

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

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

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Learner's University Registration Number:
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**WALES INSTITUTE for WORK-BASED LEARNING
2017-2018**

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)

First year in practice

I qualified as a social worker in October 2017, and completed by studies in England using English law and legislation. This made working in Wales challenging as I was unfamiliar with the variations law and legislation, for example the differences between fostering placing regulations; Regulation 26 in Wales and Regulation 24 in England To combat this I familiarised myself with Welsh legislation, that I have used throughout the first year of practice. For this assignment I used the Borton model of reflection 1970. I found this model useful as the structure of what? So what? Now what? suited my learning style more effectively.

Working collaboratively with service users & carers and working collaboratively with other professionals

To aid my collaborative working I sort feedback from Foster Carers that I support, this highlighted the need to develop closer working relationships with Childcare Social Worker (CCSW), to help improve accuracy of information. This is hindered by the CCSW's being on a different database to the Fostering Supervising Social Workers which makes accessing information more difficult. Principle 3.5 of the BASW Ethical Practical Principles, "Sharing

information appropriately”, highlights the importance of the collaborative working relationships. (British Association of Social Workers: 2014) (BASW) To develop this I will meet with the CCSW’s before each of my Supervision sessions to update my knowledge of the children in placement. I will also ensure that I attend all meetings relating to the child. Collaboratively working is paramount, as failings in joined up working have been identified within serious case reviews and documented in case law, for example Victoria Climbié enquiry.

Applying analysis in assessment to inform interventions

I have identified areas of development from discussion with my practice supervisor. To develop knowledge of frontline social work, particularly core assessments, at present I have limited knowledge of the initial assessments completed by CCSW which focus on risk and the outcomes identified to minimise risk. By developing this skill I will be able to identify the reasoning behind the Local Authorities intervention and involvement with the child and their family. To develop this I will complete Bruce Thornton’s Analysing and Assessing the Risk of Significant Harm training. This training will improve my knowledge and understanding of what constitutes “significant harm”, what triggers the involvement of the Local Authority. (Thornton, B: 2013). It is important that Supervising Social Workers have sound safeguarding and threshold knowledge as completing assessments such as Regulation 26 can often involve identifying and analysing concerns and how this impacts on a positive/negative assessment.

Intervention and application of professional judgement in increasingly complex situations

To enhance my ability in this area, I aim to undertake research regarding structured, focussed and task centred supervision with Foster Carers, in order to improve the stability and longevity of the child’s placement. The success of this approach will be measured during supervisions with Foster Carers and during my own supervision with my manager. In addition I will shadow a CCSW, attend training on critical analysis to enable me to have a deeper insight into the issues with complex cases. Critical reflection is an important aspect of all social work practice

and as Schon (2002) states critical reflection transforms experience into knowledge which is superior to “just thinking about it” which can enhance carers understanding of behaviours.

(549 words)

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: 1st November 2018

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)

As part of the statutory requirements, Part 10 (50) of the Fostering Service Wales Regulations 2019 states that the fostering service must ensure that all Foster Carers must be appropriately supervised by their Supervising Social Worker. The regulations further state that any carer should be offered continuous support and additional supervision sessions when required,

particularly in times when Foster Carers need additional guidance; highlighted within Standard 21 – Management and Support of Carers and Standard 22 – Supervision of Carers.

Providing continuous and professional support whilst building a good working relationship with a Foster Carer is crucial in assisting with the stability and longevity of a child's placement.

I have chosen to complete a support supervision session as my observed practice. The kinship carers; a carer approved specifically for one child aged 15, through a pre-established connection, are finding their caring role difficult due to the child's complex needs, caused by her early life experiences.

The person centred intervention will be therapeutic and based around the implementation of boundaries which are required to be established in order to safeguard both the child and the Foster Carers; an area of caring that the Foster Carers have struggled to implement and maintain. Discussions will be held around the Safer Care Policy (Regulation 13 of the Fostering Regulations (Wales) 2003: *Behaviour management and absence from foster parent's home.*)

The intervention will take place at the Local Authority office in order to give the Foster Carers a setting to speak freely away from the child who may find the discussions unsettling. The Foster Carers are both of White British heritages and speak English, however, the completed Safer Care Policy will also be provided in Welsh, in line with the Welsh Government Framework, the Active Offer Policy. (Welsh Government, 2012)

Present will be Foster Carers 1 and 2, husband and wife approved for two years, specifically for Child 1, myself and Social Worker 1.

(317 words)

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)

Consent was given by the Foster Carers 2 week prior to their supervision and again on the morning of. They were given all information regarding the observation and what it entails. The observation went ahead on time with Social Worker 1 in attendance.

Prior to the session I obtained an update from the CCSW to gain their thoughts on placement. The aim of the session was to implement firm boundaries within XXX's Safe Care Policy to safeguard both the carers and the 15-year-old child in placement. I wanted to work in collaboration with the carers as they know the child's behaviours in the home environment better than I. Doel and Shardow (2005: 159) explain that "*Social Work is founded on the notion that the Social Worker is accountable to Service Users and Carers for the work done.*" This highlights the duty and responsibility of a Social Worker to work with service users to aid and support them. Although the Foster Carers took an active role in this direct work the power imbalance between the Foster Carers and I remained to an extent. This was due to the policy document itself and the compulsory requirement within it and the emphasis on the Foster Carers being responsible for the completion of the expectations documented within. Parris (2012) explained that the role of a Social Worker automatically involves a power imbalance with due to the level of power they have over those they are working with. I was mindful of this and ensured that the feedback from the session was gathered by the observer via telephone to empower the Foster Carers further as the feedback was not obtained face to face. When the Foster Carers arrived at the office, I sat opposite due to the layout of the room, however the table presented a barrier which made challenging feel more oppressive. This is something I will be more mindful of going forward. The Foster Carers were anxious due to another person being present, clearly observed through the defensive tone used. In

accordance with the Code of Professional Practice, “*working with individuals in a person centred way is the basis for social care and support*”, (Social Care Wales, 2017) I explained to the Foster Carers what the session would entail to ensure that they were informed and to reduce their anxieties. I also ensured that the Foster Carers were aware that the actions identified during the collaborative working were not ensured to be successful. (Rutter, L and Brown, K, 2012).

To engage with the Foster Carers I maintained eye contact and spoke in a clear and concise way. Although the Foster Carers both have professional careers outside of their fostering role, I was mindful of using Social Work terminology as I wanted to ensure maximum understanding.

The open and honest discussion regarding the importance of the child not entering the Foster Carers bedroom was emotive for the female Carer as this is something she did with her own daughter and had allowed the child in her care to do, this greatly impacted on the boundaries being blurred between the Foster Carers and the child. The female carer became visibly upset as she blamed herself for the challenges they were facing. To support the carer, I provided her with time to regain her focus and provided empathy by reiterating that although the current situation could have been avoided, there are ways in which it could be improved. The positive professional relationship I had established with the Foster Carers enabled me to act with integrity and demonstrate this compassion. (British Association of Social Workers, 2014) As the couple’s Social Worker, I was aware that under the Code of Professional Practice, section 3, I have a duty to “*promote the well-being, voice and control of individuals and carers while supporting them to stay safe.*” (Social Care Wales, 2017). This technique appeared to offer comfort without disputing the evident safeguarding concerns.

The Foster Carers live in an area of deprivation where support services are not as easily accessible. The Foster Carers also work full time, with the male carer working different shifts. The two factors have contributed to lack of training and knowledge in the expectations of being a Foster Carer. As the couple both have well paid jobs, colleagues have commented that they should be managing the care of the child without any additional support. Due to their high

income they cannot access certain services however to ensure equality this should not be a barrier to support services.

The XXX Safe Care Policy was worked through with particular focus on Section 1, *showing affection*, and Section 5, *the Foster Carers bedroom* as these were identified as the main concerns in relation to safeguarding the carers and the child in line with the National Minimum Standards for Fostering Services (2000), Standard 9, *protecting from abuse and neglect*. I was mindful throughout discussions that the boundaries identified were not oppressive for the child and were not deemed as unfair or discriminatory. (Human Rights Act, 1989). Discussions were had around appropriate affection and how the Foster Carers could best manage this. The child presents with an ambivalent attachment which has greatly impacted on the relationship, this has derived from her early childhood experiences and manifests in symptoms of rage. (Shemmings, D & Y, 2014: 12).

The child has a main focus on the female carer; she has taken the primary caring role. Within the Foster Carer's culture, the female is depicted as the main care giver whilst the male implemented more of the sanctions. This is the process the carers took with their own child and their fostering role. However, due to the child's early experiences, she focussed on the female carer and refused the support from the male; at times pushing him away and alienating him with insults. Whilst discussing this with the Foster Carers, the female carer explained that it had become an expectation that she provided the care which had now become exhausting due to the level of dependency the child has on her. This promoted an emotional discussion which resulted in the male carer explaining that he would do more to support his wife.

To ensure that the Foster Carers' viewpoint and knowledge of the child was at the forefront of the discussion, I used the person centred model of practice. This model allows for the service users values are put at the centre of discussions. (Social Care Institute for Excellence, 2016). This method allowed the Foster Carers to identify the lack of boundaries and to identify where new boundaries and structures could be implemented. The use of this method was praised by the observer as he could see the positive affect this had on the Foster Carers presentation and engagement. This also allowed the Foster Carers an opportunity for self-reflection.

The document we developed was in English due to the carers being from England. However, I offered a Welsh version of the document for the child and the Welsh speaking professionals involved in her wrap around care as they would also be reiterating the importance of the policy with the child during their 1:1 work with her. It was important that as an English speaking Social Worker, I did not make assumptions that the Welsh speakers involved in the child's care would speak/read English; I felt this offered reassurance to the Foster Carers that their needs would be met as I had taken the initiative to provide the document in Welsh as well as English to ensure continuity. (Welsh Government, 2012)

By the end of the session, the Foster Carers appeared more confident in the boundaries that had been identified. The Foster Carers feedback during the session was that they felt more confident in implementing the boundaries now they had a document outlining the expectations. However, due to the challenging behaviour the child had been presenting, the couple felt apprehensive about sustaining the boundaries if the behaviour became more difficult. It was identified that other professionals involved in the child's care would need to be involved in the implementation of this policy. This collaborative working also helped to promote the Foster Carers voice to other professionals involved in the child's care. (Social Care Wales, 2017).

At present, the child is continuing to respect the Foster Carer's privacy by not entering their bedroom. However, the Foster Carers remain concerned regarding the level of affection the child shows towards the female carer.

(1405 words)

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? Or if delayed did he or she contact you?	<i>"Louise was on time for the meeting."</i>
Did the social worker get your permission in advance for the observer to be present? Did they explain why they were being observed?	<i>"Yes she did – on two occasions."</i>
Were you clear why the social worker met with you today?	<i>"Yes, it was to talk with us through some skills to foster as we haven't had official training. It was to personalise a plan of some issues relating to our placement."</i>
How well prepared do	

you think, the social worker was for his or her meeting with you?	<i>"She was prepared."</i>
How has the social worker listened to you and respected your views and wishes?	<i>"I think that she and the observer listened to us carefully. We left feeling heard and understood."</i>
Did the social worker talk to you in a way that you understood? Did you understand the language they used?	<i>"Yes"</i>

How has the social worker's involvement met your expectations for this visit?	<i>"I do feel that she understands the specific issues with our placement and I do feel that she is there to support us."</i>
Are there any other comments or suggestions that you would like to make?	<i>"The issues raised will not be followed up for some time. We didn't realise this and thought our child would be spoken to with her social worker within days. This could have been made clearer, as we had to implement some of the ideas immediately, even though our child was not really aware of why."</i>

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)

This piece of work will review and reflect on a safeguarding referral made in respect of a child placed in the care of Foster Carers that I work with, and my involvement within this process.

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“Safeguarding is protecting children and adults from abuse or neglect and educating those around them”. (Gov.Wales, 2017) As stated in the Code of Professional Practice for Social Care, it is a professionals’ responsibility to minimise the risk caused to individuals by themselves and/or other people. (4.3) Abuse can come in different forms, for example emotional and sexually. In this case I am reflecting on an allegation of physical abuse defined by as *“an act that may result in pain, injury and/or impairment”.* (Spielberger, C, 2004: 694)

The case I have chosen to critically reflect upon is in relation to a connected person’s foster placement. A connected person’s foster carer is defined by Welsh Government as being *“a connected carer is an adult who is looking after the child or children of a relative or friend on a full time basis”.* (Welsh Government, 2014: 8) Within my Local Authority there are a higher number of connected carers than generic Foster Carers, this highlights the increase of children becoming involved with the Local Authority and requiring placements, the demand on the service which makes it challenging to approve generic carers when there are a high level of connected carers needing assessment and the increase of Court ordered assessments on connected persons’.

The fostering family are from a White British heritage and follow a Welsh culture. The Welsh language is important for one of the family members however, they have not requested a service in Welsh although it has been continuously offered. As a non-Welsh speaker who has completed all social work training in England, it is important for me to acknowledge that individuals may feel obligated to request an English service as I am an English speaker as to not be perceived as being "difficult". The Active Offer (Welsh Government, 2012) states that a Welsh service must be available to a person without the individual having to ask for it. Within the fostering family there are three generations that provide care to child 1 who is currently 6 years old. There have been a variety of challenges that the fostering family have experienced due to the multigenerational parenting and the differences in the styles and approaches used by each member of the household. I remained mindful that as an agent for the Local Authority it is my responsibility to ensure that people are supported to fulfil their potential no matter their background or circumstances as stated within the Well-being of Future Generations (Wales) Act. (Welsh Government, 2015)

The Foster Carers have been approved since 1 was born however they lived in a different property at this point which included one generation parenting the child. However due to ill health, the Foster Carers parents required care and support, leading the Foster Carers to move in to their property with the child. 1 was still a baby at this stage and appears to only have memories of being parented by three generations of her family. However, upon reflection the family should have been reassessed at this stage due to the change in circumstances. Although the other members of the fostering household were not approved as the primary Foster Carers for 1, I incorporated them in the completion of supervision sessions and training as they are required to ensure the safety of the child and ensure her needs are being met. Section 27d of the Fostering Service (Wales) Regulations 2003 and Section 93.3(a) of the Fostering Service (Wales) Regulations 2019, states that the assessment of Foster Carers must take in to account the Foster Carers household and whether this setting is suitable for the child. When the Foster Carers moved properties, assessments were completed on the house and checks were carried out on all the other household members to ensure the child's safety. I was not the Social Worker for the Foster Carers at this time however it would have

been my responsibility to ensure that all Police, Health and safety checks were completed to ensure that all members of the fostering household were suitable to provide care to Child 1.

Research has been completed that looks at children being expected to “fit in to a puzzle” in respect of settling in to a different family environment. (The Archibald Project, 2017) Although child 1 is cared for by members of her close family, the multigenerational element, in my professional opinion, may have impacted on her ability to “fit in” to the expectations of that individual within the fostering household. This also has a risk of the child developing an ambivalent attachment. Golding explained that children with an ambivalent attachment style express their concern that the caring adult will not be there, by presenting “*demanding and clingy behaviour*”. (Golding, K.S, 2008:48) Child 1 does not recognise boundaries with people she hasn’t met before which in turn could cause risk; during one of my first visits to the property the child voluntarily hugged me without any apparent concern; Child 1 was 5 years old during my first visit to the family home highlighting her attachment difficulties. Upon reflection, it would be beneficial for all members of the fostering household to attend training to better understand the impact that the varying approaches are having on the child.

Although the other members of the fostering household were not approved as the primary Foster Carers for Child 1, I incorporated them in the completion of supervision sessions and training as they are required to ensure the safety of the child and ensure her needs are being met. This also gave each member an opportunity to reflect on their strengths and where they require support. Systems Theory focusses on the connections in the family and provides the opportunity for the people within that system to be used as resources of support for one another. (Payne, M, 2014: 186) This was a good method to use during their strengths and how they could support each other at a time where their caring abilities are being called in to question. All those who have significant contact and a caring role should have police checks completed.

In 2018 Child 1’s great Grandparent passed away leaving the family deeply upset finding it difficult to discuss how they were feeling in the presence of child 1. To support the child, a referral was made to therapist by the child care Social Worker following the concerns I raised

to her on behalf of the fostering family; where direct work was completed with 1 to enable her to come to terms with the bereavement. It was during a 1:1 session that 1 told the therapist that the oldest member of the fostering household had “smacked” her on her legs and on her arms for being, “naughty”. Documented within Article 19 of the United Nations Convention on the Rights of the Child (1992) states that all Governments must protect children from all forms of violence by those caring for them. It is important to note that all Welsh legislation is underpinned by the United Nations Convention on the Rights of the Child (1992). As this was a disclosure of physical violence towards a child, the therapist was duty bound to report the concern to the Local Authority, as documented in section 130 of the Social Services and Well-being (Wales) Act 2014. However, as documented with Article 9 of the United Nations Convention on the Rights of the Child (1992) and (s.31(a)) of the Children Act 1989, children have the right to a family life. This needs to be balanced when making decisions regarding the removal of a child.

Welsh Government have recently announced a ban to remove the defence of reasonable punishment. There have been ongoing discrepancies regarding the use of physical chastisement as a method of behaviour management for parents and guardians across the United Kingdom. The Children’s Minister Huw Irranca-Davies published a summary on Monday 6th August 2018. The report highlighted that 57% of all who were asked, including children and parents were in agreement that physical chastisement should be banned across Wales. The Children Wales Bill is currently being argued and it is hoped that the First Minister will introduce the Bill in 2019. (UNICEF, 2019) Although there has been a “grey area” regarding physical chastisement of children, it is a clear expectation of the role of a foster carer that there should be no physical forced used. Part 6 of the Regulated Fostering Services (Service Providers and Responsible Individuals) (Wales Regulations 2019, states that the fostering service must ensure that Foster Carers do not use “corporal punishment” against a child at any time. (Regulation 23) This is also documented within the Children Act 2004, which states that physical chastisement will no longer be defensible under “reasonable punishment” for those charged with offences against children.

The All Wales Child Protection Procedures 2008 used by all Local Authorities, states that the practitioner who has concerns relating to the child should have a discussion with their manager relating to the disclosure. In this instance, the referral did highlight that there were on-going concerns relating to the child's welfare and emotional well-being. This led to the therapist identifying the child's Social Worker and reporting the concern to her the same day. If this child did not have an allocated social worker the therapist would have reported her concerns to the front door service where they would have instigated the child safeguarding process as there is a possible Part 4 consideration when a child makes a disclosure.

Upon receiving the referral, the social worker visited the child in school and ascertained detailed information regarding the incident, including dates, where she was "smacked" and who had carried out the alleged "smacking". It was important for the social worker to encourage the child without prompting her and for the child to feel supported in what she was saying. (All Wales Child Protection Procedures, 2008:42). This is crucial as the context of what the child is saying is the basis to any investigation. The social worker ensured that she documented reported following the completion of the visit.

As the child maintained that she was "smacked", it identified the child as likely to be at risk of significant harm and therefore at this stage in the process, the informing of other professionals involved in the care of the child should have been completed and a Strategy discussion should have been organised to ascertain whether Section 47 enquires (Children Act, 1989) were required. However, the allocated child care social worker was on leave for three days following the notification of the disclosure, and although the child care team manager had been notified, the information had not been passed through to the fostering service until she returned. This had an impact on the initial investigation as I was unable to speak with the carers until four days after the initial allegation had been made. At this stage I needed to be aware of the allegation made and have a discussion with the Foster Carers following the child being spoken to. The consequences of not having this opportunity on the day of the allegation being made was that the child may have reported to her carers that she had made an allegation and that she had been spoken to, leading the Foster Carers to have a discussion prior to my visit. The delay also increased the possibility of the child suffering significant harm. Documented within

Lord Laming's (2003) inquiry in to the tragic death of Victoria Climbié in the year 2000 saw the devastating impact that a lack of joined up working and inadequate communication between professionals can have on children and how easily this could be avoided if information was shared effectively. This serious case review identified the failings of social services, hospitals and the police when information wasn't shared as it should have been. The inquiry brought about the green paper Every Child Matters used in England and saw changes made to the Children Act (2004). The inquiry also highlighted the importance safeguarding being the responsibility of everyone who comes in to contact with a child. (Lord Laming's, 2003).

Using the Borton model of reflection (1970), I addressed additional concerns regarding the delay in being notified on the disclosure made by child 1. Delaying the safeguarding process could have had a catastrophic outcome for the child as she may have experienced more incidents of being "smacked" when she was presenting with challenging behaviours. At the time of the event I felt concerned at the lack of open communication between professionals and also concerned at the impact that leaving the child in the placement with no immediate action could have had. To avoid this lack of communication in future, I have requested for all information relating to a child in placement with a foster carer that I work with; to be passed through to me as well as the child care social worker. This may reduce the opportunity for information to be lost and/or delayed.

I chose to use the Borton model of reflection as the What, So What, Now What? Model of reflection as it provides an opportunity for critical reflection in the So What stage rather than the reflection being solely descriptive. (Thompson, S&N, 2008:98) An alternative model of reflection I could have used the Gibbs (1988) model of reflection that uses six stages and guides you through reflective practice, for example description of event, feelings, evaluation, analysis, conclusion, action plan. (Jasper, M, 2003:77) However, I felt that I could achieve an in depth analysis that included a reflection on feelings and identifying what I did well/needed to improve on by using the Borton model.

When there is a delay in safeguarding process, in particular in relation to Section 47 and allegations of significant harm, this can have a bearing on any possible recommendation to the

court, if the Local Authority delay in making decisions and leave a child in an unsafe environment, you then cannot argue immanency and that you require removal as it will be argued you have lost immanency as you did not feel it necessary to act quickly enough; threshold needs to be considered both in terms of significant harm and immanency.

Having a delay of approximately 5 days whereby the child was left in the placement meant that emergency action (All Wales Child Protection Procedures, 2008: 3.6.3) was not required as the child was seemingly not at immediate risk of significant harm. This led to a strategy meeting taking place and the commencement of Part 4 enquiries being initiated. Part 4 Section 47 enquiries are child protection investigations in specific circumstances, in this instance, circumstances in which children live away from home. (All Wales Child Protection Procedures, 2008: 4.2.1) The Part 4 process is different across countries, for example in England the process is called a Local Authority Designated Officer investigation (LADO). Although the frameworks differ, this process investigates allegations or concerns made about professionals working with/caring for children. The National Assessment Framework for Children and their Families (2000) used in England; equivalent of Social Services and Well-being Act (Wales) 2014, highlights the threshold for a LADO enquiry that follows a 4 tier format identifying if threshold for an investigation is met. If it is a strategy discussion involving the Police will be held, as it does in Wales.

The difference between LADO and the Part 4 process is the person responsible for investigating the allegation made against a person in the position of trust and power. In Wales the person in charge of the initial assessment to ascertain whether the allegation requires a strategy discussion and further investigation can be the manager of the child's team or team that has the referral sent through to them. In England there is a designated officer in charge of conducting the investigation, this person is completely impartial where it could be argued that in Wales the person conducting the initial investigation may have prior insight of the case and have preconceived expectations of the professional receiving the allegation.

At the Strategy discussion stage in the investigation, it is important for information to be obtained from all agencies and professionals involved to ensure that a complete picture is being discussed in respect of the child. The meeting completed as part of this enquiry included

the involvement of the lead for child protection in the police and social services, the childcare social worker, therapist who reported the concern, health care professional and myself as the fostering social worker. The meeting concluded that the child should remain with the Foster Carers as she had been left in the placement for a period of 5 days since making the disclosure and it was identified that Child 1 wasn't at any immediate risk of harm. The allegation made by Child 1 could also be considered old to some degree. The Actions for the professionals involved were to appoint an independent advocate for the child, identify what information would be given to the Foster Carers and at what stage this would be relayed, the informing of the child's mother of the disclosure she had made and for discussion to be completed with the Foster Carers by the childcare social worker and I. It was agreed at the meeting that a child protection medical would also be conducted to ensure that no injuries had been sustained. Reports were also made by the child's school during the meeting who concluded that there were they had no concerns regarding the child's emotional wellbeing and had no observed any injuries to the child.

If the child were deemed to be at immediate risk of significant harm and there was sufficient concerns relating to the safety of the child in placement, then Child 1 would have been removed from the family home and placed with alternative carers, whether this be family members who are considered safe or generic Foster Carers for the Local Authority. (All Wales Child Protection Procedures, 2008)

It was agreed during the Strategy Discussion that a child protection medical was not required as reports from professionals had not observed any marks to the child and it was felt that a medical would have had more of a negative impact on the child and would have been unnecessary at this stage. However, if a medical were to be required, it would have been completed by the XXX's Paediatric Consultant who would have conducted an in-depth examination of the children to ascertain whether any marks were made accidentally or non-accidentally.

An action from the meeting was that as the allegation was made against a Local Authority Foster Carer, as their Social Worker, I would be required to meet with them and ascertain their responses to the allegation made. This is a policy within my Local Authority that is shared regionally by six neighbouring authorities. (A Guide to Allegations XXX Authority, 2018). I initial

telephoned the Foster Carers to inform them of my visit however due to the nature of the visit I was unable to inform them of the reason why I would be visiting. I did this as the more information provided may have added additional risk of the evidence becoming contaminated. I kept the telephone conversation short as to not go in to details prior to my visit. I found this decision difficult as it was apparent that the Foster Carers were concerns about what was going to be discussed. As the Foster Carers social worker I had built a professional relationship with them however I felt I remained professional and focused on making no preconceived judgements as to whether the allegation was to be substantiated. I was as conscious of the tone I used as to not heighten their concerns and further the power imbalance of this situation. I believe I acted sensitively and with respect. (Code of Professional Practice, 2017: 3.1).

Although I had a pre-established relationship with the Foster Carers I ensured that I informed my colleagues of my visit and documented this on the staff movement board in accordance with section 4.4 (equipment, materials and safe systems of work) under the Health and safety code of practice 2017. (Welsh Government, 2017).

Though it had been arranged for the childcare social worker and I to complete the joint visit to the fostering household to discuss the disclosure made by the child and the procedures in which we would follow to ensure her safety, the childcare social worker was unable to attend due to being called to court in respect of a different case. The joint visit was therefore completed by the Assistant Team Manager who did not have a previously established relation with the Foster Carers or the child in placement, and me. Upon reflection having a different person with no pre-established relationship with the Foster Carers allowed for a fresh viewpoint as he had no preconceived ideas about the carers. However, the lack of insight impacted on his ability to understand the family dynamics, the child's behaviour and the difficulties the family had been experiencing prior to the allegation being made. This also highlights the importance of accessing case notes and details of the family background prior to the visit being completed.

The approach used for the interview was a narrative approach; this approach enabled the use of a decision led by the Foster Carers that enabled them the opportunity to discuss what had happened with the aim of reflecting on the pressures the family had experienced and how this may have impacted their care of Child 1. (Payne M, 2005)

The Assistant Team Manager and I used direct questions to establish the facts of the allegation. Throughout the discussion I aimed to act in an anti-discriminatory way; although I had no personal experience of physical chastisement and did not condone it, I remained aware that as the individual was from a different generation to me, when physical chastisement was commonplace, I needed to be able to see things from her viewpoint and not apply my own values by judging her upbringing. (Watson & West, 2006: 119) From discussion, the Foster Carers did not intend to cause harm/pain; the isolated incident was identified as being a generational issue. At this stage we needed to weigh up the potential harm caused if a knee-jerk reaction was made, such as removing a child versus working with the carers to enhance their understanding of more appropriate strategies.

The Foster Carers were visibly upset during the meeting, however presented as being open and honest, the elder family member reported that she had "tapped" Child 1 on the wrists when she had been "naughty", however was aware that this was not a form of behaviour management she condoned adding that she was aware she should not have done this.

Upon reflection I felt that I acted appropriately and in a person centred way. I used eye contact and ensured I sat next to the carers when conducting the visit, as facing opposite them across the table may have added a barrier and increased the imbalance of power between the Foster Carers and us as the social work professionals. Although I was conscious of the power imbalance and made attempts to minimise this, due to the nature of the visit, the Foster Carers were in a more vulnerable position and could have felt more oppressed with two Social Workers visiting them.

The Foster Carers were signposted to the Fostering Network who offer emotional and legal support for Foster Carers who are going through an investigation process, in line with fostering policy. The service can offer emotional support and provide information regarding the potential

outcomes that may be reached at the end of the investigation. Research suggests that experiencing an allegation can be extremely traumatic for those involved, their families and those around them. (Brown, H.C, 2014: 83) the Supervising Social Worker for the Foster Carers, I had a duty of care to provide support the Foster Carers during this process. As highlighted within the Fostering Regulations 2019, it is the fostering services duty to offer support, training and advice to Foster Carers. (Regulation 44).

As a result of the visit, upon leaving the Foster Carers property have gathered their version of events, the Assistant Team Manager and I met with the child care Social Worker, our managers and the safeguarding lead for XXX Local Authority. It was concluded that due to their being no marks on the child, no reports of concern made by any professional involved in Child 1's care and the seemingly open and honest explanation from the Foster Carers would be signposted to training management, I would complete more support would be signposted to training on behaviour management, I would complete more support and supervision sessions and that I would completed a Schedule 8 notification (Schedule 8 The Fostering Services (Wales) Regulations, 2003). A Schedule 8 notification helps to identify risk and document what intervention has been taken and what actions have been agreed by the professionals involved. Using the XXX Local Authority policy, I completed the notification under the heading "Fostering Service Policy, 5.2.4". (XXX Local Authority, 2003). Following the All Wales Child Protection Procedures 2008, if the child were deemed to be at risk when all information was obtained and reviewed, the child would have been removed to prevent further harm. However, as previously discussed, this would have had to be reviewed in accordance with the child's human rights and everyone has the right for a family life. (Article 8, Human Rights Act, 1998)

(4319 words)

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)

The categories of abuse including physical, sexual, emotional and financial with the Social Care Institute for Excellence also highlighting domestic violence, discriminatory, organisational and modern slavery as forms of abuse. (SCIE, 2018) Signs and symptoms of financial abuse could be theft of money and fraud or scamming.

Within Wales, there are six regional safeguarding boards that have the responsibility to protect individuals from abuse and implement strategies to minimise children and adults experiencing harm and to also put adult safeguarding on a similar footing to children's.

The adult safeguarding process or Section 146 enquiries of the Social Services and Well-being Act Wales 2014, states that if the Local Authority have "reasonable cause" to suspect an adult to be at risk, necessary enquiries should be made to negate what actions should be taken.

The first stage of the process is the initial referral being made. Documented in the XXX Safeguarding Policy, the referral comes to the Safeguarding Team to screen the referral; this is then distributed to the relevant Social Work team for the enquiry process to begin. This stage differs in different Local Authorities as some have designated teams who manage all safeguarding referrals and will see each through to their conclusion. It is important that the best person speaks with the individual; the Lead Practitioner, this could be a Social Worker or someone involved in the person's care already such as a Support Worker; this does not have to be completed by a Social Worker.

The initial stage includes liaising with the person seemingly at risk, the referrer and the Police if necessary. When working with the individual it is important to provide an interpreter if required, this is to promote the persons' human right of being free from discrimination. (Human Rights Act, Article 14, 1998). Within the Active Offer it is a person's right to have access to the service in Welsh. (Welsh Government, 2012) Adult safeguarding is a collaborative process when the person is deemed to have capacity to make decisions. Under the Social Services and Well-being Act 2014, the person alleged to be at risk has the right to an advocate.

The determination element of the process highlights three strands, 1 – immediate protection, 2 – not at risk (may need care/support plan), 3 – adult at risk and action to protect needed. (Social Services and Well-being Act Wales, 2014).

If the person is deemed to be at risk, a Case Conference will be held. An expectation highlighted in XXX procedures is that all relevant professionals attend; this includes health and where children are involved, a representative from children's services. The meeting will determine a support plan specific to their needs and situation. The person who is deemed to be at risk of abuse is central and plays a role within the making of the support plan. The plan will be realistic and outline how different services can support them.

It is important to remember that a person with capacity can refuse to cooperate with the support plan; however the person cannot intervene if others are at risk of abuse, for example where children are involved or if the person is a resident in a care setting and the alleged abuser is a professional care giver.

(536 words)

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)

In comparison to the Part 4 process used within children's social care, Section 134, used in adult safeguarding, has a 7-day time scale to complete the initial enquiries; Part 4 strategy discussions are to happen within 24 hours of a referral being made. (Social Services and Well-being Act, 2014) The immediate action needed within children's social care is due to the person at risk being a minor. However, immediate response to risk is required in both children and adults safeguarding procedures.

Although the procedures have different lengths of completion, the two safeguarding procedures have similar structures, for example within both areas the referral comes in and an investigation is undertaken by a Social Worker who speaks to the at risk person. Also, there are safeguarding boards for both children and adults to ensure that risk is being identified and acted upon quickly and appropriately by professionals.

The definitions of what constitutes abuse is now in parallel between children and adults safeguarding, this includes financial abuse that is now recognised as a form of abuse of children. Within the Social Services and Well-being Act 2014 a person at risk is described as being an individual who "is experiencing or is at risk of abuse, neglect or other kinds of harm and who has needs for care and support." As highlighted within the act abuse can be physical, sexual, psychological or financial. (section.197) Clarification of what constitutes abuse in both areas allows for a more streamlined approach to safeguarding individuals and encourages the joined up working of professionals and laypeople to support those at risk.

The main difference between children and adults safeguarding practices is consent. In adult safeguarding, the individual who is at risk of experiencing abuse plays a significant role in identifying what support is needed; where appropriate and have capacity to refuse. This is also dependent on whether there is an impact/risk on any other persons if support and intervention

is not accepted. This differs from children's safeguarding where decisions are made on behalf of the child by professionals involved in their care. In the eyes of the law any safeguarding concerns relating to children are managed under the Children's Act 1989, however some provisions within the Children's Act do not apply to children aged 16-18 for example children aged 16-18 can consent to medical intervention without paternal consent highlighted within Fraser Guidelines 2006 that state children can consent to contraception and sexual health advice. Similarly to the Fraser Guidelines, there is also the Gillick Competence 1983. The Gillick Competency focuses on a child's ability to consent. (NSPCC, 2019).

(430 words)

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)

The model of reflection I have chosen to use for this piece is the Borton (1970) model of reflection. This allows for Critical Reflection of What? So What? Now What? I feel this model is best suited to my learning style as it provides the opportunity to reflect on what happened, what this means and how it will aid my practice in the future.

Working collaboratively with service users & carers and working collaboratively with other professionals

What?

My aim was to develop my working relationship with CCSW to ensure that information was shared appropriately between those involved in the care of the child. I aimed to discuss the case with the child care team before my supervisory visits and attend meetings in relation to the child when appropriate.

Over the year, I have been able to attend more meetings arranged, although there have been gaps in communication. However, I have still experienced a lack of communication regarding changes to the child's care plan, for example changes from long term fostering to Special Guardianship Orders.

So What?

The importance of this was identified within the feedback obtained from Foster Carers, for example, a Foster Carer explained that they felt “more informed about the child’s background” as a result of me obtaining an update prior to my visits.

White and Featherstone explain that if barriers in communication were dissolved a better inter-professional relationship will be established and failings will be minimised. (White, S & Featherstone, B, 2005: 213) The is crucial in social work practice.

I am able to adapt how I communicate but cannot influence the way in which other professionals share information. Moving forward I need to continue developing the relationships with professionals and promoting sharing information.

Now What?

Developing my working relationships has had a positive consequence and information sharing is starting to improve.

To further aid my professional development I would like to initiate a buddy scheme for Foster Carers to be able to access support from their fellow Foster Carers. I feel this would allow for experience to be shared and for strategies and approaches to be given to carers who may be experiencing difficulties in supporting the child placed in their care. (Fernandez, E, 2013: 120)

Applying analysis in assessment to inform interventions

What?

As highlighted within section A, I aimed to attend the Bruce Thornton Analysing and Assessing the Risk of Significant Harm training to develop my ability to complete analytical assessments.

I found this training beneficial as it enhanced my understanding of risk which I was able to implement in to the assessments I have completed during this period. I the training has enabled me to undertake more complex assessments, for example assessing family who have previous convictions by using elements of the risk model.

So What?

The importance of this training has been discussed during my supervision who highlighted that she has noticed a stronger understanding of risk in my Connected Persons’ assessments

since setting my targets in October 2018. I would however benefit from completing other training to make my assessments more concise. I have evidence I can reach this target from feedback provided by my line manager and completing more complex assessments.

Now What?

The consequence of attending this training is that I now feel more confident in completing more complex assessments.

To develop further, Evidence Based Practice training has been arranged for me by my line manager. As the assessments I am completing are becoming more complex I want to ensure that my assessments are without bias and that I continue to work in an effective and lawful. (Social Care Wales, 2017, 6.1)

Intervention and application of professional judgement in increasingly complex situations

What?

My aim was to attend training on Critical Analysis to develop my ability to conduct supervision sessions in a more structured, focussed and task centred way with Foster Carers. I was unable to identify training solely based on Critical Analysis and after further discussion with my line manager, identified a project to review the Foster Carer supervision format instead. This involved establishing a Foster Carer group and obtaining feedback as to what they felt would be beneficial to discuss. This allowed for collaborative working and the Foster Carers voices to be heard. (Social Care Wales, 2017, 3.1) In collaboration with this, I researched the Social Services and Well-being (Wales) Act, 2014 and ensured that the supervision document incorporated aspects of “well-being” e.g. discussing physical, mental and emotional.

So What?

The project allowed me to work closely with Foster Carers who are managing increasingly complex situations and my understanding of the Social Services and Well-being (Wales) Act 2014 has increased during this year.

This process greater enhanced my understanding of the importance of working collaboratively however I feel that obtaining feedback from the children, where appropriate, may have enhanced the project further.

Now What?

Although I didn't attend training as originally identified, I feel that the project was more appropriate to this aim and as a consequence my knowledge has been enhanced. However, moving forward in my professional practice, I would like to attend Critical Analysis training for my own development.

(855 Words)

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

Consolidation workshop	Date Attended
1	12 th November 2019
2	23 rd January 2019
3	6 th March 2019
4	22 nd May 2019

Notes

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.

Louise identified that she wanted to develop her ability to engage with carers and other social work teams more effectively- she has consistently demonstrated that she is a good communicator and has explored ways of improving channels of information sharing – this is evidenced in feedback in annual reviews from carers and from other social workers. Despite the barriers to this due to the use of a separate fostering database, Louise is proactive in accessing the childcare databases to ensure that she is kept informed on developments with the plans for child/ren who are placed with carers she is supporting or assessing; she attends Looked After Children reviews and there has been positive feedback from the Independent Reviewing Officer in respect of her knowledge of the cases reviewed as well as her ability to relate information and advocate for her carers. Louise has already initiated planning for the implementation of the Buddy Scheme, which is devised to enable newly approved or struggling carers to be mentored by more experienced foster carers. Louise has effectively communicated the ethos and purpose of such a scheme and has appropriately engaged carers and other social workers in the process of planning and preparing to implement it.

Louise has, in her first year of practice, undertaken several connected persons assessments as well as annual reviews of foster carers. By applying recognised models of identifying strengths and risks and using the assessment triangle framework, Louise has been able to

evidence that she has been proactive in wanting to develop her ability to analyse information to inform the recommendations and outcomes. Louise has attended the Bruce Thornton training which was highlighted by her as a target at the start of the programme and in discussions with her both in personal and group supervision, she is able to show that she can apply this model to her thinking and decision making. Her assessments are very comprehensive and her identified needs and concerns are balanced and supported by analysis and evidence. Louise has also attended training on the assessment of adult relationships which has also enhanced her ability to critically reflect on information she gathers at assessment stage. She is clear in her reviews of foster carers where the areas of development are and is able to identify appropriate interventions or resolutions as well as ensure that they are implemented. Louise will be undertaking a single assessment in the initial intake team in the next phase of her development; this will help to consolidate her understanding of the Public Law Outline and promote further learning about assessing parents and ensuring that safeguarding of child/ren is central to the assessment. Several foster carers and other professionals have provided verbal and written feedback about Louise's professionalism consistently throughout the past year.

Louise identified that she wanted to develop her reflective analysis skills in order to provide more effective supervision to foster carers. – Louise is to explore with AFA Cymru regarding available training on the role of the supervising social worker as identified in her appraisal. She has been pivotal though in setting up a task and finish group to review the supervision template to encapsulate the principles of the Social Services and Wellbeing Act 2016; in addition she has devised this to enable the promotion of reflection with the carers about the placement, children in their care and their own needs. Louise's recordings evidence that she is having such discussions in supervision – her level of contact and interventions reflects the identified needs /stressors which have evolved in placements from time to time.

This has been a very positive first year in practice for Louise; she has demonstrated her ability to reflect in action, as well as be able to learn from experience with guidance and support. She is self-insightful and an active contributor to service improvement initiatives as well as in her own supervision. Louise's carers have consistently provided excellent feedback which has also

been noted and reiterated by panel members. Louise now needs to consolidate her learning to enhance her skills and experience moving forward as she is thirsty for self-development.

Claire Gooding – Assistant Team Manager, Wrexham Fostering Service

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.

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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

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4. The evidence I have provided within this portfolio is in:

Welsh only ☐ Welsh and English ☐ English only ☒

Mentor's details

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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: hufesa (Learner)

Date: 31/01/19

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: Spallan (Observer)

Date: 07/03/19

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: Claire Gooding

SIGNATURE OF LINE MANAGER: *CL Gooding*

DATE: 31/07/19

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	Louise Pearson
Name of Team/Agency	Fostering Service - WCBC
Name of Mentor	Claire Gooding
Name of Line Manager	Claire Gooding

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 as 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.

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
- 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: Lyfleece Print Name: Loylee Pearson Date: 31/07/19
(Learner)

Signed: George Print Name: George Date: 31/07/19
(Line Manager/Mentor)

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

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