

The significant role supervision and management plays in child welfare and protection has been commented on by a number of reports in the UK including Messages from Inquiry Reports (1980-89), Laming (2003, 2009), O'Brien (2003), Social Work Inspection Agency (2005).

In his Inquiry report in to the death of Victoria Climbié, Lord Laming (2003) commented: 'Effective Supervision is the cornerstone of safe social work practice. There is no substitute for it' (p. 211). The Eilean Siar (SWIA 2005) report considered the ongoing neglect and sexual abuse experienced by children within one family and highlighted the key role that managers have in enabling staff who are in direct contact with children and their families to maintain a focus on the needs of the child, and the capacity of parents to meet their children's needs. It stated

...there is plenty of evidence from previous child abuse inquiries that front line staff who are in daily contact with parents often find it hard to sustain their suspicions about them. There is a vital role for managers to hold this awareness and to challenge and support staff to constantly review and update their opinion of the children's safety in the home (p.126).

Following the death of Peter Connelly in Haringey and the publication of Lord Laming's 2009 report *The Protection of Children in England: A Progress Report* a Social Work Task Force was set up by the Secretaries of State for Health, and Children, Schools and Families to advise the government on social work reform. The Task Force reported in November 2009. Amongst their recommendations about pre- and post-qualifying social work education and training, they also considered the key role supervision played in contributing to high quality social work practice and improved outcomes for service users and carers. The Task force commented that:

Supervision is an integral element of social work practice not an add-on. Through it social workers review their day to day practice and decision making, plan their learning and development as professionals, and work through the considerable emotional and personal demands the job often places on them (2009, p.29).

In their interim report the Task Force had identified three main functions of supervision. These were:

- line management- including managing team resources, workload management, performance appraisal, duty of care, support;
- professional (or case) supervision reflecting on and responding to the challenging questions thrown up by practice, including implications for the practitioner's welfare or safety; reviewing roles; evaluating the impact of actions and decisions; learning from day to day practice;
- continuing professional development ensuring social workers are developing the skills, knowledge and experience necessary to do their job well and progress in their careers. Observation of practice and constructive feedback should be part of the process.

Continued >

Following the publication of the interim report over 1000 social workers were surveyed, and one of the findings was that many did not get access to the full range of supervision types, rather supervision tended to focus on case management (Baginsky et al. 2010). The Task Force (2009) recommended that there should be a 'clear national standard for the support social workers should expect from their employers in order to do their jobs effectively' (p. 32). The Laming report (2009) had also recommended that guidelines should be established to guarantee supervision times for social workers, and that the then Department of Children, Schools and Families should set out the elements of high quality supervision. Laming recommended that this needed to include case planning, constructive challenge and professional development.

## **Relevant Models**

The definition (and functions) of supervision varies within the literature and within different policy documents and inquiry reports. Morrison (2005) defined supervision as the process by which one worker is given responsibility by the organisation to work with another worker(s) in order to meet certain organisational, professional and personal objectives. These are:

- competent accountable practice;
- continuing professional development;
- personal support;
- engaging the individual with the organisation.

Pritchard (1995) identified 6 tasks of supervision:

- maintaining and developing unit operations;
- clarifying staff roles and responsibilities;
- facilitating a climate for good and imaginative practice;
- help people cope with stress;
- assisting creative professional development;
- providing feedback to organisation on policy and practice.

How supervision should look is a subject of ongoing debate. Some commentators have suggested that the supportive and management functions of supervision can be separated (Stanley and Goddard 2002) while others (Hughes and Pengelly 2002) highlight some of the difficulties of doing this in terms of accountability. Dependant on the organisation in which practitioners work, it may be that the different functions of supervision are carried out by one person, or that the different tasks are performed by different individuals. If the tasks are separated one area which practitioners and those who have supervisory responsibility will want to consider is the potential that this may cause tasks to be replicated, or alternatively for assumptions to be made that 'someone else is taking responsibility' and consequently that things can fall down the middle. Practitioners are likely to work to different thresholds which affect when and how they intervene with or on behalf of children and young people who are experiencing neglect. Where case management rests with more than one individual, there is the potential that each may hold a different threshold for intervention. Dalgleish (2003) developed a model that enables workers to reflect on the difference between the threshold for assessment, and their personal threshold for action. Practitioners and supervisors may want to look at this in more depth within the supervisory relationships to help explore where there are differences / similarities in thresholds for intervention, why these differences exist, and what the potential impact is for the child and young person who is experiencing neglect.

Continued 2

## Childhood Neglect: Improving Outcomes for Children

## **Keeping the Child at the Centre**

Those in a supervisory role can keep the child at the centre throughout their assessment and intervention particularly given concerns that at times the needs of parents and carers can obscure the needs of children and young people.

Ofsted (2008) carried out an evaluation of serious case reviews from April 2007- March 2008. The report commented that 'Possibly the single most significant practice failing throughout the majority of the serious case reviews was the failure of all professionals to see the situation from the child's perspective and experience; to see and speak to the children; to listen to what they said, to observe how they were and to take serious account of their views in supporting their needs' (p. 18).

Ofsted's findings are mirrored by much of the literature on child welfare and protection which highlights that children's experiences are not always at the centre of assessment and intervention, despite good intentions and legislative and policy drivers (Holland 2004; Cleaver and Walker 2004; McLeod 2008; Munro 2010 and 2011). One of the reasons for this may be that in order to keep children and their needs at the centre professionals have to engage with children and young people about difficult or uncomfortable subjects.

There is some evidence that professionals avoid talking about difficult areas to protect themselves, and that child and young people avoid sensitive or difficult subjects because they know workers will find it difficult to hear them (Killen 1996; Mudaly and Goddard 2006; Morrison 2007). There is also some evidence to suggest that an unintended consequence of professional efforts to work in partnership with parents is that the needs of children can become secondary (Stanley and Goddard 2002; Laming 2003; SWIA 2005). Where there is a concern that children and young people are experiencing neglect, supervision (informal and formal) can play a key role in helping workers unpack and unpick their engagement to help them to ensure that the child/young person remains at the centre. One model that can assist supervisors to focus on the needs of the child and ensure that the child is' brought in to' supervision, is the supervision triangle (Hughes and Pengelly 2002).

One exercise practitioners and supervisors may want to complete is to look at how they could 'bring' the child in to supervision to think about what neglect might mean for the child. For instance, is there an empty chair which symbolises the child or young person? Does the supervisor ask the practitioner to look at the chronology from the perspective of the child? In the chronology a professional might note that the child has had untreated head lice for 3 months. However, if a child were to write about the impact of on her/him this s/he might mention how itchy it is, how it makes it difficult to concentrate, how no other child wants to sit next to her/him and that s/he was the only person not invited to a classmate's bithday party.

Within supervision, one area which should be explored is how the practitioner is applying relevant theory to practice. For neglect, it will be relevant for practitioner and supervisor to consider the attachment strategies a child may have developed to try and ensure that his or her needs were met, and whether these might prove maladaptive in the longer terms. Here practitioners can be encouraged to consider what children and young people may have missed as a consequence of neglect. Hughes (1998) coined the term the 'trauma of absence' to describe the impact of children missing day to day experiences that children and young people who are not experiencing neglect might take for granted. Another area which should be explored in supervision is how professionals can build on resilience. If resilience is understood as both an outcome and a process, the impact of neglect can be seen as significant (Davies 2004).

Continued >

## Childhood Neglect: Improving Outcomes for Children

The three building blocks of resilience are having a secure base, self-esteem and self-efficacy (Gilligan 2009) and within supervision practitioners can be encouraged to reflect on the impact neglect has on each of these building blocks. For instance, self-esteem can be described as appreciating one's own worth, and being able to be act responsibly towards others. Daniel and Wassell (2002) identify that the roots of self esteem are based on early experiences of being and feeling loved within attachment relationships. Garbarino (1980) argued that a focus on the physical aspects of neglect, and practical interventions misses the real significance of neglect for the child or young person's developing sense of self, and that neglect always carries an emotional message. When considering neglect within supervision, the 'meaning' of neglect for the child needs to be the focus, and the link made to feelings of self esteem. There is some evidence (Brandon et al. 2008, Hicks and Stein 2010) that practitioners can experience difficulty engaging with teenagers who are experiencing neglect, and that the impact of neglect on teenagers has been underestimated.

Hart (in Daniel and Wassell 2002) identified that for adolescents their feelings of self esteem and self worth can be linked to five different areas, all of which can be affected by neglect. These are:

- scholastic competence;
- athletic competence;
- social acceptance;
- physical appearance;
- behavioural conduct.

Within supervision, practitioners can be encouraged to think critically about the impact of neglect on these five areas.