

CASE RECORDING GUIDANCE – Family Hubs

INTRODUCTION

This will help us to ensure a level of consistency in the teams and ensure our recording fully reflects the good work which is undertaken with children and families.

As the service continues to develop and improve and new ideas come in to play, we will need to ensure we keep this updated.

Development continues in us all and should anyone have new ideas or tools which makes this area more effective then please share these and we can reflect it within this document.

This is about ***Continuous Development*** and with this comes ***Continuous Change***.



Supporting links –

[Coventry Procedures Manual](#)

[Documents Library](#)

[Working Together 2018](#)

[Recording Policy](#)

[Practice Standards](#)

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1. TIMESCALES AND EXPECTATIONS

Timescales and Expectations for Recording and Visits

- Request for Help will be reviewed, and decision applied with 5 Days
- On allocation – children and families will be seen within **5 working days** of allocation date.
- Home visits –visits should be written up in within **48 hours**, in addition all recording but must be **recorded by the END of each month**.
- EH Assessment timescales **30 days should be Maximum**
- Visits to children should be as per their plan to meet needs identified – this should be recorded in the case file
- Early Help Planning Meetings – should occur when required but at least once every **3 Months** and recorded in a timely manner

Some Minimum expectations.... Early Help Handbook and the [Record Keeping Practice Guidance](#)

Every family open will have an up to date chronology, a genogram and a case summary offering an overview of the case.

Every child in receipt of support will have a clear SMART plan. Also clear case direction with management oversight, explicit re child's voice and life experiences.

All cases as a minimum must have:

- Chronology
- 3 Generational Cultural Genogram
- Updated case summary
- Child's voice should feature throughout
- Parent/Carer voice should feature throughout
- Direct work should be evidenced
- Management oversight should be present
- Allocation case note / Closure summary at point of closure



When recording 'child seen' be clear about context. When recording any actions, whether this is in an assessment, on a case note following a visit, or in meetings – there must be a date for the action to be completed.

This is not an exhaustive list of expectations when it comes to recording; this is just a reminder of some of the things that we do expect as a minimum...

All to be read in conjunction with the practice standards, which can be found here – Early Help Handbook and the [Record Keeping Practice Guidance](#)

2. ALLOCATIONS

On receipt of the referral/request for help in to Family Hubs every case will be reviewed through the 'here to help' process using the right help, right time thresholds. Any work done on the case will be recorded on EHM. If a case requires a multi agencies discussion it will be discussed at the next Family Matters Meeting. If the case is then allocated it will be recorded on the Request for help form and uploaded to EHM and Management Oversight will be completed.

Allocated to:

Referred by:

Reason for Involvement (summary of referral):

Case allocation – hypothesis / reflections:

Actions: (must be SMART)

EH Assessment date:



3. MANAGEMENT OVERSIGHT

Cases must have regular management oversight, case supervision is also management oversight and must cover as a minimum:

Purpose:

Discussion:

- What we are worried about
- What is working well
- What needs to change

Outcome:

Actions:

Scaling:



4. CASE NOTE STRUCTURE

Visits

Reason/Purpose for contact – key words i.e. *Which child(ren) was seen, where, why*

Detailed Notes:

- **Child's Voice** (Wishes and Feelings, must detail each individual child) *To include whether the child understands their plan*
- **Observation**
- **If the child aware of his/her plan** (age appropriate)
- **Parents' views if seen**

You must tick the box that says child seen, alone, bedroom as appropriate.

Analysis of information:

- **What's working well?**
- **What are we worried about?**
- **What needs to happen next?**

Actions: *Must be SMART – Who? What? When? Be specific?*

HOME VISITS



5. CASE SUMMARIES

Case Summaries should be completed on every child open. The summaries must be reviewed and updated as appropriate and must include as a **minimum**:

- **Pen picture of the child: (to include culture and identity)**
- **Referral information/Reason for Current Involvement: (Short summary only)**
- **Frequency of visits:**
- **What is working well?**
- **What are we worried about?**
- **What is the current plan?**
- **Key Contacts/Agencies: (include either a phone number/email address)**



6. TRANSFERS

Transfers between family hubs should not take place if there is an ongoing early help support plan and relationship between worker and family. It is important that the emphasis is relationship-based practice and consistency for the children. However, families that move address should be encouraged to access services at their local family hub.

It is appropriate for transfers to take place between family hubs at the point of Family matters meeting or within the timeframe of being allocated and a worker contacting the family.

Transfers to another HUB needs to be recorded

**Reason for Transfer
Plan
Allocated from
Allocated to**

7. CLOSURES

Closure – case closure needs to be explicit and cover

- **Summary of referral concerns:**
- **Reason for closure:**
- **How have the concerns in the referral been addressed/ Work completed (what we were worried about – how has this been addressed) (evidence/link to TF):**
- **Protective factors (What's working well) at point of closure:**
- **Date children last seen:**
- **Professionals involved / family who continue to support the family**
- **People to be informed by letter of closure (names, job title and address) (evidence of closure letters to also re recorded on the system)**
- **Manager's comments:**



Getting the recording correct means a child and family do not have to tell their story again!

Appendix 1: Case Supervision Management Oversight

EHM needs to be clear this is Case Supervision rather than Management oversight.

CHILD ID:

Early help Worker:

Team leader:

- What is life like for the child(ren)? And how do we know this?
- What's working well?
- What are we worried about?
- How worried are we that the child may suffer significant harm?

(Scale 0=no safety to 10=proposing to cease involvement or reduce level of direct intervention)

- Reflection: reflect on the experience of working with the child and their family What tools have been used (with the child or others) to gain further information about potential strengths or worries? Team Leaders opportunity to hypothesise with the practitioner.
- What needs to happen next and how will we know these actions are making a difference for the child? *(Actions, desired outcomes & measures, who will be responsible) SMART*

Recording:

Appendix 2: Record of Supervision and Agreed Action

Between: Supervisor.....and Supervisee.....

Date:.....

No	Agenda items for discussion	Record of discussion	Agreed actions (including timescale and responsibility)
1	Wellbeing / Temperature Take		
2	Workload/Pressures/what's working well		
3	AL/TOIL		
4	Feedback (complaints/compliments)		
5	Reflections (work well and any worries)		
6	Appraisal/Training/Development		
7	Performance/Dip-Sampling <ul style="list-style-type: none"> • Practice Standards • Chronologies • Case Summary • Recording • Troubled Families 		
8	H&S		
9	Cases	See CF15's – Case supervision as recorded directly on child's file	
10	AOB		-

THIS IS AGREED AS AN ACCURATE RECORD

Name of Supervisor		Signature		Date	
Name of Supervisee		Signature		Date	

Date of next supervision:.....

Appendix 3 : Help and Protection Team Manager Meeting

Meeting Agenda and Notes

Date	Time	Venue

Chaired by:	
Meeting Minutes Taken By:	

Attendees:

Name	Role	Name	Role

Apologies

Name	Role	Name	Role

Visitors:

Name	Organisation	Role

MEETING AGENDA ITEMS

1. Temperature Take/Wellbeing			
ADD			
Agreed Outcome:		Action By:	

2. Staffing issues /Starters/Leavers/Recruitment			
Add			
Agreed Outcome:		Action By:	

3. Feedback from any Meetings (must include Practice Development Forums)			
Add			

Agreed Outcome:		Action By:	

4. Budget			
Add			
Agreed Outcome:		Action By:	

5. Performance – Area Team/Hubs/Dashboard/Dip Sampling/Sharing Good Practice			
Add			
Agreed Outcome:		Action By:	

6. Compliments and Complaints			
Add			
Agreed Outcome:		Action By:	

7. Health and Safety			
Add			
Agreed Outcome:		Action By:	

8. Any Other Business/Agenda Items			
Add			
Agreed Outcome:		Action By:	

Meeting Closed

Appendix 4: Help and Protection Whole Area Team Meetings

Meeting Agenda and Notes

Date	Time	Venue

Chaired by:	
Meeting Minutes Taken By:	

Attendees:

Name	Role	Name	Role

Apologies

Name	Role	Name	Role

Visitors:

Name	Organisation	Role

MEETING AGENDA ITEMS

1. Welcome and Introductions			
ADD			
Agreed Outcome:		Action By:	

2. Temperature Take/Wellbeing			
Add			
Agreed Outcome:		Action By:	

3. Staffing/Starters/Leavers/Recruitment			
Add			
Agreed Outcome:		Action By:	
4. Feedback from any Meetings (must include Practice Development Forums)			
Add			
Agreed Outcome:		Action By:	
5. Allocations/Duty Rota and Cover Arrangements			
Add			
Agreed Outcome:		Action By:	
6. Performance – Area Team/Hubs/Dashboard/Dip Sampling/Sharing Good Practice			
Add			
Agreed Outcome:		Action By:	
7. Compliments and Complaints			
Add			
Agreed Outcome:		Action By:	
8. Team Events and celebrating Festivals			
Add			
Agreed Outcome:		Action By:	
9. Health and Safety			
Add			
Agreed Outcome:		Action By:	
10. Good News Stories			
Add			
Agreed Outcome:		Action By:	
11. Any Other Business/Agenda Items			
Add			
Agreed Outcome:		Action By:	

Meeting Closed