

# Multi-Agency Chronologies - Practice Guidance



This guidance applies to all agencies working with children and their families:

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## Introduction

A chronology is a series of significant events and changes that occur in a child's life – the child's felt and lived experience.

Completing a chronology includes the fundamental need to decide what constitutes a 'significant event' and how much detail to include in an entry, comprehensive or succinct? This guide aims to support all agencies, workers, and their managers to navigate these complexities by providing an overview of the practice applicable to chronologies provided within Child Protection processes in Norfolk, including CP Conferences.

A written chronology should provide a summarised account of significant life events for the child, and their immediate family network based upon your agency's contacts; the impact an event has had on the child, any action taken. The chronology is a summary of information that gives an "at a glance" overview of the child's life, both positive events and outcomes and negative harmful events and outcomes; a chronology does not replace case notes or records which should include more detailed information.

## Purpose

- To place the child(ren), and their family network, at the centre of the practitioner's thinking.
- To ensure the child's voice, expressed views and observed behaviours, are evidenced, and meaningfully and consistently recorded
- To help develop a better understanding of the immediate or cumulative impact of harm and/or events for children(ren).
- To help identify patterns of risk and harm and equally, patterns of strength and safety in the child's life.
- To evidence where there is longitudinal and chronic neglect of child(ren)
- To help make links between the past and the present, supporting practitioners, parents, and members of the child's family network to understand the importance of historic information in relation to the current situation.
- To evidence progress [through the use of a visual RAG rating structure], to empower the parents and family members to sustain changes made and help them to identify where they have been successful in their parenting in the past; identifying what works and what doesn't for them in caring safely for their children at all times.
- A good chronology can draw attention to seemingly unrelated events or information, enabling the significance of issues to be better understood.

- To enable a new worker to become familiar with the circumstances of the child and their family, including reducing the risk of starting again.
- It is a useful reflective tool, which can be used within supervision for critically reflective practice and to identify next steps.

An effective chronology enables workers to see what's happening in the life of a child and the impact of those life events for the child and their family network. It helps identify patterns and issues, including positive change; is invaluable in assessing risk and when analysing the likely impact of longitudinal events, especially where there may be no single 'incident', e.g. in respect of identifying neglect.

Regularly reviewing this history should help workers distance themselves from immediate, isolated incidents and current impressions of the family to consider the impact of historical events and the potential or actual accumulative impact of these over time for the child, and for their family.

Co-producing chronologies with family members promotes their position as experts in their own lives and can assist in them build their self-efficacy. The process of co-production will also support workers to build relationships with families by exploring the world from the family's perspective, supporting individuals to better understand what has happened in their lives, to appreciate and validate the family's position and what the family think might help.

The information contained in chronologies can also aid a contextual lens where risks from extra familial contexts may be the primary concern for the child. Compiling information and noticing patterns in friendship groups, community locations, and knowledge of online activity may also help identify where and how to intervene to increase safety for children.

### **Multi-agency chronologies**

Research, practice and learning from case reviews has shown the importance of multi-agency chronologies in assisting professionals in their work with children, adults and families, particularly where there is evidence of significant risk for a child, e.g. when there are concerns about longitudinal neglect, fabricated or induced illness, or high risk CCE / CSE concerns for a child.

A multi-agency chronology merges together chronologies created by different agencies and presents a complete view of what is happening in the child's life. This can highlight events, which on their own may appear to be insignificant, but in the context of other events, or information held by another agency, builds a more informed picture of the impact upon the child and their family. The identification of significant events and their impact on the child by agencies around the child and their family members, and those known by the family themselves, assists in understanding historic, present and future risk and supports the multi-agency decision-making process.

The effectiveness of creating a multi-agency chronology relies on agencies completing their individual chronologies using the agreed format, including the RAG Rating, to enable the chronologies to be easily collated. To assist with this, the requirement for the onward use of a multi-agency chronology should be recorded as part of the child's plan and timescales agreed.

It is essential that the multi-agency chronology is regularly reviewed and used to inform decision-making in all safeguarding review and planning meetings for the child.

### **Consent and information management**

It is good practice to obtain consent from the child's parent/carers, and where appropriate, from the child themselves, before the chronology is compiled; and before contacting other agencies for information when a multi-agency chronology is being compiled.

Where the chronology is compiled for the purposes of sharing safeguarding information within CP Protection processes and parent/carers, or the child, decline to consent to the process, the agency must consider its statutory safeguarding responsibilities and ensure all relevant safeguarding information is provided/recorded.

Where it is felt necessary to record information about member/s of a child's family network in the child's chronology [because of the impact of an event/circumstance for the child] all agencies/workers must be mindful of applicable GDPR and Data Protection Guidance in respect of the management of personal data and special category data.

**For support and guidance on information sharing refer to your agency's information sharing policy.**

### **When to start/use a chronology**

Best practice recommendations are that a chronology is a key part of ongoing recording for all agencies which support children and their family networks and should be in place from outset of the service provision.

### **Timeline of recording/updating the chronology**

Where threshold is agreed for an ICPC, the report and chronology for conference must include details of all significant events for the child in the last 2 years. Including, all allocated SW episodes with start/end dates, whether EH/FS/CIN/CP; major life events for child including births, deaths, significant transitions, i.e. planned and unplanned house moves, serious illness, separations, such as parent/carers separating.

Where a child becomes subject of a CP plan, the chronology timeline should cover the full time period between conferences, i.e. 3 months or 6 months.

Where an updated chronology is provided for core group, the timeline of recording covers the 4 - 6 week period between core groups, unless agree otherwise; in this instance the a standalone chronology document is used [see Appendix 1]

## How to record a chronology

- **Accurately** – record the date of the event, not the date the information was entered into the chronology.
- **Chronologically** - record events / issues as they happen and in order.
- **In context** – record the information given following the section headings / guidance
- **In compliance** - use the agreed format (see Appendix 1 & 2), as this format enables information to be simple to read; completion of the RAG rating system is key to ensuring full understanding of the impacts and outcomes for the child of their continuing felt and lived experience. Within this **positive life events and associated impacts for the child must be included in the chronology – a chronology should not be solely a record of negative harmful life events.**
- **Factually and succinctly** – record factual information in a succinct way to assist with decision-making e.g. completed parenting intervention, worked alongside parents to de-clutter home environment, started to re-engage with substance misuse appointments after a period of disengagement, family changed GP to [name] GP practice, alleged assault on [name] by [name]. Deciding on the level of detail to be included is a matter of professional judgement but chronologies should add value and not replicate the case management records.

A chronology is not a cut and paste copy of an agency's main records or case notes.

For ICPC the chronology should contain details of **Significant Events for the child/ren in the last 2 years.** Where there have been Care Proceedings for the child or older siblings, and/or legal proceedings in respect of Education attendance, dates and outcomes of each set of proceedings must be included irrespective of timeline.

Where child becomes subject of a CP plan, the chronology timeline should cover the full time period between conferences, i.e. 3 months or 6 months.

Where agency support ends between conferences – the agency should submit an updated chronology, to the close of service date, to the next review conference.

- **Kept up to date** – chronologies should be maintained, regularly reviewed and analysed in order to be a relevant and useful tool. Where a child is subject of a CP plan the timeline for collating the chronology will be confirmed in the CP Conference.
- **Individualised** – In the case of a sibling group each child will generally have their own chronology. For some organisations/services/teams, for example Intensive Specialist Support Services or Schools, it may be one chronology per family is completed.

Where a child is referred to ICPC, and/or becomes subject of a CP plan, and it is unclear whether each child should have their own chronology or if it is acceptable to have one chronology for a sibling group, workers should seek the view of the Independent Chair.

### What is a “significant event”?

‘Significant’ can be defined as “*sufficiently great or important to be worthy of attention; noteworthy*”. Professional judgment will need to be used to determine events that are significant in the chronology. **The following is guidance only and not an exhaustive list:**

- Referrals about the child and parent/carers, including non-resident parents.
- Details of being open to services/interventions/plans and decisions made, including any assessments with start and finish dates and outcome decisions.
- Disclosure by the child, or its siblings, of any form of harm or abuse.
- Care Proceedings for the child and/or older siblings; dates and outcomes of each set of proceedings must be included irrespective of timeline.
- House moves, homelessness, multiple changes in address and eviction. [Including those for non-resident parents which impact on the child].
- Unexplained or significant injuries, including non-accidental injuries or reports of suspected abuse.
- When anti-social behaviour started, what happened and who was responsible (if known)
- Child ‘missing’ episodes, start and end dates.

- Health information should include:
  - Attendances at Accident & Emergency, how this was managed by parent/carer, impact for child
  - Admission to Hospital, whether planned or unplanned, how this was managed by parent/carer, impact for child
  - Clinical diagnosis, e.g. an acute illness but with ongoing consequences (e.g. Meningitis or Stroke) or a chronic, degenerative or life-limiting condition (e.g. Epilepsy, Cancer, Multiple Sclerosis).
  - Clinical appointments, those attended and those not attended and impact for the child. These may be summarised but should state how many appointments were missed.
  - Home visits, pre-arranged and ad hoc and impact for the child; may be summarised but should state how many appointments were missed.
  - Evidence of prescribed medications being administered as directed / not being administered, and impact for the child
  - Evidence of essential health advice being followed or not followed and impact for the child, e.g. a chronic health condition managed well or not, age/stage dietary advice being followed or not.
  - Concealed pregnancy
  - Multiple changes of General Practitioner.
- Substance misuse or dependencies on medication etc. in a child **or** in their parent/carer [whether resident or not] or other resident household member.
- Changes in pre-existing or acquired disabilities (through accident or illness).
- Absence of a parent or significant care giver through incarceration, divorce/separation etc.
- Births and deaths of significant people.
- Change in family composition, new partners for parents, separations, known unsafe visitors, unknown adults in the house.
- Criminal or civil proceedings and outcomes, changes in legal status for any member of the child's household or non-resident parent.
- Police contacts with the child and their family known to Children's Services, e.g. CPI notifications
- Incidents of domestic abuse or substance misuse in relation to a resident parent/carer or non-resident parent.

- Education information should include:
  - A **summary** [half termly] of lateness, absence or attendance patterns in Education, [**not** individual dates/time], with the impact summarised.
  - Where there have been legal proceedings in respect of Education attendance, dates and outcomes of each set of proceedings must be included irrespective of timeline
- Change of school / education provision
- Attempted suicide, self-harming, overmedication of a child, or parent/carer.
- Reports received from third parties sharing concerns which may or may not have included requests for further action.
- Where the multiple missed or dropped phone calls are assessed as a Significant Event, these should be summarised within the chronology, [**not** individual dates/time]; with the impact also summarised

### **Analysis and RAG Rating**

Reviewing and analysing the current and longitudinal history within the recorded chronology will provide information to workers and their managers as to the detail of the child's felt and lived experience. The detailed experience of the child will also provide information regarding parent/carers capacity to learn and change. A well-maintained chronology will include details of the support and intervention provided to the family, their response to this, and if this has brought meaningful, sustained change to the parenting and care afforded to the child. Recognising periods of strained relationships with services or increased risk will enable workers to be curious about what the reasons for a perceived lack of change might be, including shame, ambivalence, or struggle of confidence of parents and the family network and how this might be understood and worked with. Workers should also review information to look for evidence of the factors that indicate motivation and commitment to parental change, and equally, evidence of those changes as they begin to be seen and established in family life.



In addition to the detail of the chronology, the chronology format includes a RAG rating system intended to aid analysis by providing an immediate view of the nature and impact of events for the child and associated adult actions in dealing with those events. **RED**: An event that indicates high risk. **AMBER**: An event that indicates medium risk. **GREEN**: Used to indicate low risk, or strengths/safety, where the event is still significant to the child.

The RAG rating is applied twice in each chronological entry. Firstly, to indicate the nature and impact of a significant event for the child:

**Significant Events - Impact for child:**

**RED** = safeguarding event and/or cumulative negative, harmful event/outcome.

**AMBER** = significant life events.

**GREEN** = positive events / outcomes

The second RAG rating is applied to indicate the overall impact for the child following adult action/intervention in dealing with the event:

**Overall impact for child:**

**RED** = confirmed continuing negative, harmful outcomes.

**AMBER** = some continuing risk OR improving/positive outcome, further change needed

**GREEN** = confirmed positive outcomes – parenting strengths utilised, child experiences safe care

**The RAG rating process must be completed for all chronological entries within the Agency Report to CP Conference.**

**Child Protection Conference**

Where a child is subject of a Child Protection Conference each agency will submit their completed *Agency Report with Chronology* to conference within agreed timescales. On receipt of the report / chronology from each agency, the Child Protection Administrator will compile one multi-agency chronology with this chronology being shared within conference.

The Independent Chair will facilitate the conference dialogue to explore the detailed chronology, using the RAG rating visual analysis to highlight key events of the child's lived experience, drawing out evidence of strength/safety and risk/harm, and the child's voice in response to those experiences. The Independent Chair will support conference members to be robustly curious as to root cause and risk of immediate harm for the child and to ensuring these matters are addressed within the onward plan for the child.

Where a child becomes subject of a child protection plan, the Independent CP Chair will include oversight and scrutiny of the multi-agency chronology within the ICs midway monitoring process.

