



**GRADUATE CERTIFICATE in Consolidation
of Social Work Practice
LEVEL 6 - 60 Credits
BMPF6044**

**LEARNER PORTFOLIO
(PORTH AGORED and UNIVERSITY OF WALES
TRINITY SAINT DAVID)**

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Cohort: 22

Task 2

Observation of Practice

Guidance:

*A learner must choose an observation of **direct social work practice** with people in need of care and support and/or their carers. The observation cannot be from giving evidence in court, contributing to strategy group meetings, case conferences or tribunals or any other indirect activity. The consent of the individual/s in need of care and support and/or their carers must be sought before the observation is undertaken. The observation must be undertaken by an observer who is social work qualified and has at least 3 years' experience (criteria set out in the Programme Handbook). The observation must be for a minimum of 30 minutes. The observer will gain feedback from the individual/s in need of care and support and/or their carers using either the pro forma below or one of the learner's own design at the end of the visit.*

The learner is responsible for providing a method of gathering feedback for the observer to use. This can be of their own design, and/or adapted to meet the needs of the individual. The provided pro forma can be used where appropriate. The method used will depend on age, ability and language/communication needs of the individuals in need of care and support and/or their carers.

This section will include examples of the ways in which effective communication impacts on practice in relation to language use, language needs and cultural sensitivity. You must demonstrate the principles of the "Active Offer" and make reference to "More than Just Words" (Welsh Government, 2012).

Please ensure you meet the Learning Outcomes for this task (See appendix 5 of the handbook).

Please answer the questions below.

Observation Summary

Please include name of the expert witness observing in learner's details section of the portfolio.

Date of observation: **27/09/2024**

To be completed by learner.

Question:

Context

Set out the social work objectives and give a brief description of the situation including geographical and legislative contexts and any relevant cultural, ethnicity and language issues, including how consent was gained and how you have considered the impact of the observation on the individual in need of care and support and/or their carers.

300 words (+/- 10%: include your actual word count at the end of each section).

The family I visited for my observation were a 25 year old single mum (M1) and her 6 year old daughter (C1). They are a white, Welsh, English-speaking family who live in a two bedroom council-owned flat in a town centre. C1's school referred them to the Family Support Team [FST] with M1's permission, following M1 seeking advice from the school, regarding how to manage C1's behaviour, emotions and sleeping patterns. C1 was recently referred through her school for an autism assessment. Additionally, M1 was diagnosed with ADHD approximately 12 months ago.

In line with the Social Services and Well-being (Wales) Act 2014's principle 'Prevention', the FST is a non-statutory team that offers early intervention support, reducing the need for formal support, or escalation to statutory services. The team undertakes and analyses assessments to establish a family's need. The necessary support is then provided, either direct by the team, or through signposting to other relevant organisations. The observation was my fourth visit to the family. It was an opportunity to discuss the outcomes of previously agreed actions and potential further support required.

In preparation for my observation, when arranging my visit, I explained to M1 that for my professional development I needed to be observed. I asked if it would be alright for this to take place during my visit. I explained that the observation was purely to observe me and not due to any concerns with the family. I appreciate that working with social workers can be intimidating for families due to the perceived power imbalance (Allen & Langford, 2008). In accordance with the Social Care Wales Code of Professional Practice for Social Care [SCW

CoPP] (2017), I wanted to ensure I promoted the well-being, voice and control of M1 and C1. If they had refused to partake in the observation, I would have respected their decision and cancelled the observation aspect of my visit.

[313 words]

Question:

Critically reflect on your communication methods and skills during the observation; including how you identified whether you had the necessary communication skills to work with the individual in need of care and support and/or their carers.

You must use a person-centred approach to demonstrate the integration of social work ethics, values and the Code of Professional Practice. This must include culturally and linguistically sensitive practice and the principles of the “Active Offer” and make reference to “More than Just Words” (Welsh Government, 2012).

1300 (+/- 10%: include your actual word count at the end of each section).

When myself and my observer arrived at the visit, I introduced my colleague to M1 and asked again if it was ok for her to observe me during the meeting. M1 said ‘yes’ and invited us in. We sat in the living room. I sat next to M1 on the sofa and my colleague sat in the armchair.

I had visited the family previously and was therefore already aware of their language preference. When introducing myself and arranging my initial visit over the telephone, I practised the ‘active offer’ in line with the ‘more than just words’ framework. People must be actively offered their assessment in Welsh, without them having to ask (Welsh Government, 2022). I asked M1 if they would like the assessment and future communication in Welsh. M1 and C1 speak English, they do not speak Welsh, therefore declined the offer. In the local authority that I work for, 31.7% of the population speak Welsh (Stats Wales, 2024a). Although M1 did not need the service to be in Welsh, I appreciate how important it is that I offer our services in Welsh to every family, without them needing to ask. Not only has the Welsh Language (Wales) Measure 2011 become law, giving the Welsh language official

status in Wales, Article 14 of the Human Rights Act 1998 also protects you from discrimination due to language (Equality and Human Rights Commission, 2021b). Service users must be offered the choice of which language they would like their assessment to be held in, in order to adhere to the SCW CoPP. It is important to respect a person's culture and language, and enable them to maximise their well-being and active participation regarding their care and support (SCW CoPP 2017, s.3.1). As conversations are often sensitive and emotional, it is imperative that people can express themselves in the language that they feel best helps them describe their situation and what support they require (Hodges, 2021). As a non-Welsh speaker myself, should a client need an assessment to be undertaken in Welsh, I call upon a Welsh speaking colleague to support me when working with the family.

The SCW CoPP states I must be accountable for the quality of my work. In addition, the British Association of Social Workers [BASW] code of ethics promotes ethical practice by encouraging social workers to maintain clear and accurate records. I had recorded the details of previous meetings with M1 on the relevant local authority database, including M1's concerns for C1, her wishes and feelings, and agreed actions (BASW, 2023; SCW CoPP, 2017, s.6.2). In preparation for my visit, I read over C1's file to refresh my memory regarding what actions were agreed previously and what needed to be discussed during the visit. I wrote down the points that I needed to cover, mindful that M1 and C1 might also have additional questions or support needs since my last visit.

Following my last visit, I emailed M1 a summary of the visit and the points that were discussed. M1 has a diagnosis of ADHD and informed me that she finds it difficult to retain a lot of information all at once. I suggested I email her a summary, in order for her to read over it and work through the agreed actions in her own time. My person-centred approach to support, enabled M1 to feel listened to and supported in a way that best suited her needs (SCW CoPP, 2017, s.1). During the observation visit, I asked M1 if she would like an email following this meeting. M1 accepted and said the previous email had been helpful. Providing the email to M1 has invoked me to consider offering summary emails to other families I work with, to further support them.

When discussing M1 and C1's situation during the visit, I practised active listening, incorporating the counselling skills OARS. Introduced by Miller and Rollnick (2013) to support motivational interviewing, I find OARS is an effective tool when working with clients in a strengths-based approach. OARS requires: asking **O**pen questions to obtain more detailed answers to questions; **A**ffirming the client's thoughts and actions which increases confidence and supports and promotes self-efficacy; **R**eflective listening, repeating back what they have said to let them know you are listening and that you have heard correctly, and; **S**ummarising, you pick the most pertinent details of the conversation to summarise, allowing the client to reflect on the situation and set actions if necessary. M1 was able to discuss her current situation and needs, and together we worked collaboratively to decide actions going forward. Using OARS enabled me to affirm to M1 that I was listening and that her wishes and preferences had been understood. I recognise in myself that my active listening skills have improved since I first qualified. I have learned to talk less and listen more, which enables the client to have the opportunity to analyse their own situation and identify their strengths and needs.

I also used non-verbal cues for communication, which are a vital component to meaningful and effective communication (Allen & Langford, 2008). Non verbal cues include eye contact; posture; gestures; facial expressions; paralinguistics, your tone and pitch; proxemics, the management of space, and; humour (Subapriya, 2009). I was sitting quite close to M1 on the sofa, due to my colleague sitting in the armchair that I would usually sit in. I was aware that this could be quite intimidating for M1 so I sat at the end of the sofa, facing M1. I looked at M1 when we were talking to ensure she knew I was paying attention. I also used soft facial expressions and smiled when appropriate. I wanted M1 to feel comfortable and at ease when talking to me, promoting her dignity and right to participation. Not only as requested in the BASW code of ethics (BASW, 2023), but my own personal values. I believe it is important to make people feel at ease and respected when talking to me, especially during difficult and very personal conversations.

During my visit, I worked in partnership with M1 as we discussed the actions agreed from the previous visit. We spoke about what outcomes had previously been agreed and what M1

feels still needs to happen. The new actions agreed included tasks for both M1 and myself to undertake, including M1 speaking to C1's school to request further support for C1 regarding understanding and expressing her emotions; while I would contact Citizens Advice and request they call M1 to discuss potential eligible benefits that the family could be entitled to. M1 felt confident in speaking to the school, but not so confident contacting Citizens Advice. By working collaboratively with M1, I was able to draw on her strengths and only support her when she felt it was necessary; putting M1's voice at the heart of decisions, and respecting the 'People' principle of the Social Services and Well-being (Wales) Act 2014.

By the end of the visit, we had discussed M1's current circumstances, what actions had already been completed following my last visit and agreed on a number of actions going forward. These included tasks for me to undertake, to refer M1 to third sector services, and tasks for M1 to undertake, including contacting school and the GP, and making some changes in the home to support C1's sensory needs. By clearly identifying the agreed tasks, M1 felt confident going forward and could see a pathway to her reaching her desired outcomes.

Upon reflection, I feel the visit went well. I was able to communicate effectively with M1, regarding previous and future actions to be taken, to achieve her desired outcomes. I feel I have built rapport with M1 and have made her feel comfortable in expressing her needs. This has allowed me to support her to achieve change and reach solutions that best suit her and C1. That said, I am not complacent. I realise that my communication methods, both verbal and non-verbal, can have a profound impact on the successfulness of my interactions and assessments with clients. Going forward I will continue to evaluate my communication techniques to ensure all families receive the correct level of support for their individual needs.

[1368 words]

Feedback and comments from individual in need of care and support and/or their carers

Information for the observer

This section of the Observation should not be completed in the presence of the learner.

No formal written feedback is required from the observer on the learner's practice. However verbal feedback should be provided to the learner as soon as possible after the observation. If the observer is not the mentor, then feedback should also be provided to the mentor.

Some or all of the questions below may be used by the observer who can rephrase and add explanations and prompts as required. The observer should record responses from the individual in need of care and support and/or their carers below, or by using an alternative method if required/provided.

Before asking the questions, the observer must explain to the individual comments will be shared with the learner. It may be useful to explain that it is used as a learning tool for the learner to develop their own practice.

If the observer is unable to gain feedback, they should briefly say why.

Was the social worker on time? Or, if delayed, did he or she contact you?	Never been late
Did the social worker get your permission in advance for the observer to be present? Did they explain why they were being observed?	Yes
Were you clear why the social worker met with you today?	Yes
How well prepared do you think the social worker was for his or her meeting with you?	Very
How has the social worker listened to you and respected your views and wishes?	Yes
Did the social worker talk to you in a way that you understood? Did the social worker consider your language needs?	Yes
How has the social worker's involvement met your expectations for this visit?	Yes
Are there any other comments or suggestions that you would like to make?	No, she's lovely.