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A study on senior managers' views of participation in one local authority ... a case of willful blindness?

Abstract

Children in care are one of the most vulnerable groups in our society and senior managers should be committed towards improving their well-being. Empowerment through participation can contribute to this. This study considered the extent to which young people in care were encouraged to participate in decision making, particularly in their review meetings. The paper explores the views of seven senior managers in one local authority in this regard. It formed part of a wider study in which social workers, independent reviewing officers and young people in care were also interviewed. Findings indicate a disconnect between senior managers' views and other participants. Senior managers were unaware of the challenges that the social workers and independent reviewing officers said they faced. Their understanding of meaningful participation appeared to be limited, their curiosity subdued and their willingness to challenge limited. Senior managers informed that care plans were not up to date or considered at the review and were unsure about what opportunities children had to participate and how management could support this. Senior managers reflected that little seemed to have changed in relation to children's participation in their reviews over the last twenty-five years.

Keywords: Looked After Children, User Participation, Children's Rights, Management

Introduction

Life chances for children in care in England and Wales are poor in comparison to their peers (Mannay et al. 2017); they consistently underperform in areas such as health, education and employment and are five times more likely to suffer from mental illness than children nationally (The Centre for Social Justice 2007). The Child in Care (CiC) review has the potential to involve children and young people in the decisions that affect them and start the process of redress for this vulnerable group. If professionals enable children and young people to effectively participate in their review and care plan it may be that this would have a positive impact on their self esteem and confidence. In turn this may help increase resilience (Gilligan

2004) to help mitigate some of the adversity these children and young people have experienced.

The participation of children is a requirement outlined in legislation and practice guidance, and is therefore not optional (DfES 2010). It is recognised that children have rights, including the right to participate in decisions made about them. For care experienced children and young people this right is more complex but research has indicated that children and young people in care wish to be involved in decisions about their lives (Cashmore 2002; Ofsted 2011₁). Current government guidance suggests that the review process is designed to encourage participation by young people in their review meetings. However, the recent, albeit limited research in this area, suggests that children and young people do not yet feel that they meaningfully participate in their reviews (Pert et al 2014, Author's own and Thomas forthcoming).

Despite the Munro review (2012) in many local authorities (LAs) the impact of managerialism has meant that the task of understanding what a child's life is like and then working alongside parents and children to deliver appropriate and effective support, is increasingly difficult (Author's own and Drewery 2016). This is largely attributable to the constraints that the bureaucratic system places on social workers (SWs) (Burgess et al. 2013). There remain concerns that SWs are under pressure from senior managers (SMs) to reach targets based largely on timescales and not on the quality of their work (Author's own and Drewery 2016). Accordingly, management can be overly concerned with 'doing things in the right way rather than doing the right thing' (Munro 2011, p.6).

As corporate parents, SMs are required offer the best possible life chances to the children and young people in care. In order to achieve this an understanding of the challenges in frontline practice and a commitment to genuine child-centered practice is necessary. Recent Ofsted inspections at Outstanding LAs have highlighted this. At Kensington and Chelsea Children's Services it was noted that, '*Practice leaders maintain a strong understanding of what is happening on the frontline*' (Ofsted 2016, p.36). The importance of supporting frontline staff is also key, particularly when considered alongside the detrimental impact poor social work retention rates can have on children and young people. In the current context of austerity it can be increasingly difficult for senior managers to carry out their leadership roles effectively, this is in large part because in many Local Authorities there have been significant cuts to the numbers of senior leaders in these organisations (Education Select Committee 2016). As such wilful blindness can become an issue. Wilful blindness has been defined as being when leaders 'chose, sometimes consciously but mostly not, to remain unseeing in situations where

they could know, and should know, but don't know because it makes them feel better not to know' (Heffernon 2012). The impact that a blame culture can have on social work services is also well-documented (Leigh 2017; Shoesmith 2016). Fostering a culture of high support and high challenge can help (Dennis 2018).

The Broader Research

This paper considers the views of seven SMs who were interviewed in relation to their views on children's participation in CiC reviews. The data collected formed part of a wider study into children's participation in reviews whereby ten young people, eleven SWs and eight IROs were also interviewed. This is the first research study that has been conducted specifically in relation to children's participation in reviews, drawing on interviews with professionals, including SMs, in England.

The focus of this paper is on SMs' views, however, reference will be made at times to the broader research and comparisons made. The SWs, IROs and young people in care reported similar challenges in relation to children and young people participating meaningfully in review meetings. These were primarily high caseloads; high turnover of SWs; and children and young people's negative experiences in reviews. The relationship between the child and their SW and IRO was viewed as crucial. Children chairing their own reviews were regarded as the best way of encouraging meaningful participation. It was noted that SWs and, to a lesser extent, IROs, did not appear to have a clear understanding of what participation means and very few had attended participation training. If SMs' views are found to be divergent from those of the other participants this will potentially undermine any prospect of shortcomings in this LA being ameliorated.

Methodology

This paper sought to address the following key questions:

- What knowledge do senior managers have in relation to children's participation and children in care reviews?
- What do senior managers perceive to be the barriers to child focused practice in this Local Authority?
- To what extent do senior managers have oversight over the review process in this Local Authority?

To address the research questions a qualitative research design using semi-structured interviews was chosen. Semi-structured interviews are considered the most effective research method for in-depth exploration of social realities within small scale studies (Drever 1995). Unlike unstructured interviews they provide a questioning formation to adhere to whilst ensuring the necessary topics are covered. This method was chosen to allow the creation of clearer themes within the data, permitting more effective and efficient analysis (Babbie 2004). Through the collection of qualitative data we sought to not only look at the perceptions that senior managers have with regard to children’s participation, but *why* they hold such perceptions and *how* these influence their practice.

When designing and structuring the interview questions, we considered Arthur and Nazroo’s (2003) four stages of effective interviewing. We began the interviews by using a series of closed and open questions to obtain clear information about each participant’s level of expertise. This allowed rapport to build within the interviewing context before progressing onto the main part of the interview in which open-ended, non directive but determined questions were used.

Seven senior managers all working within Children’s Services at a single agency were interviewed. Their position within the authority ranged from Service Manager up to Director. Interviews were held on one occasion with each participant and ranged from forty to sixty minutes in length. The number of years each manager was qualified is set out in Table 1.

Table 1: Sample

Pseudonym	Number of Years in Practice
SM 1	25
SM 2	32
SM 3	20
SM 4	18
SM 5	33
SM 6	35
SM 7	27

Prior to completing this research we obtained Ethics Approval from Cardiff University and the Local Authority Safeguarding Children’s Board which addressed issues of confidentiality,

informed consent, data protection and protection from harm. In order to maintain both honesty and integrity we clearly outlined the study aims and research questions to participants. Prior to conducting each interview participants were given the opportunity to ask questions and it was explained that they were free to withdraw from the study at any point or decline to answer specific questions. All participants gave written consent to take part. Participants were made aware of our responsibility to report any disclosures of illegal or unethical practice to management, which may jeopardise their confidentiality within the agency.

The interviews were audiorecorded, transcribed and analysed. In depth analysis was conducted in a thematic manner. Braun and Clarke's (2006) six stages were employed; familiarization with the data, generating initial codes, searching for themes, reviewing themes, defining and naming themes and producing the report. This process allowed us to work through the data with an inductive approach, extracting common themes from participant responses whilst allowing the subjectivity of the participants' experience to be valued (Becker *et al.* 2012).

Participants' responses varied considerably as interviewees placed more emphasis on certain topics and interpreted questions differently. Further, in order to follow 'the flow of interview responses' on-the-spot modifications had to be made to the interview structure (Becker *et al.* 2012, p.292). This caused analysis to be challenging and heightened the risk of coding being influenced by our own subjective interpretation (Becker *et al.* 2012). In an attempt to minimise this we summarised our understanding of subject responses throughout the interviews to ensure they could challenge any misinterpretations and thus reduce any personal biases (Cohen and Crabtree 2006).

Findings

Five main themes were identified during the analysis of the data from the SMs:

1. relationships between SWs, IROs and children and young people;
2. high caseloads;
3. a potential culture of blame;
4. SMs knowledge and understanding of the review process;
5. SMs understanding of participation;

What follows is an exploration of these themes in detail.

Relationships between SWs, IROs and children and young people

As part of the broader research, the young participants all highlighted the difficulty of building trusting relationships with their SWs, primarily because of the high turnover of staff. It was noted by many of the young participants that this had impacted on their ability to participate in reviews and they complained about being asked the same questions repeatedly. It is surprising, therefore, that SMs in this study rarely touched on the importance of the SWs' and IROs' relationships with children and young people, the impact of a transient workforce and the challenges SWs faced in having the time to get to know children and young people. Indeed, SM 1 commented:

SM 1: I don't think that's a social work role [engaging the child]. I think that social workers just wouldn't have time to do that, and I think you need a different skill set to do it. I'm not saying all social workers couldn't do it, I'm sure they could if they had time, but I don't really think that's the best use.

This quote raises wider questions about what the role of a SW is, if not to engage a child or young person and put them at the heart of their practice. It is also highly contradictory to the body of research in this area. For example, Munro (2011, p.29) noted 'how highly children value face-to-face contact with their SWs', while Ofsted reported in 2011, 'Children and young people need to be actively encouraged to express their views by someone they trust. Their social worker, or other lead professional, is best placed to ensure they are asked about their wishes and feelings' (Ofsted 2011₂).

SM 2 made a similar comment when asked how they thought participation could be improved if they had a magic wand:

SM 2: If money wasn't an issue, I would have someone in every team who wouldn't necessarily be a social worker, probably would come from a more youth worker type of background but a person whose role it really is to engage and also to get messages out to young people and to be the owner of that team, someone who is not burdened down with a caseload.

This point contradicts the responses from the young participants, who felt that a consistent relationship with the same SW and IRO was helpful and played a key role in assisting them to participate meaningfully in their reviews. Furthermore, it also runs counter to the wider

message from research that children and young people would prefer one stable adult professional in their lives rather than a plethora of professionals (Selwyn and Riley 2015).

High caseloads

All social workers interviewed raised high caseloads and excessive paperwork has a barrier to effective participation with children and young people. On this subject, there appeared to be a disconnect between social work views and those of senior managers on this issue. An example of this was SM 2's response:

SM 2: Some of our social workers spend an awful lot of time sat in the office doing paperwork, and we hear a lot about that, but we see other social workers who manage to balance that and do a lot more face-to-face work. We have done our own exercises to try and capture how much face-to-face work some of our social workers are doing and we understand there can be a quite significant difference and that doesn't necessarily correlate to having things like up-to-date plans and other bits of paperwork in place...sometimes you will see a lot of recordings. Texts and phone calls are all very important, but they are not an entire substitute for being sat in front of someone.

The suggestion is that some SWs would prefer to be in front of the computer rather than spending time with young people. This comment demonstrates a common theme amongst those SM's interviewed. SM's typically placed responsibility for social workers spending so much time in front of a computer upon SW's. None considered that it would be SMs driving front-line staff to keep their paperwork up to date (Munro 2012). In the broader research, one SW stated in her interview that when a child came into care she wanted to spend time with him ensuring that he had settled into placement, but instead her managers put her under pressure to fill out the 21 forms that needed to be completed when a child comes into care. As Munro (2011) contends the 'extent to which frontline workers prioritise the bureaucratic aspects of their work, and complying with performance indicators, so that finding time to spend with children and young people and create good communication comes low on the list and hence is frequently omitted' (Munro 2011, p. 43). In this study SMs appeared to be naïve about the realities of SWs having the time to do all of the tasks required. Many of the SWs in this LA had a caseload of over 30 children and those interviewed for this study clearly stated that this impacted on their ability to carry out effective work with children and their families.

When SWs and IROs were asked what they would do if they were “king of the world” and could change one thing to improve children’s participation in reviews they all highlighted more time and lower caseloads. The young participants, too, highlighted the impact of high caseloads on the service that they received and were aware that this meant they could rarely see their SW. By contrast, during the SM interviews this was barely touched upon; more focus was placed on processes and paperwork being completed properly and on time. This evidenced a clear disconnect between the perceptions of SMs and the views of frontline staff and children on the challenges that SWs face in relation to carrying out effective direct practice with children, young people and families.

The majority of the SMs suggested that since some SWs managed, in their views, to carry out high quality direct work with families and complete the paperwork in a timely manner, all SWs should be capable of doing this. However, this fails to consider the complexity of the current challenges faced by SWs and the notion that, while some SWs may be able to carry out high quality direct work as well as fulfill the bureaucratic purposes of the role, they are the exception as opposed to the rule (Author’s own and Drewery 2016). It also pays limited attention to the challenges retaining SWs in frontline practice, which has led to the average childcare SW leaving frontline practice within two years of qualifying (Bowyer and Roe 2015). By way of context, the same figure for teachers is 15 years; for nurses it is 16 years, and for doctors it is 25 years (Bowyer and Roe 2015). Indeed, some SWs may be able to maintain their direct work with families alongside their paperwork to an excellent standard over a period of time but given the high turnover of SWs in frontline practice and the profession in general, this points to an inability to sustain this quality practice over longer periods, let alone over an entire career.

Frequent changes of SW or infrequent visits are noted to ‘reduce opportunities to hear children’s views and understand their experience’ (Cossar et al. 2011), and in their review of the IRO role in 2013 Ofsted concluded that high caseloads were a significant barrier to IROs carrying out their roles effectively (Ofsted 2013). SM 3 was a notable exception in her recognition of the time pressures on SWs and IROs and the impact on children and young people’s participation:

Researcher: Do you think social workers have the time and resources to prepare young people properly for Children in Care Reviews?

SM 3: No, I don’t.

Researcher: Any reason why that is?

SM 3: I think it's because they've just got too much work to do. I'm sure most social workers would want to give more time but I think there's lots of competing demands...I think for real participation it is a very labour intensive, time intensive exercise and you really have to give it space...I don't think caseload ties, workload management really allows and builds in enough time for that to take place properly.

While it is positive that this SM identified the issue, it was notable that, despite their position of authority and responsibility, there was no discussion as to how it was being addressed. As a part of the wider research SWs and IROs also outlined how frequent changes of SWs impacted on the ability of young people to have a meaningful relationship with them.

A potential culture of blame

Some of the SMs appeared to deflect the responsibility for meaningful participation and child-centred practice on to service users themselves or individual professionals:

SM 1: I think a lot of the barriers will be young people's perceptions of the system already and what their experiences have been, and some of that may just be anger because they haven't come to terms with it. It may not be that the system has treated them badly but, actually, the system has still interfered in their life and they may have parents in the background that are very angry at the system.

Unfortunately the system sometimes doesn't keep its word, it says things and then it doesn't follow through. You know we keep saying to social workers how important it is when they are going to be late, that they do something about that and they make efforts to let people know, just like they would expect to be told. But I think there is a whole combination of things like that which could so easily undermine the work of saying that we care and we want to listen and all of those messages.

In a similar vein SM 7 commented:

SM 7: If everybody was great and good at what they do then things tend to function but the barriers will often be around incompetence. Communication – social workers who don't respond to you – it boils down to social work competence practice.

These comments tied in with a general theme from six of the seven SMs that the faults lie with individual SWs and their poor practice, and would appear to suggest that a blame culture potentially exists in this particular LA. The SMs did not reflect on their own role in 'the system' or, indeed, if there was poor practice from an individual, how they were challenging this. As Schooling (2016) noted: 'Where management oversight is strong there is a culture of continual challenge to improve practice at all levels. Importantly, where positive and constructive challenge is encouraged, it also helps to remove a culture of blame'.

Arguably, the blame culture which appeared to potentially exist in the LA research site is likely to impact on practitioners' well-being and their ability to carry out their work effectively with children, young people and their families. This is an issue as child protection practice 'is so highly charged and emotional it is essential that middle and senior managers create a safe context for talking about doubts, uncertainty and the emotional impact of the work' (Morrison 2005, p.21). Bennis (2009, p.38) notes: 'It is essential culture of blame be avoided; instead middle and senior managers must ask staff 'how did we contribute to this mess?' This encourages a shared responsibility and shared learning'. The data suggests that in this LA, SMs were not able or willing to ask themselves this question. The effects of a blame culture being cultivated by SMs cannot be minimised. It has a severely negative impact on practice; indeed, 'the fear of being criticised or blamed for problems encourages practitioners to adopt coping mechanisms such as denial, blame and projection' (Menzies-Lyth 1988, p.87).

Senior managers' knowledge and oversight of the review process

One striking finding of this research was that of the seven SMs who were interviewed, only one had been to a CiC review in the last year, five had not been to one in over twenty years, and one SM had never been to a review. Given this lack of attendance at review meetings it is reasonable to assume that this would contribute to the limited understanding and oversight of the review process by the majority of SMs. The response given by SM 3 was typical when they were asked who they think decides who attends the review:

SM 3: I think that would be in discussion between the social worker and the IRO. I would like to think it also included the views of the young person but I don't know how often that happens.

Researcher: And what about where the review takes place? Who do you think decides that?

SM 3: Probably IRO and social worker but also maybe carer as well. I'd like to think it was the views of the young person but I don't know how often that happens.

When considering whether children and young people are always present at the review, SM 4 commented:

SM 4: I don't know how many young people have to finish school early to have their reviews, I haven't got an answer to that, or whether they're always outside of school. That must be a big challenge to make sure that that is managed.

This comment is noteworthy given the strong emphasis nationally on educational opportunities for CiC. The issue of reviews being in school time – with young people complaining about being called out of class and the lack of privacy – has also been documented in numerous studies (Mannay et al. 2017; Selwyn and Riley 2015). This lack of curiosity is problematic and is suggestive of a lack of understanding by some SMs in relation to children's attendance and participation in essential review meetings. This raises questions about whether and how this issue will be addressed.

In a similar vein, one SM outlined the lack understanding some SMs appeared to have in relation to the fundamental purpose of the review. The point was raised by SM 5 when asked about the agenda for the review:

SM 5: Well I think the agenda is set by the IROs and there's a fairly standard agenda here which I now understand doesn't include reviewing the care plan. The reason given for that is that we, within the children's services bit aren't following the process of ensuring that the care plan is bang up to date at the point at which the review meeting is held. But I am slightly bemused by this. It's news. I only had this conversation this morning. Because I'd understood - from an off-the-cuff comment that one of the service leaders made which was something along the lines of, "We've got all the emphasis on having a good care plan but the review doesn't actually review the care plan." I thought that was the purpose of the review, is the plan the right one? Are we on the right track? And apparently that's not how the agenda's set here. I had a meeting with the IRO Senior Manager this morning and I asked him that. He said, "No we don't. We haven't for years." So I said, "Why is that?" and he said, "Because of all the issues that we've got about the care plan being up to date and the right care plan. So we can't spend the meeting reviewing something that's either out of

date or not relevant.” When I would have thought that that's exactly what the meeting should do so that if the care plan's not right at the beginning of the review it certainly should be right at the end. But I don't want to take any more battles on really with the IROs at the moment, I'm trying to build bridges.

According to the IRO Handbook (DfES 2010), a central aim of the CiC review is to review the care plan; this SM – who was at a very senior level – is outlining that this is not happening in this LA, and they appear to have no plans to resolve this issue despite holding ultimate responsibility for it.

Despite their lack of knowledge about reviews, all seven SMs were aware that children and young people sometimes chaired their own reviews and all were positive about this happening. SM 2's response was typical:

SM 2: We could help them understand that the reviews are a really great place for their voice to be heard as well, around their progression, around their plan and their opportunity to take control and chair their own reviews at times, which we have seen happen in some of the older ones... We obviously need to try and support that as a service area to make sure we are helping young people to feel confident enough to chair their own reviews and see what we can do to support that side of it.

It was interesting that for some of the SMs, who had lengthy careers in the sector, this was not a new idea. Indeed, it was quite concerning that for many of these SMs it appeared that not much had changed or improved; and that that children and young people's views and negative feeling for reviews has not changed much since Thomas and O'Kane's research carried out in 1999.

Researcher: How effectively do you think we engage young people in their reviews?

SM 5: Most of my career it was terribly variable. I'd say I went through periods when kids hardly ever went to their reviews 'cos again I think the culture of the organisation was if they don't wanna sit in there they don't have to. So I think it's still very variable and I think our understanding is probably still quite variable about the extent to which children are at the heart and young people are at the heart of their meeting.

This comment again shows a lack of oversight and suggests that there is an acceptance that things are just the way that they are and there are no plans to address these issues. This fatigue towards reform in many respects is unsurprising, as Forrester comments in relation to the countless structure and procedure changes that have been implemented in children's social care: 'Yet, by and large, most of these initiatives seem to have achieved little. Many have actually been counter-productive' (Forrester 2016, p.8).

Similarly, SM 5 relating when they worked in a residential children's home and the young people had decided to chair their own review meetings. They went on to comment:

SM5: Well, that example that I gave you, that will have been about 28 years ago. Now I don't think we've made progress since then really. That was practice 28 years ago and we're still in a situation where we've got a handful of kids chairing their own meetings.

Dickens et al. (2015) found that, despite the discourse around child-centered practice, the proportion of children attending their reviews has not changed significantly in the 18 years. The lack of ownership by SMs with regard to their responsibilities was a noteworthy trend and suggests that there has been a significant lack of progress in this area in the past 20 years.

Senior managers' understanding of participation

The data from this study suggested that the seven SMs in this LA held only a superficial understanding of the term participation and that tokenistic participation was deemed 'good enough'. Given their leadership roles, this is a problematic finding. The following comment from SM 3 illustrates the manner in which participation was considered:

SM 3: So I suppose the overarching thing is that we want to know and understand what the views of children are and that can be on a personal basis, on a day-to-day social work basis. But it can also be on a service development basis. So there's also an effort to try and get the views of young people when we're making decisions about how we deliver services. And participation for me means that we ask children what their views are, whatever the level, that we ensure that those views are included in the consultation process or whatever it is and then we tell the children what the outcome of that was after. That would be my view of what is participation.

The notion that children are told 'what the outcome of that was after' places this child's participation on a low level in relation to Hart's Ladder of Participation (1992). It is not in line with restorative principles of working with and alongside young people and their families (Stanley and Featherstone 2015), which in turn helps to empower them. This is significant, as for the last 12 months this LA had invested significant funds in trying to embed Restorative Practice principles, and all SMs and most IROs had been on a three-day course on this topic (LA agency report 2017).

Another example came from SM 5, who showed limited insight into the contradictory nature of their overall response when they were asked what participation meant to them:

SM 5: It means that children and young people are fully engaged with - if we're talking about participation - with us. Fully engaged in our system. That they've been properly involved in understanding why we're involved, what we're doing, that they've been empowered to express a view about what they want and what their important things are, that they're empowered to express that in different forms.

The notion that the child or young person should be 'fully engaged in our system' reflects tokenistic participation when considered in terms of Hart's Ladder of Participation (1992). While the SM does talk about empowerment, the language used suggest that the child does not have ownership of the system. We can link this back to Munro's (2012) assertion that social work is about 'doing the right thing not doing things right'. This approach is not confined to this particular LA. Indeed, as Broadhurst et al. (2009) found, in a recent example across five LA areas, 'workers consistently claimed that it was easy to lose sight of the primary activities of supporting families and safeguarding children, to the second-order activities of performance and audit' (2009, p.8).

One SM seemed to have a particularly poor understanding of the meaning of participation and wider concept when they were asked if they had a magic wand and they could do anything to improve children in care reviews their response was as follows:

SM 4: I'd like to be certain that every professional going to a review understands exactly what they're there for and what their role is. Because if everyone does that then it should be a good experience.

Role clarity, though important, does not in itself does impact necessarily on children's participation in review meetings or wider practice. This answer also highlights that this SM had potentially low expectations of social work practice. It is noteworthy that the SM made no reference to children in their response. The over-focus on the professional and their role is noted by research to be one of the barriers to children engaging with services (Munro 2012). This SM was also asked what was the main message they gave to staff about children's participation and they stated the following:

SM 4: Erm ... I think, the conversations we've had, or I've had have been this kind of thinking about participation and thinking about direct work of children and the potential difference. So understanding a child's experience, understanding their lived experience - what's it like being them is kind of direct work and listening. Now some teams say that's child participation but I think that's slightly different. At a team day recently young ambassadors were there talking about their experience. That's participation, isn't it? ... So I think it's complex; I don't think it's, and I think in our, in social care maybe that gets mixed up a bit.

This SM describes her experiences coming from a group session at a team day – not something that is embedded into the everyday practice of working with individual children and young people. This appears to be the only direct experience related to participation that SM 4 is involved with. This SM's insight is only facilitated because they attended this team day and saw this presentation. There does not seem to be a clear message coming from SM 4 or their leadership team in relation to children's participation, and they generally demonstrated a lack of understanding about what participation means and what SMs were doing in relation to it – a theme which came through in all of the SM interviews. This said the SM's reference to the young ambassadors giving a talk could be viewed as laying a foundation and developing a culture for future participation.

Conclusion

The examination of the SMs' views of CiC reviews would suggest that the SMs in this LA area as distant from the review process and indeed social work practice with children in care. The data suggested that SMs had limited knowledge of frontline practice and seemed unable to provide oversight of the practice carried out with children in care. Some SMs did not seem to have a clear grasp of the concept of participation, while others described what could be

considered to be tokenistic measures. There appeared to be acceptance of a 'system' that would not change and a lack of responsibility towards, and even interest in, ensuring improvements were made. It was almost as if the system is self-perpetuating.

When asked for basic information about the review process there was a lack of knowledge from the SMs and indeed a lack of curiosity. A noteworthy example was that one SM said that the care plans were not reviewed at the CiC meetings as they were invariably not up to date; given that this is one of the central aims of the CiC review it was surprising that there was no urgency or discussion about how this was going to be addressed. SMs whilst supportive of the concept of children and young people being at the heart of practice were unable to articulate how they were going to ensure this happened. SMs appeared to have low expectations for both the children and young people in care as well as the staff they led. As there has been limited research into SMs' views of children in care and participation this was a new finding. As this research was carried out in just one LA the generalisability of these findings is limited and therefore further research is necessary to ascertain whether the issues raised in this Local Authority are unique to this organisation or part of a national systemic issue.

Some of the SMs did not seem to think that it was their business to know about the review process, let alone improve it. As corporate parents SMs took limited ownership of the experiences of children in care. Some of the SMs pointed to individual SWs failings, commenting that since some SWs managed to complete all tasks, all SWs should be capable of the same. Overall, the approach from the SMs mirrored the "technical rationale approach" where the following of procedures and completion of forms appeared to be more important than children's participation. In mitigation it is important to note that in recent years there have been significant cuts to the number of senior managers in LAs (Education Select Committee 2016). For example in the LA where this research took place the number of senior managers has halved since 2010; it might be the case that workloads for senior managers are now so high it has become an almost impossible job to do well. It could therefore be argued that it is inevitable in the current context of austerity that senior managers become willfully blind. Indeed Hefferon (2012) has argued that in 70% of organisations senior managers were found to be willfully blind but when this happens in Local Authorities the impact for children in care could be negative and be part of the reason why outcomes for children in care are often poor compared with their peers.

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