



Keeping the Promise:

What's needed to deliver change
in social work practice

November 2021



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Summary

- The Promise sets out the type of social work practice UNISON members want to provide and came into social work to deliver: relationship based, child-centred, needs-based practice.
- Children and families' social workers strongly support the Promise but believe it won't be delivered unless significant extra staffing and resources are provided by the Scottish Government.

Relationship-based practice

- Relationships are the core of social work: services which do not provide the time for relationships cannot achieve the outcomes the Promise wants for children and families.
- Social workers say they do not have time to build relationships with children; understaffing, high caseloads, the demands of paperwork and process-driven systems mean they must prioritise those most in crisis.
- 74% of social workers say their team does not have enough staff.
- To make sure children are seen, 49% skip breaks or work late all the time to keep on top of workload.
- Organisational cultures prioritise paperwork over relationship-based work with children and families. A change in the managerialist culture and more time to spend building relationships are the changes most desired by social workers.

Child centred practice

- Decisions made about children are resource-led rather than child-led in the final instance; 90% said resources determine placement decisions when a child becomes looked after.
- A lack of funding and resources is a major cause of children's needs going unmet or not being best met.
- Listening to children is the cornerstone of social work practice, but social workers are frustrated at not being able to find the resources and services that children need and this contributes to placement breakdown for looked after children.

Supporting families

- 77% say that intensive family support in their area is not sufficient to meet need;
- Earlier intervention is needed but is not possible for financial reasons, with higher thresholds and tighter criteria used to ration support.
- There is a lack of resources to support the families of children with disabilities.
- There are strong concerns about the lack of support for kinship carers in comparison to foster carers.

Keeping The Promise

- To deliver the promised changes to practice requires significant investment by the Scottish Government in core front-line statutory children and families social work services to enable relationship based practice and earlier intervention. along with the wider services needed to support children and families within the community.
- Staffing and caseloads must be at a level that enables relationship-based work with children and the workforce must be properly supported.
- We shouldn't make promises to children and young people that we can't keep and it worries us that without the funding and resources needed, the Scottish Government is doing just that.



Introduction

UNISON is the trade union which represents social workers within local authority statutory children and families services. The 'care system' is much wider than this and involves every service involved in and around the lives of children and families. As the largest public services trade union, UNISON members work in the whole range of children's social work and social care services in the third sector, the independent sector and in the public sector. If the recommendations of the Independent Care Review ('The Promise') are to be achieved, it will be through our members that this will be delivered.

The aim of the Promise, described in the 2021-22 Programme for Government, is to bring transformational change to the lives of care experienced children and young people and their families, and place love and relationships at the centre for every child with experience of the 'care system'.¹ During August 2021 we surveyed our members in local authority children and families social work teams across Scotland. We wanted to find out their views about how to keep The Promise and what things need to change to enable that to happen.

We believe this is necessary because of the long standing and well known problems of underfunding and lack of capacity within statutory social work services. The 'workforce' evidence review for the Independent Care Review confirmed this.² We should remember that these same issues were being discussed 15 years ago, at the time of the 21st Century Review of Social Work ('Changing Lives').³

Our survey complements the social work research undertaken by Jane Scott for the Independent Care Review, which helped to frame the Promise.⁴ We have built on this by focusing specifically on social work practice within statutory services to examine this in more depth. Informed by Scott's research, the Promise identifies how social work practice need to change. We took this a step further by asking statutory children and families social workers, 'for these changes in practice to be achieved, what needs to change?' We asked this about each key aspect of practice change identified in the Promise:

- relationship-based practice
- child-centred practice/listening to children
- supporting long term loving relationships
- family support including long term support
- early intervention and prevention

We also asked questions relating to the workforce which is a key strand in the ten-year Change Programme.

The survey

An email was sent to members who work in children and family social work in early August 2021 inviting them to take part in our e-survey. Branches also used their social media and websites to ask members to take part. Members were also encouraged to pass the survey link to non-members to give them the opportunity to take part.

Response

The survey was completed by 261 members in cities (34%) rural areas (18.5%) towns (39.5%), and other locations across Scotland (8%). The majority were qualified social workers (n=196) of whom 50 were social work managers. For comparison, the survey conducted for the Independent Care Review was a survey of social work staff working in the statutory, third sector and private sectors Scotland-wide.⁵ It received 314 responses, 248 of these (78.9%) from qualified social workers. UNISON Scotland's survey was directed at the statutory sector only. Social work assistants, family support workers, and workers in other roles including through-care workers, residential care workers and children's rights officers also took part (n=52).



Context

Audit Scotland estimated that between 2016 and 2020 funding for social work services would need to increase by between 16-21% to cope with the projected growth in demand.⁶ That funding was not provided and as a result there has been a direct impact on service users. It has meant a rationing of social care support through the raising of thresholds and the tightening of eligibility criteria which has led to the reduction and erosion of contracted services. It has also affected the service provided by workers in statutory social work.

This situation was anticipated five years ago in the Review of Child Neglect in Scotland:⁷

“Today, the number of families living in difficult circumstances is likely to increase with demands on services which are subject to huge cuts. The suspected withdrawal of prevention services to preserve protection services, changes in welfare and benefit which may result in reduced financial support and the possibility of families moving due to overcapacity, and a universal credit system paid direct to adults could result in greater numbers of children suffering greater degrees of neglect in greater isolation.”

UNISON's report Save from Harm looked at the situation in local authority social work departments in 2019, two years into the work of the Independent Care Review.⁸ It described a statutory service under enormous pressure, with a dedicated workforce struggling to deal with the demands placed upon them:

- staffing shortages, with councils reporting 176 fewer social workers and 605 fewer business support staff than the previous year; 50 mental health officers short; 76% of respondents said their teams did not have enough staff;
- an increased reliance on unqualified ‘paraprofessional’ workers to carry out social workers’ duties;
- substantial cuts to administrative and business support staff, leaving social workers with an increased burden of work;
- 82% of staff said their workloads had become heavier in the past few years.
- social work staff regularly working unpaid in their own time to protect and support service users.
- 50% of staff ‘often’ considering leaving social work.

Because of this, statutory social work has become increasingly more reactive and crisis-led, with scarce capacity for preventative working alongside children and their families, or for practising early intervention.

The workforce evidence review conducted for the Independent Care Review presented a similar picture.⁹ Reflecting on findings from the Social Worker Working Conditions survey, it highlighted how poor working conditions – unmanageable workloads, excessive administrative loads, and lack of resources - contribute to high levels of workplace stress amongst social workers. It also found evidence that under capacity within the service is a key factor undermining relationship-based practice.

The Promise sets out an alternative: a vision of how things should be. It sets out what a different kind of system would look like, a system which supports the workforce to support children and families. We asked our members “What’s needed to make this happen?”



Relationship-based practice

The Promise says: The workforce needs support, time and care to develop and maintain relationships. Scotland must hold the hands of those who hold the hand of the child.

We asked social workers, “what are the main barriers to relationship-based work with children and families?”

Our members responded with a plea to be provided with the support, time and care that is needed for relational work. They told us that lack of time is the biggest barrier, followed by the demands of paperwork and process-driven work systems, high caseloads driven by crisis intervention, underpinned by a shortage of staff, and in many places high levels of inexperienced staff. These factors are closely inter-related. Very positively, a few social workers said that they were fortunate to be in a role where they did have the time to build relationships. However these were exceptions.

Key findings:

- 74% of social workers say their team does not have enough staff.
- 49% skip breaks or work late all the time to keep on top of their workload.
- More than 70% of social workers say they have to carry out tasks outwith their own workload (29% do so constantly and 42% quite often).

Social workers described the constant trade-off between prioritising time with children and families and ensuring that case notes, reports and child’s plans were completed to deadline and kept up to date. This was often resolved by social workers working beyond their contractual hours and in their own time to make sure that children were seen.

Management culture and the prevailing way of doing things was a barrier throughout the responses. Many felt that their organisational culture prioritised paperwork, and that relationship-based work and time spent with families was neither valued nor recognised by managers. This is what members told us were the barriers:

- *“Priority is timescales, getting reports done, being at your desk. Everything is put on families re accessing help themselves and not from council.”*
- *“Existing beliefs and system design, protectionism of system design, non trauma informed practice”*
- *“Compared to 10 years ago paperwork is now 90% of the job”*
- *“Monday to Friday working does not suit families as crisis occur at any time”.*
- *“Time. You are constantly pulled between tasks that you should be doing for other families, demands from parents, carers, children, managers and other services: so finding the time to spend with a child on a consistent basis is very difficult. If you make time for that you will fall behind on procedural stuff, run out of time to document everything and management do not value time spent with families as much.”*
- *“Our role is entirely based on relationship building but we see that social workers don’t have the time to do this and some do not have the skills to establish relationships with young people. The admin and bureaucracy is also a barrier. Often it is the unqualified Family Support Workers who see the children rather than the social workers.”*
- *“Relationships are difficult to build and maintain as you don’t have a lot of time to do this. Maintaining these relationships is a vital part of the job and should be prioritised.”*
- *“...when your case load is predominately school age you can have two or three visits to make after school each day. To give children and their parents/carers time this means you can be out working til after 7pm two or three times per week with no recognition from senior management. You either rush your visits or work on late.”*



Caseload pressures were related to the organisation of work and lack of resources, including lack of staff, but also the need to prioritise within their caseloads and to respond to crisis. Social workers talked about the negative consequences of this for children, and the strain placed on relationships of trust with children and families, because of constant changes of social worker; and changes to arrangements because of competing priorities. Examples of the impact on children include:

- *“Case conferences including pre-birth not taking place due to lack of senior staff to chair meetings.”*
- *“resources...not enough staff to undertake statutory supervision of contacts.” (between children and birth parents, or between children and their siblings).*
- *“Having to prioritise families and if they are not in crisis then they get less support.”*
- *“lack of staff - every social worker I know has more cases than they can possibly manage, meaning we're just scratching the surface supporting most people, rather than making a substantial difference.”*

Many described their frustration at not being able to find the resources or services that children and young people need, exacerbated by ten years of austerity in which services in communities have been decimated.

- *“Not being able to refer to some agencies for support unless children are at immediate risk of being accommodated - no early intervention .”*
- *“Lack of space to meet young people. Funds to take young person out even for a coffee.”*
- *“Distrust of social work and lack of resources. Social isolation of clients, no services to sign-post to anymore.”*

In 2006, writing about the importance of the therapeutic relationship between social workers and individuals and their families, the Independent 21st Century Social Work Review Group reported:¹¹

“Yet social workers consistently told us that it is this very aspect of their work which has been eroded and devalued in recent years under the pressures of workloads, increased bureaucracy and a more mechanistic and technical approach to delivering services. We must now legitimise and restore the centrality of working for change through therapeutic relationships as the basis of strengthening the profession for the 21st Century”.

Fifteen years later, and after over a decade of austerity, there is overwhelming evidence of the need for significant investment in capacity and resources within children and families social work services to rectify this.

How will the Change Programme address this, so that all children and young people can benefit from supportive, caring, trusting and therapeutic relationships with professionals?

Child-centred practice

The Promise says: "Children must be listened to and meaningfully and appropriately involved in decision-making about their care, with all those involved properly listening and responding to what children want and need. There must be a compassionate, caring, decision-making culture focussed on children and those they trust."

We asked our social work members what, in their view, are the barriers to this in practice? They said the barriers to child centred practice are the same as those which prevent relationship-based practice: time, workload pressures, the need to prioritise crisis intervention, understaffing within teams, the demands of paperwork, and managerialist cultures. In the words of one social worker, the main barrier to child-centred practice is:

- *"Reality - this idea was drawn up by people with no contact with social workers who work in a reality of high stress, zero resources, zero time"*
- *"There are very committed people working directly with children and families who work hard to provide support. However, this is constantly undermined by the pressure of work."*
- *"There are systems in place to obtain children's views which are good, but in order to ensure children's views are obtained and they feel listened to, workers need to work outwith their contracted hours."*
- *"Social workers need the space and time to build relationships with children to deliver this Promise. This at the core of our value based practice."*

Some members reported positively that child-centred practice is the norm in their experience and is being done well.

- *"It is really important that children are listened to, it is the cornerstone and heart of our work. Staff are doing their best to ensure their voices are heard."*

A majority felt that the Independent Care Review perhaps understates the complexities involved in listening to children. There were several clear themes here. First, it was felt that the Review perhaps doesn't acknowledge the balance that has to be struck between listening to what children want and the need to safeguard, and what children want and/or need, and the reality of the (lack of) resources available.

- *"Children often don't feel listened to as they want to return to parental care and this isn't possible for safety reasons"*

Second, it was felt that children's views are listened to, but in a way that can sometimes be less than meaningful.

- *"Time with the children that isn't rushed or just a one off"*
- *"Tokenism in gathering of views Lack of time to do this properly"*
- *"Children need time, to build trust with this person they are talking to and feel valued, and understand how they truly feel. A true listening adult is a very special skill. this doesn't happen over night. Time is a rare commodity in social work."*
- *"We don't have close relationships with the children as we can't see them often enough and when we do it's brief, there's no time for therapeutic work. We have been told to refer all children in care to Family group decision making but the waiting lists are so long we are trying to do the work ourselves. Support services are stretched so everything falls to us."*
- *"...every social worker wants to do this but almost none of us can, and when we do, it's at the expense of other cases"*
- *"The actual quality of the work undertaken is not measured and is not valued in the same way."*

Skills

A view was also expressed that social workers need more support and training in communicating and building relationships with often distrustful and sometimes hostile young people and their families and also to build skills in communicating with children and young people with special needs. In some areas relatively high levels of inexperienced staff creates an additional challenge. The Hearings System was also referred to here. Many social workers felt that the members of children's panels are not in all cases equipped to understand and to place into context children's behaviour in Hearings, and what children and young people have to say.

- *"Time, but also skills and confidence. In my experience social workers don't often know how to actually speak to children as they spend so much time case managing and managing crisis. Undertaking direct work to find out about children's inner lives and feelings should be the core work but I think staff really struggle with this and when I ask what direct work has been undertaken there is often an embarrassed silence."*
- *"Distrust of social workers in children/young people because of what they have been told by parents/carers/media. Staff should have more practical training on how to engage with young people."*

The problem of resources

Social workers also said that children are listened to, that listening to children is taken seriously, but that often the resources are simply not available to follow up on this. Decisions made about children are in the final instance resource-driven rather than child-led.

- *"If there is going to be a focus on encouraging young people to express their views, there needs to be an awareness of the resource issues associated with this otherwise, it feels tokenistic and potentially harms relationships."*
- *"Lack of funding, lack of early intervention supports to keep children in their own families, lack of skilled foster carers, lack of meaningful community supports, inexperienced Children's Panels. Children's Hearings too wary of parents' solicitors making parent-centred, rather than child-centred decisions"*
- *"Lack of resources. Many kids are unhappy with their foster placements but there are a lack of carers. Recruitment is poor as it's so poorly paid the quality of applicant are available. If we paid carers better and placed more reasonable professional standards onto them then the role would attract more robust applicants."*
- *"lack of availability of resources to do what would be 'best' for them - sometimes this isn't even a finance issue but is a lack of sufficiently trained people such as carers"*
- *"Decisions being made by team managers/service managers that best meet the needs of the service and not the young person/child against social workers recommendation. Too much focus on financial impacts for local authority"*
- *"The main barriers are time: appropriate resources and access to Services ie Health, CAMHS there needs to be a unified corporate approach"*
- *"Front line workers, panels and lac (sic) meetings have always worked in this way in my opinion. The real barrier is funding and senior management. We are told there are no 'beds' or services and decision making is resource led."*

Therapeutic services

There was consensus about the lack of resources within wider children and adult services to meet the needs of children and their carers. This lack of available additional input for children and young people puts great pressure on family relationships and is a contributory factor in the breakdown of placements for looked after children.

- *"There is often no CAMHs or counselling support of any kind and families and workers have little or no way of referring to a service that may benefit them."*



- *“There are a lack of other alternative services to CAMHS. Also lack of adult mental health care as it is not realistic to expect an adult carer to support a traumatised child if they are traumatised themselves (this is often the case)!”*
- *“...support with a recent placement with an extremely troubled child was seriously lacking. Resources, mental health, education, social work, services, etc. were non existent despite constantly asking for such help. Resources need to work together and mental health services need to be involved regardless if child in permanent placement or otherwise.”*

Resource-led decision-making

In our survey, 90% of respondents said that when a child becomes looked after, the decision on where a child or children are placed, is generally a resource-led rather than a child-led decision (4% of respondents, with 6% not sure/cannot say).

- *“...social workers do try to listen to the young people however it is often decisions made by senior management which are less likely to be child focussed and are often driven by procedures and financial constraints. It would be helpful if senior managers making decisions about children's lives spoke directly to the children and listened to what they have to say.”*
- *“Social work continues to be a resource led service and is not needs led. The resources across health and social care need to be made available to meet The Promise. It is unrealistic in the current climate.”*

Who makes the final decision on where a child or children are placed?

Social workers described the decision-making process in their local authority. The majority referred to resources. This was mentioned either as a factor influencing decisions to a lesser or a greater extent, with a significant number saying this was the main determinant of decisions for children.

- *“..depends greatly on that child's individual circumstances but funding has always got to be agreed at higher management level and can be a significant factor”*
- *“It just depends on where there are spaces. That's the simple fact.”*
- *“It is completely resources led by the family placement team. In the practice team we are just expected to accept what is offered.”*
- *“It is financially driven. If there is no internal foster placement the children will be left at risk with increased visiting until one becomes available.”*
- *“Resources are so scare the child's needs are rarely a factor”*

The lack of specialist provision for children with complex needs was mentioned and there were strong concerns about the lack of support for kinship carers, relative to the support provided to foster carers. The complexities of kinship relationships also indicate the need for a different type of support, one which is not always currently being provided. This is an area already being addressed by the Promise Scotland (TPS) team, with one social worker responding that they are part of a project with TPS consulting kinship carers about gaps in service provision.

- *“There is a push, all the time, to maintain kinship placements. However, there is little acknowledgment that there is often significant trauma and dysfunction within wider families and there are no resources to address these issues. Many families we work with really need long-term therapeutic support services; instead we try to plug gaps with short-term, light touch intervention. Such intervention, in my view and experience, is woefully inadequate to address generational trauma and issues of attachment.”*
- *“Children placed in kinship placements on an emergency basis and remaining there for long periods before kinship assessment can be carried out due to workload.”*

Supporting families

The Promise says: “All families will have direct and clear access to family therapies and specific support across a range of issues, so that accessing support is seen as something that a range of families may need throughout life”

The Independent Care Review emphasised that: “Nurturing and supporting families to stay together will take far more than Scotland currently provides.”¹² This honest assessment was informed by the findings of the social work research commissioned as part of the Evidence Framework for the Review.¹³ One particular concern voiced in this research was:

“the loss, lack or limited options available to support children and young people, particularly more limited family support and early intervention services, reduced placement options and services to address emotional and mental health wellbeing, which would help prevent children coming into care or sustain placements that might otherwise breakdown.”

We asked children and families social workers: Is the provision of intensive family support in your area sufficient to meet need?

- 77% of social workers said provision is not sufficient.
- 8% said yes, it is sufficient.
- 15% said they weren't sure.

We asked: “What needs to change to improve the availability of support for families?”

Social workers called overwhelmingly for more staff, funding and resources to support families. They were clear that a very significant additional investment is needed to begin to meet the level of need being presented in local areas. Some emphasised that although there is a good level of provision in their area, it is still nowhere near sufficient to deliver the commitments in the Promise. Social workers want to see investment in the whole system of support: in universal services and early intervention, local authority social work services, third sector family support services, and adult and children's specialist services particularly mental health. Some social workers also stressed the need for wider policies to tackle poverty and address the economic and social circumstances of families.

- *“Resources. More activities for children during holidays, especially preschool age More support to enable families to help themselves e.g family group conferencing”*
- *“More funding so that services can offer more time to families. [service name] for example work intensively for 3 months then often families are left with no follow up support”*
- *“Broader range of services that will include a wider range of options.”*
- *“Investment. 100% investment. We have no resources to offer families. We are told by management that we don't have service agreements to use 3rd sector agencies. We used to. But they cut the budget. We are good to use in-house supports. These people are not adequately trained plus they are stretched already.”*
- *“More resources to be made available and not have to be fought for due to financial constraints of department.”*

Many members spoke of the limited capacity within local area teams and the need to invest in both staffing and staff training in statutory social work. They expressed a desire to do more direct work with families and to provide longer term intensive support to children and carers where that is needed. But lack of capacity is seen as the major barrier to meeting families' needs. Social workers voiced the need to widen access and provide greater flexibility and variety of provision with support available to families at weekends and evenings.

- *“Whilst there is significant resource in our area I still think it is a long way off what we need to meet the requirements of the promise. There also needs to be a culture change where workers accept that sometimes families will require long term intensive support.”*



- *“More time to spend with families which would be easier with staffing levels to allow this”*

Social workers say more capacity is needed within statutory social work area teams. Many members said this needs to include investment in advanced practice skills for social workers to enable multidisciplinary practice, with social workers trained in psychological therapies and/or for psychologists, therapists and councillors to be based in children and families social work teams.

- *“The view that a family support worker can visit a family once a week to provide advice and guidance to improve children's lives does not reflect the deeply traumatised, deep rooted and often generational issues that are present within so many of the families we work with. Our families and children need therapeutic and intensive systemic support if there is to be sustained, meaningful change in their lives”.*
- *“...we do need trained family therapists and psychologists to offer families support not just the practical help.”*
- *“There should also be more social workers in children's services trained as Mental Health Officers, there is a clear and desperate need for support for children with extreme behaviour difficulties and those emotionally struggling. Social workers are not trained therapists but should be trained in play therapy I feel.”*
- *“Social Work services at present is a Tier 3 service. This means that Social Work looks to disengage and leave ongoing support to universal services. Some families will need Social Work support on a long-term basis. Our services are not geared up to provide this”*
- *“More preventative intensive family work such as early intervention. This is provided by third sector where there are often waiting lists and relies on voluntary engagement with families. There needs to be more investment in this kind of work provided by social work services. Investment in specialist social workers in children and families e.g. mental health, domestic abuse, substance misuse. These social workers work in adult services but would be so beneficial in children's services being able to work with the whole family and having a better more specialised understanding of the issues many families face.”*
- *“More staff to ensure that all children who need a service get it.”*
- *“Family therapy with a focus on family relationships; art & play therapy for children; psychological or psychiatric support/sessions/assessments for children; creative solutions to accessing education. Improvement in access to services for mental health”*

Access to family support services

Ten years of austerity has had a damaging effect on the availability of intensive family support.¹⁴ Many social work members referred to the contraction or closure of local third sector provision due to local authority budget cuts:

- *“The services you describe barely exist. The whole family support in our area is only doing crisis work at present. The other services like FGDM and even advocacy are too busy to pick up any referrals!!”*
- *“The services that used to exist to provide family support have fallen victim of the cuts. There needs to be investment in this area as well as in social work teams.”*
- *“No longer Barnardos service funded by [name of] council. Options for therapeutic and family wide supports are limited as a result. Social work don't have the time to do it themselves.”*
- *“We often have meeting to identify resources to support children to remain at home and hear that the services have no capacity.”*



Early intervention is hard, if not impossible, to achieve in a financial context in which limited resources are rationed. Social workers said earlier intervention was needed but was not possible because of the high thresholds for receiving help, or the difficulty in accessing these due to tightened referral criteria:

- *“3rd sector agencies often have stringent referral criteria due to their own funding requirements.”*
- *“Support needs to be based around early intervention, social workers are not able to refer to some support services until a child is in immediate risk of being accommodated or becoming homeless”*
- *“Whilst there are intensive family support teams within the authority these are only offered to families whereby a child is at risk of being taken into care or Child Protection. These services come into place at time of crisis. There needs to be more early intervention in place. This had been a model for a number of years, however, cut backs resulted in these resources being cut back or ending. Scottish Government need to provide more funding to local authorities to allow this to happen.”*
- *“services should be accessible without families reaching crisis and SW becoming involved.”*
- *“The high criteria for intensive services. If services were able to intervene quicker than they do, then admissions to care would be significantly lower”*

Social workers highlighted the lack of resources to support the families of children with disabilities.

- *“Lack of family based respite provision for children with disabilities and care providers, general lack of services. Overnight respite is purchased through third sector organisations and prohibitively expensive, the process to obtain respite is long and bureaucratic (SDS) and families end up in crisis waiting for supports to be put in place. Children are accommodated as parents have been struggling to manage for long periods. Then the lack of specialist provision means change of placements which causes further trauma to child. More specialist services and provision needed.”*
- *“There are a lack of services for children with additional needs. Too many services are too short-term. Services have specific criteria which seem to be designed to exclude families.”*

The workforce

The Promise says the workforce must: “feel valued, encouraged and have supportive relationships for reflection with high quality supervision and environmental conditions.”

‘Workforce’ is one of the workstreams in the ten-year Promise Change Programme. The challenges around the recruitment and retention of social workers are longstanding and the causes well known; they are rooted in the pressures created by the under-resourced and over-bureaucratized systems in which social work staff are required to practice.¹⁵

We asked children and families social work members, to feel valued, encouraged and supported, “What needs to change to make this happen?”

One social worker summed up the views of many respondents, by articulating the necessity of a stable, safe and secure base from which to do difficult and complex work with children and families:

- *“Clear direction, leadership and local vision, investing in early and effective intervention resources for families to allow staff to feel they are able to offer support. A stable base for staff to work from, contact space to meet the requirement of the service, opportunities for staff training and development.”*

The Promise calls for high quality reflective supervision and social work members agree that the supervision relationship is critical to their role. There was strong support for clinical supervision in addition to case management supervision and for protected time for supervision within the working day to guarantee the space for this. It was recognised that this could only be achieved with more staff, reduced caseloads and training in supervision skills for seniors. The benefits of group supervision in addition to 1:1 supervision were advocated. Some respondents called for the introduction of mandated clinical supervision for social work staff:

- *“I have always been dumbfounded at the absence of clinical/therapeutic supervision for social workers. We work with trauma every day, we experience trauma when we remove children from their families, we work in crisis and chaos all the time, we are verbally abused and physically threatened in our day to day work, and we are offered no therapeutic support to help us navigate and contain our emotional responses. It is unsurprising that this often becomes just too much to cope with for workers.”*
- *“The government must implement a clinical supervision program to support their workers to deal with the trauma they experience or stress, alcohol use and sickness will continue to blight the workforce.”*

Respondents described the inconsistencies in supervision caused primarily by lack of time and work overload. They talked about the pressure on seniors meaning supervision is not carried out regularly, or appropriately, or consistently, or by staff who are clinically trained. Many said that the lack of priority, commitment and time given to this made them feel unvalued and unsupported. A range of different experiences of supervision were reported, from the positive to the negative (the majority) and even the concerning:

- *“I do feel my team leader values me, we often speak and we discuss progress. I have had supervision and this has been utilised to discuss me well.”*
- *“Supervision is supposed to be 4 weekly, however due to workload pressures this does not happen. As a newly qualified social worker I have had supervision roughly 6 times in the last 18 months and do not feel that there has been ample opportunity for training and guidance.”*
- *“I think the quality of supervision varies hugely and that, for me, is the main thing that needs to change within our line of work.”*
- *“Supervision that is about the worker, their development and experiences not just the caseload.”*
- *“Access to practice based training; reflective group supervision; access to practical resources and books.”*
- *“...sufficient time allocated and a more open and supportive culture.”*



- *“We need our managers to have the time to commit to supervision and training on how to do this supportively. It’s often just a case update and I’m rushed through it.”*
- *“Currently 2hrs monthly supervision does not allow time to review and reflect on all cases I am covering. More opportunities to joint work cases would allow better practice reflection between colleagues and sharing good practice to improve confidence and competence across service.”*

Underinvested, undervalued

A range of factors contribute to social work staff feeling undervalued. Large numbers of social work staff referred to not having a stable base to work from, having no office space, or unsuitable office space, or no permanent work base, and the absence of suitable space for contact or for face-to-face work with children and families. Added to this a lack of admin support, inadequate IT, and cumbersome bureaucratic processes.

- *“Increased admin support, overhaul of performance monitoring tasks and duplication of paperwork. Streamlining of bureaucratic procedures to organise case conferences. Allocated desks in office with required IT equipment, no hot-desking.”*

Pay levels and pay disparities are another factor: many respondents raised the pay disparities between similarly qualified roles in social work with those in education and health, including health visiting, and many concerns were raised about the pay and status of ‘paraprofessionals’ within children and families social work:

- *“Support workers do a lot of the day to day face to face support across all aspects of social work. Not considered important enough to invest in as regards training and pay but regularly called upon across the board for our experience.”*

The need for cultural change was identified. Concerns were raised about social work leadership including an underappreciation of the complexity of roles within children and families social work, with references to senior managers and even heads of service having no experience or no recent experience of children and families work. There is an ingrained culture of over-work with an expectation that staff will work beyond their hours. There were concerns about the lack of responsiveness and action when excessive workloads are raised. Concerningly, references were made to bullying and intimidatory behaviour and a failure to address these when raised.

- *“Senior management need to acknowledge the workload of practitioners. They need to do more to retain staff as at present the staff turn-over is shocking. Experienced social workers carry the burden of supporting newly qualified staff and the new workers are expected to carry cases that as new workers is unacceptable. Senior Management need to start listening to front line staff as at present many are dismissive of workers concerns and will go as far as putting the issues onto workers and leaving them feeling inadequate and worthless.”*
- *“Workers need to know their worth and value, social work seems to be a profession where mistakes are quickly highlighted however valuable and good work often goes unnoticed.”*
- *“Pay and benefits need to reflect the work being undertaken. Opportunities for continued learning and development need to be meaningful and reflect the needs of the workforce. More funding to allow councils to support their workers through further learning at uni etc. Support for mental health to be available through work places that support workers to address their own lived experience and how the work can impact this.”*
- *“Other professionals and general public need to have a better perception and understanding of the social work role. More needs to be done to educate others on our role with a supportive rather than punitive lens. Social workers need to feel supported by management and colleagues and there needs to be enough staff to allocate cases to and for social workers not to be overwhelmed with too many cases.”*
- *“We need to become less reactive and more planned in our approach so that we are preventing situations escalating. This requires a work force that have the time and space to be able to do this which is not happening at present due to high staff turn over and constant crisis work”*



Implementing The Promise: discussion and conclusion

- *“The Promise sets out what we have all been trying to achieve for years. We just aren't funding to meet that need. I know my department will do all they can to implement it but more funding needs to come from the Scottish Govt to achieve this in a meaningful way”*
- *“This Promise is deeply flawed if social workers are not resourced to build relationships, safeguard children and work directly with them.”*

The Promise sets out the type of social work practice UNISON social work members want to deliver: a social work premised upon relationship-based child-centred, needs based practice. Relationships are the core of social work: servc children and families.

The Promise makes commitments to children and young people which, if they are to be fulfilled, will necessitate significant changes in the way that social work practitioners are required to practice. It is clear from our findings that if we are to implement the Promise then we need a significant reform and cultural change in how statutory social work is conceived, managed, and delivered along with significant additional resources so that the rationing of support can be ended and every child’s needs met. In the words of one social worker, “Social work needs to be reformed to allow it to be what it should be.”

Children and families social work members told us what changes to social work practice they feel are most needed in order to meet the Promise. First, was changes to managerialist cultures and a review of the bureaucratic demands made on social workers (selected as ‘very important’ by 81.5% of respondents). Second, was more time to spend building relationships with children and families and support structures to facilitate this (78.3% of respondents).¹⁶ And third was a significant financial investment in resources to support children to remain in their families (selected by 77% of respondents). The full findings are shown below.

Type of change	Percentage selecting this as 'very important'
Changes to managerialist cultures including a review of the bureaucratic demands made on social workers	81.5%
More time to spend building relationships with children and families and support structures that facilitate this	78.3%
Significant financial investment in resources to support children to remain with their families	77.3%
Changes of practice to enable workers and carers to make and retain caring and long-term relationships with children	66%
Changes to risk assessments to take account of wider societal factors such as poverty when we assess what action is needed to protect children	50.4%

There is clearly some overlap between these changes, for example, a reduction in bureaucratic demands would enable more time to spend on relational work with children. It must be noted that these responses do not imply that social workers place little importance on language or on including poverty in their assessments, but rather reflect their views on what will achieve the greatest improvement in their work with children and families.



Implementation

- *“My work place is working very hard to implement this and prepare workers and families for its implementation.”*

Amongst social work members there is some excitement about the possibility of positive change combined with deep scepticism about the necessary resources being provided. Social work members were clear that a multi-agency commitment and resource is needed to deliver the Promise. In some areas planning for implementation appears to be removed from practice. There appear to be widely varying levels of engagement with staff with some practitioners having heard nothing, while in other areas social work staff have taken part in online training or been briefed on developments.

A majority of members emphasised the crucial importance of additional resources to back the Promise.

- *“Without adequate staffing (which we currently don't have) and resources to implement it, The Promise remains words.”*
- *“Funding needs to be consistent to allow adequate development of services and to maintain them. Time limited funding streams requiring multiple hoops to be jumped through does not provide consistent long term support required by some families. If the money is there let's use it to make long term positive change.”*

A long history of neglect

Social workers know that there is nothing new here. Social work services have been under-resourced for many years. The same issues around capacity and resources in statutory social work were identified 15 years ago in the 2006 report of the 21st Century Social Work Review ('Changing Lives'). Writing about the importance of the therapeutic relationship between social workers and individuals and their families, the Independent 21st Century Social Work Review Group reported:¹⁷

“Yet social workers consistently told us that it is this very aspect of their work which has been eroded and devalued in recent years under the pressures of workloads, increased bureaucracy and a more mechanistic and technical approach to delivering services. We must now legitimise and restore the centrality of working for change through therapeutic relationships as the basis of strengthening the profession for the 21st Century”.

More recently the same issues were discussed by the Scottish Parliament's Education and Culture Committee in 2013 as part of its inquiry into decision-making on whether to take children into care. The Committee heard evidence that resources were a significant factor in decision-making. It formally raised with the Cabinet Minister its concerns around staffing levels and retention in children and families' social work and asked that the underlying causes be addressed.¹⁸ The response, the enshrinement of Getting it Right for Every Child in legislation¹⁹ and the setting of parameters for local authorities in the regulation and development of the workforce, has not come anywhere near to resolving these issues.²⁰

The case for investment

Children and families' social workers say that lack of funding and resources is a major cause of children's needs going unmet or not being best met within our current systems. These views echo the findings of research commissioned by the Independent Care Review itself, which found:²¹

“Austerity, resources and limited options were raised by all groups of workers, managers and strategic leaders, almost 62% of participants. This was austerity described in terms of the impact on services and the workforce, and crucially also on families and communities. It was interesting to note that there was recognition of the conflict this presented to strategic leaders needing to save money, but tasked with providing the best supports to children and their families.”



Large numbers of UNISON members told us that they support the Promise but that it simply would not be delivered unless the Scottish Government funds the extra staffing and resources needed by local authorities. It cannot be delivered solely based on 'repurposing' existing resources. Having made a political commitment to reform the care system, will the Scottish Government now back this with a financial commitment to enable local authorities to deliver The Promise?

Regardless of whether children and families social work and social care become part of a future National Care Service, realistic financial estimates of the additional resource required to deliver The Promise must be developed with local authorities and the necessary budgets provided. The reform of the care system for children must have at its heart a level of staffing and resources that allows the needs of children and families to be meaningfully met. That means:

- significant investment by the Scottish Government to expand the capacity of statutory children and families social work services.
- staffing and caseloads at a level that enables relationship-based work with children, and the workforce to be properly supported.
- funding sufficient to enable a shift towards earlier intervention and community based social work;
- a rebalancing of social workers' time away from administrative workloads;
- funding for the wider services needed to support children and families within the community.

We shouldn't make promises to children and young people that we can't keep and it worries us that without the funding and resources needed, the Scottish Government is doing just that.

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