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Social work and child protection beyond the COVID-19 pandemic: Key challenges and good practice

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**Dartington
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Key findings

The research

- > Between April and December 2020 the authors researched the impact of COVID-19 on child protection practice through monthly interviews with a sample of social workers and managers in four local authorities in England and interviews with a sample of parents (Ferguson, Kelly and Pink, 2021). This showed how the pandemic had disrupted forms of face-to-face relating between social workers and families in numerous ways, and particularly forms of intimate child protection where practitioners got physically as well as emotionally close to children. Between February and May 2022 we conducted a follow-up study with the same sample of social workers and managers to find out how they were now relating to children and families, and explored their experiences of working from home and in the office, organisational support and wellbeing in this 'late-pandemic' phase.

Child protection practice

- > We found that child protection social work is currently in a state 'in-between' social distancing and closeness. Our practitioners described getting close as when children initiate tactile play and other forms of holding, making what we have termed 'responsive care' the dominant approach. Two years of social distancing have established new norms of more distanced practice and new 'habits' that assume distance. Even some social workers who, prior to the pandemic, would get down on the floor to play and use physical touch and nurture as part of assessing and meeting children's physical and emotional needs are now less likely to initiate such contact. As a result, children who do not independently seek contact with workers may be most at risk of not having their needs understood and responded to. They become 'unheld children' (Ferguson, 2017; Ferguson et al, 2022).
- > As a research team, we propose that a 'reset' is needed that clarifies the kinds of relating that children's social workers are expected to perform. This needs to incorporate attention to closeness in terms of the use of the body, all the senses, including touch, in order to support social workers to achieve 'intimate child protection practice' (Ferguson, 2011). This should be informed by and appropriate to the needs and wishes of individual children and young people, with consideration of additional needs such as clinical vulnerability to COVID-19 or other infectious diseases.
- > The COVID-19 pandemic accelerated forms of social work practice that go on outside the family home through visits to and play in parks and the use of walking conversations, for instance. Some outdoor meetings, such as case conferences and looked after children reviews, have also been done outside to respond to the specific needs of the young people. Similar to the ways in which side-by-side communication is facilitated by car journeys, outdoor and walking methods are now widely regarded as potentially beneficial therapeutic adaptations for children and young people and have been sustained by many workers. Informed by our research, we propose that seeing children outdoors should count as a statutory visit in child protection and that outdoor practice be maintained, developed and recognised for the value it can clearly bring to practice. Children and young people themselves, operational managers and practitioners need the discretion to creatively decide what setting and what in-person and digital communication work best at particular times.

- > Our data suggest that social workers are very aware of the broad socio-political context and that the pandemic has made life harder for some families and their needs more complex, with the effects of the withdrawal of universal and early help services during lockdowns being acutely felt. During the lockdown periods in 2020 especially, extra financial help and donations of food, toys, computers and so on enabled practitioners to help families quickly. Many families in our 2020 study told us that this meant a huge amount to them and social workers felt strongly that being able to demonstrate ‘poverty awareness’ (Gupta, 2017a), relieve distress and show generosity helped them to form meaningful relationships and often to do so more quickly. In 2022 these resources are no longer available, despite the ‘cost of living crisis’ meaning that increasing numbers of families are struggling. Not being able to provide meaningful help is causing moral distress and adding to demands on social workers and the stress they experience. Our findings support other research (Featherstone, et al., 2021) that shows that system changes need to enable social workers to be able to provide the necessary material support to children and families.

Digital social work practice after COVID-19

- > In the initial months of the pandemic, during the March to July 2020 ‘lockdown’ of people in their homes and social distancing restrictions outside of the home, the use of digital technologies in social work practice dramatically increased. This resulted in the widespread use of ‘virtual visits’ in casework where a video call to the children and family replaced a visit that would previously have taken place in-person inside the family home. In-person visits to children deemed at high risk continued. Video calling extended to family contact for children in care and family court proceedings. Video conferencing to facilitate interprofessional meetings and conferences involving families and professionals together became widespread. Hybrid approaches have emerged in work with families, combining, for instance, video casework, phone texts and email, and the sharing of films and photographs especially via WhatsApp and some in-person visiting. In this ‘late-pandemic’ period, online interprofessional meetings remain widespread and widely supported. The benefits of online multi-agency working need to be maintained while ensuring that the needs of parents, children and young people are prioritised. This may mean supporting parents in-person in an office or home environment as part of a hybrid approach where many professionals continue to call in online. Such approaches present training needs for Chairs, and there is a need to capture emerging best practice in this area. Social workers, conference Chairs and others need professional autonomy to engage with individual families to make decisions about the format of meetings. Preparation should include a conversation between the Chair and the family members involved to explore their preferences and how these may be met and any practical issues that may limit their involvement. For instance, initiatives such as some Chairs and Independent Reviewing Officers having outdoor meetings to respond to the specific needs of the young people should be encouraged.

- > Our data suggest that interest in and use of digital casework with children and families waned as restrictions on in-person visiting were lifted in 2020. Some organisations no longer authorise the use of digital platforms and software, and age restrictions and data security limitations may be poorly understood by leaders, managers and practitioners.

Where these communication strategies are disallowed, children and young people and parents who prefer digital communication and for whom it works best appear to be missing out. The evidence remains that blended or hybrid social work, using phone, text for sharing of photos and video, and video calling, combined with in-person encounters can be beneficial for some young people and families, enabling ‘digital intimacy’ (Pink et al., 2021) and potentially more flexible, including facilitating out-of-hours communication by children and families.

We propose that a false dichotomy between in-person and virtual approaches should be avoided and the uses of hybrid approaches should be reinvigorated, alongside a national training programme for all staff, building on existing initiatives (e.g. BASW 2021; Research in Practice 2021).

- > Planning and preparation need to respond to the needs of people with particular sensory needs, and to the role of sign language interpreters and other language interpreters.

Staff wellbeing, organisations and supportive ways of working

- > COVID-19 required a rapid shift towards increased working from home. Our research in 2020 found that many social care staff missed the sociability and mutual support provided by being in the office and struggled with the collapse of home/work boundaries as difficult online encounters with service users intruded into their home space and emotional and personal lives. In the ‘late-pandemic’ period, all of the offices in our study sites had re-opened. There was a shared view that staff need to spend some time together in offices but no consensus about the best balance of office and home working.
- > By 2022, more than half of our practitioner sample had changed their job role at least once since the first fieldwork period (April–December 2020). Some had moved to the private or voluntary sector, others into managerial roles or changed team. Around a third had left child protection social work, which is in line with national workforce statistics that indicate significant retention problems and recruitment of social workers (Ofsted 2022). Issues that pre-dated the pandemic, such as high workloads, bureaucracy, working to tight timescales, and managerial pressure, were being compounded by concern about the social impact of the pandemic, rising child and family poverty (Featherstone, et al., 2021) and cuts in support services, and a new wave of public and professional anxiety in relation to high-profile child deaths (Child Safeguarding Practice Review Panel, 2022). Our data support other evidence that social worker wellbeing has been negatively impacted by the pandemic, particularly over time (Johnson et al., 2020; Ravalier et al., 2022).

- > In relation to home/office working, there are particular concerns about newly qualified social workers missing out on the high value of informal workplace interactions for their learning and development. Some social workers in our study felt that spending most of their time working from home made their jobs harder. Nonetheless many social workers value the chance to work partly from home, and some are strongly resistant to returning to 'hot-desking', open-plan offices that prioritise flexible use of space and selling off of buildings at the expense of having your own desk and predictable and comfortable environments for workers (e.g. Jeyasingham 2020).

If we are to increase retention, wellbeing and job satisfaction, ongoing issues of workload, bureaucracy and administrative support for social workers continue to need attention. Home/office working arrangements require thoughtful and transparent attention to the provision of in-depth in-person support from managers, peers and more experienced colleagues. Online support should not be discounted as our data suggest that it can meet the needs of some staff some of the time, in particular those who experience it positively. The impact of new forms of practices on workloads and the workforce must be kept under review. Managers and leaders need to recognise the physical and emotional challenges faced by practitioners and the ongoing impact that working through the pandemic has had on the workforce.

Introduction

This briefing is based on research that concerns how child protection practices are being carried out in the ‘late-pandemic’ period 2022. The work presented here builds upon a University of Birmingham study conducted between April and December 2020 in four local authorities. Researchers interviewed 48 social workers, managers, frontline social workers, with a core sample of 31 social workers and managers interviewed approximately every month. The primary research question was ‘How can practices that have relied on achieving closeness keep children safe and help families in a period of institutionalised social distancing?’.

A follow-up study was completed between February and May 2022 when 26 of the core participants in the initial study were interviewed again – via Zoom, Teams or WhatsApp. At least 14 months had passed since their last interview. At the start of the follow-up study all government-sanctioned COVID-19 restrictions had recently ended. In these follow-up discussions the focus was on two key research questions: What kinds of relating are social workers now engaging in to keep children safe and to help families? And what organisational arrangements are in place in terms of home/office-based working and how are these experienced by staff?

The research was followed by two Knowledge Exchange forums in May 2022 at which 42 social work practitioners and managers considered the research findings, shared their own experiences and discussed what the future shape of child protection might be. This briefing draws together findings from all these sources and makes recommendations for post-pandemic policy and practice.

Face-to-face relating between social workers, children and families

Prior to COVID-19, ethnographic research that observed practice showed that children were most commonly seen in the family home and effective relationship-based practice involved getting physically and emotionally close to them, especially on home visits (Winter et al., 2017; Baeza et al., 2019; Forrester, et al., 2019; Ferguson, 2016). Different degrees of closeness to children and families occurred. In a minority of cases children were ignored altogether, despite being in front of social workers—they were not only ‘invisible’ but ‘unheld’ children due to an absence of tactile contact, play and holding (Ferguson, 2017). On the other hand, pre-pandemic work sometimes involved ‘intimate practice’ where social workers and family support workers got close to children by getting on to the floor to play with them, see them in their bedrooms and using touch to comfort, play or hold them (Ferguson, 2011). The 2020 University of Birmingham study found that social distancing led to restrictions on practitioners entering homes – doing ‘doorstep’ or ‘garden-visits’ instead – and on initiating physically close conversations and interactions with children. However, social workers still entered the homes of children regarded as at high risk and there were exceptions to social distancing even at the height of the pandemic.

Children often initiated physical closeness with social workers; one example was the four-year-old girl who the social worker said: “likes to come and put her head on my knee, I think it is almost like a comfort thing, I think she slightly understands that I am there trying to help.” Like many others this social worker allowed the physical contact to continue. Such uses of closeness and touch to provide nurture emerged as crucial to the social work role in helping troubled children through the pandemic (Ferguson, et al., 2021). In a context of deep anxiety about infection by coronavirus, social workers regularly took personal risks and acted with selflessness and integrity.

However, most social workers tried not to **initiate** physical contact – did not get down on the floor or play like they used to, did not see children in bedrooms nor pick infants up, or comfort older children through touch, such as a hug. Instead ‘responsive care’ in which a child or young person initiated physical closeness to which the worker responded humanely became the dominant pattern of relating.

By May 2022, most social workers had been home visiting regularly and entering houses again for some time, as well as seeing children in schools, at a carer’s home or other community setting. Most practice with families was no longer limited by social distancing or PPE (personal protective equipment). Nevertheless, there was significant uncertainty about what the ‘new normal’ of social work practice is, might or should be and ‘responsive care’ remained the dominant pattern of relating:

*I have got a [14 year old] kid... we’ll be like walking somewhere and she is like “can I hold your hand? Can I link your arm?” And I will with her because I have known her for a year and had some quite tough times with her, so we have got that relationship to do that I think.
(Social worker, working with children in care).*

Responsive closeness is sometimes carried out by workers only when the parent(s) give permission:

I do often hold them [babies] when I'm there but I always wait for the carer to ask first.

(Social worker, Child Protection).

Much less frequently, worker-initiated closeness does now occur.

[Social worker's name] has got a baby that is... well he is nearly adopted now actually, she comes back beaming from visits when she has held him and had a photo taken with him, so I think... having that physical contact with children is really important to the social workers. It is the positive side of it isn't it really.

(Team manager, Child Protection).

With teenagers:

Like if they are crying I will say can I put my arm around you? Or like if we're walking somewhere I will ... guide them a little bit.

(Social worker, working with children in care).

For some social workers, physical closeness has never been a prerequisite for building relationships and keeping children safe:

I don't hold babies unless there is a reason why I have to, I never really have.

(Social worker, previously Child Protection, now fostering/adoption).

I'm not a huggy person anyway [... talks about getting close in other ways].

(Social worker, Child Protection).

But two years of social distancing have established a norm of more distanced practice and new 'habits' that assume distance:

I think it is just habit forming now... I don't consciously think about it as social distancing. Yesterday [I sat at a distance from a mother] even though social distancing has not been a thing since the summer really has it?

(Social worker, Child Protection).

I suppose one of the things that I feel like we haven't got back to, and I wonder how that will be, is things like could I hold your baby? Could I feed your baby?... and I hope we do because I feel like that is really important isn't it... I think there is some physical contact, but I think it is thought about rather than it being like spontaneous because people are thinking about themselves but also thinking about the other person. But also you know we adopt norms don't we? And it has been like that for such a long time with Covid that I think you know it starts to establish a different norm.

(Team manager, Child Protection).

For some social workers the intimate relational approach they adopted pre-COVID-19 had been ‘stripped away’:

[the me] of two and a half years ago would look at my practice now and think, ‘oh that is not what I like to do, that is not how I do things’,... And it feels like I have lost my way a little bit.
(Senior Social Worker).

COVID-19 has accelerated an orientation within the system away from intimate relational practice and towards what some participants characterised as a more procedural approach, creating the need for what the above senior social worker called ‘reset moments.’ In effect, social work – like many other aspects of sociality – is in an ‘in-between’ state, in terms of how and where to conduct relationships. This finding is supported by other research and scholarship that has shown the ways in which the pandemic has rendered touch in social work even more problematic than it was before (Green and Moran, 2021) and made visible what Kong et al. (2021) refer to as social workers’ ‘sensuous bodies’, which ‘have been suspended, displaced and re-constituted during the first UK national lockdown’.

Our findings show that the differences in individual workers’ practice and in children’s capacity to initiate physical closeness suggest two categories of children: ‘Held children’, who initiate touch / physical contact, play and emotional closeness with workers, and the ‘unheld child’, who does not lead the worker into closeness. It is the latter group of children who have most to lose in this ‘in-between’ state and need proactive intimate practice (Ferguson, et al., 2022). As Ruch, et al. (2017) argue, it is about giving equal attention and value to ‘head, heart and hands’ in working with children and families. The needs of children with disabilities or life-limiting illness warrant particular attention. For children who cannot reach out, and those who need professionals to continue wearing PPE to protect them from the virus the ability to initiate or refuse physical contact is affected, particularly at times of personal care, where touch is unavoidable.

COVID-19 and this ‘in-between’ state remain a deeply personal as well as professional issue. Many social workers and managers spoke of how the clinical vulnerability of family and friends affected their behaviour – choosing to remain at a distance from colleagues and service users.

My norms have changed and that’s the reality and in a manager’s role, that’s a reality that I’m grappling with. They are conversations that we are having all of the time and re-checking with ourselves.
(Social worker, Knowledge Exchange session).

Having open conversations with families with lived experience about these risks and limitations was regarded as helpful but there was concern about its impact on the quality of relationships.

Our data suggest that social workers are very aware of the sociological and broad socio-political context within which they are working and trying to help families. Their experience shows that the pandemic has made life harder for some families and their needs more complex, with the effects of the withdrawal of universal and early help services that occurred during lockdowns still being acutely felt.

We've seen families being referred to us at a higher level of crisis. Early intervention work would have picked this up at an earlier point, prior to the pandemic, they would have been picked up by midwife, health visitor, where they would have been picked up earlier in a different way.
(Knowledge Exchange session).

During the lockdown periods of the pandemic in 2020 especially, extra financial help and food donations enabled some practitioners to help families quickly. Many families in our 2020 study told us that this meant a huge amount to them and social workers felt strongly that being able to demonstrate 'poverty awareness' (Gupta, 2017a), relieve distress and show generosity helped them to form meaningful relationships and often to do so more quickly. In 2022, with 'the cost of living crisis' caused by huge increases in energy and other costs, increasing numbers of families are struggling. Featherstone, Gupta and Morris (2021) argue that the ways in which growing inequalities have been further exposed by COVID-19 mean that the dominant model of individualised provision through 'child protection' is 'broken beyond repair'. Our data show how not being able to provide meaningful help is causing moral distress and adding to demands on social workers and the stress they experience.

Social work outdoors and mobile practice

The pandemic led practitioners to find other creative ways of connecting with children and families. In the 2020 study, a spatial shift was evident, with some practice beneficially moving outside into gardens, parks and walking conversations (Ferguson et al., 2021). Such practices are not entirely new (e.g. Ferguson, 2008), but were further encouraged by pandemic restrictions. The data from 2022 strongly suggest that this shift has been sustained by many social workers:

I think that is my way of practice... I would much rather be outside, somewhere public as opposed to sitting in a bedroom and trying to have a conversation... for some of these children... that is their personal space and it is quite intrusive for us social workers and others to sit in their bedrooms and [ask] loads of questions... I believe the conversation flows much more naturally outside and in kind of much more neutral settings.
(Social worker, Child Protection).

The young person can experience with the worker the mutual enjoyment of the weather and the benefits of being outdoors, or in shopping centres, or such like. Independent Reviewing Officers discussed continuing with outdoor meetings in response to children who choose this over more formal indoor settings. Outdoor meetings involving groups of people also broke through some of the protocols and conventions of office-based meetings. As well as case conference Chairs, some Independent Reviewing Officers adopted such creative approaches. Other participants reflected that they miss this informality, having resumed indoor meetings.

By May 2022, casework in cafes had also returned since society had opened up again – as one social worker put it: *I spend half my life in McDonald's*. Car use is also back and social workers spoke enthusiastically about mobile casework in the car and the benefits of being positioned shoulder-to-shoulder or back-to-front, where the young person can play their choice of music, and other distractions that paradoxically seem to create greater connection between worker and service user. These mobile practices were sometimes seen to enable better conversations and deeper discussions of sensitive subjects, where children and young people often disclosed things they would not elsewhere (see also, Ferguson et al., 2021). As one Knowledge Exchange participant put it: *We found Walk and Talk worked very well with young people, often better than visits to homes*.

However, in some local areas, seeing children outdoors is not counted as a 'statutory visit' because the social worker has not seen the family home and the child's bedroom. This quote illustrates the standardised, depersonalised way in which statutory home visits may be enacted and experienced:

I recently went to see a young girl. Straight away she said 'does this mean that you're going to come and see me every ten days and see my bedroom?' I said no, I asked 'When do you want to see me?' She was gobsmacked. It worries me how prescribed things have become. For teenagers, being able to have conversations over WhatsApp or Teams, I hope those conversations are able to continue. If their siblings or parents were running around [inside the home visit], I wouldn't get the same information out of them.
(Social worker, Knowledge Exchange session).

There was a view that some social workers were misinterpreting Child Protection procedures, relying instead on what they have heard, or what electronic forms ask them about. In one local authority area at least, the procedures do not state that they need to see children's bedrooms on every visit, but at least every six visits. This works out potentially to every 12 weeks, leaving much freedom as to how to spend the other visits and agreeing that with children.

Implications:

- > Two years of social distancing have established new norms of more distanced practice and new 'habits' that assume distance, meaning child protection social work is currently in a state 'in-between' social distancing and closeness. Practitioners mainly described getting close when children initiate tactile play and other forms of holding, making 'responsive care' the dominant approach. Worker-initiated closeness is much less common. This is not sufficient to developing relationship-based practice that keeps as many children as possible safe and is helpful to parents.
- > A 'reset' is needed that clarifies and implements the kinds of relating social workers are expected to perform that takes account of use of the body, all the senses, including touch, and that supports social workers to achieve intimate child protection practice.
- > Some practitioners and managers feel unable to get close to children and families due to the vulnerability of their own family and friends to COVID-19.
- > The ongoing vulnerability of children with special needs and life-limiting illness warrants particular attention.
- > Rather than repetitive monitoring visits, social workers need to be able to work purposefully on change and building family strengths.
- > Seeing children outdoors needs to count as being a statutory visit and outdoor practice maintained and awarded the value it clearly has in practice. Children and young people, operational managers and practitioners need the discretion to creatively decide what setting and through what in-person and digital communication children and families are best worked with at particular times.
- > Social workers are very aware of the broad socio-political context and that the pandemic has made life harder for some families and their needs more complex, with the effects of the withdrawal of universal and early help services during lockdowns being acutely felt. Not being able to provide meaningful help is causing moral distress and adding to demands on social workers and the stress they experience. Our findings support other research (Featherstone, et al., 2021) that shows that system changes need to enable social workers to be able to provide the necessary material support to children and families.

Digital practices

As in so many areas of life, the COVID-19 pandemic catalysed many digital and social work intersections (MacDonald et al., 2022). Prior to the pandemic, digital technologies were already used in social work, for example, to facilitate more flexible social work practice (Jeyasingham 2020), to manage record-keeping and inform decision-making (e.g. Pithouse et al., 2012) and also as a means of enhancing communication, for example, between birth families and adopted children (Greenhow et al., 2017; Simpson 2020). The accelerated development of blended or hybrid social work, using phone, text and video messaging, meeting and visiting, and the sharing of photos and video combined with in-person encounters has, however, been a key pandemic innovation (Cook and Zschomler 2020; Copson et al., 2022; Neil et al., 2020; Pink et al., 2021).

In our 2020 research we observed examples of ‘digital intimacy’ in which meaningful digital encounters were part of developing and sustaining relationships between social workers and family members alongside in-person connections (Pink et al., 2021). Of particular value was hybrid social work that combined the use of phone, text and video film sharing, video call meetings with service users (‘virtual home visits’) meeting and visiting, and in-person encounters. Even when infants and older children had to remain physically unheld due to social distancing, through the totality of this hybrid work they could be held emotionally – in mind – in therapeutic ways. The same applied to some parents (Ferguson, et al., 2021).

In 2022, informants reported much less digital casework happening in our four sites. Instances included meetings with foster carers of children placed long distances away from the local authority or trust area. Some use of digital connectivity in making kinship assessments, and some family time meetings between parents and children in care. But there was now general scepticism and some outright dismissal of the use of communication technology in casework, key concerns being the limitation or elimination of sensory experience from the interaction and what may be seen or unseen through the camera lens and frame of the screen:

[I] can't believe we did that [rely so much on video calls in lockdowns] it just seems bizarre now. ... recently I have had a couple of cases where home conditions have been so poor, and like going into a home ... knelt on the carpet and there has been dog urine or somebody's urine sort of seeped into my jeans ... I was recovering from Covid so I couldn't smell anything, but my colleague said that it smelt awful in there ... thinking about those visits to gather evidence in really serious cases ... it is sometimes really difficult to get a real sense of what is going on in the home even if you're going in in person ... so I just can't believe that we were doing that on video at one point.
(Social Worker, Child Protection).

Issues of permissions, data security and legal restrictions on the use of some digital platforms by children result in different approaches in different areas. One social worker expressed this as a concern that:

Now that we have a virtual world, local authorities may try and be very prescriptive around how we work. But what we're hearing is that people need freedom to deliver effective support.

For instance, WhatsApp requires a minimum user age of 16. One of the research sites allowed its use during 2020 but by 2022 had prohibited it; another site had never permitted it, ever. The legal limitations of the platforms were not fully understood by some interviewees:

They haven't sorted out the WhatsApp. I think they are worried that it has got some link to Facebook.
(Team manager, Child Protection)

The restrictions limit digital connectivity in practice:

Some of my kids have had Covid, one ... has been isolating, and I offered him a video call and he said, 'yes, I will do a WhatsApp call'. We still don't have WhatsApp, even now. So ... he is like, 'well I am not going to download Teams', and we're not allowed to use Zoom ... I think he just didn't reply.
(Social worker, working with teenagers)

In contrast, others described benefits to using digital technology to engage with young people on their own terms. For instance, it has felt empowering that young people are able to tell if a message has been read:

When it comes to WhatsApp, we have a strengths-based approach in our local authority. It was wonderful to be able to move to WhatsApp and texting as a Chair. WhatsApp tells them whether their message has been seen and heard. That was really meaningful to them.
(Child protection social worker)

Another Knowledge Exchange participant / practitioner commented:

Long before the pandemic I used tech to speak to families and young people in particular. It's less confrontational for them. They can think about their reply before sending it. They don't want to have a conversation in person, but they're quite happy to respond by text. It takes some of the anxiety away for them.

Some participants spoke of a generational divide in the workforce:

Most of my colleagues, God love them, are 15 - 20 years older than me and they will hear the word TikTok and think it is like an immediate safeguarding thing.

Implications:

- > The use of digital technology in social work with children and families is also now caught in an 'in-between' state. There is much more scepticism about its value compared to wholesale in-person relating that there was during 2020 lockdowns. Yet we found evidence that 'digital casework' in terms of blended or hybrid social work, using phone, text and video messaging, meeting and visiting, and the sharing of photos and video combined with in-person encounters remains high for some young people and families. Overall, however, the capacity of digital platforms and hybrid working to contribute to child protection work has declined and is in danger of getting lost. It needs to be reinvigorated.
- > There is organisational ignorance about the nature of digital platforms – in terms of privacy, for instance – and inconsistency in their use and non-use across the country and at local levels from worker to worker. This partly reflects a generational divide in the workforce, but needs to be corrected through a national training programme for all staff, building on existing initiatives (e.g. BASW 2021; Research in Practice 2021). There is an urgent need to build on the significant bodies of work on digital practice developed prior to and especially since the pandemic and to learn from the ways in which researchers and practice experts are developing frameworks to help social workers navigate the safe, ethical use of digital communication technology (see, for instance, MacDonald et al., 2022, Megele, 2018, Neil and Manning, 2020 and Research in Practice et al., 2021).
- > Online contact means it may be easier to meet in the evening for working fathers and mothers, and young people who prefer to be contacted at that time.
- > Due to its accelerated use during the pandemic, young people's lives and relationships are more mediated by digital culture than ever. The concept and benefits of 'digital intimacy' (Pink et al., 2021) need to be widely understood and applied in practice, while being sensitive to peoples' choices and preferred means of communication. There needs to be a concerted focus on ways of clarifying when children and young people need to be seen in-person, face to face and knowing when connecting through video calling or other digital communication adds value and is safe.

Online interagency working

Online or blended interprofessional meetings became normal practice during the pandemic and, our findings suggest, continue in the late-pandemic period as standard in many local authorities, with some areas investing in sophisticated technical solutions and many places examining how best these may equitably involve family members (see also, Baginsky et al., 2020; Research in Practice 2021). A hybrid approach where the Chair, social workers and parents are in an office (or much less frequently at the family home) while other professionals join online is the preferred approach for many. The distinct improvement in attendance of other professionals online noted in the early days of the pandemic has been sustained in our informants' experience.

Parents' experiences are diverse. For some, meeting virtually may be more viable than trying to get time off work to attend in person, saving time and complexities around childcare arrangements. However, there are issues with parents being able to fully participate in potentially life-changing decision-making on a phone from a workplace or other public spaces. Boundary and confidentiality issues are evident, and managers and workers' perspectives can suggest rather limited empathy and absence of planning and preparation for parents' full participation:

I did have one hilarious review child protection conference, and the dad joined and then halfway through the meeting he started talking to someone else. ... He was doing his shopping. This is completely unacceptable
(Team manager, Child Protection).

From a privacy perspective it was indeed very problematic, but if parents are not properly negotiated with and supported by professionals about how to engage in online meetings in ways that are ethically appropriate, this is equally if not more unacceptable. For some parents joining a meeting from home may feel more manageable than joining a group of professionals in what for them is an unfamiliar, potentially oppressive environment.

Being at home in a setting that they feel okay in, I text them, check that they're okay, for some families that works better, particularly around neuro-diversity
(Case conference Chair, Knowledge Exchange sessions).

Without careful planning and in the face of conflict or upset it may be easier for people to withdraw online and harder for practitioners to support parents in and around difficult conversations.

We are not able to comfort someone when they are starting to get upset, give someone a break, for example taking them out of the room and going for a quick walk. We are leaving distressed parents with children in the house, there is no space between going to the meeting and taking the bus and arriving home to the family.
(Social worker, Knowledge Exchange session).

Reflections on logistical issues provide valuable insights into designing and running hybrid meetings. An example was given of a parent attending a hybrid meeting in an office setting and being faced with a police officer with whom they had had a difficult confrontation on another occasion who was now looming over them on a large screen. Planning and preparation need to respond to the needs of people with particular sensory needs, and to the role of sign language interpreters and other language interpreters. Chairing skills for hybrid conferences need development to ensure meaningful participation for parents in emotionally fraught situations and support to parents from somebody with whom they are familiar (see also, Baginsky et al. 2020). To respond to the specific needs of the young people, some Chairs and Independent Reviewing Officers have creatively conducted outdoor meetings.

As other research and practice intelligence makes clear, it is essential that the development of ‘poverty aware practice’ (Gupta 2017a and b; Morris et al., 2018) includes practical thinking and supportive action in relation to digital inequalities. This includes practical issues of ‘digital resources’ – hardware, software, mobile data, etc; and also ‘digital capacity’ – skills, knowledge and confidence to participate digitally (MacDonald et al., 2022). We have seen how the use of the blanket term ‘non engagement’ may mask a multitude of issues impeding parents’ involvement in decision-making (Taggart, Mason and Webb 2020). We cannot allow the worst elements of how the child and family social work system responds to parental pressures to be transposed into digital engagement. Some participants felt that connecting virtually meant that the way they delivered services had become ‘more human’. However, others felt that they were unable to read body language and make eye contact as effectively. Safeguarding oversight had changed and was sometimes perceived as less rigorous, though they were often in contact with families more often.

The impact of other pandemic-related factors, including increased caseloads (which may in part be due to social worker reluctance to step-down cases and court delays, rather than increased referrals), insufficient suitable accommodation for children in care, and an apparent worsening of children and young people’s mental health also increase existing safeguarding pressures (ACDS 2021; Ofsted 2022).

Implications:

- > The benefits of online multi-agency working need to be maintained while ensuring that the needs of parents, children and young people are prioritised. This may often mean support in-person in an office or home environment as part of a hybrid approach where many professionals call in online.
- > Social workers, conference Chairs and others need professional autonomy to engage with individual families to make decisions about the format of meetings.

Preparation should include a conversation between the Chair and the family members involved to explore their preferences and how these may be met and any practical issues that may limit their involvement. Some Chairs and Independent Reviewing Officers have conducted outdoor meetings to respond to the specific needs of the young people and this kind of creative practice should be encouraged.

- > It is vital that the gravity of decisions and commitments made in online forums is not lost on parents or other family members, in online family group decision-making, for instance.
- > Chairing skills for hybrid conferences need development to ensure meaningful participation for parents in emotionally fraught situations and support to parents from somebody with whom they are familiar.
- > As has been advocated by families for many years, services need to provide a more flexible service that does not revolve around 9-5 appointments and remote working offers a real opportunity to facilitate this shift and provide a more flexible approach while also respecting staff need.
- > Planning and preparation need to respond to the needs of people with particular sensory needs, and to the role of sign language interpreters and other language interpreters.

Staff wellbeing, organisations and supportive ways of working

The significance of organisational practices in shaping social work practice and social workers' experience of work was recognised long before the pandemic, and various studies explored the use of office space and the impact of forms of 'agile' working that exploit the capacity of digital technologies to enable work from home and other locations beyond offices (e.g. Halford 2004; Forrester et al., 2013; Jeyasingham 2020; Antonopoulou et al., 2017 Ferguson et al., 2020).

Our 2020 study highlighted the ways COVID-19 accelerated such tendencies, requiring a rapid shift towards widespread working from home (Pink et al., 2021). It also described how responses to the specific risks posed by COVID-19 differed across local authority areas, which interacted with existing organisational differences to produce localised cultures of safety and risk-taking and different practices relating to home/office working, the use of digital technology to support casework and home visiting, and the use of PPE (Ferguson et al., 2020).

Baginsky and Manthorpe (2020: 5) in their rapid review of early lockdown arrangements on children's social care also noted varied working arrangements, suggesting that while most of the participating 15 local authorities kept some office space open, and some enabled individuals to 'opt into' office working or encouraged particular teams to work from the office, the proportion of social workers who were working from home was reported in May-June 2020 to range from 80 to 100%. Kelly et al., (2021), reporting the findings of a Department for Education-funded Partners in Practice project from the same year, found a lack of consensus between local authorities about the best way to plan for the future in terms of enabling office or home working, in part due to concerns about the impact on workforce wellbeing. Cook et al. (2020), for example, found that, despite attempts to exploit digital technology to connect child and family social work teams, remote working presents challenges for sustaining the team as a 'secure base'. BASW (2021) also found that 68.3% of surveyed social workers suggested it was more difficult working at home than in the office. This is concerning given this survey and other research suggests that social worker wellbeing has been negatively impacted by the pandemic, particularly over time (Johnson et al., 2020; Ravalier et al., 2022).

For our participants in 2022, different arrangements for working from home and attendance at the office were in place in different localities. However, a common finding was that social workers were expected to be in the office for a minimum of a day a week and often more to perform certain tasks, particularly to 'do duty' (i.e. deal with child protection enquiries) on a rota basis. Many expressed a preference for working in the office and some organisations are insisting on it. Social distancing in some offices still limits desk space and creates the need for working from home on some days. Most value flexibility and the choice to work from home. At the same time, the emotional labour of doing child protection work from home raises significant challenges.

Some social workers described unsettling encounters that now took place in their normally private space:

I struggled with my emotional wellbeing because I live on my own, work on my own. People were shouting at me down the phone in my own house. When you're in the office colleagues are there for you. When I was working from home, I was really struggling with that.

(Social worker, Knowledge Exchange session).

In recognition of the intrusion into private space experienced by some of her team, one team manager explained she bought them candles to change the aroma in their homes after finishing working. This was intended to help create a boundary between their working and home life.

Some managers find working from home a productive experience because there is less distraction and fewer interruptions when they are not in the office and are physically separate from staff.

I Chair a national group and what we found is that we are meeting far more frequently with a lot more emphasis being given to wellbeing issues and needs and this continues. Although a lot of us are very tired as we tend to really pack things in.

(Senior manager, Knowledge Exchange session).

Conversely, more junior social workers in the Knowledge Exchange sessions expressed concern about greater difficulty accessing managers when away from the office.

Flexible supervision formats are valued when social workers feel their needs are being considered and where the location of supervision is negotiable. Some managers noted the ease of virtual check-ins and how difficult conversations with staff could be made a little bit easier online.

I've offered supervision online and face-to-face – actually I've found that difficult conversations can sometimes almost be easier virtually... I supervise a team and some people opt to come to the office but many don't. I've done return to work, sickness, management and disciplinary procedures and they have all worked well. That's from my point of view but the feedback I've had is that it has been useful.

(Manager, Knowledge Exchange session).

The pandemic and research have also rendered visible the benefits of coming together in the office that include: physical connection, reflective learning, emotional sustenance and impromptu interactions about children and families (see also, Baginsky and Manthorpe 2020; Cook et al., 2020; Kelly et al., 2021). Physical proximity enables in-person emotional support after difficult encounters and the journey between the office and home can provide valuable thinking time and space for processing feelings and experiences. Co-presence in offices is particularly important for learning from peers and more experienced colleagues; our informants expressed particular concern about the unmet needs and disrupted professional development of Newly Qualified Social Workers (NQSW) and those in the Assessed and Supported Year in Employment (ASYE) who had no prior experience of what it feels like to work in a team environment pre-pandemic. As a social worker reflected on their past NQSW experience:

Sometimes we don't know what we're not learning. There is a learning by osmosis. One of the best learning I ever had was over-hearing a difficult conversation.

(Social worker, Knowledge Exchange session).

Sometimes you just want to get down and focus on something, but sometimes you just want to have a conversation with a colleague. That human contact is so important. Working from home isn't ideal in our role, it's not good for our mental health. There are some colleagues who do struggle with that.

(Social worker, Knowledge Exchange session).

As Baginsky and Manthorpe (2020, 7) note, during the pandemic early career workers may also have experienced some of the least favourable home working conditions, in terms of a suitable space to work. Such considerations led some local authorities to prioritise early career workers' access to offices (Kelly et al., 2021). For some colleagues, however, returning to the office may present new challenges. One example was a social worker who had adjusted well to working from home and found the return to the office very difficult because of the noise and movement that routinely occurs in any office.

As someone with a neuro-diversity I appreciated opportunities to be in the office during lockdowns when it was quiet, however now offices are busier, it's a struggle due to sensory overload. Two years mainly working from home and regular changes of the 'rules' has reduced resilience & coping strategies.

(Social worker, Knowledge Exchange session).

Staff moves and turnover

We were struck by the changes in the lives of the interviewees in the follow-up study in 2022. More than half of these had changed their job role at least once since the original fieldwork period (April–December 2020). Some had moved to the private or voluntary sector, others into managerial roles or changed team. Around a third had left child protection social work, which is in line with national workforce statistics that indicate significant retention problems (Department for Education, 2022), and findings from Ofsted inspections of ‘significant challenges for the workers who remain in the sector’ (Ofsted 2022). Many social workers who changed roles said that the pandemic and associated disruption of services had made the lives of the children and families they support harder, made their jobs harder and made their personal lives harder.

The social impact of the pandemic and the political climate on impoverished families as well as the current wave of public and professional anxiety in relation to high profile child deaths (Child Safeguarding Practice Review Panel, 2022) was seen to have increased social workers’ workloads, stress levels and retention issues. Timescales, managerial pressure and concern about the difficult times ahead for families weighed heavily. Some said they had become burnt out and some feared for their future.

There is a capacity issue that people are ignoring at the moment, but people want to feel that their workload is manageable and that they are safe. We are not realising yet the magnitude of the challenge that we will be facing over the next year or so.

(Senior social worker, Knowledge Exchange session).

Those who left for new jobs in the voluntary and private sectors often chose roles focused on supporting children and / or foster carers rather than birth families. For their own wellbeing and that of their loved ones they were glad to have made the move.

I just feel so less stressed, like before I left I was off for ... months with anxiety ... and before I went off I literally had ... a sty in my eye every week from like being run down and stressed and I thought just last week I haven’t had a sty since I started this job.

(Social worker, previously long-term Child Protection, now working for an independent fostering company).

Sharing the ‘risk’ throughout the organisation was regarded as very important and for social workers to feel supported and ‘held’ is key, enabling trust between them and senior managers. Sometimes the pressures of managing risk are passed down the hierarchy, which isn’t good for frontline workers and team managers or the children and families they work with.

However, some managers were successful in retaining staff and team morale. Knowing they were ‘making a difference’ to children and families’ lives and valuing personal competencies were key motivators for staff staying. Active appreciation by managers and hands-on activities were seen as key.

I have had the same team now for two years, so it is really nice, unusual in a front-line ... team to sustain the whole team for that period of time. ... My team look forward to our office weeks, really enjoy them. So Monday is our office week. We have got team lunch booked Monday... We have got some games in the week booked while they are on duty and stuff, so in terms of team morale it is very, very high at the moment.
(Team Manager, Child Protection).

Simple gestures can be overlooked. A simple thank you can make a big difference.
(Team Manager, Knowledge Exchange session).

There is learning to be gained from those places and organisations who have managed to hold on to their staff, both in the sense that they haven’t quit or moved jobs and in how they feel emotionally ‘held’ and taken care of in terms of wellbeing, workloads, training and development by the organisation.

Implications:

- > Managers and leaders need to fully recognise the lived experience of how difficult Child Protection work is and the stresses and physical and psychological strain it frequently causes. The isolation created by COVID-19 increased stress levels and the legacy of that is being felt in some social workers becoming burnt out, changing jobs or leaving the profession.
- > Social workers need in-depth in-person support from managers and peers that can only be provided by going into the office, while having some freedom and autonomy to choose to work from home some of the time and for online supervision.
- > Some local authorities have reduced their desk space significantly, making it difficult for teams to come back together. Ways need to be found to reverse or at least compensate for this.
- > Organisationally, the work can be made less stressful, more bearable and satisfying by reducing bureaucracy and / or providing administrative support to complete such tasks.
- > The impact of new forms of practice, including digital practices, on overall workloads needs to be monitored and managed appropriately.
- > Learning needs to occur from those individuals, leadership teams, places and organisations who have managed to hold on to their staff and keep them well. Key to this is managers building team cultures that are collegial, that incorporate team days out, lunches, games and other fun, and social workers receiving day-to-day support that enables them to feel emotionally taken care of in terms of their wellbeing, workloads, in the sharing of risk, and through training and development by the organisation.



References

ACDS (2021) https://adcs.org.uk/assets/documentation//ADCS_Safeguarding_Pressures_Phase7_FINAL.pdf

Antonopoulou, V., Killian, M., & Forrester, D. (2017). Levels of stress and anxiety in child and family social work: Workers' perceptions of organizational structure, professional support and workplace opportunities in children's services in the UK. *Children and Youth Services Review*, (76), 42–50. <https://doi.org/10.1016/j.childyouth.2017.02.028>

Baeza, S., Butler, S., Smith, S., & McCray, J. (2019). Trampolines and minefields: The use of touch during home-based child protection visits in England. *Practice*, 31(3), 187–203. <https://doi.org/10.1080/09503153.2018.1478954>

Baginsky, M., & Manthorpe, J. (2020). *Managing through COVID-19: the experiences of children's social care in 15 English local authorities*. NIHR Policy Research Unit in Health and Social Care Workforce, The Policy Institute, King's College London.

Baginsky, M., Eyre, J., & Roe, A. (2020). *Child protection conference practice during COVID-19. Reflections and experiences* (rapid consultation September–October 2020). Nuffield Family Justice Observatory.

British Association of Social Work (BASW) (2021). *Social work during the COVID-19 pandemic: Initial findings*. <https://www.basw.co.uk/resources/social-work-during-covid-19-pandemic-initial-findings>

Child Safeguarding Practice Review Panel (2022). *National review into the murders of Arthur Labinjo-Hughes and Star Hobson*. Department for Education. <https://www.gov.uk/government/publications/childrens-social-care-2022-recovering-from-the-covid-19-pandemic>

Cook, L.L., & Zschomler, D. (2020). Virtual home visits during the COVID-19 pandemic: Social workers' perspectives. *Practice*, 32(5): 401–408.

Cook, L.L., Zschomler, D., Biggart, L., et al. (2020). The team as a secure base revisited: Remote working and resilience among child and family social workers during covid-19. *Journal of Children's Services*, 15(4): 259–266.

Copson, R., Murphy, A. M., Cook, L., Neil, E., & Sorensen, P. (2022). Relationship-based practice and digital technology in child and family social work: Learning from practice during the COVID-19 pandemic. *Developmental Child Welfare*, 4(1), 3–19. <https://doi.org/10.1177/25161032221079325>

Department for Education (2022). *Statistics: children's social work workforce*. www.gov.uk/government/collections/statistics-childrens-social-care-workforce

Featherstone, B., Gupta, A., & Morris, K. (2021). Post-pandemic: moving on from 'child protection'. *Critical and Radical Social Work*, 9(2), 151-165. Retrieved 8 August, 2022. <https://bristoluniversitypressdigital.com/view/journals/crsw/9/2/article-p151.xml>

Ferguson, H. (2008). Liquid Social Work: Welfare Interventions as Mobile Practices. *The British Journal of Social Work*, 38(3), 561-579. <https://doi.org/10.1093/bjsw/bcl367>

Ferguson, H. (2011). *Child Protection Practice*, Basingstoke: Palgrave Macmillan.

Ferguson, H. (2016). What social workers do in performing child protection work: Evidence from research into face-to-face practice. *Child and Family Social Work*, 21(3), 283-294. <https://doi.org/10.1111/cfs.12142>

Ferguson, H. (2017). How children become invisible in child protection work: Evidence from day-to-day social work practice. *British Journal of Social Work*, 47, 1007-1023.

Ferguson, H., Warwick, L., Cooner, T. S., Leigh, J., Beddoe, L., Disnet, T., & Plumridge, G. (2020). The nature and culture of social work with children and families in long-term casework: Findings from a qualitative longitudinal study. *Child & Family Social Work*, 25, 694-703.

Ferguson, H., Kelly, L., & Pink, S. (2021). Social work and child protection for a post-pandemic world: the re-making of practice during COVID-19 and its renewal beyond it. *Journal of Social Work Practice*, 36(1), 5-24. <https://doi.org/10.1080/02650533.2021.1922368>

Ferguson, H., Pink, S., & Kelly, L. (2022). The Unheld Child: Social Work, Social Distancing and the Possibilities and Limits to Child Protection during the COVID-19 Pandemic. *British Journal of Social Work*, 52(4), 2403-2421.

Forrester, D., Westlake, D., McCann, M., Thurnham, A., Shefer, G., Glynn, G., & Killian, M. (2013). *Reclaiming social work? An evaluation of systemic units as an approach to delivering children's services. Report of a comparative study of practice and the factors shaping it in three local authorities*. University of Bedfordshire.

Forrester, D., Westlake, D., Killian, M., Antonopolou, V., McCann, M., Thurnham, A., Thomas, R., Waits, C., Whittaker, C., & Hutchison, D. (2019). What is the relationship between worker skills and outcomes for families in child and family social work? *British Journal of Social Work*, 49(8), 2148-2167. <https://doi.org/10.1093/bjsw/bcy126>

Green, L., & Moran, L. (2021). 'Covid-19, social distancing and the 'scientisation' of touch: Exploring the changing social and emotional contexts of touch and their implications for social work'. *Qualitative Social Work*, 20(1-2), 171-78.

Greenhow S., Hackett S., Jones C., & Meins, E. (2017). 'Adoptive family experiences of post adoption contact in an Internet era'. *Child & Family Social Work*, 22, 44-52.

Gupta, A. (2017a). 'Poverty and child neglect - the elephant in the room?' *Families, Relationships and Societies*, 6(1), 21-36.

Gupta, A. (2017b). 'Learning from Others: An autoethnographic exploration of children and families social work, poverty and the capability approach'. *Qualitative Social Work*, 16(4), 449-464.

Halford, S. (2004). 'Towards a Sociology of Organizational Space.' *Sociological Research Online*, 9(1), 13-28. <https://doi.org/10.5153/sro.885>

Jeyasingham, D. (2020). Entanglements with offices, information systems, laptops and phones: How agile working is influencing social workers' interactions with each other and with families. *Qualitative Social Work*, 19(3), 337-358.
<https://doi.org/10.1177/1473325020911697>

Johnson, C., Coburn, S., Sanders-Early, A., Felton, J., Winterbotham, M., McLaughlin, H., Pollock, S., Scholar, H., & McCaughan, S. (2020). *Longitudinal study of local authority child and family social workers*. Department for Education. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/906778/Longitudinal_study_of_local_authority_child_and_family_social_workers_Wave_2.pdf

Kelly, L., Ferguson, H., Campbell, M., and Breyer, R. (2021). *Social Work in a Pandemic: A Department for Education Partners in Practice report*. Essex County Council: Chelmsford. Essex County Council.

Kong, S.-T., Noone, C., & Shears, J. (2021). 'Social workers' sensual bodies during COVID-19: The suspended, displaced and reconstituted body in social work practice'. *British Journal of Social Work*, 52(5), 2834-2853. <https://doi.org/10.1093/bjsw/bcab207>

MacDonald, M., Conley Wright, A., Taylor-Beswick, A., Gillespie, K., & Collings, S. (2022). Digital Relationality, Rights, Resilience: Conceptualising a Digital Social Ecology for Children's Birth Family Relationships When in Care or Adopted. *British Journal of Social Work*. bcac140, <https://doi.org/10.1093/bjsw/bcac140>

Megele, C. (2018). Social media, digital professionalism and CPD: Strategic Briefing (2018). Dartington: Research in Practice. www.researchinpractice.org.uk/children/publications/2018/december/social-media-digital-professionalism-and-cpd-strategic-briefing-2018

Morris, K., Mason, W., Bywaters, P., Featherstone, B., Daniel, B., Brady, G., Bunting, L., Hooper, J., Mirza, N., Scourfield, J., & Webb, C. (2018). 'Social work, poverty and child welfare interventions'. *Child and Family Social Work*, 23(3), 364-372.

Neil, B. and Manning, C. (2020). Digital family contact time: sharing and building knowledge. Dartington: Research in Practice. www.researchinpractice.org.uk/all/content-pages/videos/digital-family-contact-time-sharing-and-building-knowledge

Neil, E., Copson, R., & Sorenson, P. (2020). *Contact during lockdown: How are children and their birth families keeping in touch?* Nuffield Family Justice Observatory. www.nuffieldfjo.org.uk/wp-content/uploads/2021/05/nfjo_contact_lockdown_rapid_research_main_report_revised_20200522.pdf

Ofsted (2022). www.gov.uk/government/publications/childrens-social-care-2022-recovering-from-the-covid-19-pandemic

Pink, S., Ferguson, H., & Kelly, L. (2021). Digital social work: Conceptualising a hybrid anticipatory practice. *Qualitative Social Work*, 21(2), 413–430.

Pithouse, A., Broadhurst, K., Hall, C., Peckover, S., Wastell, D., & White, S. (2012). Trust, risk and the (mis)management of contingency and discretion through new information technologies in children's services. *Journal of Social Work*, 12(2), 158–178.

Ravalier, J., McFadden, P., Gillen, P., Mallett, J., Nicholl, P., Neill, R., Manthorpe, J., Moriarty, J., Schroder, H., & Curry, D. (2022). Working conditions and well-being in UK social care and social work during COVID-19. *Journal of Social Work*.
<https://doi.org/10.1177/14680173221109483>

Research in Practice, London Innovation and Improvement Alliance, Association of London Directors of Children's Services and North West Association of Directors of Children's Services. (2021). *Choosing Digital*. Dartington: Research in Practice.
<https://choosingdigital.researchinpractice.org.uk>

Ruch, G., Winter, K., Cree, V., Hallett, S., & Hadfield, M. (2017). Making meaningful connections: Using insights from social pedagogy in statutory child and family social work practice. *Child and Family Social Work*, 22(2), 1015–1023.

Simpson J. E. (2020). 'Twenty-first century contact: The use of mobile communication devices and the internet by young people in care'. *Adoption & Fostering*, 44(1), 6–19.

Taggart, D., Mason, C., & Webb, S. (2020). *Reconceptualising parental non-engagement in child protection: Frontline Briefing (2020)*. Research in Practice.

Winter, K., Cree, V., Hallett, S., Hadfield, M., Ruch, G., Morrison, F. and Holland, S. (2017). 'Exploring communication between social workers, children and young people'. *British Journal of Social Work*, 47(5), 1427–44.

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With grateful thanks to:
Susannah Bowyer and
Dyfrig Williams

Research in Practice is a programme of
The Dartington Hall Trust which is a company
limited by guarantee and a registered charity.
Company No. 1485560 Charity No. 279756 VAT No.
402196875

Registered Office:
The Elmhirst Centre, Dartington Hall, Totnes TQ9 6EL

ISBN 978-1-915669-14-8

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