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**Good Practice Guidance for Child Protection Record Keeping**

Clear and comprehensive child protection records are crucial to support children’s safety and welfare. Records themselves do not keep children safe, but research, serious case reviews and child safeguarding practice reviews repeatedly show the significant impact on safeguarding poor record keeping can have. The purpose of this guidance is to support professionals to fulfil their responsibilities in this area, providing a framework for reviewing record-keeping practices.

**Records should include:**

* **a clear and comprehensive summary of the concern;**
* **details of how the concern was followed up and resolved;**
* **a note of any action taken, decisions reached and the outcome.**

In additional named safeguarding leads are responsible for ensuring that child protection files are kept up to date, stored securely and, where applicable, are transferred appropriately.

It is good practice to undertake quality assurance checks of safeguarding records. Regular audit of records enable identification of strengths and areas of development in record keeping, development of improvement actions which can be reviewed over time for progress. A [safeguarding record keeping quality assurance audit tool](https://www.schools.norfolk.gov.uk/pupil-safety-and-behaviour/safeguarding), Appendix 1, is available to support audit of safeguarding record keeping. Some useful reflective questions for evaluating your safeguarding records are below.

* Do the records tell the ‘story’ of the child and the actions taken to address the concerns?
* Are records up to date and complete?
* Do they contain evidence of all relevant actions including telephone calls, e-mails, and minutes/notes of meetings? NB This includes information on ***all*** parents and carers, so make sure fathers contact details are recorded.
* Do they demonstrate effective identification and management of risk of harm?
* Do they demonstrate sound decision making, appropriate responses and referrals in a timely way?
* Do they show tenacity in following up concerns and referrals?
* Is there evidence of effective partnership working including attendance at and contribution to child protection, child in need and family support process activities?
* Is there clarity regarding information sharing?
* Are the wishes and feelings of the child actively sought and clearly recorded in the record?
* Are patterns of cumulative risk identified and actions taken to address this?
* Is any professional challenge recorded appropriately including the outcome of this?

**Retention of child protection records**

It is important to have a retention policy in place for your agency/organisation. It is recommended that child protection records are retained until a child’s 25th birthday (6 years after the subject’s last contact with the Local Authority). Records should then be securely disposed of and a record of disposal kept. Paper records should be shredded, and electronic records deleted.

**Quality Assuring your Record Keeping**

This guidance includes an audit tool to support practitioners to think about the quality of your record keeping.

**Appendix 1**

[Safeguarding Record Audit Tool](https://www.schools.norfolk.gov.uk/pupil-safety-and-behaviour/safeguarding)

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| --- | --- | --- | --- |
| Audit Date: |  | Audit completed by: |  |
| Name of child: |  | Safeguarding Lead: |  |

| **Does the file/child’s electronic record include the following?** | **Yes/No?** | **Commentary (include areas for development as well as good practice):** | **Actions identified:** |
| --- | --- | --- | --- |
| 1. **Contents**
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| A chronology |  |  |  |
| Front sheet |  |  |  |
| Up to date contact details for all parents |  |  |  |
| Copies of referrals |  |  |  |
| Invitations to child protection conferences/rapid network meetings and core group meetings |  |  |  |
| Copies of reports to conference |  |  |  |
| Minutes/notes of multi-agency meetings including strategy discussions |  |  |  |
| Records of all relevant telephone conversations, meetings and e-mail correspondence |  |  |  |
| Copies of the most up to date plan for the child e.g., a CP, CiN, FSP or Early Help Plan |  |  |  |
| Are records stored securely? |  |  |  |
| 1. **Format**
 |
| Is the child clearly identified within the records? |  |  |  |
| Name, designation and signature of the person completing the record populated? |  |  |  |
| Are other professionals clearly identified including name and job title? |  |  |  |
| Is the date (including the year) and time of any incidents or when a concern was observed recorded?  |  |  |  |
| Is the date (including the year) and time the record was made clear?  |  |  |  |
| Do records distinguish between fact, opinion and hearsay? |  |  |  |
| Do records describe the concern, meeting or conversation in sufficient detail, i.e., no further clarification necessary?  |  |  |  |
| Are records free of jargon?  |  |  |  |
| Are records written in a professional manner without stereotyping or discrimination?  |  |  |  |
| Where applicable, do records include a completed body map to show any visible injuries?  |  |  |  |
| Are hand-written notes signed and dated to include year, position of author and person the information is being passed to? |  |  |  |
| 1. **The Child’s Voice and their Network**
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| Do the records indicate that all parents and guardians have been made aware of concerns and their consent is sought in accordance with local procedures unless doing so would increase the risk of harm to a child? Where consent has not been obtained, is the rationale clearly recorded? |  |  |  |
| Are the child’s views and own words used? (Swear words, insults, or intimate vocabulary should be written down verbatim.)  |  |  |  |
| Is there evidence that the child’s lived experience is understood, especially when parents live in different households |  |  |  |
| Do the records evidence how the child’s wishes and feelings have informed practice and the actions taken? |  |  |  |
| 1. **Analysis & Oversight**
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| Is there evidence of management oversight in the file? This could include actions arising from supervision or safeguarding meetings.  |  |  |  |
| Do the records enable safeguarding leads to build a picture of cumulative risk over time? e.g., ‘low-level’ concerns are routinely recorded and captured and lead to appropriate intervention. |  |  |  |
| Is there evidence that staff understand when to make referrals when there are issues in relation to: * child-on-child abuse
* sexual violence or harassment
* criminal or sexual exploitation
* radicalisation and/or extremism

or that they have sought additional advice and support? |  |  |  |
| Do the records evidence that staff have identified and reported concerns to the safeguarding lead in a timely way? |  |  |  |
| Do the records evidence appropriate and timely responses have been initiated by the safeguarding lead in response to concerns? |  |  |  |
| Do the records indicate that information has been shared appropriately? |  |  |  |
| Do the records evidence that any agreed actions following a referral or meeting have been taken promptly to protect the child or learner from further harm? |  |  |  |
| Is there clear evidence of the setting’s contribution to the multi-agency plan and how staff are working in partnership with external agencies with the aim of improving the child’s situation? |  |  |  |
| Is any professional challenge recorded with the outcome/resolution evident? |  |  |  |

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| **Overall RAG rating (see key below):** |  | **Rationale:** |  |
| **Action required** | **Timescale** | **Name & Position of person responsible** | **Date action completed & evidence of impact** |
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| **Grading** | **Definition** |
| --- | --- |
| Outstanding | File evidences all criteria are met securely and consistently. In addition to meeting the requirements of a ‘good’ judgement, there is evidence that practice exceeds the standard of good and results in sustained improvement to the lives of children, young people and families.  |
| Good | The records indicate that the children who is, or is likely to be, at risk of harm or who are the subject of concern are identified and protected. Help is provided early in the emergence of a problem and is well co-ordinated and recorded. Records of action and decisions are clear and up to date. Children and young people are listened to and heard. Staff build effective relationships with children and their families in order to assess the likelihood of, and capacity for, change. Risk is well understood, managed and regularly reviewed. Children and young people experience timely and effective help and protection through risk-based assessment, authoritative practice, planning and review that secures change. |
| Requires improvement | Not meeting all good grades, but there are no widespread or serious failures that create or leave children being harmed or at risk of harm. All case file requirements are met. However, the case file is not yet at a good standard and does not provide sufficient assurance that we are delivering good protection, help and care for children, young people and families. In a small number of instances, information is missing or incomplete.  |
| Inadequate | The file does not demonstrate a suitable level of assurance that recording adheres to the required standards and appropriate interventions have been put in place for children and their families. There are, or appear to be, widespread failures or serious failures that leave children harmed or at risk of harm. Response to referrals is not timely or effective, insufficient involvement of family and children and poor managerial oversight. Case file is not able to evidence compliance with statutory requirements.  |