



AC&FPC
Multi-Agency Guidance

Working with Uncooperative Families

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MULTI-AGENCY GUIDANCE FOR WORKING WITH UNCOOPERATIVE FAMILIES

1. Purpose

- 1.1. This guidance has been developed to assist staff from all agencies when faced with uncooperative families and aims to raise awareness of the impact on the wellbeing and protection of children when parents, carers or other family members intimidate and/or exclude professionals.

2. Context

- 2.1. "Protecting Children and Young People: Framework for Standards", Standard 2.10

"Professionals take action to protect each child even when their parents pose a risk to workers. Agencies ensure there are systems and support mechanisms in place to maximise staff safety in such situations."

- 2.2. "Protecting Children and Young People: Framework for Standards", Standard 8.8.

"Agencies ensure that staff are adequately protected from violence and aggression and that in undertaking their duties the risks to both the professional and children are minimised."

3. Principles

- 3.1 Our work with children and their families is underpinned by an integrated and co-ordinated approach to multi-agency planning. It looks to practitioners to work in accordance with legislation and guidance but also expects agencies to think beyond their immediate remit, drawing on the skills and knowledge of others as necessary and thinking in a broad, holistic way. It is important to look at whether the actions taken have achieved the outcomes specified in the plan and what changes or further action, if any, are required
- 3.2 In some working situations with families, professionals may experience intimidation, abuse, threats of violence and even actual violence. The child's welfare must remain paramount at all times and where professionals are too scared to confront the family, they must consider what life is like for the child in the family.
- 3.3 Inter-agency services cover a diverse population with differing needs and characteristics. Professionals involved both directly and indirectly with children should adopt a positive and anti-discriminatory approach to children and their parents and carers. With the significant migrant population in the North East of Scotland, it is essential to ensure staff use a range of communication methods at their disposal to ensure effective communication with the families they are engaging with.
- 3.4 Effective communication and information sharing is crucial and this includes involving the children, parents and carers in the communication processes being mindful of inadvertently increasing risk for the child. Information must also be shared with regard to parents and carers who act in a hostile or threatening way towards workers and whose actions of non-co-operation or non-compliance could result in ineffective partnership working between agencies to promote and protect the wellbeing of children.

4. Definitions

4.1. Professionals may feel that families or individuals are being uncooperative in several ways. For the purposes of this guidance the following broad definitions are being used:

- **Ambivalence:** such as when people don't accept or understand the need for professional involvement. This may be demonstrated through lateness for appointments, or repeatedly make excuses for missing them; when they change the conversation away from uncomfortable topics and when they use dismissive body language. Ambivalence is the most common reaction and may not amount to being truly uncooperative. It may reflect cultural differences, being unclear about what is expected, or poor experiences of previous involvement with professionals. Ambivalence may need to be acknowledged, and it can be addressed professionally.
- **Avoidance:** a very common method of being uncooperative, this includes avoiding appointments, missing meetings and cutting visits short due to other apparently important activity (often because the prospect of involvement makes the person anxious and they hope to escape it). They may have a difficulty, have something to hide, resent outside interference or find staff changes difficult to cope with. This can be addressed sensitively by the professional.
- **Confrontation:** this includes challenging professionals, provoking arguments, extreme avoidance (e.g. not answering the door as opposed to not being in) and often can indicate a deep-seated lack of trust leading to a "fight" rather than a "flight" response to difficult situations. Parents may fear, perhaps realistically, that their children may be taken away or they may be reacting to them having been taken away. They may have difficulty in consistently understanding the professional's role and be suspicious of their motives. It is important for the professional to be clear about their role and purpose, demonstrate a concern to help, but not to expect an open relationship to begin with. However, at some point the parent's uncooperative behaviour must be challenged, so that they are enabled to understand that the professional / agency will not give up. This may require the professional having to cope with numerous displays of confrontation and aggression until eventual co-operation may be achieved.
- **Violence:** threatened or actual violence, though only involving a small minority of people, is the most difficult and challenging uncooperative behaviour. It may reflect a deep and longstanding fear and projected hatred of authority figures. People may have had experience of getting their own way, or seeing others getting their own way, through intimidation and violent behaviour. The professional / agency needs to be realistic about the child or adult's capacity for change in the context of an offer of help within the areas that need to be addressed.
- **Resistance:** This may present through the family's aggression, conditional compliance, refusal to co-operate, missed appointments and other forms of avoidance, or it may be masked by superficial engagement and co-operation. There may also be unintended barriers to engagement that arise as direct consequence of an individual's circumstances, such as mental health, mental illness or disability. The common feature in all cases is resistance to change and an inability/unwillingness to acknowledge and/or address the risk/s to the child.

- 4.2. In all cases workers must be aware that behaviours of parent's, carers or professionals 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 drug and / or alcohol misuse. If professionals 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 will not then be recognised.
- 4.3. In any of the above situations, a full assessment of the situation relating to professional involvement with the family must be undertaken.

5. Impact on Assessment

- 5.1. Accurate information and a clear understanding of what is happening to a child within their family and community are vital to any assessment. The usual and most effective way to achieve this is by engaging parents or carers and children in the process of assessment, reaching a shared view of what needs to change and what support is needed, and jointly planning the next steps.
- 5.2. Engaging with a family member who is resistant or even violent and / or intimidating is obviously more difficult. The behaviour may be deliberately used to keep professionals from engaging with the parent or child, or can have the effect of keeping distance from the professionals. There may be practical restrictions to the ordinary tools of assessment (e.g. seeing the child on their own, observing the child in their own home etc). Other sources of information or viewpoints from other professionals may not be available because of a general inability to gain access to the family.
- 5.3. To optimise the protection of children, ALL agencies should collaborate and undertake the tasks of assessment and analysis of family circumstances together. When services operate in a collaborative and co-ordinated way; where all the needs and circumstances of the child and their family are openly and honestly explored, the impact and longer-term outcomes for children and young people can be considerably improved. To do this, practitioners need to take a holistic approach to practice that ensures the child is kept at the centre.
- 5.4. Professionals from all agencies should explicitly identify, record and share with other appropriate agencies which areas of assessment are difficult to achieve and why.
- 5.5. While some practitioners may not define or perceive their core role as a "child focused" one (ie. practitioners who may be working primarily with the adults in the household), their information and involvement remains crucial in ascertaining and managing present and future needs/risks to a child or young person. It is essential that practitioners collaborate through good joint working arrangements; proportionately balancing strengths/resilience's against the identified vulnerabilities/need for protection; and transparently via open exploration of family circumstances.
- 5.6. The presence of violence or intimidation needs to be included in any assessment of risk to the child living in such an environment.

- 5.7. It should be remembered that any holistic assessment is underpinned with information and analysis from a wide range of sources, including those which are historical. Asking difficult questions, ensuring accuracy by cross-checking and not taking anything at face value whilst remaining curious and updating records when new information is presented should remain at the centre of our assessment processes.

6. Impact on Assessment of the Child

- 6.1. The child can be affected in many ways as listed below. All professionals' needs to be mindful of the impact of hostility or non-engagement towards professionals or others on the wellbeing of the child. When considering what the child is experiencing, many of the hidden issues (as referred to in 4.2) will need to be considered. The child may:
- Be coping with their situation with "hostage-like" behaviour (characterised by accommodating, appeasing or identifying with the "hostage-taker" to keep safe).
 - Have become de-sensitised to violence
 - Have learnt to appease and minimise (including always smiling in the presence of professionals)
 - Be simply too frightened to tell
 - Identify with the aggressor.

7. Impact on Assessment of the Adults

- 7.1. In order to assess to what extent the hostility of the adult/s is impacting on the assessment of the child, professionals in all agencies need to consider whether they are:
- Colluding with the adult/s by avoiding conflict, such as:
 - Avoiding contact in person (home visits)
 - Using remote contact methods (telephone and letter contact instead of visits where child may be seen)
 - Accepting the parent's version of events unquestioningly in the absence of objective evidence
 - Focusing on less contentious issues that do not overtly impact on the child directly (monetary / housing matters)
 - Avoiding opportunities to find out actual living conditions for child (Is food available? What are the child's sleeping facilities?)
 - Focusing on the parent's needs not the child's needs.
 - Not asking to see the child alone.
 - Changing their behaviour to avoid conflict
 - Filtering out or minimising negative information
 - Conversely, placing undue weight on positive information (the "rule of optimism") and only looking for positive information
 - Fear of confronting family members about concerns
 - Keeping quiet about worries and not sharing information about risks and assessment with others in the inter-agency network or with managers.

- 7.2. Professionals in all agencies need to consider:
- Whether the child may be keeping "safe" by not telling professionals things
 - Whether the child has learned to appease and minimise
 - Whether the child is blaming themselves
 - What message is the family being given if the professional / agency does not ask "difficult" questions or challenge any potential issues
- 7.3. If a professional is relieved when there is no answer from the door, or on the phone when trying to contact a difficult family, or when they leave the appointment - what might the children have been feeling as the door closes behind a professional again?

8. Impact on Multi-Agency Work

- 8.1. Agencies and families are required to work in partnership to achieve the agreed outcome and all parties need to understand that the partnership may not be equal.
- 8.2. Sometimes parents may be hostile to specific agencies or individuals. If the hostility is not universal, then agencies need to try to understand why this might be and learn from each other.
- 8.3. Where there is hostility this needs to be managed on an inter-agency basis otherwise the results can be as follows:
- Everyone "backs off" and the child is left unprotected
 - The family is "punished" by withholding of services as it is seen as a "fight", at the expense of assessing and resolving the situation for the welfare of the child
 - There is a divide between those who want to appease and those who want to oppose - or everyone colludes.
- 8.4. When families are hostile to only some professionals/agencies and/or this is intermittent then there is increased risk to inter-agency collaboration as pre-existing tensions may increase e.g.:
- Professionals or agencies blame each other and collude with the family.
 - Those not feeling under threat may find themselves taking sole responsibility, which can ultimately increase the risk to themselves.
 - Those feeling "approved of" may feel personally gratified as the family "ally" but then may find it difficult to recognise/accept risks or problems.
 - Those feeling under threat may feel it is "personal" and find it difficult to work in ongoing professional manner.
 - There is no unified and consistent plan.

9. Ensuring Effective Multi-Agency Working

- 9.1. Regular inter-agency communication, clear mutual expectations and attitudes of mutual respect and trust are core to effective multi-agency working. When working with uncooperative families the need for effective inter-agency collaboration and trust is especially vital, but may be more of a challenge to achieve. It is particularly important that everyone is:

- Aware of the impact of hostility and avoidant behaviours on their own response and that of others.
- Respectful of the concerns of others.
- Alert to the need to share relevant information that may impact on safety concerns.
- Actively supportive of each other and aware of the differing roles and problems which different agencies have in working with the family.
- Aware of the risks of collusion and of any targeting of specific professionals/agencies.
- Prepared to discuss strategies if one agency is unable to work with the family and how this situation impacts upon ongoing monitoring of the child's welfare and family support work.
- Alert to the need to make a multi-agency decision regarding referrals to SCRA and/or CPCC where assessment indicates this is necessary to support ongoing work.

10. Sharing Information

- 10.1. Most practitioners are confident about appropriate and necessary sharing where there is a child protection risk. The problem can be where the circumstances do not yet reach the child protection trigger yet professional concerns exist, albeit at a lower level. In many cases, a risk to wellbeing can be a strong indication that the child or young person could be at risk of harm if the immediate matter is not addressed.
- 10.2. A child's Named Person may have concerns about the child's wellbeing, or other individuals or agencies may have concerns that they wish to share with the Named Person. While it is important to protect the rights of individuals, it is equally important to ensure that children are protected from risk of harm.
- 10.3. Where a practitioner believes, in their professional opinion, that there is risk to a child or young person that may lead to harm, proportionate sharing of information is unlikely to constitute a breach of the Data Protection Act 1998 in such circumstances.

11. Multi-Agency Meetings.

- 11.1 It is a normal human response to avoid difficult situations, including those involving uncooperative behaviours (see section 4.1). However, for effective child wellbeing and safeguarding, all partner professionals are expected to be proactive in engaging with the family to ensure positive outcomes. This can be achieved by all partner agency professionals:
- Making clear agreements known to all partner agencies and the family.
 - Detailing each professional's role and the tasks allocated to them.
 - Actively and fully participating in multi-agency meetings, core group meetings and at child protection conferences.
 - Agreeing the concerns for the child collectively, avoiding any potential family hostility aimed towards select individuals within the agency partnership.
- 11.2 Further actions partner professionals may consider are:

- Discussing with the Chair before the meeting how any potential opposition will be managed to minimise disruption and encourage the free flow of the sharing of information.
- In potentially challenging meetings consider convening a meeting to draw up an explicit risk reduction plan for professionals (follow up review meetings may then take place to review and discuss the effectiveness of the agreed strategies).
- Joint visits with police or colleagues from partner agencies.
- Debriefing with other partner agencies when professionals have experienced a difficult or traumatic event in relation to the family.

11.3 Although working with uncooperative families can be particularly challenging, the safety of the child is the first concern. If professionals are anxious or frightened about confronting the family, then consideration must be made to what life is like for the child.

12. Responding to Uncooperative Families

- 12.1. When a professional begins to work with a family who is, or becomes, uncooperative, the professional must make every effort to try to understand the reasons for this. This entails considering all available information in consultation with other partner agencies as appropriate.
- 12.2. When working with uncooperative families, professionals in all agencies can improve the chances of a favourable outcome for the child/ren by:
- Keeping the relationship formal though supportive and giving clear indications that the aim of the work is to achieve the best for their child/ren.
 - Clearly stating their professional and/or legal authority.
 - Continuously assessing the motivations and capacities of the parents to respond co-operatively in the interests of their children.
 - Confronting uncooperative behaviour when it arises, in the context of improving the chances of a favourable outcome for the children.
 - Engaging with regular supervision from a manager/appropriate colleague, to ensure progress with family is being made and is appropriate.
 - Seeking advice from experts (e.g. police, mental health specialists) to ensure progress with the family is appropriate.
 - Helping the parent to work through their underlying feelings at the same time as supporting them to engage in the tasks of responsible childcare.
 - Being alert to underlying complete resistance (possibly masked by superficial compliance) despite every effort being made to understand and engage the parents or carers.
 - Being willing, in such cases, to take appropriate action to protect the child/ren.
- 12.3. With the help of their manager, professionals should be alert to, understand and avoid the following responses:
- Seeing each situation as a potential threat and developing a "flight" response or becoming over-challenging and increasing the tension between the professional and the family. This may protect the professional physically and emotionally or may put them at further risk. It can also lead to that

professional becoming desensitised to the child's issues and to levels of violence within the home.

- Colluding with parents by accommodating and appeasing them in order to avoid provoking a reaction.
- Becoming hyper-alert to the personal threat so that the professional becomes less able to listen accurately to what the adult is saying, distracted from observing important responses of the child or interactions between the child and adults.
- "Filtering out" negative information or minimising the extent and impact of the child's experiences in order to avoid having to challenge. At its most extreme, this can result in professional avoiding making difficult visits or avoiding meeting those adults in their home, losing important information about the home environment.
- Feeling helpless / paralysed by the dilemma of deciding whether to "go in heavy" or "back off". This may be either when faced with escalating concerns about a child or when the hostile barrier between the family and outside means that there is only minimal evidence about the child's situation.

13. Respect

- 13.1. Families may develop or increase resistance or hostility to involvement if they perceive the professional as disrespectful and unreliable or if they believe confidentiality has been breached outside the agreed parameters.
- 13.2. Professionals should minimise resistance or hostility by complying with their agency's code of conduct, policies and procedures in respect of the appropriate treatment of service users.
- 13.3. Professionals should be aware that some families, including those recently arrived from abroad, may be unclear about why they have been asked to attend a meeting, or why the professional wants to see or visit them. They may not have an understanding of the law as it relates to children and parental roles and responsibilities and agencies statutory roles and responsibilities.
- 13.4. Professionals should seek expert help and advice in gaining a better understanding, when there is a possibility that cultural factors are making a family resistant to having professionals involved. Professionals should be:
 - Aware of dates of the key religious events and customs.
 - Aware of the cultural implications of gender.
 - Acknowledge cultural sensitivities and taboos e.g. dress codes.
- 13.5. Professionals who anticipate difficulties in engaging with a family may want to consider the possibility of having contact with the family jointly with another person in whom the family has confidence. Any negotiations about such an arrangement must be underpinned by the need for confidentiality with the family.
- 13.6. Professionals need to ensure that parents understand what is required of them and the consequences of not fulfilling these requirements. Professionals must consider whether:

- A parent has a low level of literacy, and needs verbal rather than written communication.
- A parent needs translation and interpretation of all or some communications into their own language.
- It would be helpful to a parent to end each contact with a brief summary of what the purpose has been, what has been done, what is required by whom and by when.
- The parent is aware that relevant information / verbal exchange is recorded and that they can access written records about them.

14. Dealing with Hostility and Violence.

- 14.1. Despite sensitive approaches by professionals, some families may respond with hostility and sometimes this can lead to threats of violence and actual violence. It is therefore important to try and understand the reasons for the hostility and the actual level of risk involved.
- 14.2. It is essential both for the professional's and the child's safety that risks are accurately assessed and managed. Threatening behaviour can consist of:
- The deliberate use of silence.
 - Using written and/or verbal threats, including the use of social media and technology.
 - Bombarding professionals with emails and phone calls.
 - Using intimidating or derogatory language.
 - Discriminatory attitudes and remarks.
 - Using domineering or aggressive body language.
 - Using dogs or other animals as a threat - sometimes veiled.
 - Swearing and/or shouting.
 - Throwing things and/or actual violence.
- 14.3. Threats can be covert or implied (e.g. discussion of harming someone else), as well as obvious. In order to make sense of what is going on in any uncomfortable exchange with a family member, it is important that professionals are aware of the skills and strategies that may help in difficult and potentially violent situations. Professionals should consider whether:
- They are prepared that the response from the family may be angry or hostile. They should ensure they have discussed this with their manager and planned strategies to use if there is a predictable threat (e.g. request for police attendance if there is a strong possibility of violence or confrontation).
 - They might have aggravated the situation by becoming angry or acting in a way that could be construed as being patronising or dismissive.
 - The hostility is a response to frustration, either related or unrelated to the professional visit.
 - The parent needs to complain, possibly with reason.
 - The parent's behaviour is deliberately threatening / obstructive / abusive or violent.
 - The parent is aware of the impact they are having on the professional.
 - They are so used to aggression that they do not appreciate the impact of their behaviour.

- This behaviour is "normal" for this person (which nevertheless does not make it acceptable).
- The professional's discomfort is disproportionate to what has been said or done.
- The professional is taking this personally in a situation where hostility is aimed at the agency.

14.4. Basic Intervention Strategies to Aggression Management - A list of suggestions taken from a wide range of associated literature which may be of use in a variety of situations.

- Try to get the aggressor to agree to something, either in word or action, to initiate the start of co-operation.
- Try to accept and re-interpret their hostile actions in a more positive light, seeking points of similarity rather than differences, and enlisting their help as allies rather than enemies.
- Try to comment on the other person's behaviour, rather than on their apparent motivation. Avoid the impression of trying to read their mind or of judging their intent. Try to give the person space to explain or deny feelings attached to their actions.
- Try to deal with the "here and now" rather than on past issues.
- Try to keep explanations and instructions simple, avoiding use of complex or loaded words.
- Try to reassure, calm and support the aggressor, stating that the worker is there to help maintain control of him / herself. Try to encourage understanding that they must accept the responsibility for controlling their own behaviour.
- Try to keep requests short, direct and non-condescending.
- When asking questions, try to avoid casting doubt on the other person's ability to perform a task, but rather their willingness to do so. This could be seen as patronising and may further damage any low self-esteem.
- Try to avoid making promises or guarantees that cannot be kept or that are beyond your control. Talk about what is known, rather than attempting to predict future outcomes or events.
- Try to offer a "face-saving" alternative or a way out, as they may feel trapped or confused.
- Any limits that may have to be set need to be reasonable and easily understood. It may help to reinforce the benefits for them in complying.
- Try to slow and extend the communication where possible. This gives time for listening, analysing and considering a response.
- Try to reassure the person that they have heard what the problem is, and acknowledge it is a problem, and try to give them time to talk about what has made them upset or angry.

15. Impact of Hostility and Violence on Professionals.

- 15.1. "Protecting Children and Young People: Framework for Standards", Standard 6, 4&5 **"Professionals are equipped to deal with difficult situations including conflict. They are supported by their colleagues and agencies and there are systems in place to monitor this"** (and) **"Professionals know the limits of their own knowledge and expertise and call on the skills of others or specialist services when needed. There is support and systems in place to help them know when and how to do this."**
- 15.2. Working with potentially hostile and threatening families can place professionals under a great deal of stress and can have physical, emotional and psychological consequences. It can also limit what the professional/s can allow themselves to believe, make them feel responsible for allowing the violence to take place, lead to adaptive behaviour and also result in a range of distressing physical, emotional and psychological symptoms. The impact on the professional may be felt and expressed in different ways:
- Surprise and/or embarrassment.
 - Numbness and / or denial.
 - Distress and/or fear.
 - Self-doubt and/or guilt.
 - Shock and/or anger.
 - Loss of self-esteem and of personal and/or professional confidence.
 - A sense of helplessness.
 - Sleep and dream disturbance.
 - Hyper vigilance.
 - Preoccupation with the event or related events.
 - Repetitive stressful thoughts, images and emotions.
 - Illness.
 - Post traumatic stress.
 - Loss of objectivity in similar future situations.
- 15.3. Factors that increase the impact on professionals include:
- Previous traumatic experiences both in professional and personal life can be revived and heighten the fears.
 - Regularly working in situations where violence / threat is pervasive - professionals in these situations can develop an adrenaline-led response, which may over or under play the threat. Professionals enduring threats may ignore the needs / feelings of other staff and members of the public. Professionals can become desensitised to the risks presented by the carer to the child or even to the risks presented by the adults to themselves (i.e. the professional).
 - "Hostage-like" responses - when faced with significant fears for their own safety, professionals may develop a "hostage-like" response. This is characterised by accommodating, appeasing or identifying with the "hostage-taker" to keep safe.
 - It is often assumed that there is a higher level of risk from men than from women and that male professionals are less likely to be intimidated. These false assumptions decrease the chances of recognition and support. Male professionals may find it more difficult to admit to being afraid, colleagues and managers may not recognise their need for emotional support. This may be particularly so if the perpetrator of the violence is a woman or young

person. In addition, male professionals may be expected to carry a disproportionate number of cases with threatening service users.

- Lack of appropriate support, supervision and a culture of denial or minimising of violent episodes as "part of the job" can lead to the under-reporting of violent or threatening incidents and to more intense symptoms, as the professional feels obliged to deal with it alone. There is also a risk that professionals fail to respond to concerns, whether for the child or for their own protection.
- 15.4. Violence and abuse towards professionals based on their race, gender, disability, perceived sexual orientation etc., can strike at the very core of a person's identity and self-image. If a professional already feels isolated in their workplace in terms of these factors, then the impact may be particularly acute and it may be more difficult to access appropriate support.
- 15.5. Some professionals are able to respond to uncooperative families in a way which indicates that they are untroubled by such conflict. Some may even give the impression to colleagues that they "relish" the opportunity for confrontation. Consequently, not all professionals will view confrontation as a negative experience and may generally appear unaffected. It can be more difficult to deal with ambivalence where there is no strong emotion or response from the family to give an indication of what their perception of the situation is or what interventions could best support the family to change. Whether practitioners "appear" to be unaffected or not, uncooperative behaviour must be addressed.

16. Keeping Professionals Safe

16.1. Professional's responsibility.

Professionals have a responsibility to plan for their own safety, just as the agency has a responsibility for trying to ensure their safety. Professionals should consult with their line manager for assistance in drawing up plans and strategies to protect their own safety and that of other colleagues. There should be clear protocols for information sharing (both internal and external) and the professional should know where further advice may be found. Prior to contacting a family, professionals should consider the following questions:

- Why am I doing this visit at the end of the day when it's dark and everyone else has gone home? (Risky visits should be undertaken in daylight whenever possible).
- Should this visit be made jointly with a colleague from my own, or other agency?
- Is my car likely to be targeted / followed? If "Yes" then this should be discussed with your line manager and an alternative plan agreed.
- Do I have a mobile phone with me or some other means of summoning help (e.g. personal alarm)?
- Could this visit be arranged at a neutral venue?
- Are my colleagues / line managers aware of where I am going and when I should be back? Do they know I may be particularly vulnerable / at risk during this visit?
- Are there clear procedures for what should be done if a professional does not return or report back within the agreed time from a home visit and have I discussed this and my role in it with my colleagues / line manager?

- Does my manager know my mobile phone number, my car registration number and my home address and phone number?
- Do my family members know how to contact someone from work if I don't come home as expected?
- Should I consider and seek advice on other precautions such as being ex-directory at home and having my name removed from the public section of the electoral register?
- Have I accessed personal safety training?
- Is it possible for me to continue to work effectively with this family?
- Have I fully recorded all details relating to any events / concerns and ensured that I have passed them to all appropriate colleagues / managers?
- If I am asking these questions, should the child be living here?

16.2. **Management Responsibility.**

Managers have a statutory duty to provide a safe environment for their employees under the Health and Safety at Work legislation. (For more information refer to Health and Safety at Work Act; the Management of Health and Safety at Work Regulations; the Workplace (Health, Safety and Welfare) Regulations and the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR), as well as agencies own Lone Working and Health and Safety policies.)

This includes:

- Undertaking assessments to identify and manage the risks inherent in all aspects of the work.
- Providing a safe working environment.
- Providing adequate equipment and resources to enable staff to work safely.
- Providing specific training to equip professionals with the necessary information and skills to undertake the job.
- Ensuring a culture that allows professionals to express fears and concerns and in which support is forthcoming without implications of weakness.
- Managers need to ensure that any home visiting policies are implemented and that staff are aware of these policies.
- Managers need to ensure that time is allowed for professionals to work safely (e.g. to obtain background information and plan and agree safety strategies).
- Adequate strategies and support are in place to deal with any situations that may arise.
- In allocating work, managers need to be mindful of the skills and expertise of their team and any factors that may impact on this. They need to seek effective and supportive ways to enable new / inexperienced professionals to identify and develop the necessary skills and expertise to respond to uncooperative families.
- Awareness that more experienced staff may become desensitised and may make assumptions about families and situations.
- Awareness of the impact of incidents on other members of the team.
- Where an incident has occurred, managers need to try to investigate the cause (e.g. was this racially or culturally motivated?).
- Awareness that threats of violence constitute a criminal offence and the agency must take action on behalf of staff (i.e. make a complaint to the police).
- Pro-actively ask about feelings of intimidation or anxiety so professionals feel this is an acceptable feeling.

- Remain focused on the child's welfare at all times

16.3. Managers should:

- Keep health and safety regularly on the agenda of team meetings.
- Ensure that health and safety is on all new employee inductions.
- Ensure that staff have confidence to speak about any concerns relating to families.
- Prioritise case supervisions as appropriate and necessary.
- Ensure they have a monitoring system for home visits and for informing the office when a visit is completed.
- Analyse team training needs and ensure everyone knows how to respond in an emergency.
- Ensure training is regularly updated.
- Empower staff to take charge of situations and have confidence in their actions.
- Pay attention to safe working when allocating workloads and strategic planning.
- Be aware of what is happening in their community and within their own staff teams.
- Deal with situations sensitively. Acknowledge the impact upon the individual.
- Ensure that files and computer records clearly indicate the risks to professionals and that mechanisms to alert other colleagues, both within their own agency and those relevant in other agencies to potential risks are present and are utilised by their staff.