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TO WHAT EXTENT ARE FRONTLINE
STATUTORY SOCIAL WORKERS
EMPLOYING THEIR DISCRETION IN
THE POST- MUNRO REVIEW WORLD
OF CHILD PROTECTION?

C M M Murphy

PhD 2019

TO WHAT EXTENT ARE FRONTLINE
STATUTORY SOCIAL WORKERS EMPLOYING
THEIR DISCRETION IN THE POST- MUNRO
REVIEW WORLD OF CHILD PROTECTION?

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Department of Social Care and Social Work
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ABSTRACT

In May 2011, Eileen Munro concluded her review of the English child protection system. Within, she identified obstacles which she believed were hindering the realisation of an 'effective' and 'child-centred' system. This included the 'risk' associated with the social worker's discretionary space, leading managers to restrict, and practitioners to minimise, opportunities for frontline discretion. It was on this basis that Munro called for reform of the system, so that social workers would be better able and motivated to exercise their discretion in the best interests of the individual child. It is also in these terms that the author set out to explore the degree to which social workers are employing their discretion within the contemporary child protection system. This thesis reports on the results of a qualitative mixed methods case study of one local authority's child protection team. The focus of enquiry pertained to the extent and nature of the discretionary space encountered; whether social workers were willing to employ discretion within different contexts; and the factors that were understood to be impacting upon discretionary space and choice. The research comprised of an iterative design, incorporating focus group, questionnaire, interview, observation and documentary analysis. The main findings were that social workers were experiencing discretionary space in a *de jure*, *de facto* and entrepreneurial sense; that practitioners were more likely to choose to exercise their discretion within the managerially endorsed space; and that a series of systemic factors were continuing to impede both the opportunities for, and propensity to choose, discretion. Ultimately, whilst the research provides some evidence in favour of Munro's image for discretion within the system, the identification of continued barriers leads to the thesis' conclusion that further reform may be required if child protection social workers are to more consistently employ their discretion in the interests of the individual child.

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CHAPTER 1 – INTRODUCTION

1.0 Introduction

The literature concerned with the public service worker's discretion has tended to focus on the extent of their discretionary space to make decisions and take actions independently from other actors (Molander, 2016). The discussion pertaining to England's statutory social workers is no exception (see Chapter 2). However, within the social work literature, a dichotomy has emerged. For example, there are those who argue that the 'political' and 'human' tensions inherent within statutory social work provision means that the discretionary space of the practitioner is inevitable (for example, Lipsky, 1980; Baldwin, 2000). Alternatively, others assert that discretionary space has been 'curtailed' in the wake of the managerialisation of statutory social work departments (for example Howe, 1986; 1991).

Similar themes prevail in commentary pertaining to statutory child protection social work, most recently brought forth in the Munro Review of Child Protection (2010b; 2011a; 2011b). Here, Munro, in echoing previous assertions that discretionary space has been 'ero[ded]' (Munro, 2005: 13), positions the lack of space and value placed in social worker discretion as a most pressing challenge facing the English child protection system; limiting its ability to operate 'effective[ly]' in the best interests of the individual child (Munro, 2011b: 23). A more 'child-centred' system (p. 1), she asserts, would place better value in, and thus enable, the discretionary space of the social worker.

It is here that I locate my research aim of exploring the *extent to which frontline statutory social workers are employing their discretion, in the post-Munro Review world of child protection*. However, within this exploration, I look to expand the enquiry beyond notions of discretionary space in the binary sense and, aided by an empirical framework developed from the wider social work literature, I consider how discretionary space changes according to the context and characteristics of the social work task.

What is more, I look to develop the level of understanding as it pertains to the role of agency within the social worker's discretionary behaviour. Recognising the social worker's ability to choose whether, or not, to employ discretion, I explore social worker *willingness* to use discretion in different circumstances, and the factors that influence this willingness.

Further, and true to my critical realist underpinnings (see Chapter 3), I seek to identify some of the mechanisms, present in the micro, macro and meso environments, that impact upon both the discretionary space and willingness of the social worker. I then discuss the implications of these findings in terms of Munro's conceptualisation of a more 'child-centred' and 'effective' system.

1.1 The structure of the thesis

The remainder of this chapter is concerned with defining 'discretionary space' (Section 1.2); positioning the 'politics of outrage' as the foreground to the Munro Review (Section 1.3); identifying the pertinent findings and recommendations that emerged from the review in respect to social worker discretion (Section 1.4); and,

in so doing, setting out how my research focus developed, and thus identifying ‘why this study, why now?’ (Section 1.5).

In Chapter 2, I provide a review of the literature concerned with discretionary space in an English statutory social work context; developing an empirical framework to guide my own study; whilst explicating the ‘knowledge gap’ regarding the contemporary space available to, and behaviours of, England’s statutory child protection social workers.

Chapter 3 comprises the ‘methodology’ chosen to undertake this study. Here, I justify the chosen methods of data collection and analysis in the context of my own ontological and epistemological positioning. In addition, I reflect on some of the challenges, but also the advantages, brought forth by my ‘intimate insider’ position on the team being studied.

Chapters 4 to 6 constitute the ‘research findings’ setting out where the social workers had, and did not have, discretionary space, and indeed, the type of space encountered (Chapter 4); the factors that impacted upon the social workers’ willingness to employ discretion – including the contexts in which they were generally more or less willing (Chapter 5); and the mechanisms identified as impacting upon both the social workers’ space and willingness to employ discretion (Chapter 6).

Within Chapter 7 I discuss the research findings in the context of the wider literature, particularly as they pertain to the Munro Review of Child Protection.

Here I consider the evidence of change relative to Munro's recommendations for reform, and argue on this basis, that further reform may be required if we are to achieve the more 'child-centred' and 'effective' system that Munro had envisioned.

In Chapter 8 I conclude the thesis with a summary of the preceding chapters, considering the limitations of my study, and the implications for future research and practice.

1.2 Defining 'discretionary space'

In my review of the social work literature (see Chapter 2) I found a tendency not to define '*discretion*', despite it often being *the* central concept in the discussions and analysis (for example, Lipsky, 1980; 2010; Howe, 1986; 1991; Baldwin, 2000; Munro, 2004; 2005; 2009). This tendency is generally representative of the wider academic literature (Molander, 2016) but can be construed as problematic in the sense that 'discretion' can take different forms and can mean different things, in different contexts (Evans, 2010).

On this basis, Smith (1981, cited in Evans, 2010) advocates that researchers prioritise their participants' understanding of the concept as the starting point for enquiry (something I accommodate in my research design – see Chapter 3), over any conception of the term in the wider literature. However, in the context of grounding my research focus, I believe that it is important to offer some consideration of the term here, and more so, how we might conceive 'discretionary space' at the frontline of public service provision.

1.2.1 Distinguishing between discretionary space and reasoning

In his book *'Discretion in the Welfare State'*, Anders Molander (2016) applies a critical lens to how discretion as a concept has evolved and can be understood. He reminds us that the origin of the word *discretion* is the Latin word *discretus* 'a form of the verb *discernere*, which means to separate, discern or distinguish' [original emphasis] (Molander, 2016: 7). He cites English philosopher Thomas Hobbes (1588-1679) in stipulating that, on this basis, 'discretion' can be conceived as an "intellectual virtue" ... required when "discerning is not easy" (see Molander, 2016: 9 for an elaboration of this point).

Further, Molander develops Hobbes' notion of discretion as a civil liberty, and introduces the idea that discretion, in one sense, can involve the possession of a 'negative liberty' (Molander, 2016: 9), that is: an 'area for choice and action consisting of those options that are neither forbidden nor prescribed' (p. 9). It affords the bearer a freedom to decide and act without interference by other persons, including external restraint (Molander, 2016), and broadly speaking therefore, to have discretion in this sense is

to possess a restricted and protected space where [there is] a certain kind of liberty to judge, decide and act (p. 9).

This conception compliments other cited definitions of 'discretion' (see for example, Davis, 1969; Jowell, 1973; Galligan, 1986; and Hawkins, 1992), and with it as his basis, Molander (2016) distinguishes between '*discretionary space*' and '*discretionary reasoning*' (Molander, 2016: 4), or to use Robert Alexy's (2002: 393) terms, discretion in a '*structural* sense' and discretion in an '*epistemic* sense'. Such

a distinction, he asserts, is critical in any discussion about how to understand a concept like discretion, and indeed is important to consider when undertaking empirical research on the subject.

He suggests that ‘epistemically’

discretion is a form of reasoning that results in judgments about the properties of various kinds of objects under conditions of indeterminacy (Molander, 2016: 10).

Whereas in contrast ‘structurally’

discretion is the space for decision-making and action-taking on the basis of discretionary judgments (p. 10).

The latter, he proffers, can be understood as an ‘opportunity concept’ (p. 4) – a term adapted from Charles Taylor’s (1985) analysis of negative liberties – that is, it is the opportunity or possibility to act without interference. Alternatively, discretion in an epistemic sense can be considered as an ‘exercise concept’; it is a cognitive activity performed within the discretionary space of professional judgment and decision-making (Molander, 2016).

Whilst the social work literature tends to conflate these two notions (see Chapter 2), the focus of my study lies with discretion in the structural sense of the term; in this regard, it is important to consider how discretionary space is constructed and understood in the context of the public service worker’s role.

1.2.2 'Discretionary space' in the provision of public services

Ronald Dworkin's (1977) book *'Taking Rights Seriously'* is considered seminal in understanding the concept of discretion in spatial terms, particularly for public service workers (Evans and Harris, 2004; Evans, 2010; Molander, 2016). He argues that discretion is not the absence of rules, but rather the 'space' between them; 'it is out of place in all but very special circumstances... only [applicable] in one sort of context' (Dworkin, 1977: 33), specifically 'when someone is in general charged with making decisions subject to the standard set by a particular authority' (p. 31). Thus,

[d]iscretion, like the hole in a doughnut, does not exist except as an area left open by a surrounding belt of restriction. It is therefore a relative concept. It always makes sense to ask, 'discretion under which standard?' (p. 31).

Molander (2016) develops Dworkin's argument, contrasting 'two concepts of holes', each of which can be distinguished by issues of 'entrustment' and 'accountability' that accompany the delegated power of the 'principal-agent' relationship (p. 21-22).

'*Negative liberties*', Molander asserts, are by definition exempt from the demand for accountability, as they are constituted by a freedom to do what one pleases without having to offer justification for one's actions. However, the public service worker, acting as 'agent', is accountable to the 'principal' (the public) and has delegated power to act on their behalf. In this sense they are at the same time both *entrusted* to independently decide and act and can be held *accountable* for their decisions and actions; thus, their 'discretionary space' always holds some level of restriction (Molander, 2016: 21).

As such, the public service worker's discretionary space is better conceived as emerging from '*entrusted relations*' (Molander, 2016: 21), in which, rather than be afforded the type of '*autonomy*' associated with negative liberties, workers encounter different degrees of '*liberty*' or '*freedom*' to decide and act within a belt of restriction – comprising, for example, professional standards, legislation etc – that directs their practice (p. 24).

On this basis, Molander (2016) considers that discretionary space within public service provision is both 'inherently ambiguous and riddled with tension' (p. 23). This is because within the discretionary space of entrusted relations, the public service worker does not have complete license to do as they please, but yet are often afforded an 'open' area to use discretionary power and choose a course of action based on best judgment. According to Molander (2016), this indubitably cultivates 'a tension between liberty and accountability' (p. 24), and it is this tension that has become a specific focus of debates about the value versus the cost of 'street-level' (see Section 2.2) discretion in public service provision (Molander, 2016).

1.3. The 'politics of outrage' as the foreground to the Munro Review

In 1973 seven-year old Maria Colwell was killed by her stepfather. From the subsequent public outcry, and inquiry, England's contemporary child protection system emerged (Munro, 2002; Rogowski, 2010; Parton, 2014).

It has been argued that Maria's case was specifically influential because 'her story was so distressing that it forced itself into public awareness' (Munro, 2002: 41). It is

in a similar context that the origins of the ‘Munro Review of Child Protection’, and my research focus, can be traced.

On 11th November 2008, two men were convicted of causing or allowing the death of a 17-month-old boy in August of the previous year (the child’s mother had already pleaded guilty to the offense). The child, who at that time was only known as ‘Baby P’ so as to protect his identity, but was later identified as Peter Connelly, had been subjected to repeated and prolific abuse and had suffered extensive injuries over an eight-month period prior to his death.

Like Maria some 35 years earlier, the media response was extensive and highly critical of the services involved (Parton, 2014; Warner, 2013; 2015). However, unlike Maria, Peter had been subject of a child protection plan and had received over 60 contacts from related agencies. Thus, the narrative that followed was of a ‘failing’ statutory child protection system (Warner, 2013; 2015). In this context, the issue of child protection became ‘politicized and scandalized to a new level of intensity’ most distinctively by the then opposition Conservative Party, led by David Cameron (Parton, 2014: 69).

Employing a ‘politics of outrage’ (Parton 2014: 79) to critique New Labour’s stewardship of child protection, the Conservative Party utilised several mediums to propagate a message that the system was ‘not-fit for purpose’ and that meaningful reform could only be achieved under a Conservative administration (Warner, 2015). For example, writing in the *London Evening Standard* the day after Peter’s abusers were convicted, Cameron (2008) proclaimed:

It is an *outrage* that less than 10 years after the murder of Victoria Climbié – and more than three decades since the case of Maria Colwell – another child was left to slip through the safety net to their death [emphasis added].

This referenced the case of Victoria Climbié which had also been the subject of a public inquiry only five years earlier – one that had led to a 400-page report with 108 recommendations for child protection reform (see Laming, 2003).

At that time, the Labour Government made the commitment that ‘lessons [had been] learnt from Victoria’s death’ and a similar tragedy would not be allowed to happen again (HM Government, 2003: 26). However, as noted by Cameron, Peter’s case held many of the same hallmarks of ‘systemic failure’. Indeed, the fact that, like Victoria, Peter had been the recipient of services from Haringey Children’s Services Department, which itself had been judged as offering a ‘good’ service to children only months before Peter’s death, was used by Cameron to strengthen his assertion that ‘the system [was] not working’ (Parton, 2014). He continued:

No amount of child protection legislation is a substitute for properly trained and supported professionals.... Social workers who can spend time with vulnerable children and not in front of computer screens collecting data and ticking boxes (Cameron, 2008).

This extract can be understood as an implicit attack on New Labour’s flagship ‘*Every Child Matters*’ Programme (HM Treasury, 2003), implemented after the Laming Inquiry (and enshrined in statute in the Children Act, 2004), but which had become associated with burdensome bureaucracy and social workers spending their time away from children (Parton, 2014; Warner, 2015; see also Wastell et al., 2010; White et al., 2010; Jones, 2014; Shoesmith, 2016).

On this basis, Cameron (2008) called for a reduction in the process-driven and standardised practice of social workers, so that they were not only *enabled*, but *expected* to act in the best interests of the child: ‘common sense’ and ‘responsibility’ would prevail in the ‘memory of Baby P’ he declared.

These themes were echoed in an opening speech to the House of Commons debate on the state of child protection by the then shadow minister for children, Tim Loughton MP. Indeed Loughton (HC Deb 3 Feb 2009 vol 487: c767-772) cited ‘the [Labour] Government’s obsession with bureaucracy’ and claimed that social workers were existing in some ‘bureaucratic nightmare... shackled to computers, paperwork and rigid procedures’.

More explicitly decrying the New Labour reforms, Loughton (2009) suggested that they were ‘undermining the effectiveness of the child protection system’ (HC Deb 3 Feb 2009 vol 487: c766), qualifying his statement with reference to the Director of Haringey Children’s Services Department’s explanation that with regards to Peter Connelly’s case, ‘her social workers had done their jobs properly, [as] all the procedures had been followed’. Emphasising his party’s dissatisfaction with this explanation, Loughton laments...

Absurdly... we are expected to accept that as long as the right pages in the rule book were followed and the requisite number of boxes were ticked, the system [is] working properly... By the way, a 17-month-old boy had died in horrific circumstances, despite being on the council’s at-risk register and having had contact with various professionals on at least 60 occasions (HC Deb 3 Feb 2009 vol 487: c766).

On this basis, he called ‘on the Government urgently to restore confidence in the system...’ by reducing bureaucracy and thus ‘free[ing] up social workers... to maximise the time available to spend with vulnerable families’ (HC Deb 3 Feb 2009 vol 487: c765).

This became an established and repeated narrative propagated by the Conservative Party in the run-up to the General Election in May 2010 (Parton, 2014). It also became the context within which, only six weeks after their election success, they – along with their Liberal Democrat Coalition partners – followed through on their pre-election pledge to commission a new ‘independent review to improve the child protection system’ (Gove, 2010, quoted in Munro, 2010b: 44).

The review was led by Eileen Munro, Professor of Social Work at the London School of Economics – a qualified social worker in her own right and someone with ‘extensive research experience in child protection’ (Gove, 2010, quoted in Munro, 2010b: 44) and whom had published several peer-reviewed commentaries on the need for reform during New Labour’s tenure of government (see Chapter 2).

Notable in the Secretary of State’s letter of invitation to Eileen Munro – in which he set out the requirements of the review (see Munro 2010b: 44-46) – was the absence of any mention to Peter Connelly, or of those sentiments of ‘outrage’ characteristic of the Conservative’s preceding position. However, common themes were again observed: that ‘the system of child protection [was] not working’ and that ‘social workers [needed] to be free from unnecessary bureaucracy and regulation’; ‘clear about their responsibilities and... accountable in the way they

protect children’; whilst also enabled ‘to make well-informed judgments... in the best interests of [the] child’ (Gove, 2010, quoted in Munro, 2010b: 44).

He requested that Eileen Munro ‘review’ and ‘set out the obstacles preventing improvements and the steps required to improve child protection’ over a ten-month period, culminating in a final report to be published in April 2011 (Gove, 2010, quoted in Munro, 2010b: 44).

Ultimately, this final report was published a month late in May 2011, but by this time Munro had authored a 340-page critique of the English child protection system, highlighting barriers to effective practice, and areas requiring ‘radical reform’ (Munro, 2011b: 13).

In the following section I elucidate the Munro Review’s findings and recommendations in respect to the social worker’s discretionary space, and how discretion in the best interests of the child, became central to the image put forth of a more ‘child-centred’ and ‘effective’ system. In so doing, I will continue to set out and justify my specific research focus. However, here I provide context to this focus by highlighting how the origins of the Munro Review emerged in the ‘politics of outrage’ witnessed in the aftermath of the Peter Connelly case; an ‘outrage’ that, irrespective of the self-serving origins, ostensibly reflected the national feeling following another child death tragedy, and the desire – shared by the author – to ensure that the system entrusted to protect our children is optimised to *reduce the*

*likelihood*¹ that others might be subjected to the type of experiences suffered by Peter.

1.4 The Munro Review of Child Protection

The Munro Review of Child Protection took place between June 2010 and May 2011. Its aims matched the broad remit set out within the Secretary of State's letter of invitation: to identify the range of problems facing the child protection system in England; to analyse those problems and seek possible explanations; and to make recommendations for improvement (Munro, 2010b). The scope and scale of the review and its findings was extensive and comprised of three reports and 340 pages.

1.4.1 Design and methodology

'Part One: A Systems Analysis', was published in October 2010 and aimed to identify the problems the child protection system was facing. The theoretical framework upon which the analysis was based stemmed from an idea that had emerged as far back as the mid-1970s (for example, Pincus and Minahan, 1973; Forder, 1976) but which Munro had been considering for several years (see for example, Munro, 1998; 2005), and had been featured in an article published at the beginning of the same year (see Munro 2010a). In it, Munro argued that a more sophisticated method to review and reform would be to adopt 'a systems approach' (Munro

¹ Despite popular media and political accounts that child harm can be eradicated, this is something that Munro (2004; 2005; 2009; 2010b; 2011a; 2011b) and other social work academics (notably, Ferguson, 2011; Parton, 2014; Jones, 2014) argue is unrealistic, especially given the 'unpredictability' of people.

2010b: 1), so as to ‘avoid looking at parts of the [child protection] system in isolation [but instead] analyse how [it] function[ed] as a whole’ (p. 10).

Munro suggested that the traditional ‘atomistic’ approaches (see Munro, 2010b: 13 for an overview of this concept) had underestimated the complexity of the system and those it purported to serve. Indeed, she argued that previous child protection reforms, whilst well intentioned had led to a series of unexpected consequences and negative ‘ripple effects’ (a concept taken from systems theory – see Munro, 2010b: 47-51), resulting in a system that she observed to be overstretched, over-standardised and overly concerned with defensive practice at the expense of meeting the needs of the individual child (Munro, 2010b).

Munro (2010b) outlined that she would employ systems theory in two ways: firstly to ‘look back’ and understand why and how previous reforms had produced unintended and adverse consequences (see Section 1.4.2); then using this knowledge as a basis to ‘look forward’ and make recommendations for how the system could be better designed to support social workers in the future (p.10).

The ‘Interim Report’, entitled ‘*The Child’s Journey*’, was published in February 2011. The analysis within it sought to articulate how problems identified within the system were impacting upon the ‘child’s journey’ through it (Munro, 2011a: 8). It also set out the ‘characteristics’ of what ‘a [more] effective system’ would look like – with social worker discretion as a central feature – and also the ‘reforms that might help... get closer to [that] ideal’ (Munro, 2011a: 14).

The final report, entitled '*A Child Centred System*' was published in May 2011 and, at 173 pages, was the most extensive. While it revisited the problems identified within the system and described how those problems were being experienced by different stakeholders, its main focus was on proposing solutions. Indeed, it sought to 'set out recommendations that... taken together, help to reform the child protection system' (Munro, 2011b: 5), so it was better able to meet the individual needs of the children it served.

Munro was supported in her data collection and analysis by a personal reference group, comprising ten experienced social workers, judges and academics (see Munro, 2011b: 3). This, in turn, was backed by a multi-agency working group, with representatives from social work, health and the police. The review also drew from the work of six sub-groups, constituting over sixty leading professionals, from academia, social work, the judiciary, policing and health. Munro (2011b: 2) also outlined how the review 'worked closely' with nine local authorities and visited/used as a case study a further eleven, as well as two primary care trusts and two voluntary sector organisations.

The review employed an iterative mixed-method design. Although Munro gathered and analysed quantitative data – specifically around the level of demand being placed on the system (for example, the number of referrals, child protection plans etc) – her focus was on qualitative accounts of the challenges facing the system and ideas for how these could be remedied. To this end she used a mixture of formal (for example, interviews, questionnaires and focus groups) as well as informal (for

example, meetings, emailed submissions and feedback gathered after giving presentations) qualitative methods of data collection.

The extent of enquiry was vast and by the final report, Munro and her review team had spoken with more than 250 individual children, several groups of parents; social workers; social work managers (the exact numbers of which were not specified) and various heads of organisations working as part of the child protection system – for example, The British Association of Social Workers, Barnardo's (a children's charity) and Ofsted (the local authority children's services inspectorate). They had conducted a thematic analysis of over 550 submissions, both written and emailed, and explored the child protection models of several other countries (though these were also not specified), as well as drawing upon the substantial evidence submitted to other public inquiries.

1.4.2 Findings relating to social worker discretion

Whilst the findings to emerge from the three review reports were extensive and covered a myriad of challenges being experienced within the English child protection system, the focus of my research is on the discretionary space and behaviour of the statutory social workers practising within that system. As such, I am concerned with, and will outline here, those findings which have a similar focus to my own, namely, social worker discretion.

It is prudent to note – and I will continue to reference this where applicable – that a number of the assertions made within the review share hallmarks of arguments proffered by Eileen Munro within her earlier writing – see Chapter 2, Section 2.6.2.

The difference being that here, her analysis is informed by an extensive empirical account, provided by those working in, and receiving services from, the system; strengthening the basis for the recommendations that follow.

Munro (2010b; 2011a; 2011b) outlines that both the space for, and value placed in social worker discretion within the child protection system, has been severely constrained (she previously spoke of an ‘erosion’ of discretion – Munro, 2005: 13) over a number of years. This she considers to be problematic for two reasons: Firstly, because it has reduced the system’s ability to be innovative and respond flexibly. Secondly, because by reducing innovation and flexibility the system has become less able to account for, and react to, the individual needs of children whose circumstances do not fit neatly within predefined cohorts. This then heightens the risk that these children will ‘slip through’ the proverbial ‘net’ of protection, and the implication is that, in this context, there is increased risk of tragedies occurring (Munro, 2011a; 2011b).

Explaining how this situation has been able to manifest, Munro (2011b) refers to ‘four driving forces’ of change (p. 14) – presented as historical ‘influences’ in her earlier work (see Section 2.6.2). These are:

- The importance that society has historically placed on children's safety and welfare, and, consequently, the strength of reaction when a child has been killed or suffered serious harm (see also Munro, 2005; 2009)²;
- Society's preoccupation with managing risk, compounded by the limited understanding of the public and policy makers of the unavoidable degree of uncertainty involved in making decisions within child protection, and the impossibility of eradicating risk in this context (see also Munro, 2004; 2005; 2009);
- The tendency of Serious Case Reviews (SCRs) and public inquiries into the harm/death of children to cease investigation at the point of discovering human error, and then rely on hindsight bias to form conclusions that instances of harm were more predictable than perhaps they were (see also Munro, 2005; 2009); and
- The increased demand for transparency and accountability required by the managerialist approach to public service provision which has led to an increase in audit and performance management strategies, including inspection, timescales and targets (see also Munro, 2004; 2009).

² The assertion here does not appear to be that society has not always had some degree of concern for the welfare of children (see Ferguson, 2011; Parton, 2014), but more so, that there has been a growing tendency – certainly, since the 1970s – for high profile cases of child harm to enter the public domain (possibly because of evolving media approaches – see Ayre, 2001; Franklin and Parton, 2001; Parton, 2014; Warner, 2013; 2015) and result in public outcry. The argument is that the weight of this outcry (experienced as 'moral panics' – see Cohen, 1972; Butler and Drakeford, 2003) is said to have had a pervasive impact on the development and evolution of the English child protection system (Munro, 2011c – see also, Parton, 2014).

Subsequently, the cumulative impact, and an ‘unintended consequence’ of these drivers brought about by a series of ‘ripple effects’ (Munro, 2010b: 47), is a system less able to cater for the individual needs of the children that it purports to protect (Munro, 2011a; 2011b). Munro elucidates a number of these ‘ripple effects’ as they relate to the constriction of discretion.

For example, she identifies how an exponential increase in legislation and ‘best practice’ guidance since the 1970s – ostensibly designed to improve practice but with the added aim of ensuring that social work is ‘transparent’ and ‘accountable’ – has contributed to the system becoming ‘over-bureaucratized’ (Munro, 2010b: 18) and ‘over-standardised’ (p. 38). Whilst this echoes previous assertions (for example, Munro, 2004; 2009), here Munro is more explicit in stating that, at a basic level at least, the increased amount of prescription and regulation has limited the discretionary space available to social workers:

The main criticism is that [procedures] have become too extensive and are so dominating practice that space to exercise professional judgment is being severely reduced (Munro, 2011a: 61).

Similarly, Munro develops her account for how a ‘culture of blame’ (Munro, 2010b: 38) has evolved within the child protection system. Like previously (see Munro, 2005; 2009) she asserts that this ‘culture’ is in part a manifestation of the traditional conclusions of local SCRs and national public inquiries, which have opted to blame human error, rather than explore systemic failures, as an explanation for a child being harmed (see Butler and Drakeford, 2003 for wider discussion). However, she also reflects on the role that the media has played in cultivating this ‘culture’;

highlighting its power and ability to influence public and political opinion, and its tendency to perpetuate unrealistic expectations placed on social workers, especially when reporting the circumstances of a particular tragedy (Munro, 2010b; 2011a). The implication is that, against this backdrop, professional discretion has become a 'risky' option:

For some, following rules and being compliant can appear less risky than carrying the personal responsibility for exercising judgment (Munro, 2010b: 6).

In this context, Munro bemoans the climate of 'fear' and 'anxiety' (Munro, 2010b: 17) that, she asserts, has come to exist within the child protection system (see Munro, 2009). However, she develops her discussion to consider also the role that audit, and inspection has played in cultivating this, with reference to the negative consequences associated with a critical external (Ofsted) inspection report – including the prospect of punitive media and political action, often accompanied by a loss of jobs for both senior managers and frontline staff. This she argues, has led to a shift in focus towards preparation for inspection, with an unhealthy concern with evidencing 'compliance' through easily quantified 'output' measures of practice, such as procedures followed, and timescales met (Munro, 2010b; 2011b).

Finally, Munro identifies this inspection 'preparation' as an example of 'defensive practice' behaviour (Munro, 2011b: 20); affirming the inherency of the latter within contemporary social work teams, where practitioners and their employers have succumbed to an environment in which Government prescription,

SCR/public inquiry conclusions and their experiences of the inspection regime, endorse strict adherence to processes as evidence of 'good practice', but where little value is placed in the use of frontline social worker discretion (Munro, 2011b). However, for Munro, this is a misconceived notion and she criticises the 'compliance culture' (p. 107) that has developed from it, suggesting that protecting the professional practitioner and/or organisation has become, at times, a greater influence on practice than the need to help the individual child:

[T]here has been a shift towards defensive practice where a concern with protecting oneself or one's agency has competed, and sometimes overridden, a concern with protecting children (Munro, 2011b: 20).

1.4.3 Recommendations for reform

Munro's image for 'radical reform' entailed shifting the system from one that was 'over-bureaucratised', 'over-standardised' and 'defensive', to one in which social workers would be enabled, encouraged and therefore, motivated to use their discretion in the best interests of the child. Such a system would, she argued, be better geared towards meeting the needs of the individual child, and therefore would be more 'child-centred' (Munro, 2011b: 1) and thus 'effective' (p. 23). As such, within her recommendations for reform, Munro sets out ways in which to improve both the space for, and value placed in, social worker discretion, and I will consider these here, having organised them under the following headings:

- Reduced prescription;
- Moving from a compliance to a learning culture;
- Positive risk-taking in the best interests of the child; and

- More realistic expectations on social workers.

1.4.3.a Reduced prescription

Munro made specific recommendations designed to reduce the level of national and local prescription, and thus also the extent of ‘bureaucracy’ and ‘standardisation’ that she observed to be inherent within the system – the implication being that in so doing, social workers would be afforded more discretionary space to respond to the individual needs of the child (Munro, 2011b).

Nationally, Munro recommended a revision to statutory guidance. Whilst she recognised a continued requirement for national government to provide ‘a clear and regulatory framework’, she called on it to ‘strip away’ much of the ‘unnecessary’ and unhelpful top-down bureaucracy that had become synonymous with child protection; providing a better distinction between rules as opposed to guidance; and delineating the key principles underpinning this (Munro, 2011b: 22).

At a local level, whilst Munro (2011b) recognised the continued benefit of some procedures and guidance – for example, providing the means with which to share knowledge between experienced and less experienced staff – she argued that the ‘proliferation’ of local procedures (which she refers to elsewhere as ‘protocolization’ – Munro, 2004: 1096) had gone too far and needed to be rolled back (p. 40). She called on local providers to review their procedures, and jettison anything that was, on balance, more burdensome than conducive to the best interests of the child, including where unnecessary process encroached into

valuable discretionary space (Munro, 2011b). Where it was decided that procedures should remain, Munro recommended that they be followed ‘intelligently’ (p. 37) – that is, social workers would be encouraged to use discretion if, in a given context, they judged, and could justify, that not adhering to process was in the best interests of the individual child.

Further, Munro (2011b) cited her particular concern for the barriers created by the Integrated Children’s System (ICS) – a nationally prescribed ICT database, with different versions procured and used locally (see Chapter 2, Section 2.6.1) – especially in respect to the prescribed workflow element inherent within many of variants. She lamented the fact that conforming to the different stages of the workflow – along with the expected level of case recording – had become a means of evidencing compliance, which had not only hindered professional discretion, but necessitated that social workers spent most of their time at their computer. Munro stressed the importance of redesign and of local agencies commissioning versions of the ICS that relaxed the burdens of workflow and case recording with the expectation that social workers would be more able to use their discretion in how best to spend their time.

1.4.3.b Moving from a ‘compliance’ to a ‘learning culture’

Munro envisioned that a shift from the defensive ‘compliance culture’ to a ‘learning culture’ would enable a better focus on the best interests of the individual child and would cultivate a greater value being placed on social worker discretion in achieving those interests.

One area targeted for reform was the approach to external inspection. Munro (2011b) recommended 'modify[ing]' the Ofsted-managed inspection system so that it would 'drive child-centred practice and improve outcomes for children' (p. 46). This could be achieved by changing inspection arrangements so that they were carried out on an 'unannounced' basis, thereby 'minimis[ing] the bureaucratic burden' brought about by a culture of 'inspection preparation' (p. 46).

Furthermore, Munro (2011b) advocated changing the focus of inspection so that it better 'enable[d] and encourage[d] professionals to keep a clear focus on children's needs' and to exercise their discretion in how best to meet these needs (p. 39). This could be achieved by inspectors looking beyond those easily quantifiable 'output' measures which had become associated with inspection, to focus instead on the ability of frontline staff to use their discretion to improve 'outcomes' for children. The implication is that if inspectors were also interested in evidence of the appropriate use of discretion, then there would be more value placed in it at a local level, and thereby more motivation to sanction/engage in its use.

1.4.3.c Positive risk-taking in the best interests of the child

For systems to be more 'child-centred', Munro (2011b) stressed that both employers and social workers needed to reject the defensive approach to risk and engage in positive risk-taking when it was judged to be in the best interest of the child. She asserted that practitioner discretion lay at the heart of this.

To this end, Munro (2011b) recommended that employers incorporate a series of 'risk principles' into local social work policies, and that these should 'underpin practice' (p. 107). These 'risk principles' had been adapted from the Association of Chief Police Officers 'Statement of Risk Principles' (see The College of Policing, 2013 for a full account), and set out the specific expectations both for social workers and employers around risk taking. Of particular note for this thesis:

- Principle 1: The *willingness* to make decisions in conditions of uncertainty (i.e. risk taking) is a core professional requirement for all those working in child protection [emphasis added] (Munro, 2011b: 43).
- Principle 10: Those working in child protection who make decisions consistent with these principles should receive the encouragement, approval and support of their organisation (Munro, 2011b: 44).

1.4.3.d More realistic expectations on social workers

However, Munro (2011b) recognised that in order for employers and social workers to view discretion as less 'risky', action was required to readdress the climate 'fear' and 'culture of blame' that, she believed, had become inherent within the system. Indeed, she recommended a concerted national 'programme of action' designed to improve public understanding of child protection social work and its complexities, assigning roles to several bodies (p. 121).

For example, Munro (2011b) recommended that a College of Social Work (recommended by the Social Work Task Force, 2009) should take a lead role in supporting social workers, their employers and the media to improve collaborative working around the promotion of positive news stories, and how to effectively respond to high profile incidents.

This would be aided by Local Authority Press Teams, who would take a lead on reporting success stories within their localities; as well as a newly created national 'Chief Social Worker', tasked with building relationships with journalists and editors, so as to become a trusted and reliable source offering balanced accounts about social work practices, especially after high profile incidents (Munro, 2011b).

Importantly, Munro (2011b) also placed great emphasis on the responsibilities of journalists and editors to report more accurately when covering cases with child protection concerns. She advised that it was their duty to 'help society to understand more about what child protection work entails' (p. 124) and urged them to question the impact of their reporting on the wider system, and whether a particular story – or the approach they took to it – was really in the best interests of vulnerable children and the wider public.

Likewise, Munro (2011b) called on public figures (including local and national politicians) and other professionals involved in child protection (for example, police, health and education) to provide thoughtful, calm and non-reactive responses

when high profile incidents occurred. This would help to avoid a sense of scandal and quell the desire for knee-jerk reactions, which, she argued, had historically led to limited conclusions and ill-designed reform.

1.4.4 The need for ‘regular reviews of progress’

Munro (2011b) also emphasised the importance of reviewing the changes being made within child protection, and the extent to which her more ‘child-centred’ and ‘effective’ system had been realised. She called for ‘regular reviews of progress’ in the form of follow-up research which would look specifically at

the extent to which the changes are being implemented, any barriers to implementation and whether the reforms are having the desired impact on improving outcomes for children and on the workforce (p. 22).

It is in this context that I locate my own research piece; setting out below *‘why this study and why now?’*

1.5 Rationale for research – why this study and why now?

Here I locate my research focus in the context of my own, rather reluctant, passage into child protection social work practice. I emphasise the importance of the Peter Connelly case and its coverage as a contributor to this reluctance, but also as a precursor to what became my fascination, as a newly qualified practitioner, with the Munro Review, its findings and recommendations. I set out how this fascination, in combination with my early practice experiences, led me to my specific research focus, and in so doing, I outline the value of this study at this moment in time.

At the time of submitting my thesis proposal, and indeed for the majority of my 'PhD journey', I was a practising social worker in a local statutory child protection team (it is only towards the end of my PhD studies that I have made the transition into academia). However, this had not been by design. Indeed, as many 'second generation' social workers will attest, having 'grown-up' in a household with practising social workers and witnessing the tendency of work-life to encroach into home-life (although I believe my parents were generally very skilled at navigating this terrain), I was all too aware of, and keen to avoid, the level of stress and pressure that I observed a career in social work to bring. Thus, on completing my undergraduate studies in 2005, whilst I wasn't sure what my career would be, I was sure that it wouldn't be in social work.

Hence, it was somewhat of a surprise when, in September 2008, I returned to University to begin my social work studies, and take my place in what is now affectionately, but perhaps ironically, referred to as 'the family business'. The date is significant. Indeed, only six weeks into my social work course, the Peter Connelly (or 'Baby P' as he was then known) news story entered the public domain. The subsequent attack on social workers by the media and general public (see Jones, 2014; Warner, 2013; 2015; Shoesmith, 2016 for an account) – personally experienced through the medium of BBC 5Live 'phone-ins' – formed the backdrop to, and persisted throughout, my social work course. (Nigel Parton [2014] notes that one of the defining characteristics of the Peter Connelly case was how long it maintained a high profile in the media and public consciousness, and indeed, that it

continued to be the subject of in-depth coverage and political debate up until – and I would argue, beyond – the General Election of May 2010.)

My experiences of this coverage, and my continued desire to avoid the life of ‘stress’ and ‘burnout’ which testimonies – including those of friends, family and colleagues – informed me was symptomatic of the child protection field, meant that when I qualified as a social worker in July 2010, I pursued my first position of employment with the adopted mantra of ‘*anywhere* but child protection’. However, perhaps also partly because of the recency of specific negative media coverage and political comment, I found, initially to my dismay, that the only job vacancies available to me, were indeed in child protection. (By way of example, I recall vividly a conversation with the Assistant Director of my final placement authority, who, when I made the case to remain on her ‘Looked After Children’ Team, advised me: ‘sorry Ciaran, there are no job vacancies on the LAC Team, but don’t worry, we *always* have vacancies on the Child Protection Team’.)

Thus, I began a position on a statutory child protection team – somewhere that I would remain for 7 years – in September 2010. The date is again significant, as within four weeks of my start, the first Munro Review report: ‘Part one: A Systems Analysis’ (Munro, 2010b), was published. This report and its companions, ‘The Child’s Journey’ (Munro, 2011a) and ‘A Child-Centred System’ (Munro, 2011b) became key texts for me in my early years within the profession (indeed, I read each report several times during this period). Their allure lay not only in the way that Munro was able to bring forth those reasons which, on reading, I realised had

contributed to my initial aversion to becoming a social worker, and indeed, my total trepidation at the prospect of child protection practice; it was also her ability to articulate these as issues within the system, issues that had been played out so publicly in the Peter Connelly coverage, and which I myself was now experiencing in my own practice; further, it was that her conclusions were empirically based and informed by the testimonies of those working in, and receiving services from, the child protection system.

As such, Munro's findings and recommendations resonated with me as a practitioner, but specifically her assertion that a more 'effective' system, could be achieved by enabling social workers to employ their discretion in deciding/actioning the best interests of the individual child.

Ultimately, I submitted my thesis proposal in the Spring of 2012 having then recently read Munro's (2012) 'Progress Report'. Within, she had commented upon the degree of change achieved during the first year following the publication of her final review report, as well as the potential obstacles to further realising the level of reform that her review had envisaged. The importance of improving the 'space' and motivation for social workers to employ discretion in responding to the 'variety of needs of children' (p. 8) was again central to the discussion. However, I was struck by the absence of enquiry which sought to explore and report on the degree to which this element of a more 'child-centred' and 'effective' system had been realised.

Thus, within my submission to the University, I argued for the value of an empirical enquiry exploring the 'extent [to which] frontline statutory social workers [are] employing their discretion, in the post-Munro Review world of child protection'. I suggested that such an enquiry would offer valuable evidence to any further appraisal of 'progress' of the Munro recommendations and would thus make an important contribution to the knowledge area.

It is within this context that I set forth the rationale for my research, and specifically 'why this study and why now?'.

In the next chapter, I will identify and review the literature pertinent to my focus on the frontline statutory social worker's discretionary space.

CHAPTER 2 – LITERATURE REVIEW

2.0 Introduction

My specific focus in carrying out this literature review is the structural discretion (discretionary space) of England's statutory social workers (i.e. their freedom in decision-making and action taking) and less their epistemic discretion (i.e. their discretionary reasoning) (see Section 1.2.1). As described, this focus arises from my interest in the findings and recommendations pertaining to social worker discretion made by Eileen Munro in her review of the English child protection system (Munro, 2010b; 2011a; 2011b). However, in commencing my research I was unaware of the body of literature that engaged specifically with the concept of social worker discretion in the broader sense, nor indeed with that literature (beyond Munro's formal 'review' reports) that dealt with the concept of discretion in the narrower context of child protection. Thus, from September 2012 I have been engaged in a structured and transparent literature search.

Accepting that literature databases operate differently, and with a desire to reduce potential for the omission of pertinent texts, I applied the same open-ended search criteria to four database search engines, specifically: *Applied Social Sciences*; *Scopus*; *Social Care Online*; and *Web of Science*. Initially starting with the criteria that the title, abstract or key words included the term '*discretion*' I returned over 15,000 results. When this was further refined to also include the criteria '*social work**' this reduced the number to 173. However, as I developed my understanding of the different iterations of '*discretion*' within the literature, I repeated the search

but replaced the term '*discretion*' with '*judgment*', '*autonomy*', '*liberty*' and '*freedom*'. These different iterations produced a further 1,644 results (see Table 1).

Finally, I further refined the search with the inclusion of the criteria '*child**' (in reference to my focus on child protection), which reduced the number of results to 394 (see Table 1). The publication data (including abstracts) for each of these 394 were exported, allowing me to undertake a manual review of each source. Where I found an example of literature or author that I considered to be particularly applicable to my area of enquiry, I highlighted it, and expanded my search strategy to include forward citation searching, and a review of the authors' other published works.

Table 1. Literature search combinations and results

| Search terms | Number of returns |
|--|-------------------|
| 'Discretion' | 15,176 |
| 'Discretion' + 'Social Work*' | 173 |
| 'Discretion' / 'Judgment' / 'Autonomy' / 'Liberty' / 'Freedom' + 'Social Work*' | 18,017 |
| 'Discretion' / 'Judgment' / 'Autonomy' / 'Liberty' / 'Freedom' + 'Social Work*' + 'Child*' | 394 |

During the manual review of the publication data, I further sorted, refined and focussed the literature through the application of three specific exclusion criteria. The first cohort of texts to be discarded were those where, despite the inclusion of the term '*social work**' within the search criteria, I found the focus to be on only non-social work professionals (for example, police, probation, teachers, nurses).

Secondly, I excluded those texts which were only concerned with social workers practising in a non-statutory context (i.e. working in the voluntary, charitable or criminal justice sector). Similarly, I excluded those in which the focus was only on social workers practising in a statutory context of a country other than England (including Europe, USA and other parts of the UK – i.e. Scotland, Wales and Northern Ireland). Where I identified literature in which the focus included statutory social workers along with other public service professionals; which considered social work in both a statutory and non-statutory context; or which discussed statutory social work in England as well as another country/countries; I judged the merits of inclusion on the basis of potential value in contribution to my framework for enquiry.

The application of these exclusion criteria filtered the list of applicable texts down to 67. In the final stage of refinement, I resolved to analyse this literature in more detail, distinguishing between that which was concerned with epistemic discretion and that which shared my focus on structural discretion. However, this proved to be the most challenging and time-consuming stage of refinement, as most of the remaining literature did not articulate the exact focus of their discussion/enquiry and indeed tended to conflate the two notions rather than discriminate between them. The literature that ultimately progressed into the final cohort for consideration in my review, were those in which I was able to identify a discernible discussion/finding pertaining to the discretionary space of England's statutory social workers (not limited to the field of child protection).

Following this process of identification, selection and refinement, the remaining literature, that I judged to be most closely aligned to my area of empirical enquiry, constituted three inquiry reports; ten books; fifteen standalone book chapters; and seventeen journal articles, comprising, in total, forty-five individual sources (see Table 2).

Table 2. Sources included in literature review

| Source | Number |
|-------------------------|--------|
| Public Inquiry report | 3 |
| Book | 10 |
| Standalone book chapter | 15 |
| Journal article | 17 |

Employing Wallace and Wray's (2011: 41) 'critical synopsis of text' framework (which encourages the reader to interrogate the source by applying a series of questions – see Appendix 1), I evaluated each, creating a critical comparative summary, from which I identified a cohort of six areas pertinent to my own research:

- Managerialism and managerialisation;
- Street-level bureaucracy;
- Curtailment versus continuation of discretionary space;
- Types of space;
- Choice within discretionary space; and
- Discretionary space in a child protection context.

These areas form the basis of my literature review. Although there is a degree of overlap within and between them, for the purposes of clarity and structure, I will consider each in turn, identifying the pertinent implications for future research and, in so doing, develop an empirical framework for my own study.

2.1 Managerialism and managerialisation

The concept of managerialism and its emergence in the late 1970s as the preferred method of organising and running England's public services (including social work), forms the basis of much of the critical analysis, inherent within the social work literature, concerning the continued discretionary space of statutory social workers (i.e. Howe, 1986; Baldwin, 2000; Evans and Harris, 2004; Taylor and Kelly, 2006; Evans, 2010; Ellis, 2011; 2014; Munro, 2004; 2005; 2009; 2010b; 2011a; 2011b).

The tendency of authors is to retrospectively chronicle the social, political and ideological changes that have arisen since this time and evaluate the impact of managerialism for encroaching into social workers' discretionary space. Given the centrality of the concept within their analysis, it is necessary to provide an overview of these accounts, so as to contextualise the arguments that follow.

As such, this section is divided into four parts. Firstly, I draw from the literature to consider the principles of the pre-managerialist style of public service administration – bureau-professionalism – and highlight the centrality of professional discretion within it. Secondly, I identify the shift to managerialism as being concurrent with an ideological move – specifically, on the part of the UK Government – towards neoliberalism. I then reflect on the contrasting principles of

managerialism and professionalism, the notion that, in the former, it is managers and not professional practitioners who possess the requisite knowledge and skills for implementing statutory policy on public service provision. Finally, I compare two alternative perspectives on the extent to which the 'managerialisation' of social work can be considered a completed process and align these to different conceptions of continued discretionary space for the statutory social worker.

2.1.1 What came before? – Bureau-professionalism as the basis for professional freedom

Rogowski (2010) provides a robust historical account of the changing philosophical influences on social work in England, from the origins of social welfare in the 17th Century to its 'zenith' in the early 1970s (p. 41). The latter he asserts was characterised by the creation of Social Services Departments (SSDs) following the Seebohm Report (1968), with the explicit aim of providing 'community-based... family-oriented social services... available to all' (Cmnd. 3703, 1968: paragraph 2) (see also Harris, 2003).

It is argued that the creation of SSDs was symbolic of the high point of the social democratic consensus (see Seyd, 1987 for a comprehensive account of this concept), emerging after the Second World War, seeking to achieve egalitarianism, whilst eliminating the causes of social inequality via state intervention, predominantly through the provision of welfare (Howe, 1986; Harris, 2003; Harris and Unwin, 2009; Rogowski, 2010). Within the departments, social workers operated within a style of governance, characteristic of the time, that Clarke et al. (1994) label 'bureau-professionalism'; that is, they were 'guided by bureaucratic

rules but had the professional authority to respond flexibly to individual circumstance' (Ellis, 2014: 2273).

Rogowski (2010) elaborates, affirming that bureau-professionalism can be understood in the context of the organising principles of bureaucracy and professionalism of the early SSDs (see also Evans, 2009). He outlines that the departments, whilst situated in the bureaucratic structure of local authorities, were particularly influenced by professional principles of organisation. Here, fellow professionals acted as *supervisors* rather than *managers* per se, and entrusted their social workers, on the basis of their expertise, to exercise a large degree of discretionary freedom in carrying out their work (see also Clarke, 1996; Harris, 2003; Evans, 2009).

Harris and Unwin (2009) further suggest that whilst the 'bureau' element of bureau-professionalism traditionally ensured impartiality through 'administration', in the form of rules and procedures, for a service like social work, where the often-unique circumstances of its service user meant that the straightforward application of rules was more difficult, provision relied on the discretion of professional social workers to decide and action how services were delivered. At the same time, any concern with performance was delegated to the professional element, as social workers were seen to possess distinct skills and knowledge that enabled them to define their own goals and what constituted acceptable practice in pursuit of achieving them (Harris and Unwin, 2009).

Three interrelated types of social worker discretion are suggested to be characteristic of bureau-professionalism (Taylor and Kelly, 2006; see also Ellis, 2011; 2014). *Value discretion* pertains to notions of fairness and justice, and entrusts professionals, based on their professional training, knowledge and experience, to decide and act, according to what they judge to be in the best interests of the individual user. When the professional encounters an unexpected situation, or one too complex for bureaucratic categorisation, they are thus credited to employ two additional types of discretion. These are *rule discretion*, or the ability to interpret and decide a course of action in relation to which rules are applicable and how they should be applied, and *task discretion*, which is the ability to decide and action freely the specifics of how practice tasks are carried out (Taylor and Kelly, 2006).

Ultimately, bureau-professionalism embodied the Fabian model of social welfare that was characteristic of the social democratic consensus (see Rogowski, 2010), at the centre of which was the notion that expertise could be applied through professional discretion to alleviate social problems (Harris, 2003; Rogowski, 2010). However, Fabianist models of welfare became the subject of attack in the aftermath of the 1970s world financial crisis (again, see Rogowski, 2010 for a comprehensive account of this). Simultaneously, the acceptance of the professional as 'expert', and the discretionary freedom that accompanied this acceptance, dissipated in line with the emergence of the neoliberalist ideology of government, with sentiments of anti-welfarism and anti-statism embedded within it (Clarke, 1996; Clarke et al., 2000; Harris, 2003; Harris and Unwin, 2009; Garrett, 2009).

2.1.2 Neoliberalism and changing notions of welfare provision

As Harvey (2005: 2) notes, neoliberalism should be viewed as a 'theory of political economic practices', at the centre of which is the proposition that the advancement of human wellbeing is best achieved by 'liberating individual entrepreneurial freedom characteri[s]ed by strong private property rights, free markets, and free trade'. Furthermore, that it is the state's role to 'create and preserve an institutional framework appropriate to such practices' (p. 2).

The emergence of neoliberalism in the UK is associated with the 'New Right' politics of Margaret Thatcher's conservatism. However, it can be argued that it has been embedded in successive government's policy since this time (Harris and Unwin, 2009; Evans, 2009; Garrett, 2009; Rogowski, 2010). With respect to the provision of welfare, Evans (2009) asserts that neoliberalism was critical of the notion of need that had underpinned professional practice and service provision in the welfare state. He cites O'Brien and Penna's (1998) analysis of the ideas and values that were central to the New Right Administration's (1979-1997) social policy agenda, highlighting a commitment to a more residual model of welfare, based on the assumption that welfare was the primary responsibility of the family and community, and that state intervention should be minimalistic, as it was by essence inefficient, oppressive and debilitating (Evans, 2009).

Certainly, principal neoliberalist thinkers such as Hayek (1960; 1982) and Friedman (1962; Friedman and Friedman, 1980) had argued that the social democratic approach to welfare had eroded the freedom of citizens and required remedying

via 'an injection of market discipline' to promote efficiency, creativity and more effective services (Evans, 2009: 146). Fundamental to this thinking was the notion that the state's reliance on professionals to decide on what citizens needed, and to act on this basis, constituted a mistaken faith in professional expertise and an insufferable exercise of power over those citizens (Evans, 2009). Thus, once in government, the Thatcher administration set about reforming the bureau-professional model of welfare governance in favour of something better aligned to its neoliberal principles (Harris, 2003; Garrett, 2009; Rogowski, 2010).

In what Rogowski (2010: 136) describes a 'prescient essay', Clarke (1996) recounts these efforts, and analyses their impact on the provision of state social work (see also Newman and Clarke, 1994; Clarke and Newman, 1997; Clarke et al., 2000; Harris, 2003; Harris and Unwin, 2009). Three features are particularly important to reference here: 'marketisation'; 'the mixed economics of welfare' and 'managerialisation' (Clarke, 1996: 45-46). The former referred to the 'sponsored development of competition in the provision of welfare services' that, along with the establishment of 'internal markets' within welfare departments, aimed to mimic market relationships (p. 45). These market-making strategies were reflected in the 'mixed economics of welfare', which referenced the sustained effort by government to change the balance of welfare provision towards the independent sector and voluntary/private service providers and the family. However, it was managerialisation – the encroachment of 'New Public Management' business principles into public service provision (Newman and Clarke, 1994; Clarke et al.,

2000) – that had arguably the most penetrating impact upon social work provision (Clarke, 1996; Harris, 2003).

Clarke (1996) described two interrelated phenomena pertinent to understanding managerialisation: the ‘nature of modes of organisational coordination’ – ‘the principles on which organisations are organised and inter-organisational relationships are constructed’ – and the ‘nature of organisational regimes’ – ‘the characteristic patterns of structures, cultures and power within organisations’ (p. 46). He asserted that neither markets nor the mixed economics could run themselves as they needed agents to work; he outlined that the preferred agent of neoliberalist regimes was managers, who embodied the types of knowledge and skills required to ensure the processes ran efficiently. This was in contrast to the professional as the preferred agent of the previous social democratic organisational regime, bureau-professionalism, in which the main mode of coordination had been rational administration and professional discretion (Newman and Clarke, 1994; Clarke, 1996; Clarke et al., 2000; Harris, 2003; Harris and White, 2009).

2.1.3 Contrasting notions of managerialism and professionalism

Several commentators describe the ‘two-waves’ of managerialisation that enveloped public service provision in the UK since 1979. The first being associated with the New Right Administrations of 1979-1997, and the second emerging from New Labour’s modernization agenda. These commentators agree that, during this time, managerialism had become the preferred mode of public service organisational coordination, characteristic of the neoliberal ideology of government

(Clarke, 1996; Clarke and Newman, 1997; Clarke et al., 2000; Baldwin, 2000; Harris, 2003; Garrett, 2009; Harris and White, 2009).

Drawing from the seminal works of Pollitt (1993), Harris and Unwin (2009) identify nine principles underlying managerialism including: 'management' as a 'separate and distinct organisational function'; 'increas[ed] productivity' as the measure of 'progress'; the use of 'information and organisational technologies' to achieve 'increased productivity'; shifting focus from 'inputs and processes to outputs'; and the need to increase 'measurement and quantification' (p. 11).

Clarke et al. (2000: 8) compare managerialisation and managerialism to professionalisation and professionalism, describing them as 'equivalent concepts' but with very different connotations (see also Evans, 2010). For example, *professionalisation* refers to the process by which an occupational group makes claim to a distinct and valuable expertise and uses this as a basis to acquire organisational and social power (Clarke et al., 2000). *Managerialisation*, involves similar processes but is linked to a claim about who holds the right to direct/run organisations (Clarke et al., 2000).

Likewise, both managerialism and professionalism 'define expectations, values and beliefs' and can be thought of as 'normative systems' concerned with what knowledge is deemed to be valuable; who holds that knowledge; and, as a consequence, who has the power to act (Clarke et al., 2000: 9). However, managerialisation has been associated with concerted efforts to subordinate claims of professionalism (Clarke, 1996). This is because, managerialism as an ideology

asserts the 'right to manage'³ (Clarke et al., 2000: 9) thereby embracing managerial power (Harris and Unwin, 2009) as opposed to professionalism where the emphasis is on a professional's power and freedom to decide and act on the basis of their expertise (Evans, 2010).

Lymbery (2004) highlights two interconnected elements of managerialism: the goal of controlling bureau-professional power through regulation and audit, and the requirement for organisations to adhere to what Rogowski (2010: 139) describes as 'processes of self-discipline', through such things as financial rationing, performance targets and increased bureaucracy. It is these two elements that form the basis of much of the literature in making the case for the threat of managerialism to the discretionary space of public service professionals. However, with regard to statutory social work, there are different arguments as to the extent of impact managerialism has on social worker discretion and how far it has advanced into the provision of services.

2.1.4 Domination vs discursive managerialism

As I will outline below, the debate on the extent to which social worker discretionary space exists in contemporary social services departments has developed in the literature since the mid-1980s. Central to the debate is the role managerialism has played in reducing discretionary space, since the peak of bureau-

³ Note: it also led to the view that social services departments needed managers who did not have to have a social work background, as 'good' managers were seen to have transferable skills (Clarke et al., 2000).

professionalism in the 1970s (see Section 2.1.1). Indeed, whilst theorists agree that managerialism has systematically encroached into social work since this time, they disagree on the levels and extent to which it has therefore reduced social worker discretionary space. The opposing views are best understood as the 'domination' and 'discursive' perspectives, as distinguished by Evans (2009; 2010).

The 'domination' perspective considers managers and professionals as two 'distinct occupational groups' (Evans, 2010: 41). To use Evans' (2010) terms, managers are considered to be 'creatures of the organisation' whereas the professional is the worker, whose purpose is to carry out the 'bidding of managers' (p. 41). The manager's commitment is said to be to their employing organisation, rather than the profession from which they may have originated (Evans, 2009) and thus, their primary concern is with achieving the organisation's goals, and in implementing and enforcing top-down policy objectives aimed at achieving those goals (Evans, 2009; 2010).

The position relies on an earlier iteration of Foucault's framework of power, conceiving it in the 'juridico-discursive' sense (Foucault, 1981: 82), as 'external, top-down, law-like domination' (Evans, 2010: 42). It argues that managers have become the all-powerful, whilst practitioners are powerless. Additionally, rather than see professional practitioners as experts in their field, they are considered to be self-interested liabilities, who seek to organise services to fit themselves rather than those whom they purportedly seek to serve. As such, they require direction and control, thus, compelling managers to exercise their authority via strategies of

coercion and control. For example, by using budgets, eligibility criteria, performance indicators, procedures and audit, managers ensured organisational objectives were achieved (Evans, 2009). As such, this position assumes that the move from bureau-professionalism to managerialism as the mode of organisational coordination, is a completed process and that social worker discretionary space has been 'curtailed' (see Section 2.3.1).

The discursive position distinguishes itself from the domination perspective on a number of points. The first being that it sees the encroachment of managerialism into social work departments as an ongoing, rather than a concluded process. Secondly, whilst it accepts the power of managers in line with the increasing managerialist discourse, it relies on later iterations of Foucault's framework, asserting the importance of freedom and agency, and sees power as something more complex and multi-dimensional, fragmented and dispersed; conceiving it as being everywhere and at all levels of the organisational hierarchy (Evans, 2010).

On this basis, the discursive perspective does not see professional practitioners as powerless or passive, but as able to resist forms of managerial control in specific contexts. Likewise, it does not accept that managers are only concerned with/committed to the objectives of the organisation, but that they retain a professional identity and commitment of their own, which can inform their decisions and the actions that they take. The position does not consider managers and practitioners as either distinct nor homogenous, but rather 'actors that operate within fields of crisscrossing forces' (Evans, 2009: 150).

Indeed, the discursive perspective is associated with *continuation*. It assumes a continued role of professionalism within the provision of social work. It asserts that 'managerialism has not replaced bureau-professionalism', but instead a 'continuation' of both professional concerns and practices persist (Evans, 2009: 150), albeit in conjunction with an 'increasingly powerful managerialist discourse' (Evans, 2010: 41). In this sense, managerialism is conceived as only 'another organisational stratum' upon bureau-professionalism, 'it may be thick or thin, robust or subject to extensive erosion in particular circumstances' (Evans, 2009: 150). Thus, the discursive perspective is also associated with notions of continuation of social worker discretionary space (see Section 2.3.2).

Later in this review, I will consider how these different manifestations of managerialism have contributed to the contrasting positions of curtailment versus continuation of statutory social worker discretion, and the implications for future research that emerge from this debate. However, it is first necessary to give an account of a second theme, one that is also integral to the construction of these contrasting positions. This is the theory of Street-Level Bureaucracy (Lipsky, 1980; 2010) and the tendency within the literature to employ this as an analytical platform for exploring statutory social work discretionary space.

2.2 Street-Level Bureaucracy

Michael Lipsky's theory of Street-Level Bureaucracy (1980; 2010) forms the analytical basis for much of the social work literature on discretion (For example, Howe, 1991; Ellis et al., 1999; Baldwin, 2000; Evans and Harris, 2004; Taylor and

Kelly, 2006; Evans, 2010; 2011; 2015; 2016; Ellis, 2011). As Smith (1981: 48) notes, this is due to the fact that Lipsky provided a group of hypotheses about discretion that enable transition between 'theory to data and back again', an essential component in analysing the concept (Evans, 2010).

Whilst the value of Street-Level Bureaucracy Theory [SLBT] to the understanding of contemporary social work teams in England has been disputed on the basis of the time, location and context of its original conception (see Section 2.2.2), theorists have nevertheless placed the principles of Lipsky's theory at the centre of empirical and theoretical discussions. From these have emerged particular implications pertinent to my own enquiry, thus further emphasising its value for consideration here.

On this basis, this section is divided into two parts, the first of which provides an overview of Lipsky's concept of discretion within Street Level Bureaucracy Theory (SLBT), with a particular focus on his explanation for the 'inevitable' discretionary space of the worker. The second considers some of the emerging critique of his theory and the implications for future research into discretion.

2.2.1 SLB and the 'inevitable' discretionary space of the 'street-level' worker

Hupe et al. (2015) track the origins of 'Street-Level Bureaucracy', recognising that the term was first 'coined' (p. 3) by Michael Lipsky in his article '*Toward a Theory of Street-Level Bureaucracy*' (Lipsky 1971). However, it should be noted that the works of Prottas (1978; 1979) and Weatherly (1979) were also integral to the construction

of 'Street-Level Bureaucracy' as a concept (Hupe et al., 2015), and indeed, that it appears in literature in different forms including: 'point of entry' (i.e. Hall, 1974) and the 'public encounter' (i.e. Goodsell, 1981). That being said, the focus for this review will be Lipsky's (1980; 2010) book '*Street-Level Bureaucracy: Dilemmas of the Individual in Public Services*' which is considered the seminal text concerning SLBT (Hupe et al., 2015). It is in this text that Lipsky formulates his concept of discretion, arguing for the 'inevitable' discretionary space of the 'street-level bureaucrat' (Lipsky, 2010: 15).

Lipsky's conception of discretion arises from his analysis of the type, nature, and hierarchal control of the work undertaken by frontline or 'street-level' practitioners administering public services in North America in 1960s and 1970s. Whilst his analysis developed in the context of the study of American urban politics (Lipsky, 1971; 1976; 1980; Hawley and Lipsky, 1976), his aim was to transition away from the then traditional approach of study – emphasising formal structure of organisations – and to explore the work conditions of policy implementation. Evans (2010) highlights that Lipsky's writing was grounded in a strand of post war analysis of public service bureaucracies which considered the relationship between control and discretion on the frontline of provision. This came from the observation that public service workers were making policy on the frontline, despite extensive mechanisms designed to control their behaviour (Prottas, 1978). Lipsky's (2010) starting point was a belief that this paradox could be explained by the ambiguity of public policy, and the need to employ discretion in its interpretation, prioritisation and application.

The nature of the organisation and the role within the organisation are both central to Lipsky's conception of street-level discretion. He defines a 'street-level bureaucracy' as a public, rather than private, organisation that offers services to citizens or communities via 'street-level bureaucrats'. These he describes as those workers who 'interact directly with citizens in the course of their jobs', at the frontline – or 'street-level' – of public service provision, and who 'ha[ve] substantial discretion in the execution of their work' (Lipsky, 2010: 3). Lipsky (2010: xvii) argues that as well as police officers, teachers and judges, 'all...[statutory] social workers... are [thus] street-level bureaucrats without further qualification'. Indeed, he considers the child protection social worker as 'the ultimate street-level bureaucrat' given the need for direct human interaction in their work, and the requirement for discretion in how to help families in crisis and how to protect children at risk of harm (Lipsky, 2010: 233).

Lipsky's central tenet is that street-level discretion arises because street-level bureaucracies are difficult organisations to work in, characterised by resource deficit and policy confusion. As Evans (2010: 13) notes:

This environment of uncertainty and scarcity is placed at the centre of Lipsky's understanding of the dilemmas and tensions that impact on street-level bureaucrats' work and extend their discretion.

Uncertainty, Lipsky argues, emerges as policy objectives are often simultaneously ambitious, vague and conflicting or else contradictory. Meanwhile, demand for services typically outweighs supply. Resource sparsity is not only understood in terms of restricted finances, but in the context of large (often unmanageable)

caseloads, with limited time availability leading to fragmented contact with service users (Lipsky, 2010). Within this context, street-level bureaucrats are compelled to negotiate both policy and resources, making sense of what their work should entail whilst prioritising some policies over others; deciding between contradictory policies; and pragmatically ignoring those which appear impractical in a resource sense (Lipsky, 2010).

This constitutes the ‘political’ element of public service provision (Lipsky, 2010: 237), and here Lipsky asserts the street-level bureaucrat has ‘considerable discretion in determining the nature, amount and quality’ of the services that they provide on behalf of their organisation (p. 13). Furthermore, the ‘human dimension’ of their work – that is the complicated, unpredictable and varied nature of the individual citizen – requires ‘complex tasks for which elaboration of rules, guidelines, or instructions cannot circumscribe the alternative’ (p. 15). It is the street-level bureaucrat’s duty as a ‘public service worker’ to

translate... unique aspects of people and their situations... into courses of action responsive to each case... [albeit] within [the] limits imposed by their agency (p. 161).

Lipsky asserts that in a context where the effective provision of services relies on the practitioner to reconcile vague, complex and contradictory policy with both resource sparsity and unpredictable/unexpected situations, their discretionary space is *inevitable*. However, this is not a situation that sits comfortably with him – a point often missed in evaluations of his commentary (Taylor and Kelly, 2006). For example, he is concerned with what he views as the tendency of street-level

bureaucrats to either maximise or minimise their discretion as they adapt to the tensions of their working environment. In one extreme, this involves denying their own freedom to use discretion, and rigidly sticking to rules and procedures, in order to acquire a defensive shield against potential blame (Lipsky, 2010). In another, workers are observed to manipulate their discretionary power to circumvent interference from their managers, thereby acting beyond the formal discretionary space afforded to them (Lipsky, 2010).

Lipsky argues that this is problematic for SLB managers, whose primary concern is to ensure a consistent delivery of top-down policy. This, he asserts, manifests into efforts to increase control of street-level bureaucrats by reducing their discretionary space. In this sense he sees managers and street-level bureaucrats as acting in opposition, with the latter resisting efforts to control their discretionary space, as a means of coping with the tensions inherent within the SLB environment (Lipsky, 2010). Indeed, irrespective of management motivations and action, it is these tensions – particularly the enduring political and human elements – which means discretion at the street-level remains inevitable, as it serves as a prerequisite to the effective delivery of public services (Lipsky, 2010).

2.2.2 Critique of Lipsky and SLBT's continued relevance to statutory social work

Tony Evans (2010; 2011; 2015; 2016) offers a critical examination of SLBT. He argues that, despite its enduring contribution to the study of public policy and as a starting point for understanding the discretionary space of the public service worker (Evans, 2010), the theory in its raw form 'constrains the examination of

discretion and limits the exploration of the location, construction and deployment of discretion in welfare services' (Evans, 2015: 279). Evans attests that SLBT does not sufficiently account for the role that the occupational setting, status and notions of professionalism play in how discretion is used in practice.

Specifically, Evans (2015) questions Lipsky's assumption that all 'street-level' workers are the same, asserting that street-level bureaucracies can be differentiated according to political, economic and policy contexts, providing a spectrum of roles. Furthermore, Lipsky's conception of what constitutes a 'professional' is too ambiguous. Evans (2010) observes that in the broad sense the concept 'professional' refers to a cohort of skilled, often white-collar workers. However, in a more restricted and technical sense it can be understood in terms of holding particular esoteric knowledge, attributes, status and power (Evans 2011). Lipsky, appears to conflate these contrasting conceptions into a singular notion.

On this basis, Lipsky's assumptions and focus on identifiable tendencies in the street-level worker's use of discretion is reductionist (Evans 2015). It underplays the influence of other important factors, which, in specific contexts, may afford greater or lesser discretionary space to the street-level worker (Evans, 2010; Evans 2011). For example, the 'ability to appeal to an idea of professionalism and associated ideas of professional discretion' (Evans, 2015: 283).

Evans (2010: 17) also criticises Lipsky's assumption that it is only street-level workers that distort policy and his failure to acknowledge that policy outcomes are 'the aggregate of activity within the organisation' – as much the result of manager

discretion as the street-level practitioner's (see also Scourfield, 2015; Evans, 2016; Hupe et al., 2015). This is part of a broader criticism, namely that Lipsky is too rigid in his understanding of the role of managers (Evans, 2010; 2011; 2016), seeing them only as 'obedient agents' of the organisation (Evans, 2010: 21):

A problem... with Lipsky's analysis is that it gives insufficient attention to the role of managers as actors [themselves] with significant discretion in the policy implementation process (Evans, 2016: 603).

Certainly, SLBT fails to consider how a manager's values, ethics, sense of professionalism and their own scope for discretion impacts upon the discretionary space afforded to the street-level worker (Evans, 2010; 2011; 2015; 2016). Evans (2010; 2011; 2016) argues that, contrary to SLBT, managers and street-level workers can share similar interests and concerns, and indeed often have comparable professional identities and goals. This can result in 'cooperation and collusion... in the pursuit of shared professional [or organisational] commitments' (Evans, 2010: 27), thus, granting – rather than restricting – specific discretionary space to the street-level worker (Evans, 2010; 2011; 2016) (see Section 2.4.2).

Hupe et al. (2015) agree with this element of Evans' analysis, but also suggest that Lipsky is not inclusive enough in his application of SLBT, citing his apparent reluctance to apply the theory to 'all relevant public-sector interfaces' (p. 3). They argue that Lipsky should have more critically explored the roles to which SLBT might apply and the type of tasks which can afford discretionary space. However, the authors agree with Lipsky, in that SLBT is particularly pertinent to understanding the practice behaviours of certain professional workers (in the specialised, technical

sense of the term), including social workers. This is a position shared by others, where the particular focus is England's statutory workforce (for example, Ellis et al., 1999; Baldwin, 2000; Ellis, 2011; Scourfield, 2015).

In this regard, Evans and Harris (2004) argue that one of the reasons why SLBT remains popular and relevant is because the environmental conditions described by Lipsky (2010) continue to endure in contemporary public service departments (see also Ellis et al., 1999). Indeed, though Lipsky's theory is based on his research into American public services in the 1970s, his account of those organisations at the time is argued to be similar to more contemporary social work departments in England. This is particularly true in terms of resource shortfall, high demand, and of the managerial factors such as control, surveillance and coercion, and the language of eligibility, performance monitoring and measuring outputs (Baldwin, 2000; Evans, 2010).

For others, the contemporary relevance of SLBT is aligned to the managerialisation of social work departments and the continued existence of bureau-professionalism (Howe, 1991; Taylor and Kelly, 2006). Indeed, for some, SLBT is symptomatic of the bureau-professional era, an era, they argue, which is in the past, thus limiting Lipsky's ongoing relevance to the field of statutory social work (Howe, 1991).

In the next section, I consider how these arguments underpin the principles of the 'curtailment' perspective. Here however, it is pertinent to emphasise how, in the second iteration of his book, Lipsky (2010) in responding to this critique, accepts that neoliberalism and managerialism have encroached into contemporary public

service provision, but argues that the defining characteristics of street-level bureaucracies remain, and as such SLBT serves as a cogent starting point for exploring statutory social workers' discretionary space and behaviour. This assertion appears to have little opposition in the social work literature (for example, Ellis et al., 1999; Baldwin, 2000; Evans and Harris, 2004; Taylor and Kelly, 2006; Evans, 2010; 2011; 2015; Ellis, 2011). Indeed, even those more vocal critics of SLBT's limitations assert that Lipsky's analysis remains useful due to its strengths *and* weaknesses, and in that its hypotheses about discretion enable the move between theory and inquiry (Evans, 2010).

2.3. Curtailment versus continuation of discretionary space

The third area pertinent to my own study links to the previous two and pertains to whether or not statutory social workers continue to experience discretionary space within their day to day practice activities. This binary focus forms the basis of much analysis and discussion within the literature (for example, Howe, 1986; 1991; 1996; Baldwin, 1998; 2000; Ellis et al., 1999; Evans and Harris, 2004; Taylor and Kelly, 2006; Evans, 2009; 2010; Ellis, 2011; 2014), and from it, two polarising viewpoints appear: either that social workers continue to have opportunities for discretion (the *continuation* stance) or that they do not (the *curtailment* stance).

This section is divided into three parts. Firstly, I will identify the core features of the curtailment argument with a review of the work of its principal protagonist, David Howe. Here I will demonstrate how the position manifests from an adherence to the domination managerialism perspective and that given this, it argues against the

continued relevance of SLBT for understanding the discretionary practices of contemporary statutory social workers. Secondly, I will compare the curtailment argument to the alternative *continuation* stance, by reviewing the work of *its* principal protagonist, Mark Baldwin. Here I will emphasise Baldwin's affirmation of the continued relevance of SLBT and his implicit positioning in the discursive managerialism camp, whilst observing the distinctions between the opposing arguments, and the emerging implications for future enquiry. In the final section, I will consider Evans and Harris' (2004) paper citing the '*(Exaggerated) Death of [Social Worker] Discretion*' which serves as a standalone critical commentary of these opposing curtailment and continuation perspectives.

2.3.1 Principles of 'curtailment': The work of David Howe

David Howe was one of the earliest, and most cited, proponents of the curtailment argument (Evans and Harris, 2004; Evans, 2010). His research published in '*Social Workers and their Practices in Welfare Bureaucracies*' (Howe, 1986), studied the practice of 285 generic social workers and social work assistants, undertaking a broad range of professional tasks in English social service departments in the late 1970s. An ethnographic study, Howe's interest was in understanding the 'organisation of social workers as an occupational group and the nature of their practice' (p. 6). Using qualitative research methods (in the form of questionnaires) he explored the extent of social worker professional power and their ability to control their own work.

Like his proponents, Howe (1986; 1991; 1996) reflects on the high point – or ‘golden age’ – of statutory social work freedom, arising in the new social services departments formed in the wake of the Local Authority Social Services Act (1970) (see also Harris, 1998; 2003; Rogowski, 2010). However, he concludes that within ten years of the formation of these departments, statutory social workers had suffered ‘the proleterianization of the professional’ (Derber, 1982, cited in Howe, 1991: 215), that is, they had been disempowered and lost control over their work; their discretionary space had been ‘curtailed’ (Howe, 1986: 126)

Central to Howe’s argument is his belief that the growing influence of managerialism, which accompanied the ascension of New Right politics and neoliberalism (see Section 2.1.2), had served to shift power and control away from the street-level social worker and towards hierarchal management. He reports that managers within his study were seen to be totally dominant, powerful and in control over social workers and their practice (Howe, 1986; 1991). These managers were observed to be a distinct occupational group from social workers. Their commitment was to their employing organisation and their primary concern was in realising the organisation’s goals. This they achieved by enforcing top-down policy using prescription and standardisation, but at the expense of social worker discretionary space (Howe, 1986; 1991; 1996). In this regard, Howe’s argument is aligned to the domination perspective of managerialism (see Section 2.1.4), and certainly, implicit within his account is that the managerialisation of statutory social work in England is a completed process (Evans, 2010).

Elaborating on the mechanisms of curtailment, Howe (1986), highlights the departmental manager's increasing use of budgets and procedures to establish control, whilst enforcing compliance through surveillance and audit. He correlates this with what he considers to be the 'bureaucratisation' (p. 150) and 'routinisation' (p. 103) of statutory social work, with limited space for, and value placed in, street-level discretion (Howe, 1986; 1991). His observation is that failure to comply with managerial prescription could result in disciplinary action, thus dissuading social workers from resisting efforts to control their behaviour, and inclining them towards conformity (Howe, 1986).

This image of managers as totally dominant, and of social workers as powerless, passive and compliant also forms the basis of Howe's (1991) argument against the continued relevance of Lipsky's SLBT; he recognises that SLBT poses a fundamental challenge to his assertion of curtailment (Evans and Harris, 2004) – although there is some accord on the focus of the manager's organisational commitment and goals (Evans, 2010). Howe (1991) critiques Lipsky's theory on the basis that it offers, in his opinion, a mistaken view of the street-level worker's professional power. He asserts that England's statutory social workers do not have the type of freedom that SLBT would claim. In fact, he concludes that other than in 'matters of style' all of the 'substantive elements' of social work are

determined by others, either directly in the form of managerial command or indirectly through the distribution of resources, departmental policies and procedures (Howe, 1991: 204).

2.3.2 An alternative view: Mark Baldwin and *continuing* degrees of freedom

Mark Baldwin's research is outlined in his book '*Care Management and Community Care: Social Work Discretion and the Construction of Policy*' (Baldwin, 2000). It took place in 1996 and in a further contrast to Howe – whose participants were generic social workers – the focus of his enquiry was a specialised group of adult service 'Care Managers' (including a cohort of 28 social workers). Using semi-structured interviews, he set out to explore their practice behaviour in undertaking needs assessments, seeking to understand if they employed their 'professional discretion' in the implementation of new policy (Baldwin, 2000: 1).

Whilst Baldwin accepts the impact of managerialism in shifting the power and control of the social work task away from the social worker, he takes the stance, in opposition to Howe, that the reach of management control is limited within social service departments. Here, Baldwin implicitly subscribes to the discursive managerialism stance – not seeing social workers in his study as powerless or passive, but as able to offer resistance to forms of managerial control in specific contexts (Evans, 2010).

In this regard Baldwin aligns himself with Lipsky (1980; 2010), asserting that the contexts in which resistance occurs arise from the complexities inherent within the provision of welfare services, especially the 'political' and 'human' elements (see Section 2.2.1). Indeed, Baldwin found that the social workers in his study employed discretion when encountering convoluted policy; when managing disparity between what was possible in a resource context, and what had been promised in a policy

context; and when responding to unforeseen or else unaccounted-for situations.

These he assessed as characteristic of contemporary statutory social work practice, leading to his argument for the *continuation* of social worker discretionary space (Baldwin, 1998; 2000).

The implication is that whilst one might accept the impact of managerialism in shifting the power and control away from the social worker (Howe, 1986; 1991; 1996), that is not to say that the social worker is powerless and without *continued* opportunities for professional discretion (Baldwin, 1998; 2000). Even Howe (1986; 1991) recognises that 'social workers and their work are difficult to fix absolutely' (Howe, 1991: 219). Indeed, he asserts that 'pockets of freedom' are still available to social workers in 'areas which are not wholly amenable to routine and standardised practice procedures' (p. 219). Whereas he underplays the significance of these 'pockets' – asserting that they are limited to negligible 'in situ judgments', costing only social worker time and/or skills, and those practice tasks that have little relevance in a legal or resource sense (p. 219) – the point remains that he, as the principal advocate of curtailment, accepts that opportunities for continued discretion remain, however insignificant:

The style and manner of practice [is deferred to] the practitioner
... So long as she is involved it does not matter how she conducts
herself (p. 219).

A further distinction between the two camps, can be understood in the contrasting positions taken on the nature of discretion. Howe (1986; 1991; 1996) in expounding curtailment views discretion in a binary sense, i.e. a social worker

either has, or does not have, discretion (freedom to decide and/or act without interference), as determined by an increasing level of managerial power and control. Baldwin (2000: 81), in contrast, offers an alternative view, by describing that discretion is better understood as 'degrees' of freedom that exist along a 'continuum of discretion'. Indeed, he postulates that the 'degree' of freedom experienced by the social worker is dependent on the social work task and context, as this determines the extent, reach and/or effectiveness of management control.

Similarly, Baldwin (2000) distinguishes himself with his finding that social worker discretion can arise in 'unacknowledged habits of routine practice' (p. 81). His position is that in certain circumstances, those employing discretion do not recognise their use of it and can even dismiss or overlook their discretionary space. The implication here is that researchers who rely on qualitative accounts of social workers need to be proactive in accounting for unrecognised discretionary freedoms before arriving at conclusions of curtailment. Such a safeguard is not evident within Howe's literature (above), raising necessary questions about the efficacy of results and accuracy of conclusions, and highlighting a learning point for future empirical enquiry.

2.3.3 The '(Exaggerated) Death of Discretion'

In a discursive paper entitled '*Street-Level Bureaucracy, Social Work and the (Exaggerated) Death of Discretion*', Evans and Harris (2004) provide an analytical critique of the contrasting curtailment versus continuation positions, focusing specifically on the arguments put forward by Howe and Baldwin. The purpose of

the paper is to assert the continued relevance of Lipsky's SLBT for understanding the discretionary space of England's contemporary statutory social work teams (Evans and Harris, 2004), and on this basis the authors' critique is heavily weighted towards the arguments put forward by David Howe.

For example, they criticise Howe for his assumption that management in social services departments functions flawlessly, and that managers can therefore coerce social workers according to their will. They see this position as reductionist as it omits a consideration of key influential factors, such as the political and human elements of public service provision (see Section 2.2.1), and the influence of personal and professional values (see Section 2.4.2).

Secondly, drawing on Dworkin's (1977) assertion that there are different types of discretion understood in the weaker and stronger sense of the term (see Dworkin, 1977: 32 for an overview), Evans and Harris (2004) criticise Howe for collapsing discretion completely into the latter. Indeed, they argue that by 'seeing the development of rules as the end of discretion itself' (p. 882), Howe underplays the significance of being able to interpret and decide within, and between, rules. The authors argue that with the 'proliferation' of rules and procedures that has accompanied the rise of managerialism, this weaker form of discretion has become 'increasingly significant', due to the growing requirement to interpret which apply, and decide how to implement them (p. 882).

Furthermore, the authors critique Howe on the basis that he 'does not acknowledge the significance of [his] concession... that until the central interests of

the organisation are at stake' (p. 883) – for example, in a resource or legal sense – then the 'style' and 'manner' of the work is deferred to the social worker:

Howe's recognition that decisions about style of provision continue to be a matter for professional discretion undermines his claim that discretion is marginal. Style of work – seen as the way in which it is done – is central to the service that is provided ... [r]ather than being a secondary concern, the discretion that operates here is of great significance (Evans and Harris, 2004: 883).

The authors also critique, what they consider to be the 'unifying strand' between Howe and Baldwin, seen in the way that both

tend to treat professional discretion as a phenomenon that is either present or absent and rest on a background assumption... that... discretion is self-evidently a 'good thing' (p. 871).

Such a position, is, they assert, too simplistic. Firstly, discretion is neither 'good' nor 'bad':

In some circumstances it may be an important professional attribute, in others it may be a cloak for political decision-makers to hide behind or it may be an opportunity for professional abuse of power (p. 871).

Secondly, discretion rather than be conceived as either present or absent, is better understood as a 'series of gradations of freedom' that change on a 'situation-by-situation basis' (p. 871).

Whilst I agree with this critique in part, I feel that it misses some of the nuanced elements of Baldwin's argument. Certainly, by lamenting the 'curtailment' of discretionary space, the implication is that Howe sees discretion as favourable. However, Baldwin's position is subtler, and his acknowledgement that social

workers can use their discretion to undermine official policy, along with his advocacy of Lipsky, might be interpreted to mean that he considers discretionary freedom as neither inherently 'good' or 'bad'.

Secondly, the authors seemingly overlook Baldwin's (2000: 81) assertion that discretion is best understood as 'degrees' of freedom that exists along a 'continuum of discretion' and that it is informed by situational and contextual factors. Indeed, their position that discretion should be regarded as 'a series of gradations...' or 'the *degree* of freedom professionals have at specific conjectures' [emphasis added] (Evans and Harris, 2004: 871-872) is more complimentary of Baldwin's position than they appear to realise.

It is possible that in applying this critique the authors were referring to the language of 'curtailment' and 'continuation' rather than the respective advocates of these positions, as these sentiments do implicitly encourage the notion of discretion in the binary sense. However, this is not how Evans and Harris (2004) present their argument.

Ultimately, the cogent point that emerges from a review of these authors' analysis, is that each camp, as represented by an identified key theorist, appears to arrive at contrasting conclusions because of the different ways in which they conceptualise discretion. In the next section I will develop this point, with consideration of a later analysis by Tony Evans, in which he contends that Howe and Baldwin's arguments are formed in part because of the different ways in which each conceives

discretionary space, and that within this framework their viewpoints are not as polarising as they first appear.

2.4. Different types of space

The next area pertinent to this study explores the various types of discretionary space available to statutory social workers. The literature reviewed to this juncture has tended towards the notion that where discretionary space exists, it does so because of the complexities inherent within public service provision and the propensity of 'street-level' social workers to resist managerial efforts to control their behaviour (Lipsky, 2010; Baldwin, 2000). However, another narrative can be found in the writing of Tony Evans: that discretionary space can emerge through both officially and unofficially granted freedoms designed to ensure the efficient and effective delivery of services.

In this regard, Evans' ideas evolve within three specific texts: *'Professional Discretion in Welfare Services: Beyond Street-Level Bureaucracy'* (Evans, 2010); *'Professionals, Managers and Discretion: Critiquing Street-Level Bureaucracy'* (Evans, 2011); and *'Street-Level Bureaucracy, Management and the Corrupted World of Service'* (Evans, 2016). As the titles imply, the starting point of Evans' analysis is Lipsky's SLBT. However, he also considers the different arguments put forward by the curtailment (Howe, 1986; 1991) and continuation camps (Baldwin, 1998; 2000), and contrasting domination versus discursive managerialism perspectives.

Evans' approach is to compare these different positions to the findings generated through his own empirical case study, conducted in the mid-2000s. Like the researchers before him (including Lipsky, 1980; Howe, 1986; and Baldwin, 2000), Evans (2010; 2011; 2016) employed qualitative research methods, specifically in the form of interviews supplemented with documentary analysis and observation, to explore the discretionary space available to statutory social workers. The basis of this analysis is taken from the contributions of a cohort of ten social workers and five (local team) managers employed across two statutory adult service teams – a Community Mental Health Team and an Older Persons Team – of a single English social services department.

Evans' assertion is that different types of discretionary space exist, and these can be distinguished and understood by the manner in which they are acquired. The remainder of this section will consider this argument and highlight the emerging implications for future enquiry, including my own. It is divided into three parts: firstly, I reflect on Evans' distinction between discretionary space that is officially granted and recognised ('de jure'), and that which occurs through circumstance ('de facto') – highlighting how the features of each are set out by contrasting Howe and Baldwin's apparently polar arguments. Secondly, I consider Evans' distinction between the 'local' and the 'senior' social services department manager and the position that each take in the granting of discretionary space. Thirdly, I set out the role of senior managers in cultivating an alternative, granted yet informally recognised, 'entrepreneurial' space, considering its features and the associated advantages and costs.

2.4.1 Distinguishing between de facto and de jure discretion

Locating the focus of his analysis in the structural sense of the term, Evans (2010) defines discretion as the 'freedom within the work role' (p. 33). Referring to Davis' (1971: 4) observation that 'a public officer has discretion whenever the effective limits of his [sic] power leave him free to make a choice between possible courses of action', he offers the distinction between the freedom to act that arises due to circumstance, and a freedom that is formally granted by those with power to do so (for example, a hierarchical manager).

'*De facto*' discretion, Evans (2010: 33) asserts, is 'the power to act, though not officially recognised', whereas '*de jure*' discretion is 'having the power to decide as an officially recognised entitlement'. A further distinction lies in the subtleties of finding a capacity to act, as opposed to be given formal authority to do so (Evans, 2010). *De facto* discretion arises when a practitioner encounters an opportunity to act due to an absence of external direction or control (Evans, 2010). Conversely, *de jure* discretion implies that the practitioner has official recognition of a right (or entitlement) to decide on a course of action, including inaction (Evans, 2010).

Evans (2010) argues that this distinction represents the contrasting positions in the continuation debate as set out in the work of Howe and Baldwin. Whilst he agrees that the reason for the dichotomy is that each author has different conceptions of what social worker discretion is (see Sections 2.3.1-2.3.2), he specifically emphasises their distinct focuses in respect to how discretion is acquired. In this regard, he asserts that Howe and Baldwin are essentially at 'cross-purposes' (p. 33);

arguing for and against the continuation of social worker discretion but basing their arguments on what are, essentially, different types of discretion. For example, we can see that by asserting the curtailment of formally granted discretion due to the increasing control from management, Howe is referring to the *de jure* discretion of social workers (Evans, 2010); whereas, Baldwin focusses more on what Evans would term *de facto* discretion, where social workers are able to find capacity to exercise discretion in situations outside management control.

In making this distinction, the implication is that when Howe (1986; 1991) – surprisingly at the first point of reading – acknowledges the presence of continued ‘pockets’ of discretionary space for the social workers in his study, he is not contradicting his main argument, but rather referring to another type of discretion to that which he is ultimately concerned with; that is, *de facto* as opposed to *de jure*. Indeed, his contention is that these spaces emerge in contexts where the situation is ‘not wholly amenable to routine and standardised practice procedures’ (Howe, 1991: 219). Therefore, in this aspect of his analysis Howe makes similar claims to Baldwin, yet it is only by distinguishing between *de jure* and *de facto* discretion that the reader can decipher this. Similarly, the distinction helps the reader to understand why the two authors form different views about the continuing relevance of Lipsky’s SLBT.

Evans (2010) suggests that Howe and Baldwin represent different interpretations of Lipsky’s work – ‘perhaps because of Lipsky’s ambivalent... treatment of discretion’ (p. 37). Howe (1991), in arguing against the continued relevance of SLBT, bases his

conclusion on *de jure* discretion, which, he asserts, has been curtailed in the post-SLBT world of (domination) managerialism. However, Lipsky's argument, whilst not explicitly stated (hence Evans' criticism mentioned above), appears to be based on *de facto* discretion: discretionary space is inevitable in a world of public service provision, where the 'political' and 'human' tensions are beyond any 'elaboration of rules, guidelines, or instructions' (Lipsky, 2010: 15). As such, it is the shared focus on *de facto* discretion which can explain Baldwin's (2000) continued advocacy for the relevance of SLBT (Evans, 2010).

Essentially, Evans' analysis allows this continuation/curtailment debate to be seen from a different perspective, and in doing so, it appears that a 'polar' description of the argument becomes less pertinent, as both sides arrive at their conclusions by using an alternative concept for how discretionary space is acquired. It is entirely plausible that both arguments are accurate; with the rise of managerialism, social work department managers have acquired more powers to limit *de jure* discretion (as suggested by Howe), and yet the complexities in delivery of street-level social work (for example, the 'political' and 'human' tensions of provision) continues to offer space for *de facto* discretion, as social workers react to situations outside of management control (Baldwin, 2000). The implication is that both Howe and Baldwin should be more explicit in how they present their conclusions, for example: 'the curtailment of *de jure* discretion' for Howe, and 'the continuation of *de facto* discretion' for Baldwin. Future researchers would benefit from acknowledging this distinction so as to avoid any later critique of reductionism.

2.4.2 The importance of the social worker relationship with the local manager

Evans (2010: 156) attests that statutory social work management is better understood as a 'complex set of fractured layers and alliances' than 'the homogenous and monolithic entity' represented in the theories of SLB (Lipksy, 1980; 2010) and curtailment (Howe, 1986; 1991). He differentiates between 'senior' and 'local' management in the following way:

'Senior' managers operate at a 'strategic' level of the organisation and are thus positioned further away from the 'street-level' or frontline (Evans, 2010: 42).

However, they set the context of street-level work through their control of resources and development of procedures. By contrast 'local', or first line, managers function at an 'operational' level and are responsible for the day-to-day management and supervision of street-level staff. They are expected to implement and enforce the procedures and budgetary controls designed by senior managers (Evans, 2010).

Whilst Evans (2010) accepts that, with the rise of managerialism, both local and senior managers have become more powerful within contemporary social service departments, he does not agree with the notion held, particularly in the theories of curtailment and domination managerialism, that these managers will always use their power to limit the discretionary space of social workers. Instead, he argues that in different conditions, and for different reasons, they seek ways to enable social worker discretion. This is apparent not only in those officially granted and

acknowledged discretionary spaces (*de jure* discretion), but spaces that are provided on an unofficial, discrete and/or informal basis (Evans, 2010; 2011; 2016).

With regards to local managers, Evans explicitly positions himself in the discursive managerialism camp. He reports from the findings of his study that local managers were not only concerned with/committed to the objectives of the organisation, but that they retained a professional identity and commitment of their own. This was observed to shape their decisions and actions around the granting and restriction of social worker discretionary space. Indeed, Evans (2010; 2011) outlines that local managers were just as capable as social workers at resisting senior manager direction and control and, on occasions, their professional concerns/commitment led them to grant informal and discrete discretionary space in contradiction of formal, senior manager directed, policy/procedures.⁴

However, Evans (2010) also found that the decision to grant either formally recognised or more discrete discretionary space was informed by the local manager's relationship with the individual social worker – a relationship that he asserts is more cooperative and collaborative than the conflictual one identified in the theories of SLB and curtailment. Two features of the relationship were found to be particularly conducive to the granting of discretionary space. The first involved managers and social workers holding complementary values, goals and beliefs.

⁴ It is perhaps important to acknowledge that senior managers also have a line of accountability and have to report to the local authority Chief Executive, who in turn reports to the Elected Members of the Council. Whilst this might impact upon the discretionary space of the senior manager, this is not discussed in the cited literature, nor is it the focus of this study.

Evans (2010; 2011) emphasised in particular how a shared understanding of the value of professionalism, that is, a mutually held belief that professional status justified discretionary freedom, and a conviction that discretion was a valuable medium to achieving specific objectives, inclined the local manager towards granting discretionary space (Evans, 2010).

Secondly, Evans (2010) reports that when a manager established a good working knowledge of the social worker, particularly of their personal attributes – understood as the distinguishing characteristics, features or qualities of the individual – and practice behaviour, they could better decide whether they ‘trust’ them enough to grant them specific discretionary freedom (p. 129). Indeed, Evans (2010) found ‘trust’ (in the inter-personal sense) to be a key facilitator of discretionary space within his study. He identifies a small number of social worker attributes that were more likely to elicit the trust of a manager, including: having an increased level of knowledge and/or practice experience and demonstrating consistency and responsibility in past decision-making (Evans, 2010). Whilst this list is limited, the argument is a compelling one, with an implication that future research might seek to further explore and understand the impact of particular attributes on interpersonal trust within the local manager-social worker relationship, and how, in turn, they impact upon the discretionary space afforded.

However, whilst Evans asserts that, for certain tasks, trust had to be established via a period of familiarisation, for others he reported that managers expected – and by implication trusted – social workers to employ their discretion on the basis of their

professional status alone – it was their ‘professional responsibility’ (Evans, 2010: 160). Here he reflects on his experience of local managers’ frustration that social workers would, on occasions, seek the manager’s approval to employ discretion, or their direction of how to proceed, rather than use their own discretionary space in the first instance. Whilst this point is significant, Evans does not satisfactorily differentiate between the features of these different contexts/tasks, nor how a social worker would understand/recognise the difference. This also merits further consideration in future enquiry.

Similarly, as the individual nature of the social worker-local manager relationship is central to Evans’ analysis, the implication is that different social workers who share the same manager can be afforded different ‘degrees’ of discretionary space; yet this does not become a point of discussion for Evans. It does however hold implications for future enquiry, where researchers should seek to explore discretionary space on a more individual-by-individual, and intra- as well as inter-team basis (Evans, 2010).

2.4.3 Senior managers and entrepreneurial discretion

Evans (2010) identifies that the primary position of senior managers in contemporary social work departments has been to utilise ‘remote strategies of control’ (p. 376), in the form of budgets, procedures and audit, to reduce discretionary space and enforce compliance with ‘official’ top-down policy. However, within his study, senior managers were not observed to apply these strategies universally, as is Howe’s (1986; 1991) contention, but differentially,

according to the social work team, the tasks they undertook, and the degree of specialism required (Evans, 2010; 2011). In addition, Evans (2016) found that this tendency was not limited to formally acknowledged (de jure) discretionary space, but that which was granted on a more informal and discrete basis.

Indeed, Evans (2016) asserts that, in granting formal discretionary space, senior managers must accept a level of accountability – in the sense that they could be held responsible – for the decisions and actions that occur within that space. However, senior managers who still favoured discretion for efficiency's sake, especially in the human and political terms noted in SLBT, preferred a more 'informal' (p. 608) discretionary space, one where social worker discretion was 'covert' and 'unofficially' promoted (p. 609). Evans (2016) identifies this as an '*entrepreneurial*' space (p. 609); one that is characterised by surreptitious encouragement – sometimes through the medium of 'nods and winks' (p. 609) – to be 'flexible' with, or else even ignore, policy and procedures' (p. 609); thereby allowing social workers to 'cut corners' (p. 611) and 'tak[e] risks' in pursuit of a 'desired outcome' (p. 609).

For senior managers, providing 'an entrepreneurial space' allows them to maintain a formal position of policy compliance (thus reducing the risk of individual accountability), whilst enabling effective service provision in real terms (Evans, 2016; see also Evans and Harris, 2004). Indeed, entrepreneurial discretion in Evans' study was understood as unofficial policy – it existed, and was expected, but was not acknowledged in any formal policy documents (Evans, 2016). This does,

however, present particular challenges for the social worker – both in respect of recognising where they have entrepreneurial freedom and in choosing whether they will use this freedom (Evans, 2016).

For example, Evans (2016) reports that the discrete and unofficial way in which entrepreneurial discretionary space was communicated and allocated made it difficult for street-level social workers to know which policies and procedures were negotiable and which were not. He identifies that a failure to comply with ‘must-do’ policies and procedures (p. 609), which, in his study, tended to relate to finance and anything that might impact upon the ‘external perceptions of performance’ (p. 609), could result in disciplinary action being taken. He also found a lack of clarity about what these ‘must-do’ policies were, implying they could be different according to the team, time and context of the task, thus further compounding the dilemma for the social worker (Evans, 2016).

Subsequently, whilst entrepreneurial discretion might be expected, and indeed discretely encouraged, it requires a skilled social worker to understand the ‘rules of the game’ and where they can and cannot employ ‘procedural pragmatism’ (p. 609).

The second dilemma identified by Evans (2016: 611) is that of ‘blame shift’ as a significant dimension of the ‘ecology of discretion’ in social services departments. Social workers risk individual culpability for negative outcomes emerging from their entrepreneurial decision-making/action-taking:

In concrete terms, the entrepreneurial emphasis was on encouraging local discretion to cut corners and get things done with least fuss; but this can also be seen as a strategy for cover for senior management – they cannot be held to account for policy deviation, they have set out their commitments in published policy, deviations must be down to individual bad practice at the frontline (Evans, 2016: 611).

In this sense, maintaining discretionary space through nebulous policy can be a useful political strategy for senior managers, whereas employing entrepreneurial discretion is potentially costly for social workers (Evans 2016; see also Evans and Harris, 2004). However, Evans also recognises that an advantage of entrepreneurial discretion is that it allows social workers to shape decisions/actions according to their own values and motivations, including what they see as being in the best interest of the service user.

Ultimately, the implication is that upon encountering an entrepreneurial – but perhaps also a de facto or de jure – discretionary space, social workers have to choose their course of action, weighing up costs and advantages to themselves, the organisation and the service user (Evans, 2016). Thus, there is value to be gained in exploring what informs this choice, and how choice is impacted by the type and context of social work task and discretionary space encountered. This forms the focus of the following section.

2.5 Choice within discretionary space

Following on from the previous section, here I develop the idea of social worker ‘choice’ within the discretionary space. The section is split into two parts; in the first, I reflect on choice in a binary sense, considering the notion that social workers

have choice in whether they employ discretion, or whether they do not. In the second section I draw from Kathryn Ellis' (2011; 2014) 'Taxonomy of Discretion' in which it is argued that choice is as much about *how* social workers exercise their discretion as it is whether they do or not.

2.5.1 Whether to choose discretion

Hupe et al. (2015: 17) recognise that discretion is a multi-dimensional concept and distinguish between discretion 'as granted' and discretion 'as used'. The former is defined as the 'degree of freedom as prescriptively granted' by someone with the power to do so (p.17) and is, ostensibly, comparable to Evans' (2010) concept of 'de jure' (but also 'entrepreneurial') discretion. However, discretion 'as used' is identified as the degree to which discretion 'as granted', or indeed, as acquired (de facto discretion), is employed by the 'actor'. The authors consider this distinction important when conducting research into the discretionary behaviour of public service workers such as social workers, where the means by which discretionary space is acquired provides the context for discretion 'as used', and indeed whether it will be used (Hupe et al., 2015).

I take two things from this: firstly, that in order to understand a social worker's discretionary behaviour, one must also understand the different contexts within which discretionary space emerge (see Sections 2.4.1-2.4.3); but secondly that the means with which discretionary space is acquired can inform whether or not social workers employ discretion. It should not be assumed that discretionary space invariably leads to discretionary behaviour (Evans, 2010).

Ellis et al. (1999: 264) consider that ‘professional discretion involve[s] both power and choice’, or as Young (1981: 22, cited in Ellis et al., 1999) affirms ‘the power to make choices between different courses of action or inaction’. Indeed, in considering the advantages and disadvantages of entrepreneurial discretion, Evans (2016) recognises that the dilemma for social workers is whether they are inclined towards employing discretion when they encounter entrepreneurial space:

[This] helps us to understand the context within which frontline staff have to make choices and choose whether or not to use discretion... not only the often uncomfortable choices about whether or not to follow policy... and how to respond to any mismatch between [formal and informal policy]... [but additionally] not only how to use discretion but also whether or not to refuse to use it (Evans, 2016: 612).

Of course, Lipsky (1980; 2010) cites the availability of choice when he observes that street-level bureaucrats’ tendency to either maximise or minimise their discretion (see Section 2.2.1). However, there is limited follow-up research or discussion into this observation within social work literature, which is surprising given the level with which authors engage with SLBT in their respective analyses. The exception can be found, again, in the work of Tony Evans.

Firstly, Evans and Harris (2004) consider how social workers can reject opportunities for discretion in specific contexts. Indeed, they build on Lipsky’s (1980) acknowledgement that practitioners can deny their own discretion to protect themselves, drawing from previous empirical work (see Harris, 1987) to introduce the concept of ‘defensive practice’ (Evans and Harris, 2004: 889).

Specifically, the authors suggest that in the context of contemporary social work (characterised by resource shortfall, policy ambiguity, and the propensity to blame social workers), rejecting opportunities for discretion to avoid the responsibility that accompanies difficult decisions can be an attractive, albeit defensive, alternative (see also Evans, 2010). Although the authors do not satisfactorily develop the discussion beyond how the 'fear of blame' (Evans and Harris, 2004: 890) can make discretion an 'unattractive' option (p. 889) – thus, negatively impacting on a social worker's propensity to employ discretion – the implication is that social workers are able to choose whether or not to employ discretion. Furthermore, the choice is informed by how 'attractive' employing discretion is judged to be by the individual (Evans and Harris, 2004).

Whilst the obvious follow-up questions are 'what can make discretion an attractive option?' and 'in what contexts would social workers choose to employ discretion?', the authors do not engage with them, merely implying that whilst choice can be beneficial in terms of defensive behaviour, it can also cause discomfort.

This point is touched upon, albeit briefly, by Evans (2010). Here he acknowledges momentarily that when discretionary space emerges, social workers 'are confronted with choices, not inevitabilities' (p. 62). He recognises that different situations exist where 'a powerful [managerial] discourse simply doesn't correspond with their experience or commitments, and they have to choose what to do' (p. 62). He recognises that the choice is rarely easy and can

be 'uncomfortable', and even 'painful', when the position adopted by the social worker contradicts powerful managerial interests. However, he asserts that this 'struggle and discomfort do not remove choice... [which] perhaps explains the discomfiture of discretion' (p. 63).

In a more recent article entitled '*Organisational Rules and Discretion in Adult Social Work*', Evans (2013) develops this idea and offers a more in-depth consideration of the issues of social worker choice. Here he reports on a 'small... subsidiary study' (p. 746), in which he revisits the previous case study site and interviews twelve of the original cohort of participants (eight social workers and four local-managers). Specifically, Evans considers social worker choice in the context of how different notions of professionalism influence the approach taken to organisational rules.

The findings reported contrasting choices of either following rules to ensure procedural fairness and limiting bias and favoritism; or breaking rules so as to offer a more individualised service (with notions of discretion as a professional virtue). However, the findings themselves are not the pertinent point as much as the emphasis that a social worker has to see value in using their discretion (for example, for themselves, the service user and/or the organisation), in order to be motivated, and indeed choose, to do so.

This is a significant development in the established narrative. Where previous writing concerned itself primarily with whether social workers have opportunities for discretion, it did not expand the discussion beyond this focus (for example, Howe, 1986; Baldwin, 2000); instead adopting an implicit stance that to have a

discretionary space, meant using discretion. The importance of this progression is that it necessitates additional questions about what influences social workers to choose to employ or reject discretion. Evans, for his part, cites a 'fear of blame' (Evans and Harris, 2004; Evans 2016), notions of 'professionalism' and personal values (Evans, 2010; Evans, 2013) as being informative of choice, but does not comprehensively consider the mechanisms underpinning these influences, thus, highlighting an area for further enquiry.

2.5.2 A 'Taxonomy of Discretion'

In two papers entitled *"Street-Level Bureaucracy" Revisited: The Changing Face of Frontline Discretion in Adult Social Care in England* (Ellis, 2011) and *'Professional Discretion and Adult Social Work: Exploring its Nature and Scope on the Frontline of Personalisation'* (Ellis, 2014), Kathryn Ellis provides a retrospective analysis of four case study enquiries taking place between 1990 and 2007, concerning the assessment practice of statutory adult service social workers. Here, she indirectly expands on the assertions of Tony Evans, arguing that:

Whilst discretion, in theory, implies the power to choose... the nature and scope of that power can only be understood by reference to the contexts within which it is generated (Ellis, 2014: 2285).

Ellis' particular focus is the impact of the social worker's practice micro-environment on the choices they make with regard to their discretionary behaviour. Indeed, she considers how the interaction of 'interlinked variables' (Ellis, 2011: 229) in the observed social worker practice micro-environment manifests into distinct types of social worker discretionary behaviour. These 'interlinked variables'

include: the position of the team within the overall social work departmental system; the level and type of demand placed upon them; their ability to access resources; and how social workers understood their relationship with the service user. The resulting behaviours are organised into a 'Taxonomy of Discretion' (Ellis, 2011; 2014) (see Figure 1), and the implicit assertion is that 'choice' is as much about *how* discretion is used, as it is whether discretion is used.

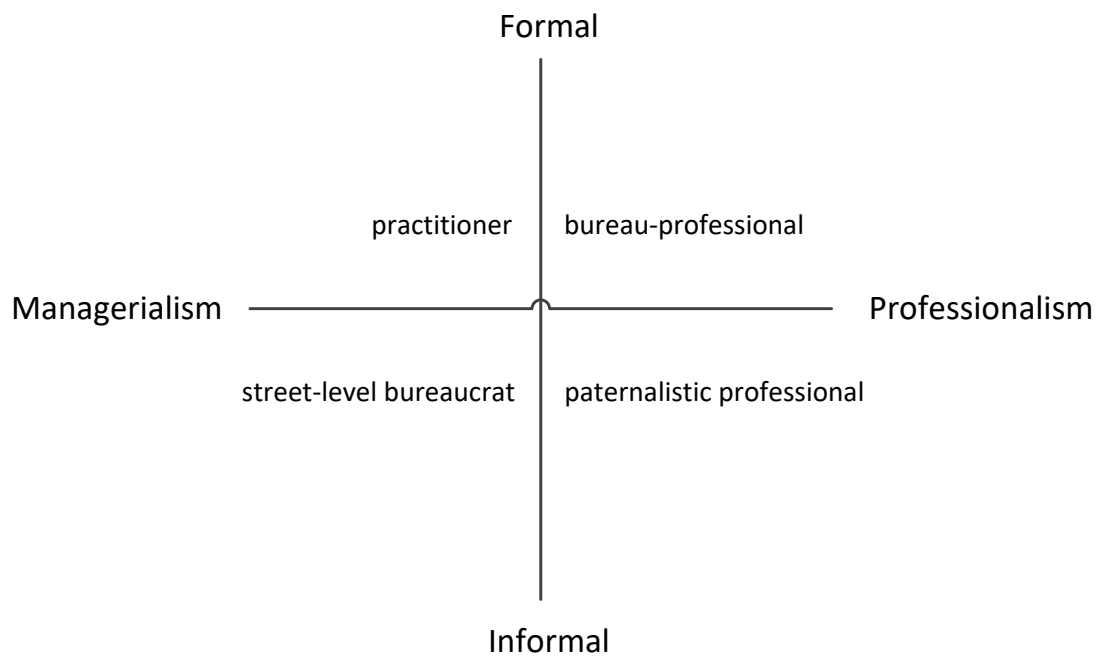


Figure 1. 'Taxonomy of Discretion' (Ellis, 2014: 2274)

The taxonomy's vertical axis represents the 'formality', or as Ellis (2011: 230) puts it, 'in top-down policy and operational terms', the 'legitimacy' with which discretion is exercised. This is the extent to which street-level social work practice is either assigned by top-down, or informed by bottom-up, decision-making. The horizontal axis reflects the conflict often reported in the continuation debate literature between professionalism and managerialism, and the relative influence of each in shaping discretionary space.

In the upper left-hand quadrant of the taxonomy, operating in the *formal* and *managerialist* space, Ellis (2011; 2014) identifies a form of social work practice that she labels 'practitioner' (a term chosen in reference to the language of contemporary government guidance – Ellis, 2014). These social workers, who were typically located at the 'front door' of social work departments and were described by Ellis (2011: 231) as 'gatekeepers' to service provision, had limited scope for discretion as their practice was highly formalised and prescribed, so as to maintain a strict management of resources.

Opposite, in the upper right-hand quadrant, still operating in a *formal* but a *professionalised* space, the 'bureau-professional' was distanced from pressures of resource management and tended to belong to specialist teams beyond the front door of service provision. Whilst their discretionary decision-making was still formalised, Ellis (2014) asserts that it was best understood as a 'balancing of professional expertise and bureaucratic standards' symptomatic of classic bureau-

professionalism (p. 2275). Indeed, she observed a large degree of value discretion being exercised:

By virtue of retaining both significant scope to negotiate prescribed tasks and rules and a sense of professional identity... the [social workers] saw themselves using their discretion to negotiate formal rules as a means of achieving professionally valued ends (Ellis, 2011: 233).

The latter two types are located in the informal decision-making space of the lower half of the taxonomy and are characterised by the scope to employ rule and task discretion when confronted with dilemmas, the unpredictable/unaccounted for, or because of limited time and resources.

On the managerialism side of the horizontal axis, the 'street-level bureaucrat' employed discretion in a way that was little influenced by professional training and values, but was more aligned to the defensive strategies observed by Lipsky (1980; 2010). Indeed, Ellis (2011: 235) outlines that rules were 'bent, broken or ignored' and tasks carried out in a way that enabled the social workers to cope with the demands of the job. She, like Evans (2010) and others favouring the discursive perspective, observed that street-level discretion flourished despite managerialism as the increasing bureaucracy and proceduralisation that accompanied it offered discretionary space in the form of conflicting rules and competing work demands. She reports that such tensions were inherent within the entire social work system and, as such, street-level bureaucratic behaviour could be observed on both 'gatekeeping' and more specialist teams.

In contrast, the 'paternalistic professional' (situated on the opposite side of the horizontal axis to the 'street-level bureaucrat') was found more within specialist teams, subverting bureaucratic controls and employing informal rationing techniques to determine who received services when, and in what form. Here discretion was employed on the paternalistic basis of 'deserving' and 'undeserving', deciding who to assist or otherwise through perceptions of client vulnerability, need and dependency. However, referencing the radical critique of professionalism, Ellis (2011) also noted that social workers sought to hold on to discretionary space as a source of power, resisting moral, material and professional hazards to their discretion from such threats as service user rights and empowerment.

Whilst it remains to be seen whether Ellis' taxonomy can be applied to a wider context of statutory social work – including other social work tasks beyond eligibility assessments – the implication that emerges from her analysis is that social worker choice is impacted by more than subjective influences such as values, notions of professionalism and fear of being blamed (see Section 2.5.1), but by micro environmental factors within the individual practice context (Ellis, 2011; 2014). Indeed, there is an argument that future research should look at, but also beyond, the micro and consider the mechanisms impacting upon social worker discretionary space in the meso and macro environments. Such an enquiry would further develop an understanding on whether statutory social workers choose to employ their discretion, and in what way.

2.6 Discretionary space in a child protection context

Compelling within the literature reviewed to this juncture is the focus on discretionary space in a statutory adult service context (i.e. Baldwin, 2000; Evans, 2010; 2011; 2013; 2016; Ellis, 2011; 2014). Indeed, only Howe's (1986) work includes any exploration of, or discussion about, the discretion of those practising in a child protection social work setting. However, even here the child protection element is only one part of the 'generic' framework of the practitioners being studied. What is more, the fieldwork component of Howe's enquiry took place more than ten years before the implementation of the Children Act (1989), considered then, and now, as the transformative piece of child protection legislation setting out the primary statutory duties of childcare social workers (see Parton, 2014).

My literature search found a sparsity of contemporary work concerned with discretionary space in a statutory children's service context. Of the small number of texts identified, two strands emerge: those for which the focus is the impact of Information Technology (IT), and particularly the Integrated Children's System (ICS) (see Section 2.6.1 for a definition); and those which have been authored by Eileen Munro, seemingly as a precursor to the arguments put forth within her formal review (see Chapter 1), in which she sets out her analysis for how an 'erosion' of social worker discretion has been allowed to manifest. I consider each of these in turn, but also offer a distinct reflective critique of this body of literature, highlighting the implications for future enquiry and the importance of my own study.

2.6.1 The Integrated Children's System and its impact upon discretionary space

Implemented in 2005 as part of statutory children's services 'Electronic Turn' (see Garrett, 2005), the ICS was the brainchild of the Department of Health and (the then) Department for Education and Skills (Shaw et al., 2009). It does not refer to a single computer system, but rather a 'national specification' against which software suppliers developed 'compliant' software implementations (White et al., 2010: 408). Its aspirations can be associated with at least seven distinct policy aims (Shaw and Clayden, 2009) associated with efforts to managerialise children's statutory social work (Wastell et al., 2010; Wastell and White, 2014). These included: to increase accountability and transparency; to deliver better management of services; and to standardise the practice of those undertaking statutory social work tasks with children (Shaw et al., 2009; Pithouse et al., 2011).

The ICS itself comprises a set of 'core information requirements' for children's services departments in England (Pithouse et al., 2011: 163) integrated into an ingrained 'workflow model' and a reference set of electronic forms referred to as 'exemplars' (Shaw et al., 2009; White et al., 2010). The 'workflow' element 'rigidly defines the social work... process in terms of a branching sequence of tasks and timescales' (White et al., 2010: 408) – each to be completed, reviewed and approved by managers before moving on to the next (Pithouse et al., 2011). The 'exemplars' form the basis for the 'screens' that social workers see and use to enter information (Shaw et al., 2009: 615), setting out exactly the data entry requirements for each specific task (Pithouse et al., 2011).

Eight journal articles were identified which discussed the impact of the ICS on the social workers discretionary space. Within these I found a tendency of the authors to discuss discretion in a binary sense – that is, discretionary space as either present or absent. In this regard the language chosen is reminiscent of the curtailment debate (above), a point observed by Evans (2010) who ascribes the respective authors to each, ostensibly opposite, camp.

However, my own appraisal is that, like those main protagonists of the curtailment (David Howe) and continuation (Mark Baldwin) positions, the authors actually make, what I assess to be, similar claims. The confusion emerges, I believe, from that ingrained tendency within the literature reviewed – one that is repeated here – which is to fail to explicitly set out the type of discretion being argued for. That being said, our knowledge of the features of different discretionary spaces (see Sections 2.4.1-2.4.3) enable us to look beyond claims of ‘continuation’ and ‘curtailment’ that might otherwise set these accounts apart, and to understand that the authors claims, despite the language used, are more complimentary than otherwise.

Ian Shaw and colleagues’ enquiry is detailed in two papers: ‘*An Exemplary Scheme? An Evaluation of the Integrated Children’s System*’ (Shaw et al., 2009) and ‘*Technology, Evidence and Professional Practice: Reflections on the Integrated Children’s System*’ (Shaw and Clayden, 2009). The study reports on a formative evaluation of the ICS across four children’s services department sites (two in England and two in Wales) between 2004-2007, interpreting the findings ‘in terms

of the persistence and diversification of professional discretion' (Shaw and Clayden, 2009: 15).

Like the aforementioned empirical enquiries set in an adult service statutory context, this study, and indeed that which is detailed below, relied on qualitative research methods including focus groups, questionnaires and interviews, with an emphasis on highlighting the 'experience and views of social workers' (Shaw et al., 2009: 619).

Shaw and colleagues argued for the continued space for discretion brought about because of the standardised and prescriptive elements of the ICS. The authors frame their analysis in the context of Evans and Harris' (2004: 883) observation that 'the existence of rules is not inevitably the death-knell of discretion'. They assert that the increased standardisation and prescription inherent within the ICS, encourages social workers to find ways to reconcile the demands of practice – including the individual circumstances of the service user – with the expectations pertaining to data entry. For example, they identify examples in which (paper copies of) exemplar forms were altered 'on the hoof' or else timescales creatively expanded, as they were judged unsuitable and 'unrealistic' in the specific context.

Here the implication is that whilst the ICS has reduced *de jure* discretionary space, it has led to increased *de facto* space, as social workers employ discretion within the belt of restriction imposed by the system (Shaw et al., 2009). Despite Evans' (2010) assertions above, my understanding is that this is a position shared within the

second study, set out in six collaborative papers authored, in the main, by David Wastell, Sue White, Karen Broadhurst and Andrew Pithouse.

The arguments proffered emerge from a multi-site ethnographic case study (carried out between 2007-2009) of five children's services departments (four of which were in England) where the explicit aim was to explore the impact of the ICS on the discretion of the frontline social worker (Broadhurst et al., 2010b; Wastell et al., 2010). The authors report on continued evidence of discretionary space available to social workers, observed within a series of 'informal processes' (Broadhurst et al., 2010b: 3); 'expedient manoeuvres' and 'workarounds' (Pithouse et al., 2011: 173) designed to resolve the tensions which emerge from the restriction imposed by the ICS.

The authors assert that on occasions, these 'manoeuvres' enable social workers to 'get on with the core task of helping children and supporting families' (Pithouse et al., 2011: 173). However, unlike Shaw and colleagues, they also report that for every example of discretionary behaviour in the interests of the child, there were

counter examples where the pressure to obey the all-powerful machine is compromising the ability of professionals to practice as they think best (Wastell et al., 2010: 316).

In this context 'expedient manoeuvres' and 'workarounds' were used to satisfy ICS prescription, prioritising evidence of compliance over the needs/circumstances of the individual service user. For example, purportedly under duress to evidence decisions within set timescales, social workers were observed to routinely return referrals to the referrer, under the premise of asking for more information

(Pithouse et al., 2011), or else categorise anonymous referrals as ‘malicious’ as justification for closure without further enquiry (Broadhurst et al., 2010a: 360).

Similarly, some social workers were reported to only partially complete assessments of children, or else rely on another professional's visit to a child when responding in the affirmative to the workflow question ‘*has the child been seen?*’ (Broadhurst et al., 2010a; White et al., 2010).

It is in this context that the authors claim that the ICS has reduced the ‘scope for workers to exercise *intelligent* discretion’ [emphasis added] (White et al., 2010: 412; see also, Munro, 2011b), and indeed that this element has been ‘squeezed out’ (Wastell and White, 2014: 144) and even ‘curtailed’ (Wastell et al., 2010: 311) by the ICS. This latter quote especially helps to explain why Evans positions these authors in the curtailment camp.

Whilst at first these assertions appear rather contradictory, my analysis is that the claims are made in relation to a *de jure* discretionary space, and that ‘intelligent discretion’ refers to that value discretion (Taylor and Kelly, 2006) which embodied the aforementioned bureau-professional regime, where social workers were officially granted freedom to employ discretion as they judged it to be necessary in achieving the best interests of the service user (see Section 2.1.1). Whilst the authors ostensibly accept that discretion in the interests of the service user is still possible, they assert that it is not officially granted within the confines of the ICS, and the implication is that, at best, it exists in a *de facto* space, in which social workers can just as easily act against the interests of those service users.

Here the assertion is that 'more of the former does not balance out less of the latter' (Wastell et al., 2010: 318) and in this regard the authors are 'less optimistic' (p. 318) than Shaw and colleagues in reference to Evans and Harris' (2004: 871) assessment that the 'death of discretion' has been greatly 'exaggerated'.

2.6.2 The 'erosion' of discretion: The wider writing of Eileen Munro

Whilst the focus of the above cohort of papers is the impact of Information Technology, prescription and data entry, this constitutes only one part of the child protection social work task (Munro, 2010b; 2011a; 2011b) albeit one that perhaps occupies the largest portion of the contemporary social worker's time (see White et al., 2010; Shaw et al., 2009). This aside, I found the literature concerned with discretionary space in the broader context of child protection practice to be limited to three discursive papers authored by Eileen Munro. Her positioning here is similar to that stated in her formal review reports (see Chapter 1): that is, that social worker discretion has been 'eroded' (Munro, 2005: 13).

In this regard, it is not unreasonable to view Munro as an advocate of the curtailment position. However, the arguments proffered within these papers progress beyond those of the traditional curtailment camp, which ascribes the reduction of discretion to the impact of managerialism and the purported shift of power away from the frontline social worker (Howe, 1986; 1991). Instead, Munro frames managerialism as only one of four historical influences which, she argues, have cumulatively served to 'erode' social worker discretion; not only in terms of

reducing discretionary space, but also in the value placed in, and therefore motivation of and for, social workers to employ their discretion.

In *'The Impact of Audit on Social Work Practice'*, Munro (2004) analyses how statutory social work in England has adapted to the 'demands for accountability and transparency' (p. 1075) that has accompanied the increasing influence of neoliberalism and managerialism in public service provision since the late 1970s (see Section 2.1.2). She reports on a growing research trend at that time, which highlighted that, on the one hand, social workers were afforded a high level of structural discretion in all aspects of their work (Parsloe and Stevenson, 1978; DHSS, 1981, cited in Munro, 2004); and yet, on the other, that they were unable to articulate the specifics of their practice (Goldberg and Warburton, 1979, cited in Munro, 2004).

She charts how, by way of response, the Conservative Government of the era issued a raft of new legislation and non-statutory, but influential, practice guidance aimed at increasing control over street-level social workers and 'reducing the scope for professional discretion' (Munro, 2004: 1085). The implication is that this was to be achieved by increasing government directed prescription and thus reducing formally recognised (de jure) discretionary space – a trend that, Munro (2009) contends, has been continued by successive governments since this time.

Indeed, Munro sets out how specific 'mechanisms of control' (2009: 1020) have been increasingly introduced in the form of targeted prescription and audit, including published objectives for practice; performance indicators; and standards

of performance (Munro, 2004). She reflects on how, in this context, social workers have become subject to a more punitive approach to the inspection of their practice, with inspectors given powers to 'name and shame' social work departments judged to be 'under-performing', which has in turn been used by national government to justify the withdrawal of funding and the outsourcing of services (Munro, 2004: 1096).

As a consequence, Munro (2004) outlines that audit indicators have become strongly associated with risk, and indeed, the concept of 'risk to the agency' has emerged along with an augmentation of efforts by employers to protect the agency (p. 1096). This, she argues, can be seen, at the local level, in the increasing 'protocolization' of practice – the process of introducing procedures and rules to direct social workers – and in the adoption of more explicit policies of 'compliance' (p. 1096).

In this context Munro (2004) purports an active reduction in formally granted discretionary space at a local, as well as a national level – a strategy which, she considers, employers have come to view as beneficial in affording them a degree of protection from potential blame. (Significant here is Evans' [2016] observation of the advantages of *informally* granted space.)

The second article, entitled '*Improving Practice: Child Protection as a Systems Approach*', was published a year later. Within it, Munro (2005) considers previous responses to practitioner error linked to child death, arguing that improvements to

the child protection system should be made through a 'system-focussed approach to investigating [these] errors' (p. 1).

Citing her previous research (see Munro, 1996; 1999) she asserts that typically, child death inquiries have ceased their investigative element at the point of identifying human error – tending to attribute causation to the practitioner, who has either 'not compl[ied] with procedures' or 'lapsed from accepted standards of good practice' (Munro, 2005: 5). This is attributable to the importance society has come to place on the safety and welfare of children, and the potent reaction – dating back to the case of Maria Colwell (Munro, 2009) – that arises when a child is killed or suffers serious harm (Munro 2005).

In this context, Munro (2005) points to what she believes is now an inherent need to find someone to blame when society is shocked by the circumstances of child death, as this serves to ease the sense of societal guilt that manifests from the reported circumstances of such an incident. Indeed, she reflects that most often the actual culprit – usually the parent – does not satisfy this 'urge', and as such, society has typically sought to blame practitioners (including, and especially, social workers) with assertions that they have failed in their duty to protect the child (p. 6).

Accordingly, the 'traditional solutions' (Munro, 2005: 13) to emerge from child death inquiries have included: the punishment of the identified 'culprits' (namely the agency and associated practitioners) as an example to others – exacerbating notions of 'risk to the agency' (Munro, 2005); the minimisation of (formally granted)

discretionary space through the automatization, formulisation, and protocolization of practice; and the boosting of managerial surveillance to ensure social worker compliance with prescription.

Citing a then contemporaneous example – the public inquiry into the death of Victoria Climbié – Munro refers to the chair’s recommendations (see Laming, 2003) which, in her mind, were essentially ‘*more blame, more procedures and more monitoring*’ [original emphasis] (Munro, 2005: 13).

Finally, in her article entitled ‘*Managing Societal and Institutional Risk in Child Protection*’ published a year before the start of her formal review, Munro (2009) summarises the arguments put forward in her previous two papers. She aligns society’s increased demand for transparency and accountability; its preoccupation with managing risk; the importance it places on children’s welfare; and the impact of child death inquiries, ‘traditional solutions’, with the reduction of ‘professional discretion’ in child protection social work.

In her later review, Munro describes these as ‘four driving forces’ of change (Munro 2011b: 14). Here however, she explicitly sets out her understanding for how they have collectively served to reduce (formally granted) discretionary space at both a national and local level; but also, how social workers have become less inclined towards employing their discretion due to, what she assesses to be, a blame culture that has developed within and around the system of statutory child protection. She argues that within this context

it looks a far safer option to follow rules and procedures at all times, even if one's experience suggests it is not in a particular child's interests (Munro 2009: 1022).

This summarises Munro's overall position. She believes that a more effective child protection system is one in which social worker discretion is both possible and valued (Munro, 2004; 2005; 2009). However, she describes a system that exists in a managerialist and risk averse culture concerned with transparency and accountability, and in avoiding blame to the organisation, the manager and the practitioner. In this context, Munro purports that social worker discretion has been 'eroded' and consequently the system is failing in

its aim of being a personal social service, perceiving and responding to the individual needs and circumstances of the users (Munro, 2004: 1101).

2.6.3 A reflective critique: The importance of additional enquiry

There are three pertinent reflections that can be made in respect to the existing child protection literature. The first is in the difficulties posed by the absence (including in Munro's formal review reports) of any definition of the term 'discretion'.

As noted above, a failure to ground discussions about discretion in some formal definition or understanding of the complexities and nuances of the term can be construed as problematic given the concept's chameleon-like nature and its propensity to mean different things in different contexts (Evans, 2010).

Indeed, in analysing these texts, I have benefitted from my prior knowledge of the different manifestations of the term 'discretion'. This certainly facilitated my

identification of those rather more implicit assertions that emerge from the respective discussions. However, other readers might not share this privilege, and thus, there is potential that they will form different conclusions from reading these texts.

The implication is that future research into the child protection social worker's discretion should explicitly locate its focus for enquiry and discussion in some formal nuanced understanding, especially differentiating between discretion in a structural and discretion in the epistemic sense.

Relatedly, a second reflection can be made in respect to the general failure to engage with the wider social work literature, and especially the implications for enquiry and discussion that emerge within. For example, there is no explicit consideration within this cohort of texts of the different manifestations of managerialism (see Section 2.1.4) despite it being the basis of much discussion and analysis. Indeed, the authors continue to discuss discretion in the binary sense, ostensibly overlooking assertions that discretion is better conceived as degrees of freedom that change according to the social work context and task (Baldwin, 2000).

Furthermore, the authors do not explicitly differentiate between those discretionary spaces which are formally (*de jure*) or informally (entrepreneurial) granted, and those which occur due to circumstance (*de facto*) (Evans, 2010; Evans, 2016). There is also minimal commentary or analysis of how discretionary space is affected by the political and human tensions inherent within public service

provision (Lipsky, 2010); or indeed those relationships between, and the expectations, motivations and values of, the different actors involved (Evans, 2010).

In addition, whilst implicit in these accounts, none of the authors formally acknowledge the role of the social worker's sense of agency and their power to choose whether (Evans, 2010) and indeed how (Ellis, 2011), to employ discretion in different contexts. The general implication is thus the need to further explore the discretionary space of the contemporary child protection social worker, whilst better engaging with the empirical framework developed in the context of the wider social work literature.

Finally, and perhaps most compellingly, as a point of reflection in the context of my research focus, is the absence of any literature, specifically concerned with social worker discretion, that is positioned as a follow-up to the Munro Review of Child Protection.

In conclusion, it is in these three reflections that I set out the value and contribution to knowledge of my own study.

In the next chapter I will outline the specifics of my research methodology.

CHAPTER 3 – METHODOLOGY

3.0 Introduction

This chapter presents the chosen research methodology for this study. The discussion is organised under six headings:

- Research question(s) and aims;
- Critical realist ethnography;
- The research setting;
- Access;
- Locating myself within the research setting;
- Ethics; and
- A retroductive model of data collection and analysis.

The chapter serves as a bridge between my review of the existing social work literature (Chapter 2) and the three results chapters (4, 5 and 6) that follow.

3.1 Research question(s) and aims

I have sought through this study to offer a contemporary account of the degree to which statutory child protection social workers are exercising their discretion in their practice decision-making/action-taking. Indeed, the research question underpinning this study is:

To what extent are frontline statutory social workers employing their discretion in the post-Munro Review world of child protection?

This question was informed by my review of the ‘Munro Review’ reports and the wider social work literature (see Chapters 1 and 2), where I noted that, specific to the area of child protection, theorists have repeatedly failed to ground discussions about discretion in some formal definition of the term (thereby reducing the efficacy of their conclusions – Smith, 1981). Further, that they have not satisfactorily engaged with findings from adult service research, particularly those which assert that discretionary space is not binary but can be differentiated into different ‘types’, and that social workers are able to choose whether or not they employ discretion when encountering a discretionary space.

These, along with my critical realist positioning (see Section 3.2), meant that I approached this study with five specific research aims:

- To understand how child protection social workers construe notions of ‘discretion’ and ‘discretionary space’, and to incorporate these understandings into my study;
- To explore the extent to which contemporary child protection social workers experience discretionary space within their practice, and whether we can differentiate between the types of space encountered;
- To explore whether on encountering a discretionary space, those social workers will choose to employ discretion;
- To form an understanding of why social worker discretionary space and choice is manifesting thus; and, on this basis

- To comment on the degree that this element of Munro's image for a more 'child-centred' system has been realised.

In Chapters 4 -7 I present and discuss the research findings specific to these aims, and in so doing, address four supplementary research questions derived from them:

1. Where do social workers encounter discretionary space? (Chapter 4);
2. When do social workers choose discretion? (Chapter 5);
3. How are systemic factors impacting on social worker discretion? (Chapter 6); and
4. What conclusions can be made about the realisation of Munro's more 'child-centred' system? (Chapter 7).

Throughout the remainder of this chapter, I will identify the steps taken to address these research questions and thus, to achieve my research aims.

3.2 Critical realist ethnography

The methodological framework for this research has been that of critical realist ethnography. This section looks to explain this choice of framework by considering the principles underlying critical realist research and the characteristics of ethnography.

3.2.1 Principles underlying critical realist research

Critical realism is associated with the work of Roy Bhaskar (1978; 1986; 1989; 1991; 1998; 2008; 2014). Ontologically speaking, it assumes a realist stance (there is a real

world which exists independently of our thoughts, viewpoints, and constructions), whereas epistemologically it favours a constructivist or relativist stance (how we understand this world is constructed from our own perspectives and standpoint) (Bhaskar, 1998; 2014).

Methodologically, there are four principles which warrant consideration: that reality is a 'stratified, open system of emergent entities' (O' Mahoney and Vincent, 2014: 6); that there is emphasis on 'causality' and on forming an understanding of generative 'tendencies' amongst human populations (Houston, 2001: 851); that in identifying generative tendencies, there is an onus on challenging that which might be conceived as oppressive social structures (Houston, 2010); and, that abductive and retroductive reasoning underpin critical realist enquiry (Olson, 2007; 2009). I will consider the implications of the first three of these here (the latter is considered in the context of the research design in Section 3.7).

Critical realist research seeks to move beyond notions of reality as recordable events, as with positivistic positions, or that reality can be collapsed into discourse, as with constructionism (O'Mahoney, and Vincent, 2014). It instead asserts that reality is best conceived as 'stratified' – that is, existing at different levels (see Bhaskar, 1998). Indeed, critical realists hold that the social world can be differentiated into three levels: the empirical – consisting of experienced events; the actual – consisting of all events, whether experienced or not; and the real – which consists of causal structures which generate the actual world together with the empirical (see Bhaskar, 1998; Houston, 2001; O'Mahoney, and Vincent, 2014).

The onus on the critical realist researcher is to engage in a depth of exploration, considering all three levels of reality, and in so doing, to move beyond descriptive accounts of *what* a social phenomenon is, to explanatory accounts of *how* and *why* that phenomenon manifests as it does (Watson, 2012; Bhaskar, 2014).

On this basis, 'causality' is a central notion within critical realist enquiry (Bhaskar, 2014). It is discussed in terms of 'mechanisms', which are understood as causal or generative structures and processes within the social world (Bhaskar, 1998). These mechanisms are believed to inform human agency and the social relations that this agency then reproduces (Reed, 2005).

Causality acknowledges the capabilities of these mechanisms to produce regularities in the social world (Bhaskar, 1998). However, critical realists also recognise the 'multiplicity' (Bhaskar, 1978) and 'indeterminacy' of causal powers (Rees and Gatenby, 2014: 137); asserting both that there may be more than one cause, and that generative mechanisms can manifest differently – explaining therefore, why the influence on human agency may vary between individuals and groups (O'Mahoney and Vincent, 2014). On this basis, critical realist research does not promote a hard determinism (as with positivist or empiricist models), but instead, places an emphasis on a researcher identifying the 'tendencies' which causal mechanisms are understood to create (Houston, 2010).

This provides critical realist research with its emancipatory element (Bhaskar, 1998); that is to say that it enables researchers, not only to identify, but to challenge those which might be conceived as oppressive social structures and

processes underpinning social phenomena (Bhaskar, 2014). This is something which makes critical realist research particularly suitable to social work (Houston, 2001; 2010), and is an important consideration in the context of my research aims.

Specifically, I believe that to robustly answer the overarching research question there is a need for me not only to identify and understand *where* discretionary space exists and *when* (and when not) it is used, but *why* this is the case. This compliments that which Munro advocates in her review of the child protection system; namely, that researchers should not be satisfied with descriptive accounts of the system, but should seek to understand and explain why the system is functioning as it is – with a particular emphasis on identifying and challenging any systemic factors which might be inhibiting ‘child-centred’ practice (Munro, 2011b).

3.2.2 Characteristics of ethnography

The second part of my methodological framework pertains to ethnography.

Ethnography is the study of people in naturally occurring settings or ‘fields’ by methods of data collection which capture their social meanings and ordinary activities, involving the researcher participating directly in the setting, if not also the activities, in order to collect data in a systematic manner (Brewer, 2000: 6).

In this sense an ‘ethnographer’

participat[es]... in people 's daily lives... watching what happens, listening to what is said, asking questions – in fact, collecting whatever data are available to throw light on the issues that are the focus of the research (Hammersley and Atkinson, 2007: 3).

Indeed, ethnographic work usually entails the following features:

- People's behaviour and discussions are studied in their everyday contexts, as opposed to conditions which have been created by the researcher;
- Data is gathered from a range of sources, including documentary analysis, but also through observation and engagement in informal conversations;
- The focus is usually small-scale, for example, a single setting or small group of people; thereby facilitating in-depth enquiry;
- The analysis of the data involves interpretation of the meanings, roles and results of institutional practices and human actions, and the implications of these in a local but possibly also a wider context; and
- The end result is, for the most part, verbal description, explanation and theories with quantification assuming a subordinate role (Hammersley and Atkinson, 2007: 3).

In justifying my selection of ethnography, it is prudent to note that in approaching this study, I considered that as a child protection social worker, practising amongst other child protection social workers, my preferred research participants would be my colleagues. Largely, this was because I believed that my status as an 'insider' (see Section 3.5) and the pre-existing relationships which it afforded me, would enable easier access to an appropriate research setting and sample of participants – something which can be otherwise difficult to achieve when the subject is a functioning, and often busy, statutory social work team (see Pepper, 2016).

Therefore, I required a methodological approach that would allow me to remain in my work setting, whilst assuming an additional role of 'researcher'; studying my colleagues in their 'natural setting'; and exploring with them their discretionary space and choice. I considered that ethnography offered me a suitable framework, agreeing with Leigh's (2013) observation that:

As a practising social worker... ethnography seemed not only natural but also appropriate... enable[ing] me to unravel and critically analyse a setting which I was already a part of (p. 83).

Further, ethnography is well suited to those research methods that I, as a social worker, had extensive experience of – for example, observation, documentary analysis and interview (Brewer, 2000; Hammersley and Atkinson, 2007; and Bryman, 2012).

However, perhaps most importantly, I conceived ethnography as an ideal medium for exploring the nature of a phenomenon (Rees and Gatenby, 2014) as it enables in-depth exploration of the socio-cultural contexts, structures, processes, and meanings within a given cultural system (Whitehead, 2005; Hammersley and Atkinson, 2007), and allows researchers to postulate as to causes of human behaviour (Watson, 2012; Sharp, 2018).

Indeed, notwithstanding the critique of ethnography – for example, that it can be time-consuming; can create issues of personal safety for a researcher; and (without reflexivity) it can lead to accounts from research participants that are dishonest and inaccurate (see Brewer, 2000; Hammersley and Atkinson, 2007; Bryman, 2012) – I

was confident that ethnography offered an ideal framework for achieving my research aims.

3.3 The research setting

This section details the specifics of the research setting, including: its geography and demographic; the constitution of its Children's Services Department; and the make-up of the sample cohort of participants.

So as to maintain confidentiality, I refer to the setting using the pseudonym 'Marketon'.

3.3.1 About 'Marketon'

Located in the North of England, Marketon comprises small towns situated across mainly rural terrain. It serves a population of approximately 200,000 of whom close to 50,000 are children. Key demographic information obtained from the Office of National Statistics indicates that at the point of the last UK census:

- Approximately 90% of Marketon's population were born in the UK – with the next largest groups originating from Pakistan (3%); Bangladesh (2%); and the Republic of Ireland (1%);
- Approximately 90% considered themselves to be 'White'; 7% 'Asian'; 4% 'Mixed [heritage]' and 1% 'Black'; and
- Twenty percent reported that they had 'no religion', as opposed to 67% identifying as 'Christian'; 7% 'Muslim'; and 6% 'Jewish'.

Furthermore, approximately 75% of all householders within Marketon owned their own home (significantly higher than the national average); and of those of 'working age' (16 to 74 years) approximately 42% were economically active (higher than the national average) and approximately 30% had no academic qualifications (similar to the national average).

Politically speaking, Marketon has traditionally been a Labour Party controlled council. Indeed, after the Local Election of May 2018, the Council remained in Labour control, with both Members of Parliament also elected from the Labour Party.

3.3.2 Locating the Child Protection Team (CPT)

Marketon's current Children's Services Department (CSD) was established in April 2005 as part of the local authority's response to the Children Act 2004. It combined the former Department of Education and Culture, the Youth Offending Team and of course, the Children's Social Care division of Social Services, whilst also creating links with children's healthcare staff from the local Primary Care Trust.

The CSD is responsible for coordinating services for children, young people and their families. It provides a variety of services, from universal services (such as education); to targeted services (such as early help provision); and specialist services (such as children's social work/social care services). It is composed of five 'divisions': three concerned with the logistical management of the department ('Commissioning'; 'Human Resources'; and 'Finance'), and two comprising the

services provided to children and their families ('Learning and Culture' – including all education services; and 'Social Care and Safeguarding').

The Child Protection Team (CPT) comes under the auspices of 'Social Care and Safeguarding', which is headed by one of only two 'Assistant Directors', and comprises thirteen social work and social care teams (ranging in staff size from 6 to 32), organised into three domains ('Early Help'; 'Safeguarding'; and 'Care Services') – each overseen by a 'Strategic Lead'. The CPT is situated in the domain of 'Safeguarding' (see Figure 2, below).

3.3.3 Responsibilities of the CPT

In understanding the responsibilities of the CPT, it is helpful to consider its positioning in the Social Care and Safeguarding Division, and on this basis, I refer to Figure 3 (below) which has been adapted from a training document given to all of Marketon's new childcare social workers. It depicts, from the point of referral, that which might be conceived as a 'typical journey' of a child through the Social Care and Safeguarding Division. Whilst the figure conceives this 'journey' as linear – which was often not the case (and is a point of emphasis within the Munro Review) – the figure helpfully summarises the pathway in which cases would move into, and out of, the responsibility of the CPT.

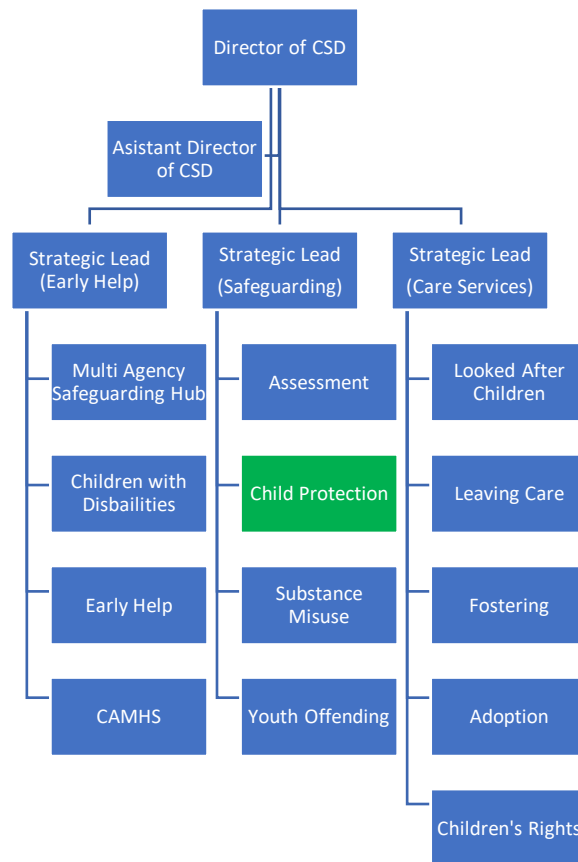


Figure 2. Structure of ‘Social Care and Safeguarding’ Division

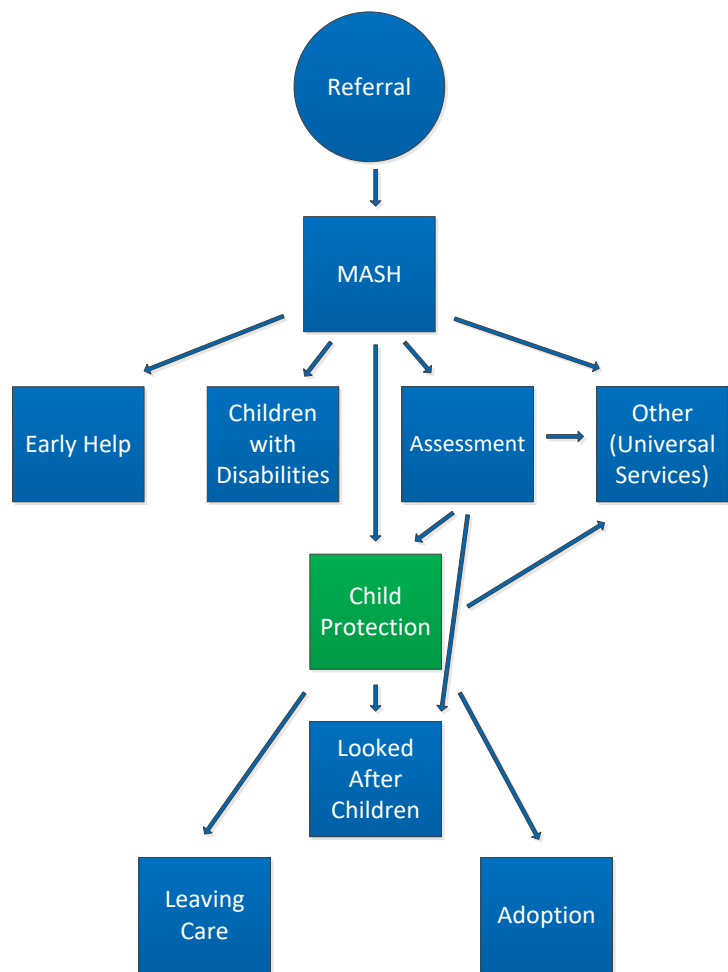


Figure 3. A child's potential journey through Marketon's CSD

Indeed, there were two routes with which a child's case was referred to the CPT.

The first was directly from the Multi-Agency Safeguarding Hub ('MASH'), where after reviewing a new referral, the 'MASH' social worker decided that the case required the oversight of the CPT. However, this route was rarely utilised, and tended to be limited to those cases which had been previously held by the CPT, only to be closed and rereferred a short time later.

Most often, a case transferred to the CPT from the 'Assessment Team', whose remit was to conduct a 'Children and Family' Assessment (conceived elsewhere as the 'Single Assessment') so as to determine the level (if any) of social work intervention required.

In completing this assessment, four options were available to the assessing social worker:

- To decide that threshold was not met for social work intervention, but that support should continue to be provided by universal service provision ('Other') under the premise of 'Team Around the Child' (see Children's Workforce Development Council, 2009);
- To decide that a child met the criteria for 'child in need' (as defined in Section 17 of the Children Act, 1989) and therefore should be provided with ongoing social work services under the auspices of a child in need plan (see HM Government, 2018: 37);
- To decide that the threshold for a likelihood of 'significant harm' (as outlined within Section 47 of the Children Act, 1989) had been met, and that

the child should therefore be provided with ongoing social work services under the auspices of a child protection plan (see HM Government, 2018: 49); or

- To decide that the threshold for a likelihood of ‘significant harm’ had been met, and that the welfare of the child required immediate oversight by the Family Court under the auspices of child care proceedings (Section 31 of the Children Act, 1989) (see Department for Education, 2014).

If the outcome decision constituted any of the latter three options, then the case was transferred to the CPT for oversight and management by a child protection social worker. The CPT would only relinquish a case at the conclusion of the child in need plan; the child protection plan; or the child care proceedings – at which time responsibility would pass either to universal service provision (for example, health and education professionals) or one of the CSD ‘permanency’ teams (for example, ‘LAC’, Fostering or Adoption – see Figure 3).

3.3.4 The sample cohort

My sampling approach within the study assumed a mixture of ‘purposive’, ‘convenience’ and ‘criterion’ techniques (Bryman, 2012: 418-419): ‘purposive’ in that I chose to focus on the CPT over other social work teams, specifically because the remit of the team – the implementation of child protection statutory guidance and legislation – made it the most pertinent focus for achieving my research aims. ‘Convenience’ sampling, in that I utilised the social work team that was most readily available to me – it was the team on which I was employed (see Section 3.5.2); and

‘criterion’, in that I only included within the sample, those members of the CPT who I judged as offering me the best source of data relative to my research questions (see below).

However, one of the challenges posed by the research was of the evolving nature of the CPT from the point that my research proposal was accepted (in 2012) through to the conclusion of the data collection (in 2016). This meant that the make-up of the team and the cohort of potential participants available to me changed repeatedly during the course of the study.

For example, in May 2012, the CPT comprised three teams totalling 33 staff, with 18 social workers. However, by May 2016, it comprised four teams, 44 staff and 25 social workers. The reasoning for this expansion was ostensibly in response to the ‘increasing demand’ being placed on Marketon’s CSD during this time (see Section 6.1.1). However, the CPT also assumed different iterations after an Ofsted inspection labelled it as meeting only ‘minimum requirements’ in its ‘overall [child protection] effectiveness’; and then following the appointment of a new Assistant Director of Children’s Services (ADCS) who cited a further need for reorganisation ‘in preparation for [the next] Ofsted inspection’. (For further discussion of Ofsted inspection as a mechanism underpinning discretionary space and choice see Section 6.2.)

Indeed, between May 2012 and May 2016, 112 individuals were employed on Marketon’s CPT, with a staff-turnover rate of more than 85%. However, I was fortunate that during the period of formal data collection (December 2014 – May

2016) the CPT experienced a period of relative stability, with a consistent management team, and a reduction in staff turnover rate to 45% – of the 20 social workers employed on the CPT in December 2014, 9 had remained in March 2016 (when the research interviews were initiated).

To be included within the research, staff had to satisfy two criteria: to be employed on the CPT as either a social worker or team manager (excluding therefore, the family support workers, psychologist and administrative staff); and to have worked in this capacity for a period of at least 6 months – my rationale being that a different role, or less experience, could restrict a prospective participant's ability to comment on the issues that were the focus of this study. Every member of staff who met these criteria were invited to participate within the study.

In total, 25 different CPT staff – comprising of 21 social workers and 4 team managers – participated in the focus groups; questionnaire and interviews. Whilst the team managers only participated within the focus group (see Section 3.7.2), 6 of the 21 social workers participated in two stages (for example, the focus group and questionnaire), but none in three stages. (For an account of the demographic information pertaining to these participants see Appendix 2.)

3.4 Access

Whilst an option available to me at the outset of this study, was to seek out a different research setting to that of my employer, this seemed illogical, given that to do so would likely prohibit me carrying out an ethnography – I simply did not

have the available time between work, study and family commitments to immerse myself within another setting.

Besides, I considered myself fortunate to already have a ready 'access' to a group of prospective research participants, something which I knew other researchers had struggled to achieve (for example, Pithouse, 1998 and Pepper, 2016). However, I still required formal 'permission', not only to gain access to the CPT staff, but also the documents and data that would enable a 'rich' account of social worker discretionary space and choice, and an understanding of the mechanisms underpinning these.

Hammersley and Atkinson (2007) observe that:

In formal organizations... initial access negotiations may be focused on official permission that can legitimately be granted or withheld by key personnel... Knowing who has the power to open up or block off access, is, of course, an important aspect of sociological knowledge about the setting (p. 49-50).

As an employee of Marketon's CSD, I had a good knowledge of the organisational hierarchy (see Figure 2), and I understood that the 'gatekeeper' of the CPT was the Assistant Director of Children's Services (ADCS) (see Figure 1). However, at the time of submitting my research proposal, I did not have the type of relationship with this individual that might facilitate the requisite permissions being granted – we had never met, nor communicated, and I reflected that there was little reason for them to trust me with research access.

Indeed, I feared that a request for access made prematurely, or in the wrong way, could jeopardise the research taking place at all (Hammersley and Atkinson, 2007), and thus I felt that a 'strategic' approach was necessary so as to optimise my chances of obtaining the necessary permissions (Bryman, 2012: 435).

My 'strategy' was to seek out a 'champion' who could advocate for and present the research proposal on my behalf (Bryman, 2012: 435). I decided upon a former team manager with whom I had enjoyed a good professional relationship, and whom was now acting as the 'Strategic Lead for Early Help' (see Figure 2) – a position that provided her with regular opportunities to meet directly with the ADCS, and thus, a platform from which to pitch the merits of my proposal. I considered that the ADCS might be more receptive to an approach from another senior manager, than she would a 'street-level' social worker.

I was grateful that the Strategic Lead agreed to my request. She advised me that the bi-monthly senior managers meeting – where the ADCS would be in attendance – would provide the most appropriate forum for presenting the proposal and offered to take it on my behalf. This tactic was successful in that following the next meeting, the ADCS emailed me directly to advise that the proposal had been 'well received' and invited me to meet in order to 'answer some supplementary questions'.

Others have commented upon the lack of consistent and regulated research governance in local authority social services departments (see for example, McLaughlin and Shardlow, 2009) and in particular children's service's departments

(see Boddy and Oliver, 2010), where access is often granted by senior members of staff who are not necessarily research literate. Ultimately, this meeting proved to be the limit of the governance enforced by Marketon, and I remain unaware of the ADCS' 'research literacy' at that time. However, she did request further information about how I would: 'protect the identity of [Marketon] and its staff'; 'respond to any disclosures of unethical or abusive behaviour'; and 'manage sensitive data'.

Whilst this suggests a commitment to ethical standards on behalf of the ADCS (and I address each of these areas below – see Section 3.6), Hammersley and Atkinson (2007) observe that on occasions, such requests arise from the gatekeeper's concern about 'the picture of the organization... that the ethnographer will paint' (p. 51):

Gatekeepers usually have practical interests in seeing themselves and their colleagues presented in a favourable light (p. 51).

Nevertheless, I sought to reassure the ADCS about my professional (but also ethical) commitment to Marketon and its staff, by providing her with a copy of my draft University ethics application (and later evidence that ethical approval had been granted – see Appendix 15).

Further, I agreed to her request that at the conclusion of the research, I would provide a written report of the main findings – understanding that 'offering something in return' could help to 'create a sense of being trustworthy' (Bryman, 2012: 435). Whilst such measures also risk restrictions being placed upon that information which is subsequently allowed to enter the public domain (Hammersley

and Atkinson, 2007), no such restrictions were enforced at the conclusion of this study.

It is on this basis that in the Autumn of 2013, the ADCS provided me with written permission to access the CPT and 'all necessary materials' (see Appendix 14).

3.5 Locating myself within the research setting

Whilst there are several different definitions of 'reflexivity' in regard to social research (see Bryman, 2012; May and Perry, 2011), in respect to ethnography, the concept can be understood as the process of a researcher locating themselves within the research setting and considering how their presence there may have influenced how the research took place (Brewer, 2000).

Indeed, it is through reflexivity that a researcher is able to identify challenges born out of their role, thus seeking to reduce their effects and in turn improve the rigour of the enquiry and its subsequent findings (May and Perry, 2011).

It is in these terms that I seek to 'locate myself' within the research setting, engaging in that which Lynch (2000: 29) refers to as 'methodological self-consciousness', noting that I was both 'intimate-insider' and 'relative-outsider' during the course of this study. In so doing I hope to highlight those challenges which I encountered, my response to these, and the implications for the research.

3.5.1 Notions of 'insider' and 'outsider'

Merten (1972) identifies the insider-outsider concept as an epistemological principle centred on the issue of access in ethnographic research, and the positioning of the researcher relative to the group being studied. He explains:

Insiders are the members of specified groups and collectivities or occupants of specified social statuses; outsiders are the nonmembers (p. 21).

Merten (1972) argues that a researcher acquires 'insider' status, either because of their exclusive knowledge of setting and its people, or because they have a privileged access to the group being studied. This contrasts with the 'outsider' researcher who assumes the role of 'professional stranger', detached from the community under investigation:

It is the stranger... who finds what is familiar to the group significantly unfamiliar and so is prompted to raise questions for inquiry less apt to be raised at all by insiders (Merten, 1972: 31).

In these terms, Merton (1972) conceives 'insiderness' and 'outsiderness' as a dichotomy: one is *either* 'insider' *or* 'outsider', as the concepts are conceived as 'two mutually exclusive... frames of reference' (Olson, 1977: 171). However, others assert that whether a researcher is 'in' or 'out' is also informed by a combination and intersection of a number of different factors, including: their own characteristics; time; location; the topic of research; and the status and power dynamics between the researcher and researched (see Dwyer and Buckle, 2009). On this basis, theorists argue that it is indeed possible for a researcher to experience simultaneously insiderness and outsiderness relative to different groups

within a research setting (Deutsch, 1981) – a notion that, as I explain below, resonates with my experiences within this study.

3.5.2 Myself as ‘insider’

My own history with Marketon and its CSD began in July 2007, when I took a job with its Education Welfare Service. Then, when I returned to University to complete my Social Work Qualifying Master’s degree in September 2008, I moved to a position of ‘Family Support Worker’ on Marketon’s ‘Family Support Team’ (which working alongside the CPT, afforded me evening and weekend work so as to accommodate my studies and social work placements).

I began my role as a social worker on the CPT in September 2010, and thus, at the time that my research proposal was accepted, I had been employed within Marketon’s CSD for 5 years, and with the CPT for two of these. In this sense, I conceived myself as an ‘insider’ both because of my knowledge of the setting and its people, and because of my privileged access to the group being studied (Merten, 1972).

There is ample discussion within the wider literature about the advantages of ‘insider’ research (see for example, Adler and Adler, 1987; Wolcott, 1999; Brewer, 2000; Edwards, 2002; Hodkinson, 2005), and these are said to include:

- There being a greater familiarity between research subjects and researcher – engendering a sense of improved trust and comfort for the former and (it is argued) a greater willingness to engage in the research;
- The researcher is better able to ‘blend in’ to the environment being studied – thus reducing the likelihood of artificial behaviour cultivated by their presence;
- The researcher holds a greater knowledge of, and familiarity with, such things as the ‘native speak’ of the group and the meanings ascribed to both situational and cultural factors of the setting; and
- The researcher is afforded access to a wider range of data source (see Hammersely and Atkinson, 2007; Brewer, 2000; Labaree, 2002).

I believe such advantages were born out within this study. For example, as a member of the CPT, I was party to the ‘inside’ communications (including emails and memos) between members of the team and team managers, senior managers and other social work teams; I understood the meanings assigned to the everyday jargon employed within the discourse of the CPT (for example, I could easily differentiate between an ‘IRO’; ‘PPO’; ‘ICO’ and ‘SGO’ – see Appendix 19); I did not require special arrangements in order to gain physical access to the setting, but instead simply arrived, used my own key-card and sat at my own work desk; and lastly, in that my colleagues knew me, certainly professionally, but also to a large extent on a personal level.

Indeed, at the time of starting the formal data collection (in December 2014), I had worked on the CPT for 4.5 years and had known several of the staff for an even longer period than this (due in part to my time with the Family Support Team). In this respect I considered myself more than employee of Marketon and colleague to members of the CPT, but as a ‘friend’ to several of the participants within this study – indeed, outside of work I had, for a number of years, attended the weddings, christenings, funerals and birthday parties of members of the CPT and their families.

3.5.3 Challenges of being the ‘intimate insider’

Whilst pre-existing relationships between researcher and researched are not uncommon in ethnography, friendships with colleagues in a workplace setting are characteristic of a type of insiderness, which Taylor (2011) identifies as the ‘intimate-insider’:

The ‘intimate insider’... researcher is working, at the deepest level, within their own ‘backyard’... where the researcher’s personal relationships are deeply embedded... where the researcher has been and remains a key social actor... and where the researcher is privy to undocumented historical knowledge of the people... being studied (p. 9).

Whilst Labaree (2002) identifies specific challenges of ‘insiderness’ pertaining to entering the field; positioning and disclosure within the field; and those which arise from shared and significant relationships with research participants, Taylor (2011) considers that these are accentuated for the intimate insider as they manoeuvre and negotiate a new role within an ‘intimately’ familiar environment.

Such sentiments resonate with me. For example, whilst ‘entering the field’ I did not have to contend with being a new and unfamiliar face and the associated obstacles that this can create (see Pepper, 2016), a difficulty that I had was how I communicated to my colleagues that I would be assuming an additional role within the CPT (that of researcher); what that would entail; and the positioning that I would adopt relative to the group.

‘Researcher... does that mean that you will be experimenting on us?’ a colleague asked, as I broached the subject within a team meeting. ‘No’ I replied, ‘more that I will be observing what is said, decisions actions... that sort of thing’ (Discussion with Social Worker – CPT meeting, November 2014). Following the exchange of (what I perceived to be) nervous glances, I explained the ethical implications of my dual role, including the group’s rights as participants; my ethical responsibilities to them; and the precautions that I would take in ensuring their welfare was protected (see Sections 3.6.1-3.6.4). However, I still sensed that there was an underlying uneasiness that a colleague (even one, who for many was considered a ‘friend’) would be observing and recording the interactions of the group.

Of course, one of the advantages of the insider role is that the researcher immerses themselves within the group of study, giving them a better vantage point from which to explore the social phenomenon (Brewer, 2000). This was easy for me in the sense that I sat at my same desk and – for large parts of the study – continued the same tasks that were afforded to me as a social worker of the CPT (for example, supporting colleagues on visits; taking my turn on the ‘duty rota’ etc). The problem I

encountered however, was that there was no clear distinction between me as 'worker' and me as 'researcher', which created a number of difficulties, both for myself and, I believe, the participants.

For example, like Leigh (2013), I sometimes found myself so consumed by my work commitments and the various child protection tasks that entailed, that I missed opportunities to make a note of a pertinent interaction or event in my observation diary. Whilst White (1997) asserts that it is unlikely that any ethnographer who wears the 'two hats' of researcher and worker is immune from such omissions, it is nevertheless disappointing, in the context of striving to provide a 'rich' account of the social workers' interactions.

However, for my colleagues the dual-role was ostensibly even more problematic and there were repeated occasions in which they would admittedly 'forget' that I was also a researcher, and would share something, only to realise at the point that I reached for my observation diary, and request 'please don't record that... it's off the record'.

On these occasions, I invariably complied with the request in the interests of 'informed consent' (see Section 3.6.1), but was again often frustrated by the omission, on the basis that it impacted upon the 'richness' of data collected.

There were also those occasions in which participants shared a particular account, only for me to agonise over whether to include it, on the basis that the disclosure held information so personal to that individual, that it risked them being identified.

One example of this, was of a colleague, who in her accounts of discretionary behaviour, made links to her childhood experiences of domestic abuse and substance misuse. On occasions such as this, it was I who would explicitly ask 'would you mind if I include that within my research?' Whilst I believe that this was a necessary ethical safeguard, it meant that at these times, my researcher status intruded into those moments which until that point, had entailed naturally occurring conversations, only for them to instantly feel rather 'unnatural' (see Hammersley and Atkinson, 2007).

Indeed, I believe it was the intimacy of the relationship which afforded such detailed and personal disclosures as the one above. The challenge that I experienced was when these disclosures occurred away from the formal research setting, but in more social contexts where something would be said that I judged to be particularly pertinent to the research, and I would be duty bound to ask, 'would you mind if I include that...'.

Two such occasions stand out. Both were social functions in the form of a 'leaving meal', and both involved colleagues sharing their frustrations of work. In each, the social workers became visibly irritated by my request to include their account in the research, especially when they realised that I had brought my observation diary with me – 'you take that bloody thing everywhere' one exclaimed.

It was on the second of these occasions that I reconciled that my presence at these social functions caused a particular ethical tension: these were places and occasions

that my colleagues constructed as ‘away from work’, where they could relax and talk freely, only to again be confronted by the spectre of the researcher.

Thus, I took the decision early on in the research to stop attending those social functions, realising that whilst this was often a context which served as a source of ‘rich’ data – and was arguably an extension of the research setting in the context of ethnography (Hammersley and Atkinson, 2007) – there was something intrusive about my presence there. It was important, I decided for my relationship with my colleagues and participants – especially in the interests of maintaining their consent to engage in the research – that I enforced a degree of self-control and thus distance when away from work. This I considered would reduce any concern amongst the participants that, even in their free time, they were under surveillance. The cost however, was not only that I missed events which could offer a source of valuable data, but that it impacted upon my personal relationships with colleagues, as on these occasions I chose my position as ‘researcher’ over ‘friend’ – something which I believe contributed to my transition from ‘intimate-insider’ to the ‘relative-outsider’ (see Section 3.5.5).

3.5.4 Simultaneously ‘insider’ and ‘outsider’

In her account of the challenges of undertaking an ethnography as ‘intimate-insider’, Leigh (2013) recounts how she adopted different behaviours so as to distinguish herself as researcher:

I had always felt comfortable to join in with office banter as well as... any general gossip. But in my new role, I wanted my colleagues and managers to see me differently; someone that

they would feel able to confide in and whom they could trust... This new persona brought a new meaning to the notion of 'impression management'... and I often found myself remaining silent during informal discussions, wondering if anyone had noticed I was saying nothing at all (p. 111).

At the point of starting my own data collection, not only did I stop attending those aforementioned social functions, but, like Leigh, I also made a decisive commitment not to engage in many of the usual office interactions which, until that time, had been characteristic of my identity within the CPT. My justification for this was of course related to my researcher status, but not so much because I wanted my colleagues to see me differently (although I accept that this was perhaps an understandable 'ripple effect' of this decision), but because I considered that these moments offered the potential for what Leigh (2013) describes as those 'golden nugget' disclosures (p. 121), and therefore required me to assume a more distant and objective position.

In her own ethnographic account of 'espionage and encounters', White (1997) describes feeling like a 'spy in the camp' as she listened to work colleagues 'juicy exchanges':

keeping one's opinions to oneself in order not to disrupt a particularly interesting piece of dialogue (p. 330).

This also resonates with my own experience, as often I chose to remain silent, observe, and listen to the interactions of social workers within the CPT office, rather than offer anything which might 'disrupt' their interactions. However, unlike Leigh (2013), I did not have to wonder whether my colleagues had noticed the change in my 'persona', as early in the data collection they began making remarks like 'you

are much quieter than you used to be...'. 'I'm just listening' I would tell them – triggering signs of discomfiture amongst my colleagues (including, grimaced facial expressions and raised eyebrows).

White (1997) concedes that it was not only her that conceived herself as 'spy', but also the social worker participants within her study, who, suspicious of her connections with departmental management, theorised that her motives, rather than 'research', were actually to discretely evaluate work performance. Bryman (2012) asserts that such occurrences are not unusual in ethnography:

People will have suspicions of you, perhaps seeing you as an instrument of top management (p. 439).

White (1997) draws from these experiences to argue that insider researchers can nonetheless remain in specific respects, also outsiders in their own culture.

I reference this point particularly because during the course of the data collection, not only did I also simultaneously experience insiderness and outsidership relative to two distinct groups within the CSD, but what is more, transitioned, I believe, between insider and outsider, and outsider and insider, in respect to these groups.

3.5.5 The 'relative outsider'

When my research proposal was accepted in May 2012, and I first broached the subject of research with my employer and colleagues, I was considered a 'level 2' social worker (as opposed to 'level 1' – the newly qualified social worker; or 'level 3' – the senior social worker). This meant that I held a caseload, took my place on the 'duty rota' and was managed directly by the CPT manager. In this sense the social

workers, ostensibly saw me as ‘one of us’... ‘one of the team’ – despite my researcher status and, for some, trepidations about being ‘research participants’ (see Section 3.5.3).

However, as a social worker I was not, I believe, considered an ‘insider’ in respect to the management and other senior members of staff within the CSD. This was especially pressed home when I attempted to access other sources of data to help me better understand some of the issues which were emerging from the social workers’ accounts. For example, on requesting the data on the number of child protection plans discontinued by the CSD between two points in time, the keeper of this information did not respond to my email, but instead himself emailed the ADCS, asking whether ‘as a social worker... does Ciaran really need access to this?’ Even after the ADCS had copied me into her response, in which she gave me explicit consent to have access to the data, the keeper still did not forward me the material, but instead claimed to have ‘forgotten’ when I later telephoned him to ask for it.

After a number of similar incidents, involving different individuals and information, I reconciled that such data (despite some of it later existing in the public domain) was considered ‘privileged’ to a select group of senior staff within the CSD. ‘As a social worker’, I would not ordinarily be one of these privileged few. However, this was to change as I would ascend the departmental hierarchy.

Indeed, by the point of starting the formal research interviews in March 2016, I had been promoted three times and was serving as the CPT’s (and CSD’s) only ‘Consultant Social Worker’. This meant that I no longer held a caseload, nor did I

take a share of the CPT duty rota. Instead, my position hierarchically was aligned to the CPT manager and entailed a number of management and strategic responsibilities, including being the keeper of some of that very data, which I had previously struggled to gain access to.

What is more, my own line manager was now the Strategic Lead for Safeguarding (see Figure 2), but I also had recourse, in a number of my activities, to report directly to the ADCS. Thus, I considered myself 'on the inside' of this select group of 'senior staff', especially as I attended a number of senior management and strategy forums, in which I was given access to data which I may not have otherwise known existed.

However, despite my changing roles, I had, throughout the course of the data collection remained in situ at the same desk within the CPT, amongst several of the same social workers. As my role changed, so too did my experience of 'insiderness' with regards to this group. Like White (1997), I believe that several of my colleagues became suspicious of my role within the CPT as is born out in this exchange with a colleague during a car journey to a court hearing:

You know they are now calling you 'Agent Golden-Balls'? (Social Worker)

Really? Why? (Researcher).

Because, they think you are too close to management... they don't trust you (Social Worker).

Do you think they still see me as part of the team? (Researcher).

They know you are... but I think they see you more as an outsider, relatively speaking (Social Worker).

(Discussion with Social Worker – Car journey, January 2016).

This notion of me as a 'relative-outsider' was one that I came to share with the social work staff. Indeed, by early 2016, I accepted that the closeness and familiarity which I had once been afforded to many of the CPT social workers had dissipated in line with my conscious distancing (so as to establish a more objective research profile) and as a consequence of my progression to a more senior role.

The transition to 'outsider' manifested gradually, and in a number of ways. Firstly, there were those subtle changes: for example, I was incrementally omitted from those 'intimate' email exchanges amongst members of the team. Further, a tendency developed amongst the social workers to cease their conversations the moment that I entered the CPT office. Sometimes I would ask, 'what were you talking about' only for the response to be vague and along the lines of 'we were just catching up' ... 'just discussing a case'.

In spite of this, no social worker withdrew their consent to be observed as part of the ethnography, and I still encountered occasions in which the social workers, whilst seemingly immersed in a particularly challenging child protection task, would ostensibly forget the presence of the 'relative-outsider' and engage in exchanges that offered opportune moments for recordings in my observation diary. The difference was that towards the end of the study, these interactions were no longer aimed at, nor sought to include me, but took place around me, and despite of me; and to this extent I reconciled that my insider status had evolved from one that was

less 'intimate' (Taylor, 2011) to more 'marginal' (see Hammersley and Atkinson, 2007; Gerrish, 1997).

3.6 Ethics

McLaughlin and Shardlow (2009) assert that traditionally social care research in England has been left 'relatively ungoverned by social work and social care delivery organizations' (p.6). As I have outlined above, my experience of governance enforced by Marketon was limited to a requirement to seek the permission of the local 'gatekeeper', and to reassure her about issues that I felt had less to do with maintaining ethical standards and safeguards, but more with ensuring that Marketon would not be the subject of negative publicity (see Section 3.4).

That such concerns form the limit of the governance offered by some local authorities can have negative implications for that research where the principal investigator is an employee of that authority and is not subject to more rigorous ethical standards and regulation (McLaughlin and Shardlow, 2009). However, because this research formed the basis of my PhD, it was subject to ethical scrutiny and governance by Manchester Metropolitan University's Academic Ethics Committee.

In this section I set out the ethical safeguards employed within this study, which formed the basis of ethical approval, granted by the Academic Ethics Committee (see Appendix 15).

3.6.1 Informed consent

The University's Academic Ethics Framework (AEF) (2018) states that '[p]articipants [should] be made fully aware of the true nature and purpose of the study, *except where there is satisfactory justification*' [original emphasis]. Hammersley and Atkinson (2007) observe that some ethnographers justify the withholding of this information because they believe that only a 'covert' observation of behaviour is able to elucidate the full dynamics of a specific phenomenon, and by seeking explicit consent from participants it can affect their behaviour 'in ways that will invalidate any conclusion' (p. 211).

Whilst I accepted that my role as 'researcher' placed upon me the requirement to obtain a full and rich account, I felt uneasy about the prospect of deceiving and intruding on the privacy of participants who were also colleagues and friends (Bryman, 2012). (I also considered that there were practical barriers to trying to covertly observe the behaviours of those with whom I shared an office space.)

Indeed, I decided that only a 'full disclosure' approach would be in the spirit of my 'intimate-insider' status (see Section 3.5.3), and I chose initially, to introduce the research, its aims and design, to the CPT during two team meetings in late 2012. Then, following formal ethical approval from the University's Academic Ethics Committee in November 2014, I emailed each member of the CPT a written 'invitation' to take part in the research; attaching to that email a 'Participant Information Sheet' (PIS) (see Appendix 3).

Within the PIS, I reminded the CPT staff of the study's purpose and detailed what my 'observation' of the team would entail, as well as their rights as 'participants' – or 'non-participants' (if they chose not to consent) – and the ethical safeguards that would be maintained throughout. I also asked them to complete and return to me an electronic consent form, indicating that they had read and understood all aspects of the PIS and agreed to participate within the observation. (It should be noted that this process was replicated for each new member of the staff team.)

Despite sensing a general nervousness amongst the cohort about the prospect of being 'observed' (see Section 3.5.3), I was able to acquire the consent of the full complement of social workers, which retrospectively, I believe can be attributed both to the 'intimacy' of my insider status at the outset of the data collection, and also the inclusion of a stipulation within the PIS that participants could request the omission of any exchange or disclosure that might be attributable to them (see Appendix 3).

Whilst such an approach is unusual in ethnography given that it can preclude key observations from the data collection (Hammersley and Atkinson, 2007), I felt that this potential cost was outweighed by the benefit of having each social worker's agreement to be observed – meaning that overall, I was able to include more material than I would have otherwise been able to.

In addition to providing their consent to be observed, each participant of the focus groups, questionnaire, and interviews were given a supplementary PIS (see Appendices 4, 5 & 6) for that aspect of the study (detailing what specifically

'participation' would entail and reminding them of their rights as participants) and provided written consent to participate.

In this sense each participant fully consented to their contribution being included within this study.

3.6.2 Anonymity and confidentiality

Anonymity and confidentiality are a point of emphasis in the University's AEF. In the context of ethnography, Hammersley and Atkinson (2007) remind us of the risk of harm that can be inflicted to research participants – or any connected person – if information is shared which can subsequently lead to their identification.

In respect to this study, the importance of maintaining anonymity and confidentiality extended both directly to the participants of the research, and also indirectly to those who were the recipients of their services. In respect to the former, I was conscious that members of the CPT were reporting on their experiences of working for their employer and was therefore concerned that any failure to protect their identity could have negative consequences for their current and future employment prospects.

For the latter, I was aware that during the course of their testimonies the social workers would likely share anecdotal accounts of their work with service users. The child protection task is of course, by its very nature, a confidential process; one which recognises the rights to privacy of those who are in receipt of child protection services and the stigma that can be inflicted especially when their

identities enter the public domain (Munro, 2002). My concern was therefore that a failure to protect the identities of the research participants, could lead to their service users being identified from their accounts, with the risk that this would inflict unnecessary harm and distress upon these individuals, and contravene their rights to privacy and consultation before their information is shared in any public document.

Therefore, I sought to protect the identities of all individuals, not only by employing a pseudonym in respect of 'Marketon', but also by ascribing anonymous identifiers to each research participant. In all subsequent recordings, I referred to these individuals, or assigned an account to them, using only this identifier.

Furthermore, where participants used the name of a colleague or service user within their accounts, I omitted the name in the subsequent transcript and replaced it with titles such as 'manager'; 'social worker' or 'service user'.

However, I also recognised the limits of confidentiality, and that there might be occasions where I would be duty bound to 'whistleblow' and not protect the identity of the individuals concerned (see Section 3.6.4).

3.6.3 The management and storage of information

In maintaining anonymity and confidentiality it is essential that researchers take steps to protect that information which they hold about their participants (Crow and Wiles, 2008). This is again a point of emphasis within the aforementioned institutional AEF, and it is particularly important consideration in respect to

ethnography where researchers often hold a large amount of personal information about their participants (Hammersley and Atkinson, 2007).

What is more, not to maintain a secure management and storage of participants' data is to risk being in breach of specific data protection legislation, and on this basis, I have, during the course of this study, ensured that data in all formats has been stored in a secure and protected manner.

For example, whilst I maintained an 'observation diary' throughout the period of data collection, I employed anonymous identifiers when referencing specific social worker interactions and was careful to ensure that, if misplaced, no information was obtained within, that could be identified as attributable to any individual.

The diary itself was kept on my person at all times during the course of the workday and stored in a lockable filing cabinet at my home residence in the evenings and weekends. Further, I would transcribe my recordings on a weekly basis from within the diary onto a password protected Microsoft Word file, after which I would destroy the original 'hard copy' entry.

In the focus groups and interviews, I employed audio recording equipment in order to keep an accurate record of the discussions taking place. However, I ensured that within three days of the recording being made, it was transcribed onto a password protected Microsoft Word file, and then permanently erased from the recording device.

The questionnaire was designed and stored on a secure internet-based platform.

After completion, the generated data was downloaded onto a password protected Microsoft Word file and then erased from the internet platform.

Each password protected file was stored on an encrypted hard drive, which did not leave my home residence, but, was secured in a locked filing cabinet, and was only removed for periods of data analysis.

3.6.4 Expectations pertaining to ‘whistleblowing’

Previous social work ethnographers have, in their consideration of ‘ethics’, often omitted any explicit consideration of the regulatory framework that governs the profession of social work, and how this impacts upon the ethical safeguards undertaken during the course of their study. However, I considered this a necessary step, recognising that despite my researcher status, I had, as a registered social worker, a ‘duty’ to conform with specific professional ‘standards of conduct, performance and ethics’ (Health Care Professions Council, 2012: 1), including in my interactions with the research participants.

A particular concern of the University’s AEF is how researchers manage disclosures from participants that might be judged as being unethical or abusive in respect to third parties. I recognised my responsibilities as a registered social worker to ‘protect service users [from] any situation [that] puts them in danger... includ[ing] the conduct, performance or health of a colleague’ and to prioritise their ‘safety... before any personal or professional loyalties’ (Health Care Professions Council,

2012: 8). As such, I was committed to comply with the relevant 'whistleblowing' policies of the agency and regulator; reporting any concerns of unethical behaviour.

In the interests of 'full disclosure' I advised the research participants of this commitment within the PIS (see Appendix 3), making clear that which would necessitate such a course constituted any behaviour which could be conceived as placing 'the health, safety or wellbeing of a service user in danger' or in an ethically compromised position (Health Care Professions Council, 2012: 8).

The social workers consented to participate on these grounds, but ultimately, no disclosures did arise which met the threshold for confidentiality to be broken.

3.7 A retroductive model for data collection and analysis

Critical realist research tends to be empirically wide-ranging as information about the nature of generative mechanisms can be found in many different locations (Ackroyd and Karlsson, 2014). Broadly speaking, critical realists would assert that by ensuring a sustained observation of behaviour, through different research techniques and methods, and by noting deviations from sanctioned beliefs and expected behaviours, one can develop an understanding of the specific generative processes underpinning human agency (Ackroyd and Karlsson, 2014).

On this basis, advocates of critical realist-informed enquiry argue that researchers should strive to embed and immerse themselves in the research setting – exploring from the 'inside' a specific phenomenon – so that that they too can observe,

experience directly, and come to understand the social processes and structures at play (Rees and Gatenby, 2014).

Ethnography is considered an appropriate means of achieving this; one which provides a 'connective tissue' between

actions of people in a social setting and the social and political structures within which those actions occur (Rees and Gatenby, 2014: 132-133).

Further, ethnography enables both abductive and retroductive processes (Rees and Gatenby, 2014), which are considered essential to any critical realist enquiry (O'Mahoney and Vincent, 2014).

'Abduction' is conceived as 'reasoning from immersion in a scene to a verbal summary' whereas 'retroduction' is understood as 'reasoning about why things happen'; including why data appears as it does (Olson, 2007: 1). Importantly, critical realist research moves beyond both deductive reasoning – 'from generality to data via hypothesis testing' – characteristic of positivism; and inductive reasoning 'from data to generality' – characteristic of constructionism (p. 1); to embed abductive and retroductive processes within enquiry (Olson, 2009; Bhaskar, 2014; O'Mahoney and Vincent, 2014; Ackroyd and Karlsson, 2014).

As Bhaskar (2014) asserts, abduction allows the critical realist researcher to move from the empirical to the real by enabling a 'redescription or recontextualization' of observable events – 'most usually in terms of a characteristic causal mechanism or process which serves to explain it' (p. vii). Similarly, retroduction 'involves imagining

a model of a mechanism, which if it were real, would account for the phenomenon in question' (p. viii) and in this sense retroduction can suggest a number of other causal processes which affect the mechanism observed, enabling a better knowledge of that mechanism and the context within which it arises (O'Mahoney, and Vincent, 2014).

Therefore, retroduction is conceived as 'the central tool of critical realist inquiry' (Oliver, 2012: 379); one that attempts to identify causal mechanisms before also seeking empirical evidence as to their existence. In these terms, Rees and Gatenby (2014) assert that 'ethnography... is ideally suited to facilitating the retroductive process' (p. 139), and propose a three-staged model for conducting a critical realist ethnography:

1. An examination of the key phenomena from within a social setting;
2. Data analysis to identify theoretically deduced categories of factors influencing the said phenomenon;
3. A process of inference (often involving movement between further data collection and analysis), in which the conditions for the social phenomena under investigation are explained – including the identification of deeper causal mechanisms.

The authors explain that a commitment to this model holds implications for the methods of data collection and analysis selected by the researcher, and indeed, how these methods are employed. This includes striving to incorporate a combination of methods that both compliment and mutually-inform one another

(Rees and Gatenby, 2014); and further, implementing them in a way that is both 'sequential' (see Creswell et al., 2003: 223) and 'iterative' (see Greene, 2007: 126).

It is in this context that I seek to justify my design for the data collection and analysis within this study.

3.7.1 A mixed methods design

Mixed methods research has been described in different texts as the 'third methodological movement' (Teddlie and Tashakkori, 2003: 5); the 'third research paradigm' (Johnson and Onwuegbuzie, 2004: 14); and even as the 'de facto third alternative' to quantitative and qualitative research approaches (Teddlie and Tashakkori, 2010: 2). Whereas often it is conceived as the combination of both 'qualitative and quantitative approaches in the methodology of a study' (Tashakkori and Teddlie, 1998: ix), it can also encompass a combination of qualitative or quantitative methods (Creswell and Plano Clark, 2017).

Mixed methods research increasing popularity in different disciplines has been ascribed both to its ability to offset some of the limitations associated with purely qualitative or quantitative designs (Creswell and Plano Clark, 2017); and to more robustly tackle the research problem, by offering a unique capacity for synergy, breadth, and depth (Teddlie and Tashakkori, 2010).

Indeed, theorists assert that a mixed methods approach provides a more comprehensive account of social reality (Teddlie and Tashakkori, 2010), and there is certainly a growing trend towards mixed methods design in social work research, as

researchers seek to document change or capture a particular group of people's experiences (Padgett, 2017; Menon and Cowger, 2010; Bronstein and Kovacs, 2013).

However, Shaw (2003: 110) cautions that mixed methods design may not always lead to 'sounder consensual conclusions' and highlights the importance of selecting methods which are complimentary of each other. In making this point he cites Trend's (1979) observation that 'the complementarity is not always apparent' (p. 83):

Simply using [a mixture of methods] with the expectation that they will validate each other, does not tell us what to do if the pieces do not fit (Trend, 1979: 83).

The implication is that each method should be selected carefully, and its value (and weaknesses) considered relative to the other chosen methods (Shaw, 2003) – a notion, I incorporated into my own design (see Sections 3.7.2-3.7.6).

Further, in choosing to employ a mixed methods approach, I was cognisant of the strong basis for mixed methods design both from the perspective of ethnography (Brewer, 2000; Hammersley and Atkinson, 2007) and critical realism (Ackroyd and Karlsson, 2014; Hurrell, 2014).

For example, Brewer (2000) reminds us that ethnography often constitutes a coordinated and planned 'process' of research methods which are 'blended together imaginatively [and] flexibly... to best achieve the end result' (p. 56). In addition, Hammersley and Atkinson (2007) assert that mixed methods research

provides a level of depth to ethnography that cannot otherwise be achieved by a solitary research method.

Similarly, for critical realists where the emphasis is on explanation (Bhaskar, 2014), researchers tend to employ a mixture of methods within the same project – wherever possible combining information from different data sources (Ackroyd and Karlsson, 2014) – so as to garner the most in-depth account of a social phenomenon and its underpinning mechanisms (Hurrell, 2014).

It is these principles that informed my selection of a mixture of research methods; methods that were conducive to achieving Rees and Gatenby's (2014) retroductive model for critical realist ethnography.

3.7.2 The focus group

A focus group can be defined as

a group of individuals selected and assembled by researchers to discuss and comment on, from personal experience, the topic that is the subject of the research (Powell et al., 1996: 499).

Whilst some theorists tend to conflate the terms 'focus group' and 'group interview' (for example, Hughes and DuMont, 1993), the former is distinct from the latter, in that it focuses on 'the ways in which individuals discuss a certain issue as members of a group, rather than simply as individuals...' (Bryman, 2012: 501).

Indeed, in undertaking a focus group

the researcher will be interested in such things as how people respond to each other's views and build up a view out of the interaction that takes place within the group (p. 501).

For the purposes of this study, two focus groups were carried out between December 2014 and January 2015. The first was attended by six social workers – constituting 30% of the cohort – and the second four CPT (line) managers – 100% of this cohort.

The function of the focus group was twofold: to study with the CPT staff how they constructed notions of ‘discretion’ and ‘discretionary space’ – developing from their discussions definitions of the two terms as the basis for further exploration within the questionnaire and interviews; and, to explore and develop with the group, the initial themes pertaining to discretionary space and choice.

In selecting the medium of focus group for achieving these purposes, I considered that it was a suitable forum in which to explore how the CPT staff, in conjunction with one another, constructed the key terms and their influences (Bryman, 2012). Indeed, Bloor et al. (2001: 8) advocate the use of focus groups for providing the ‘contextual basis’ in research design:

Focus groups can be used to... ensure that terms chosen in a subsequent study are ones which are consistently understood (p. 10).

This I considered was important in the context of both abduction and retroduction, as without establishing with a cohort of participants a clear understanding of the key concepts being explored, a researcher is often unable to garner an accurate account of the participant’s experiences of the social structures and processes impacting upon a phenomena (Akroyd and Karlsson, 2014).

Within each group I adopted a more distant position to that which I would later take in the interviews. Assuming the role of ‘facilitator’ as opposed to ‘interviewer’ (see Bryman, 2012: 501 for an account), I sought to avoid active participation in the group’s discussion by providing the participants with a typed list of 6 questions (see Appendix 10) – derived from the research aims – with a request that they would ‘consider and discuss each in turn’. I listened and took notes during the group discussion – only offering prompts when questions were directed at me – and at the end of each group, I summarised the main themes; asking the participants to comment on the accuracy of my recordings and to suggest amendments or additions as necessary.

Each focus group lasted approximately 2 hours, and each was audio recorded and later transcribed – producing in total, more than 80 pages of typed discussion. The definitions to emerge (see Chapter 4, Section 4.1) were then included in the introduction to both the questionnaire and interviews – so as to provide clarity and grounding – and the identified themes were used to inform the research questions included within the questionnaire.

It is important to note that the focus group was the only stage of the data collection in which the CPT managers participated within the study. My rationale for their inclusion here, was to obtain a wider variety of perspective and experience; one that would subsequently better inform the emerging definitions and themes.

This I believe was a necessary step, as by including the managers at this early stage of the study, I was introduced to a series of additional ideas that were crucial in

expanding my thinking, and in shaping the subsequent direction of the research; contributing ultimately, to the breadth of finding and depth of explanation achieved.

3.7.3 The questionnaire

In social research, the 'questionnaire' is considered a method of data collection comprising

a set of standardized questions... which follow a fixed scheme in order to collect individual data about one or more specific topics... administered in a standardized fashion, that is, in the same way to all the respondents... (Trobia, 2011: 653).

I conceived the questionnaire as a suitable medium for offsetting some of the potential limitations of the focus group (for example, 'groupthink') (Bryman, 2012); one which could explore whether the emerging ideas were also shared amongst the wider cohort of social workers; and which could provide a convenient forum for offering further direction and depth of exploration at this stage of the study (Bryman, 2012).

Further, the questionnaire enabled a comparative element to the analysis at an early stage – one which was important in the context of the retroductive process (Bhaskar, 2014). This was because by contrasting the findings of the questionnaire to those generated from the focus group, I was able to refine my understanding of the social workers' discretionary space and choice, and to begin to identify some of the social structures and processes impacting upon these. These would then become the focus in the next part of the iterative design (the research interviews)

in which I would seek to explain the social workers' discretionary space and choice in the context of deeper 'causal mechanisms'.

The questionnaire was 'launched' on an internet-based platform in July 2015 and remained 'live' for a period of 4 weeks – allowing for staff to return from their summer annual leave. It was completed by 18 of the CPT social workers (a completion rate of 80%), and comprised of two parts: the first, seven 'open' questions about the social workers' experiences of discretionary space and choice; the second, seven 'closed' questions, focussing more on the factors underpinning those experiences (see Appendix 12).

Whilst the first part sort to cultivate a continuation of the qualitative account achieved in the focus group, the second also included a series of quantitative measures and Likert scales (see Appendix 12), thereby garnering a different type of data to add support and context to the qualitative account (Bryman, 2012).

3.7.4 The interview

The research interview is

a method of data collection... that specifically involves asking a series of questions. Typically, an interview represents a meeting or dialogue between people where personal and social interaction occur (Davies, 2011: 158).

For the purposes of this study, I adopted a 'semi-structured' approach to the interviews (see Bryman, 2012: 470-471 for an account). This provided a suitable medium between 'structure' and 'flexibility' in focussing 'on how the interviewee frames and understands issues and events' (Bryman, 2012: 471) – again, considered

important in facilitating abductive and retroductive processes (Smith and Elger, 2014).

The interviews took place between March and May 2016, and were attended by 8 of the CPT social workers (32% of the cohort). Their purpose was to comprehensively explore the conditions in which the discretionary space and choice of the social workers occurred, with an emphasis on better understanding the deeper causal mechanisms at play.

The interviews also provided a forum in which I could 'prompt' and 'probe' the social workers' responses (something which had not been possible in the focus groups and questionnaires); thus, enabling a greater level of depth and detail to be gleaned from this element of the study.

Indeed, whilst the focus groups and questionnaire might be conceived as contributing mainly to 'Stage 1' of Rees and Gatenby's (2014) model (i.e. they provided the initial examination of the key phenomena), the interviews, are better conceived as contributing to 'Stage 3' – where with an understanding of how the social workers' discretionary space and choice was manifesting, I moved repeatedly between further collection and analysis, so as to develop and refine an account of why this was the case.

The first part of each interview comprised of an 'open discussion' with the social workers – relying on a list of prompts developed from the findings of the focus group and questionnaire (see Appendix 13). The second comprised of two vignettes

(see Appendix 13), each constituting a detailed case scenario, designed to 'selectively portray elements of reality to which research participants are invited to respond' (Hughes, 2012: 919). These I considered to be 'especially valuable in exploring the perceptions, attitudes, and behaviours' of individuals in particular contexts (Hughes, 2012: 919).

Specifically, the vignettes enabled an exploration of whether social workers were willing to employ discretion in a defined discretionary space, and whether this willingness changed according to the type of information available to them. Indeed, in answering the vignettes, the social workers were incrementally provided with additional information and were asked after each, to explain how that information influenced their willingness to employ discretion.

The discussions ranged from 1.22 hours to 2.46 hours, meaning that at their conclusion, the interview data constituted over 400 pages of typed transcript.

3.7.5 Field note and documentary analysis

For the purposes of this discussion, a 'field note' denotes those written observations and experiences recorded during the course of the ethnography, and derived from my encounters and interactions within the research setting (Emerson et al., 2011). In this sense I use the term 'field note' in both a descriptive and a reflective sense (see Emerson et al., 2011 for an account). By 'documentary analysis' I mean the process of 'reviewing' and 'evaluating documents' so that they may be 'interpreted... to elicit meaning, gain understanding and develop empirical knowledge' about the research subject and setting (Bowen, 2009: 27).

The importance of the focus groups, questionnaire and interviews were that they allowed me to venture into those areas that would have remained otherwise 'unseen', had I simply chosen to rely on the field note and documentary analysis for the content of this study (Bryman, 2012: 494).

That being said, both the latter two components, whilst distinct from the sequential and iterative element of the design, were an integral part of the research methodology – offering a layer of context and pertinent examples to consider against the data emerging from the other sources (Hammersley and Atkinson, 2007). This was important in the context of the third stage of Rees and Gatenby's model (and in achieving the explanatory element of this study), where by providing a context and examples to support the social workers' accounts, I was better able to refine my understanding of the causal mechanisms underpinning their discretionary space and choice (Bhaskar, 2014).

Although the ADCS had originally provided me with permission to begin collating 'necessary materials' for my study in the Autumn of 2013 (see Appendix 14), I did not start my collection of relevant documents (or for that matter, field notes – see below), until I received ethical approval from the University's Academic Ethics Committee in November 2014 (see Appendix 15). However, during the course of the data collection, not only did I seek to assemble current/new documentation, but also that which had been archived. This provided a comparative component to the documentary analysis, where by contrasting current and past documentary

records, I was better able to explore how the influence of specific mechanisms had manifested and evolved over a period of time.

Several of the documents that I anticipated would be integral to the data analysis were gathered ahead of time (for example, policy documents, emails and departmental memos). However, the importance of other documentary records only emerged after initial analysis had identified additional questions to ask of the research data – for example, ‘has the number of referrals to the CPT really increased over recent years?’ (see Section, 6.1.1). In this regard, the process of gathering and analysing documentation required me to move repeatedly between further data collection and analysis – again, characteristic of the third stage of Rees and Gatenby’s model.

I had access to, and was therefore able to collect, many of the necessary documents during the course of my normal work duties (including the aforementioned policy documents, emails and memos, but also other statistical data, such as the number of care order applications etc). However, others had to be procured from third parties and teams within the CSD (for example, records on departmental expenditure were obtained from the Finance Team), but also other local authority departments (for example, figures on homelessness were provided by Marketon’s Housing Department).

Overall, I drew from 118 documents during the course of the data analysis. These comprised of a mixture of contextual (for example, policies and emails) and quantitative data (for example, numbers and types of referral and open cases, and

statistics on local indicators of ‘need’); as well as that which was available within (for example, press releases), and outside of the public domain (for example, data on intradepartmental spending).

Like the documents, I did not begin my collection of field notes until December 2014, after obtaining both ethical approval from the Academic Ethics Committee and the informed consent of the research participants to be observed (see Section 3.6.1).

My approach to acquiring relevant field notes differed to that of the documentary data in that I did not specifically, nor explicitly, ‘seek out’ particular contexts, scenarios or tasks to observe, recognising that this can induce artificial behaviour in participants and thus impact upon the validity of the observation (Hammersley and Atkinson, 2007). Instead, the field notes emerged from my day-to-day practice experiences on the CPT and thus were more ‘naturalistic’ in nature (Hammersley and Atkinson, 2007: 32) – arising from the comments, conversations and discussions that took place around me during the course of my normal work duties, but not from any interactions that occurred outside of a work context (see Section 3.5.3).

Whenever possible, I adopted a ‘contemporaneous’ approach in the documenting of my field notes – i.e. each one was written in my observation diary immediately following an observed event or interaction had taken place, so as to ensure the ‘preservation of experience close to the moment of occurrence’ (Emerson, et al., 2011: 17). However, on some occasions an interaction occurred at a time where it

was not immediately possible to make a note of it (for example, whilst driving), and thus the note was made at the next available opportunity – but always within an hour or two of the event occurring.

My template for completing a field note was to record the person(s) present (utilising anonymous identifiers); location; and time of a particular interaction, as well as the main content and quotes pertinent to my research questions. At the top of each entry, I noted the context of the recording – i.e. whether it pertained to ‘discretionary space’; ‘choice’; ‘mechanisms’; or a combination of these – in order to facilitate ease of identification of applicable field notes during the data analysis.

In total, I drew from 85 field notes during the course of the data analysis.

3.7.6 A critical realist grounded theory

The analysis of the research data was, to some extent, an ongoing process throughout the data collection, such was my constant gathering, appraising and sorting of new material – including field notes and documents. However, there were also three distant points during the study in which I engaged in concentrated periods of analysis. These were:

- After the focus groups;
- At the conclusion of the questionnaire; and
- At the conclusion of each interview (incorporating also, the analysis of the gathered field notes and documents).

This was important in the context of the iterative design, as the findings to emerge from one stage, subsequently informed the direction of enquiry in the next (see Sections 3.7.2-3.7.4). With that being said, there was also comparative and cumulative elements to the analysis – comparative in that data was compared between different stages, and cumulative in that emerging ideas were developed and expanded upon as I progressed through the iterative design.

So as to maintain a consistency in my approach (and an efficacy in my findings), I relied on Grounded Theory Method (GTM) for the analysis of the qualitative data – recognising also its suitability in the context of an ethnographic (Charmaz, 2014) and also critical realist framework (Oliver, 2012; Kempster and Parry, 2014).

However, I looked beyond traditional models of GTM – for example, the ‘classic’ approach advocated by Barney Glaser (1978; 1992; 1998; 2001), or the ‘evolved’ approach advocated by Anselm Straus (1987; Straus and Corbin, 1990; 1998) – on the basis that their positivistic underpinnings render them unsuitable to critical realist enquiry (Oliver, 2012). Instead, I adopted a model that is closer to the ‘constructivist’ variant endorsed by Kathy Charmaz, but which Kempster and Parry (2014) describe as a ‘Critical Realist Grounded Theory’ (p. 109).

This model holds that issues such as language, meaning and context are central to GTM, and that ‘discovery’ is an interactive process between researcher and participant. Moreover, it is based on the notion that

any theoretical rendering offers an interpretive portrayal of the studied world, not an exact picture of it... Research participants’

implicit meanings – and researchers' finished grounded theories – are a construction of reality (Charmaz, 2014: 17).

Further, whilst the model maintains features of traditional GTM – including coding, theoretical sampling, and an iterative design – it is distinguished by its focus on abductive and retroductive (as opposed to inductive) processes (Kempster and Parry, 2014). In this way it places an emphasis on generalisation and contextualisation, and thus providing a richer grounded theory, which overcomes a limitation of traditional models by enabling future readers and researchers to apply and test generative mechanisms in their own social contexts (Kempster and Parry, 2014).

In adopting a critical realist GTM for the purposes of my analysis, I relied on, and moved through, a sequence of four analytic processes, namely:

- Initial coding;
- Focussed coding;
- Memo-writing; and
- Theoretical sampling.

I will explain each in turn.

'Coding is the pivotal link between collecting data and developing an emergent theory to explain these data' (Charmaz, 2014: 113). It is through coding that a researcher is able to 'define what is happening in the data and begin to grapple with what it means' (p. 113). There are two main phases to coding in GTM

(including critical realist GTM): the 'initial' phase and the 'focussed' phase (see Charmaz, 2014).

Initial coding involves examining a transcript of qualitative data and 'naming each word, line or segment', whilst simultaneously identifying those initial core conceptual ideas to pursue in future stages of data collection (Charmaz, 2014: 113). In this way, initial coding facilitates abductive reasoning, especially when the emerging conceptual ideas sit outside any pre-existing 'theoretical lens' (Meyer and Lunney, 2012: 7), but require 'an imaginative leap to achieve a plausible theoretical explanation' (Charmaz, 2014: 341).

Initial coding requires that the researcher ask specific questions of the data, for example:

- 'What is the data a study of?'
- 'What do the data suggest? Pronounce? Leave unsaid?'
- 'From whose point of view?' and
- 'What theoretical category does this specific datum indicate?' (Charmaz, 2014: 116).

The importance of initial coding is that it ensures the 'fit' and 'relevancy' of the research data relative to the focus of enquiry:

Your study fits the empirical work when you have constructed codes and developed them into categories that crystallise participants' experience. It has relevance when you offer an incisive analytic framework that interprets what is happening and

makes relationships between implicit processes and structures visible (Charmaz, 2014: 133).

For the purposes of this study, the process of initial coding (including the application of the aforementioned questions – see above) was applied to each transcript of data generated from the focus groups, questionnaire and interviews. This was on the basis that new codes and ideas can emerge at any time in the data analysis process – even when the design of a later stage of data collection has been informed by the codes derived from a previous one (Charmaz, 2014).

In producing my list of ‘initial codes’, I employed a technique of ‘line-by-line’ as opposed to ‘word-by-word’ or ‘segment-by-segment’ coding (see Charmaz, 2014: 124). Although each line of text did not produce a useful code – as oftentimes it was based on an incomplete sentence – it did provide a plethora of ideas which may have otherwise escaped my attention (see Charmaz, 2014: 124-127). Further, I considered a ‘line by line’ approach advantageous in that it often requires less time than other coding strategies and it facilitates the researcher returning to earlier stages of analysis to check and test the relationship between ‘new’ and ‘old’ codes (something that I incorporated within the analysis – see below). It also enables the researcher to ‘see otherwise undetected patterns’ and to ‘take compelling events apart and analyse what constitutes them and how they occurred’ (Charmaz, 2014: 125) – which is essential when engaging in abductive and/or retroductive processes (Meyer and Lunnay, 2012).

‘Focussed coding’ is the second stage of the GTM process. It is considered a ‘selective phase’ and ‘uses the most significant or frequent initial codes to sort,

synthesise, integrate and organise large amounts of data' (Charmaz, 2014: 113). It requires the researcher to make 'decisions about which initial codes make the most analytic sense to categorise [their] data incisively and completely' (p. 138). What is more, focussed coding is said to 'expedite' the analytic work, 'without sacrificing the detail contained in [the] data and initial codes' (p. 138).

The process of focussed coding involves studying and assessing initial codes, but it constitutes more than a researcher selecting and progressing with the codes that they find most interesting (Charmaz, 2014). Instead it comprises of the researcher comparing and contrasting initial codes to identify meaning and consider how they account for the data (Charmaz, 2014). In this way the researcher is tasked with making judgments about the conceptual strength of initial codes – developing from them 'theoretical categories' or ideas to direct the direction of study (see Charmaz, 2014: 144-145) – whilst simultaneously seeking to identify gaps in the emerging conceptual framework.

I engaged in the process of focussed coding after each stage of initial coding (see above). Furthermore, as I progressed through the iterative data collection design, I compared and contrasted the focus codes derived from different sources (for example, the codes from one interview, were compared to those from previous interviews as well as those from the focus groups and questionnaire). This allowed me to continually check, develop and refine a 'master list' of focussed codes to apply and consider against new data. This was important in the context of critical realist grounded theory (Kempster and Parry, 2014), in that it facilitated the

development of ideas whilst ensuring that my focus codes (and the ‘analytic notes’ that emerged from them – see below) were representative of the participants’ testimonies, and reflected not only a descriptive account of discretionary space and choice, but the explanatory element that was central to my critical realist framework (see Section 3.2.1).

However, with each list of ‘focussed codes’ I also engaged in the third stage of the analytic process, that which Charmaz (2014: 162) refers to as ‘memo-writing’. In GTM ‘memos’ are the ‘analytic notes’ made about the focussed codes and their theoretical categories (Charmaz, 2014: 162). They require researchers to ask questions of themselves and the data, to identify problems and suggest connections and areas for further exploration (Meyer and Lunnay, 2012):

Memo-writing therefore is meant to generate discussion and self-dialogue which fashions a conjunction between theoretical reflection and the practical issues surrounding data collection and analysis (Layder, 1998: 59).

Furthermore, memo-writing enables retroductive reasoning as it encourages the researcher to theorise, on the basis of the data, why specific phenomena appear as they are (Meyer and Lunnay, 2012). It is in these terms that memo-writing is fundamental to achieving a critical realist grounded theory (Kempster and Parry, 2014), enabling researchers to identify ‘causal mechanisms’ through the process of ‘counterfactual thinking’:

Counterfactual thinking is a means of trying to understand the conditions under which something occurs, and requires the researcher to reflect on and question their interpretation of the

data, identifying how concepts emerged in a practical setting (Meyer and Lunnay, 2012: 7).

To facilitate the retroductive process – as well as my efforts to engage in ‘counterfactual thinking’ – I chose to follow Charmaz’s (2014) advice and keep a journal of my memos. This allowed me to not only maintain a record of all the ‘analytic notes’ made during the process of the data analysis, but also the ‘methodological dilemmas, directions and decisions’ that accompanied them (p. 165). Moreover, the journal enabled me to organise and categorise memos, so that I could more easily find, compare and contrast different theoretical ideas as I progressed through the data analysis and developed my understanding of not only the nature of the social workers’ discretionary space and choice, but also the causal processes underpinning them.

Indeed, in the same way that a social worker might only settle on one explanation for a service user’s circumstances after they have considered, ‘tested’ and ‘ruled-out’ all other possible hypotheses (Munro, 2002), I used the journal of memos to continually ask new questions of the data – identifying and applying alternative theories for the manifestation of discretionary space and choice, and ‘testing’ these against new and existing memos. In this way I engaged in ‘counter-factual thinking’ throughout the different stages of the data collection/analysis (see above). It enabled me to build on, develop and refine my findings, excluding those ideas which were not substantiated, and seeking other evidence to reinforce that which I felt offered the best account of the social workers’ discretionary space and choice

whilst again facilitating that explanatory element that was at the heart of my study (see Section 3.2.1).

The final stage of the GTM process was to engage in ‘theoretical sampling’. This involves ‘seeking and collecting pertinent data to elaborate and refine [the] emerging theory’ (Charmaz, 2014: 192). In critical realist terms it is important component of retrodution, as researchers test their ideas about the mechanisms impacting upon on a social phenomenon through additional data collection and analysis (Kempster and Parry, 2014):

Writing memos has already enabled you to flag incomplete categories and gaps in your analysis. Engaging in theoretical sampling prompts you to *predict* where and how you can find needed data to fill such gaps and saturate categories [original emphasis] (Charmaz, 2014: 199).

On this basis, we might conceive theoretical sampling as being best suited to the third stage of Rees and Gatenby’s (2014) model (see Section 3.7) and my own strategy was to incorporate theoretical sampling in the later parts of the iterative design, and in two ways. Firstly, during the interviews, where I subtly developed and refined the content and nature of my questioning as I moved between interviewees – enabling me to ‘test’ existing theories against the social workers’ accounts, whilst seeking additional data that would fill in gaps, or else evidence that could expand upon, or challenge my emerging ideas.

Secondly, by applying the same theories to the field note and documentary data, looking for a layer of context that could support and solidify them. Indeed, it was in this stage that I became more active in seeking supplementary documentary data

(see Section 3.7.5) whilst asking additional questions of that data as well as my field notes – i.e. ‘Is there evidence that caseloads on the CPT are increasing?’ (see Section 6.1.1); ‘Are there any observations which might be illustrative of inter-professional finger pointing?’ (see Section 6.3.2).

In this sense, I employed the process of theoretical sampling to move repeatedly between further data collection and analysis. Again, this enabled me to continually ‘test’, develop and refine ideas whilst addressing specific gaps in my analytic notes. This meant that at the end of the process I was confident that I had produced a series of findings that provided a robust and accurate account of the social workers’ discretionary space and choice, and of the causal mechanisms underpinning it (Kempster and Parry, 2014).

After engaging in this series of analytic processes – and only when I was completely satisfied that my ideas were supported by, and representative of, the research data – I produced from my memos a series of ‘research finding’ extracts (incorporating pertinent quotes, field notes etc). These were then carefully sorted and organised into the three ‘results’ chapters – each one framed according to the relevant research question.

I begin my consideration of the research findings in the next chapter, where I present the results relative to the research question ‘*Where do social workers encounter discretionary space?*’.

CHAPTER 4 – WHERE DO SOCIAL WORKERS ENCOUNTER DISCRETIONARY SPACE?

4.0 Introduction: Organising and presenting the findings

This is the first of three ‘results’ chapters, each of which will set out research findings relating to a specific research question (as stipulated within Section 3.1).

For this chapter I focus on the findings which relate to the question: ‘*Where do social workers encounter discretionary space?*’.

In presenting these findings, I draw from all five sources of data collection (see Section 3.7). Where I cite directly from a participant’s testimony, I will indicate the stage of the data collection (for example, ‘FG’ [Focus Group], ‘Q’ [Questionnaire], and ‘SSI’ [Semi-Structured Interview]), and that participant’s identifier for that stage (for example, ‘SW’ [Social Worker] or ‘M’ [Manager] 1). Where I have included an observation field note or cited a local authority document, I indicate the date and either my location at the time of the observation (i.e. ‘Office – June, 2014’) or the source (i.e. ‘Corporate Spending Strategy – January, 2014’).

The chapter is divided into three parts: I begin by identifying the definitions of ‘discretion’ and ‘discretionary space’ used within the data collection. Secondly, I set out the practice areas in which the social workers stated that they did not have discretionary space. Thirdly, I consider the practice areas in which the social workers felt that they did encounter a discretionary space.

Throughout the discussion I will comment upon the types of space that I understood the different examples to pertain to.

4.1 Defining ‘discretion’

As noted in both Chapters 1 and 2, there is a tendency within the wider literature not to define ‘discretion’, and yet this is problematic in the sense that the term can mean different things in different contexts (Evans, 2010). Therefore, it is prudent to elucidate, at an early opportunity, the conception of discretion that forms the basis of enquiry (Molander, 2016).

I have outlined that my interest is in the structural discretion (discretionary space) and less so the epistemic discretion (discretionary reasoning) of the social worker (see Section 1.2.1). However, I am also cognisant of Smith’s (1981) recommendation that to enhance the efficacy of results, a researcher should identify and incorporate the participants’ understanding of the term ‘discretion’ within their study’s design. In this regard, an explicit aim of the focus group was to establish how the social workers in my study understood the concepts of ‘discretion’ and ‘discretionary space’ (see Section 3.7.2). They identified ‘freedom’ and ‘action’ as key features of the former:

It’s freedom not just in forming a decision about a suitable action, but then in carrying it out (SW2, FG).

It’s about being free to decide and act according to what you judge is best (SW3, FG).

These propagated into their collective definition of the term, whereby ‘discretion’ is

the freedom to decide upon and take a course of action, independently from the oversight, and direction of others (for example a manager)⁵.

With regards to ‘discretionary space’ the social workers outlined this could be conceived as ‘the space, area or opportunity to employ discretion’.

These two definitions formed the basis of enquiry and were explicitly referenced in each stage of the formal data collection.

4.2 Where social workers said that they *did not* have discretionary space

It was the preference of the social workers to begin discussions about discretionary space, by outlining where they felt they were unable to employ their discretion. I theorised that they may have felt more strongly about these areas or else, found it easier to recount them – perhaps because they were more prevalent in their mind.

In recognition of this tendency, I have also chosen to begin where the social workers began, and repeatedly returned to: ‘where [they] *did not* have discretionary space’ (SW6, FG). I have organised the findings of this section under four headings – derived from specific ‘memo titles’ (see Section 3.7.6):

- Outcome decisions of Child Protection Conferences, Legal Planning Meetings and Final Care Planning Meetings;
- [De jure] decisions to spend money;

⁵ Of course, this is not to say that the discretionary choice is not influenced or informed by another (including the manager or agency).

- Workflows and content; and
- Must-do timescales and deadlines.

I will consider each in turn.

4.2.1 Outcome decisions of Child Protection Conferences, Legal Planning Meetings and Final Care Planning Meetings

The social workers highlighted a 'lack of freedom' to use their discretion in respect to the 'outcome decision' (SW2, FG) of three types of decision-making forum: the 'Child Protection Conference' [CPC] (SW6, FG); the 'Legal Planning Meeting' [LPM] (SW11, Q); and the 'Final Care Planning Meeting' [FCPM] (SW7, SSI).

To understand the type of decisions being discussed, I asked the social workers to elucidate whenever the term 'outcome decision' (or some similar iteration) was used. The type of 'outcome decisions' identified comprised of:

- Whether a child would be made subject to, continue to be subject to, or no longer be made subject to, a child protection plan (CPC);
- Whether the local authority would initiate pre (care) or care proceedings in respect to a child (LPM); and
- The proposed permanent placement of a child in a 'care plan' for Court (for example, a return to the birth family, a foster placement or adoption) (FCPM).

The social workers felt that there was a general misconception (ostensibly by those not familiar with the actual process) about how these 'outcome decisions' were

made. They explained that, at least locally, they were not necessarily the result of the 'collective' opinion of the group of professionals present (HM Government, 2018: 82). Instead, they reported that it was the local culture (I noted an absence of defined policy on this issue) to cede power to the chair of these forums – an Independent Reviewing Officer (IRO) for the CPC, or a senior manager in the other two contexts – enabling them to make the decision 'independently' of the group of professionals, 'if that [was] their preference' (SW11, Q).

The social workers understood that their own role was to 'advise' (SW4, FG), 'inform' (SW7, SSI) and 'make recommendations' (SW2, FG), based on their 'knowledge of the case', the individual child and family (SW5, FG). However, it was not within their 'power... to decide or action the final... decision' (SW3, SSI), and it was their repeated experience that the forum chair would make decisions contrary to the social worker's recommendations:

I advise, but the chair doesn't have to agree. In fact most often they don't; they make decisions in opposition to my suggestion...
[laughs] (SW8, SSI).

Despite the laughter in this last account, this was understood to be a source of great 'frustration' for the social workers in this study, where they described feeling 'disheartened' (SW5, FG) by the reported 'tendency' within these forums to 'undervalue' their rather 'unique' (SW6, Q), and perhaps 'superior' (SW2, SSI), knowledge of the specific child and its family:

I do get frustrated with how little my opinion is valued by some chairs... I mean I have the best knowledge of the child, so

wouldn't you want to know my opinion on how best to proceed?
(SW4, Q).

I have been in many of these types of meetings where I am not
even asked what I think should happen (SW17, Q).

Thus, whilst the social workers did not advocate increasing their own discretionary space in respect to these 'outcome decisions' – expressing that such 'potentially life changing' (SW5, FG) decisions should be part of a 'rigorous and transparent' decision-making process (SW8, SSI), and 'not within the individual power of the social worker' (SW4, SSI) – they did feel that local processes required improvement to better incorporate the social worker's knowledge of the child, in that child's best interest:

Ultimately, I think that it is right that there is a chair and that they have final say over the decision. However, their positioning [in the organisation] and different job expectations, means that they are unlikely to ever acquire the type of knowledge of that child that I hold as the child's social worker. Therefore, I do think that there needs to be improvement in how my knowledge is used to inform those types of decisions... (SW8, SSI).

My own reflection was that a process of making these 'outcome' decisions, ostensibly without incorporating the social worker's knowledge of the child, did not compliment Munro's (2011b) notion for decision-making within a more 'child-centred' system (p. 1). However, a limitation of the study was that I was not able to compare the experiences of the social workers with the accounts of the chairs, or observations of the decision-making in these specific forums, and thus I remain unclear as to the validity of this claim (see Section 8.2).

4.2.2 [De jure] decisions to spend money

A second area where the social workers identified a restriction on their discretionary space was in respect to financial decisions, or, as they repeatedly put it: 'decisions to spend money' (SW2, FG).

The social workers reported that this restriction was not limited to large financial expenditure, for example, 'paying for an independent expert assessment' (SW4, SSI) – which could cost up to £8,000; or 'decisions about costly residential placements' (SW10, Q) – where costs could exceed £12,000 per week; it also extended to, what they considered to be, relatively 'small amounts of money' (SW3, FG), for example, 'purchasing food, gas or electric in an emergency' (SW4, FG); buying 'second hand furniture or white goods' (SW3, SSI); and paying for 'a new school uniform for a child whose parents [could] not afford it' (SW1, FG).

The participants explained that in the then current (but ostensibly continuing) climate of 'shrinking budgets' and 'closure of services' (SW3, Q) (see also Section 6.1.3 for further discussion), 'every penny had to be accounted for' (M4, FG), which meant that even decisions about 'relatively small amounts of departmental expenditure... had to have management oversight and approval' (SW10, Q).

Indeed, the 'official' position was that there was 'no discretion[ary space] for any front line staff... to agree to spend money' (Chief Executive – Public Consultation on Spending Cuts, May 2016). This was explicitly set out in a new 'Corporate Strategy on Expenditure', published in August 2016, which also imposed a 'complete freeze' on 'purchasing stationary... office equipment... overtime... external training [with

associated cost]... and the recruitment of agency staff' – resulting in a requirement that social workers even had to 'trade-in' their ink-less pen, before they could be issued with a new one.

As such, the social workers recognised the 'realities of financial restriction' (SW2, FG) facing their employer. However, the ability 'to spend money in the interests of the child' (SW5, FG), was, they considered, 'an important freedom in enabling effective practice' (SW10, Q), as this exchange indicates:

I understand that there has to be limitations, especially now with austerity. But really the space to decide to spend, you know, small amounts of money, I think that it is vital in allowing social workers to be innovative and flexible in their approach to children (SW6, FG).

I agree... for example, you go to a house and find that the child has no duvet. It's cold, mum has no money... so you go to Asda and buy one... it's like £5... we are not talking fortunes here (SW3, FG).

The same applies with gas and electric... It is frustrating when you are assessing a parent and find that they have run out of both gas and money, but those are the realities of the families that we are working with... I need to be able to say 'OK here is £10 to get you through the weekend'... (SW2, FG).

It was in this context that I found that social workers were continuing to exercise their discretion in respect to 'decisions to spend money', despite the restriction of a formally recognised and sanctioned (de jure) discretionary space.

The social workers' strategy in overcoming the restrictions imposed, was to rely on a discretionary space available to them outside of the 'official' strictures of departmental policy; one where, 'in the interests of the individual child', but also 'the absence of departmental [monetary] support', they could choose to 'spend

[their] own money' (SW2, FG), whilst accepting that this would neither be 'officially sanctioned', nor reimbursed:

I tend to buy children a McDonalds after a foster placement move... I don't expect to get the money back (SW2, SSI).

I wouldn't advertise this, but on two occasions I have decided to purchase a new set of school trousers for a child out of my own pocket... I knew that although 'officially' I shouldn't, if I didn't, then they would go without (SW8, SSI).

Yes, I give them my own money if I have to... it's only £10... what choice do I have? (SW2, FG).

As indicated within these accounts, the quantity of money spent was relatively small, but nevertheless, such actions were understood to contravene 'official' policy, which stated that social workers should not 'make discretionary payments or purchases under any circumstance' (Corporate Strategy on Expenditure – August 2016). To do so was to potentially 'confuse the boundaries of the professional relationship' and could 'result in disciplinary action' (Policy Document – 'Receiving and Giving of Gifts', August, 2016).

However, the social workers believed that their 'managers [knew] about' (SW2, SSI), 'accepted' (SW17, Q) and even 'condoned' (SW1, SS8) this behaviour in the context of being 'pragmatic in the face of service user need' (SW17, Q). I understood this to mean, that the discretionary behaviour was accepted, on the basis that it could be seen to be in the interests of the child, whilst avoiding any direct cost to the CSD:

Oh yeah, the managers know about it... in fact my own manager saw me dip [sic] into my purse last summer to buy a child a new school bag ... she didn't object because we both knew that she

couldn't offer to reimburse me... it's just what we have to do in this age of cuts... the children's needs don't go away, so either we pay out of our own pocket or they go without (SW8, SSI).

Here I considered that the notion that managers would support social workers to break with official policy contradicted the accounts of the domination managerialism theorists, who assert that managers, as 'creatures of the organisation' (Evans, 2010: 41), sole focus is the enforcement of organisational policy (for example, Howe, 1986; 1991). Rather, these accounts support the 'discursive' notion that managers can 'grant' informal discretionary space, on the basis of shared goals and values (Evans, 2010; 2011) – in these terms to ensure that a child did not 'go without'.

Thus, whilst the social workers of this study reported a lack of discretionary space 'to spend money' in an officially sanctioned, or 'de jure', sense, they also indicated that they could still choose to spend money – albeit their own – in contexts outside of the 'officially sanctioned' domain. This included occasions where the manager was ignorant of their behaviour – best conceived as a 'de facto' discretionary space (see Section 2.4.1); or (and applicable here) where the manager was knowledgeable of the social worker's behaviour, but 'turn[ed] a blind eye' (SW17, Q) under the premise of promoting effective service provision, and thus, affording a discretionary space in an 'entrepreneurial' sense (see Section 2.4.3).

4.2.3 Workflows and content

The third area in which the social workers reported ‘minimal discretionary freedom’, was in respect to the ‘workflows and content’ (SW2, SSI) of the Integrated Children’s System (‘ICS’) (see Section 2.6.1 for an overview of the ICS).

Whilst the wider literature discusses that the ICS can both restrict but also offer new opportunities for discretion (for example, Shaw et al., 2009; Wastell et al., 2010), the social workers in this study generally felt that the ICS was restrictive of their discretionary space:

No, I don’t think that I have any discretionary space when it comes to [the ICS]... especially in what I record and the order that I record it in (SW3, FG).

This was an area observed to cause the social workers a great deal of vexation, which I aligned, in part, to the CSD’s decision to commission a new variant of the ICS in April 2013 (see Section 7.2.2 for further discussion). This new variant was described as being ‘more restrictive’ (SW1, FG) and offering ‘less opportunity for discretion’ (SW17, Q) than its predecessor; especially because of its embedded ‘workflow’ element (absent in its predecessor), which, as one social worker succinctly stated, ‘stops me doing what I want, when I want’ (SW6, Q).

The nature of this problem was elucidated by another participant who described her ‘repeated’ experience of encountering ‘hold-ups’ in the system, caused by the workflow:

I sit down to write my [child protection] conference report – I’ve got two hours to write it, and it has to be in today... I log onto

[ICS], go to start writing, and I find that the core group minutes have not been approved, so there is a hold-up in the workflow. I can't start writing until they have been approved, and the workflow updated. It can take me the two hours to get that sorted out – depending on the availability of managers – at which point the free time that I had, has been taken up resolving the workflow issue (SW6, SSI).

As suggested within this extract, the cause of workflow 'hold-ups' was often that other parties (usually managers) were responsible for either approving the social worker's work before the workflow would progress, or else, for completing a separate task that was also embedded within the workflow stream. This point was illustrated in an example given by one social worker who described the (then) new process of ensuring that a child was recorded as 'looked after' on the ICS immediately after they had come into local authority care:

Previously, with the old system if a child became looked after, I would fill in a change form, give it to admin, and they would fill in a box on the system... Now with the new system, I have counted up the different stages and tasks... there are ten, and six people involved... It can take days to get the child recorded as 'looked after', depending on where other people are and if they are busy (SW6, FG)⁶.

Such experiences were symptomatic of the 'increased bureaucracy' (SW3, FG) associated with the new variant of the system. (I discuss in Chapter 7 how the social workers were aware of the critique of ICS workflows and the bureaucracy associated with them within the Munro Review, and comment, in this context, upon the decision to procure such a variant.) However, another area where the

⁶ See Appendix 17 for an illustrative comparison of this process between the 'old' and 'new' variants of the ICS.

social workers felt that they did not have discretionary space, was in respect to the 'content of [their ICS] recordings' (SW7, Q).

The social workers described that a 'cultural expectation of compliance' (SW2, FG) existed within the CSD, exemplified by 'strict policies' and 'monitoring' of what was included in ICS submissions (SW15, Q) (see Section 6.2 for further discussion). They associated the departmental appointment of a new ADCS in the autumn of 2012 with an upsurge in the 'focus on performance management' (SW3, FG) (see Section 6.2), which, in respect to their ICS recording, was experienced in the form of an 'increasing series of rules' for such things as: 'how to record a statutory visit' (SW5, SSI), 'the content of core group minutes' (SW4, SSI) and 'areas to address in a child protection conference report' (SW7, SSI).

They also outlined that it was the culture of managers not to 'approve' ICS submissions where an exemplar box or question '[had] been left blank' (SW6, Q). Instead, the task tended to be returned to the social worker (via the virtual workflow) for 'remedial action' (SW9, Q). I was advised that this occurred 'even on those occasions when it made more sense not to fill in the box' (SW14, Q), as the following extract illustrates:

I've had [ICS recordings] sent back because I haven't filled in the box that asks for 'the child's opinion', even though that child is, as of yet, unborn... seriously [bemused expression] (SW2, SSI).

What do you do by way of response? (Interviewer).

I just write 'the child is not born yet' and that usually does the trick [laughs] (SW2, SSI).

It is approved with that addition? (Interviewer).

Yes [still laughing] (SW2, SSI).

Despite the practitioner's laughter in this account, the social workers generally expressed irritation with the level of bureaucracy that they associated with both the ICS workflow and the local recording culture. Their frustration was indicated in typical accounts describing 'increasing and onerous paperwork' (SW17, Q), and of 'time wasted resolving unnecessary problems' (SW6, FG).

Indeed, the social workers felt that the workplace culture in respect to the ICS compelled them to spend the largest portion of their time at their desk (see Section 6.2.2), but 'at the expense of spending time with children' (SW1, FG) (see also Broadhurst et al., 2010a; 2010b; Wastell et al., 2010). This was something that they subsequently identified as impacting upon their willingness to employ discretion – which I discuss further in Chapter 5.

4.2.4 Must-do timescales and deadlines

The final area identified as one where there was 'limited freedom' to employ discretion was in respect to 'timescales and deadlines' (SW9, Q). However, given the extensive nature and variety of departmentally prescribed timescales encountered during the course of the study, I asked the social workers to be explicit in setting out those which they understood to be 'must-do' (Evans, 2016: 609) and which they specifically associated with a dearth of discretionary space. Four specific tasks emerged:

- Child protection statutory visits – ‘to be completed every 28 days’ [and recorded on the ICS ‘within 1 working day’ of the visit – see Appendix 16];
- Core Group Meetings – ‘to be held every 28 days’ [and recorded on the ICS ‘within 3 working days of the meeting’ taking place – see Appendix 16];
- Child protection conference reports – ‘to be submitted [onto the ICS] 1 working week before conference’ (see Appendix 16); and
- Children and family [‘single’] assessments – ‘to be finalised [on the ICS] 28 days from point of referral’ (see Appendix 16).

I was able to ratify the stated ‘necessity of compliance’ with each of these timescales in local policy documents (see Appendix 16). What is more, I was advised that they served as key indicators on the CSD’s ‘Annex A’ audit tool (named after the ‘performance data’ section of the external inspection framework (see Ofsted, 2019: 62-69), comprising of a list of weekly generated, quantitative data taken from the ICS.

Importantly, the managers conceded that they used the information detailed within the ‘Annex A’ to monitor compliance and adjust a social worker’s ‘granted freedom’ (see Hupe et al., 2015) accordingly:

The Annex A is where I take my information on social worker performance... I can see where the social worker is performing well – complying with expectations, meeting timescales etc – and where they are not performing so well. Depending on what I see, I

might increase or relax the scrutiny that I give to the social worker's work as well as the freedom that I afford them (M1, FG).

Thus, the implication was that a failure to evidence compliance with these 'must-do' timescales could lead to a reduction of formally granted (de jure) discretionary space in other areas of the social worker's practice. (This I considered could be conceived as a motivating factor in the social worker's approach to their discretion – see Section 6.1). However, also evident within the social workers' accounts was the perception that non-compliance with these timescales was accompanied by level of 'personal risk' to the social worker (SW9, Q); both in the sense that one was more liable to be 'blamed' (see Section 6.3), and that it could result in formal 'disciplinary action':

Definitely; it is risky not showing that you have stuck to timescales (SW4, FG).

Yeah, it's that if you don't comply [with timescales] you can be blamed if something goes wrong (SW3, FG).

... and punished (SW4, FG).

What do you mean by 'punished'? (Facilitator).

Urm, you know... disciplinary action (SW4, FG).

Of course I understood that one might expect 'disciplinary action' to be initiated in situations where a social worker had seemingly failed to fulfil their statutory 'duty' with respect to certain timescales (for example, the timeliness of the core group or the convening of a child protection conference – see HM Government, 2018: 52):

It is the expectation of [Marketon CSD] that social workers will undertake their statutory responsibilities without fail... On those occasions in which [Marketon CSD] has reason to believe that the social worker has knowingly failed to carry out their statutory

responsibilities... [Marketon CSD] will consider the suitability of disciplinary procedures (Policy Document – ‘Social Worker Duties and Responsibilities’, August, 2016).

However, I was also advised, that it was a departmental culture to initiate disciplinary action for missed deadlines that were locally, rather than nationally, set:

You know [manager] put me on an ‘action plan’ right? (SW1, FG).

No, I didn’t know that (Facilitator).

Yeah, I was disciplined basically because I wasn’t completing my assessments ‘on time’ [gesticulates with hands to indicate that this is a quote]. They said that it has become a ‘repeated problem’ [again, gesticulates]... I have not been completing them within 28 days... not because I don’t want to, but because I am too busy; I have too much work to do... In any case I said ‘but the statutory guidance says 45 working days’ and I was told ‘well that’s the way we do it round [sic] here’... (SW1, FG).

In this extract, the disparity between statutory guidance (see HM Government, 2018) and local policy in respect to timescales for completing assessments of a child and its family is striking; as is the account of the social worker being ‘disciplined’ despite adhering to the former.

However, whilst this disparity was acknowledged by the social workers, they generally accepted it as part of the local culture, in the context of ‘that’s the way we do it round here’:

Yeah, the assessment timescales... it is odd that we have only 4 weeks to complete the assessment but the statutory guidance says 45 working days [laughs]. It’s just how things are... [employer] does things their own way... it doesn’t bother me, I just make sure that I meet my deadlines (SW4, SSI).

Would you ever choose not to meet those deadlines?
(Interviewer).

No way [laughs]... it's just not worth it (SW4, SSI).

Indicative in this exchange is the level of compulsion that the social workers generally felt towards evidencing their compliance with departmentally set 'must-do' timescales (it was also in contrast to the social workers' general willingness to break with official policy with respect to spending their own money in the interests of the child – see Section 4.2.2).

Indeed, whilst the wider literature suggests that any timescale, like other rules, provides an ingrained *de facto* discretionary space, where social workers can decide whether and how to conform (see Dworkin, 1977; Evans and Harris, 2004; Taylor and Kelly, 2006; Shaw et al., 2009), this was not an area in which the social workers of this study were generally willing to employ their discretion:

Timescales... has anyone used the expression 'comply or die' yet?
(SW5, SSI).

Yes, I have heard that. What do you think it means? (Interviewer).

It's a moto we have in the office; a joke... we say you better stick to those deadlines or else [laughs]... It's basically recognising the fact that the potential cost of not sticking with timescales is too high... for me personally, compliance is the only logical option
(SW5, SSI).

4.2.5 Summary

In summary, the social workers identified four areas in which their discretionary space was restricted. These pertained to the 'outcome decisions' of Child Protection Conferences, Legal Planning Meetings and Final Care Planning Meetings;

‘decisions to spend money’; the ‘workflows and content’ of the ICS; and with regards to specific ‘must-do’ timescales and deadlines.

That being said, this restriction pertained to the ‘de jure’ discretionary space, and there were areas in these examples in which the social worker remained able to exercise discretion in a ‘de facto’ (for example, timescales and deadlines) or else ‘entrepreneurial’ sense (for example, decisions to spend their own money). In these situations the issue therefore became whether the social worker was willing, and indeed chose, to employ their discretion, and this is the context of discussion in Chapter 5.

In the next section I consider in more detail those areas in which the social workers believed that they *were* afforded a discretionary space; again framing the discussion in terms of these different types of discretionary space.

4.3 Where social workers said that they *did* have discretionary space

Generally, each social worker was able to identify only one or two areas in which they thought that they were afforded a discretionary space, as opposed to multiple areas in which they felt that they did not have discretionary space. Interestingly, two participants, in responding to the questionnaire, went as far as to state that they did not have *any* discretionary space and a weakness in the methodological design here was that I was not able to further explore these sentiments with these participants.

Although the social workers accounts differed in terms of language used, I identified what I believe to be the four distinct domains (again developed from specific ‘memo titles’ – see Section 3.7.6) where they believed that a discretionary space existed. These are as follows:

- Management of own time – Diary management;
- Logistical decisions in day-to-day case management;
- Implementation of the child in need (but not necessarily the child protection) plan; and
- Emergency time-sensitive decisions.

I will consider each in turn.

4.3.1 Management of own time – Diary management

The area in which there was most consensus about the availability of discretionary space was in respect to the social workers’ ‘diary management’ (SW4, SSI). Indeed, the social workers outlined that they were generally able to ‘organise [their] own day’ (SW5, SSI), ‘manage [their] own time’ (SW3, SSI), decide on ‘the order in which [they] completed [their] tasks’ (SW5, FG), and, for the most part, determine ‘what work [they did] when’ (SW17, Q) – workflow ‘hold-ups’ notwithstanding.

However, the social workers also recognised that this freedom was not absolute, and that the management of their time was also influenced by their ‘negotiation of both departmental expectations and the general demands of the child protection task’ (SW2, Q).

I understood these 'departmental expectations' to include: 'adherence to [must-do] procedures and timescales' (SW6, Q) (see Section 4.2.4); the need to 'negotiate the demands of the ICS workflow' (SW2, Q) (see Section 4.2.3); the expectation of 'conformity with process' (SW3, FG) and 'complying with specific management requests' or instructions (SW1, SSI). The 'demands of the child protection task' was more difficult to decipher, but I settled on the idea that this referred to the need to 'respond to unexpected events' as one managed the human element of public service provision (Lipsky, 2010), that is, the 'unpredictability' of 'service users' (SW12, Q).

Examples of these 'unexpected events' included: 'an injury to a child' (SW8, SSI); 'an allegation of abuse' (SW12, Q); or the 'emergency visit' (SW5, SSI). Such occurrences were accepted as 'the norm' but meant that at certain points in time, a social worker was compelled (as one might expect) to 'dispense with everything else that [they were] doing, and respond accordingly' (SW5, SSI). This extract taken from my field notes illustrates this point:

I accompanied [social worker] today to attend an emergency, and thus unplanned, paediatric medical assessment for a child on her caseload. We were at the hospital for four hours. [Social worker] reflected that she had a lot of other tasks planned in her diary for today, and that she would now have to find the time elsewhere to complete these. She explained that the freedom that she sometimes had to organise her own day, could be 'undone in an instant' by an emergency or unexpected event. I asked her if she could ever use her discretion and choose not to prioritise the 'emergency' over her other planned tasks. Her response was unequivocal – 'no' (Discussion with Social Worker – Paediatrics Ward, November, 2014).

In part because of the requirement to respond to these ‘unexpected events’ (SW12, Q), but also because of a ‘limited time availability brought on by high work demand’ (SW6, FG) (see Section 6.1.1 for further discussion), the social workers explained that even the availability of discretionary space in respect to diary management did not enable them to accommodate all of the differing needs of the individual children on their caseload. Indeed, more often, their limited time and capacity compelled them to choose between different children’s needs:

This happens all the time; I need to decide between which piece of work takes priority... it does mean choosing between the needs of different children (SW1, SSI).

I found that some social workers, in responding to this ‘human tension’ (see Lipsky, 2010) would choose not to employ their discretion for ‘fear of making the wrong choice’ (SW4, SSI) – or perhaps to avoid the ‘discomfiture’ (Evans, 2010: 62) of ‘prioritising [the needs of] one child over another’ (SW5, SSI). Instead, they tended to seek instruction from, or delegate a decision to, their line manager:

I always ask my manager for advice as to which work to prioritise... I mean it’s so hard when what you are effectively doing is saying ‘right I’m going to prioritise this child’... I hate that aspect of it (SW5, SSI).

Alternatively, other social workers chose to respond by maximising their discretionary freedom; for example, organising their time so that they would complete administrative work at home in the evenings or at weekends; or arranging to visit families ‘out of normal working hours’ (SW15, Q):

This freedom lets me arrange my visits around the family’s circumstances. So I visited a father last week after he finished his

shift at 9pm... I've also gone to see children before school... (SW2, SSI).

How early might you visit? (Interviewer).

6.30am or 7am, depending on how I can fit into their routine (SW2, SSI).

I considered that a number of safety and ethical tensions arose in these accounts. For example, the risks associated with lone working late into the evening and the potential for 6.30am visits to be construed as oppressive if not arranged in full agreement with families. Further, I noted that taking certain documents out of the office contravened policy on data protection and privacy. However, the social workers explained that these types of behaviours were not only tolerated, but sometimes 'expected' by managers, albeit on an 'unofficial' or else 'informal' basis:

There is this culture where managers expect you to get the visits done and complete the paperwork 'in whatever way possible' [social worker uses hands to indicate this is a quote] but will never officially say 'yes you should work at home in the evenings and weekends' [again, use of hand gesture]. They just expect you to do it; it's like an unofficial policy. When I first started [social] work, I'd say, 'there isn't the time', only to be told to 'find' or 'make time'. That time can only come from one place... home time [grimaces] (SW6, SSI).

This description of indirect encouragement to complete work at home, constructed as 'unofficial policy', was, I realised, again characteristic of an 'entrepreneurial' discretionary space (Evans, 2016: 609). However, I considered that this differed from that entrepreneurial space available in 'decisions to spend one's own money' – as with that example managers 'tolerated', as opposed to indirectly encouraged, social workers to break with official policy. Yet, I understood both to be examples of

where an informal space was afforded on the pretext of achieving a more effective service provision in real terms (see Evans, 2016).

I theorised that choosing to employ discretion in this 'entrepreneurial space' could pose a risk to the social worker, as the external perception would invariably be that they had chosen – rather than been encouraged – not to comply with formal policy (Evans, 2016). However, several social workers indicated that they felt 'compelled' to visit families out of hours or take office work home: 'it's just part of the job' (SW5, Q), 'something that I've come to expect' (SW6, FG), they told me. What is more, some saw it as beneficial 'in the wider scheme of ensuring better services for children' (SW2, FG) as this extract indicates:

As a practitioner, I choose to visit children more regularly than is prescribed – that's my preference... But then the paperwork still has to be done, so I organise my time so that I can move the [administrative work] into my personal time... yes this means that I am often working at home, but it allows me to spend more time with children during the working day, and in this respect, I think it is worthwhile (SW8, SSI).

In this sense, I reflected that the discretionary space afforded to social workers in respect to their time and diary management, could be perceived as enabling them to practice in accordance with the individual needs of the child (as advocated in the Munro Review – see Chapter 1). However, I also noted that Munro's image of a more 'effective' system was one in which this freedom was formally recognised and not one where social workers felt compelled to exercise an informal and unofficial discretionary space (see Chapter 7 for further discussion).

4.3.2 Logistical decisions in day-to-day case management

The second area in which the social workers identified that they had discretionary space pertained to those 'day-to-day' (SW3, SSI) and 'logistical' (SW5, Q) decisions and actions 'taken in the course of managing cases' (SW5, FG). The social workers considered these to be 'low risk' in nature (SW6, SSI), and 'falling outside of the interests of management' (SW6, FG). In this sense they tended to exclude anything to do with departmental expenditure – although I considered that the decision to spend one's own money might fit into this category. Also, they excluded those decisions which, to use Evans' (2016: 609) terms, might impact upon the 'external perceptions of performance' – thus, anything that might be construed as indicators of 'good practice' in respect to inspection (for example, adherence to timescales and evidence of a complete and coherent 'child's file' on the ICS – see Section 6.2).

In this regard, this discretionary space could be conceived as a freedom in the 'the style and manner of practice' observed by Howe (1991: 219) or as the 'task discretion' outlined by Taylor and Kelly (2006). Indeed, it extended to 'what' the social workers said and did, and 'how' and 'when' they said and did it:

I guess you could think about that [discretionary space] as the freedom to decide what I discuss in a meeting or the content of an email (SW2, SSI).

I'm free to decide on what I say to a child, for example, in explaining my role, and the work we might do together (SW4, SSI).

An[other] example might be how I choose to conduct a home visit, or the content of a direct work session (SW7, SSI).

It could be in decisions about the tasks that I set for parents, or those that I allocate to other professionals to complete on behalf of the group (SW1, SSI).

It was apparent that this type of freedom was one that the social workers valued, and associated with their status of being a professional practitioner:

For me personally, that space relates to those professional capabilities that we are expected to undertake as social workers... It's something that I enjoy and am proud of; being able to decide 'right this is how I think I should do this task' and then actioning it without checking with anyone else (SW8, SSI).

I think it's about that trust and autonomy of being a professional... trusting me to know what to say to a child, how to run a difficult meeting... how to console a grieving family member... It can be tough, but I suppose it's also an area of the job that I enjoy the most (SW1, SSI).

It was also evident that on this basis the social workers expected to be afforded a 'logistical space' (SW9, Q):

It's also that I expect to have this freedom. Like I said it's part of being a professional... being trusted to decide how to manage yourself and your interactions with others. I can cope with all the bureaucracy and prescription, being told what money can and cannot be spent, or what procedure to follow. But if you took that [logistical space] away, then the job wouldn't be worthwhile (SW8, SSI).

Yes, I expect that [discretionary] space... having some freedom, albeit in a logistical sense, it goes to the heart of being a professional doesn't it? It's part of your professional identity (SW3, SSI).

However, not all of the social workers reported being afforded this freedom, and some described a management style that encroached into their 'logistical space' (SW4, Q), where the manager sort to 'micro-manage' and 'be involved in even the smallest of [logistical] decisions' (SW6, SSI):

I can't walk in the office now without her asking me where I have been, what I've seen, what I've said, what did they say?... I don't need that... I don't have the time to repeatedly sit and have a

conversation about a conversation that I have just had with a family (SW2, SSI).

Having over six years of child protection social work experience, the social worker in this last account was one of the most experienced practitioners to participate within the research (see Appendix 2). The context of her lament was in describing the difficulties that she was experiencing with a 'new manager' (both 'new' to the CPT and the CSD); especially in terms of this manager's purported tendency to limit the social worker's 'day-to-day [logistical] space' (SW2, SSI).

Thus, it is noteworthy that within six weeks of participating in the research interview, the same social worker submitted her notice of resignation. As indicated in the extract below, her rationale for this decision manifested from a feeling of being 'disempowered' and 'de-professionalised' which she associated with the restriction of her logistical freedom:

[Social Worker] approached me today to say that she had handed in her notice of resignation. She wished to discuss and explain her reasons for this decision... She told me that she had become 'disillusioned' by her lack of freedom 'even to make day-to-day case decisions'... and the loss of her 'logistical' freedom... She explained that 'for someone of [her] experience to become so suddenly disempowered and de-professionalised in this way', meant that she could 'no longer continue to work for' [the employer] (Discussion with Social Worker – Office, May, 2016).

Whilst this account emphasises the importance that the social workers placed on this area of discretionary space, it also again highlights the role that other members of the CSD could have in deciding the social worker's level of discretionary freedom; a theme that propagates into the following section.

4.3.3 The management and implementation of the child in need (but not necessarily the child protection) plan

The third area in which the social workers felt that they had discretionary space, was in the 'management and implementation of child in need plan' (SW7, Q).

The 'plan' tended to be informed by the social work assessment of the child's circumstances. However, the organisational design (see Figure 3) determined that the first assessment after referral was usually completed by a different social work team (see Section 3.3.3). Recognising the 'propensity for changing needs to emerge as a case progresses[d]' and the 'requirement for the social worker to be flexible when encountering a change in circumstance' (Policy Document – 'The Management of Child in Need Cases', August 2016), the policy and culture was to afford the case holding social worker the power to 'alter the plan as they judge[d] it necessary'.

In practice this meant that social workers had a de jure space to add or remove stated interventions from the plan (although there was an expectation that they would communicate and agree this with both the family in receipt of services and the connected professionals). The social workers felt that this provided them with a degree of freedom to 'be innovative and adapt to the individual needs and changing situation of the child and family' (SW7, Q):

I can respond to the unique circumstances of the family... change the support offered to make sure that it is the right type for their situation... (SW6, SSI).

The formally granted nature of this space was endorsed by the manager participants who advised that – like that space afforded in diary and (for the most part) logical case management – this freedom was provided on the basis of the social worker’s professional status:

I would want social workers to use their discretion in... the management of both child in need and child protection plans (M2, FG).

I agree, that’s another area where, as a professional social worker, I would expect them to manage their work with minimal intervention from me as their manager (M3, FG).

Similarly, policy documents outlined that the social worker, ‘as the lead practitioner’, should be afforded discretionary space in respect to the management of the child protection plan, emphasising their ‘freedom’ to

add to, and remove from, the child protection plan... according to their assessment of the changing family situation and the child’s needs (Policy Document – ‘The Management of Child Protection Cases’, August 2016).

However, noteworthy within this policy wording was the absence of mention of the Independent Reviewing Officer (IRO), who the social workers believed held the most power in deciding both the content of the child protection plan and on whether the social worker would be afforded a discretionary space in respect to its content:

Because the IRO has final say over the making of the plan, they have a lot of power to control what goes into the plan... If the social worker is to be given the space to decide on the content of the plan, then it is because the IRO made that decision (SW6, SSI).

Indeed, the social workers explained that the IRO had the capacity to either enable or restrict the social worker's discretionary space in respect to the child protection plan. Moreover, they believed that the local culture was for IROs to restrict, what was otherwise, a de jure space:

I think in general this group of IROs seeks to limit the discretion[ary space] that we have in terms of the child protection plan. My own experience is that they tend to decide-upon and manage the content independently of [the social worker's] efforts and recommendations (SW8, SSI).

A limitation of this study was that it did not facilitate discussions with the IROs (and this remains a potential area with which to extend the enquiry – see Section 8.2). However, I questioned some participant's assertion that the IRO could have 'total control' (SW12, Q) over the social worker's discretionary space in this regard, on the basis that the social worker, as 'lead practitioner' and 'case holder', was likely to encounter a degree of innate (de facto) freedom (Evans and Harris, 2004) – something that had been noted in other areas of their practice (see above), and which, arguments suggested, was 'inevitable' in street-level work (Lipksy, 2010; Baldwin, 2000) (see Section 2.2.1).

Several social workers accepted this point, recognising their ability to change the content of the child protection plan if they chose to. However, they also outlined that because the plan existed in written form on the ICS, and that it could be freely accessed by the IRO under the premise of 'monitoring progress' (SW3, FG), any changes that were made by the social worker, were therefore easily identified, and

further, had more recently become the basis on which IROs had raised 'formal expressions of concern' to CSD managers about social worker practice decisions.

Thus, again 'fearing' that the exercise of their de facto discretion would result in specific 'negative personal consequences' (SW5, SSI) (see above and Section 5.1), a number of social workers in this study adopted a position of compliance and conformity on this issue – choosing not to employ their discretion with respect to the content of child protection plans.

That being said, there were others who described engaging in an 'active resistance' of the IRO's 'control' (SW2, SSI). Here 'resistance' was understood in the same sense as that described by Lipsky (2010) and Baldwin (2000), that is, seeking out and maximising informal discretionary space, and thus ignoring 'personal concerns... in the interest of the individual child' (SW1, SSI):

Yeah, the IRO has a lot of control of the child protection plan, but they are not working with the family everyday... I am not afraid to make changes to the plan and then justify them later given that it is what I think is best for the children... (SW2, SSI).

Whilst the social worker in this last extract expressed a 'confidence' in making changes to the child protection plan, based on their judgment of 'what... is best for the child', her counterpart outlined that on occasions, decisions to 'resist' an IRO's control over the plan had, in her mind, resulted in more costly consequences for the child:

In the past I have made changes to the plan believing that was the right thing to do for the individual child. But then I have got to the child protection conference and the IRO has said, 'right, because

you changed the plan, and that specific intervention which I think is still really important remains incomplete, means that I can't agree that the plan should end'... so they keep the child on the plan for another six months... This can feel really oppressive for the child and their family... that's why I won't use my discretion with the child protection plan anymore (SW1, SSI).

Two pertinent points emerge here. First, is the assertion that when encountering a discretionary space, the social worker's willingness to employ their discretion was influenced not only by their judgment of the potential impact upon themselves (as indicated above) but also the assessment of impact upon the service user – in this account the prospect of a child experiencing a negative outcome on the basis of the social worker's discretionary behaviour was said to dissuade that social worker from employing their discretion (this forms the context of a wider discussion in Chapter 5).

Second, this highlights the dilemma faced by the social workers in this study, they could choose to exercise their discretion within the de facto discretionary space, and thus change a child protection plan believing that it would enable a 'better service response to the family's individual or changed circumstance' (SW6, SSI). However, by doing so, this could also result in a negative consequence, not only for themselves (for example, in the form of IROs raising concerns with CSD management about a social worker's practice – see above), but also for the child or family concerned – for example, necessitating that the child remain subject to the child protection plan for an 'unnecessarily elongated' (SW12, Q) and thus 'oppressive' period of time.

This I considered highlighted the difficulties of restricting the social worker's de jure discretionary space in this area of their practice. Whilst, their intention in choosing not to employ discretion, was ostensibly to avoid 'oppressive' outcomes for children, they were thus not able to demonstrate the type of 'flexibility' and 'responsiveness' to the individual child's needs and circumstances that was ostensibly afforded to them in respect to the child in need plan, and which, they believed improved the 'effectiveness' of their practice, as advocated by the Munro Review (see Chapter 1).

This was an area in which the social workers favoured change, indicating that if the space afforded to them was of a de jure as opposed to de facto nature, then they would be more willing to employ their discretion:

Absolutely, if I felt that the IRO trusted me to make those changes, and would endorse them, then I would be much more likely to use my discretion (SW1, SSI).

This becomes an area for further discussion in Chapter 5.

4.3.4 Emergency time-sensitive decisions

The final area in which the social workers identified a discretionary space was in respect to 'time -sensitive decisions' (SW7, Q). These were understood to be 'decisions requiring a quick' (SW7, Q) or 'timely response' (SW3, SSI) so as 'to reduce the risk of harm' (SW9, Q) or else of 'negative short... or long-term consequences occurring' (SW5, FG).

I asked the social workers who this concern (of being ‘harmed’ or the recipient of ‘negative consequences’) pertained to. Most often they responded as one might expect: ‘the child’ (SW2, FG); ‘family’ (SW6, SSI) or ‘service user’ (SW2, SSI).

However, they also explained that on occasions it could extend to include themselves; their ‘employer’ (SW6, FG); ‘other professionals’ (SW4, SSI) or indeed, ‘members of the public’ (SW8, SSI).

Mostly, this discretionary space was understood to exist in a de facto sense, where opportunities to employ discretion emerged because of ‘unexpected’ (SW3, FG) or ‘unforeseen’ (SW11, Q) situations and scenarios (the ‘inevitable’ source of discretionary space according to Lipsky, 2010). However, it was also the understanding of the social workers that in specific contexts (see below) they had explicit permission from their employer to exercise their discretion ‘in the interests of reducing the chances of harm occurring’ (SW4, SSI), and thus, in these circumstances I considered that this discretionary space could also be conceived in the de jure sense of the term (although I noted a lack of formal policy setting out these nuances).

For the social workers, their ‘location’ at the time of a decision, was an important influencing factor in cultivating this discretionary space. In elucidating this point, they explained that the general expectation within the CSD was that ‘any high-risk decision should have oversight of a manager’ (M1, FG). Thus, when the social worker encountered a ‘time-sensitive’ decision whilst in the social work office, they

were expected to discuss the circumstances of the decision with a manager (the assumption being that the manager was available):

Yes, I would expect the social worker to come to me in that context and tell me what is going on, so I can have some oversight of the response (M4, FG).

However, if a 'time-sensitive' decision arose 'in the field' or in circumstances in which managers were not easily obtainable, then the decision changed from one that the social worker would not normally make independently, to one in which the use of discretion was not merely expected, but 'required' (SW8, SSI) – 'especially when necessary to safeguard a child from the threat of harm' (SW4, SSI). This assertion was supported by the managers:

It's more when they are away from the office and encounter that high risk situation where I would want them to use their discretion (M4, FG).

Absolutely, to delay a decision and risk harm being suffered to a child, merely to consult with a manager, could never be justified after the fact (M1, FG).

However, I considered that the notion of a 'time-sensitive' decision was rather a relative one, and that a social worker might encounter a decision in the field, in which a *timely* decision was required, but where they still had the time, and opportunity, to consult with a manager or colleague:

Yes, it is relative because the decision might be time-sensitive but there might also still be the time to call a manager and ask for advice. In fact really, I would want to do that, if I had the chance, and I think that they would expect that of me also (SW5, FG).

The manager participants agreed that, given the opportunity, they would prefer social workers to consult with them:

However, if [the social worker] assesses that there is time to delay a high-risk decision and seek advice from me or one of the other managers, then I would want them to do that... in the interests of ensuring a more rigorous decision is arrived upon... (M3, FG).

Thus, I considered that what decided the discretionary space was more the *immediacy* with which the decision was required and less the social worker's (or indeed the manager's) location at the time of the decision. This point was made by a social worker who differentiated between those 'emergency' and 'non-emergency' time-sensitive decisions:

I guess you could separate them into emergency and non-emergency... Both are time-sensitive, but the emergency decision needs a response straight away, without delay, or the chance to go and get direction... (SW6, SSI).

This distinction is an important one. Whilst a 'non-emergency' but 'time-sensitive' decision enabled a *de facto* discretionary space, it also allowed for time to consult with, and seek direction from, managers – and it was the expectation of managers that social workers would maximise this opportunity. Conversely, in those 'emergency' time-sensitive decisions, managers expressed that 'delay... could [not] be justified', and thus social workers were afforded a *de jure*, as opposed to *de facto*, space.

Again, this influenced the social workers' willingness to employ their discretion.

They explained that they would be more willing to employ discretion in an 'emergency' time-sensitive sense, not only on the basis that this was their

‘professional duty’ (SW8, SSI), but because the formally acknowledged discretionary space meant that they felt ‘supported and encouraged’ by their managers to do so (see Section 5.1 for further discussion). However, they were also less willing to employ discretion in the ‘non-emergency’ de facto discretionary context, as to do so would contravene that expectation that their decision would be informed by consultation with a manager:

No, I wouldn’t choose to use my discretion if it wasn’t an emergency... I would check with a manager first... that is what we are expected to do (SW4, SSI).

In Chapters 5 and 6 I further elaborate on the social workers’ rationale for this, but the pertinent point to highlight again here, is that the tendency amongst the social workers was to favour exercising their discretion in a de jure as opposed to de facto space, with the knowledge that such behaviour was formally recognised and ‘endorsed’ (see Section 5.1).

4.3.5 Summary

In summary four areas in which the social workers stated that they were afforded discretionary space pertained to their ‘time’ or ‘diary’ management; their ‘logistical’ and ‘day-to-day’ case management; the management and implementation of the child in need plan; and in those ‘emergency’ ‘time-sensitive’ decisions. Again, these examples were understood in the ‘de jure’ sense, as the social worker’s discretionary freedom tended to be formally acknowledged by managers and, on some occasions, in formal written policy.

The social workers also identified that the management and implementation of the child protection plan was an area in which the IRO restricted a discretionary space that had been formally acknowledged in policy documents. Here however, they retained a de facto space which allowed them to make changes to the child protection plan if they judged it necessary and appropriate.

Similarly, a de facto space existed in the context of those 'non-emergency' time-sensitive decisions. However, what became apparent was that the social workers were generally less willing to employ discretion in these de facto contexts, than they were in a de jure or even the entrepreneurial ones, and this is a point that forms the basis of wider discussion in Chapter 5.

4.4 Conclusion

This chapter has sought to elucidate that which I understood to be the areas where the social workers encountered discretionary space, but also, where their discretionary space had been restricted. In doing so, I cited examples where discretionary space might be thought of as 'curtailed' (Howe, 1986; 1991; Wastell et al., 2010), or else 'eroded' (Munro, 2005; 2010b; 2011a; 2011b), but asserted that this was only in officially granted and recognised ('de jure') terms. Indeed, I outlined that in a number of these areas, social workers continued to encounter a discretionary space, albeit in a de facto or entrepreneurial sense.

Further I have, throughout the chapter, observed that the reason why the type of space encountered was important, was because it served to inform whether the social workers were willing to employ discretion in that particular context. This

forms the basis of discussion in the following chapter where I seek to present the research findings relative to the research question: '*When do social worker's choose discretion?*'.

CHAPTER 5 – WHEN DO SOCIAL WORKERS CHOOSE DISCRETION?

5.0 Introduction: ‘willingness’ over ‘choice’

The previous chapter’s focus was on elucidating those findings which addressed the research question: ‘*Where do social workers encounter discretionary space?*’.

Within this chapter I turn to consider those findings relating to the second research question: ‘*When do social workers choose discretion?*’.

As previously noted (see Section 2.5.1), my interest here extends from that critique of the supposition that to have a discretionary space is to engage in discretionary behaviour (for example, Howe, 1986, 1991). Theorists have countered that it is as much about the social worker’s ability to choose whether to engage in discretionary decision-making and/or action-taking as it is about encountering a discretionary space itself (Evans and Harris, 2004; Lipsky, 2010; Evans, 2010; 2013; 2016).

However, my preference throughout the chapter will be to use the term ‘willingness’, rather than ‘choice’ or ‘choose’, and my reasoning for this is twofold. Firstly, because this is the language with which Munro made recommendations for reform: Finding that social workers were choosing not to employ discretion on the basis that it had become a ‘risky’ option in the child protection system’s ‘culture of blame’ (Munro, 2010b: 38) (see Section 1.4.2), Munro (2011b) made specific recommendations with the aim of improving the social worker’s ‘willingness’ to employ their discretion (p. 43).

Secondly, because within my study, the social workers repeatedly used the term 'willingness' to denote their 'read[iness] to employ' (SW1, Q), and indeed, to 'choose' discretion (SW3, FG):

If it's about choice and whether a social worker chooses to use discretion then we are talking about willingness... (SW3, FG).

Thus, my own use of the term 'willingness' within this chapter denotes the social worker's '*propensity to choose discretion*', on the basis that I understood that those social workers who described themselves as 'willing' were inclined towards employing their discretion in a given context, whereas the social worker who described themselves as 'unwilling' had a disinclination towards discretionary decision-making and/or action-taking.

I divide the chapter into two main parts: Firstly, developing the discussion of Chapter 4, I consider how notions of 'manager endorsement' and 'personal risk' can help to explain the social workers' tendency to be willing within the de jure and entrepreneurial space, but unwilling within de facto discretionary contexts.

Secondly, I consider some of the other nuanced factors which the social workers asserted could also influence their willingness to employ discretion; factors, which can elucidate certain deviations from the identified tendencies.

5.1 Explaining the general tendency: Willingness on the basis of a manager's 'endorsement' and by association a reduced 'personal-risk'

As described in Chapter 4, the general tendency was for social workers to be 'willing' to employ discretion in the 'officially recognised' and 'formally granted' de jure discretionary spaces (for example, diary management; 'logistical' case

management; and in the management and implementation of the child in need plan). However they were also generally 'unwilling' to employ discretion in the 'de facto' spaces that, it might be said, 'innately' emerged from their 'street-level' practitioner role (see Lipsky, 2010; Baldwin, 2000) (for example, non-compliance with departmental 'must-do' timescales; and 'time-sensitive' but 'non-emergency' decisions encountered in the field).

In explaining these preferences the social workers emphasised that the 'official' and 'formal' nature of the former gave them a 'confidence' to employ discretion:

Because it is recognised in official policy, I am confident that I can use discretion (SW6, SSI).

Conversely, the 'unofficial' and 'informal' means with which a de facto space emerged was aligned to a general 'unwillingness' to employ discretion:

No I wouldn't use my discretion in that [de facto] context... because that opportunity has not been officially recognised... I am not willing to [employ discretion] until I have a manager say: 'ok you can...' (SW4, SSI).

However, as intimated in this last account, the social workers' willingness was closely aligned to what they described as the manager's 'endorsement' (SW6, FG) of the discretionary space – which I understood to mean their manager's willingness to 'grant' (see Section 2.5.1) the social worker the space to employ discretion. Indeed, I found that the social workers were generally willing to employ their discretion whether this 'endorsement' existed in the 'official' and 'formal' sense, or the 'unofficial' and 'informal' contexts which constituted those 'entrepreneurial' discretionary spaces. In this regard, I found that the manager's

‘endorsement’ of the discretionary space was a greater influence on the social worker’s willingness than whether the space had been ‘officially’ and ‘formally’ recognised in policy documents:

For me the important issue is not so much what the policy says, but my manager’s position... (SW1, SSI).

So if the manager were to say that you could use discretion, but you understood that to be a contradiction of formal policy? (Interviewer).

Yeah, I would use discretion on that basis... it’s different... don’t get me wrong, I would prefer that [discretionary] freedom to be set out in the official policy, but it’s about understanding the realities of practice. Both my manager and I know that discretion is needed not just in those official [discretionary spaces], but the unofficial ones... we know it’s the only way that we can work effectively (SW1, SSI).

As suggested here, the social workers generally believed that the manager’s endorsement of the space emerged from a shared understanding that social worker discretion could enable more ‘effective’ service provision (see also Lipsky, 2010; Evans, 2016). Furthermore, they indicated that their willingness to employ discretion in these contexts was on the understanding that the manager’s ‘endorsement’ served as an ‘informal contract’ (SW3, SSI) between manager and worker that the former would ‘support’, or advocate for, the latter, if in a future situation others called into question their discretionary decision-making or action-taking:

I think that there is that understanding between us that I am prepared to go the extra mile and use discretion but only because my manager would support me if others later questioned my decisions (SW8, SSI).

In contrast to those assertions that the risk of discretion lies in the propensity for 'blame-shift' – particularly in the entrepreneurial space (Evans, 2016) – the social workers in this study generally expressed a sense of 'trust' in their line manager to 'have their back' on occasions where discretion had been used in discretionary spaces 'granted' by the manager:

I think that we have the type of relationship where I can trust him to have my back if we have agreed that I can use my discretion... if that was to change for whatever reason then I probably would be less willing to use discretion (SW7, SSI).

Further, the social workers explained that it was their belief that through 'endorsement' ('granting') of a discretionary space, a manager would, by implication, be willing to 'share accountability' (SW8, SSI) (which I understood in the sense of a preparedness to take some responsibility) for the outcomes which emerged from the social worker's subsequent discretionary decision-making and action-taking. This was something which the social workers generally considered to be 'fundamental' (SW3, Q) to their willingness to employ discretion:

It comes down to that knowledge that the manager will share some accountability for that decision... without that knowledge then I wouldn't choose to use discretion... it's essential (SW4, SSI).

Indeed, the social workers aligned their general 'unwillingness' to employ discretion in the de facto discretionary contexts, to the understanding that without a manager's 'endorsement' they were liable to be held 'individually accountable' (SW4, SSI) (and thus responsible) for any negative outcome which might emerge from a discretionary decision or action:

In those situations I am solely accountable for my decisions and actions, and that is the basis of [my unwillingness]... there is too much personal risk (SW5, SSI).

Notions that discretion in the de facto space constituted a degree of 'personal risk' to the social worker appeared throughout the participants' testimonies. I understood that this 'personal risk' referred to 'the potential for formal disciplinary procedures being instigated' for failure to comply with formal policy (see Section 4.2.4) or else 'being individually blamed for negative outcomes' arising from discretionary decisions or actions on the basis that the discretionary behaviour had not been 'endorsed' by a manager and/or in formal policy documents (see Section 6.3).

In this context, the social workers' account held hallmarks of the Munro Review finding outlined in the introduction to this chapter. However, a critique of Munro is of course that she failed to distinguish between the type of discretionary space available to the social worker (see Section 2.6.3). Thus, whilst in this study the social workers' testimonies ostensibly supported Munro's finding that discretion was conceived as 'risky', this was more in respect to the de facto discretionary contexts identified, and on the basis that that discretionary space had not been – either formally or informally – endorsed by a manager; thereby explaining why they were generally more willing to choose discretion within those de jure and entrepreneurial contexts.

5.2 Other factors influencing the social worker's willingness to employ discretion

The above section sought to set out the importance of a manager's 'endorsement' for cultivating a social worker's willingness to employ discretion within the discretionary space, and, in this regard, to explain the aforementioned tendency to be willing within those de jure and entrepreneurial contexts but unwilling within the de facto examples.

However this tendency notwithstanding, the social workers repeatedly identified other factors – separate from the type of discretionary space encountered – which they asserted also influenced whether they were willing to employ discretion within the discretionary space. It is these factors which are the focus of this section, and I divide the ensuing discussion under three headings:

- A knowledge of the child, its family and situation;
- Experience of, and in, similar decision-making scenarios; and
- Other personal influences.

5.2.1 A knowledge of the child, its family and situation

A recurring theme within the social workers' accounts was that their willingness to employ discretion was, in specific contexts, influenced by the knowledge that they held about the child and its family:

I would say that before deciding whether I will use discretion I think about my knowledge of the child, its family and situation, and whether in that context I have enough, or the right type... to be willing to make a decision (SW4, Q).

In that scenario, I would ask myself what do I know about this family? Do I know enough about the specifics of the case to decide whether that would be best for the child?... If the answer is 'not a lot' and 'no', then I am less inclined to use discretion... (SW7, SSI).

In this regard, I understood that the 'type of knowledge' which the social workers considered valuable for informing their willingness, included: of the different 'personalities, characteristics and history' of the family members concerned (SW2, SSI); of the 'wishes and feelings' (SW1, FG) or else the 'needs of the individual children' being considered (SW16, Q); and of the 'risks, strengths and protective factors' that were understood to be specific to the case:

I think I need to know about the different actors... mum, dad, grandparents... I want to know what the children's wishes are... what the risks are, that kind of thing... (SW6, SSI).

The social workers explained that at a basic level, their willingness to employ discretion tended to improve the more that they knew about a child, its family and situation, on the basis that they felt 'better equipped' to make decisions 'in the interest of the child' (SW2, Q):

But if I know what the children want, what they need.... the risks, the history... that kind of thing, then yes, I would be more willing to use discretion because I know the case don't I... I am in a better position to decide what is best for the child (SW7, SSI).

If I have a good knowledge of the child and family, then I am better prepared to make decisions in the best interest of the child and therefore I would be more willing to use discretion... (SW11, Q).

However, in some of the more nuanced accounts I found that the emphasis placed on this knowledge differed according to the context of the social work task and decision required:

Let's say it's a decision about whether a father can have contact with his children... I can make the decision, but I would only be [willing] to do so when I know more about the father and his relationship with the children (SW3, FG).

Knowing about the family can be useful and make you more willing to employ discretion I think, but it's not always necessary... for example, walking into a house and meeting a family for the first time. I don't necessarily know that much about them, but I don't need to... I know that the house is too cold; that mum says that she has no money to heat the property; and that the children will suffer if I don't give her some [money] (SW2, SSI).

Further, I found that it was not only *whether* the social workers possessed this knowledge, but also the '*type*' (SW3, Q) or '*nature*' of the knowledge held (SW4, SSI) that influenced the social worker's willingness:

It might be that I know loads about the family but for certain decisions I am still not prepared to use discretion... For example, the knowledge was that a child had epilepsy and was prone to fits... the decision was about whether they could travel alone to another part of the country... I wasn't willing to use discretion, but instead deferred that decision to the specialist doctor as their expertise made them better placed to decide (SW4, SSI).

In addition, I found that the type of knowledge held could also inform the type of discretionary decision or action taken:

If you knew that there had not been any domestic violence incident for 9 months, would this effect your willingness to employ discretion in that context? (Interviewer).

Yes definitely... and I think on that basis, I would be more likely to say to him that he could come home for Christmas... (SW8, SSI).

What if you knew that whilst there had been no violent incidents for 9 months, there is a history of violence on Christmas day? (Interviewer).

Oh [laughs], ok well yeah, I will still make the decision, but now the decision is different... I would have to say 'no', he can't come home (SW8, SSI).

Ultimately, I found that how the social worker interpreted their knowledge of the child, its family and situation, could explain why on some occasions the willingness to employ discretion, differed to that which I understood to be the general tendency of the group:

Does it matter if the time sensitive decision is an emergency one or not? (Interviewer).

For me personally no. If I have a really good knowledge of the case, then I don't need to wait and check with a manager (SW2, SSI).

But there is the expectation that in non-emergencies that you would do that? (Interviewer).

Urm, well yeah, my manager wants me to check everything with her. But I know the case better than her, so I choose to use discretion... (SW2, SSI).

Personally I can feel pretty uncomfortable being in charge of designing the [child in need] plan when I don't have a good knowledge of a child and their circumstances... Sometimes I have asked that other professionals – who have worked with the family for longer – to design the plan... because they have a better knowledge... and are in a better position to decide how to move the case forward (SW4, SSI).

5.2.2 Experience of, and in, similar decision-making scenarios

Another factor which the social workers identified as influencing their willingness to employ discretion was a previous experience of using discretion 'in similar decision-making scenarios' (SW7, Q):

One thing that I am mindful of, is if I have experience of making similar decisions previously (SW16, Q).

I'm thinking have I used discretion in a situation like this before?
...That can impact on my willingness (SW1, FG).

A number of social workers felt that if they had the experience of previously using discretion under 'similar circumstances' (SW4, FG), then this generally increased their 'confidence' and therefore 'willingness' to employ discretion again when encountering a comparable discretionary space:

There is a confidence that comes from the knowledge that you have made [discretionary] decisions like that before... that impacts on [my willingness] (SW13, Q).

I know that I have been in that situation previously and used my discretion, so I have a confidence to do so again... (SW1, SSI).

However, I considered that it was less *whether* the social workers had experienced using discretion in similar scenarios, but more the *type* of experience encountered that held the greatest influence upon their willingness. This finding emerged from more subtle accounts, where social workers explained that a 'positive past experience' (SW1, SSI) of using discretion in a similar decision-making context increased their willingness to employ discretion again; whereas conversely, a 'negative past experience' (SW4, SSI) reduced their willingness:

For example, if I have used my discretion in a similar situation previously and there was a positive result, then I think I would be more willing to use my discretion again. However, if that experience had been a negative one, then I think that would leave me less willing to employ discretion next time, does that make sense? (SW8, SSI).

I'm thinking 'yeah, I've used discretion here in the past and it all worked out well', so I'm more [willing] to use discretion again... (SW4, FG).

As intimated in these accounts, it was my understanding that the social workers constructed the type of experience encountered – either ‘positive’ or ‘negative’ – according to the ‘outcomes’ which they associated with their past discretionary behaviour. For example, if a discretionary decision or action had, after the fact, been aligned with some benefit – especially to the service user but also the social worker – then the discretionary behaviour was constructed as a ‘positive experience’:

When I think back, those situations where I have used discretion and it worked out really well, they are the ones where I am more likely to use discretion again... you know those times where I can clearly see a positive outcome for the child (SW1, SSI).

I remember being commended by other professionals for my use of discretion in a difficult meeting... that experience meant a lot... it would definitely lead me to use discretion again in a similar type of circumstance (SW3, SSI).

Alternatively, if the discretionary behaviour had, after the fact, been associated with some form of ‘cost’ – either to the service user or social worker – then it tended to be constructed as a ‘negative experience’, and thus, to dissuade the social worker from employing their discretion again:

I know others do, but I wouldn’t spend my own money even if I thought that was what [the service user] needed at the time... I see the value in it and actually I’ve done it before... but on that occasion it was a really negative experience... I got in a pickle because that particular service user then expected me to give them money again... When I didn’t, they made a complaint about me, and it had to be investigated... because I’d broken the policy, I was given a formal warning (SW4, SSI).

This last account is noteworthy both on the basis that, in contrast to the general tendency of the group, the social worker was not willing to employ discretion in the

entrepreneurial context identified; and because this unwillingness was associated with the 'negative experience' of being reprimanded for past discretionary behaviour within a similar discretionary context.

In a similar account a social worker described her 'reluctance' to employ discretion in a de jure discretionary space, again in contrast to the general position of the group, and again on the basis of a 'negative outcome' arising from past discretionary behaviour in a similar decision-making scenario:

I'm generally pretty reluctant to use discretion in emergencies, even though I know the expectation is that is what we should do... I've had a really bad experience of using discretion in those situations before... [where] previously I arranged for a child to stay at a family member's house as we couldn't locate his mum... it was after hours and the child was upset... afterwards my manager said this was the right thing to do. However, the child got an injury... and mum threatened to sue the local authority... There was an investigation... I came out alright, but it has made me so fearful of using my discretion in those types of situations (SW5, SSI).

Clearly, these last two accounts help to elucidate how past discretionary experiences could dissuade a social worker from choosing to employ discretion. In addition, they can explain why some social workers' willingness to employ discretion in a particular discretionary space contrasted with the identified general tendencies (above); something that was also attributable to a positive past experience:

Others have said to me that they would not be willing to use discretion in respect to assessment timescales. Why do you think that you take a different position? (Interviewer).

There are a few reasons I think. One being... that in the past positive outcomes have been achieved by me taking that position and using my discretion (SW2, SSI).

5.2.3 Other personal influences

Also throughout their testimonies, the social workers recognised particular 'personal influences' (SW5, FG) upon their willingness to employ discretion. These were described as a series of factors drawn from the 'personal' rather than professional life, but which could impact upon their professional discretionary behaviour:

I think there are those things which affect just me... they are personal to me because of my life and experiences outside of work (SW1, SSI).

You must also consider those personal factors... you know how experiences in your personal life influence your discretion as a social worker (SW4, SSI).

I considered these factors an important consideration, especially as previous explanations for a contrasting willingness amongst social workers have been limited to professional (see Evans, 2013) and situational factors (see Ellis, 2011; 2014).

I understood that the 'individual nature' (SW1, SSI) of these 'personal influences' meant that whilst two social workers could cite the same factor as influencing their willingness, that was not to say that that this factor was interpreted, and therefore influenced, their willingness in the same way:

I think others might have similar influences from their private life, but we all have different experiences, and so I guess the same factor could influence you differently, depending upon the individual experience that you have of it (SW2, SSI).

On this basis, the social workers asserted that these ‘personal influences’ could elucidate why, in specific contexts, they would deviate from that which might be considered the general tendency of their peers:

I think the influence of those factors that come from the personal life can help explain why sometimes we choose to use discretion, or we don’t choose discretion, but this is in contrast to what we might expect of the other social workers on the team (SW8, Q).

By way of example, an often-cited ‘personal influence’ was that of ‘parenthood’ (SW3, Q) or ‘of being a parent’ (SW2, FG). As one social worker explained, her ‘status as a mother’ had become a ‘prism’ through which she appraised, not only ‘the circumstances of the families that [she] work[ed] with’ but also the ‘discretionary spaces available’ to her. More so, it had become ‘one of the means with which [she] decide[d] whether to use discretion or not’ (SW4, SSI):

It's not only am I willing to use discretion as a social worker, but am I willing as a parent? (SW4, SSI).

This social worker explained that ‘as a parent’ she had ‘come to understand the potential long-term impact of certain decisions’, and aligned this with a general ‘reluctance’ to employ discretion in particular contexts:

It’s not only decisions like should a child be subject of a child protection plan, or should they be removed from their parent’s care, where I wouldn’t use discretion, but others where I do have the discretionary space... for example, the outcome of assessments, whether a child can have contact with family members that kind of thing. I don’t like using my discretion... it’s just I could totally get those decisions wrong... it could really damage a child (SW4, SSI).

Conversely, another social worker suggested that her own experiences of parenthood had, she believed, increased her general willingness to employ discretion, including in discretionary spaces that were not formally granted to her:

In some situations I have thought to myself 'oh God, that could be my child' and I think, yeah, I chose to use my discretion because of that... for example, spending my own money... decisions to extend timescales... changing the child protection plan... it all comes down to the influence of being a parent and thinking 'I would want someone to do the same for my child' (SW2, SSI).

The same social worker also cited her experiences of 'childhood' as an influence upon her willingness to employ discretion:

I am quite happy to use discretion generally I think... it comes from my childhood... I mean I grew up in a complicated home with alcoholism, domestic violence and terminally ill children... so I know first-hand how those things impact upon families... It does allow me to understand about the [different] make-up of families [and] the complexity of family life and to view risk differently; and I think that that makes me more willing to use discretion... (SW2, SSI).

Likewise, another social worker identified not only the 'influence of childhood', but more specifically, of being in receipt of social work services as a child, as an influence upon her willingness – indeed, more so than the type of discretionary space encountered:

I had a social worker when I was younger, and I learnt that most often it was them and not their manager, the IRO or the Guardian who knew the most about me and my situation... However, my personal experience was that decisions were made about me by these people who didn't know me, and they were often not good decisions... I've taken those experiences into my own practice and I think that I choose whether I use discretion more on the basis of am I best placed to make a decision for a child, than whether my manager or [others] say that I can... (SW14, Q).

On a similar basis, a colleague of this social worker aligned her experiences as an adoptive parent as having the 'greatest influence' upon her willingness to employ discretion:

I have adopted children and they have a social worker. I think that experience has impacted upon whether I choose to use discretion... for example, sometimes I think to myself, 'what would my son want from his social worker here?' the answer could be 'to use their discretion' and then that makes me more likely to [use discretion]... the context of the decision is not the important issue... (SW1, Q).

More broadly, these 'personal influences' were not limited to experiences of/from childhood and/or parenthood, but also included such things as one's 'religious faith' and cultural disposition:

A big influence for me is my religious faith... I think others worry about using discretion because they worry about being blamed. I admit that I feel the same sometimes, but instead of choosing not to use discretion on that basis, I put my faith in God that it will turn out right (SW3, SSI).

I think another factor that is hard to get away from are those cultural influences... In my culture the preference is for family problems to be resolved within the community, and traditionally that community is suspicious of social workers... that is partly why I became a social worker, but I do wonder whether there is some part of me, where this still impacts upon my [willingness] to use discretion (SW16, Q).

In contrast, to these last two assertions another social worker explained that whilst her religion was 'important' in her 'personal life' she was 'determined' not to allow the influence of this to impact upon her practice, including in her discretionary behaviour towards children and their families:

Whilst I am strongly influenced by my religion... this is something which I don't let impact my work with children. I think there is potential for me to judge situations differently because of my religion, but I think it is important that I don't let those biases effect my use of discretion... (SW15, Q).

Whilst this account again illustrates the propensity for 'personal' factors to influence individuals differently, it also highlights that ethical tension which is important to consider in discussions around choice within the discretionary space (Evans, 2013); namely, that bias can emerge (Lipsky, 2010). Whilst this forms part of the wider critique about the value of practitioner discretion within public service provision generally (see Molander, 2016), my concern here is less the ethical implications of these influences, but more so, how they could explain the social worker's discretionary behaviour.

Ultimately, for the social workers in this study, those 'personal influences' were often aligned with whether they were willing to employ discretion. Further, the variety of personal influences identified, and the different manifestations of these, help us to understand why, in a particular discretionary space, one social worker was willing to employ discretion, but another was not.

5.3 Conclusion: More than the type of space encountered

It is prudent to note that whilst we can ascribe a general tendency to this group of social workers to be willing/unwilling to employ discretion within specific types of discretionary space, that is not to assert that their willingness was solely determined by the type of space encountered. On the contrary, evident within this study is that willingness could also be informed by a plethora of other nuanced

factors specific to the social worker – for example, their knowledge of the child, its family and their situation; the experience of using discretion in similar decision-making scenarios; and the impact of influences derived from the ‘personal’ rather than the ‘professional’ life. The pertinent point therefore, is that in order to understand whether a social worker will choose to employ discretion within a discretionary space, one must also understand the specific factors influencing their willingness at that moment in time; something that the social workers considered might be difficult to achieve:

Really, I can say that I am generally [willing] to use discretion here, and generally not willing there... but there are so many factors that can influence whether I decide to use discretion, that I can't be certain of my position until I'm actually in the scenario... I think that as a social worker, you can never truly say that I will defiantly use discretion in that context... only that it is likely or unlikely... (SW8, SSI).

Adopting these terms to conclude the chapter: it is right to say that other influencing factors notwithstanding, the social workers within this study were more likely to choose to employ discretion within a de jure and entrepreneurial discretionary space, but less likely within a de facto discretionary space.

Within these first two result chapters, I have sought to address the research questions: ‘*Where do social workers encounter discretionary space?*’ and, ‘*When do social workers choose discretion?*’. Within the next chapter I seek to move beyond notions of *when* and *where* to further elucidate *why* the social workers discretionary space and willingness within that space manifested as it

did. In doing so, I will seek to answer the research question: '*How are systemic factors impacting on social worker discretion?*'.

CHAPTER 6 – HOW ARE SYSTEMIC FACTORS IMPACTING ON SOCIAL WORKER DISCRETION?

6.0 Introduction

This chapter will elucidate the social mechanisms – or causal processes and structures – that I understood to be underpinning the social workers' discretionary space and choice. In this sense, it seeks to answer the research question: *'How are systemic factors impacting on social worker discretion?'*

The chapter is organised under three headings:

- Too much to do – Increasing demand and decreasing resources;
- Ofsted Anxiety Disorder – The spectre of external inspection; and
- Fear of being blamed – The influence of media, politician and inter-professional finger pointing.

Each of these topics will be considered in turn.

6.1 Too much to do – Increasing demand and decreasing resources

A reoccurring theme in the social workers' accounts was that an unwillingness to employ discretion could be cultivated by an inadequate or unsatisfactory knowledge of the child and/or its circumstances (see Section 5.2.1). They identified the inability to spend satisfactory time with children as a major obstacle to obtaining this knowledge, reporting that the practice environment was one which frequently prohibited them from spending time with the child. Indeed, the social workers in this study estimated that they spent less than 15% of their working week

with children (which is less than general estimates of 20-25% provided elsewhere – for example, Garrett, 2003; Holmes et al., 2009; Baginsky et al., 2010; Holmes and McDermid, 2013; White et al., 2010).

The social workers identified two contributing factors to this. The first – discussed in detail in the following section – was an organisational emphasis on completing paperwork and of evidencing compliance with local processes and timescales in preparation for external inspection. The second, was that over a period of time, an increasing demand had been placed on the CPT, leaving the social workers feeling ‘overstretched’. It is this latter notion, which is the focus of this section.

6.1.1 Evidence of increasing demand

The social workers considered that the size of their allocated caseload (i.e. how many cases were assigned to them) served as an indicator of the ‘demand’ being placed on them as practitioners. Indeed, there was a general sentiment that, ‘in recent times’, caseloads had become ‘too high’ (SW8, SSI), leaving the social workers with a sense of being ‘overstretched’ (SW4, Q) or else ‘spread too thinly’ (SW11, Q):

The biggest problem I think is the size of caseloads on this team... they have been rising steadily for years... we are now spread so thinly that, outside of the minimum statutory tasks, we just don’t have enough time to spend with children (SW1, FG).

The Department for Education (2017) estimates that in England in 2016, the average statutory children’s social worker caseload was 16 cases. In providing this estimate, the DfE fails to define what a ‘case’ constitutes (for example, a single child

as opposed to a group of children belonging to the same family). However, the figure is nevertheless noteworthy, as it contrasts with the average number of cases (defined as the number of children) held by the social workers of the CPT during this time⁷.

Indeed, the data shows that whilst in May 2010 the average number of cases allocated to the CPT social worker was 22, by May 2016 (the point of ceasing data collection) the figure had risen to 34 – which is despite a 30% increase in the number of social workers employed on the CPT during the same time period. (Figures obtained from the CSD Finance Team show that the CSD increased its spending on social work – including child protection – by 567% from 2008-2009 [£0.96m] to 2015-2016 [£4.5m] whilst making substantial savings elsewhere – see below.)

Of course, there is a debate to be had about whether 34 cases is too much for a single social worker to effectively manage (it is noteworthy that the 2009 ‘Laming Review’, commissioned after the death of Peter Connelly, recommended that those working in child protection should have no more than 13 cases allocated to them), but this is not my focus here. Instead, it is to illustrate the level of work that the CPT social workers were undertaking during the course of this research, and further, to

⁷ I note here that focussing on case number says nothing of the complexity of cases held. However, the social workers who participated within this study, explicitly cited the number of cases as a measure of the ‘demand’ placed upon them. Thus, my rationale in citing number, as opposed to complexity of case here, is in acknowledgment of that emphasis.

highlight the increase in the number of families requiring a service from them, over a relatively short period of time.

Indeed, supporting the social workers' assertion that the demand for their services had been increasing, I found that despite only a nominal rise in the local child population between 2008 and 2016, the CPT had encountered:

- a 38% increase in child protection referrals;
- a 52% increase in the number of local children categorised as 'in need';
- a 72% increase in children subject to a child protection plan; and
- a 41% increase in the number of childcare proceedings.

Whilst similar trends have been reported nationally (see for example, Department for Education, 2016; Children and Family Court Advisory and Support Service, 2016; Bywaters et al., 2016; 2018; Bilson and Hunter Munro, 2019), this data specifically supports the notion that the social workers of this study were working with more children and, by implication, that they had less time available for each. For the remainder of this section I will consider two ideas proffered by the social workers as an explanation for this, beginning with the suggestion that the increase in demand was, in part, a consequence of a continuing 'Baby P effect'.

6.1.2 A continuing 'Baby P effect'

It has been argued that the 'politics of outrage' which accompanied the death of Peter Connelly (see Section 1.3), led childcare professionals to become both hypersensitised and hypervigilant to the prospect that other children were not

suffering in the same way that Peter had (see Parton, 2014; Jones, 2014; Warner, 2015).

This hypersensitivity and hypervigilance was seen in and epitomised by that which Shoesmith (2016: 18) refers to as the 'Baby P effect' – understood as a national upsurge in child protection referrals, plans and care proceedings immediately after the public awakening to Peter's case (see also, Hall and Guy, 2010; Brooks et al., 2012; and Cooper, 2013). However, it was the belief of many of the participants in this study, that the 'Baby P effect' had not diminished in the years since Peter's death, but was continuing to impact upon the demands being experienced by them as child protection practitioners:

I think the Baby P effect is ongoing... I can't count the number of times that I have had a discussion with another professional about the motivation for a referral, or for increasing our level of intervention, and they have said 'well we don't want another Baby P' (SW6, SSI).

For me, the demand can continue to be tied back to Peter Connelly, and everyone's efforts to ensure that a case like that does not happen again (M4, FG).

Succinctly put, the social workers believed that what had manifested since Peter's death was a 'more cautious approach to child protection' (SW2, SSI) – one which had become embedded within, and extended to, 'all parts of the system' (SW11, Q). This included partner agencies (for example, health, education and police), who, the participants felt, had adopted lower thresholds for intervention – 'leading directly to more referrals and recommendations for interventions such as child protection plans and [care proceedings]' (SW9, Q) (see also, Jones, 2014).

It also included senior managers and IROs, who, the participants argued, had become more 'defensive' in their decision-making – 'safer to keep a child on a plan or put the matter before the Court' (SW7, SSI). However, the social workers also accepted that they too had played a part:

I admit myself, when I think about closing a case, I often go back to Baby P, and find a reason to keep [the case] open for a bit longer... just to make sure that the extra niggle or worry doesn't come to anything... it's less risky (SW5, FG).

Linked to these accounts of it being 'safer' or 'less risky' to continue to work with, rather than close a case, several of the participants theorised that what was underpinning this 'more cautious approach', was a 'fear', not only for a child who might be the recipient of abuse, but for the social worker, manager or other professional who might miss, or fail to act, on the signs of abuse:

I think all of us – all professionals – are aware that if a child under your care suffered in the way that Peter did, there would rightly be a lot of questions to answer... and potentially some very negative consequences for you as an individual... it's definitely a worry that you always have (SW4, SSI).

As a social worker, you are naturally anxious that you might miss something and that could result in something bad for the child, and even for you... we saw it with Baby P (SW5, SSI).

In section 6.3 I reflect on the participants' assertion that the legacy of reductionist media and political portrayal (including in the context of the Connelly case) and a continued culture of inter-agency 'finger-pointing' was, at least in part, driving this fear. However, the pertinent point here is that the social workers considered that the fear for oneself as well as the child was an important feature of the 'Baby P

effect’ and was continuing to directly impact upon the demand being placed on their services:

For me the legacy of Baby P has been the increased fear that each professional now has for themselves [sic]... a fear that it could be you and your practice which is under the spotlight... being discussed in the newspapers, on the radio or in Parliament... it’s definitely linked to the amount of work that we see (SW15, Q).

Further, there was a feeling that the longevity of the ‘Baby P effect’ meant that Peter’s case (and the fallout from it) had provided a more long-lasting ‘impact’ on the child protection system than the Munro Review:

If you were to ask me now which has had the most impact on the system, and which is still affecting our daily work... I would say Baby P... we rarely hear, or think about Munro anymore, but we continue to see the impact of Baby P every day (SW4, Q).

This last account is a point of discussion in Chapter 7, where it is framed as a continued challenge to the realisation of Munro’s image for a more ‘child-centred’ system. However, the point of emphasis here is that the participants of this study considered that the ‘Baby P effect’ was continuing to negatively impact on the high demand for child protection services, their sense of being ‘overstretched’, and thus their willingness, in particular contexts, to employ discretion.

6.1.3 The cost of austerity

For some of the participants of this study, the continued ‘Baby P effect’ had produced, what was in essence, an ‘artificial increase in demand’ for child protection services (SW15, Q) – brought on by the ‘more cautious approach’ to the task of protecting children (see Section 6.1.2). However, they did not think that the

increase in demand was a result of the 'Baby P effect' alone, and also pointed to the impact of 'years of government cuts' (SW8, Q) and, what they saw as, 'the cost of austerity' (SW16, Q).

Whilst 'austerity' remains a 'slippery' concept, one which is 'hard to define' (Mort, 2017: 312), The British Association of Social Workers consider it

[an] economic and social policy... result[ing] in reduced public and welfare spending, lower taxes, a smaller state... (2017: 1).

Similar definitions position 'austerity' as an economic theory (or a 'flawed economic theory' according to the International Federation of Social Workers, 2016: 1 – see also UN Special Rapporteur on extreme poverty and human rights, 2018; 2019) leading to the notion that economic difficulties justify a reduction in the citizen's standard of living (see Blyth, 2013 for elaboration and further discussion).

However in respect to the UK, Jones (2018a; 2018b) argues that austerity is better conceived as a politically-chosen strategy fostered by the Conservative Party, and underpinned by their desire to create a smaller welfare state. This point is supported by the UN Special Rapporteur on extreme poverty and human rights (2019), who, following an eleven-day investigatory visit to the UK, observed:

The bottom line is that... [despite] a booming economy, high employment and a budget surplus [the UK Government] have not reversed austerity, a policy pursued more as an ideological than an economic agenda (p. 1).

This adds weight to Jones' (2018a; 2018b) assertion that, irrespective of arguments to the contrary, austerity in the UK is not the 'necessary' and 'inevitable' step to

‘economic recovery’ (Osborne, 2009: 1) that the Conservatives have consistently purported it to be (see also Osborne, 2010).

In this study, the participants theorised that as public spending had continued to be reduced (including welfare benefits) under the mantle of ‘austerity’, the services that had sustained families, had increasingly been closed, which, in the social workers’ opinion, had served to ‘force more families into the child protection arena’ (SW5, FG) (see also The British Association of Social Workers, 2017; Bywaters et al., 2018).

There was certainly evidence that the number of the services offered by Marketon’s CSD had been reduced over a relatively short period of time. For example, between 2010 and 2016 the CSD had closed its ‘Family Support Team’ (whose remit had been ‘to support children at risk of entering the [public] care system’); its Youth Service; and its provision for asylum-seeking families. It had also reduced the number of local children’s centres by 75%; its Youth Offending Team by 80%; and had temporarily disbanded its Children with Disabilities Team (this service was reintroduced – albeit at 40% its previous size – after a sustained protest by local families and the public critique of the decision by a local MP). What is more, under the auspices of a new ‘Corporate Spending Strategy’, the CSD no longer commissioned support services from local private or charitable providers – including for issues such as homelessness, substance misuse and domestic violence.

These changes were understood to be a consequence of the local authority’s efforts to save £65m over a six-year period (from 2010 to 2016) as it sought to adjust for a

53% reduction in funding received from the national government. As one manager explained, such services were seen as 'luxuries' and 'non-essential' in the context of needing to make 'immediate savings' and 'when compared to other areas of essential provision... including child protection' (M1, FG).

Whilst I considered that such sentiments were unlikely to be shared by the families that used these services, the local data did estimate that by closing or 'downsizing' services in this way, it had saved the CSD close to £25m between 2010 and 2016 – constituting 83% of its 2009-2010 total budget (excluding school spending).

However, the social workers felt that these changes were short-sighted, and the savings achieved only 'a short-term fix' (SW14, Q), effectively serving to 'move the problem elsewhere' (SW4, FG):

You are just shifting the problem, because whereas you might save some money now, more families will inevitably end up needing more from you in the future, as their difficulties become more acute... for example, it is a lot less costly to support a child within the family home, than it is to fund an alternative placement for him due to familial breakdown (SW1, Q).

Intriguingly in the context of this last account, Marketon's 'looked after child' (LAC) population had indeed increased by almost 50% between 2010 (with an average monthly number of 209 LAC) and 2016 (an average monthly number of 307 LAC) – which had contributed to a near 300% increase in costs incurred for private foster care and residential provision, as the local authority struggled to recruit enough local foster carers to meet the demand.

Whilst these figures might be partly attributed to the 'Baby P effect' (with 'cautious' professionals referring more children into the system and finding ways to keep them there), the social workers also argued that they were indicative of the

increasing levels of deprivation and need brought on by the continued cost of austerity... [as seen] in the closure of [local] services... meaning more families are being tipped over the edge (SW16, Q).

As one social worker argued 'the formula [was] a simple one':

Local authorities are being squeezed, they are responding by making savings and closing important services... and families are suffering as a result (SW2, SSI).

The statistical data did highlight that there had been an increase of instances of poverty (with an 18% increase in applications for free school meals; and a 112% increase in use of the local foodbank); unemployment (a 13% increase in applications for the 'Job Seekers Allowance' benefit); and homelessness (with the number of recorded 'rough sleepers' up 240%) amongst the local Marketon population between 2010 and 2016. Further, child protection records highlighted that there had been a 181% increase in children made subject to a child protection plan for instances of 'neglect' or 'emotional abuse' during this time, where it was also recorded that 'alcohol/substance misuse'; 'domestic violence' or 'familial breakdown' (including divorce, separation or imprisonment) had been a contributing factor.

In these terms, the data did suggest increasing instances of difficulties amongst the local population, and could theoretically, help to explain the increase in demand

being experienced by the CPT (see Section 6.1.1) (others – notably Munby, 2016 – would also attest that the increase could be explained by reducing thresholds or professionals becoming better at identifying need in the post ‘Baby P’ era). Whilst it is beyond the remit of this study to ascribe this to the national Government’s programme of austerity, there is certainly now an extensive literature linking austerity with many of these issues (see for example, Main, 2014; UK Children’s Commissioners, 2015; Pemberton et al., 2016; Garthwaite, 2016; Loopstra et al., 2015; 2016; International Federation of Social Workers, 2016; Jones, 2018a; 2018b; British Association of Social Workers, 2017; Department for Communities and Local Government, 2017; Bywaters et al., 2018; Association of Directors of Children’s Services, 2018; UN Special Rapporteur on extreme poverty and human rights, 2018; 2019).

The pertinent point however, is that the participants of this study believed that there was a direct link between the prolonged period of government cuts and the high level of demand being placed upon them as child protection practitioners. Further, that the reduction to other services was increasing the number of families that needed the support of the CPT, leading to a sense of being ‘overstretched’ or else ‘spread too thinly’ – thus, limiting the time social workers felt they had to spend with children, and by extension, their willingness, in particular contexts, to employ their discretion.

6.2 Ofsted Anxiety Disorder – The spectre of external inspection

The Office for Standards in Education, Children's Services and Skills (Ofsted)

mandate includes the right to:

Inspect... [and] regulate children's social care services... making sure they're suitable for children and potentially vulnerable young people... help providers that are not yet of good standard to improve... monitor their progress... and publish reports of findings... (Ofsted, 2016).

Marketon had last received an inspection of its CPT in April 2012, at which point the inspection team had concluded that the CSD had achieved only 'minimum requirements' in its 'overall [child protection] effectiveness', and that the services offered to 'children in need of protection' were, at best, 'adequate'.

This explicitly positioned the CSD in the third tier of Ofsted's inspection judgments (see Appendix 18). Whilst, it meant that the CSD had effectively 'passed' the inspection, at a local level, this conclusion and the report itself, were perceived as being 'extremely negative and critical' of Marketon's child protection arrangements (M4, FG). It was in this context that in the aftermath of the 2012 inspection, the CSD and CPT underwent a period of reorganisation, in which several senior managers – including the then ADCS – resigned from their post, and there was a high turnover of frontline social work staff (see Section 3.3.4).

Perhaps as a consequence of this, the spectre of future inspection loomed over the CPT for the entirety of the data collection, where, throughout their testimonies, the social workers used the term 'Ofsted Anxiety Disorder' (SW5, FG) to describe the degree of apprehension that they sensed had permeated the CSD in respect to

external inspection – an apprehension which they believed, was creating obstacles to their use of discretion.

6.2.1 The inspectors will soon be here – Ofsted anxiety and the focus on inspection preparation

One of the features of ‘Ofsted anxiety’ was the focus placed, within the CSD, on preparation for the next inspection:

I think the constant worry about being inspected is driving our work... also the need to be better prepared for the next inspection (M2, FG).

Underlying everything is that we are ready when the inspectors return (SW7, Q).

This was apparent in the perpetual stream of communications from senior management that I observed during my time with the CPT. The purpose of these was ostensibly to ‘update’ the CPT staff about their ‘performance’ and how this might be judged in the context of future inspection, but they frequently concluded with explicit assertions that ‘it is essential that we are Ofsted-ready’ and ‘prepared for when the inspectors arrive’.

Whilst these communications often took the form of emails or ‘departmental memos’, one of the other forums within which they would regularly occur was at the monthly CPT meeting, where it was not unusual to find a senior manager in attendance, talking to the team about ‘performance’ in the context of inspection.

I noted that most often it was the ADCS herself that would attend this meeting, and that she would provide a PowerPoint presentation (incorporating several graphs

and tables) identifying ‘areas for concern’ in relation to the CPT’s ‘performance’ relative to the managerially endorsed ‘standards of good practice’ (see Appendix 16) – for example, where the CPT social workers were purportedly not recording the ‘required information’; were not adhering to ‘necessary procedures’; or were missing ‘important timescales’ (Messages from ADCS – Team Meeting, June 2015).

Indeed, the ADCS and other senior managers were quite open about their position that ‘good performance’ in the context of inspection preparation should be understood as ‘evidence of compliance’ with departmental processes and timescales and the ‘maintenance of a detailed written record’ of the social worker’s work (see Section 6.2.2 below for a broader discussion of this).

Also noteworthy within the senior managers’ communications with the CPT, was a tendency to predict when the next inspection would take place: ‘The inspectors will soon be here’ they would say – regularly asserting that ‘an inspection [was] likely within the next three months’. However, significantly, four years passed between the 2012 inspection and when the inspectors next returned.

Although some social workers thought that the senior managers propensity to send reminders about ‘upcoming inspection’ and to predict when the next inspection might take place, was just a manifestation of their own inspection anxiety, others conceived it as an intentional strategy:

I’m suspicious [senior management] do it on purpose... they know how worried the staff are about inspection and the consequences of that... so they send these emails and come to meetings where they predict that Ofsted will be here in the next few weeks... and

the result is that staff rush away to make sure that all their paperwork is up-to-date (SW2, SSI).

Whilst the design of the study prohibited me from questioning senior managers about the motivations for their respective 'inspection' communications, other social workers agreed that this behaviour was a trigger for their own anxiety:

It just makes me really nervous; you know we are always hearing that the inspectors will be here soon, and then there is this push to get everything up-to-date in case they do actually arrive (SW4, Q).

Last year [manager] told me that [senior manager] had guaranteed that Ofsted would be here the following Tuesday. This definitely made her anxious which we knew because she asked us to get our files in order as a matter of urgency. I must admit seeing her [anxiety] gave me the same feeling, so I worked at home all weekend, and cancelled my annual leave on the Monday. And guess what? It was all for nothing – the inspectors still haven't arrived (SW7, SSI).

I think inspection anxiety is contagious... you see it when new staff join the team... a few weeks of being bombarded with emails about performance and when the inspectors will be here, and they are like 'Oh God, Ofsted'... it becomes the focus of your work (SW6, FG).

The notion within these accounts that inspection anxiety could be passed along the management hierarchy to the social workers, and of inspection preparation becoming 'the focus' of the child protection social workers' work, were important in the context of the social workers' use of discretion. As the following extract identifies, on occasions 'discretion in the best interests of the child' was considered a secondary concern to ensuring that social workers were 'Ofsted compliant':

I know that you want to hear that we are using discretion in the best interests of the child, but I don't think that is our main focus... I mean, honestly, I am more concerned with making sure that I am Ofsted compliant than anything else (SW5, FG).

For the social worker in this account, a desire to be 'Ofsted compliant' – or more pertinently, 'compliant' with what senior managers said Ofsted wanted to see – was conceived as directly impacting upon her use of discretion. However, I also identified subtle ways in which the anxiety of inspection was indirectly impacting upon the social workers' discretionary space and choice, perhaps best understood in the context of the 'bureaucratic burden' of inspection anxiety.

6.2.2 If it's not on the system then it hasn't been done – The bureaucratic burden of inspection anxiety

In her review of the English child protection system, Eileen Munro (2011b) cited the 'bureaucratic burden' of 'inspection preparation' (p. 46) as a barrier to social worker discretion (see Section 1.4.2). I believe that this 'burden' was also evident within this study, and had seemingly been cultivated by the notion – perpetuated by senior management in their communications with the CPT (see Section 6.2.1) – that a 'good' inspection report could only be obtained if the CSD could evidence detailed written records of the work undertaken, and that social workers were following procedures and meeting timescales.

Whether this was an accurate belief is somewhat beside the point; more pertinent to my study is that it had led to an emphasis within the CSD on completing 'paperwork' and evidencing 'compliance':

Everywhere you look there are these reminders that we need to keep up to date with our paperwork and complete our tasks 'on time' if we are going to be ready for inspection... (SW2, FG).

Just look around the office... you'll see the importance of the paper trail... there are reminders everywhere... and our files are constantly being audited so there is no avoiding it (SW7, SSI).

I noted in my observations of the CPT how their office walls were adorned with a number of charts and tables detailing the required timescales and processes for completing tasks, as well as several posters which posed questions like *'Have you recorded your visit?', 'Are your [meeting] minutes up to date?', 'Would your file pass the inspection test?'* (Notes on office décor – CPT office, September 2015).

The largest of these (in 72-point font and stretching the length of the office wall) declared: *'If it's not on the system, then it hasn't been done!'* – which I understood to mean

that if you haven't made a written record of your work on the [ICS], then you might as well not have done the work at all (SW2, SSI).

This statement and its status as a favoured expression of the ADCS (but which was also regularly cited by other senior and non-senior managers) highlights the high importance placed on the ICS file as a measure of social worker 'performance' within the CSD:

I think that the social workers understand that management often view their work via the ICS file, and make decisions based on what they find there (M3, FG).

The specific variant of ICS procured by Marketon had a feature that would alert managers whenever an embedded timescale had not been achieved or a document had been left 'incomplete' (these would appear as flashing red notifications). This was important as it enabled management to 'identify where work remain[ed]

outstanding' (i.e. not completed), and was often used as justification for returning an item of work – via the ICS workstream (see Section 4.2.3) – to the social worker for 'remedial action' before it could be 'signed-off' (M1, FG).

Further, under the guise of carrying out 'quality assurance' of the social worker's work, a subgroup of experienced managers within the CSD had been tasked with undertaking periodic audits of the ICS file – ensuring that individual cases were 'Ofsted-compliant' (see Section 6.2.1). Invariably, the focus of this group was on those files which were regularly identified by ICS alerts as needing 'remedial action' – 'because', as one of the group told me, 'those are the cases we would worry about most during an inspection' (M3, FG).

In these terms, the social workers conceived the ICS as more than a catalogue of the work undertaken with a child and it's family, but as a 'tool for audit and surveillance' (SW3, FG) used by managers to 'identify those [social workers] who [were] not compliant' with the expectations pertaining to 'inspection-readiness' (M1, FG), and as justification for their visits to the team, and emails citing a need to 'improve... before inspection'.

It was also understood within the team that any social worker who was regularly identified as having an 'incomplete [ICS] file', risked being placed on a remedial 'action-plan', in which they would be required to evidence a level of 'improvement' in their ICS recordings (for example, ensuring that all work was recorded on the system within a specific time period, and that there was an evidence of timescales met and procedures followed); or else be liable to the instigation of capability

procedures (see Section 4.2.4) – which would be recorded on the individual's personal work file, and (if not successfully negotiated) could result in the termination of their contract of employment.

It was on this basis, that many of the social workers experienced a 'compulsion' to ensure that their paperwork was completed expediently and that their ICS files were 'up-to-date' (SW6, Q) (notions of 'comply or die' were applicable here). However, they explained that as a consequence, the largest portion of their time was often spent on the written account of their work (the social workers estimated that at least 70% of their work week was dedicated to 'paperwork') as opposed to time spent with the child – which they felt, was impacting upon their readiness to employ discretion:

The job has become one where we now spend more time evidencing what we have done than actually doing it... that level of paperwork does reduce what time you have to be with the child... meaning that sometimes we just don't know them in the way that we would like... to be comfortable enough to use discretion (SW4, FG).

Ironically, with all the emphasis on inspection preparation, I think that the child suffers... because we are spending most of our time on the paperwork side, and less time with the child, actually getting to know them and their needs... (SW8, SSI).

In addition, I understood that the onus placed on achieving 'compliance' had limited the de jure discretionary space available to the social workers in areas such as departmental timescales and the content of their ICS recordings (see Sections 4.2.3 and 4.2.4); furthermore, what de facto space remained available to the social

worker, was construed as 'risky', as to exercise discretion here was to do so without manager 'endorsement' (see Section 5.1):

It's too risky... if an inspector were to question my use of discretion [in a de facto space] then I wouldn't be able to say that I did so with the support of my manager... (SW4, SSI).

It is much safer to just write everything down, fill in every box and [at least attempt] to ensure that your paperwork is complete (SW7, SSI).

It is in these terms that I understood that the anxiety caused by the spectre of inspection – one which had led to a focus within the CSD on inspection preparation and of evidencing compliance with what senior managers construed as measures of 'good performance' – was impacting upon the CPT social workers' use of discretion.

6.3 Fear of being blamed – The influence of media, politician and inter-professional finger pointing

In the previous chapter (Section 5.1) I noted how the social worker's tendency to be willing to employ discretion in the de jure and entrepreneurial space, but unwilling in the de facto space, was aligned to the notion that by 'endorsing' a discretionary space, a manager would be willing to share some responsibility for the decision-making/action-taking that took place there.

The social workers outlined that without this endorsement, they felt exposed to potential blame for any negative consequences that could be linked (rightly or wrongly) to their discretionary behaviour – thus explaining the degree of 'personal risk' associated with the de facto space.

Indeed, a 'fear of being blamed' (SW3, FG) was an ever present throughout the social workers' accounts, and was also associated with specific exceptions to the general tendencies, where social workers would for example, choose not to employ discretion within a specific de jure or entrepreneurial space.

It is on this basis that this section seeks to elucidate the factors underpinning this fear. There are two strands to the discussion: first, that the social workers believed that a 'reductionist' media and political portrayal of child protection work had cultivated unrealistic expectations about what they as social workers could achieve; the second, that within the inter-professional and inter-agency child protection forum, there was an ingrained culture of finger pointing, in which social workers were often identified as the most suitable 'fall-guy'.

6.3.1 I don't want my face on the front page of the Sun – A legacy of reductionist media and political coverage

There was a strong feeling amongst the social workers of this study that a continued obstacle in their practice was what they saw as 'unrealistic expectations' (SW13, Q) placed on them as child protection professionals, particularly in respect to their ability to protect children from harm and to intervene in a family's life:

There is still this narrative that we encounter, which is that as child protection social workers we can stop all harm being done to children... sometimes it doesn't matter if the child is an open case, people hear 'child protection' and say well that's your job isn't it, protecting children... but the children weren't protected, so you failed... (SW9. Q).

I've had extended family members approach me on a number of occasions after some particularly upsetting disclosures come to light and say 'why didn't you get those kids out sooner?' ... I try to

explain that it is not as simple as that and there are systems in place... but they don't understand... (SW2, SSI).

The social workers considered that in part, these 'unrealistic expectations' could be explained by, what they considered to be, a 'legacy' of 'reductionist' media and political coverage (SW6, Q) of their profession (see also, Ayre, 2001; Munro, 2011a; Stafford et al., 2012; Warner, 2013; 2015):

I think that it can be traced back to the history of newspapers and politicians saying 'why didn't these social workers stop this child being harmed, that is what they are paid to do'... they encourage this idea that all children can be protected and when they are not they label us as 'failures'... but they underplay the complexity of the situations that we are dealing with (SW4, Q).

The papers only tell half of the story... they sensationalise and leave out the important facts about why decisions were being made as they are... (SW8, Q).

Further, the participants felt that both the media and politicians were continuing to champion the notion that social workers should not only be appropriately 'held to account', but more so, inappropriately 'blamed' and even 'punished' when a child had been harmed:

The public read it in their newspapers and see it on their televisions... [newspaper] editors and politicians saying these social workers are failing our children... we need to punish them (M1, FG).

Look at this idea being floated by [the Conservative Government]... that social workers should be sent to prison when a child on their caseload has been abused... it's scary, honestly (SW11, Q).

Whilst the participants accepted that criticism of some social workers was reasonable and to be expected in particular contexts, they also felt that specific messages which had emerged from the media and politicians – for example, that

social workers could be imprisoned⁸ – were cultivating the idea that many social workers were incompetent and deserved to be the subject of scorn and ridicule:

I think the damage is that the public are being fed the idea that we are crap at our jobs and when a child dies it is because we are lazy or stupid... (SW4, SSI).

However, the social workers felt that this was unfair, as such sentiments overlooked the complexity and uncertainty involved in their work. They provided several examples (often referring to Peter Connelly's case) in which they perceived that the media or politicians (or both) had 'unreasonably', or at least 'over-simplistically', blamed social workers in the face of a tragedy or perceived failure:

For example, the coverage of Peter Connelly in the Sun... we know now that they only told half of the story... the half that would sell papers... as it fitted their narrative of failing social workers (SW8, Q).

The social workers also theorised that not only did this have the effect of increasing the unrealistic expectations on them by the wider public, but it exacerbated the fear that they (and other child protection professionals) experienced, as they observed how colleagues within the profession had been publicly 'named' (SW4, Q) 'blamed' (SW5, SSI) and /or 'shamed' (SW15, Q) (see also Ayre, 2001; Warner, 2015):

I previously worked with a social worker who had been identified in the media after a child was injured. Her position was that she

⁸ A notion stemming from David Cameron's (2015) proposition at the time, that social workers had a 'duty to act' and protect children from abuse, or else face being charged with 'wilful neglect' and the prospect of up to 5 years in prison. Whilst the idea was dismissed by the Department for Education in July 2016, at the time of conducting this study, the prospect of imprisonment remained a real, and 'frightening' threat to the social workers concerned.

had only picked up the case after the injury was sustained, but the way it was reported afterwards was that she had let down the child, and in some way, been culpable for the harm suffered... she was devastated (SW2, SSI).

I was working in [another local authority] when [a politician] wrote... his book about child sexual exploitation in the city... his criticism of the professionals involved ruined a lot of lives... and there was no opportunity to respond to his accusations (SW15, Q).

The social workers thought that another consequence of the approach taken by the media and politicians in respect to child protection, was that it provided members of the public with a sense of justification for abusing social workers:

It's like members of the public read about social workers in the newspaper and realise that it is ok to attack them, so they replicate that behaviour and... feel vindicated doing so (SW15, Q).

Indeed, it was in this context that the social workers relayed a number of upsetting personal accounts:

My own children were targeted by internet trolls last year when I was identified as a social worker on a Facebook thread... the author said 'look at this one, her lot killed Baby P and she's allowed to keep her kids'... someone was able to identify my daughter's social media account and send her abusive messages... (SW6, SSI).

I've had a really nasty experience where I was shopping with my children and a former service user spotted me... he approached me in the supermarket with about four other people and started shouting about how he keeps reading how social workers are letting kids be abused... One of his companions spat in my face... it really upset my children and I was shaking for days afterwards... (SW7, SSI).

The consequence was that many of the social workers in this study associated being publicly named either in the press or by a politician as an outcome that should be avoided – 'almost at any cost' (SW5, SSI). 'It makes you liable to public attack' (SW2,

FG) they told me (repeatedly citing the example of Maria Ward – one of Peter Connelly’s social workers – in making this point).

This was understood to impact upon their use of discretion within particular contexts:

That is why it is so important that a manager has approved the discretionary space... because then you know that they will support your decision and you won’t be alone in any criticism that might be directed at you afterwards (SW3, SSI).

Sometimes it doesn’t matter what type of [discretionary space] it is... sometimes it’s a matter of thinking ‘I don’t want my face on the front page of the Sun’ and so I just don’t want to use my discretion (SW5, SSI).

Further, the social workers suggested that what they sensed to be a tendency by politicians and the media to drive both the ‘unrealistic expectations’ and the ‘fear’ that existed, not just within child protection professionals, but also the wider public (namely that children were being harmed and social workers were ‘failing’ in their protection of them), was not merely a direct contributor to their reluctance to employ discretion in particular contexts, but indirectly contributed to a number of the other mechanisms that were impacting upon their use of discretion:

I also think that the tendency of the media and politicians to publicly shame ‘failing’ Children’s Services Departments increases the anxiety that senior managers have about an Ofsted inspection, which in turn leads to more focus and emphasis on [inspection] preparation (SW16, Q).

I think that the way the media and politicians responded to Baby P, really put a fear in the public and other professionals... meaning that they now refer in any case that they are even slightly concerned about... increasing the demand that we experience here at the front line (SW2, FG).

6.3.2 It's like they need a fall-guy – Continued experiences of inter-agency finger pointing

In the social workers' minds, the wider ('unrealistic') expectations for what could be achieved in protecting children from harm, also extended to the other professionals and agencies working within the child protection system:

I know that it is not just social workers... other agencies can be subject to the same standards (SW1, SSI).

Yes, other professionals can get blamed too... not as often as social workers, but it does happen (SW3, FG).

It was in this context that the participants explained that which they considered to be an 'ingrained culture' (SW2, SSI) within the system, of 'inter-agency finger pointing' (SW1, Q):

It's like the idea that we can stop children being harmed has meant that when a child is injured, everyone rushes to blame each other for it (SW2, SSI).

I've seen it a few times, a child is hurt and then it becomes dog-eat-dog... each agency is looking to blame the next for what has happened (M4, FG).

I understood that underlying this notion of child protection practitioners being ready to blame one another, was, a perhaps unsurprisingly desire to avoid being identified as culpable in a child's suffering – with the social workers accepting that 'we are all afraid of seeing our names in newspaper print' (SW7, Q). Nevertheless, the social workers felt that it was they who were most liable to criticism and/or blame from their inter-agency colleagues:

It's just part of the culture... the social worker is the one that other agencies look to when something goes wrong (SW11, Q).

Well I think that any professional involved in a case risks becoming the subject for criticism from other agencies, but when something bad has happened it's usually the social worker that is targeted... it's like they need a fall-guy and the social worker fits the bill (SW2, SSI).

Whilst I considered that the social workers' role as 'lead practitioner' (see HM Government, 2018: 31) perhaps cultivated the notion that they held most responsibility for the protection of the child amongst their statutory partners (Munro, 2011b), the design of the study prohibited me from exploring this with representatives from other agencies. I was however able to document (within my fieldnotes) particular instances in which a group of other professionals, seemingly 'en masse', openly challenged a social worker about their practice, and further sought to blame them for some negative occurrence.

One such occasion took place during a child protection conference:

I attended a child protection conference today in support of [social worker]. The meeting had been earmarked as a potentially difficult one, given a perceived level of disharmony amongst some of our inter-agency colleagues. I was shocked by the level of hostility on display and some of the language used in relation to [social worker]... with one representative shouting and aggressively pointing her finger... but most concerning was that it took place as a collective with four professionals (across two agencies) seemingly seeking to blame [social worker] for an injury sustained to the child whilst in the care of his mother... (Observation of Child Protection Conference – Conference offices, November, 2015).

Of course, it is appropriate (and sometimes necessary) for child protection professionals from different agencies to challenge one-another in the best interests of the child (Munro, 2002). What troubled me about this encounter was the apparent animosity and distain with which this challenge took place; and more so,

the seeming eagerness of the collective to blame the social worker for harm suffered by a child whilst in the presence of the very parent who had ostensibly been in charge of him when the injury was sustained.

This I considered cultivated the wrong impression (namely that a social worker who was not present was more blameworthy than the parent who was apparently present and charged with caring for the child) and was perhaps indicative of those 'unrealistic expectations' that the social workers had complained about.

I did not have the opportunity to interview the social worker involved in this account after the event, noting only in my field notes her experience that 'they were angry and it's normal they wanted someone to blame... I guess in this instance it had to be me' (Discussion with Social Worker – Conference offices corridor, November 2015). However, I also observed another encounter which was attended by one of the interviewees of this study. This multi-agency forum was labelled as a 'learning conference' and took place after a teenage boy had allegedly sexually assaulted one of his peers – there was strong evidence in support of this allegation, but the case did not go to trial, and thus the allegation was not proven.

My attendance at the conference was again in a supportive capacity, and again I noted the readiness of the collective to single out the social worker as 'blameworthy' (although this time the 'collective' comprised of four separate agencies). Their reasoning was that in her earlier assessment of the child, commissioned after he had admitted sexually assaulting a younger child, the social worker had nevertheless concluded that he was 'low risk of reoffending'.

The social worker chose to reflect on this experience in our interview together:

I mean you were there weren't you... you saw it... as soon as we walked in the room, you got the feeling that they wanted blood (SW1, SSI).

Whilst the social worker had, I believe a good rationale for why she concluded her earlier assessment as she did, this is not my focus here. Instead, it is the level of discomfort that she admitted experiencing when

confronted with a group of other professionals set on criticising me for failure to foresee another child might be harmed (SW1, SSI).

Further, it is to outline her assertion of the importance of a discretionary space being endorsed in such a context:

I said to them, listen I can only work with the information that I have at the time... that is why it is so important that in making that decision, I knew that my manager would back me up... like he said afterwards, 'I expect you to have to make hard decisions, and I trust you to do a good assessment... I will support your conclusion, whatever it may be'... without the knowledge that I would have his support, I honestly don't know how confident I would be in using discretion (SW1, SSI).

Indeed, this was a position shared by other social workers, who outlined that the 'personal risk' of not having a discretionary space endorsed by a manager, provided a sense of being more 'exposed' when they became the target for blame within an inter-agency forum:

That's the problem... because you cannot bank on your manager's support you feel much more exposed when other professionals, or even parents or family members, seek to criticise you for something that you did, or didn't do (SW1, Q).

This also helps to explain the tendency of some of the social workers not to be willing to employ discretion in those aforementioned de facto discretionary spaces:

It's because at those times, some other professionals sense that there may be questions asked about the work in a case, and they say 'look it's the social worker you need to talk to, not me'... and you find yourself alone trying to explain your actions... without the support of your manager or the other agencies involved... (SW9, Q).

Ultimately, I understood that contributing to the social workers' reluctance to employ discretion in particular contexts was this sense that they might become the target for blame by their inter-agency child protection colleagues. However, I also understood that this fear emanated from a belief that in being singled-out as a suitable 'fall-guy' from within the child protection system, it left a practitioner more liable to blame and the associated negative consequences from outside the system:

Family members sit there and listen to other professionals say 'well I think the social worker is at fault, and if they had done better, this child would never have been abused'... I mean, what are they supposed to do with that... I'm surprised there aren't more civil suits... (SW4, FG).

Can you imagine what would happen to you if a child was seriously harmed and the media got hold of a story that the other professionals in the case were blaming you for it... it doesn't bear thinking about (SW5, SSI).

6.4 Conclusion: A myriad of factors

Throughout this chapter I have sought to answer the research question 'How are systemic factors impacting on social worker discretion?' In so doing, I have drawn from the social workers' accounts to identify causal structures and processes related to: the 'Baby P effect'; the government policy of 'austerity' and the cuts that it has engendered in local service provision; the anxiety created by the possibility of

a negative external inspection report; a legacy of 'reductionistic' media and political coverage of child protection; and a culture of inter-agency finger pointing within the child protection system.

It is clear from this discussion that the social workers believed that a myriad of systemic factors were continuing to impact upon both their discretionary space and choice, and indeed apparent within the study were a series of continued obstacles to social worker discretion. In the next chapter I seek to build on these assertions as I discuss how these factors and their impact can be considered in the context of the wider literature, especially as it pertains to the Munro Review of Child Protection.

CHAPTER 7 – DISCUSSION

7.0 Introduction

The aim of this chapter is to discuss the research findings relative to the existing literature; identifying implications both for contemporary social work practice and future enquiry; and commenting specifically on how the results might be interpreted in the context of the Munro Review of Child Protection.

I begin with an analysis of the research findings in the broad sense, contrasting key messages from the wider social work literature with the results from two of my research questions - *'Where do social workers encounter discretionary space?'* and *'When do social workers choose discretion?'* Secondly, I consider, in the context of the child protection literature, the findings relating to the question *'How are systemic factors impacting on social worker discretion?'*

Finally, I take a more detailed approach and explore Munro's image of a 'child-centred' child protection system, and whether key features of this system were apparent in the findings of this study. I conclude the chapter with a discussion about the 'messiness' of social worker discretion and the suggestion that further reform may be required if child protection social workers are to more consistently employ their discretion in the interests of the individual child.

7.1 Where do social workers encounter discretionary space, and when will they choose discretion?

Key findings that emerged from my review of the wider social work literature (see Chapter 2) included:

- The tendency of authors to conflate different notions of discretion (for example, Lipsky, 1980; Munro, 2009);
- The inherency of the ‘continuation debate’ and for researchers to focus on discretionary space in the binary sense (for example, Howe, 1986; 1991; Munro, 2005);
- The idea that the level of freedom afforded is determined by the type of discretionary space available (Evans, 2010); and
- The assertion that, upon encountering a discretionary space, social workers are able to choose whether or not to employ discretion (for example, Evans, 2013; Ellis, 2014).

These informed a number of my aims for this study (see Section 3.1) and led to two specific research questions: ‘*Where do social workers encounter discretionary space?*’, and ‘*When do social workers choose discretion?*’

This section analyses the research findings relative to these questions in the context of the wider literature. It is organised under four headings:

- Conceptualising discretionary space;
- A curtailed *and* continuing discretion;
- Types of discretionary space encountered; and
- Whether to choose discretion.

Each will be considered in turn.

7.1.1 Conceptualising discretionary space

The first aim of this research was to establish some understanding of how social workers construed notions of ‘discretion’ and ‘discretionary space’ (see Section 3.1). This arose from my observation that throughout the wider literature, theorists had repeatedly failed to ground their discussions about discretion in some formal definition of the term (for example, Lipsky, 1980; 2010; Howe, 1986; 1991; Baldwin, 2000; Munro, 2004; 2005; 2009). This was problematic given the concept’s chameleon-like nature and its propensity to mean different things in different contexts (Evans, 2010).

Mindful of the contrast between discretion in the structural sense and the epistemic sense (see Molander, 2016), I sought to identify and incorporate the participants’ definitions of both ‘discretion’ and ‘discretionary space’ into the study’s design. In so doing, I was able overcome the aforementioned limitation associated with much of the wider literature, whilst also improving the efficacy of my own findings (Smith, 1981).

I outlined that concepts of ‘freedom’ and ‘action’ were seen as key features of ‘discretion’, which was conceived as

the freedom to decide upon and take a course of action,
independently from the oversight, and direction of others (for
example, a manager).

Whereas, ‘discretionary space’ was understood as ‘the space, area or opportunity to employ discretion’.

These conceptualisations complemented the few formal definitions that appear within the wider social work literature, such as ‘freedom within the work role’ (Evans, 2010: 33), and ‘the space for [discretionary] decision-making and action-taking’ (Molander, 2016: 10).

Both terms were referenced explicitly at each stage of formal data collection, the significance of which is that readers can be confident that meanings ascribed to them throughout the chapter are the same as those offered by the child protection practitioners participating in the study.

7.1.2 A curtailed *and* continuing discretion

My second research aim was to explore the degree that contemporary child protection social workers were experiencing discretionary space within their practice (see Section 3.1). This arose from the inherency of the ‘continuation debate’ within the wider literature, where theorists have argued for and against the pervasion of discretionary space in the context of statutory social work (see Section 2.3).

This argument has centred on the extent that managerialism has encroached into social work teams, with authors such as Howe (1986) arguing that this is a completed process (thereby assuming a ‘domination’ perspective – see Section 2.1.4) and that discretionary space has been ‘curtailed’ (see Section 2.3.1). Others, such as Baldwin (2000), counter this argument, asserting that discretionary space continues to be available to the statutory social worker because the encroachment

of managerialism remains incomplete (thereby adopting a 'discursive' stance – see Section 2.1.4).

The findings emerging from this study highlight two important points relative to this argument. The first is in relation to the extent to which discretionary space was available to the statutory social worker in this study (and here it is important to highlight the fact that I chose not to say 'whether or not' discretion was available). In this regard the data supports both positions. For example, though the social workers' discretionary space had been restricted in certain areas, such as decisions pertaining to whether a child would be made subject to a child protection plan; whether to initiate care proceedings; and the proposed 'care plan' for a child at the conclusion of care proceedings (see Section 4.2.1), they continued to encounter discretionary space in a number of areas, from the management of their diary to the decision to spend their own money (see Sections 4.3.1 & 4.2.2). These will be differentiated according to type of space encountered in the following section.

The second point relates to the encroachment of managerialism. Here, it was clear that despite the obvious presence of managerialist techniques for restricting social worker discretionary space – for example, through control of hierarchical power structures, control of budgets and procedures, and efforts to enforce compliance through surveillance and audit (Howe, 1986) – these were often only successful in constricting the officially recognised (*de jure*) discretionary space, whilst other forms persisted. (I note later in the chapter that these techniques purportedly had

more of a pervasive influence on the social workers' 'willingness' to employ discretion within the discretionary space.)

Indeed, in contrast to the assertions of Howe and others favouring the domination perspective, discretionary space was observed to exist both because of the continued complexities associated with the political (i.e. disparity between policy and provision) and human (i.e. the complicated, unpredictable and varied nature of the individual citizen) elements of public service provision (see Lipsky, 2010; Baldwin, 2000); and because in recognising these complexities, managers (in this study, more the local manager than senior manager) sought to provide informal discretionary space to the social workers in the interest of maintaining effective service provision (see Evans, 2016; Evans and Harris, 2004).

7.1.3 Types of discretionary space encountered

In reviewing the literature (see Chapter 2), I observed that the view of discretion as binary (i.e. that a social worker has or does not have discretionary space), as displayed by some theorists, was reductionist and failed to acknowledge those different 'degrees' or 'gradations' of freedom that may be available to the social worker (see Baldwin, 2000; Evans and Harris, 2004).

On this basis an additional aim of the study was to explore whether the discretionary space available to the social worker could be identified and categorised, and if so, how these different types of discretion might be understood, relative to the assertions made within the wider literature (see Section 3.1).

Ultimately, the findings of this study supported the notion that the type of discretionary space available to a social worker can change according to the practice context and task encountered (see Baldwin, 2000; Evans and Harris, 2004), and further, that types of space can be differentiated according to the level of official recognition and formality with which they are granted, or indeed, whether they are granted at all (see Evans, 2010; 2016).

For example, whilst the social workers within this study identified areas of practice in which they exercised discretion in an officially recognised and formally sanctioned discretionary space (such as managing their diary), they also highlighted examples where this 'de jure' space (see Evans, 2010) was permitted only when certain criteria were met (such as in the 'emergency' time-sensitive decision). Other examples were also reported where the de jure space was restricted by third parties – specifically, the Independent Reviewing Officer in respect to the task of managing and implementing a child protection plan – despite formal policy documents advocating the space for social workers to use their discretion.

However, in those areas where the restriction of de jure space was reported – either informally (as above) or formally (for example, in policy documents advocating compliance with timescales and a restriction on monetary expenditure) – the social workers agreed that their practitioner status often afforded them a continued 'de facto' discretionary space (see Section 2.4.1). This was not granted formally or informally, nor was it officially recognised or sanctioned, but occurred as circumstances dictated, through an absence of control mechanisms which would

otherwise restrict the social worker's power to choose their own course of action (Evans, 2010).

Furthermore, the evidence suggested that local managers afforded social workers an 'informal' and 'unofficial' discretionary space on the pretext of achieving a more 'effective' and 'pragmatic' service provision. Here, social worker discretion was not only generally accepted, but was, on occasion, found to be covertly promoted in order to achieve a desired outcome (see Evans, 2016). This supports the discursive managerialist argument that managers are able to exercise their own professional discretion and resist official policy positions in the pursuit of achieving goals (see Evans, 2010).

Indeed, the social workers described examples in which managers were willing to 'turn a blind eye' to discretionary behaviour (for example, in cases where the social worker decided to spend their own money in supporting the service user), or else where the manager implicitly encouraged the social worker to employ discretion (for example, completing work tasks outside of 'normal office hours'). In such cases, a shared commitment to achieving a specific objective was key (see also Evans, 2010), and in this sense, the position of managers and social workers within the organisation was not as distinct as the domination perspective or street-level bureaucracy theory would suggest (Evans, 2016).

These findings provide support for the argument that the social work community should seek to move away from binary terms such as 'curtailment', 'erosion' and 'continuation', to describe discretionary space. Likewise, the findings offer evidence

contradicting the assertion that the ‘managerialisation’ of social work departments is a completed process, where managers and social workers consistently work in opposition to one another.

Indeed, the findings suggest that discretion is more nuanced than binary arguments can accommodate and further that to understand the level of freedom available to a social worker in any given situation, it is helpful to consider the circumstances within which the discretionary space has occurred.

7.1.4 Whether to choose discretion

Another message emerging from the literature was the level of agency available to the social worker on encountering discretionary space, and that they are able to choose whether or not they employ discretion within the discretionary space (see Hupe et al., 2015; Evans and Harris, 2004; Evans, 2010; 2013; Ellis, 2011; 2014).

This was an important observation in relation to my research, suggesting a need for greater critical analysis beyond whether discretionary space exists – and indeed the type of discretionary space experienced – and leading me to my stipulated aim of exploring whether, on encountering a discretionary space, social workers would choose to employ their discretion, and further, what factors informed this choice (see Section 3.1). The term ‘willingness’ was used to denote the social worker’s *‘propensity to choose discretion’* within the discretionary space (see Section 5.0). While the evidence provided no uniform rule for when a social worker would or would not choose to employ discretion, a number of tendencies were apparent within the group.

For example, there was a tendency for social workers to be willing to use their discretion in the 'de jure' (such as 'logistical' case management, and in the management and implementation of the child in need plan) and 'entrepreneurial' space (for example, decisions to work outside of contracted hours). However, it was also evident that the social workers tended to be 'unwilling' to exercise discretion in the 'de facto' space (for example, non-compliance with departmental 'must-do' timescales; and 'time-sensitive' but 'non-emergency' decisions encountered in the field).

It should be noted here that whilst the wider literature accepts that social workers are able to make different choices within the discretionary space, it is not robustly discussed relative to the type of discretionary space encountered. Instead, the focus of the research centres on notions of professionalism (for example, Evans, 2013); entry to service provision (Ellis, 2011) or the allocation of resources (Ellis, 2014); and in this sense this is a significant finding with implications for understanding how and why, in any given situation, a social worker may, or may not, choose to employ their discretion (see below).

Indeed, with regards to the aforementioned tendencies, I understood that underlying them was the notion that by 'endorsing' a discretionary space – either formally (i.e. de jure) or 'informally' (i.e. entrepreneurial) – a manager would be seen to advocate for the social worker, if at some future juncture, others came to scrutinise and question the decision-making or action-taking that took place within the discretionary space. Without this 'endorsement' (as in the example of the de

facto space) the social worker felt more vulnerable to blame for any negative outcomes that might be attributed to their discretionary decision/action.

It was in these terms that the social workers associated contrasting levels of 'risk' with different types of discretionary space, explaining that where they sensed that a discretionary space posed an increased 'risk' to themselves (i.e. of being labelled as individually culpable for some negative outcome), then they were generally less willing to employ their discretion.

Also significant was the fact that the social workers in this study did not associate a high degree of 'personal risk' with the entrepreneurial space, especially given the propensity of the wider literature to assert that any discretionary space which is not formally sanctioned exposes the social worker to potential blame (see for example, Evans, 2016; Munro, 2009). Indeed, Evans (2016) argues that the manager benefits from the informally afforded space in the sense that they are protected from accountability for a social worker's discretionary behaviour, and because they are able to 'shift' the blame for any perceived fallibility in decision-making/action-taking onto the social worker.

Yet the practitioners within this study stressed that their willingness to employ discretion within the entrepreneurial space was on the understanding that managers would share accountability for discretionary behaviour and would not seek to shift the blame onto a social worker after the fact. Any suspicion that a manager was not willing to acknowledge their endorsement of the entrepreneurial

space was said to limit the social worker's propensity to employ their discretion, thereby rendering the informal space redundant.

It was in these terms that the social workers felt that they had some power to compel managers to enter into an informal contract to support the social worker if their discretionary behaviour within the entrepreneurial space was later questioned, or else be left to resolve the political and human tensions of public service provision (see Section 2.2.1) without the support of the social worker.

The implication is of course that the social workers of this study were not the powerless or passive practitioners purported by advocates of a domination managerialist account (for example, Howe, 1986; 1991). However, it is also that it is as much the level of risk associated with the discretionary space, as it is the type of space encountered, which informs a social worker's willingness to choose discretion.

That being said, the other significant finding arising from the study was the range of factors, beyond the type of discretionary space, or the associated risk assigned to that space, which were said to influence whether or not a social worker chose to employ their discretion. These factors were understood to be particularly relevant in explaining those exceptions to the general tendencies (for example, to be unwilling to employ discretion in the *de jure* space, but willing in the *de facto* space), and included such things as the social worker's knowledge of the child, its family and their circumstances; the experience of using discretion in similar

decision-making scenarios; and the impact of influences derived from the ‘personal’ rather than the ‘professional’ life.

As I have already discussed (see Section 5.3), the pertinent point that arises here with respect to our understanding of how discretionary choice might manifest in practice, is that at any given time, a social worker can be affected by myriad factors, and the unique nature of how these interact and are interpreted – and the impact that they have on the individual – make it difficult to know with any degree of certainty whether a social worker will choose to employ their discretion within a discretionary space (thereby linking to critical realist assertions as to the ‘multiplicity’ and ‘indeterminacy’ of causal powers – see Section 3.2.1)

Instead, it is more prudent to think in terms of a ‘likelihood’ and ‘tendency’ to employ discretion (again, see Section 3.2.1). In the context of this study, social workers were more likely to choose to employ discretion within the *de jure* and entrepreneurial space but tended not to choose discretion within the *de facto* space.

7.2 How are systemic factors impacting on social worker discretion?

A principal theme throughout the child protection literature is how systemic factors have historically impacted on both the space for, and value placed in, social worker discretion (Munro, 2004; 2005; 2009; 2010b; 2011a; 2011b).

This theme, in addition to my critical realist framework for enquiry (which has sought to move beyond descriptive, and towards explanatory accounts – see

Section 3.2.1), informed my research aim of exploring why social worker discretionary space and choice was manifesting in the way identified (see Section 3.1).

In this regard, the section considers the research question: *‘How are systemic factors impacting on social worker discretion?’* However, in discussing these factors in the context of the wider child protection literature, the section also assesses the evidence of change relative to the Munro Review recommendations for reform (see Section 1.4.3).

The section is organised under the following headings:

- The ‘ripple effect’ of unannounced inspection;
- A more (not less) restrictive ICT system;
- The perpetuation of unrealistic expectations and the continued risk of discretion; and
- How a high demand for services can inhibit social worker discretion.

7.2.1 The ‘ripple effect’ of unannounced inspection

The existing literature considers how an increasing managerial approach to statutory social work provision – one which demanded more accountability and transparency (Munro, 2004) – has impacted upon social worker discretionary space and choice in a child protection context (Shaw et al., 2009; Wastell et al., 2010; Pithouse et al., 2011; Wastell and White, 2014; Munro, 2009; 2010b; 2011b). One area in which this influence has been most notable is in relation to the inspection of

children's services departments (Munro, 2004; 2011b). Indeed, the literature asserts that with a more punitive approach to inspection accompanying the rise of managerialism, where inspectors can publicly name and shame departments considered to be 'failing' in their duties to children, local employers and staff have become more defensive in their approach to practice (see Munro, 2004). This defensiveness is said to have resulted in a reduction in the value placed in, and therefore space for, social worker discretion (Munro, 2009; 2011b).

The findings of this study, based on one local authority, support this assertion, suggesting that in the aftermath of an ostensibly 'negative' inspection report in 2012, senior managers had become more focussed on preparation for inspection and had increased their use of managerialist techniques (including audit and remedial action plans) to coerce frontline staff to conform with their expectations of 'good performance' in an inspection context.

This included evidencing compliance with easily quantifiable 'output' measures of practice (Munro, 2011b: 39), such as procedures followed, and timescales met, and maintaining a full and comprehensive written account of all work undertaken. Such was the onus placed on these aspects of a social worker's work – emphasised through departmental mantras like *'if it's not on the system, then it hasn't been done'* (see Section 6.2.2) – that practitioners felt compelled to comply (or else risk being made subject to disciplinary procedures), sometimes at the expense of the individual child.

This was evidenced by the fact that social workers estimated 15% of their average work time was spent with the child, while 70% was spent on paperwork⁹, with the latter being attributable to efforts to appear compliant with managerial expectations of inspection preparedness. This is significant in the context of existing estimates of 20-25% of social worker time spent with children – see for example, Garrett, 2003; Holmes et al., 2009; Baginsky et al., 2010; Holmes and McDermid, 2013; White et al., 2010. It is also indicative of that which Parton (2008) describes as the ‘shift’ in focus from the ‘relational’ and ‘social’ and towards the ‘informational’:

... the nature of [contemporary child protection] practice and the knowledge which both informs and characterises it, is less concerned with the relational and social dimensions of the work and more with the informational (p. 715).

Indeed, some social workers admitted that they were more focussed on their ‘inspection-readiness’ than on how to achieve the best interests of the individual child (with the implication being that the two were not necessarily complimentary of each other). This was said to have a detrimental impact upon the use of discretion, not only because of the reduction in de jure discretionary space associated with preparation culture (see Section 6.2), but because in their efforts to appear ‘compliant’, social workers felt they did not spend adequate time with the child to garner the type of knowledge to facilitate a willingness to employ discretion within specific contexts (see Section 6.2).

⁹ The remaining 15% was attributed to ‘other’ tasks.

Of course, the significance of this finding is that it indicates little movement from the observations made in the Munro Review, specifically about the barriers to discretion created by local approach to inspection (see Section 1.4.2). This is notable given the recent reform to the inspection system in response to Munro's recommendations for change (see Section, 1.4.3).

Indeed, while the evidence from the study does not help to elucidate why senior managers remained fixed in their focus on evidencing 'output' indicators, as opposed to the 'outcome' measures of performance which have purportedly become the new remit of the inspection team (see Munro, 2012 for an account); it does suggest that the change to a system of unannounced inspection may have increased the bureaucratic burden in the context of this maintained focus.

This is because, in practical terms, the move to unannounced inspection has meant that local authorities are no longer afforded a two-week notice of Ofsted's 'intent to inspect', but instead are informed the day before an inspection is due to take place. In rationalising this change, Munro (2011b) had considered that it would reduce the 'bureaucratic burden' associated with preparing for inspection, as local authorities would have less time to engage in acts of preparation. However, the evidence from this study does not support this assertion; instead it indicates that (at least in Marketon) the change may have contributed to an increase in the amount of bureaucratisation and the duration of preparation undertaken.

To illustrate this point, the practitioners involved in this study asserted that during the inspection of their services in 2012, the managerial focus on preparation for

inspection was relatively confined to the two week notice period (purportedly resulting in 'chaotic scenes' of practitioners working late into the night and at weekends in the days preceding Ofsted's arrival). However, the removal of the two-week notice period, and with it the assurance that 'there was still time available to undertake remedial work and to prepare' (M4, FG), had increased the anxiety about potential inspection and engendered a perpetual focus on preparation within the CSD. As such, staff, and managers particularly, were eager to ensure all files and paperwork were consistently 'Ofsted-ready'.

It is not my intention to argue here against the transition to an unannounced inspection format, and I believe the rationale for this decision explored within the wider literature is sound (see Munro, 2011b). Rather, it is to highlight that this move may not have achieved the level of change envisaged by the Munro Review; but rather, a possible unintended consequence, or 'ripple effect' (to use Munro's term), of unannounced inspection is that social workers are perhaps employing less discretion in their practice than they would have before the change in inspection arrangements.

Whilst it remains difficult in the context of this study to separate out the impact of receiving an ostensibly 'negative' inspection report from the move to unannounced inspection, the implication here is the need to explore more broadly (i.e. amongst more providers of statutory child protection services) how the reforms to the inspection system have impacted upon the use of social worker discretion at the frontline of child protection provision. The conclusion drawn from this study is that

rather than increase the use of discretion, they may have instead provided additional obstacles to social worker discretion.

7.2.2 A more (not less) restrictive IT system

Another legacy of the managerialisation, and ‘proceduralisation’ of children’s services provision according to the child protection literature, has been the ‘electronic turn’ towards restrictive IT systems, epitomised by the Integrated Children’s System (ICS) (see Shaw and Clayden, 2009; Shaw et al., 2009; Broadhurst et al., 2010a; 2010b; Wastell et al., 2010; Wastell et al., 2010; Pithouse et al., 2011; Wastell and White, 2014).

Indeed, the wider literature cites the restriction of a de jure discretionary space within many versions of the ICS, due, in the main, to the inherency of core information requirements, embedded workflow streams and exemplar templates (Shaw et al., 2009; White et al., 2010). However the literature also recognises the continuation of a de facto space, where social workers have been exercising discretion – in the form of ‘informal processes’ (Broadhurst et al., 2010b: 3); ‘expedient manoeuvres’ and ‘workarounds’ (Pithouse et al., 2011: 173) – albeit not consistently in the interests of the individual child (Broadhurst et al., 2010a; White et al., 2010).

Evident within this study was how the intense focus on the social worker’s ICS recordings by managers (particularly in the interests of ensuring their preparedness for inspection) had limited the discretionary space available to the social worker, with little evidence of them being able to engage in ‘expedient manoeuvres’ or

‘workarounds’, either in, or against, the best interest of the child (see Section 4.2.3).

As I have explained, the social workers of this study viewed the ICS as a ‘tool for audit and surveillance’, employed by managers to actively identify practitioners who were not compliant with their expectations of what constituted ‘good performance’ (see Section 6.2.2). Indeed, managers utilised functions within Marketon’s variant of the ICS – including flashing notifications and the workflow stream – to control the social workers’ case recordings (see Section 4.2.3). This was significant, as the approach was understood to comprise part of the ‘bureaucratic burden’ that social workers associated with their lack of sufficient time to spend with the child, and thus their unwillingness to employ discretion in some circumstances.

This finding adds weight to the increasingly influential explanation for children becoming ‘invisible’ within the child protection system (Ferguson, 2016: 1009) – namely, that the scope for social workers to get to know children sufficiently is constrained by excessive levels of case recording; other bureaucracy; restrictive timescales for completing work and compliance with managerially directed processes and procedures (Broadhurst et al., 2010b; White et al., 2010; Ferguson, 2016). The effect of these systemic pressures is that social workers do not ostensibly have the time to develop the depth of relationship necessary to have a confidence to employ discretion in respect to a child (see Section 7.2.1), and thus, to keep them safe (Munro, 2011b; Ferguson, 2016).

Indeed, the importance of these findings is that they support Munro's (2010b, 2011b) observation of how the ICS has restricted a social worker's use of discretion. However, they also indicate that in the context of Marketon, the type of reform that Munro had envisioned for the ICS had not subsequently been achieved. On the contrary, the evidence suggests the inverse is true, and a regression in the freedom available to social workers in respect to their electronic recording.

This is due to the fact that two years after the publication of the final Munro Review report – in which she had called for local providers to jettison variants of the ICS with restrictive workflow steams, and excessive controls on the content of data records (see Section 1.4.3a) – those with responsibility for commissioning the ICT systems in Marketon, introduced a new variant of ICS; one that incorporated more embedded restriction (for example, the introduction of the rule that tasks could only be completed in the order that the workflow dictated), to the admitted consternation of many of the social workers within this study.

Indeed, during the data collection the practitioners repeatedly expressed their frustration at the decision to commission a new system that, in contrast to Munro's recommendation, had only compounded the bureaucratic element of their work:

By the way, wasn't it recommended that we move away from and not towards these systems? It makes you wonder whether managers even read the [Munro] report (SW16, Q).

The problem is that the new system requires so much more time... there are so many more boxes to fill and stages to go through before you can get anything done (SW11, Q).

Ultimately, I think the new system has increased our time in the office (SW6, FG).

I should highlight that whilst I was not part of the commissioning process for this new variant of the system, I was, during the course of the data collection, given access to the local authority records of procurement, which detailed the logistics of that process and why the decision had been made to commission that specific variant. In my analysis of these documents, I noted two points which are prudent to consider here.

The first was that of the six Marketon employees chosen to 'test' the new system on behalf of the local authority, none were social workers. Instead, managers undertook the task (the IT manager, two CSD senior managers, two CSD team managers) with only one practitioner (a family support worker from the LAC Team) in attendance. Secondly, the written rationale for the decision included several justifications characteristic of a managerialist discourse, detailing how: 'managers can easily identify areas requiring remedial work'; 'tasks cannot be progressed without manager approval'; 'the system facilitates the measurement of compliance with performance targets'.

What is striking about these points is that they appear to highlight that it was the needs of the manager, as opposed to the needs of the practitioner as users of the new system, that took precedence during the procurement process.

The importance of this observation is that it again indicates a continued inclination towards managerialist methods of control over the desire to increase practitioner discretionary freedom. Whilst it remains to be seen whether other local authorities have taken a similar approach in their procurement of new IT systems since publication of the Munro Review, this finding provides a context for discussion in the consideration of progress towards Munro's image for a more 'child-centred' system (see Section 7.2.3).

7.2.3 The perpetuation of unrealistic expectations and the continued risk of discretion

Inherent within both the child protection and wider social work literature is the notion that discretionary behaviour at the frontline of public service provision can pose an element of risk both to the practitioner in question, and to their employer (Evans and Harris, 2004; Lipsky, 2010; Evans, 2010; Munro, 2004; 2009; 2011b).

Often, this risk has been framed as the potential of being held (or labelled as) accountable for any negative consequence that may result from a specific discretionary behaviour (Evans and Harris, 2004; Munro, 2010b). This has led to repeated observations of employers exercising efforts to reduce a practitioner's discretionary space, so as to minimise 'risk to the agency' (Munro, 2004: 1094), and of practitioners either rejecting or seeking to limit the discretionary space available to them (Munro, 2009; 2011b; see also Lipsky, 2010; Evans and Harris, 2004).

Similar findings were made within this study and were seen in senior management decisions to emphasise inspection preparation, relying on 'protocolization' (Munro,

2004: 1096) and restrictive IT systems to ensure compliance (see Sections 7.2.1-7.2.2). It was also evident in the choices made by the social workers, most notably in the tendency not to employ discretion in the de facto space – reporting an increased vulnerability to being held ‘individually accountable’ – but also in exceptions to the general tendencies, where social workers chose not to employ discretion in the entrepreneurial, but perhaps most intriguingly, the de jure space.

The importance of this was that it illustrated how, for some practitioners, discretion continued to be perceived as ‘risky’, even in areas where there was an explicit expectation that they would use it. At these times, social workers often engaged in that which Whittaker (2011: 481) describes as ‘upward delegation’, that is, deferring responsibility for a decision to a manager. Whilst I reflected that these occasions might be considered contrary to the professional expectation placed on social workers to be able (and, by implication, willing) to make decisions independently (see Health Care Professions Council, 2017 ‘Standards of Proficiency’¹⁰ and also the Department for Education’s, 2018 ‘Knowledge and Skills Statements for Child and Family’ Social Workers¹¹), this is not my focus here. More so, it is to emphasise how the social workers continued to reject opportunities for discretion, due to a perceived ‘risk’ posed by the discretionary space.

¹⁰ Specifically, ‘Standard 4’ – ‘be able to practise as an autonomous professional, exercising their own professional judgement’ (p. 7).

¹¹ Specifically, ‘Statement 7’ – ‘Analysis, decision-making, planning and review’ (p. 5-6).

Indeed, the implication is that practitioners do not consistently view discretionary space as the 'good thing' espoused in much of the wider literature, with assertions to the contrary appearing throughout the participants' testimonies:

I don't agree with the position that having the freedom to make decisions independently [as a social worker] is a good thing... Sometimes, I would much prefer for my manager to tell me what to do (SW5, SSI).

I do feel that I have quite a lot of discretionary space in my decisions. I think that some social workers feel that they don't have enough... but to be honest I feel the opposite; I feel that I have too much, and I don't want it... I don't like it... sometimes I want to go to my manager and pass the decision onto him (SW4, SSI).

The explanation offered by Munro for why discretion had become 'risky' for the practitioner included the tendency to blame social workers and their employers in the event of child tragedy (Munro, 2005; 2009; 2010b; 2011a; 2011b). This led her to make a number of recommendations for reform (see Section 1.4.3), two of which are particularly pertinent to consider here.

The first, was that local child protection partners should adopt a different approach in the context of child harm, and not be so ready to label individual social workers, their team or department, as blameworthy for the event. The second was that politicians and the media should adopt a more responsible approach to their commentary and coverage of social work in the aftermath of child tragedy, thereby limiting the cultivation of unrealistic expectations placed on child protection practitioners (Munro, 2011b).

Of course Munro has reacted enthusiastically to the degree of change evidenced in the political sense:

Since my review, something good has happened but it's so invisible nobody really notices it apart from me. And that is when there have been horrible stories in the newspapers, the government has not come out with any horrible statements. They have not been saying 'heads will roll, someone's to blame'... They have been keeping quiet (Munro, 2016: presentation).

However, the evidence from this study suggests that whatever change has been achieved, it may not be at the level Munro envisioned, with a number of examples that show where partners, the press *and* politicians have purportedly continued to undertake behaviours counter to Munro's recommendations (see Sections 6.3.1 & 6.3.2).

Yet also apparent in the accounts of this study was the idea that any reticence on the part of the child protection social worker to employ their discretion, was as much due to the legacy of a reductionistic coverage of their profession, as well as a propensity to blame practitioners when a child had been harmed, as it was a continuation of this phenomena – with a particular emphasis placed on the longstanding impact of the rhetoric used, and actions taken, in the aftermath of Peter Connelly's case (see Section 1.3).

On this basis, an implication that emerges is that it might require not only a significant change in how child protection is portrayed in the English media and by English politicians – as advocated by Munro (2011b) – but also a protracted period of time in which this change is allowed to embed and become evident, before child

protection social workers (and perhaps also their employers) will more consistently view discretion as a less 'risky', and indeed, a worthwhile option.

Whether such a change is realistic remains to be seen. History tells us that at times of 'moral panic' emanating from some high profile incidence of child harm (akin to the Peter Connelly case), the English media and politicians have invariably resorted to their 'default' position of 'scandalising' (Butler, 2016: 74) and 'politicising' (Parton, 2014: 166) the issue (see also Franklin and Parton, 2001; Warner, 2015) – engaging in that which Greenland (1986: 164) argues is a 'peculiarly British sport of social worker baiting'.

Indeed, there is an argument to say that social workers have become, and remain, the 'cultural scapegoats' of child harm (Garland, 2008: 9) – cast as 'folk devils... onto which society can project sentiments of guilt and ambivalence' (Parton, 2014: 171). Whilst the complexities of people and society mean that it is inevitable that children will continue to be harmed, and child tragedy occur (Ferguson, 2011; Munro, 2011b; Jones, 2014), Munro (2011b) hopes that the scapegoating and labelling of social workers as 'blameworthy' 'is changing, and will continue to do so' (Munro, 2016).

Perhaps there will come a time when this ambition is fully realised, and yet the social workers of this study would express that 'we are not there yet' (SW7, SSI). Further, that until such time, they will continue to choose not to employ discretion on the basis of their 'fear of being blamed', by partners, the press and/or

politicians, with assertions that ‘I don’t want my face on the front page of the Sun’ (SW5, SSI).

7.2.4 How a high demand for services can inhibit social worker discretion

At this point of the discussion, the systemic factors considered have a strong grounding in the existing child protection literature; one which has facilitated our understanding of how and why those factors have impacted on the social worker’s discretionary space and choice. However, an area which has received less attention, but which I wish to reflect on here, is how the demands of a busy caseload can impede a social worker’s use of discretion.

Indeed, whilst the literature has considered the pressures incurred by a high caseload (for example, Munro, 2010b, 2011a; 2011b), this has often been framed as increasing the social worker’s propensity to employ discretion, namely because it has also been associated with more opportunities to engage in discretionary behaviour, as practitioners have to decide how best to use the limited time and resources available to them (Lipsky, 2010; Shaw et al., 2009; Wastell et al., 2010; Pithouse et al., 2011).

Although the findings of this study do, to some degree, support this assertion – for example, identifying increased discretionary space in the context of how to organise one’s own time (with social workers ‘choosing between the needs of different children’ – see Section 4.3.1) – a busy caseload was also observed to contribute (along with the bureaucratic burden of inspection preparation) to a

reduction in the willingness of social workers to employ their discretion in particular contexts. This was ostensibly because the social workers felt that they had not been afforded enough time to establish, what they considered to be, the requisite knowledge of the child, their needs and circumstances (see Section 5.2.1).

Within the study, two factors were identified as contributing to an increase in demand experienced by Marketon's CSD over a period of years, culminating in a sense amongst the child protection social workers, that they were 'overstretched' or else 'spread too thinly' (and thus serving as an obstacle to their use of discretion). These were the impact of a continuing 'Baby P effect' and the prolonged period of cuts brought about by the national Government's policy of 'austerity'.

The wider literature outlines that as a consequence of the Peter Connelly case – specifically, the political and media coverage of it, and how this affected the national consciousness (Parton, 2014; Jones, 2014; Warner, 2015) – there was an upsurge in child protection referrals, plans and care proceedings in the weeks, months and years after the details of Peter's case were made public (Hall and Guy, 2010; Brooks et al., 2012; and Cooper, 2013). However, the assertion within this study is that the 'Baby P effect' (Shoesmith, 2016: 18) has not diminished, but has continued to have a significant impact on the child protection system. This impact, it is argued, can be seen in the adoption of a 'more cautious approach' to child protection generally, one which has led to a significant increase in the number of

children being referred into the system, and to practitioners employing different strategies to keep these children within the system (see Section 6.1.2).

An examination of the quantitative data pertaining to Marketon supports this assertion, specifically as it reports a significant increase in local child protection referrals (+38%); children designated as 'in need' (+52%); child protection plans (+72%); and child care proceedings (+41%) between 2008, when Peter's story entered the public domain, and 2016. Indeed, it is in this context that the social workers within this study had experienced a substantial rise (+55%) in the size of their average caseload despite a 30% increase in their number during this same time period (see Section 6.1.1).

However, the findings suggest that this increase in demand (as evidenced by the above figures) can also be partially attributed to the wider impact of the national Government's chosen policy of austerity. This is because since 2010, Marketon has experienced a 53% reduction in the funding received from the national Government, which has resulted in efforts to save £65m between 2010 and 2016 (with a purported further £35m saving required by 2020). As a consequence, Marketon's CSD has substantially cut its spending on areas like children's centres; the local youth service; and support services for homelessness, substance misuse and domestic violence.

Whilst this has reportedly achieved £25m in savings to contribute towards the £65m required, the data also highlights how concurrently there has been significant

increases in measures for poverty; unemployment; and homelessness; and higher instances of neglect and emotional abuse amongst local families (see Section 6.1.3).

The theory put forth is that in cutting services in response to the reduction in funding, Marketon has simply 'shifted the problem' elsewhere, as more families are being 'tipped over the edge' and are requiring a service from the child protection team. The implication is that, in a local context, the national Government's policy of austerity has not only led to more families entering the child protection system, but may have also indirectly inhibited the social worker's use of discretion in respect to those families.

Although it is beyond the scope of this study to establish the validity of this claim, there is certainly a growing amount of literature linking austerity with many of the social problems cited; problems which have been associated with familial crisis and the requirement for intervention from public service providers (see for example, Main, 2014; UK Children's Commissioners, 2015; Pemberton et al., 2016; Garthwaite, 2016; Loopstra et al., 2015; 2016; Department for Communities and Local Government, 2017; Association of Directors of Children's Services, 2018; UN Special Rapporteur on extreme poverty and human rights, 2018; 2019).

However, it is also pertinent to reflect on the limited consideration offered within the child protection literature of either the 'Baby P effect' or 'austerity' as potential obstacles to social worker discretion. Indeed, whilst Munro (2011b: 76) expresses concern at the 'evidence that early support and preventative services are being the target for cuts', linking these to an observed 'rise in referrals to Children's Social

Care' (Munro, 2012: 7), she offers little forethought about the level of challenge that these cuts might present – particularly in relation to increasing demand for child protection services, and how this might impact upon social worker discretion.

Furthermore, absent from the literature is how the longstanding effect of the Peter Connelly case (the role of the media notwithstanding) may have exacerbated the 'culture of fear and blame' reported (Munro, 2010b: 38), and how, as a result, the barriers identified to social worker discretion (see Munro, 2004; 2009; 2011b) might have been maintained.

Of course, the limited commentary in the cited sources could be the result of a lack of anticipation for the longevity of these factors at the time of their respective publication – it is noteworthy that most were published prior to 2012, a time when austerity, for example, was being constructed as a four-year policy initiative (see Osborne, 2010). However, it is nevertheless noteworthy that commentators have not, since that time, sought to better explore the impact of these factors in the context of social worker discretion.

This is important, as it points again to the need to extend the enquiry beyond this study, so as to ascertain whether these factors are having a similar influence upon the use of social worker discretion in other child protection teams around the country. If this was found to be the case, a further discussion about the changes that are required would be facilitated, if the increased use of social worker discretion in the interests of the child, as advocated within the Munro Review, is to be promoted.

For now, the message emerging for practice is that a social worker who perceives themselves to be ‘overstretched’ or else ‘spread too thinly’, may be less likely to employ their discretion in a given discretionary space, especially when that practitioner feels that in being ‘overstretched’ they have not been afforded the requisite time with the service user to garner a sufficient knowledge of them and their circumstance.

Again, this risks increasing the number of children who are ‘invisible’ within the child protection system (Fergusson, 2016: 1018) (see also Fergusson, 2005; 2011) and it is in this context that the system’s capacity to cater for the needs of all children is reduced (Munro, 2009) – thereby limiting its ability to be ‘effective’ (Munro, 2011b: 23), whilst increasing the chances of tragedy occurring (Munro, 2009; 2011a; 2011b).

It is on this basis, that it is prudent to ask: *‘What conclusions can be made about the realisation of Munro’s more ‘child-centred’ system?’*

7.3 What conclusions can be made about the realisation of Munro’s more ‘child-centred’ system?

In concluding her review of the English child protection system, Eileen Munro (2011b) called for ‘regular reviews of progress’ in the form of follow-up research which would look specifically at the degree of ‘change’ and the level to which her image for a more ‘child-centred’ system had been realised (p. 22).

Of course, central to Munro’s notion of a ‘child-centred’ system was that social workers would increasingly exercise their discretion in the interests of the

individual child, and it was on this basis that I set out to undertake a study exploring the *‘extent [to which] frontline statutory social workers [were] employing their discretion, in the post-Munro Review world of child protection’*.

An aim of the study was to assess whether this element of Munro’s ‘child-centred’ system was evident in the context of Marketon’s Child Protection Team, and to identify any barriers that might be impeding its realisation (see Section 3.1). It is in this context that this section considers the findings in respect to the stipulated research question – *‘What conclusions can be made about the realisation of Munro’s more ‘child-centred’ system?’*

The section is organised under the following headings:

- Evidence that social worker discretion was conceived as a valuable and preferred means with which to help children;
- Evidence that social workers had formal opportunities to employ their discretion;
- Evidence that social workers were choosing to employ their discretion; and
- The extent of change achieved.

7.3.1 Evidence that social worker discretion was conceived as a valuable and preferred means with which to help a child

In the simplest terms, Munro (2004; 2005; 2009; 2010b; 2011a; 2011b) believed that a more ‘effective’ child protection system, was one that was better able to meet the needs of the individual child, and that key to achieving this was for social workers to increasingly use their discretion in the interests of the child. Amongst

the many changes that Munro advocated, three were identified as key to achieving this aim. The first of these was for local managers to be more inclined to view social worker discretion as a valuable and preferred means with which to help the child.

In this study, it was evident that Marketon's managers were continuing to negotiate particular challenges characteristic of contemporary public service provision – for example, how to promote a positive outcome arising from an external inspection whilst also reconciling diminishing resources with a high demand for services (see Lipsky, 2010).

As such, some of the behaviours observed in Marketon's managers are perhaps to be expected, including the emphasis placed on inspection preparation and the restriction of the frontline practitioner's ability to spend departmental money (Munro, 2011b; Evans, 2010). However, these behaviours were also seen to undermine the apparent value placed in, and preference for, social work discretion within particular contexts, including with regards to the 'outcome decisions' of specific decision-making forums (see Section 4.2.1); whether to comply with departmental prescription (see Section 4.2.3); and concerning the order and content of data recording (see Section 4.2.2).

At these times, it was understood that managers expected social workers to adhere to the stipulated process, follow the procedure, and/or meet the prescribed timescale over and above using their discretion in the interests of the child – findings which are seemingly contrary to the type of change that Munro (2011b) had endorsed.

However, it was also the case that Marketon's managers were seen to value, promote and indeed expect social workers to use their discretion in areas including: their time management (see Section 4.3.1); logistical case decisions (see Section 4.3.2); the implementation of the child in need plan (see Section 4.3.3); 'emergency' time-sensitive decisions (see Section 4.3.4); and how to support families without incurring any direct cost to the department (see Section 4.2.2).

Whilst in some of these circumstances social worker discretion was also seen to be in the interest of the manager – particularly in the sense of resolving those 'political' and 'human' tensions inherent within public service provision (see Lipsky, 2010) – the social worker's motivation for using their discretion at these times was, more often than not, the needs of the individual child.

Thus, the message to emerge from this study is that local managers did indeed value and prefer social worker discretion, though this was not on a consistent basis and was limited to particular contexts, decisions and tasks.

7.3.2 Evidence that social workers had formal opportunities to employ their discretion

The second change that Munro hoped would result from her review of the child protection system was that, on the basis of the greater value placed on social worker discretion, social workers would be granted an increasing amount of formally acknowledged and officially sanctioned discretionary space.

Again, evident within this study was that social workers were being afforded a number of formal opportunities to employ their discretion (relating to diary

management; logistical decision-making etc). However, in line with those aforementioned areas where social worker discretion was not the preferred means with which to make a decision, there were a number of other examples in which managers (but also the Independent Reviewing Officer) sought, not only to restrict the formal discretionary space, but also the social worker's propensity to employ discretion in any de facto space that might remain available to them (for example, in respect to the timeliness and content of their ICS recordings).

It is also noteworthy that the study highlighted contexts in which discretionary space was afforded to the social worker in the informal, rather than the formal sense (for example, in the ability to spend their own money on a child). However, it is questionable whether this is in the spirit of change that Munro had endorsed, and it is pertinent to note that while, in these examples, managers ostensibly saw value in social worker discretion, there was an apparent reticence to officially sanction these discretionary spaces (again likely because of the aforementioned 'political' tensions of public service provision – see Lipsky, 2010), which, according to Munro (if not necessarily the social workers of this study) rendered the space 'risky'.

7.3.3 Evidence that social workers were choosing to employ their discretion

The third change endorsed by Munro was that, in a context where their discretion held increased value and in which they were therefore afforded more officially sanctioned opportunities to use it, social workers would have a higher propensity to choose to employ their discretion.

In ascertaining whether, in the context of Marketon, this change has been realised, the evidence suggests that (like the other two measures of 'child-centredness') a more nuanced answer is the most appropriate. This is because, whilst within the study there were occasions in which social workers would choose to employ their discretion in the interests of the child, in others they would not, including times when by not doing so, it was acknowledged to be counter to the interests of the child.

The study found that a good predictor of whether the social workers would choose discretion was the type of discretionary space encountered, with social workers tending to choose to employ discretion in those areas that were either formally (*de jure*) or informally (entrepreneurial) granted, but not in those that arose due to circumstance (*de facto*).

Here the level of anxiety invoked by the type of discretionary space was important, as social workers generally saw discretion within the unsanctioned (*de facto*) space to be 'riskier', referencing a higher likelihood of being held 'individually accountable' (and by extension blamed) for negative consequences that might arise from their discretionary behaviour.

However, there were also exceptions to the general tendencies, and what became clear during the course of the study, were the myriad factors that could influence a social worker's decision about whether or not to employ discretion, over and above whether the discretionary space had been sanctioned by a manager, and indeed, the level of formality with which this had occurred.

7.3.4 The extent of change observed

As I have stated, in beginning this study I aimed to consider whether the data emerging in the context of Marketon was indicative of the 'child-centred' system that Munro had proposed (where social worker discretion was valued, promoted and exercised in the interests of the individual child). However, in my analysis of the research findings it was clear that there were two challenges posed by this aim. The first was that it provided an inclination to answer in binary terms, which the evidence of this study would suggest is unsuitable.

The second was the difficulty of knowing the level with which Munro envisioned that managers would value and prefer social worker discretion; the extent of the formally sanctioned space that social workers were to be afforded; and the degree with which social workers were to choose discretion in the interests of the child. This is because Munro does not provide sufficient detail on any of these points either in her formal review or her earlier writing.

It is on this basis, that during the course of research, I transitioned away from a focus on *whether* or not Munro's image for social worker discretion within a 'child-centred' system was apparent in the context of Marketon, and towards a consideration of the *extent* of evidenced change, especially as it related to her previous assertion that social worker discretion had been 'eroded' (Munro, 2005: 39) and thus that social workers were unable and/or unwilling to employ their discretion in the interests of the child (Munro, 2011b).

In these terms, the study pointed to evidence of significant change relative to the notion that social worker discretion has been 'eroded' or else 'curtailed' as propagated within the Munro Review of Child Protection (see Munro, 2010b; 2011b; 2011c), and indeed, Munro's earlier written work (see Munro, 2004; 2005; 2009). This was not only in the value that managers ostensibly placed in social worker discretion; in the examples of the officially sanctioned and granted discretionary space afforded; and how often social workers would choose to employ discretion in the interests of the child, but also other examples of 'child-centredness' beyond the three measures implicit in Munro's account.

This included where managers decided to afford social workers an informal discretionary space, in contradiction of the official policy position, because they deemed it appropriate to the needs of the individual child. Further, where social workers chose to employ their discretion in the interests of the child, despite attempts by managers (and others) to restrict the discretionary space available to them, and even though they perceived a heightened degree of 'personal risk' as existing within the discretionary space.

Of course, the study also highlighted the obstacles to social worker discretion that were restrictive of both the formally or informally granted space, and the propensity of social workers to choose discretion within a variety of contexts – for example, the 'Baby P effect'; the government policy of 'austerity'; the anxiety for external inspection; and a fear of being blamed by inter-agency partners, the media and/or politicians. However, this did not manifest into the 'eroded' or 'curtailed'

discretion that Munro and others have previously reported, and there was clear evidence that the child protection social workers of Marketon were employing their discretion in the interests of the children with whom they worked and, moreover, that they were receiving managerial endorsement to do so.

Ultimately, whether the level of discretion being exercised is to the extent that Munro had envisioned, or indeed, whether it is enough to satisfy her image of a more 'child-centred' system, remains to be seen, and this is perhaps a question that can only be legitimately answered with additional enquiry, and by Munro herself.

Thus perhaps a more pertinent question to ask at this juncture – in addition to whether similar results might be found in other child protection teams around the country – is how we might more consistently align the interests of the social worker and their employer with those of the child, so that social worker discretion might also be more consistently used to support and protect individual children accessing the child protection system.

It is in these terms that I conclude the chapter with a consideration of the 'messiness' of social worker discretion and of the implications for further reform.

7.4 Conclusion: The messiness of social worker discretion and implications for further reform

In much of the existing literature, social worker discretion is discussed in a binary sense. That is to say that it is, or is not, viewed as a valuable means with which to elicit change and support service users (see Molander, 2016). Further, frontline practitioners either have, or do not have, opportunities to use discretion (for

example, Howe, 1986; Munro, 2004; 2005; 2009), and social workers will, or will not, choose to employ their discretion when encountering a discretionary space (for example, Hupe et al., 2015; Lipsky, 2010).

However, what many of these assertions fail to acknowledge, is the nuanced nature, or else the ‘messiness’ (SW5, FG) and ‘complexity’ (SW2, SSI) of social worker discretion apparent within this study. Indeed, in contrast to binary arguments, the results of this study highlight examples in which the same manager could value social worker discretion in one context, but not another; how a social worker’s discretionary space was restricted, only for this to change with the acquisition of new information; and where different social workers, when faced with the same decision-making scenario, reported contrasting levels of ‘willingness’ to choose discretion.

Underlying these nuances was a myriad of factors (operating within the micro, meso and macro sense) which were seen to inform both the type of discretionary space afforded to a social worker and when a social worker chose to employ their discretion. In critical realist terms, the fluid and evolving nature of these factors, and how they interacted and influenced an individual practitioner at any given time, meant that it was difficult to know, with any degree of certainty, when social workers would, or would not, employ their discretion within their practice tasks.

However also evident, was that social workers were, on occasions, exercising their discretion in the interests of the child, and further, that in many of these contexts, this was either at the behest, or with the support of, their manager.

This evidence is important, both as it contrasts with the assertion that the child protection social worker's discretion has been 'eroded' or else 'curtailed', and because it suggests at least a partial realisation of Munro's image for the child protection system – where social worker discretion is considered a legitimate and valuable means with which to help the individual child, and where it is exercised on this basis.

Conversely, the study also highlights examples in which social worker discretionary space was restricted and discretion discouraged, and where social workers were choosing not to employ their discretion, apparently in opposition to the interests of the individual child. Underpinning these occasions were a series of continuing (relative to those identified within the Munro Review) but also 'new' obstacles to social worker discretion.

What these obstacles – and their propensity to negatively impact upon a social worker's use of discretion in the interests of the child – indicate, is that there is need for additional reform before social worker discretion can become the type of feature of the English child protection system that Munro (2010b; 2011a; 2011b) had envisioned.

With that being said, the continued absence of follow-up enquiry or indeed commentary since the Munro Review – especially on the issue of social worker discretion in the interests of the child – is perhaps indicative of a lack of political and/or social appetite for achieving additional reform of the child protection system at this time. It is certainly noteworthy how, during recent years, the

Conservative administration, along with their Coalition partners, who commissioned the Review, have said little of it, or the progress towards achieving its recommended reforms. Furthermore, it could be argued that they have taken steps counter to the Review's recommendations – for example, in the decision to cease funding to The College of Social Work, leading to its short-lived tenure, and subsequent demise.

At the time of writing the current political landscape is one that is dominated by the spectre of Brexit (and to a lesser degree the various 'costs' associated with nearly ten years of 'austerity'). However, the history of the English child protection system would suggest that there will again come a time (perhaps in the not too distant future) where some observed tragedy (as in the case of Peter Connelly, Victoria Climbié and Maria Colwell), will push the task of further improving the system in the interests of the individual child to the top of the political agenda. At that time, we might expect (given the precedent set by the Munro Review) additional discussions about the value of the discretionary space, and of social worker discretion.

It is within these discussions that the messages arising from this study become particularly important. Namely, that for child protection social workers to more consistently exercise their discretion in the interests of the child, then there is a need to address the enduring barriers that were seen to render discretion, in certain contexts, less 'valuable' than compliance with prescription, and more 'risky' than other defensive behaviours. This includes the restriction and/or minimisation

of the discretionary space, and the upward – or indeed, outward – delegation of a decision.

Until such time, the extent to which social workers are able, and indeed choose, to employ their discretion in the interests of the individual child is likely to vary, which will, according to Munro (2010b; 2011a; 2011b) limit the ‘effectiveness’ with which children can be supported and protected, and thus, rather ironically, increase the likelihood of tragedy occurring.

Having elucidated the main findings of this study and considered them in the context of the wider literature, I will, in the next chapter, conclude this thesis with a summary of its constituent parts; its limitations; and the implications that emerge for future enquiry.

CHAPTER 8 – SUMMARY AND CONCLUSION

8.0 Introduction

This chapter is divided into two parts. Firstly, I provide an overview of the study underpinning this thesis, highlighting the main conclusions which have emerged. Secondly, I consider the limitations of the study, identifying implications for further research.

8.1 Overview of study and main conclusions

In 2012 Eileen Munro published her 'Progress Report... towards a child-centred system' (Munro, 2012: 1). The paper reflected on the degree of change evidenced in the year since Munro had concluded her formal review of the English child protection system. At that time, I was a practising child protection social worker and had read each of Munro's three review reports several times over. As such, I was familiar with Munro's main arguments for how the child protection system might be improved.

Of the different ideas posited within the 'Munro Review', the one which resonated most from the perspective of a practitioner was that statutory child protection social workers should be better enabled and encouraged to employ their discretion in the interests of the individual child, with the implication being that this would improve the system's capacity to cater for the needs of all children, not only those whose circumstances fitted neatly within predefined cohorts. Such a change would, according to Munro (2011b), cultivate a system that was more 'child-centred' (p.1) and thus 'effective' (p.23).

However, absent from the 2012 paper was evidence of follow-up enquiry which sought to explore the extent to which contemporary child protection social workers were employing their discretion in the interests of the individual child. Thus, shortly after the publication of the 'Progress Report', I submitted a thesis proposal to Manchester Metropolitan University citing my aim of addressing this gap in the knowledge area.

At the time of writing it is almost 7 years since my proposal was accepted, during which time I have undertaken several tasks that have facilitated the writing of this thesis. These have included the refinement of my research focus towards structural discretion (see Chapter 1); a comprehensive review of the existing literature and development of an empirical framework with which to inform my study (see Chapter 2); and the undertaking of an 18-month ethnography of one local authority child protection team (see Chapter 3).

Underpinning my enquiry was a series of research aims (see Section 3.1), which led me to consider where participating social workers were encountering discretionary space and when they were choosing to employ their discretion; how systemic factors were impacting upon the social worker's discretionary space and choice; and the conclusions that could be made about the realisation of this element of Munro's image of a 'child-centred' system.

In accordance with my critical realist ethnographic framework (see Section 3.2), the findings to emerge from this study were 'grounded' in the participants' own perspectives and experiences of – as well as the language used to describe – their

working environment and the causal structures, and processes, which were said to underpin their discretionary space and choice (Kempster and Parry, 2014). Indeed, my goal throughout the study has been to recount these experiences and the participants' explanations for them. Whilst another group of participants may have had different experiences (and thus perhaps also a different perspective about the manifestation of the social worker's discretionary space and choice), the results of this study offer an accurate and comprehensive account of this cohort of practitioners' views and experiences.

In Chapter 4 I set out the different contexts and tasks in which the social workers of this study were encountering a discretionary space and differentiated them on the basis of the formality with which they were recognised and sanctioned, or because they occurred in circumstances that were outside of managerial control. Whilst I also highlighted areas in which the social worker's discretionary space was restricted, the main conclusion of the chapter was that social worker discretion was not the 'curtailed' phenomena that parts of the wider literature would purport.

In Chapter 5 I outlined the tendency of the social workers to choose discretion within particular types of discretionary space but not in others, highlighting that a good predictor of this was whether the discretionary space had been endorsed by a manager. However, I also detailed a series of other factors which were understood to influence a social worker's willingness to employ discretion within different contexts and linked these to the exceptions to the general tendencies. The main conclusion to emerge from the chapter was the difficulty of knowing when a social

worker would, or would not, choose to employ discretion, with the assertion being that it is more prudent to think in terms of a 'likelihood' and 'tendency' to exercise discretion.

Throughout Chapter 6, I documented the causal structures and processes influencing the social worker's discretionary space and choice. In doing so I highlighted the obstacles to social worker discretion which had endured despite the conclusions and recommendations of the Munro Review, as well as those which might be considered 'new' obstacles relative to the findings of the review. The main conclusions of the chapter were the myriad of factors impacting upon, and continued barriers to, social worker discretion apparent within the study.

Chapter 7 comprised a discussion of the main findings relative to the wider literature. However, I also offered an appraisal of whether the level of social worker discretion exercised was indicative of the 'child-centred' system that Munro had endorsed. Whilst I concluded that there was evidence of significant change relative to Munro's assertion that social worker discretion had been 'eroded', I also suggested that further reform is required if social workers are to more consistently employ their discretion in the interests of the individual child.

8.2 Limitations of the study and implications for further enquiry

This study has, I believe, provided a rigorous and comprehensive account of the extent to which contemporary child protection social workers are employing their discretion in the post-Munro Review world of child protection. This is an important contribution to the existing literature which addresses a notable gap in the

knowledge area, especially in terms of how structural discretion is manifested in contemporary child protection. Further, it provides empirical evidence, which I believe will be useful in any future 'review of progress' relative to the Munro Review findings and recommendations for reform.

That being said, there are a number of limitations to the study which are prudent to consider here. The first pertains to its scope and, by implication, the claims that can and cannot be made, as a result.

Of course, this was a case study of a single and relatively small (in comparison to geographical neighbours) statutory child protection team. The remit of the study did not require any consideration of other local authority child protection teams, and thus the research lacks a comparative element, meaning that the conclusions that can be made are (currently) limited to the setting of Marketon.

Munro (2012; 2016) observes the degree of variance in how local authorities have embraced her recommendations for reform, with, for example, differing levels of local emphasis on compliance with process and prescription. Therefore, it is possible that the factors which have been identified within this study as impacting upon social worker discretionary space and choice are being experienced differently elsewhere.

To address this, the study should be extended to other statutory child protection teams around the country. This will help to ascertain whether the results can be replicated, and indeed, whether my conclusions are representative of the national,

rather than a local, context. This would enable a more authoritative comment on the pervasiveness of not only social worker discretion within the English child protection system, but also, of the enduring barriers to discretionary space and choice, and as to the realisation of this element of Munro's more 'child-centred' system.

For example, additional enquiry would facilitate a greater understating of whether other practising social workers identify factors like the 'Baby P effect' and/or the government policy of 'austerity' as influences upon their use of discretion; and if other child protection teams consider issues such as a fear of being blamed by the media and/or politicians, and of a local culture of inspection preparation, as continued obstacles to discretionary space and choice.

Another limitation of this study is that its focus is largely limited to the views and experiences of the statutory social worker – with the local manager's contribution being confined to the initial stages of the enquiry. As such, the study generally failed to provide an account of how other stakeholders (beyond the child protection social worker) accounted for frontline discretion; the causal processes underpinning discretionary space and choice; and the obstacles to social workers exercising discretion in the interests of the child.

As both this study and the wider literature highlight how these other stakeholders (including the team manager, senior manager, Independent Reviewing Officer, other child protection professionals, and the service user) can influence the social worker's discretionary space and choice, future research might seek to better

include the testimonies of these individuals so as to provide a more thorough account of how and why social worker discretion is manifesting at the frontline of service provision.

This, I believe would further elucidate ideas about not only the value of social worker discretion to the child protection system, but would also facilitate discussion about the necessary changes to the system (and the reality of achieving these changes) if statutory child protection social workers are to more consistently exercise their discretion in the interests of the individual child.

Finally, whilst this study has engaged with much of the empirical framework derived from the wider literature (see Chapter 2), there remain areas which were not addressed within this study, but which warrant further exploration. This includes a more comprehensive exploration on those features of the social worker-manager relationship that engender not only the granting of discretionary space, but also a social worker's willingness to employ their discretion (see Evans 2010; 2011); how differing notions of 'professionalism' might impact upon both discretionary space and choice (see Evans 2013); and whether Ellis' (2011; 2014) 'Taxonomy of Discretion' can be applied to a child protection context.

Whilst the aims of this study did not facilitate an exploration of any of these areas, they remain valid fields for additional enquiry, which might be incorporated by future researchers, seeking to extend, or build upon, the results of this study.

8.3 Conclusion

In conclusion, the focus of this study has been the level of structural discretion (discretionary space) available to contemporary frontline social workers practising in the English child protection system. It highlights areas where these social workers continue to experience opportunities to employ their discretion and distinguishes these by the type of discretionary space available. It also supports the claims of some that on encountering a discretionary space the question becomes whether a social worker is willing to exercise discretion. The study highlights the structures and processes that continue to impede the discretionary space available to the social worker as well as their propensity to choose to exercise discretion within the discretionary space.

The origin of the study was the Munro Review of Child Protection and specifically its conclusion that social workers should be better enabled and encouraged to employ discretion in the interests of the individual child. In these terms, the study suggests some progress in respect to the notion that the child protection social worker's structural discretion has been 'eroded' or else 'curtailed'. However, it also highlights that further reform may be required before Munro's image for a more 'child-centred' and thus 'effective' system – in which social workers consistently exercise discretion in the interests of the child – can be realised.

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APPENDIX 1: WALLACE AND WRAY'S 'CRITICAL SYNOPSIS OF TEXT' FRAMEWORK

1. Why am I reading this? (i.e. what am I trying to find out?)
2. What are the authors trying to do in writing this? (e.g. report on research, review others' work, develop theory, express particular views or opinions, criticise what is currently done, advise about what should be done in the future)
3. What are the authors saying which is relevant to what I want to find out? (What is the essence of the message conveyed by the text? How does it relate to my interests?)
4. How convincing is what the authors are saying? (evaluating the quality of the argument and digging beneath the assumptions made by the author)
5. In conclusion, what use can I make of this? (what is your stance towards this text? To what extent are you likely to draw upon it and in which respects?)

Taken from Wallace and Wray (2011: 37-41).

APPENDIX 2: DEMOGRAPHIC INFORMATION FOR RESEARCH PARTICIPANTS

Demographically, each of the team manager participants held a Diploma in Social Work (obtained prior to 2005); each had practiced as a child protection social worker for at least two years before assuming a managerial role; and their mean managerial experience at the point of participation was 4 years and 5 months (with a mean of 2 years and 7 months on Marketon's CPT).

Of the social worker participants, each held either a Bachelors or Masters Degree in Social Work (acquired after 2008); their mean level of child protection social work experience at the point of participation was 2 years and 8 months (with a mean of 2 years and 2 months on the CPT).

Whilst the age of the manager participants ranged from 36 -47 years old; the social workers' age ranged from 26-54 years old. Furthermore, all the participants were British nationals, with a stated first language of 'English'; all bar one classified themselves as 'White British'; and of the 25 different CPT staff to participate within the focus groups, questionnaires and interviews, 23 identified as 'female'; whereas only 2 identified as 'male'.

APPENDIX 3: PARTICIPANT INFORMATION SHEET (OBSERVATION)

To what extent are frontline statutory social workers employing their discretion, in the post-Munro Review world of child protection?

Statement of Invitation

Dear prospective participant, you are invited to take part in the PhD research project of Ciarán Murphy, a research student of Manchester Metropolitan University (the research is organised and sponsored by the Department of Social Care and Social Work). This information sheet will explain why the research is being carried out and what the research will involve for you, if you decide to take part. Please take some time to read the following carefully, and ask questions if anything you read is not clear, or you would like more information. Please take your time to decide whether or not you wish to take part.

Purpose of the Study

In 2011 Professor Eileen Munro published her final report into the Review of Child Protection in England. This concluded that the conditions under which social workers and managers were practising were not conducive to safe and effective practice, and that the system had lost sight of the best interests of children. Munro (2011) highlighted that front-line workers were burdened by unnecessary bureaucracy, a climate of fear and blame, and a culture of compliance with procedures. She produced a series of recommendations which she outlined when [t]aken together ... will redress the balance between prescription and the exercise of [discretion] so that those working in child protection are able to stay child-centred (Munro, 2011:10).

It is now over 3.5 years since the publication of the Munro Review. To this date there has been limited exploration as to the progress that has been made in respect to the experience of frontline staff in the children protection system. My research will consider whether there has been any lasting impact of the Munro recommendations, in respect to the extent to which frontline social workers are

able to employ discretion in how to best meet the needs of the individual child.

Why have you been invited to participate?

You have been invited as you are either a qualified social worker currently employed by [Marketon's Child Protection Team] and I want to hear about your experience of safeguarding post Munro.

Do you have to take part?

No, you **do not** have to take part in this study, and participation is voluntary. If you do decide to participate, but later change your mind; then please be reassured that you are free to withdraw at any time, without penalty, and without giving a reason. You are also entitled to request that any contributions that you have already made not be included, but be discarded from the research project. If you withdraw before the end of the study, but you do not request that all past contributions be discarded, then I will continue to use the data that you have contributed, whilst continuing to ensure your privacy and confidentiality are maintained.

What will participation entail?

If you decide to participate in the research project, then firstly, you will be asked to complete the consent form attached and return to me (via email). This is to indicate your agreement to take part and acknowledge that you understand the research project processes. Once you have provided consent to take part in the study, you will not immediately be asked to do anything different, but you may notice that at times in which I am in your presence I take a note of the conversations that are taking place, including your conversations. If on such occasions you decide that you would rather that I do not make a note of conversations that you are part of, you have the right to ask me not to make a note, and I will endeavour to comply.

What are the advantages of taking part?

I believe that this is an important opportunity for you as a social worker to report back about what is actually taking place on the front-line, and to challenge the pervading negative narrative in respect to the daily practice of front-line child protection practitioners. It will be an opportunity for you to 'have a voice' and to communicate to the senior management of the local authority (as well as to a wider audience), as to the factors that are supporting / hindering good practice, and what changes could be made to promote better practice in the best interests of social workers, your employer, and importantly the children and families with whom you work. This will also make an important and timely contribution to the (currently sparse) body of knowledge about the impact and legacy of the Munro Review. I hope (and expect) that if you participate in this study, you will experience it to be an interesting and rewarding exercise.

Confidentiality

Please be advised that all the information collected as part of the study will be kept private and confidential (this includes the name of individuals, the local authority, department and team being studied). All information which is collected about you during the course of the research will also be kept strictly confidential. All data will be stored securely on an encrypted hard drive that will be locked in a secure filing cabinet, and will be available only to me and my two supervisors. This applies in all circumstances, unless you as a participant specifically give me permission in writing to make it available to others. No reference will be made in oral or written reports which could link you as a participant to the study, and as stated above, steps will be taken to ensure that no piece of information is attributable to any individual. All transcribed data will be kept for a period of 3 years following the completion of my PhD, after which it will be destroyed. During this time, I may use the collected data for further publications, such as journal articles. The only time when confidentiality will be broken is if I feel that you as a participant disclose practice which does not correspond with that which is expected of you as a social worker (and outlined by The Health Care Professions Council code of conduct), which places 'the health, safety or wellbeing of a service user in danger' (Health Care Professions Council,

2012: 8) or places yourself, the profession and / or the client / service user in an ethically compromised position. On any occasion in which I am compelled to report such information to the relevant person(s), then I will communicate this to you beforehand.

What will happen to the results of the research study?

The results from the study will be used in my PhD thesis, which is due for publication in 2018. I will also invite you to attend a future Local Authority seminar in which I will share the research findings.

Further information and contact details:

For all further information please in the first instance contact me:

Ciarán Murphy [email address] [phone number]

If you have a problem that I am unable to resolve and you wish to complain formally, you can do this by contacting my supervisors, Professor Hugh McLaughlin or Ann Potter at: [email addresses]

APPENDIX 4: EXTRACT FROM 'PARTICIPANT INFORMATION SHEET (FOCUS GROUP)'

...

What will participation entail?

If you decide to participate in the research project, then firstly, you will be asked to sign a consent form which gives me permission to collect data from you about your experiences of being a social worker / social work manager; whilst also acknowledging that you understand the research project processes. Once you have provided consent to take part in the study, you will be asked to participate in a focus group with 5-7 other participants. If you choose to participate in the focus group, then you will be invited to attend at a specified date and time, and participate in the group discussion about the identified themes. The focus group will take up a maximum of 1.5 hours of your time. Please be advised that I am the sole researcher, which means that I will be the focus group facilitator. With your permission, I will employ audio equipment within the focus group, so as to ensure that all valuable data is recorded. The audio recordings will be transcribed within 48 hours of the data collection, after which the individual recording will be permanently deleted. You will have the opportunity to review written transcripts of your contribution if you wish, and add to, or edit your responses.

...

APPENDIX 5: EXTRACT FROM 'PARTICIPANT INFORMATION SHEET (QUESTIONNAIRE)'

...

What will participation entail?

If you decide to participate in the research project, then you will be asked to complete a questionnaire. By completing the questionnaire you will be acknowledging that you have read this information sheet, had the opportunity to ask questions about the study, and be giving consent to take part with the research data collection. The questionnaire will ask you about your experiences of being a social worker. You will be asked to complete the questionnaire openly and honestly, and submit it by an agreed date. The questionnaire should take no more than 15 minutes to complete, however, you may take as much time as you wish in completing it.

...

APPENDIX 6: EXTRACT FROM 'PARTICIPANT INFORMATION SHEET (INTERVIEW)'

...

What will participation entail?

If you decide to participate in the research project, then firstly, you will be asked to sign a consent form which gives me permission to collect data from you about your experiences of being a social worker; whilst also acknowledging that you understand the research project processes. Once you have provided consent to take part in the study, you will be asked to participate in an interview, in which you will be asked about your experiences. I will invite you to attend for your individual interview at an agreeable date and time. The interview will take place at a mutually convenient location and take up a maximum of 2 hours of your time. Please be advised that I am the sole researcher, which means that I will be the interviewer for your interview (no other parties will be present). With your permission, I will employ audio equipment within the interview, so as to ensure that all valuable data is recorded. The audio recordings will be transcribed within 48 hours of the data collection, after which the individual recording will be permanently deleted. You will have the opportunity to review written transcripts of your contribution if you wish, and add to, or edit your responses.

...

APPENDIX 7: CONSENT FORM (OBSERVATION)

To what extent are frontline statutory social workers employing their discretion, in the post-Munro Review world of child protection?

Ciarán Murphy, a PhD student at Manchester Metropolitan University is conducting research that will explore the research question: ***To what extent are frontline statutory social workers employing their discretion, in the post-Munro Review world of child protection?*** You have been invited to participate in this research as outlined in the Participant Information Sheet. Prior to taking part in the research study, please could you confirm the following by putting your initials in each appropriate box, and completing the required fields:

1. I confirm that I have read and understood the Participant Information Sheet and have had the opportunity to ask questions about the data collection procedure.
2. I understand that my participation is voluntary and that I am free to withdraw at any time without giving a reason to the named researcher.
3. I understand that my responses will remain anonymous; all information about me will remain confidential; and that I will not be personally identified in publications or in subsequent reports (including those to my employer).
4. I am aware that the researcher may be compelled to break confidentiality if he assesses that I am disclosing practice which is unethical or harmful, but that he will inform me of this decision prior to bringing it to the attention of others.

5. I agree to being observed, but understand that I can request that any observations made are not included within the researcher's report.
6. I understand that all information that I provide will be stored on an encrypted external hard drive in a locked cabinet.

By initialling the boxes above I confirm that I have read about, and understand the purpose, nature and content of this research project, and that I hereby give consent to participate the data collection.

| | | |
|---------------------|------|-----------|
| Name of Participant | Date | Signature |
|---------------------|------|-----------|

| | | |
|------------|------|-----------|
| Researcher | Date | Signature |
|------------|------|-----------|

To be signed and dated in presence of the participant

Once this has been signed, you will receive a copy of your signed and dated consent form and information sheet.

If you have any question or queries about this research and your participation, then please don't hesitate to contact me on the details below.

| | | |
|---------------|-----------------|----------------|
| Ciarán Murphy | [email address] | [phone number] |
|---------------|-----------------|----------------|

Alternatively you can contact my supervisors: [email addresses]

APPENDIX 8: EXTRACT FROM 'CONSENT FORM (FOCUS GROUP)'

...

5. I understand that as part of the focus group, I will be sharing my thoughts with others, but that there will be an agreement that what is shared within the group remains confidential, and should not be shared outside of the focus group forum.
6. I understand that my responses may be audio recorded and used for analysis for this research project, but that the recordings will not be shared with anyone other than the researcher and his supervisors.
7. I understand that all information that I provide will be stored on an encrypted external hard drive in a locked cabinet.

By initialling the boxes above I confirm that I have read about, and understand the purpose, nature and content of this research project, and that I hereby give consent to participate the data collection.

Name of Participant

Date

Signature

Researcher

Date

Signature

To be signed and dated in presence of the participant

Once this has been signed, you will receive a copy of your signed and dated consent form and information sheet.

...

APPENDIX 9: EXTRACT FROM 'CONSENT FORM (INTERVIEW)'

...

5. I understand that my responses may be audio recorded and used for analysis for this research project, but that the recordings will not be shared with anyone other than the researcher and his supervisors.
6. I understand that if I request a transcript of my interview, then it can be made available to me.
7. I understand that all information that I provide will be stored on an encrypted external hard drive in a locked cabinet.

By initialling the boxes above I confirm that I have read about, and understand the purpose, nature and content of this research project, and that I hereby give consent to participate the data collection.

Name of Participant

Date

Signature

Researcher

Date

Signature

To be signed and dated in presence of the participant

Once this has been signed, you will receive a copy of your signed and dated consent form and information sheet.

...

APPENDIX 10: FOCUS GROUP QUESTIONS

Focus Group 1:

1. What do you understand the term 'discretion' to mean in respect to social workers and their practice?
2. How then might you define the notion of 'discretionary space' in relation to social workers and their practice?
3. Where do you as social workers have discretionary space in your practice?
4. What influences whether you have discretionary space?
5. In which discretionary spaces are you more or less likely to choose to employ your discretion?
6. What influences whether you choose to employ discretion within a discretionary space?

Focus Group 2:

1. What do you understand the term 'discretion' to mean in respect to social workers and their practice?
2. How then might you define the notion of 'discretionary space' in relation to social workers and their practice?
3. Where do you think social workers in your team have discretionary space?
4. What influences whether social workers in your team have discretionary space?
5. In which discretionary spaces are social workers in your team more or less likely to choose to employ their discretion?
6. What influences whether social workers in your team choose to employ discretion within a discretionary space?

APPENDIX 11: OPENING PARAGRAPH OF QUESTIONNAIRE

Thank you for completing this questionnaire the results of the survey will be used to help answer the question: *'To what extent are frontline statutory social workers employing their discretion, in the post-Munro world of child protection?'*.

You do not have to complete every question, and can finish the questionnaire at any time without prejudice. All your information will remain confidential to the researcher and his supervisors whilst your anonymity will be maintained through the use of a password-protected file. At the end of the questionnaire you will also be given the opportunity to identify yourself as someone who would be willing to discuss your answers in greater detail with me.

The questionnaire should only take up to 15 minutes to complete.

APPENDIX 12: QUESTIONNAIRE QUESTIONS

Part 1:

Please think about your current social work practice and the organisation in which you are working, and answer the following questions in as much detail as possible:

1. In your social work practice, when do you have the freedom to decide on a next course of action (i.e. when do you have discretionary space)?
2. In your social work practice, when do you not have the freedom to decide on a next course of action (i.e. when do you not have discretionary space)?
3. What key factors enables your use your discretion?
4. What key factors inhibits your use your discretion?
5.
 - a) When in your practice might you choose to use your discretion?
 - b) What factors influence this choice?

You may be aware that in her 'Review of Child Protection' (2010-2011), Eileen Munro found that frontline child protection social workers were frequently unable to use their discretion in deciding how to best meet the needs of a child with whom they were working. Therefore, she made a number of recommendations that she hoped would enable frontline child protection social workers to increasingly use their discretion in their practice decision making.

6. Thinking about Munro's findings, and based on your experience;
To what extent has the Munro Review impacted upon the level of freedom that you have in your practice to use your discretion? (Please explain your answer).

7. What single thing could your organisation change that would significantly support you in exercising your discretion in the course of your practice?

Part 2:

Please think about your current social work practice and the organisation in which you are working, and answer the following questions, selecting the options which most represent your current practice experience.

8. Generally, when making a practice decision, what most determines how you will choose to proceed?

(Please rate next to each option the level with which it determines how you choose to proceed; where '1' is 'most determines', and '4' is 'least determines' the decision that you arrive at):

- a) What I think is best for the child
- b) What my manager tells me
- c) What the procedures say
- d) Other (please specify)

9. During your last working week, what percentage of your daily practice time is taken up by the following tasks:

(Please select an estimated percentage to the nearest five percent)

- a) Working directly with (including visiting) children and/or their families
- b) Paperwork
- c) Other (please specify)

10. Please indicate (by marking 'X') the level with which you agree with the following statements about your practice decision-making:

| | | | |
|-----------------|-----------------|-----------------|-----------------|
| <i>Strongly</i> | <i>Somewhat</i> | <i>Somewhat</i> | <i>Strongly</i> |
| <i>Agree</i> | <i>Agree</i> | <i>Disagree</i> | <i>Disagree</i> |

| | | | | |
|---|--|--|--|--|
| I am more likely to use discretion in the course of my practice when I feel trusted to do so by my manager | | | | |
| I am less likely to use my discretion with respect to a child when I don't have enough time to spend working directly (including visiting) with that child. | | | | |
| Having a good knowledge of a child increases my willingness to use discretion with respect to that child. | | | | |
| Having irregular reflective supervision impedes my confidence to use discretion. | | | | |
| Fear of something going wrong prevents me from using my discretion. | | | | |
| The knowledge that my manager would back me up if something went wrong enables me to use my discretion. | | | | |
| Fear that my organisation would not back me up if something went wrong prevents me from using my discretion. | | | | |

| | | | | |
|--|--|--|--|--|
| Fear of being named in the media if something went wrong prevents me from using my discretion. | | | | |
| The actions and behaviours of other professionals (i.e. IRO's, health and education professionals) prevents me from using my discretion. | | | | |
| The actions and behaviours of senior management enables me to use my discretion. | | | | |

11. Please indicate (by marking 'X') the level with which you agree with the following statements about your experience of practice, including your organisation's culture:

| | <i>Strongly Agree</i> | <i>Somewhat Agree</i> | <i>Somewhat Disagree</i> | <i>Strongly Disagree</i> |
|--|-----------------------|-----------------------|--------------------------|--------------------------|
| The legacy of the Peter Connelly case is still impacting on the system, and the level of demand for child protection services. | | | | |
| A policy of cuts and austerity is impacting upon the demand for child protection services. | | | | |
| The culture here expects social workers to follow procedures in all circumstances. | | | | |

| | | | | |
|--|--|--|--|--|
| The culture here expects social workers to always adhere to timescales when they are applicable. | | | | |
| The culture here encourages social workers to seek the direction of a manager when making a decision. | | | | |
| The culture here is one in which practice is influenced by preparation for an Ofsted Inspection. | | | | |
| The culture here is one in which practice is judged by completion of checklists – ‘ticking boxes’. | | | | |
| The culture here is one in which social workers are expected to record all of their tasks on the ICS system – <i>‘if it’s not on the system, then it hasn’t been done’</i> | | | | |

12. Please indicate (by marking ‘X’) the level with which you agree with the following statements about your working environment:

| | <i>Strongly Agree</i> | <i>Somewhat Agree</i> | <i>Somewhat Disagree</i> | <i>Strongly Disagree</i> |
|--|-----------------------|-----------------------|--------------------------|--------------------------|
| I feel that I generally have enough time to work directly (including visiting) with a child. | | | | |

| | | | | |
|--|--|--|--|--|
| I feel that the amount of time that I spend at my computer is about right. | | | | |
| I feel that I have a manageable caseload. | | | | |
| I feel that my opinions and professional judgment is valued by my manager | | | | |
| I feel that my opinions and professional judgment is valued by other professionals with whom I work. | | | | |

13. In thinking about your child protection work more generally, to what extent do you have the freedom to decide on a next course of action (i.e. use your discretion) in the course of your practice?

| | Never | Rarely | Half the time | Often | Always |
|--|-------|--------|---------------|-------|--------|
| In the course of my practice I use my discretion - | | | | | |

APPENDIX 13: INTERVIEW OPENING STATEMENT; PROMPTS; AND VIGNETTES

Part 1:

Opening statement:

Within this interview I would like to discuss with you your discretionary space as a child protection social worker; when you might choose to use discretion within a discretionary space; and what you think is impacting upon both the discretionary space that you have and your choice within that space.

Please tell me about your discretionary space and choices, and what you think is influencing this?

Prompts:

- Where in your practice do you have discretionary space?
 - Why do you think that you have discretionary space here?
 - What influences this?
- Where in your practice do you not have discretionary space?
 - Why do you think that you have discretionary space here?
 - What influences this?
- Are there times in which you have discretionary space but choose not to use it?
 - Can you give me some examples?
 - What influences this decision?
 - Type of space; confidence; fear; other?
- What within your organisation is impacting upon the level of discretionary space that you have and whether you choose to employ discretion within that space?
 - What is the role of the manager?
 - What about senior management?
 - What about the impact of caseload; ICS; other?

- What external to your organisation is impacting upon the level of discretionary space that you have and whether you choose to employ discretion within that space?
 - What about the impact of demand on service?
 - ... Ofsted?
 - ... media; politicians; other?
- What do you think about the level of discretionary space that you have?
 - Is it/is it not enough? – Why?
 - What other freedoms would you like?
 - Why would these be important?
- How has the level of discretionary space that you are afforded changed?
 - Why do you think that is?

Part 2:

I am going to describe to you a scenario. Please will you tell me how you would choose to respond in the given situation?

Vignette 1:

You are working with a family in which the children are subject to a Child Protection Plan under the category of emotional abuse. The person of most concern is the children's father, who has now been living out of the home for a period of time. During a core group meeting; the father asks you if he could return home on Christmas Day, 'just for a few hours' so that he can eat Christmas dinner with his family. What would be your response?

Prompts:

1. The Core Group was taking place at School.
2. The time of the request is Christmas Eve at 6.30pm; your manager has left for Christmas, and there is no one left in the office.
3. You know that the children's wishes are for the father to return.

4. The father has made good progress accessing therapeutic courses and there have been no concerns about his behaviour since he has been out of the home.
5. The father has a history of violence against the mother on Christmas Day.

Vignette 2:

After conducting a home visit, you are driving back to the office when you see a mother and children on your caseload. They are walking down the street in the company of another person. You recognise this person, and know that they are considered to pose a risk to children. What would be your response?

Prompts:

1. Your manager is not in work today.
2. You consider this mother to be particularly vulnerable.
3. You know that the individual poses a sexual risk to young children.
4. You see the individual harming the mother and/or child.

APPENDIX 14: PERMISSION FROM ADCS TO CONDUCT RESEARCH

From: *****

Sent: 10 September 2013 15:48

To: Murphy, Ciaran

Subject: RE: Permission to access staff and necessary materials

Ciaran,

This is agreed; you can access the staff and all necessary materials.

Thanks.

Assistant Director

Children's Services

From: Murphy, Ciaran

Sent: 06 September 2013 13:59

To: *****

Subject: Permission to access staff and necessary materials - PhD

Hi *****,

I am planning ahead for my ethical approval, and when I hand in the ethics forms to MMU as part of the formal PhD proposal; I therefore need written confirmation that as Assistant Director of Children's Services, you have agreed that as part of my research piece, I can access [Marketon] Children's Services staff and documents.

I know we have discussed this and you have given verbal permission, but please can you send an email back confirming that you have agreed to this, so that I can include this with my paperwork.

With thanks,

Ciaran Murphy

Social Worker

APPENDIX 15: ETHICAL APPROVAL FACULTY ACADEMIC ETHICS COMMITTEE

MANCHESTER METROPOLITAN UNIVERSITY FACULTY OF HEALTH, PSYCHOLOGY

AND SOCIAL CARE

MEMORANDUM

FACULTY ACADEMIC ETHICS COMMITTEE

To: Ciaran Murphy

From: Prof Carol Haigh

Date: 26/11/2014

Subject: Ethics Application 1259

Title: *To what extent are frontline statutory social workers employing their discretion in the post-Munro Review world of child protection?*

Thank you for your application for ethical approval.

The Faculty Academic Ethics Committee review process has recommended approval of your ethics application. This approval is granted for 42 months for full-time students or staff and 60 months for part-time students. Extensions to the approval period can be requested.

If your research changes you might need to seek ethical approval for the amendments. Please request an amendment form.

We wish you every success with your project.

Prof Carol Haigh and Prof Jois Stansfield Chair and Deputy Chair Faculty Academic Ethics Committee

APPENDIX 16: MARKETON 'STANDARDS OF GOOD PRACTICE: CHILD PROTECTION'

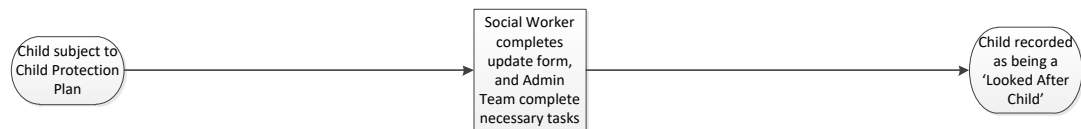
| 5.0 Child Protection | |
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| 5.1 | I have informed the child, their family and key agencies that I am their worker and I have given them details of how to contact me and the Emergency Duty Team. |
| 5.2 | The focus of my work is to listen to the voice of the child and their whole family and together with them and members of the Core Group reduce the risks that have been identified. |
| 5.3 | I have ensured that the first Core Group meeting with the child (where appropriate), the family and all the key agencies (members of the Core Group) has taken place within 10 working days of the Initial Child Protection Conference. The Child Protection Plan is agreed upon in this meeting and is owned by the Core Group. |
| 5.4 | I have ensured at the initial Core Group that parents/carers know how we will work together to support them with what needs to change and the timescales. |
| 5.5 | I have ensured that the Core Group has met every 4 weeks and that a copy of the Child Protection Plan is available at Core Groups, is central to the review and is updated within 10 working days after each Core Group. |
| 5.6 | I have ensured that I have had a discussion with members of the Core Group in relation to the chairing and minute taking of Core Group Meetings (as per Working Together 2015). In exceptional circumstances, if I cannot attend the Core Group meeting, this should result in the meeting |

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| | being chaired in my absence and the minutes of the meeting being sent to me. |
| 5.7 | I have ensured that a record of the Core Group meeting is recorded on the ICS and sent out to all attendees within 3 working days of the meeting. |
| 5.8 | I have ensured that I understand the role of other adults (including fathers, male partners and absent parents) in the household and that any new members of the household have been properly assessed. |
| 5.9 | I have undertaken visits to the child according to their plan (but at least every 28 days), and recorded this on the ICS within 1 working day of the visit. |
| 5.10 | <p>I have seen the child alone, listened to them or observed them and recorded their wishes and feelings properly.</p> <p>I have ensured that the visits are focussed on the identified concerns and that I have recorded what the child is.</p> |
| 5.11 | I have checked that the home environment is of a suitable standard for a child to live in. |
| 5.12 | I have used my supervision to reflect on my feelings about the child's circumstances, to review the plan and to ensure that I am putting the child first in my considerations. |
| 5.13 | I have completed my Report for the Child Protection Review at least 7 working days before conference, have shared this with the parents/carers and the child at least 2 days hours before the meeting, and I have left a copy of the report with the parents/carers. |

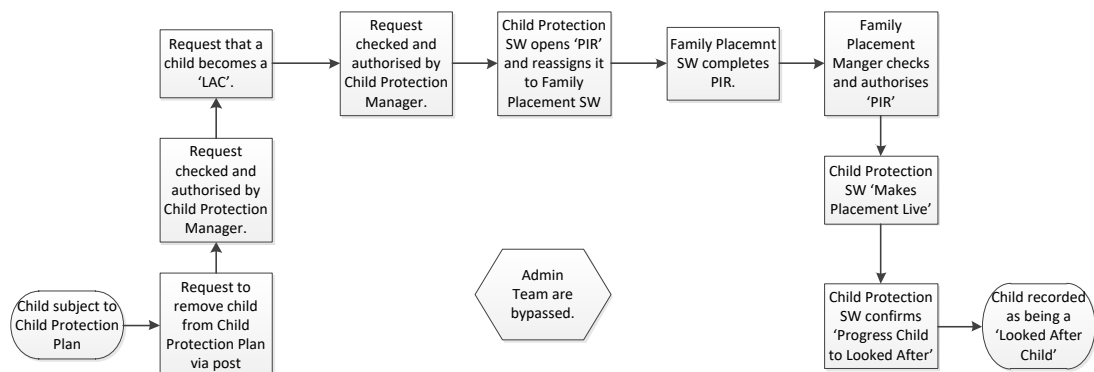
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| 5.14 | I have fully considered with my manager at each Review whether a legal planning meeting is required to ensure the right planning is in place for the child and there is no drift. |
| 5.15 | I have ensured that parents/carers know they can be accompanied by a relative, friend or independent advocate to enable them to participate and provide them with support at the Child Protection Conference. |
| 5.16 | I have identified any additional concerns about the wellbeing of the child, I have discussed these with my manager and the Conference Chair as they occur and agreed any necessary actions. |
| 5.17 | I will ensure that I use relevant tools and specialist assessments where this is applicable (e.g. Graded Care Profile; up dated C&F Assessment; Risk Assessment etc). I will ensure that an assessment clearly setting out the reduction in risks is completed prior to the review CP Conference if my view is that the CP Plan should be ended. |
| 5.18 | I will ensure that the Case Summary is updated every 3 months or more often if there is a significant development. |

APPENDIX 17: CONTRASTING THE PROCESS OF RECORDING A CHILD AS 'LAC' BETWEEN THE 'OLD' AND 'NEW' ICS VARIANT

Old Process, using database that did not utilise workflow processes



Process using new system; task dictated by work flow processes



APPENDIX 18: OFSTED CATEGORIES OF INSPECTION JUDGMENT (2012)

All [Ofsted] inspection judgments are made using the following four-point scale:

- 'Outstanding' (Grade 1) A service that significantly exceeds minimum requirements
- 'Good' (Grade 2) A service that exceeds minimum requirements
- 'Adequate' (Grade 3) A service that only meets minimum requirements
- 'Inadequate' (Grade 4) A service that does not meet minimum requirements

APPENDIX 19: LIST OF LOCAL AUTHORITY ACRONYMS

CIN – Child in Need

CP – Child Protection

CPC – Child Protection Conference

CPP – Child Protection Plan

FCM – Final Care Planning Meeting

ICO – Interim Care Order

IRO – Independent Reviewing Officer

LPM – Legal Planning Meeting

MASH – Multi-Agency Safeguarding Hub

PPO – Police Protection Order¹²

SGO – Special Guardianship Order

TAC – Team Around the Child

TAF – Team Around the Family

¹² Whilst no such ‘order’ exists, this term was used to denote the power of the police to remove children to a place of safety and protection.