

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

**LEARNER PORTFOLIO
(PORTH AGORED and UWTSD)**

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**WALES INSTITUTE for WORK-BASED LEARNING
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Portfolio Guidance

Please read these notes carefully. They provide essential information. The documents you will use in developing your portfolio are on the following pages.

What is the portfolio for?

The purpose of this portfolio is to enable learners to demonstrate and provide evidence of how they meet the learning outcomes set by the Social Care Wales, for the Consolidation programme, including:

- Applying analysis in assessment to inform intervention;
- Intervention and application of professional judgement in increasingly complex situations;
- Working collaboratively with service users, carers and other professionals.

Learner and employer learning agreement

At Section 9 of the Portfolio, you will find a blank copy of a learning agreement that you need to read, discuss and agree with your mentor, manager and training manager/coordinator. Once the agreement has been signed replace it in Section 9 of the portfolio.

How should the Portfolio be presented?

The material you write to include in the portfolio must be typed. Information about this can be found in the Programme Handbook. The whole portfolio must be submitted electronically. Portfolios must be complete at the point of submission.

How is the Portfolio assessed?

During the programme, advice and support about the development of your portfolio will be provided as part of four, mandatory Consolidation workshops, and by your mentor. Feedback on all aspects of the work you are undertaking to develop the portfolio will be provided as part of these workshops. Neither your mentor nor training staff you may have seen as part of the Consolidation workshops will be involved in marking your portfolio after submission. Portfolios are marked by appropriately qualified staff outside of your own employing organisation.

Dates of portfolio submission will normally be made available at induction, at consolidation workshop meetings and posted on Moodle.

Confidentiality

It is important that no individual can be identified either directly or indirectly from the information in the portfolio. You must:

- adhere to guidance in the Programme Handbook about confidentiality;
- not identify your Local Authority/employer by name or by associating any geographical, physical or other feature which might enable it to be identified. This includes reference in the bibliography to policies e.g. please use 'xxx authority policy';
- not identify any individual using services, their family or carers by name. Instead you must use numbers e.g. 1, 2, 3 etc. and **not** letters;
- not write information that enables any individual using services, their family or carers to be identified indirectly through the description you provide. This includes references to names, colleagues, places (including hospitals, schools, town, villages, streets) specific incidents which might enable identification due to past publicity, other professionals or any other personal information including medical or other conditions;
- take personal responsibility for adhering to confidentiality rules. Although consolidation workshops and feedback about your portfolio will provide guidance and feedback, it is the learner's responsibility to ensure the portfolio adheres to the confidentiality requirements stated in the handbook and above.

Remember that the Portfolio is YOUR responsibility you must not rely on anyone else to pick up any confidentiality breaches as this is your work. You must accept full responsibility for confidentiality. Meeting all the confidentiality requirements is very important. Breaches of the confidentiality rules may incur a penalty including a deduction of marks or a fail, please see handbook for details.

Dyslexia and other special circumstances

If you have any condition that you feel may affect your ability to deal with any part of the programme, please contact your training department immediately to discuss any additional support that may be needed. The University has a Student Services Unit that may be able to help but ***it is the learner's individual responsibility to contact them.***

Section 1

Graduate Certificate in Consolidation of Social Work Practice - Learner Portfolio

Guidance:

- Your portfolio must contain items 1 - 9 below (in the order given);
- You should use this pro-forma to insert your text within each section;
- Please make sure the Signatures page at Section 8 is fully completed before submission

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Section 2

Developmental review (a)

Guidance: This section should be completed by taking into account the work that you will have done since qualifying, and discussions with your mentor and supervisor/line manager as part of your First Three Years of Practice Individual Plan.

Based on your experience in practice identify and justify your agreed learning needs for the following outcomes:

- Working Collaboratively with service users & carers
Working Collaboratively with Other Professionals
- Applying analysis in assessment to inform interventions
- Intervention and application of professional judgement in increasingly complex situations

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

I was lucky enough to secure full-time employment within the same team I spent my third-year placement and have remained within this team thus far. I am based within a children, family and assessment team which is broken down in to three sub sections, those being; Intake, Long-term North and Long-term South. I am part of the long-term North team and therefore cover North of the county we live in. As various sections of the same team we work collaboratively daily, with internal and external professionals to form our assessments. These assessments and the analysis of information we gather whilst working collaboratively with our service users and their families, support the decision-making process of this intervention. Whilst there are occasions where professionals and or families may not agree with the decisions made, these are based on the rights of the child, their families and balanced against any safeguarding concerns and legal duties.

As part of my final year as a student I addressed, moving forward, what I aimed to achieve for my first three years of practice. This was done alongside feedback from my supervisor in relation to caseload management, learning needs and professional development. At that time, it was viewed that my learning needs were to develop my confidence as a Practitioner and assert my view more confidently when reading/providing information to Conferences and the Court. There is a balance to be had

between dominating discussions and being assertive, however a level of assertiveness is often required in volatile situations such as working with Parents about immediate safeguarding risks to their child. I have observed that a level of assertiveness is often beneficial when working with some agencies, who may try and pass on roles to other agencies, which legally may not be the other agencies responsibilities. which are for their agency on to others. Collaboration such as this is also required in ensuring each person involved in any intervention understands what their responsibilities may be in any given intervention.

Direct work with children was also something I wished to focus on as a learning need, as the more formal aspect of direct work it often overlooked in view of more pressing paperwork deadlines, however with the SWBA 2014 strengthening the voice of the child and any interventions being outcome based this is a specialism that should form part of daily practice. Afterall, Community Care states, "Making time for direct work is my definition of good social work" (Manley 2016). The research in to Court Direct work leans heavily on the views and wishes of the child and how these can be better reflected using specific activities to aid emotional development and identity (.

I am a practitioner who will go the extra mile to ensure that service users and their families are empowered to be a part of the intervention rather than something which is done to them (Codes of Practice for Social Care Workers). I fully appreciate that our assessments inform not only any ongoing interventions of the local authority, but are scrutinised by our service users, their families and other professionals. I also acknowledge that seeing something negative in black and white can be extremely upsetting for those involved and feel that there is a way in which negative aspects can be reports, which allows inclusion and outcome collaboration. I also acknowledge that there is an element of compliance for the families we work with in relation to safeguarding. Thus leading to complex decision making which is not always fully accepted by the child and or family, but is a requirement by law (Children Act 2004).

With the Social Services and Wellbeing Act (Wales, 2014) promoting the views of the service users and their families not just within the assessments but the provision of interventions and the outcomes of such assessments, highlights that direct work and gathering the wishes and feelings of those we work with regardless of age, is not only a fundamental aspect of social work practice, it is our responsibility to ascertain this information by making it more client focussed.

Word Count: 550

Section 3

Observation from an individual using services, their family and carers

*Guidance: A learner must choose an observation of **direct social work practice** with an individual using services, families and carers, and record it on the following pro-forma. The observation cannot be from giving evidence in court, contributing to strategy group meetings, case conferences or tribunals or any other indirect activity. The permission of the individual using services, their families 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 a minimum of 30 minutes long. The observer will gain feedback from the individual using services, their families and/or their carers using the pro forma below at the end of the visit.*

Although the learner can choose to use the proforma provided for gathering feedback, they are encouraged to make this as in-depth as possible, and to use a range of ways to gather it, depending on age, ability, and the needs of the individuals using services, their families or carers.

In completing this section, you should watch the 4 video clips of 'More than just words' on Moodle as these should help you think about your own experiences and to reflect on why language should be an integral part of assessment and service provision.

Observation Summary

Please include name of the expert witness observing in section 8.

Date of observation: 7/12/17

To be completed by learner

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.

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

The objectives of this observation were to develop a relationship in a non-threatening manner whilst encouraging Child 1 to speak out and to share her wishes and feelings. Thus, empowering her to share her view and ensure she is safeguarded.

Child 1 is 10 years old, is the youngest of three siblings all of whom have been home educated, the lifestyle choices of her Parents could be viewed as unconventional as they refuse to conform to "constraints of society". The views of parents and lifestyle choices, cause difficulties in relation to how social workers access this child. There are several concerns in relation to parent's ability to safeguard Child 1, prioritise her needs, above their own, and to provide consistent parenting.

Child 1 is extremely shy and protective of her parents, choosing not to discuss her family situation easily. Dad is controlling and does not always wish for Child 1 to be seen alone, therefore the decision was made that Child 1 should be seen away from the home in a neutral non-threatening environment (Codes of Practice 2017). The aim being to provide a safe place for Child 1 to relax and engage with Social Worker openly in a non-threatening manner away from the family home.

Child 1 enjoys craft activities, therefore, choosing a subject which she already enjoys and is comfortable with would address the power imbalance, and support developing our relationship. In assessing the situation, I chose a task which Child 1 is already comfortable with, to further develop her skills and where she could feel as the expert. It was hoped that should she feel empowered to impart some of this wisdom with myself, this would ensure the activity was relaxed, fun and informal as it would be child led.

Word Count: should be 330.

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 using services, their family or carers. Show how you adhered to social work values using a person centred approach, Code of Professional Practice for Social Care Workers, cultural sensitive practice, language preference including the "Active Offer" principle, and ethical practice.

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

In preparation, I considered the venue for Child 1: she lives in a remote area of a rural county and having spoken with her, she is acutely aware of her parent's views of social work intervention. Having previously informed me she would not wish to go to one location, in case her friends saw her there. This must always be a consideration in view of working within a small rural County, as the individual or the worker may be known to that community, thus creating a barrier for communication and confidentiality. In Charlotte Williams book "Social Policy for Social Welfare Practice in a Devolved Wales" she writes about the various difficulties in practice not just us, as social workers face, but the barriers to practice if we are to ignore the needs of the clients, regardless of what they may be, there is a need to acknowledge them and where possible address these needs. *"For some potential Service Users, the degree of social visibility within their small communities poses particular difficulties in regard to confidentiality, risk and recognition of their needs"* (S Williams, 2011, pg 98). The Code of Professional Practice Standards for Social Care (Social Care Wales 2017) also covers the links between good practice and "active participation", ensuring that all interventions are done with or alongside the individual, rather than the oppressive "done too" approach.

I considered communication methods and planned to keep the observation very informal given Child 1 is extremely shy and withdrawn on occasion. Hoping this would empower her to open-up rather than feel forced to enter in to a discussion of my choosing. I was mindful of my body language, facial expressions and providing positive non-threatening eye contact in the hope she would feel safe in an environment which was new to her. I planned to be led by her and to keep any questions to a minimum, keeping conversation to general safe topics, such as what she had planned for the remainder of the week, activities I know she attends, Christmas and family members I knew she would be seeing.

Child 1 is an English language speaker and does not speak any other languages therefore whilst there was no need to offer Child 1 the "active offer" in line with the Social Services and Wellbeing Act (Wales

2014) (SSWBA). Had Child 1 spoken Welsh, I would have considered offering her a service in her first language, as is her right. SSWBA states that it is the Local Authority's duty to provide individuals with services in their first language, rather than this being something they must request, this is referred to as the "Active Offer". Within "More than just Words" (video clips, Moodle 2018) we see how much a service can excel in the eyes of an individual, if they are provided with this service in their native tongue rather than a language they may feel less confident in. The clip of Gwenan Prysor, resonated with myself and my practice. In it, she notes that some of the Ward staff, would say "My welsh isn't good enough" or "I only know a bit" in relation to interacting with her son who was in hospital, and her response was, "this isn't about you, its about my son..." (National Assembly of Wales 2015).

On reflection I feel this clip highlights the significance of choice, and the "active offer", but also demonstrates we all prefer to speak in the language we were brought up in, as it gives us a confidence, and a sense of identity. Whilst this was not a factor for Child 1, the clip made me consider that as a second language Welsh Speaker, this is something I will do, as I always offer to speak in Welsh if this is their preferred language. However due to my confidence, I will often commence a discussion in English, rather than Welsh, which could then cause a barrier. Given the evolving society and differing cultures living in such small communities alongside one another, consideration should be given to the inclusion of other languages within the "active offer" rather than Welsh/English. Had it been required, I would have conversed in Welsh, however for all other languages this service would be purchased in, meaning a possible delay in any intervention, which once again creates barriers.

Thought was also given as to what activity could be done to enable Child 1 to have fun, use very little concentration, speak freely, and to have something at the end of it to promote her self-esteem. Bearing in mind Child 1's vegan lifestyle and parents views of the intrusion of services I wanted to ensure any direct work, would not go against their vegan lifestyle.

On reflection, the task did not go to plan although Child 1 enjoyed herself and was able to share this with her parents. The family centre we wished to use was not available, which would have provided the right space and running water which, for the planned activity. I then chose a room which was large enough but had no running water, however, as it was close to the toilets and as Child 1 was excited to commence this activity, I agreed to continue with the planned activity. The day before the planned observation, I was notified the room I booked had been cancelled in error and was no longer available. Consideration was given to cancelling due to the various difficulties, however as Child 1 had been looking forward to this activity, I decided to continue. With my supervisor, we discussed what could be

done given the short notice, the room we had available and agreed to "jelly printing" as this would be something fun, low cost and Child 1 may wish to try with her parents. Consideration was also given to the tools required, given the lifestyle choices of the family, I was thankful my line manager had both vegan and non-vegan jelly templates that could be used.

I hoped, in Child 1 being away from the home and the controlling environment she lives in, it would allow her to express her views. I now see this was naïve of me, as Child 1 is extremely shy and has been brought up within her family, therefore knows no different, than the views expressed by her parents. As much as I have been visiting regularly, I am still a stranger to her and given the concerns and her need to protect her parents, to consider she would open-up during this initial task was aiming to high. I feel I met my objectives in relation to building a relationship, empowering her to share her views and whilst she didn't speak on the day, she has done since. I question whether she simply needed time to trust me or whether our shared experience cemented this.

On reflection, I noticed that when I'm nervous or lack confidence, I will revert to humour as an ice breaker and used this a lot during this observation. Child 1 was observed to respond well to this on occasion however not always. As an individual, sarcasm is also part of my identity which I usually refrain from this in Social Work interventions, however on this occasion perhaps due to my being uncomfortable as I was being observed, and the task not being something I had undertaken previously along with the natural silence of Child 1. It is of note that whilst Child 1 appreciated my humour, she was not at an age to understand sarcasm. For example, we made Christmas decorations with the prints, and as I had forgotten the biscuits, I made light of this, and suggested that I would make child 1 a pair of earrings instead. She went along with this, until I presented her with two oversized sparkling Christmas trees, made of paper and string, she smiled nervous and naturally, refused to wear them. To demonstrate how pleased with them I was (sarcasm), I proceeded to show colleagues what I had made for Child 1 as we left the building. Child 1 continued to laugh at me for most of the journey home, in that embarrassing way children do at adults. I felt this was the most she had relaxed during the task.

Since this task, Child 1 freely states I'm weird "in a good way", however I see this as a positive, as we now have a shared memory which she refers to on occasion thus cementing our relationship and demonstrating how effective this child centred collaboration was.

Word Count: 1419

Feedback and comments from an individual using services, their family or carers

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

Some or all of these questions may be used by the observer (who should re-phrase and add explanations and prompts as required). Alternatively, the learner is able to design their own method of obtaining information for the Observer to use if this is more suited to the needs of the individual. The observer should record responses below or by using the alternative method from the individual using services, their family or carers.

Before asking the questions, the observer must explain to the individual using services that their 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?	Yes, she was but I'd slept late so wasn't ready when the Social Worker came to get me. The Social Worker waited for me and wasn't in a rush. I don't like rushing, that was good. We didn't make the fleece like she said we were going too, because she didn't have a room with water, but its ok because we did the printing instead, I liked it.
Did the social worker get your permission in advance for the observer to be present? Did they explain why they were being observed?	Yes, she asked me when she came to the house. I like the Observer, I've met her before, and anyway we needed to show the Social Worker what to do. She's not very good at crafts.
Did you understand why the social worker was meeting with you today?	Yes, she wanted to see me away from the house. I think she wanted to do something fun, which was different to what we had been doing at the house. Today was better than drawing
Do you think the social worker prepared for her	Yea, I think she knew what she was doing. I know we couldn't do what she planned, but it was still good.

meeting with you today?	We had fun, like she said we would. She made me laugh.
Do you feel the social worker listened to you and understands your views in your word?	Yes, I think so.
Did the social worker talk to you in a way that you understood? Did you understand the language they used?	Yea, all the time.
What do you think about today's visit?	I had fun today. I enjoyed the printing and think I'd like to do it again, maybe on a t-shirt, something I could wear. The Social Workers weird, she makes me laugh though.
Is there anything else you would like to say about today? About the session or the social worker?	She forgot the biscuits. She made me a present, which was nice. They were big earrings made from paper. I'm not wearing them though. She's not serious, is she?

Section 4

Safeguarding and working in complex situations – Case Study

Complete a critically reflective case study based on an assessment, undertaken with others **(in your own area of work)** concerning the safeguarding of either an adult or a child. Demonstrate how the case relates to safeguarding legislation and your Safeguarding Boards safeguarding policies, strategies and procedures. Ensure that you cover the learning outcomes, National Occupational Standards, legislation (domestic and international), the specific dimensions of working in Wales and relevant social work theories. Please find list of learning outcomes in the handbook

4000 words (+/- 10%: include your actual word count at the end of each section)

I will demonstrate how my role within a busy child and family assessment team has given me a greater understanding of working in complex situations, the pressures this can place on you as an individual and as a team. Using my case study, I will reveal how frustrating it can be when the realisation of what you, as professionals, feel should happen to safeguard children and what the Law says you can act upon. As these are often two very different aspects of working collaboratively with service users, carers and professionals, in conjunction with the policies, procedures and legislation that governs this. I will explain how my applying analysis informed interventions and highlight how this is key to evidence-based good practice, thus expressing how the application of professional judgements in increasingly complex situations is more apparent in daily social work practice than I had first given thought too, in my initial years since qualifying.

The case study I have chosen to use to is in relation to a family I continue to work with and whom the Local Authority have recently commenced proceedings with (Children and Families Act 2014, Part 2, section 16). The family consist of two children, one male aged 9 years and his sister aged 7 which I will refer throughout this assignment as Child 2 and Child 3. They live with their mother who is an alcoholic, their father resides in a separate County but whom they have regular contact with. He is a social, substance misuser and someone whom the Police suspect may be a local distributor of illegal substances. Prior to moving to the County I practice in, the family were known on a Child in need of Care and Support basis which is voluntary (Children Act 1989). However, since Mother and the children moved to our County and the risks have escalated, the children's names have been placed on the Child

Protection Register (Children Act 1989) under the category of Neglect and physical harm. The relationship of parents is intermittent and extremely volatile, whereby domestic abuse is a common occurrence. The children have both observed these incidents and been a part of them to a certain degree. Mum has received two cautions for child neglect. Prior to Court proceedings the concerns were also managed under the Public Law Outline (PLO) Process (Children and Families Act, 2014).

Safeguarding in its most general terms means the protection of children, those who would be deemed as vulnerable due to their age, illness, disabilities and or a lack of capacity. However, in practice, the term safeguarding is more complex. The definition of Safeguarding within the All Wales Child Protection procedures (2008) which outlines what's expected of social workers, agencies and the Local Authority in all child protection issues here in Wales. It states, "*Safeguarding and promoting the welfare of children is; Protecting children from abuse and neglect; Preventing impairment of their health or development; and Ensuring they receive safe and effective care to enable them to have optimum life chances*". The child is paramount in all assessments and decision making but this must be balanced against the risks, rights of the child (United Nations Convention on the Rights of the Child, UNCRC1991), cultural aspects, parenting and an environmental approach to working with parents. Safeguarding is a collaboration with the child age appropriately, their parents/carers and agencies. Thus, demonstrating that safeguarding children is complex and multifaceted, K Holt, spoke of this in her book Child Protection (2014); "*Social Workers are required particularly in the context of child protection to deal with a great level of uncertainty within a context of crisis and stress and this can be overwhelming for the most experienced practitioners*" (pg37).

Here in Wales the Welsh Government "*enshrined the principles of the United Nations Convention with a legislative mandate. The National Assembly for Wales passed the Rights of the Child (Wales) Measure on 18 January 2011*" (K. Holt. 2014. Pg 24). Which ensures that all legislation within Wales, has a legal responsibility to pay due regard to the principles of the UNCRC. Meaning that the Social Services and Wellbeing Act (Wales) 2014, has the UNCRC enshrined within this act, which aims to put the client and their parents or carers at the forefront of any intervention, ensuring they are included as part of the collaboration of the intervention.

The definition of Collaboration is "team work", (Oxford English Dictionary, 2016) and whilst team work may not be an option that some families working with child protection social workers, partnership is something that the social worker will aim for. For the remainder of this assignment I will use the term collaboration to mean partnership as I feel this is more apt, given the role of social workers within the

Child Protection process and the views of the parents we work with, as they will always be included but will not genuinely view this as team work. Working in collaboration with service users, their families and professionals is a two-way process and starts with respect and each person understanding their roles within this collaboration.

Using my chosen reflective theory, I will evidence through this case study, that there had been several missed opportunities, and the collaboration required to safeguard these children, was missing, prior to our involvement. Due to parents previously residing in another County and incidents being dealt with by a partner Police Authority, when the case transferred to this area there was very little known about this family or the risks to the children.

Using Gibbs (1998) reflection model which supports practitioner's critical reflection on an incident of significance such as this. Gibbs states there are six stages to this, those being; 1)Description, 2)Feelings, 3)Evaluation, 4)Analysis, 5)Conclusion, 6)Action plan.

For example; 1) at the Initial Child Protection Conference, the Police shared information which was not known to our county, be that social services or the local Police force. 2)This left agencies feeling frustration and put in a risky situation as information such as this would have meant the children were not returned to their parents' care following the most recent incident where Mum was charged with Child Neglect. 3)As a social worker in my early states of my career, the level of culpability agencies may have faced for allowing these children to be returned to their parents care and be placed at greater risk, is not something I was prepared for. 4)This gave me first-hand knowledge of another aspect of accountability, which left me as a newly qualified worker feeling isolated and at greater risk of scrutiny as I, like others had been left unbeknown to us, working in a silo, which was the predetermined factor in the serious case reviews of those noted above. 5)Considering the level of serious case reviews in relation to Peter Conolly (Lamming 2009) and Victoria Collumbie (DOH and the Home Office, 2003), the fact that agencies continue not to collaborate with one another left me feeling scared, not just for my practice but also for the children we are supposed to be safeguarding. 6)Thankfully unlike with Baby P and Victoria Climbié these children did not come to that level of harm, however once this information was shared they ensured that this was filtered back ensuring where possible this does not happen again.

The information shared at the initial conference as described above, also made me realise that parents had been less than honest with us as agencies and whilst we always practice a level of "respectful uncertainty" (Lamming 2003). I was now aware of the level of disguised compliance I was dealing with,

as it was now clear that both parents had previously “done just enough” to keep services away. Demonstrating they were actively prioritising their needs above that of their children, thus placing their children in direct harm.

Prior to the conference being held, Child 2 and child 3 to a lesser extent made several disclosures regarding the level of care parents were affording them, all of which were fully investigated. However due to no evidence to substantiate these disclosures and parents being very convincing in their view, there was no way of progressing these. Whilst in the team I have completed the Achieving Best Evidence (ABE) training (Department of Justice, 2012). Where practitioners undertake section 47 investigations as a single agency or joint with the Police, when a child protection disclosure has been received. This training teaches Practitioners the “ABC” rule which is Assume nothing, Believe No one and Confirm everything, thus highlighting that evidence-based practice is key in all aspects of Child Protection. In “The Social Work Pocket guide to Theory Informed Practice” (Siobhan Maclean) states that evidence-based practice is *“the conscientious, explicit, and judicious use of current best evidence in making decisions about the care of individuals”* (Sackett, Sraus, Richardson, Rosenberg and Haynes 1997).

Evidence-based practice is always at the forefront of my practice; however, the gathering of such evidence is more complex than I had first considered. These children introduced me to a level of complexity I had not encountered previously as they would regularly disclose to myself and other professionals, then panic and retract. Add to this, the parent’s views that the children had a vivid imagination and were lying or making things up, the time it took for the children to discuss anything with a Police Officer present, all appeared to be feeding in to the children’s views we did not believe them and the parents views of the children, as being lying. This was not a view shared by myself or other agencies, but it did leave us with very little or no evidence which would hold scrutiny in Court.

I had not considered the children would perceive my being unable to act upon their disclosures as my not believing them and that I subsequently believed their parents. I did not anticipate the feelings this would evoke in me, upon hearing the children’s view, as I felt having never doubted their disclosures and advocating for them as strongly as I could, that I felt I had failed them. Using Gibbs’ reflective model, I was able to analyse this as simply frustration, that after all my hard work, unbeknown to the children and whilst I considered whether this meant that I subsequently forgotten the “child centred” aspect of my practice. On reflection I know I acted in the children’s best interest but knowing the complexities between what I may wish to take place to safeguard the child and the action, we as a local

authority are legally permitted to take to safeguard the child. I had inadvertently adopted a “protective” mode to my practice, in not wanting the children to feel blamed for us not acting, I had stopped talking to them about this, which meant they then assumed that I didn’t believe them.

This case has given me an insight in to the complexities of working with children and their families, whilst being child centred and evidence based; holding due regard to the rights of the child versus what the legal parameters of agencies. For example, the information and consistency of the disclosures of both Child 2 and Child 3 was something I never questioned, as I believed them to be telling the truth. These children would regularly ask if they could come and live with me, enter in to foster care and if they could be adopted, which is relatively unheard of with children. As even with the most prolific abuse, children will often ask for the abuse to stop but always want their parents or care givers. On one occasion, Child 3 when asked the “3 wishes question”, her first wish was “I wish Mummy wasn’t here, so she didn’t hurt us anymore”, upon seeking clarity Child 3 informed me that when she said, “wasn’t here anymore” “I mean dead, like really dead”. Although shocking, never has a child’s voice been so powerful, the fact that we had no evidence to substantiate what the children were saying, left me feeling very uncomfortable in leaving these children home with their parents. The frustrations and complexity of this case left us as practitioners, often having frustrating discussions as to how much more these children would need to say before we as a Local Authority had enough “evidence” to commence steps to safeguard these children.

Moving forward with this case, as a practitioner I naturally use Schon’s theory of reflection (1987) as part of my everyday practice, he describes this as “reflection in action” and “reflection on action”. Therefore, I felt to progress, the assessment needed to be updated with this information to safeguard the children along with the Child Protection Plan. Within this County we complete Core Assessments within 45 working days, and subsequently update with significant events. Therefore, to do this, I used Peter’s description of four step protocol to analysis, called DATA (Describe, Analyse, Theorise, Act, which also links to Gibbs’ theory on critical reflection.

We use the “Framework for the Assessment of Children in Need and their Families (Department of Health 2000), as a tool in our assessments. This is a child centred, needs led assessment which supports our evaluation of all aspects of the child’s needs, environmental, social and cultural aspects of the child’s life including the needs of the parents in relation to their ability to provide “good enough” parenting. *Parenting Capacity can be defined as the ability to provide “good enough” parenting throughout childhood. The term “parenting capacity” is differentiated from the term “parenting ability”. An*

individual may be able to parent for a short period of time in specific circumstances, such as supervised contact, and therefore demonstrate parenting ability, but not the capacity to parent effectively on a long-term basis (Assessment Frame Work, 2013). We refer to this as the assessment triangle and use it in our interventions with clients, families and other agencies, thus promoting collaboration.

The SSWBA 2014 also lends it to this assessment tool as “the act places a new focus on participation and cooperation within the local authorities and across organisational boundaries (Drayford 2015), demonstrating the significant of assessments not only being child led but environmental, social and cultural. Using the DATA protocol noted above I was able to evidence the aspects of risks, through describing the issues and significant difficulties; parents lack of honesty and parenting capacity due to their substance and alcohol difficulties, analyse needs of the children against the environmental difficulties, to theorise a plan of action and then act upon this by forming an action plan.

In undertaking a strengths-based assessment of analysing risks versus needs, which is an outcome-based assessment and is service user led this allows the service user to look at their strengths, weaknesses and level of resilience. As a Local Authority we have recently signed up to the Signs of Safety model (2011), which works very much to the strengths, outcome based, service user led assessment. This model is currently being rolled out across our agency and is in the very early stages. However, I am aware from previous cases I’ve worked that other agencies across the border in England, have been using this model for some time. In the future, the Signs of Safety will support implementation of service led, outcome-based assessments across the agencies within this County, as the health and schools will also adopt this model making assessments more of a collaboration than Social Services led.

Our assessments are fundamental in decision making and support our professional judgements as well as other as the level of analysis within these assessments supports managerial decision making such as within the Legal Case Planning Meetings. These meetings consist of team manner, service manager, other heads of service where appropriate, the local authority solicitors and myself. These meetings are held to ensure we as a Local Authority are doing all we can to safeguard Children in our area, in line with Children Act 1989, Children and Families Act 2014, All Wales Child Protection Procedures 2008 and SSWBA 2014.

This is the second case, where I have felt that decisions made in these meetings were not in the child’s best interest and we were leaving the children at greater risk of harm. The children are in a place of safety now, however, I now have first-hand experience in relation to the complexities of decision making

of the Local Authority to safeguard children. Managers may not always choose the view of the social worker as the most appropriate course of action, which can feel as if the view of the person having regular contact with the children and their parents, and the author of the assessments, somewhat inferior to the view of senior management. The first time I encountered this, it knocked my confidence significantly, as I felt strongly that the children were being placed at risk of significant harm, and that the Local Authority, we were facilitating this. I also felt that as a newly qualified worker and author of such assessments, my view point was not respected, which made me question my role within the agency. On reflection I feel I took things personally, having to challenge the views of my Manager and Service managers so early on in my career was something I was not expecting, and I was uncomfortable with this initially. The Codes of Practice as set out by the Social Care Wales (2017) are a set of seven standards which service users and their families here in Wales, can expect from social care workers. As a social worker these are always at the forefront of our practice, however, in the early days of my practice, I recall having to leave a meeting on one occasion as the need to "stamp my feet" as children do when they don't get their own way, became too much. Initially I felt this was due to no one listening to my view, my feeling out of my depth and that I had somehow failed these children, on reflection, I could see it was not that my view was being ignored, it was not the view of the meeting. They were considering the legal restrictions, the lack of evidence and balancing these against the potential risks as is the responsibility of the Local Authority. I am naturally critical of myself as I strive to be the best I can be, which can then provide additional barriers to overcome as I balance what I feel should be done in the best interests of the service user and what legally we are required to do.

I can now acknowledge within this scenario, whilst I was focussing on safeguarding the children, as a local authority there are also other aspects that need to be taken in to consideration when service managers make such decisions and whilst I am not stating that such decisions are made considering the financial implications. I am also profoundly aware that in a small county such as ours, resources are governed by financial ramifications. On reflection, I had not considered, that in situations such as this, my confidence at times, would be depleted to such a level I would question my decision making, my training and my professionalism. For instance, in advocating for the children on my case load and disagreeing with the decisions of management, I would be held in high regard and respected by other agencies and my colleagues, but not by management within my organisation. Situations such as these have reiterated why I have no wish to be at senior practitioner or Manager as my passion for challenging injustice, is not something at present, I can always channel in a positive way, leaving me frustrated and questioning my role, this is something I continue to address.

Through supervision with my senior, I have been able to use this as a safe environment to discuss my thoughts and feelings regarding situations such as this. I feel this is an invaluable aspect of supervision and is vital in such situations, as this alongside support and guidance helps inform practice. For example, in relation to the above, I am aware that I cannot change the decision making, however it is my responsibility to document that I disagreed with the decision and why. Ensuring, should I be held accountable for this decision making in the future, as the key worker, that it was the decision making of the Local Authority rather than the social worker and that the accountability lays with the Local Authority. Initially this was something I was uncomfortable with as I viewed that we were a team and therefore worked together in decision making.

I also found that peer supervision is a positive aspect of our team as we naturally provide each other with the buoyancy needed to get through some difficult days. The Codes of Practice for Social Care Workers (Social Care Wales 2017) and the National Occupational Standards for Social Care (2014) both state that we, as social workers need to challenge injustice, respect the views of service users and their carers, be accountable for our decision making and act with respect and integrity. I fully acknowledge that challenging the views of others is something we as social workers do on a regular basis and I will continue to do so. However, in relation to challenging the decisions of management, going forward, my aim is to develop a way of continuing to do so appropriately, whilst not allowing these decisions to deplete my confidence or take things personally.

This will be the fifth case I have seen through the Court process and whilst I still find this process intimidating due in parts to the hierarchical structure of the Court and the scrutiny of your practice. I am aware that this feeling is natural and is for all the right reasons, as although I know that as a local authority we have a duty to make alternative provisions to safeguard the children when parents or carers cannot. The fact, it is you as a practitioner who faces the questioning and your practice and assessments which are scrutinised by the barristers, looking to find fault in anything to discredit you, is something I don't feel I will ever feel confident in. I'm also aware of the invaluable insight this has given me to evidence-based practice and the need for all assessments to be not only child centred, environmental but open to scrutiny by not just the children and families we work with. These assessments inform not only this intervention but may be used to inform interventions with this family in the future. On reflection, whilst I may not have felt this, the time I was questioned on my evidence by six different barristers for one court case, I am aware I enjoy some aspects of social Court work. I say that as I feel it is only having tried every other possible option to keep the children with their parents or families, and knowing you tried your very best for that child

Initially, I rather naively felt complex cases such as those discussed within this assignment, would be the cases the more experienced social workers managed and that I would not work these cases until I had progressed within my career. Once the realisation that I did have the knowledge, skills and qualifications to manage such cases sank in, I feel I managed these in a child centred manner, whilst being respectful of the parents. I am aware that writing the documentation of Court may have taken me longer than a more experienced practitioner, however, this is a skill I will continue to develop within practice. I am also aware that many practitioners within the same team, who may be more experienced than myself; have not had the opportunity to manage a case through the Court process. Highlighting that in my short career to date, I have been provided with a wealth of complex practice situations which will help facilitate my ongoing knowledge and practice in the future.

As well as the positives noted above, as a practitioner I have also faced some criticism by managers for spending too much time with the children/families I work with. I know I do so, as I feel any intervention should have the client and their family at the heart of it, and this can only happen if we empower the families we work with to understand the risks, the actions of their consequences and our remit within safeguarding children. In relation to Court, this is the final option and if I as a practitioner feel intimidated by Court, then the children and parents will too. Anti-Oppressive practice is the bedrock of social work and to address the power imbalance we must empower the children and families we work with, to understand and question the choices which have been made by them and the local authorities. Demonstrating that if Court action is taken, parents and or their children will know and understand that all other options were attempted prior to this draconian action. I am aware that I like to work in a way in which, should there be a positive outcome for the children which I appreciate is likely to be a negative one for their parents, that looking back they know they did all they could to fight for their children. Knowing that they can only do that if they understand the process, the risks and the consequences of their actions, which takes time as most parents will hear the word Court and panic.

In conclusion using the case study noted within this assignment I have demonstrated how it has given me a greater understanding of the complexity of situations we work in. Not just the complexities of forging child centred, individual relationships with the service users and families we work with, within the safeguarding arena. The complexities of professional judgements within this arena, whilst working within the parameters of the laws and policies of each agency. I have demonstrated how the undertaking of child centred, evidenced based assessments and the applying of this analysis to inform decision making in complex situations, as is good practice, can be both rewarding and frustrating. I

have also touched upon the complexities of professional judgements and the difficulties for practitioners, when they subsequently disagree with the decision making of managers in relation to their cases. Using the case study, I have also evidenced how the laws, theories, codes of practice, National Occupational Standards, Policies and Procedures all link in to support the practitioner's judgements and decision making, demonstrating the complexities of these in good practice.

Word Count: is 4349

Section 5

Safeguarding

*Guidance: Social Care Wales require newly qualified social workers to provide evidence of their understanding of safeguarding work with adults **and** children. The assignment below will enable you to show this. **N.B.** if your normal area of work is with children please write about adult safeguarding. If you normally work with adults then write about child safeguarding.*

In an area **that is not your main focus of work** (see guidance above), explain the relevant legislation, and the national, local and organisational policies and procedures for safeguarding.

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

As I work with a children's team, this assignment will be in relation to adult safeguarding. I will explain some of the vast relevant legislation and highlight how it links to practice within a child care team.

Historically, adult safeguarding has not been given the same level of importance as safeguarding children and whilst the implementation of the Deprivation of Liberty Safeguards 2009, as an amendment to the Mental Capacity Act 2005, has taken some steps in addressing this. It still, sadly has some way to go before agencies will see this as on the same footing as child protection.

The implementation of the Social Service and Wellbeing Act (Wales) 2014, aims to put adult safeguarding on the same footing as children, it states the act will provide "*powers to ensure adults and children are kept safe from abuse or neglect are stronger and there will be a national independent safeguarding board*". It also highlights that we all have the responsibility to report any concerns in relation to adults or children whom may be at risk, and that we "*MUST report these to the Local Authority*". There is no denying that this Act is a step in the right direction for Vulnerable adults and will provide stronger powers to safeguard adults, but it requires time to measure how supportive this is of vulnerable adults. Whilst "Adult protection work has evolved rapidly since the Welsh Office issued the guidance document *In Safe Hands* in 2000", there is still some way to go.

The definition of a vulnerable adult is: *a person over 18 years of age who is or may be in need of community care services by reason of mental or other disability, age or illness and who is or may be unable to take care of himself or herself, or unable to protect himself or herself against significant harm or serious exploitation*" (All Wales Protection of Vulnerable Adults from Abuse 2010, as taken from In Safe Hands 2000)

Another challenging issue is the right to consent as this is a basic human right of any individual over the age of 18. Within the area of child protection, consent is not required to safeguard, however with adults they have the right refuse services, which can often leave vulnerable adults at greater risk of exploitation. However there must be a balance addressed as to what's in the best interest of the client and given that the Mental Capacity Act (2005) states "capacity is always assumed", meaning it is the practitioner who must prove a vulnerable adult lacks capacity. It must also be acknowledged that capacity is fluid, and whilst an adult with limited capacity may not have the capacity to make decisions about their finances, this does not mean that they are unable to make informed decisions about their lifestyle choices of service provision.

Word Count: 500

Reflect on the difference between safeguarding in adult and children's work

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

One of the difficulties for practitioners in the field of adult protection is that as adults we have "Rights" (Human Rights Act 1989), therefore we also have the right to make informed choices. As with many teenagers, adults may make decisions we disagree with, or feel are not in their best interests, however does that mean they should not be permitted to make such decisions. Of course not. Gone are the days that if an individual has a Learning disability or physical disability that society said they must be hidden away and somehow did not deserve the same right as the rest of society. As a society we now promote the fact that just like with children, your life can be whatever you aspire it to be, as long as you are safeguarded and not at risk. As a service we have a high number of adults with learning disabilities who wish to be parents and so enter in to relationships, to be loved and to hopefully be a

parent, which is not dissimilar many other adults. Within the assessments carried out we assess any needs, risks and capacity issues, ensuring they have an understanding to make informed decisions. It is there for the practitioner's responsibility to ensure that where the adult has Capacity, they are provided all information they require to make such informed decisions. Should an adult be deemed not to have capacity to make such informed decisions then their carers, or the local authority may have to make decision on their behalf. The Deprivation of Liberty Safeguards Act ensures that in protecting such vulnerable adults, their liberty is safeguarded. In such safeguarding steps may have to be taken to ensure the adult is kept from harm, and in doing so they are not detained in a manner which would be against their human rights.

Vulnerable adults have the same rights as any adult and should be treated with respect and dignity in supporting them to make decisions. As with children, vulnerable adults have the right to request their file should they wish to access this to understand their identity or decisions made about them. They can request this under the Data Protection Act 1989. They also have the right to know that any information shared about them or their circumstances is only shared on a need to know basis, in line with the Welsh Accord for the sharing of personal information (WASPI 2010) which is the same for children.

Word Count: 414

Section 6

Developmental Review (b)

Critically reflect on your development including reference to the training, learning, research and use of supervision since completing section 2. Consider in discussion with your mentor/supervisor/line manager the extent to which those learning needs have been achieved. Identify additional learning needs to support your development in the transition to becoming an experienced practitioner. You will consider here, the feedback you have received from individuals using services, their families and carers, and how this has impacted on your practice.

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

As part of my ongoing practice I used supervision to identify any additional learning needs, possible training and sharing case examples of good practice. By doing so I have become aware that it takes time for me to feel comfortable discussing “me”, with my supervisor. For example, I feel lucky to have been supervised by my practice assessor for the first two years and felt I could speak to her freely. Since then I have had various supervisors, who, due to workload stresses did not ask about “me” as an individual, simply wishing for an update re my cases, therefore I rarely spoke of anything else in supervision. However, having had a new supervisor last year whose supervision style is like that of my practice assessor. I have come to see how the autonomy of making decisions strengthened my practice in one respect as we all have a level of accountability. Yet in another respect, having commenced supervision with my senior I now see how this impacted on my practice as I was constantly reflecting and overthinking, subsequently challenging my own decision making. I feel this was due to my feeling that I was too early in my practice to be left to it, as I felt I was, however it’s given me a confidence in some areas. *Social Care Wales states “Supervision is a planned, accountable, two-way process, which should support, motivate and ensure all practitioners develop good practice. It’s perhaps an obvious thing to say, but, in any setting, if supervision is of good quality, then people have better job satisfaction and commitment to their job, and tend to stay longer” (2017).*

As a student I acknowledged that I am a reflective practitioner and reflect as a matter of course, I have found Donald Shon's theory "The Reflective Practitioner" (1983) never far from my thoughts when reflecting upon my cases or practice. In his theory (S. MacLean, 2010, pg 82) he states there are two key aspects to consider as a reflective practitioner, those being "reflection in action" and "reflection on action" and I will discuss these further in section three. I found that living in such a rural community and the office being mid County when I cover the North of the County, means I may spend a significant level of time traveling from appointment to appointment in the car, as such I often use this time to reflect on my day, any particular aspects of good practice, things I feel I could have done better or not as the case may be. I also feel that this supports my analysis as I pose and answer questions in this time.

At one point I found that having gotten in to a routine where by, in getting in to the car, I did this as a matter of course. I had switched from critical reflection and analysis to overthinking and being overly critical of myself, which not only affected my confidence and practice, it also meant I was unable to switch off and felt continually tired due to my overthinking. I am pleased to say that I have now found the balance to this and appreciate the benefits of having time to myself to switch off from the emotional strains of the day.

Regarding my identified learning needs, I feel these continue to develop within my practice, and I have had various opportunities within the many Child Protection Conferences and via the Court process. Subsequently meaning, that although I'm not sure I will ever feel confident in being cross examined in the Court arena, I know my cases and therefore I should be the one to answer such questions. I am more confident in Child Protection conferences and feedback from other agencies and clients is usually positive with regard to my practice. I am aware that whilst I have also had some complaints, these are the natural ones of parents trying to undermine my decision making or ask for a change of social worker they feel it may change the outcome for them. It should be said, that whilst I may have difficulties to begin with engaging the families or supporting them to see the situation from our view point, with the families who the LA must take to Court. Once the final decision is made, most families can see we tried all other options and they remain on speaking terms with me, regardless of how hostile they have been with myself throughout the process.

With regard to, the direct work, I still enjoy this aspect and use it where appropriate, however as a social worker in a busy child and family assessment team, I appreciate that we largely do this on a daily basis in order to ensure the children's views are heard, however the more formal time-consuming aspects are not undertaken within our team.

I have continued to address any learning needs regularly in supervision, and whilst these change in line with my learning needs and objectives, I feel those set at my final year as a student have been accomplished. Moving forward my aim is to strengthen my analysis in complex situations, to ensure that any reports are succinct, as I'm aware I am some one who will write lengthy paragraphs when a sentence may do. I also aim to address my timescales, as in prioritising Court reports I am aware that some of my other work is out of timescales. My aim is to undertake this work in strengthening my practice and developing strategies for paperwork management, before considering in some years to becoming a practice assessor or work place supervisor for students.

Word Count: 880

Please record in the table below the dates of each consolidation programme workshop you attended.

Consolidation workshop	Date Attended
1	27.03.2017
2	4.7.2017
3	13.9.2017
4	24.1.2018 (Unable to attend met with D Ayris on 26/2/18)

Mentor's comments

Please comment fully on the learner's development over the duration of the whole programme. Reflect on information provided by the learner in section 2 at the outset of the programme and the later perspective given at section 6. Where you have seen or discussed feedback from individuals using services, families or carers, you are encouraged to comment on this with regard to the learner's development.

My name is Julie Dickson and I am the senior practitioner for Suzannah Gentle. I have been in post since July 2017, so can only comment on the time that I have worked with Suzannah.

During this time, I have seen great improvement in her practice. Her confidence has grown and she is more assertive in her views, but able to acknowledge others views without feeling it is a criticism of her. Suzannah is a very conscientious worker and will always go the extra mile for her families and sometimes this has had to be reined in as she cannot do everything for them. She has developed a good understanding of this as she has progressed, and is becoming better at delegating tasks to others and not taking all the responsibility on herself. She has a gentle and humorous manner when doing direct work with children, which they respond to well.

Suzannah has become more open with me about her emotions as we have worked together and this has been good for her practice as she is able to talk through any difficulties and improve her ability to be objective, but also be gentler on herself at times and recognise her own needs.

Suzannah is well respected by other Professionals who speak highly of her as she always follows through on tasks she has said she will complete. She gets to know her cases well and builds good relationships with the children involved, carrying out lots of direct work with them.

Due to her passion about protecting the children, she has received complaints from parents, but this needs to be countered with the fact that she has had to deal with difficult parents on these cases, who have not accepted the concerns being expressed by the local authority. She has handled this well and continued to work through the cases.

For the future, I feel that she now needs to focus on getting the balance right between the direct work and the administration time needed to ensure all work is recorded in a timely manner. We have discussed this and are working on making this happen, and there has been significant improvement in recent months.

The Local Authority is now moving to work with the Signs of Safety model and I feel that Suzannah will adapt well to this way of working as she has a good foundation to build upon.

I am pleased to see that she is considering progressing to the role of Practice Assessor in the future, as I do not believe she would have even contemplated this when she started and it indicates a growing sense of her own abilities and expertise.

Section 7

Bibliography

Information about referencing in written assignments and how to avoid plagiarism can be found on Moodle. It is important that you are aware of the importance of ensuring that the work submitted is your original work.

Bowlby, J (1979) "Attachment Theory" as cited in <http://www.simplypsychology.org/attachment.html>

Care Council for Wales (n.d.) Consolidation Program for Newly Qualified Social Workers[Online]. Available at <http://www.ccwales.org.uk/consolidation-program-for-newly-qualified-social-workers/> (Accessed 23 October 2017).

Children Act 1989, as cited in; <http://www.legislation.gov.uk/ukpga/1989/41/contents> accessed on 17.2.17

Children Act 2004, as cited in; <http://www.legislation.gov.uk/ukpga/2004/31/contents> accessed on 17.02.17

Care Council for Wales (2011) Sustainable Social Services for Wales: a Framework for Action [Online]. Available at http://base-uk.org/sites/base-uk.org/files/page/12-03-social_services_wales_bill/110216frameworken.pdf (Accessed 23 October 2012).

Data Protection Act 1998, as cited in; <http://www.legislation.gov.uk/ukpga/1998/29/contents> Accessed on 17.02.17

Fraser, S. & Matthews, S (2008) in "The Critical Practitioner in Social Work and Health Care, Chapter 1, "Introducing critical practice", pgs 8-26, The Policy Press/Milton Keynes, The Open University

Fraser, S. & Matthews, S (2008) in "The Critical Practitioner in Social Work and Health Care, Chapter 10, "Organisations and Organisational Change", pg 170, The Policy Press/Milton Keynes, The Open University

Achieving Best Evidence, Department of Justice, 2012, available online, <https://www.justice-ni.gov.uk/publications/guide-achieving-best-evidence-practitioner-guide>., accessed 14.02.2018

Manley. R. 2016,;availbele online, <http://www.communitycare.co.uk/2015/09/14/let-guide-conversation-found-silences-need-awkward/>, .accessed 14.03.2018

Signs of Safety 2011, available online,.
<https://www.dcp.wa.gov.au/Resources/Documents/Policies%20and%20Frameworks/SignsOfSafetyFramework2011.pdf>, accessed 1.01.2018

Social Care Wales, accessed available online; https://socialcare.wales/cms_assets/file-uploads/A-guide-to-supervising-well-ENG.pdf, accessed 13.1.18

Schön, D., *Educating the Reflective Practitioner* San Francisco: Josey Bass, 1987.

Schon, D (1983) *Reflective Practitioner* as cited in
<http://www.learningandteaching.info/learning/reflecti.htm>

United Nations Convention on the Rights of the Child (1989), as cited in
<http://www.uncrcletsgetitright.co.uk/>

Williams, C.(2011) *Social Policy for Social Welfare Practice in a Devolved Wales*. (2nd Edition), British Association of Social Workers.bv

Section 8

Learner details, Signatures and Line manager verification

It is the learner's responsibility to ensure that their university learner number is correctly inserted wherever requested within the portfolio

Learner Details

(NB it is essential that you inform your Workforce Development/Training Unit **and** the University of Wales Trinity Saint David if your name or your address for correspondence changes).

1. Name of Learner **Suzannah Gentle**

2. Learner's University Number:

Address for Correspondence:

Children and Family Assessment & Support Team

Penmorfa

Aberaeron

Ceredigion.

SA46 0HA

Telephone: 01545 574027

E-mail: Suzannah.Gentle3@ceredigion.gov.uk

Date of Professional Qualification: 31 December 2015

Date of registration with Social Care Wales: January 2016

Signatures and Line Manager Verification

CONFIDENTIALITY and PLAGIARISM – to be completed by the learner

All information provided in this portfolio complies with guidance on confidentiality. I confirm that all work apart from comments by others (e.g. mentor, an individual using services, their family or carers) is all my original work and has not been copied. I understand that plagiarism is taken very seriously by the University and the programme.

Signed:  (Learner)

Date: 15/3/18

Feedback and comments from an individual using services, their family or carers (Section 3) - to be completed by the Observer

I confirm that I am a registered social worker with knowledge of the learner's area of practice and that the observation summary and the comments from the individual using services, their family or carers and/or carers above are about the same piece of practice that I observed on the date given.

Signed:  (Observer)

Date: 15/3/18

Telephone Number: 01545 574027

E-Mail address: julie.dixon@ceredigion.gov.uk

6. Observer details

Name: Julie Dickson

Work Address:

Children and Family Assessment & Support Team

Penmorfa

Aberaeron

Ceredigion.

SA46 0HA

Professional Qualification and date of qualification: Batchelor of Arts, (Honours), Degree in Social Work December 2011

Email and telephone number: Julie.Dickson@ceredigion.gov.uk. 0545575027

Section 9

PORTH AGORED and UNIVERSITY OF WALES, TRINITY SAINT DAVID

GRADUATE CERTIFICATE IN CONSOLIDATION OF SOCIAL WORK PRACTICE

LEARNER AND EMPLOYER'S LEARNING AGREEMENT

Name of Learner	Suzannah Gentle
Name of Team/Agency	Ceredigion County Council
Name of Mentor	Julie Dixon
Name of Line Manager	Julie Dixon

Study Duty

The learner will undertake all elements of the Graduate Certificate programme diligently, including mandatory attendance at induction, 4 Consolidation workshops, and participation in an evaluation survey or focus group on completion of the programme.

The learner's full and effective participation on the Graduate Certificate is mandatory given that Social Care Wales has made completion of the programme a requirement within the first (three year) period of registration as a Social Worker. .(Qualifying after April 2016)

Study Leave

The employer undertakes to support the learner by providing paid leave in full to attend all agreed induction, Consolidation Workshops, programme evaluation meetings or training agreed as required during the programme. In addition, three additional paid days can be approved by managers as a contribution towards the time involved in personal research and developing the portfolio for submission. It is for learners to open a discussion with their manager about when they want to take this leave. The study days can be taken on any week-day (or combination of days) as long this is (i) appropriate to the stage of portfolio preparation at the time, and (ii) agreed with the Team Manager who will take into account team and service needs. The level of paid leave described here assumes that the learner works full-time hours. Where the learner works less than 37 hours a week, paid time will be approved in accordance with the employer's local policies.

Line manager verification

Guidance: This section must be completed and signed by the learner's line manager or senior practitioner. He/she should be a registered social worker who is familiar with safeguarding work, can verify that the learner has been involved with the case evidenced in section 4 of the portfolio, and has also met all other required criteria listed.

In this section, please confirm that you have seen sufficient of the learner's work during the period they have been undertaking the Consolidation programme. If necessary, please consult with other managers that the learner has worked for. In signing this section, you are confirming that you are content with the:

- level of supervision and mentoring support received by the learner
- learning and development undertaken
- reading and personal research undertaken
- level of knowledge and skills demonstrated
- understanding shown of the Code of Practice and National Occupational Standards
- core values of the learner
- content of the development plan within the portfolio
- work and commentary referred to within the portfolio, that it is the learner's own work and based on current practice

I confirm that this learner has achieved an appropriate level of professional practice.

LINE MANAGER VERIFICATION:

NAME OF LINE MANAGER: JULIE DICKSON

SIGNATURE OF LINE MANAGER.: 

DATE: 15/3/18

- ensure they understand the need to complete the programme within the first (three year) period of registration with Social Care Wales. (Qualifying after April 2016)

Line Manager/Mentor agrees to:

- attend an induction meeting to become familiar with the requirements of the programme
- provide or arrange to provide sufficient assessment opportunities in order for the learner to evidence competency and undertake required observations. Where opportunities may not be immediately available within the team, arrange to provide these elsewhere within the Service,
- guide and support the learner for the duration of the programme
- release the learner for programme induction and Consolidation Workshops, and any internal training courses agreed as being appropriate to meeting agreed learning needs.
- agree with the learner, use of up to 3 additional paid leave days over the whole duration of the programme, as a contribution towards time needed for personal study, research or portfolio development
- Hold supervision with the learner, ideally monthly, and ensure this incorporates mentoring support and monitoring of the work undertaken and still outstanding. Maintain a full record of supervision dates and record discussions and agreements.

Completion and submission of portfolio

Learners are expected to complete the Graduate Certificate and will normally submit their portfolio within 12 months of attending induction to the programme. Any Learner anticipating any difficulty in meeting this requirement should immediately discuss the matter with their Training Manager/Co-Ordinator

The portfolio submission process and dates for each programme cohort will be published on Moodle. Once registered on a programme, learners **CANNOT** change the due submission date without gaining agreement from the employer and University.

Pressure of work is not regarded as a reason for non-attendance at any Consolidation Workshop.

I understand and accept the terms and conditions of this learning agreement as stated above.

Signed:  Print Name: S. Gentle Date: 12/10/17
(Learner)

Signed:  Print Name: Julie Dickson Date: 12/10/17
(Line Manager/Mentor)

Signed: Print Name: Date:
(Mentor, if different to above)

PLEASE PLACE THE SIGNED COPY OF THIS LEARNING AGREEMENT IN SECTION 9 OF THE PORTFOLIO

Resources

Learners are able to access learning and library materials from their employer's existing resources or as described in the Programme Handbook from the University. The employer understands that the Graduate Certificate is to be completed by newly qualified Social Workers in their first period of registration and will support this timescale. But there is also an expectation that as a professional development programme, Learners take responsibility for their own learning and will also use their own time for personal study and portfolio preparation.

The employer's training department agrees to:

- Arrange for eligible staff to join the programme
- pay course fees directly to the University
- provide additional guidance and support by:
 - a) facilitating access to existing learning materials or library resources
 - b) providing appropriate training opportunities from existing internal training programmes as agreed with the learner and mentor
 - c) providing programme induction and Consolidation Workshops
 - d) providing learners' with guidance and support about programme requirements and portfolio completion
 - e) helping to resolve any programme difficulties encountered by the learner, mentor or service managers

The learner agrees to:

- work actively towards completing the qualification within the agreed timescale of 12 months from the date of registration on the programme
- Identify with manager/mentor appropriate internal training and arrange to attend these courses
- Identify with manager/mentor and Training Manager any special requirements e.g. dyslexia and contact the University's Student Services office directly about additional support that may be required
- attend induction and 4 Consolidation Workshops. These are mandatory components of the programme
- produce work and evidence appropriate to the portfolio and learning outcomes within agreed timescales
- make and keep agreed appointments with mentor/line manager
- ensure they are prepared adequately and obtain all necessary consent for observed practice
- inform mentor/line manager and training department immediately of any problems or changes in circumstances while undertaking the programme, especially where this may affect completion of the programme by the agreed deadline or ability to attend a mandatory workshop.
- liaise with their line manager/mentor to confirm study days and use their own time for self study, research and portfolio preparation
- take personal responsibility for preparing and completing all work necessary to submit their portfolio
- act at all times in accordance with the Code of Practice, the employer's and University's policies, procedures and processes