# Oxfordshire County Council Logo Oxfordshire Safeguading Children Board Website

# Day in my Life: Adolescent

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| **Questions** | **Responses** | **Notes** |
| Waking up in the morning  1. Do I use an alarm to get up? 2. What time do I normally get up? 3. Do I have to get anyone else up? 4. Is there anyone else up when I get up? 5. Are my mornings consistent or is it different every day? 6. Do I get up in time for school, study or work? 7. What do my worst mornings look like? Or my best? |  |  |
| Breakfast  1. Do I eat breakfast in the morning? What do I like to have? Is it the same every day or different? 2. Do I need to make breakfast for other people? 3. Do I eat my breakfast with others or by myself? 4. What about other meals in the day? Do I need to prepare packed lunch or money in the morning? Do I always remember to do this? |  |  |

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| **Questions** | **Responses** | **Notes** |
| Dressing  1. Do I have enough clothes? Are they clean, the right size for me, right for the weather? 2. Do I understand the importance of and know how to look after myself, e.g., washing, looking after my hair, brushing teeth etc.? 3. Am I happy with the clothes I am wearing? 4. Do I have a broadly positive body image? 5. Do I think I look ok? |  |  |
| Getting to education, employment, or training  1. Do I go to school, college, training, or work? 2. How far away is it? 3. How do I get there? 4. Do I need to look after anyone like a parent or sibling, including taking them to school? |  |  |
| During the day (in education, employment or training)  1. Do I like my job, learning, course, training? 2. Do I have any friends there? Do I hang out with them in breaks/ free time? 3. Do I have lunch – canteen food or packed lunch? 4. Do I have a trusted adult I can talk to about concerns, like a teacher, boss, foreman etc.? 5. Does anyone else provide support, like a counsellor, trade union representative etc.? 6. Do I feel safe at my learning or work? |  |  |

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| **Questions** | **Responses** | **Notes** |
| After my education, employment or training  1. How do I get home? 2. Do I want to go home, or do I avoid going home? 3. Do I go home, or do I go to friends’ houses or hang out somewhere else? 4. Does anyone meet me and take me home? 5. Is there anyone at home? 6. Do I watch TV, or use the internet (including my phone) and if so, is what I watch or do online OK for my age? 7. Do I have coursework or homework to do and does anyone help me with it? Does anyone check that I have done it? 8. Do I have to look after anyone else? Do I need to get food for anyone else? 9. Is there food available? Does anyone help me get some food? |  |  |
| Evenings  1. Do I have dinner in the evening, at what time? 2. Who makes the food? What do I eat? 3. Do I eat with others, at the table, or by myself? 4. Is there anyone I can tell if I am hungry, and do they provide food for me? 5. Do I go out in the evening? If so who do I go out with? Where do I go and what I do there? 6. Do I have to be home by a set time, what would my carers do if I did not return on time or at all? 7. Does my carer know who I hang out with? 8. What do I do with my family in the evenings? What do my carers do? 9. Do we spend time together or do our own things? |  |  |

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| **Questions** | **Responses** | **Notes** |
| Bed time  1. Do I go to bed at the same time every night? 2. Who decides when it is bedtime? 3. Where do I sleep? 4. Do I like where I sleep? 5. Who else is in the house at night-time? 6. Do I have to look after anyone else at bedtime? 7. Do I have my own room, or do I share with others? 8. Do I have what I need in my room (bed, curtains, warmth, privacy)? 9. Do I keep devices put away or out of my sleeping space? |  |  |
| School holidays/ weekends  1. What do I do in school holidays, weekends and free time? 2. Do I have to look after anyone? 3. Do have chores / jobs to do? If so, what are they? 4. Do my carers look after me during the holidays or are they at work? 5. If I am left unsupervised, how long for? 6. Do my carers know what I do during the day and who I am with? 7. Do I have friends to spend time with? Do my carers know them? Where do I know them from? Are they the same age as me? 8. What do my friends like doing? 9. Do I have any hobbies? 10. If I get free school meals during the term, what happens in the holidays? |  |  |

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| **Questions** | **Responses** | **Notes** |
| School holidays/ weekends (continued)  1. Is there food to eat at home? 2. Is there someone around to help make food and supervise mealtimes? 3. Do I have my own money? Where do I get it? 4. Do I have a job to earn money? 5. Do I seem to have more money / things than I would be able to afford by myself? 6. Do I use the internet or social networking sites? Am I happy about my use of the internet and social networking sites? 7. What devices do I use – laptop / tablet / phone? Do I seem to have more devices than expected? 8. Does anyone check what I am doing on the internet / are there any parent controls? Are these too restrictive or permissive for my age and stage? 9. What sites do I visit online and what do I do? Is my online or digital activity causing me stress? 10. Do I share information or pictures online in a risky way, or expose me/my family to risk with my online activity? 11. Do I game during my leisure time? Is my gaming fun, not taking up too much time, leaving me relaxed and happy? |  |  |
| Relationships  1. What are my relationships like with my family and friends? Do I have lots of friends or just a few? 2. Do I get on ok with my parents /carers? What about my siblings? If I do not get on with them is there anyone else that I talk to or spend time with? 3. Who else is close to the family / around a lot? 4. Do I spend lots of time in other people’s houses / sleep elsewhere? 5. Do I have a girlfriend / boyfriend? Do they make me happy? Are they the same age as me or older / younger? Where did I meet them? Where do I go with them? |  |  |
| Identity  1. Do I have unanswered questions about my identity, or risks in my family or contacts I am being protected from? 2. Do I have questions about my sexuality or gender identity that are causing me stress or concern? 3. Do I seem isolated from others? 4. Am I associating with adults or young people who may expose me to risk? 5. Am I taking responsibility for my own health and wellbeing, including mental health? |  |  |

Question list can be edited, extended, or reduced to suit family circumstances.

This version prepared December 2023

Oxfordshire Family Solutions