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Title Page

Title: Simulating supervision: How do managers respond to a crisis?

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Simulating supervision: How do managers respond to a crisis?

Abstract

Supervision is fundamental to child and family social work practice, in England as elsewhere, yet there is little research regarding what managers and social workers do when they meet to discuss the families they are working with. Recent years have seen a growing interest in the use of simulated clients and Objective Structured Clinical Exams to help develop and evaluate the abilities of social workers and students. This paper describes a study of 30 simulated supervision sessions between English social work managers and an actor playing the role of a student social worker in need of support. The simulation concerns a referral regarding an incident of domestic abuse. During the simulations, managers typically asked closed questions to obtain more information before providing solutions for the supervisee in the form of advice and direction. There was little evidence of emotional support for the social worker, nor empathy with the family. Managers typically acted as expert problem-solvers. The implications of this are discussed in relation to current theoretical models of supervision for child and family social work and in relation to how Children's Services responds to domestic abuse.

Keywords: Supervision, child protection, communications skills, domestic abuse.

Introduction

Within the social work profession there is widespread agreement about the importance and value of supervision (Ruch, 2012, Bashirinia, 2013, Goulder, 2013) and yet it is a “*malleable concept in search of a precise definition*” (Grauel, 2002, p. 4). This makes it a thorny concept to research, not least because comparing between different studies is only really possible if one can see how supervision has been defined. For the purposes of this study, one specific aspect of supervision is being considered, namely the role of supervision as a forum for accountability and case discussion. It is important to acknowledge there are many other functions of supervision too. We have only a limited understanding of what happens in supervision, with most studies relying on self-reporting (Jack & Donnellan, 2010, O’Donoghue & Tsui, 2012, Berry-Lound & Rowe, 2013). Beddoe et al have called for “*a shift [towards] empirical examination*” (2015, p. 5), for the acceleration of a slow trend that has seen in recent years only a small number of empirical studies published, including Author’s Own et al (2017) and Bourn and Hafford-Letchfield (2011), both of which found that managerial approaches tend to dominate. Thus, the current study is important because it seeks to help address this gap in the evidence base.

Concerns about managerialism within social work supervision are not new, at least in the UK. Baginsky et al (2010) found that many UK managers consider supervision a mechanism for performance management, while the Office for Standards in Education

(Ofsted; 2015), responsible for inspecting children's services in England, focuses more on the frequency and recording of supervision than the actual content and quality. In other European settings, supervision may be performed differently. In Germany, social work supervision has developed as a separate discipline from practice, requiring specific skills and with its own training and development requirements (Belardi, 2002).

Amongst academics and practitioners, there is widespread agreement that good supervision needs to be reflective (Beddoe, 2010, Ruskus and Kiaunyte, 2013). Despite this, the practice of supervision varies significantly. For example, Bradley and Hojer (2009) found that in England, supervision is often a one-to-one activity between a practitioner and line manager, whereas in Sweden, it is more commonly a group activity and more often provided by someone external to the supervisee's agency. The extent of the research literature also varies between countries, although a key similarity is that outside of the USA it is based primarily on self-report rather than empirical studies (Bradley and Hojer, 2009, p. 76).

While observations of actual supervision would provide the most authentic data, in the evaluation of students at least, questions of specificity, reliability and validity have been raised to highlight why this may be problematic (Bogo, 2015). There are also practical barriers to the observation of actual supervision, although these are not necessarily insurmountable (Ferguson, 2016, Authors Own et al, 2017). But even where real observations are possible, a simulation allows for a more direct comparison between different responses. In actual supervision, managers respond differently because the details of the situation are different each time. With a simulation, you can to an extent control these details, thus making more meaningful the differences between managers' responses. Simulations are also widely used in social work education (Bogo and Rawlings, 2014) and

increasingly to evaluate the skills of qualified workers (Forrester et al, 2008 and Maxwell et al, 2016). Informal role plays of supervision are used in some qualifying and post-qualifying courses for social workers although the details provided about them are often relatively vague (e.g. Kingston University, undated). Holloway and Wampold (1984) used a simulated supervision scenario to help measure supervisees' feelings towards their supervisors, although in this study, both roles were played by students rather than actual supervisors. Simulated supervision is also used to train social workers and others in certain approaches (Lawlor, 2013, Milne et al, 2011, Kaiser and Kuechler, 2008). What is novel about this study, therefore, is not the use of a simulation per se but the use of a simulation to study of the behaviour of practicing supervisors.

Details of the simulation

The simulation involves a student social worker asking for help from a manager in relation to a recent incident. The student, whose normal supervisor is away, has received a telephone call from Elizabeth, mother of 5-month old Rees, with whom she has been working for 3 months. Elizabeth reported that her ex-partner, Daniel, came to her home last night and under the influence of alcohol attempted to take Rees out with him. Elizabeth stopped him and he assaulted her. A neighbour contacted the police who arrested Daniel but considered it safe for Rees to remain at home. The student has arranged to visit Elizabeth but is unsure what to say and what other actions she might need to consider. The student is anxious and concerned that Elizabeth may have concealed the true nature of her relationship with Daniel. Before the start of the simulation, each manager is only informed that the student has asked to speak to them urgently. The details outlined above are provided by the student verbally as part of the simulation itself. Each simulation was limited

to a maximum of 20 minutes (Table 1).

Research approach

Study design

The study design is based upon the methodological stance of theory-oriented evaluation (Weiss, 1998), which begins with in-depth descriptions of practice before developing theories of how different elements are linked and produce outcomes (White, 2009). This is a descriptive study aimed at developing an account of what happens in supervision, intending that this will inform further studies of how supervision influences social work practice. It builds upon two previous studies by the same author (and colleagues), based on 70 hours of audio recordings and nearly 250 written records of actual (not simulated) supervision (Authors Own et al, 2017 and Authors Own, 2017). The aim is not to evaluate the performance of the managers but to describe and compare the approaches taken by different managers in response to the same scenario.

Methods

Drawing on the work of Bogo and Rawlings (2014), who developed an Objective Structured Clinical Examination for qualifying social workers, we devised a simulated session of supervision for first-line managers. We trained an actor to play the part of a student social worker and invited each manager in turn to meet with the actor and respond to the scenario in whatever way they thought most helpful. Each simulation was observed by the lead author and audio recorded. Each recording was then transcribed by the lead author for further analysis.

Sample

The study was undertaken in six English local authorities, three in London, two in the North West and one in the North East. 21 of the respondents were drawn from one of the London authorities.

Managers were asked to take part in one of two ways. 30 participants of a training scheme for first line managers (responsible for directly supervising social workers) were asked to take part in the simulation and six of them agreed. The rest of the sample were approached via existing contacts between the lead author and senior managers within the local authorities. The lead author contacted a senior manager within each authority and asked if they would circulate information about the research to first line managers. Managers who responded positively to this information were then invited to take part in the study.

Process

From the point of view of each manager, the process went as follows. Having volunteered to take part, a suitable day and time for the simulation was identified and organized at their regular place of work. A week before the simulation, details of the scenario were emailed to the manager, with another paper copy being provided on the day. During the simulation, the lead author observed while the manager and actor, in character as a student social worker, discussed the scenario.

Analysis

For the analysis of the transcripts, we used a framework based on the Motivational Interviewing Treatment Integrity (MITI) code (Moyers et al, 2010). The MITI is a coding

manual for use with practitioners trained in Motivational Interviewing (MI). It measures how closely the practitioner is adhering to the practice of MI in audio recorded excerpts of their discussions with clients. We used the MITI coding framework not because it applies directly to supervision but because it offers a more general framework for analyzing communication. Although the focus of the MITI is on MI skills, it also allows for the quantification of more basic communication skills by counting the number of times the practitioner (or in this case the manager) uses closed questions, open questions or reflections (paraphrasing or restating the words and feelings of the supervisee); how often they gave advice, direction or information and how often they used supportive statements (e.g. affirmations). Using the MITI framework, we counted the number of times each manager used each of these different communication 'behaviours' in their session.

Qualitatively, our analysis of the transcripts sought to explore what or who the manager focused on during the session. Who or what did they ask questions about or make comments about? Were they about the incident (e.g. what time last night did this happen?), about the details of the wider case (e.g. is this a child in need or a child protection case), about the social worker (e.g. when did you last have any contact with the father?), about the emotional impact of the work (e.g. what is it that's making you feel so anxious?) or about something else.

Managers were provided with a copy of their own transcript, a count of their communication behaviour (e.g. the number of closed questions, open questions, reflections and so on that they used) and a description of what happened during their simulation (the types of questions they asked, the issues they focused on and the plan they formulated). The aim of this was to provide the managers with feedback on how they approached the scenario and to give them an opportunity to discuss, challenge and validate our analysis. As

part of this process, 19 of the managers attended a follow-up workshop during which as a group we discussed the findings and what they might mean.

Ethical approval

The study was approved in 2015 by the authors' faculty ethics committee as part of a wider project involving observations of social work supervision and practice. The managers were sent an information sheet in advance, outlining the purpose and process of the study. Managers were informed their participation was voluntary and they could withdraw at any time, including during the simulation. The managers were also given details of an independent person at the University who they could contact if they had any concerns about the research (this did not occur). It was further agreed that each individual session would remain confidential unless there were serious concerns about malpractice (which did not occur).

Strengths and limitations

The primary limitation of this study is that it is based on a single simulated observation with an inexperienced worker who the manager does not normally supervise. The impact of these features is difficult to quantify but the nature of the scenario lends itself towards an action-oriented rather than reflective response. In addition, supervision is complex, not limited to what happens in case discussions about families, with most supervision not taking place in response to a crisis. And yet, first line managers are expected to respond to crises in their teams and to have discussions with workers they do not know (e.g. students and new starters). A further limitation, common to all small-scale qualitative studies, is that these managers may not be representative of any wider population within

their own local authorities, let alone the whole profession. These managers may have responded to the scenario atypically. As such, we have in the discussion below referred to 'some' or 'most' of the managers', rather than quantifying by proportion and thus risking giving the misleading impression that these figures represent some larger group.

The primary strength of the study is that it is based on direct observation rather than self-report. This is the first study we know of in which a simulation has been used to study what practicing managers do in one particular form of social work supervision and thus breaks new ground in developing a method that could be used as a training aid, an assessment tool or to help test and develop different supervisory approaches and models.

Findings

What did the managers say and what plans did they make?

Managers primarily asked closed questions and gave advice or direction (Table 2). Most questions were aimed at obtaining more information about the wider case context although managers also asked a relatively high number of questions about the incident (Table 3). Most of the managers formulated a similar plan, asking the student to visit the family home with a colleague and contact the police for more information about what happened (Table 4).

How did managers structure the discussion?

The majority of sessions followed a similar structure. Managers started by seeking more information about the wider case and the incident, usually via a series of closed questions, before providing advice and direction. The following extract shows the flavour if not the extent of this approach:

1. *Manager: Rees didn't go with Daniel?*
2. *Student: No, he's with Elizabeth.*
3. *M: But she's reported that he struck her?*
4. *S: Yes.*
5. *M: How often have you seen her over the past 3 months?*
6. *S: Once every two weeks, in the past four weeks I've seen her twice.*
7. *M: And in the previous two months?*
8. *S: Around that as well.*
9. *M: At the family home each time?*
10. *S: Yeah.*
11. *M: What's her interaction with Rees like?*
12. *S: She's brilliant with him. He's doing really well. Healthy weight. Up-to-date with development. He's doing well, no concerns.*
13. *M: And you've spoken to the health visitor?*
14. *S: Not really, there's been no concerns raised.*
15. *M: So you've spoken to her?*
16. *S: Well, my practice educator was in touch but she never flagged anything up.*
17. *M: Ok. Have you been meeting with other professionals?*
18. *S: There is a child in need plan but I haven't been to any meetings, no.*
19. *M: And you're the allocated worker?*
20. *S: Yeah, as a student.*
21. *M: Is it a child in need plan or child protection?*
22. *S: Child in need.*

23. *M: Ok. Before you leave today, phone the police, ask what information they've got, we can supply the duty social worker to go out with you... I'd like you to brief them fully.*

Here, the manager asks a series of closed questions, gathering more information. This helps the manager clarify the concerns about Rees (lines 11 to 16) and whether the student has adhered to procedures (lines 5 to 10 and 17 to 22). The manager then offers provide advice and direction about what to do next (line 23). As in most sessions, this advice focuses on 'what' the student should do with limited discussion of 'how' (e.g. to conduct the home visit) or 'why' (e.g. what are these actions are meant to achieve).

This structure was common to whole sessions and for discrete conversational turns. For example, a manager might ask questions about Daniel before directing the student to find out whether he has a criminal record. The manager would then start again with questions about Rees' development before directing the student to contact the Health Visitor. The following extract again demonstrates this approach:

1. *M: Dad's not living in the family home?*
2. *S: No he's not but he went round last night.*
3. *M: So there was DV [domestic violence], dad left the home and he was out the picture. What about the children?*
4. *S: It's just Rees, he's 5 months old.*
5. *M: 5 months, ok. So now you've found out dad has been coming back to the home?*

6. *S: Yeah, he went round there and tried to take Rees and she stopped him, she's been hit in the face, the police were called and dad got taken away, I haven't heard anything from the police.*
7. *M: So a child in need case, ok, what other professionals have you got on board?*
8. *S: Just the DV worker. And health visitor.*
9. *M: Health visitor as well. What about wider family?*
10. *S: She doesn't really have anyone, her family's in Ireland.*
11. *M: So you're worried about going to see mum and that she's not been honest with you about Daniel, is that what you're worried about?*
12. *S: Yeah because I thought everything was alright but last night could have been a disaster.*
13. *M: It wasn't a disaster though. Did she call the police?*
14. *S: The neighbours called them.*
15. *M: Ok, so I think you need to take another worker with you if you're worried, so after this we can go and get the duty worker.*

In this example, in addition to asking questions and giving advice, the manager uses two summary statements to ensure she understands what the student has said (lines 3 and 11). The manager also offers the student some reassurance (line 13). Alongside this common approach (asking questions, gathering information, giving advice), managers did lots of other things, as in the extracts below (all taken from different sessions) – they asked about the student's wellbeing (lines 1 to 4), they used affirmations (line 5), they empathized with the mother (line 6) and provided information (line 7):

1. *M: How are you?*
 2. *S: A bit shaken.*
 3. *M: Right. Are you ok or do you need a minute?*
 4. *S: No, I'm ok.*
-

5. *M: The fact that she's asked you to go over when there's been a difficult event, that suggests there's a [positive] relationship.*

6. *M: I think there's often good reasons why people don't feel they can be honest; she may be frightened...service users are often very frightened about what will happen and may have various reasons for keeping things quiet...If you're able to support her and do things to help her get the outcomes she wants, that may make her feel she has a more trusting relationship with you and this might be an episode that helps you build that relationship.*

7. *M: What happens with a lot of these women in DV relationships is they go to and fro between that partner for a long time before they make a permanent separation.*

Although several managers asked if the student was 'ok', they tended not to make explicit any links they saw between the emotional impact and the student's thinking and decision-making. Managers also tended not to explore alternative hypotheses. As part of the simulation, the student says she is worried that Elizabeth has been dishonest. Managers mostly responded in one of two ways. They either advised the student to be more challenging with Elizabeth, so that she might start telling the truth, or they provided

information to explain why female victims of domestic violence (or parents in general) might be 'dishonest'. Both approaches seem to implicitly confirm the student's hypothesis about Elizabeth. Only a small number of managers explored alternative hypotheses - for example, "*we don't know she's been dishonest do we? You're looking at this incident thinking it's part of a pattern but it's possible that dad just turned up isn't it?*".

An alternative approach

A small number of managers ($n=4$) took a different approach. Perhaps significantly, all four were currently undertaking specific training on the role of first line manager and how to provide supervision more effectively. These managers started by asking the student what she needed help with and asked more open questions about the student and her emotions. This group also spoke about 'how' to complete actions, rather than saying only what actions to complete. For example:

- 1. M: What's the dilemma for you today? What do you want to think about?*
- 2. S: Well, I want to go round and check Rees is ok. I'm not sure if Daniel is going to come round, I'm not sure whether she's been telling me the truth. It seemed like we were getting on well.*
- 3. M: I know this is your placement so I'm wondering what your knowledge is about DV, if you've had any experience?*
- 4. S: Most the work I've done is with adults, helping older people, I'm not quite sure what to do this afternoon.*
- 5. M: I know you're anxious; do you feel confident going out or would you like somebody to go with you?*

6. S: *I think that would help. What if she's saying everything's fine, I won't see him again, and I get the sense she's not being honest?*
7. M: *Well, you could say something like, we were building up this really good relationship and I know this has been a significant incident. For us to work honestly, I need to know what's going on? It's difficult in her position because women who go through this can feel very scared, we have to balance the risk that he poses to her and the child.*
8. S: *What if he turns up?*
9. M: *I can hear some anxiety there and I think we ask you to go out with somebody because I don't want you having to manage that situation alone. What kind of things do you feel comfortable talking about and what do you need some support with?*
10. S: *I was feeling frustrated because I thought one thing was true and now it seems completely different.*
11. M: *I can appreciate where you are coming from, it's tricky, we're going into people's homes, but if we reflect on how it is for the people we work with, I'd be scared to tell people what's wrong.*
12. S: *I guess it felt like we're making progress, then suddenly something major happens.*
13. M: *You seem on top of it, you have a genuine interest in this case and I think Elizabeth will feel that but we've got to say, Elizabeth, this was a serious incident, we need to do that sensitively so Elizabeth knows we're supportive, so she doesn't hear they're going to come and take my baby because that might be an immediate worry for her and we don't know what he's been saying to her, how he's knocked her self-confidence.*

Here, although the manager gives advice (lines 7, 9 and 13), it includes *how* to talk with Elizabeth not just *what* to do. The manager is more interested than usual in what the student needs help with (lines 1 and 9), her previous experience (line 3) and how she is feeling (lines 5, 9 and 11). The manager also asks what the student thinks they should do rather than only telling her. A similar approach can be seen in the following extract from a different manager:

1. *M: It sounds like you're thinking about the questions you would like to check out with Elizabeth, you said you were going to go this afternoon but you're also questioning if you should go alone?*
2. *S: Yeah what if I think Daniel is about to come back, what do I do?*
3. *M: I guess it might be useful to think about the options, he might be there, he might not, he might want to talk, he might be angry. Are there some of these things you feel more comfortable dealing with than others?*
4. *S: What if he starts being aggressive?*
5. *M: What are some of the things you can do to keep yourself safe? How can I help you think about that?*
6. *S: I couldn't just leave because then I'm leaving them as well.*
7. *M: Ok*
8. *S: But we can't be there all the time and I don't know what she wants yet, she's talking to me like he's out of the picture and that's obviously not true.*
9. *M: Do you think it's possible he's been out of the picture, not involved, that this is a one-off situation so maybe she has been open? Would you think differently if that were it?*

Here, the manager asks more open questions (lines 1, 3, 5 and 9) and offers a different hypothesis (line 9).

Discussion

The nature of the simulation – a relatively acute problem – and the presentation of the student social worker – anxious and inexperienced – undoubtedly shaped the managers' responses. In a time-limited session with these characteristics, managers were perhaps unlikely to ask very reflective questions such as *"how are your family experiences intruding upon your sense of competence in relation to this incident?"* (Davys and Beddoe, 2010, p. 99). And yet, recent years have seen an increase in the number of newly qualified social workers joining child protection teams. While such workers bring with them a range of skills and abilities, they are inexperienced in the field of qualified social work. At the same time, national child protection procedures in England require local authorities to respond quickly, within 24 hours, to new information or referrals that indicate a child could be at risk of significant harm. These developments suggest that the combination of an inexperienced practitioner seeking support about a relatively urgent incident cannot be altogether uncommon. Perhaps as a result, this simulation most commonly showed managers in their role as expert-problem solvers. Presented with an acute problem (in the sense of severe or intense) they provide an acute solution (in the sense of insightful or shrewd). All the managers very quickly understood the basics of the situation and provided, almost without exception, a solution that aimed to help the student (take a colleague with you on the home visit) and ensure the child was safe (find out from the police where Daniel is and what exactly happened last night).

Managers as expert problem-solvers

As expert problem-solvers, the managers tended to focus on finding out 'what and when' had happened and rarely asked 'how and why'. For example, none of the managers asked *why* Daniel had gone to the family home, something that may have been relevant for assessing how likely it was he would go back again. Equally, when giving advice, managers tended to focus on 'what and when' needed to happen and did not often make explicit 'how and why' (Forrester, 2016). For example, several managers asked the student to complete a written agreement with Elizabeth, including items such as "*Elizabeth not to open the door if Daniel comes to the home*". None of the managers said *why* a written agreement would be helpful or *how* the student might best discuss it with Elizabeth. It is interesting to consider what the student might have said to Elizabeth if asked why a written agreement was necessary ("*my manager said we needed to*") and how far this would be attributable to the supervision discussion and how far to the student's general lack of knowledge and experience. This approach of identifying 'the problem' and providing a solution in terms of measurable 'what and when' actions largely mirrors the behaviour of managers in actual supervision sessions reported elsewhere (Authors Own et al, in press).

There are many reasons why this might be the case and why only a small number of managers adopted a more reflective stance. On a micro-level, managers were faced with an anxious student whom they did not know telling them about a significant risk to a baby. It is understandable that most managers responded by using the benefit of their greater expertise and experience to provide a solution. This in turn raises questions about how managers are enabled or expected to support newly qualified staff or students. It is possible, indeed likely, that further discussions would have taken place after the immediate

incident, perhaps debriefing more reflectively with the student once it was clear the baby was safe. A problem-solving approach is also efficient in terms of time and in helping the manager contain the practical and emotional complexity of the situation, at least from the agency's perspective. As noted by Ruch, "*Front line managers [are] in the unenviable position of having to find a way of responding to the ostensibly rational demands of...their organization, whilst being directly exposed to...emotionally charged experiences*" (2012, p. 1317 – 1318).

On a macro-level, an overemphasis on administration and risk management needs to be placed within a UK system-level context of defensive practice (Whittaker and Havard, 2015), an overbearing focus on risk (Parton, 2014) and the reality that child protection social work has been through a cycle of crisis and reform over several decades (Warner, 2015). In other words, when faced with the potential of immediate risk to a child, with all the myriad emotional and rational responses that entails, how reasonable is it to ask managers to be reflective rather than action-focused, particularly given time and resource constraints?

Responding to domestic violence

The simulation also revealed a common approach taken by managers from different authorities in response to domestic violence. Even though a small number of managers did ask about Daniel – some even asked the student to contact him directly – the focus of most discussions was clearly Elizabeth and most of the actions related to her. The main question appeared to be "*Can Elizabeth be trusted to protect herself and Rees from Daniel's violence?*". Berns argues that professionals often frame "*domestic violence as the victim's problem*" (2009, p. 56). Most managers also offered solutions in the form of referrals to domestic violence services, enhanced home security features or women's refuges. Few

suggested asking Elizabeth what *she* might want to happen. This reflects the findings of Danis (2003), who found that social workers typically do not consider individualized safety plans, tending instead to offer generalized advice, albeit in a supportive manner. This approach characterizes the female victim as responsible for the control of male violence or infers that the mother may be at least partly to blame (Yamawaki et al, 2012). In a number of the simulations, the manager asked why Elizabeth had opened the door to Daniel or suggested she may have invited him to visit. Wilcox (2008) argues that the ways in which we talk about domestic violence suggest it is seen as special class of victimization, a ‘complication’ to the norm of public assault. Almost none of the managers asked whether Elizabeth was okay and it is interesting to consider how this might have been different if the assault had taken place in the street by a stranger, rather than by an ex-partner in her own home.

Conceptualising the student

The student was characterized by many of the managers as a technician, someone who could carry out a series of tasks (e.g. visiting the home, completing a written agreement, undertaking a risk assessment) but without the expertise or without it being necessary to make explicit *how* these tasks might be performed or *why* they were important. This represents either a great deal of confidence in a worker who presented as inexperienced and anxious or a lack of confidence in her ability to take a full part in decision-making. One of the benefits of using a simulation is that one can hypothetically (or in practice) ‘tweak’ the details and imagine (or observe) how things change. For example, what if the supervisee had been not a student, but an expert child protection practitioner with many years of experience? How might this have changed how the managers

responded? Using a series of vignettes, Ghanem et al (2016) explored how novice and expert practitioners approached decision-making. They found that novices tended to seek fixed explanations for things, looking for concrete actions to complete, while experts took a more flexible approach, seeking opportunities to share decision-making. Murphy and Wright (1984) also found that novices tend to see things in more categorical terms than experts. For many novices, things either 'are' or they 'are not'; often experts are more comfortable with over-lapping categories and with more fluidity. In social work specifically, more experienced practitioners may feel more confident in their ability to manage complexity and to identify the relevant factors more quickly (Fook, Ryan and Hawkins, 1997). Some of these features were evident in the way managers – experts in the field – responded. But whether consciously or unconsciously, the managers would also have perceived the student as a novice and adapted their approach accordingly, being more inclined to take the lead in identifying the significant factors and providing more concrete solutions.

What might a different approach 'look like'?

Although none of the managers appeared to use a formal model of supervision, simply asking them to do so and training them accordingly is perhaps unlikely to be sufficient for changing practice (if change were thought necessary). Simply expecting managers to provide more reflective supervision without considering the bureaucratic and risk-saturated context in which many of them operate is unhelpful and counter-productive. Nevertheless, understanding the *process* of what supervisors do in supervision case discussions does matter. A supervisor who simply asked open questions and waited for the supervisee to provide a solution would be unhelpful. Sometimes, expert problem-solving is precisely what is needed. But a rush to always provide solutions is problematic as well. It

risks closing off options and alternative hypotheses, often excludes a consideration of emotional responses, can lead to stereotypes and in the worst cases may be oppressive.

If so, what might a different process 'look like'? Rollnick et al (2008) outline a continuum of engagement between professionals and clients, with following at one end and directing at the other. Following is when the client leads the conversation, while the professional simply listens. Directing describes a professional-led conversation, often involving advice-giving for the client. Guiding, sitting midway between the two, involves more exploration, with the professional working alongside the client, offering support, encouragement and assistance, neither passively listening nor taking control. Of these three descriptions, it is clear that in most of the simulations, managers took control and directed the student. Following does not seem to offer a good model for supervision but perhaps managers could adopt a more guiding-oriented role, combining the necessary elements of management oversight and their ability to give expert advice as required while also drawing more explicitly on the practitioner's own expertise, emotions and knowledge. Thus, although there is broad agreement that one of the key purposes of supervision should be to enable more reflection, there is ample scope to study how different processes make a difference, either for workers, or for practice or for child and their families.

Conclusion

The current study highlights the potential that simulated supervision sessions have not only for training and development but for understanding how different managers respond to the same scenarios and the communication skills they employ. Nevertheless, as a pilot study, these data pose more questions than they answer. What is the relationship between the managers' behaviour in a simulated setting and in real practice? How far is the

quality of supervision dependent on specific skills and how far is it dependent on the quality of the supervisory relationship (Bennett and Saks, 2006)? How might different approaches in supervision shape what social workers do in practice?

Whether managers are providing 'good enough' supervision is difficult, if not impossible, to understand separately from the organizational context in which supervision takes place, just as it is difficult to understand the quality of practice provided by individual practitioners separately from their wider context. And yet, the service that children and families receive is largely mediated through their contact with a small number of workers, perhaps even through just one social worker. In a similar way, the behaviour and skill of the manager is likely to be influential for his or her supervisees. But it is unfair to ask managers to take on the complex and responsibility-laden task of supervision without providing them with the very best support. Formal training is the bare minimum that managers should expect to receive. It would also be helpful to provide more clarity for managers about what 'good supervision' looks like and how it might be provided in different ways. The MITI coding manual we used in this study helped us analyse the communication behaviour of managers and may provide a description of good practice for social workers in some areas. Nothing as sophisticated exists for supervision. Perhaps being clearer with managers about what good supervision, good reflection, good analysis, good child-focus 'looks like' in supervision would take us some way forward to where we need to be.

Equally, we may have become too rigid in our thinking about how supervision might be provided for within statutory social work. More creative methods exist and thrive elsewhere. The Buurtzorg model in the Netherlands, in which professionals operate largely without management oversight, is one such example (Royal College of Nursing, 2015). The systemic unit approach popularized by the 'Reclaiming Social Work' model is another

(Goodman and Trowler, 2011). These approaches – and others - offer the opportunity not only to conduct further research into ‘what works’ in supervision but equally as important to understand *how* different models of supervision influence practice and outcomes and what kinds of individual skills and organizational characteristics are required to provide them.

References

1. Authors Own et al (2017)
2. Authors Own (2017)
3. Baginsky, M., Moriarty, J., Manthorpe, J., Stevens., MacInnes, T. and Nagendran, T. (2010) *Social workers’ workload survey: findings from the 2009 survey and interviews*. London, Department for Education.
4. Bashirinia, S. (2013) Social work supervision: process or procedure? *The Guardian*.
5. Berns, N. (2009) *Framing the Victim: Domestic Violence, Media and Social Problems*. Transaction Publishers, New Jersey.
6. Bradley, G. and Hojer, S. (2009) Supervision reviewed: reflections on different social work models in England and Sweden. *European Journal of Social Work*, 12(1), pp. 71 – 85. Beddoe, L. (2010) Surveillance or Reflection: Professional Supervision in ‘the Risk Society’. *British Journal of Social Work*, 40 (4), pp. 1279 – 1296.
7. Beddoe, L., Karvinen-Niinikoski, S., Ruch, G. and Tsui, M. (2015) Towards an International Consensus for Social Work Supervision: Report on the First Survey of a Delphi Study. *British Journal of Social Work*, doi: 10.1093/bjsw/bcv110.

8. Belardi, N. (2002) Social work supervision in Germany. *European Journal of Social Work*, 5(3), pp. 313 – 318.
9. Bennett, S. and Saks, L. (2006) A conceptual application of attachment theory and research in the social work student-field instructor supervisory relationship. *Journal of Social Work Education*, 42(3), pp. 157 – 169.
10. Berry-Lound, D. and Rowe, V. (2013) *Evaluation of the Implementation of the Assessed and Supported Year in Employment (the ASYE) for Skills for Care*.
11. Bogo, M. (2015). Evaluating student learning. In Hunter, C., Moen, J. & Raskin, M. (Eds.), *Social work field directors: Foundations for excellence*. Lyceum, North Carolina. (pp. 154 - 178).
12. Bogo, M. and Rawlings, M. (2014) *Using Simulation in Assessment and Training: OSCE Adapted for Social Work*. CSWE Press, Virginia.
13. Bourn, D. and Hafford-Letchfield, T. (2011) The role of social work professional supervision in conditions of uncertainty. *The International Journal of Knowledge, Culture and Change Management*. 10 (9), pp. 41 – 56.
14. Danis, F. (2003) Social Work Response to Domestic Violence: Encouraging News from a New Look. *Affilia*, 18(2), pp. 177 – 191.
15. Davys, A. and Beddoe, L. (2010) *Best Practice in Professional Supervision*. Jessica Kingsley, London.
16. Ferguson, H. (2016) How Children Become Invisible in Child Protection Work: Findings from Research into Day-to-Day Social Work Practice. *British Journal of Social Work*, doi: 10.1093/bjsw/bcw065.
17. Fook, J., Ryan, M. and Hawkins, L. (1997) Towards a theory of social work expertise. *British Journal of Social Work*, 27(3), pp. 399 – 417.

18. Forrester, D. (2016). What, when, why and how: Zombie social work and the need for a new narrative. In National Children's Bureau (Eds.), *Rethinking Children's Services. Fit for the Future?* (pp. 8 - 13).
19. Forrester, D., Westlake, D., McCann, M., Thurnham, A., Shefer, G., Glynn, G. and Killian, M. (2013) Reclaiming Social Work? An Evaluation of Systemic Units as an Approach to Delivering Children's Services.
20. Forrester, D., Kershaw, S., Moss, H. and Hughes, L. (2008) Communication skills in child protection: how do social workers talk to parents? *Child and Family Social Work*, 13(1), pp. 41 – 51.
21. Ghanen, C., Kollar, I., Fischer, F., Lawson, T. and Pankofer, S. (2016) How do social work novices and experts solve professional problems? *European Journal of Social Work*, doi: 10.1080/13691457.2016.1255931
22. Goodman, S. and Trowler, I. (2011) *Social Work Reclaimed: Innovative Frameworks for Child and Family Social Work Practice*. Jessica Kingsley, London.
23. Goulder, S. (2013) How supervision can help care workers improve their practice. *Community Care*.
24. Holloway, E. and Wampold, B. (1984) *Dimensions of Satisfaction in the Supervision Interview*. At the Annual Convention of the American Psychological Association (92nd, Toronto, Ontario, Canada, August 24-28, 1984).
25. Jack, G. and Donnellan, H. (2010) Recognising the person within the developing professional: tracking the early careers of Newly Qualified Child Care Social Workers in three Local Authorities in England. *Social Work Education*, 29 (3), pp. 305 – 318.
26. Kaiser, T. and Kuechler, C. (2008) Training Supervisors of Practitioners: Analysis of Efficacy. *The Clinical Supervisor*, 27(1), pp. 76 – 96.

27. Kingston University (undated) *Working with Children and Young People BA(Hons): Social work facilities*. Available at: <http://www.kingston.ac.uk/undergraduate-course/working-with-children-young-people/social-work-facilities.html>. Accessed on 25th July 2016.
28. Lawlor, D. (2013) A Transformation Programme for Children's Social Care Managers Using an Interactional and Reflective Supervision Model to Develop Supervision Skills. *Journal of Social Work Practice*, 27(2), pp. 177 - 189.
29. Maxwell, N., Scourfield, J., Le Zhang, M., de Villiers, T., Hadfield, M., Kinnersley, P., Metcalf, L., Pithouse, A. and Tayyaba, S. (2016) *Independent evaluation of the Frontline pilot*.
30. Milne, D., Sheikh, A., Pattison, S. and Wilkinson, A (2011) Evidence-Based Training for Clinical Supervisors: A Systematic Review of 11 Controlled Studies. *The Clinical Supervisor*, 30(1), pp. 53 – 71.
31. Moyers, T., Martin, T., Manuel, J., Miller, W. and Ernst, D. (2010) *Revised Global Scales: Motivational Interviewing Treatment Integrity 3.1.1*.
32. Murphy, L. and Wright, J. (1984) Changes in conceptual structure with expertise: Differences between real-world experts and novices. *Journal of Experimental Psychology: Learning, Memory and Cognition*, 10(1), pp. 144 – 155.
33. O'Donoghue, K. and Tsui, M. (2012) Towards a professional supervision culture: Development of social work supervision in Aotearoa New Zealand. *International Social Work*, 55 (1), pp. 5 – 28.
34. Office for Standards in Education (2015) *Framework and evaluation schedule for inspections of services for children in need of help and protection, children looked after, care leavers. Reviews of Local Safeguarding Children Boards*.

35. Parton, N. (2014) Social Work, Child Protection and Politics: Some Critical and Constructive Reflections. *British Journal of Social Work*, 44(7), pp. 2042 – 2056.
36. Rollnick, S., Miller, W. and Butler, C. (2008) *Motivational Interviewing in health care: Helping patients change behaviour*. Guilford Press, New York.
37. Royal College of Nursing (2015) The Buurtzorg Nederland (home care provider) model. Observations for the UK.
38. Ruch, G. (2012) Where Have All the Feelings Gone? Developing Reflective and Relationship-Based Management in Child-Care Social Work. *British Journal of Social Work*, 42(X), pp. 1315 – 1332.
39. Ruškus: J. and Kiaunytė, A. (2013) Facing conflict: patterns of relationships amongst Lithuanian social workers and the role of supervision. *European Journal of Social Work*, 16(5), pp. 671 – 688.
40. Warner, J. (2015) *The Emotional Politics of Social Work and Child Protection*. Bristol, Policy Press.
41. Weiss, C. (1998) *Evaluation: methods for studying programs and policies*. New York, Prentice Hall.
42. White, H. (2009) *Theory-Based Impact Evaluation: Principles and Practice* International Initiative for Impact Evaluation, Working Paper 3.
43. Wilcox, P. (2008). Constructing the victim and perpetrator of domestic violence. In D'Artrey, M. (Eds), *Media Representation and Society*. Chester Academic Press, Chester. (pp. 76 - 98).
44. Yamawaki, N., Ochoa-Shipp, M., Pulsipher, H. and Swindler, S. (2012) Perceptions of domestic violence: the effects of domestic violence myths, victim's relationship with her abuser, and the decision to return to her abuser. *Journal of Interpersonal Violence*, 16(3), pp. 3195 – 3212.

45. Whittaker, C., Forrester, D., Killian, M., and Jones, R. (2016) Can we reliably measure social work communication skills? *International Journal of Child and Family Welfare*, 17(1/2), pp. 47 – 63.
46. Whittaker, A. and Havard, T. (2015) Defensive Practice as ‘Fear-Based’ Practice: Social Work’s Open Secret? *British Journal of Social Work*, doi: 10.1093/bjsw/bcv048.