What difference does it make? Social work practice and post-qualifying awards

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Summary

Debates about the social work task and the nature of the continuing professional development (CPD) needed to support it are long standing and continue to be the subject of scrutiny. Despite being viewed as key to the advancement of professional practice the real impact on practice of CPD remains under-researched. This paper reports on a small scale evaluation of child and adult care social workers who were undertaking a post-qualifying (PQ) award specifically focussing on whether changes in practice could be identified. The findings conclude that practice in some areas such as working with risk were subject to significant change but others, including direct work, were not and highlights some of the reasons why this appeared to be the case. It is also suggested that undertaking an award was equally significant to social workers in relation to their levels of confidence particularly in the increasingly inter-professional practice arena.
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Introduction

The General Social Care Council (GSCC) has claimed, in relation to post qualifying awards, that ‘the overall objective is to ensure that post-qualifying education and training improves the standard of social work practice’ (GSCC 2005). The PQ framework for social work in the UK was originally established in 1991 by the Central Council for Education and Training in Social Work (CCETSW), who argued for the importance of providing qualified social workers with a structure for continuing professional development. The importance of such structures for professionals is not only advocated in social work, but also nursing (Gould et al 2001) teaching (Kennedy and McKay 2011) or indeed just social work within the UK (Payne 2007).

The PQ framework, developed though regional partnerships between universities and employers, has undergone a number of revisions, although it is not clear to what extent these revisions were based on evidence from previous evaluations of how undertaking PQ awards had influenced social work practice. Despite considerable investment from agencies, activity in universities – and a huge amount of effort from individual social workers – only limited conclusions seem to be available about the impact of PQ and other forms of continuing professional development (CPD). Yet further revisions seem inevitable. A review of child protection in England following the death of the seventeen month old Baby Peter (Laming 2009) identified ‘shortfalls’ in current PQ training for child care social workers and proposed the introduction of a post-graduate qualification. This was echoed in the final report of the Social Work
Task Force (HM Government 2009) which acknowledged the current PQ structures but proposed a new flexible framework for continuing professional development, subsequently endorsed by the Munro Report (Munroe 2011).

This paper attempts to make a contribution to this issue of understanding and evaluating how social work practice is influenced by CPD focussing on the example of a PQ award. It draws on an evaluation study undertaken when the authors were working as PQ co-ordinators for a local authority in England. Our role was to support candidates with their post-qualifying learning, and work with universities in developing PQ programmes. We were interested in attempting a structured exploration of whether we were involved in a process that was making a difference to practice in our agency. Although this was our primary target for investigation we also envisaged that, through this process, useful lessons would emerge for employers, universities, and practitioners themselves.

**Previous evaluations of PQ**

A number of studies have drawn attention to the importance of the processes and structures that surround undertaking PQ awards. These have included the nature of the partnership between employer, social worker and provider (Mitchell 2001, Skinner and Whyte 2004); the need for employers to take responsibility for the management of professional development, and the value of good support frameworks for candidates (Skinner and Whyte 2004). The vital role of these support frameworks in enabling pressurised social workers to successfully complete awards – for example by ensuring study time, mentoring support, and access to study facilities – has also been underlined by explorations of the ‘candidates experience’,

A small number of studies have gone on to focus more specifically on whether post-qualifying study actually influenced practice. Drawing on questionnaires and semi-structured interviews Mitchell suggests there was evidence of ‘a more conscious use of research to inform and evaluate practice’ (Mitchell 2001, 437) as well as improved written communication and understanding of broader political issues. Shaw (2001) concluded that a greater knowledge base enabled social workers to reflect drawing on theory and research to inform their practice.

Brown et al (2008) attempted to tackle this issue through a mixture of evaluation forms and a sample of interviews with ten social workers (and six line managers) who had completed a PQ award in vulnerable adults and community care practice. Participants were questioned about the impact on practice at a number of levels – personal, team, organisational and on service users. This format sought to incorporate aspects of the four stage model of training evaluation developed by Kirkpatrick (Kirkpatrick 1983) which emphasises the importance of going beyond ‘reaction’ level responses to explore changes in behaviour. The clearest examples of impact were at the personal level which included ‘becoming more involved in developmental issues, preventing bad practice and improving supervision’. (Brown et al 2008, 863). Further work was undertaken by the Scottish Social Services Council (SSSC 2009) based on 35 semi-structured telephone interviews with social workers in child and adult services, who had undertaken (although not all achieved) a PQ
award programme. Two thirds of this cohort felt PQ study had positively affected their practice, again the most notable impact being a significantly improved capacity for reflection and critical analysis.

These studies have made a useful contribution but Doel et al (2008) concluded that there is still insufficient research in this area. This lack of evaluation is not unique to PQ awards; a review of evaluation of training in relation to Child Protection for the Scottish Institute for Excellence in social work education concluded:

‘… recommendations in respect to the importance of and perceived need for training and education appear to be founded upon an untested hypothesis that training and education makes a difference – the arguments may be persuasive but evidence that it works remains elusive.’

(Ogilvie-Whyte 2006, 7)

A more recent review by Carpenter (2011, 137) agrees that ‘rigorous evaluation of the outcomes of social work education is still at an early stage of development’.

The study: process and method

Two cohorts of candidates all employed by one Local Government Authority were followed through the process of undertaking a post-qualifying award. They were separate groups of child care and adult care practitioners involving two programmes at local universities. We hoped that this would highlight any commonalities as well as differences between the outcomes. The study was conducted between 2005 – 2007, 19 candidates initially took part (7 in adult services and 12 in children’s services)
spread across work roles; child care ‘locality’ (6), ‘duty’ (3), and family placement (3) teams – adult care workers were both hospital (2) and community (5) based. They ranged in experience from 2 – 22 years and included a mix of age, gender and ethnicity. All practitioners completed written consent forms that outlined the ethical basis of the project, the methods and principles of the study, the intention to publish the results, and agreement on confidentiality. Our project did not focus on evaluating the programmes themselves, although anticipating that lessons might emerge for universities and their partners, but on whether any learning was identifiably integrated into practice.

As a starting point we decided to explore some of the practice ‘requirements’ prescribed by the PQ awards; they were areas that the curriculum of the programmes intended to address, assess and therefore explicitly influence practice. This led to a detailed exploration of the following areas:

- Direct work with children and adults
- Working in situations where there is risk of harm
- Developing effective working relationships (including with other agencies)
- Professional Development
- Enabling others to learn

In focussing on areas where practitioners needed to demonstrate competence this did not necessarily indicate agreement that the ‘competency’ approach is the best way to structure learning or the only basis on which to evaluate it, indeed this is frequently contested (e.g. Cooper 2009), but rather these stated aims provided an
initial starting point for investigating the impact of undertaking a PQ award on the participants’ practice.

Both programmes also promoted the importance of evidence based research and practice so the translation of research into any area of practice also seemed an important area to explore. Social workers were invited to identify their own personal targets for development over the course of the award. In addition the semi-structured approach used allowed the exploration of other relevant issues as they emerged. All of these themes, predetermined and emergent were indexed. These were subsequently categorised and coded (Mason 1996).

Our approach to evaluating change was primarily through the use of semi-structured face-to-face interviews with each candidate. Bourne and Bootle (2005) suggest that candidates self reporting could be strengthened by a number of strategies including using pre and post evaluation and line manager reporting - both of which were adopted here. Interviews covering the same range of topics were conducted before the 12 month PQ programme and then 3 – 6 months after its completion. . It was our intention that pre-programme interviews would help identify some baseline information and enable the study to be more than purely ‘reactive’ as highlighted above by Brown et al (2008). To gain a perspective beyond self evaluation – line managers were also asked to also complete a questionnaire before and after the PQ process. This questionnaire also included the topics derived from the practice requirements as well as views on a range of other areas such as the social workers knowledge of legislation, research and theory and evidence of their ability to apply them in practice.
During the interviews, when social workers felt that the course had made a difference to their practice we encouraged them to provide concrete examples to illustrate change. An initial observation was the difficulties that social workers had in clearly identifying such examples. It was a common response that they ‘felt more up to date’ and they frequently stated that they found elements of their programmes ‘really useful’. However, giving specific instances of ‘knowledge’ transfer into ‘practice’ was often much harder.

This study, in common with those noted above, is both small-scale and qualitative in nature. It is clear that there are therefore limitations in terms of the generalisations that can be drawn from it. In addition the evaluation had to deal with, suspensions of studies, and changes of role, over the course of an award that may in reality take 2/3 years to complete (3 child care workers did not complete the award in the timescale, 2 of these opted not to undertake a second interview; two managers were not available for the second questionnaire). Larger scale quantitative studies would undoubtedly be highly valuable (Carpenter 2005) and it is clearly important to develop research designs in this area (Carpenter 2011). However this method does enable an in-depth insight into how people understand and interpret their social reality and through this the opportunity for perspectives to emerge that can help understand complex phenomena (Ritchie and Lewis 2004). Qualitative studies can also allow modest extrapolations to other situations under similar but not identical conditions (Patton 2002).

The process of conducting the study and interpretation of the data required a reflexive process of analysis. We were bringing to it several years experience of
working with social workers on PQ programmes and a substantial amount of anecdotal knowledge of how social workers and managers felt that practice had, or had not, changed as a result. In addition, aware of the struggle that some social workers underwent in order to get through the award and the fact that a successful PQ programme could reflect positively on our own job roles, we may have been predisposed to accentuate the positive. It is widely recognised that those involved in qualitative research:

‘...should constantly take stock of their actions and their role in the research process and subject these to the same critical scrutiny as the rest of their ‘data’’. (Mason 1996, 6).

The position was restated in every interview that ‘no impact’ (or even examples of ‘negative’ effects) were equally valuable to us in the evaluation.

**Findings**

It is not possible to summarise all the areas we attempted to evaluate including the additional topics raised by individual social workers. The findings reported below highlight areas where some impact on social work practice was reported as well as examples of where there appeared to be little evidence of change. We would argue that it is equally valuable to consider the responses of social workers in areas where there was little or no evidence of change as they can provide indications of some of the barriers and issues that would need to be addressed.
**Skills**

The clearest example of the impact of skills came with in the discussion of the requirements of direct work. Questions included the frequency of direct work, their ability to plan and implement work, and the level of their direct work skills.

Pre-course interviews reinforced the fact that many child care social workers do little (planned) direct work with children. Although one worker commented that ‘I don’t see how you can do your job without doing it really’, the response of all the other workers that there is usually just not enough time is in encapsulated in the quote below:

> I don’t really do any direct work with children. If I thought it was really necessary I would set aside some time but, nine times out of ten something comes in on duty or something, especially at the moment there’s only two of us....and sickness and that so it would be letting the child down (1st interview)

A social worker who did sometimes do individual sessions with children described the situation as being done ‘on the hoof’ without time to plan, ‘grabbing some pens’ on the way to see a child.

One unit of study in the PQ child care award focussed on working directly with children and comments from social workers were generally very positive feeling their knowledge and skills had been enhanced, but second interviews revealed limited changes in actual practice. Only one worker had been inspired to undertake further planned work largely because of ‘positive feedback’ from her manager (confirmed in
her line managers questionnaire). Interestingly the work might not have been done in the first place nor would the manager have observed it if it had not been a requirement of the PQ award assessment. Most other social workers felt that the time pressures had not changed nor did they see planned direct work with children as any more central to their role. This situation was confirmed by responses from team managers e.g. ‘the opportunity to work with children directly does not arise very often’. In addition there was a particular issue in fostering and adoption teams where it was rarely seen as an essential part of the social worker’s role.

One worker commented that this type of work could equally be done by other professionals in the network calling into question how much they identified this as a core social work task:

There is much less planned work [than in the past]. Where planned work seems to take place is more er professionals such as a CAHMS worker or so forth, so I might ask other people to do the work without actually doing it myself.’

(2nd Interview)

In the adult care context the issues of direct work were slightly different although again the effectiveness of changing practice seemed to be reduced by the constraints of the practice environment. The majority of the social workers felt they used few skills in a role constrained by the demands of managerialism and bureaucratic changes. An example current at the time was the introduction of the
Fair Access to Care criteria (FACS) which prioritised access to adult services based on a matrix.

We only have eligible needs to meet now so it’s in the back of your mind, the way that the forms are designed; we have guidance notes which you have to read to fill out the forms.

(1st interview)

The friction experienced did not just concern skills but also values and the potential for anti-discriminatory practice:

They don’t do any self assessments we do them now, and it’s driven by whether somebody meets the FACS criteria and whether they actually have eligible or non eligible needs to have direct payments. I don’t understand and I’m waving the flag for the social model [but] I don’t see how you can incorporate the social model of disability under a regime that is forcing us more and more to give people a medical label so that they can access services.

(1st interview)

During the course of undertaking the PQ award five of these social workers seemed to reframe the work that they did enabling them, on reflection, to see their practice as still requiring a high level of skill even if these skills were constrained by ‘paperwork’ and ‘administrative tasks’. To this extent the process did have some impact as shown by the comments of one worker in first and second interviews:
'I think generally I always underestimate my skills, I need reassurance as well as a phone call to team manager to say what I've done and why'.

(1st interview)

I'm much more focussed on empowering people and I definitely reflected on how my work in the past had created dependency upon me….. now I feel much more confident

(2nd interview)

Research

Questions included how social workers undertook assessments and analysis in their practice and what skills, methods or research they used.

In contrast to the findings on direct work, evidence of some impact on practice was easier to identify here in both groups of practitioners. One child care worker could discuss how new research and theories about brain development and neglect had been influential in assessments and decision making in practice:

I've got a case, a chronic drug misuse dad…we had a couple of good lectures on drug misuse and young children and how it affects them and, you know, in early years... so I've learned heaps about drug misuse and alcohol, I really feel I'm a good practitioner on that now.

(2nd interview)
And another worker said in relation to other aspects of risk:

I just felt more confident in what I was actually saying – I felt that I could back up what I was saying with research...research about risk, research on the risks associated between drugs and domestic violence.

(2nd interview)

Adult care social workers too were able to see an influence on practice sometimes linked directly to work undertaken on the course:

Part of my growing confidence in assessing risk is theory from PQ and also from my new role (senior practitioner).... I did a particular piece for one of my PQ assignments about a woman who was in a risky situation and we looked at how to define that risk with other professionals and her.

(2nd interview)

One worker who identified a lack of confidence in this area in the first interview believed that the course had helped significantly and gave an example of introducing research findings (about how particular numbers of children in a family heighten risk) into a meeting with other professionals. Five of the childcare practitioners could cite specific examples of where they had mentioned research evidence in case discussions. Interestingly some of these workers reported that they were still discouraged from using this research explicitly in court reports on the grounds that solicitors would ‘quote contradictory research back at them’.
This change in the social workers’ application of research to practice, in particular their assessment of risk, was supported by feedback from several team managers. For example the manager of an adult care worker noted a ‘great improvement in quality of assessment skills and increase in confidence’.

Again, as noted above in relation to direct work with children, responses from the three fostering and adoption social workers and their team managers tended to identify less impact on practice. They clearly felt that sections of the course, although interesting, were not that relevant while research and theory relating to their core work of foster carer assessments and placements were insufficiently addressed.

**Values**

Some of the comments above, for example that relating to the use of the FACS criteria, revealed concerns about the role of social work values and the struggle to retain their distinctive perspective. Social workers were also prompted on the impact of undertaking a PQ on their values in second interviews and several examples were given by adult care workers. One worker acknowledged an increasing awareness of the rights versus risks debate and their place within it:

> That whole debate - which we had a lot of input on in PQ - about people’s rights to choose who they want to live with and how that’s balanced with the risks of abuse they may be exposed to and how you as workers intervene in that.  
> (2nd interview)

This appeared to be due to a renewed focus on reflection:
‘I’m much more focussed on empowering people and I definitely reflected on how my work in the past had created a dependency upon me - because of the nature of my specialist work’.

(2nd interview)

**The confident professional?**

As some of the quotes above have already highlighted, in the search for evidence of ‘impact’ in this area of assessment and risk, several strands seemed inextricably linked - working in an inter-professional environment, the use of evidence based research, and the repeated references in second interviews to confidence. This growing ‘confidence’ did occasionally refer to work with service users e.g. making decisions about risk or in relation to handling difficult decisions:

‘I feel more confident, able to allay anxieties, trying to bring into the debate the individuals’ right to make choices’.

(Adult care worker 2nd interview)

However its influence seemed particularly relevant in the inter-agency arena. Feeling ‘up to date’ with law, policy and in particular research seemed to enhance feelings of professional status and competence.
Because you’re going away and researching theories and stuff that would make you a bit more confident - that makes you more confident in working with other professionals.

(Int: any specific areas…) yeah quite a few topics – child development, drugs….

(Child care worker 2nd interview)

Some of the feedback from team managers reinforced this view reporting social workers as ‘more assertive’ with other agencies but also more confident in their own judgements:

What I believe the course did was for her to feel more confident in ‘owning’ her assessments; being better able to evidence her arguments and being able to defend her judgements.

(Adult care manager)

While much emerged from these interviews that was relevant to inter-professional working there were very few examples of how the PQ programmes had an impact specifically on the issue of actually developing more integrated ways working - this appeared to be one of the less successful aspects of both the PQ programmes.

Confidence could also relate to the whole approach to work as reported by one adult care worker:
one of the team members keeps saying to me you have changed so much in the last year, you seem much more enthusiastic, that’s been really good for me to hear that. I feel much more confident....

(2nd interview)

Discussion

It is not possible to summarise all the areas we attempted to evaluate including the additional topics raised by individual social workers but the clearest findings reported above reveal a mixed picture of how different elements of the PQ curriculum transferred into practice. For both child and adult care workers the impact of their PQ experience seemed to have limited impact on direct work practice. Both groups felt the weight of external constraints on their opportunities for direct work however the issues that emerged where subtlety different. For many adult care workers there was a shift in their perspective, enabling some practitioners to see a bigger picture in relation to their role and the demands of legislation and significantly, a re-appreciation that they were skilled workers. The evidence did not necessarily support PQ study adding significantly to these levels of skill rather it echoed the findings of Brown et al (2008) of social workers positively reassessing their roles and responsibilities. Nearly all childcare workers cited the issue of workplace constraints and the reality of this (and of limited expectations) was confirmed by responses from team managers. However excellent teaching might be in this area its potential seems unlikely to be fulfilled without addressing workplace structures and cultures. This also raised questions about how direct work with children is seen as a core social work role. This point may be very relevant to the issue of professional identity and a renewed emphasis on the importance of social workers having relationship
building and communication skills with children – a ‘child-centred system’ (Munroe 2011).

If social work practice is to be seen as evidence informed (HM Government 2010, Scottish Executive 2006) then this study suggests that CPD can have a significant impact. Both cohorts illustrated the transfer of research knowledge to assessments and decision making in practice. It was interesting that this also fed into an increased sense of confidence with the social work role. The idea of the ‘professional’ role needing its own distinctive ‘expert’ knowledge has long been a source of debate particularly in social work (Lymbery 2004). This emphasis on confidence in our study also reinforced findings from previous evaluations (eg Brown et al 2008, SSSC 2009). However the responses of practitioners from different roles also highlighted a significant tension between generic and specialist content on PQ programmes.

**Some messages for practice.**

The demand for qualified social workers to devote much time and effort to continuing professional development and the acquisition of qualifications seems likely to continue. The Munro report for example reiterated the view that ‘HEI-accredited CPD courses play a fundamental role in the development of social work expertise’ (Munro 2011, 116). The College of Social Work has emphasised that social workers must maintain their professional development and learning throughout their career (College of Social Work 2012) if so, enhancing our understanding of the real impact of forms of CPD on practice should be a priority.
Despite the limitations in qualitative studies noted above the approach used here has in our opinion provided some clear indications of the extent of its impact on practice and of a range of live issues within the profession about the role of social workers and the nature of their work – certainly within a local authority setting.

Our findings would confirm that undertaking CPD such as a PQ programme can have a direct effect on social work practice but that it is a very mixed picture. Different aspects of practice are affected to different degrees (or not at all) suggesting that evaluations need to explore change at a detailed level to understand what the effects are and the likely explanations for them. There are factors that significantly influence the likely impact of learning for example the expressed view within children’s services that direct work is not a high priority or the emphasis given to the transmission of learning to others. Practice agencies and universities need to identify what these factors are if practice is to be successfully developed. Allied to this are the way social workers, as well as their agencies, perceive their professional identity and which aspects of practice are central to their role. More detailed evaluations could also help address the tension between qualifications which attempt to underpin common social work ‘requirements’ or ‘capabilities’ and the needs of those in more specialised roles.

The development of evidence based practice has been strongly supported by government and there seems to be indications here that CPD can successfully enhance this – overcoming some of the issues that previous work has identified e.g. Wilson and Douglas (2007) including lack of access to new research (although ensuring realistic study time undoubtedly remains an issue). There was also an
indication that there was an issue here for long-standing social workers who were not always clear how their existing knowledge fitted into the emphasis on evidence based practice.

Our initial interviews were designed to provide some baseline information, and gain an understanding of issues for individual practitioners in relation to practice, as well as their aspirations and hopes for the PQ process. In retrospect they also revealed factors which would influence their experience of the programmes eg initial motivations for undertaking an award (also noted in Cooper and Rixon 2001 and Brown and Keen 2004), levels of experience, position in the life course, and ability to reflect on learning. More work in helping social workers at this stage, perhaps in supervision or through CPD, might help enable them to maximise the value of the award for themselves and their practice.

Finally this evaluation study tends to support one of the findings from earlier attempts to identify the impact of undertaking a PQ award on practice in relation to confidence. While ‘confidence’ can seem quite nebulous, perhaps with the current state of morale in social work, confidence and renewed enthusiasm should not be dismissed too lightly as an ‘impact’. Arguably this provides an important element in enabling the articulation of the social work voice in inter-professional debates and decision making which could be significant if we accept the view that ‘social work as a profession has lost it way, lacks confidence, expertise and gravitas...’ (Laming 2009, 48) and has been ‘lacking in confidence in its own skills and unclear about its distinctive contribution’ (Scottish Executive 2006, 14).
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References


