

Rethinking children's social work

Department for Education Children's Social Care Innovation Programme

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Focus area one: Rethinking children's social work

1. Introduction

'By rethinking the organisational system as well as professional practice frameworks that underpin children's social work, I believe we can better support social workers to do the work they came into social work to do, offer effective help and support to families and take more decisive action to protect children. We need brave, principled and dynamic organisations to lead the way in new thinking about how to get this system working to its full potential.'

Isabelle Trowler, Chief Social Worker for Children and Families

The Children's Social Care Innovation Programme is a two year programme supported by £30m in the first financial year and substantially more in the second. The Programme's key objective is to support improvements to the quality of services so that children who need help from the social care system have better chances in life.

Since the Programme was announced, the Department for Education has been assessing the opportunities for innovation in children's social care. Experience from other programmes shows that innovation is better prompted by specific, defined problems than by a general call for ideas¹. We have therefore chosen two focus areas for the Programme, and rethinking children's social work is one of these.

This document seeks to fuel debate and discussion about this focus area in particular. It presents the conclusions of an intensive eight week evidence-gathering project undertaken by the Department of Education and Deloitte Social Care Practice. It summarises our analysis on:

- the challenges that children's social work is facing at the moment;
- what might help to overcome these challenges; and
- how the Innovation Programme will operate in this area to support the sparking and spreading of innovative approaches.

We are asking everyone with an interest in supporting vulnerable children and families to address three fundamental questions:

 How do we want our social workers and other professionals to help our most vulnerable children and families?

¹ Those interviewed or engaged include NESTA, the Young Foundation, Cabinet Office Mutuals Programme, BIG Lottery Fund, Deloitte Innovation Pioneers, Doblin (Innovation Consultancy), DWP Innovation Fund, the Innovation Unit, Big Society Capital and the CLG transformation challenge.

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- What are we asking practitioners to achieve?
- And what kind of environment and practice model would best enable them to achieve this?

We hope that this document will help those interested in rethinking children's social work to engage with these questions.

2. The case for innovation

'Local authorities and their partners should start an ongoing process to review and redesign the ways in which child and family social work is delivered, drawing on evidence of effectiveness of helping methods where appropriate and supporting practice that can implement evidence based ways of working with children and families.'

Recommendation 13 from The Munro Review of Child Protection, published May 2011

Recommendation 13 of Professor Munro's Review of Child Protection set out an expectation that local authorities should begin to review and redesign their services to provide child-focused, high quality help to children and families.

A number of local authorities have grasped this challenge and have made great strides in implementing transformational plans. However it is clear that, two years on from the publication of the Munro Review, we have not yet seen a step change in the quality and impact of children's social care. We need to find innovative ways to improve and redesign service delivery to achieve higher quality, improved outcomes and better value for money.

The aim of the Innovation Programme is to provide support to local authorities – and other organisations who may want to work with local authorities – who are ready to embark on the kind of changes called for by Professor Munro.

3. What challenges does children's social work face currently?

'The level of increased prescription for social workers, while intended to improve the quality of practice, has created an imbalance. Complying with prescription and keeping records to demonstrate compliance has become too dominant. The centrality of forming relationships with children and families to understand and help them has become obscured.'

Final report of The Munro Review of Child Protection, published May 2011

The way politicians in the past have reacted to failures within the system has encouraged a defensive approach based on compliance with the minimum demands of bureaucracy, rather than a pursuit of excellence.'

Secretary of State for Education's speech to the NSPCC, April 2013

Below we have summarised what our research and interviews have told us about what can impede good social work practice. Examples of the messages that we heard through our research are as follows²:



Many of the people we interviewed felt **a culture of blame** when something goes wrong had created a challenging context for children's social work. This can be **fuelled by the media and political climate**, as referenced by the Secretary of State above.

As has been well reported in other places, this context can at times lead to **over-bureaucratisation** and a **managerial response** that seeks to use processes to manage risk³. Some interviewees felt this meant that a disproportionate amount of resource and effort was becoming tied up in 'watching' rather than 'doing'.

Some interviewees felt that the balance of time that social workers spend on **assessing** the needs of children and **monitoring** their situation, as opposed to **intervening** to help them directly, had become out of kilter. They felt the social worker had in some ways become a **'case manager'**, asked only to organise interventions from others rather than

² These statements have been taken from notes of a discussion event and interviews we have conducted for this project. The wording of statements has been amended to fit this format but the sentiment has not been altered.

³ See, for example, chapter 3 of the Munro Review of Child Protection Final Report (May 2011).

deliver them directly. Adding to this, Sir Martin Narey has highlighted **training in skills for practice** as an area of weakness in initial social worker education https://www.gov.uk/government/publications/making-the-education-of-social-workers-consistently-effective⁴.

A number of interviewees also felt that at times **bureaucratic processes within the local authority** could be barriers in the social work context, even if they made sense for the wider corporate body.

Our research also highlighted a perception that children's social work was less successful when an organisation did not have a strong and consistent **theory or vision** about *how* they wanted their social workers to work with children and families. The 'job' of the social worker can at times be **defined in process terms** ('I carry out assessments, I carry out child protection investigations') rather than in terms of the **type of relationship** the organisation wants the social worker to build with children and families, and the **outcomes the social worker is responsible for delivering** ('I provide help to children and families, using evidence-based methods, so that they can change their future').

Added to this, Donald Forrester's comparative evaluation of the systemic units approach to social work found that the social worker in a 'traditional' local authority set-up still often worked alone, managing a set of cases in which no other member of the team was directly involved⁵. They had to consult their manager when making decisions, but the manager did not experience the direct work that had been done with the family, so was reliant on the social worker's reading of the situation. Supervision did not allow time for discussing all cases, and was focussed on agreeing next actions. Team meetings were not generally used for case discussion, so the social worker did not have a forum to engage in critical thinking and problem solving with the whole team, and could not regularly draw on the team to support direct work.

Of course, some authorities have overcome these challenges and are delivering high quality support for children and families. However, the question we need to ask is - does the context that social work operates in always enable this effective practice to the greatest possible extent?

4. Where these challenges have been overcome, what are the key ingredients of success?

The second phase of our analysis has looked for examples of success, and at promising innovative approaches at home and abroad. Through this we have identified a set of 'key

⁵ 'Reclaiming Social Work? An evaluation of systemic units as an approach to delivering children's services', Forrester et al., June 2013.

⁴ https://www.gov.uk/government/publications/making-the-education-of-social-workers-consistently-effective

ingredients' for successful children's social work which we hope will be of use to local authorities and others considering how they might do things differently.

In the English context, we have looked at the approach taken by authorities with a record of success. We have also analysed emerging examples of innovative approaches, both in England and internationally, to see if similar themes and features are present in these approaches.

At the heart of the examples we analysed was a clear and well-articulated vision for what the service was there to achieve for vulnerable children and families. There was also a belief that social workers should be making change happen for families and, where necessary, taking decisive action themselves, rather than just assessing and monitoring. These values were shared throughout the whole organisation and leadership. Work was often underpinned by a particular evidence-based theory and/or set of interventions that shaped the way that social workers operated, both in direct work and in their critical thinking and decision making. Staff were well supported by managers and colleagues, but also challenged to develop multiple hypotheses and try new approaches when something wasn't working. There was often easy access or joint working between social workers and clinicians – particularly mental health practitioners.

Below, we have outlined the full range of factors that came through in our analysis of successful or promising approaches.

Tools and practice

Environment, culture and values

Workforce and structure

Figure 1 - Common ingredients of successful or promising approaches

Tools and practice

- The organisation has a shared theory of practice, so a particular theory shapes and underpins the way all social workers in the authority work with families.
- Social workers deliver evidence-based direct work and have the skills to engage children effectively.
- Management practices, in 1:1 supervision or team meetings, encourage social workers to reflect critically on cases, develop alternative hypotheses and be open to multiple lines of enquiry. Supervision isn't just about agreeing a 'to do' list.
- Theory is also used to encourage critical thinking and it provides a shared professional language.
- Social workers have access to high quality and flexible administrative support an all-round trouble-shooter who gets the practical things done for families.
- Managers and staff use data and quality assurance mechanisms to provide rich feedback which gets to the heart of the fundamental questions, 'are children being helped?' and 'are children safer?'.

Environment, culture and values

- Work with children and families is guided by a clear and well communicated set of values and an ambitious vision for vulnerable children, shared by all.
- The organisation shares a commitment to listening to children and trying to build constructive relationships with families.
- Leaders are committed to minimising the impact of bureaucracy on practice.
- The organisation has a permissive culture that encourages creativity from staff.
- The organisation fosters a learning culture.
- Front line staff and first line managers have the appropriate degree of budget/ resource control and decision-making authority.

Workforce and structure

- The service provides intensive support to the most vulnerable families.
- Teams are interdisciplinary (i.e. CAMHS workers are embedded), and/or social workers have easy access to clinical and therapeutic support for families.

- Teams are reasonably small with a 'flattish' structure.
- All staff have extensive training in the organisation's practice theory, and in evidence-based techniques for direct work.
- The organisation provides career paths that enable experienced staff to progress whilst staying in practice.
- Managers get involved in direct work and provide mentoring and coaching to staff on how to do this effectively.
- The team shares some responsibility for cases collectively, so they work together on a case where this is what is needed.
- Work is done at the right level, with professional time focussed on intense work with the most vulnerable families, backed up by high quality admin support.

Below we have provided three case studies which aim to bring to life how some authorities have redesigned their services in ways which exemplify some of these principles.

Case study: Derbyshire

Derbyshire has invested in a £1.3m training programme for all of its social workers and social work managers. All workers are trained in systemic therapy, and how to take a strengths-based approach focussed on building the resilience of families where this is possible. The formal programme is around 18 days with a written test at the end. To embed these new skills in practice, workers receive reflective 1:1 and group supervisions.

This approach sits alongside a strong early help offer through multi-agency teams, and a social pedagogy approach being taken in children's homes and more latterly across all foster carers.

Derbyshire's approach was praised in its recent Ofsted report where it was also found to be 'good'. It too is noticing a fall in the numbers of children who need to be taken into care, thanks to the more decisive and effective work with families. It is convinced that this way of working builds confidence and engagement with families and creates more meaningful and qualitative conversations.

Case study: Social Work 'units' (Reclaiming Social Work)

The Reclaiming Social Work model stemmed from the recognition that social work is an especially challenging profession requiring a range of complex skills, a sound grounding in professional knowledge and an understanding of its evidence base.

Central to the concept is the creation of social work 'units', which are small teams made up of a Consultant Social Worker, a qualified social worker, a child practitioner (often a newly qualified social worker), a unit co-ordinator who provides high quality administration support, and a clinician who provides therapeutic input to families. The whole unit is trained in the use of systemic theory and uses this to underpin its work with children and families. Rather than being assigned to one individual, cases are allocated to the Consultant Social Worker and worked by the team collectively. Cases are discussed by the team at a weekly group supervision, which is used to problem solve and think critically about the strategy the team is taking with each family.

The units are intended to have a greater shared understanding and responsibility for cases. Following intensive training in systemic approaches, they are expected to provide more intensive support by bringing more resources to bear on each case and through high quality direct work. A number of authorities across the country have adopted a social work 'unit' model, influenced by the success of the model in Hackney, where it began. As part of our research, we held a round table with seven authorities who were clear about the potential benefits of the approach.

Case study: Essex

In 2008 and again in 2010, Essex's safeguarding and child protection services were found to be inadequate. In 2011 the authority achieved an 'adequate' rating and this year they have been rated as 'good' under the new – and more challenging – Ofsted framework. What has brought about this improvement in practice?

Essex says that at the centre of its reform has been an unremitting focus on developing a shared set of values about how social workers should work with families. The role of a social worker is, wherever possible, to enable families to make changes and take responsibility for the parenting and wellbeing of their children. Children's social care places a premium on being a learning organisation. Practice guidance and frameworks are preferred over more narrow procedure, encouraging social workers to exercise professional judgement. All managers receive training in systemic social work, and high quality reflective supervision is encouraged, including through regular observations of direct work. Essex has designed smaller teams with a smaller caseload, focussed on working more intensively with the most vulnerable children. Essex and partners have very clear thresholds, targeted early help services and workflow arrangements so that children and families receive the right service to address their needs without delay.

Thinking beyond the local authority

As shown by these case studies – and by other councils delivering 'good' or 'outstanding' children's social care services – innovation and improvement in social work can be delivered with great success by local authorities. We want to hear from local authorities with similar ambitions to innovate so that we can support them through the Innovation Programme to realise those ambitions.

We are also aware of local authorities who are interested in innovating structurally, including providing social care services through new organisations – including mutuals and community interest companies – at arm's length from the council. Since 2008, a number of areas have been testing such models. For example, Staffordshire Council established a social worker-led mutual, Evolve YP, in 2009 to provide services for children in and leaving care. The local authority was recently rated as 'good' by Ofsted for its children's social care services.

Since November last year all local authorities have had the freedom to delegate functions relating to children in and leaving care to third party providers. Some authorities have since asked whether these same freedoms could be provided for wider children's social care functions, allowing greater structural innovation in pursuit of improved social work practice and better outcomes for children. Such bodies would, of course, be subject to the same rigorous regulatory and inspection requirements as local authority-provided services, but would allow local authorities, should they wish, to develop new autonomous organisations specifically focused on high quality children's social work. Local authorities interested in pursuing these reforms believe that the right external delivery model can offer a way of releasing the latent creativity contained within their organisation and achieving greater innovation and staff engagement than would otherwise be possible.

Emerging evidence from theoretical research and from public sector organisations pursuing or interested in pursuing alternative delivery models highlights the following potential benefits:

- A stronger purity of purpose for the organisation, because the leadership is not also playing a corporate role within a bigger organisation which has to balance competing draws for its attention and budgets;
- A sharper focus on the end user and a higher quality service, because the organisation can have a clearer purpose and can be more nimble;
- Greater organisational adaptability and flexibility because the organisation is not constrained by the rules of the bigger bureaucracy it sits within;
- An increased scope to innovate, and to enable staff to make their ideas a reality, because of the freedom from organisational rules and restrictions;

- Consequently better staff engagement, energy and enthusiasm, particularly where some element of staff control features in the model;
- Potential for making savings and accessing alternative sources of funding;
- Potential for achieving better economies of scale if the new organisation covers a larger area or wider range of services than the previous model; and
- An opportunity to create a fresh start for the organisation.

In response to these calls, and as part of its commitment to ensure that the Innovation Programme removes barriers which prevent local authorities taking new approaches to providing high quality social care, the Government is currently consulting on extending the freedom to delegate functions to all elements of children's social care⁶.

We are clear that the delivery model *in and of itself* will not deliver these benefits. Form must follow function. The thing that shapes outcomes for children and families is social work practice: what the social worker does with a family once he or she steps through their front door. We are therefore asking you to consider first how you want your social workers to help families and then ask whether the current structure is the best way of achieving that vision. For authorities who are interested in an alternative delivery model, the Innovation Programme could provide the additional support required to help with the up-front costs of moving to such a model.

The following case study outlines an example of how two authorities would like to use these freedoms.

Case Study: Achieving for Children – Richmond and Kingston

The boroughs of Richmond and Kingston have recently amalgamated their children's services into a single shared organisation, called 'Achieving for Children' (AfC).

Achieving for Children launched on 1 April 2014 as a social enterprise. The boroughs believe that the innovative community interest company model of AfC will provide better social, educational and community outcomes for children in Kingston and Richmond.

Based on the principles and values of social enterprise, Achieving for Children will:

- put children and families at the heart of all it does
- work in partnership and seek partnerships that maximise cost-effectiveness
- increase the capacity and resilience of public services

⁶ See https://www.gov.uk/government/consultations/delegating-childrens-social-care-functions

 provide a centre of excellence and innovation that will be available to other authorities and public service providers, including help to authorities responding to improvement notices

The councils state that the transitional cost of delivering Achieving for Children has been £1.5 million, with savings of £6 million over three years from the initial merging of services. They also feel there will be wider efficiency benefits for the services as different opportunities and ways of working are fully developed by the new organisation.

5. What is the Innovation Programme trying to achieve through the 'rethinking children's social work' strand?

The overall aim for this strand of the programme is to kick-start systemic changes which, in conjunction with Sir Martin Narey's and Isabelle Trowler's work on improving the quality of social worker education and training, could radically improve the quality and impact of children's social work. Ultimately, this is an opportunity to improve the lives of our most vulnerable children and families.

Therefore the Innovation Programme is looking to work with local authorities and other organisations who wish to redesign radically their approach to children's social work. We will support:

- 1. the implementation of innovative models for children's social work that have already gained some traction in the system, but have not spread widely;
- 2. the design and implementation of **new** approaches to children's social work.

For example, we are already talking with:

- A group of local authorities who are interested in implementing a systemic approach to children's social work across their whole organisation, which could mean redesigning case recording and auditing, management practices, techniques used in direct work, supervision, submissions to court, and more.
- A group of local authorities who have designed a new approach to social work practice based around getting social workers back into intensive work with families. They want to roll out a set of specific interventions with a sound evidence base; rethink some of the processes that take time away from front line work; and develop a new role for administrative support so social workers can focus on the tasks that they are uniquely skilled to do.
- A group of authorities who are already implementing variations of a 'unit' model, like that pioneered in Hackney.

• An authority that wants to provide its children's services through a third party organisation.

In two years, we want to have worked with **twenty or more** authorities, including some who are testing external delivery models, as well as other practice and structural innovations. By 2016, we want to see the projects we have funded working together and capturing lessons in such a way that their experience and emerging findings are triggering a **'ripple effect'** of innovation across the system.

In terms of what we are looking for from proposals, the 'dos' and 'don'ts' outlined below should give you a sense of the scale of our ambition.

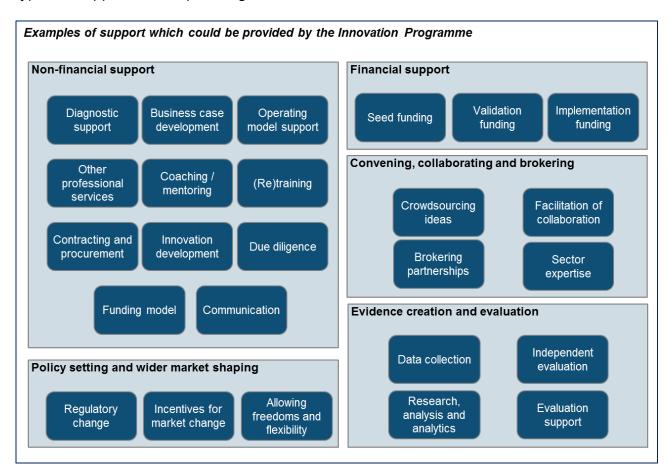
| Do | Don't |
|--|---|
| Be creative and seek to test new | Make assumptions about our level of |
| approaches which have not yet been tried | ambition in size, scale or level of risk we |
| Third about the transfer of the state of | are looking for in new approaches |
| Think about linking with other | |
| organisations who want to change too, so | Rule out ideas based on barriers created |
| you can learn together and create more | by current guidance, regulation or policy. |
| generalised findings | We will help you to work with individual |
| Get in touch even if you only have a | regulators and policy-makers on fresh |
| rough idea | approaches |
| Tough idea | Worry too much about how to make it |
| Be ambitious in scale and seek to create | happen (yet) |
| whole system change | Happen (yet) |
| | Only apply if you are a current provider of |
| Look to test the validity of an independent | social care services. We are interested in |
| model (i.e. one commissioned, but not | hearing from anyone who has a good idea |
| directly provided, by the local authority | |
| Seek to work with partners – both 'usual' | Assume that we will fund a large number |
| and 'unusual' to help foster innovative | of small pilots. We are looking for whole |
| approaches | system change |
| | Ask for support for something that you |
| | could do anyway. We want you to really |
| | engage with the barriers that have held you |
| | back to date |
| | |
| | Assume that we are only interested in |
| | structural innovation |

In a children's social work context, the type of challenges you may want to pose yourself are:

- Are there processes or procedures that get in your way and don't really help to keep children safe?
- Is there a better way to do case recording?
- Are social workers engaging enough with children?
- Are you investing too much time in checking and auditing? What would you
 really like to do with this time?
- Would you like to do case conferences or core groups in a different way?
- Have you got 'who does what' within your organisation right?

6. What is the Innovation Programme actually offering in this area?

The paper on the design of the Innovation Programme sets out our analysis of the types of support we think organisations will need if they are to innovate successfully. The main types of support we are planning to offer are:



Concrete examples of the kind of support we might consider giving to ideas like those outlined above are:

- Consultancy support to work an idea up into a detailed implementation plan
- Establish learning sets so authorities going through similar changes can learn together
- Help to broker partnerships e.g. with a VCS organisation the local authority may want to partner with
- Support in local negoatiations about corporate flexibilities e.g. with HR and finance
- Assurance to the Lead Member and Chief Executive that government is supportive of the new approach
- Assessing suitability of alternative delivery models for your service
- Brokering a dialogue with regulators about e.g. a new approach to recording
- Exemtpion from particular processes outlines in statutory guidance e.g. flexibility over assessment timescales
- Funding for extra management capacity over the transition period
- Funding to help with staff training costs
- Funding for a tracking system to monitor progress on individual cases over the transition period
- Evaluating which structural innovations might work best in your context

7. What do I do next if I want to be part of the Innovation Programme?

The exact process for what happens next will be confirmed once we have appointed a delivery partner (planned for May 2014). Further information will be made available then, and in the meantime please register your interest by emailing us at: cs.innovationprogramme@education.gsi.gov.uk



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