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Citation for final published version:

Wilkins, David 2024. Seven principles of effective supervision for child and family social work. Practice: Social Work in Action 36 (3) , pp. 213-229. 10.1080/09503153.2023.2261148

Publishers page: <https://doi.org/10.1080/09503153.2023.2261148>

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Seven principles of effective supervision for child and family social work

Abstract

Supervision is widely regarded as an essential component of social work practice. Yet the gap between the ‘rhetoric’ of supervision (what it should be) and the ‘reality’ (what it is) is often significant. In this article, based on my own reflections on a decade spent researching the topic, I propose seven principles of effective supervision for child and family social work – (i) collaboration, (ii) thinking aloud, (iii) emotional reflection in relation to casework, (iv) explicit identification of need, risk, harm and strengths (v) a focus on parent and child-defined ideas of helping and outcomes, (vi) exploring multiple perspectives, and (vii) planning for the whys and hows of practice. The aim is to provide supervisors (and organisations) with a framework for thinking about how they provide supervision. These principles are not unique, and I did not ‘discover’ them. Yet I hope that by presenting them as a collective, they may offer a useful basis for reflecting on the provision of effective supervision in all the various contexts of statutory children’s services.

Key words: *Children and families, social work, supervision, outcomes, theory.*

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Introduction

In 1917, the American social work pioneer Mary Richmond highlighted the importance of supervision and argued that it provides a necessary corrective to the ‘flawed thinking’ of individual practitioners. Supervisors “*have the advantage over the worker who makes his [sic] analysis unaided, [because] they do not know the client...and consequently they are not already so impressed with any one part of the story as to be unable to grasp the client’s history as a whole*” (2017, pp. 348 - 349). The argument - albeit from a deficit-perspective - is that without supervision, social workers cannot practice (as) effectively. Supervision is helpful precisely because the supervisor does not know the family and can thus provide a different point of view (Pitt et al., 2021). Of course, Richmond’s focus was on the nature of *case discussions*, in relation to individuals or families in receipt of services. And while case discussions remain central to contemporary supervision, especially in the context of statutory services, it is important to acknowledge its other functions, including administration (which can often include case discussions), education and support (Kadushin & Harkness, 2014), as well as emotional support for the worker (Paustian-Underdahl et al., 2013), promoting resilience (Collins, 2017), and professional development (Giddings et al., 2008).

It is becoming a cliché in articles discussing supervision to point out its limited evidence-base, especially in the context of child and family practice and in relation to outcomes for people who use services (Carpenter et al., 2012). It is equally common to note that the experience of supervision often falls short of what we might expect. The British Association of Social Workers says that supervision is a “*reflective process which supports social workers to make ethical decisions*” (2011, p. 4). The Department for Education says supervision facilitates “*constant reflective thinking about the welfare of families and the safety of children*” (2018, p. 4). Yet various studies have found that supervision is rarely reflective, often due to workload pressures, the predominance of managerialism, and the absence of sufficiently supportive organisational cultures (Beddoe et al., 2021; Wilkins et al., 2017). Supervisors and supervisees rarely seem to consider the views and experiences of children or consider them only briefly (Revell & Burton, 2016). Likewise, explicit discussions of theory and research are atypical (Turner-Daly & Jack, 2017), with the focus usually on process and compliance with procedure (Ruch, 2007, 2012).

In this article, rather than describing (again) the many problems with social work supervision, I want to focus on the positives. Over the past ten years or so, I have been involved in many studies of supervision within the context of statutory children’s services in England

and have seen many examples of excellent practice. It is based on these studies that I present these seven principles for effective supervision for child and family social work.

Defining supervision

There are various ways of defining supervision, which emphasise the supervisory relationship (Efstation et al., 1990), the nature of supervision case discussions (Beddoe et al., 2021), and the purpose of supervision more generally (Manthorpe et al., 2015). As this paper focuses on England, I use the British Association of Social Workers definition (2011, p. 7):

“Supervision is a regular, planned, accountable process, which must provide a supportive environment for reflecting on practice and making well informed decisions using professional judgement and discretion.”

What does ‘effective’ mean?

As there are different definitions of supervision, so there are various claims about its possible benefits (Wilkins, 2019). For example, that it improves retention (Chiller & Crisp, 2012), worker well-being (Mor Barak et al., 2009) and promotes a higher quality of practice (Hair, 2013). It is the last of these that I focus on – and specifically the difference that supervision makes for practice skills and the experience of children and parents. Not because the other benefits are less important. On the contrary, it is only by supporting workers effectively that we can hope to benefit families. However, the ultimate beneficiaries (if beneficiaries there are) should be people who use services. Thus, my definition of ‘effective supervision’ is tautological – *effective* supervision makes a tangible positive difference for children and families and supervision that makes a tangible positive difference for children and families is *effective*.

What are ‘principles’ and why do we need them?

Yet we need more than concepts of effectiveness to guide practice. We also need principles to help us decide what we should do and why (Dalio, 2018). By reflecting on our principles, we identify what is important to us. Principles help describe our aspirations, without being behaviourally prescriptive. Good principles are clearly defined with tangible implications for behaviour. Hence, although there are many excellent models of supervision (e.g., Sturt & Rothwell, 2019), it is nonetheless helpful to articulate the principles that underpin *why* and *how* we do things (Sinek, 2009). This should help inform our choice between different

models of supervision because while one can prefer a specific model because “it works” – we also have to ask *works to do what?*

The seven principles

I now present seven principles for effective supervision in the context of statutory child and family social work - (i) collaboration, (ii) thinking aloud, (iii) emotional reflection in relation to casework, (iv) explicit identification of need, risk, harm, and strengths, (v) focusing on parent and child-defined ideas of helping and outcomes, (vi) exploring multiple perspectives, and (vii) planning for *whys* and *hows* of practice. These principles have been identified via a process of self-reflection, in relation to my own experience of conducting research over the past decade or so. In so doing, I am drawn to Stepney and Thompson’s (2021) notion of “theorising [from] practice”. I also admire the way in which Collins identifies the concept of hope as a general virtue for social work practice across different contexts (2015). In a similar way, I have tried to identify some of the common principles that underpin different approaches to supervision, by reflecting on what supervisors and supervisors do (and do not do) in real-life practice. While reflecting on the different practices I have been privileged to observe, I have tried to remain curious as to *why* some case discussions seem to make a more positive difference compared to others (Wilkins, 2019). I have not conducted a formal literature review of which there are many examples already including (Bogo & McKnight, 2006; Harkness & Poertner, 1989; Karpatis, 2019; Kühne et al., 2019; Mor Barak et al., 2009; Ravalier et al., 2022; Sewell, 2018). Instead, my aim is to contribute to a discussion about what this evidence *means* for supervisory practice in the context of child and family social work.

Collaboration

Supervision should be a collaborative encounter between two or more people (Bostock, Patrizo, Godfrey, & Forrester, 2019; Bostock, Patrizo, Godfrey, Munro, et al., 2019). From some observational studies, it is evident that the social worker usually speaks more than the supervisor (Wilkins et al., 2017). This is not necessarily a sign of collaboration (although it could be). Sometimes, the person speaking less will have more influence on the conversation, depending on what gives them the ‘right to speak’ (their epistemic authority) and what they say. For example, Webb et al (2022) found that supervisors tend to speak less than social workers. Yet they were almost always the one to define what decisions needed to be made, and what options to consider first. This positioned the social worker as having to agree or respond to the supervisor’s suggestion. Such conversations may not feel very collaborative. Indeed, true

collaboration can only happen when those involved are working towards a shared goal. This means explicitly discussing what that goal should be. A supervision agreement is helpful but insufficient (Sewell et al., 2023). Within each case discussion, and in relation to each child or family, it is important to agree an agenda, however brief (see chapter 6, Forrester et al., 2021). Of course, collaboration *also* means sharing the conversational space, and valuing everyone's contributions, but it starts with a shared understanding about why the discussion is happening at all.

Thinking aloud

According to the English neurologist John Hughlings-Jackson, “*we speak, not only to tell other people what we think, but to tell ourselves what we think*” (quoted in Sacks, 2009, emphasis added). Similarly, the novelist E. M. Forster wrote, “*how can I tell what I think till I see what I say?*” (1985). Both make the same argument – that thinking is not something we do (most constructively) within our own heads, but in conversation with others. And not to *tell* other people what we (already) think, but as a mechanism by which thinking happens. The think-aloud methodology, in which participants verbalise what they are thinking and feeling as they do something is based on a similar concept (Ericsson & Simon, 1998; Séguinot, 1996). This is different from social workers simply recounting everything they have done, which is common in many case discussions (Wilkins et al., 2017). It means enabling the worker and supervisor to think together, using *how* and *why* questions more so than *what* and *when*. It means adopting an open style of communication (Wilkins & Jones, 2018), in which the aim is not to gather information *from* the worker (Baginsky et al., 2010), but to co-construct with them a reflective and critical understanding of the family (Rankine, 2019; Rankine & Thompson, 2015).

Figure 1 provides an extract from a supervision session in a child protection team in England (all names and some other details have been changed). This is arguably an example of talking without thinking. Why is the social worker worried? From this extract, we cannot know. More importantly, perhaps the social worker does not know. She feels worried but has not had an opportunity here to think-aloud, to tell herself - and her supervisor - what she thinks.

In his work, Rankine has invited supervisors and supervisees to look at transcripts of supervision case discussions together and vocalise their thought processes. Figure 2 shows an extract from a conversation between Jessica (supervisor) and Grace (supervisee). While this discussion is not part of supervision per se, it illustrates the way ‘thinking aloud’ can operate in practice, creating opportunities for people to reflect on what they mean (when they say things

like “*the children wouldn’t be safe*”) and the association between practice knowledge, organisational policy, and social work ethics. As noted by Rankine, “*a thinking-aloud process [assists] critical reflection via the use of open-ended questioning and inquiry*” (2019, p. 97).

Emotional reflection in relation to casework

Many of the supervision sessions that I observe as part of my research have started in the same way – by the supervisor asking the worker, “*how are you?*”. This often prompts a response in relation to workload or perhaps a specific difficult event that has occurred since the last meeting. While it is supportive to ask workers how they are feeling, this question often does not provide much insight by itself of what is happening with and for particular families (Ruch, 2012). What is needed as well is emotional reflection *in relation to casework*, so that supervisees can reflect on the relationship between their feelings and their actions, and between their actions and the feelings and experiences of others. Figure 3 shows an extract from a supervision case discussion from one child protection team in England. In this case, the supervisor and social worker name several emotional states and related behaviours, including *crying, sadness, anger, happiness, and unhappiness*, within the space of a few lines. They draw connections between emotions and the things people have done (or not done). They speculate about what might give rise to these emotions and related behaviours. They do so for the worker, *and* the child and family. If social workers are not supported in supervision to connect their emotions with their casework, where else can this happen (Winter et al., 2019)? As noted by Ruch (2007) without “emotionally informed thinking, practical and procedural thinking is undermined or rendered ineffective”. In other words, it is not enough to explore the worker’s well-being *and then* discuss their casework – the key is to integrate these discussions together. Rankine and Thompson (2021) similarly identify the importance of supervisory ‘presence’, of the need to be alert to opportunities to interrupt and respond, in a positive sense of drawing the worker’s attention to something they have just said but perhaps not yet critically explored (p. 94).

Explicit identification of need, risk, harm, and strengths

From several of my studies of supervision, one of the most surprising things (to me) is how little time is spent explicitly discussing needs, risk, and harm to children. Surprising because it is often claimed, with good reason, that the whole system is ‘problem-saturated’ and ‘risk-oriented’ (Turnell, 2006; Webb, 2006). It is not that social workers and supervisors do not express feelings of *concern* about children – they often do. But not always are these

concerns reflected upon and critically explored. The same can be said about strengths and capabilities. The pattern (more often, if not always) is to vocalise the existence of ‘a concern’, and then move onto talking about what the worker should *do*. Yet as noted by Bostock et al (2019), it is important to avoid the simplistic ‘naming’ of concerns without understanding that risk is dynamic and relational and to think about what actions and inactions are impacting on its level and nature. In other words, to *critically reflect* on what has (supposedly) happened in the past, what might be happening now and what could happen in future. By so doing, the result will often be a more balanced assessment of risk, need and strengths and a resultant *reduction* in concerns. The Signs of Safety model (Turnell & Edwards, 1999) provides an example of how to do this in practice, by utilising a deceptively simple set of questions such as “*what are we worried about?*”, “*what is working well?*” and “*what needs to change?*”. Such questions are often quite difficult to answer with a sufficient degree of clarity especially in the absence of reflection and curiosity and without resorting to generalised answers such as “poor engagement” or “domestic abuse”. To address them, it can be useful to ask subsidiary questions, such as “*what would the mother say was the worst time when the father got drunk when the children were at home?*” and “*Are there times when the father has avoided alcohol or reduced his intake and how did this happen?*” (Knowsley Council, 2020).

Focusing on parent and child-defined ideas of help and outcomes

In an American study, Harkness and Hensley (1991) found that by asking more client-focused questions in supervision, client satisfaction with the service increased by statistically and clinically significant amounts. Harkness and Hensley suggested questions such as – *what does the client want help with? How will you and the client know you are helping? How does the client describe a successful outcome? And does the client say you are helping?* Wilkins et al. (2020) subsequently undertook a pilot study of a similar approach in two child protection teams in England. One team was asked to provide supervision-as-normal. The other was asked to use more outcomes-focused questions, such as – *what does the parent or child want help with? How do you know you are helping? What does the parent or child describe as a good outcome?* Parents from the two teams were then asked to give feedback about the service they received – and while both groups were quite positive, the ones from the intervention group were more positive. Thus, Wilkins et al (2020) concluded that asking more outcome-focused questions in supervision could help ensure a more positive experience for parents. Consider the example in figure 4, in which a supervisor asks the social worker some specific questions about what the parents want help with. As with the Signs of Safety questions in relation to risk and

harm, you can see from this extract how difficult it can be to answer apparently simple questions, and how this would require a sensitive and supportive response from the supervisor (Wilkins et al., 2022)

It is central to good social work to understand what people want for themselves, for their children (if they are parents), and from their social worker. Unlike many other public services, the purpose of social work intervention is not always obvious. We send children to school so they can be educated. Health services help people recover from illness and injury, to manage chronic illness and to prevent ill-health. In practice, things are often more complicated than this. But for social work, they are even more so. By maintaining a consistent focus in supervision on parent and child-defined outcomes, we can ensure a more focused and satisfying experience for the whole family. And while the purpose of social services is not to provide personal satisfaction, it obviously matters that parents and children feel fairly treated, and that satisfaction levels are associated with more positive outcomes (Trotter, 2008).

Exploring multiple perspectives

The idea that it can be useful to explore multiple perspectives is hardly unique to social work. By considering multiple perspectives, and leveraging the insights and knowledge of different people, we can make sounder judgements and better decisions. Mary Richmond's conception of supervision is a good example of this idea applied to social work. The importance of considering multiple perspectives is, of course, the basis for group supervision too (Francis & Bulman, 2019; Lietz, 2008). For example, Bostock et al (2019) describe how the 'voice of the family' can be included by talking about the child's wishes and feelings, considering the views of different family members and thinking about how different perspectives might be resolved (p. 4).

In one-to-one supervision, it is more difficult to draw on multiple perspectives, not least because the supervisor often collects and records large amounts of information from the worker (Wilkins et al., 2017). However, it can be achieved by adopting a position of "not knowing", by de-prioritising the need for consensus, and by playing "devil's advocate" (Barham & Winston Jr, 2006). Supervisors and social workers can also explore alternative viewpoints hypothetically – by asking Gestalt-style 'empty chair' questions. For example, if the mother or father were here now, what would they say about this issue (Fagan et al., 1974)? Another approach is suggested by Bosanquet and Shemmings (2018) with their concept of 'zooming in and out'. Workers are often very good at knowing the details of their casework. They are 'zoomed in' on the nature of family relationships, and the day-to-day experiences of the child.

Supervisors may be tempted to join them in this ‘zoomed in’ perspective. Yet ‘zooming out’ – thinking about the wider context, including socio-economic circumstances and how this family might be similar and dissimilar from others – is likely to be more helpful. The social worker already knows the family well. The supervisor needs to do something to provide a different perspective.

Planning for the whys and hows of practice

Finally, supervision should provide a space for thinking about the *whys* and *hows* of practice (Sinek, 2009). Often, in case discussions, social workers and supervisors agree *what* should happen next (e.g., actions for the worker to complete; Wilkins, 2017). They often ask less about *how* something could be done or *why* it matters. This reflects what Forrester (2016) has described as ‘zombie social work’, in which the focus is on what social workers do, without “sufficient attention [given] to *why* and almost none on *how* practice should be carried out” (p. 8, emphasis in the original). One reason why systemic supervision is associated with more skilful practice is because it provides a ‘rehearsal space’ to plan and practice conversations (Bostock et al., 2022). This is not because social workers are somehow incompetent. Rather, it recognises and respects the difficulty of the task, and the importance of getting it right for the family. By thinking more about the *whys* and *hows* of practice, supervisors can help workers feel more confident in their work, and ensure that families have a better experience of practice.

Implications and conclusions

Describing a set of principles is one thing (table 1). Putting them into practice is quite another. To my mind, there is no one model of supervision that best exemplifies these principles. In some places, systemic group supervision works well (Dugmore et al., 2018). In others, it has been less successful (Bostock et al., 2017). My hope is that these principles can provide a framework for thinking about the effectiveness of supervision in a variety of settings, without suggesting that *this* or *that* model is the right one. Much as families do not benefit from being ‘told’ what to do, so it is that supervisors are more than capable of thinking about how these principles can be implemented within their specific contexts. To date, I have presented workshops based on these principles to more than 500 supervisors from nearly 20 local authorities in England. In future, I hope to explore them in more detail with supervisors and supervisees alike, to learn more about how they can be implemented in different ways, what difference this makes and for who.

Of course, the quality of supervision (also) depends on a good working relationship between supervisor and social worker (Enlow et al., 2019). Asking a social worker “*why do you want to have a conversation about the father’s mental health?*” might be felt as curious and supportive (within the context of a positive working relationship). Or it might be felt as undermining and accusatory (within the context of a negative working relationship). From the existing literature on supervision, there is much we already know about how such positive working relationships are developed and sustained. Basa (2017) identifies the importance of clarifying the nature and purpose of the supervisor-supervisee relationship, agreeing a supervision contract, promoting engagement and the ‘fit’ between different theoretical and presentational orientations (p. 2 – 3). Equally, the quality of supervision depends on many aspects of the wider organisation, such as manageable workloads, sufficient resources, and low staff turnover (Egan et al., 2018).

I started this article by considering Mary Richmond’s ideas about supervision. Contemporary conceptions of supervision still emphasise the importance of supervision as a space for reflecting on practice. Yet we know that supervision often falls short of these ideals, often serving as a forum for accountability and surveillance (Beddoe, 2010; Beddoe et al., 2021). It is my belief that going back to our ‘first principles’ is often the best way of addressing such problems, while also helping us to see the many things that we are also doing well already.

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| <i>Principle</i> | <i>Brief description</i> |
|--|---|
| Collaboration | Agree the <i>overall</i> aim of supervision, and of <i>each</i> case discussion. Ensure all contributions are valued and accepted. |
| Thinking aloud | The best thinking happens in conversation with others. Assumptions need to be unpicked and examined in a spirit of curiosity. |
| Emotional reflection in relation to casework | Emotions should be regularly named and considered in relation to actions and behaviours. |
| Explicit identification of need, risk, harm, and strengths. | Needs, risks, harms and strengths should be identified in relation to specific children and family members; labels (e.g., <i>this is a domestic violence case</i>) may well mask a lack of clear thinking and should be avoided. |
| Focusing on parent and child-defined ideas of helping and outcomes | Talking explicitly about parent and child-defined ideas of help and outcomes will help ensure a clear purpose for the intervention; when it is unknown what parents and children want help with (and what outcomes they want to achieve), this should be explored by the social worker. |
| Exploring multiple perspectives | There is always more than one way of thinking about any person, family, or situation. Avoid reaching for consensus too soon. |
| Planning for the whys and hows of practice. | Supervision often makes clear what and when social workers need to do; but the hows and whys of practice are even more important. |

Table 1: An overview of 7 principles for effective supervision in child and family social work.

Social worker: I'm worried about [the mother's] mental health really... I'm worried about Kyle.

Supervisor: What he's being exposed to?

Social worker: At first it was housing but now it seems to be unravelling and obviously she has depression.

Supervisor: Have you had a face-to-face discussion about your concerns?

Social worker: I haven't had a direct conversation. I wanted to talk to you first because it's quite sensitive.

Supervisor: What have you thought about doing?

Social worker: Contacting the doctor, seeing what medication she's on.

Supervisor: Has she been to her doctor about it?

Social worker: She says she has.

Supervisor: So, I think it might be an idea, you might need to meet with her face-to-face. How would you feel about doing that? You can speak to the doctor but how would you feel if you did that without talking to her first?

Social worker: She said you can speak to my doctor. She feels if we were taking her depression seriously, we would get her a house.

Figure 1: An extract of a supervision case discussion from Wilkins et al. (2017, p. 946).

Jessica: You say if the children are going home that night, they wouldn't be safe...I had the sense that it wasn't just a mandatory reporting kind of situation, it was like...

Grace: How do we address this?

Jessica: Yeah, and the relationship that you've established with the grandmother is why you were able to have a good outcome from that interview.

Rankine: You touched on Jessica, about practice standards, personal qualities...why [did] you mention that?

Jessica: When you're asking yourself, 'Am I doing the right thing?' you've got your practice that you know but if you suddenly feel that you don't know then you go to things like your organisational policy and if that doesn't give you the answers then you go to your wider social work ethics...so it's about stepping back.

Figure 2: An extract of a discussion between a supervisor and supervisee from Rankine (2019, p. 7 - 8).

Social worker: I found it really difficult, so challenging. For part of the meeting, I couldn't talk, or I would have started crying and after the meeting, I couldn't stop crying.

Supervisor: You had quite a strong reaction the first time you took [the child] out, when she told you she was victimized in the family, that affected you emotionally. Is it something about this family or something about you?

Social worker: I don't know; other things are sad. A mother told me the day before that her daughter has cancer and that was sad. So, I don't know whether I was already feeling sad because of that... I could have been picking up on the sadness that she is unable to express other than through anger and I felt sad because a child had cut herself and she was sat crying, surrounded by her family, and no-one was giving her a hug, they were just having a go at her.

Supervisor: You're clearly very attuned to her feelings and she is expressing how she is being victimized and that will touch anyone, you really do attune yourself to how the child is feeling, more so than the treadmill cases.

Social worker: [Is it worse for a child to have] an ongoing shit home life or a single, tragic occurrence?

Supervisor: And how difficult it is to know how to support the child. We are not trained to be counsellors, we have certain skills and training, but we are the people who [everyone] assumes can do it and it's hard.

Social worker: You feel responsible.

Supervisor: You can't make someone happy.

Social worker: But you can make them unhappier.

Supervisor: You've probably achieved more in that short time than anyone else has with that family and now it feels like a far more stable situation...your intervention has, in one way or another, led to that.

Figure 3: An extract of a supervision case discussion from Wilkins et al. (2017, p. 946).

Supervisor: So, tell me what does the, do the parents want help with as far as you're concerned, or you're aware of in this case?

Social worker: The parents' main priorities are securing housing...and also securing benefits, Universal Credit, Housing Benefit, that sort of thing. Those are the main priorities for the parents, my priorities are a little different. Do you want to know those?

Supervisor: Yeah, also what you're doing to help?

Social worker: Domestic abuse was one of the concerns, and that was why the case came to us. So, we have had a family support worker on-board.

Supervisor: What would you say you're actually doing to help?

Social worker: I go and see them, I go and see them once every four weeks, once every two weeks, just to do my usual statutory checks but I'm mostly coordinating the work. I don't actually do any practical work.

Figure 4: An extract of a supervision case discussion from Wilkins et al. (2022).