



Building Confidence in Practice Resource Professional Curiosity

The Safeguarding Adults Boards and Safeguarding Children Partnerships of Leicester and Leicestershire and Rutland conduct reviews and multi-agency audits.

The objective of this resource pack is to share the learning on a specific topic to help build confidence in practice.

This resource is developed from work undertaken by Waltham Forest Strategic Partnerships, Manchester Safeguarding Partnership

This resource pack aims to address Professional Curiosity so that practitioners can fully understand what it is and how to develop their skills when they are working with people whether they are children or adults.

The expectation is that you will share this resource pack widely and use it:

- In team meetings
- As part of a group/individual supervision
- For your own development



You can look at it as a whole or dip in and out of it at your convenience. Use the icons to navigate through.

Professional Curiosity

(Click on each section)

What is it?

Why is it important?

Exercise in reflection....

Top Tips

Understanding what it looks like in practice

How to Refer, Procedures & Resources



What is it?



Why is Professional Curiosity Important?

Professional Curiosity

Professional curiosity is a combination of looking, listening, asking direct questions, checking out and reflecting on information received. It means:

- Testing out your professional hypothesis and not making assumptions
- Triangulating information from different sources to gain a better understanding of individuals and family functioning
- Getting an understanding of individuals' and families' past history which in turn, may help you think about what may happen in the future
- Obtaining multiple sources of information and not accepting a single set of details you are given at face value
- Having an awareness of your own personal bias and how that affects how you see those you are working with
- Being respectfully nosey



Why is it important?

In order to Safeguard we need to be Professionally Curious....

- **Thinking the Unthinkable:** Safeguarding is everyone's responsibility and where practitioners are concerned each and every agency has a role to play in safeguarding children and adults.
- Nurturing professional curiosity and challenge are fundamental aspects of **working together** to keep children, young people and adults safe.





Absence of Professional Curiosity can lead to:

- Missed opportunities to identify less obvious indicators of vulnerability or significant harm
- Assumptions made in assessments of needs and risk which are incorrect and lead to the wrong intervention for individuals and families



EXERCISE: Reflecting on your own practice....



- What might be some of the barriers to being professionally curious?
- How might these barriers be overcome?



Understanding what Professional Curiosity is.....

Barriers

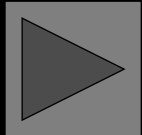
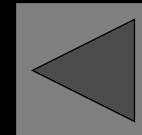
Supervision
& Leadership

Click boxes above to move to each section



Barriers

- Fear of conflict and avoiding difficult conversations
- Time pressures
- Do I feel confident to deal with the response?
- Do I know how to respond?
- Not being able to help and/or not knowing what services are available
- No knowledge of safeguarding and services
- Thinking that it isn't my role – someone else will deal with it.
- Working in the community where I live



A photograph of several athletes competing in a hurdles race on a red track. The athletes are in various stages of clearing the hurdles. One athlete in the foreground is wearing a blue singlet with the number 3216. Another athlete in the background is wearing a white singlet with the number 1477. The hurdles are white with blue bases. The track has white lane markings.

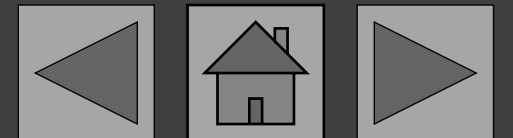
How do we overcome barriers?

- Acknowledge that you are afraid
- Recognise that you lack confidence
- Ask for help – this could be by talking to your supervisor/manager or in supervision
- Seek opportunities to develop your practice and understanding
- Preparation - understanding the purpose of the contact and any previous worries or concerns. What are your roles and responsibilities - what is the legal ground/basis of the contact?
- You don't always know the answer to all questions – but be confident in saying that you will find out



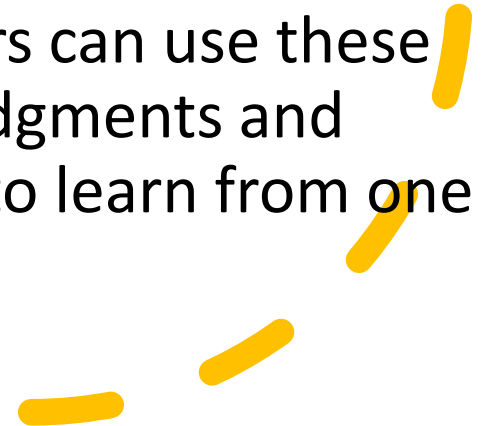


Supervision and Leadership



Supervision and Leadership

- This is an important space for reflection
- The use of effective supervision is a means of improving decision-making, accountability, and supporting professional development among practitioners. Supervision is also an opportunity to question and explore an understanding of a person or a family's situation.
- To work with people with compassion, but retain an open and questioning mind set, requires regular support through supervision.
- Group supervision can be even more effective in promoting curiosity, as practitioners can use these spaces to think about their own judgments and observations. It also allows teams to learn from one another's experiences.



Tips for supervision/practice

- Offering an alternative perspective/hypothesis
- Looking at a situation from the child, young person, adult or another family member's perspective
- Recognising time pressure as a barrier – look at workload/planning
- Recognise when risks and concerns are escalating and taking appropriate action



Tips for supervision/practice

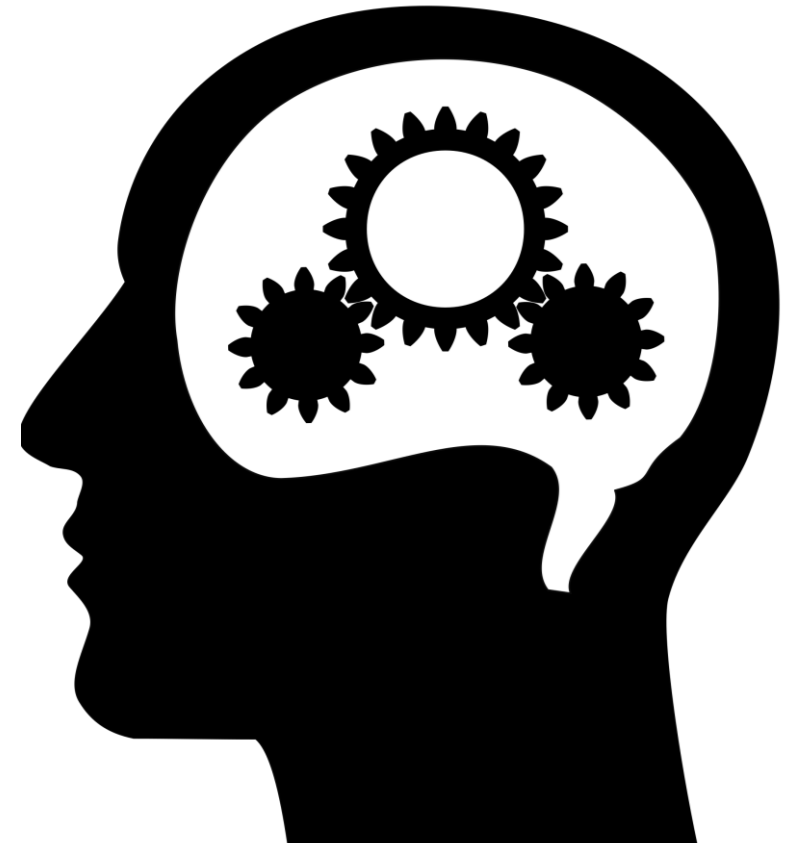
- Knowing your worker's personality traits:
 - Do they like to be liked?
 - Are they a rescuer?
 - Are they skilled in formulating and asking questions?
- Knowing your worker's skills and knowledge:
 - Are they confident to spot the signs and indicators of harm?
 - Rule of optimism (wanting progress and therefore missing/down playing signs that might be concerning)
- Are they working in a community where they live – address any conflict of interest?





Remember to consider...

- **Rule of optimism**
 - Wanting things to be better – not ‘seeing’ that things are not changing or worsening
 - Putting greater emphasis on small changes to provide evidence of positive change
 - Is the behaviour normalised – they have always done it?
- **Disguised Compliance**
 - Involves a parent/adult/carer giving the appearance of co-operating with agencies to avoid raising suspicions, to allay welfare agency concerns and ultimately diffuse professional intervention ([Building Confidence in Practice – Resistant Behaviour](#))
- **Unconscious Bias**
 - Having a prejudice against a person/group of people or their circumstances/environment that you are not aware you have



Top Tips (click on words to move forward)

LOOK



LISTEN



ASK



CHECK OUT

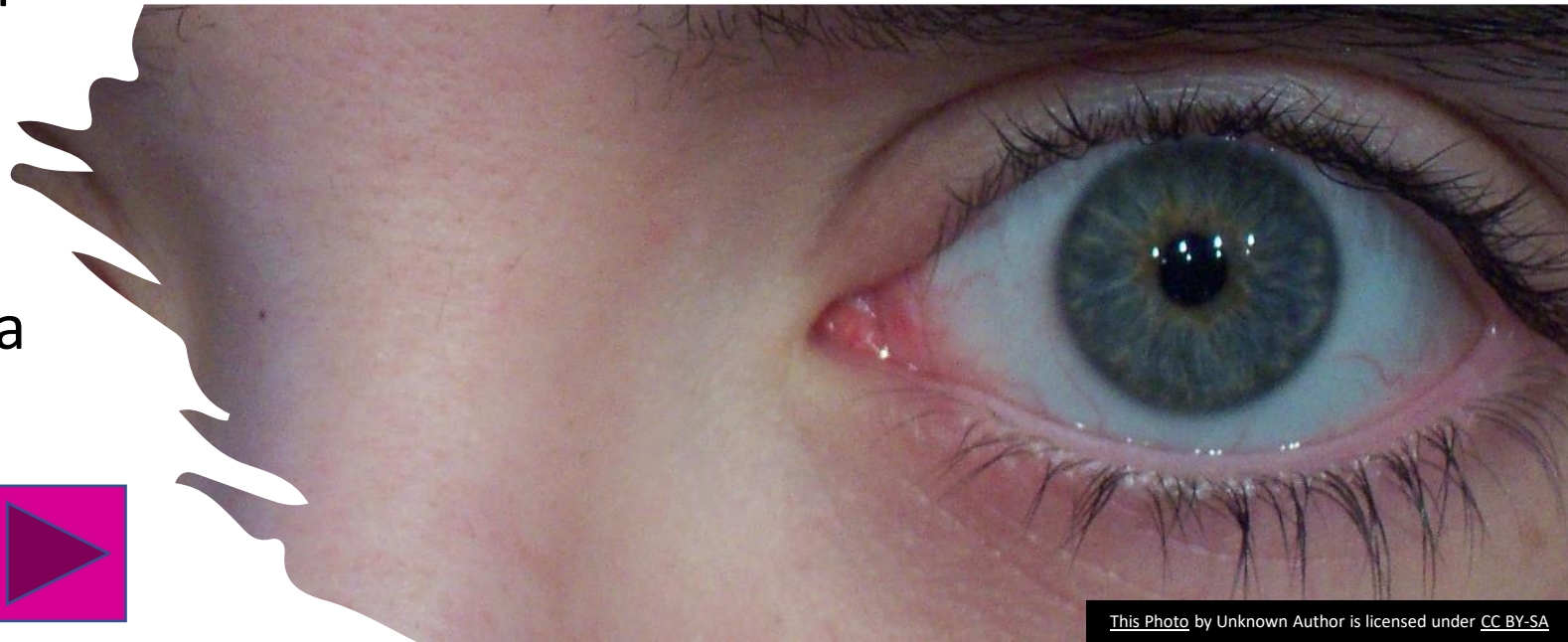


Always trying to answer the question(s):
'How does it FEEL?' or 'Why does this FEEL wrong?'

Top Tips

- Is there anything about what you see when you meet with this child/adult/family which prompts questions or makes you feel uneasy?
- Are you observing any behaviour which is indicative of abuse or neglect?
- Does what you see support or contradict what you are being told?
- Remember – behaviour is also a way for people to communicate.....

LOOK



LISTEN

Top Tips

- Are you being told anything which needs further clarification?
- Are you concerned about what you hear family members say to each other?
- Is someone in this family trying to tell you something but is finding it difficult to express themselves? If so, how can you help them to do so?



LISTEN

Remember....

- Always keep the individual at the centre of your work
- What is it like to be them – what is their lived experience?
- What are they saying to you about their life?
- Does what they say match with what you are seeing?
- Is someone else advocating – such as a parent/carer? Do you know whether that is what the child or adult really wants to say?
- Some children or adults may not have been able to voice concerns before....

COMMUNICATION IS KEY



ASK



Top Tips

Are there direct questions **you** could ask when you meet this child/adult/family which will provide more information about the vulnerability of individual family members?

HERE ARE SOME EXAMPLES



How do you spend a typical day?	How did you get that injury?	Peter is very tired today, and says he has not slept is there anything that might be troubling him?
Who else lives in your house with you?	Who is this with you?	I have noticed Priti seems hungry in the mornings, is she having breakfast before she comes to the day centre/school?
What are the things that make you happy?	When do you feel safe?	What happens when your mum is very sad?
What do you look forward to?	Why are you not at school?	I noticed that there isn't very much food here, and wondered why?



Remember...

- This is about safeguarding
- You only need to ask questions to triangulate information or gain clarity
- If what you see or hear doesn't make sense, or you feel concerned, then you may need to ask questions to find out more information
- It may be appropriate in your role to share information with someone else, however you may also be able to ask a question

ASK

Top Tips

CHECK OUT



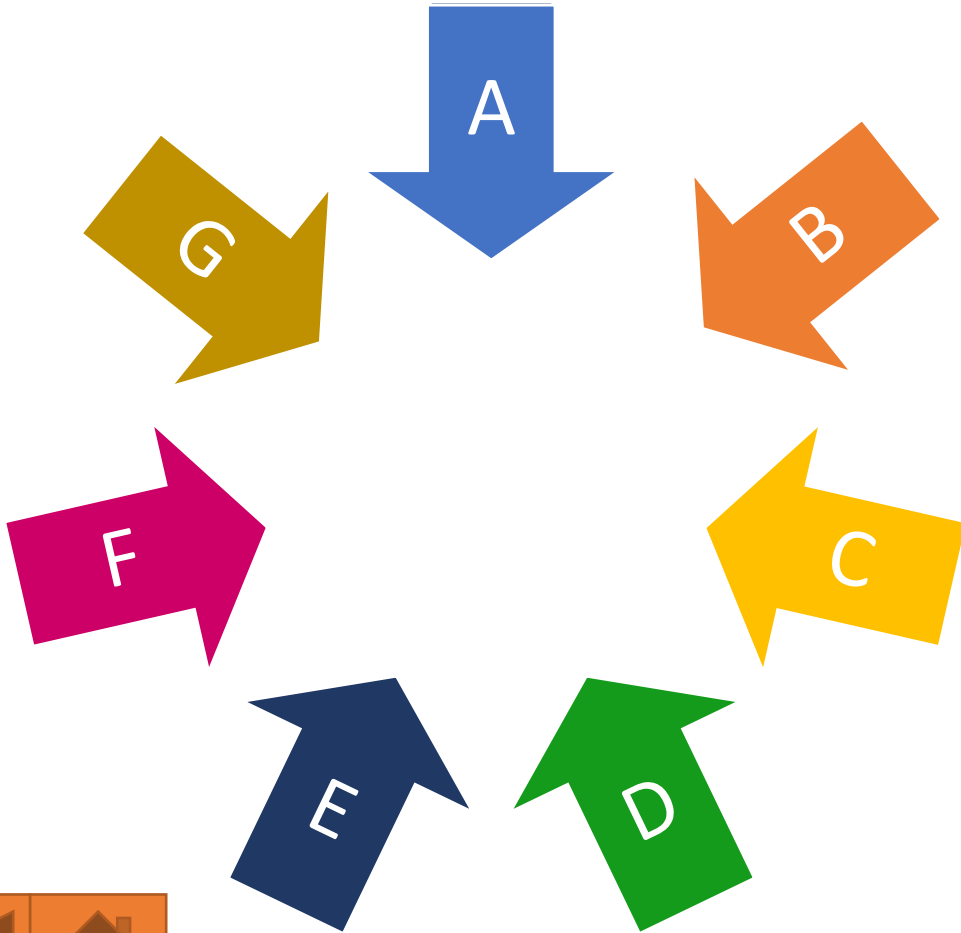
- Are other professionals involved?
- Have other professionals seen the same as you?
- Are professionals being told the same or different things?
- Are others concerned? If so, what action has been taken so far and is there anything else which should or could be done by you or anyone else?



Understanding what it looks like in Practice

Discuss the Scenarios and answer the questions
Click on the arrows for each Scenario

Choose how
you use the
scenarios



In each scenario think about:

- What is worrying you?
- Who would you talk to?
- What questions might you ask?
- Where might additional information come from?



Remember the 'voice' of child or adult

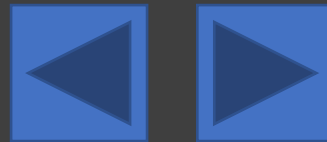
OLIVER

6 months old

A

Oliver has been attending your setting for 3 months. The mother always drops off and collects the child, however, this week an unknown male has been dropping off.

You've noticed that Oliver has been unsettled and that mum doesn't chat so much at collection time.



Possible Scenario Answers

A

- What is worrying you?
- Who would you talk to?
- What questions might you ask?
- Where might additional information come from?



OLIVER is 6 months old

A



What is worrying you?

- Oliver appears unsettled recently
- The change in behaviour of mum
- Unknown Male

Who would you talk to?

- Mum
- Unknown Male
- Other staff in the setting
- Any other professional involved with Oliver
- Observe Oliver



What questions might you ask?

- “We’ve noticed Oliver has been quite unsettled can you think why that might be?”
- “Are you ok – you seem a bit quiet?”
- “We also wanted to check who the man was who drops her off as he isn’t on our list”
- “Hello – I don’t think we’ve met before, my name is Jo and I am Oliver’s key person – can I ask who you are and your relationship to Oliver”

Additional Information could come from: Mum, the unknown male, any other person who drops off or collects (grandparent(s)?), any professional involved i.e. Social Worker if child on a child protection plan and by observing Oliver’s physical wellbeing and behaviour

Jay is 10 years old

B

- Jay's mother died suddenly when Jay was 7 and he went to live with his dad at that point. He now lives with his father's ex-partner Becki as they have recently separated.
- He goes to the local school where he has been known to bully children in his class – pinching and pushing them as well as calling them names. This led to school speaking to Becki and dad.
- In conversation: Jay says he's scared of being alone – everyone has left him – nobody would miss him.
- You are from Early Help working with Jay and Becki as she has said she is struggling and is worried about his mental health.



Possible Scenario Answers

B

- What is worrying you?
- Who would you talk to?
- What questions might you ask?
- Where might additional information come from?





Jay - 10 years old

B

What is worrying you?

- Bereavement & loss
- What is known about Becki?
- Instability of placement - Is this private fostering?
- Relationship with father
- Jay may harm himself
- Jay's behaviour/bullying

Who would you talk to?

- Jay
- Becki
- Dad
- Grandparents if involved
- School
- Any other professional/family involved with Jay

Questions:

To Jay

- "I get the feeling that you are sad – what is making you sad?"
- "Are you worried? Are you scared? Where do you feel safe?"
- "I'd really like to know about your day..."

To Becki

- "Are you happy to be looking after Jay?"
- "What support do you think you need to continue caring for Jay?"
- "What are you worried about?"

To Dad

- "Are you happy for Becki to be looking after Jay?"
- "What support are you giving Jay and Becki?"

Additional Information

Physical appearance and health

Observation of Jay's interactions with other children and adults in particular Becki and Dad

Condition of the home environment



Leanne aged 15

C

- Leanne attends your school where you are the designated safeguarding lead (DSL). You've been told that although she is registering in the morning and afternoon, she doesn't appear to be in school – you never see her around at other times.
- Leanne is a really bright child and could go to university – however since coming back after half term her grades have significantly slipped.
- The other day you saw her get into the car of Jake who is in his 20s, and used to attend the school. He was permanently excluded because of a violent incident. You ask her how she knows Jake and she says that he's her boyfriend.



Possible Scenario Answers

C

- What is worrying you?
- Who would you talk to?
- What questions might you ask?
- Where might additional information come from?



Leanne aged 15

What is worrying you?

Grades slipping; association with older male; exploitation?

Who would you talk to?

- Leanne
- Other teachers
- Parent(s)
- Any other professional involved with Leanne

Possible questions to ask:

- “Are you OK?”
- “I’ve been reading information for parents evening and have noticed that your grades are lower than last term.”
- “I’m a bit concerned that I’ve seen you with Jake because he is quite a lot older than you!”

C

Additional information

School records –
grades/attendance
Observation of
behaviour/interactions
with other pupils –
especially friendship
group and any changes
in that group.
Other teachers



24, Oak Road

- Three bedroomed privately rented semi detached town house.
- Neighbours have complained because of the amount of rubbish – some of which has been spilling over and also some has been put in their bins. They are worried about vermin as some rats have been spotted.
- There are a lot of vehicles that come and go – a lot of nice fancy cars and sometimes a transit van.
- They also say that there seem to be a lot of people living there.
- Environmental Health attend and find 2 men who didn't want to let them in. When they showed their ID and were more insistent they were able to get inside the doorway where they could see several mattresses in the back room plus piles of sleeping bags and clothes. A woman, who appears to be in the later stages of pregnancy, was sitting on a mattress with a small child.
- There didn't appear to be a lot of other furniture.
- Also, in the kitchen, there were a lot of unwashed pots and takeaway boxes lying around.



D



Possible Scenario Answers

D

- What is worrying you?
- Who would you talk to?
- What questions might you ask?
- Where might additional information come from?



24, Oak Road



What is worrying you?

- There's a child in this environment
- That there are more people than there should be living there
- There may be some exploitation of the people living there
- Is the pregnant woman registered with her GP and receiving antenatal care?

Who would you talk to?

- The people present
- The neighbours
- Your manager
- The agency safeguarding lead
- Police



What questions could you ask?

- “It seems that there is a lot of rubbish – I just wondered how many people live here?”
- “Who is your landlord? Who do you give ‘rent/money’ to?”
- “Who would be the best person to speak to about getting the rubbish cleared?”
- “Are you feeling ok, when is your baby due?”
- “Ask general questions about the child – such as age, name, what do they like doing, and where do they sleep?”
- “Do you all sleep in this room – are there more rooms/people upstairs? May I have a look?”
- “Do you go out to work? What is it that you do?”

Additional Information

- Observation of the physical wellbeing of people present including the child.
- Do any of the people present appear to have support needs for example around a learning disability or mental health?
- Observation of house/environment
- The interactions between the people present and their willingness to interact with you
- Landlord if possible/appropriate



John aged 32



- John has autism and uses a wheelchair due to muscular deterioration. He lives at home with his elderly parents and he attends the day services where you work 3 days a week. John appears to have lost weight, and is showing no interest in his favourite foods and activities. Whilst John does not communicate verbally his mood and behaviour usually indicates what he likes and dislikes.
- John's parents transport him to the service.

Possible Scenario Answers

E

- What is worrying you?
- Who would you talk to?
- What questions might you ask?
- Where might additional information come from?





E



John aged 32

What is worrying you?

- Weight loss
- No interest in his favourite foods and activities
- Is John's weight being monitored?

Who would you talk to?

- John's parents
- Your line manager
- Any professional involved in John's care such as GP, Social Worker, Speech and Language Therapist (SALT)

What questions might you ask?

- "We've noticed that John isn't eating, can you think of any reason why?"
- "Has anything happened recently to upset him?"
- "Has he been seen by a doctor?"

Where might additional information come from?

- Observe John's behaviour and responses – looking for patterns
- Observe interaction between John and his parents

Report your concerns and any information from the parents to your line manager particularly if it's felt that there is a contradiction i.e. that what the parents say does not match with what you are seeing.

Dora 71 & Keith 73

- Dora and Keith have been together for 40 years. Dora has dementia and Keith, although he has severe arthritis, is her full time carer.
- A neighbour rings Adult Social Care and the Police as she has heard shouting and crying. Keith shouting that he will kill himself if she disobeys him. A couple of weeks ago the same neighbour heard shouting again and called to ask Keith if he needed any help but he declined.
- Dora and Keith appear to have no friends or family – they are very private.
- Adult Social Care had a referral from the GP 6 months ago for a Carer's assessment but Keith refused a visit saying he would call if he needed anything.
- Keith has now agreed to a home visit from a social worker.



Possible Scenario Answers

F

- What is worrying you?
- Who would you talk to?
- What questions might you ask?
- Where might additional information come from?



Dora 71 & Keith 73



What are you worried about?

- Health issues (dementia/arthritis)
- Shouting
- Escalating aggression
- Isolation
- Refusal of help/services
- Carer stress
- What happens if one of them takes ill?
- Domestic Abuse/Coercive Control?



Who would you talk to?

- Keith (on his own); Dora (on her own); Neighbour; GP; & Any professional involved with them such as dementia service

What questions could you ask?

- “Given that you have your own health problems and you are looking after Dora what is life like on a daily basis?”
- “You have been heard shouting at Dora can you tell me a little bit more about this?”
- “Are you able to take any time for yourself?”
- “What help would you accept?”
- “Do you have a plan if you were to be taken ill?”
- “When was the last time you (Dora & Keith) saw a GP?”
- “Is Dora’s dementia getting worse in your opinion?”

To Dora if appropriate/possible

- “How are you feeling? Are you happy or sad? Are you frightened? Do you feel worried?”
- “What have you done today?”
- “What things do you and Keith do together?”
- “Do you feel safe?”

Additional information:

Observation of the couple together and separately; Physical condition of both of them – and the home

Tom aged 75

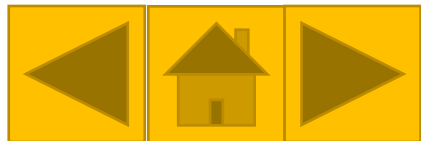
- Tom lives alone and has severe osteoarthritis and uses a walking frame. Tom only leaves the house to attend his local surgery where he goes for regular blood tests. He likes chatting to the staff in reception.
- Tom has a son in Glasgow who he talks to regularly via Zoom.
- Tom has come into the surgery without an appointment, and is telling you that he has no money for food this week as he has been helping a friend who is in financial difficulty. He says she's a really nice woman.



Possible Scenario Answers

G

- What is worrying you?
- Who would you talk to?
- What questions might you ask?
- Where might additional information come from?





G

Tom aged 75

Additional information:

Observation of Tom's physical appearance and mental health
Medical notes/history
Any other behaviour changes

What is worrying you?

- No money for food: turned up without an appointment which is a change in behaviour; the 'woman' he is helping; financial exploitation

In this situation in the first instance we need to get permission from Tom to speak to others.

If he says 'no' and you are still worried he or others are at risk of abuse, you can still share information with relevant agencies (see next slide).

You may want to talk to:

- Adult Social Care, Son (if appropriate), Police if there is an immediate risk, GP/Practice Nurse, and anyone else that is involved that may be able to triangulate information.

What questions might you ask?

- "Do you have anyone who can get you some food?"
- "When will you have money again?"
- "Who is your friend?"
- "How do you know them?"
- "Do they come to your house?"
- "Is it someone you speak to online?"
- "Does your son know your friend?"
- "How often do you speak to her or see her?"



How to Refer, Procedures & Resources

How to Refer

When you have concerns about an adult:

- LEICESTER CITY: [Concerned about a child or an adult? \(leicester.gov.uk\)](http://leicester.gov.uk)
- LEICESTERSHIRE or RUTLAND: [Leicestershire and Rutland Safeguarding Partnerships Business Office - Concerned about an adult? \(lrsb.org.uk\)](http://lrsb.org.uk)

When you have concerns about a child:

- LEICESTER CITY: [LSCPB | What to do if you are concerned about a child \(lcitylscb.org\)](http://lcitylscb.org)
- LEICESTERSHIRE or RUTLAND: [Leicestershire and Rutland Safeguarding Partnerships Business Office - Concerned about a child? \(lrsb.org.uk\)](http://lrsb.org.uk)



How to Refer, Procedures & Resources

Safeguarding Adults Guidance and Procedures



[Multi Agency Policy and Procedures](#)

[Types of Abuse or Neglect](#)

[Criminal Exploitation of Adults](#)

[Modern Slavery](#)

[Domestic Abuse](#)

[Mental Capacity Act](#)

[Thresholds](#)

How to Refer, Procedures & Resources

Safeguarding Children Guidance and Procedures



[Safeguarding Children Partnerships Procedures Manual](#)

[Definitions of Child Abuse and Neglect](#)

[Private Fostering](#)

[Child Exploitation](#)

[Domestic Abuse/Violence](#)

[Thresholds for access to services](#)

How to Refer, Procedures & Resources

Did Not Attend VS Was Not Brought



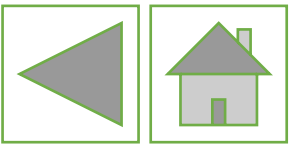
- Children: [Rethinking 'Did Not Attend' – YouTube](#)
- Adults: [Was Not Brought: Assisted Doctor Appointment Challenges – YouTube](#)

The Voice/Lived Experience of the Child

- [Was Not Heard – YouTube](#)

Exploitation of Adults

- [Tricky Friends - Leicester, Leicestershire and Rutland – YouTube](#)
- [Guidance for Working with Adults at Risk of Exploitation: Cuckooing – LLR SAB Multi-Agency Policies & Procedures Resource \(llradultsafeguarding.co.uk\)](#)



Leicester
Safeguarding
Children Partnership Board

WORKING TOGETHER
TO KEEP CHILDREN SAFE

Leicester
Safeguarding
Adults Board

WORKING IN PARTNERSHIP
TO KEEP ADULTS SAFE