What is it?

Professional curiosity is having a healthy scepticism about what you are being told about a child. It is a communication skill to explore and understand what is happening within a family rather than making assumptions or accepting service users' versions of events or disclosures at face value. This requires practitioners to practice 'respectful uncertainty'.

Tips for practitioners

 Understand family dynamics
Think voice of the child/adult Work in partnership with other agencies • Carry out unplanned visits (where possible) • Play 'devil's advocate' • Present alternative hypotheses • Present cases from the child, young person, adult or another family member's perspective • ensure effective record keeping • Share your concerns and findings with other professionals/agencies • Seek advice guidance and second opinions/contact BCHC safeguarding team • Consider RHRT • Consider Mental capacity



Birmingham **Community Healthcare NHS Foundation Trust**



Safeguarding Team

Professional Curiosity



Why it matters?

A lack 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 could lead to ineffective interventions which do not reduce risk and implement positive change.

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What does it mean?

Professional curiosity 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. Formulating an understanding of individuals' and families' past history which in turn, may help you consider what the risk is, what could happen in the future and what the impact could be.

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Barriers to curiosity

• Overidentifying with carers and losing focus on the child they need to make the hard decisions about the case • Over optimism: The rule of optimism is also about professionals who do not • want to acknowledge that things are not getting better and that they need to make the hard decisions about the case • Making assumptions • Being afraid to raise concerns/question families • Time constraints • Lacking the confidence to ask sensitive questions • Unconscious bias

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Factors to consider:

Disguised compliance involves parents or carers giving the appearance of cooperating with agencies to avoid raising suspicions and allay concerns (e.g. agreeing to attend appointments but not turning up.) Practitioners should verify and corroborate information with others.

Thinking the unthinkable

Thinking the unthinkable does not mean assuming the worse. It means keeping an open mind and being able to think objectively about the what the evidence is telling you.