Practice tools pilot: final report

Contents

1. Project Summary

Project overview

As part of the 2020 strategy, Frontline identified the need to introduce an understanding of our work on outcomes for children and families, so that we can adapt and develop our programme to best support and begin to measure how practice helps families.

A key aim of this project is to understand and explore how Frontline programmes support social work practitioners to work effectively and impactfully with children and families. The objectives of the pilot project are:

- Understanding the extent of (and how) what we are teaching is helping us to work effectively with families
- Identify outcomes and social change that are relevant and importantly speak to the lived experiences of children and families
- Drive improvements in social work more generally through research (long term objective)

Through this project, we wanted to create a space for fellows to have a deep exploration of their own practice and how this shapes their engagement with children and families, whilst also providing us with the opportunity to begin to collect data around appropriate outcome measures.

Additional documents include:

- A full overview of the project
- An overview of the project structure
- Separate write ups for:
  - Topic 1: Practice and implemented learning
  - Topic 2: Use of practice tools to support direct work with families
  - Topic 3: How effective social work impacts children and families

Approach

To gather this information, we conducted a series of focus groups with fellows. There were three focus groups in total, each one covering a different topic. The focus groups were delivered on Teams and each one lasted 90 minutes. The focus groups were facilitated by a team manager who completed the Firstline programme with support from evaluation lead Rachel Irwin. Rachel briefed the facilitator before each focus group as well as attending each focus group to take notes and manage technology so the facilitator could give full focus to facilitation.

What voices are represented in the findings?

Session attended			Gender	Region	Role	Current social worker?	Cohort
One	Two	Three					
X	X	X	M	Greater London	Senior social worker	Y	2017
X	X	X	F	North West	Social worker	Y	2017
X	--	X	F	Greater London	Family therapist	N	2014
--	X	X	F	North East	Social worker	Y	2017
X	--	X	F	Greater London	Practice manager	Y	2014
--	X	--	F	Greater London	Senior social worker	Y	2016
X	--	--	F	South East	Senior practitioner	Y	2017
X	--	--	F	North West	Advanced social work practitioner	Y	2015

Topic 1 overview: Practice and implemented learning

The first focus group addressed the following key question:

 "From your learnings on the Frontline programme, what helped you work most effectively with families?"

The discussion focused mainly on which theories and tools were being used more and less frequently, and what helped or hindered fellows to sustain and embed their learning.

Key findings were:

– Participants continue to apply Frontline programme theories, skill and values to their practice following programme completion
– Fellows found systemic theory particularly helpful to guide how they engage with families and motivational interviewing was found to be effective in supporting conversations about change.
– The thing that fellows found most helpful in sustaining and embedding their learning was further training in evidence-based practice either from the Fellowship or outside of Frontline

– A key barrier was a lack of congruence in how they were trained through Frontline and the practice model that is employed within the local authority

Topic 2 overview: Use of practice tools to support direct work with families

The discussion of this topic focused on the following key questions:

1. What, if any, tools have you used to support your direct work with families?

2. How effective did you find these? What did you learn from the experience?

3. What are your reflections on how children and families experienced these tools?

We were particularly interested in any tools and approaches fellows used from the Frontline programme as well as other tools they encountered in their local authorities. The discussion explored the purpose behind using these tools, the ways in which the tools were used in their practice, and reflections on how effective the tools were in direct work with children and families.

Overall, fellows felt that when direct work and practice tools are used as part of a systemic, relationship-based approach to social work that is tailored to the needs of the child/family, they are effective in building relationships, aiding communication, and helping children and families feel comfortable working with a social worker. Throughout the fellows' discussion, three key themes emerged. These are summarised in the table below.

Direct work is not well understood	Fellows felt there is not enough reflection within the sector about what direct work means and how to do it effectively, which can lead to misinterpretation and a focus on tools that create more tangible outputs
Flexibility is key	Rather than a dogmatic approach dictated by the local authority, fellows felt that social workers need to be able to take an informed approach when choosing tools. Social workers also need to have the skills and confidence to be flexible "on the spot" during direct work and adapt to use different tools, depending on the changing contexts of the family/child they are working with.
Proper training is necessary	Fellows also felt that, to do direct work and use tools effectively, training and support were vital. When social workers don't understand the purpose of tools, they don't use them in the right way or in the right contexts. It also creates a barrier to flexibility.

Topic 3 overview: How effective social work impacts children and families

The discussion of topic 3 focused on the following key questions:

1. How do you know what impact your practice is having on families, in terms of what you see and what feedback they give you?

2. How are the relationships that you've built with families helpful in supporting families to move towards change?

3. How would you define meaningful and helpful measures of the impact of effective social work on families?

The discussion explored what impact fellows had on children and families, what evidence they use to understand and demonstrate impact on children and families, and reflections on the key barriers and challenges to evidencing the impact of children's social work.

On the whole, fellows had lots of qualitative evidence of their impact on children and families from their own direct work. They agreed that tracking outcomes for children and families was important and recognised the value of improving outcomes measurement in the social work sector to better evidence impact. However, they also felt there were some big challenges to overcome in order to provide a holistic picture of the impact effective social work has on children and families. A summary of fellows' views on the impact of social work is provided in the below table.

Good relationships are crucial for behaviour change	Relationships and systemic practice play a key role in supporting the behaviour change required for families to make a sustained change.
Evidencing impact is possible and important	Qualitative and quantitative data both have value in evidencing impact, and existing standardised outcome measures show it is possible to balance the need for depth and flexibility with the need for consistency and transparency.
There are common challenges and barriers to measuring outcomes effectively	Insufficient breadth and depth of coverage, sub-optimal choice of metrics, and lack of consistency when collecting data made it difficult to track outcomes and measure impact in a systematic way across the sector.

2. Topic 1: Practice and implemented learning

Session 1 overview

This section collates the findings from the first of three focus groups delivered as part of the practice tools pilot. This session addressed the following key question:

'From your learnings on the Frontline programme, what helped you work most effectively with families?'

The focus group was structured around four sub questions which explored sustained learning from the Frontline programme by looking at the key theories and skills fellows have used most and least often with families and their reflections on how these were perceived by families.

The focus group was held on 22 November 2022 and was attended by seven fellows. The discussion focused mainly on which theories and tools were being used more and less frequently and what further support Fellows may need to continue to retain and develop their knowledge and practice.

Main findings

Participants continue to apply Frontline programme theories, skills and values to their practice following programme completion.

Fellows found systemic theory particularly helpful to guide how they engage with families and motivational interviewing was found to be effective in supporting conversations about change.

The thing that fellows found most helpful in sustaining and embedding their learning was further training in evidence-based practice either from the Fellowship or outside of Frontline

A key barrier was a lack of congruence in how they were trained through Frontline and the practice model that is employed within the local authority

Theories, skills and values that have helped fellows work effectively with families:

Systemic theory

There was consensus among the fellows that systemic theory was useful and has significantly shaped their practice with families both on and following the programme. The vast majority of families they've worked with seem to really appreciate a systemic approach and having a shared sense of purpose. Fellows found the mindset of systemic to be fundamental to their practice, to the point where a fellow reflected that they're not sure what you learn on a social work course if you don't learn systemic. It seems to be so fundamental to have systemic, relationship-based practice.

> "What I've seen consistently is that the vast majority of families that I work with really do appreciate a systemic relationship-based approach. I have had the opportunity to develop and refine my relationship-based skills and have lots of conversations with families about communication and do feel that … in the majority of cases where I really cling hard trying to maintain the relationship and work at the relationship as much as I'm working at trying to get through the process."
> **Male senior social worker, 2017 cohort**

A specific example was shared about a new case that went into care proceedings where the grandparents were particularly worried that if they went to court, then we would want to prove what we'd set out as it's adversarial. The fellow shared that they really talked about this and from his perspective it wasn't at all, because this is about us all working together for your grandchild. They talked about how they were going to do that and how they would be transparent at different points, for example when assessments came in

> "That's a word I that constantly hear coming back, is about people feeling listened to, people feeling there is transparency on both sides of the coin. The majority of families I really feel have a high appreciation for that and I think it really starts to undo some of their previous experiences of social work where they just feel they were set up to fail."
> **Male senior social worker, 2017 cohort**

There was an example shared was by a fellow who reflected that they don't receive a lot of specific feedback from families, but noticed that there were times, in the middle of people being really angry

> "If families can hold onto your intentions in spite of all the distress that is being churned up, I think that means that whatever happens they have some form of an understanding of why it's happened which is important … for what comes next if children are removed."
> **Female family therapist, 2014 cohort**

where they'd say, 'I know you're a nice person, but…'. The fellow has wondered what they mean by that but thinks it a testament to the relationship they've built and thinks they're saying, 'I don't believe you are deliberately hurting me, but this is what I am angry about in terms of where we are at in the case right now'.

Fellows had varied experiences of how systemic theory could be applied in their roles. On one side, systemic practice was found to be vital in building a shared sense of purpose, particularly in child protection social work that can feel the total opposite of that. On the other hand, there was a reflection from a fellow who started the programme in 2014, that although they found systemic family therapy to be really valuable, they initially found it quite difficult to apply systemic linking to child protection and safeguarding work, and it felt like a square peg in a round hole. While the theories were still useful it wasn't always clear how to apply it in this context. Other fellows found that systemic theory was easier to apply in child protection than in other teams, such as assessment or fostering teams and that not all early help practitioners' practice in this way.

It was also raised that a lot of systemic family therapy skills actually work really well to communicate with children who don't communicate in the same way, such as mentalisation, interviewing the internalised other etc. It would have been helpful if this was made much more explicit on the programme, particularly in terms of how systemic can be used to engage and work with younger children and young people with disabilities.

One specific systemic approach that fellows highlighted was warming the context. This was reference as a basic element of systemic that fellows continue to use in their everyday practice. An example shared was when warming the context for what could be a really difficult conversation and asking the family member 'how will I know if you're doing ok? What do you want me to do if you're not doing ok?' They felt that this really helps parents and young people to warm to them and realise that although they're going in and asking lots of questions, they are doing it for the right reasons and to support them.

Motivational Interviewing
Fellows found motivational interviewing really helpful and have used the specific communication skills taught through motivational interviewing again and again in their practice. For some fellows, how they have applied it has changed over time and they've used it most often when working in child protection, rather than teams they moved into later.

'Being able to hold support and challenge through MI which… really values the families' agency and encourages them to take as much control as they can and with systemic which I think holds us to account in terms of how we're building relationships. The combination of both of those do lead to very resilient relationships with families.'
Female family therapist, 2014 cohort

Fellows reflected on how systemic and MI can work really well together and that the combination of these supported them to have conversations with families and led to more resilient relationships with families.

> 'It is the combination of MI and systemic, which is about getting the best out of other people and the best out of yourself, protecting your relationship and focusing on your communication, those are the things that I think mean you can work really effectively in the face of really difficult situations'.
> **Female family therapist, 2014 cohort**

Parenting interventions
Overall, fellows found the content on parenting interventions really useful but they haven't used these theories as much in their practice. They felt that this is the area of their practice that has dwindled the most and where they would most benefit from some refresher training. This does vary according to the expectations of their role, for example in one local authority there are family support workers whose expertise they can draw on but others do still need it in their role and the expectation is very much on them. There was a suggestion that even if they don't require the skills themselves, it's really useful to have knowledge of them.

> 'I don't use it very much, but knowing about parenting interventions and having that focus and understanding the importance of that and seeing that as separate to potentially safeguarding issues, particularly… in the assessment team, that's really important. And trying to encourage new workers to be thinking about those things… Not getting confused between safeguarding and people who maybe just don't have the experience and the knowledge about how to guide their children, I think that's quite a key thing.
> **Female senior practitioner, 2017 cohort**

Values and skills
Focus on children and families. There was one reflection around the focus on children and families, particularly on child development and systemic. They reflected that one of the criticisms of Frontline that they're aware of is that it's very child and family focused, but for them that felt quite useful and continues to feel useful, and they've recently shared this when mentoring an ASYE student.

Mindset of collaborative thinking. A fellow who supports looked after children works with a lot of parents who have recently gone through court. It can then be quite difficult to engage parents given their experiences, so having the ability to come alongside them and work collaboratively has been key.

Active listening: This has been really helpful and aided an understanding of where families are coming from and their own trauma.

Other specific content or approaches:

Trauma informed approaches. Approaches that fellows use regularly are linked to trauma informed approaches which they believe are incredibly important.

Attachment based principles. David Shemmings' sessions were specifically highlighted as being incredibly useful, in terms of the content and understanding child development and attachment-based principles, and also in the way that this content was taught, using videos that illustrated specific behaviours that enhanced their understanding of the content.

Narrative practice. There is a push within one of the local authorities that fellows are working in to use narrative practice in how they write reviews, reports and case notes. This came up as a real strength in a recent audit and this was definitely enhanced through the training they did with Frontline.

Karen Treisman's child development. This content was highlighted as being really valuable and find that they often refer back to this content and the resources that were shared.

Parent child game. A fellow who is currently working in CAMHS shared that they have gone back to look at parent child game materials and the resources and work they'd done. They've been able to use those very direct practical interventions again and again and it's been really helpful in thinking about almost manualised ways of doing change.

Child development essays. While there was a recognition that it can be controversial to do observations of children that aren't involved with services, a fellow who didn't have a lot of children around them at the time reflected that they found this really useful. They felt that it's really important to recognise that if we only compare across children who are experiencing significant disadvantage, it might be quite a low baseline and actually what we need to ask is whether this is good enough.
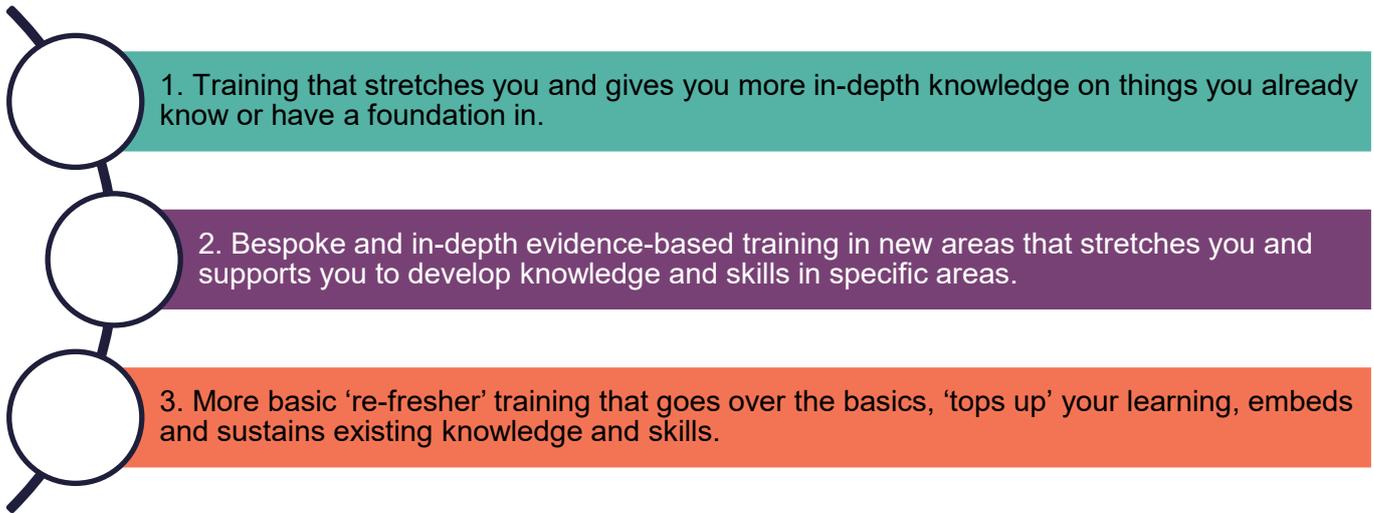
Things that facilitated or acted as a barrier to fellows' sustained learning

Things that supported fellows' sustained learning
Training

Fellows spoke a lot about the role of training in helping them sustain and embed learnings from the programme and in contributing towards their ongoing development as social workers. They reflected that training that is available to them within their local authorities tends to be on things they do all the time, isn't necessarily pitched to the level at which they are working and can be quite surface areas and procedurally focused.

 Broadly, they spoke of three kinds of training:

1. Training that stretches you and gives you more in-depth knowledge on things you already know or have a foundation in.

2. Bespoke and in-depth evidence-based training in new areas that stretches you and supports you to develop knowledge and skills in specific areas.

3. More basic 're-fresher' training that goes over the basics, 'tops up' your learning, embeds and sustains existing knowledge and skills.

1. Training that stretches you and gives you a more in-depth knowledge on things you already know.
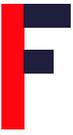
Fellows concluded that training that builds upon existing learning is something that Frontline is really good at, that some of the best training they have received has been through the Fellowship and that the practice offer is really strong and helps to keep practice relevant and up-to-date. They specifically mentioned the event with Karen Treisman, a recent session on mentalisation and the Fellowship annual event where some of their senior leadership team attended and then brought ideas back to the local authority.

Fellows also mentioned the Fellowship offer more broadly, in terms of helping them connect with people all over the country with different expertise and experience, that having Firstline managers as well means that learning can trickle down (through top down and bottom up approaches) and that smaller, more frequent bitesize sessions and check-ins are really helpful.

Another training that helped a fellow to build upon their systemic learning on the Frontline programme was the systemic year two qualification that they completed within the local authority and found this incredibly useful.

2. Bespoke and in-depth evidence-based training in new areas that stretches you and supports you to develop knowledge and skills in specific areas.

Fellows reflected that for training to be really valuable, it should give people a skill that is more specific or is in a multi-disciplinary, niche or less-well understood area. Specific examples mentioned included training in attachment stories, sensory tracking, deprivation of liberty or dyadic developmental psychotherapy although there was a recognition that this can be prohibitively expensive for local authorities. There was a suggestion that the Fellowship could offer a range of different training according to areas people want to specialise in to support them to become qualified practitioners in different areas while recognising that there isn't a one size fits all.

There was a reflection that as a family therapist, you have to evidence ongoing CPD to maintain registration in a much more robust way than in social work and train in evidence-based interventions in order to stay relevant. They found the evidence-based training to be some of the most useful training they have received and suggested that if evidence-based interventions linked to core theories on the Frontline programme could be offered, this could help LAs retain and develop their staff.

3. More basic 're-fresher' training that goes over the basics, 'tops up' your learning, embeds and sustains existing knowledge and skills.

Fellows reflected that they would find a structured series of re-fresher training in key programme content really helpful, although there wasn't necessarily agreement around how or when would work for this and there was a recognition that it can be difficult to find time for this kind of training so there is a risk that attendance would be quite low.

Other elements that fellows found helpful in sustaining their learning was recall days in year 2 when they felt that some of the systemic learning was slipping away, the role of the CSW and coaching, as their coach was quite informed about systemic thinking.

Barriers or challenges to sustaining their learning
The key barrier that fellows found to sustaining their learning was differences between what was taught on the Frontline programme and the specific practice model and ways of working within their respective local authorities.

There was a variation in experience across the group of fellows and there was the recognition that it was still possible to practice systemically in a local authority that has a different practice model. One fellow in particular reflected that they had never worked in a local authority that had systemic as their practice model but they still practice systemically due to the Frontline training. Another reflected that they, along with others in their local authority which doesn't use systemic, use reflective practice to keep systemic going within their team.

For local authorities that do subscribe to systemic as their practice model, this doesn't necessarily mean that it's coherent or embedded into practice, or that they will necessarily receive systemic supervision. Fellows suggested that Frontline could provide a continued offer to local authorities who have Frontline participants who stay with them after they've completed the programme. This could provide structured support to local authorities to help fellows embed these models and apply them more to teams and services rather than on an individual level only, which would help build a collective mindset.

Finally, the model of observing and co-working with their CSW can provide a barrier to sustained learning if the CSW isn't systemically trained or doesn't receive the same training that participants do and this can lead to variation within practice across the cohort. Importantly however, the model of observing and co-working with their CSW is still really valuable as they are experienced social workers and participants can learn a lot from them. (0:23)

Key things to consider:

While fellows agreed that Frontline is good at offering training that builds upon their current knowledge and skills, they would find re-fresher training on key theories taught on the programme really helpful.

Fellows suggested that local authorities who have Frontline participants who continue to work with them could be given a more structured offer in terms of advanced training and support to embed the models.

There was some feedback and suggestions around the training offered through the Fellowship. In general, the practice offer was seen to be really strong and helps to keep their practice relevant and up-to-date.

While lots of systemic family therapy skills are really useful when working with children with disabilities, this could be made more explicit on the programme to really equip practitioners in this area.

There was also a suggestion to widen the law content of the curriculum. While their training covered the Care Act and the court process but didn't cover for example deprivation of liberty, in retrospect they would have found more content in this area useful.

3. Topic 2: Use of practice tools to support direct work with families

Session 2 overview

This section collates the findings from the second of three focus groups delivered as part of the practice tools pilot. This session addressed the following key questions:

4. What, if any, tools have you used to support your direct work with families?

5. How effective did you find these? What did you learn from the experience?

6. What are your reflections on how children and families experienced these tools?

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We were particularly interested in any tools and approaches fellows used from the Frontline programme as well as other tools they encountered in their local authorities. The discussion explored the purpose behind using these tools, the ways in which the tools were used in their practice, and reflections on how effective the tools were in direct work with children and families.

Key findings

Overall, fellows felt that when direct work and practice tools are used as part of a systemic, relationship-based approach to social work that is tailored to the needs of the child/family, they are effective in building relationships, aiding communication, and helping children and families feel comfortable working with a social worker. Throughout the fellows' discussion, three key themes emerged. These are summarised in the table below.

Direct work is not well understood	Flexibility is key	Proper training is necessary
Fellows felt there is not enough reflection within the sector about what direct work means and how to do it effectively, which can lead to misinterpretation and a focus on tools that create more tangible outputs.	Rather than a dogmatic approach dictated by the local authority, fellows felt that social workers need to be able to take an informed approach when choosing tools. Social workers also need to have the skills and confidence to be flexible "on the spot" during direct work and adapt to use different tools, depending on the changing contexts of the family/child they are working with.	Fellows also felt that, to do direct work and use tools effectively, training and support were vital. When social workers don't understand the purpose of tools, they don't use them in the right way or in the right contexts. It also creates a barrier to flexibility.

The rest of this report provides more detail on these findings, along with examples and quotes from the fellows who participated in the focus group. It is structured in line with the key themes that emerged from the discussion. These were:

– How to define and operationalise direct work
– A summary of the tools fellows used to support direct work with children and families
– Reflections on using practice tools – main uses of tools, facilitators, and barriers to effective use of tools, and reflection on how children and families experience practice tools
– Key learning and areas for improvement

Direct work

Defining 'direct work'

Fellows understood direct work to be any intervention or work they do directly with children and families to support them and build relationships.

> "It's [direct] work because the social worker is doing it."
> **Female social worker, 2017 cohort**

Because of this broad definition, fellows felt that there were many different tools and activities that count as direct work. These included:

- Regularly talking with a child about current challenges (e.g., why they don't want to go to school) or future plans (e.g., what they want to do when they finish school)
- Celebrating an important milestone with a child (such as passing a driving test)
- Doing a worksheet or activity with a child to help facilitate a difficult conversation or to encourage them to share
- Collaborating with carers to set goals

Rather than there being a fixed definition of what direct work should look like, fellows felt direct work should be defined in terms of what it achieves: direct work empowers and supports children and families so that they can make a change to their own safety and happiness.

Operationalising direct work in social work practice

There was consensus that the phrase 'direct work' is unhelpful for social workers. Fellows reflected that there can be a focus on completing tangible tasks, activities, or worksheets to generate evidence that can be logged. They also noted that there can be an expectation from other professionals that social workers should be completing worksheets or activities with children and young people as evidence of progress. A focus on evidence can mean that social workers select tools as a 'box-ticking' exercise, rather than to aid building relationships, setting goals, and working towards change. This can lead to a rigid and inflexible approach to direct work that doesn't effectively enable systemic practice.

A fellow who had previously worked as a probation officer shared that they had to use a lot of 'tools', so if they got stuck they did a worksheet. They reflected that this felt very much like first order change or being 'done to'. Instead, they felt like a systemic approach helped to deconstruct the need for tools and that themselves and their skills act as the tool.

> "I got to the point of thinking my tool is myself, it's my communication, it's the conversations we're having, it's the perspectives we generate, so if someone says to me 'show me a tool that you use' I find that really hard... it's very first order, I'm going to do this with you and we're going to do it together and it's a bit of a disconnect"
> **Male senior social worker, 2017 cohort**

Fellows suggested that, rather than prioritising tools, the focus should be on pinning down the intended outcome or goal for the family. Social workers should then use this knowledge to select tools that will best support children and families to work towards the agreed goals.

> "[You should] have really clear kind of expectations and goals, and actually what steps need to be taken to achieve that […] what will change look like and what are we trying to create?"
> **Female social worker, 2017 cohort**

Fellows described three reasons why this approach was more useful. First, it allows a more flexible, systemic approach to direct work. If social workers choose a tool only because it is an effective tool, when it doesn't work you can become stuck. On the other hand, if social workers choose a tool because to help with relationship building, they are better able to adapt. Second, social workers would be able to better articulate plans to the families they work with, such as "we're going to complete a safety plan" or "we're going to figure out why arguments happen in this family between mum and daughter". Finally, social workers would also be able to set clearer expectations with carers and with other professionals.

> "You can think about these questions, but they are not magic. You can think of a question, and it will fall flat on its face because maybe it wasn't the right time. Maybe it wasn't the right day. Maybe they didn't hear it properly. So don't get so stuck on the tool."
> **Male senior social worker, 2017 cohort**

Tools used to support direct work with children and families

Fellows discussed a broad range of tools used in their direct work. The tools were largely grounded in systemic practice theory, with the aim of facilitating child-focused and relationship-based social work practice that creates change and helps children and families move forward. In fact, fellows felt that tools were ineffective if social workers did not take a systemic, solution-focused approach.

Fellows also mentioned using a trauma-informed approach, such as being aware that asking questions about past experiences can risk re-traumatisation. However, they were not specific as to which tools specifically helped them utilise this theoretical approach in their practice.

Fellows also reflected that the programme didn't introduce them to many tools they could use to engage different children and families. They found themselves drawing on books, other resources or central banks of tools that were shared within their team and local authority. They suggested that Frontline could offer something similar, however, they recognise this may have changed over time.

The tools discussed are summarised in the table that follows.

Tool	Use
Genogram	*"I absolutely adore doing them with families, I find it can be great to build up rapport and also learn about the family in the first few sessions. I then like to bring them back to sessions every now and then to add to them or when doing reports. I also find it's useful for children to be able to gather trust and insight into their lives, and it helps them open up."* *(Female family therapist, Greater London)*
Scaling questions	These types of questions be used as a conversation starter, as a quick on the spot assessment. If you then ask the same question in following sessions, you can track whether/how the response changes to determine whether things have improved or deteriorated.
Three houses	A tool used to assess/get information on the signs of safety.
The miracle question	Helps build an understanding of a child or carer's perspective on goals and what progress looks like for them.
Age-appropriate activities while talking	Doing an age-appropriate activity while talking and asking questions can help a child open up about more difficult topics, as activities such as drawing what the child likes to draw, playing computer games, or going for a coffee provide a different point of focus.
Sitting with silence	Sitting with silence and saying nothing can give a child time to think and permission to share their thoughts
Jenga questions	This can be done as a group activity, such as in an initial meeting with a group of children/siblings. It helps facilitate a conversation and enables information gathering in a way that is less intimidating than a direct conversation. It can also be useful for building relationships if the social worker answers some questions too and there are a mix of social work questions and "getting to know you" questions.
Individualised activities	Examples included: • A worry bag – as the child didn't feel able to verbally share worries, she wrote them down and put them in her worry bag (which she had decorated with the social worker). The social worker then took them away and read them, and discussed worries the following week • A board game with laminated pictures of things the child likes, so the child knows the SW knows and understands them
Interviewing the internalised other	Can be used to communicate with a child who uses non-verbal communication.

Reflections on using practice tools

Main uses of practice tools

Fellows reflected on how they used tools in their practice and what they were useful for. The main uses discussed were centred around relationship building. Practice tools support collaborative work with

families, allowing social workers to gain insight on a range of views and experiences. Fellows also reflected that having a range of tools to draw on was helpful in understanding the experiences and perspectives of different members of the family, as not all tools would resonate with every family or indeed each member of the family.

In addition to relationship building, fellows noted that tools are helpful for shaping and framing the relationship as supportive. Tools help social workers to collaboratively set expectations and goals with children and families, articulating what steps need to be taken to achieve that, and being clear about what change will look like. Therefore, tools can empower a family or child to work towards change themselves.

On the next page, there are three examples the fellows gave during the focus group. The first two examples demonstrate the different ways that tools allowed fellows to build relationships, connect with, and understand the children that they worked with. The third example shows how tools can help add structure to a session, as they can provide a point of focus and a reminder of the purpose of the session.

It was also noted that tools can assist with being mindful of social graces. The fellows observed that the position of power that you hold as a social worker and/or a social worker's personal characteristics have the potential to be intimidating for children and families and thus hinder relationship building. They viewed practice tools as useful in mitigating these effects.

Example One	Example Two	Example Three
One social worker described how using a 'worry bag' created a way of communicating that was more comfortable for the child. It also provided a bit more structure to the discussion: the child knew that the next time they met, they would discuss the worries she had written down. This allowed the social worker to build a deeper understanding of the child's concerns and provide support and a sense of safety for the child.	A female social worker based in the North West talked about using the 'Three Houses' tool to assess signs of safety with a family that included a verbal, neurotypical daughter and a non-verbal, autistic son. The social worker asked the older sister to complete her own version of the Three Houses, but then adapted the approach and asked the sister to complete a version on behalf of her brother. This not only shed light on the son's perspective, but also how the daughter viewed her brother's needs.	A social worker in the South East described using the 'miracle question' as an aid to understanding the family's perspective of what they need and what good looks like, so they can then collaboratively set and work towards goals.

Effective use of tools: facilitators and barriers

In order to use practice tools effectively, fellows noted the importance of taking an individualised, informed approach – not all tools work in all situations, so tools should be chosen and used thoughtfully. To do this, fellows reported some key facilitators. These were related to the working environment as well as skills taught by the Frontline programme.

- **Flexibility in practice**: Because not all tools work in every context, it's helpful to have alternative tools at your disposal. Scaling questions are one such tool: although fellows didn't always plan to use scaling questions, they were described as a tool that could be used "on the fly" and allowed fellows to gain a lot of insight about the child's perspective (e.g., if their response is 500 out of 10, they are clearly in a good place). Permission and support to take a flexible approach was therefore key.

- **Confidence and resilience:** in addition to permission and support, working flexibly requires a certain level of confidence and resilience. Not only do tools vary in how easy they are to grasp, but individual social workers will differ in their ability to use different tools. In addition to this, some tools just don't work with certain children and families. Confidence and resilience are therefore key skills when managing mistakes in the moment as well as for reflecting afterwards; they help social workers feel comfortable with mistakes or when things don't go as planned. Fellows felt this was a strong learning outcome from the Frontline programme.

> "Everything doesn't have to go well because we still gain something from it. And I think that was always something that was really pushed with Frontline."
> **Female social worker, 2017 cohort**

> "Some of that is about confidence […] And that coming over time and just being more sure of your role, more assertive about what you're doing […] I have learned to be easier on myself and just to take a bit longer."
> **Male senior social worker, 2017 cohort**

- **Working in a unit:** fellows found that working in a unit provided important support for implementing systemic practice tools as well as taking a flexible approach. They felt that units gave them the time to develop and space to reflect on the effectiveness of tools in different contexts.

Fellows also described a range of barriers to using practice tools effectively. Some barriers were specific to local authority contexts and others a reflection of a gap in the curriculum of the Frontline programme.

- **Time for planning and reflection**: Time was repeatedly reported as a barrier to using tools effectively. Fellows felt that certain tools were only effective if there was sufficient time to use

them. For example, fellows noted the challenges they faced during their ASYE (assessed and supported year in employment): as they no longer worked in a unit, they found they had less time to develop tools and use relationship building skills, which in turn led to a feeling of being deskilled as the skills were no longer used on a regular basis. Another example was given by the fellow that used 'interviewing the internalised other': they had used this tool as part of their dissertation research and felt that the amount of planning required would not have been available to them during a normal workday as a qualified social worker. Finally, fellows described the importance of time and space to be reflective about the sessions so you can have more awareness going into future sessions. Time therefore presented a barrier to effective use of tools.

– **Rigid and dogmatic approach to using tools**: Sometimes, LAs prescribe a tool or set of tools that should be used in practice at every visit with a child or family. Fellows shared the view that this was not a helpful approach and did not empower social workers to do their best work. For example, one social worker stated that their LA told all social workers to use the Three Houses tool to determine signs of safety. Fellows were in agreement that a dogmatic approach was at best ineffective and at worst "oppressive" and damaging.

> "[Tools] are really, really oppressive when people are being told to do things and they don't understand why or how to do them in an effective way."
> **Female social worker, 2017 cohort**

– **Using tools with SEND children**: This was identified as a gap in the Frontline curriculum and consequently a barrier to effective practice for fellows. One social worker in the focus group could use sign language because of her previous professional expertise and training as a special needs teacher with a degree in learning disability studies. She described how she has found her skills helpful in her social work practice, as they enable relationship building with CYP who use sign language and non-verbal CYP. Fellows felt that, although the Frontline programme dedicates half a day to working with SEND children, this was not sufficient. They also were not confident that what they learnt through the Frontline programme fully equipped them for working with SEND children effectively.

> "I didn't take any skills from Frontline in regards to communicating with children that communicate differently to how we do."
> **Female social worker, 2017 cohort**

Reflections on how children and families experience practice tools
On the whole, fellows described a range of positive experiences for children and families when using practice tools. These experiences largely focused on how the tools helped children and families have a positive experience of direct work with a social worker, as it helped them build a relationship and therefore a level of comfort and confidence spending time with the social worker.

When used well, practice tools supported conversation and gave children the confidence to talk to a social worker. Tools could also reassure a child that you are a safe adult and mitigate any anxiety a child might feel about talking with a social worker. Fellows felt that effective use of tools could help children have a positive experience of direct work with a social worker in three main ways:

– The child could view it as special time with an adult who cares and wants to spend time with them

– The time could be relaxing for the child or give the child skills and tools for relaxation that they could take away and use outside of the session

– If a child enjoyed using a tool, it could act as a reward for talking with the social worker

In terms of discussing difficult topics, fellows felt that tools helped the conversation become less intimidating and could remove the pressure of talking about difficult topics. For example, playing a game whilst talking can provide a point of focus, so it is then easier to answer difficult questions. The game is a distraction so children are less sceptical of the interaction and less worried about saying something they "shouldn't".

There was not as much discussion of families or carers' experiences of practice tools. One positive experience that was discussed related to the Three Houses: a fellow felt that this tool helped the parents better understand their children's perspectives, which was really powerful.

When used less well, tools become less effective. Fellows felt this happened primarily when tools were used "for the sake of it", or when social workers did not take an informed or individualised approach to selecting the best tools to use. This has the effect of making children and families feel like they are receiving a generic service that is impersonal.

> "It was just they were kind of on this conveyor belt of people who were known to social services"
> **Female senior social worker, 2016 cohort**

Key learning and areas for improvement

Throughout the discussion, Fellows reflected on the challenges and issues that came up and shared their thoughts on what could be improved both for the Frontline programme and for the sector as a whole. These reflections centred around the concept of 'direct work' and how to use practice tools more effectively.

A better understanding of 'direct work'
As discussed above, Fellows found the term 'direct work' is unhelpful, and there is not enough reflection within the sector about what direct work means and how to do it effectively. Fellows also felt the phrase "direct work" was unhelpful for children and families. The phrase often gets misinterpreted, and fellows

felt that parents found the phrase scary, as it implies a workbook or a task to be completed, when often it's just about having a meaningful conversation. As such, rather than there being a fixed definition of what direct work should look like, fellows felt direct work should be defined in terms of what it achieves: direct work empowers and supports children and families so that they can make a change to their own safety and happiness.

They believed that the Frontline programme could engage with the term 'direct work' in a more critical and reflective way. From their experience as social workers, fellows described direct work as everything you do as a social worker when you're with a child or family. However, they felt that main take away from the summer institute is that there needs to be some kind of hard evidence of your direct work, like a worksheet or activity, that you can log. As such, the Summer Institute doesn't provide a clear definition of direct work that is useful when you are working as a social worker.

> "Frontline need to think about how they teach us what direct work is because I remember sitting with a whole bunch of work sheets in a direct work session at the Summer Institute. And there was no conversation during the Summer Institute certainly about, you know, direct work can be everything that we have taught you up until this point."
> **Female social worker, 2017 cohort**

Fellows also felt that a better understanding of direct work would enable social workers to engage with children and families in a more considerate and inclusive manner. The noted that sometimes the most effective direct work was the most straightforward: being consistent, acknowledging someone's humanity, and saying sorry. If you are consistent and do what you say you will, relationships with families are much better. It is also true that everyone is human, and everyone makes mistakes, so saying sorry to a client when you get things wrong can really help the relationship.

More effective use of practice tools
Fellows felt it was important to a) train social workers so that they understand why tools are used, b) move away from taking a blanket approach for all cases (acknowledging that this is not the case in all local authorities), and c) use tools alongside a systemic, relationship-focused approach. If these factors are not addressed, tools become not only ineffectual but oppressive, as the social worker is unable to make an informed decision about what tools to use in different situations and tailor tools to the context. One fellow gave the example of the games that were discussed: while things like Jenga and Mariokart might be fun for the children, if you use them with the wrong age group or are not also asking the right questions, you won't build a relationship and get the information you need. As a result, fellows felt that if a social worker does not understand what a tool is for or why it might be used, they shouldn't use it at all.

> "It's like using a hammer to try and you know, fix a computer, it's not going to work. A hammer's a great tool, but not in that situation like."
> **Female social worker, 2017 cohort**

When social workers do have a good understanding of why they are using their tools, they are more likely to use them effectively. They are also better able to adapt and use different tools in different contexts. Fellows observed that when tools are used effectively to set clear goals and plan collaboratively with the family, social work practice becomes more. Fellows reflected that often when families don't engage with the tools, it is the family who get blamed for not engaging with the social worker. They countered this view, suggesting that when a family or child doesn't engage, it might be the social worker's fault for using the wrong tool or using the tool in the wrong way. Ultimately, when social workers use tools more effectively, children and families' experiences of practice tools and social workers are improved.

4. Topic 3: How effective social work impacts children and families

Session 3 overview

This section collates the findings from the third of three focus groups delivered as part of the practice tools pilot. Topic 3 focused on the following key questions:

1. How do you know what impact your practice is having on families, in terms of what you see and what feedback they give you?

2. How are the relationships that you've built with families helpful in supporting families to move towards change?

3. How would you define meaningful and helpful measures of the impact of effective social work on families?

The discussion explored what impact fellows had on children and families, what evidence they use to understand and demonstrate impact on children and families, and reflections on the key barriers and challenges to evidencing the impact of children's social work.

Key findings

On the whole, fellows had lots of qualitative evidence of their impact on children and families from their own direct work. They agreed that tracking outcomes for children and families was important and recognised the value of improving outcomes measurement in the social work sector to better evidence impact. However, they also felt there were some big challenges to overcome in order to provide a holistic picture of the impact effective social work has on children and families. A summary of fellows views on the impact of social work is provided in the below table.

Good relationships are crucial for behaviour change	Relationships and systemic practice play a key role in supporting the behaviour change required for families to make a sustained change.
Evidencing impact is possible and important	Qualitative and quantitative data both have value in evidencing impact, and existing standardised outcome measures show it is possible to balance the need for depth and flexibility with the need for consistency and transparency.
There are common challenges and barriers to measuring outcomes effectively	Insufficient breadth and depth of coverage, sub-optimal choice of metrics, and lack of consistency when collecting data made it difficult to track outcomes and measure impact in a systematic way across the sector.

The rest of this report provides more detail on these themes and findings, along with examples and quotes from the fellows who participated in the focus group. It is structured in line with the key themes that emerged from the discussion. These were:

- – How fellows impact the lives of children and families
- – Evidencing impact on children and families
- – Challenges and barriers to measuring impact
- – Suggestions for improvement

How fellows impact the lives of children and families

Fellows felt that good relationships were the core mechanism through which they impacted children and families. They observed that when a relationship was good, parents/carers engaged with and trusted their social worker as they could see the value of working collaboratively. This in turn meant families were better equipped and supported to make changes, such as being proactive in making changes and getting support and taking ownership over working towards change. Good relationships were, in essence, "pivotal".

> "The relationship to the client is what there is the most evidence about being the vehicle for change more than any other evidence-based interventions"
> **Female family therapist, 2014 cohort**

Fellows agreed that relationship building was primarily facilitated through systemic social work practice. They described a range of examples of how they used systemic practice to build relationships with the children and families they worked with. These included:

– Treating visits like an invitation to work together and taking a collaborative approach
– Addressing issues head on, such as when meetings haven't gone well before
– Asking parents/carers what their preferences are and how things could be done differently
– Involving parents in the decisions made about their children that are in long-term care

Fellows described two key enablers for systemic, relationship-based practice that built good relationships. First, it was important that systemic practice was embedded through supervision in addition to their own practice. Secondly, it was crucial to have the time to take a systemic approach to working with children and families. When caseloads are high or engagement only happens over a short period of time (3 months or less), it can be difficult to spend the time needed to build a good relationship.

Fellows also described three key barriers to building relationships and having a positive impact on children and families:

– Feelings of shame
– Social stigma
– Previous bad experiences with services and provision

These barriers made direct work more complicated as they could shape the way a parent or family engage with a social worker. Parents might struggle to trust the social worker, behave evasively, or intentionally hide information from their social worker rather than working collaboratively and being honest when they needed support. For example, one social worker described a mum who had had a bad experience with other professional services and courts, so at first acted secretive during visits.

> "The story that gets told in the public is like, you know, there is something wrong with your family if Children's Services are involved and that's a really, really tricky thing to then navigate around from where they're looking at matrixes and measuring things because actually that shame makes people want to hide stuff. And so it's, it's almost adding an additional layer of complexity."
> **Female social worker, 2017 cohort**

Evidencing impact on children and families

There was strong agreement amongst fellows that there was evidence direct work had an impact on children and families. The three main forms of evidence that fellows described were:

– Observations of behaviour change over time
– Feedback from children and families
– Existing systematic outcome measures

Observations of behaviour change over time
Fellows felt the primary way in which they knew their work had impact was through their own observations of behaviour change that happened in children and families over time. They saw this as

evidence of the impact of using systemic, relationship-based practice with children and families. Fellows described a range of behaviour changes they had witnessed, all of which started with improving the relationship. They noted that, once the relationship between a family and the social worker improved, the behaviour of parents and carers tended to become more open and collaborative. This could lead to parents being more confident in taking a proactive approach to solving problems, which in turn could move the parents towards second order changes in their behaviour.

Improved relationship between social worker and parent/carer	Parent/carer takes a more honest, open, collaborative approach to working with social worker	Parent/carer becomes more proactive and takes ownership over making changes in their life	Parent/carer moves towards second order change – a sustained change to behaviour

Fellows had many examples from their direct work of how a positive relationship between a social worker and a family led to behaviour change. Fellows described how, in the early stages of the relationship with the social worker, parents/carers might be secretive or try to avoid the social worker. This could change dramatically once a positive relationship had been established, with parents proactively calling their social worker to update them or ask for support. This might then lead to other behaviour changes, such as engaging in courses and having more confidence in communicating and negotiating with schools and other professional services. In one specific example, a female social worker in the North East recalled a dad she worked with, who went from being aggressive and defensive during visits to proactively contacting her to ask for support and share updates.

> "They're being proactive and you see that shift in more than just that one behaviour. You see it in how it impacts on everything else, it's like a ripple effect."
> **Female social worker, 2017 cohort**

Finally, fellows described the importance of motivational interviewing and change talk during visits to help parents reflect and in turn move towards second order change. They felt that getting parents to talk about why they are making a change helps them to understand the reasons for making a change beyond appeasing the social worker or immediate benefits to themselves. Fellows also felt that when a child witnessed a good relationship between a parent/carer and social worker and saw positive behaviour changes, this had a positive impact on the child. Fellows recalled children being more settled once a parent was able to positively change their behaviour. This could have a positive long-term effect too if those children then grew up and had their own children who didn't need support from children's social care.
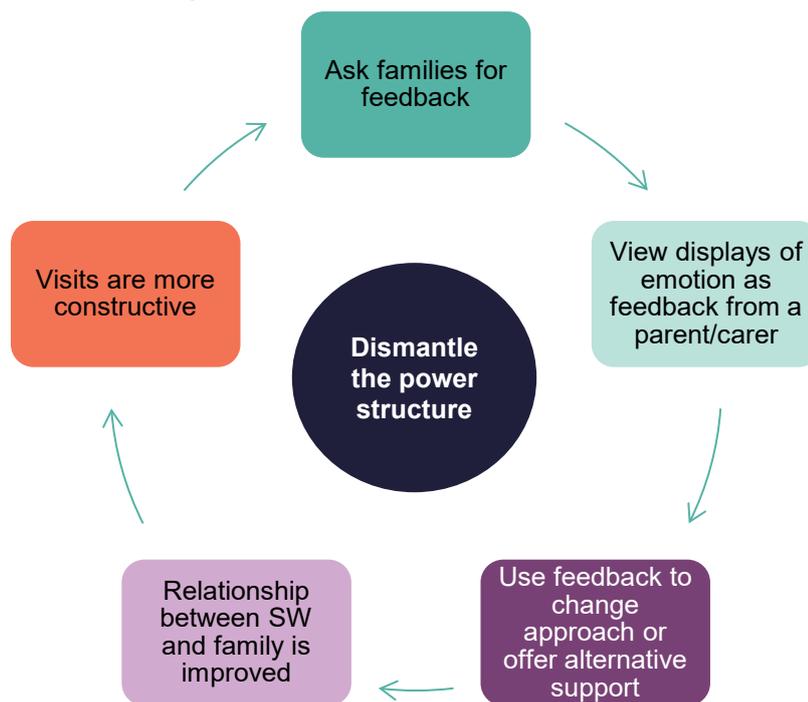
Feedback from children and families

The feedback that fellows received from the families they worked with fell into two main categories: direct and indirect.

Fellows noted that they received the most feedback from families through their direct work with families. When using systemic social work practice, it is best practice to ask families about their experiences when working with them, both at the start of the relationship and then again at regular time points. For example, a social worker might ask a parent or carer their view on the support options available during an initial visit, and then check in every few weeks to see if they are finding the support helpful.

Fellows felt this continuous feedback loop was not only best practice, but that it was also beneficial for effective relationship building and dismantling the power dynamic between social workers and children and families. Fellows described two ways in which they received feedback from families: by asking questions and by interpreting parents/carers emotional responses during interactions. The latter is particularly helpful for fellows who don't feel like they receive a lot of direct feedback from families. If social workers take the feedback on board and make changes that the family can see, the relationship improved, which in turn made visits more constructive. The cycle of using feedback to build and improve the relationship is depicted in the figure below.

Fellows noted that they received indirect feedback from children and families through a couple of mechanisms. These were:

– Child and Adolescent Mental Health Service (CAMHS) end of service questionnaires
– Reflective (cross-team) audits

Fellows did not discuss the CAMHS end of service questionnaires in detail but did share views on the feedback received through cross-team audits. It was noted that audits were most effective when they a reflective, strengths-based approach was taken that involved a discussion with the family. These audits tended to be conducted by someone senior who did not work directly with the family and may sit outside of the team, such as an advanced practitioner, an independent reviewing officer, or a child protection chair. The child and/or family would be contacted directly, and then the auditor would have a conversation with the social worker to share the feedback. A social worker in the North West described how, through this process, she received positive feedback from one of the young people she worked with, who credited his educational progress to working with her.

> "That can be really powerful feedback back because it's being given to somebody else who's asking specific questions. I got some amazing feedback from a young man who had been out of college and out of school. He hadn't been to school since Year Ten and the feedback to the, to the person doing the audit was: 'Without her, I wouldn't be in college now.' So that's impact right there."
> **Female social worker, 2017 cohort**

A practice manager based in Greater London noted that, in addition to the audit process benefitting the social worker, children and families themselves value the opportunity to share feedback. Fellows felt that getting feedback in this way was an effective method for demonstrating the impact they were having on the children and families they worked with.

However, they also noted a range of challenges and barriers with using these mechanisms. These included:

– Unbalanced approach to feedback: there is often a focus on getting feedback for ASYEs, with much less feedback collected for experienced social workers
– Insufficient coverage: feedback is often collected as a one-off and does not track distance travelled effectively

These challenges and barriers are described in more detail below and go some way in explaining why a consistent, structured approach to outcomes measurement is not more common in social work.

Existing systematic outcome measures
In addition to the CAMHS end of service questionnaire, fellows described some existing outcome measures that they were aware of. These are summarised in the figure below.

Although none of the measures were designed to be used exclusively in social work, the fellows still felt they were useful. The two key benefits of these measures included:

– Visual and easy to understand
– Effective in tracking and illustrating change over time

Unfortunately, fellows described a great many more challenges than benefits to taking a more systematic approach and using one or some of these measures more widely across the sector. These challenges and barriers are addressed in the section that follows.

Outcome stars

Collaborative tool used to measure wellbeing and support behaviour change. Designed to be used in a broad range of social services.

SCORE-15

Self-reported index of family functioning and change used in family therapy.

Subjective Units of Distress

Self-reported measure distress and social anxiety used primarily with parents.

Challenges and barriers to measuring impact

The challenges and barriers described by fellows fell under three key themes:

1. Contextual
2. Challenges with current approaches to measuring outcomes
3. Operational challenges

Contextual challenges of measuring impact in children's social care
With children's social care being a complex system, combined with the nuances of individual family circumstances, fellows described a range of challenges around defining and measuring success.

Fellows noted that the needs of children and families can be quite disparate depending on the relationships within the family and the resources they have. For example, working directly with teenagers who are looked after is different to working with parents and their children who are in long-term placements. This means that success looks different for each family. For example, success could mean good relationships within a family and a young person attending university, or it could mean a young person finishing school or training at 18, securing supported accommodation and working well with their

personal advisor. Because families' goals are so different, this then presents a challenge for measuring success.

Second, the journey towards a behaviour or life change that could be considered "success" might not be linear. For example, some families need ongoing support, others need on-off support, and some families get re-referred because support isn't working or they received the wrong support. Fellows felt this was driven by the fact that families experience a wide variety of distress such as emotional, employment, housing, and relationships. This again makes it difficult to define what success looks like. For some families this could be sustaining a change over time, whereas for others it could be using a service once and then returning to that service for further support at a later date.

Because of these challenges defining and measuring success, fellows felt that universal bench marks and inflexible approaches to measurement were not effective when trying to understand the impact of children's social care services. For example, if progress is measured against a five-point scale and the target is reaching level five, this might hide the fact that a family has made progress (e.g., from level two to three), or even be an unrealistic expectation of progress for a young person or family who is starting at a level one and don't have the resources to reach a level five.

Challenges with current approaches to measuring outcomes
Although the various feedback mechanisms used to evaluate fellows' practice (described above) included both qualitative and quantitative methods, fellows felt there were a range of challenges that needed to be addressed in order to better measure outcomes for children and families. Fellows discussed three key challenges with current approaches to measuring outcomes: inherent methodological challenges, challenges with current data management and quality, and operational challenges.

Fellows described how the inherent benefits and drawbacks of qualitative and quantitative data presented challenges when trying to demonstrate the impact of their direct work. Fellows agreed that qualitative data allows for a level of depth that is not possible with quantitative data. It was felt that quantitative data often did not fully demonstrate the level or depth of change that can occur for a family.

They also noted that neither methodological approach was used to its full advantage, often resulting in a partial or incomplete view of the progress made by children and families. For example, fellows noted that the relationships they had with families were a crucial mechanism of change, but that this was not often captured by quantitative measures.

Although fellows noted the inherent benefits and drawbacks of qualitative and quantitative data, most of the challenges they discussed related to quality of the data rather than the methodology itself. A critique for both qualitative and quantitative approaches was that data was often not fit for purpose and so did not accurately demonstrate the impact of their work with children and families. Fellows also felt that current approaches to data collection and management meant that it was often difficult to gain an accurate, holistic view of the relationship and the family's progress over time. For example, a single observation is only a "snapshot" of the relationship a social worker has with the family and not holistic.

> "What some people say to us is they feel like people are different in observations or when their practice is being evaluated. It's like, why are you coming out with always funny language and actually then how much does that reflect what is actually happening in practice?"
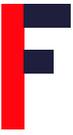> **Female practice manager, 2014 cohort**

The table below summarises the key challenges with current approaches to data quality and management identified by fellows. These challenges highlight the need for data to be fit for purpose, of sufficient depth, and collected in a systematic, consistent way.

Not enough data collection points	Although there were many points at which you could gather feedback to track outcomes over time and capture stories of change throughout practice, data was often a "snapshot" collected at a specific time point. As a result, there was limited information about distance travelled, and it is difficult to track whether the same problem is coming up repeatedly, or if family has a series of different problems.
Lack of consistency for tracking outcomes	Observations tend to be infrequent and happen in isolation, and LAs vary in how they collect quantitative data as there are no sector-wide shared quantitative outcome measures.
Outcome measures need to be more sophisticated	Social work outcome measures need to (and don't currently) account for the fact that progress isn't linear and there are many influencing factors outside of the direct relationship.
Using sub-optimal metrics	Quantitative outcome measures often focus on metrics like time spent with children and families and the timeliness of social workers. This doesn't give a clear view of all factors influencing outcomes, such as how effective the social worker is at building meaningful relationships with a family.
Biased approaches to collecting data	There is often a focus on collecting feedback in particular circumstances: • for ASYEs • in exceptional or unusually good/bad cases • with a focus on the social worker's practice rather than the quality of the relationship • for time-limited interventions, with a focus on rereferral rates

Operational challenges

Fellows also described a number of operational and process barriers that prevented them from using data effectively. These centred around cost, flexibility and transparency.

Ineffective use of existing data	Good measures exist but they are not always used effectively. For example, re-referral rates could be a useful proxy for measuring the effectiveness of a social worker but are not currently used in that way.
Psychological barriers	A common view in the sector is that there are too many things to measure and social workers can't capture it all.
Cost of measurement tools	While some tools already exist for shared outcome measures that could be adopted more widely across the social work sector, fellows

	noted that these are often licenced so there is a (prohibitive) cost associated with using them.
Lack of flexibility	Social workers don't get the flexibility they need when using outcome measures (compared with, e.g., CAMHS, where you have the flexibility to use different outcome measures in different contexts.
Lack of transparency	In the circumstances where data is captured, this is not always shared effectively across teams/agencies. For example, case closures can be delayed or rushed, so sharing outcomes more widely

Suggestions for improvement

Fellows also had a couple of suggestions for addressing these challenges. One suggestion for taking a more sophisticated approach was to group children by their social care status and compare outcomes. They noted the work of Donald Forrester who suggested the following groups as this is often where there were the biggest disparities:

– CYP on a child protection plan and in care

– CYP on a child protection plan but not in care

– CYP in care and not on a child protection plan

Fellows also felt it would be useful to have a toolkit of different things to allow for the flexibility they need, while also providing more consistency in how data is collected.