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The ‘team’ in child and family social work: Exploratory findings from a longitudinal study on factors influencing the retention of child and family social workers in England.

Abstract: This paper draws upon qualitative data from a Department for Education (DfE) funded longitudinal study of child and family social workers in England, carried out between 2018 and 2022 exploring factors affecting recruitment and retention, involving annual surveys and follow-up interviews in each year of the project (Johnson et al., 2019, 2020, 2021, 2022, 2023).

The changing practice environment during the study – pre, during and post Covid - provided a unique opportunity to consider practitioners’ experiences of teams in the workplace during a challenging context. The paper reports the inductive discovery of the importance of teams for retention of staff. Findings include perspectives on team composition; ways of working; leadership, and the relationship between team experiences and worker satisfaction. Key messages include the importance of team support; of loyalty and commitment to the team; and the value of including non-social workers as team members.

The paper concludes with messages about the contributions of supportive teams to practice improvement and staff retention, and suggestions for further research.

Key words: Child and family social work; social work teams; recruitment and retention.

Introduction

This paper discusses the significance of social work teams and team membership in the working lives of Local Authority (LA) children and family (CF) social workers. Team experiences featured as one of several ‘push’ and ‘pull’ factors for social workers who took part in a Department for Education (DfE) funded 5-year longitudinal study of recruitment and retention carried out between 2018 and 2022 (Johnson et al., 2019, 2020, 2021, 2022, 2023). Recruitment and retention are not new issues for CF social work (Baginsky, 2013; Research in Practice, 2015), but the percentage of social workers leaving the sector with less than 5 years’ service in the period prior to the study – 63% of leavers in 2017, and 68% in 2018 (DfE, 2018, 2019) – suggested a need for a deeper understanding of the problem. The study aimed to track the careers of LA CF social workers, including looking at career pathways, choices and decisions and how these differ according to a range of factors, including roles and responsibilities, demographics and geographical region (Johnson et al., 2019, p.19).

The paper begins with a consideration of teams in CF social work, informed by recent literature; explains the study methodology; and presents findings relating to participants’ experiences of working in teams. The study drew on quantitative survey results and qualitative interviews, and this paper focuses primarily on data from the qualitative element, over the five years of the project. Interviews were semi-structured, following a themed schedule, and were recorded and professionally transcribed. Each year the DfE identified the key issues to be covered in the interviews, based on the survey findings and on topics of current policy interest to the sector.

The timing of the study provided a unique, though unexpected, opportunity to hear from CF social workers during a time of national emergency. The Covid-19 pandemic was a personal existential threat, and through the impact of ‘lockdowns’, presented additional emotional pressures and professional demands upon social workers, as of course for many other groups of workers. Changes to working practices because of the Covid 19 epidemic inevitably impacted on how teams could operate.

The importance of teams arose from the first year of the study as one factor affecting job satisfaction, particularly as a source of support and focus of loyalty (Johnson et al., 2019). Although none of the qualitative interview schedules included a focus on teams, teams were often mentioned in responses to other questions about the factors affecting job satisfaction and retention. In curating and analysing these comments, the meaning of teams to the social workers who took part was discovered inductively.

In this paper, we consider what we have learnt about the meaning of ‘team’ to CF social workers, and in the discussion we suggest how this might support employers to maximise the potential of teams for retaining staff in the sector, with reference to the secure base model (Schofield & Beek, 2014), as adapted for application to teams by Biggart et al., (2017) and Cook et al., (2020).

‘Teams’ in child and family social work – literature review

Although social workers in our study used the term ‘team’ frequently in talking about their experiences, no clear definition of ‘teams’ emerged, and similarly there is a lack of clarity in the literature about the nature of teams in social work. Contemporary literature relating to social work teams, what influences them, or how the team and individuals within it experience different aspects of their work, is challenging to locate; and even identifying an accepted definition for “teams” in social work practice poses difficulties. Much of the academic research on social work teams from the last decade relates to inter-professional working, and how to achieve the best outcomes for service users in specific areas of practice. Examples include work on multi-agency family meetings (Kim et al., 2019), and on interprofessional teamwork in a hospital setting (Craig et al., 2020).

Rape Žibera (2022, pp.673-674) proposes the following definitions, based on a scoping study and systematic review of the literature on teams in social work. ‘Team’ is a descriptive term for a “group of people (with more than two professionals) who work together in different ways until the goal (objective) of the cooperation has been achieved”. ‘Teamwork’ refers to what happens within teams: “a co-creative process in which at least three members are equally involved, working together (through different forms) within the working relationship to achieve a common goal”. Her definition suggests that members of ‘teams’ work together on shared projects. Teams in social work often involve professionals of the same discipline (i.e. social workers), but she implies that ‘teamwork’ as a process concerned with creating solutions drawing on different skills, knowledge and ideas, may usefully bring together social workers and other professionals, and where possible, include at least one expert by experience.

There is an extensive literature on teamwork in organisations of all kinds, including functional, psychodynamic and sociological theoretical perspectives, informing analysis of the roles that team members play within teams and the classification of team models. According to Adair’s (1986) model for example, teams have the following characteristics: a clear purpose and task; agreed aims and objectives; clarity about individual responsibilities of team members; a plan to work towards agreed objectives setting out

realistic targets and priorities; and support and resources such as appropriate working conditions, training and supervision. Adair (1986, p.140) claims that “if there is a team, it will approach those tasks in a different way from a mere collection of individuals”.

In CF social work practice, social workers may be members of various multi-professional or inter-agency teams. The “team around the child” for example, is a systems-based model originating in work with children with disabilities (Limbrick, 2004) but now also used in children’s safeguarding. Such teams include the child or young person, their family and the group of professionals working with them, with the aim of sharing information and designing a plan to support the child’s needs. Social workers may be team members or act as lead professionals, depending on circumstances. CF social workers may also be members of Multi-Agency Safeguarding Hub (MASH) teams, which triage and assess safeguarding concerns for both children and adults, bringing together representatives from a range of agencies (e.g. police, housing, substance misuse services). Some CF social workers are employed in specialist services alongside other professionals, such as Youth Offending Teams or Child and Adolescent Mental Health Service teams. It could be argued that these examples satisfy Rape Žibera’s (2022) definition of teamwork, involving members from different disciplines working together to achieve a goal, although whether they would agree that there is or should be, “equal involvement” of all parties is an open question.

However, social workers in the study interviews rarely referred to work within multi-professional or interdisciplinary teams. According to the British Association of Social Workers (BASW, 2020), the majority of children’s social workers in England are employed in LA Children’s Services (CS) Departments in either functional or locality-based social worker-led CF social work ‘teams’. This picture is supported by the participants in our study, whose responses suggested that most LAs organise their CS Departments by grouping staff together according to the focus of their practice (e.g. fostering, child protection, children with disabilities, and some ‘specialist’ areas such as therapeutic services); to points along the journey that children typically take once referred to children’s services (e.g. duty and assessment; short-term or long-term; court work); and/or geographically.

As well as areas of practice, participants also talked about teams as the specific group of people with whom they worked closely day to day in the delivery of services, and who were a key source of mutual support. The supportive, collaborative potential of teams is considered an important benefit of teamwork in organisations, by reducing stress and supporting staff retention. Some research has attempted to theorise this ‘supportive’ function in social work settings. For example, Adamson et al. (2018) propose a four-stage model of interprofessional empathy as a route to improving interprofessional teamwork. This includes conscious interactions, dialogical communication, understanding difference and nurturing collective spirit. Foster (2017) suggests a five-factor model could be used to assess the success of a team, including coherent policies, management support structures, mental space, autonomy, and professional skills. Biggart et al (2017) consider the usefulness of the secure base model, originally developed by Schofield & Beek (2014) to support children in fostered and adopted families to develop positive relationships, for social work teams. Later in the paper, we consider the relevance of their model as a template for developing supportive and effective teams, which might contribute towards promoting retention of CF social workers.

The Research Study

This paper draws upon five years of data from a DfE funded longitudinal study of CF social workers in England, carried out between 2018 and 2022 (Johnson et al., 2019;2020;2021;2022;2023). The research was carried out jointly between IFF Research an independent research organisation, and an academic team, which led on the qualitative element of the work. Ethical approval was given by Manchester Metropolitan University, and the project adhered to internationally accepted ethical guidelines, abiding by the Code of Conduct of the Market Research Society (2023).

Methods

The study adopted a mixed methods design (Cresswell & Cresswell, 2017) to explore factors affecting the recruitment and retention of social workers. It involved analysis of questionnaires from 5,621 respondents at Wave 1, reducing over the period to 1283 respondents at Wave 5, and of 200 follow-up qualitative interviews, 40 in each year.

This paper focuses on data from the 200 qualitative interviews over the five years of the study. Interviews were semi-structured, following a themed schedule, and were recorded and professionally transcribed. Purposively selected survey participants who had expressed willingness to take part in the interviews were sent email invitations with information about consent and confidentiality, and those who agreed were contacted for interview. Most interview participants were social work practitioners, although the sample included a small number of team leaders and senior managers.

In order to analyse the data thematic analysis (TA) was used, and whilst Braun and Clarke (2006, p.78) have suggested that TA is ‘essentially independent of theory and epistemology’ this position has evolved over time with Braun and Clarke (2019) later aligning it with a qualitative paradigm. Wiltshire and Ronkainen (2021) argue that TA is useful for exploratory studies based on a critical realist approach where there is limited knowledge of the subject under research. In contrast, explanatory studies should be the aim for studies where there is significant knowledge of a subject area. Critical realism accepts the epistemological position that reality ‘cannot be apprehended directly as it is processed through our brains, language, culture, methods and so on’ (Wiltshire and Ronkainen, 2021 p.163). The world is accessible through the perspectives of research respondents including those of the researcher. Individual respondents’ interpretations provide different vantage points yielding different perspectives (Author’s own 2012). The ‘critical’ in critical realism highlights the fact that researchers are required to be critical of the theories that they use and the explanations that they propose (Stutchbury, 2021)

Transcriptions were divided amongst members of the academic team and the data from each transcription was entered into an interactive Excel spreadsheet under each of the themed areas of the schedule. Each team member read the completed spreadsheet and collaboratively and reflexively reviewed the data to identify richness, nuances similarities and differences before agreeing key themes (Boeije, 2002) Following initial discussions, the team revisited the transcriptions to check for further confirmation of themes, and for any outliers, and to identify relevant examples and quotations. At a final meeting, the team reviewed the data and refined the analysis.

Findings

The study's findings are analysed between the data collection periods covering pre-Covid (Waves 1 and 2), the Covid era (Waves 3 and 4) post-Covid (Wave 5). For ease of reading, we have referred to quotations by wave number rather than by author and publication date. The focus is on team composition; team leadership; team support; the relationship between team experiences and worker satisfaction and working practices. These themes are not mutually exclusive; however, the headings provide a framework for looking at CF social workers' experiences of teams.

Composition of teams

As neither the surveys nor the interviews asked direct questions about the teams that respondents worked in, we have no evidence about the average size of CFSW teams in this sample. Most respondents worked in teams of several qualified social workers - typically, a mix of experienced and newly qualified social workers (NQSWs) - and a team leader with overall responsibility for the whole team, sometimes referred to as a team manager. In most teams, individual social workers were allocated their own 'cases', although often with arrangements for more experienced team members to provide supervision, consultancy and support, with titles such as senior social worker, advanced practitioner, social work consultant or deputy team leader.

There were some examples of teams which included administrative staff and/or social work assistants (undertaking some direct work with service users) as full members, rather than such staff working centrally or across teams, which appeared to be more common, especially post-Covid, as a team leader explained,

Business support is now independent of the team. Before, we used to have admin workers as very much part of our team. They were the eyes and ears, you know, they were very supportive; whereas now they're managed completely separately, and their remits are very clear of what they will do. (W5 p61)

Throughout the study, a significant issue for social workers was the amount of paperwork and administration they needed to complete. This was consistently one of the most cited reasons for people considering leaving LA CF social work (W5, p. 12.), and in W3 (p.68) was the single main source of feeling stressed. It appears that having an admin worker as a full member of a team may be one way of reducing that source of stress. Having other grades of support staff working as part of the team similarly enhanced team performance and reduced stress, as another team leader explained:

You have the luxury of having a social work assistant, where there is a specific piece of work...and we have social work support officers who would do minute taking of core meetings ...I cannot remember the last time I managed my own diary or booked a meeting...it takes away a huge part of your work and stress level. (W2, p.64).

What is interesting here is that in talking about contributions of other staff, respondents suggested that these workers were valued not just for the tasks they undertook, but for their personal qualities and importantly their support of colleagues and commitment to the team.

During W3 and W4, which covered the Covid-19 period, recruitment and retention issues intensified, resulting in LAs becoming more dependent on NQSWs still completing the Assessed and Supported Year in Employment (ASYE) and on agency staff. During this time, with virtual working allowing staff to live a distance from the workplace, teams could be destabilised by team members moving to agency

employment where they would be guaranteed capped caseloads, increased salaries and flexibility in that they could leave with short notice periods.

Information about team composition drawn from the interviews suggests that social workers see advantages to CF social work teams including different staff grades and disciplines (admin; family support workers; social work assistants) who bring specific skills to the team, alongside contributing to a clear team identity and focus, and commitment to the team purpose. What the study does not tell us though, is anything about the views of other team members about this.

Leadership

Social work teams are not a group of equals. They are part of a hierarchical structure with a team leader responsible for managing the team's workload and quality of work. Team leaders, other middle and senior managers are managed in their turn, up to the Director of Children's Services, who is responsible to the Chief Executive and elected members.

It was noticeable that in the qualitative discussions, as well as in the surveys, it was often the team leader who seemed to be of particular importance for participants' experiences of the workplace (Author's own, 2023b). A good relationship with a team leader could be a significant factor in helping social workers to handle workforce pressures, especially where the team was supported in doing so by the wider culture of the organisation (W2, p.66). Some participants who were looking to move on within or outside CF social work reported that the team leader was part of the problem, particularly if they were perceived as not listening and unsupportive.

A supportive team leader was seen as someone...

... that was actually ... keeping the team together, keeping them moving, recognising that we needed to be working as a team and supporting each other. But also, that leadership of actually having somebody there who was available, who would make the time for everybody, and would protect you as well with things. (W3, p.66)

During Covid, the team leader role became more complex, as staff moved to working on a fully remote basis in most LAs. A team leader who was moving on to another job without supervisory responsibilities identified the challenges:

What I've struggled with more than anything is the dynamics with the team, the virtual working, the being able to support people virtually has been difficult. But it creates a lot of complexities as well in terms of managing people's performance...in terms of (people saying) 'They're doing this, they're not doing that,' and created a real imbalance for people with regards to welfare. (W3, p.52)

Whilst working from home provided a degree of flexibility, it also created extra pressures for team leaders, who felt a need to be constantly available not only to their teams, but also their more senior colleagues, as they were not expected to be out spending time travelling. Over the whole research period, team leaders and senior managers consistently reported working the longest hours in comparison to other job roles. They were more likely to report that they worked overtime 'all the time' (58%) compared to an average of 44% in other CF social worker roles (W5, p.48). Whilst they were no more likely than other workers to report feeling stressed, during Covid team leaders reported an increased intensity to their work and having to fulfil too many roles.

The demands on team leaders as the “*holders, and... the containers of all those anxieties, difficulties, challenges, be they work, home...*” (W3, p86) suggest that social workers in these roles make a significant and under-recognised contribution to staff experiences and consequently to staff retention.

Teams as a source of mutual support

Throughout the study most respondents indicated that their team colleagues were highly supportive. This was irrespective of whether they had indicated that they were going to leave their role with that LA, or whether they intended to stay. It was clear that being a member of a team with a positive culture of mutual support, talking through cases, and sharing the emotional burden of the role acted as a resilience factor, and some social workers were explicit that it was being part of a supportive team that helped them remain in the field

During Covid, teams and team relationships seemed to become even more important, as one social worker explained:

I think without my team, we always say to each other, without you, I don't know what I would do because I think there is such an importance there of being able to rely on your team for support. I do absolutely feel that I can call on my team members at any point during the day. If I was struggling, I wouldn't think twice about it. (W3, p.69)

The usual mechanisms of team support were challenged during this period, as face-to-face interaction was reduced or abolished all together due to Government requirements on isolation. However, the value of the team, both virtually and physically, was identified as being key to worker satisfaction and wellbeing. Alternative ways of maintaining contact and team cohesion varied between LAs and teams, but included weekly check-ins, weekly forums, virtual coffee times or lunches, and newsletters.

Yes, it was a lot of doing team stuff, to remind people we are all, like, here, together and to support each other. They sent out, like, regular newsletters as well, giving information how to take care of your emotional wellbeing, things like that. (W4, p.80).

For some, home working was continuing during Wave 5, and this remained a concern:

Previously I sat there with my entire team and there was a real, sort of, team feel and there was a, kind of, camaraderie and it was a great - you know, your team who are often- there's a lot of more experienced social workers there but, you know, you really learn a lot from them and I think that is a generally speaking a much better working environment. (W5, p.70)

During Covid, social workers regretted the lost opportunities for less formal, ad hoc face-to-face meetings with colleagues and face-to-face supervision which contributed to a sense of mutual support. Arguably, this became more important precisely because of the isolating circumstances in which staff were attempting to deal with extraordinary, frightening and unfamiliar working conditions; however these experiences highlighted the benefits of working in physical proximity to team colleagues, and what was lost when this was no longer possible.

Relationship between team experiences and worker satisfaction

In Wave 1 some social workers talked positively about their opportunities to gain a range of experiences across different practice areas by changing roles or team, and ultimately to find a ‘good fit’. There was a clear drift out of frontline practice (specifically child in need and child protection) throughout the study, as more experienced workers moved to teams where workloads could be better planned and were less susceptible to emergencies. This comment from a child protection social worker who had moved to a fostering team was typical:

I now have the opportunity to develop myself ...I felt like I was constantly firefighting within my role which wasn't good ...that transition to the fostering team allowed me the capacity to reflect, take that time to think and get my passion back for social work. (W1, p.53)

Throughout, interviewees highlighted the importance of both team and organisational culture, which were not always the same thing. For some, team culture was more significant in their day-to-day experience. This is important because “dislike of the working culture” was one of the three main reasons given for considering leaving CF social work in all of the annual surveys.

I would say it really varies from team to team. I think you can build up good cultures within a team, ... but I think the culture of the organisation is that social workers are quite disposable. I think there are people coming and going all the time. (front line practitioner, W 3, p.150)

An agency worker identified how a positive team culture could influence employment decisions:

I've come to the realisation that maybe, in terms of going permanent and being stable, that is the local authority for me, because I think the team is a very good team, we support each other. (W.3, p.46)

Key features of a positive working culture included a supportive working environment with peers, managers and senior managers; job infrastructure such as flexible working arrangements; administrative support; effective IT; feeling valued and being treated well by your manager and the organisation as a whole. Professional autonomy was also identified as important as well as the potential for personal development and reflective practice (W3).

Some social workers noted that the virtual working necessitated by Covid had reduced their sense of belonging to a team and increased the stress of practitioners reducing their attachment to their employers.

I think that being part of a team is a real retention feature. You need to feel you are part of a team to stay somewhere and I think all this virtual stuff we don't feel part of a team so much. (W3, p.97)

In Wave 5, post Covid, there was a noticeable improvement in relationship with colleagues as some face-to-face interactions began again. However, these gains were offset by the stress of increasing caseloads associated with staff sickness, unfilled vacancies and increasing complexity of cases which also have been a result of the previous Covid working practices.

Satisfaction with one's place in a team was sometimes associated with the team as an area of practice, as well as to the supportive and relational aspects of team working. Changing teams to move to a different area of practice could thus be viewed as a form of resilience, promoting wellbeing and reducing stress and burnout. This could be particularly important for workers who had dependent children or were caring for relatives where there was a need for a more predictable work pattern and better work life balance.

Working practices and the impact on teams

The way that teams worked and workplace environments in W1 and W2 were generally seen as ‘normal’ working practice, with the only issue causing concern being the rise in hot-desking. Most people who commented on this said they preferred to have their own desk and to sit close to members of their team. An interviewee who had experienced her team dispersed felt that the ‘team spirit’ had been diluted and that:

The teamwork was the only thing that was keeping us happy ...so go back to the old system, yes, not have hot desking. (W2, p. 90)

By the time Covid had established itself, working practices had changed more fundamentally, with virtual meetings being the norm, and limited, if any, face-to-face contact with other team members:

In terms of team and staff you can't beat having people sat next to you to be able to talk to and to share. (W3, p.69)

Both front line practitioners and managers commented about having less opportunity to share difficult experiences and decisions, and to de-stress after challenging meetings or visits, as one worker who had left LA CFSW told us:

Those poor social workers are going to come out of a visit, feel rubbish... it is harder to make that phone call, and say, ‘Oh, I’m crying’ whereas if someone can see you that way they can say ‘Okay, let’s go for a cup of tea’. (W3, p.69)

Data from the W3 survey showed that the majority (59%) of CF felt that relationships with colleagues had deteriorated because of Covid. The reduction in face-to-face contact was a factor in this. In W4 it was also reported that whilst line managers valued reflective supervision, this had been more difficult during Covid due to time pressures and the remote context resulting in less reflective supervision. As one team leader noted post Covid:

When you start doing face to face again, you do really realise, I think, that there is a real difference, and you do pick up a lot more from people by doing it like that. (W4, p.69)

Post-Covid there was also an awareness that hybrid working had some advantages. An unanticipated advantage of virtual meetings was that some families who could or would not attend in person, would attend online.

However, an interviewee noted that virtual working could be isolating, and it was important to find ways of overcoming such isolation:

I like having the flexibility, (it is) sometimes quite isolating and I do miss having that team interaction. But we work to do that in different ways anyway, so we have get-togethers regularly. (W5, p.138).

Working practices can impact on team experiences, and changes to working practices, initiated or accelerated by Covid, had some advantages. For example, working from home could save time as people were not commuting, travelling to meetings or to visit families. This was viewed as particularly useful in rural areas and larger LAs. However, despite such practical gains, some participants reported significant

losses in terms of team cohesion and mutual support. It appears that this was recognised and compensated for more effectively in some LAs than in others.

Discussion

The data from this study suggest that there is no one model for teams in CF social work in England, in terms of team membership or how teams operate. Study participants most often used the word “team” as a proxy term for the area of practice in which they and their immediate colleagues worked – e.g. child protection, fostering, children with disabilities - and in this context, different teams were seen to offer different opportunities, but also to present different levels of demand on workers. Within most CF teams, social workers typically take individual responsibility for cases and work largely independently but accountably, with formal supervision from a senior colleague (often the team leader) and sometimes, with an identified mentor or “buddy” providing advice and guidance. In some teams, social workers occasionally or routinely worked in pairs.

At a minimum, teams consisted of qualified social workers and a team leader. There were examples of teams with a more diverse membership – e.g. administrative workers, social work support officers and/or social work assistants - and a more collaborative approach to the work. Teams like this were spoken of positively but appeared to be the exception rather than the rule. It may be worthwhile exploring whether such a model could be used more extensively, and if so, in which areas of practice it would be most effective. The division of tasks allowed social workers to spend more time with families, but the benefits extended beyond this to include mutual support, and a shared interest in and responsibility for the children and families by everyone in the team. Whether this results in more positive experiences for services users is an area worthy of further research.

CFSW is often high stakes work, characterised by responsibility for managing uncertainty and complexity in risky and distressing situations. Although the responses of participants suggested that many enjoyed the challenge and rewards of such work, in some circumstances, the demands could become overwhelming. Supportive work relationships were identified as one of the factors enabling workers to survive and flourish; and the team as the source of such support was frequently mentioned. Alongside line management and other structured support and supervisory arrangements, informal and ad hoc support from other team members featured prominently as a factor providing workers with a sense of belonging and emotional safety. Study participants suggested that the team was the site of important workplace relationships and interactions for staff which could either promote retention or contribute to the likelihood of staff moving on or leaving. It is important to distinguish between moving out of a team to continue a positive process of learning, growing and developing, and moving to get away because those opportunities have not been provided, or because you did not feel valued in that team.

The comments made about teams, and particularly about the impact of Covid, suggest that for many social workers in this study it is the social and emotional support function which dominates their experiences of the team in CF social work. Biggart et al (2017, p.120) argue that CF social workers need to be aware of the influence of their own emotional state when making decisions about children, and that effective emotion regulation is important for improving CFSW practice. They drew on psychological research about the significance of talking to others to process emotions – ‘social support’ - and on the secure base model developed by Schofield and Beek (2014), whose five dimensions they applied to teams:

- Availability -promoting trust, “people are there for me”
- Sensitivity – promoting emotional regulation, “my feelings are manageable”
- Acceptance – building self-worth, “I don’t always have to be strong”
- Co-operation - promoting self-efficacy, “I can work with others to find a solution”
- Team membership – promoting team belonging, “I am valued, and I belong”

Data from across the whole study endorses the significance of these factors in social worker resilience, and the interviews suggest that the team was the most important and immediate source of such support. Respondents often expressed primary loyalty to their team rather than to the wider organisation, identifying themselves as a member of a named team and describing investment in the team and interdependence with other team members.

Little was said directly about internal team processes, or the roles and contributions of individual team members, except for the importance of the team leader. The team leader is of course responsible for ensuring work is completed, implementing organisational policy, and managing quality, but also for setting tone and culture and helping the team become more than a collection of individuals, but a group with a shared identity, purpose and commitment to the work. Team leaders can exert a powerful influence on social workers’ experiences, both positive and negative. However, in some teams the team leader role may be shared between a team leader and deputy, or team leader and senior practitioners. Respondents in this study provided few detailed insights into how other team members contribute to team functioning, or their own contributions to their teams, nor about how ‘teamwork’ as conceptualised by Rape Žibera (2022) related to the completion of the social work task. Neither do these exploratory findings take us very far in understanding the broader implications of working in a team which provides the ‘secure base’ as described by Biggart et al (2017). In terms of not only supporting workers, but from the perspective of service users, we cannot assume that working in a team setting where one feels secure and supported necessarily guarantees effective work. These are all aspects of CF teams that merit further exploration. There is a formula for working out the number of possible interactions in a team, $N \times N - 1$ divided by 2. A team of 11 workers would include $11 \times 10 = 110$ divided by 2 = 55 potential relationships. This begins to highlight the complexity of teams given the diversity of team members, both personally and professionally (Martin, 2013), and one of the challenges for research.

Limitations

There are several limitations to this study. There is a danger that ‘teams’ means different things to different social workers and the qualitative interview schedules in this 5-year project did not ask any direct questions about teams; rather it was the interview respondents who mentioned teams to us. As such we are likely to have missed out on some important information. However, comments about teams came spontaneously from participants responding to questions about other aspects of CF social work. This reinforces our knowledge of the importance of teams to social workers and highlights the need for more studies in this area.

The research was focused on CF workers in England, and it cannot be assumed that teams in adult services, or in other countries, necessarily operate like CFSW teams in England, although many of the issues explored are likely to resonate with adult workers and social workers from elsewhere. It would be helpful to undertake an international comparative study to explore this in greater detail.

Lastly, there were no service user voices incorporated into the research process. There is an important issue here in that teams can be safe bases for social workers - but is a 'happy' team necessarily more effective in delivering services that not only safeguard vulnerable groups, but also promote the meaningful involvement of service users, supporting them to thrive and take greater control of their own lives?

Conclusions

This article has drawn on CF social workers' experiences of their team before, during and after Covid. During these periods the team has been a very important aspect of CF social workers' experience, contributing to decisions about remaining in or leaving the team, LA or sector. The interviews highlighted the importance of the team leader and the complexities of their role in ensuring practice quality and adhering to agency policy and procedures, whilst helping to set a team culture and ensuring a safe base for practice.

It was acknowledged that during Covid the traditional functioning of teams came under stress and strain as working from home with online meetings, reviews and support stretched many workers. It was also noted that the complexity of this created further stress for team leaders, and that most people were happy when Covid ended, and entirely virtual ways of working were tempered by new forms of hybrid working between home and office.

Throughout we have noted that there is no agreed definition, or type of team in social work and we have tried to capture some of the characteristics of a team as identified by the interviewees. However, it needs to be acknowledged that whilst a happy supported team may be desirable, we cannot be sure that it is necessarily effective in meeting the needs of children and families. More work on achieving both the process and tasks of social work is required to be able to maximise the benefits that teams and team working brings to inclusive social work as experienced by those on the receiving end of our services.

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