**Orkney Adult Support and Protection**

**Shared Chronology Guidance**

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| Version: 1.2 | Fraser Mitchell/Cathy Martin | April 2024 |

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1. **Definition and importance of chronology**

Chronologies are an essential feature of risk assessment in adult support and protection activity.

**What is a chronology?**

* A summary of events key to the understanding of need and risk, extracted from comprehensive case records and organised in date order.
* A summary which reflects both strengths and concerns evidenced over time.
* A summary which highlights patterns and incidents critical to understanding of need, risk and harm.
* A tool which should be used to inform understanding of need and risk of harm to an adult.

Forming a chronology should assist a shared understanding with those involved in the risk assessment, as well as to contribute to any subsequent support and protection plan. The perspective of the adult at the centre of the adult protection process should be explored to gain understanding of the impact of events and to check their perception of accuracy.

1. **Who should keep a chronology?**

A chronology may be either single agency or multi-agency.

A multi-agency chronology is most likely to be developed by the Council Officer as part of inquiries, to contribute to the risk assessment and subsequent decisions. Contribution to the chronology is a collective responsibility and can include information from Social Work, Health, Police, the adult, carers and others as appropriate.

1. **What information should be included in a chronology?**

A chronology, whether single- or multi-agency:

* is **not** a comprehensive case record and cannot substitute for such records.
* is **not** a list of exclusively adverse circumstances.

A chronology should contain significant life events with the focus being on the impact on the adult, including any changes in their wellbeing and patterns of events. A significant event can include changes in circumstances like moving home, relationship changes, traumatic experiences, changes in support services or care plan, and events that put individuals at risk, or that are protective. The views of the adult and professional judgement will inform the relevance of such information.

A multi-agency chronology must comply with information sharing guidance and protocols in the way that it is developed, held, shared and reviewed. It must be accurate, relevant, and proportionate to purpose.

 A multi-agency chronology:

* is a **synthesis** which draws on single-agency chronologies.
* reflects relevant experiences and **impact of events** for the adult.
* **will** include turning points, indications of progress and/or relapse.
* **will** inform analysis but is not in itself an assessment.
* **may** evolve in a flexible way to integrate further necessary detail.
* **may** highlight further assessment, exploration or support that may be needed.
* is a tool which can be used in staff supervision.

The format of a chronology should record purpose, authorship and date of completion. It should include the nature and sequence of events; outcomes or impact on the adult; sources of information; and responses to events as necessary for the purpose of the adult support and protection assessment. The Orkney Adult Support and Protection Chronology template form includes an ‘event code’ traffic light system (Red/Amber/Green):

* **Red** for events causing harm or leading to harmful outcomes. This would include situations where there is evidence that the adult has been harmed in any of the ways defined in the ASP Act.
* **Amber** for events that increase risk or have the potential to lead to harm. This could include situations where for example an adult is ‘befriended’ by a known abuser, suddenly and without good reason stops attending a day care service, or any other occurrence that is thought to increase risk to the adult.
* **Green** for events that are protective or lead to protective outcomes. It is important to note positive events that are protective to the adult such as the start of a formal support service, protective legal orders such as welfare guardianship being granted, or any other protective occurrence.

**Appendix 1:**

**Orkney Adult Support and Protection Shared Chronology Template**

# Adult’s Details

|  |  |  |
| --- | --- | --- |
| **Name** | **Known as** | **Address** |
|  |  |  | *Keyworker (if appropriate)* | *GP* |
|  |  |  |
| **Date of birth** | **Age** | **CHI Number** | **PARIS Number** | **POA or Guardianship in place** | **Who holds POA or Guardianship** |
|  |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **Lead Professional maintaining the chronology** | **Job title and agency** | **Date shared chronology was last updated/reviewed** |
|  |  |  |

# Chronology of significant events

| **Shared Chronology***(to add another row – place cursor in the last box in the table and press tab ‘⭾’ on your keyboard, headings repeat to next page automatically)* |
| --- |
| **Date and time of event** | **Significant event** | **Source of information** | **Action taken/actual outcome** | **Practitioner name, title, agency and date** | **Event Code** |
| *Date and time the event happened should be recorded* | *A brief description of the event should be recorded here. Language should be clear and concise, so that the chronology improves understanding of the adult’s situation and supports good decision making.* | *Information in the chronology should be current, factual and from a reliable source. Record where information has originated e.g. professional, neighbour, friend, relative or adult themselves* | *Brief statement of action taken and any outcome. More detailed narrative should be in the adult’s file, record or clinical notes* | *Record the date, name, title, and agency of the practitioner who entered the significant event onto the single or shared agency chronology* | *This can include a traffic light system:*

|  |
| --- |
| *Red for events causing harm or leading to harmful outcomes.* |
| *Amber for events that increase risk or have potential to lead to harm.* |
| *Green for events that are protective or lead to positive outcomes.* |

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