



Response to Request for Information

Reference FOI 001451
Date 24 August 2017

Social Worker Employer Standards

Request:

I would like to request some information under the Freedom of Information Act.

The first part of my enquiry relates to your local authority's delivery of the Social Worker Employer Standards that were introduced in 2011. Under the standards councils are supposed to "complete, review and publish an annual 'health check' to assess the practice conditions and working environment of the organisation's social work workforce" ([full link here](#)).

The second part of my enquiry relates to use of secure placements for children on welfare grounds. Last year Sir James Munby, president of the family courts in England, warned that more councils in England were having to place young people in secure units in Scotland due to a shortage of availability in secure units in England.

So I would like to request the following information from your authority:

- 1) A copy of all of the social work 'health checks' (see above) that your council has produced since the social worker employer standards were introduced in 2011? [See attached](#).
- 2) The number of children your local authority has sent to secure units in Scotland or Wales in each of the following financial years: 2012-13, 2013-14, 2014-15, 2015-16, 2016-17?
[Only 1 child has been place across the periods this was in 2013/14 with the child placed until 2014/15](#)
- 3) A list of the secure units in Scotland or Wales that your local authority has placed children in in each of the following financial years: 2012-13, 2013-14, 2014-15, 2015-16, 2016-17?
[HILLSIDE SECURE UNIT, BURNSIDE, NEATH, SOUTH GLAMORGAN, SA11 1UL](#)

- 4) The number of times your local authority has been told no bed in a secure unit is available in England for a child who needs one in each of the following financial years: 2012-13, 2013-14, 2014-15, 2015-16, 2016-17?
Your request for information has now been considered however the City of Wolverhampton Council cannot supply the information you requested for the reasons set out below.

Section 17 of the Freedom of Information Act 2000 requires City of Wolverhampton Council, when refusing to provide such information (because the information is exempt) to provide you, the applicant with a notice which:

- (a) states the fact,
- (b) specifies the exemption in question and
- (c) states (if that would not otherwise be apparent) why the exemption applies:

In relation to your particular request the following exemption applies:

Section 12 - Exemption where cost of compliance exceeds appropriate limit

We can confirm that the Council holds information falling within the description specified in your request. However, Section 12 of the Freedom of Information Act 2000 allows a public authority to refuse a request if the cost of providing the information to the applicant would exceed the 'appropriate limit' as defined by the Freedom of Information.

The Regulations provide that the appropriate limit to be applied to requests received by local authorities is £450 (equivalent to 18 hours of work). In estimating the cost of complying with a request for information, an authority can only take into account any reasonable costs incurred in:

- (a) *Determining whether it holds the information,*
 - (b) *Locating the information, or a document which may contain the information,*
 - (c) *Retrieving the information, or a document which may contain the information,*
- and*
- (d) *Extracting the information from a document containing it.*

For the purposes of the estimate the costs of performing these activities should be estimated at a rate of £25 per hour.

The information appertaining to this question is not easily accessible and as such this information is not held as a distinct set able to be retrieved or reported on. To get the information would require a full scale look into all individual records. This would be a manual exercise and as such we believe that the aggregated time it would take to collate the information would be in excess of 18 hours (equivalent to a notional cost of £450).



Wolverhampton People Directorate Adult Social Care

Social Work Health Check 2016 Summary Report

June 2016

1.0 Introduction

- 1.1 The national Social Work Task Force final report (Nov. 2009) recommended the application of a framework to assist employers in assessing the “health” of their organisation on a range of issues affecting the workload of social workers and to support the implementation of a set of national standards for employers and a supervision framework for practitioners.
- 1.2 The framework identifies five key topics to support organisations to undertake a self-assessment to identify current strengths and areas that require improvement.
- 1.3 The five key topics are:
 1. Effective Workload Management
 2. Pro-active Workflow Management
 3. Having the Right Tools to Do the Job
 4. A Healthy Workplace
 5. Effective Service Delivery
- 1.4 As such, Wolverhampton has undertaken a full Social Work Health Check as part of our on-going self-assessment to inform our improvement journey. The key findings are presented across each of the five topics and conclude with areas for improvement. These will be used to inform the implementation of the Employer Standards and improve social work practice in the city.

2.0 Methodology

- 2.1 Wolverhampton’s health check was circulated via an online survey between 15/5/2016 and 13/06/2016. All registered social workers (including agency staff) irrespective of their role within the People Directorate were invited to complete the online survey, which asked questions about them, their work, the support they get and how they feel about their job.
- 2.2 It is intended that the health check is repeated in March 2017 and annually thereafter so that improvements can be demonstrated and areas for further development identified.
- 2.3 The survey was distributed to 203 registered adult social work staff and information received is assumed to be direct from the Social Worker.
- 2.4 There are some limitations with the methodology:
 - Information is all subjective as it is self-reported by Social Workers themselves.
 - The sample bases and response rates was 25.12% whilst a small sample to consider it reliable, remains significant as it is a quarter of the total sample size and will offer rich information on patterns observed.

2.5 Despite these limitations, the results do provide a single source of rich, direct, time-specific information which will be used in triangulation with other data sources to provide a comprehensive picture of the current 'health' of Wolverhampton's social care workforce across children's and adults services.

3.0 Overall response

3.1 The response rate was **25.12%** (51 respondents) from the following service areas:

- 72.55% (37 respondents) Adults
- 7.84% (4 respondents) Disabilities
- 19.61%(10 respondents) Mental Health

It is to be noted that not all respondents completed each question so there is a variance in the total number of respondents to each questions set.

4.0 Key Findings

4.1 Effective Workload Management

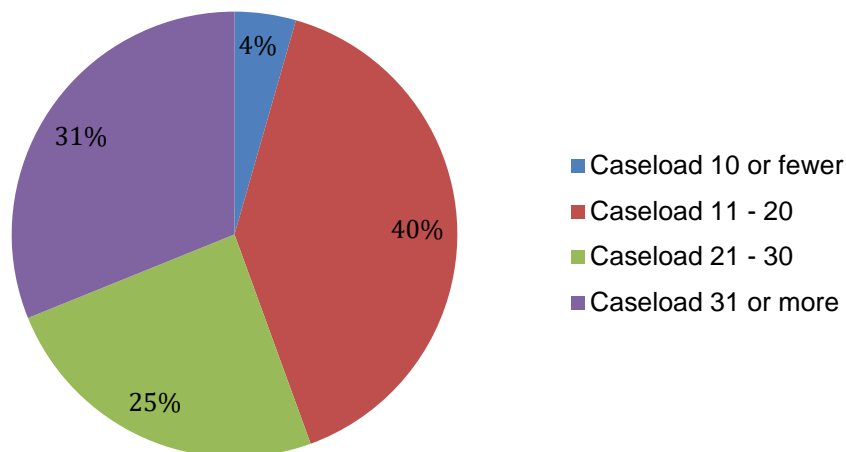
a) Caseloads

4.1.1 Of the 51 respondents surveyed 87.76% had a caseload. The results indicated that on average social workers were currently allocated 18.78 cases although the caseloads differ across and between teams.

4.1.2 The number of allocated cases showed:

- Highest number of allocated cases was 47
- Lowest number of allocated cases was 1

4.1.3 The graph below shows that 75% of the cohort of Adult social workers who responded have between 11 and 30 allocated cases. 4% of Adult social workers had a caseload fewer than 10 cases.



4.1.4 Opinions were divided on how manageable staff groups found caseloads:

- 41.46% of respondents reported that their workloads were *just about* manageable
- 34.15% of respondents reported that their workloads *were* manageable
- 24.39% of respondents reported that their workloads *were not* manageable

Therefore, approximately a quarter of the 51 respondents have reported that their caseloads were not manageable. This coincides overall with the 31% reporting of caseloads being 31 cases and above.

b) **Hours worked**

4.1.5 40.82% of respondents surveyed reported that over the last 12 months they worked over and above their contracted hours *most weeks*; with 20.41% reporting that they do this every *week*.

4.1.6 79.59% of respondents reported to have taken work home in the last 12 months.

4.1.7 Due to workload demands over the last 12 months, 49 responses were received to this question, which elicited the following information:

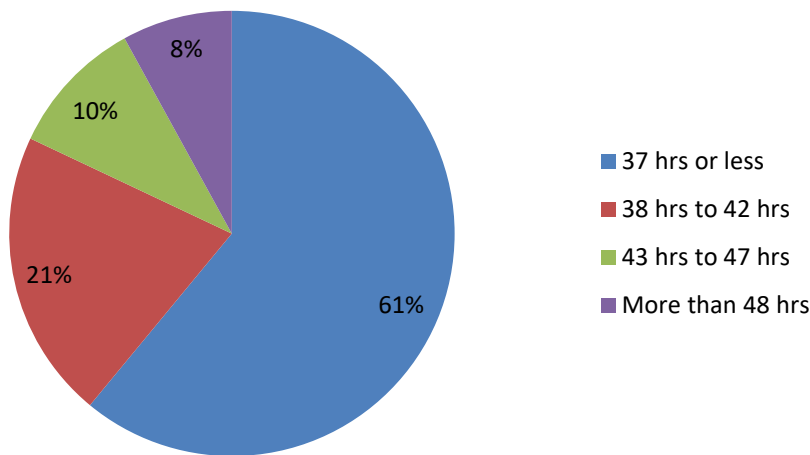
- 44.9% of respondents *sometimes* found it difficult to take flexi leave.
- 14.29% of respondents found it *always* difficult to take flexi leave
- 10.2% of respondents found it *impossible* to take flexi leave.

4.1.8 It is worth noting that 15.9% do not accumulate flexi time, which, based on other answers would suggest they are not recording any extra hours that are being worked. 49 respondents answered this question.

- 83.67% of respondents do not carry over annual leave
- 16.33% of respondents had to carry over annual leave due to workload demands
- 24.49% of respondents had to cancel previously agreed leave due to workload demands

4.1.9 However some staff did report having to cancel and rebook arranged leave because of workload demands.

4.1.10 The typical hours worked in an average week are:



c) **Stress**

4.1.11 Stress amongst social workers is high, but those taking sickness due to stress is not; with 79.59% stating they had *not* taken sick leave due to stress.

The following information was elicited which indicates that nearly half of the cohort of responses felt stressed often, however stress is not attributable to the reasons given for sick leave.

- 22.45% said they *always* felt stressed about their workloads
- 44.9% said they felt stressed *often*
- 10.2% said they *rarely or never* felt stressed

d) **Learning and Development Opportunities**

4.1.13 When asked how they rated the Adult's social care induction when they first started Wolverhampton City Council,

- 43.9% were satisfied
- 9.76% were dissatisfied
- 4.88% did not receive any induction

4.1.14 It is worth noting that 70.27% of respondents had been working for Wolverhampton for greater than 4 Years however the majority commented that the induction they had received had been of a good standard.

4.1.15 Many staff regarded Wolverhampton as a Learning Organisation with a positive learning culture.

- 39.02% *agreeing*
- 2.44% *strongly agreeing*

4.1.16 36.59% of staff who responded to the survey stated they were satisfied with the learning and development opportunities on offer within Wolverhampton City Council.

4.1.17 Majority of staff felt supported to attend training and the satisfaction level in the training which is delivered is very good,

- 4.88% very satisfied
- 31.71% felt satisfied

4.1.18 Training attendance is generally good with 71.43% never or only occasionally having to cancel pre-arranged training due to workloads,

- 28.57% said they *never or rarely*
- 42.86% said they *occasionally*
- 22.45% said they *often*
- 0% said they *always*

4.1.19 Most staff surveyed liked the content and courses offered via the learning hub one comment was received about having time to access the learning hub on a regular basis.

4.1.20 Some staff recognised that online training does not always suit learning needs, and the need to collaborate training with other partner agencies where training already takes place would be beneficial for joined up learning opportunities.

e) Supervision

4.1.21 Of the staff surveyed 39.02% received formal supervision at least once a month. Over half of the respondents (68.3%) rated the quality of supervision in Wolverhampton positively.

- 58.54% satisfied
- 9.76% very satisfied

With 63.4% stating that they had sufficient time on decision making and intervention and a further 90.2% stating they had sufficient opportunity to discuss caseload and workload management.

4.1.22 7.32% of respondents reported that their supervision sessions did not provide an opportunity for *any* reflection, caseload and workload management, identification of further personal learning, career and development opportunities.

4.1.23 Time is made for supervision sessions from the answers provided

46.34% - had supervision sessions cancelled or postponed *rarely*

43.9% - had supervision sessions cancelled *sometimes*

4.1.24 When asked if an observation of practice had taken place in the past 6 months 12.2% (5 respondents of 41) answered yes.

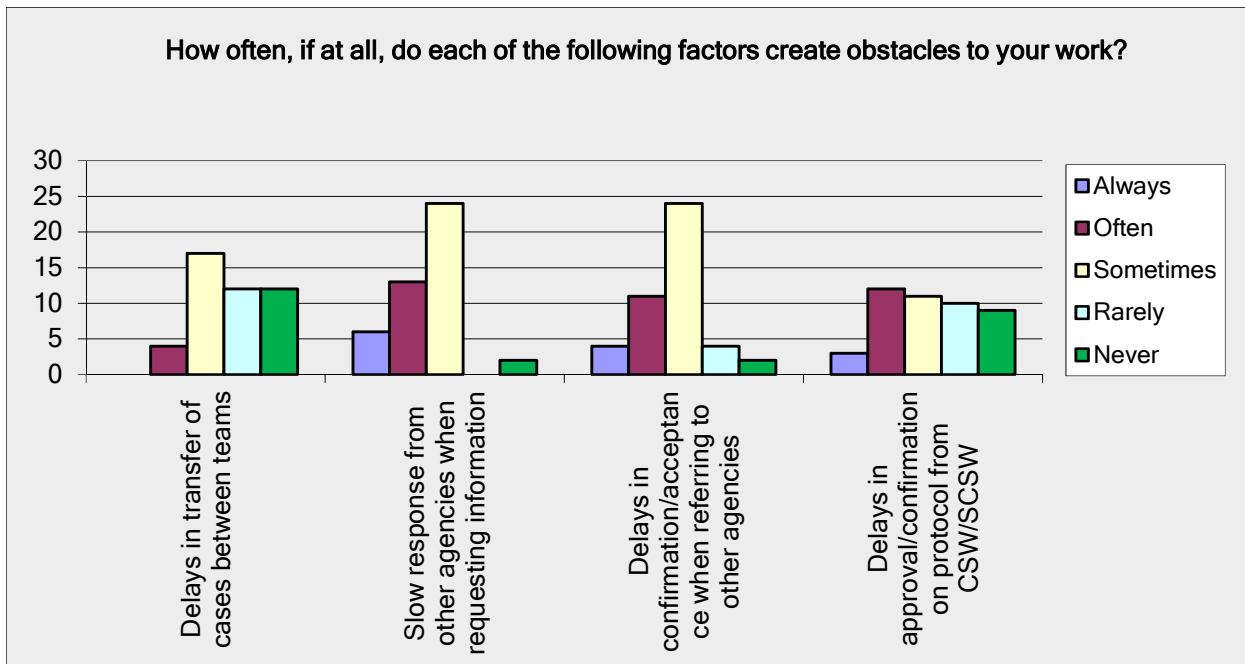
4.1.25 At the time of this survey 92.68% of respondents reported having had an appraisal in the past twelve months. This percentage should now have increased due to a Council wide drive on completing 100% of appraisals.

4.2 Proactive Workflow Management

a) Delays and obstacles to work

4.2.1 Social workers experience most delays due to slow responses from other agencies when requesting information or referring; with 82% *sometimes* or *often* delayed and 81% *sometimes* or *often* delayed when referring to other agencies.

4.2.2 37.78% of social workers had *sometimes* experienced delays in transfer of cases between teams with only 26.67% reporting they had *never* experienced any delay.



4.2.3 There were 4 problems experienced by respondents on a daily basis were:

- Slow running PCs
- Photocopier/printer unreliable
- Outlook inbox too congested
- Case Manager system/Carefirst going offline

4.2.4 The top 2 weekly problems were:

- Slow running PCs
- Photocopier / printer unreliable

b) Efficient use of skills

4.2.5 Respondents were asked to rate how efficiently they thought their skills as a Social Worker were being used in their current role. The majority of respondents felt very positive about the efficient use of their skills in their role rating their skills from a scale of 1 -5; 1 being *not at all* and 5 being *very much so*

- 20% - '5' (*Very much so*)
- 22.22% - '4'
- 37.78% - '3'
- 15.56% - '2'
- 4.44% - '1' (*not at all*).

- 4.2.6 Additional tasks are undertaken by 68.89% of staff who completed the survey with respondents stating supervision of less experienced social workers, mental health act assessments and best interest's assessor as the additional tasks undertaken the most.
- 4.2.7 91.11% of respondents felt they should be doing additional tasks but did not have time to do them; with the majority of respondents listing the following tasks;
- More quality time with service users (this was an overwhelming majority of the comments)
 - Mentoring/developing the team
 - Time to reflect and discuss cases among others.
- 4.2.8 There is a positive relationship between those who answered yes to this question and the amount of staff taking work home 79.59% which would imply much of the administration work is completed away from the office outside of working hours.
- 4.2.9 The majority of respondents (75.56%) felt that some tasks should be undertaken by a member of support staff, rather than themselves.
- 4.2.10 These tasks included:
- Loading of assessments onto CareFirst
 - Data entry
 - Minute taking
 - Typing letters
 - Typing of review notes
 - Scanning/photocopying

4.3 Having the right tools to do the job

- 4.3.1 The majority of respondents have access to a variety of resources including:
- Laptops for mobile working (88.37%)
 - Mobile phones (86.05%)
 - Lockable drawers for personal items (74.42%)
 - Mobile tablets / Care first (46.51%)
 - Adequate private meeting space (34.88%).
- 4.3.2 Respondents are not making the most of RiP (Research in Practice) resources to support an evidence informed approach to practice. This being said however, only 7.32% of social workers are not at all confident that we are working in evidence informed ways with 39.03% feeling either confident or very confident.
- 4.3.3 41.46% of respondents were *aware* that Wolverhampton is a partner of Research in Practice. Of these, 14.63% reported to having *opened an account on the RiP website and used it*, 24.39% had *created an account but not utilised it yet*, and 60.98% said *they were unaware of the resource being available*.

4.3.4 When asked how easy it was to access services to support day-to-day practice 43 respondents reported:

	Easy	Neither easy nor difficult	Difficult	Don't know
Legal Services advice	7	19	6	10
Interpreters	15	13	10	5
Administrative Support	16	13	13	0
General ICT Support	17	17	7	1
Support with Case Management System/Care First	21	18	1	2

a) Team Meetings and information sharing

4.3.5 Information sharing within the service is perceived as effective and appropriate. With the results showing that top three communication channels staff used in practice being:

- Line Manager / Supervisor
- Wolverhampton Intranet
- Team colleagues

4.3.6 The top three communication channels staff would prefer are:

- Line Manager / Supervisor
- Core brief or local team brief
- WCC Intranet

4.3.7 Team meetings are happening on a regular basis and feedback from management meetings is very good.

4.3.8 The majority of respondents (92.68%) reported that team meetings took place *monthly* and 7.32% reported *weekly* team meetings.

4.3.9 65.85% of respondents received regular feedback and updates from management team meetings *with 34.15% reporting they did not*.

b) Care First

43 responses were received to this question set.

4.3.10 Time spent inputting onto CareFirst is quite significant based on the responses received. 79.07% of respondents reported they spent >50% of their contracted working hours inputting onto CareFirst during a typical working day with only 6.66% spending less than 25% of their hours inputting.

4.3.11 This information correlates with the return in relation to high caseloads (56% reporting to having a caseload over 21 cases) and the high number reporting that they are working over their contracted hours - 40.82%

4.4 **A Healthy Workplace** (See also Sections for Stress, Team Meetings, and Supervision) There were 43 respondents to this section.

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
I know who the Adult's Services Senior Managers are and can recognise them	17.50%	42.50%	20.00%	17.50%	2.50%
Communication between staff and Senior Managers is effective	2.50%	17.50%	45.00%	25.00%	10.00%
Staff are consulted and involved in proposed changes	0.00%	20.00%	37.50%	32.50%	10.00%
I look forward to going to work	7.50%	20.00%	42.50%	20.00%	10.00%
I feel enthusiastic about my job	10.00%	27.50%	45.00%	10.00%	7.50%
I feel proud to work for Wolverhampton City Council	10.00%	22.50%	50.00%	10.00%	7.50%

4.4.1 Most respondents agreed that communication between staff and senior managers was effective; however, a proportion did disagree (25%). However, a large proportion of respondents felt that they were *consulted and involved in proposed changes (20%) with a further a quarter of the respondents feeling enthusiastic about their job and proud to work for Wolverhampton City Council.*

a) Support from Line Managers

4.4.2 70.73% of respondents were either satisfied or very satisfied with the support from the line manager where they had a complex case involving risk or safeguarding and 2.44% reported *dissatisfaction.*

4.4.3 Respondents are more likely to be able (than unable) to access support when making important decisions. 56.10% indicated they had been able to access support when needing to make an important decision relating to a case.

4.5 Effective Service Delivery

a) Direct work Adults

4.5.1 On average respondents spend only 10.41 hours of their typical working week working with Adults on visits etc. Most staff spent less than 10 hours working with service users; with only 25% working between 11 and 20 hours. This

correlates with the information presented earlier on the time spent on care first inputting assessments.

b) Pride and Motivation

4.5.2 32.50% of respondents felt proud to work for Wolverhampton, with 22.5% agreeing and 10% strongly agreeing. There were 17.5% of respondents who did not feel proud to work within the service; with 7.5% *strongly disagreed* with the statement.

4.5.3 27.5% of respondents said they *looked forward to going to work* and an even higher proportion of staff *felt enthusiastic about their job* (37.5%).

4.5.4 We asked respondents whether they felt *positive* or not about Wolverhampton and what makes them feel positive about Wolverhampton City Council as an employer. Staff comments can be grouped into the following main sections;

- 9 staff commented positively on the support from Managers and colleagues to achieve higher standards over the last 12 Months
- 5 staff commented positively on the standard of training opportunities offered

4.5.5 Some examples of the comments received were:

"I really enjoy my job and working for WCC -this is comparison to some past employers and corporate environments. I feel both positive and proud about what we are trying to achieve as I feel I have a realistic understanding and expectations."

"Positive feedback from senior managers and challenge helps to further improve my confidence. My managers will say thank you and well done!"

"Having less paper work to complete, having more time to get to know clients. Have more professional development that is not within the hub"

5.0 Conclusion

5.1 This summary report has focused on the key findings from the views and experiences of Wolverhampton's frontline social work practitioners. Responses have been from a quarter of the total number of questionnaires sent out. Whilst this is a relatively low response rate, it has enabled an overview of key strengths and areas for future development and consideration. There remains a significant commitment and a desire to provide excellent services and make a real difference for Adults in Wolverhampton, and this was strongly evident from the survey responses.

5.2 Wolverhampton continues to demonstrate a strong learning culture and it is evidenced that commitment and dedication is apparent throughout the survey

responses. There is evidence of positive line management support and supervision which takes place on a regular basis and is reflective in decision making, workload management and planning intervention. However, there is the need to ensure this management oversight and support is mirrored in direct observations of practice so that there is triangulation between supervision, reflective practice and observing practice.

- 5.3 More attention is required in finding ways to work smarter and not harder with many symptoms of providing a high service standard with limited resources evident. One such area which could be improved is improving technical devices so that they are more responsive when entering data onto the system. There is evidence in the survey which suggests that the speed in which the system responds impacts on ability to complete work in a timely manner resulting in work being taken home, working beyond contractual hours and cancellation of AL.
- 5.4 Communication in the organisation is a key strength and can be seen in the response rate for team meetings, briefings and intranet which enables the workforce to have up-to-date information regularly.
- 5.5 The other critical area for consideration to improve social work intervention and timeliness of this, is around responses from other agencies and transferring cases to other agency intervention. There are reported difficulties in this area which impacts not only on the service user but overall on the ability on the social worker's ability to address need in a timely manner under the arrangements agreed with partner agencies. The Adult Safeguarding Board plays an integral part in this and should be cited on the findings for challenge across all partners.

5.3 **Key strengths:**

- 75.61% reported their caseloads to be manageable and the average number of cases held across teams were between 11 to 30
- 83.67% are not carrying over or cancelling leave due to workload
- 36.59% agree that Wolverhampton has a positive learning culture embedded within the organisation
- 50% feel supported to attend training courses
- 50% are satisfied with the quality of training provided
- 68.3% are satisfied with the quality of supervision received
- 95.12% get arranged supervision on a regular basis
- 12.2% had received an observation of practice in the last 6 month
- 92.68% had received an appraisal in the last 12 months

- 42.22% feel positive about the use of their skills in their current job role
- 68.89% undertake additional tasks in their role such as supervision of less experienced social workers demonstrating a supportive culture
- 88.37% have the use of a laptop for mobile working
- 100% of staff reported having team meetings
- 7.32% of staff reported having team meetings once a week
- 70.73% of staff are satisfied with the level of support from frontline managers
- 56.10% feel able to access support when making important decisions
- 32.5% feel proud to work for Wolverhampton City Council
- 27.5% look forward to coming into work
- 37.5% feel enthusiastic about their job

5.4 Areas for improvement

a) Health and Well-being

- 89.8% felt stressed about their workload
- Stress amongst the workforce is an issue to be recognised and closely monitored and support offered across the workforce through *quality supervision* and wider intervention
- Only 39.02% received formal supervision at least once per month meaning over half are missing out on a key opportunity to discuss and improve their skills. This needs to be regular and in line with Departmental procedures.

b) Workload

- 20.41% of staff state that they work over their contracted hours every week implying that the workload is spread amongst too few workers
- 40.82% of staff worked over 37 hours most weeks
- 91.11% felt they should be doing additional tasks but did not have time to do them
- 69.39% found it to be difficult to take flexi time owed

- 79.07% reported spending over half their contracted hours inputting data onto the Carefirst system

c) Direct work with service users

- Most staff indicated that they spend less than 10 hours per week working directly with service users
- 95.55% experienced delays due to slow responses from other agencies
- 37.78% sometimes experienced delays in the transfer of cases between teams

d) Research in Practice

- 58.54% were unaware of the Rip resource being available which would suggest either better promotion of the facility is required or a review of the benefits offered compared to the cost of using

e) Transformation of Services

- 30% did not feel consulted or involved in proposed changes

**Wolverhampton People Directorate
Adult Social Care**

**Social Work Health Check 2017
Summary Report**

June 2017

1.0 Introduction

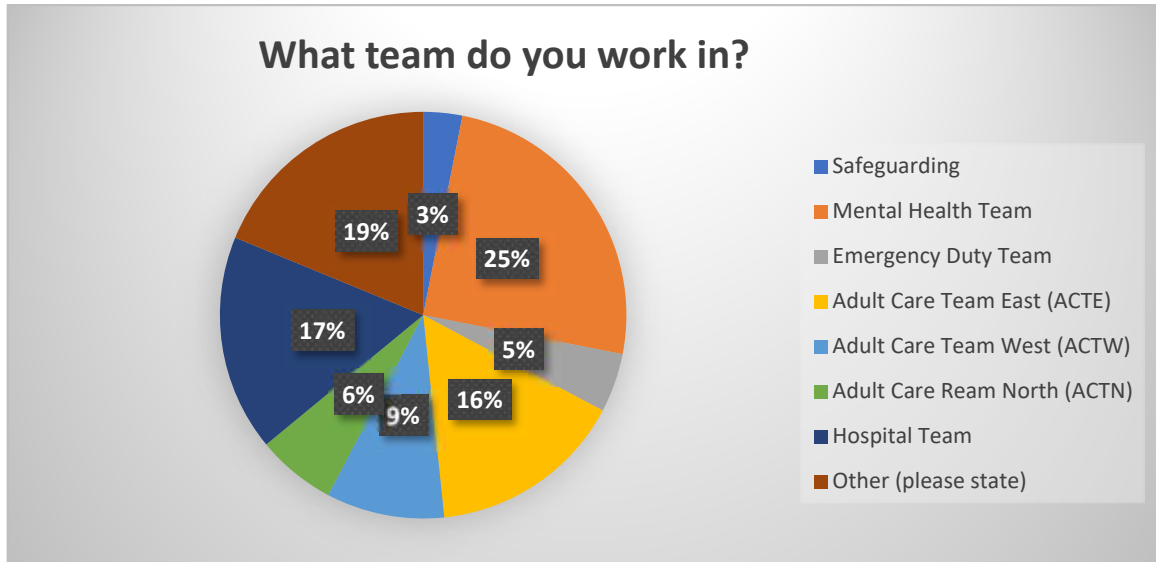
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- 1.2 The framework identifies five key topics to support organisations to undertake a self-assessment to identify current strengths and areas that require improvement.
- 1.3 The five key topics are:
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- 1.4 Wolverhampton has undertaken a full Social Work Health Check as part of the on-going self-assessment to inform its improvement journey. The key findings are presented across each of the five topics and conclude with areas for improvement. These will be used to inform the implementation of the Employer Standards and improve social work practice in the city.

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- 2.2 The health check is repeated annually so that improvements can be demonstrated and areas for further development identified.
- 2.3 The survey was distributed to 133 registered adult social work staff and information received is assumed to be direct from the Social Worker.
- 2.4 The limitation of this methodology is that information is subjective as it is self-reported by Social Workers themselves.
- 2.5 Despite this limitation, the results do provide a single source of rich, direct, time-specific information which will be used in triangulation with other data sources. This will then provide a comprehensive picture of the current ‘health’ of Wolverhampton’s social care workforce across adult’s services.

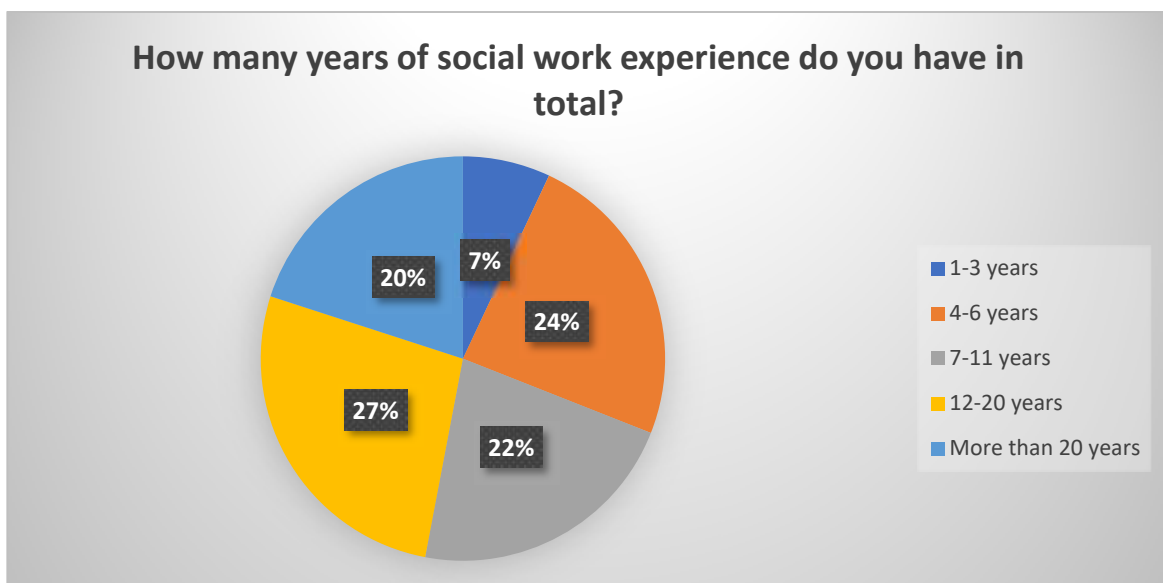
3.0 Overall response

3.1 The response rate was 60% (80 respondents) from the following service areas:



3.2 Last year's response rate was 25.12% (51 respondents), so there has been a significant improvement in the number of social workers completing the survey.

3.3. No newly qualified social workers completed the survey. The highest number of respondents had between 12-20 years post qualifying experience. There does not appear to be any correlation between the number of years' experience and the number of cases held by a worker.



- 3.4 Over half of the respondents have been working for Wolverhampton City Council for more than 7 years, with 33% of these having been employed in excess of 11 years.
- 3.5 It should be noted that not all respondents completed each question so there is a variance in the total number of respondents to each question.

4 Key Findings

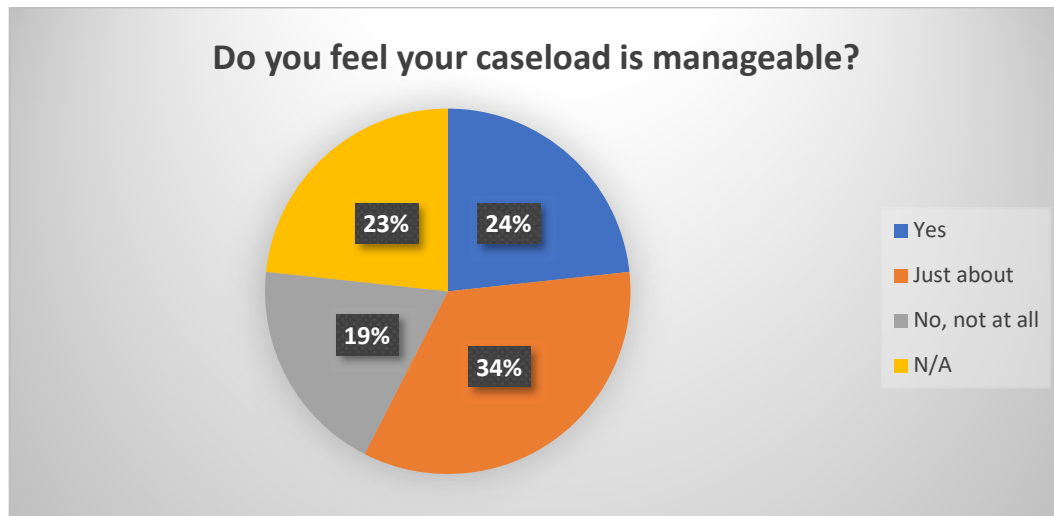
4.1 Effective Workload Management

a) Caseloads

- 4.1.1 Of the 73 respondents who answered this question, 71% had a caseload. The results indicated that on average social workers held 18.5 cases. This is consistent with the results of the 2016 Health Check when the average caseload was 18.7. In 2015 the caseload average was very slightly higher at 19.7. This suggests that caseloads have stayed relatively static over the last 3 years.
- 4.1.2 In terms of caseloads:
- The highest number of allocated cases was 37
 - The lowest number of allocated cases was 2
- 4.1.3 There were 21 responses where caseloads were 0. For averaging purposes these outliers have been removed.
- 4.1.4 Almost all of the social workers who responded who hold caseloads, have between 10 and 30 allocated cases (88%). The number of adult social workers who have a caseload fewer than 10 cases is 8% and only 4% have more than 30.
- 4.1.5 In the main, caseloads across the Adult Care Teams (North, East and West) were similar, ranging from 16 to 37.
- 4.1.6 The hospital team had a lower caseload range, starting at 9 and peaking at 19. The reasons for the lower caseload of 11 in one case is due to the respondent working part time hours. There were also 3 others who stated that they had only worked for the Council for 12 months or less, which could account for them having low caseloads.
- 4.1.7 The respondents who stated that they worked in the Mental Health team had a range of caseloads from between 10 and 26. A part time worker has one of the lower caseloads (14 cases), which would be expected. However, it should be noted that complexity of cases and other duties, such as undertaking AMHP (Advanced Mental Health Practitioner) and BIA (Best Interests

Assessor) work as well as duty, is not factored into the caseload question in this survey.

4.1.8 Overall figures on how manageable the respondents find their caseloads:



4.1.9 This means that just over half of the 73 respondents reported that their caseloads are manageable or just about manageable (58%). There has been a reduction in the number of people reporting unmanageable caseloads compared with 2016, where the number was 24.3%, and is now more in line with the 2015 results, which was 19%.

4.1.10 There were 2 student social workers who responded to the survey. One had a caseload of 5 and the other had a caseload of 10. Both stated that the number of cases they held were manageable.

4.1.11 There were 47 qualified social workers in non-management roles. The average caseload for this group was 20. Opinions were divided about whether caseloads were manageable, but the majority (64%) indicated that they were *manageable* or *just about manageable* and 22% stated that they were not. 7% of respondents said that this question was not applicable and a further 7% did not answer.

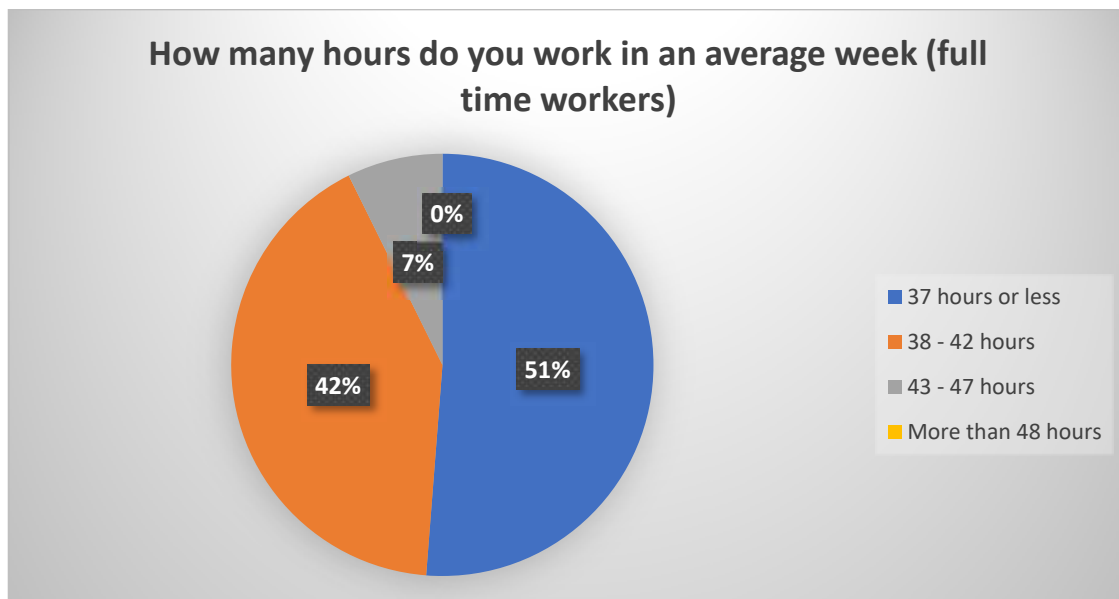
4.1.12 There were 6 social workers who work part time and caseloads for this group ranged from 0 to 14. The average caseload was 11.

4.1.13 Of the part time social workers, 4 work 18.5 hours a week. Caseloads in this group varied. Half (1 with 12 cases and the other with 14) stated that their caseloads *were unmanageable*; while the others, who had significantly fewer cases (0 and 2), felt that their caseloads *were manageable*. The reason for one social worker not having any cases is because they work for the Emergency Duty Team (EDT). Workers in EDT would not normally have a caseload. The other part time social worker with 2 cases only does duty work, which accounts for the low caseload.

- 4.1.14 The remaining part time social workers work 25 hours a week and both hold the same number of cases (11). One felt that this was *just about manageable*, while the other did not respond to this question.
- 4.1.15 Although the sample of part time workers in this survey was relatively small, the number who felt that their caseloads were *not manageable* or *just about manageable* may suggest that caseloads for part time social workers need to be considered as an area for improvement.
- 4.1.16 It is important to note that out of the 8 Social Work Unit Managers (SWUMs) who responded to the questionnaire, 1 stated that they hold a caseload of 7 cases, which they felt was manageable. The other SWUMs held no cases.

b) Hours worked

- 4.1.17 Of those that responded, 34.2% reported that in the last 12 months they worked over and above their contracted hours *most weeks*; with 24.7% reporting that they do this *every week*. The number of staff working over most weeks has slightly improved since the 2016 Health Check (40.8%), but those working more than their contracted hours *every week* has increased since last year when the number was 20.4%.
- 4.1.18 A high number of respondents stated that they have undertaken work in their own time in the last 12 months (80.8%). This is very similar to the findings of the 2016 survey where the figure was 79.52%. In 2015 the proportion was 74.6%, which indicates an upwards trend in this area.
- 4.1.19 There were 73 responses to the question about whether workers had carried over annual leave due to workload demands. A relatively low number confirmed that they had had to do this (19.2%), which is an increase compared to 2016 (16.33%) and 2015 (17.5%).
- 4.1.20 Just over half of full time staff work an average of 37 or less hours in a typical week, with 42% working between 38-42 hours. No one works more than 48 hours in a typical week.



4.1.21 From the responses, 4 social workers are contracted to work 18.5 hours. Of this group, all but 1 work over their contracted hours, with 2 working an average of 24 hours and the other working 21 hours. The remaining worker works 18 hours on average in a typical week.

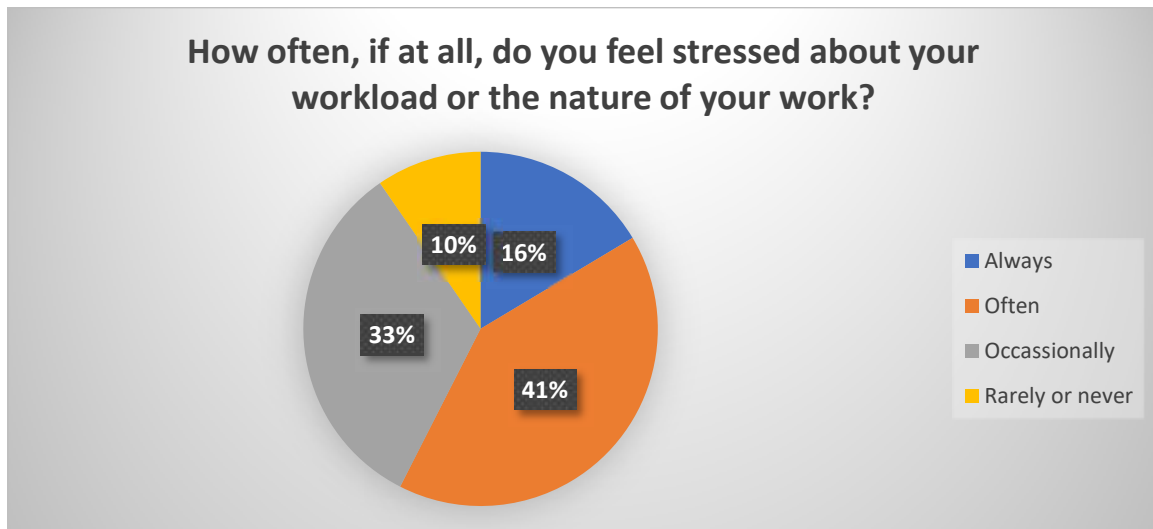
4.1.22 There are also 2 workers who are employed for 25 hours a week. Both work 25 hours on average.

4.1.23 This data about average hours worked corresponds with the results of the manageability of caseloads question, where half of those contracted to work 18.5 hours stated that they were not manageable. However, the 2 workers contracted to work 25 hours felt that their cases were manageable.

c) Stress

4.1.24 Stress amongst social workers is high, but those taking sickness due to stress is not; with 8.2% stating they had taken sick leave due to stress in the last year. This is a significant improvement since 2016 when the number of people who had taken sick leave was 20.41%.

4.1.25 The following information was elicited, which indicates that just under half of the respondents often felt stressed:



4.1.26 Stress levels appear to have reduced since last year with a 6% decrease in the number who *always* feel stressed and a 4% fall in the number of workers who *often* feel stressed at work. There has not been any change in the proportion of those who *rarely or never feel stressed* since 2016, but there has been a 10% rise in those who feel stressed occasionally.

d) Learning and Development Opportunities

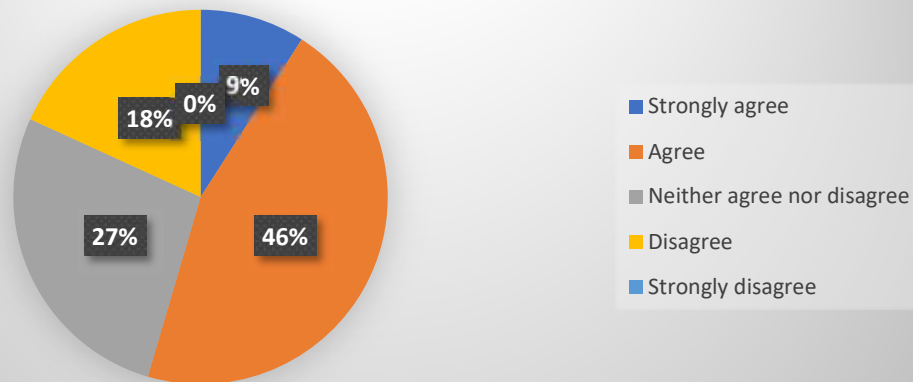
4.1.27 When asked how they would rate the induction they received when they first started with their current team at Wolverhampton City Council,

- 10.6% were very satisfied
- 30.3% were satisfied
- 30.3% were neither satisfied nor dissatisfied
- 10.6% were dissatisfied
- 13.6% said that they did not receive any induction

4.1.28 A total of 66 respondents commented on what they felt would improve inductions. There were 7 respondents who commented that more shadowing opportunities would be beneficial and 6 people referred to the need for a more structured plan. A further 3 workers would have liked to have had a detailed induction pack, including guidance on processes and policies. 2 people mentioned issues with IT and not being set up on Agresso properly. Another 2 stated that they felt that inductions have improved and 5 more were very positive about the induction they had received.

4.1.29 Nearly three-quarters (73%) of social workers *strongly agreed / agreed* that Wolverhampton is a Learning Organisation with a positive learning culture:

To what extent would you agree that "Wolverhampton a learning organisation with a positive learning culture"?



4.1.30 Respondents were asked to comment on this question and to provide any ideas that might contribute to the development of a learning culture. 29 responses were received. There were 13 positive comments including:

"Since I joined the organisation I have been afforded growth and development opportunities that have been useful in building my confidence and skills in my social work role"

"Access to learning is encouraged, as is personal career development".

"Our PSW has bought lots of training opportunities, which I have welcomed".

4.1.31 Common areas where it was felt that improvements were needed to enable the development of a learning culture were:

- 31% said that there is too much e-learning and face to face training is much more beneficial.
- 18% said that they needed more time to be able to do training; they felt their workloads and stress levels prevented this.
- 7% said that agency social workers have no access to training.

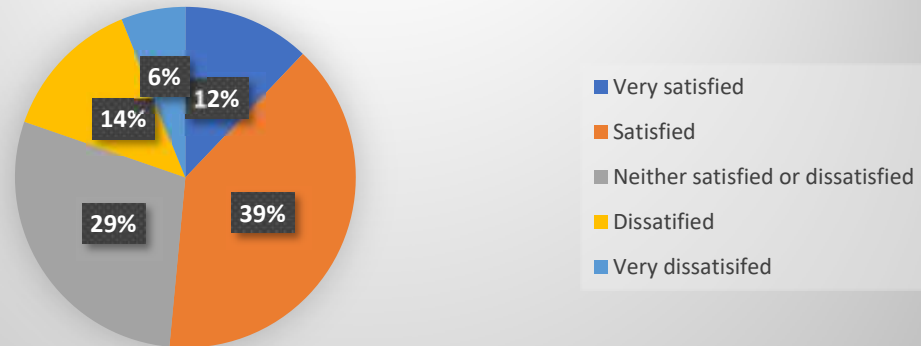
4.1.32 Other comments of note included:

"The Council is supportive of having students, but does not offer adequate support to practice educators who are expected to fulfil this role with a full caseload. There are no forums for Practice Educators as there are with other specialisms (AMHPs, BIAs).

"Further work needs to be done to link (the Learning and Development workplan for adult social care) with appraisals".

4.1.33 There were 51.5 % of staff who stated they were either *very satisfied* or *satisfied* with the learning and development opportunities on offer within Wolverhampton City Council:

How satisfied or dissatisfied are you with the learning opportunities and development opportunities available to you at Wolverhampton City Council?



4.1.34 The majority of staff were satisfied / very satisfied with the training on offer.

- 12.1% were very satisfied
- 39.4% felt satisfied
- 28.8% were neither satisfied nor dissatisfied
- 13.6% were dissatisfied
- 6.1% were strongly dissatisfied

4.1.35 During the last 12 months, 39.7% of respondents reported that they rarely or never had to cancel or rearrange training and development opportunities due to workload. However, the proportion reporting that they *have often* had to rearrange or cancel training has increased by 6% since last year and there has been a 2.7% rise in the number of people who *always* have to cancel training.

- 39.7% said they *never or rarely*
- 26% said they *occasionally*
- 28.8% said they *often*
- 2.7% said they *always*
- 2.7% said they *had not booked any training or development opportunities*

4.1.36 Social workers were asked what additional learning and development opportunities they would like to see offered. There were 66 responses to this question. There were several areas identified by 3 or more people:

- 6 respondents wanted to see training on, and more opportunities to develop skills in relation to, the Mental Capacity Act and DoLS.
- 5 respondents requested a programme to support social workers into management and also training regarding supervision and leadership.
- 4 respondents were interested in Practice Educator training.
- 3 respondents wanted to have the opportunity to train as a BIA or AMHP.

4.1.37 Other comments of relevance included:

“More on the job developments, e.g. developing champions for different areas of practice / skill sets may be a good idea”.

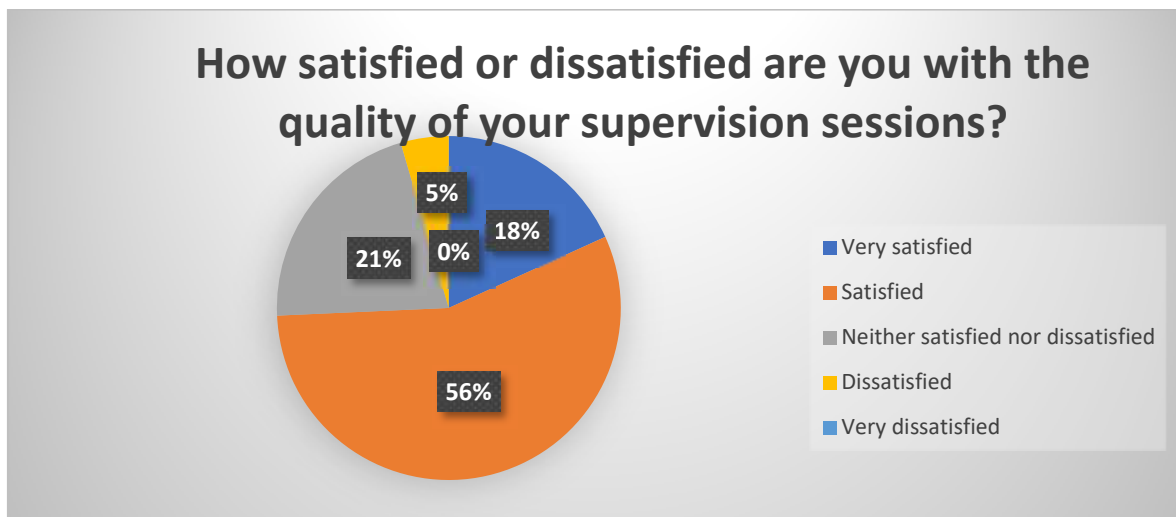
“The Emergency Duty Team are experts in this field (the whole family approach) as they are a generic team, but they have never been asked to ...offer any expertise.”

e) Supervision

4.1.38 Of the staff surveyed, 57.6% receive formal supervision at least once a month. This has improved since the 2016 health check survey where the number was 39.02%. The number receiving supervision *most months* in 2017 was 37.9%, with the remainder (4.5%) having supervision every 6 months.

4.1.39 Nearly three quarters of the respondents (74.3%) rated the quality of supervision in Wolverhampton positively. Specifically:

- 71.2% stated that they had sufficient time on decision making and intervention.
- 90.9% stating that they had sufficient opportunity to discuss caseload and workload management.
- 68.2% felt they had time to discuss training and career opportunities.
- Only 6.1% said that they didn't get opportunity to discuss any of these in supervision, which is slightly less than in 2016 (7.32%).



4.1.40 The responses suggest that just over 50% of managers and staff make time for supervision sessions. However, there is a significant proportion who *sometimes* have supervisions cancelled or postponed. This has slightly improved since last year:

:

- 51.5% *never or rarely* had supervision sessions cancelled or postponed (in 2016 this figure was 46.34%)

- 40.9% had supervision sessions cancelled *sometimes* (in 2016 this figure was 43.9%)
- 7.6% *frequently* had supervision cancelled or postponed (in 2016 this figure was 9.8%)

4.1.41 When asked if an observation of practice had taken place in the last 6 months, 71.2% said that they had not had one. The main explanations for this were that observations had not been discussed between the worker and their manager, they were office based or were a new starter / agency worker. However, the number of observations taking place has improved since last year (87.8%).

4.1.42 The number of workers who have had an appraisal in the last 12 months has dropped significantly. This year 65.2% had had an appraisal, compared with 92.68% in 2016. However, the data from Agresso suggests that 72.5% of workers from Older People, Disabilities and Mental Health had had an appraisal by 30th April 2017. The disparity in figures could be skewed by agency social workers and student social workers who may not necessarily receive an appraisal, but would have completed the survey.

4.2 Proactive Workflow Management

a) Delays and obstacles to work

4.2.1 Social workers experience most delays due to slow responses from other agencies when requesting information or referring; with 71.3% *sometimes* or *often* delayed and 71.4% *sometimes* or *often* delayed when referring to other agencies.

4.2.2 The 4 problems experienced by respondents on a daily basis were:

- Slow running PCs (26%)
- Case Manager system/CareFirst going offline (9%)
- Outlook inbox too congested (3%)
- Photocopier/printer unreliable (1%)

4.2.3 The top 2 weekly problems were:

- Case Manager system/CareFirst going offline (38%)
- Slow running PCs (28%)

b) Efficient use of skills

4.2.4 Respondents were asked to rate how efficiently they thought their skills as a Social Worker were being used in their current role. The majority felt positive about this:

- 28.6% - '5' (*Very much so*)
- 32.9% - '4'
- 28.6% - '3'
- 10% - '2'
- 0% - '1' (*not at all*).

- 4.2.5 Many of the respondents who felt that their skills were not being used effectively cited administrative tasks as the main issue (16 out of 53 comments).
- 4.2.6 Additional tasks are undertaken by 60% of staff who completed the survey. Most respondents referred to their BIA, AMPH and Practice Educator role in addition to the supervision and mentoring of other social care staff and students.

4.3 Having the right tools to do the job

- 4.3.1 The majority of respondents have access to a variety of resources including:
- Laptops for mobile working (81.2%)
 - Mobile phones (72.5%)
 - Lockable drawers for personal items (55.1%)
 - Mobile tablets / Care first (36.2%)
 - Adequate private meeting space (39.1%).
- 4.3.2 The most notable change is the number of respondents who stated that they have access to lockable drawers for personal items, as this figure has reduced by 19% since last year.
- 4.3.3 Respondents are not regularly accessing resources to support an evidence informed approach to practice. Only 37.9% had accessed such materials in the last year. However, 50% said that they felt confident that they were working in evidence informed ways. It is unclear how the 12.1% of respondents are updating their knowledge and skills to ensure they are acting in an evidenced based way if they are not accessing relevant resources.
- 4.3.4 Of the 54.6% who had created an account on the Research in Practice for Adults website, only 27.3% had used some of the materials. 45.5% of respondents stated that they were unaware of the resources available.
- 4.3.5 When asked how easy it was to access services to support day-to-day practice, 68 respondents responded as follows:

	Easy	Neither easy nor difficult	Difficult	Don't know
Legal services advice	23	26	6	13
Interpreters	24	16	18	10
Administrative support	39	18	10	1
General ICT support	30	25	14	0
Support with case management	34	24	8	3

system / Care First				
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4.3.6 This indicates that approximately a quarter of the social workers find arranging interpreters and general ICT support most difficult to access in their daily work, but in the main workers find it generally easy to access most of these services.

a) Team Meetings and information sharing

4.3.7 The top three communication channels staff used in practice were:

- Line Manager / Supervisor (88.4%)
- Team colleagues (60.9%)
- Core brief / local team brief (49.3%)

4.3.8 The top three communication channels staff would prefer are:

- Line Manager / Supervisor (83%)
- Intranet (65.5%)
- From the Strategic Director (59%)

4.3.9 Team meetings are happening on a regular basis with 99% taking place either weekly or monthly. The majority of meetings however happen monthly (72.7%).

4.3.10 Communication between management and frontline staff is felt to be effective and appropriate, with 72.7% of responses confirming this view.

b) Care First

4.3.11 Time spent inputting onto CareFirst is high, with 73.9% of respondents reported that they spend more than 50% of their contracted working hours inputting during a typical working day. Only 7.2% spend less than 25% of their hours inputting onto CareFirst.

4.3.12 This information correlates with the average number of hours' respondents say they are spending in a typical week undertaking direct work with adults (10 hours). There has been no change in the amount of time social workers spend doing direct work with adults since the last Health Check.

4.4 A Healthy Workplace (See also Sections for Stress, Team Meetings, and Supervision)

4.4.1 Social workers were asked to what extent they agreed or disagreed with the following statements. There were 64 respondents to this question:

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
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I know who the Adult's Services Senior Managers are and can recognise them	13	28	11	11	1
Staff are consulted and involved in proposed changes	3	12	28	17	4
I look forward to going to work	5	27	21	9	2
I feel enthusiastic about my job	12	30	15	6	1
I feel proud to work for Wolverhampton City Council	11	27	22	3	1

4.4.2 The majority of respondents feel *enthusiastic about their job* (65.6%) and 50% strongly agree or agree that they look forward to going to work. A number of people felt that they had been *consulted and involved in proposed changes* (23.4%), but more social workers disagreed or strongly disagreed with the statement (32.8%). However, this is an improvement since last year when 42.5% disagreed or strongly disagreed that they had been consulted with about proposed changes.

a) Support from Line Managers

4.4.3 There were 71.2% of respondents who were either satisfied or very satisfied with the support from their line manager when they had a complex case involving risk or safeguarding. Only 4.5% reported that they were dissatisfied.

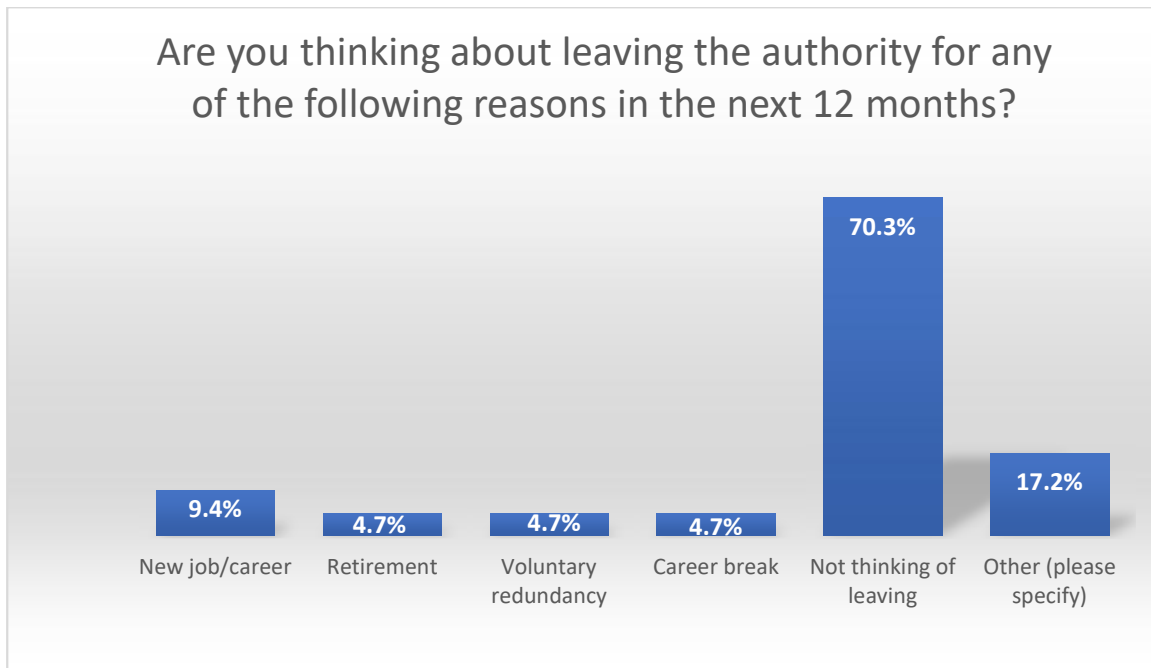
4.4.4 Respondents were more likely to be able (than unable) to access support when making important decisions. Most (77.3%) indicated that they had been able to access support when needing to make an important decision relating to a case, with 22.7% identifying that they hadn't had support when they most needed it.

4.5 Effective Service Delivery

a) Pride and Motivation

4.5.1 More than half of the respondents strongly agreed or agreed that they *feel proud to work for Wolverhampton City Council* (59.3%) and only 6.3% disagreed or strongly disagreed with this statement. There has been an improvement since last year when the number of those who strongly disagreed or disagreed with this statement was 17.5%.

4.5.2 Over 70% of respondents stated that they were not considering leaving the authority in the next 12 months. A very small number (9.4%) are thinking about leaving to take up a new job or career.



4.5.3 When asked, what would influence their decision to stay at the City of Wolverhampton Council, the majority (65.6%) stated that having a supportive manager would be the main factor.

4.5.4 Social workers were also asked what makes them feel positive about Wolverhampton City Council as an employer. Common themes were:

- Training and development opportunities available (16 responses)
- The support from their managers (11 responses)
- Working in friendly teams with supportive colleagues (7 responses)

4.5.5 Some examples of the comments received were:

“There is a strong commitment to investing in its employees and with learning and development.”

“There is a consistent message and a feeling of unity about the council that hasn’t existed in the past.”

“Overall the City of Wolverhampton Council seems forward thinking and progressive and so to be part of this is very positive”.

“I feel privileged to be able to work in a small community team with a range of mental health professionals. I am well supported by my team and believe I do a good job.”

- 4.5.6 There were 7 people who provided their employee number to discuss their feedback further. The majority of these had no preference about who they wished to discuss their comments with. However, 1 specified that they wanted to discuss this specifically with their line manager and the other asked to speak to Human Resources.

5 Conclusion

- 5.1 This summary report has focused on the key findings from the views and experiences of over half of Wolverhampton's frontline social work practitioners. It was strongly evident from the survey responses that there is a significant commitment and desire to provide excellent services and make a real difference for adults in Wolverhampton.
- 5.2 There is evidence of positive line management support and supervision, which takes place on a regular basis, and is considered to be of a high quality. However, there is a need to ensure this management oversight and support is mirrored in direct observations of practice so that there is triangulation between this, supervision and reflective practice. Appraisals also need to be carried out more widely and is an area for improvement.
- 5.3 Wolverhampton continues to demonstrate a strong learning culture. Social worker responses suggest that they recognise that there is a commitment to investing in the workforce and they are utilising the opportunities available to progress and gain specialist skills.
- 5.4 Communication in the organisation is a key strength, particularly between management and frontline staff. There are weekly or monthly team meetings taking place regularly. The line manager is the main communication channel staff use, and would prefer to use, to be updated about information.
- 5.4 The survey reveals that a high percentage of workers have taken work home to complete in their own time. However, caseloads are generally within a reasonable range and the majority of staff feel that their caseloads are manageable. The number of hours' staff are working over could, to some extent, be due to the impact ICT problems have on their time on a daily basis.
- 5.5 The other critical area for consideration to improve social work intervention and timeliness of this, is around responses from other agencies and transferring cases to other agencies for intervention. There are reported difficulties in this area which impacts not only on the service user, but also on the ability of the social worker to address need in a timely manner.
- 5.6 Key strengths:**
- Over half (57.5%) of respondents reported that their caseloads were manageable. The average number of cases is 18.5 cases and most caseloads are within a reasonable range.

- Average caseloads have remained relatively stable when compared with the results of the 2016 and 2015 Health Check surveys.
- There has been a reduction in the number of social workers reporting unmanageable caseloads since last year when the number was 24.3%. This year the proportion of social workers who feel that their caseloads are not manageable is 19%.
- Sickness levels have dropped since last year, with 8.2% stating that they have been off sick in 2017, compared with 20.41% in 2016.
- A high proportion of social workers (73%) felt that Wolverhampton is a learning organisation with a positive learning culture.
- The majority of staff (51.5%) were satisfied with the learning and development opportunities available.
- Over half of the social workers receive supervision at least once a month (57.6%). This is an improvement since last year when monthly supervision rates were much lower at 39.02%.
- A high number (74.3%) were positive about the quality of supervision.
- The majority (61.5%) felt that their skills were being used effectively in their role. No one felt that their skills were not used at all.
- Communication between frontline staff and managers is viewed by 72.7% as effective and appropriate, with team meetings taking place either weekly or monthly 99% of the time.
- The majority of respondents felt enthusiastic about their job (65.6%) and more than half feel proud to work for Wolverhampton (59.3%).
- A number of respondents identified the training and development opportunities available and the support from their manager as reasons why they felt positive about Wolverhampton City Council as an employer.
- Nearly three quarters (71.2%) were either satisfied or very satisfied with the support of their manager and 77.3% said they were able to access support when they needed to make important decisions.
- Over 70% were not considering leaving the authority in the next 12 months.

5.7 Areas for Improvements:

- Although the sample of part time workers in this survey was relatively small, the number who felt that their caseloads were *not manageable* or *just about manageable* may suggest that caseloads for part time social workers need to be considered as an area for improvement.

- A high number of respondents stated that they have undertaken work in their own time in the last 12 months (80.8%).
- It was reported that 51.5% of workers never, or rarely, have supervisions cancelled. However, 40.9% have sometimes had sessions cancelled and 7.6% frequently had supervision postponed, which is a significant proportion.
- Almost half of staff work more than 37 hours a week, with 42% working between 38-42 hours a week and 7% working between 43-47 hours. However, none of the respondents work more than 48 hours a week.
- More social workers are carrying over annual leave due to workload demands in 2017 than previously. This year 19.2% of social workers confirmed that they had to do this compared with 16.33% in 2016.
- The responses from the survey identify that stress levels are high, with 57% of social workers always, or often, feeling stressed.
- Although it was felt by a high proportion of social workers that Wolverhampton had a positive learning culture, there were a few areas where some workers felt improvements could be made. This included offering less e-learning and more face to face training. Suggestions about additional learning and development opportunities workers would like to see offered included Mental Capacity Act / DoLS and supervision / leadership training. However, most of these topics (the Mental Capacity Act, DoLS and leadership training) are priorities in the Workforce development plan for 2017/18.
- There has been a slight increase in the number of people always (2.7%) and often (6%) cancelling or rearranging training due to workload since last year. However, the majority (65.7%) said that they never, rarely or only occasionally had to cancel or rearrange training.
- The number of respondents (71.2%) who have not had an observation in the last 12 months is high, but this is an improvement since last year when 87.8% of people hadn't had an observation of their practice.
- The number of appraisals being carried out this year is low, with only 65.2% of staff having had one compared with 92.68% last year. However, this does not correspond with the data from Agresso, which suggests that 82% of workers from Older People, Disabilities and Mental Health had had an appraisal by 31st March 2017. The disparity in figures could be skewed by agency social workers and student social workers who may not necessarily receive an appraisal, but would have completed the survey.
- Slow running PCs and Care First going offline are the main problems workers face on a daily and weekly basis which cause delays.

- Time spent inputting onto Care First is high, with the majority spending more than 50% of their contracted hours on this task.
- The average time spent working directing with adults is just 10 hours a week, which correlates to the significant time spent inputting onto Care First and delays experienced with the device and / or system.
- Half of respondents said that they felt they work in an evidence based way, but only 37.9% stated they access resources and materials to support their practice.
- Only 27.3% had accessed materials on RiPfA over the last year. The subscription has now been cancelled and the data suggests that this decision was justified as it does not appear to have been widely used and thus was not cost effective.
- 32.8% disagreed and strongly disagreed that they had been consulted with and involved in proposed changes over the last 12 months.

6. Recommendations and actions

- 6.1 An action plan has been completed as a result of this Health Check survey to address the key areas of improvement.
- 6.2 A briefing note highlighting the main findings will be sent out to teams for discussion at team meetings.
- 6.3 There will be quarterly engagement on the progress of the action plan. All progress and updates will be discussed at the Social Work conference in March 2018 where the plan will be signed off.

Wolverhampton People Directorate Children's Social Care

Social Work Health Check 2015 - Summary Report

June 2015

1.0 Introduction

- 1.1 The national Social Work Task Force final report (Nov. 2009) recommended the application of a framework to assist employers in assessing the “health” of their organisation on a range of issues affecting the workload of social workers and to support the implementation of a set of national standards for employers and a supervision framework for practitioners.
- 1.2 The framework identifies five key topics to support organisations to undertake a self-assessment to identify current strengths and areas that require improvement.
- 1.3 The five key topics are:
1. Effective Workload Management
 2. Pro-active Workflow Management
 3. Having the Right Tools to Do the Job
 4. A Healthy Workplace
 5. Effective Service Delivery
- 1.4 As such, Wolverhampton has undertaken a full Social Work Health Check as part of our on-going self-assessment in order to inform our improvement journey. The key findings are presented across each of the five topics and conclude with areas for improvement. These will be used to inform the implementation of the Employer Standards and improve social work practice in the city.

2.0 Methodology

- 2.1 Wolverhampton’s health check was circulated via an online survey between 13/04/2015 and 30/04/2015. All registered social workers (including agency staff) irrespective of their role within the People Directorate were invited to complete the online survey, which asked questions about them, their work, the support they get and how they feel about their job.
- 2.2 It is intended that the health check is repeated in March 2016 and annually thereafter so that improvements can be demonstrated and areas for further development identified.
- 2.3 The survey was distributed to 203 registered social work staff and information received is assumed to be direct from the Social Worker.
- 2.4 There are some limitations with the methodology:
- Information is all subjective as it is self-reported by Social Workers themselves.
 - The sample bases and response rates are too small to run reliable statistical significance testing so findings report on patterns observed.
- 2.5 Despite these limitations, the results do provide a single source of rich, direct, time-specific information which will be used in triangulation with other data

sources to provide a comprehensive picture of the current ‘health’ of Wolverhampton’s social care workforce across children’s and adults services.

3.0 Overall response

3.1 The response rate was **19.7%** (40 respondents) from the following service areas:

- 28.9% CIN/CP
- 28.9% Youth Offending
- 26.3% Other
- 13.2% Looked after Children
- 2.6% Children’s Commissioning

4.0 Key Findings

4.1 Effective Workload Management

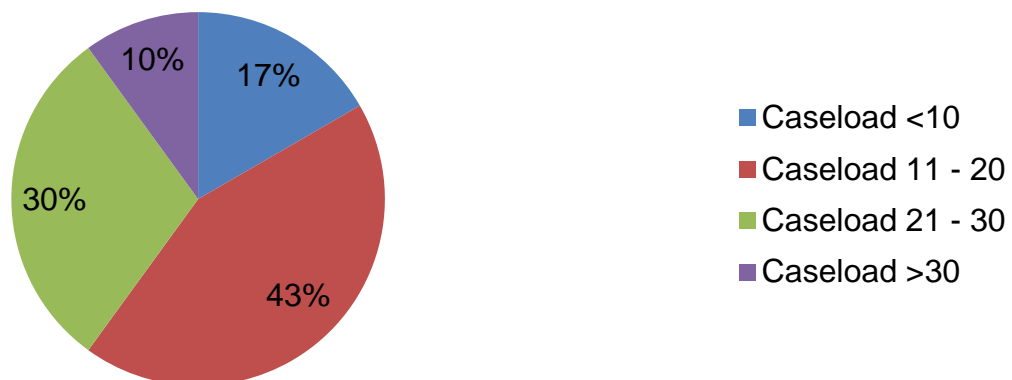
a) Caseloads

4.1.1 Of the respondents surveyed 74.4% had a caseload. The results indicated that on average social workers were allocated 19.24 cases although the caseloads differ across and between teams. The average caseload across the service as a whole is currently 22.

4.1.2 The number of allocated cases showed:

- Highest number of allocated cases was 62 (it has been determined that this was held by a Consultant Social Worker; who in addition to their own caseload was temporarily holding cases pending the commencement of a new Social Worker with the Social Work Unit)
- Lowest number of allocated cases was 1

4.1.3 The graph below shows that the majority of social workers who responded have between 11 and 20 allocated cases.



4.1.4 Opinions were divided on how manageable respondents found caseloads:

- 48.3% of respondents reported that their workloads were *just about* manageable
- 20.7% of respondents reported that their workloads *were* manageable
- 31.0% of respondents reported that their workloads *were not* manageable

b) Hours worked

4.1.5 38.5% of respondents surveyed reported that over the last 12 months they worked over and above their contracted hours *most weeks*; with 35.9% reporting that they do this *every week*.

4.1.6 87.2% of respondents reported to have taken work home in the last 12 months.

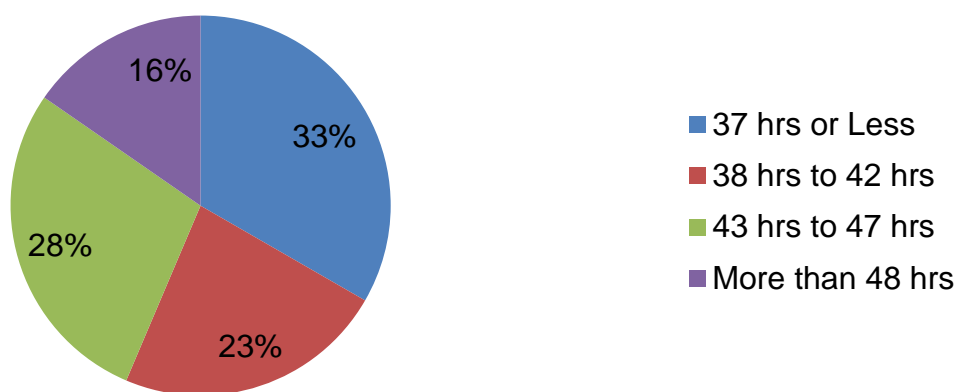
4.1.7 Due to workload demands over the last 12 months:

- 61.5% of respondents *sometimes* found it difficult to take flexi leave.
- 10.3% of respondents found it *always* difficult to take flexi leave
- 10.3% of respondents found it *impossible* to take flexi leave.

4.1.8 It is worth noting that 7.7% do not accumulate flexi time, which, based on other answers would suggest they are not recording any extra hours that are being worked.

- 64.1% of respondents do not carry over arranged annual leave
- 35.9% of respondents had to carry over annual leave due to workload demands
- 23.1% of respondents had to cancel previously agreed leave due to workload demands

4.1.9 The average hours worked in a typical week are:



c) Stress

4.1.10 Stress amongst social workers is high, but those taking sickness due to stress is not; with:

- 87.2% stating they had *not* taken sick leave due to stress.
- 12.8% said they *always* felt stressed about their workloads
- 35.9% said they *often* felt stressed
- 5.1% said they *rarely or never* felt stressed

d) Learning and Development Opportunities

4.1.11 When asked how they rated the Children's services induction when they first started Wolverhampton City Council,

- 25.7% were satisfied
- 28.2% were dissatisfied
- 15.4% did not receive any induction

4.1.12 It is worth noting that 59% of respondents had been working for Wolverhampton for greater than 4 years however the majority commented that shadowing of other teams and partner agencies would be a very useful addition to the induction program.

4.1.13 When asked whether they view Wolverhampton City Council to be a 'learning organisation; with a positive learning culture' respondents reported:

- 2.6% strongly agree
- 17.9% agree
- 53.8% neither agree nor disagree
- 23.1% disagree
- 2.6% strongly disagree

4.1.14 Respondents indicated that they value direct training; and would benefit from opportunities to:

- undertake multi- agency training
- dedicated time to attend training; or to complete e-learning modules
- reflect on learning from direct practice; and have time to implement improvements which would impact on team/service performance

4.1.15 30.8% of respondents indicated that they were satisfied with the learning and development opportunities offered by Wolverhampton City Council.

4.1.16 Training attendance is generally good with 87.2% never, rarely or only occasionally having to cancel pre-arranged training due to workloads,

- 20.5% said they *never*
- 23.1% said they *rarely*
- 43.6% said they *occasionally*

- 5.1% said they *often*
- 2.6% said they *always*
- 5.1% said they do not book any training or development

e) Supervision

4.1.17 Of the respondents surveyed 66.7% received formal supervision at least once a month. The majority of staff rated the quality of supervision in Wolverhampton positively.

- 41.0% satisfied
- 20.5% very satisfied

4.1.18 7.7% of respondents reported that their supervision sessions did not provide an opportunity for *any* reflection, caseload and workload management, identification of further personal learning, career and development opportunities.

4.1.19 Time is made for supervision sessions from the answers provided:

- 51.3% - had supervision sessions cancelled or postponed *rarely*
- 38.5% - had supervision sessions cancelled *sometimes*

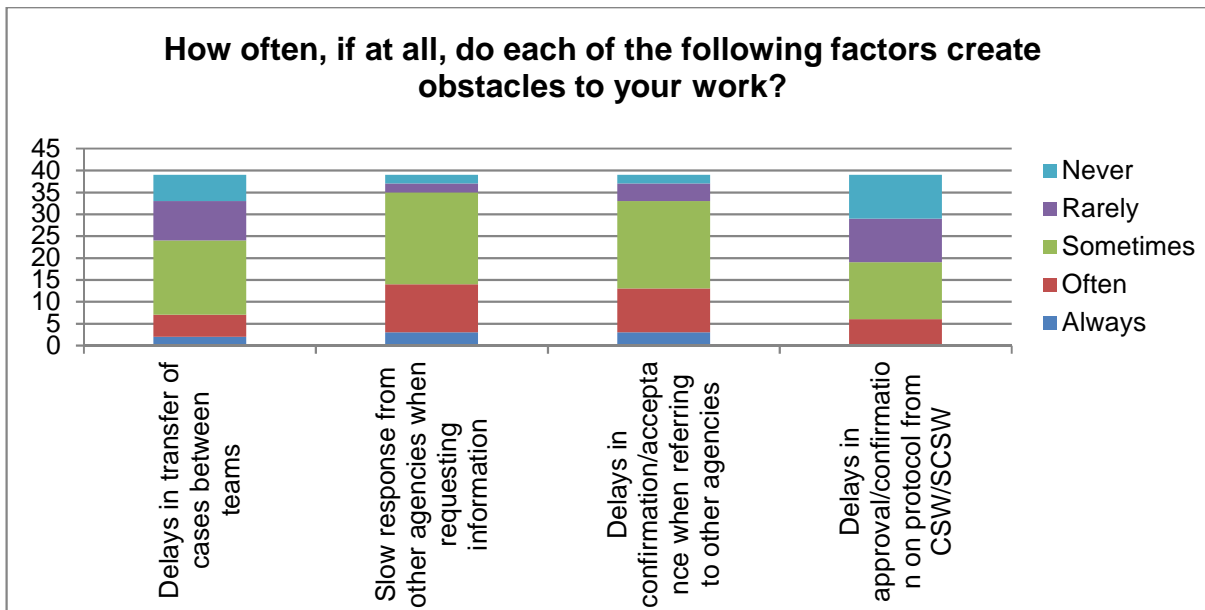
4.1.20 When asked if an observation of practice had taken place in the past 6 months, 53.8% answered yes.

4.1.21 At the time of this survey 76.9% of respondents reported having had an appraisal in the past twelve months. This percentage should now have increased due to a Council wide drive on completing 100% of appraisals.

4.2 Proactive Workflow Management

a) Delays and obstacles to work

4.2.1 Social workers experience most delays due to slow responses from other agencies when requesting information; with 82.1% *sometimes* or *often* delayed and 76.9% *sometimes* or *often* delayed when waiting for confirmation/acceptance when referring to other agencies.



4.2.2 The only problem experienced by respondents on a daily basis was:

- Slow running PC

4.2.3 The top three weekly problems were:

- 4.6% - Slow running PCs
- 3.1% - Photocopier / printer unreliable
- 0.5% - Case Management System going off line frequently

b) Efficient use of skills

4.2.4 Respondents were asked to rate how efficiently they thought their skills as a Social Worker were being used in their current role. The majority of respondents felt very positive about the efficient use of their skills in their role rating their skills from a scale of 1 -5; 1 being *not at all* and 5 being *very much* so:

- 30.8% - '5' (*Very much so*)
- 30.8% - '4'
- 30.8% - '3'
- 7.7% - '2'
- 0.0% - '1' (*not at all*)

4.2.5 Additional tasks are undertaken by 53.8% of staff who completed the survey with respondents stating supervision and guidance of less experienced social workers as the additional tasks undertaken the most.

4.2.6 82.1% of respondents felt they should be doing additional tasks but did not have time to do them; with the majority of respondents listing direct work with children

and families as being the main area of work they would wish to undertake more of.

4.2.7 There is a positive relationship between those who answered yes to this question and the amount of staff taking work home 87.2% which could imply much of the administration work is completed away from the office outside of working hours.

4.2.8 The majority of respondents (66.7%) felt that some tasks should be undertaken by a member of support staff, rather than themselves.

4.2.9 These tasks included:

- Data input
- Minute taking
- Typing letters
- Typing of review notes

4.3 Having the right tools to do the job

4.3.1 The majority of respondents have access to a variety of resources; including:

- laptops for mobile working (69.2%)
- mobile phones (74.4%)
- lockable drawers for personal items (53.8%)
- mobile tablets (23.1%) and
- adequate private meeting space (61.5%).

4.3.2 Respondents are not making the most of RiP (Research in Practice) resources to support an evidence informed approach to practice. 61.6% of respondents are confident or very confident that they work in an 'evidence informed way'.

4.3.3 79.5% of respondents were *aware* that Wolverhampton is a partner of Research in Practice. Of these, 4.7% reported to having *opened an account on the RiP website and used it*, 20.5% had *created an account but not utilised it yet*, and 30.8% said *they were unaware of the resource being available*.

4.3.4 When asked how easy it was to access services to support day-to-day practice respondents reported:

	Easy	Neither easy nor difficult	Difficult	Don't know
Legal Services advice	7	23	3	5
Interpreters	5	21	9	4
Administrative Support	13	18	8	0
General ICT Support	21	16	2	0
Support with Case Management System/Care First	14	17	7	1

a) Team Meetings and information sharing

4.3.5 Information sharing within the service is perceived as effective and appropriate. With the results showing that top three communication channels staff used in practice being:

- Line Manager / Supervisor
- Wolverhampton Intranet
- Strategic Director

4.3.6 However the top three communication channels staff would prefer are:

- Line Manager / Supervisor
- Strategic Director
- Core brief or local team brief

4.3.7 Team meetings are happening on a regular basis and feedback from management meetings is very good. The majority of respondents (89.7%) reported that team meetings took place *monthly* and 5.1% reported *weekly* team meetings.

4.3.8 69.2% of respondents received regular feedback and updates from management team meetings *with 30.8% reporting they did not.*

b) CareFirst

4.3.9 Time spent inputting onto the CareFirst is quite significant based on the responses received.

- 56.4% of respondents reported they spent >50% of their contracted working hours inputting data during a typical working day
- 20.5% spending less than 25% of their hours inputting.

4.4 A Healthy Workplace (See also Sections for Stress, Team Meetings and Supervision)

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
I know who the Children's Services Senior Managers are and can recognise them	10	12	8	6	2
Communication between staff and Senior Managers is effective	3	11	17	5	2
Staff are consulted and involved in proposed changes	2	8	14	11	3
I look forward to going to work	3	15	13	7	0
I feel enthusiastic about my job	9	13	10	6	0
I feel proud to work for Wolverhampton City Council	5	7	17	7	2

- 4.4.1 Most respondents agreed that communication between staff and senior managers was effective; however a proportion did disagree (18.4%). A large proportion of respondent felt that they were *consulted and involved in proposed changes* (36.8%).

a) Support from Line Managers

- 4.4.2 71.8% of respondents were either satisfied or very satisfied with the support from their line manager where they had a complex case involving risk or safeguarding; with 7.7% reporting *dissatisfaction*.
- 4.4.3 Respondents are more likely to be able (than unable) to access support when making important decisions. 61.5% indicated had been able to access support when needing to make an important decision relating to a case.

4.5 Effective Service Delivery

a) Direct work Children

- 4.5.1 On average respondents spend only 10.8 hours of their typical working week working with children and families on visits etc. Most staff spent less than 10 hours working with service users; with only 37.9% working between 11 and 20 hours.

b) Pride and Motivation

- 4.5.2 31.6% of respondents felt proud to work for Wolverhampton, with 18.4% agreeing and 13.2% strongly agreeing. There were 23.7% of respondents who do not feel proud to work within the service; with 5.3% *strongly disagreed* with the statement.
- 4.5.3 Nearly half of the respondents said they *looked forward to going to work* (47.4%) and an even higher proportion of staff *felt enthusiastic about their job* (57.9%).
- 4.5.4 We asked respondents whether they felt *positive* or not about Wolverhampton and what makes them feel positive about Wolverhampton City Council as an employer. The main of respondents commented positively on the support from managers and colleagues to achieve higher standards over the last 12 months.
- 4.5.5 Some examples of the comments received were:

“Work within a good team with a good line manager.”

“Positive feedback from managers of recognition of work done well.”

“There is an opportunity to change the way the council works for the better so this is an exciting time.”

5.0 Conclusion

5.1 This report has focused on the key findings from the views and experiences of Wolverhampton's frontline children's social work practitioners. Commitment and a desire to provide excellent services and make a real difference were strongly evident from the survey responses. There is evidence that commitment and dedication are apparent throughout the survey responses. More attention does however need to be placed on finding ways to work smarter and not harder with many symptoms of providing a high service standard with limited resources evident.

5.2 Key strengths:

- 69% reported their caseloads to be manageable and the average number of cases held across teams were between 11 to 20
- 64.1% are not carrying annual leave over due to workload
- 46.2% agree that Wolverhampton has a positive learning culture embedded within the organisation
- 66.7% of staff receive formal supervision at least once a month
- 61.5% are satisfied with the quality of supervision received
- 89.8% do not get arranged supervision cancelled on a regular basis
- 53.8% had received an observation of practice in the last 6 months
- 76.9% had received an appraisal in the last 12 months
- Very few IT related issues are experienced on a daily basis
- 61.6% feel positive about the use of their skills in their current job role
- 53.8% undertake additional tasks in their role such as supervision of less experienced social workers demonstrating a supportive culture
- 69.2% have the use of a laptop for mobile working
- 94.8% of staff reported having team meetings
- 5.1% of staff reported having team meetings once a week
- 71.8% of staff are satisfied with the level of support from frontline managers
- 31.6% feel proud to work for Wolverhampton City Council
- 47.4% look forward to coming into work

- 57.9% feel enthusiastic about their job

5.3 Areas for improvement

a) Health and Well-being

- 48.7% felt stressed about their workload
- Stress amongst the workforce is an issue to be recognised and closely monitored and support offered across the workforce through *quality supervision* and wider intervention
- Only 66.7% received formal supervision at least once per month meaning many staff are missing out on a key opportunity to discuss and improve their skills

b) Workload

- 35.9% of staff state that they work over their contracted hours every week implying that the workload is spread amongst too few workers
- 67% of staff worked over 37 hours most weeks
- 82.1% felt they should be doing additional tasks but did not have time to do them
- 82.1% found it difficult to take flexi time owed
- 56.4% reported spending over half their contracted hours inputting data onto the computer system

c) Direct work with service users

- Most staff indicated that they spend less than 10 hours per week working directly with service users
- 82.1% experienced delays due to slow responses from other agencies (to requests for information and access to services)

d) Research in Practice

- 30.8% were unaware of the Rip resource being available which would suggest either better promotion of the facility is required or a review of the benefits offered compared to the cost of using

e) Transformation of Services

- 36.8% did not feel consulted or involved in proposed changes

**Wolverhampton People Directorate
Children's Social Care**

**Social Work Health Check 2016 -
Summary Report**

August 2016

1. Introduction

- 1.1 The National Social Work Task Force final report (Nov. 2009) recommended the application of a framework to assist employers in assessing the “health” of their organisation on a range of issues affecting the workload of social workers and to support the implementation of a set of national standards for employers and a supervision framework for practitioners.
- 1.2 The framework identifies five key topics to support organisations to undertake a self-assessment to identify current strengths and areas that require improvement.
- 1.3 The five key topics are:
1. Effective Workload Management
 2. Pro-active Workflow Management
 3. Having the Right Tools to Do the Job
 4. A Healthy Workplace
 5. Effective Service Delivery
- 1.4 As such, Wolverhampton has undertaken a full Social Work Health Check as part of our on-going self-assessment in order to inform our improvement journey. The key findings are presented across each of the five topics and conclude with areas for improvement. These will be used to inform the implementation of the Employer Standards and improve social work practice in the city.

2. Methodology

- 2.1 Wolverhampton’s health check was circulated via an online survey between 24/05/2016 to 14/06/2016

All registered social workers (including agency staff) irrespective of their role within the People Directorate were invited to complete the online survey, which asked questions about them, their work, the support they get and how they feel about their job.

- 2.2 It is intended that the health check is repeated annually so that improvements can be demonstrated and areas for further development identified.
- 2.3 The survey was distributed to 120 registered social work staff and information received is assumed to be direct from the Social Worker.
- 2.4 There are some limitations with the methodology:
- Information is all subjective as it is self-reported by Social Workers themselves.

- The sample bases and response rates are too small to run reliable statistical significance testing so findings report on patterns observed.

2.5 Despite these limitations, the results do provide a single source of rich, direct, time-specific information which will be used in triangulation with other data sources to provide a comprehensive picture of the current 'health' of Wolverhampton's social care workforce across children's services.

3. Overall response

3.1 The response rate was approximately 50 % (64 respondents) from the following service areas:

- Social Workers 47%
- Newly qualified Social Workers 14 %
- Social Work Unit Managers 17%
- Senior Social Work Managers 8%
- Independent reviewing Officers 12.5%

4. Key Findings

4.1 Effective Workload Management

a) Caseloads

4.1.1 Of the respondents surveyed 76% had a caseload. The results indicated that on average social workers were allocated 23.47 cases although the caseloads differ across and between teams. Since the completion of this survey further work has been undertaken to reduce caseloads across the City. The average caseload across the service as a whole is currently 19.91%.

4.1.2 The results indicate that the majority of social workers who responded had between 12 and 26 allocated cases. There were 10 respondents who had 30 plus cases.

4.1.3 Opinions were divided on how manageable respondents found caseloads:

- 48.89% of respondents reported that their workloads were *just about* manageable
- 20% of respondents reported that their workloads *were* manageable
- 31.11% of respondents reported that their workloads *were not* manageable

b) Hours worked

4.1.4 46.3% of respondents surveyed reported that over the last 12 months they worked over and above their contracted hours *every weeks*; with 34.92% reporting that they do this *most week*.

4.1.5 93.6% of respondents reported to have taken work home in the last 12 months.

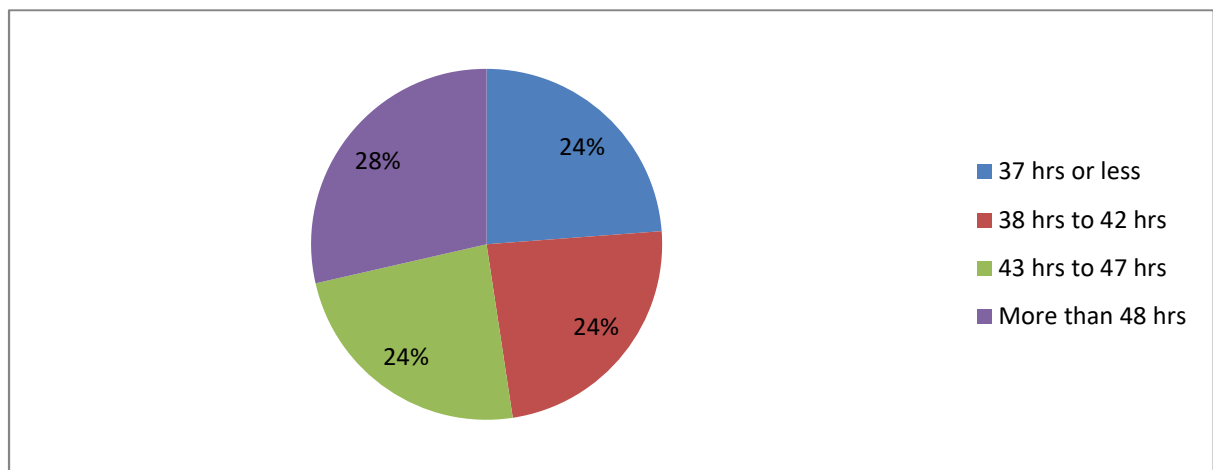
4.1.6 Due to workload demands over the last 12 months:

- 53.97% of respondents *sometimes* found it difficult to take flexi leave.
- 12.70% of respondents found it *always* difficult to take flexi leave
- 15.87% of respondents found it *impossible* to take flexi leave.

4.1.7

- 73.02% of respondents do not carry over arranged annual leave
- **26.98% of respondents had to carry over annual leave due to workload demands**
- 33.33% of respondents had to cancel previously agreed leave due to workload demands

4.1.8 The average hours worked in a typical week are:



a) Stress

4.1.9 Stress amongst social workers is high, but those taking sickness due to stress is not; with:

- 92.06% stating they had *not* taken sick leave due to stress.
- 15.87% said they *always* felt stressed about their workloads

- 44.44% said they *often* felt stressed
- 12.70% said they *rarely or never* felt stressed

b) Learning and Development Opportunities

4.1.10 When asked how they rated the Children's services induction when they first started Wolverhampton City Council,

- 19.30% were satisfied
- 7.02% were dissatisfied
- 36.84% did not receive any induction

A large number of respondents felt that induction could be improved by having information and contact details about Partner Agencies. Other comments included ensuring that equipment was ready and having a formal buddying system.

4.1.11 When asked whether they view Wolverhampton City Council to be a 'learning organisation; with a positive learning culture' respondents reported:

- 17.54% strongly agree
- 45.61% agree
- 24.56% neither agree nor disagree
- 8.77% disagree
- 3.51% strongly disagree

Respondents indicated that they value training and made a wide variety of suggestions around how training could be further developed. There were no overwhelming common themes.

4.1.12 Respondents indicated they would benefit from;

- Leadership Training that would support progression
- More specialist training
- Less E-Learning

4.1.13 68.42% of respondents indicated that they were either very satisfied or satisfied with the learning and development opportunities offered by Wolverhampton City Council.

4.1.14 Training attendance could be improved with 71.5% never, rarely or only occasionally having to cancel pre-arranged training due to workloads,

- 15.9% said they *never*
- 15.9% said they *rarely*
- 39.7% said they *occasionally*

- 22.2% said they *often*
- 3.2% said they *always*
- 3.2% said they do not book any training or development

c) Supervision

4.1.15 Of the respondents surveyed 68.42% received formal supervision at least once a month. The majority of staff rated the quality of supervision in Wolverhampton positively.

- 59.65% satisfied
- 12.28% very satisfied

4.1.16 Time is generally made for supervision sessions from the answers provided:

- 47.37% - had supervision sessions cancelled or postponed *rarely*
- 24.56% - had supervision sessions cancelled *sometimes*

4.1.17 When asked if an observation of practice had taken place in the past 6 months, 42.11% answered yes. Practice with regard to observations of practice appears to be variable across the service with some social workers stating that they did not know observations could take place.

4.1.18 63.16% reported having sufficient opportunity to reflect during supervision with 80.70% reporting that there was sufficient opportunity to discuss caseloads within supervision.

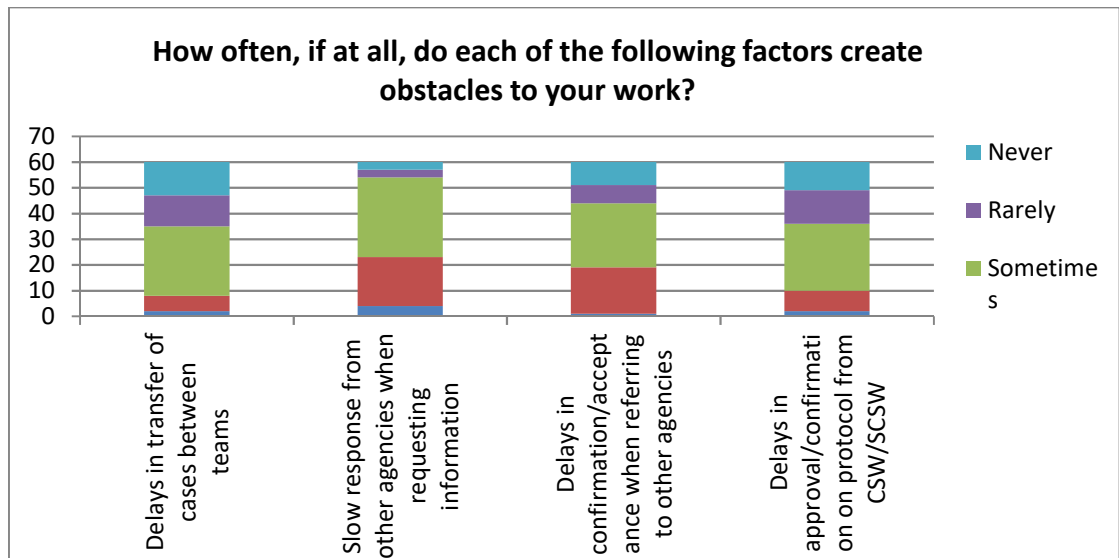
4.1.19 22.81% reported not having an appraisal in the last 12 months.

It should be noted that 31.25 of respondents have worked for Wolverhampton City Council for less than 12 months.

4.2 Proactive Workflow Management

a) Delays and obstacles to work

4.2.1 Social workers experience most delays due to slow responses from other agencies when requesting information; with 83.37% *sometimes* or *often* delayed and 76.9% *sometimes* or *often* delayed when waiting for confirmation/acceptance when referring to other agencies.



4.2.1 The problems experienced by respondents on a daily basis was:

- Slow running PC
- Photocopier/printer/scanner unreliable

4.2.2 The top three weekly problems were:

- 22.03% - Case Management System going off line frequently
- 16.95% - Slow running PCs
- 8.47% - Photocopier / printer unreliable

Efficient use of skills

4.2.3 The majority of respondents felt very positive about the efficient use of their skills in their role rating their skills from a scale of 1 -5; 1 being *not at all* and 5 being *very much* so:

- 18.33% - '5' (*Very much so*)
- 25% - '4'
- 45% - '3'
- 6.67% - '2'
- 5% - '1' (*not at all*)

4.2.4 The majority of respondents (75%) felt that some tasks should be undertaken by a member of support staff, rather than themselves.

4.2.5 These tasks included:

- Data input
- Minute taking
- Typing letters
- Typing of review notes
- Scanning

4.3 Having the right tools to do the job

4.3.1 The majority of respondents have access to a variety of resources; including:

- laptops for mobile working (88.14%)
- mobile phones (88.44%)
- lockable drawers for personal items (52.54%)
- mobile tablets (42.37%) and
- adequate private meeting space (47.46%).

4.3.2 Respondents are not making the most of RiP (Research in Practice) resources to support an evidence informed approach to practice. 61.6% of respondents are confident or very confident that they work in an 'evidence informed way'.

4.3.3 73.68% of respondents were *aware* that Wolverhampton is a partner of Research in Practice. Of these, 38.60% reported to having *opened an account on the RiP website and used it*, 26.32% had *created an account but not utilised it yet*, and 35.09% said *they were unaware of the resource being available*.

4.3.4 When asked how easy it was to access services to support day-to-day practice respondents reported:

	Easy	Neither easy nor difficult	Difficult	Don't know
Legal Services advice	21	25	9	4
Interpreters	8	27	10	13
Administrative Support	26	15	17	1
General ICT Support	18	34	7	0
Support with Case Management System/Care First	24	31	4	0

a) Team Meetings and information sharing

4.3.5 Information sharing within the service is perceived as effective and appropriate. With the results showing that top three communication channels staff used in practice being:

- Line Manager / Supervisor
- Wolverhampton Intranet
- Strategic Director

4.3.6 Team meetings are happening on a regular basis with effective regular feedback from management meetings. The majority of respondents (84.21%) reported that team meetings took place *monthly* and 10.53% reported *weekly* team meetings.

4.3.7 75.44% of respondents received regular feedback and updates from management team meetings with 25.56% reporting they did not.

b) CareFirst

- 79.66% of respondents reported they spent >50% of their contracted working hours inputting data during a typical working day
- 3.38% spending less than 25% of their hours inputting.

4.4 A Healthy Workplace (See also Sections for Stress, Team Meetings and Supervision)

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
I know who the Children's Services Senior Managers are and can recognise them	20	21	9	4	1
Communication between staff and Senior Managers is effective	3	26	20	4	2
Staff are consulted and involved in proposed changes	1	13	23	15	3
I look forward to going to work	2	23	23	4	3
I feel enthusiastic about my job	8	21	18	6	2
I feel proud to work for Wolverhampton City Council	7	19	22	6	1

4.4.1 Most respondents agreed that communication between staff and senior managers was effective; however a proportion disagreed (10.91%). A proportion of respondent felt that they were *consulted and involved in proposed changes* (25.45%).

a) Support from Line Managers

4.4.2 84.21% of respondents were either satisfied or very satisfied with the support from their line manager where they had a complex case involving risk or safeguarding; with 5.26% reporting *dissatisfaction*.

Respondents are more likely to be able (73.68%) to access support when making important decisions.

We asked respondents whether they felt *positive* about Wolverhampton. The majority of respondents commented positively on the support from managers and colleagues;

“I Work within a good team with a good line manager.”

“Positive feedback from managers of recognition of work done well.”

“There is an opportunity to change the way the council works for the better so this is an exciting time.”

4.5 Effective Service Delivery

a) Direct work Children

4.5.1 On average respondents spent 7.86 hours of their typical working week working with children and families on visits etc. Most staff spent less than 10 hours working with service users; with only 11.11% working between 11 and 20 hours.

b) Pride and Motivation

4.5.2 47.28% of respondents felt proud to work for Wolverhampton. 40% neither agreed nor disagreed.

4.5.3 Nearly half of the respondents said they *looked forward to going to work* (45.66%) and an even higher proportion of staff *felt enthusiastic about their job* (52.73%).

4.5.4 When asked to state one or two things that you would change your job if you could; the most consistent response was a reduction in caseload.

4.5.5 When asked to state one or two positive things about Wolverhampton City Council as an employer; the most consistent response was the training and development opportunities that have been available.

4.5.6 29.09% of respondents reported that they were thinking of leaving the authority in the next 12 months. When asked what factors would influence a decision to remain working with Wolverhampton City Council respondents cited;

- Manageable Caseloads (65.45%)

- Supportive Mnager (54.55%)
- Career (52.73%)
- Training and Development (49.09%)

5. Conclusion

5.1 This report has focused on the key findings from the views and experiences of Wolverhampton's frontline children's social work practitioners. Commitment and a desire to provide excellent services and make a real difference were strongly evident. There is evidence that commitment and dedication are apparent throughout the survey responses. More attention does however need to be placed on finding ways to work smarter. This survey would suggest that social workers are working hard and are motivated to provide a high standard of service but feel impacted by limited resources.

5.2 Key strengths:

- The majority of social workers are not carrying annual leave over due to workload
- Most social workers receive formal supervision at least once a month
- Social workers are satisfied with the quality of supervision received
- Very few IT related issues are experienced on a daily basis
- Social workers feel positive about the use of their skills in their current job role
- staff reported having regular team meetings
- staff are satisfied with the level of support from frontline managers
- Staff agree that Wolverhampton has a positive learning culture embedded within the organisation
- Social workers are satisfied with the training and development opportunities in Wolverhampton.

5.3 Areas for improvement

- Many social workers felt their caseloads were high
- Social Workers felt stressed about their workload but also felt supported by management
- Most social Workers reported that they work over their contracted hours every week.
- Social workers reported spending over half their contracted hours inputting data onto the computer system
- Most social workers indicated that they spend less than 10 hours per week working directly with service users
- Social Workers reported delays in cases due to slow responses from other agencies.
- Social Workers were more aware of the Rip resource being available which would suggest better promotion of the facility with 38.60% now using an account.

**Wolverhampton People Directorate
Children's Social Care**

**Social Work Health Check 2017 -
Summary Report**

June 2017

C. Abbott

1. Introduction

- 1.1** The National Social Work Task Force final report (Nov. 2009) recommended the application of a framework to assist employers in assessing the “health” of their organisation on a range of issues affecting the workload of social workers and to support the implementation of a set of national standards for employers and a supervision framework for practitioners.
- 1.2** The framework identifies five key topics to support organisations to undertake a self-assessment to identify current strengths and areas that require improvement.
- 1.3** The five key topics are:
 1. Effective Workload Management
 2. Pro-active Workflow Management
 3. Having the Right Tools to Do the Job
 4. A Healthy Workplace
 5. Effective Service Delivery
- 1.4** As such, Wolverhampton has undertaken a full Social Work Health Check as part of our on-going self-assessment to inform our improvement journey. The key findings are presented across each of the five topics and conclude with areas for improvement. These will be used to inform the implementation of the Employer Standards and improve social work practice in the city.

2. Methodology

- 2.1** Wolverhampton’s health check was circulated via an online survey on 13th April 2017 and remained open for completion until 24th May 2017.

All registered social workers (including agency staff) and student social workers, irrespective of their role within the People Directorate, were invited to complete the online survey which asked questions about them, their work, the support they get and how they feel about their job.
- 2.2** It is intended that the health check is repeated annually so that improvements can be demonstrated and areas for further development identified.
- 2.3** The survey was distributed to 257 registered social work staff and social work students currently in placement and information received is assumed to be direct from the Social Worker or social work student. Although efforts were made to ensure that the survey was distributed to current members of staff, a proportion of the 257 intended recipients would have been unable to complete the survey

due to having left the local authority or being on maternity or long-term sick leave.

2.4 There are some limitations with the methodology:

- The information gathered from the survey is subjective as it is self-reported by Social Workers themselves.
- The sample bases and response rates are too small to run reliable statistical significance testing so findings report on patterns observed.

2.5 Despite these limitations, the results do provide a single source of rich, direct, time-specific information which will be used in triangulation with other data sources to provide a comprehensive picture of the current 'health' of Wolverhampton's social care workforce across children's services.

3. Overall response

3.1 The response rate was approximately (67)% (127 respondents) and responses came from the following service areas:

- Social Workers: 56.2%
- Newly qualified Social Workers: 10.1%
- Social Work Unit Managers: 14.1%
- Senior Social Work Managers: 3.1%
- Advanced Practitioners: 5.5%
- Independent reviewing Officers: 5.5%
- Student Social Workers: 1.6%
- Other: 3.9%

4. Key Findings

4.1 Effective Workload Management

a) Caseloads

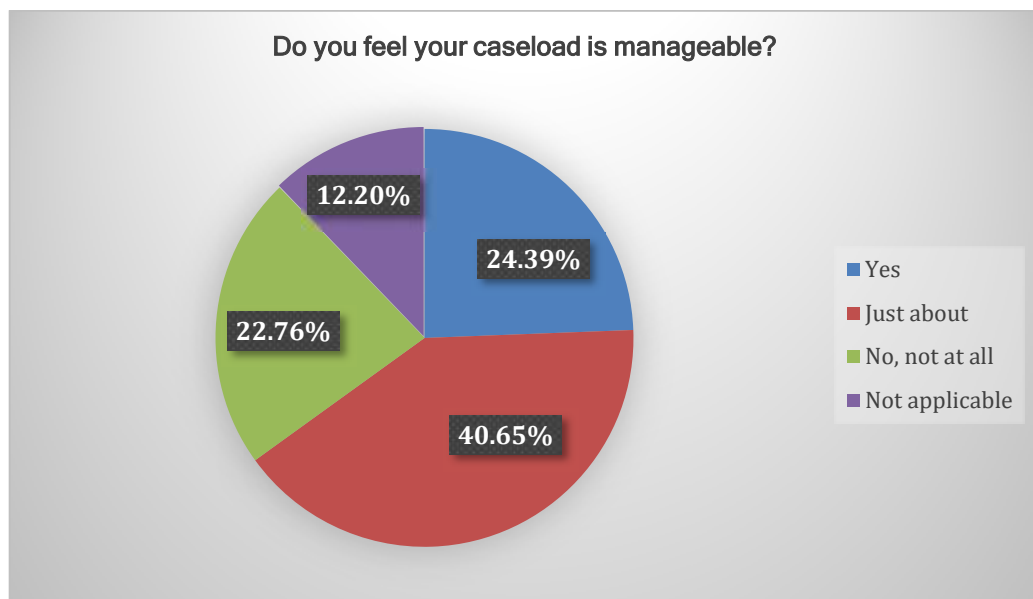
4.1.1 Of the respondents surveyed 80% have a caseload (5 respondents did not answer this question). Since the 2016 Health Check Survey took place work has been completed to reduce caseloads and the average case load for social workers has reduced from 23.47 to 21.19 (including part-time social workers and ASYE but excluding IRO).

Average Case Loads:

Social Worker (Full Time in CiN/CP/LAC/Foster/Adoption, not specified, NOT ASYE or Student SW's)	ASYE (including YOT)	IRO (including 2 part-time)	YOT Social Workers (including Part-time but not ASYE)	Part-time (Social Workers as per first column working less than 37 hrs/week)
22.78	17.30	67.2	15	15.7 (ranging from 10-24 cases)

4.1.2 The results indicate that most respondents have between 10 and 29 allocated cases. Nine respondents have 30 or more cases (not including the IRO's who had caseloads between 56-99) and six respondents have caseloads between 2 and 7 (two of these are student social workers). Two Social Work Unit Managers and four Advanced Practitioners reported that they hold caseloads.

4.1.3 Opinions were divided on how manageable respondents found caseloads but most respondents (65%) found their caseloads either manageable or just about manageable.



b) Hours worked

4.1.4 43.7% of respondents reported that over the last 12 months they work above and beyond their contracted hours *every week*; with 38.1% reporting that they do this *most week*.

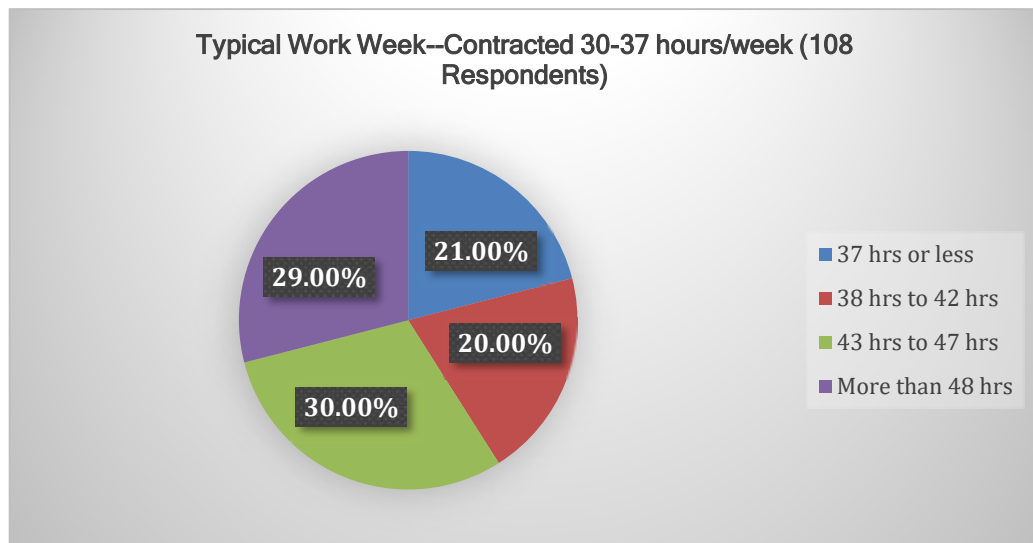
This is a similar result from the 2016 survey where 46.3% responded they worked over and above their contracted hours *every week* while with 34.92% reported that they do this *most weeks*.

4.1.5 94.4% of respondents reported to have taken work home in the last 12 months.

4.1.6 Due to workload demands over the last 12 months:

- 42.9% of respondents had to carry over annual leave due to workload demands (a significant increase from 2016 where 26.98% of the respondents answered in this way).
- 29.4% of respondents feel that they are “often” or “always” required to cancel or rearrange previously agreed training or other professional development opportunities due to workload obligations.

4.1.7 The average hours worked in a typical week are:



This is a change from 2016 where each category above was approximately 24%.

Part-time: 18.5-22.5 Hours/week:

16 respondents replied that they are contracted to work between 18.5 or 22.5 hours/week. The average hours worked in a typical week is 39 hours. However, this is skewed by two respondents who replied that they work an average of 30 hours/week and one who replied that they work an average of 40 hours. By removing these three responses the average hours worked per week decreases to 22.5 hours.

c) Stress

4.1.8 Stress amongst social workers remains high, but those taking sickness continues to be low with:

- 88.1% stating they have **not** taken sick leave due to stress (although this is slightly worse than 2016 where 92.06% answered in this same way).

- 13.5% stating they *always* feel stressed about their workload (slightly lower than 2016)
- 42.9% stating they *often* feel stressed
- 36.5% stating they *occasionally* feel stressed
- 7.1% stating they *rarely* or *never* feel stressed

d) Learning and Development Opportunities

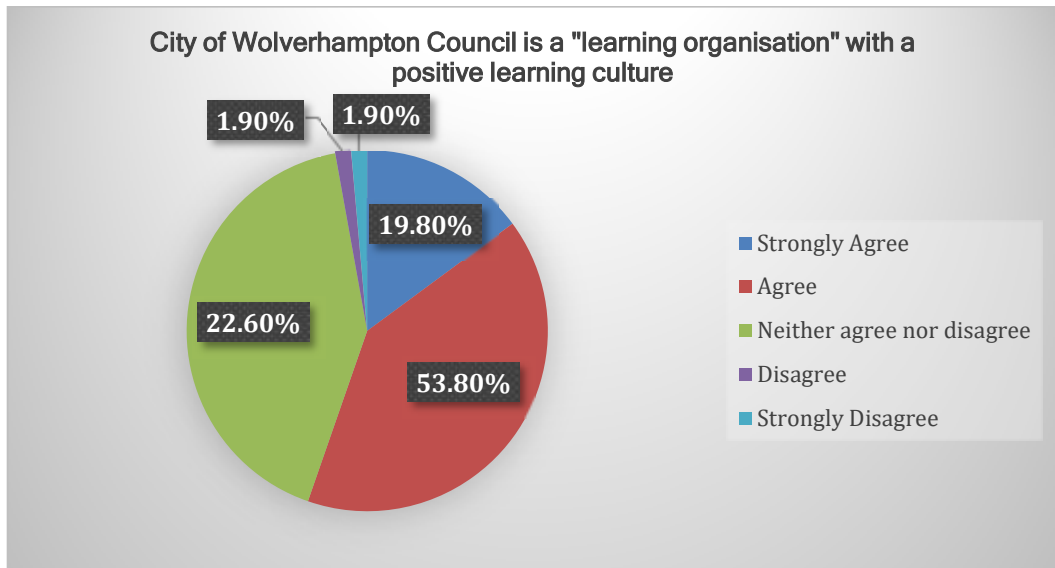
4.1.9 When asked how they rated the Children's services induction when they first started Wolverhampton City Council,

- 31.1% are satisfied or very satisfied (significant increase from 2016 where only 19.3% were satisfied)
- 20.8% are dissatisfied or very dissatisfied
- 25.5% are neutral
- 22.6% did not receive any induction (a significant decrease from 36.84% in 2016)

There was not a clear trend regarding recommendations for improving induction. About a quarter of respondents have not had induction but this is an improvement over last year's results. Some recommendations for improving induction included:

- Mentors/shadowing opportunities
- Quicker turn around for essential support such as print and ID Cards, CareFirst Training, laptops, tour of building, etc.
- Resource guides (forms, partner agencies, operational procedures, flow charts, etc.)
- A structured and planned induction that all new employees receive as there is a sense of inequality in the induction each manager/team provides
- Visits to other teams, specifically MASH
- More oversight and support by managers
- Induction for all members of staff after a restructure

4.1.10 When asked whether they view Wolverhampton City Council to be a 'learning organisation; with a positive learning culture' respondents reported:



These results vary significantly from 2016 when the results of the survey were:

- 17.54% strongly agree
- 45.61% agree
- 24.56% neither agree nor disagree
- 8.77% disagree
- 3.51% strongly disagree

Most respondents indicated that they value training and there were mostly positive comments, including: opportunities are better than at other places of employment, that the Council is committed to development, specifically restorative practice, and that there is an array of learning opportunities and opportunities for progression/promotion.

There were no overwhelming trends regarding recommendations to improve training and development but some respondents did provide ideas. Most of these comments were around a preference for face-to-face learning rather than e-learning (including commenting that this style of learning is not appropriate for everyone) and the struggle some workers have had in attending training opportunities due to time constraints and caseload demands.

It is important to note that the 2016 survey found that e-learning was also listed as something that respondents would like less of.

4.1.11 Most (65.1%) respondents feel “satisfied” or “very satisfied” with the learning and development opportunities offered by Wolverhampton. This is similar to the 2016 survey results.

4.1.12 The opportunity to attend training continues to be good as 66.7% of respondents replied that they *never, rarely, or occasionally* have to cancel pre-arrange training due to workload demands. However, this still needs to be improved as 29.4% replied that this *often or always* applies to them.

e) Supervision

4.1.13 Of the respondents who submitted a survey 61.5% receive formal supervision at least once a month (this is a decrease from 68.42% from 2016). Most staff rated the quality of supervision in Wolverhampton positively.

- 45.2% satisfied (a decrease from 59.65% in 2016)
- 17.3% very satisfied (an increase from 12.28% in 2016)
- 26.0% are neither satisfied nor dissatisfied
- 7.7% are dissatisfied
- 3.8% (4 respondents) are very dissatisfied with the supervision they have received in the last 12 months.

4.1.14 The results indicate that time is made for supervision in most cases:

- 47.1% - had supervision sessions cancelled or postponed *rarely or never*
- 42.3% - had supervision sessions cancelled *sometimes*
- 10.6% - had supervision sessions cancelled *frequently*

4.1.15 When asked if an observation of practice has taken place in the past 6 months, 37.5% answered yes. This is a slight decrease from 2016 when 42.11% of respondents reported to have had an observation of practice. There remains an overwhelming response that practitioners were not aware that this should take place.

4.1.16 58.7% reported having sufficient opportunity to reflect during supervision (slight decrease from 2016 with a result of 63.16%) with 83.7% reporting that there was sufficient opportunity to discuss caseloads within supervision. 56.7% of respondents reported that they have the opportunity to discuss personal learning as well as career and development opportunities.

4.1.17 35.6% of respondents reported that they have **not** had an appraisal in the last 12 months and this is a significant increase from 2016 where the result was 22.81%. It should be noted that 27.3% of the respondents have worked for the City of Wolverhampton for less than 12 months. However, this continues to be an area of development.

4.1.18 61.5% of the respondents replied that they have received support from an Advance Practitioner. Of those who rated the support they received, from 1 (not helpful) to 10 (very helpful), 60.56% rated the support as an 8 or above. 9.9% (7 respondents) rated the support they received as a 3 or below.

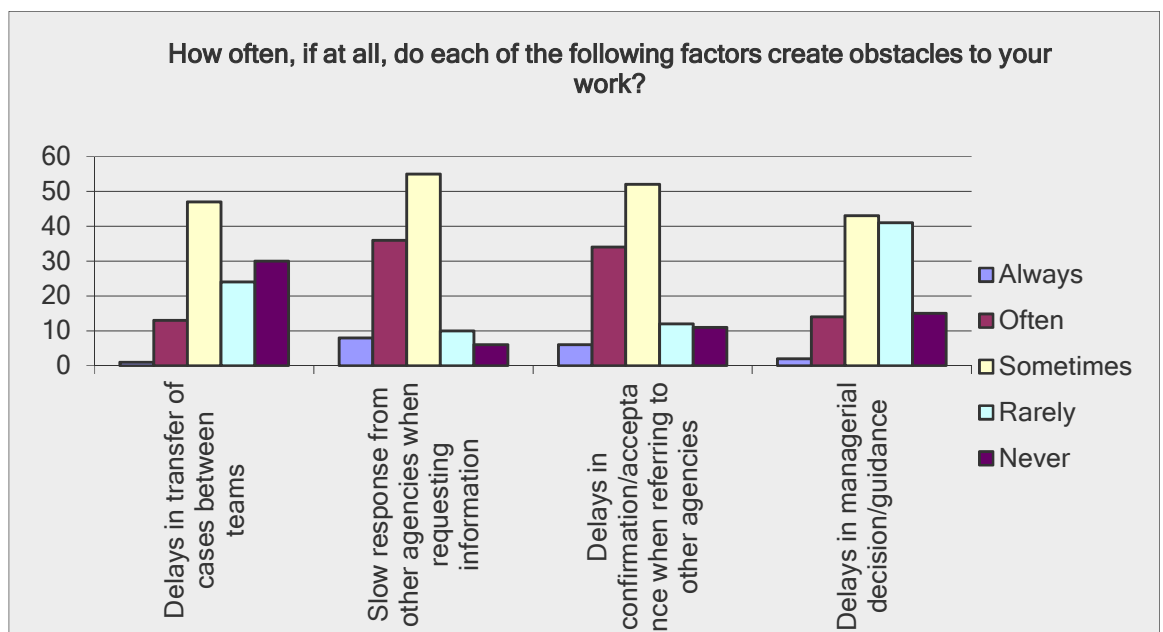
4.1.19 Some areas of support offered by the Advanced Practitioners include:

- Writing effective assessments and plans
- Access to research
- Information regarding No Recourse to Public Funds
- Disguised compliance
- Case progression
- Reflection and Restorative Practice
- Court work
- Placement issues and permanency planning

4.2 Proactive Workflow Management

a) Delays and obstacles to work

4.2.1 Social Workers reported that delays and slow responses from other agencies *always* or *often* created an obstacle to their work. 38.26% of respondents said that “slow response from other agencies when requesting information” was a problem while 34.78% reported that “delays in confirmation/acceptance when referring to other agencies” created obstacles. This is a significant improvement over 2016 when 83.37% answered that slow responses from other agencies and 76.9% answered that delays in confirmation and/or acceptance of a referral created obstacles.



4.2.2 Respondents listed the following as issues experienced daily, although numbers are very low:

- Slow running PC (16 out of 109 respondents who answered)
- Case management system/CareFirst going offline (8 out of 109)
- Photocopier/printer/scanner unreliable (3 of 109)
- Outlook “inbox” too congested to receive/send e-mails (2 of 109)
- Phone line down (2 of 109)

4.2.3 The top three weekly problems are:

- 39.45% - Slow Running PCs—16.95% in 2016
- 36.70% - CareFirst going off line frequently—22.03% in 2016
- 11.93% - Photocopier / printer unreliable—8.47% in 2016

These are the same weekly issues reported in 2016 although the frequency of these issues appears to have increased significantly.

b) Efficient use of skills

4.2.4 Most respondents feel very positive about the efficient use of their skills in their role. Rating the efficient use of their skills from a scale of 1 -5; 1 being *not at all efficient* and 5 being *very much so*:

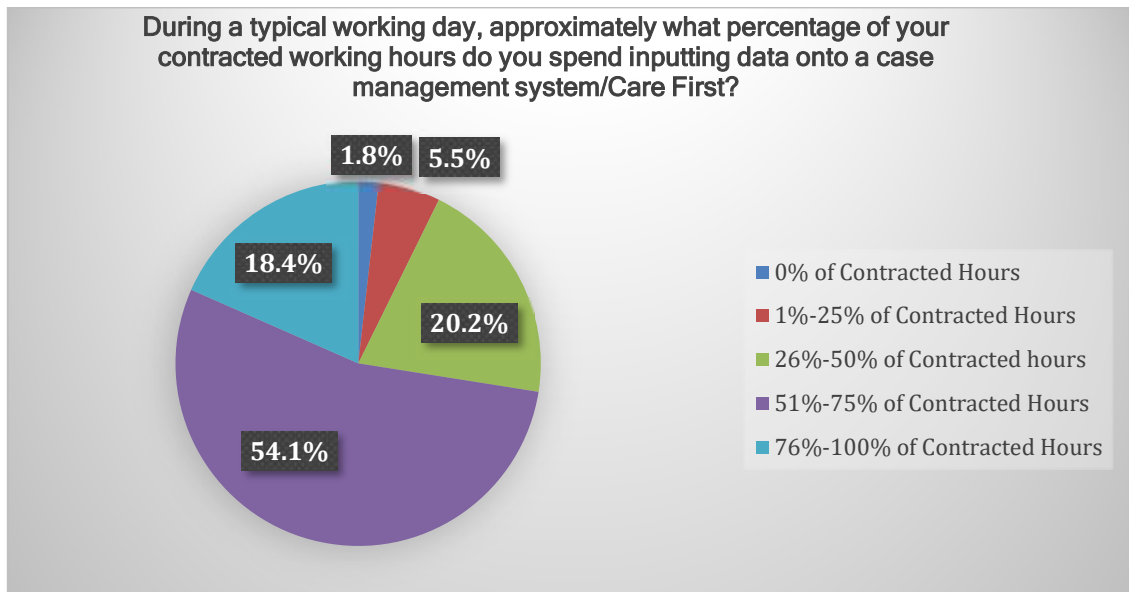
- 21.7%- ‘5’ (*Very much so*)
- 38.3%- ‘4’
- 31.3%- ‘3’
- 7%- ‘2’
- 1.7% - ‘1’ (*not at all efficient*)

These results are similar to 2016 with the biggest shift being between “3” (decrease from 45% in 2016) and “4” (increase from 25% in 2016). There is also a significant decrease in those respondents in 2016 (5%) who felt that their skills were not being used efficiently.

4.2.5 When describing how skills are not being used efficiently, common themes of concern were:

- Time constraints
- Playing “catch up” when taking over cases from previous workers
- Too much time spend inputting data and completing admin tasks
- Too little challenge and too much micro management
- Financial/resource constraints

4.2.6 More than 70% of respondents replied that they spend more than 50% of their working day inputting data in to CareFirst/Case Management Systems.



4.3 Having the right tools to do the job

4.3.1 Most respondents have access to a variety of resources; including:

- laptops for mobile working (77.1%)
- mobile phones (92.7%)
- lockable drawers for personal items (43.1%)
- mobile tablets (59.6%) and
- adequate private meeting space (45.9%)

4.3.2 62.3% of respondents are confident or very confident that they work in an 'evidence informed way' (similar results to 2016).

4.3.3 Respondents are not making the most of Research in Practice (RiP) resources to support an evidence informed approach to practice even though 71.7% of respondents are aware that Wolverhampton is a partner of Research in Practice and 49% of respondents have created an RiP account.

4.3.4 37.7% reported to having *created an account on the RiP website and used it*, 11.3% had *created an account but not utilised it yet*, and 25.5% said *they were unaware of the resource being available*. 25.5% of respondents reported that they are *aware of the RiP Website but have not created an account*.

4.3.5 When asked how easy it was to access services to support day-to-day practice respondents reported:

Answer Options	Easy	Neither easy nor difficult	Difficult	Don't know
Legal Services advice	34	53	12	9
Interpreters	23	40	24	22
Administrative Support	50	37	20	1
General ICT Support	43	53	12	0
Support with Case Management System/Care First	47	52	7	1

a) Team Meetings and information sharing

4.3.6 Information sharing within the service is perceived as effective and appropriate. The results show that the top three communication channels staff use in practice are:

- Line Manager / Supervisor
- The City of Wolverhampton Intranet
- Core Brief/Local Team Brief

4.3.7 Team meetings are happening on a regular basis with effective regular feedback from management meetings. Most respondents (71.7%) reported that team meetings take place *monthly* and 19.8% reported *weekly* team meetings.

4.3.8 77.4% of report that communication between managers and front line staff is effective and appropriate while 22.6% felt that this is not the case. However, 21.4% do not agree that staff have been consulted with and involved in proposed changes over the last 12 months.

4.4 A Healthy Workplace (See also Sections for Stress, Team Meetings and Supervision)

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
103 Respondents answered:					
I know who the Children's Services Senior Managers are and can recognise them	35	51	12	3	2
Staff are consulted and involved in proposed changes	8	26	47	19	3
I look forward to going to work	13	40	40	8	2
I feel enthusiastic about my job	19	52	28	3	1
I feel proud to work for Wolverhampton City Council	19	52	30	0	2

a) Support from Line Managers

- 4.4.1 64.4% of respondents are either satisfied or very satisfied with the support received from their line manager when they have had a complex case involving risk or safeguarding; with 10.6% reporting dissatisfaction.

Respondents (77.9%) report that they feel able to access support when they need to make an important decision.

4.5 Effective Service Delivery

a) Direct work Children

- 4.5.1 On average respondents spend 8.56 hours of their typical working week working with children and families on visits etc. Most staff spend between 2-10 hours working with service users; with only 23.7% working between 12 and 23 hours (although this is an increase from 2016 where the result was just over 11%). These results encompass all respondents, including IRO's, Advanced Practitioners, and Youth Offending; as well as full and part-time workers.
- 4.5.2 These results appear concerning but the low numbers may be due to confusion over the meaning of the question. It is possible that some respondents may have interpreted the question to be looking for direct work such as "wishes and feelings", "life story work", etc. and may not have answered in a way that reflects the actual time they spend with children, young people, and families.
- 4.5.3 These results vary greatly and, assuming the question has been interpreted correctly, highlights some concerning responses specifically for those respondents who answered that they are a social worker in CiN/CP or LAC/Adoption/Fostering.

For example, 9 social workers replied that they work an average of 56-70 hours each week. Amongst these respondents, the average caseload was 23.67 cases, with the case range being between 19-29 cases. However, the average time spent on direct work is only 11.22 hours per week with only 4 respondents spending more than 10 hours per week on direct work. Out of these 9 respondents, only 2 feel that their caseload is not manageable (caseloads of 24 and 26) while the others feel that their caseload is "just about" manageable.

It is important to note that this survey is unable to consider the complexity of caseloads (or other factors such as travel distances to visit families, time spent in court, etc.) and numbers alone do not provide a realistic picture of a the work a social worker is required to complete.

b) Pride and Motivation

4.5.4 69% of respondents feel proud to work for Wolverhampton while approximately 29% neither agreed nor disagreed with this statement. This is a significant increase over 2016 where 47.28% of respondents reported that they felt proud to work for Wolverhampton and 40% neither agreed nor disagreed.

4.5.5 Just over half of the respondents said they *look forward to going to work* (51.46%) and an even higher proportion of staff *feel enthusiastic about their job* (68.93%, an increase from 52.73% in 2016).

4.5.6 When asked to state one or two things that you would change your job if you could; the most consistent responses were around:

- Workloads
 - More reasonable caseloads
 - Consideration around caseload complexity, not just numbers
 - More time spent with families and less time inputting data and completing admin tasks
 - More staff
 - More flexibility regarding working hours to better work around the availability of families while also being able to meet personal commitments
- Working Environment
 - Better parking
 - Permanent desks rather than hot desks
 - Office too cold/too hot. Also, offices are too large/congested/loud which is distracting
 - More trust around agile working/working from home
 - Mutually supportive environment
- More consistent management—too many changes in direct manager

4.5.7 When asked to think about the past 12 months and state one or two things that make you feel positive about Wolverhampton City Council as an employer general responses included:

- “Good” Ofsted Inspection—Most common response
- Social Workers are valued by the Council and Senior Managers
- Good training and development opportunities; learning culture
- Good wages, “even though it isn’t all about the money”
- Forward thinking council
- Genuine efforts being made to improve service provision/practice of SW’s, i.e. commitment to Restorative Practice

Specific responses included:

- “I absolutely love the environment, the team spirit, excellent managerial support and valuing social workers which I have never experienced in any LA.”
- “Having supportive and caring colleagues within my team, whereby we all stick together.”
- “The Social Work briefings and Conferences sharing ideas and experiences with other Social Workers, Managers, Heads of Service and the Director.”

4.5.8 61.2% of respondents reported that they are not thinking of leaving Wolverhampton in the next 12 months. Of those who are considering leaving, the majority have reported that this would be to take a new job or start a new career.

4.5.9 Of those who are considering leaving, the factors which would influence them to remain included:

- Manageable Caseloads (56.3%)
- Career Progression (55.3%)
- Training and Development (51.5%)
- Supportive Manager (50.5%)

5. Conclusion

5.1 This report has focused on the key findings from the views and experiences of Wolverhampton’s children’s social work practitioners. Commitment and a desire to make a real difference are strongly evident. More attention does, however, need to be placed on finding ways to work smarter.

The findings in some areas evidence a significant improvement over the results of 2016. This is the case in areas such as: satisfaction with induction, slow response times from other agencies creating delays (although this continues to be an issue), and a feeling of pride to be working for Wolverhampton.

Most workers feel valued and well supported by their managers and the council and feel that their skills are utilised efficiently; however, this is contradicted by the high numbers of social workers and managers who spend more than 50% of their working day inputting data into CareFirst. There appears to be a sense of cohesiveness within teams and a desire to undertake learning and development opportunities to improve the quality of service that children, young people, and their families receive. The addition of the Advanced Practitioners appears to have had a positive impact on many social workers and these practitioners are viewed as a mostly positive source of support.

Alternately, many social workers feel that their caseloads are too high and that complexity of cases, not just case numbers, should be considered when looking at case allocation. Just over 40% of respondents feel that their caseloads are “just about manageable” and this raises a concern that one small incident could mean that social workers are tipped over into not coping with workload demands.

Most practitioners continue to report working above and beyond their contracted hours, with more than half of those contracted to work 30-37 hours reporting an average work week of 43 hours or more. However, there are large discrepancies when comparing caseloads with average hours worked and average hours spend directly working with children, young people, and families. This is an area which may require attention. Almost all of those who completed the survey have taken work home as they have been unable to complete tasks within their working hours. Reflection within supervision continues to be an area for improvement and it appears that these opportunities have decreased since the 2016 survey. This result is in line with the case file audits which have been completed between March and June 2017.

In 2016 approximately 60 social workers completed the health check survey; this year there were 129 responses. The number of respondents across a more varied workforce would have had an impact on the results of the survey. However, this survey highlights that most social workers and social work managers are happy with the City of Wolverhampton as an employer but more needs to be done to enable practitioners to utilise their time more effectively and efficiently as well as allowing more time for the completion of direct work with the children, young people, and families that we serve.

Eight respondents indicated that they would like to speak to someone about their survey results, although one of these respondents did not provide their user ID so cannot be identified. These details will be passed on to the relevant managers.

The outcome of this health check will be disseminated to social work staff across Children’s Services via a briefing note which has been completed. The briefing note be sent to managers for discussion at team meetings and the findings will be a topic at the October 2017 Social Work Conference. An action plan has been developed and the progress of this will be assessed through quarterly engagement sessions and overall progress made will be a topic at the March 2018 Social Work Conference.

5.2 Key Strengths: (these are almost identical to the 2016 results) ***The term “social worker” is used to represent all respondents across all services***

- There is a strong sense of pride in being employed by the City of Wolverhampton. The 2017 survey results indicate that 69% of respondents felt proud to work for Wolverhampton while only

40.28% felt this way in 2016. It appears that the recent “good” Ofsted inspection has had an impact as well as support and comradery within individual teams.

- The average caseload has decreased from 23.45 in 2016 to 21.19 in 2017. However, within a few months of the 2016 health check survey being completed work was undertaken to reduce caseloads. The average caseload quickly reduced to 19.91 by the end of August 2016. Therefore, although 21.19 appears to be a reasonable caseload for members of staff working 30-37 hours per week, there has actually been an increase in average caseload in the past year.
- 65% of social workers found their caseloads to be either manageable or just about manageable. Although there is a risk that the social workers who find their caseload just about manageable could be pushed into finding it unmanageable, this can be managed by regular, effective, and reflective management oversight.
- Although 55% responded that they “always” or “often” feel stressed about their workload, they also feel supported by management. This support could be utilised to help minimise the stress felt by social workers.
- Social workers (72.5%) are satisfied with the quality of supervision received and most (61.5%) receive supervision monthly.
- Very few IT related issues are experienced daily; although this increases when looking at issues experienced weekly with issues such as slow running PC, issue with CareFirst, and issues with printers/photocopiers impacting on efficient working.
- Social workers feel positive about the use of their skills in their current job role with 60% feeling either satisfied or very satisfied that this is the case. This is similar to the results from 2016. Some areas where social workers do not feel their skills are used efficiently include:
 - Time constraints
 - Playing “catch up” when taking over cases from previous workers
 - Too much time spend inputting data and completing admin tasks
 - Too little challenge and too much micro management
 - Financial/resource constraints
- Social Workers feel confident that they working in an “evidence informed way”.

- Team meetings are happening regularly and most (77%) feel happy that communication with front line managers is effective.
- Social Workers are satisfied with the level of support from frontline managers.
- Most responses were positive regarding supervision, although there has been a decrease in the opportunities for reflection within supervision sessions, from 63.16% in 2016 to 58.7% in 2017. This is an issue which has been picked up through audit and work is being undertaken to help improve this area.
- Social Workers agree that Wolverhampton has a positive learning culture embedded within the organisation.
- Social workers are satisfied with the training and development opportunities in Wolverhampton and over 73% feel that Wolverhampton is a learning organisation with a positive learning culture. This continues to be an improvement as this result was 63.15% in 2016 and only 20.5% in 2015.
- Most social workers (70.6%) report that they have not been required to cancel pre-arranged training and development opportunities to keep up with workload.
- 61.2% of respondents reported that they are not thinking of leaving Wolverhampton in the next 12 months. Of those who are considering leaving, the majority have reported that his would be to take a new job or start a new career.

Of those who are considering leaving, the factors which would influence them to remain include:

- Manageable Caseloads (56.3%)
- Career Progression (55.3%)
- Training and Development (51.5%)
- Supportive Manager (50.5%)
- Appraisals are taking place but this could still be improved.
- 78.6% agree that staff have been consulted with and involved in proposed changes over the last 12 months.

5.3 Areas for Development ***The term "social worker" is used to represent all respondents across all services***

- There has been a significant increase from 2016 in the percentage of staff who have had to carry over annual leave due to workload, from 26.98% to 42.9%.

- Most social Workers are working over their contracted hours every week and almost all have taken work home to ensure that they meet deadlines. Of those social workers contracted to work 30-37 hours/week, 29% report to working more than 48 hours and 30% report to working more than 43 hours/week.

Alternately, in the case of social workers contracted to work between 18.5 and 29 hours/week, the average hours worked in a typical week is 39 hours. However, this is skewed by two respondents who replied that they work an average of 30 hours/week and one who replied that they work an average of 40 hours. By removing these three responses the average hours worked per week decreases to 22.5 hours which is considered a very good result.

- 72% of social workers report that they spend more than 50% of their working day inputting data into CareFirst.
- Although there are very few daily issues with the reliability of equipment required to complete their jobs, Social Workers do have weekly issues which impact on their daily work:
 - 39.45% - Slow Running PCs—16.95% in 2016
 - 36.70% - CareFirst going off line frequently—22.03% in 2016
 - 11.93% - Photocopier / printer unreliable—8.47% in 2016

These are the same weekly issues reported in 2016 although the frequency of these issues appears to have increased significantly.

- Most social workers spend less than 10 hours per week (an average of 8.56 hours) working directly with children, young people, and families. This correlates to the significant amount of time spent on inputting data into CareFirst. However, this does vary greatly across responses.

When looking at responses from CiN/CP/LAC and Adoption/Fostering social workers, there appears to be some contradiction between average hours worked each week, caseload, and average time spent working directly with children, young people, and their families. For example, 9 social workers who work in one of these areas replied that they work an average of 56-70 hours each week. Amongst these respondents, the average caseload is 23.67 cases, with the case range being between 19-29 cases. However, the average time spent on direct work is only 11.22 hours per week with only 4 respondents spending more than 10 hours per week on direct work. Out of these 9 respondents, only 2 feel that their caseload

is not manageable (caseloads of 24 and 26) while the others feel that their caseload is “just about” manageable.

There may be some work needed around time management or a more in-depth look in to the caseloads of these workers to determine whether there is a proportionality between case load numbers and the complexity of the work required.

- The number of respondents (37.5%) who have had an observation in the last 12 months is low and shows a decrease from 2016 (42.11%). There remains an overwhelming response that practitioners were not aware that this should take place.
- Many social workers do not have access to lockable drawers for personal items (56.9%), a reduction by 19% from 2016, or private meeting spaces (54.1%).
- Social workers reported that delays and slow responses from other agencies always or often created an obstacle to their work. 38.26% of respondents said that “slow response from other agencies when requesting information” was a problem while 34.78% reported that “delays in confirmation/acceptance when referring to other agencies” created obstacles.