

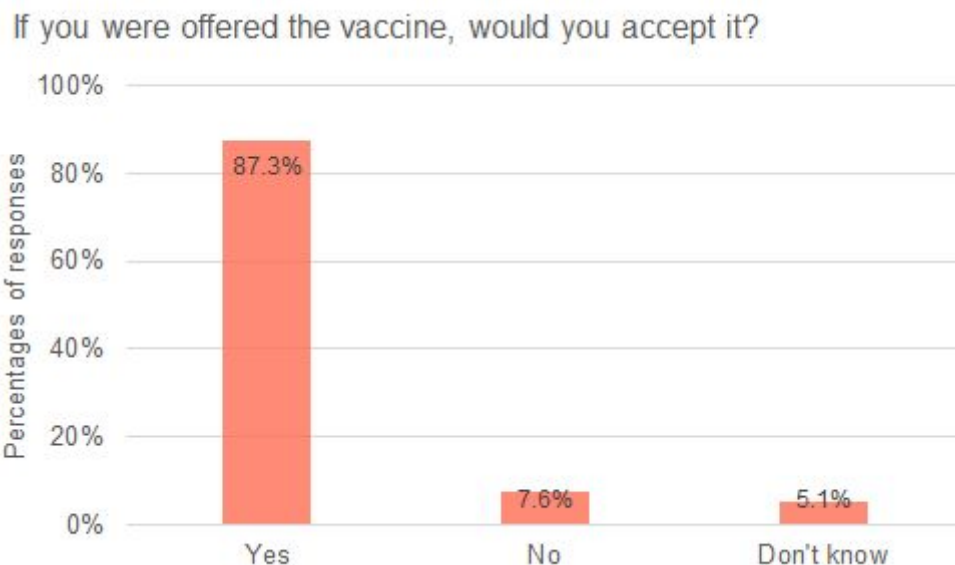
Polling results report: 10 February 2021

This report

This report covers the period between the 26 January and 8 February 2021.

Would you have the vaccination?

Fig.1



For those of you that said yes, here are some of the reasons you gave.

Sixty one practitioners explained why they would have the vaccine if offered. Several practitioners felt that they would be in some way reassured by having the vaccine. One respondent who has already received their first dose, stated that they feel *“more comfortable about going out now that I know I have an extra level of protection”*. Receiving the vaccine also helped this social worker feel prioritised and recognised in a front line occupation.

Several respondents felt reassured that they would be less likely to spread the virus particularly when working with vulnerable families, and that they would be less likely to contract the virus themselves and risk spreading it to loved ones. One social worker said it would be a *“vast improvement”* by having the vaccine as they would experience *“less stress knowing I will not spread the virus”*.

One social worker mentioned a benefit of having the vaccine would be *“getting some normality back”* by being able to go into the office and have face to face meetings. Another practitioner explained they were clinically vulnerable and the support for parents who are also clinically vulnerable. They said they were *“in and out of homes of many families, some*



of whom are also clinically vulnerable. I want to do my best to reduce the risks for myself, my family and those families I work with”.

There was also a sense that having the vaccine would give individuals something to look forward to, one social worker stated that they would be *“able to do more of the things I enjoy doing which give my life meaning”*. Another saying, *“it would mean that I could look forward to going abroad again - travelling is a key part of how I keep myself sane in such a busy job - at the moment it feels that I am working flat out, with little to look forward to!”*. Other practitioners said that having the vaccine would improve their day-to-day life *“immensely”* and *“significantly improve it”* giving *“peace of mind”*, and that they were *“delighted to have had it and feel privileged”*.

Some practitioners felt that having the vaccine would have little impact on day-to-day life, as they will *“continue to behave as I have done”* and *“abide by all Covid related guidance”* and would continue to work from home. One respondent felt that having the vaccine was *“not a magic wand”* and they would be continuing to *“social distance and stay at home”*.

For those of you that said no, here are some of the reasons you provided.

Four practitioners gave their reasons why they would not accept the offer of a vaccination. Some practitioners did not want to have the vaccine for health reasons, such as being on immunosuppressant medication or because they are currently breastfeeding and felt there was a lack of research into the effects of the vaccine on babies. Other comments included concern about the vaccine's efficacy and not feeling personally at risk.

What do you think the priority areas should be for the Care Review?

Sixty- five practitioners responded to our request for views on priority areas to focus on in the Care review. This was an amazing response, so thank you to all of those that took the time to answer. The results are summarised here and categorised into themes.

Service areas

Early intervention was a popular theme with a number of social workers suggesting: *‘Preventative services and streaming those services to effectively support families promoting independence rather than reliance on professionals. Reducing cost in the long run for repeated intervention.’*

With more emphasis on early intervention, this could then lead to reducing entry into care.

‘I think a key area to focus on is early intervention and whether services could have been provided at the beginning to support the family, and whether this would have enabled change to occur to prevent the child/children coming into care.’

Several practitioners suggest safeguarding and care planning teams should be prioritised *‘(due to [the] all time high of LAC and ensuring that children can live with their families where*



safe. One person suggests a review of the 26 week court timescales, which *'rush assessments and do not allow enough time for change to take place'*. The use of child protection plans was also raised, with one person advocating for *'less use of CP plans'* and for them *'only [to be] used for the highest risk children'*; another person states they are *'often used when professionals are at a loss of what to do next'*. Contextual safeguarding was also raised with thoughts on: *'How do we keep young people safe from county lines and CSE, without moving them all around the country[?]'*.

Many of you suggested children in care should be prioritised; this is due to the fact that *'numbers have been hugely rising over 10 years and we know that those in care experience more issues with many aspects of adult life'*. Several highlighted hearing *'the voice of the child in care'* and understanding *'the journey of LAC through care and after care'* as important. Furthermore, one person advocated for investing in *'early permanence, life story information and sharing'*. Services to the *'care post-16'* as an area to prioritise; *'the support offered to Leaving Care needs to be more thorough as many young people struggle to cope with the lack of support services available'*.

Bureaucracy and systems

'Social workers spend too much time completing paperwork and meeting assessment deadlines which seem to be more important than the quality of service provided...'

Paperwork, administration, and recording systems were frequently raised to be a focus of the review; this is so that frontline staff *'can be more effective in their role'*. Closely related to this, is a *'culture of risk management'* and a *'performance culture'*, [which creates a] *'reliance on protocol affecting relationship-based practice'*. One person advocates for a national case management system that social workers can use *'to access any child records no matter where they have resided. We need one system for all authorities'*.

Workforce capacity and stability

Practitioners suggested the focus should be on: *'How can [we] reduce social care caseloads to allow for more meaningful direct work'*. Many agree that the *'workload is high'* and to *'reduce caseloads'*. A change here may influence the satisfaction of frontline staff, in particular for social workers in safeguarding teams: *'it would also be ultimately more satisfying than being assessment machines'*.

Several practitioners raise *'staffing'* and the capacity of social workers as a priority area. For example, *'ensuring there are enough social workers for all the children'* instead of having *'high caseloads'*.

Staff would like to see *'better promotion of social work by government'* and one person suggests to *'educate the ministers on social work and [the] experiences of children in care'*. Another person describes the *'lack of political support and resources for children in care and care leavers'*. And one person argues for *'less focus by [the] government on adoption (4% of children in care)'*.



Mental health provision for young people

The mental health and wellbeing of children and young people was often raised as a priority. In particular, the mental health of children who are looked after. For example, employers should *'train and employ staff who are qualified to meet the needs of these young people who have suffered trauma and who have psychological problems'*. Also for *'better access to help'* and *'more comprehensive assistance to young people with emotional ill-health'*. In terms of the current climate, there should be a *'focus on emotional support services for the children and young people who have been severely impacted by home learning, isolation, grief and loss during the pandemic'*.

CAMHS was mentioned by several practitioners as requiring review to adequately meet young people's needs e.g. *'improve camhs which is not effective enough of a provision for children in care'*. One person advocates for *'therapeutic parenting'* to support carers and parents *'to understand trauma and children's life experiences'*.

Funding

'It is important the govt fund services properly rather than just expecting LA's to do more with no extra resources as they usually do - there is no further stretch in the system and most social workers already work more hours regularly than they are paid for even though some managers don't.'

Several people state increased funding for LAs should be used within early help and preventative services. A review of the funding is suggested by one practitioner: *'looking at the funding and how this can improve the lives of children and young people'*.

On the subject of funding, others raised concerns around *the 'danger of marketisation and privatisation of social care'* and the *'extortionate private placements for young people and monopolies in this provision'*. Practitioners argue for *'removing [the] profit element from the CIC provider market and instead focusing on quality'* e.g. *'how better/more therapeutic early intervention work can take place'*. Another practitioner suggests *'the move from in-house provision to private providers'* should also be a priority consideration, with one of its root causes being funding.

Poverty

Some proposed understanding the relationship between poverty and social care, for example the *'impact of poverty on neglect'*. For those families *'caught in the poverty trap'* or who are *'hard pressed by Covid-19'*, there needs to be an investment in *'section 17 type support'*. Staff suggest a focus on *'non-statutory... or early help services'* to prevent *'escalating the referral to child protection'*.

Concerns with the review



Having an independent review that is informed by service users was proposed and that their views should be acted upon, not just listened to. Also social workers felt that the review needs to be independent and transparent for the sector to feel confident in it..

It was highlighted that *'putting the findings into action'* should be a priority, as *'findings from previous reviews have not yet been put into action fully (Munro, Laming)'*. There are concerns that *'the review will be a cost saving exercise rather than a person centred review'*, and another person states *'quality must be the driving force for any change not costs'*.

About WWCSA Polling

What Works for Children's Social Care runs fortnightly polls with social workers who have registered with us. Social workers registered with us are currently employed in a range of organisations and we canvas their opinions about our current and future research agenda as well as current affairs, Wellbeing and social work practice. We would like to thank you all for taking the time to complete the polls and also ask that you encourage your colleagues to [sign up](#).