

West Dunbartonshire Child Protection Committee



Working With Uncooperative or Hostile Families:

Multi-Agency Practice Guidance for Staff

Updated August 2019

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INTRODUCTION

All children and adults using services provided by West Dunbartonshire Children and Families and Adult Services have a right to be treated with respect and professionalism. They also have a right to have their views listened to and taken into account in matters affecting them and their family.

However, sometimes for a variety of reasons, staff will come into contact with families whose engagement or compliance with services is reluctant, resistant or openly hostile. On a rare occasion, this hostility may even be displayed in a way that is intimidating, threatening or even violent towards the staff member, as occurred in Declan Hainey case (2012) Renfrewshire Council.

Violence to staff includes not only physical attacks, but also threats and fear of violence, verbal abuse, racial, religious and sexual harassment, or humiliating behaviour likely to undermine self-confidence and cause employees to suffer stress related disorders.

Legislation governs the responsibility of all employers to ensure the safety and wellbeing of their employees and the importance of including appropriate arrangements for dealing with violence in the workplace as an integral part of their Health and Safety Policy.

If problems do arise, it is necessary that staff immediately report these to their manager in order that an investigation into the incident can be undertaken and strategies put in place to prevent any further recurrence.

PURPOSE OF THIS GUIDANCE

West Dunbartonshire Health and Social Care Partnership (HSCP) has produced this guidance in recognition that professionals across agencies may be involved in trying to gather accurate information to assist assessment about a child at risk, at a point where emotions are running high and a parent or carer may be overwhelmed by feelings of anxiety, anger, depression, guilt or shame.

There may be range of other reasons why families or carers may be unwilling to cooperate with professionals because they may:

- Feel their privacy is being invaded;
- Have something to hide;
- Refuse to believe there is a problem;
- Lack understanding about what is being expected of them;
- Resent professional intervention/ dislike or fear of authority figures;
- Have had poor previous experience of professional involvement;
- Fear they will be judged as poor parent/ carer, or that their child or / family member will be taken away.

DEFINITIONS

Occasionally agencies will come into contact with individuals or families whose engagement with services is reluctant, resistant or openly hostile. In some cases staff can experience intimidation, abuse, threats or actual harm.

For the purposes of this guidance the following definitions have been agreed:

Uncooperative, non engaging or disguised compliance

This term is used in circumstances where parents or carers are using avoidance tactics, missing appointments and meetings, cutting visits short, refusing access to the home, child or adult at risk etc. Disguised compliance includes situations whereby a parent or carer appears to be complying with the plan to protect or meet the needs of the child or adult at risk but either through direct harm (e.g. failure to attend health appointments) or indirectly (e.g. through drift) is actively sabotaging attempts to effect change. This can mean the child or adult at risk remains unseen by agencies.

Hostile parents or carers

This term is used to include parents or carers who are, or have been violent, physically or verbally. The term also extends to include threatening or intimidating behaviours, or emotional aggression. Unjustified complaints against individual staff can also be used as a means of intimidation.

In all cases workers must be aware that some behaviours of adults can be misinterpreted. For example what may appear as uncooperative or hostile behaviour may be designed to mask a hidden issue within the family such as domestic violence, drug or alcohol misuse.

The Unseen Child

This term is used to define the unseen child as a child who may fall into any of these categories:

- **Address unknown**
- **Access is not possible because the parents fail to keep appointments**
- **Access is specifically denied by the parents**
- **The parent has repeated explanations for the child's absence, e.g. asleep, with a relative, unwell.**
- **There is no reply when calls are made at home**

The above is of particular significance if there is concern for the child in relation to potential child abuse and prompt action should be taken. Children must be seen.

If the family are thought to be missing please discuss with your Manager who can make checks against national alerts and offer you further guidance and support.

RESPONSIBILITIES OF AGENCIES

Protecting Children and Young People: Framework for Standards sets out what each child in Scotland can expect from professionals and agencies to ensure that they are adequately protected and their needs are met. ¹

Standard 2.3 states that:

“Where a concern is raised about a child, professionals: see them; establish their immediate well being; and take any necessary protective action”

Standard 2.10 states that:

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

Adult Support and Protection (Scotland) Act 2007 Code of Practice states that under Section 49 of the said Act:

“It is an offence to prevent or obstruct any person from doing anything they are authorised or entitled to do under the Act.”

As well as the safety of the professional, at all times the welfare of the child – or adult at risk - remains the paramount consideration, and to prevent professional judgement, interpretations or intervention being thwarted, by actual or perceived threat, all agencies and services in West Dunbartonshire CHCP must ensure that their staff are fully supported in the work they do.

It is recognised that intimidation and the fear of violence can at times contribute to a lack of effective intervention by professionals to protect vulnerable children or adults. While such intimidation and fear may be faced this cannot be allowed to compromise the level of service offered to children and adults who rely upon and are dependant on, the capacity of agencies to withstand these pressures on their behalf.

All agencies should support their staff by:

- Ensuring staff are trained to a level that they are confident and competent, in work they are undertaking, including how to work to their own professional code of conduct or agency’s code of conduct when responding to risky or hostile behaviours
- Ensuring members of the public have access to information which outlines the steps which will be taken where there is unacceptable behaviour by those accessing their services

MULTI AGENCY WORKING WITH FAMILIES

Agencies need to work in partnership with one another and with families to achieve agreed outcomes and all parties need to understand this partnership may not be equal. Any professional or agency faced with incidents of threats, hostility or violence should routinely consider the potential implications for any other

¹ Protecting Children: Framework For Standards Scottish Executive (2004)

professional or agency involved with the family in addition to the implications for themselves and should alert them to the nature of the risks.

Sometimes parents or carers may be hostile to specific agencies or individuals. If the hostility is not universal, then agencies need to seek to understand why this might be happening and learn from each other.

Where hostility towards most agencies is experienced, this needs to be managed on an inter-agency basis otherwise the results can be as follows:

- Agencies withdraw, leaving the child or adult at risk unprotected;
- Services are withdrawn as everyone 'sees it as a fight', at the expense of assessing and resolving the situation for the child or adult at risk;
- There is a divide between those who want to appease the parent/carer and those who want to oppose - or everyone colludes.

When parents or carers are only hostile to some professionals / agencies or where professionals become targets of intimidation intermittently, the risk of a breakdown in inter-agency collaboration is heightened. Pre-existing tensions between professionals and agencies or misunderstandings about different roles can surface.

The risks are of splitting between the professionals / agencies, with tensions and disagreement taking the focus from the child or adult at risk e.g.:

- Professionals or agencies blame each other and collude with the family;
- Those not feeling under threat can 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 be unable to recognise / accept risks or problems;
- Those feeling under threat may feel it is 'personal';
- There is no unified and consistent plan.

Families with children on the Child Protection Register

Many home visits are by appointment. You will have agreed your frequency of contact in the child protection plan. Should access to the child/young person or home be denied at the time of your arranged visit, or the parents/carers are not at home:

- Arrange to return later in the day if possible.

Prior to your return visit and dependent upon your level of concern:

- Contact all other relevant agencies contributing to the CP Plan
- Return to the house as arranged and if access is again denied you should:
 1. Contact your Manager and agree a plan of action.
 2. Confirm your discussion and note any agreed actions in writing within 24hours.

3. Inform **ALL** other relevant agencies contributing to the Child Protection Plan of your concern and note any other agency who has had contact.

All other children who give cause for concern

Should access to the child or young person or home be denied at the time of the arranged visit / contact:

- Arrange to return later in the day if possible or within 24hours.
(At weekends or bank holidays a professional judgement has to be made as to whether the situation warrants an immediate referral)

Prior to your return visit and dependent upon your level of concern:

- Consider contacting other relevant agencies i.e. Nursery, Health Visitor, Social Services, to check if the child or young person has been seen recently, or if there are any current concerns
- Return to the house as arranged and if access is again denied and dependent upon the level of your concern, contact your manager to agree further action.

No previous cause for concern

This section refers to those children and young people who previously were not a cause for concern but have been brought to your attention. In most cases this would be referred to the duty social worker / duty team manager. Workers should also consider the following action;

- Consult other professionals who have knowledge of the family, to ensure there are no ongoing concerns

Never be left in doubt as to whether any service has seen a child or not. Always discuss with your manager.

Always refer to your child protection procedures and / or refer to the West of Scotland online child protection procedures: and the updated National Child Protection Guidance 2014:

http://www.proceduresonline.com/westofscotland/pdfs/WoS_CP_procedures.pdf

<http://www.gov.scot/Resource/0045/00450733.pdf>

OVERCOMING TENSIONS AND DISAGREEMENT BETWEEN AGENCIES

Trust, mutual respect and regular communication are at the core of good interagency working. When working with uncooperative or hostile families, the need for robust collaborative interagency working is central to providing opportunity for a cohesive and favourable outcome. In such circumstances the need for good inter agency communication and sharing of information is of paramount importance.

It is crucial that all relevant agencies involved are aware of:

- The nature and degree of the hostility

- The impact of the hostility on their own response and that of others (including the child or adult at risk);
- The concerns of others;
- The need to share relevant information about safety concerns;
- The need to be actively supportive of each other and be aware of the differing problems affecting different agencies in such circumstances;
- The need for transparency, openness and honesty between agencies when disagreeing;
- The risks of collusion and of any targeting of specific professions / agencies;
- The need to be prepared to discuss strategies if one agency (e.g. a health visitor) is unable to work with a family. In such circumstances professionals must agree whether or not it is possible to gather the necessary information or monitor the child or adult at risks wellbeing, and ultimately whether it is possible to have a truly multi-agency plan?

SHARING INFORMATION

Sharing information where children are at risk is fundamental to protecting children and agencies are well informed on when and what information needs to be shared and with whom.

West Dunbartonshire Child protection activity is fully committed to compliance with the requirements of the General Data Protection Regulation (GDPR). Where there are concerns that a child is at risk, relevant information sharing is essential and is not effected by GDPR. However, there can be need for care when considering disclosing personal information about an adult. The possible repercussion from someone who can be hostile and intimidating can become an added deterrent to sharing information.

However, sharing information where there is a child or adult at risk is pivotal in assessing the help and protection the child or adult may need. Issues of GDPR must be weighed against the need to safeguard and protect.

ASSESSING RISKS TO STAFF

The Bridge Childcare Development Service in their report (1997) into the death of Ricky Neave in 1994 recommended that recognition be given by managers to the impact on social workers and other staff of parental aggression and any fear that is aroused in them and the consequences for decision making in practice. Adequate professional supervision and support must be given in these situations

In dealing with families and individuals under stress, it is inevitable that practitioners will occasionally encounter people who are angry and, frustrated, or resentful or resistant to the intervention of professionals. While it is the responsibility of staff to try and establish effective working relationships with people, they also need to assess risk, not only to the child or adult who might need help, but also to assess and

plan for their own safety.

Research has shown that when faced with an aggressive family, professionals are reluctant to discuss their fear and ask for help. All agencies and services in West Dunbartonshire CHCP are committed to the safety of their staff and have a responsibility to minimise risk. Staff therefore should always consult with their manager prior to going to visit a family if there are any doubts or indicators which suggest there may be a risk. Staff also have a responsibility to report and discuss with their manager situations of hostility of any form in order that staff from other services or agencies might be made aware and be protected.

Keeping Safe

Before leaving to visit the family staff should consider the following:

- Do my colleagues / line manager know where I am going and when I am expected back? Do they know that I might be at risk during this visit?
- Do we have previous experience of a person linked to the child or adult being visited being hostile, intimidating, threatening or actually violent?
- Are we aware of any specific circumstances e.g. drink or drugs related issues linked to intermittent mental health problems affecting a person who are likely to encounter on this visit?
- Do I feel intimidated or fearful of any person likely to be encountered on the visit?
- Do I need another worker to accompany me e.g. from my own agency or another agency?
- Do I have a mobile phone with me?
- Does my manager know my mobile phone number and network, car registration number, home address and phone number?
- Could this visit take place in the office or at a neutral venue?
- Does this visit need to take place or do professionals need to meet separately for discussion to take place and issues to be addressed?

RECORD KEEPING

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

Collation of information with regard to a parent or carer, who is uncooperative or hostile, must form part of any child or adult protection risk assessment. Information with regard to such concerns must be communicated within and across agencies, using existing mechanisms such as case discussions, conferences, core group and review processes. In more urgent cases this information must be communicated quickly and effectively using information sharing processes.

On the basis of this information sharing across agencies, the practitioner with lead responsibility for the assessment must discuss the circumstances with their manager who will decide if an inter-agency meeting should be convened.

If an inter-agency meeting is deemed necessary it will be chaired by the agency with responsibility for the completion of the assessment. It will include all relevant

practitioners from agencies to whom the child/ adult and their family / carer are known. Where systems are already in place to hold formalised meetings managers may decide to bring a meeting forward if there is a need to address escalating concerns.

Occasionally, it may be necessary to convene a meeting of professionals separately if the presence of the parent or family/carer is likely to interfere with the discussion convened to address the emerging or escalating issues.

This principle applies for both children at risk of harm and also adults in need of protection. Any meeting held should be properly documented in line with agency standards of recording.

REFERENCES

Report into the Death of Ricky Neave in 1994 (1997), Bridge Childcare Development Service

Report of the Inspection of Scottish Borders Council Social Work Services for People Affected by Learning Disabilities (Social Work Inspectorate Services 2004)

The Children (Scotland) Act 1995

Emergency Worker's Act (Scotland) 2005

Protecting Children and Young People: Framework for Standards (Scottish Executive 2007)

Adult Support and Protection (Scotland) Act 2007

Adult Support and Protection (Scotland) Code of Conduct 2014

Inter Agency Guidance on Working with Hostile and Uncooperative Families
Greater Glasgow City Child Protection Committee (2007)

Fife Child Protection Committee Agency Guidance for All Practitioners Working with Hostile and/or Uncooperative Families

East Renfrewshire Council Health and Safety (Policy Arrangements) Violence to Staff Personal; Safety & Security

North Ayrshire Child Protection Committee Multi-agency Guidance – Unseen Child

NHS Greater Glasgow and Clyde – Unseen Child Protocol (2012)

SCR – Declan Hainey 2012 – Renfrewshire Council

National Child Protection Guidance 2014

Children and Young Person (Scotland) Act 2014

Children's Hearing (Scotland) Act 2011