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**Report Writing for Social Work Placement**

**Report writing**

Social Workers are required to write reports for a wide number of uses such as to access resources and provide information to the courts. Reports should be written so that:

* the behaviour is described rather than using judgemental statements;
* strengths rather than difficulties are emphasised; and
* language is clear, concise and easy to understand without jargon.

**Examples on how to describe behaviour rather than judge**

|  |  |
| --- | --- |
| Negative statements | More positive statements |
| Kevin has missed a lot of appointments | Kevin has attended five or the six scheduled appointments. |
| He no longer appears to use drugs, just alcohol | Kevin is tested regularly as part of his community order, and there is no evidence that he is using drugs. Work is focused on helping Kevin to reduce his consumption of alcohol. Kevin estimates that he has reduced his consumption from 55 units to 30 units per week. He states that he no longer drinks spirits, but consumes longer drinks such as lager. He is aware the continuation of this level of consumption will cause ill health. |
| He has had a number of prison sentences | Kevin has had three prison sentences in the last seven years, the longest being six months. He has not had a custodial sentence in the last two years. |
| Kevin is co-operating with the community order | Kevin is fully engaged in working with the project. This involves attending two groups a week and meeting with his key worker on a fortnightly basis. To date he has not missed any appointments, and the project is now supporting Kevin to find work. |

 Source adapted from: Constable (2009, p. 123)

**Types of report**

* Investigations
* Feasibility studies
* Research reports
* Progress reports
* Court reports

 (Healy & Mulholland 2007, p. 87)

Healy and Mulholland (cited in Mantell 2009, p. 124) highlight that reports should:

* be objective and factual. You need to be clear about the information that you can verify. Second-hand information should be identified;
* be coherent and systematic in their order and structure (chronology/ significance of events/ usefulness to the reader).
* comprise essential information; and
	+ make a list of the information that is required and prioritise what the reader needs to know.
* be concise, to the point, contain clear evidence-based summary and recommendations with attached actions.

**The content of your report**

* The content of the report will be based on the purpose.
* The purpose will be established by:
	+ the body requesting the report;
	+ your professional values and knowledge base; and
	+ the client’s expectations.
* A court report for example should include:
	+ information about the client (full name, address, date of birth and legal history relevant to the current situation);
	+ background of the report (source of referral, information sources on which the report draws-includes dates and number of interviews, reason for the report and any other information about your agency’s association with the client);
	+ family background (the structure and dynamics of the client’s current family context and in some instances their family origin. It is important to include information about the client’s family’s strengths, as well as any concerns about risk or areas of vulnerability);
	+ educational history of client (level and nature of education, identified strengths in learning as well as any concerns);
	+ employment history of the client (types and nature of paid work);
	+ financial circumstances (income related to expenses and any outstanding debts or other pressures);
	+ health (physical and psychological dimensions of the client’s health);
	+ your assessment (assessment of the situation linked to the evidence presented in the report); and
	+ your recommendations (should be consistent with your assessment and in line with the usual scope of recommendations in similar types of cases).

 (Healy & Mulholland 2007, pp. 98-99)

**The layout of your report**

Most agencies will have a template for this but if they don’t, it would be a good idea to ask if you could look at similar reports prepared by your colleagues. The format may be set by your manager or by the person/organisation wanting the report. Generally, the following format could be used to write a report:

* Title page: with the name of the requester – topic, your name and name of your organisation. Give full date of request and full date of your submission.
* Header: with title page details.
* Footer: with number on each page.
* Mark it ‘confidential’ on title page and envelope.
* The first page should contain:
	+ a brief summary stating what the report will deal with; and
	+ a brief account of the concluding points.
* The body of the report should contain:
	+ a statement of what your report will contain (provide an order of items to be covered and follow this order when presenting material in the report);
	+ a section telling the reader about the order and manner in which the material will be presented; and
	+ present the material in the manner in which you have specified at the start.
* The conclusion should end the report. You could make a general statement which arises for the information you have presented or give your recommendations or final statement about the significance of what you have presented.

 (Healy & Mulholland 2007, p. 100)

**Approval of the report**As a student, any formal reports you write will be approved by a senior staff member. Make sure you complete your report in sufficient time for the approving staff member to read and request changes to the report.

**References**

Constable, G 2009, ‘Case recording and report writing skills’, in A Mantell (ed), *Social work skills with adults*, Sage Publications, EBook Corporation, pp. 111-126.

Healy, K & Mulholland, J 2007, *Writing skills for social workers*, Sage Publications, London.

 Wilson, S & Tilbury, C 2009, ‘Child Protection’, in H Cleak (ed), *Assessment and Report Writing in the Human Services,* Cengage Learning, Melbourne, pp. 1-12, viewed 7 January 2014,

<http://www98.griffith.edu.au/dspace/bitstream/handle/10072/30021/57247\_1.pdf?sequence=1>

**Sample Report**

**Assessment of a child protection notification**

The following is an example of a report prepared by a statutory child protection worker responsible for assessing child protection concerns.

**Notified concerns**

*The notified concerns relate to three boys aged five, seven and nine years who were placed in the care of their grandmother by the Family Court four years ago. Recently, the children’s father moved in with the family after being drug free for twelve months and establishing fulltime employment. It was reported that the father has been hitting the children with the buckle of the belt which has left significant bruising and that on one occasion he punched the grandmother with his fist.*

**Child protection history**

*Prior to being placed in the care of their grandmother by the Family Court four years ago, these children were the subjects of five substantiated maltreatment notifications over a two year period. These notifications established a pattern of significant risk of emotional and physical harm due to the parents’ drug abuse, domestic violence and transient lifestyle. The father was the perpetrator named in seven domestic violence orders. The parents had a long history of substance abuse, pre-dating the birth of the children. Both parents had made several unsuccessful attempts to address their drug addictions. Substance abuse was identified as significantly contributing to the domestic violence in the relationship and inability to establish a stable living situation. Following the death of the children’s mother in a car accident, concerns about the care of the children intensified. A temporary assessment order was taken and the father agreed to place the children with their grandmother. Because he found it difficult to get his life back on track, subsequently the father decided to support the grandmother’s Family Court application to care for the children.*

**Current notification - findings**

*The father acknowledged using the belt on the children but denied ever using the buckle. He demonstrated how he “cracks” the belt in front of the children as a deterrent to them, in an attempt to modify their behaviour. He stated that he also smacks the children as punishment and instructs them to kneel with their nose against the wall until told to stop. He refused to discuss the incident in which he allegedly punched his mother. He stated that he has not recommenced drug-taking, though has a beer most days.*

*The grandmother acknowledged her son’s disciplinary techniques as described above. She did not appear to have any concerns about him using such techniques. She described struggling to manage the children’s behaviour since they were placed in her custody. The grandmother reluctantly acknowledged that her son had punched her. The children were not at home at the time of the incident and there have been no other similar incidents, though they do argue at times.*

*The grandmother demonstrated little understanding of the dynamics of domestic violence, describing the incident as her fault because she had told her son that she did not like one of his friends. She acknowledged that her son was drunk at the time of the incident. He has only been drunk on this one occasion and she does not believe he is taking illicit drugs. She advised that he has not missed a day of work since moving in with her and she wants him to remain living with her and the children. She sees her son as an important support for her and the children.*

*Interviews with the children established that the belt had been used by the father as a threat and to hit them. The children did not indicate that their father had used the buckle end of the belt. The children said they were hit with the belt regularly (every week) since the father moved home. They said they did not like to be hit and wished it would stop. The children did not disclose any violence between their father and grandmother. It was apparent to the children that the father was drinking alcohol but they did not indicate that they had seen him drunk or under the influence of drugs. The children related a number of happy family events involving the father and grandmother.*

*School representatives stated that the children’s behaviour has been difficult to manage since they commenced at the school twelve months ago. The children have poor interpersonal skills and are sometimes aggressive to their peers. They struggle to complete some of their school work. The father and grandmother have attended school events with the children. The school identified a strong attachment between the children and their grandmother and a strengthening attachment between the children and their father.*

*Medical assessments did not identify any bruising or injuries to the children but raised concern about developmental delays. A subsequent paediatric assessment confirmed that two of the children have developmental delays in language skills, related to poor hearing. A treatment and therapy plan has been developed and commenced through Child Therapy Services.*

*The father’s counsellor from the Substance Abuse Counselling Program confirmed that the father had successfully participated in a three month residential program, regular follow-up counselling and group support sessions. The father had acknowledged and expressed remorse over the incident of violence toward the grandmother. The counsellor viewed the incident as a one-off though believes that the father could benefit from gaining a better understanding of the impact of domestic violence.*

*The father and grandmother reluctantly agreed to engage with the Family Intervention Service and attended the initial case planning meeting. They contracted to receiving support in relation to managing the children’s behaviour more effectively, addressing problems without resorting to violence and building their strengths and supports as a family. They also agreed that the children could engage in regular counselling. The father agreed to continue to participate in substance abuse counselling.*

**Protective factors:**

*The children’s developmental delays have been assessed and a treatment plan is in place*

*The father and grandmother have an established link with the school*

*The father and grandmother have agreed, though reluctantly, to participate in the Family Intervention Service*

*The father attends substance abuse counselling and has agreed to continue to do so*

*The father has expressed remorse for the violent incident to his counsellor*

*The children display a strong attachment to their grandmother and a strengthening attachment to their father*

 **Risk factors:**

*The children display difficult behaviours, poor social skills and developmental delays*

*Grief experienced by the children over the death of their mother has not been addressed*

*There are previous child protection notifications relating to the children*

* *It is evident that the grandmother and father are struggling to manage the children’s behaviour and have few ideas about how to do so without resorting to physical and demeaning punishments*
* *While the father has acknowledged the domestic violence between himself and his mother with his counsellor, he was not willing to discuss this with the assessing officer*
* *The father’s previous record of domestic violence, including domestic violence orders*
* *The grandmother’s limited understanding of the dynamics of domestic violence (including blaming herself for a violent incident)*
* *The father’s past drug addictions and current alcohol use after a period of abstinence*

**Conclusion**

*It is assessed that the current disciplinary techniques are not appropriate and if continued could adversely impact on the children's emotional wellbeing. It is assessed that unless the use of excessive and inappropriate discipline is reduced, there is significant likelihood of the children experiencing physical and emotional harm in the future. There is also a risk of significant emotional harm if the children were to witness domestic violence between their grandmother and father.*

*Supports are required to address these concerns and enable the grandmother and father to provide a safe environment for the children. It is considered that continued intervention by the school, Family Intervention Service, Child Therapy Services and the Substance Abuse Counselling Program will meet these needs.*

 Source: Wilson, S & Tilbury, C (2009, pp. 7-10).