# What is good practice in children's social care?
# How can organisations make it happen?

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# Overview

- Developing your – and my - ideas about what good practice is

- Exploring link/s between practice and outcomes (and thinking about what "outcomes" are in CSC)

- Considering how to create good practice

# Do we know what good practice is? Do we agree?

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# What are key elements of good practice?

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Let's listen to a short excerpt or two. For each of these you will be asked to SECRETLY rate it as:

5 – Very good

4 – Good

3 – Adequate

2 – Poor

1 – Very poor

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# Our approach: 7 key elements
## (very influenced by Motivational Interviewing)

1. *Empathy*

2. *Collaboration*

3. *Autonomy*

4. *Evocation*

5. Purposefulness

6. Clarity about concerns

7. Focus on child

# How do you think they relate to each other?

1. Empathy

2. Collaboration

3. Autonomy

4. Evocation

5. Purposefulness

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# How do you think they relate to each other – factor analysis?

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2. Collaboration

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# How do you think they relate to each other?

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# Our approach to coding

1. Care and engagement (Collaboration, empathy and autonomy)

2. Good authority (purposefulness, clarity about concerns and focus on child) (thank you Harry Ferguson!)

3. % involved behaviour change discussion and Evocation score

What do you think of these as dimensions of good practice?
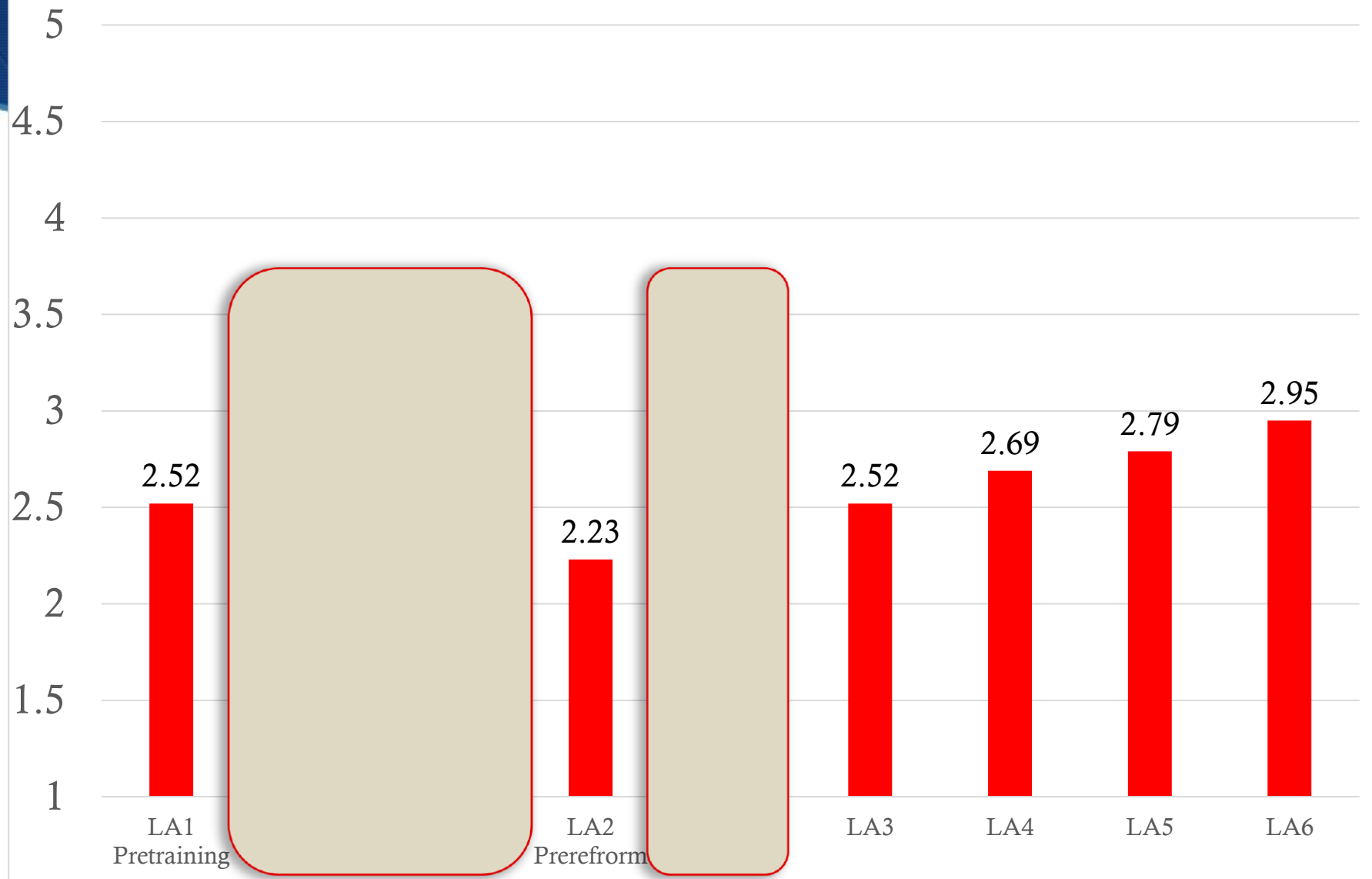
# Important point

These are not the "true" elements of good practice – just the ones we developed and then measured

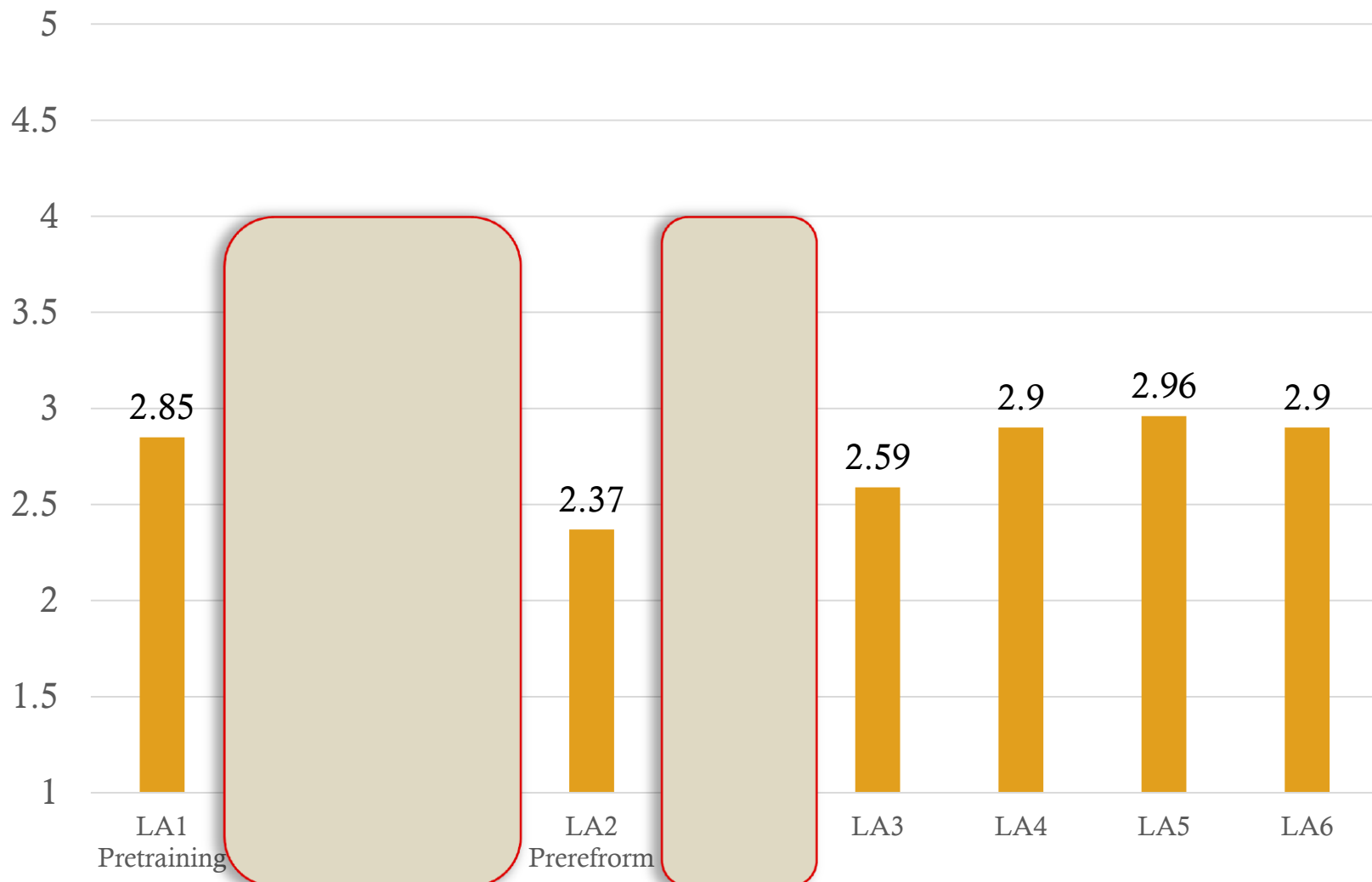Doing that allows us to answer questions:

- What are the skills of social workers in practice?

- Do these skills make a difference?

- How can we improve practice skills?
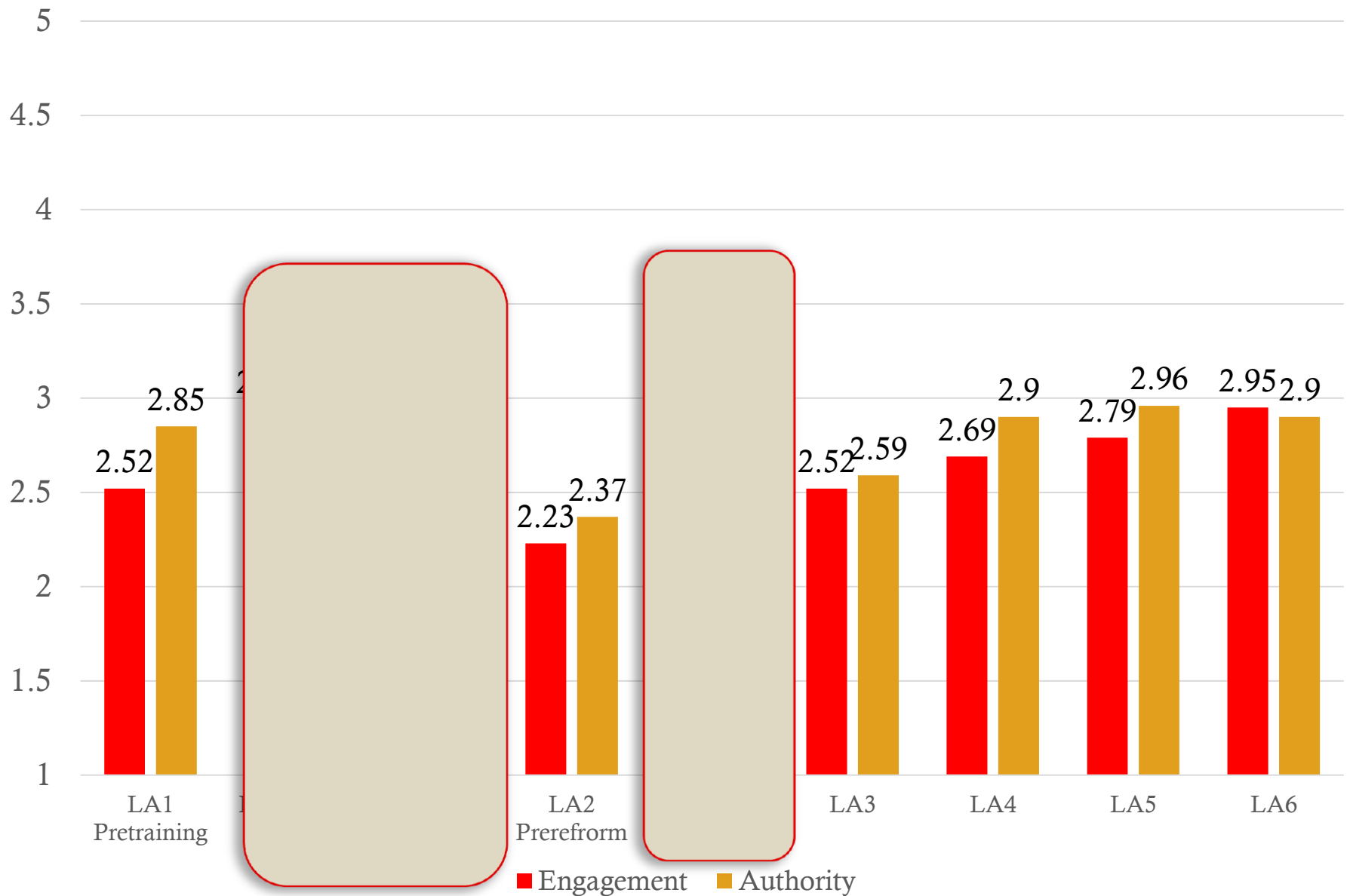
# So how do social workers talk to parents?

# Care/Engagement Skills

# Engagement and Authority Skills

# Time for a discussion?

(Possible audio of a 1.67 care and engagement and good authority?)

# Oh dear…

# How did skills relate to outcomes?

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… but first, did someone say "outcomes"?!?!?

# Outcomes in Children's Services

What outcomes should we be measuring in CSC?

**What is the purpose of CSC?**

# Outcomes in Children's Services

Some tricky issues:

We cover every dimension of well-being

Who decides what outcomes to measure?

# Outcomes in Children's Services: some thoughts

CSC is fundamentally different to therapy or medicine

(Basically) in those somebody comes with help for an issue – and you can compare how helpful an approach is

We work with issues people do not think are problems

And often need to decide not to be involved even though there IS a problem

Plus we help with social as well as psychological issues

# Outcomes in Children's Services: some thoughts

There is no simple solution to the problem of outcomes in CSC eg CLA materials or Assessment Framework

Some key elements:

- Are we working with the "right" families? (Proportionate service)

- What is the quality of service for them?

- Do people achieve their own goals in work with us?

- Do we make a difference in relation to specific issues
  - Focussed outcome measures
  - Possibly use of other services

# Outcomes Measures We Used

♦ Parental engagement (Working Alliance Inventory) (not an outcome…)

♦ Goal Attainment Scaling (GAS)

♦ Life Rating (10-points)

♦ Parent rating of worker and service and child welfare

♦ Standardised instruments and z-scores:
  ♦ Parental anxiety/stress (GHQ)
  ♦ Child's emotions and behaviour (SDQ)
  ♦ Drink and drugs (MAP)
  ♦ Social isolation (SSQ)
  ♦ **Family Environment Scale**

# Does worker skill predict parental engagement?

- Used Working Alliance Inventory (WAI):
  - Involves three elements:
    - Quality of relationship
    - Agreement on goals
    - Whether tasks are carried out
  - Used widely in counselling – linked consistently to outcomes

- 130+ families - do skills predict engagement at T1 – and at 20 weeks?

- And do they predict outcomes for families (GAS, Life Rating, FES)

# Does worker skill predict outcomes?

| | n | All families | | |
|---|---|---|---|---|
| | | Care and engagement | Good authority | Evocation |
| WAI at T1 | 91 | .270** | .137[+] | .172[+] |
| WAI at T2 | 70 | .253** | .213* | .191[+] |
| Goal Attainment Scaling | 73 | .056 | .134 | |
| Life Scaling – life rating at T2 | 74 | .150[+] | .197* | .216[+] |
| Life Scaling change (T2-T1) | 74 | .079 | .274** | .140 |
| FES – Cohesive score at T2 | 73 | -.011 | -.002 | -.026 |
| FES – Expressiveness score T2 | 39 | .094 | .116 | .114 |
| FES – Conflict score at T2 | 39 | .055 | .100 | .135 |
| FES – Cohesive change | 39 | .109 | .308* | .206 |
| FES – Expressiveness change | 30 | .142 | .413** | .075 |
| FES – Conflict change (T2-T1) | 31 | -.137 | -.191 | -.225 |
| GHQ-12 Total score T2 | 34 | -.004 | -.036 | -.046 |
| GHQ-12 change in average scores (T2-T1) | 73 | .027 | -.040 | .007 |

# In families with 8+ visits

| | n | >8 visits | | |
|---|---|---|---|---|
| | | Care and engagement | Good authority | Evocation |
| WAI at T1 | 38 | .144 | .221[+] | -.057 |
| WAI at T2 | 30 | .185 | .328* | -.07 |
| Goal Attainment Scaling | 34 | .160 | .014 | |
| Life Scaling – life rating at T2 | 26 | .334* | .338* | .421* |
| Life Scaling change (T2-T1) | 32 | .113 | .322* | .142 |

# Hurray! Social work (skills) rock!!!

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# How did skills relate to outcomes?

- These relationships are relatively weak. However, they consistently point to a positive correlation between skill and outcomes – as strong as most "evidence based" methods

- They DO raise some issues about engagement… does it matter?

- But the link between skills and outcomes is mediated by a key variable… Which is obvious (when you think about it…)
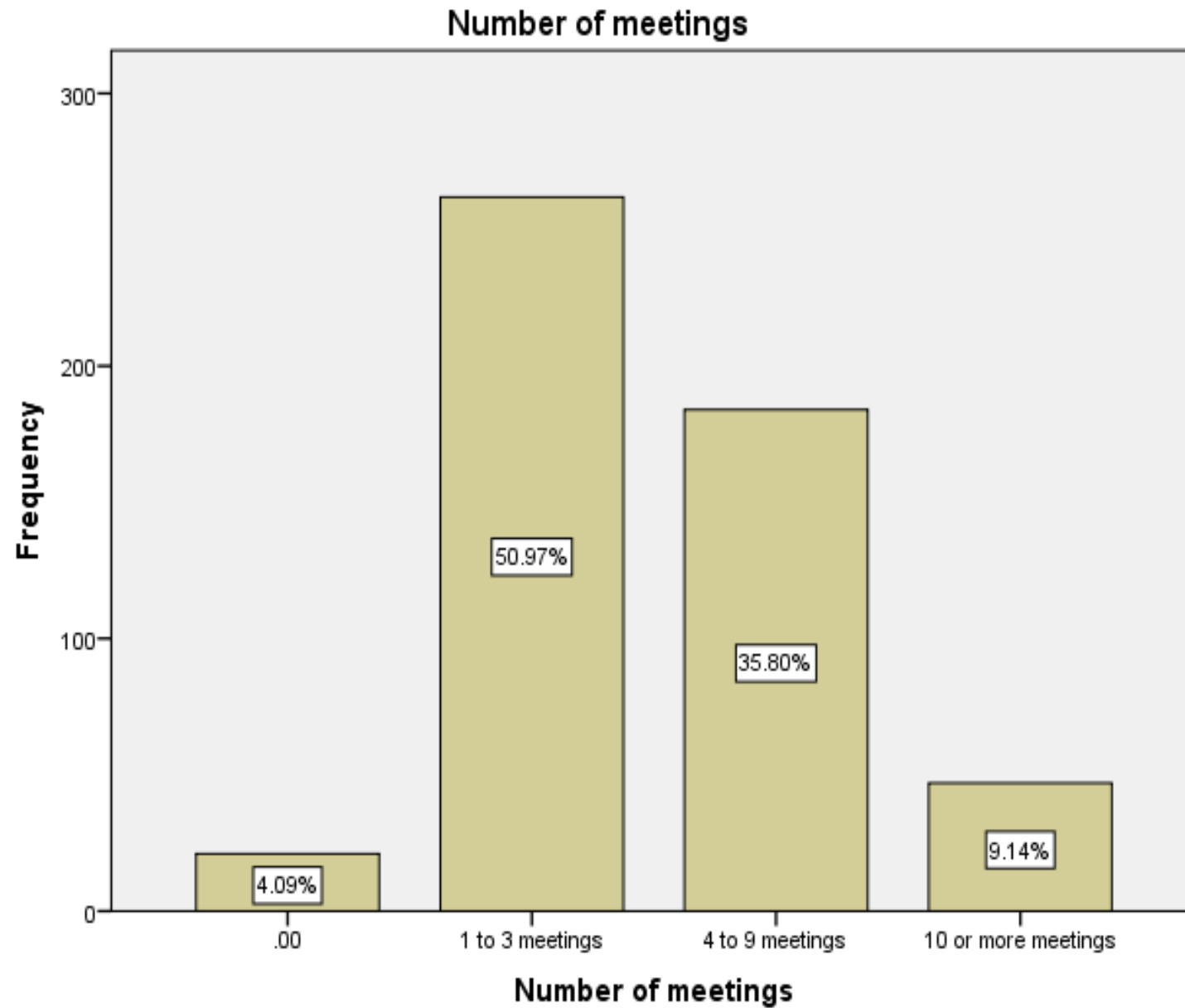
# Skills and number of visits

- May be a "dose-response" effect

- But at least as important: these were the families with bigger problems…

# Still good news…



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# … but that means the profile of practice is very concerning…

# So how can we make practice better/support best practice?

# How do you think we can help practice be better?

# The Dodo Bird Effect: "Everyone has won, so all shall have prizes."

# (remembering these methods are better than usual service)

# … but why?!?!?

# Explaining the Dodo…

- Client characteristics (particularly in RCTs)

- Common explicit elements in effective approaches

- Common implicit elements

- Organisational similarities

# What are the implications for service leadership?

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Maybe it does not matter (much) which model you choose

– it is committing to excellence that matters

# Returning to the Dodo…

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… maybe it is the support for practice in RCTs that is important

… because RCTs involve services designed by experts to deliver particular interventions

# What do RCTs do?

1. Selection of credible interventions

2. Intensive skills development
   - focus on supervised practice

3. Tests of fidelity of delivery – observing practice or quality

4. Research outcomes

# How to master any skill?

# Practice is not enough





**Practice**

**+**

**Challenge**

**+**

**Feedback**

# Korfball

# Compare this to what we do now...

- What methods do we choose to use and teach?
  - Do we use a method?

- How do we teach them?

- How do we supervise practice and develop skills?

- How often do we tape sessions?

- How often do we measure outcomes for children or parents?

# Imagine you are a top sports coach…
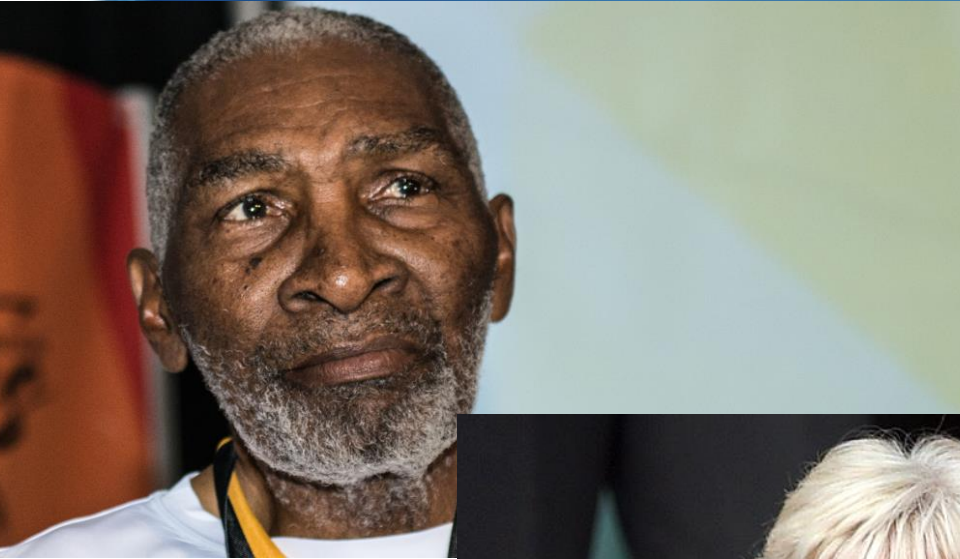
# What do you think are the key characteristics of a top coach?
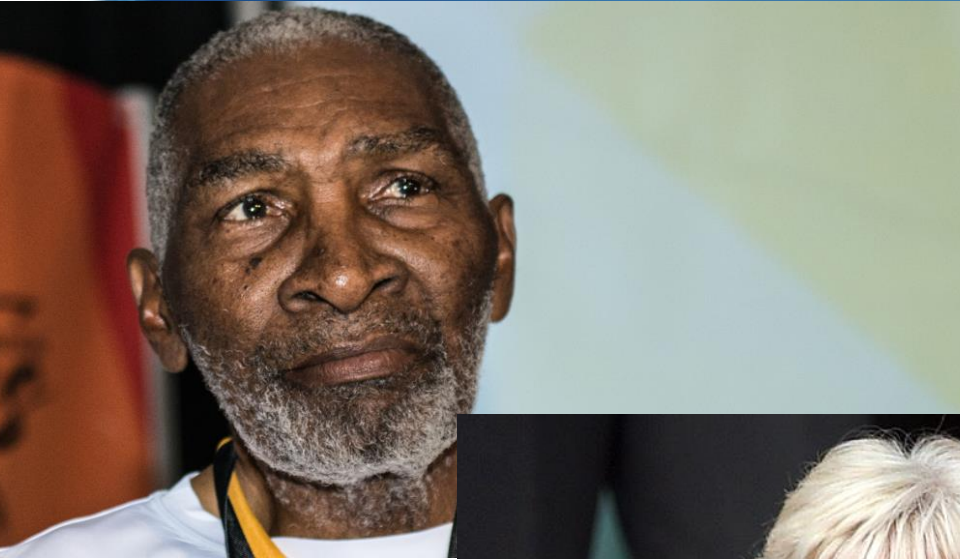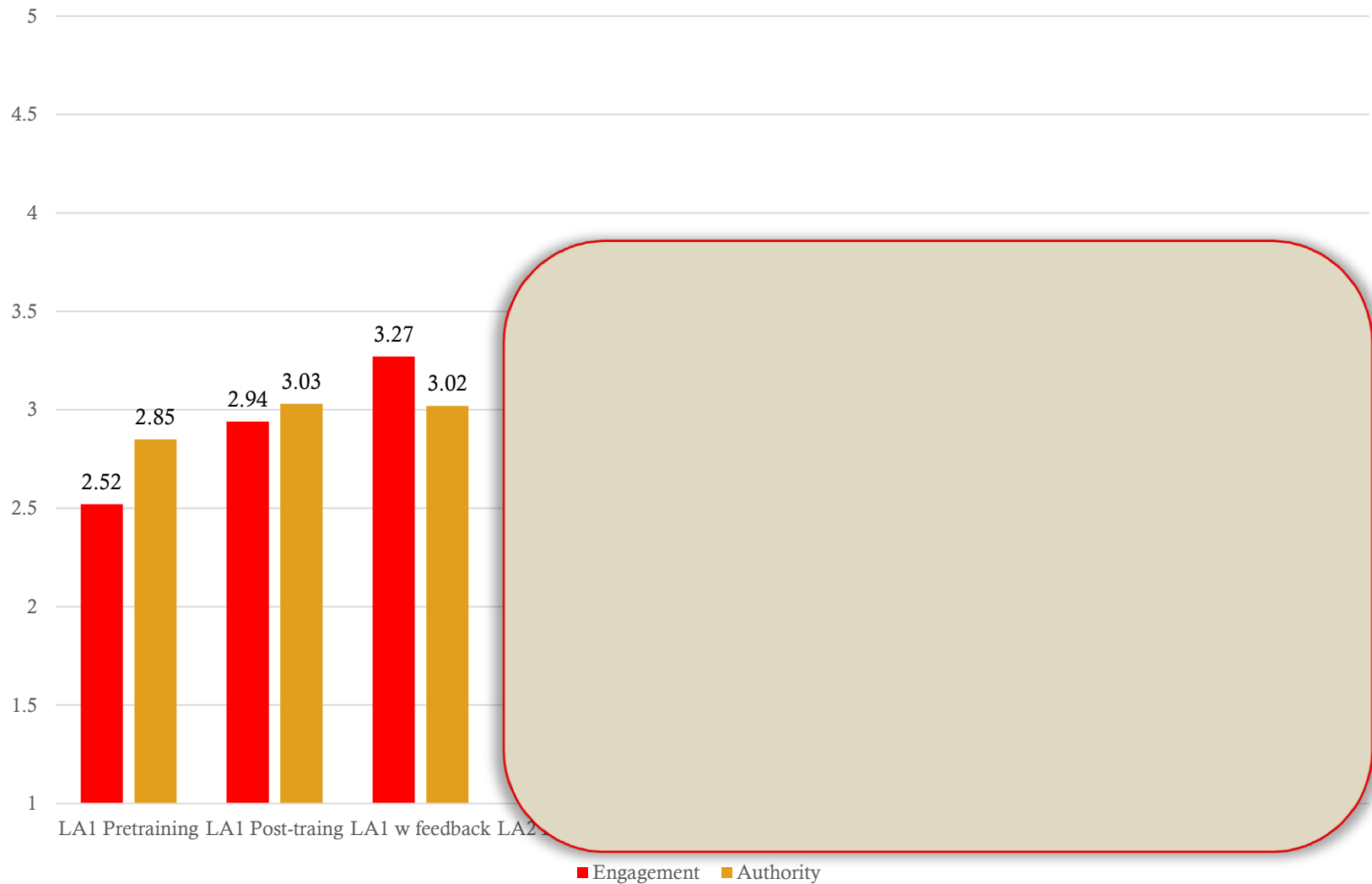
# What do top coaches DO to create exceptional performance?
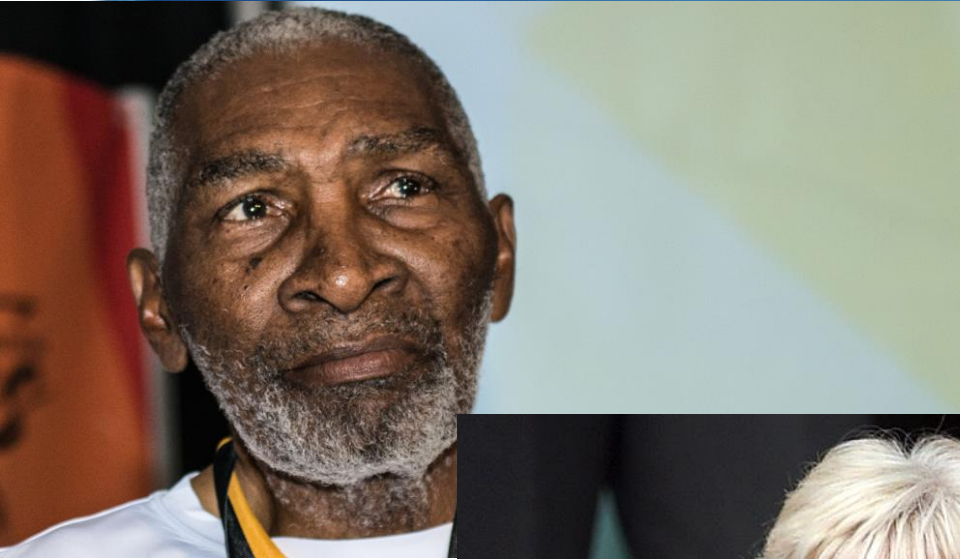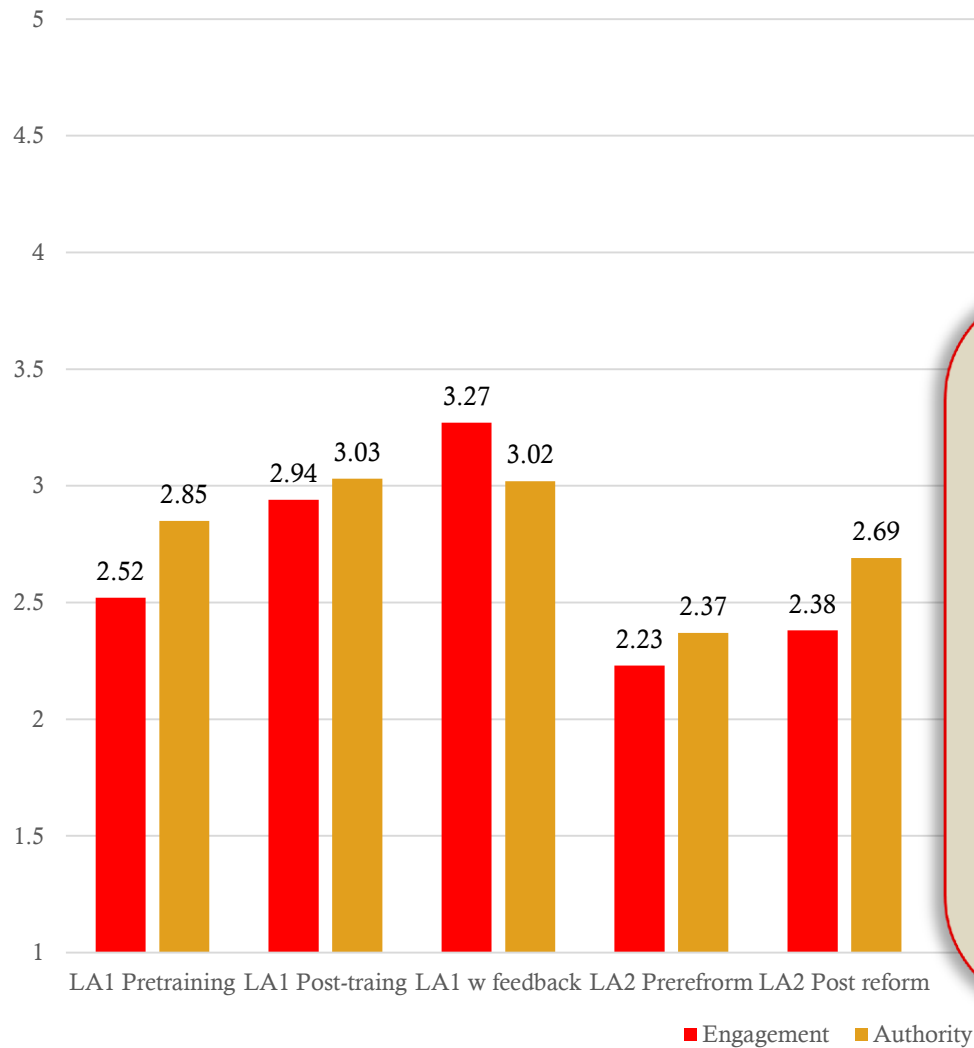
# What makes the difference?

- Values

- Character

- … but you have also got to have a plan about what you want

- … And how to get there
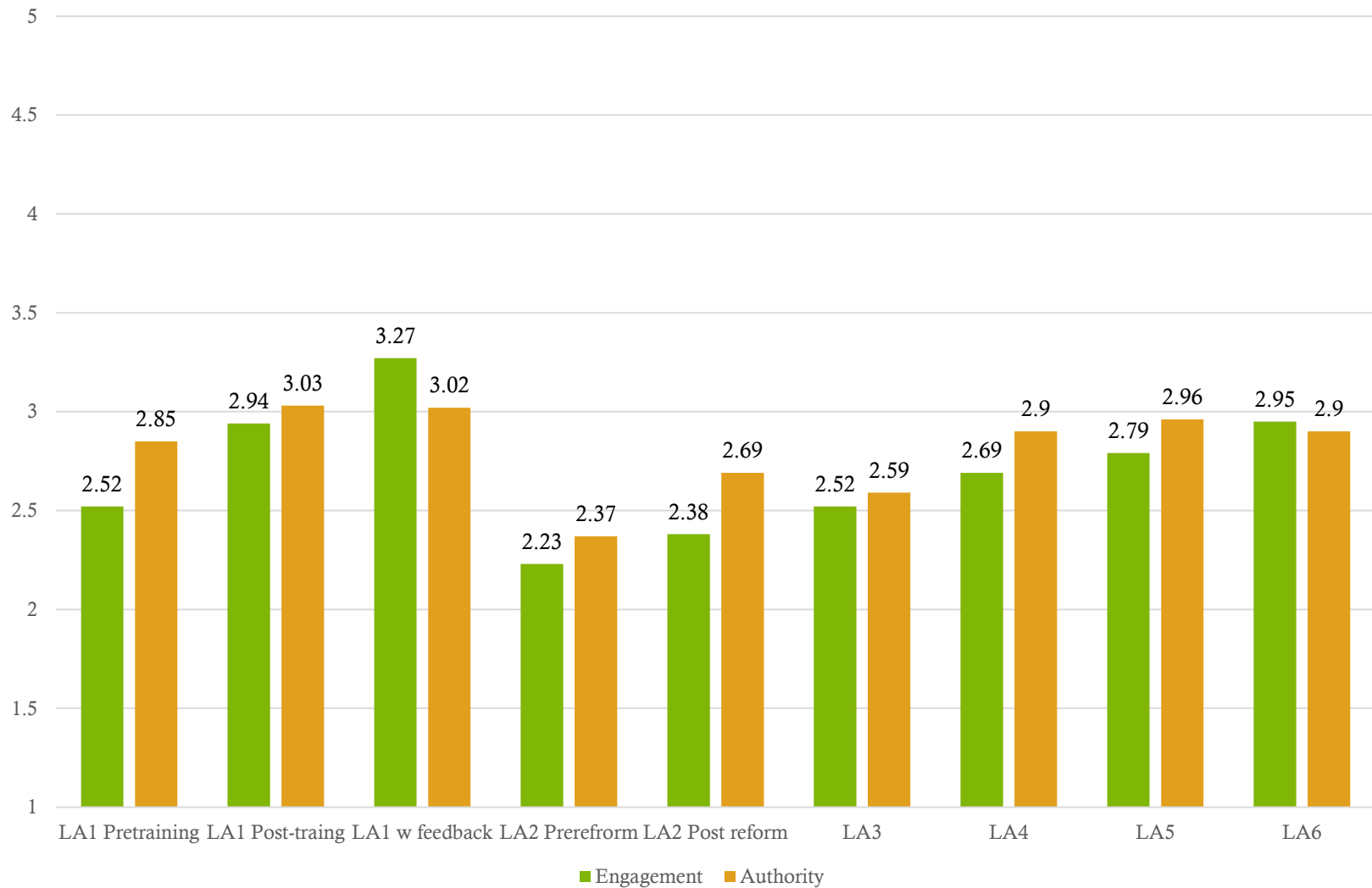
# Lessons about what makes a difference…
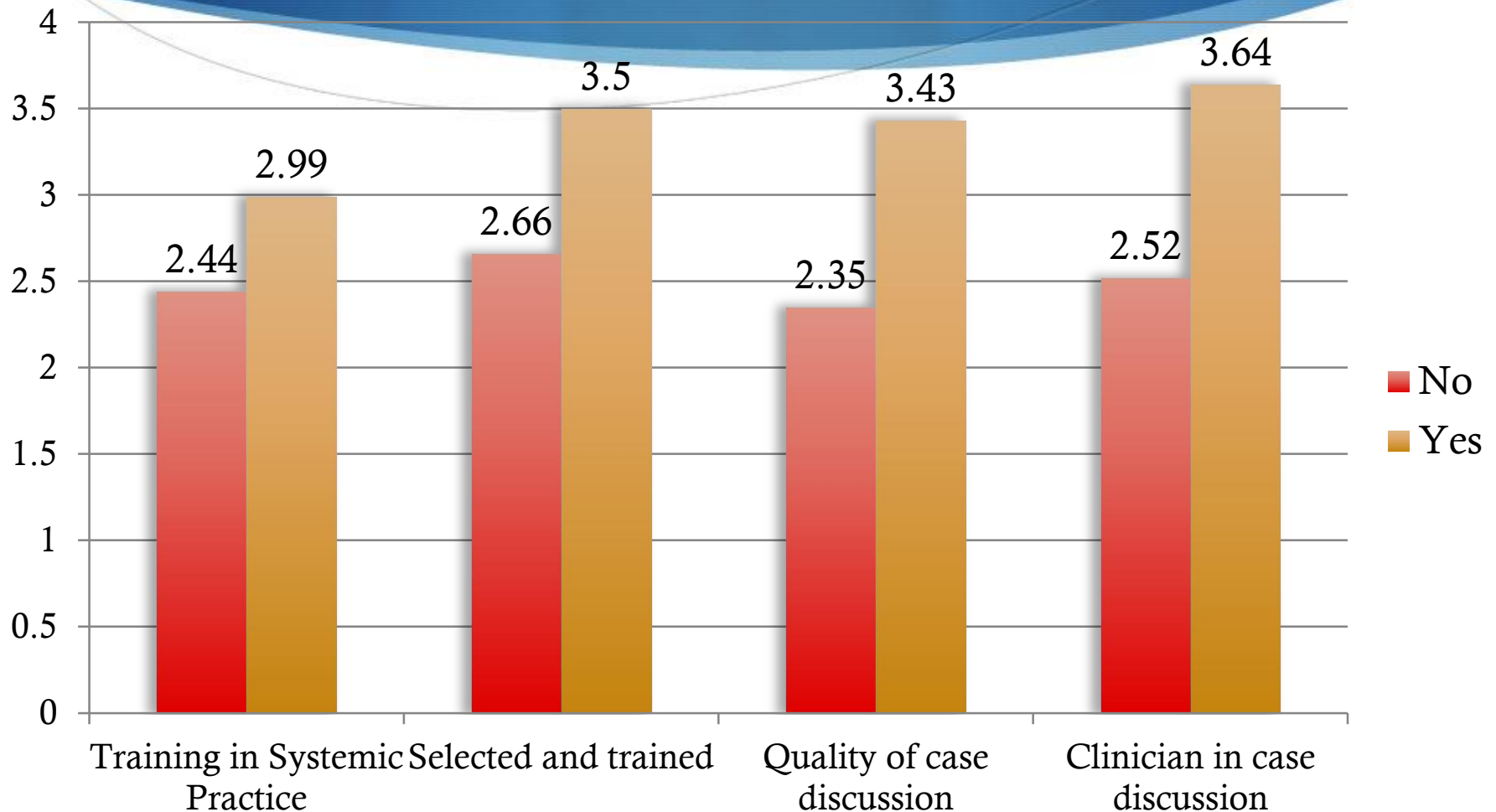
# Engagement and Authority Skills

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Engagement and Authority Skills

# How to create better practice…

# Conclusion

- What do you take from this bumble through my work of the last 8 years?

# Conclusion