



MANDATE

Management and Disability Advice and Training

Checklist for ensuring Good Social Work Practice

The Law in relation to children and their assessment and services is fairly well defined and accessible and mainly in one piece of legislation. However the social work law and the way in which social workers can practice lawfully in relation to adults is not only less defined it is detailed in numerous pieces of legislation and policy that the local authority must demonstrate they have considered in all cases where they seek to remove children where the adult has an impairment however mild it may seem.

In order to ensure that the local authority has carried out their responsibilities and that good social work practice has occurred, the starting point should always be community care law, assessment and service provision guidance. The only exception should be in cases of immediate safeguarding issues and this should be evidenced based. When all aspects of the adult's needs under community care law have been supported, then it should be considered whether there are issues and needs that should be a matter for the Children Act 1989 and additional provisions.

If any part of the adult legislation has not been appropriately addressed then the legal advocates for the parents may be able to argue that the local authority has not taken due consideration of the Human Rights of both the child/ren and adult's. It is also poor social work practice and an inappropriate basis for considering removing a child.

The level of impairment cannot determine whether an adult is eligible for assessment and service. It is the impact it has on the needs and risk to the adult's independence including their family roles and responsibilities that determines whether they should receive an assessment, and support resulting from that assessment.

To assist legal professionals and the courts to consider whether all aspects of social work law and practice in relation to the adult's have been considered, the following is a checklist that should be considered before a child is removed, unless on an emergency order, and definitely before any long term consideration is given to a child being looked after. The points are not in any particular order or hierarchy, and some or all may apply in each case.

My hope is that this will prove useful in ensuring the right social work practice and support at an earlier stage, and therefore condensing the length of time that cases are with the courts. It is not in children's best interest and welfare for cases to drag for 2 or 3 years in the courts whilst social services fail to assess properly or ignore their duties. As an Independent Social Worker I am saddened by the number of times I have been approached, where the child is over 1 year old and the local authority have never completed all the assessments they should have. The times where children

have been removed before any assessment has been completed either adult's or children's, where there has been sufficient time, without endangering a child, for a comprehensive assessment of need and service design. It should be possible for the local authority to have carried out much of the assessment process before a child is born, and completed full assessments by the time a child is 3 or 4 months old.

Checklist and Explanations

- **Has either parent an impairment – however mild?**

The widest and most inclusive perspective should be taken when considering impairment. This should include, physical, sensory, cognitive and learning difficulties, it should also include mental health, chronic health conditions, and the effects of drugs and alcohol dependency.

- **Does it “appear” to have an impact on parenting?**

Whether this has been recognised and assessed or is only suspected. If the local authority is citing it as a causal link for the need to remove a child, then they should have assessed the impairment before considering looking after the child (unless there are specific issues of immediate safe guarding). The social worker, if they are from the children's service may have little experience or training in aspects of disability, health and impairment, therefore it should not be assumed that they have appropriately considered the issues.

- **Have the social workers defined what their concerns are? How fully have they been defined and what is the evidence that has led them to have concerns?**

Often the social worker has concerns that ‘something might happen’ or that the parents may not be able to meet needs. To ensure good social work practice the concerns that they have must be fully identified, and not under general catch all statements. They should be able to give specifics; otherwise it is potentially unsafe practice.

- **Are any of these related to an impairment or health need?**

This may not be immediately apparent, for example it is possible that a learning difficulty is the root cause of why someone is not keeping their house clean or ensuring the children have adequate nutrition etc, therefore before taking any further action, an assessment to show how the learning difficulty impacts on the adult's ability to parent is required. If the social worker specifies that they think an impairment exists and is why they are suggesting that the

adult cannot parent, then they should produce an assessment under community care legislation that demonstrates these needs and the services that have been provided. If this has not occurred then the local authority has not carried out all its duties. This assessment must be needs led and identify areas of need, not task related, as this will not identify how support should be delivered.

- **Is any more being required of these parents than would be from non disabled parents?**

It is often apparent in cases that Disabled People are having to prove to a very high degree that they can parent, free from any mistakes or incidents and accidents. It should always be asked of any incident cited as cause for concern, was this due to the parent being inappropriately or not supported. Would this be reasonable to expect of any parent, for example if this happened to a child of a non disabled parent would the social services department take action against the parent and remove the child?

- **What level of assessment has been conducted? If there is adult impairment this should have been assessed by a worker from adult services, they have a duty to consider the family roles and responsibilities of Disabled People.**

Under Fair Access to Care Service all local authorities must consider whether an adult needs support, with family roles and responsibilities. This has been mandatory since 2003. A local authority can set an eligibility criterion to say at what point they would deliver services, but if an individual meets that criteria they must offer a service to support the need. In the event of a child being removed or being considered for being looked after, the eligibility for service is CRITICAL as the local authority has decided that the adult is unable to meet vital family roles and responsibilities. Where a supervision order is being considered then the eligibility is either critical, in that the situation could deteriorate if services were not appropriately given and therefore it would be critical, or with support the situation could be maintained therefore eligibility should be considered to be substantial. All local authorities should have published their eligibility and the vast majority will have a criteria of Critical and Substantial, many will also meet moderate needs. The key factor for the social

worker, is that if appropriate support is not given will the risks and needs increase. If this is the case then the eligibility must be the higher band.

- **Has a full assessment been carried out or is the assessment incomplete?**

An assessment is not complete unless all aspects of the adult's impairment have been considered and assessed. This may involve a multidisciplinary approach. Always consider whether a Psychologist, Occupational Therapist, Speech and Language Therapist, Nutritionist, Physiotherapist, Community Nurse etc, should have been involved to ensure a full assessment.

- **What references to legislation, policy, practice guidance and research are there?**

Good reports for the courts on the circumstances should be able to support all points with reference to research and published material as well as legislation or central (DOH DfES etc) policy and practice guidance.

- **Good social work practice should be underpinned by a good foundation in the law to practice. If the only references to research, practice and policy are pre 2000 then the practitioner is probably not ensuring that they are meeting their duties and codes of practice.**

Much of what should be guiding the practitioner has been written since the publication of Jigsaw of Services in 2000. The practitioner should have a reference to this report as it is a foundation for practice with parents who have an impairment.

- **Is the case brought on the evidence/report of a lone practitioner?**

It is not possible for a lone practitioner to have all the knowledge and skills to ensure a holistic and comprehensive assessment of need even if they are supported by their manager. Many social workers in children's services have limited training and experience in disability and health related issues and practice.

- **Has a multi disciplinary assessment/co-ordination meeting taken place?**

Good practice should involve a collaborative approach by relevant professionals experienced in disability to providing the most appropriate and creative support.

- **Where 'good enough' parenting is mentioned, has this been defined? Has it been conveyed to the parents in a format that they understand?**

On every court case I have had any involvement in the phrase “good enough parenting” is used. I have never yet seen this phrase defined or quantified. In many cases the parent may not know what a professional means by this. Equally each professional is likely to have a different perspective on what it means and different values. Therefore if it is to be used to measure whether a child should be removed, it must be defined. Having been defined it must be communicated appropriately to the parents, who should then be given the support they need to meet those ‘targets’.

- **If it has not been defined then how do practitioners know whether the parents can meet the standards with support?**

If it has never been defined, the practitioner should be specific in demonstrating why they have said the parent is not meeting standards. They should still be able to say what those standards are and how they are influenced by the practitioners own cultural perspective on parenting and family life.

- **Have all the risks been defined and evaluated and management and mitigation measures appropriate to supporting Disabled People been put in place?**

Risks should be defined and evaluated. The appropriate support should be offered, and/or considered as to why it can or cannot ensure the welfare of a child. If there are any risks that have not been fully considered and the support required to assist to prevent or manage risk, then a full assessment has not been completed.

- **Where is the responsibility for service delivery?**

Where the adult has an impairment and requires support to enable appropriate parenting, the delivery of service should be from specialist practitioners in that impairment field or at least a general adult team. The delivery of services to support Disabled People in their parenting role, should be kept separate from any child protection monitoring and assessment. Provision of a service from children’s services where there are protection elements, can lead to the service being rejected or not fully engaging the adults. Fear of being monitored and doing the wrong thing, leading to losing a child is likely to make the

parents more restrictive and rigid in their parenting, when the professionals are looking for adaptability and flexibility.

- **Have budgetary concerns and cost implications been kept separate from the assessment process?**

Mistakenly and illegally, many social workers believe that they can only assess for needs that they know the local authority will meet. This erroneous form of practice results in bad assessments with unmet need going unrecognised. Practitioners should assess for all needs, irrespective of budgetary issues, and then consider what needs are eligible for support and how eligible needs can be met. Often provision can be low cost, certainly in most cases the support required to parent effectively will be lower than the cost of foster care. In practice it has been found that the cost of assessment is high, but the cost of service in the long term is low. The total cost is usually considerably lower than the cost of court proceedings, from a monetary point of view, and immeasurable from a human cost to child and parent.

- **Has the local authority considered all the options for service and creatively considered how support can be given or are they using a narrow framework and menu of services.**

A menu of services that are provided as standard to all services users is unlikely to meet the needs of disabled adults in their parenting role. Flexibility and creativity is required. Adult social workers are often aware of a wider range of service provision than children social workers. Also Direct Payments, cash in lieu of services, can be made both under the Health and Social Care Act 2001 s57 and the Children Act 1989 s17A (as amended by the 2001 Act). Direct Payments can enable adults to purchase the appropriate service for their families needs.