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## Social work assessment of children in need: what do we know? Messages from research

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### INTRODUCTION AND BACKGROUND TO THE REVIEW

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The assessment of children in need and their families has attracted considerable attention over the past decade. Research studies, inquiries into child deaths and overviews of serious case reviews have consistently shown that assessment is complex and challenging, and that on occasion, practice has fallen short of the standard required. Five areas have been repeatedly identified as problematic: differential thresholds, a failure to engage the child, inadequacies in information gathering, shortcomings in critical analysis, and shortfalls in inter-professional working.

This review drew together UK research findings that provide information on the assessment of children in need. The period covered by the review starts with the transition from the 'Orange Book', the Department of Health's (1988) practice guidance on comprehensive social work assessments, to the *Framework for the Assessment of Children in Need and their Families* (Department of Health *et al.*, 2000). The decade following the introduction of the Assessment Framework saw a number of significant additional policy initiatives. Measures that have a particular impact on assessment practice include the Integrated Children's System and the Common Assessment Framework, which have been introduced against a back drop of wider service re-organisation and moves to strengthen inter-professional and multi-agency working.

The review identified the very wide and growing range of knowledge and skills needed when undertaking assessments. It also highlighted both a range of obstacles and the factors that contribute to supporting effective practice and the production of high quality assessments.

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### KEY FINDINGS

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- Good assessment is important, and contributes to better outcomes for children. Good assessment is related to improved chances of reunification success, and can contribute to placement stability for children - for example, by preventing delay and helping to ensure the provision of appropriate and adequate support for foster carers, kin carers and adoptive parents. It also has a role to play in early intervention strategies, contributing to the effective targeting of interventions.
- Poor assessments may expose children to risks of further maltreatment and placement breakdown. Instability in care often leads to a downward spiral with potentially far-reaching consequences including worsening emotional and behavioural difficulties, further instability and poor educational results.

- Avoidance of delay contributes to better outcomes for children, particularly in terms of placement stability. Delays in assessment and decision-making in relation to the removal from home and placement of children can lead to difficulties in achieving permanent placements.
- Shortcomings in, or absence of, assessment of maltreated children at all stages from initial assessment through to the making of key decisions, for example, about whether a child is reunited with their family, are related to repeat abuse.

***Key features of the organisational and professional climate needed to support good assessment practice include:***

- A knowledgeable, highly skilled and confident workforce, supported by appropriate education, training and continuing professional development. Practitioners and supervisors need a sound knowledge base which includes good understanding of child development, the impact of parental alcohol and drug misuse, mental health problems, domestic violence and learning disabilities on parenting capacity and children's health and development, the importance of child observation and the need to promote the skills of analysis;
- A clear framework for reflective 'clinical' supervision (individual and/or group) and other forms of case-based consultation, including support for practitioners working directly with children;
- Resources – in terms of time and staffing, as well as services available – to allow practitioners to complete assessments and plan appropriate interventions in a thorough but timely manner;
- Good intra-organisational and inter-professional working relationships;
- An organisational culture that supports reflection and learning (and the avoidance of a 'blame culture');
- Electronic information management and recording systems that 'work with' practice, are reliable and not unnecessarily time-consuming; and
- 'Organisational health checks' or audits of the quality of assessments undertaken.

**WHAT WAS THE PURPOSE OF THE REVIEW?**

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The purpose of this review was to increase understanding of:

- the thresholds operated by local authorities for responding to referrals - in particular, the impact that different local authority policies may have on decision making about whether to undertake an assessment and/or to provide services to a particular child and family;
- the quality of the data populating initial, core and other types of assessments carried out for children in need, including looked after children and children placed for adoption;
- the variation in the quality of assessments by local authorities and for different groups of children;
- the extent to which professionals engaged with children, young people and their families to produce effective assessments;

- the factors that assisted or acted as barriers to good quality assessments of children in need;
- the impact of the quality of assessments on decision-making, planning, interventions and ultimately on children's and young people's short and longer term outcomes.

## **HOW WAS THE REVIEW DONE?**

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Drawing primarily on social work focused literature, this review covers UK research findings published between 1999 and 2010. Not many studies during this period had assessment as their primary focus and consequently the task was to draw out findings on assessment from a wide range of research reports, journal papers and other documents. Relevant data were identified through detailed searches of a range of databases and through consultation with academic researchers in the field. Overall, material relating to over 100 studies was included in the review.

## **FURTHER FINDINGS**

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### ***Thresholds***

- Thresholds are used to set the terms for access to a range of services, including assessment. However, there are significant conceptual and practical challenges associated with the notion of thresholds and no absolute clarity in terms of either definition or application, within or between local authorities.
- Limited resources and pressure of work generally result in a tendency to raise thresholds for access to services as a way of rationing responses. High thresholds may mean that children and families with substantial problems and high levels of need do not receive timely help. This is a particular issue in cases of child neglect and emotional abuse.
- Early intervention approaches and using the Common Assessment Framework may contribute to lowering thresholds and broadening access to services at an earlier stage.

### ***Using the Assessment Framework***

- The Assessment Framework provides an overarching conceptual framework or scaffold rather than an instruction manual for social work assessments of children in need and their families. Specific aspects of children's needs require attention within the three general domains that form the 'assessment triangle' and practitioners need to be able to draw on a wide range of knowledge and skills to address the particular issues facing each child and family.
- Some social workers believe there is mis-match between the core assessment recording exemplars and the needs of disabled children. Parents of disabled children, however, were appreciative of the core assessment process.
- There was evidence of shortcomings in the assessments of minority ethnic families and of unaccompanied asylum seeking children and a number of practice issues were identified. They include

the need to distinguish between culture and ethnicity and ensuring that interviews are conducted in the child and family members' first language. Social workers could also misunderstand cultural practices, which could leave children at risk of being harmed.

- Assessment practice with regard to asylum seeking children and young people was variable, although the majority of children and young people received an initial assessment.

### ***Child development***

- Assessment should be informed by a clear understanding of child development, including knowledge of attachment theory and how different attachment styles manifest themselves; of children's identity and of self-esteem. In addition, practitioners need a good understanding of the factors that increase the likelihood of impairment to children's developmental outcomes (including the identification of specific behavioural problems that contribute to poor placement outcomes) and those that promote resilience.

### ***Assessing parenting capacity***

- Assessment of parental capacity must be done on a 'child by child' basis as a parent or parents may be able to care for one child but not another within the family. Where parenting difficulties or likelihood of impairment to the child's health and development are identified, there should be formal assessment of the parents' **capacity to change**. Capacity to change must be understood and assessed within a timeframe that is compatible with the developmental needs of the child.
- Assessing parents' capacity to change presents challenges for social workers, and a multi-faceted approach including interviews, observation, standardised measures, use of previous reports about the child and family members, and gaining information from multiple informants appears to be needed.
- On occasion, social workers over-estimate the ability of some parents to understand, and respond to, professional concerns. In such cases, psychological assessment can be valuable to assess parental capacity for change.

### ***Family and environmental factors***

- There were variations in the extent to which assessments addressed the effects of family and environmental factors on children and on parenting capacity.
- Research highlights the impact of parental drug and/or alcohol use, domestic violence, parental mental health difficulties and learning disabilities on parents' capacity to meet their children's needs and these areas therefore need careful assessment.
- Good assessment requires the dynamic use of the three domains of the Assessment Framework 'triangle' to explore the interconnections and interactions between different pieces of information. The transactional-ecological approach proposed by Brandon *et al* (2008, 2009) appears to offer a helpful way of thinking about the interconnecting risk and protective factors in children and families' lives.

### ***Analysis and assessment***

- Good assessment involves more than just information-gathering; it needs the professional to be able to **analyse** and make sense of the material. So the nature and quality of social work thinking is a key part of the assessment process and should be informed by clear theoretical frameworks.

- Assessment tools, measures and checklists can be used to support information gathering and analysis by reminding practitioners of key areas to explore and also providing data on specific issues, such as misuse of alcohol or drugs. Professionals need to have a good understanding of when and how to use these tools and the limitations of the various measures - their use cannot be a substitute for sound professional knowledge and judgment.

### ***Supervision and support***

- Critical and analytical thinking is challenging and takes time and energy. A number of factors can undermine the capacity to think purposefully and effectively and these operate at practical, cognitive/psychological, emotional and systemic/organisational levels. However, analytical and critical thinking can be supported and encouraged through case-based reflective supervision which takes place in an organisational culture that supports reflecting and learning. Other forms of peer/group supervision and consultancy may also contribute to the promotion of effective thinking in practice.

### ***The child's voice***

- Keeping the child 'in view' is fundamental to good assessment, but can be difficult to achieve and research suggests that children are not always seen or consulted during assessments.
- Barriers to involving children include: time constraints; insufficient skills; lack of confidence in conducting direct work or undertaking child observations; and insufficient support. Some parents make it difficult for workers to see the child and/or overwhelm workers with their own difficulties, and workers may over-identify with the parents or become desensitised to maltreatment. These barriers are determined by a range of factors, not simply the practice of individual workers. It would be worthwhile for organisations to review these factors regularly.

### ***Working with parents***

- There is considerable evidence that the nature of parental relationships with professionals affects decisions arising from assessments. More coercive intervention is likely where parental involvement is considered inadequate. Conversely, interventions tend to de-escalate where parents appear cooperative. ***However, there is evidence that behavioural compliance, in itself, is not an adequate predictor of parents' abilities to change sufficiently to meet the needs of the child.***
- In some instances, lack of parental engagement led to less intervention, because parental obstructiveness effectively restricted access to evidence which might have led to care proceedings.
- Key skills and tasks required to promote good engagement with parents include role clarification, appropriate levels of challenge, careful listening and clarity about the purpose of the assessment. However, parents may, in some cases, deliberately frustrate professionals' attempts to engage.
- Parents with learning disabilities may have difficulty in recalling explanations about assessments and understanding procedures, in spite of evidence of social workers spending time explaining things to them. The difficulties that some parents with learning disabilities have in managing time can lead to a professional perception of lack of cooperation.
- There is often a seemingly contradictory expectation on social workers to establish good engagement with parents, at the same time as maintaining a central focus on the child.

### ***Effective assessment within a multi-agency or inter-professional group***

- Different professional groups - including health, education, psychological and other specialist services - have a substantial contribution to make to the assessment of children in need. Multi-disciplinary assessments may be particularly valuable in more complex cases, sibling assessments, and where there are concerns about repeat attempts at reunification. There were examples of good multi-agency practice where the Common Assessment Framework was used particularly effectively.
- A number of barriers to inter-professional working have been identified, including: conflict and competition between individuals and organisations; lack of role clarity especially in relation to accountability; and lack of a 'common language'. Differences in thresholds for concern, perceptions of risk of harm, and approaches to intervention continue to exist between services. Although statutory guidance has been published, information sharing between agencies and collaboration between adults' and children's services continues to be problematic.
- In spite of the value of multi-professional assessments, increased reliance on expert witnesses in family courts has been a factor in increasing delay in the progress of court cases and reducing the perceived value of social work assessments. The contribution of social workers' knowledge of social relationships, family history and parents' behaviour over time can then be lost – a potentially serious omission, as past parental behaviour is a key predictor of likely future conduct.
- Factors that support the development of effective inter-agency working include: commitment to joint working across different levels of the organisation; jointly agreed aims; clarity about roles and responsibilities, mutual trust, and good systems of communication. Restructuring and reorganisations were not associated with better outcomes. Most importantly the quality of the relationships within and between professional groups was important in promoting effective multi-agency or inter-professional practice. Good working relationships need time and trust, as well as a supportive organisational framework, in order to develop.

### ***Systems, structures and organisational issues***

- The content and quality of assessment records varied substantially both within and between local authorities and it appears that new structures and frameworks have not resolved longstanding concerns in relation to missing assessments, gaps and inaccuracies in information recorded, and a tendency to lose the individuality of the child. These concerns applied across a range of assessment formats.
- Studies found that a significant number of cases lacked a full social history and/or chronology, making it harder to develop a properly contextualised understanding of the child and family's needs and circumstances and to make effective plans. This has been identified in previous research and is a long-standing problem.
- Conceptual frameworks such as the Assessment Framework and the Common Assessment Framework (CAF), and information management systems such as the Integrated Children's System (ICS) have given more structure to the way in which information is recorded during assessments. But much of the software for electronic recording has been unstable and not fully fit for practitioners' needs.
- While some improvements in recording were noted following the introduction of the Assessment Framework and the ICS, some practitioners found the standardised assessment recording formats to be cumbersome and overly time-consuming and took them away from direct work with children and families. Studies also suggested that pre-set report structures make it difficult to include 'non standard'

content (such as visual material) which may be needed to ensure that the views of, for example disabled children, are properly represented. They can also make it harder to get a sense of the 'whole child' and militate against the processes of synthesis and analysis that are essential for effective assessment. Recent moves to allow more flexibility to local authorities in the use of the recording exemplars may go some way towards addressing these concerns.

- Time constraints and workload pressures, alongside broader organisational factors, such as the extent and speed of change and the increase in the use of targets and performance indicators, have a significant impact on assessment practice. Some studies have suggested that the pressure to meet the very tight time frames set for Initial and Core Assessments has led to the development of short cuts and 'work arounds' that may provide the latent conditions for error and increase the risk that vulnerable children's needs are not properly identified and addressed.

### ***Assessment and outcomes for children***

- Good assessment is important, and contributes to better outcomes for children. Good assessment is related to improved chances of reunification success, and can contribute to placement stability for children - for example, by preventing delay and helping to ensure the provision of appropriate and adequate support for foster carers, kin carers and adoptive parents. It also has a role to play in early intervention strategies, contributing to the effective targeting of interventions.
- Poor assessments may expose children to risks of further maltreatment and placement breakdown. Instability in care often leads to a downward spiral with potentially far-reaching consequences including worsening emotional and behavioural difficulties, further instability and poor educational results.
- Avoidance of delay contributes to better outcomes for children, particularly in terms of placement stability. Delays in assessment and decision-making in relation to the removal from home and placement of children can lead to difficulties in achieving permanent placements.
- Shortcomings in, or absence of, assessment of maltreated children – at initial or core assessment stage or later in the process, for example where a return home is being considered for a looked after child - are related to repeat abuse.
- Little is currently known about exactly how best to match children with specific adoptive families. However, making serious compromises in children's requirements or adopters' preferences has been shown to be related to poorer outcomes.

## **IMPROVING QUALITY IN ASSESSMENT: KEY MESSAGES FOR POLICY, PRACTICE AND PROFESSIONAL EDUCATION**

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Assessment is a complex activity. The quality of assessment is important and leads to significant decisions that affect outcomes for children in both the short and the long term.

Barriers to quality in assessment can operate at a number of different levels:

- Personal - including whether or not the practitioner is competent, and has the appropriate knowledge and confidence to carry out the required tasks, and has the scope to do so within their individual caseload;
- Inter-personal/ relational - including the range of activities involved in communicating with children and young people, parents, and other professionals;
- Systems issues - including increasing dependence on complex and sometimes unreliable or unwieldy IT systems; and the sense of lack of time for face-to-face work as a result of time spent inputting data; and
- Organisational constraints - including the organisational culture, for example whether there is a commitment to reflection and learning, management of workloads and so on - and level of resource. The outcomes of assessments often depend on there being adequate resources to implement plans.

The organisational and professional climate needed to support good assessment practice should include:

- A knowledgeable, highly skilled and confident workforce, supported by appropriate education, training and continuing professional development;
- A clear framework for reflective 'clinical' supervision (individual and/or group) and other forms of case-based consultation, including support for practitioners working directly with children;
- Resources – in terms of time and staffing, as well as services available – to allow practitioners to complete assessments and plan appropriate interventions in a thorough but timely manner;
- Good intra-organisational and inter-professional working relationships;
- An organisational culture that supports reflection and learning (and the avoidance of a 'blame culture');
- Electronic information management and recording systems that 'work with' practice, are reliable and not unnecessarily time-consuming; and
- 'Organisational health checks' or audits of the quality of assessments undertaken.

In relation to professional education, the review reinforces previous messages regarding the need for a sound knowledge base, particularly concerning child development, the impact of parental alcohol and drug misuse, mental health problems, domestic violence and learning disabilities on parenting capacity and children's welfare, the importance of child observation and the need to promote the skills of analysis.

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### **Additional Information**

This research report was commissioned before the new UK Government took office on 11 May 2010. As a result the content may not reflect current Government policy and may make reference to the Department for Children, Schools and Families (DCSF) which has now been replaced by the Department for Education (DFE).

The views expressed in this report are the authors' and do not necessarily reflect those of the Department for Education.