

# Rough Guide to Assessment





## Introduction

The *Rough Guide to Assessment* is one of a series of practice guides produced by Hartlepool and Stockton-On-Tees Safeguarding Children Partnership (HSSCP) which have been designed to be read and used by the range of practitioners and professionals working across children's services in the borough.

All of the *Rough Guides* have been developed to support the valuable work that is carried out with children and young people<sup>1</sup> and families by identifying the key elements which underpin good practice and incorporating significant messages from research.

It should be noted that *Rough Guide to Assessment* does not replace, provide the detail of or interpret legislation, policy, frameworks and procedures, which are all subject to change, but focuses more on the 'how to', offering advice, suggesting ideas and providing signposts to sources of information and further reading.

## What is assessment?

Assessment in relation to children in need and their families has received a lot of attention and publicity in recent years, with serious case reviews, inquiries, research and inspections all highlighting that practice has too often fallen short of the standard required. But what exactly do we mean by "assessment"?

Whilst there isn't one accepted definition, assessment in the context of children's services can generally be regarded as the process for understanding what is happening to a child and his/her family which then informs decisions about action to be taken or services to be provided. It has been described as being a bit like putting a jigsaw together without having the benefit of the picture on the front of the box and not knowing if you have all of the pieces to complete the picture or if every piece fits together.

We know that assessment really does matter, that it underpins the planning process and that good assessments are critical for good outcomes. Significant decisions are made on the basis of practitioner and professional assessments that affect outcomes for children in both the short and the long term. Without good assessment, practice in children's services is likely to be unfocused and directionless; after all, it's impossible to make decisions about how best to manage a situation if there isn't a clear understanding of just what is happening. Without good assessment, subsequent decisions, plans and interventions will be flawed, with significant consequences for the child and family.

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<sup>1</sup> To avoid repetition in subsequent sections, child or children are the terms used to refer to children and young people.

Assessment informs decision-making about:

- Whether to intervene
- The nature and scale of the intervention
- The urgency of the intervention
- Planning the detail of the intervention

Assessments can also justify a decision to request interventions by other agencies or professionals, for example providing the clear rationale for a referral to children's social care and meeting the threshold for statutory intervention in family life.

### Remember.....



- Assessment really does matter.
- Assessment is absolutely key to identifying the interventions and services children and young people need to improve their situations

## The assessment process

Family life is continually evolving. Consequently, assessment isn't a one-off event and should be thought of as a continuous, cyclical process with a number of key stages which are represented in the following diagram:

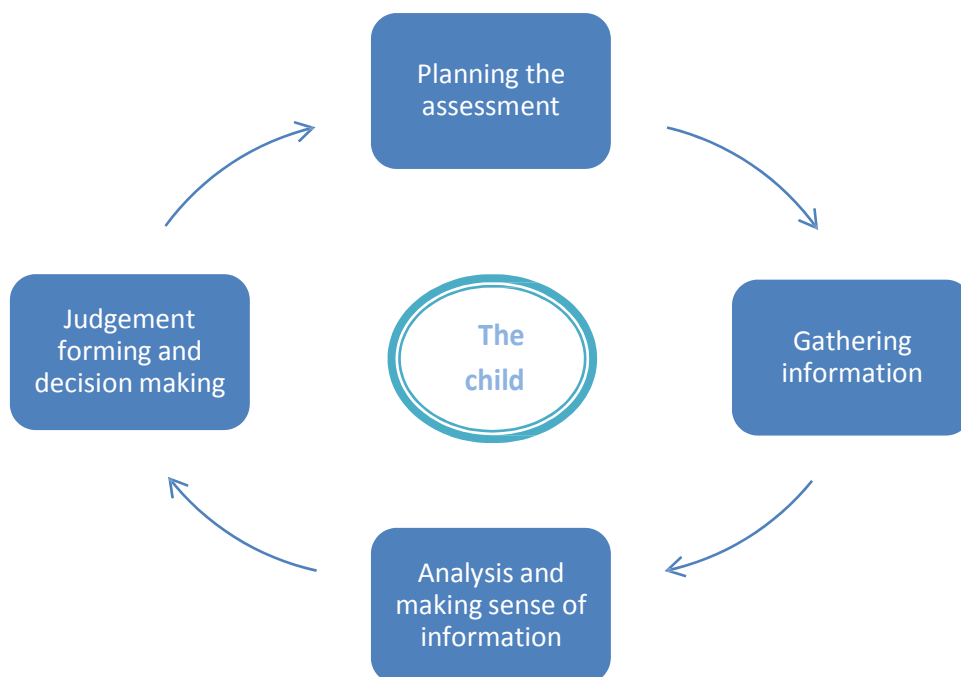


Fig.1 The assessment process

## Planning an assessment

This is the stage that is often forgotten about or done half-heartedly but it's a crucial part of the process which involves determining *what you need to know* and *how you intend to obtain the information*. In the planning stage you need to give consideration to:

**What** you will be assessing. Who is saying what about whom? What are the questions you will be seeking answers to?

**Who** will be involved. Identify your likely sources of information – in the family, in the community, in other agencies - at the very beginning. You can always make amendments.

**How** you will engage and involve the parents, the child and significant others. How will you explain your involvement, the reason for your involvement and the assessment process? Mistrust of services runs high among many parents, they can be easily overwhelmed and alienated by “the system”, so how will you try to engage them early on?

**Which** strategies you will use to support child and parental involvement in the assessment process. How will you ensure you obtain the child's (regardless of age) and parents' perspectives? (See *Rough Guide to Participation*.)

**How** you will engage and involve other practitioners and professionals in the assessment. Consider how you will ensure understanding of what is being assessed and how you will establish robust information sharing arrangements.

In **which** order you will involve people. Parents and family or other practitioners and professionals first?

**How** information will be gathered. By reading documents and case records? By requesting written reports? In meetings? Through interviewing? By observing? How will you access other agency records? Which assessment tools might help you to gather information? Be aware that where information exchange is not face-to-face (that is, takes place via telephone, email or post), vital non-verbal and visual cues that are critical in facilitating mutual understanding will be missing.

**When** information will be gathered and analysed. What are your estimated timescales? Do you foresee any obstacles or delays? Remember, the careful reading of case files and agency records can be very time consuming and you should allow for this.

**How and when** information gathered will be recorded. For example, how will you record information obtained through face to face interviews?

**How** you will share the assessment report or findings - with the parents, with other practitioners/professionals.



It may be useful to draw up for yourself, or with the multi-agency assessment group, a plan for undertaking the assessment which can then be reviewed through the process.

### Remember.....



The purpose and the possible consequences of the assessment should be clear from the outset - to the practitioner and to others involved in the assessment, including the child and the family.

## Gathering information

Once you have considered what you need to know and your likely sources of information, the next stage is to gather comprehensive, relevant and accurate information. Clearly a vital step in the assessment process, it requires the practitioner to:

- Know where to collect the pieces of information
- Know which pieces of information to collect
- Know how to filter the information
- Know how to verify the information

A primary source of information, sometimes overlooked or given only minimal scrutiny, is any existing case file or agency record. The problems of making decisions on the basis of incomplete information have been highlighted in various inquiries and serious case reviews and it's important to remember that the careful sifting of case records and files is an essential part of the assessment process, with sufficient time needing to be allocated for this. Earlier assessments in the case file should inform the assessment process and the quality and accuracy of previous assessment information should always be considered.

“The tragic consequence was that nobody in Haringey – not even (the social worker) – ever read Victoria’s case file in its entirety.”

*Quote from Lord Laming (2003)*

Other key sources of information will obviously be the child and family themselves but there will be a need to contact sources other than the family – friends, neighbours, community sources, professionals and practitioners – in order to:

- Verify, clarify or corroborate information which has been provided by the family
- Gather further specific and comprehensive information

As you gather information from all of your sources, remember to:

**Keep it relevant**– make sure the questions you ask are appropriately focused.

**Know the difference between fact and opinion** (See the definitions in *Top Tips on page 9*) – ask your sources for their evidence, observations, views, opinions and perceptions and be clear about the difference between them.

**Be unambiguous** – be consistently clear with your sources about what you are wanting information about.

**Be thorough** – ask *why* and *how* as well as *what* and *how many*. Don't just focus on the negatives in a situation. Gather information about children's resilience and ability to thrive despite what might be going on in their lives, and any protective factors related to themselves, their parents or their environment.

**Be neutral**– avoid using loaded questions that encourage your sources to answer in a way they think you want them to. In this stage of the assessment process, you should start to seek answers to the questions you identified in the planning stage. You will then begin to develop a *hypothesis*, in other words a tentative explanation for what is happening in the family or what might be happening.



- As you gather information, pause regularly to be sure you're asking the right questions.
- Beware of only seeking the information you wish to find and understand the dangers of persisting with a particular viewpoint, ignoring or playing down any information which doesn't support it.

## Analysing information

Assessment is more than simply a process of collecting “facts” (which may, themselves, be disputed) and involves analysing the information which has been collected. We all analyse information all the time in everyday life, even without realising we're doing it. For example, if we see the warning light on the fuel gauge when we're driving the car, we understand that, if the gauge is working correctly (and we consider when we last filled up with petrol to help us decide if it is), it's time to look for the nearest petrol station. Or we estimate that we're not that far from home, there's probably enough fuel to get us there based on what the car's handbook says, and we can go to the petrol station first thing tomorrow.

Analysis similarly takes place all the time in our work in children's services. When making a phone call or home visit, the practitioner is constantly calling on their practice knowledge, experience and intuition to guide them. Analysis is also required when making significant decisions, for example when making a referral to higher level or specialist services. Yet this is probably the most difficult part of the process and the aspect of assessment practice which has attracted the most criticism.

But what exactly do we mean by 'analysis'? In simple terms, to analyse something is to ask what that something means, how something does what it does or why it is as it is. The information you've gathered as part of the assessment needs to be processed before an understanding is developed which then allows a judgement (an explanation of what is or might be happening) to be formed which can then lead to an appropriate recommendation or decision. Analysis is the part of the process which “makes sense of” all of the information gathered (where the jigsaw pieces are fitted together and a picture emerges) and provides the rationale for what should happen next. So, in relation to assessing a child's needs, analysis is what helps you move from simply describing what's happening in the child's life to understanding *why* things are happening.

In other words, this is the stage in the assessment process which turns *information* into *knowledge* - knowledge about what it is like for a child living in a particular family. In the context of children's services, analysis can therefore be described as asking of all information gathered “*What does this mean for this child?*”

“You need to know what it's like to be me”. *Quote from a young person*

Drawing on your practice experience, your knowledge of relevant theory/research/available evidence, your life experience and your intuition, analysis involves:



- Asking yourself if you have the information you need
- Looking out for biased or inaccurate information
- Taking note of similarities in the information
- Verifying information
- Checking out conflicting information
- Relating pieces of information to establish relationships and connections between them
- Identifying emerging themes and patterns
- Identifying gaps in the information
- Asking yourself which details seem significant and why
- Working out how the details fit together. What does this “pattern” of detail mean? What else might it mean?
- Identifying which details don’t fit with this pattern. Do they fit with other information to form a different pattern? Does this new pattern make you think differently about the situation?
- Considering possible explanations (developing hypotheses) for what is happening

**Understanding chronologies.** One way of gaining an overview of the service history of the family at a glance is to colour code chronologies, for example highlighting in red to indicate periods when services have been involved for children deemed to be at high risk, highlighting in green when only universal services have been involved, highlighting in yellow when additional services have been provided etc. In this way it is possible to tell whether there were long periods with high levels of services for the child and family for known risks to a child, or, alternatively, whether there were times when no known concerns were apparent.



- As you gather information, continually ask yourself “*What is this telling me?*”
- Colour coding chronologies may help to reveal patterns of service delivery in relation to particular events or difficulties in families which have been known to agencies over long periods of time.
- Differentiate between fact and opinion. *Facts* are statements that can be verified or proven to be true or false. Factual statements from reliable sources can be accepted and used in developing hypotheses, making judgements and drawing conclusions. *Opinions* are statements that express feelings, attitudes, or beliefs and are neither true nor false. Opinions are one person's point of view that you might accept or reject. *Informed opinion* is the view of an expert or authority.

When information is gathered, evaluated and analysed, judgements are formed (for example, about how the family is functioning, about whether the child has unmet needs, about whether the child is safe) and decisions made about what needs to happen next. Clearly, these judgements and decisions may have significant implications for children and their families.

We know that, in some situations, a quick judgement is needed, for example when deciding whether children may be at such grave risk that urgent action is needed to protect them. It is therefore both necessary and inevitable that some assessments and judgements will be based on very limited information about the child and the family. But such judgements don't have to be 'forever' judgements and should be regarded as being very tentative and open to revision as further information subsequently becomes available.

### Good practice in this stage of the assessment process includes:

- Recording judgements and decisions
- Communicating judgements and decisions
- Demonstrating clear links between the information gathered, the analysis of the information, the judgement formed and decisions made
- Ensuring clarity and understanding about the rationale and grounds for judgements and decisions

### What assessment isn't

To help identify what makes a good assessment, it's useful to clarify what an assessment isn't:

- ✗ It isn't just about ticking boxes or completing a template or form
- ✗ It isn't just about collecting and presenting or recording a raft of information
- ✗ It isn't just a descriptive narrative of child and family circumstances. It's an understanding of how a family is functioning and what that functioning means for the child
- ✗ Good assessment isn't rocket science. It isn't science of any kind, but it does involve chemistry. Assessment is a complex activity, it can be highly challenging and it is underpinned by that blending of your practice knowledge, expertise and skills, your life experience and your intuition
- ✗ Good assessment isn't based on wishful thinking. The practitioner needs to know why they are seeking the information in the first place, and then to be able to "process" a mass of multi-faceted and sometimes contradictory information to then come to a view about what it all means for the child.

## What does good quality assessment practice look like?

There is evidence to support the link between good assessment and good outcomes for children but the other side of the coin is that poor assessments potentially have far reaching consequences, as we know from a number of inquiries and serious case reviews.

What can be regarded as “good quality” assessment practice is characterised by the following:

**It ensures that the child remains central.** This means maintaining a clear focus on the child throughout the assessment process and not being side-tracked or diverted or sucked in. It means the child’s views, perspective and experience of the situation are part of the assessment and are seen as important information in their own right. It means always acknowledging when assessing needs and risks, that both the child and the parents can bring their own perspectives and unique knowledge to the assessment process.

**It uses full, relevant and accurate information.** Good assessments are based on robust and comprehensive information gathering yet we know from many serious case reviews that significant information is often overlooked, disregarded, not checked, tested or verified, or not made known and shared.

**It explores the interplay between historical factors and the present situation.** It’s crucially important when undertaking assessments to consider the current reason for involvement in the context of the family history and what has happened previously. Good assessment practice ensures there is sufficient time allocated for the essential task of careful reading and analysis of the case history.

**It recognises the importance of a chronology and a good understanding of the family’s history.** This means understanding the child’s story, constructing a family tree (genogram), understanding personal and family relationships and relationships with professionals/practitioners (ecogram), developing a timeline of significant events, and establishing the interventions that have been tried previously and their success or otherwise. It’s important not to focus on “here and now” information at the expense of historical information about the child and family which might be sitting in case files.

**It makes good use of information from a range of sources,** taking account of the perspectives of the child, the family, professionals and practitioners and significant others.

**It identifies needs, risk and protective factors** and arrives at a view about how far, or to what extent, change (if indeed change is necessary) is possible within the child’s timeframe.

**It includes analysis** that makes clear links between the recorded information and the judgements and conclusions made, the recommendations for intervention or the decision not to take any further action.

**It is transparent.** This means providing a clear rationale and being explicit about the assumptions made, the methods used, any uncertainties and the information relied on to form judgements and reach conclusions. In other words, it shows the “workings out”, it spells out clearly why you think what you think.

**It avoids jumping to conclusions** in an attempt to make sense of seemingly unconnected, misleading and/or conflicting information. Good assessment practice involves what is referred to as “hypothesising”, which means trying out different interpretations of the information, considering a number of possible explanations for what is or might be going on, challenging initial thoughts. This can be difficult for practitioners, not least because it is dependent on being prepared to admit to being wrong and changing your views.

**It is timely.** Clearly, delays in assessing children’s needs, and subsequently in providing the appropriate interventions and services to improve children’s health and wellbeing, are unacceptable. But this has to be balanced with the quality of the assessment and an understanding that some assessments will take more time. No assessment can guarantee certainty but repeated assessments of poor quality are to be avoided.

**It is based on a clear picture of what life is like for a particular child** and a real sense of the child’s day to day experience living in his/her family.

**It critically reviews the evidence for judgements made.** Research shows that we form opinions of people when we first make their acquaintance and all subsequent information is interpreted in the light of those beliefs. Good assessment practice acknowledges that, since this initial view is based on very little evidence, it should be treated as a very tentative hypothesis which is critically reviewed throughout the process as more information is gathered. It is open to accepting new pieces of the jigsaw and seeing how they might fit together to make a different picture.

## How to get more analysis into assessment

Because assessments of children really do matter, as children's services professionals and practitioners we need to take the time to pause and critically reflect on our approach, our thinking and our decision making throughout the process. Developing skills of critical thinking and reflection will not only help to avoid the assessment traps and pitfalls but generally enhance our practice.

Critical and reflective thinking encourages practitioners to analyse information more rigorously and methodically, and to question the reliability of the sources of information and the content of the information collected. So in this context, 'critical' doesn't mean slugging off; it means not passively accepting everything you read, see and hear, but questioning, evaluating, making judgements, finding connections. It means being open to other points of view and not being blinded by your own biases or assumptions. It means looking at other ways of fitting the jigsaw pieces together to make a different picture. For example, during an interview, a practitioner might find parents' anger at being suspected of abusing their child a reasonable response from an innocent couple. Thinking critically and reflectively, however, might suggest that they had used anger to control the direction of the interview and distract the practitioner away from important issues.

Critical and reflective thinking is a skill which involves being able to:

- Understand the logical connections between pieces of information
- Detect inconsistencies and inaccuracies
- Identify the relevance and importance of pieces of information
- Reflect on the rationale for one's own beliefs

Building critical reflection into your practice also allows for regular review of what you think in the light of new information. Whilst intuition does have a place in the assessment process, drawing as it does on the practitioner's life experience and practice knowledge, it is prone to bias, is not necessarily reliable, and may lead to premature judgements or conclusions. So intuition can be a good place to start but not to finish, and its use should be supported by both critical analysis and reflection.

**How can you do this?** One way is to adopt a much more questioning approach in your assessment practice. You can do this individually, with a peer who is not involved in the assessment, within the multi-agency assessment group, and in supervision with your manager, throughout the assessment process.

**Some questions** to focus on and debate to promote a more critical and reflective approach:

Why do you think what you think?

What's the evidence that supports what you think?

What's the evidence that doesn't support what you think?

How can you test your view?

What are other possible explanations of what is going on?

What's the evidence that supports those alternative explanations?

What were your initial assumptions about the situation? Is there any hard evidence to support those first thoughts?

Are you assuming or taking for granted something you shouldn't?

Are you remaining curious and inquisitive about what you are seeing, hearing and assessing?

Have you considered the presenting issue in the context of the family's history?

Have you carefully examined case records or have you mostly ignored them?

Do you know who lives in or frequents the family home and have you assessed their relationship to the child and potential risks?

Have you taken steps to get to know other significant adults including absent parents who have a bearing on the child's life?

What is your relationship with the parent(s) and how does this influence your assessment?

Have you spoken with, really listened to and understood those who know the parents better than you do?

Do you have the confidence to challenge parents appropriately?

Have you been honest and open with the parents about your concerns while acknowledging strengths?

Are you absolutely clear about your role and responsibilities, including the responsibility to share information, and those of other practitioners in a multi-agency assessment?

How have you made sure that information you have shared with another practitioner or agency has been properly understood?

Could you be or might you have been deceived, misled, manipulated, intimidated or threatened by the parents or other member of the household?



- Gather information from a range of different sources and different perspectives using a mix of methods
- Look for trends or connections in the information
- Link information from different sources to draw logical conclusions
- Don't become burdened with information that is irrelevant
- Be clear about the need to gather more information but know when to stop
- Double check, test and verify information and any assumptions
- Identify possible cause-effect information
- Drill down to find the possible root causes
- Be open to changing your judgement in light of new information or if the situation changes

**You'll know you are thinking critically and reflectively when:**

- You are meticulous, precise, comprehensive, exhaustive - in gathering information, checking information, verifying information, examining information, evaluating information, understanding information
- You consider a variety of possible viewpoints or perspectives
- You remain open to alternative interpretations of a situation
- You avoid making snap judgements
- You don't jump to conclusions
- You consider the influence of motive or bias or assumption or emotion
- You are willing to challenge your views and investigate conflicting information
- You remain open minded, curious, sceptical

## Assessing risk

Need and risk are said to be two sides of the same coin and assessing risk is a key component of children's services assessment practice. It's integral to what we all do. Very simply, a risk assessment makes a prediction about what might happen to a child by gauging the probability of a future adverse event or situation.

Although there have been calls from a number of sources for the development of the 'ultimate' risk assessment tool, it should be recognised that there is no fail-safe checklist or framework or matrix or aide memoire. Professional or practitioner judgement can never be eliminated from the risk assessment process. Risk assessment tools can be very helpful in guiding understanding but they cannot be absolutely relied on to provide definitive answers to levels of risk faced by children. They cannot ensure certainty.

So, what does risk assessment actually involve?

**Asking the right questions.** Professor Eileen Munro states that in order to manage risk, we need to identify:

**What *has been* happening What *is* happening now**

**What *could* happen in the future**

**How *likely* it is**

**How *serious* it would be if it did happen**

A combination of seriousness and likelihood then leads to an overall judgement of risk. Any risk assessment should involve the weighing up of the pros and cons of a child's circumstances, including their resilience and any protective factors, in order to inform decision-making as to what should happen in terms of intervention and/or protection.

### Remember.....



Current harm is not a risk. It's a reality.



**Good risk assessments** are underpinned by the elements of good assessment practice which have been highlighted in previous sections of this *Rough Guide* and:

- Are based on sound evidence and analysis
- Are focused – on risk to whom, risk of what, risk from whom or what
- Use risk assessment tools to inform rather than replace professional judgement
- Construct a coherent story about the child’s situation including family strengths and resources
- Appreciate that there will be ambiguity and uncertainty about some matters
- Are constructed through the testing of hypotheses (possible explanations) and a curiosity that sees people in their contexts
- Are not just focussed on *future* harm but also consider *cumulative* harm (that is, harm which is caused by a series of adverse circumstance or events or by multiple different circumstances and events)

## Assessment pitfalls

There are number of assessment traps which it’s all too easy to fall into so always be aware of the pitfalls, some of which are highlighted below:

**Believing that there is a ‘best’ assessment or risk assessment tool or model or framework which can guarantee certainty.** There isn’t. When assessing children’s needs, including assessment of risk, there are no certainties.

**The rule of optimism.** This is where a practitioner’s judgement is clouded by taking an overly positive view, for example based on the belief that parents want the best for their children or being overly optimistic about signs of progress.

**The rule of pessimism.** The opposite to the one above. This is when a sense of hopelessness about the child’s and family’s situation pervades the entire assessment process.

**Focusing on the content of the referral or each new incident** rather than taking a long term perspective which considers the family’s history. Incidents and referral information need to be considered in context; concerns need to be connected to what has gone before in order to build up a full picture of a child’s life. Start with your agency’s own files and records as sources of information. Remember also that focusing too narrowly on referral information can mean that some children will not receive the services they need because they’re assessed as not being in immediate danger. Yet we know that inadequate parenting can mean children are at risk in the longer term.

**The initial hypothesis (possible explanation for what is happening) is arrived at too quickly and hung on to** with either more or less attention being paid to new information, depending on whether it supports or undermines the practitioner's beliefs about what is happening. This might be scepticism about new information that challenges existing views or being uncritical about information that supports existing views. For example, if you really like a parent and want to avoid removal of the child, you can see the positives (such as the reduction of substance use) but play down or even fail to see the negatives (such as the continued neglect of the child).

**Decisions are made on the basis of incomplete or inaccurate information.** In some situations, assessments have to be undertaken and judgements made quickly. But there is a 'big picture' to be seen, it takes time to gather all of the information from all sources in order to understand that big picture, and it's important to critically review those initial views as more information is gathered.

**Being adult focussed** and concentrating on the parents' needs and issues to the exclusion of the children. It is all too easy to be diverted, particularly in complex family situations where the needs of the adults can take priority over those of the child or when parents deliberately deflect attention away from the child.

**Parents are only superficially engaged.** Beware the pitfall of artificial or disguised compliance. We know from serious case reviews and research that some parents can create the illusion that they are co-operating with practitioners undertaking the assessment and will say what they think practitioners want to hear. This can lead to information being misinterpreted. A 'child's eye view' needs to be maintained during assessment. Closely observing and witnessing the parent-child relationship directly is a very different approach to that of simply asking the parent to comment or reflect upon their parenting, which for someone feigning co-operation and compliance offers a wonderful opportunity to deceive the practitioner.

"The worker in the Baby Peter case mistakenly saw the mother as compliant despite the existence of evidence to the contrary".  
*Quote from Prof. Eileen Munro (200*

**Accepting everything at face value.** People lie. People deceive. Some parents can put on a display in front of practitioners. Check out, check out, check out. Know the difference between fact and opinion. Take a more critical approach to the information gathered. Look below the surface to see what underlying issues are of significance. Consider what *might* be happening. Also, don't fall into the trap of taking the parents' reactions during assessment as being representative.

**Being satisfied with just seeing the child.** Certainly, children need to be seen as part of an assessment but this isn't enough. It's imperative that children are not only seen but spoken to (wherever possible on their own) and observed. Be vigilant to the possibility of a parent obstructing access to the child or preventing access by giving seemingly plausible reasons why the child cannot be seen.

**Listening only to mothers and not engaging fathers,** extended family members and significant others. It's important to get as full a picture as possible of who is in the household and there has to be appropriate assessment of all carers, partners and friends. Too often, assessment is overly focused on mothers, leaving fathers and other members of households out of the analysis.

**Colluding with hostile and intimidating parents.** This could lead to a situation where practitioners make only minimal attempts to make home visits (that very gentle knock on the door), do not question when appointments are missed and accept unlikely explanations for what has been happening. The practitioner does not challenge parents because of being wary of provoking a violent response or impacting on what is perceived as a positive professional relationship. Issues are then not assessed as rigorously and robustly as they should be and the assessment is flawed.

**Over-empathising with parents.** The risk of being overly empathic with parents or other family members is very real. In their effort to build rapport and communicate understanding of parents' feelings and experiences, some practitioners may lose their objectivity and 'over-identify' with the parents and their perspective so that risk factors are minimised or ignored.

**The danger of "groupthink".** This can occur during multi agency assessments when the group of professionals and practitioners try to minimise conflict or disagreement and reach a collective decision without critical evaluation of alternative ideas or viewpoints or by being selective with information. Be aware that inter agency consensus is not always safe. Be aware of the potential for assessment distortion led by one 'powerful' agency. Beware the pitfall of just going along with what others think. Always express your views based on your understanding of the child's and family's situation, your knowledge based on your practice experience and expertise, and your intuition.

**Inter-agency mis-communication.** Remember that information shared does not mean information is understood. Sometimes professional jargon gets in the way of understanding or information is mis-interpreted.

**Over-reliance on information collected by others.** Whilst it is important to collect information from other people who have been or are involved with the child and family, practitioners work in different assessment contexts so beware the risk of relying too much on information that has either become outdated or is misleading because the *focus* of information gathering was different.

**Failure to revise assessments.** Be open to consideration of alternative perspectives or new information. Be prepared to change your mind about what you think is happening and why it might be happening.

### Remember.....



Assessment is an ongoing process, not a one off event. Family life is dynamic and changing and through the process of assessment new information may come to light. It's critical that you are aware of this possibility and are open to changing what you think and changing your recommended courses of action.

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