

One-minute guide

Encouraging Families

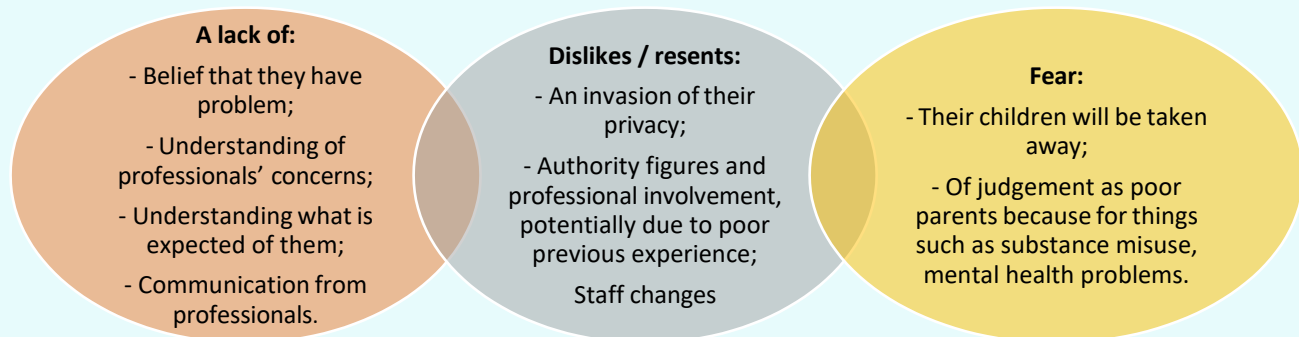
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A range of social, cultural and psychological factors can influence the behaviour of parents and issues with engagement may be deliberate or unintentional. It is important to consider the stigma and association behind terms such as 'hard to engage' when describing issues of disengagement.

Signs of disengagement can include:

Persistent late or missed appointments, cutting visits short due	Not in during a scheduled meeting time or refusal to open the door	Avoiding an uncomfortable topic of conversation.	Challenging professionals	No significant change despite significant input and agreement	Engaging with certain aspects of a plan only
Alignment with certain professionals	Attempting to refocus the attention of professionals	Conflicting reports of parent / carer and child	Using written, verbal or physical threats, covert, implied threats such as silence	Bombarding professionals with e-mails and phone calls	Using intimidating or derogatory language

Families may find it difficult to engage due to:



It is important to assess how far the non-engagement is impacting on the assessment process and consider if this is placing a child at increased risk:

- Check the records of contact with the family and estimate the size of the problem;
- Assess the evidence - Failed contact may require immediate action, such as making a referral to the MASH;
- Revisit the causes for concern - Consider any reasons the family give for their failure to progress;
- Have a regular discussion with your manager and address in formal supervision;
- Consider necessary time to respond, and if there is a need for immediate action;
- Consider what other agencies need to be informed of the engagement difficulties;
- Consider a strategy discussion if there are serious concerns for a child's welfare.

Tips for practitioners

<p><u>Consider your approach and communication</u></p> <ul style="list-style-type: none"> ➤ Plan your approach in advance; ➤ Consider communication style: tone, pitch, speed of voice, body language, eye contact; ➤ Be open and honest, use basic language, avoid jargon; ➤ Remember the basics, introduce yourself and ask how they are; ➤ Clearly explain your statutory duty to safeguard children's welfare, 'duty of care' and requirement to report your concerns; ➤ Encourage conversation, avoid arguing or interrupting; ➤ Clarify what the parent/carer means where you are unsure and summarise what they have said; ➤ Be positive and courteous whilst being clear about sharing concerns with the family and what work needs to take place; ➤ Avoid excessive reassurance - it may not be all right; ➤ Recognise and acknowledge progress even on a simple basis such as thanking a family for their time if they have previously declined visits. 	<p><u>Practical considerations</u></p> <ul style="list-style-type: none"> ➤ Consider the timing of the meeting depending on urgency of the concern; ➤ Consider language barriers or learning difficulties; ➤ Clearly record discussions or attempted engagement; ➤ Use a trusted third party (family member or a professional the family already have a relationship with) in a joint visit as a way in to engage; ➤ Try and alleviate potential fears of talking to children alone, will they agree to a teacher or health visitor sitting in when you meet with the child; ➤ Be aware of religious events and cultural customs; ➤ It is a two-way process - Be on time, try not to cancel and reschedule appointments; ➤ If family members are hostile/aggressive assess how far this is impacting on the assessment and whether practitioners are changing behaviour to avoid conflict; ➤ If a violent incident occurs, make a judgement without delay and contact a manager immediately;
<p><u>Share difficulties with colleagues, find out what works for them</u></p> <ul style="list-style-type: none"> ➤ No sole agency works in isolation and non-engagement may not be universal; ➤ Use Early Help, think about the strengths of the family and who else might be able to support them; ➤ Engage with regular supervision from management to ensure that progress with the family is being made and is appropriate. 	<p><u>Remember to keep the focus on the children – assess the risk</u></p> <ul style="list-style-type: none"> ➤ Be professionally curious; ➤ Continuously assessing the motivations and capacities of the parent(s) to respond cooperatively in the interests of their child(ren); ➤ Confront uncooperativeness when it arises, in the context of improving the chances of a favourable outcome for the child(ren); ➤ Consider whether the child is keeping 'safe' by not telling professionals things, has learned to appease and minimize or is blaming themselves; ➤ Ensure you have identified and seen the key people and observed evidence of others who could be living in the house.

Key Contacts and Further Information

Coventry Safeguarding Children Partnership website - <https://www.coventry.gov.uk/lscb>