



Fife Child Protection Committee
Agency Guidance for All Practitioners



Working with Hostile and/or Uncooperative Families

“child protection is everyone’s job...it’s our job”

www.fifechildprotection.org.uk

Fife Partnership...Strengthening Fife’s Future

Our Vision

“We want every child, young person and their families, particularly those in vulnerable circumstances, to live in a healthy, safe, home environment, within strong communities free from prejudice, poverty, exclusion and discrimination, to enable them to achieve their full potential and contribute positively to their communities throughout their lives”.

Our Values

“Children are best protected by identifying the strengths that exist for them at home, in their extended families, schools and in their communities, and by building on these strengths to enable them to continue to live within their communities wherever possible”.

Our Aim

“child protection is everyone’s job...it’s our job”

1. Purpose

This guidance has been produced by Fife Child Protection Committee. It should **complement** not replace any existing single agency guidance. It also needs to be considered in conjunction with existing individual service/agency Health and Safety Risk Assessment procedures.

It aims to assist practitioners working with hostile and/or uncooperative parents or carers, especially when there are child protection concerns and where a child may be subject to child protection registration. This guidance will assist staff to identify parents or carers who are **hostile, uncooperative** or who use **disguised compliance** and how this impacts on child care/child protection issues.

This guidance is for **all** practitioners working with children and families across the public, private and voluntary sectors in Fife. It aims to support and protect staff.

This guidance may also be particularly helpful to managers who manage/supervise practitioners and who may, as part of their work, encounter these circumstances, from time to time.

Throughout this guidance document such services and agencies are referred to collectively as agencies. Workers and staff are collectively referred to as practitioners and/or managers.

2. Context

The nature of child protection work can, at times, result in parents or carers feeling angry and they can react in a hostile or threatening way towards practitioners who are involved with their family. Employers have responsibilities under The Health and Safety at Work etc Act 1974, The Management of Health and Safety at Work Regulations 1999 and The Workplace (Health, Safety and Welfare) Regulations 1992 to protect staff in the work place and whilst carrying out their day to day duties.

Agencies should have in place day to day procedures, which support the safety of practitioners undertaking home visits. This can include deployment (visiting) in pairs, the provision of mobile phones and 'logging in and out' procedures (which should include expected return time). These should be reflected and reinforced in single agency procedures/ protocols/policies.

The Scottish Government's (2004) Protecting Children and Young People: Framework for Standards, Standard 1 - 1.5, Standard 2 - 2.3 and 2.10, Standard 6 - 6.2 and 6.4 and Standard 8 - 8.8 set out in context the clear policy baseline for all practitioners and agencies to adhere to.

The Bridge Childcare Development Service in their report (1997) into the death of Rikki Neave in 1994 recommended:-

“when a parent is considered to be threatening or hostile any presumption that they are different with their children should be rigorously tested”.

The report further recommended that in such situations:-

“recognition be given by managers to the impact on social workers and other staff of parental aggression and any fear that is aroused in them and the consequences for decision making and practice. Adequate professional supervision and support must be given in these situations”.

The child’s needs are paramount and the centre of all child protection activity should be based on improving outcomes for children. Inter-agency work in Fife serves a diverse population with differing needs. Practitioners involved in child protection should adopt a positive and anti-discriminatory approach to parents and carers. They must also be mindful of their own safety and the safety of their colleagues.

3. Principles

Effective communication and information sharing in child protection work is crucial and this includes the work undertaken with children, parents or carers. Issues of confidentiality must not compromise the welfare and protection of children. This includes sharing information with regard to parents or carers who act in a hostile or threatening way towards workers and whose actions of non co-operation or non compliance result in ineffective partnership working with agencies aiming to promote and safeguard the wellbeing of children.

Fife Chief Officers' Public Safety Group has provided advice and guidance on information sharing for all staff and managers and this advice can be found on the Fife Child Protection website at www.fifechildprotection.org.uk.

Fife Child Protection Committee has also issued an **Introduction to Child Protection CD Rom** and an **Information and Advice Card** on ***"What to do if you are worried about a child or young person"*** as part of their public information business function. Further copies can be obtained from the Child Protection Committee by emailing fife.childprotection@fife.gov.uk or on 01592 583251.

4. Definitions

For the purpose of this guidance the following broad definitions are being used:-

Hostile and Threatening Behaviour

- Involves behaviour which has a damaging effect, physically or emotionally, on other people.

Non-Compliant/Uncooperative Behaviour

- Involves proactively sabotaging efforts to effect change or alternatively passively disengaging.

Disguised Compliance (Apparent Co-operation)

- Involves parents or carers not admitting to their lack of commitment to change but working subversively to undermine the process.

5. Recognition of Problems

Hostile and Threatening Behaviour

This includes a range of behaviours examples of which are:-

- Violence;
- Physically, verbally or emotionally aggressive;
- Threatening or intimidatory – intimidation can include using the complaints system against staff members;
- The impact of such behaviour on individual staff will vary but the fear of violence and aggression is recognised as impacting on judgements, interpretation and intervention.

Non Compliant/Uncooperative Behaviour

This includes a wide range of deliberate behaviours and attitudes such as:-

- Passive non-compliance with plans of work;
- Failure to keep appointments;
- Refusal to allow access to the child or to the home;
- Paying lip service to cooperation.

When considering non compliance and lack of co-operation by a parent or carer, practitioners must consider if the child protection concerns have been explained clearly, taking into account issues of language, culture, disability etc and that parents or carers fully understand the concerns and the impact on their care and the needs of the child.

Practitioners must assess if all possible strategies have been tried to establish partnership working with the parent or carer e.g. a change of worker, use of a specialist agency, where appropriate. An assessment of the parent or carer's capacity to make the identified changes should also be undertaken.

Best practice would suggest that all of this should be recorded in writing as part of the case/file notes.

Disguised Compliance

‘Beyond Blame’ the 1993 study of fatal child abuse inquiries described ‘disguised compliance’ as apparent co-operation. Examples of this include:-

- Agreeing to keep appointments or to undertake individual actions but never actually carrying them out or putting little effort into making changes work;
- Co-operating with some services but not making the important changes - no significant changes identified at reviews, alignment with certain professionals;
- Change does occur but as a result of the input of agencies and not as a result of the actions of the parent/carer.

As with a non compliant and uncooperative parent or carer, practitioners must be sure that the child protection concerns, the areas of identified change and the expectations of the parent or carer have been clearly communicated. An assessment of the parent or carer’s capacity to understand the concerns and issues and their ability to make changes should be undertaken.

In all cases practitioners must be aware that behaviours of a parent or carer can be misinterpreted. For example, what may appear as uncooperative behaviour may be designed to mask hidden issues in the family such as domestic violence, and/or drug and alcohol misuse. If practitioners do not have a broader understanding of these issues and the impact on the child, they may operate at a lower level of expectation and the impact on the child is not recognised.

6. Assessment of Risk

Record keeping in relation to children and families must include full information on any incidents. It is the responsibility of each practitioner, within their own agency's guidelines, to ensure that such information is clearly and systematically recorded. Individual staff must inform their manager (or supervisor) of any concerns they have with regard to a parent or carer who they have assessed as being hostile, uncooperative, non-compliant or who use disguised compliance.

Collation of information with regard to a parent or carer who is hostile, non-compliant, uncooperative or who use disguised compliance together with child protection concerns must form part of a child protection risk assessment. Information with regard to such concerns for a parent or carer must be communicated within and across agencies, using existing mechanisms such as review processes, e.g. Core Group, Review Case Conference etc. In more urgent cases this information must be communicated quickly and effectively.

In some cases, it may also be necessary to carry out a generic health and safety risk assessment, particularly where there is a known or suspected history of abusive behaviour and/or violence and where it is considered necessary to have in place any control measures to reduce the probabilities and risks to staff.

In the absence of a process, e.g. in the initial stages of a child protection investigation, following an incident involving the behaviour of a parent or carer, if a practitioner has concerns he/she must communicate these to other agencies as soon as practicable. On the basis of this information sharing across agencies, the practitioner with lead responsibility for the assessment must discuss the circumstances with their manager (or supervisor) who will decide if an inter-agency meeting should be convened.

If an inter-agency meeting is deemed necessary it will be chaired by the agency with responsibility for the completion of the assessment. It will include all relevant practitioners from agencies to whom the child and family are known – best practice would also suggest that where applicable and appropriate this may include adult services.

7. Considerations for the Planning Meeting or Review

The planning meeting or the review will focus on the needs of the child but consider any known risk factors with regard to the parent or carer's behaviour. This may include (where known):-

- Information held by agencies with regard to the parent or carer – What factors are known, pattern if any of such behaviour?
- Does the parent or carer have a history of mental illness/disorder?
- Has the parent or carer suddenly become unemployed and/or redundant?
- Does the parent or carer have a medical condition which may result in a loss of self-control?
- Are there issues for the parent or carer in relation to alcohol or substance misuse?
- Will any particular practitioner be perceived as a threat to the parent or carer?
- Are there gender issues for consideration?
- Consideration to factors, which will reduce the stress on the parent or carer and minimise the risk of aggression e.g. being clear about the role of the practitioner and what he/she can and cannot do.
- Is the new information with regard to the parent or carer such that the child is considered to be at significant risk of harm or immediate danger – if so then action must be taken without delay to ensure the child's safety.
- Staff safety issues including whether it is considered safe for one practitioner to visit.

A plan of intervention will be developed, the prime consideration of which will be the needs and protection of the child. This may also include the need for a Health and Safety Risk Assessment for the protection of staff.

It is likely in such cases that social work will be the lead agency because of the child protection concerns, however if this is not the case, a lead practitioner/coordinator must be identified. Other agencies involved will identify a key practitioner who will work in partnership with the lead practitioner/coordinator. Agencies must work collectively to ensure the welfare of the child. Information regarding the child's placement and legal proceedings must be communicated across agencies.

The plan will be subject to regular inter-agency review.

8. General

It is the responsibility of all practitioners and managers to make effective use of supervision within the framework of individual agency procedures and guidance. Practitioners have a professional accountability to identify families where the behaviour of the parent or carer is impacting on a child's safety and to share that information with their manager (or supervisor). Managers have a responsibility to exercise clear decision making.

In the absence of formal supervision systems advice should be sought from other colleagues with experience in child protection; this may be within the same agency or another agency with key responsibilities in child protection and/or through mechanisms such as core groups.

9. Regular and Clear Inter Agency Communication

Whilst there is a presumption of openness with a parent or carer, some situations may require a meeting of practitioners involved without the parent or carer being present. This may be to share fully the impact of the parent or carer's behaviour on the care of the child. Other issues for consideration could include the ability of the practitioners involved to engage and effect change through inter-agency working.

10. New Information – Action

When a child is subject to child protection registration and new information is highlighted with regard to concerns in respect of the behaviour of parents or carers, consideration must always be given to ensure that there is full information sharing and shared understanding of the impact of the parents or carers' behaviour on the child protection plan.

If the new information with regard to the parent or carer is of significant concern, consideration must be given to taking immediate/emergency action to safeguard the children. It may also be appropriate to consider the need for a Child Protection Order dependent on the level of concern/risk. In some cases it may be appropriate to consider bringing forward planned meetings of Case Conferences and/or Core Groups.

Where a family is known to have a dislike/difficulty with a particular agency this information **must** be communicated in advance of any meeting involving the parent and carer and appropriate action taken to safeguard that agency's

representative.

11. Training

Fife Child Protection Committee should ensure that appropriate training is in place within agencies and that it commissions and/or delivers relevant inter-agency child protection training for practitioners and managers, including how to deal with difficult/dangerous situations in child protection.

12. Case Management

Practitioners must work within individual agency and inter-agency procedures in terms of assessment, information sharing, case management, recording and reflective practice.

Agencies must work collectively to ensure that the welfare of the child is paramount with clear lines of communication and joint working, where appropriate. This should include joint visits - to promote inter-agency working, to assist in the process of assessment and to use the skills of colleagues from within and across agencies to ensure that children get the help they need when they need it. It is important throughout that the child is visible and is seen, whilst simultaneously ensuring their protection, as well as the

protection of all staff.

13. Further Reading

This guide aims to provide **generic best practice advice** to all staff across all services/agencies. It complements but does not replace existing single agency advice. On that basis, it needs to be read in conjunction with:-

- Protecting Children and Young People: The Charter (Scottish Government 2004);
- Protecting Children and Young People: Framework for Standards (Scottish Government 2004);
- Fife CPC Inter-Agency Child Protection Guidelines;
- Code of Practice for Social Service Employers 2005;
- Code of Practice for Social Service Workers 2005;
- The Health and Safety at Work etc Act 1974;
- The Management of Health and Safety at Work Regulations 1999;
- The Workplace (Health, Safety and Welfare) Regulations 1992;

For more information about the work of the Fife Child Protection Committee:

- visit - www.fifechildprotection.org.uk
- email - fife.childprotection@fife.gov.uk
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