

# Inspection of British Forces Social Work Services

**Inspection dates:** 10 to 19 October 2023

**Lead inspector:** Russel Breyer, His Majesty's Inspector

This inspection was undertaken in line with the guidance set out in the framework for the Inspection of Local Authority Children's Services (ILACS)<sup>1</sup>. The inspection findings for both the British Forces Social Work Services (BFSWS) Cyprus and Overseas are set out in separate sections in this report.

In various jurisdictions world-wide, the BFSWS aims to mirror the standards of local authority children's social work services in England and Wales. The service takes account of the statutory framework and offers a range of help and protection services, but where children and families needs exceed what can be supported abroad repatriation to the UK is sometimes necessary.

## Headline Findings

The Cyprus service is based on base, on island and works well with partners to navigate complex arrangements and military requirements. Workers keep a clear focus on children, responding swiftly and finding creative solutions to meet children's needs. Workers patiently develop relationships with families and children to directly offer help and support. Social work recording and management oversight is not always consistently applied.

BFSWS Overseas staff are mainly UK based, with one social worker based permanently in Brunei. Staff travel overseas when necessary. The service responds swiftly to the needs of, and concerns about, children across a wide range of overseas military locations. Workers are child-focused, understand the needs of children and families in the military community well, and patiently and persistently develop relationships to deliver help and support. Workers provide practical help, and support families to access services in their local communities. Management oversight is strong, which enables effective work to take place.

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<sup>1</sup> <https://www.gov.uk/government/publications/inspecting-local-authority-childrens-services-from-2018/inspecting-local-authority-childrens-services>

The Cyprus and Overseas services are well supported by a UK based senior management team that shares the enthusiasm and passion that both services have for its work.

Social work practice in the Overseas service is determined by a clear operating model and practice guidance which leads to very effective interventions with children and families. Arrangements in the Cyprus service are less well developed and could be strengthened. Service leaders are open to adopting similar approaches across the two services to enable the best quality service for children and families irrespective of where families are serving abroad.

## **What needs to improve?**

### **Cyprus**

- Recording of all work undertaken by social workers with children and families.
- Recording of regular management oversight on children's files that gives a clear rationale for decisions, updates actions, and sets expectations around processes to be followed, in particular the timeliness of child protection investigations.

### **BFSWS/MOD leadership**

- Clear step-up/step-down arrangement and early help coordination in all locations.
- Consistent application of practice guidance and auditing arrangements across BFSWS.
- Inclusion of social care assessments where families with children are being considered at MOD Assessment of Supportability Overseas (MASO) meetings.
- Clarity of interfaces and arrangements across all BFSWS partnerships, for example with Defence Children's Services, including the role of the DADO<sup>2</sup>.
- Resources available to support children with special educational needs and/or disabilities.
- Parental consent obtained in line with UK practice, and those with parental responsibility informed of work undertaken with their children.

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<sup>2</sup> Defence Children's Services equivalent of the Local Authority Designated Officer (LADO)

## **The experiences and progress of children who need help and protection**

### **Cyprus**

1. Contacts and referrals are swiftly triaged. Social workers speak to families and professional partners at an early stage to understand children's needs or concerns for their welfare. Parental consent is not always obtained by social workers before checks are made or conversations held with other professionals, which makes it more difficult for trusting relationships with families to develop.
2. Social workers take immediate action, when appropriate, to help and protect children, including outside of working hours, and work with partners to consider whether ongoing need can be met by community services at a lower level of intervention. Social workers respond appropriately when need escalates. Thresholds are not well understood by all partners, and are not always consistently applied by the service, which sometimes adds to partners' anxiety and confusion about how thresholds should be applied. Some children are referred multiple times for the same concerns, which leads to repeated contacts to families and delays to children being helped at the right level.
3. Children's case records do not always show the work done by social workers following referral. Social workers sometimes continue work with families without formally recording an assessment or providing services as a 'child in need', which leads to a lack of clarity about roles and responsibilities within the plan for the child for professional partners, and for families.
4. Early help is co-ordinated by the defence children's services rather than BFSWS. When it is determined that a family should receive early help through a 'team around the child', the partnership of children's services misses opportunities to make swift progress for some families.
5. Assessments achieve a good understanding of family life. Workers consider well the cultural contexts of children and their families, and the dynamics that operate while families are on base.
6. Timely strategy meetings include all partners and make reasoned decisions and plans to address risk.
7. Child protection assessments are comprehensive and capture the child's voice and lived experience. Outcomes are proportionate to the information gathered and to the analysis made. Delays in completion of some child protection assessments mean that, although risk is not lost sight of, risk is not always fully assessed in the most timely way. This also means that interventions take longer than they need to.
8. Child in Need (CIN) assessments are comprehensive. Social workers build relationships with children and families to gain the views of the child.
9. Chronologies, and a thorough understanding of family history, inform reports to child protection (CP) conferences. The independent conference chair provides external

assurance on the quality of practice. In addition, they provide consultation and advice to practitioners, to help ensure that plans protect children and help them to make progress.

10. CP conference minutes are detailed. Parents' views are considered well in conferences. Partners are involved in decision-making. Conferences make appropriate decisions and plans which protect children. Regular, well attended and purposeful core groups support planning and the change process for both children and their family.
11. Most children on CP plans make good progress and remain on plans for short periods of time. When the pace of change is too slow, decisions are made with the MOD around supportability – the Command process which determines whether families remain overseas or return to the UK.
12. Social workers build relationships and work sensitively with children of all ages to understand their experiences and the impact of risk on them. They use a range of direct work tools which helps children to make progress.
13. Social workers are patient and persistent in engaging parents and work skilfully with parental anxiety and resistance so that families make progress. The views of parents are considered in all meetings, and children are supported to participate where age-appropriate.
14. Social workers have a good understanding of abuse, neglect and exploitation and respond with tailored interventions in a multi-agency network.
15. Arrangements for responding to extra-familial harm are not clear to other professionals or to families. Safeguarding processes are not used well to coordinate the multi-agency response. Parental consent or dispensing with consent is not always considered early enough when dealing with extra-familial harm which delays work with children to reduce harm.
16. The help given to children and families enables most to make progress and to make the changes essential to improving children's lives.

### **Overseas**

17. Referrals are swiftly triaged and receive an early response at the appropriate level of need. Partners do not always gain consent from families before referring for support needs, which leads to unnecessary contact from social workers.
18. Help and support is provided as soon as possible, either directly by social workers or by working with partners and community resources overseas, both on and off base. Immediate responses appropriately focus on presenting needs. This helps to protect children, and to move situations on swiftly.
19. Information and concerns are shared with partner agencies to ensure that risks and need are well understood. Workers link with professionals already involved in

children's lives, including health and school staff to ensure their knowledge and skills are engaged, and work well with partners to support families at lower levels of need.

20. Thresholds are appropriately applied. Social workers are conscious of the need to step interventions down to lower levels when the time is right.
21. Social workers achieve a good understanding of family life by researching the family history and culture, using chronologies and genograms compiled with families. Workers consider the cultural contexts, and the dynamics that operate while families are on base. They work sensitively to build relationships, providing support that is relevant and acceptable to the family, and which makes a positive impact on children's lives.
22. Children's needs are considered holistically. Effective observations are made of children, using technology, partner agencies and, where necessary, international visits to ensure that children's needs are understood.
23. Strategy meetings are well attended and share information fully to inform discussion and analysis of risk. Meetings make appropriate decisions and develop plans for timely action.
24. Assessments are thorough and include the contributions of all professionals. Children's and parent's views are captured throughout. Assessments pull together and interpret a broad range of information. Analysis is balanced, considering risks, strengths, and complicating factors, and leads to plans relevant to the issues and identified needs. Social workers engage children and parents in work before the completion of assessments and, in some cases, work with families is completed by the time assessments are finalised.
25. Interventions consider the safety of children and vulnerable adults. Responses are thorough, offering advice and a range of support. Resources vary significantly in different locations, and in some locations are scarce. Workers operate effectively in this environment, using direct work skills and solution-focused approaches to meet children's needs. Social workers build trusting relationships with parents, using a range of skills to undertake direct work. This is particularly valuable where local resources are limited.
26. Children are kept at the centre of the work. Workers begin direct work with children at an early stage to move matters on. Adults' needs are considered where necessary to ensure children make progress, however they do not become the focus of the work.
27. Plans are well thought through. Partner agencies and families are involved in developing plans. Plans are regularly reviewed and updated, to ensure that they are responsive and relevant to need. These help to reduce risk and meet children's needs.
28. CIN meetings are regular, timely and well attended. Records of meetings show where progress is made as work is completed and show when further work is

required. Regular oversight of children’s case records by managers ensures that work is on track.

29. Children’s views, and observations of behaviour, are included throughout the work. Social workers spend time with children, building relationships and supporting them to understand the change needed. They advocate on children’s behalf with professionals and parents to strengthen the child’s voice.
30. Direct work is purposeful around the presenting concerns, enabling children to feel heard and addressing need and risk. Distance limits what can be delivered in person: workers are skilled at direct work in this context, using technology and working with on-site partners to help make direct work with children effective.
31. Work done with children is not always shared with all those holding parental responsibility. When this is the case, parents who are still active in children’s lives do not know what professional help their child is receiving and are not able to support this work.
32. Social workers are experienced at addressing a wide range of need and risk. They recognise all types of harm, including peer abuse and online risk, helping children and their parents to manage harm from these sources. Where harm from outside the family is evident, situations are sometimes complicated by cultural difference and jurisdiction, which can limit the effectiveness of actions. When this happens, social workers are pragmatic and make best decisions based on available options to safeguard children.
33. Children and their parents are supported to address issues of need and concern. Meaningful outcomes are achieved. When Command is considering decisions of supportability, social workers maintain their focus on what is in the best interests of the child and family, including accommodating children in the shorter term. Gaps in services and support for disabled children lead to challenges and supportability issues, resulting in families returning to the UK to access support.
34. Where decisions are made for families to return to their home country in the UK, social workers, with parental consent, contact the relevant local authority to request ongoing support, or to ensure that education services are informed of the need for resettlement support.

## **The impact of leaders on social work practice with children and families**

### **Cyprus**

35. Leaders are focused on ensuring that the right services are in place to meet children’s needs and work well with the MOD and local partners to achieve this, despite the complexity of arrangements and different organisation’s needs.
36. A well-chaired Local Safeguarding Board brings together key agencies, and all contributions are valued. The LSB has a strong focus on the needs of children and families, and a good understanding of the complexities of delivering support and

safeguarding services in the context of serving abroad in another jurisdiction. The Local Safeguarding Board tracks actions robustly, to ensure progress.

37. The local context overseas makes it challenging for leaders to provide a clear, predictable environment for social workers to do effective work. Social workers battle to make sense of the systems and to make them work for children. There is a lack of resources in key areas, including paediatric medical service and interpreting support, which causes delay in some cases.
38. Defence Allegations Dedicated Officer (DADO) arrangements sit outside of BFSWS. It is not clear that all safeguarding information is fully shared with BFSWS as responses to concerns about adults who are working with children. This information is not always clearly articulated on children's records. Therefore, it is not always clear that concerns have been heard and appropriate action taken. Risk to other children is not considered in all cases.
39. The comprehensive central training offer provided by BFSWS is not fully accessed by social workers, who feel that the relevance for the Cyprus context should be strengthened. Leaders are aware of this and are working to resolve it.
40. Management oversight of practice is not consistently recorded, including management decisions and directions given to workers. There is a lack of clarity and accountability about what actions have been agreed.
41. The standard and impact of case auditing has not been consistently maintained while the Quality Assurance manager post has been vacant. Learning from auditing has not been used to improve practice in this period which is a missed opportunity.
42. A comprehensive range of support is provided to new workers joining the Cyprus team. The induction process is thorough, and workloads are manageable. Staff feel well supported, and some who have previously worked for the team are now returning.

## **Overseas**

43. Partnerships for the Overseas service are diverse across the globe. Leaders sustain a supportive culture which enables workers to navigate and align complex partnerships arrangements.
44. Social workers benefit from clear practice guidance which aids the quality and impact of practice with children and families. Management oversight is clearly demonstrated and contributes to high standards of social work.
45. Overseas partners report effective working relationships with social workers which they find supportive in their work with service personnel and their families. Communication is strong, partners are included in meetings, decision-making and planning, and are provided with regular updates.
46. Partners appreciate a high degree of flexibility from the service around working times, and the generosity of BFSWS staff in providing advice, sharing skills, and supporting initiatives locally.

47. Partners feel that BFSWS makes a clear difference for families: they see improved outcomes for children in a variety of ways. One military colleague provided an example of how a social worker supported a family to negotiate complex regulations across different jurisdictions to foster a child. Another described how a parent had been supported to recognise and deal with controlling behaviour from a partner.
48. Workers have a wide range of skills which they use to provide direct support to families. They are encouraged and supported by managers to develop these skills.
49. The case auditing approach used by the Overseas service is effective and helps drive further improvements in practice and therefore the experiences and progress of children and families. The involvement of both practitioners and managers is a strength leading to clear actions being agreed, and audits having a positive impact on practice.
50. Management oversight is present on children's records and helps drive the effectiveness and impact of work with children and families.
51. Workers are committed to the service and have formed a stable team. They feel well supported by managers, feel listened to and feel that they are part of a team. Workers value the training opportunities and feel that their own individual areas of focus and specialisms are promoted.
52. Social workers have low caseloads. While interventions are proportionate to need, this gives them the time to undertake high-quality direct work, to follow through on actions, and to complete work which can avoid families being passed on to other services.





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