The Independent Review of Children's Social Care: Polling Results Report

This report sets out the results from the fifth in a series of special polls for the Independent Review of Children's Social Care. The poll was open for three weeks between 26th October to 15th November 2021. The poll asked social workers nine questions exploring their experiences working with families who have children on a Child in Need Plan (CiN). A child in need is defined under the Children Act 1989 as a child who is unlikely to achieve or maintain a reasonable level of health or development, or whose health and development is likely to be significantly or further impaired without the provision of services; or a child who is disabled. Children in need may be assessed by a social worker under section 17 of the Children Act 1989.

The survey was sent to 1237 registered social workers of which 135 social workers opened the poll. 107 answered that they have experience working with children and families who require a Child in Need service. These 107 participants were then included in the following questions. The questions were mainly multiple choice, with a few of the more complex questions offering the option for additional free text responses. One was entirely free text, offering the opportunity for answers we might not have expected to arise.

1) On average, how often do you see your families who have children on a Child in Need plan?

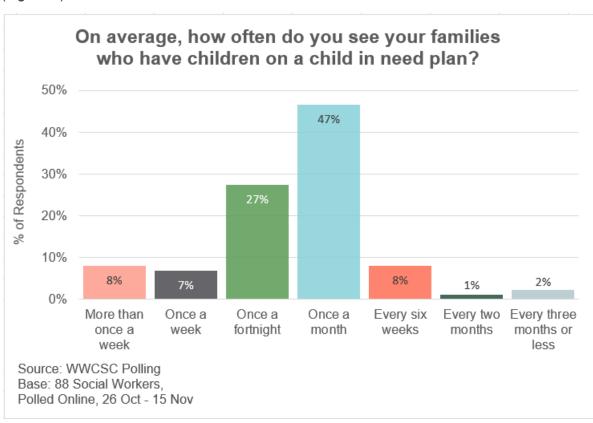
This question was answered by 106 participants, 88 of which chose from the multiple choice options we provided. The most frequently cited option (chosen by 47% of participants) was that social workers see families who have children on a Child in Need plan 'once a month'. Additionally, in the free text comments, four participants explained that they were directed to see families once a month on average. They said, however, that this was subject to need, and visits were more frequent if the family was in crisis.

The second most frequently chosen answer (by 27% of respondents) was seeing the families of children on a CiN plan 'once a fortnight'. This was followed by 'more than once a week' (8%) and then 'once a week' (7%). One free text response explained that, as a

supervisor in an early help service, their intention was to have weekly contact with families. Although we did not specifically explore whether frequency of contact differed by team type, this comment highlights that there may be variation depending on social work team or role. Combining the remaining categories, 11% of respondents saw their families with children on a CiN plan less than once a month.

In the free text section, three respondents felt that, while they were directed to see families with a child on a CiN plan every four weeks, this neglected the diversity of the communities they worked in, and suggested that visit frequency should be dictated by the needs of the family, rather than a prescriptive timeframe. Other free text responses included explanations that the respondent was a team manager and did not hold cases, or otherwise didn't work directly with children and families.

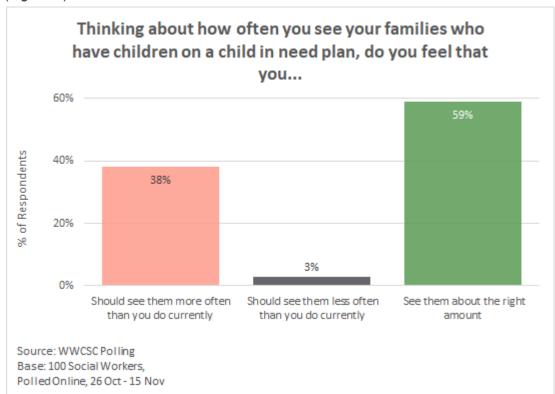
(Figure 1)



2) Thinking about how often you see your families who have children on a Child in Need plan, do you feel that you see them about the right amount, or should see them more or less.

This question was answered by 100 participants. The majority of respondents (59%) told us that they felt they saw families with children on a CiN plan about the right amount. A lesser

percentage (38%) felt they should see children on a CiN plan more than they currently do, whereas only 3% felt they should see them less.



(Figure 2)

3) If you answered "more" or "less" to the question above, can you tell us a bit more about the circumstances dictating the frequency of your visits?

This question asked for free text responses, and was answered by 46 participants. The majority of these responses (33) came from social workers who would like to make more frequent visits to families with children on a Child in Need plan. Participants interpreted this question in different ways, with some giving reasons why they are unable to visit more frequently, and some explaining why they believe more visits would be beneficial to the children and families they work with.

Of the comments from social workers who would like to make more CiN visits, over half cited their high caseload or workload as preventing them from having enough time to see families on a CiN plan more regularly. One suggested that rather than more frequent visits, they should be longer so that they can build deeper relationships, saying that if they had smaller caseloads this would be possible. Related to this, seven of the respondents stated that a lot of their time is spent visiting children on a Child Protection Plan, or doing court work, as

these are seen as more urgent. This means they do not have as much time as they would like for visiting children on a CiN plan.

A few respondents mentioned that they felt more frequent visits to children on a CiN plan would provide more intensive support, and could help to prevent further escalation, such as moving to a Child Protection plan or Public Law Outline procedures. These comments suggest support for spending more resources on prevention measures in an attempt to stop the exacerbation of problems.

One comment cited service capacity, another two mentioned family engagement and family availability after school. Related to family availability, one comment explained that there needs to be flexibility on where the visit takes place, to work with the family.

"There should not be a blanket policy about frequency and whether a visit needs to be at the child's home, school or the park. It should be specific to the circumstances. People forget that most children's lives depend on the capabilities, circumstances and choices of their caregivers."

Two respondents wrote that when a family is first allocated to them, they like to have more frequent visits (every 2 weeks) so that they can build a relationship and begin addressing their areas of need. In a similar vein, one participant explained that seeing a family once a month was not regular enough to build a strong relationship and trust.

Some social workers polled felt that if they saw children and families on a CiN plan more frequently, then they could achieve more positive results. Many of these participants spoke about wanting more time to do direct work, meaningful work and 'change work'.

Three comments suggested that CiN visits could be too regular, or even invasive. Two of these mentioned visits to families with disabled children.

"The children that I work with on CiN plans are usually only known as 'CiN' due to their disability. If the case is stable, 6 weekly visits seems excessive and the families do not want to see us this often!"

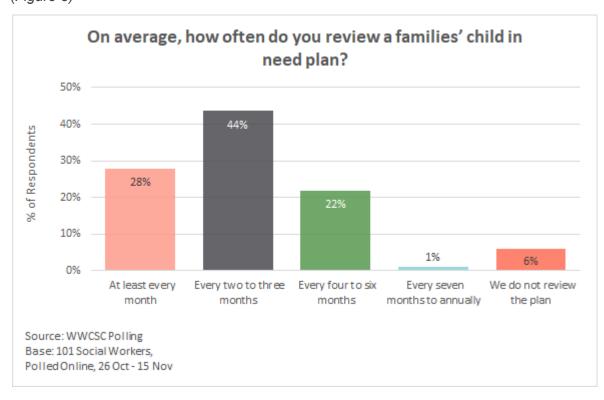
In line with this, three social workers suggested that prescriptive timescales for CiN visits are not appropriate, and seeing families should be in line with their level of need but be balanced so as not to be overly intrusive.

"...My view is that the social worker assessment and record should provide rationale for visit intensity, rather than taking a one size fits all approach. Sometimes we visit families because they are 'due' a visit but don't really NEED one. This prevents us from being able to offer more intensive support to a family who may NEED help right now."

4) On average, how often do you review a families' child in need plan?

Slightly less than half of participants (44%) said that they reviewed a families' child in need plan 'every two to three months'. The next most common answer was 'at least every month', chosen by 28% of participants and followed by 'every four to six months' selected by 22% of participants. While 1% reviewed CiN plans 'every seven months to annually', 6% said that they did not review child in need plans at all - although this could be because this is outside of the participant's role requirements.

(Figure 3)



5) What are the three types of support you most commonly offer families as part of Child in Need assessments and plans?

The percentages in the graph below (Figure 4) show what percentage of participants chose each multiple choice option. This shows that 66% of the total participants that answered this question (N = 99) selected 'Referrals to Domestic abuse services' as one of the three types of support they most commonly offer families on a Child in Need plan. This was closely followed by 'Parenting/family support - including access to family centres' which 60% of the respondents selected as one of their top three. 'Referrals to alcohol and substance misuse services' for adults was chosen by almost half of the participants (48%).

The top three most frequently chosen options concern referrals to services for parental behaviour, with family centers providing parenting and post-natal skills as well as advice on money management and job seeking skills, among other things. Other than 'Housing support', which was selected by 43% of participants, help around material or financial support was selected by fewer social workers as one of the types of support they offer most commonly. For example, 'Financial assistance' was selected by 18% of respondents, and 'Support with access to Universal Credit' was chosen by 17%.

This is reflected in one of the comments: "It would be interesting to ask what we are most often asked for (financial assistance, housing support, education support and respite), compared to what we most often do (referrals to other services)". This might suggest that the extent to which children's social workers can offer financial and material aid is limited. However, some comments suggested that social workers referred people on to other services to help with financial hardship. One spoke about referral to food banks, and one mentioned support to purchase furniture through a charity.

Other things mentioned in the free text responses included a few comments which said that social workers offer many of the options on the graph below routinely. One explained that support provided varies massively from one family to the next, so they couldn't choose which they do most commonly. Another said, "Every family is different and has different needs."

Some families may require support with almost everything listed while others need minimal support."

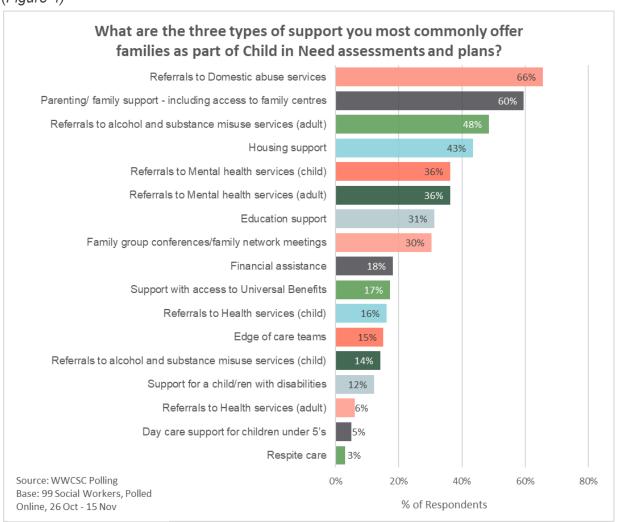
A few of the participants listed practical, immediate support, such as help with transportation to appointments and childcare. One respondent said translation and immigration services.

One mentioned "Therapeutic residential intervention following abuses", and another "Therapy funded by the Adoption Support Fund".

A few of the social workers spoke about direct work, which wasn't given as an option in the multiple choice. Rather than referrals, three of the social workers explained that they undertook direct work with children and families, one said this included helping families set their own goals and track their progress.

"Direct work with children around their emotions."... "Direct work with children and parents about various things going on in their lives, to bridge communication between them and to build their relationships."

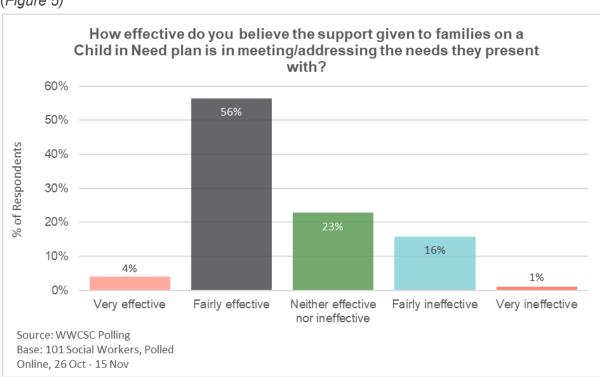
(Figure 4)



6) How effective do you believe the support given to families on a Child in Need plan is in meeting/addressing the needs they present with?

The majority of participants (57%) said that they believe the support given to families on a CiN plan is 'Fairly effective'. As the second most chosen option, a relatively high proportion of the participants (23%) felt the support given to families on a CiN plan were 'Neither effective nor ineffective'. This is perhaps supported by a free text comment to the previous question, which explained that CiN planning is too often focused on creating stability in the short term which results in a step down, but which commonly leads to a re-referral.

A much smaller proportion than had found it 'Fairly effective' found it 'Fairly ineffective' (16%), but still representing a substantial percentage. A larger number found the support 'Very effective' (4%) than did 'Very ineffective' (1%).



(Figure 5)

7) From the list provided please indicate the three main challenges you experience in providing the right resources to the families you work with.

The most frequently chosen answer, by 64% of respondents, was 'There are long waiting lists for services', followed by 'The resource they need is not available' (51%). The third most frequently chosen answer (49%) was that 'Services close the case if they cannot engage family members'.

Related to this last point, a few of the comments in the free text section spoke to the challenges of engaging and supporting families with complex needs.

"Many families consent to a plan but don't always want to engage and if they do, some families can not sustain change without ongoing and extensive support."

"Lots of families known to us on CIN Plans have 'chronic' challenges of mental ill-health, neglect, unemployment, and substance misuse. Lots of services are available for 'discrete' issues but it's hard to make progress in a whole picture."

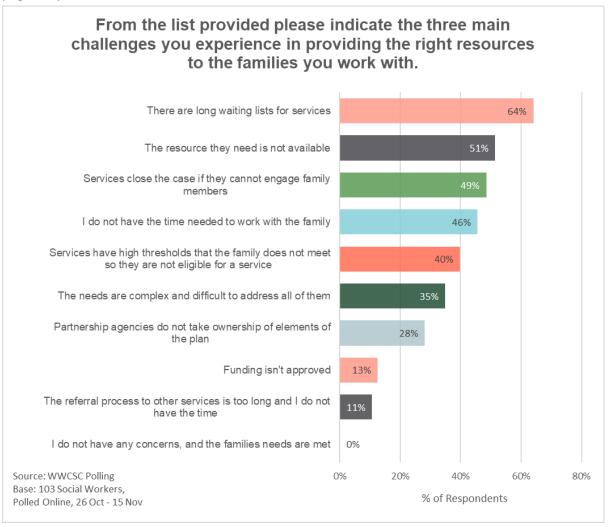
One of the comments wrote about the variability in social workers and team managers meaning that different families receive different levels of support, such as in the number of face to face visits or phone calls. Two mentioned that living in a large county, or near the border of a borough meant it could be difficult to access services.

One comment stated that there was 'too much bureaucracy' which got in the way of them building strong relationships and doing meaningful work with families. Two of the comments wrote about a lack of resources and funding acting as a barrier to providing the right resources, both across the sector generally and for services more specifically. The following response cites a lack of social worker time, and inadequate services.

"Social workers do not get the time to use the skills they study for so long. Families are pushed from one service to the other. The services are overly focussed on assessment rather than offering the help families want."

Lastly, a number of comments stated that it was too difficult to choose just three, or that all of the options were relevant. One wrote that the answer depended on families' needs.

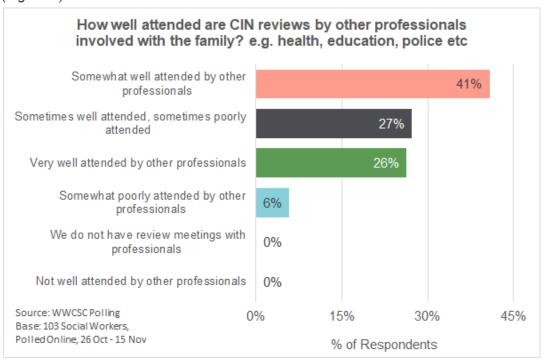
(Figure 6)



8) How well attended are CIN reviews by other professionals involved with the family? e.g. health, education, police etc

The largest proportion of participants (41%) answered that CiN reviews were 'Somewhat well attended by other professionals'. The second most frequently chosen answer was 'Sometimes well attended, sometimes poorly attended' (27%), which was very closely followed by 'Very well attended by other professionals' (26%). Far fewer participants (6%) said that CiN reviews were 'Somewhat poorly attended by other professionals', and none of the respondents answered that CiN reviews were 'Not well attended by other professionals' or that they did not have any review meetings with other professionals. These findings suggest that, while multi-agency collaboration around CiN reviews are working well in a lot of places, meeting attendance by other professionals could improve in some local authorities.

(Figure 7)

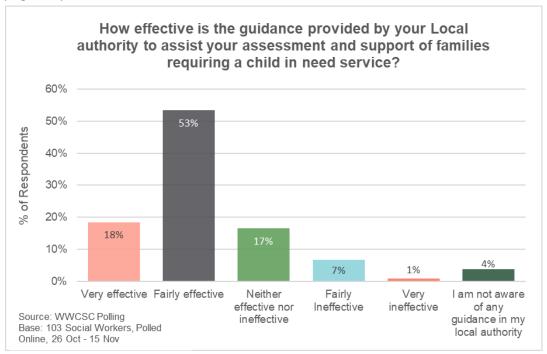


9) How effective is the guidance provided by your Local authority to assist your assessment and support of families requiring a Child in Need service?

By far the most common answer (chosen by 53% of respondents) was that the guidance provided by participant's local authority to assist their assessment and support of families requiring a CiN service was 'Fairly effective'. The next most frequently chosen answer was that the guidance from local authorities was 'Very effective' (18%), with slightly less participants (17%) stating that guidance was 'Neither effective nor ineffective'. 7% felt guidance was 'Fairly ineffective', and 1% felt it was 'very ineffective'. A number of participants (4%) stated that they were not aware of any guidance to assist them with their assessment or support of families requiring a CiN service.

While almost two quarters (71%) of respondents felt that the guidance provided by their local authority on CiN plans was very or fairly effective, there were still a small percentage (8%) who felt it was fairly or very ineffective - suggesting some local authorities could improve their guidance. It is concerning that 4% of participants were not aware of any guidance at all, suggesting that they do not receive much support or direction in their assessment and support of families requiring a Child in Need service.

(Figure 8)



About WWCSC 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.