

16.4 Appendix 4 – Ten Pitfalls and How to Avoid Them³⁰

1. *Not enough weight is given to information from family, friends and neighbours:* Ask yourself: Would I react differently if these reports had come from a different source? How can I check whether or not they have substance? Even if they are not accurate, could they be a sign that the family are in need of some help or support?
2. *Not enough attention is paid to what children say, how they look and how they behave:* Ask yourself: Have I been given appropriate access to all the children in the family? If I have not been able to see any child, is there a good reason, and have I made arrangements to see him as soon as possible, or made sure that another relevant professional sees him? How should I follow up any uneasiness about the child's health or wellbeing? If the child is old enough and has the communication skills, what is the child's account of events? If the child uses a language other than English, or alternative non verbal communication, have I made every effort to enlist help in understanding him? What is the evidence to support or refute the child's account?
3. *Attention is focused on the visible or pressing problems and other warning signs are not appreciated:* Ask yourself: What is the most striking thing about this situation? If this feature were to be removed or changed, would I still have concerns?
4. *Pressures from high status referrers or the press, with fears that a child might die, lead to over-precipitate action:* Ask yourself: Would I see this as a child protection matter if it came from another source?
5. *Professionals think that when they have explained something as clearly as they can the other person will have understood it:* Ask yourself: have I double checked with the family and the child that they understand what will happen next?
6. *Assumptions or pre-judgements about families lead to observations being ignored or misinterpreted:* Ask yourself: What are my assumptions about this family? What, if any, is the hard evidence which supports them? What, if any, is the hard evidence that refutes them?
7. *Parents' behaviour, whether co-operative or non co-operative, is often misinterpreted:* Ask yourself: What are the reasons for the parents' behaviour? Are there other possibilities besides the most obvious? Could their behaviour be a reaction to something I did or said rather than to do with the child?
8. *When the initial assessment shows that the child is not at risk of significant harm, families are seldom referred to other services which they need to prevent longer term problems:* Ask yourself: Is this family's situation satisfactory for meeting the child's needs? Whether or not there is a child protection concern, does the family need support or practical help? How can I make sure they are aware of services they are entitled to, and can access them if they wish?
9. *When faced with an aggressive or frightening family, professionals are reluctant to discuss fears for their own safety and ask for help:* Ask yourself: Did I feel safe in this household? If not, why not? If I, or another professional, should go back to ensure the child's safety, what support should I ask for? If necessary put your concerns and requests in writing to your manager.
10. *Information taken at the first enquiry is not adequately recorded, facts are not checked and reasons for decisions are not noted:* Ask yourself: Am I sure the information I have noted is 100% accurate? If I didn't check my notes with the family during the interview, what steps should I take to verify them? Do my notes show clearly the difference between the information the family gave me, my own direct observations, and my interpretation or assessment of the situation? Do my notes record what action I have taken/will take? What action all other relevant people have taken/will take?

³⁰ (Cleaver, H et al. Children Living at Home: the Initial Child Protection Enquiry. Ten Pitfalls and How to Avoid Them. In Assessing Risk in Child Protection. London; NSPCC, 1998.)