



# Training Newly Qualified Social Workers

Evaluation of a Training and Coaching Programme

Commissioned by Surrey County Council 2014–2016

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Most recently she worked at the Maudsley Children's Department where she was the National Director for the Department for Education funded evidence-based programmes for looked after and adopted children and young people with challenging difficulties.

Rosemarie has a keen interest in 'real world' research. She first became involved in evaluation when managing the UK team leading the European Early Promotion programme in the late 1990s and subsequently led on service evaluations of clinical practice within child mental health and research into the delivery of evidence-based treatment programmes. She has a long-standing interest in parenting, the needs of looked after children and using the best evidence for effective interventions.

Publications include:

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# 1 Executive Summary

## Introduction

Child and Family Training (C&FT) was commissioned by Surrey County Council (SCC) to provide a comprehensive training and coaching programme designed to improve newly qualified social workers' knowledge, skills and confidence in child and family assessments, parenting assessments, analysis and decision making in child protection and intervention approaches.

The C&FT training and coaching programme formed part of SCC's Assisted and Supported Year in Employment (ASYE) programme. SCC provided additional elements that focused on agency orientation, procedures and requirements, and other relevant topics such as domestic violence (see Appendix for full details).

An evaluation of the C&FT pilot training and coaching programme was commissioned at the outset and was designed to try to understand whether ASYEs' skills, knowledge and confidence improve following training and whether the training is integrated effectively into their practice.

The C&FT pilot programme began with the first group of 20 ASYEs in May 2015. A second group of 15 ASYEs started in October 2015 with three more joining later in the year. As each group ran for a year and overlapped, group one ending in June 2016 and group two in September 2016 it was agreed that the evaluation would merge the findings from both groups.

## Key findings from the evaluation

Evidence from the questionnaires and direct feedback from the practitioners involved demonstrate that ASYEs have benefited from the programme and improved their skills, knowledge and confidence.

- There was an indication that improvements were made in practitioners' ability to recognise their own limits and establish good relationships with service users, and in finding support from other professionals when needed.
- There were indications of improvements in practitioner perceptions of their confidence – namely, confidence in their ability to make effective high-quality assessments, in their decision-making skills in regard to safeguarding, and in their ability to plan and carry out effective interventions with children and families. All three areas were significantly improved following the training.
- There were statistically significant changes in practitioners' ability to carry out good quality assessments. Improvements were seen in gathering information, categorisation, analysis, planning interventions and measuring outcomes. Small, non-significant improvements were made in assessment, planning and predicting the outlook for the child. The greatest improvements were seen in the crucial areas of gathering information and analysis.
- The training overall appears to have increased practitioner knowledge, skills and confidence and has for the most part been well received by the ASYEs. ASYEs were very complimentary about the individual training courses and rated them very highly. The course materials and practical guidance on assessments and interventions were reported as particularly helpful. The overall attendance at training courses was moderately good at 74 per cent. The earlier courses were better attended than the later ones, possibly due to increased workloads.
- The attendance at coaching was only 38 per cent overall and seemed to suffer as time went on and workloads increased. However, those who attended rated the coaching as extremely helpful, even if they had only managed to attend a few sessions. It enabled some to catch up on training sessions missed as well as to put into practice what had been taught. ASYEs

particularly appreciated the individualised approach of the coaches in adapting the sessions to their specific needs and sharing their own expertise on complex cases.

### Key recommendations

- Increase the involvement of supervisors and managers in monitoring, supporting and encouraging attendance at both coaching and training sessions in order to help improve the low attendance noted for these first two groups.
- As the use and impact of the training on practitioners' work with children and families could not be evaluated, SCC may wish to consider how to capture this in future and/or what mechanisms currently exist for evidencing training outcomes. Some possibilities may include trainees evidencing learning through case descriptions; reports to child protection conferences or courts; or case presentations at in-house supervision groups or workplace seminars.
- This evaluation was a pre- and post-design with questionnaires being completed soon after training. As there is often a 'sleeper effect' following training and further improvements can sometimes be seen later on as participants integrate new learning into practice, it may be worth following up the social workers who completed the Quality of Assessments questionnaires again at a suitable time interval, for example one year post the end of the ASYE training.

## 2 Profile of the ASYEs

- All ASYEs were asked to complete a registration form to provide information about themselves, their qualifications, education and working experience prior to the first training sessions.
- Information was received from 36 practitioners. The majority had a job title of social worker (33, 92%) and 3 (8%) of youth support officer (YSO). All of the latter were from group one. Thirty-one (86%) are female and 31 (86%) describe themselves as White.
- Although the mean age for the combined groups is 34 years the range is 21–52 years (SD 9.83) and this is reflected in the wide variety of past experience with some entering social work soon after university and others having a career change later in life. Ten (28%) people have professional qualifications in another field, such as teaching (5), police (1), childcare (2), and youth and community work (2), and another 20 (55%) had some relevant experience working with children and young people, families or both in different settings prior to social work qualification training.
- Half of the practitioners have a BA (18, 50%) in social work, 8 (22%) have a BSc and 10 (28%) have a master's level degree in social work. A high proportion (12, 33%) had been awarded either a first-class degree, or a merit or above for their master's degrees.

Table 2.1 below shows the differences and similarities between the two ASYE groups.

All of the second group qualified as social workers in 2015. However, as might be expected, the first group was more mixed with over half qualifying in 2014 and the rest qualifying in 2013 or 2012 and so had potentially been working for longer post qualification before entering the ASYE programme.

The time practitioners had been working in their current post ranged from seven days to eight months. There was a difference between the two ASYE groups, as group one had generally been in post longer – about six weeks on average before starting the training, compared to group two who had mostly been in post for only two weeks.

Group one also had more relevant pre-training experience. Group two had more practitioners aged under 30 years and a higher percentage of practitioners with a master's level social work degree qualification.

ASYES were asked about what they hoped to gain from the training. Practitioners commented that they hoped to gain specific tools for working with children and families and increase confidence, knowledge and skills. Somewhat surprisingly, only one person hoped for improved analytical skills, one for better intervention skills, and two for improved assessment skills.

Table 2.1 Demographics by ASYE Group

Characteristic	ASYE Group 1 n=20	ASYE group 2 n=16
<b>1. Job title</b>		
SW	17 (85%)	16 (100%)
YSO	3 (15%)	
<b>2. Age</b>		
Mean	35 years	33 years
Range (SD)	22–52 (9.27)	21–51 (10.91)
Under 30	7 (35%)	9 (56.25%)
31–49	11 (55%)	6 (37.5%)
50+	2 (10%)	1 (6.25%)
<b>3. Gender</b>		
Female	15 (75%)	16 (100%)
Male	5 (25%)	
<b>4. Ethnicity</b>		
White	17 (85%)	14 (87.5%)
Black/Black British	1 (5%)	1 (6.25%)
Asian/Asian British	2 (10%)	-
Mixed Heritage	-	1 (6.25%)
<b>5. SW Qualification</b>		
BA/BSc	16 (80%)	10 (62.5%)
MA/MSc	4 (20%)	6 (37.5%)
<b>6. Year of qualification</b>		
2012	3 (15%)	-
2013	6 (30%)	-
2014	11 (55%)	-
2015	-	16 (100%)
<b>7. Time in post (days)</b>		
Mean	54	13
Range	21–252	7–21
<b>8. Other professional qualifications</b>		
	5 (25%)	5 (31.25%)
<b>9. Pre-Training Course Experience</b>		
Children/Young People	11 (55%)	6 (37.5%)
Families	2 (10%)	2 (12.5%)
Both	6 (30%)	3 (18.75%)
None	1 (5%)	5 (31.25%)

### 3 The Evaluation Measures

The following evaluation measures were administered to the ASYEs prior to the training and repeated at the end of the training period.

#### 3.1 Self-Efficacy Scale for Social Workers (SESSW)

The SESSW was designed and validated in Europe with Italian social workers.<sup>1</sup> The scale measures three dimensions: emotional regulation (confidence in one's ability to manage negative emotions that arise when dealing with complex cases/situations); procedural self-efficacy (ability to deal with different aspects of social work practice, such as establishing effective relationships with clients, writing and updating case reports and not giving up in the face of failure); and support request (confidence in the ability to look for and find support in others).

Example questions include the following:

- I always manage to keep my anxiety within certain levels when dealing with serious situations.
- I am always able to manage the powerlessness I sometimes feel when dealing with difficult situations.
- I always manage to find enough time to write and update case reports.
- When faced with failure, I am always able to redefine objectives and start again from the beginning.

Self-efficacy is an important concept in social work as it reflects people's judgements about their capacity to exercise influence in specific situations and to achieve successful outcomes. Self-efficacy is related to resilience, perseverance and motivation. For example, people with high self-efficacy sustain motivation and improve skills development, increase efforts in the face of failure, more easily recover after failures and are more likely to view difficult tasks as something to be mastered rather than avoided. Studies have revealed that self-efficacy is a significant predictor of performance at different levels of task complexity and is positively related to job satisfaction and low burnout.

#### 3.2 Quality of Assessments Questionnaire (QAQ)

This questionnaire is designed to provide information about how ASYEs approach assessments based on thinking about a specific case they have recently assessed. The Quality of Assessments Questionnaire (QAQ) was developed from a semi-structured interview designed by Professor Tony Cox and Liza Bingley Miller based on the Assessment Framework categories of dimensions and domains and the seven steps: planning assessments, gathering information, categorisation, analysis, predicting outlook for the child, planning interventions and identifying and measuring outcomes.

The questionnaire and interview ask a number of questions designed to elicit information about the assessment process and practitioners' thinking. In order to try to overcome the 'demand effect' that can operate within interviews and questionnaires and avoid leading questions, participants were asked questions such as:

- What guided your thinking about how to go about the assessment? Where did you get information from?
- What did you do with the information once you had gathered it? What guided your thinking about this step?

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<sup>1</sup> Self-efficacy in social work: Development and initial validation of the Self-Efficacy Scale for Social Workers, Pedrazza, M. *et al. Soc. Sci.* 2013, 2, 191–207; doi:10.3390/socsci2030191

- What sense did you make of the information? What thoughts did you have about the child?
- Did you have any thoughts on how the child might be affected by what was going on? What did you think might happen if nothing changed?

It was also proposed that a small sample (eight/nine people) would also be interviewed face to face to compare the validity of the self-administered questionnaire with the in-depth interview. This measure is designed to assist in understanding how far the training has been integrated into practice.

### 3.3 Confidence Scale

ASYEs were asked to complete a final questionnaire after the end of the training, which contained a section on their self-ratings of confidence in a number of key areas related to the training: assessments, decision making and interventions, comparing their confidence a few weeks after finishing their social work training and now.

### 3.4 A note on case specific information records

Completion of a number of case-specific information records (CSIRs) by each ASYE was initially proposed by the evaluation protocol to capture information about the resources that have been used with the children and families as a consequence of the training. The record was also intended to provide a baseline measure of what the concerns were in the family, the goals set and the changes achieved during the time the practitioner was involved with the family. However, it became clear that the practitioners were struggling to meet the practice requirements of the training programme and the demands of increased caseloads over the year. This meant that the use of the CSIR, although briefly introduced in coaching sessions, was not prioritised by the coaches or the ASYEs and consequently none were completed.

## 4 Evaluation Results

### 4.1 Self-Efficacy Scale for Social Workers (SESSW)

ASYE practitioners were asked to tick a box to indicate their level of agreement with 12 statements about work situations, leading to a score for each of between 1 ('strongly disagree') and 7 ('strongly agree').

In order to provide an independent measure of self-efficacy to consider whether supervisors might differ in terms of their assessments of their supervisees, a small sample from the first ASYE group were asked to score their supervisee using the same measure. It was hypothesised that newly qualified social workers may overestimate or underestimate their skills and abilities at this early stage in their careers.

Initial comparisons between ASYE self-evaluations and supervisors' evaluations prior to training showed that practitioners rated themselves higher (better) in regard to emotional regulation than their supervisors thought them to be, but this was statistically non-significant.

There was good agreement for the support request category (confidence in the ability to look for and find support in others) but differences regarding procedural self-efficacy (establishing effective relationships with clients, writing and updating case reports and not giving up in the face of failure), where supervisors gave significantly higher ratings than their supervisees ( $p < 0.00$ ), showing that supervisors had more confidence in their supervisees' skills in this area than they did themselves (see Table 4.1 below).

Table 4.1 Mean pre-training scores for SESSW for ASYEs and supervisors

Means	ASYEs n=19 (SD)	Supervisors n=16 (SD)	Paired T-Tests (2-tailed)
Total score	5.17 (0.40)	5.42 (0.62)	ns
Emotional regulation	5.03 (0.59)	4.70 (1.06)	ns
Procedural self-efficacy	5.14 (0.51)	5.9 (0.37)	p<0.00
Support request	5.40 (0.90)	5.58 (0.89)	ns

Supervisors' scales were not administered after the end of the training as the ASYEs changed supervisor sometimes twice during the training period and change scores could not be produced.

#### 4.1.1 Pre- and post-training comparisons

Thirty-five ASYEs completed the pre-training questionnaire and 25 completed this after the end of the training. Interestingly, the initial scores were higher than the mean scores quoted by the developers of the measure with more experienced social workers (ER = 4.58, PSE = 4.74, SR = 5.32). Some people scored themselves as 6 or 7 across the board while others were more moderate, suggesting that ASYEs' level of confidence was generally high at the outset and this was supported by their supervisors as shown above.

Table 4.2 shows the mean scores pre- and post-training. The scores show small increases after training on all of the scales but none of these are statistically significant.

Table 4.2. Mean pre- and post-training scores on the Self-Efficacy Scale for Social Workers (SESSW)

Means	Pre-training n=35 (SD)	Post training n=25 (SD)
Total score	5.13 (0.54)	5.32 (0.48)
Emotional regulation (ER)	4.82 (0.86)	5.07 (0.76)
Procedural self-efficacy (PSE)	5.22 (0.56)	5.36 (0.54)
Support request (SR)	5.40 (0.87)	5.59 (0.69)

Three of the individual questions did show a statistically significant increase after training, but all the others were not statistically significant. These are shown in Table 4.3.

Table 4.3 Scores on individual questions in the Self-Efficacy Scale for Social Workers

Question and sub-score	Pre-training n=35 (SD)	Post-training n=25 (SD)	P Value Paired T tests
3. When dealing with complex situations, I am always able to recognize the limits of my competencies (Emotional regulation)	5.37 (1.26)	5.84 (0.75)	0.05
8. I am always able to establish a friendly, sympathetic relation with the user (Procedural self-efficacy)	5.74 (0.82)	6.16 (0.75)	0.02
10. I am always able to look for and find support from people in other professions (Support request)	5.09 (1.01)	5.56 (0.87)	0.03

## 4.2 Quality of Assessments Questionnaire (QAQ)

ASYEs were asked to fill in an electronic version of the questionnaire and send it back to the evaluator.

In addition to completing the questionnaire, a small sample of eight people were also interviewed face to face using the semi-structured interview schedule to enable comparisons between the self-administered questionnaire and the more in-depth personal interview. At the pre-training interview one person who was unable to attend the appointment time was interviewed by telephone. Similarly, at the post-training stage, one person who was called away on an emergency finished the final part of interview over the telephone.

### 4.2.1 Comparing the face-to-face interviews with the questionnaires

The nine ASYEs completing the face-to-face interview schedules were also asked to complete the QAQ on the same case so that they could be compared. All nine completed both at the pre-training stage and five completed both at the post-training stage; data are missing in four cases.

During a face-to-face interview the participant can be asked, ‘Can you say more about that’ if their answer lacks detail, but this is not possible when a participant is completing the questionnaire on their own. In view of this it was anticipated that the face-to-face interviews would elicit more information and therefore offer the possibility of increased scores compared with those completing the self-administered questionnaires. However, analysis suggests that this is not the case. At the pre-training stage, although there were slight differences in mean scores, with the interview generating a mean of 31.22 and the questionnaire of 28.67, this is not statistically significant.

Similarly, the mean scores at the post-training stage show less than two points difference; again this is not statistically significant (see Table 4.4).

Table 4.4. Mean scores on QAQ compared with interviews

		Post-training	
Questionnaire n=9	Interview n=9	Questionnaire n=5	Interview n=9
28.67	31.22	40.80	42.33

Although numbers are small, this suggests that the questionnaire is a valid substitute for the face-to-face interview schedule for the purposes of assessing changes in the quality of assessments and consequently the data for both have been combined for analysis.

### 4.2.2 QAQ Follow-up results

Following the training, practitioners were emailed a follow-up Quality of Assessments questionnaire to complete. At this stage many of them had moved onto other teams or services and did not respond. Despite repeated reminders only 16 out of a possible 31 people (52%) who remained in the programme completed the follow-up questionnaire.

Some ASYEs completed the questionnaire but provided very little detail and may have been influenced by time constraints, whereas others gave a fluid and detailed account. Those with high scores described more complex cases; for example, social worker A described a case where she had reassessed an 18-year-old client and hadn’t seen the family. In contrast, social worker B described a complex child protection case with a long history of multiple agency involvement and concerns.

Scores for three of the ASYE practitioners dropped after the training. All of these were due to giving very sparse information on the questionnaire – for example, one word answers when asked to give a description. All others increased their scores.

Table 4.5 below shows the total scores and the sub-scores for all practitioners completing the QAQ.

Table 4.5 Mean pre- and post-training scores on Quality of Assessments

	n=31 (SD)	Post-training n=16 (SD)	P Value Paired T tests (2-tailed)
1. Planning the assessment	4.48 (2.11)	5.38 (2.41)	n.s.
2. Gathering information	5.03 (1.74)	7.31 (1.92)	0.0002
3. Categorising information	3.32 (2.21)	4.94 (3.29)	0.05
4. Analysis	5.94 (3.09)	9.25 (4.28)	0.0039
5. Predicting outlook for child	1.16 (0.45)	1.44 (1.15)	n.s.
6. Planning interventions	3.22 (1.18)	4.1 (1.71)	0.04
7. Measuring outcomes	2.29 (1.32)	3.31 (1.96)	0.04
Total score	25.45 (8.88)	35.75 (13.47)	0.0002

The greatest improvements in mean scores were in the areas of gathering information and analysis. This is very encouraging and suggests individuals had assimilated the learning from the specific training in these areas.

One of the weakest areas was categorisation, partly due to the difficulties of eliciting information about the assessment without using leading questions. However, surprisingly few ASYEs mentioned the Assessment Framework domains and dimensions at all, although some of the descriptions suggested they were being thought about in the background.

### 4.3 Confidence Scale

This scale asked practitioners to rate their confidence in their abilities as newly qualified social workers prior to and after the training programme on three areas of social work practice that were directly related to the C&FT training programme:

- ability to make effective, high-quality child and family assessments
- decision making skills in regard to safeguarding
- ability to plan and carry out effective interventions with children and families.

To aid retrospective thinking, ASYEs were also asked to rate whether their confidence in their ability at that time was an overestimate, about right or an underestimate. The majority (18, 69%) thought their own assessments of ability were about right. Five (19%) thought they had overestimated their skills, and three (12%) that they had underestimated.

The scale ranged from 0–10 where 0 is ‘not at all confident’ and 10 is ‘totally confident’. Mean scores improved significantly for each area over the training period as shown in Table 4.6.

Table 4.6 Mean Confidence Scale scores pre- and post-training n=26

	Pre-training	SD	Post-training	SD
Confidence in ability to make effective high-quality assessments	4.23	1.95	7.90*	1.26
Confidence in decision making skills in regard to safeguarding	4.31	2.13	7.88*	1.26
Confidence in ability to plan and carry out effective interventions with children and families	4.35	1.79	7.81*	1.27

\*p<0.001

## 5 Training Content and Feedback

The ASYE pilot training programme delivered by Child and Family Training ran from April 2015 to July 2016 and involved:

- training sessions for ASYEs (15 days)
- practice requirements between training sessions
- monitoring participants' progress
- briefing sessions for supervisors (four half days)
- coaching sessions for ASYEs (13 days).

### 5.1 The ASYE programme

#### 1. Assessing parenting and the family life of children, including children with disabilities (3 days)

The Assessing parenting course trains participants to use:

- the HOME (Home Observation and Measurement of the Environment) to assess the quality of parenting and the home environment provided for a child, including disabled children
- the Family Pack of Questionnaires and Scales as an economical and effective way of gathering information about:
  - emotional and behavioural difficulties in both children and adults
  - parenting problems
  - recent life events
  - mental health difficulties
  - alcohol problems
  - the quality of family life.

There are spaces between each training day for participants to practise using the resources.

'Lots of fabulous resources we are able to use in practice'

'HOME Inventory, a new exciting, detailed, evidence-based resource'

'Questionnaires and Scales, they were quick and easy to use'

'It will make me think clearly about the child's needs and not lose sight of the child'

'To evidence findings of assessment, help me to make more robust judgments'

Practitioner comments on Assessing parenting training

#### 2. Neglect (2 days)

The two-day neglect course covers aspects of the following areas:

- Focus on children and young people:
  - supports the recognition of signs and symptoms of neglect in children and young people
  - helps assess the nature and extent of children and young people's developmental needs
  - considers interventions and the importance of integrated working.

'I hope to use some of the references to give weight to my reports and assessment recommendations'

'I learnt a lot about neglect, especially relating it to the common assessment triangle'

'Would have been good for a little more variety'

'Very good in-depth information.'

Practitioner comments on Neglect – Focus on children and young people

- Focus on parents:
  - identifies concerns about parenting difficulties that may contribute to child neglect
  - supports the assessment of parenting capacity, including parents' ability to sustain change
  - considers interventions focused on children's needs, emphasising the importance of keeping the child at the centre of any assessment.

'Very good, informative course'

'Lively, informative, accessible'

'Trainer is very knowledgeable, however a lot of information to take in on one day'

'The mental health discussion was the most interesting'

Practitioner comments on Neglect – Focus on parents

### **3. Child protection decision making using the Safeguarding Children Assessment and Analysis Framework (taught over 2 consecutive days)**

This course teaches participants to use the Safeguarding Children Assessment and Analysis Framework (SAAF).

The SAAF provides a systematic, evidence-based model for assessing and analysing:

- the profile of harm to the child and/or the risk of future harm to the child – i.e. analysing the severity of harm suffered by the child and its impact on their health and development and the severity of the parenting difficulties and of the family and environmental factors
- risks of re-abuse or likelihood of future harm (the likely outlook for the child if nothing changes)
- prospects for successful intervention to prevent the child being re-abused.

'I plan to be better at putting observations and what a family say before making a hypothesis'

'Exceptional printed materials'

'It was incredibly useful but I found it quite a lot to take in over two days'

'Helped focus on process rather than jumping to analysis too early'

Practitioner comments on Child protection decision making

#### 4. Assessing families in complex cases (3 days)

Participants are trained to use the Family Assessment to develop a systematic and evidence-based approach to observing, describing and assessing:

- family life and relationships
- parenting
- the impact of family history.

Course members also develop further skills in engaging and working with children and families during the assessment process.

A model of analysis, planning and identifying outcomes for children completes the training.

There is a space between days two and three of the course for participants to practise using the resources.

'Very appropriate to child protection work'

'Very good course'

'Good to relate the training material to my own practice'

Practitioner comments

#### 5. Intervention course (5 days)

The Intervention course comprises five one-day workshops:

- engagement with children and families (initial stages)
- working with parents and carers, including promoting positive parenting
- working with disruptive behaviour: problems of children and young people
- working with parents and carers, including promoting attachment and responsiveness
- targeting abusive and neglectful parenting.

'Helped me understand where to intervene'

'The tools in the 'Targeting Abusive and Neglectful Parenting' book are extremely useful and solution focused and I believe it will be extremely useful in supporting parental self-awareness and better outcomes'

'We have watched the Ward DVD too many times!'

'Fantastic to have photocopiable worksheets'

'The training allowed us to consider parental stress and interventions to support sustainable change'

'The daisy diagram is really useful'

#### 5.2 Briefing/training sessions for supervisors and managers

Four half-day briefing sessions were arranged for managers and supervisors on:

- assessing parenting and the family life of children
- intervention resources
- child protection decision making using the SAAF
- assessing families in complex cases.

Data are available for four of the eight briefing sessions, two of which were on Child protection decision making using the SAAF and between three and eight people completed feedback forms. Overall attendance was noted to be around 50 per cent or less. All of the managers or supervisors completing the evaluation forms rated the aims, resources and materials, and knowledge improvement as very good or good.

Following discussions between SCC and C&FT it is understood that arrangements were made for supervisors to attend the training courses to familiarise themselves with the content and aid supervision of their ASYEs.

'Would have preferred a longer session on assessing families'  
'Great to be provided with tools'  
'Good training material'

Managers' comments

## 6 Training – Course Ratings and Attendance

Participants were asked to sign an attendance sheet and to complete feedback forms rating the quality of the training at the end of each course.

Table 6.1 below shows the percentage attendance and percentage of ratings of the course as 'very good' or 'good'. Not all the feedback questionnaires were identical but all had questions on whether the course fulfilled its aims and the quality of the materials provided. Some questionnaires asked whether the trainers were effective in their delivery and how far the course had contributed to practice.

The courses were offered to all 38 ASYEs. However, two dropped out of the first group halfway through the course and two joined the second group after the ASYE training had commenced. The figures have been adjusted to take these differences into account.

Course attendance for individual courses ranged from a high 89% to a moderately low 53%. Combining the two neglect courses, the overall attendance was 74%. Attendance on the earlier sessions that focussed on assessment, understanding neglect and decision-making was higher than on the five intervention workshops (82% compared with 69%).

Training attendance reduced considerably towards the latter stages of the programme with the lowest attendance at the final three intervention workshops, perhaps reflecting the demands of increased caseloads and responsibilities being experienced by the practitioners.

Although the numbers attending training decreased over the programme the feedback on the quality of the training remained consistently high. Most individuals rated the training as 'very good' or 'good' for aims and delivery and usefulness of the printed materials. Those that attended the intervention workshops in particular rated them very highly. It could be argued that only those likely to consider that they would benefit from the sessions made the effort to attend but nevertheless their positive views after the end of the training session suggest that these needs were being well met.

Table 6.1 Attendance and quality ratings of training courses

Course title	Attendance % (n)	% Ratings of very good or good			
		Fulfilled aims	Effective trainers	Printed materials	Contribution to practice
Assessing parenting and the family life of children	86% (32)	94% n=30	93% n=29	88% n=28	91% n=29
Neglect: Focus on children and young people	87% (33)	94% n=31	94% n=16*	94% n=31	88% n=29
Neglect: Focus on parents	82% (31)	94% n=29	100% n=17*	94% n=29	87% n=27
Child protection decision making using SAAF	84% (32)	100% n=32	100% n=32	100% n=32	91% n=29
Assessing families in complex cases	72% (26)	88% n=7*	100% n=8*	100% n=8*	88% n=7*
Intervention 1. Engagement and initial stages	89% (33)	91% n=30	94% n=31	91% n=30	88% n=29
Intervention 2. Working with parents and carers: Positive parenting	86% (31)	93% n=13*	3% n=13*	100% n=14*	100% n=14*
Intervention 3. Working with children and young people	53% (19)	100% n=17*	100% n=17*	100% n=17*	94% n=16*
Intervention 4. Working with parents and carers: Promoting attachment and responsiveness	60% (22)	100% n=8*	100% n=8*	100% n=8*	-
Intervention 5. Targeting abusive and neglectful parenting	56% (20)	100% n=20	100% n=20	100% n=20	-

\*missing data

## 6.1 Individual attendance

ASYE's individual attendance rates at the 15 training sessions ranged from 5 to 15 (mean 11.15, SD2.84) as shown in Figure 6.1 below.

Unsurprisingly, participants with high levels of attendance at training sessions also attended more of the coaching sessions and this was significantly correlated (Pearson's  $r=.59$ ,  $p=0.00$ ).

## 6.2 Effect of the ASYE training on professional practice

As part of the final feedback participants were asked how the training had affected their professional practice and to rate this from 0 to 10 where 0 is 'not at all' and 10 is 'a great deal' and to give examples to explain their answers. Of the 26 ASYEs who responded 22 (85%) rated the training as 7 and over. See Figure 6.2 below.

More than half (14, 54%) of the practitioners mentioned the practical assessment tools as particularly helpful.

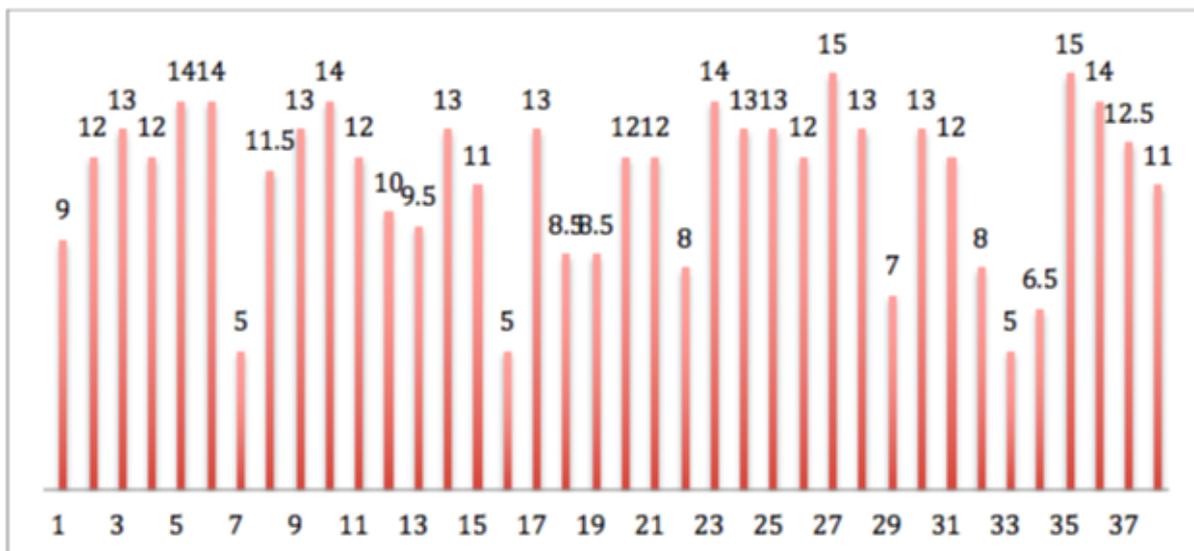


Figure 6.1 Number of training sessions attended by individual ASYEs n=38

‘Useful tools, SDQ, scripts, HOME, enhanced understanding of neglect, brain development’  
 ‘Using the tools, defending them in court’  
 ‘Tools very helpful, improved direct work’  
 ‘HOME really useful, SAAF assessment used prior to case conference to help track what’s changed’  
 ‘Allowed me to work in structured way, mapping info, using scales & questionnaires (evidence-based decisions)’  
 ‘Insight in CP processes and skills and tools to undertake assessments and use appropriate tools’

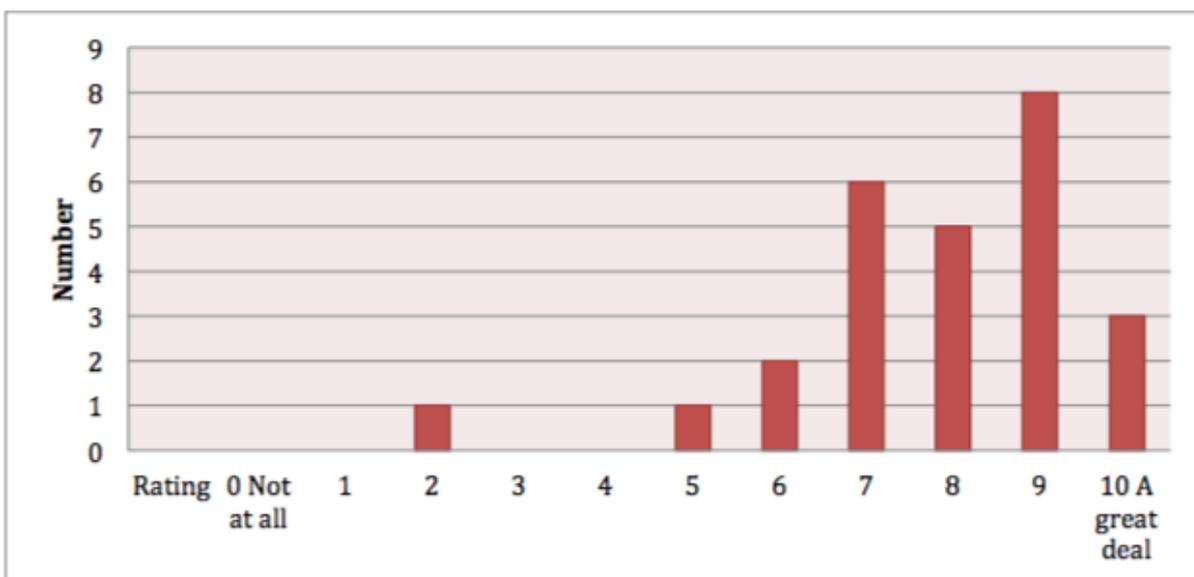


Figure 6.2 Effect of ASYE training on professional practice (n=26)

Some commented more generally.

‘The breadth of experience I have gained in the last 12 months has been second to none. Coupled with the extensive training and support I feel much more confident in my ability to provide effective assessments and interventions.’  
 ‘Some materials repeated therefore time consuming, but helped confidence and decision making’

'I was completely new to CP work. The ASYE year was able to introduce me to safeguarding issues and how to manage these, work with other professionals and also to understand thresholds'

'On some occasions some of the training appeared a little repetitive and sometimes very slow paced. I appreciate that the training is delivered to accommodate various levels of understanding etc. however it sometimes felt it was being pitched too low'

'Brilliant resources and encouraging and supportive staff and management'

'Everybody should complete it. Wish it was accredited by University'

## 7 Coaching – Attendance and Feedback

The purpose of coaching was to support the consolidation of learning from the overall programme and provide an opportunity for ASYEs to practise some of the techniques, tools and measures being taught and to present cases from their own practice on which to try these out. The sessions provided an opportunity for participants to:

- reflect on their experience of putting their learning into practice
- further develop and embed their knowledge and skills
- increase their confidence.

### 7.1 Attendance

Overall attendance at the 13 coaching sessions provided was low at 38 per cent with some people attending regularly and others not at all. ASYEs' individual attendance rates ranged widely from 0 to 10 (mean 5, SD2.80). The figure below shows the number of sessions attended by individual practitioners. The comments received about coaching suggested that some would have wished to attend more but were constrained by workloads.

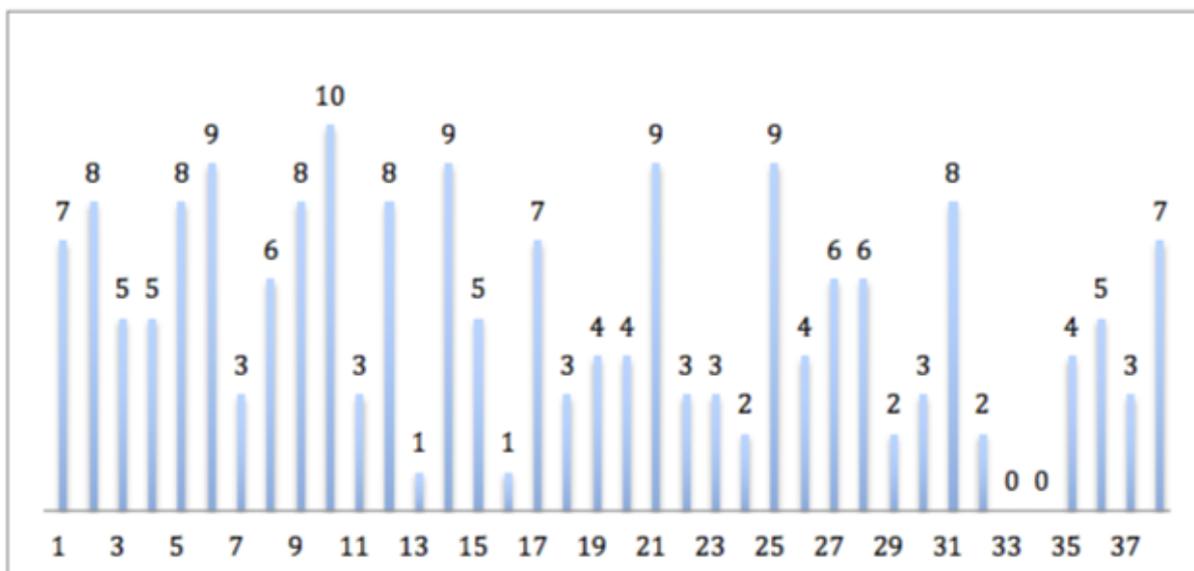


Figure 7.1 Number of coaching sessions attended by individual ASYEs (n=38)

### 7.2 Effect of ASYE coaching on professional practice

As part of the final feedback participants were asked how the coaching had affected their professional practice and to rate this from 0 to 10 where 0 is 'not at all' and 10 is 'a great deal', and to give examples to explain their answers. Of the 26 ASYEs who responded 18 (69%) rated the coaching as 7 and over. Those who rated the coaching as having no impact had not attended the sessions. See Figure 7.2 below.

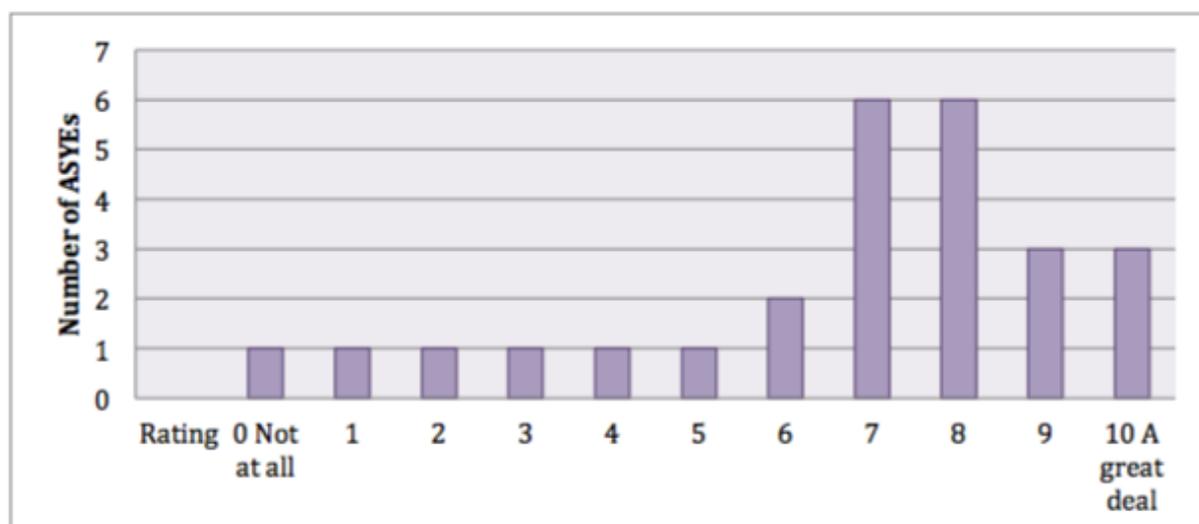


Figure 7.2 ASYEs' ratings of effect of coaching on professional practice

### 7.3 Benefits of coaching

Feedback on the benefits of the coaching during their ASYE course was received from 24 practitioners of whom 19 (79%) were very positive and 5 (21%) negative. Table 7.1 gives samples of comments divided into the main themes.

Table 7.1 Sample comments on coaching grouped into the main themes

Theme	ASYE comments
Knowledge	The coaching was useful because it consolidated my knowledge of the training sessions and gave me the opportunity to ask questions and practise what I had learnt within a smaller learning environment. I was allowed to tailor questions to my own cases and these were answered in depth
	The coaching we received from the Children and Families training course was excellent and helped me to understand the learning better
	Vast information cumbersome
	Critical reflection, training learning and future development
Confidence	Helped confidence and decision making
	I have more tools to equip myself, more confidence in evidence-based practice
Reflection	Coaching was a good space to reflect and explore alternatives
	A good space for reflection, good source of support
	Helped wellbeing and reflecting about cases
Case discussion	Given the chance to talk in detail about various issues surrounding families and talk through any difficulties we are facing
	Linked classroom work to practice, space to discuss cases
	It has been really useful as coach has tailored it to our cases and what support or guidance we need at that moment which has been really helpful
Time constraints	It was a drain on my time
	Some materials repeated therefore time consuming
	I did not attend many of [the] coaching sessions as I did not view them as efficient use of my time
	I've not fully understood the aim of coaching, seemed like repetition

	Unfortunately I was only able to attend a few sessions, however, all those sessions provided me with support, informative and ways to improve my practice Very useful where we analysed my completed assessments on what I have done best and what I have missed...I have gained very useful skills.
Practice	I gained a lot from the coaching sessions. It offered me an opportunity to discuss the trainings and how they can be applied to my cases. It was an opportunity for me to tap into the wealth of experiences of the coach. It offered me an opportunity to develop my analytical skills Enabled practice implementing what we'd learned I've used the scales and questionnaires a lot of the time

## 8 Final Feedback

ASYE practitioners were also asked, 'How likely are you to recommend the training programme to other newly qualified social workers?' on a scale of 0–10 where 0 is 'not at all' and 10 is 'definitely'. The majority of responses were very positive. The mean was 8.08 with the largest group commenting that they would definitely recommend the training. See figure 8.1.

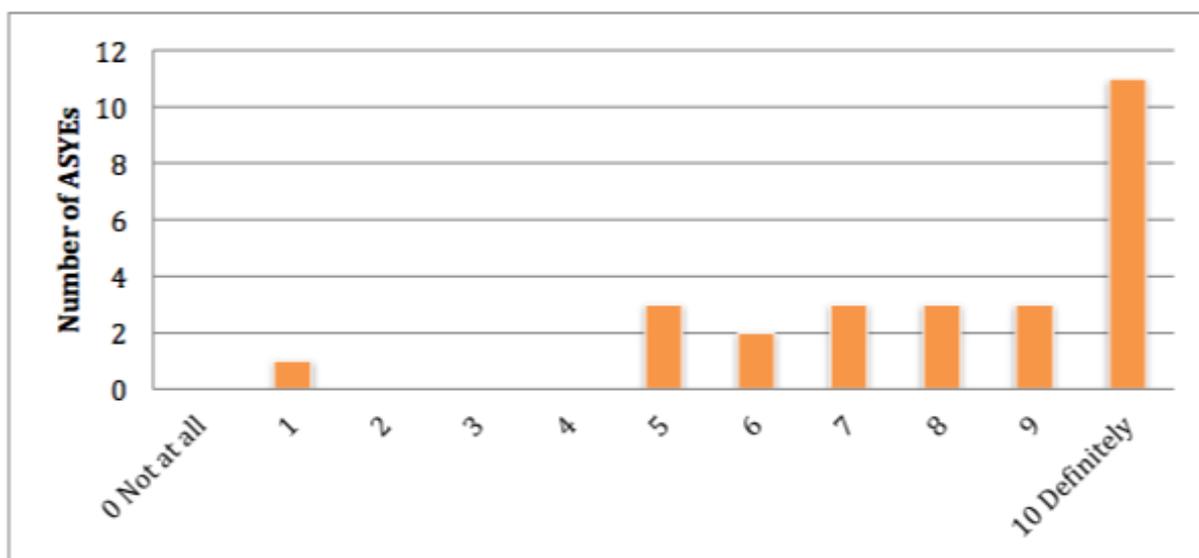


Figure 8.1 Likelihood of recommending ASYE training programme to NQSWs (n= 26)

### 8.1 Comments about the Academy ASYE training

Comments included the following.

'I have felt thoroughly supported and protected this year and it has been a great opportunity of learning and development to provide me with the skills and knowledge I need to thrive in this profession. It has been an environment of learning rather than blame and we have been given independence whilst being protected from high case loads which has enabled me to get the most out of the year. Most of the training courses have been valuable and useful.'

'One negative I would mention is that the jump between ASYE and the new teams following this is quite high as the level of support and involvement is much higher during the ASYE. This was a bit of a shock. However, this year has provided me with a substantial baseline to my work and I feel much more confident to make my own decisions and help families in the best way I can.'

'I would definitely recommend the Academy as a whole to NQSWs, and I would say that some of the training has been useful, especially the first half of the training, but the second half has felt like a waste of a day at times.'

'Definitely for children services SWs not so much YSO.'

'Training programme is great but due to caseload and many training sessions difficult to manage especially when getting to grips with process.'

'I highly recommend the training for all newly qualified social workers. It has made a huge difference in my practice which will inspire me throughout my future practice as a social worker.'

Some comments included specific recommendations for the future.

'Starting training half way through ASYE was more stressful than helpful. Felt like a blanket approach – sometimes didn't match my work.'

'The trainings are all very relevant to my practice but I liked the child and family trainings, SAAF, trainings on domestic violence, bereavement and loss, Neglect and abuse more. There was a month we had a lot of training packed together to the extent that we were having two or three trainings in a week. That was not helpful as we struggled to cope with our cases and the training. This led to some of us missing some of the important trainings. I think the future ASYE social workers would benefit from the trainings more if they are evenly spread across the year.'

## 9 Discussion and Recommendations

### 9.1 Discussion

Surrey County Council Children's Services has invested heavily in equipping its newly qualified social workers with the skills and confidence necessary to be effective practitioners.

The purpose of commissioning this evaluation was to help understand the benefits of the pilot ASYE training and whether this impacted on practice. Specifically it was important to know:

- if the training was beneficial
- whether practitioners' skills, knowledge and confidence improved following training
- whether the training was integrated into practice
- what aspects were most/least helpful in the process.

#### 9.1.1 Was the training beneficial and were practitioners' skills, knowledge and confidence improved?

Evidence from the questionnaires and direct feedback from the practitioners involved demonstrates that ASYEs have benefited from the programme and improved their skills, knowledge and confidence.

Initial scores on the Self-Efficacy Scale were generally high, giving limited scope for improvement over time. However, these were not significantly different from the ratings given by their supervisors, with the exception of procedural self-efficacy which supervisors rated even higher, suggesting that ASYEs were reasonably realistic in their estimations of their abilities pre-training. There were few statistically significant changes on this measure pre- and post-training although mean total scores and sub-scores did increase slightly. There was an indication that improvements were made in practitioners' ability to recognise their own limits, to establish good relationships with service users and in finding support from other professionals when needed. It should be noted that this questionnaire is context specific so it would be interesting to know how this might change over time when practitioners are in new posts with different work pressures and greater experience, and perhaps with higher expectations from supervisors and managers.

There were also indications of improvements in practitioner perceptions of confidence. The confidence questionnaire focused on three specific areas directly related to the training curriculum, namely confidence in their ability to make effective high-quality assessments, confidence in their decision making skills in regard to safeguarding, and confidence in their ability to plan and carry out

effective interventions with children and families. All three areas were significantly improved following the training, and results from this related well to the Quality of Assessments measure.

### 9.1.2 Was the training integrated into practice?

Despite difficulties in obtaining post-training data from busy social workers, the Quality of Assessments measure showed very significant improvements had taken place over the training period. The results showed statistically significant changes in practitioners' ability to carry out good quality assessments. Improvements were seen in gathering information, categorisation, analysis, planning interventions and measuring outcomes. Small, non-significant improvements were made for assessment planning and predicting the outlook for the child. The greatest improvements were seen in the crucial areas of gathering information and analysis, although systematically categorising information appeared to be one of the weaker areas and only just reached statistical significance. Nevertheless, these are very encouraging results and indicate that the practitioners both benefited from the assessment training and successfully integrated it into their practice.

There is, however, no detailed case material available for analysis as the use of case-specific information records was not prioritised due to pressure of work combined with the practice requirements of the courses, and consequently none were completed. This has meant that there is limited evidence of the direct use of the specific skills and resources with children and families to demonstrate whether these were usefully integrated into practice.

### 9.1.3 What aspects were most/least helpful in the process?

The training overall appears to have increased practitioner knowledge, skills and confidence and has been well received by the ASYEs for the most part. ASYEs were very complimentary about the individual training courses and rated them very highly. The course materials and practical guidance on assessments and interventions were reported as particularly helpful. The overall attendance at training courses was moderately good at 74%. The earlier courses were better attended than the later ones, possibly due to increased workloads.

Although the data from both these first two groups were analysed together there were clear differences in the timing and delivery. It is understood that early difficulties for the first group of ASYEs in managing the workload were taken on board and responded to flexibly by changing the training schedule so it was less intense. Despite this, a few trainees commented that the workload was still difficult to manage and that some of the training was repetitive.

The attendance at coaching was only 38 per cent overall and seemed to suffer as time went on and workloads increased. However, those who attended rated the coaching as extremely helpful, even if they had only managed to attend a few sessions. It enabled some of them to catch up on training sessions missed as well as to put into practice what had been taught. ASYEs particularly appreciated the individualised approach of the coaches in adapting the sessions to their specific needs and sharing their own expertise on complex cases.

Space was given in the evaluation for feedback from practitioners on the training, coaching and their overall experience of the ASYE course. Practitioners were detailed and honest in their feedback on what they had particularly appreciated and most would recommend the programme to other newly qualified social workers.

## 9.2 Recommendations

The following recommendations are drawn from the results of this evaluation, including the detailed feedback from ASYEs. It is acknowledged that some of these suggestions may have already been put into place or may no longer be relevant but are nevertheless worth highlighting.

- 1 Surrey County Council (SCC) to review ASYE caseloads and priorities to ensure sufficient time for consolidation of training.
- 2 Child and Family Training (C&FT) to review the training curriculum to minimise repetition of the materials and consider what space might be needed between sessions to enable more assimilation of learning.
- 3 SCC to review the timing of all training sessions ASYEs are expected to attend (in addition to C&FT sessions) to avoid practitioners being overwhelmed with too many within a short period.
- 4 Increase the involvement of supervisors and managers in monitoring, supporting and encouraging attendance at both coaching and training sessions in order to help improve the low attendance noted for these first two groups.
- 5 In addition to 4 above, C&FT coaches for subsequent cohorts could also provide information on attendance rates at coaching and training to SCC to establish whether this has improved and to consider what has influenced this.
- 6 As the use and impact of the training on practitioners' work with children and families could not be evaluated, SCC may wish to consider how to capture this in future and/or what mechanisms currently exist for evidencing training outcomes. Some possibilities may include trainees evidencing learning through case descriptions, reports to child protection conferences or courts, or case presentations at in-house supervision groups or workplace seminars.
- 7 This evaluation was a pre and post design with questionnaires being completed soon after training. As there is often a 'sleeping effect' following training and further improvements can sometimes be seen later on as participants integrate new learning into practice, it may be worth following up the social workers who completed the Quality of Assessments questionnaires again at a suitable time interval, for example one year post the end of the ASYE training.

Rosemarie Roberts  
20 June 2017

## Appendix

### List of training provided by SCC for Academy ASYE participants

The following classroom courses are part of the academy programme:

- Introduction to LCS (case recording database)
- LCS for Children in Need
- LCS for Children Looked After
- LCS for Child Protection
- Lone Working and Personal Safety – this course gives participants a greater understanding of how to identify potential risks, keep safe and defuse difficult situations
- DA Multi-Agency Approach – this course gives participants a greater understanding of the different types of DA, impact on survivors, working in partnership

- Equality and Inclusion (now called Wellbeing and Inclusion) – this course gives participants a greater understanding of equality and diversity issues in the workplace
- Welcome to Surrey – induction/networking event for all new starters across the council

The following courses are delivered by Surrey Safeguarding Children Board and are attended by multi-agency delegates:

- Foundation Module 1: Introduction to Safeguarding Children
- Foundation Module 2: Child Protection Plans
- Foundation Module 3: Core Group Meetings (FM2 and FM3 are now one course)
- Child Sexual Exploitation Level 2 (Level 1 e-learning is pre-requisite)
- Professional Challenge – this course gives participants greater confidence and skills to effectively challenge professionals and practice within their agency and others, in order to safeguard children and young people.

The following is the e-learning required to be completed within the first three months:

**Surrey County Council e-learning:**

Display Screen Equipment

Understanding SCC Political Environment

Introduction to Surrey County Council

Introduction to Health and Safety

Introduction to Fire Safety

Information Security

Data Protection Awareness

Manual Handling of Loads

**Children's Services specific e-learning:**

Awareness of Self Harm

Chairing Meetings

Childhood Obesity

CSE level 1 (this must be completed before participants attend CSE level 2 classroom training)

Domestic Abuse

Emotional Resilience

Induction to Children's Services

Introduction to Social Media

Lone Working and Personal Safety

Working Together to Safeguard Children

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