In South Ayrshire

Good Practice Guidance

Appendix 3
Chronology of Significant Events
Guidance on the Compilation of Chronologies & the Process of Integrated Chronologies

Introduction

South Ayrshire is committed to the underpinning principles of ‘Getting it right for every child’. This practice guide incorporates the key aspects of the SWIA ‘Practice Guide for Chronologies’ which was published in January 2010.

The chronology seeks to provide a clear account of all significant events in a child’s life to date, drawing on the knowledge and information held by agencies involved with the child and family.

A significant event is anything that has a significantly positive or negative impact on the child. It does not have to happen to the child, but could result in a change of their circumstances, which has positive or negative consequences for them. It is important to note that what might be a key event in one child’s life, such as a period of good health or good school attendance after a long period of absence or exclusion, will not even be relevant to another child. In this respect agencies are asked to use their professional judgement in completing the chronologies.

This brief and summarised account of events provides accumulative evidence of emerging needs and risks and flags up when a multi-agency response might be necessary. The chronology should be factually based and it should be clear what the source of the information is. The chronology should not replace existing case notes or records which will include much more detailed and sensitive information which is owned by the child and or family and a clear distinction must be made between the two. The chronology should be succinctly recorded and child-focussed. Each event should have an action or an outcome that has had a significant impact on the child. It is not appropriate to only record dates of meetings, visits etc without the outcome that therefore details the significant event. When reading a chronology there should be no apparent gaps in information.

A chronology is important because it records the circumstances and experience of the child and milestones in their life. For example those positive events celebrated by a family which are usually easily remembered. Some significant experiences may be less positive but are an important influence on the life of the child. This needs to be recorded as a chronology to identify at a glance, the key patterns indicating needs, risks, evidence of resilience and the family’s potential to support its own needs or progress with minimal intervention.

The key purpose of the chronology of significant events is early indication of an emerging pattern of risk and concern. This may be evident by gradual and persistent withdrawal from protective factors such as non-attendance at health appointments and non-attendance at nursery/school alongside a frequent attendance at A&E or GP on-call service. Events such as domestic abuse referrals, referrals to the Children’s Reporter and referrals of concern should also be recorded. In most circumstances the child’s chronology should start with their birth however in some cases particularly in that of a baby it will be relevant to start the chronology pre-birth. This will show emerging patterns of risk before the baby is born.

Review and analysis of a chronology is essential to an effective assessment. A chronology which is not reviewed and analysed serves little if any purpose.
Guidance on the Chronology of Significant Events

The following areas have been identified by each of the agencies as worthy of recording but not every area will be recorded for every child only where it is a relevant key event:-

Education

- Positive or negative changes in family care structure e.g. separation, divorce, bereavement, custodial sentence
- Positive or negative changes in family circumstances e.g. housing, birth of a sibling
- Physical and mental health and wellbeing of child, parents/carers
- Positive or negative changes in performance, attainment or achievement
- Identification of Additional Support Needs within staged intervention process (including requests for support services involvement e.g. psychological service, intensive support team, care and learning)
- If the child has an Individual Education Plan or Co-ordinated Support Plan
- Positive or negative changes in attendance
- Positive or negative changes in parental presence, engagement or support with child’s learning
- Episodes of exclusion or re-integration
- Significant periods of absence e.g. illness, pregnancy, truancy
- Social inclusion within the school setting including evidence of bullying or positive support networks
- Decision to initiate an Integrated Assessment.
- Outcomes of internal assessment team or joint support meeting
- Change of teacher or other key member of staff from the child’s school
- Change of school
- Any threats or actual incidents of violence to staff by parents or child
- Any other relevant concerns or positive improvements

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 in family care structure e.g. through separation, divorce, bereavement, custodial sentence
- Changes to child’s physical or emotional wellbeing
- Changes in family circumstances e.g. housing, birth of a sibling, emotional well-being
- Referrals to Paediatric Services, Therapy Services, Other Agencies
- Attendance at Accident and Emergency, Out of Hours and NHS24
- Incidences of hospital admissions
- Childhood illnesses
- Changes in disability
- Dates of immunisations and screening
- Kept or missed appointments for ante-natal, post-natal appointments, immunisations, child health surveillance, hospital appointments
- Formal health assessments e.g. developmental, LAAC
- Change to the Health Visitor, School Nurse or other key staff member working with the family
- Missed appointments without acceptable reasons, including refusal of entry or variation to routine appointment schedule
- Threats or actual incidents of violence to staff
- Any other relevant concerns or positive improvements
- Significant home visits
Social Work Services

- All referrals to social work
- Information relating to health or parental lifestyles of parents/carers that significantly impact on the child
- Positive or negative changes in family care structure e.g. through separation, divorce, bereavement, custodial sentence
- Positive or negative changes in family circumstances e.g. homelessness, birth of a sibling
- Referrals to Family Support Services, Home Support, Childcare or other agencies
- Dates and details of Social Work Involvement e.g. start date, closure of case and reason
- Lack of engagement
- Child concern referrals
- Outcome of child protection referrals/enquiries/investigations
- Outcome of child protection related meetings e.g. case discussions, case conferences, core groups
- Dates and reason for child being looked after and accommodated
- Change of social worker or other key worker from the service
- Changes to legal status including primary and secondary statutes where applicable
- An established pattern of missed appointments without acceptable reasons, including refusal of entry
- Dates and conditions of contact/conditions of no contact
- Change of address including foster placement and temporary accommodation
- Referrals to the Children’s Reporter and the grounds of referral
- Outcome of children’s hearings
- Details of planning meeting and/or review dates including LAAC
- Any other relevant concerns or positive progress
- Any threats or actual incidents of violence to staff including verbal threats
- Date when summary statements, working agreements, risk assessments are completed
- Significant home visits

Housing

- Positive or negative changes in family care structure e.g. separation, divorce, bereavement, custodial sentence
- Positive or negative changes in family and housing e.g. relocation, eviction, transfer to private tenancy
- Positive or negative changes in maintenance of tenancy agreements
- Positive or negative changes in neighbour relations or anti-social issues. Where this has led to further action being taken, for example ASBO, then this should be recorded
- Evidence of, or referrals for suspected drug dealing, drug taking or excessive alcohol use
- Reports of anti-social behaviour on the child or parents
- Reports from Elected Members, members of the public or Anti-Social Behaviour Staff regarding anti-social behaviour
- Any concerns about the safety or welfare of children or young people noted directly by housing staff or passed to them by others in the community e.g. children left unattended, poor standards of household cleanliness, children wandering the streets or being out in poor weather without adequate clothing
- Any threats or actual incidents of violence to staff
- Any other relevant concerns, positive events

Scottish Children’s Reporters Administration

- Dates of referral
- Referral reason e.g. care and protection, youth justice, domestic abuse, school attendance. Will be detailed as follows;
  - Section 52(2) a, out with control
  - Section 52(2) b, moral danger
  - Section 52(2) c, lack of care
- Section 52(2) d, schedule 1 against child
- Section 52(2) e, member of same household as a child who is victim of a schedule 1
- Section 52 (2) f, member of same household a schedule 1 offender
- Section 52(2) g, member of household where the offence of incest or intercourse against a child has been committed by a member of that household
- Section 52(2) h, has failed to attend school
- Section 52(2) i, has committed an offence
- Section 52(2) j, has misused alcohol or drugs
- Section 52(2) k, has misused a volatile substance
- Section 52(2) l, special measures to deal with behaviour
- Legal status and changes to legal status
- Dates of any Children’s Hearings
- Any decisions made about the child i.e. hearings, voluntary measures, compulsory measures of care

Co-ordination of the Integrated Chronology

Practice and research has shown that integrated chronologies can be extremely important in identifying critical events in the lives of children and can assist professionals in decision-making when working together with vulnerable children and families. A single incident, no matter how significant or insignificant it may appear in itself, often takes on a far greater importance in the life of a child when placed in the context of a proper, time-lined integrated chronology. The integrated chronology, therefore, requires careful co-ordination and close working between the agencies involved, and requires individuals to carefully note all matters which may constitute a significant event.

The Lead Professional is responsible for collating the integrated chronology and all agencies involved in the integrated assessment are expected to contribute to the chronology. The process will work best when there is a shared sense of responsibility by all for gathering, recording, and passing the information to the lead professional who will take overall responsibility for collating and distributing the integrated chronology.

Parents, carers, young people and children can be given a copy of the integrated chronology, providing this does not place the young person or child at further risk and any restricted information is removed. Parents or carers should be encouraged to reflect on the content of the integrated chronology with the help of their Named Person, Lead Professional or any other agency representative with whom they are involved. Some parents/carers or young people may wish to correct details or make a contribution to the integrated chronology and this should be considered by the Lead Professional. The views of the child and parents/carers should be recorded within the assessment. Where it is discovered there are inaccuracies in the content of an individual agency’s chronology, the Lead Professional will discuss this with the agency representative to seek clarity and resolution.

Compilation of the Integrated Chronology

1. On invitation to an Initial Child Protection Conference, LAAC Review, CSP Meeting or any other type of integrated assessment meeting or where an Integrated Assessment is being compiled, each agency should review their own single agency chronology on the child and up-date it where necessary. Where, for any reason, this does not exist the agency should review their records on the child and select significant events as per the guidance above. These should be dated and recorded briefly using the standard format (see below).
2. Where possible, each agency should bring their own chronology to the initial meeting for submission to the lead professional.
3. The Lead Professional will collate the individual chronologies received and produce the integrated chronology as part of the child’s integrated assessment.
4. The time scales for integrated chronologies will be those applicable to the purpose of the assessment and the forum in which it should be discussed e.g. Child Protection Conference, Coordinated Support Plan Meeting, LAAC Review.

5. During the span of the child or young person’s plan, the Lead Professional shall have responsibility for the ongoing co-ordination of the integrated chronology and the assessment team should review on a regular basis.

6. Each agency representative should continue to add to his or her individual agency chronology, which may have a specific focus on the main role of that particular agency, for example, the child’s education. They should also advise the Lead Professional of the events they are including, at the date they learn of them, so that these significant events are also included in the integrated chronology where they fit the criteria.

Child Protection Cases

1. For children on the child protection register, the forum for reviewing and analysing chronologies will be the Child Protection Core Group Meeting. The Assessment Team should meet immediately prior to the Core Group Meeting to agree on the information that is to be contained within the integrated chronology. In the absence of an I.T. solution for sharing and integrating chronologies, the process has to be conducted manually. Therefore each agency should bring its own chronology to the meeting.

2. The chair of the Core Group should define the period of time from where the significant events are relevant to the child’s current situation if it is not appropriate for the chronology to start with the birth of the child. Each child on the register should have a separate chronology.

3. In the case of Child Protection Registration, during the life of the core group, each member of the core group should continue to compile their own agency’s chronology and report all significant events to the allocated social worker or team leader at the time they occur, as per good practice.

4. The Lead Professional will continue to up-date the Integrated Chronology and ensure these are with the Child Protection Administrator 5 working days before the date of the review and e-mailed to the appropriate forum members 2 days prior to the meeting.

5. Any disagreements over the content of the integrated chronology, which cannot be resolved by the core group chair, shall be referred to the relevant Social Work Manager who will advise on the final content.

6. Any member of the core group who is aware of a significant event that for any reason was not included in the chronology, should bring this to the attention of the core group chair as soon as possible.

7. Each agency representative should continue to add to their individual chronology which may have a specific focus on the main role of that particular agency, for example, the health of the child.

Conclusion

Chronologies have an important role in providing data to examine patterns and identify actual or potential risks. In line with national guidance, South Ayrshire uses the Gifec Practice Model and Integrated Assessment Framework as its main working tool for children and families services. Single agency chronologies and multi-agency integrated chronologies are recognised as key tools in the process of assessment and review. SWIA’s practice guide for chronologies, January 2010, states that:-

“Chronologies, as part of a skilled and focused approach, can be an essential tool in caring for and protecting children and adults by:

- Bringing together issues identified by different agencies and presenting them coherently.
- Contributing precise data which can help practitioners identify patterns of behaviour which will contribute to an assessment.
- Recognising chronology is relevant in criminal justice work for assessing and managing people who constitute a high risk to themselves and/or others.
- Using their findings as an integral part of supervision and peer reviews.
- Strengthening the partnership between practitioners and people who use services”.

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