

Making Home Visits Purposeful 2025 -

Practice Standards & Home Visit Checklist



Practice Standards Expectations

Spending time with children is at the heart of relationship-based practice and our visits to children and families must be planned and purposeful.

We should know as much about the family before visiting them through reading the history and case chronology where possible. This can also keep you safe and aware of any potential risks. Families should not have to share their story time and time again.

Recording of visits support us to review and monitor our interventions with families – ensuring our practice is purposeful and having a positive impact on outcomes for children. If the intervention isn't promoting change then recording visits helps us to think about what we need to do differently in terms of the children's plan.

- CiN visits should be at least every 20 working days.
- Early Help visits should be a minimum of every 8 weeks.
- Children with Disabilities to reflect CIN or CP visiting frequency. After 12 months, subject to C&F assessment and with Head of Service approval, visits can be every 12 weeks.
- CP visits should be at least every 20 working days.
- Cared for Children:
 - Visits within the first 5 days of placement, every week until their first LAC review, then at a minimum of every 4 weeks for children placed in children's homes out of borough
 - All other children should be visited at a minimum of 6 weekly visits after the first Cared for Child review. Following long-term matching being approved by IRO and panel visits can move to 12 weekly visits
 - Placement with parents visits to take place weekly for the first 4 weeks then at least every 20 days
- Any variance of frequency should be captured on the child's file in Management Oversight, with a rationale and whether the IRO/CP chair agree.
- We will explain to families the purpose of our visits and confirm the dates/times for our future visits to ensure where possible they fit with their routine.

At visits we must listen, observe, and use professional curiosity.

- At a visit we must review the child's plan by looking at what is working well and considering what needs to change.
- We will visit to assess if the child(ren) is/are safe. We will always consider the safety plan and whether this is working or needs to change.
- When visits to families are made, these are then clearly documented on the child(ren) case record.
- We must record visits on a visit template and complete all sections.
- We must record who was present and who was not at the visit, the length of time spent at the visit, and the time it took place.
- We must discuss the progress and impact of the plan with parents/carers, as well as consequences if the plan is not improving outcomes for the child(ren).
- If we are worried about a child(ren) at a visit, or any other significant issues arise, these will be discussed with a manager immediately or at the earliest opportunity.
- If there is a change in social worker a joint visit to the child(ren) and family must be completed by the previous and new worker.
- All social workers will have a pen picture which will be given the child(ren) if they have to visit in the absence of the allocated worker so the child(ren) and parents/carers know who is going to be visiting them.

PRE-VISIT CHECKLIST

Keys steps to making home visits puposeful

Clarify the purpose of the visit

- Be clear what the purpose of this visit is? (e.g. statutory check, assessment, relationship-building, planning, direct work)
- What are the key outcomes you want to achieve today? Why does this matter for the child, the family and for you?
- How will this visit progress the plan for the child or family?
- Any variance of frequency of visits should be captured on the Case Summary and with management oversight.

Review case information on ICS

- Re-read the most recent case notes, assessments, care or support plans, and chronology - you should know as much as possible about the family before visiting them. Families should not have to share their story time and time again.
- Reflect on key risks, strengths, and emerging themes.
- Note who needs to be seen and what must be observed or discussed.
- Check the frequency and timeliness of visits – is this overdue or part of a planned cycle?
- CIN, CP and CWD visits should be at least every 20 working days.
- CFC should be visited at a minimum of 6 weekly visits.

Plan your approach

- Who do you need to speak with (e.g. child alone, parents, siblings, other carers)?
- Prepare any tools or resources needed (e.g. assessment packs, direct work materials, sensory objects, interpreter).
- Consider what relationship you already have with the family – what helps engagement?

Consider cultural values and household customs

- What cultural, religious, or family traditions are important to this household?
- Are there customs you should prepare for (e.g. removing shoes, same-gender professionals, timing around prayer or fasting)?
- Do you need to check in advance or ask on arrival about household expectations?

Assess safety and risk (including for yourself)

- Review any flags or risk information relating to the home, individuals, or previous visits.
- Follow lone working procedures – share visit details with your manager or team.

Communicate expectations (where appropriate)

- Has the family been informed about the visit and who will be attending?
- Do they understand the visit's purpose and how long it will take?
- Are there any accessibility or communication needs to prepare for?



During-Visit Checklist

Key steps to making home visits purposeful

During the Visit

Begin with warmth and clarity

- Reintroduce yourself and your role using calm and respectful language - share your pen picture with the family.
- Clearly explain the reason for your visit in a way that makes sense to the family.
- Ask about household customs:
- "Would you like me to take off my shoes?"
- "Where would you like me to sit?"
- Be emotionally present and responsive – not rushed or task-focused. The family know you are a professional, show them you are human too.

Honour cultural identity and small relational gestures

- Be mindful of tone, touch, eye contact, and personal space throughout.
- Accept or support with hospitality if appropriate, or politely decline with warmth.
- Notice and appreciate any visible signs of effort (e.g. tidy home, child's drawings).
- Use names, show gratitude, and express respect for their time.

Observe the emotional and relational climate

- How do people relate to one another? Is there warmth, fear, irritation, playfulness, or tension?
- Do adults respond to the children's needs? Are interactions respectful and nurturing?
- How do children behave when adults are present and when they are not?

Observe the physical environment

- Is the home safe, clean, and adequately furnished?
- Are there pictures or personal items you could comment on?
- Are the child's basic needs being met? (e.g. food, clothing, bedding, toys)
- Are there signs of hidden risks? (e.g. overcrowding, broken appliances, strong odours, locked rooms)

See and hear the child

- Speak to the child alone, if safe and appropriate - this is at the heart of relationship-based practice.
- Communicate clearly and in a way they understand what you are trying to say.
- Use age-appropriate tools (drawing, toys, play, visual prompts) to support their communication.
- Ask open questions such as - tell me, explain that, describe this to me (TED)
- Note emotional cues – body language, anxiety, flatness, fidgeting, withdrawal.
- Be honest and help them understand their life story.

Identify hidden needs or vulnerabilities

- Are there signs of emotional distress, developmental delays, or sensory challenges?
- Are children acting as carers or carrying responsibilities beyond their age?
- Does the child appear overly compliant, withdrawn, or anxious?

Engage parents or carers meaningfully

- Use open, reflective questions - "What's been going well lately?" "What's been challenging for you as a parent?"
- Validate effort and acknowledge the emotional load the family are experiencing. Frustration, sadness, anger, etc.
- Explore their experience of parenting and their support networks they can tap into or explore.
- Build relationships through care, trust and respect, whilst offering feedback honestly.
- Gather contact details of unknown adults or children in the home.

Link to the child's plan and check understanding

- Revisit the current plan, where appropriate - look at what is working well and consider what needs to change.
- Consider the safety plan - are the family adhering to this or does this need to be reviewed.
- Clarify next steps and offer solutions where barriers arise.
- Encourage the family's voice and suggestions in shaping the next phase.

Remain curious

- What isn't being said?
- Are there any inconsistencies between what is shared and what you observe?
- How are you feeling in this space – and what might that tell you?

Summarise and confirm actions

- Repeat back what has been discussed and agreed.
- Clearly state what you will do and what the family should expect - arrange the next visit that fits around their routine.
- Reaffirm any promises and set expectations for your next contact.
- Thank them for their time and openness.

Post-Visit Checklist

Key steps to making home visits Purposeful

Reflect immediately

Pencil in time immediately following a visit to reflect and record.

Contact your manager, colleague in your team or the practice improvement team for a reflective conversation.

What have you learned about the child's lived experience?

What was surprising, concerning, or affirming?

How did the emotional tone of the visit feel – for the family and for you?

Were there any unconscious biases or assumptions you noticed in yourself?

Record clearly and accurately

You must record on a statutory visit template and complete all sections.

You must record who was present and who was not at the visit.

You must record the length of time spent at the visit and the time it took place.

Note observed behaviours, quotes, emotional cues, and your analysis.

Separate fact from opinion and link observations to known risks, needs, or protective factors.

If the intervention isn't promoting change then recording visits helps us to think about what we need to do differently in terms of children's plans.

Be sensitive and respectful in language – especially around culture and parenting, and avoid victim-blaming language.

Update the plan and take action

Does the plan need updating based on what you saw and heard?

Are there new services to explore, or professionals to notify?

Have any safety concerns escalated or reduced?

Follow through on any promises

If you agreed to provide something (e.g. resources, follow-up visit, referral), do it promptly.

Reliability is key to trust – even small promises matter.

Remember the core council values; Respect, Communication, Integrity and Accountability. All of which can and should be evidenced in every home visit for the betterment of our children and families.

