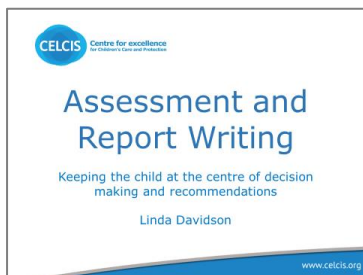


Date: August 2020

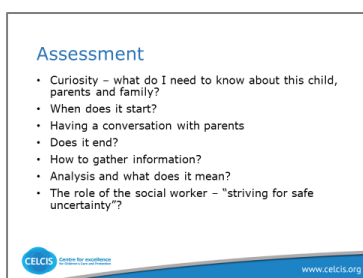
Title: Assessment and Report Writing: keeping the child at the centre of decision making and recommendations

Speaker: Linda Davidson, Permanence Consultant, CELCIS

You are watching a webinar about the PACE programme from the delivery team in CELCIS, at the University of Strathclyde. PACE is a Quality Improvement programme aiming to reduce drift and delay in permanence planning for looked after children. These webinars were recorded in the spring of 2020, so please be aware that key changes in legislation, guidance and practice may have occurred since this time.



This assessment and report writing session, and the slides that I'm going to be talking everyone through, is as a result of four years as a Permanence consultant, so I'll share some reflections on the work that we've been doing in PACE and the fact that assessment and report writing has been highlighted in every one of the PACE areas. I'll refer to some of the research I've read and also my experience of social work over the last 35 years.



I think sometimes there's some confusion about what we mean by assessment. Social workers, by and large, are good communicators and so one of the things that can really help social work in their assessment is being curious about the referral they've received, what we need to know about the child, the parents or family, which [Eileen Munro](#) calls thinking in practice.

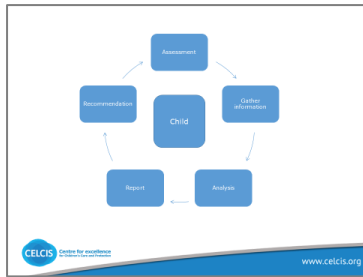
When does it start? There are various forms of assessment, but by and large, the assessment starts from a first referral, when social work starts thinking, what's the experience of this child? What do I want/need to know about this child?

I've put down conversation with parents, because I think it's important that when we're working with parents, they're aware that we are assessing something, that we're actually working with them but that we're also assessing the circumstance of their child and their parenting of their child so it's as open and honest as possible. Then quite often staff will say, how does the assessment end? The assessment never ends for social work, would be my answer to that. Quite often we have to manage new information that comes to light. Quite often the assessment of a child in placement and then a child in final placement continues if support is required.

I've put 'how to gather information' because I think social workers aren't often encouraged, currently, to be very creative about how they carry out an assessment. We've moved into a much more bureaucratic tick box system of report writing, but actually social workers are free to gather the information with families in as many creative ways as they can think of, and we'll maybe discuss that a little bit later.

The most important part of any assessment is the analysis. It's the part that research would suggest social work struggles with, but all social workers use their own intuition. Social workers can reflect and think critically about the information they have. In most instances, we make a hypothesis about what we think's going on, and what needs to happen next and having time, in supervision or with other colleagues, to reflect on the information that we've received.

I've put the role of a social worker is 'striving for safe uncertainty'. I pinched that from the Dutch model of practice the Buurtzorg model, because I think there is a tendency to think that we're always going to get things right or that the assessments always going to be complete, and that somehow there's a neat order to working with children and families. When for the most part, we strive to make safe recommendations in what can be quite an unpredictable world for children.



The assessment process, I've already suggested is ongoing. So in order to carry out an assessment, we gather information from a variety of sources. We then analyse and look at that information, summarise what's happening and try to analyse what that means for the child. We write this in a report format, for whatever meeting we require a report for and within that report, social work has a responsibility to make a recommendation, which can sometimes lead on to another assessment. So I've put it in circular format, because I think it's one of these systems that very rarely comes to a neat conclusion.

What are you assessing?

- The child's needs? Good understanding of child development. Direct contact with the child and carers.
- Parenting? **ONGOING**
- Parenting Capacity? An assessment of the ability to parent safely over time. **TIMELIMITED**
- Capacity to change? The ability to make and sustain change, over a timeframe. **TIMELIMITED**

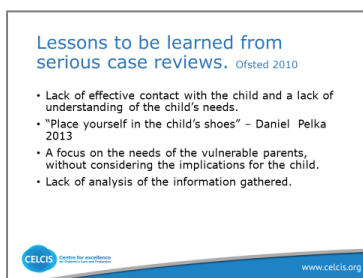
So what are we assessing and what do we need to know? We need to have a good grasp, in any assessment, of the child's needs - so I've put that first. In order to do that, we need to have a good understanding of child development, so that social workers can answer the questions. What does that mean for this one year old? What does that mean for this three year old? What does that mean for this 15 year old? So having a good, confident understanding of child development is crucial in being able to write about and present what we think is in the best interests of the child in an assessment.

In order to do this well, one of the things that is sometimes missing particularly for young children, is having direct contact with the child and carers. So it's not just about capturing the child's view, and talking to children that are able to participate, but actually capturing information about the behaviour of children in placement; even with very young children, their experience of and the effect of what's happened to them.

The assessment of parenting is ongoing, as we wouldn't be involved in representing children if we weren't involved in looking at the parenting they have experienced. An assessment of parenting is an ongoing part of social work assessment.

Parenting capacity; the word capacity came into literature about twenty years ago. Where we used to talk about an assessment of parenting, now we talk about parenting capacity because capacity gives the message that this is not about the ability to parent in the here and now, or today, or next week when things are a bit better. But actually, it's an assessment of the ability to parent safely **over time**.

In my experience, parenting capacity assessments (local authorities refer to them often as PCAs) are a time limited assessment. So there's a start to that assessment, an analysis and conclusion at the end of that assessment that makes a recommendation about what's in the child's best interests. There's another part to capacity, which is the capacity to change; if anybody's interested [Bristol University have a capacity to change assessment model](#). It is about a parent's ability, not just to make change, but to sustain that change over time. In essence, that is also a time limited period of assessment to consider a parent's ability to change and maintain that change for their child.



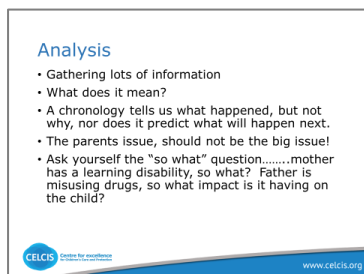
I've put this slide in because although this is not a child protection presentation, the lessons we've learned from serious case reviews are very relevant to the process of assessment and report writing for children.

As I mentioned earlier, having contact with the child and understanding the child's needs is critically important. I remember speaking to a social worker, before I moved to CELCIS, who made a rehabilitation recommendation for two children, but had never spent any time with the children who were seven and five. So the recommendation was based on the social workers understanding of what was in the best interests of those children and the rehabilitation attempt failed. It's really important that we try to represent children as best we can and develop a relationship with each child, so that we can best understand their needs. I've put at the end of the presentation a link to an organisation that has a [social workers toolkit](#). This has a number of useful tools a social worker can use to engage children.

Particularly for young children, it's much easier to try and gather their views through play, and some other means other than just talking directly to the child.

I've noted the serious case review of Daniel Pelka, the little boy who was starved to death. The review found there was a massive amount of information gathered for the purpose of assessment, but it had never been analysed. The very first recommendation in that serious case review, is that agencies need to be able to put themselves in the child's shoes and think from the perspective of 'what does this mean for this child'. That can be very clearly represented and should be very clearly represented in reports.

Many PACE areas have raised concern about the tendency to focus on the needs of vulnerable parents within an assessment document, what parents need to do or what they're not doing, without really making the connection with the implications of this for the child. I'll mention that in a later slide. Serious case reviews have almost universally highlighted the lack of analysis in assessment; huge amounts of information gathered, but what does that information mean for the child?



We gather lots and lots of information. I can't remember a time in thirty five years of social work when we've ever gathered quite so much detail. *"We write so much, yet understand so little". Harriet Ward 2017*

But what does this information tell us? Chronologies are helpful: they tell us what's happened on specific dates; they often tell us what's happened to the parents, but they don't always tell us what the experience of the child has been. What they invariably don't tell us, is why something's happened, nor are they useful in predicting what might happen next. So let's remember a chronology is not an analysis. A chronology is a sequence of events from which we can begin to look for patterns in a child's life and a child's experience, and make sense of them.

I've put the parents issue shouldn't be the big issue, because again, thinking back to some of the feedback on serious case reviews, if you're a child experiencing neglect, if you're a two year old who's not being fed and not being paid attention to, it really doesn't matter to you as a two year old, whether that's because your parent has a mental health problem, your parent has a learning disability, or your parent has a substance misuse problem. The experience from the child's perspective is still that they're experiencing neglect. So if we are to talk about parents issues in an assessment, it needs to be from the perspective of how the issue impacts on the child and why. So ask yourself the "so what" question; so mum has a learning disability, so what? Recording that doesn't tell us anything.

The information we're looking for in any analysis, is if mum has a learning disability, in what way does her learning disability affect her ability to fulfil her responsibilities as a parent, to keep the child safe, healthy, nurtured etc. If dad's misusing drugs, that's useful to know, but what impact is it having on his child?

Make the important information important and continually ask yourself in carrying out an assessment, the so what and why questions. So what does that mean for the child? And why is it having an effect on their wellbeing?

Some of the Opportunities

- Engaging parents from the start, talk responsibilities first and then rights
- Early decision making - timescales
- Permanence 'mindset'



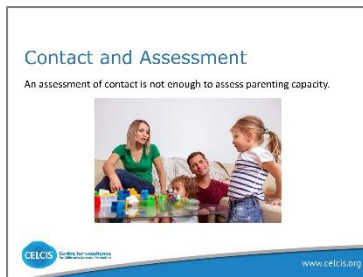
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There are real opportunities in assessment and carrying out an analysis. I think one of the opportunities is talking to parents from the outset about the fact that you're carrying out an assessment and if it's time limited, make that clear. Talk to parents about their past, their responsibilities, what their child needs from them, and importantly why. By all means talk about rights, but it's a much more natural conversation to talk about what it is as parents we are responsible for. That allows us, particularly if the assessment is time limited (that we're going to make a decision in three months' time, in six months' time) to discuss the importance of early decision making and early timescales with families. Families should know when any formal assessment starts and when they can expect it to end.

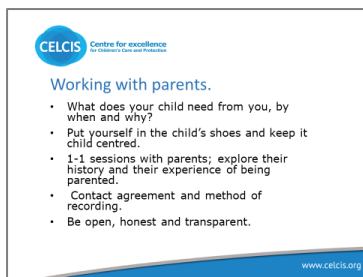
In addition, having a permanence mind set can help; being aware that we should be considering and thinking about children achieving one of the four routes to permanence from the very beginning of their looked after journey.

So how can we carry out an assessment? How can we analyse the information we've gathered, in order to support the child getting to a permanent relationship and place in as timely a manner as possible?



Part of an assessment is often supervising contact between parents and children, but the assessment of contact itself is not enough to assess parenting capacity. For an hour or two hours a week, most people can probably spend time with a child and that time be reasonably pleasant for the child involved.

Contact doesn't really tell us whether the parent can parent safely over time. It tells us something about how the parent interacts with the child, it tells us something about the child's response to the parent, but on its own, it's not an assessment of parenting capacity.



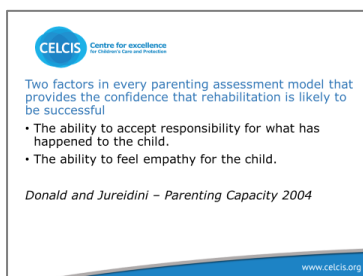
When working with parents to assess their capacity, their child needs to be at the centre of the conversation. Having the conversation about what your child needs in terms of their age and stage of development, what your child needs from you by when and importantly why.

Putting yourself in the child's shoes, so having clear conversations with the parent about their child's development. If they have a child of a particular age and stage, what might their experience have been, can the parent connect with that experience? So not just putting yourself in the child's shoes, and keeping the conversation child centred, but actually assessing whether or not the parents can put themselves in their child's shoes and feel empathy for their child's experience.

In addition to contact, one to one sessions with parents are necessary for a parenting capacity assessment. It's so important to explore their own history; in my experience of carrying out parenting assessments, the one common factor in every parent that struggled to parent safely was their own early childhood experience. So being able to connect with their experience of being parented can be incredibly helpful, not just for the purpose of assessment, but to help parents understand their own

experience of being parented and how that's reflected in their current experience of parenting their own children.

I recommend drawing up a contact agreement, which I think most local authorities have and it can also be very helpful to have an assessment agreement, with an agreed method of recording so that parents understand what's expected of them, what the local authority will be carrying out in terms of an assessment and how that will be recorded, so that there's no surprises. The 'no surprises' is the ability to be open, honest and transparent with parents about the assessment that's being undertaken, and what aspect of that assessment will be the contact between themselves and their child.




I've read numerous parenting assessment formats and it really doesn't matter which one you use, as there are common themes and headings in each. It can be useful to have assessment tools to assist the assessment, but there are two things that every parenting assessment tool looks for that might give practitioners the confidence that rehabilitation may be successful. One is the parent's ability to accept some responsibility for what's happened to their child, and the other is the ability to feel empathy for their child. This gets back to being able to put yourself in the child's shoes. Can parents actually express some regret and take responsibility for the experience their child has had, and can they also feel for their child in terms of what it must have felt like to be frightened or what it must have felt like to be left alone or what it must have felt like to experience neglect?

See the research by, [Donald and Jureidini](#), which I think is on Social Work courses.

I have worked with a many parents who have struggled to accept any responsibility for what's happened to their child, and also struggling to feel empathy for their child. They tend to be the parents that as children had no adult really accepting responsibility for them or feeling empathy for them.

What can help?

- A clear understanding of your role and being curious.
- Legal duty to make a recommendation that will safeguard and promote a child's welfare.
- Own the assessment and recommendation, say I and in my view.
- Confidence in writing about a child's experience and their developmental needs.
- Use research to highlight an issue - 'high frequency contact'
- A timeline or other visuals.

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What can help? I think, there seems to be, at times, a lack of confidence in social work practice from social workers themselves. So having a clear understanding of your role, and being inherently curious about wanting to know more about the child and family, while continually reassessing or rephrasing your hypothesis so that you are trying, in a very time limited, but constructive way to carry out an assessment.

Social workers, via the local authority have a legal duty placed in them to make a recommendation that will 'promote and safeguard a child's welfare'. Carrying out an assessment and writing reports that make a recommendation are the key functions of a children and families social worker. So I would say to social workers: own your assessment and your recommendation; say 'I', I've read many reports where workers say "the writer" or "the department", say 'I', this is your assessment. Have confidence in writing about the child's experience and their developmental needs - and if you need to pull research into your report, then highlight it - too much research can make a report difficult to read but well used research that highlights some of the issues you've raised can be incredibly helpful.

I've referred to "high frequency contact", as there is a very helpful research document - that assessed whether or not the frequency of contact lead to a greater likelihood of rehabilitation. The research highlights that it's not the frequency of contact that results in positive rehabilitation, but the quality of contact. That can be very useful to mention if you're writing a report to a children's hearing where contact is a big issue. So use research wisely, as there's a lot of research out there that can support your report writing.

Some of you will be aware that we've been using a timeline tool with some of our PACE areas. Some authorities have been testing making a child's journey visually accessible, where the chronology is turned into visual timeline of the child's placement history and experience. You can use other visuals and there are a lot of visuals available on the 'social work toolkit' website at the end of this presentation that you could access. This gets back to the benefits of being creative and thinking creatively about how you can best represent the child in your report writing.

Report writing and making a recommendation

- Review
- Case Conference
- Hearing
- Panel
- Court
- Care plan
- Registration
- "Throughout childhood", "balance of probabilities".
- Permanence options away from home
- Legal order – 'significant harm'.

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Social workers have to write for many different settings and decision makers. For the purpose of a review, you'll probably be asked to produce a care plan for the child. You might be asked to make a recommendation for a case conference which might be: does this child need to be on the register? Does this child need to be referred to the Children's Reporter? Does this child need to be on compulsory measures of supervision?

I think it's confusing for social work, because the hearing system looks at making a decision based on what will support the child throughout childhood and on a balance of probabilities; however you might be writing for a permanence panel and making a recommendation about permanence options away from home and the test of 'significant detriment' for court.

It can be very confusing, because quite often social workers are having to write to the reader, or decision makers, and they are very different and have very different purposes throughout a child's journey.

Report Format?

The landscape is complex:
32 different IAF versions in Scotland!
Multi-agency?
PO, POA or direct petition?
Parenting Capacity Assessment Formats

What have PACE areas considered?
Avoid repetition and TIME spent writing.
Do we need a CAPR or Form E?
Will one report for multiple settings work?
Repeat assessments require 'evidence of change'.
Section 90 report

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I forgot to say when I was talking about rehabilitation, that there's research that suggests 60% of rehabilitations in the UK fail. That means many looked after children return home, many of them more than once, but a high number of these rehabilitations fail; which makes it even more important for children that a very thorough assessment and recommendation is made at the earliest opportunity.

The report format landscape is also frustratingly and unnecessarily complex. We have 32 different IAF (integrated assessment framework) versions in Scotland. The purpose of having an integrated assessment framework was that the frameworks and assessments would become multi-agency. I've put a question mark after multi-agency because it's been raised within PACE many times, how difficult it can be to produce a thoroughly multi-agency assessment.

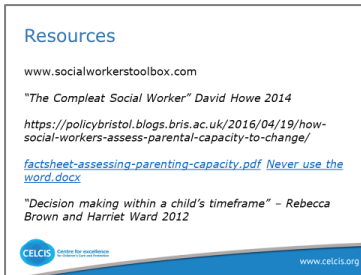
We have a complex legal landscape in Scotland, which also makes report writing complex; some local authorities, particularly in the east, consider the a permanence order and permanence order with authority to adopt is the best route, while in the west the legal route is predominately a direct petition. That's changing slightly into more of a mixed recommendation. Within PACE, we are aware that there are a number of parenting capacity assessment formats being developed and used.

For the purpose of this webinar, it's impossible to tell you there is one ideal version of a report format that that we're using in Scotland. What we try to do through PACE, is share examples of good practice and in Midlothian they have developed an 'outcomes based assessment' that they use from an initial referral through to the permanence panel, if required. It is an excellent example of one report and assessment format which avoids the need to use multiple forms and enables them to spend more time working directly with families. (For more information see the Midlothian webinar)

PACE areas have considered a number of issues in relation to assessment and report writing. There's an anxiety about the amount of repetition within report formats and the huge amount of time that social workers are required to spend writing reports. Some local authorities questioned from the outset, whether or not they needed to use a CAPR or Form E. Some local authorities have now developed their own version, sticking to the legal requirements of the report, but not using the Coram/BAAF format.

Aberdeen City was the first to test this and in addition to Midlothian, other local authorities are looking at developing one report that can be used in multiple settings. In Midlothian, they have one report that is used for reviews, the children's hearing, includes a parenting capacity assessment, and replaces the need for a CAPR or Form E. They have tested their format extensively with very positive results.

We repeat a lot of assessments. Most looked after children have siblings, some of whom arrive very quickly after their birth. Social work are under pressure to repeat full parenting capacity assessments, when in many cases, we should be evidencing whether or not there's been a significant change in capacity, rather than completing another full parenting capacity assessment in every case. Through PACE we are aware there is a lot of confusion, not just about what's required in a Section 80 report but what's required in all reports that have a legal status. Clear, national guidance and a national assessment format has been suggested.



I've put in a link to the [Social Workers toolbox](#), which I'm not sure everyone knows about.

I'm a great fan, of David Howe, he's written a wonderful book. You'll notice he uses **compleat**, which seems to be the wrong spelling, it's deliberate, because he says social workers are never complete. So the complete social worker doesn't exist. But it's a wonderful, short book that helps spell out the responsibilities and some of the challenges of being a social worker.

I've added a link to Bristol's [assessing the parenting capacity to change](#).

I've also attached an [NSPCC fact sheet about assessing parenting capacity](#) and the language we use and being clear, particularly if you're using the word attachment, what you mean by that. Also the research carried out by Rebecca Brown and Harriet Ward on "decision making within a child's time frame".

Thank you.

Linked Resources

CELCIS Knowledge Bank:

<https://www.celcis.org/knowledge-bank/>

Independent Care Review and The Promise:

<https://www.carereview.scot/>

University of Bristol: Assessing Parental Capacity to Change:

<https://www.bristol.ac.uk/sps/research/projects/assessing-parental-capacity-to-change/>

The Social Workers Toolbox:

<http://www.socialworkerstoolbox.com/>

Parenting Capacity, Terry Donald and Jon Jureidini:

<https://onlinelibrary.wiley.com/doi/abs/10.1002/car.827>

NSPCC Fact sheet: Assessing Parenting Capacity

<https://www.nspcc.org.uk/globalassets/documents/information-service/factsheet-assessing-parenting-capacity1.pdf>