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**CHILDREN'S  
SOCIAL  
CARE**

# Implementing Signs of Safety: Key Lessons

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## Contributors

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## About the What Works Centre for Children's Social Care

The What Works Centre for Children's Social Care seeks better outcomes for children, young people and families by bringing the best available evidence to practitioners and other decision makers across the children's social care sector. Our mission is to foster a culture of evidence-informed practice. We will generate evidence where it is found

to be lacking, improve its accessibility and relevance to the practice community, and support practice leaders (e.g. principal social workers, heads of service, assistant directors and directors) to create the conditions for more evidence-informed practice in their organisations.

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## About CASCADE

CASCADE is concerned with all aspects of community-based responses to social need in children and families, including family support services, children in need services,

child protection, looked after children and adoption. It is the only centre of its kind in Wales and has strong links with policy and practice.

To find out more visit the Centre at: [whatworks-csc.org.uk](http://whatworks-csc.org.uk), or CASCADE at: [sites.cardiff.ac.uk/cascade](http://sites.cardiff.ac.uk/cascade)

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## Implementing Signs of Safety: Key Lessons

Unfortunately our review found little research evidence about how to implement Signs of Safety. There were many descriptions of activities that were undertaken in order to support Signs of Safety, but the evidence about the impact that these had on the quality or effectiveness of delivery was minimal. In that context this Briefing provides reflections from a reading of the implementation literature, rather than an evidence based guide for implementing Signs of Safety. Our reflections are grouped into three areas.

### 1. Signs of Safety is not easy to implement

Signs of Safety is a complex whole system change. It is not an easy, “off-the-shelf” solution to the challenges of good practice in Children’s Social Care. It therefore needs to be deeply understood and championed by the leaders of the service.

Furthermore, in focussing on strengths and solutions Signs of Safety champions an approach that is explicitly at odds with much of current practice in Children’s Social Care. Indeed, it is this claim to be different that is part of the rationale for Signs of Safety. Yet being a very different model of practice creates challenges for implementation. First, there are reasons why services are often focussed on risk and problems, and while Signs of Safety has a sophisticated appreciation of the reasons for such a focus, moving to a different way of working is likely to be hard for some staff. Second, workers and managers may have been practicing in such a way for many years. Change is therefore likely to be challenging.

Delivering Signs of Safety involves changing the behaviour of individuals at every level of the organisation, as well as organisational practices and styles of leadership. However changing behaviour in a lasting way is rarely a simple or easy activity. It is important to approach moving toward Signs of Safety as difficult and challenging, requiring whole organisational commitment over a prolonged period.

### 2. Implementation involves changes at multiple levels

In the literature we identified key changes at three levels:



*Individual practice* – the initial 2- or 5-day training may be a start for changing the practice of workers but it is unlikely to be sufficient. Indeed, the general literature on short training input suggests that on its own it has little or no impact on practice. To be effective it needs to be supported through ongoing supervision and changes in the organisational context and support for practice. There may also be wider issues in changing individual practice not touched on in the literature, for instance in selecting staff able to practice in a strengths orientated manner. This is an area we know relatively little about in general – and specifically in relation to Signs of Safety.

*Organisational practice* – practice is not just an activity carried out by workers with families. It is supported through a variety of organisational activities – for instance including how meetings are carried out, the ways in which assessments are undertaken and written-up, supervision, team or other group activities and so on. For Signs of Safety to be implemented to a high standard the entire context of organisational practice needs to be reformed.

*Organisational culture* – some of the elements of organisational change identified in the literature are hard to specify, but nonetheless are likely to be important. This includes a sense of ownership, understanding and enthusiasm from leadership. The values and conceptual lenses of Signs of Safety need to permeate the organisation. Creation of a “learning organisation”, that allows reflection on the complex and messy world of practice, is often mentioned but is hard to define and probably still more difficult to create.

### **3. Implementation has different stages**

Implementation of change has different stages. At its simplest we can think of initial “*launch*” of a new approach, full *implementation* and *sustaining* change as being different. Each is likely to involve different opportunities and barriers. Here we outline some that may apply to Signs of Safety. As noted above, these are not based on evidence but on reflection in relation to the studies reviewed.

## Implementing Signs of Safety (SoS)

	Launch	Implement	Sustain
<b>Key challenge</b>	<ul style="list-style-type: none"> <li>Introducing SoS as a way of working</li> <li>Ensuring enthusiasm across organisation</li> </ul>	<ul style="list-style-type: none"> <li>Change implemented at level of individual and organisational practice and culture</li> </ul>	<ul style="list-style-type: none"> <li>Ensuring quality of SoS practice retained or improved</li> <li>Sustaining enthusiasm as SoS becomes normal practice</li> </ul>
<b>Facilitators</b>	<ul style="list-style-type: none"> <li>Training for all workers</li> <li>Starting with worker strengths and values</li> <li>Clear longer-term plan for implementation</li> </ul>	<ul style="list-style-type: none"> <li>All workers trained</li> <li>Rolling programme</li> <li>Opportunities to develop SoS leaders</li> <li>Changed supervision</li> <li>Reformed family meetings</li> <li>Reformed assessment processes and recording</li> </ul>	<ul style="list-style-type: none"> <li>Much less is known about sustaining SoS</li> <li>Consistency of leadership and commitment</li> </ul>
<b>Barriers</b>	<ul style="list-style-type: none"> <li>Often current practice and values</li> <li>An assumption of poor practice can lead to resistance</li> </ul>	<ul style="list-style-type: none"> <li>Time for training</li> <li>“change fatigue” due to number of reforms</li> <li>some workers may not buy-in</li> <li>Other organisations not using SoS</li> </ul>	<ul style="list-style-type: none"> <li>Leadership turnover</li> <li>Staff turnover</li> <li>Loss of novelty and enthusiasm</li> </ul>
<b>Suggestions</b>	<ul style="list-style-type: none"> <li>Leaders involved in training</li> <li>Aiming to create shared organisational values as basis for transformation</li> <li>Having a plan for full implementation</li> </ul>	<ul style="list-style-type: none"> <li>Recognition of good practice</li> <li>Development of meaningful SoS QA system</li> <li>Develop common commitment to SoS across organisations</li> </ul>	<ul style="list-style-type: none"> <li>Sustaining SoS is probably not enough – what new challenges or goals might be appropriate?</li> <li>What are the next stages for excellence in SoS?</li> <li>We know perhaps least about sustaining SoS</li> </ul>

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