

English Lessons: Coru and the surveillance of practitioners

The mandatory registration of social workers has been in place in England since 'protection of title' was introduced on April 1st 2005, firstly via the General Social Care Council (GSCC) and currently with the Health and Care Professions Council (HCPC). From that date, only those on the social work register could legally work as, or call themselves, a social worker. Now that Ireland has followed suit, with social workers required to register with *CORU: Ireland's multi-profession health regulator*, it is timely to highlight some of the problematic aspects of the social work regulatory process in England.

A cursory glance at the cases of social workers brought before either the GSCC or HCPC demonstrates that there are certainly many individuals who deserved to lose their jobs and to be prevented from working as a social worker in future. Few will lose sleep over those struck off for cases of serious criminality and/or the abuse of vulnerable people who they were supposed to help. However, professional regulation is not needed to prevent such people working with vulnerable people; the Protection of Vulnerable Adults scheme (POVA) and the Protection of Children Act list (POCA) are available to bar them from such employment in future.

Nevertheless, there are also cases in which the professional competence of the social worker appears concerning, but what is often downplayed or ignored in many such cases is the wider organisational and resource issues that can impact negatively on an individual's performance.

Research recently undertaken by myself and two colleagues (Jadwiga Leigh from the University of Sheffield and Aidan Worsley from the University of Central Lancashire) found numerous cases in which issues such as organisational conflict, inadequate supervision, staff shortages and lack of resources were factors that adversely affected social workers' ability to do their job properly. Failure to maintain up-to-date case records and/or missing deadlines and timescales for visits and/or reports are frequently held against individual social workers without the wider organisational problems being held to account.¹ Such a procedure-driven, risk-averse approach to practice, with its concern to have the correct boxes ticked at the right time can create a fearful, defensive and prescriptive approach to social work.

What initially surprised us in the cases we analysed, (we excluded cases of criminality and abuse and focused on practice issues), was that of those struck off the social work register, in the 18 cases where a reasonable inference could be made, the length of service was an average of 15 ½ years. This seemed counter-intuitive as we assumed that it would be younger, less experienced practitioners who would be more likely to struggle with workload management and the complexity and pressure of the role. On reflection, we reached the reasonable assumption that perhaps it was the more experienced workers, who had practised before the current procedural/prescriptive climate gained a stranglehold on the profession, who were more likely to fall foul of the new micromanagement and neoliberal regime. Resisting the current trajectory, trying to prioritise people over form-filling, and using initiative rather than a prescribed way of working can lead to conflict with management and other professionals, and ultimately lead to a referral to the regulatory authority.

A recent case, not covered in our research but which demonstrates this well, is that of a vastly experienced social worker and qualified therapist in a Child and Adolescent Mental Health Service (CAMHS). He was suspended by the HCPC for recommending an intervention 'outside [a social worker's] scope of practice'. He had proposed a course of action where a girl would only self-harm on set days and times, with her mother attending to wounds without comment. The fact that he had

¹ These papers are currently going through the peer-review process.

considered the risk factors 'in his head' and 'on the hoof' as opposed to formalising them amounted to misconduct according to the panel.

Of interest is that the panel accepted that the systemic techniques he recommended are approved by CAMHS and his local authority employer, and so to that extent 'he was not acting improperly'. Nevertheless, it would appear that for a qualified social worker to use initiative and assess and decide in the messy environs of people's lives in real time is now considered 'foolhardy in the extreme' and is liable to lead to their fitness to practise being questioned. Despite the FTP panel acknowledging that he had not been adequately managed or supervised for a 'significant period of time' he was still suspended from the social work register (Stevenson, 2016, online).

There are also the cases that have you rubbing your eyes to make sure they are not misleading you. For example, there was the case of the black social worker, whose formative years were likely to have been around the times of the inner-city riots of the 1980s, protests that were, to a large degree, a response to structural racism and police harassment. Fast forward 30+ years and she finds herself before the HCPC with one charge against her being that she accused the police of being racist (I kid you not I attended her hearing).

The new morality of acceptable thoughts and behaviour focuses on the individual as opposed to structural issues. For example, it is well documented that social services' provision for asylum seekers is woefully inadequate. Indeed, one UK Court of Appeal judge lambasted Leicester City Council's policies towards asylum seekers as tantamount to 'starving immigrants out of the country by withholding last resort assistance' (quoted in Humphries, 2004, p.103). Such issues are rarely viewed as concerning by the regulatory authorities. In fact, around the period of the aforementioned judge's comments the GSCC was more concerned with the private life of an individual social worker, whom it suspended for two years for bringing 'the profession into disrepute' for advertising herself as an escort. As I noted at the time, if the main concern of professional regulation/registration is to improve the practice and provision of care offered by social workers, then surely Leicester's policymakers are more damaging to the profession than the private *legal* activity of an individual social worker (McLaughlin, 2006)

If anything, the HCPC is more intrusive into the private life of social workers than was the GSCC. Indeed, it has been accused of acting outside its remit and breaching social workers' human rights, particularly Article 8's right to a private life (Bohraer, 2104). Whilst it is acknowledged that the regulator is entitled to take account of the private life of a professional, many believe the HCPC is crossing the line and also sanctioning social workers for issues that should be dealt with internally by their employer.

Appeals against CORU's sanctions have to be made to the High Court. This is similar to the HCPC process and is extremely problematic. A High Court appeal will incur significant expense, a cost that is likely to be beyond most social workers (especially given the legal costs already incurred). For all its faults, at least the decisions of the GSCC could be appealed to the Care Standards Tribunal, a significantly less costly option, and it was not uncommon for social workers to exercise this right (McLaughlin, 2010). This scrutiny of contested decisions meant the GSCC had to take into account Tribunal decisions. As Allan Norman, a dual-qualified social worker and lawyer, has pointed out. 'The GSCC eventually had to pull itself in line with what its appellant body was telling it, but when it comes to the HCPC that's not the case because its appellant body is telling it nothing' (quoted in Bohraer, 2014, online). It would appear that CORU will also face little appellant scrutiny.

I hope that the lessons from England will alert those in Ireland to the fact that just because something is couched in the language of public protection and improving professional prestige does not mean it cannot be used for the implementation of regressive measures and increased state surveillance of both professional and private conduct. Welcome to the world of the 24/7 social worker – not always on watch, but always being watched.

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