

# Creating strength-based partnerships with families in Salford

**Reflective practice guidance to support professionals to deliver effective, strength-based partnerships in the context of safeguarding children, families, and communities in Salford.**



Updated June 2024

## Contents

<b>Introduction and Purpose</b>	3
<b>Consent from families to receive support and services</b>	4
<b>Using a Family Partnership Model to engage children, young people, and their families</b>	4
<b>Why do we need to build strong relationships with families?</b>	6
<b>Engagement, Voice and Building Trust</b>	7
<b>Partnerships with our children, young people, and families in Salford</b>	7
<b>Why families may find it difficult to work in partnership with professionals</b>	8
<b>Why practitioners may find building partnerships with families difficult.</b>	9
<b>Engagement and Professional Curiosity</b>	9
<b>How can we strengthen engagement with families?</b>	12
<b>Skills and qualities that support good engagement.</b>	13
<b>Trauma-Informed Practice</b>	14
<b>Identifying barriers to engagement</b>	16
<b>How do we align families alongside Engagement?</b>	17
<b>Strength focused language</b>	18
<b>Multi agency working.</b>	18
<b>APPENDICES</b>	21
<b>Use of language</b>	21
<b>Working Together to Safeguard Children 2023: Summary of Changes</b>	23
<b>Recording through the eyes of the family</b>	24
<b>Tips for recording</b>	25
<b>Supervision: A partnership approach</b>	26
<b>Practitioner safety and managing risk</b>	27
<b>Information Sharing</b>	27
<b>Key messages from children and families</b>	28
<b>Resources</b>	29
<b>Learning Diary</b>	30

## Introduction and Purpose

This guidance aims to provide practitioners and leaders with knowledge to recognise and assist with the effective engagement of children and families across all stages of support, through building and establishing strength-based partnerships.

The Salford Safeguarding Children Partnership has at its core one vision:

**‘All partners are committed to working together so that every child in Salford is safe, well and able to meet their full potential.’**

This is underpinned by the two key values and 6 six principles:

One vision	Two key values	Six principles
<p>All partners are committed to working together so that every child in Salford is safe, well and able to reach their full potential.</p>	<ol style="list-style-type: none"> <li>1. A child centred approach: for services to be effective they should be based on a clear understanding of the needs and views of children.</li> <li>2. Safeguarding is everyone’s responsibility: for services to be effective each citizen, practitioner and organisation should play their part.</li> </ol>	<ol style="list-style-type: none"> <li>1. Empowerment: People being supported and encouraged to make their own decisions and with informed consent.</li> <li>2. Prevention: It is better to take action before harm occurs.</li> <li>3. Proportionality: The least intrusive response appropriate to the risk presented.</li> <li>4. Protection: Support and representation for those in greatest need.</li> <li>5. Partnership: Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting safeguarding issue</li> <li>6. Accountability: Accountability and transparency in safeguarding practice.</li> </ol>

The guidance builds on research and evidence-based practice to support strength-based practice and is underpinned by [Working Together to Safeguard children 2023](#) guidance . The guidance sits alongside the [Support and Safeguarding in Salford: Helping families to thrive](#) guidance

The ‘Family Partnership Model’ is a relational practice model used across Salford Children’s Social Care and Early Help Services, it is used as an example of an approach that encourages practitioners to work alongside families, taking a strength and trauma informed approach. The aim is to invite partnership working to engage families and to guide change taking a **‘doing with’** rather than a ‘doing to’ approach.

The basis of the approach can be implemented by anyone working with children, young people, and their families, even if the Family Partnership Model is not your day-to-day approach. The model encourages practitioners to gain a better understanding of the lived experiences of families and children by seeing the world

through their lens, keeping the child(ren) at the forefront of all decision making and interventions.

[Working Together to Safeguard children 2023](#) identifies that ‘Successful outcomes for children depend on strong partnership working between parents/carers and the practitioners working with them. Practitioners should take a child centred approach to meeting the needs of the whole family.’

To be truly effective, this guidance must also be reflected in supervision processes, quality assurance systems and importantly modelled throughout the organisation particularly by managers and leaders. Quality assurance should be an active consideration of purpose, including the activities of practice, as well as considering the skill and experience of the worker involved

In addition to the information and resources provided, practitioners and managers are advised to reflect on their individual agency procedures and access further learning. A number of reflective questions have been embedded throughout this document that you should reflect upon as a practitioner and manager either individually, as part of supervision, as a group or agency.

## **Consent from families to receive support and services**

Consent should be gained where appropriate and inline with safeguarding procedures, with the aim to keep families fully informed through partnership working whilst ensuring the best interests of the child are at the heart of all decision making.

Where possible, share information with consent, and where possible, respect the wishes of those who do not consent to having their information shared. Under the GDPR and Data Protection Act 2018 you may share information without consent if, in your judgement, there is a lawful basis to do so, such as where safety may be at risk. You will need to base your judgement on the facts of the case. When you are sharing or requesting personal information from someone, be clear of the basis upon which you are doing so. Where you do not have consent, be mindful that an individual might not expect information to be shared.

Practitioners should follow their own internal policies and procedures in relation to consent alongside the [Support and Safeguarding in Salford](#) guidance and the [Working Together to Safeguard children 2023](#).

## **Using a Family Partnership Model to engage children, young people, and their families**

Building relationships is fundamental to developing positive partnerships with parents meaning that engagement is always part of everything we do. As practitioners we should review our partnership with families, if there are struggles in this relationship,

we should ask questions to understand what the issues are in the relationship and set goals for moving forward, these in turn will be reviewed to ensure progress and impact is being made.

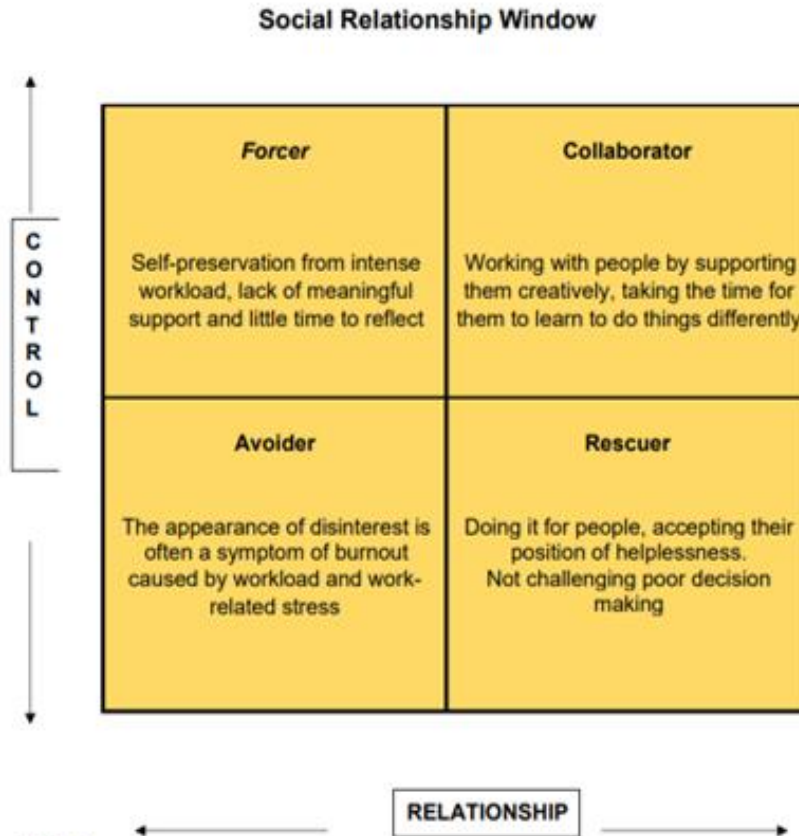
Building strong relationships is both a process and an outcome in supporting and safeguarding children, young people, and their families. It requires the effective and balanced use of helping skills and relational practice to accomplish the best outcomes for families.

This means that the family is on board with the plans and interventions, they have been actively involved in creating them, their voices have been heard and therefore they are more likely to sustain change.

**Reflection: What does a good partnership look like in your practice?**

- What does good involvement and/or engagement from children, parents and families look like in your setting?
- How effectively are you supporting parents to become involved and engaged in committing to ensure their child is safe, well, and able to reach their potential? How do you adopt a think family approach?
- What support and processes do you have available from your service and manager to enable the effective engagement of children and families.
- How are multi-agency partners involved in supporting the involvement and engagement of children, parents, and families?
- Are you confident in identifying, addressing, voicing concerns, challenging, escalating issues with engagement in your conversations with children, parents, managers, and other agencies informally and formally?

The Social Relationship window can be helpful when establishing relationships with parents and families:



*The relationship window: influenced and adapted from Vandering, D, (2016) and cited in Restorative Mediation 2021, training, and practice Manual by NETCARE.*

## Why do we need to build strong relationships with families?

*It is recognised....*

*“Protecting children from abuse is intrinsically complex and challenging work.*

*It requires great expertise in finding out what is happening in the intimate realm of family life.*

*It involves intruding into very private spaces to evaluate and make professional judgements about parenting, the development and wellbeing of children, and whether a child or infant is experiencing harm”.*

**Arthur Labinjo Hughes/Star Hobson Serious Case Reviews**

Building partnerships with families is what we do. We need to recognise that there will be little progress or sustained change without engaging families. From the first phone call to parents, we need to consider how we are building relationships with that person and how we motivate them to want to complete the interventions, put them into practice and keep the child at the centre of the plan.

## Engagement, Voice and Building Trust

There is also an [engagement, voice and building trust](#) manual that accompanies this document that has useful hints and tips regarding engaging families.

## Partnerships with our children, young people, and families in Salford

Every aspect of intervention with a family is underpinned by Partnership and relationship. This is the building blocks of engaging and sustaining. We know that being an expert can create a power imbalance and families don't take ownership of change. Working in partnership allows all voices to be heard and for professionals and families to work together.

### Through the eyes of the family:

They are listened to, and their voice is important.

They feel part of a team.

There is empathy for their situation.

There is no frustration when they have struggles but a return to the process and plans reviewed.

### Golden rules:

Actively work together for a shared common purpose

Show Mutual respect.

Think diversity and inclusion – be culturally conscious!

Communicate with each other.

Respect each other's insights, priorities, goals, ideas, differences, and experiences.

Value each other's knowledge, strengths, and expertise, match them and bring them together.

Jointly agree aims and outcomes in the Helping process and share responsibility for fulfilling the task.

Negotiate decisions and resolve disagreements and conflict as they arise.

### **Best use**

Don't forget relationship and partnership, this method gets results.

Sometimes it may seem easier and quicker to 'do for' but families will not be as engaged in the process and changes are unlikely to be sustained.

Identify early if it no longer feels like a partnership and act quickly by reviewing.

### **Why families may find it difficult to work in partnership with professionals**

Effective partnerships are crucial to work with all families but especially with families with multiple and complex needs that may make engagement challenging. We should have a level of professional curiosity to try and understand their needs:

- previous negative experiences of agencies
- experience of intervention as a young person
- not understanding professionals' concerns
- cultural differences
- genuine fear – will my children be removed?
- lack of communication from professionals
- do not want to have their privacy invaded.
- have something to hide.
- there may be some unidentified needs for example, mental health issues or learning disability.
- families may struggle to engage with services because the wider problems they face are not considered. For example, appointments might not be kept due to ongoing circumstances which service providers are unaware of.
- a chaotic lifestyle (for example, substance misuse, mental health issues/needs, lack of time management skills) may have previously led to missed appointments and being discharged prematurely from a service, leaving the family member feeling demotivated to try again.
- if a family feels inadequate, stressed, or threatened by the service being offered or cannot see its practical benefits they are more likely to avoid participating.



- not understanding what is expected and why.
- resentment of staff changes.
- fear of oppressive judgements (particularly for disabled or substance misusing parents).
- fear of stigmatisation.
- having nothing to lose if children have already been removed.
- sometimes when families are most in need of assistance, they do not feel comfortable seeking help.
- a difference of opinion between parents and professionals around the presenting needs of the family.

### **Why practitioners may find building partnerships with families difficult.**

- Professionals not having the necessary skills needed to address families' barriers.
- Practitioners' confidence and experience
- professionals misunderstanding the practical and emotional difficulties that impact on people's ability to engage.
- lack of time to build meaningful, trusting relationships with all family members.
- Professionals' frame of reference (values, beliefs and attitudes may be different to those of the family and lead to value clashes)
- Working in isolation can be overwhelming and impact on successful engagement.
- Language and Cultural barriers
- Pressure from the service to engage and make changes within a family quickly.
- Professionals not taking responsibility for engagement issues and using broad terms such as Disguised compliance as a reason to not continue to work on engagement.

### **Engagement and Professional Curiosity**

As Practitioners we all carry a level of unconscious bias and sometimes this can be because of the work we do, or it can be determined by how we interpret family life due to our own culture and background or even previous involvement – this can impact on how we interpret situations. It is important that we take time to reflect on our own constructs throughout work with families and within supervision so that we do not fall into the danger of making assumptions about the families we work with.

When working with children, young people, and families we must apply a level of professional curiosity when collating and analysing information to wobble unhealthy views (constructs) held by families. In particular when these views are impacting on their own functioning or their parenting. We can do this by asking open questions to understand the origin of these views to help guide change – where does that view originate from? What was your parenting experience like? How much of that influences your parenting? Check this out with other agencies to ensure defensible decision making.

Practitioners must remain curious during all levels of engagement with a family.

### **What is professional curiosity?**

**Professional curiosity** is the capacity and communication skill to explore and understand what is happening within a family rather than making assumptions or accepting things at face value.

This has been described as the need for practitioners to practice **'respectful uncertainty'** – applying critical evaluation to any information they receive and maintaining an open mind. In safeguarding the term 'safe uncertainty' is used to describe an approach which is focused on safety but that considers changing information, different perspectives and acknowledges that certainty may not be achievable.

### **Professional curiosity can require practitioners to:**

- think 'outside the box,' beyond their usual professional role, and consider families' circumstances holistically.
- show a real willingness to engage with children, young people and their families or carers to understand lived experiences.

Practitioners will often encounter a child, young person, adult, or their family when they are in crisis or vulnerable to harm. These interactions present crucial opportunities for protection. Responding to these opportunities requires the ability to recognise (or see the signs of) vulnerabilities and potential or actual risks of harm, maintaining an open stance of professional curiosity (or enquiring deeper), and understanding one's own responsibility and knowing how to act.

Children and young people rarely disclose information about abuse and neglect directly to practitioners. If they do, it will often be through unusual behaviour or comments. This makes identifying abuse and neglect difficult for professionals across agencies. We know that it is better to help as early as possible, before issues get worse. That means that all agencies and practitioners need to work together – the first step is to be professionally curious.

Curious professionals will spend time **engaging** with families on visits to build a strong partnership. They will know that talk, play and touch can all be important to

observe and consider. Do not presume you know what is happening in the family home – ask questions and seek clarity if you are not certain. Do not be afraid to ask questions of families and do so in an open way so they know that you are asking to keep the child or adult safe, not to judge or criticise. Be open to the unexpected and incorporate information that does not support your initial assumptions into your assessment of what life is like for the child or adult in the family.

### **Why do we need professional curiosity?**

Safeguarding is everyone's responsibility and where practitioners are concerned each agency has a role to play in safeguarding children and young people.

The following factors highlight the need for anyone working with children and young people to strive to improve professional curiosity and professional courage:

- the views and feelings of children and young people are difficult to ascertain.
- practitioners do not always listen to adults who tried to speak on behalf of a child or young person and who may have valuable information to contribute.
- parents or carers can easily prevent practitioners from seeing and listening to a child or another adult.
- practitioners should be curious when listening to family's accounts, it may be that there is more information to support understanding of the real events.
- effective multi-agency work needs to be coordinated.
- the importance of triangulation of information
- challenging parents or carers (and colleagues) requires expertise, confidence, time, and a considerable amount of emotional energy.

Information taken from NYSCP and SSCP [7mb-professional-curiosity](#)

### **Reflection: Questions that you might want to reflect upon to inform practice**

- How do you work with other agencies to build a full picture of what is happening in a child's life?
- What behavioural biases, e.g., confirmation bias, might impact upon your information sharing and seeking practice?
- Do you consistently speak to and listen to the views of family and friends who know a child well? What barriers can get in the way of you doing this?
- What assumptions might you hold relating to culture, ethnicity, gender, and sexuality? In what ways might this affect your practice?
- What aspects of working with families whose engagement is reluctant and sporadic do you feel more/less confident with? What do you consider to be typical signs of parental avoidance?

- What opportunities do you have – formally or informally – to challenge decisions within your organisation and other agencies and to consider different professionals' perspectives?

## How can we strengthen engagement with families?

Inviting families to establish a partnership can be identified in the following stages:

1. The initial process of the partnership is to introduce yourself, share your role and responsibilities, discuss the referral, and allow parents to explain in their own words what is going on and the type of help they think they need. Try and establish if there are any cognitive/learning difficulties that may hinder equal participation in the intervention. Also, look at who else can be part of the partnership. Set quick wins from the outset (small goals) to encourage and motivate parents to build up to achieving the bigger goal/s.
2. Support the child(ren), young person and their family to understand the benefits, goals, and expectations of the service and to work together and develop a (SMART) plan, setting out key expectations between parents and families which is the premise of a strong partnership and in the best interests of the child(ren).

Key to engagement is Professionals working in a complimentary way with families using their strengths and expertise, as facilitators to influence change through building on strengths. This supports parents and carers to make the agreed changes needed for them to provide safe and healthy care for their child(ren).

### **Evidence of good engagement**

Cunningham and Henggerler 1999 studied the typical signs of engagement and found that when someone was engaged in a service/ therapy that there was evidence of the following.

- **High rates of attendance at sessions**
- **Completion of homework or tasks**

Providing daily or weekly homework provides and good opportunity to track engagement.

- **Emotional involvement in sessions**

When parents are involved, energetic and actively participating in sessions.

- **Progress is being made towards goals.**

Families are engaged in the process.

Being aware of these signs mean we can be responsive to engagement. The quicker we respond to potential engagement issues the more likely it is that we can get parents/families to make positive change.

### **Skills and qualities that support good engagement.**

- Parents (Children or Young People) and practitioners communicate clearly and openly with each other.
- Parents (Children or Young People) are constructively engaged in the process.
- Parent (Children or Young People) and practitioner use their expertise in complementary ways.
- Shared decisions have been made about the partnership and process.
- The partnership is trusting and respectful.
- The parents (Children or Young People) consider the practitioner and partnership to be supportive, connected, facilitative, influential, and purposeful.
- Avoid assumptions – check out information with families.
- Apply professional curiosity.
- Understand the emotional and practical challenges that may impact on building relationships and talk about these openly.
- Ensure the child(ren), young person and family have a voice to be able to see the world through their lens and understand their lived experience.

- Utilise the **LESS** skills:

**Listen** – active listening, ensure you have heard.

**Empathise** – empathise and appreciated.

**Summarise** - parent experiences and prioritises.

**Share** – check out that you have heard and understood the story just as the parent, child or young person has described their situation.

## Trauma-Informed Practice

### Taking a trauma informed lens - reason for non-engagement

Trauma can be experienced at any time of life, by any person. Adverse Childhood Experiences (ACEs) may be considered to be traumatic experiences that specifically occur in childhood. Trauma in adulthood may include experiences of domestic abuse, rape, assault, traffic accidents, or other sudden, unexpected single event or short-term events. Trauma may also be “complex;” where trauma and abuse are experienced interpersonally, persists over time and is difficult to escape from.

Complex trauma is often experienced in the context of close relationships (e.g., childhood abuse, domestic abuse) but can also be experienced in the contexts of war, torture, or human trafficking. How people are affected by trauma they experience depends on many different factors including what their life and relationships were like before the trauma happened, how people responded to them during and after the trauma, their own personality, strengths and resources, their other life experiences, and the cultural context in which they live their lives.

Trauma is a term for a wider set of experiences or events that can happen at any time of life and includes some of the adversities in childhood known as Adverse Childhood Experience's. Trauma describes the psychological impact of experiencing or witnessing a physically or emotionally harmful or life-threatening event. It may be a single incident or prolonged or repeating experiences. Trauma can affect people long after the event(s), by causing anxiety, depression, or Post Traumatic Stress Disorder (PTSD). It may affect the way people relate to others or deal with day-to-day stresses. Long term activation of stress responses can also have effects on physical health. How someone is affected by a traumatic event depends on the trauma, their support network, their personality, and previous life experiences

### **Trauma Informed Practice is a way of working that recognises:**

- that anyone using a service may have experienced trauma or ACEs
- that people with a history of trauma may be less likely to engage with services.
- the importance of relationships in preventing and recovering from the effects of trauma and ACEs. A trauma-informed workforce understands that trauma may impact the way families cope with stresses or interact with staff and others. They ask, “What’s happened to you?” rather than “What’s wrong with you?” They incorporate this understanding of trauma into all policies and areas of practice, and they actively try to prevent re-traumatisation.

### **Trauma-Informed Practice aims to:**

- Create physically and emotionally safe spaces.
- Work transparently and establish trust.
- Give people choice and control over their care.
- Help people to heal and develop healthy coping strategies.
- Work in collaboration with service-users, respecting their experience and co-producing policies and materials wherever possible.
- Create a culture of compassion within your teams and the organisation.

### **Understanding Adverse Childhood Experiences (ACE’s) when working in Partnership with families**

Adverse Childhood Experiences (ACEs) are stressful or traumatic events that happen in childhood. They can be things that affect a child/young person directly (such as abuse or neglect) or indirectly through the environment they live in (such as living with a parent/caregiver who has mental illness, where there is domestic abuse, or where parents have divorced or separated). ACEs can be single events or long-term or repeated experiences.

ACEs are common; about half of all people will have experienced 1 ACE, and about 1 in 10 will have experienced 4 or more. Research has shown that experiencing 4 or more ACEs can increase the chances of having poor physical or mental health, smoking, or using drugs or alcohol, or being involved in crime as an adult. A lot of people do not develop problems despite having ACEs. Things that improve the chances of staying well despite experiencing ACEs include relationships with trusted adults and physical activity in childhood, and community engagement and gaining and using skills in adulthood. Many organisations are trying to be more aware of the

impact of ACEs, how to prevent them and how to help people who have had them to live well.

## **Engaging and working with families experiencing Mental Health -Think Child, Think Adult, Think Family**

Despite differences in the laws and policies that shape how we safeguard children and how we safeguard adults the overarching objective is to enable children, young people, and their families to live a life free from abuse or neglect. This cannot be achieved by any single agency. Every organisation and person who comes into contact with a child or adult has a responsibility and a role to play to help keep children and adults safe. Further information is available on [Think Child, Think Adult, Think Family Guidance \(Oct 2023\)](#)

The [Think Child Guidance 2023](#) is also available on working with a parent or carer that experiences poor emotional and mental health along the mental health continuum. The purpose of the Think CHILD tool is to stimulate family and professional curiosity regarding the child's lived experience.

## **Identifying barriers to engagement**

It is important to consider if there is a problem with engagement at the earliest opportunity. If it is left too long, it will be more difficult to bring parents/family back on board.

You may want to consider the following drivers for low/lost engagement.

### **What is engagement?**

- A family agrees to meet with you, they let you in and keep their appointments.
- They like you enough or trust you enough to give you a chance to help them.

### **What are the barriers to engagement?**

- Families we work with may have bad experiences of professionals.
- They may never have seen change and feel helpless and hopeless.
- We might be one of 10 professionals in their lives, and they aren't so pleased about another one.
- They may be afraid of change or feel the task is too big.
- They don't understand why we are meeting with them.
- They don't want to be told what to do.
- As practitioners we don't always appreciate what a big step it is for someone to let us in their home. We accept non-engagement and don't try to understand the barriers.



## How do we engage families?

- If they aren't meeting with us, then we need to explore why. Discuss with others that know the family and find out other ways to engage or wobble their constructs.
- Always consider what you can do differently.
- Work in a trauma informed way. Explore the impact of their experiences.
- Be flexible. If they need to have somewhere met them near that place, offer alternative time and venues.
- Recognise promptly that engagement may be slipping. Query with yourself after a first missed appointment and query with them after the second 'sorry to have missed you, is everything ok? Can I do anything differently as I am worried, we haven't met?'
- Use quick wins as quick as possible so they get a taste of positive change which will be motivating for them.
- Keep the strength focus. Identify what they do well as a family or an individual. This could be 'things are tough, but you keep going, keep meeting with me!' You identify strengths to them as you speak to them, feedback what you hear 'your child was angry with you, and you still said good night to them' that shows how much you still love your child and that your relationship is important.
- Be realistic, don't offer things that won't happen. Instead of working with me will make everything super, the realistic version is 'we can make positive changes by working together, I can't promise tidy bedroom, but we can support you to feel more confident dealing with your child.'

## How do we align families alongside Engagement?

Always be aware that you may have engagement, but do you have alignment? Alignment means that the Family believe in what you are doing, they are an active and responsive in the partnership. They are hopeful for change and understand that they are part of the process. Without alignment you may see a family for every session, but you will not see the change needed.

### What is alignment?

When Parents are family agree with the goals or intervention created.

When they are open and honest about what they can or can't do.

When goals created are what they need and created with an understanding of their ability and skills

**When nothing changes.....**

- Sometimes people call this **disguised compliance** but really it means that the family/ parent isn't aligned with what you are doing.
- We need to wonder why? Are there **constructs or barriers that we don't understand** that makes this hard for this parent. They may not be able to get their child to school because it causes arguments in the home and this impacts on their relationship. They agree in the moment with plans, but the reality is that it's too hard or they don't have the skills.
- They may not have the buy in as they have just agreed rather than say what the real issue is.
- It is also worth considering if there is something you can do differently as a practitioner. Have you missed something, not understood something?
- If we remain strength focused, we recognise an alignment issue means we can explore barriers with a family and gain understanding of what makes it hard for them. We can wobble constructs and create change.
- Calling it disguised compliance makes it feel that what they are doing is purposeful and the family are stuck. This can make everyone become Helpless and hopeless about the family and believe change cannot happen.

## Strength focused language

Think about the impact of language. We often say things as professionals without always considering the meaning or the impact of the term. We need to use more strength focused language. When we use critical language, we need up to five positive affirmations to balance the impact (Gottman, 1994). Due to the impact of critical language we need to be conscious and take responsibility for what we say and how we say it.

## Multi agency working.

In the same way we work in partnership with families we need to model the same practice with partner agencies, to protect children. This depends on initiative-taking engagement, joint responsibility, and accountability at all times.

There needs to be clear agreements/contacting, between all agencies and with our families detailing each professional's role and the tasks to be undertaken by them.

Full participation at family action meetings, core group meetings and at child protection conferences with all agencies owning the concerns for the child.

A strength-based partnership with a family includes being able to share real concerns as and when needed. We must be open and honest with families from

the outset that where we have a safeguarding concern, we may need to share this. This should be the same for all partners and agencies involved.

Recurrent messages emerging from Serious Case Reviews reinforce a perspective that a lack of sufficient curiosity had contributed to abuse going undetected, inferring that if professionals had been *'more curious,'* this may have unearthed information that would have prevented harm, as illustrated below.

### In the case of Baby F

***'There was a consistent lack of professional curiosity and challenge to both parents and other professionals, this contributed to poor assessment, lack of recognition of risk/vulnerability and subsequently poor ineffective management.'***

Seek consent to speak to the professional network, serious case reviews repeatedly find that had all the information held by different agencies been collated it would have led to a much clearer picture of the needs and strengths to the child.

### Learning from Star Hobson Serious Case Review

- **Lack of timely and appropriate information sharing**, for example, photographs of bruising to Arthur were not shared with the MASH; and **limited information seeking**, for example, concerns raised by Arthur and Star's family members were not unpicked.
- **Evidence was not pieced together and considered in the round** e.g., for Star, each referral was treated as a different episode and the evidence was not looked at altogether.
- **Understanding what the child's daily life is like, where this might not be straightforward** with both Arthur and Star there was limited direct work. Additionally, the histories of those involved in their lives, e.g., Frankie Smith and Savannah Brockhill, were not looked into sufficiently.
- **Listening to the views of the wider family and those who know the child well** – in Arthur and Star's stories a significant gap was the failure to talk to and listen to wider family members.
- **Appropriate response to domestic abuse** – the impact of domestic abuse on Arthur and Star was not explored in depth; concerns about domestic abuse towards Star's mother were considered episodically and not investigated sufficiently; information about Emma Tustin's history of domestic abuse was not triangulated between agencies.
- **Working with diverse communities** – being culturally conscious. Not making assumptions and biases relating to culture, ethnicity, gender, and

sexuality. Lack of awareness around birth parent and her partners diverse relationship affected how practitioners understood Arthur and Star's daily experiences and risks to their safety.

- **Critical thinking and challenge** – there were missed opportunities for critical thinking and challenge within and between agencies and to consider information altogether e.g., Strategy Meetings were not held prior to the home visit to see Arthur and before Star's Child Protection Medical

Further information can be found in the [Working together to Safeguard Children' Statutory Guidance 2023](#) to support and strengthen multi agency engagement and practice.

Salford SCP

# APPENDICES

## Use of language

### Language Traps

#### **I'm Old School, I just say it as its is'**

Can really mean anything but sometimes means that it is ok to use critical language and it can feel adversarial and blaming. This approach doesn't challenge constructs but can embed the issue more and impact engagement. 'Be curious not furious' (Karen Treisman).

#### **Manipulative**

Karen Treisman stated, 'we are all manipulative,' manipulation is normal however we are critical of those that are simply acting in human way.

#### **Disguised compliance**

Often used to describe a parent who is not doing as the practitioner has asked. The term disguised compliance makes it feel that the parents are or aren't doing is purposeful and the family don't want change and are hiding this. This can make everyone become helpless and hopeless about the family and believe change cannot happen.

Disguised compliance is critical of the family and potentially stops us as practitioners taking responsibility for lack of engagement. We need to wonder why? Are there **constructs or barriers that we don't understand** that makes this hard for this parent. For example, the parents may not be able to get their child to school because it causes arguments in the home and this impacts on their relationship. They agree in the moment with plans, but the reality is that it's too hard or they don't have the skills to carry out what the practitioner has planned. Remember 'brains in pain cannot learn' (Karen Treisman). Many parents that we work with will have experienced trauma so what may seem simple to us could be impossible to the parents we work with.

**Situation**

Professional language has been under discussion and review with commonly used terms such as 'contact' 'respite' and 'LAC' under challenge from young people, families and within national research.

*"Professionals need to understand that not everyone speaks the same language as them, and for children it can feel complex and overwhelming, and sometimes even embarrassing, as there is a lot of stigma attached to some of the terms used by professionals."* TACT care experienced young person.

As we move to practice that is trauma informed we need to review the language we use and the impact it has on the young people we care about and for.

**Background**

Professional language is overly complicated for children and families, even our student social workers need a 'jargon buster' to understand some of the terminology and legal definitions. This makes it difficult for children and families working with children's services and they also report that this terminology is emotionally cold and insensitive. Given our Salford values and asset / relational approaches to working with children and families it is critical to reflect on the words we use and the way these words make children feel.

*" I was 6 when I became 'LAC' , I wondered what it was that I was lacking and thought whatever it was I was lacking, missing, must be why I couldn't live with my mum anymore"* Voice of Young People in Care (VOYPIC)

Please see young people sharing their views in this short (2mins) film clip:

<https://www.bbc.co.uk/news/av/uk-northern-ireland-48466031>

**Assessment**

Young people and families in Salford have told us they want professionals to use language that doesn't make children stand out in the wrong way, *"no-one in my class would pick up on it if I said family time but saying 'contact' makes it stand out that I'm different"*.

The Language that Cares project worked with 15 local authorities to understand the negative impact of professional language on children and families. This resulted in a co-produced dictionary of language that children recommend workers use.

[https://www.tactcare.org.uk/content/uploads/2019/03/TACT-Language-that-cares-2019\\_online.pdf](https://www.tactcare.org.uk/content/uploads/2019/03/TACT-Language-that-cares-2019_online.pdf)

*"In general the words chosen by the young people in the new dictionary are helpful but at the same time they could make it difficult for professionals, like social workers, who need to use professional language in their work. However, I believe social workers and other care professionals should leave the big words for other professionals who understand them, and adopt the words provided in the new dictionary when talking to both young people and children and make the language they use around them more accessible, clear and sensitive."* TACT care experienced young person

## Working Together to Safeguard Children 2023: Summary of Changes

### Chapter 1: A Shared Responsibility

A new chapter bringing together new and existing guidance to emphasise that successful outcomes for children depend on strong multi-agency partnership working across the whole system of help, support and protection including effective work from all agencies with parents, carers, and families. This includes principles for working with parents and carers to centre the importance of building positive, trusting, and co-operative relationships to deliver tailored support to families, and expectations for multi-agency working that apply to all individuals, agencies and organisations working with children and their families, across a range of roles and activities.

### Chapter 2: Multi-Agency Safeguarding Arrangements

Substantive changes to strengthen how local multi-agency safeguarding arrangements (local authorities, integrated care boards and the police) work to safeguard and protect children locally, including with relevant agencies. Changes include clarifying the roles and responsibilities of safeguarding partners, distinguishing between Lead Safeguarding Partners (LSPs) and Delegated Safeguarding Partners (DSPs), introducing a partnership chair role, emphasising the role of education in safeguarding arrangements and strengthening accountability by clarifying expectations for information-sharing, independent scrutiny, funding, and reporting. Agencies are encouraged to consider the importance of voluntary, charity and social enterprise (VCSE) organisations within arrangements to improve oversight, engagement, and consistency. This chapter also highlights the importance of considering naming and engaging voluntary, charity, social enterprise organisations and sports clubs in published local arrangements if they are not already. No statutory roles or functions have been removed from the guidance.

### Professionals in the multi-agency working arena should consider.

- You are part of a team, and it is important that we are mindful of roles both individually and as a wider team around the family.
- Discussing with the Chair the best ways to maintaining engagement and families in difficult circumstances – preparing partners how to respond to families that may feel threatened or triggered with information shared about them. This may prevent parents from dis-engaging with professionals in the meeting.
- Convening a meeting of the agencies involved to share concerns, information and strategies and draw up an effective work plan that clearly shares decision-making and responsibilities. All goals should be co-produced and agreed with parents, so they are a part of all wider conversations. If such meetings are held, there must always be an explicit plan made of what, how and when to share what has gone on with the family. Confidential discussions are unlikely to remain secret and there are legal obligations to consider in any event (e.g., *Data Protection Act 1998*)

- Think creatively about ways of working jointly with multi-agencies to discuss de-escalation plans to manage risk as sensitively as possible. There may be a professional who has a good relationship.
- Joint visits with police, colleagues, or professionals from other agencies as and when needed.
- Debriefing with other agencies when professionals have experienced a frightening event.
- Triangulate information and check out with each other to build a bigger picture to support and strengthen engagement.

## Recording through the eyes of the family

A family may have had bad experiences of what has been written down about their family in the past

This is their personal information, and they may worry about where it is kept and how it will be used.

How you record their personal information may impact future engagement from the family.

### Golden rules:

- Write up information on general notes the same day or the next working day (\*practice standard is no later than 5 working days after the activity)
- Recording is not admin ... it is a core, skilled activity and is central to the role ... it is your opportunity to reflect and analyse.
- Other people are relying on the timeliness and accuracy of your recording, including: multi agency teams, new referrals team such as Bridge, emergency out of hours team, managers, and auditors, and most importantly children and families.
- When going on leave, if you have a case that you are concerned about, it is useful for you to put a clear summary of the case on general notes, setting out steps you've taken to address risk, including any key contact numbers and names and what your planned actions are on your return from leave.
- You should make sure your recording is clear enough and detailed enough so that if someone who has never met the family or worked the case could understand why you are involved, what you have done, who to contact and how to contact them and what you are planning to do next.
- Parents and children can and do access their records now and in the future.
- A family should know what you are recording and why (GDPR/Privacy notice



- Be mindful to record in a way that supports the child to only tell their story once. We should be able to read a child's case file and understand the child's story and have a sense of their unique needs, vulnerabilities, strengths, and resilience.
- Decisions about how to support a child or family, such as whether to end involvement or to change the way support is offered, will be based on the evidence held in recording.
- Where the views or wishes cannot be accommodated this should be stated and the reason

## Tips for recording

- Include the child throughout the recording.
- Imagine you are writing to the child, who will one day see the record. For example, "Dear Millie, today I visited you at home with your mum..."
- Make records purposeful and analytical.
- Be specific about the individual child's needs, wishes and views - linked to issues, circumstances, needs, goals, and outcomes.
- Record exactly what the child or young person says.
- Describe the ways you have gathered the infant, child/young person's view, for example by using Mind of My Own (MOMO), through direct conversation, play, observation, understanding of research about children in similar circumstances, etc.)
- Re-visit a child's wishes if they remain constant as circumstances, risks and safety may change and evolve.
- Make sure records reflect the whole of the child's story and why decisions were made.
- Include different views and opinions.
- Ensure manager advice is recorded when taken.
- Make sure recording is balanced and meaningful.
- Avoid jargon and vague language.
- Do not record every piece of communication.
- Do not record meaningless, copy, and paste emails with people, instead capture the key points on a general note in a professional way e.g., email contact made with Julie Smith, health visitor.

## Supervision: A partnership approach

### Through the eyes of the family:

- A family may be aware that you sit down with other people to discuss them, or they may not.
- They may feel anxious about who else you speak with and why. This may impact their engagement and alignment with you.
- They may perfectly understand the need for this to happen.

### Golden rules:

- Be open with families and let them know that you do discuss progress with your work with your manager.
- Always consider if there is a possible engagement concern that may need an immediate response.
- Always prepare the case discussion.
- It is your responsibility to have reflected on progress with the case and to bring your analysis and questions arising to explore further with your manager.
- You must make your manager aware of risks and how you have responded to these.
- Your manager should explore static, dynamic, and resilient risk factors with you. Together you should reflect on the strengths and needs to secure good levels of engagement.
- Engagement should be queried in every case discussion by your supervisor.
- Engagement strategies should be explored.
- Peer reflective supervision should be offered to provide case discussion and strengthen practice.
- Supervision should also explore the barriers from multi-agencies and partners.
- Managers should also prepare for supervision, and it is good practice for them to read the case discussion (this relies on you preparing ahead of time and in time for them to access and read).

- Your wider well-being supervision is important and should align with your case work discussion. How you feel, your health, the skills and knowledge you have, the plans you have in place to address areas of practice you need to improve on all impact on the quality of your work with a family.
- Supervision, group supervision, observations, audits, self-assessment using competency framework, feedback from families all help to improve your practice and inform managers on key practice development needs across the service.

## Practitioner safety and managing risk

Safety and managing risk is the Professional's responsibility.

Using relational practice when working with families increases engagement and therefore reduces likelihood of relationship breakdown. However, there will be times when families' experiences may make this more likely and, in these situations, practitioners need to de-escalate and consider safety.

Lone working policies should be read regularly and implemented.

Professionals have a responsibility to plan for their own safety, just as the agency has the responsibility for trying to ensure their safety. Professionals should consult with their line manager to draw 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). Agencies should ensure that staff and managers are aware of where further advice can be found.

If threats and violence have become a significant issue for a professional, the line manager should consider how the work could safely be progressed, document their decision and the reasons for it.

## Information Sharing

For further information about information sharing please refer to pages 18 – 22

[https://assets.publishing.service.gov.uk/media/65803fe31c0c2a000d18cf40/Working\\_together\\_to\\_safeguard\\_children\\_2023\\_-\\_statutory\\_guidance.pdf](https://assets.publishing.service.gov.uk/media/65803fe31c0c2a000d18cf40/Working_together_to_safeguard_children_2023_-_statutory_guidance.pdf)

## Key messages from children and families



The Salford Safeguarding Partnership (SSCP) works with a wide range of partners and is committed to promoting engagement and participation from a wide range of professionals and those that live in Salford. We believe that children, young people, families, carers, and local communities in Salford need to be listened to so that we can understand what matters and can make a positive difference to people living in Salford.

### The Salford Standards for Listening to Children, Young People and Families.

We asked you what was important when working with services and we have created 'Salford Standards' based on what you said.

We are asking all workers to adopt these standards when working with families.

I will be respectful, honest and reliable with the children, young people, parents and carers I work with.

“ Respect: being treated well. ”

I will listen to what is important to you - your thoughts, feelings and wishes.

“ Listen and show you're listening. ”

I won't ask you what you have already told other workers unless I need to understand more that I can't find out by reading the information that I already have.

“ I feel like a newborn baby having to start again repeating myself... if your worker changes they should know basic information. ”

I will listen to your views, wishes and feelings and make sure that this is central to everything I do.

“ Being heard - listened to ”

I'll check back with you to make sure I have understood what you said.

“ It's good to be listened to, and when they double check, I know they have heard what I said. ”

I will make sure that your views and voice are loud and clear in anything I write

“ Talk to us, take us seriously. ”

I will always introduce myself and explain my purpose in a way that you can understand - I am here to help keep you safe and well and the best you can be.

“ When I met my current worker she was bubbly, hopeful, and approachable and I knew that she was interested in me and my life. ”

I will let you know if what you tell me needs to be shared with anyone else.

“ Trust is really important, when it's broken I won't share stuff with that person again. ”

What you communicate to me will be shown in your records and assessments through direct quotes (what you say) and observations (what I see) and reflect your wishes and feelings.

“ Better understanding through sharing what you already know. ”

Salford Safeguarding Children Partnership

[Salford Standards for listening to families | Salford Safeguarding Children Partnership](#)

[Listeninghub | Salford Safeguarding Children Partnership](#)

## Resources

Having knowledge and understanding of when and where to go for advice, targeted service, and support where appropriate can enhance successful engagement and outcomes by identifying areas where help or protection is needed.

This guidance provides an overview and should be read in conjunction with legislative frameworks, specific protocols, and guidance relevant to the circumstances of supporting and safeguarding children, adults and their families alongside own agencies policies and procedures.

Useful links:

- [SSCP Policies and procedures](#) including [SSCP Pathway Guidance](#) and
- [SSCP Support and Safeguarding Guidance](#)
- [SSCP Cultural Consciousness Guidance](#)
- [SSCP Profession Challenge and Escalation](#) including the [7-minute briefing](#)
- [Hard to engage families – SSCP advice](#)
- [Think Child – Think Adult –Think Family Guidance](#)
- [Professional Curiosity 7mb](#)
- [Greater Manchester Safeguarding Children Procedures Manual](#) including
  - [5.3.4 Dealing with Persistent Non-Engagement with Services by Uncooperative Families \(proceduresonline.com\)](#)
  - [Working with Families Who Display Disguised Compliance policy\\_briefing\\_No-197.pdf \(proceduresonline.com\)](#)
- [Learning for the future: final analysis of serious case reviews, 2017 to 2019 \(publishing.service.gov.uk\)](#)
- [Home | Salford Safeguarding Adults Board](#) and [SSAB Multi-agency Policy and Procedures](#)
- [Working together to safeguard children 2023 - statutory framework.pdf](#)
- [Parental mental health and the impact on children: Think CHILD](#)

---

If there are any comments or suggested changes required in this guidance, please contact Sharn Begum [SSCP@salford.gov.uk](mailto:SSCP@salford.gov.uk)

## Annex - Learning Diary

Record here, how you will enhance and embed the learning into your practice. Consider sharing your reflections with your team and manager.

Significant Learning Points	Reflective questions	Actions I am going take