

# **Supervision and the Organisation**

## **A survey of current practice**

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## 1. MANAGING PRACTICE

Changes in the role of local government, new legislation regarding the welfare of children and care in the community and fundamental policy shifts on the future of welfare all contribute to an enormous impact on the workings of the statutory social services. Traditional assumptions about the nature of their work, the skills and expertise required, and about their relationship with other care agencies and corporate colleagues are having to be re-examined.

Some of these changes are recognised, within the social services, as deriving from professional values. Others are seen as unavoidable demands from external authorities, welcomed by some, but often regarded as alien ways of thinking and impossible to reconcile with professional activity.

However they are regarded, these changes demand the acquisition of new skills or the adaptation of old ones. They need to be assimilated and adapted within the conceptual and ethical frameworks that underpin the work of social care agencies. As with all change, there is an accompanying anxiety that there may be no place for already established expertise and knowledge.

The statutory social services are, therefore, undergoing their most fundamental changes since their re-formation following the Seebohm Report, in both Children and Adult services. As a result they find themselves facing difficult questions: is a care manager the same as a social worker? What is the role of the qualified social worker within a statutory agency nowadays? What is the role of managers in these agencies and what do they need to know? Previous assumptions about the nature of professional expertise and the organisational context within which it operates need re-evaluation and re-definition.

Of course, re-examined assumptions often look less robust than they seemed : the debate about the nature of good social work practice and about an acceptable standard for that practice is long established. More recently, this debate has widened its initial focus on individual direct practice with clients to include the organisation's role in the management and support of practice.

Practice development has not always kept pace with changes in social policy. Many of the practitioners and front-line staff involved with this work have argued that there is no proper recognition of the need to develop either practice knowledge or individuals' practice expertise. Staff experience practitioner-manager relations as the collision of two worlds: the professional, attempting to be user-focused, and the managerialist, dedicated to organisational maintenance as an end in itself. This divide is exacerbated by recent attacks on the relevance and value of " social work" for the implementation of community care.

Managers have a responsibility for staff development, as well as ensuring that the organisation is informed by and about the direct work it undertakes. These can only be achieved with trust and a shared language and purpose between managers and front-line staff. How robust is this relationship within the statutory social services, and how can it be best sustained?

## 2. DIFFICULT QUESTIONS

The management of practice is perceived by many staff as tacitly forbidden by their organisation, and, where undertaken, is a “closet activity”. This reluctance to consider the issues involved in the management of practice seems to exemplify the divide between management and direct practice within Social Services Departments.

### *Supervision and the management of expert practice.*

The traditional bridge between first-line managers and practitioners has been professional supervision. This is no longer a useful concept for several reasons : supervision has fallen into disrepute because it has often been a semi-private activity, focused on the individual supervisee’s needs and not on the outcomes for the service user. Without standards and accountability supervision has, at its worst, allowed abuses of power. More usually, this lack of visibility and accountability has made supervision vulnerable to managerialist approaches and become procedurally driven, checking compliance rather than positively challenging accepted custom and practice. The relationship between practitioner and supervisor is therefore likely to be a prescriptive one, as managers oversee compliance with procedural and fiscal requirements. It appears commonplace for supervision to be regarded as no longer a part of a manager’s job. There is a sense of fragmentation, where managers and practitioners inhabit parallel worlds, with no awareness of a common purpose.

However, some of the best characteristics of supervision are vital to the management of practice. These include an understanding that effective practice requires a sense both of disengagement and reflection. It is the opportunity to question practice and custom which is vital to the development and support of effective social work.

'The management of practice', of which supervision is an element, can seem to be a perplexing concept. Management and practice are so routinely separated in organisational thinking within the social services that staff groups, aims and values are polarised into opposite and competing positions within the one organisation. This makes the convergent thinking required by 'the management of practice' difficult.

Another difficulty surrounds the notion of 'expert practice'. There is little formal definition of expertise within Social Services Departments, where it is more likely to be regarded as a fixed attribute than as a dynamic process. 'Expertise' is often understood to mean an individual’s length of service, or to reflect the setting in which they work. It is less often based on the known quality of individual or team practice. 'Expertise' and 'specialism' are used indistinguishably and, invariably, 'expert' settings are seen to be outside the mainstream of Departmental work. That is, where the work is perceived as dealing with “difficult” clients or circumstances and within structures that do not match the Social Services Department’s usual management system. Expert knowledge is thus seen as particular, marginal and esoteric. The relative isolation of such practice settings makes it unlikely that expertise developed there, either in direct practice or its management, is easily disseminated to the rest of the department. Conversely, the presumption grows that mainstream social work in mainstream settings is common-place and lacking in expertise.

#### 4. SURVEY RESPONSES

During 1995, NISW surveyed current arrangements within statutory social service departments for the support and development of good practice. All Social Services Departments in England and Wales were asked to describe their arrangements for supervision, the policy framework behind them, if any, and links with other Departmental work such as management development. Departments were asked to provide relevant documents and a lead contact for further discussion.

The final response rate was relatively low, 38 Departments out of a possible 109 (35%), and followed a second approach to a small number of non-responders. Most of these commented that response was problematic: supervision arrangements were often not formalised and were not usually the subject of policy. This comment is supported by Bernstein's research into effective management (Bernstein 1995). Some senior staff said that they had not responded initially because, since the re-organisation of Social Services Department following the Children and Community Care Acts, they no longer had a sense of department-wide development.

The following analysis therefore considers a minority of the statutory Social Services Departments in England and Wales. However, there are a number of common characteristics within the sample that suggest it is representative of current practices. These characteristics illustrate the issues, achievements and difficulties facing the statutory social services when considering the management of practice, and, by inference, management development strategies.

##### *Survey method*

In January 1995, NISW wrote to all Social Services Departments in England and Wales to enquire about their arrangements for supervision. It asked

- whether these arrangements were supported by a policy framework and whether supervision was formally linked to any other departmental systems. I expected that this would demonstrate how integrated a practice-led approach was within a department and how it influenced management development.
- For copies of all relevant policies.
- For a lead contact to telephone for further discussion. The range of staff contacted was :

from corporate units	4
from the Social Services Department	34
assistant directors	6
area manager	1
admin and support division managers	3
training officers	8
personnel officer	1
staff development officers	10
management development officers	5

- NISW also contacted CCETSW's PQ Consortia Correspondents for information about any accreditation submissions that concerned management of practice or supervision.

Fifteen Social Services Departments (two-fifths of responding Departments) had an overall supervision policy; that is, a policy statement that includes all members of staff within operational divisions, and is not restricted to professionally qualified social workers in field or purchasing sectors. Several of these Departments included all management, support and administrative staff within the policy.

Twenty-three Departments (three-fifths of respondents) had no policy to support supervision and therefore to link the management of practice to the organisational task. Most of these Departments had practice guidance, codes of practice or protocols about supervision. In the main these were technical specifications, stating frequency, duration and general content of supervision sessions. They contained little explanation of the aims of supervision or the Department's understanding of managing practice. Such guidance was often particular to individual services or staff groups, rather than pertinent to all services or all levels of staff. Various Child Protection services, Adult services purchasers, residential care staff and administrative support services had developed their own individual supervision procedures without any policy to support them.

### *Policy Characteristics*

A number of characteristics were present in most of the policy documents and some of these were also evident within the protocols and practice guidance from those Departments without policy on supervision:

Statements of intent: Two-thirds of policies opened with a statement of intent. These varied from a description of the actions to be undertaken to a setting out of the values underlying such action; that is, from the 'what' of supervision to the 'why':

*Supervision is a formal process...so that learning and change can take place*

All the statements of intent considered supervision to be a "reflective" process about professional thinking, actions and decisions. The statements recognised organisational maintenance as an element within supervision, although few of the statements or accompanying guidance commented on how the various elements in supervision were to be integrated within a practice-led focus.

Contracts, Recording and Confidentiality: Several policies required staff to use a written supervision contract or agreement. Only one Social Services Department explained this as a means of conferring supervision with formality and status. Several statements laid out the forms of recording to be used in supervision and a number of Departments had pro-forma records and contracts. In some instances these were documents specifically intended to promote individual learning needs and

development. One Department produced a recording format that reflected its expectations of supervision:

**WHAT YOUR SUPERVISION FOLDER IS FOR :**

- it is a planning and recording tool to be used jointly by supervisor and supervisee;
- it is to help you develop the skills you need to do your work, both now and in the future;
- it is a means of gathering together information the organisation needs for planning purposes.

Contracts were also an expectation of Departments without supervision policy. In this context, they were mainly presented as pro-formas, although one Department used the contract to encourage innovative and thoughtful work:

- The methods we will experiment with will be
- What we hope to gain is
- If things go wrong, we will
- The way we're most likely to sabotage sessions is by
- The ways we will avoid sabotage are

Only two Departments considered the matter of confidentiality of material. These stated that the material of supervision was work related and that recorded information, with safe guards of openness and signed agreements, belonged to the organisation.

Accountability: Four policies mentioned accountability and defined this as responsibility for ensuring that supervision takes place and for ensuring the quality of individual practice. There does not seem to be a prominent focus on accountability as a factor linking professional and organisational responsibility, except in the one instance of a Department with an accountability policy (see below).

Complaints: Only one policy touched on the problematic area of inadequate work by either practitioners or managers. The policy stated that the supervision process was not an alternative to 'whistle-blowing' and reminded staff that they could by-pass their supervisory or immediate line-management hierarchy. Staff could also use the Department's complaints procedures should they be dissatisfied with the supervision they received.

Endorsement: One supervision policy was agreed both by senior management and trade union; two policies were accompanied by a statement of support by the

Director. Documents without policy status did not, almost by definition, receive such endorsement from the organisation.

Training & Guidance: A number of Departments expanded the policy with written practice guidance about supervision, whilst some provided training on supervision and on the implementation of the policy. Training ranged from non- obligatory in-house courses to Division wide exercises using external consultants. Only one supervision policy included a training statement particular to supervision. There were no examples where training in professional supervision was formally defined as an aspect of management development or where the training curriculum considered the strategic management aspects of supervision.

### *Policy Frameworks*

Where supervision policy existed, this was sometimes integrated within a wider policy framework and took a variety of forms. The most common was through a link to a staff appraisal scheme in so far as annual appraisal was described as “ the culmination of on-going supervision sessions”. These were also meant to contribute to individual professional development and in some cases were also linked to a personal development plan.

Less commonly, supervision policy was located within corporate staff care policies. Here, the definition of supervision consequently emphasised Health and Safety issues and the management of stress at work.

Some Departments linked the supervision policy to their Business Plan, and some used supervision as a means of building up a departmental training plan through aggregating individual, team and divisional training needs.

Three Departments included supervisory practice within their managers’ training. In all three cases, the emphasis within the management development programme was on “ managing people” rather than on managing practice and reflected managers’ experience as reported to the survey. These Departments did note the usefulness of professional supervision as a provider of management information and the need for supervision to be provided at manager level, but did not define this further:

The supervision of managers by their line manager up the organisational hierarchy is an area which is beset with difficulties. It can be argued that the needs of managerial staff for supervision by other line managers are no different in form than those of front line workers, only the content of the subject matter may be different. The need for effective managerial supervision is equally necessary for all the reasons why it is considered so important for practitioners.

### *Standards*

Seven of the Departments had developed standards to support their supervision policy. Some used external frameworks, usually Management Charter Initiative or NVQ competencies, to do this. A smaller number approached standard setting through their own internal quality assurance framework, linking the supervision

process to quality standards and subjecting it to the organisation's quality audit procedures.

Some Departments extended the policy beyond their operational divisions to include support services. In some instances, the initiative for developing the policy had come from work within administrative sectors.

One Department had service-wide minimum standards for supervision which the Child Protection service used as the basis and remit for its own supervision framework. This included monitoring and evaluation processes as well as building in some consideration of "local variations and constraints" on supervision. That is, the Department's acknowledgement of the varying abilities of team managers to provide a good standard of professional support.

### *Innovations*

One Social Services Department had actively devolved supervision responsibilities to senior practitioners some years previously. This particular arrangement was accompanied by the development, over the last ten years, of management training in collaboration with a local college.

One Social Services Department had created a specific supervisor post within teams, operating alongside the Team Manager, with comparable rates of pay. Whilst the Department did not have a supervision policy, it did operate an accountability policy, which offered some integration of the management of practice within the Department.

### *The Advantages of Policy*

Respondents from Departments without a supervision policy reported that this would have been beneficial. They thought that it would offer cohesion and purpose to the work of the organisation. One senior manager described his organisation as 'at sea' without such a framework and subsequently weak amongst its corporate colleagues. The corporate context was mentioned by several respondents, instancing the imposition of poorly-adapted corporate schemes. One senior manager reported 13 current, separate "initiatives" required of the Department by the Chief Executive's office, most of which were produced in a 'bolt-on' fashion. He considered that a supervision framework would have made the Department less vulnerable to such approaches. Several senior managers thought that integrated supervision and management development policies would have demonstrated the Department's capacity to lead within the Authority regarding management of change and complexity. More often, the Social Services Department was seen by corporate colleagues as slow to respond to Quality and other Authority-wide initiatives or even to being financially inept compared to other departments.

### *Policy in Development*

A number of Departments said that their supervision policy was 'in development'. Some of them said that any work on supervision or management of practice needed careful negotiation with their trade unions. This was due to the considerable mistrust

amongst staff of corporate-wide systems of appraisal and performance-related pay. In such a context, “supervision” was perceived as a form of managerial control and as a time and motion exercise rather than as a support to professional practice.

### *PQ Consortia Correspondents*

I requested information from PQ Consortia Correspondents about any applications made to them for accreditation of supervision training. Most consortia were in their first year and consequently had few such applications. However, responses to date from Correspondents indicate that they are eager to consider the role of post qualification training as a part of supervisory and management frameworks. Management elements are specifically included in CCETSW’s criteria for Advanced awards. Some Advanced and PQ course leaders responded to the survey by expressing concern at the standards of supervision and decision making they observe, particularly within Child Protection work. The Correspondents are also aware of the poor response of staff to the awards:

The capacity of departments to sustain advanced practised is uncertain. One element in the low take-up of PQ and AA places must be the reluctance of employers to value such skills. To date, the experience of staff qualified at advanced levels has been that their employer does not know what to do with them.

(Rushton A, Martyn H 1990)

## 5. KEY ISSUES

These difficulties of articulation, conceptualisation and analysis are themselves indicators of the current state of management practice within the statutory social services. They provide the backcloth for the major findings outlined below:

### *Two Worlds*

Establishing current practice in management development and the role of the management of practice is problematical. The survey found no consensus about the relationship between management and practice or, consequently, about the skills required of a manager within the statutory social services.

When interviewed, staff with a corporate-wide brief had a different perspective from those within the Social Services Department. Respondents from corporate settings considered that 'supervision' was a part of their management development programme. However, social service managers in the same Authorities considered that these programmes failed to address the management of practice. Significantly, one corporate management development officer commented that the Social Services Department's programmes did not include supervision or management of practice issues since "our manager are much further on than that". There are two presumptions here: that supervision is a skill social service managers already have, and that it is a skill middle and senior managers no longer need. 'Supervision' in this management development context is usually synonymous with 'managing people' rather than with a professional social work definition of developing and supporting practice skills.

### *The Fragmentation of Social Services Departments*

The disparity between practice and management, between professional and bureaucratic values and the systems they support are visible in all the public services, and are not unique to them. Within the last decade, this disparity has been exacerbated by the impact of general management principles applied to the Civil Service, to Higher Education, to health services and to local government, including education and social services. Specifically, general management imperatives permeate the NHS and Community Care Act and its application within Social Services Departments. The requirements of the Act, such as the creation of a mixed economy of care and the purchaser/provider split, have sometimes been responded to by an unresolved mixture of professionally-driven ideals and general management hypotheses.

The requirement on Social Services Departments to implement this new legislation has led to major structural changes within their organisations, with an impact felt beyond Adult, Community Care, services. These structural changes have invariably produced a 4-fold split between Adult and Children services and between purchaser and provider units. The consequences are enormous in the de-stabilising effect they have had on department-wide activities such as clear communication, shared values and effective information gathering and evaluation. The response rate to the survey is an indication of the current fragmentation within Social Services Departments, in that lead staff reported difficulty in responding because they no

longer knew what was happening about supervision or practice development across their departments.

Experience over time ( the Community Care Act acknowledges the scale of changes in its sub-title “the next decade and beyond”) will no doubt ameliorate teething problems, but the scale of confusion and, more importantly, the increasing emphasis on organisational maintenance in response to the new legislation, will require something more than the passage of time if the primary social work tasks of the organisation are not to be forgotten. Procedural dominance is surely the response of an anxious organisation and this response is apparent to both the Children Act and the NHS and Community Care Act. It suggests that practice-led approaches were not secure within Social Services Departments even prior to the legislation of recent years.

### *The illusion of management*

Indications are that, within the statutory social services, organisational maintenance has become the department’s primary task at the expense of the management and support of practice. A major influence is general management concepts and language, in that they determine rather than simply articulate thought. Alone, they are inadequate as management models since organisational and administrative language and systems will not adequately demonstrate the work of practice. Practice involves not only direct service delivery but also:

the “hidden” tasks of moral reasoning, classification, categorisation and *then* a decision about services.

Thorpe (1994) p38

Such management concepts are concerned with technical and administrative activity; they will therefore deal with service delivery and not with the reasoning process behind it, nor with any professional attention that is not itself defined as a “service”. Since current definitions of service are usually based on budget categories, a service that isn’t costed, isn’t counted and doesn’t count. Many social work activities take time and skill without involving budget decisions. The service offered is that of professional expertise: negotiating a child's return home from care; helping parents to find different ways of dealing with a troubling child; supporting adult children with the care of a dementing parent. The bedrock of professional practice is in danger of being defined out of existence because it is not costed on a care plan.

Meanwhile, in Thorpe’s memorable phrase, *the illusion of management* is sustained through the “entirely symbolic function“ provided by the procedures and data volumes on managers’ shelves (Thorpe (1994) p50). The “hidden” tasks of practice will not just remain hidden, they will be forgotten.

### *The nature of reflective practice and its management*

These hidden tasks of practice are made visible when they are reflected within supervision. Supervision as reflective practice is a notion that has been considered within a social work context (Mattinson 1975) and in the wider professional world (Schon 1987). Social services management needs to be equally as reflective. It must understand the inter-connections between the feelings engendered by the work, how these are experienced by the organisation, as well as the individual, and how these experiences provide a diagnostic tool, to aid decision making. The link between use of feelings and effectiveness is a vital one:

We believe that practitioners who assume that they are not affected or try not to be affected by their clients, ostensibly remaining uninvolved, are just as affected, but less knowingly and less usefully so than those who take account of their emotional involvement and spontaneous reactions, particularly when they find these reactions are out of character for them.

Mattinson (1988) p151-2

### *First-line managers*

One of the consequences of the changes attendant on the new legislation is the transition from team leaders to team managers. These first line managers have traditionally been the professional supervisor and, as such, the arbiter of an individual's quality of work. There have always been limitations to this model since it has rarely been extended to accommodate staff other than field social workers. Workers in other settings, such as residential workers; other professionals, such as Occupational Therapists and the majority of unqualified social care staff have not been as readily supported in their practice. These days the emphasis may be reversed, as the likelihood of a first-line manager being other than a qualified social worker increases. This is particularly so within care management hierarchies, where all staff members above the front-line case worker may be non-social workers with no previous experience of statutory social services management. The survey found examples of this within a number of Authorities' Community Care Divisions. This was most common in specialist health services, where team managers and service managers were appointed from the Health Service with no experience of social work or local authority management, but also in mainstream community care services, with team managers from the commercial world. Staff have described how such line management arrangements lead to an over-dependence on procedure and its uniform application, regardless of the requirements of different user groups. One example given to the survey was an HIV team that operated department procedures by closing cases after the requisite number of weeks, sending the client a letter informing them of this. What is good practice in, say, short-term hospital discharge work, becomes inappropriate in work with deteriorating, dying and often disenfranchised clients. Departments can no longer rely on the culture of "handing down" professional expertise through line-managers that Cassam and McAndrew advocate:

A good senior is the best possibility of practitioners being properly developed, coached, trained, supported and counselled. Good

supervision at this level gives the best chance of spotting things going wrong and appropriate action being taken. This is not a level at which to make economies even if the alternative is a reduction in the range or amount of services offered .... The level of specialism will need to continue from practitioner to middle management.

Cassam E, McAndrew B (1993) p68

All organisations need to articulate what they expect their managers to do and why, and how they can be helped to do it. In Social Services Departments, the first-line managers seem to be the most visible example of where this definition is lacking: they have been given an ever-increasing range of tasks to undertake, particularly since the advent of devolved budgets. Front-line managers report to the survey that they no longer have time to supervise their staff, and moreover, they are not confident that it is any longer officially seen as an appropriate management task. Instead they find the department emphasises the technical aspects of management, in particular, financial, at the expense of the professional and developmental aspects of the manager's job.

### *Senior Practitioners*

The survey found there was a corresponding effect on senior practitioners posts, which were originally set up to encourage expert practice and offer career advancement and a higher salary within practitioner roles. In some authorities, the post has only been attainable through promotion or on formally presented and assessed practice. The original expectation of promoting good practice, including by example and consultation, has been adversely affected by the increase in management responsibilities upon team leaders. As team leaders have changed into team managers, senior practitioners have taken on a quasi-managerial role. This has varied from 'relieving' the team manager of practice-focused work such as supervision, to acting as deputy team manager on a regular basis or in the team manager's absence. The change in role is often not explicitly acknowledged and will vary within the same organisation. Many senior practitioners look increasingly like team leaders without accountability or authority for decision making, whilst still carrying a complex caseload of their own. This experience was regularly commented on by staff interviewed for the survey.

If Social Services Departments are not sure what they are asking their senior practitioners to do, they cannot help them to do it. Where a Social Services Department recognises the complex practice these staff members undertake, it may provide more frequent supervision and specialist consultation. It is as likely, though, that it will offer less than to other practitioners on the basis that senior practitioners are "paid to know what to do". Both approaches were reported to the survey.

## *Accountability*

Taking on supervisory roles in such circumstances means that accountability is unlikely to be well understood or defined. It may be unclear who is invested with the necessary authority, information and knowledge to make decisions on behalf of the Department and as part of inter-agency negotiations about practice decisions. The use and definition of supervision as an aspect of Departmental accountability would seem to be fundamental to an understanding of how decisions are made in relation to statutory responsibilities. This particular aspect of the management of practice one that the HMSO study of Child Abuse Inquiry Reports finds lacking:

When second level managers are referred to as involved in decision making, the extent of their authority tends to be unclear...A theme running through the inquiries... is that whatever the first and second line managers decide about cases, they should do so on the basis of full information and take a probing rather than a passive role.

HMSO (1991) p27

The survey has noted three broad approaches to supervision, where it is variously defined as either :

- primarily a check on procedural compliance *or*
- support for the individual practitioner; an activity separated and sometimes protected from the organisation *or*
- a contribution to the management and development of practice.

It is this third approach that enables accountability for practice decisions to be understood as an organisational and managerial responsibility. The survey's survey of policy documents indicates that few Departments are in this position.

If supervision is a department-wide activity, integrated within and visibly contributing to training plans, management information and planning, then accountability can not be regarded as an individual responsibility based solely on professional discretion. Riley carries this argument further to suggest that organisational reluctance to clarify accountability may be an unacknowledged barrier to the management of practice :

This objection may be the last ditch defence of a manager who is afraid he/she will be held accountable for the first time, instead of having the freedom to escape responsibility, take the credit for others' ideas, scapegoat subordinates in time of trouble or be unavailable whenever decisions are needed.

Riley P (1994) p46-7

Accountability also means the responsibility for ensuring that the supervision process itself is an effective and equitable one. Monitoring and evaluation of standards and outcomes play a part in this. If such scrutiny is to be acceptable, then the Department must be clear about the confidentiality of supervision material. As the survey shows, this is not usually the case. Departments that place their supervision arrangements within a staff care framework will be even less likely to

consider organisational accountability. In these cases, supervision material may be regarded as personally as well as professionally private. The distinctions between management, consultation, appraisal and professional and personal support will remain confused if confidentiality is not clearly defined. There will inevitably be a sense of unease for participants in supervision if they do not know what happens to their contribution:

Staff tended to feel they were not able to talk to their line managers about any severe difficulties they might have experienced ... because they thought it was possible that it might be used against them in the future.

Newburn T (1993) p47

### *Service users and carers*

The notion of users' and carers' experiences providing a sounding board for evaluating effectiveness or for defining the task of the organisation was not a prevalent one. The influence of external management concepts, such as consumer satisfaction and Quality Assurance have clearly promoted the voices of service users within the statutory social services. However, the real and unavoidable differences between business customers and some social work clients often remain unacknowledged. Dealing with clients against their will is the obvious example given to demonstrate the particular issues facing the statutory social services, but there are others. Amongst these are clients with a need for sensitive advocacy, clients with whom there is a requirement to work in partnership, and which we may not know how to do and clients who have no choice of other service provider. These aspects of the work are not solved by the application of customer care principles. In fact, they are likely to be disregarded by them. It is not surprising, therefore, that the survey found little emphasis on users and carers. A minority of Departments related supervision to service users, for example, as a means of ensuring that their best interests were met. There were no examples given to the survey of evaluations or outcome studies about the management of practice that incorporated users' experience.

### *External frameworks*

Some Social Services Departments are using external frameworks such as the Management Charter Initiative or "Investors in People" as an aid to developing standards. Departments report that these are most useful as a prompt to further developmental work rather than as wholesale adoptions. Without a departmental understanding of the management of practice, such standards are likely to be "cart before horse". Departments using such frameworks describe their long term commitment to assimilation, and evaluation within a clear organisational "vision" about professional development (Curtis 1995).

The language of the Management Charter Initiative standards is currently being revised to make it more accessible to different work settings. However, the difficulty for social care is probably one of concept as much as vocabulary. General management skills will not be assimilated in any useful way by Social Services Departments if the values, knowledge and skills required of direct practitioners are

not understood. Universal defined standards are an extremely useful sounding board for management development, provided they are integrated within professional practice. Without this context they will be used mechanistically and reactively and not realise their development potential. The survey noted this process at work in two particular areas, the use of procedures and the use of competency models.

### *Procedure versus practice*

Statutory responsibilities require procedural frameworks as support and guidance to workers. Ideally they provide a safety net above which creative and useful practice can be attempted. They uphold a worker as the agent of a statutory agency and foster responsibility and accountability at departmental as well as individual level.

However, there is considerable concern that compliance with procedure has come to dominate and stifle practice. This is inevitable where procedures are regarded either as “idiots’ guides” or as defensive measures against the probability of something going wrong. Department Of Health research ( Bullock R, et al 1995) notes with concern what many workers have been saying, that child protection procedures are too readily called into play at the expense of good practice, that is, support to the family.

Similarly, in Adult services, needs-led assessment, a sensitive negotiation with users and carers, will be jeopardised by an over-emphasis on Community Care procedures that requires “tick box” form filling to determine eligibility or need.

### *Competencies versus professional knowledge*

The development of competency frameworks is taking place within this mechanistic, managerialist context. Standard setting, evidenced learning and effectiveness measures should challenge unexamined and complacent presumptions about “expertise” as esoteric and therefore non-accountable knowledge. This will only happen when organisations understand the relevance of direct practice and their responsibility for developing it as part of the management task. Otherwise competency frameworks will deal only with technical compliance and will accommodate to, rather than challenge, procedurally-led work. At best, custom and practise will be maintained. The conditions needed for competency frameworks to support rather than suppress good practice must be recognised by social service departments.

At higher levels of occupation...mastery and exploitation of bodies and patterns of knowledge, of concepts and paradigms, of precedent and process is vital for satisfactory performance. ...The development of higher level vocational qualifications therefore demands a different model of knowledge and values in occupational knowledge.

Dept of Employment (1995) p7

Social Services Departments do not easily see themselves in the category of “higher levels of occupation” but need to do so if they are to support the management and development of practice. Arguably, the competency model, at whatever level, is of limited use to post-qualifying social work practice and its management. However, in

the absence of a robust management development curriculum, it is often all that is available to individuals and organisations that want a formal development programme.

## 6. DISCUSSION

### *Policy status and effect*

When a Department raises work to the level of policy it confers status and sanction on that activity. In the survey, those Departments with a supervision policy clearly intended this effect. In itself, such a statement is the first attempt to integrate notions of management and practice, of individual with collective action. It reassures operational staff that they and their senior managers have the same aims and that they share the same values. This is made explicit where Directors have contributed directly to policy statements:

I am happy to support the policy and to review my own practice in its light. A sound Supervision Policy is the corner-stone of good practice and I warmly commend the document to staff in the Department.

However, the survey findings indicate that only a minority of departments make supervision the basis of policy. Whilst 'supervising' is clearly not synonymous with 'managing', the traditional notion of professional supervision does offer a starting point for thinking about the management of practice and therefore about the nature of management development. When supervision is made the basis of policy it gains an organisational place. The focus of supervision can move away from the social worker's 'needs' to the outcomes of the social worker's actions and their usefulness to users and carers. Supervision, becomes fundamental to the workings of the organisation and its core functions.

Policy legitimises the organisation's interest in the purpose, presumptive values and ultimate direction of its work. If supervision is not supported by policy it can not make the transition to management of practice and will remain localised in every sense, remaining a private activity without the adjuncts of departmental responsibility or accountability.

### *Policy Implementation and Evaluation*

Policy of itself does not guarantee that work is undertaken. Policy formulation, in any area, must be accompanied by implementation, monitoring and evaluation processes. Whilst some departments are clearly promoting the status of supervision, this does not, of itself, promote the quality of supervision. One or two Departments were about to review their supervision arrangements at the time of the survey, including some evaluation by supervisees. However, more commonly, Departments said that their work is in an early stage of development and that evaluation would be undertaken later. The proposed evaluation was mainly about compliance with the policy. The next question, " does this help provide a better service?", is not being asked. This is not surprising given that practice outcomes and other qualitative standards, including user comment, are currently underdeveloped in social care agencies.

*Barriers to a policy framework*

Staff in those Departments without supervision policy described what they saw as the barriers to developing a supervision framework. They were conscious of the unresolved and unexamined tensions within the organisation between “ professional” and “managerial” models of supervision . As already noted, some Departments considered that they had little idea of the quality of current supervision or therefore of the quality of first-line management. There seems to be a paradox: because supervision is taken for granted, neither its quality or effectiveness are regulated or formally ensured within departments. Without these supportive frameworks, it is difficult to see supervision's potential for providing bottom-up management information. As one Director wrote, about the need for a staff supervision system :

Basically, this £15m per annum, people-orientated enterprise has no recorded information as to the capability of its 1,300 staff, neither has it any coherent plan for their individual development as professionals, their career aspirations, or safeguards for them in terms of the stress they experience in their work.

Managers said that they constantly struggled with the effect of new departmental structures upon developmental and information-gathering work. Several respondents commented that departmental wide thinking had been held up by repeated structural re-organisation; the Social Services Department’s version of planning blight. Repeated, major re-organisations will have negative, unintended consequences when they are not based on practice-led considerations. The design and function of the department should be integrated, with structures fit for purpose. Small scale change, or no change at all may be as effective.

*The management of practice*

A number of Departments are re-defining supervision as a composite activity with several aims. Most of the contracts and policies received by the survey categorise a range of objectives covered by supervision, in a broadly similar way:

Example 1

Example 2

There are three main objectives a) manage the work b) develop staff c) support staff	Supervision should include: a) a management function b) an educational function c) a supportive function d) a mediation function
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Policy and guidance presume an implicit connection between these activities, embodied and symbolised in the relationship between line manager and supervisee. However if these activities are unintegrated, they become an impossible span of control for the manager to deliver.

A further barrier is raised where there is no perceived congruence between the skills of management and of practice since managers will not know enough about practice to manage it usefully. The percentage of non-social work managers may be a substantial minority, and may be an increasing one following the implementation of care management. One indication is the estimated 44% of non-social work managers in the sample researched by Balloch (Balloch et al, 1995 p23). Even without the advent of non-social workers as managers, there is likely to be a gap in managers' knowledge of practice issues, not least current research. Managers at all levels reported to the survey that they were out of touch with current professional knowledge. The picture painted as recently as 1994 may no longer be pertinent:

Do the goals and values of social workers and managers really differ so greatly? Given that most managers are recruited from the ranks of social work practitioners, and many practitioners have experience of management, how do they perceive each other?

Pahl (1994) p191

If the various elements of the management of practice are delegated without these connections having been understood, then it becomes less than the sum of its parts. This understanding must precede the question of who should supervise: if the management of practice is divided and delegated, the principles and values underlying and integrating these activities must first be understood.

### *Standards*

Accountability as a support to the quality of supervision will exist in a vacuum unless a Department has developed some definite standards for practice. These make explicit the connection between professional, statutory and organisational accountability, between the individual worker and manager, the client and the elected members.

Practice standards have been reported to the survey by some Departments, usually within specific areas of work; for example, one Department has produced standards for child protection work which are agreed across the relevant agencies, through the Area Child Protection Committee. More commonly, arrangements for supervision and management development do not have the rule of explicit practice standards to measure themselves by.

### *Education & training: supervision skills*

It seems to me that many learning experiences are neither recognised nor made use of and that supervision, in practice, is not seen to be a vehicle for learning and education, except very early on in a social worker's career.

Godsby Waters (1992) p65

One reason for supervision's poor image and its lack of integration within a management framework may be that managers don't know how to do it. This lack of skill, in supporting staff and integrating supervision within an organisational context,

may start very early through low expectations. One of the particular difficulties in the transition from qualifying course to work place can be the disparity between experiencing supervision as a student on practice placements and as an employee. This disparity is mirrored in the highly detailed attention given by CCETSW to the preparation and monitoring of practice teachers compared to the virtual absence of this for managers as supervisors. One Department reported to the survey that it had run courses for both supervisees and supervisors so as to raise expectations and understanding of the supervision process, but this was a lone example.

Several departments reported running in-house supervision courses or releasing individual staff for external courses. These were usually pitched at practitioners and even in-house courses did not consider the management or organisational aspects of supervision. Training strategies mean that practitioners, particularly CCETSW accredited student supervisors, are the main recipients of supervisory skills training and not first-line managers. One Department had made overlaps between its supervision courses for senior practitioners and its first line management training as a way of addressing this. More commonly, lead staff said that they ran a variety of supervision courses and that, consequently, their Departments suffered from a fragmented approach to training staff adequately. Some Departments reported using external trainers to provide courses across a service as a way of achieving some organisational cohesion. These were regarded as successful mainly because they involved a strong element of consultancy, addressing strategic issues, with senior managers involved in planning work that was then carried out over several months. One example of this approach was the Training the Trainers programme in child care undertaken by the Tavistock Marital Studies Institute and funded by CCETSW.

#### *Education and training : management development*

No Departments surveyed required newly appointed managers to undertake supervision training as part of their induction or management development. Where management development programmes existed, Departments reported that staff were usually 'encouraged' rather than required to undertake them. There were no examples given during the survey of mandatory training on management development courses.

There does not appear to be any focus on the issues arising from managing expert or specialist practitioners with more advanced or different skills than the manager. Attention to these issues is more likely to be found in supervision skills courses. That is, courses that do not address management issues and that managers do not usually attend. CCETSW's Practice Teacher Award may eventually mean that managers with supervision skills are regularly appointed, although there is little evidence that this group is regarded as potential managers, including by themselves. Whilst student supervision is not the same as the management of practice, qualified practice teachers offer a potential body of expertise for departments to draw on for the management of practice. Whilst the organisation fails to recognise the relevance of such expertise to management development and, conversely, whilst practice supervisors regard themselves as "non-management" they will continue to be an under-used resource.

Some Departments had devised management development programmes in the absence of a supervision policy. Lead staff in these organisations reported a lack of congruence between the various programmes, since the self-managed learning style of a development programme is not suited to learning about supervision and the management of practice.

#### *Managers as development workers*

Lead staff in several Departments said that a major obstacle to developing the management of practice was managers' reluctance to involve themselves in staff development. Managers often considered that this was an individual's own responsibility or, if the Department's, that it should be left to the training section. Managers who have never received such developmental support for themselves may find it hard to give or permit it to their subordinates. One or two Departments commented that their practice development schemes had been "sabotaged" by first-line and middle managers. Recent research, although not on a national scale, may indicate this when it describes managers as not only the most stressed workers within a social services department, but also the ones who consider themselves least well-prepared and supported to do their current job (Balloch et al 1995 p109 ).

#### *Managers as educators*

Another role that practice-led management requires of managers is that of educator, both by example and by direct teaching. This role is also relevant to the Open Learning frameworks that Social Services Departments are developing, with managers as mentors and Assessors.

It is likely that managers feel unprepared for these responsibilities. Unlike medicine, psychology and teaching, senior staff are cut off from professional discourse at an early stage in a field of practice already notorious for its poor undertaking, dissemination and application of research:

Training should also be supplemented by regular updates on research and promote a culture of reflection within the profession, which will stimulate and promote the desire to know more. Policy adjustments could then be more gradual and consensual than the current " jerky juggernaut " sensation.

Hollows A (1995) p22

The survey found little evidence of an understanding of the relationship between managing and practice, with managers, at best, aware they are distanced from practice by the hierarchy they are in or, at worst, consider practice to be metaphorically, as well as structurally, a low level activity within the organisation. It is clear from respondents' comments that one reason for managers' reluctance to think about the management of practice is that they do not feel sufficiently well prepared or supported themselves to undertake the difficult work of reflective supervision. Managers in the middle of the organisation feel bereft of training or attention to their own development and general management training is often the only path open to them. It is possible that managers at senior levels have even less opportunity for training or development. Management development programmes must address how

best to keep managers informed of current theory as well as practice research and innovations. This would include the innovative and expert practice undertaken within their own departments. At present, these activities seem to have no place on in-house management development programmes.

### *Corporate Influences*

Where the lead responsibility for management development is outside the social service department and is authority-wide, then “supervision” will mean other things than the management of practice. It will usually mean either “managing people”, which has already been noted as an unintegrated general management concept present within Social Services Departments or “supporting people” through a staff care programme.

Health and Safety issues are as important for staff in Social Services Departments as for any other employees. Work that demands too much of an individual, and the stresses engendered by organisational and private life need to be allowed for. However, other people’s distress, and doing something about such distress, is a daily fact of life for social care staff. Supervision of practice must acknowledge and make use of feelings so that the worker is enlightened, rather than overwhelmed by them.

Moreover, workers in the statutory social services should be constantly aware of the tension between the care and the control aspects of their job. The appropriate use of authority is vital to good practice and should be both a focus and a characteristic of supervision and the management of practice. This is rarely a comfortable feeling and, in this context at least, such 'stress' is a necessary aspect of good practice and management.

Placing supervision within the staff care policies of an organisation, particularly at corporate level, disregards these particular characteristics. It hinders the work because it blunts the analysis and negotiation required of practice managers in the statutory social services.

### *Other Professions*

Other professional groups within social and health care have a current interest in the management of practice; for example, promoting clinical supervision or career succession within current management structures. An interest in supervision at front-line level often comes from contact with the statutory social services where the principle, if not the practice, of professional supervision is an accepted one. Colleagues from other disciplines regard this as the chance, not available in their own organisations, to ask for help without being seen as a failure. However, this anxiety does have its echoes in social work, too :

Because of the association of looking for support with the idea of having “failed” in some way, workers assume that if it were known within their organisation that they had sought help, this would be likely to affect their future career prospects.

Newburn (1993) p71

Respondents regularly cited examples from inter-agency work in Child Protection and Community Mental Health services, where nurses, doctors and police ask for the kind of supervision available to their social services colleagues. The survey demonstrates that the debate about practice-led management is being raised in a variety of ways: Area Child Protection Committees are beginning to commission development work in Child Protection supervision for community health teams. The nursing profession is currently debating the proposition that “nurses of the future will be managers of the carers, not carers of the sick” (Guardian 1994). The current draft consultation document from the Department of Health “Child Protection: Clarification of arrangements between the NHS and other agencies” begins to address the impact of purchaser/provider reforms upon inter-agency practice and its management.

## 7. CONCLUSION

The survey indicates that managers want and need support themselves if they are to manage practice helpfully and achieve more than good organisational housekeeping, necessary though that is. A growing number of Social Services Departments are recognising the need for management development programmes. Whilst there are management training programmes that consider the professional practice focus of management in social care agencies these are in the minority and are invariably based in Higher Education, attracting individual professionals. In-house management development programmes, in the main, do not consider how to integrate management and practice at any level of management. The survey indicates that most management development programmes, based externally or developed in-house, offer technical competency around organisational maintenance or at best “managing people”. Furthermore, there seems to be little opportunity for managers to keep abreast of professional information or of integrating this within their management of practice.

Competency based models of learning are unlikely to offer sufficient support to management development in social services: their learning styles may not be best suited to management of practice issues and they do not challenge accepted custom and practice. Social Services Departments are increasingly reluctant to fund individual external placements, for a variety of reasons, and one of the main attraction of competency -based models may be their 'in-house' nature.

There is a need for management development programmes that can be developed in-house, or at least for groups within the organisation, that take the support and development of practice as their underlying focus. These programmes should not perpetuate the prominence of a purely technical set of skills but should give participants, and the organisation, the opportunity to:

- re-visit underpinning professional knowledge
- understand practice, and therefore its management, as enabling change
- develop and apply an understanding of practice focused management information
- keep abreast of current theory and practice research, and understand their application
- obtain sound technical competence in budget management and Information Technology and their application within practice focused management
- develop the management skills of reflective supervision, including practice outcomes
- develop and apply partnership with users, carers and other professional organisations in supporting good practice

The survey findings beg an obvious question: if managers are not managing the task of the organisation, that is, client-focused practice, then what are they doing that is

more important? Is there a “ flight from reality” into maintenance of the organisation as Menzies has famously described (Menzies 1970)? This has serious implications for the quality of practice and delivery of services as it provides a fertile ground for the growth of an interventionist and procedural culture. Uncertainty, complexity and distress, ever-present in practice, will become difficult to acknowledge, tolerate or articulate. This will mean that practitioners and managers will become unable to work in partnership with users and carers and will hinder, not help them.

In this kind of environment, that is, where management of the organisation leads rather than follows from the management of practice, the use of external models of management exacerbate rather than solve the problem. To a fragmented management world like the current social services, these models are attractively robust : to paraphrase Sterne, “ they order these things better in the real world”. However, commercial and industrial management styles will not necessarily adapt well to statutory social care ( and even in the 'real world' managers are advised to 'stick to the knitting', that is, to understand the practice of their own organisation). The emphasis in recent years on market-place principles in social care provision has given a spurious applicability to the more simplistic adaptations of general management.

The indications are that Social Services Departments have difficulty in defining their organisational tasks to be those of working helpfully with users and their carers. There is little evidence of this understanding determining the place and style of organisational maintenance, the use of technology or the development and definition of management tasks. Nor are users and carers regarded as contributing to the organisation’s understanding of its primary task. Instead, the organisation’s focus has become managerialist, that is, based on a presumption that administrative and maintenance procedures are the organisation’s main concern. External standards and competency frameworks will also be misapplied if they are not understood as generic statements that need active application and organisational support in a practice setting. The 'underpinning knowledge' with which organisations are meant to particularise such standards is precisely the understanding of practice that appears to be missing. Regarding management standards as an end in themselves will inoculate Social Services Departments against innovatory management development ( Smale 1992). They will alienate those workers who are cynical about 'tick box' management as well as those who are reluctant to examine their own practice knowledge. General management concepts are unlikely to be more than a beginning for management development in the social services. The creation of occupational standards particular to the statutory social services may remove a barrier but should reveal even further whether the nature of 'underpinning knowledge' for management is practice-led. The unexamined hypothesis 'management is management' does not well serve the particular management needs of the statutory social services.

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