

## **Principal Social Worker Report – Senior Management Response**

**Oct 2017**

What you told us needs to change.	What we did in response.
<p>Caseload weighting not realistic, accurate or working. Need small manageable caseloads for staff.</p> <p>Not enough Social Workers to cover the workload in the timescale expected</p> <p>Apprehensive of staff changes / staff leaving / lack of permanent staff.</p> <p>Lots of changes of IRO's &amp; CP Chairs resulting in very different working styles and quality is not what it should be. Danger statements and CP plans are too generic and not specific enough. They also need more context.</p>	<ul style="list-style-type: none"> <li>• Caseload weighting was reviewed again and considered the number of children open as opposed to only focusing on the weight of a case. This has enabled us to increase SW capacity in order to reduce caseload.</li> <li>• Recruitment of SWs is one of our key priorities including an enhanced and creative recruitment campaign against an ever competitive national and local market.</li> <li>• QA &amp; Review Service Manager delivered a workshop to all CP Chairs regarding consistency of their practice across all conferences – including danger statements. Protection Plans were dip sampled. Further evaluations are planned.</li> </ul>
<p>KPI's can be hard on workers. Sometimes it is not clear who is responsible for collating information for ICS.</p> <p>Some workers feeling micro-managed which is disempowering.</p>	<ul style="list-style-type: none"> <li>• Changes and improvements to our QA Performance Framework will mean greater clarity and ownership at team level of performance. This will allow teams to own performance information which they will validate, it will provide an accurate reflection and therefore reduce the feeling of scrutiny.</li> </ul>
<p>The time it takes to complete chronologies</p> <p>ICS not working well. Time it takes to use ICS. Time spent with young people is decreasing due to time needed for recording.</p>	<ul style="list-style-type: none"> <li>• ICS processes have been developed to assist in the creation of chronologies. The policy and guidance has been signed off.</li> <li>• The upgrade of ICS remains a priority.</li> </ul>
<p>Some Social Workers don't feel valued and don't feel there is enough recognition from Senior Management.</p>	<ul style="list-style-type: none"> <li>• CSMT recognise that our heightened level of scrutiny has led to feelings for some staff of being undervalued and that the excellent work does not get noticed. This is a timely reminder for CSMT to reflect on how we provide high support coupled with high challenge.</li> </ul>
<p>Staff feel there is a lack of handover and</p>	<ul style="list-style-type: none"> <li>• The transfer policy gives helpful</li> </ul>

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inductions for new & agency staff.	<p>guidance for the standard expected in the transfer of children between and within teams. We want TM &amp; ATM to appreciate the value and encourage a good handover in all cases.</p> <ul style="list-style-type: none"> <li>• Work is ongoing with the Consistency Across Social Care Group to develop induction packs across the social work teams.</li> <li>• Induction guidelines for IROs is also being developed.</li> </ul>
Individual support and reflective supervision is not consistent for all.	<ul style="list-style-type: none"> <li>• We absolutely acknowledge this and know that reflective supervision lies at the heart of SW practice. This remains an area to strengthen as practice is variable. We are developing ways where the ratio between SW &amp; manager is such that there is the capacity to deliver reflective supervision on a more consistent basis.</li> </ul>
Unclear about changes to adoption when we move to ATV and the possible impact or difficulty finding adoptive placements.	<ul style="list-style-type: none"> <li>• Within the month of November we will ensure there is an information session to update the SW workforce regarding our adoption practice and the impact of the transfer to ATV.</li> </ul>
Placement issue – worried that SWs will become expected to care for children overnight. Staff are asked at short notice. Impact of work / life balance and blurring of boundaries for children. Feel there is a disconnect with Senior Management on urgency of placements.	<ul style="list-style-type: none"> <li>• HOS is absolutely clear that there is no expectation for SW to remain with children overnight and in fact is totally discouraging of this practice. We therefore acknowledge we need other resources available to enable children to be kept safe in emergency situations. Plans are in place to develop these resources.</li> </ul>
Threshold for a service to be consistently applied across teams.	<ul style="list-style-type: none"> <li>• Our audit activity has sighted the variance of thresholds across teams. Continuous focus on performance in our new QAPB will enable improvement and consistency</li> </ul>
Performance information, recording V contact with children should be debated.	<ul style="list-style-type: none"> <li>• HOS is absolutely clear that a decrease in caseloads and the improvement of ICS will mean that direct work will be more achievable and recorded in a way that enables the children's lived experience to be reflected.</li> </ul>