On recording case notes specify whether you spoke directly to the child and what was discussed. E.g., “You told me/Your Mum/Dad told me…”.
4. Don’t be tempted to dilute information or actions linked to worries or risk when you write to the child. It is important that case recording continues to evidence what is going well but also, what we are worried about and what needs to change for the child to be safe.
5. Separate out fact and opinion and clearly identify strengths, safety, and risk - good records will contain both facts and opinions but there should be a clear distinction between the two, otherwise, it becomes all too easy to mistake opinion for fact and to leave opinions unsubstantiated.
6. Use different methods of communication. – use relevant pictures or photos, for example of a courtroom or judge, to build context.
7. Use rapport – include something you learnt from the child when writing to them. E.g., “during my visit we talked about your love for Manchester United” or “you showed me your new Barbie and how you had learnt to plait her hair. You seemed very pleased with your new skill, and I was very impressed”.
8. Be empowering – remind the child what they have done well. E.g., “I was really impressed by the way you were able to tell me (the IRO) what you wanted, and all the adults listened carefully”.
9. Accurately record the wishes, feelings and views of children and their families - practitioners firstly need to know what they are. This can only be achieved through spending time with children and adults and forming a trusting and meaningful professional relationship.
10. When making decisions which impact on the child’s life, we need to clearly explain to the child our rationale for the decision made and the action taken.

## **Practice Examples**

**An example of a home visit case note written directly to a child could be:**

During my home visit, you sat in the lounge for a while whilst I talked to your mum about the plan, we have made together keep you safe. Mum and dad have agreed that mum will make sure that he hasn’t drunk too much when he comes to visit you. She will know if he has drunk too much if he smells of alcohol, struggles to talk clearly and is wobbly on his legs. If she is worried that dad has drunk too much, she will ask him to go home to his house and visit you the next day instead. Dad has agreed that he will go home and thinks this would be a good idea to keep you safe and to make sure you have the best possible time with him when he visits.

Mum and dad have also agreed that mum should ring 999 if dad gets cross and also to ring Pat from next door who will come to collect you and take you back to her house.

**An example of a plan written directly to the child could be:**

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| --- | --- | --- | --- | --- | --- |
| **What needs to happen?**  **What is the change we are looking for?** | **What do the child/young person/family/professionals feel might impact on the changes/tasks being successfully achieved** | **How will it happen? What are the Tasks?** | **Who will do this?** | **By when** | **Wellbeing / Safety Goal**  **What is the expected impact?** |
| Sam, you need to have your 8-week childhood immunisations | Sam, your mum finds it difficult to take you to health settings as they make her feel very nervous and anxious | Nanny Jean has agreed to take you for your immunisations at the Doctors surgery and your mum will wait at home to give you a cuddle when you get back | Nanny Jean | 12 January 2023 | Once you are immunised, you will be best protected from childhood diseases |

**An example of an extract of Child in Need minutes (Chair’s report) written directly to the child could be:**

During the meeting, your mum shared how she has been using some new ways to support you in working through your angry thoughts and feelings. She told us that sometimes when you are angry, you can hit out and shout at her. Prior to you both working hard with Marie (the Social Work Assistant), mum said she would sometimes end up smacking your bottom as did not know what else to do. However, you and mum have now agreed a great plan for her to help you calm down using different ways such as ten second countdown and quiet time. Mrs Read (from school) has noticed you using some of these new ideas when you feel angry at school meaning you are not hitting out at your school friends as often. Well done, Harry.

**An example of an extract of Record of Strategy Discussion (Reason for Strategy Discussion) child could be:**

We can record a summary written directly to the child at bottom of the meeting minutes.

Mario, we received a referral from Early Help worker Julie Jones. A professionals meeting had been held on 07/12/22 between Early Help and Child and Adolescent Mental Health Service and you had been rated HIGH RISK by CAMHS in terms of a harm to self and suicide. Professionals are very worried that you have limited family support and whilst your nan (who you live with) does all she can to keep you safe, her health problems mean she is not able to leave the house as often as she would like or take you to your health appointments.

The referral told us that you often self-harm (by cutting your arms with blades and scratching at your face with your nails) and have said that you have regular thoughts of killing yourself. You also often use social media to share your thoughts of harm.

Due to these worries, this meeting was held to share the work that professionals are doing to support you and agree a plan to discuss with you and your nan to help improve how you are feeling.

**An example of supervision analysis (what do you think will happen if things don’t change section) written directly to the young person could be:**

Jaycee, your SW Julie has shared that she is worried that you are often going missing, and we do not know where you are. When we don’t know where you are we are worried that you may be being encouraged to smoke weed and drink alcohol. When this has happened, we are worried that you might get hurt by someone like when you were beaten up by another young person. We have worked together to bring together a plan which you have done so well to stick to for most of the time and we are so pleased that you came to your last Child in Need meeting to share your thoughts about what is happening. We are also pleased that you have been at home when Julie has visited recently and talked about how you are feeling.

We would like for you to think again about having some counselling as we wonder if your experiences as a younger child might be impacting on how you are feeling now, and Julie will talk about this with you again when she visits. Julie will also talk to you about getting some help from professionals who are trained to support young people who are misusing drugs. We would like you to be helped to lessen how much weed you are smoking.

**An example of a case note regarding an audit analyses:**

Ronnie, I have read your electronic file and spoken with Fran the person who supports you. This means that someone other than Fran has considered the support Fran has been giving you and your mum and has helped her to reflect and improve her practice; supporting her to think how she might do things differently and/or how she could improve the work she is undertaking with you. I was impressed by the assessment that Fran had completed as she has included your views and wishes which has meant that you have been part of decision making. I have asked Fran to review the plan she has made with you and your mum and asked her to talk to your mum about involving your nan and Auntie Sandy who have said they would like to help. I have also asked Fran to update your genogram (which is a bit like a family tree) to explore if there are any other wider friends or family that are or who would like to be involved in helping.

**Frequently Asked Questions:**

1. **Does the recording need to be written to the age of the youngest child in a sibling’s group of various ages?**

The information does not need to be age specific as the child will be able to access their files as an adult. However, this should be written in a factual and sensitive way using simple language, short words and sentences (avoiding jargon), and a gentle tone supporting the language to be sensitive and warm.

Good practice is to only write to the child you are recording on and to keep case notes separate. However, there may be some case notes which are appropriate to consolidate and if this is the case, , you should make sure all the children are included by name so you are writing to them all.

1. **How do I write of incidents of harm, such as rape?**

We need to maintain accuracy of information and transparency so as not to misguide why significant decisions and impactful actions have been made for the child. However, we should carefully consider the language we use to convey this message. E.g., “Sidney, this may be very difficult to read and to understand, we made this decision/were concerned as we became aware that your Dad had sexually assaulted your Mum which caused her harm. This made us worried about your wellbeing and safety”.

Although this may feel uncomfortable to write this is part of this child’s history and we need to consider they will be reading this information as an adult.

1. **Do we write to a child who has died?**

We will not write to a child who has died. However, we need to consider how we record this information in a sensitive way, as this information may be read by their family members at a later date.

1. **How do we record the specific detail required to support clear documentation of a specific service or intervention without oversimplifying this recording? E.g., during a Strategy Discussion or Section 47 investigation?**

We can include this information at the bottom of the minutes/summary of discussion and this will support us in explaining our analysis and decision making based on the information we have received. This information needs to detail the concern/ worry/ and what action was taken to mitigate or manage the concerns, who would be doing this and when it would likely happen. In some instances involving more than one child or young person you may choose to record this information on a separate case note for the individual child, summarising in the main body of the case note the decision or action made.

1. **Does a case allocation need to be written to the child (this provides case direction to the case worker)?**

A case allocation entry is written to provide direction to the case worker. The manager completing this action will then either write to the child in a summary at the bottom of the form or when dealing with a situation which involves other children/ young people you may choose to complete a separate case note entry heading writing to (child’s name) and add the information to the main body of the case note. This is asked to be completed to support the child/ young person to understand of the decision and action taken. E.g., Heading: Writing to Olly. “Olly, Sophie Hall (your Early Help worker) has been asked to support you. I have asked Sophie to meet with you to talk about your worries about going to school and what is making you anxious, so Sophie and your school can try to help you.

1. **How do we record supervision on a child’s file?**

Supervision is a reflective space to consider a child’s journey, lived experience, interventions, the practitioner’s experiences of working with the family, and hypotheses. Due to the reflective nature of the discussions, it is not necessary to write the whole supervision record to the child. However, there should be a section written to the child within the form.