

## INITIAL ASSESSMENT AND ENQUIRIES

### TEN PITFALLS AND HOW TO AVOID THEM

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 they have substance? Even if they are not accurate, could they be a sign that the family is 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 very good reason and have I made arrangements to see him/her as soon as possible? How should I follow up any uneasiness about the children's health or development? 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/her? What is the evidence to support or refute the child or young person's account?*

3. Attention is focused on the most 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 may die lead to over precipitate action.

*Ask yourself: Would I see this referral as a safeguarding 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 children that they understand what will happen next?*

6. Assumptions and pre-judgements about families lead to observations being ignored.

*Ask yourself: What were my assumptions about this family? What if any, is the hard evidence which supports them? What, if any, is the hard evidence which refutes them?*

7. Parents' behaviour, whether cooperative or uncooperative is often misinterpreted.

*Ask yourself: What were the reasons for the parents' behaviour? Are there other possibilities besides the most obvious? Could their behaviour have been a reaction to something I did or said rather than to do with the child?*

8. When the initial enquiry shows that the child is not at risk of significant harm, families are seldom referred to other services that they need to prevent longer term problems.

*Ask yourself: Is this family's situation satisfactory for meeting the children's needs? Whether or not there is a concern about harm, does the family need support or practical help? How can I make sure they know about 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 there to ensure the children'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 point of referral 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?*

From: Cleaver H, Wattam C and Cawson P (1998) *Assessing Risk in Child Protection*