Outcomes in practice:

A report on focus groups with social work practitioners, seniors and managers in North Lanarkshire

November 2008
Foreword

North Lanarkshire Council social work department moved towards outcomes focused assessment for individuals and families during 2007, following reflective practice development days for staff. A year following this development, there was interest within North Lanarkshire in finding out more from practitioners and managers about what was working and what more needed to be done to support the focus on outcomes in practice. Although the original staff group involved social work only, the next phase, which will follow early in 2009, will include joint development days for health and social work staff. There was therefore an additional imperative for finding out how to support new staff to come on board. From the perspective of the Joint Improvement Team, responsible at a national level for developing the UDSET approach (which also focuses on service user and carer outcomes), there was interest in learning the lessons from North Lanarkshire and sharing these with a wider constituency.

With these agendas in mind, we jointly hosted three focus groups over two days in September 2008. We weren’t sure what to expect from the discussions, whether people would have much to say on the subject or how positive or otherwise the feedback might be. In practice, the participants in all three focus groups were powerful informants, requiring very little encouragement to engage in the topic. We both thoroughly enjoyed the discussions across the three groups, because of the general enthusiasm for outcomes and the shared insights into how outcomes had influenced practice. Additionally, while there were concerns and doubts about progressing the approach, there were also a variety of suggestions and ideas about how barriers could be overcome.

We hope that those who participated feel that this report adequately portrays the views expressed. We also hope that the report can support both the continuing focus on outcomes in North Lanarkshire, and other partnerships interested in developing outcomes in practice.

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Introduction

There is increasing emphasis in recent policy developments in Scotland on the outcomes delivered by public services. The theme of outcomes is central to the Concordat between the Scottish government and local authorities, which in 2007 set out the terms of a new relationship between central and local government based on mutual respect and partnership. A key aspect of this was represented by the Single Outcome Agreement (SOA) between each council and the Scottish government, based on 15 national outcomes which contribute to the Government’s strategic objectives (Wealthier and Fairer, Smarter, Healthier, Safer and Stronger, Greener). Councils are committed to supporting progress at national level by seeking local improvement on these outcomes.

Along with the focus on outcomes there is an associated emphasis on developing services which are person-centred, as set out in Changing Lives, the twenty first century review of social services in Scotland. It is acknowledged in Changing Lives that the goal of personalisation may pose a particular challenge for social work, given the need both to manage growing demand and complexity as well as the requirement to protect the public by taking measures to control some people’s liberty. The review concludes that to be effective in meeting that challenge, social work services need to engage directly with individuals, families and communities as well as to work in new ways with other parts of the public sector, focusing increasingly on prevention.

Within North Lanarkshire, which represents the fourth largest local authority in Scotland, there has been a move towards focusing on outcomes in social services for some time, predating both the Concordat and Changing Lives by several years. Local planning processes have therefore been able to accommodate these national developments as they have emerged.
Background

The start of the journey towards outcomes in social services in North Lanarkshire began several years ago. A key development in initiating the shift was the review of assessment and care management, initially undertaken in 2003, with a view to making improvements and developments to reflect national and local objectives in the modernisation of Social Work Services (Community Care, Children and Families and Justice). Having reviewed the experience of other local authorities, it was acknowledged and recorded at the outset that a full review could take several years. In 2004 a critical path was developed to review existing relevant business and practice. This involved, amongst other things, a literature review, an audit of financial and budgeting issues, a mapping of the relationship between assessment and care management and person centred planning, definitions of key values and principles and consultation with staff.

The review was completed in 2006 and resulted in new guidance on assessment, planning and recording, and identified development events for staff. During 2007 all social work staff attended Assessment, Planning and Recording Practice Development and Reflective Practice days, where staff were issued with the relevant guidance. The events were deliberately designed to allow for personal reflection, with reading time and individual exercises being part of the delivery methods. Initially, staff from one locality, Coatbridge, attended the first block of development days. Feedback from this indicated that staff were very positive about the experience, that they enjoyed the learning opportunities through involvement of a mix of staff from different care groups and that they appreciated the involvement of senior managers. At the suggestion of these staff, the events were subsequently extended from a three day block to include a follow up day. Given the numbers of staff involved in the locality, the events had to be run a total of fourteen times, involving a total of 530 staff. The objectives of the days were to familiarise staff with the assessment, planning, recording and information sharing guidance, Increase understanding of the “Guide to Social Work Services” and the “Prioritisation Framework”, provide an opportunity for reflection and create new learning by sharing. The key concepts/messages of the events were:
Being outcome focused
• Child/children/person centred
• Participation and involvement
• Strengths, capacity and risk

The key concepts were set in a policy, legislative, and procedural framework that reflected both a national and organisational perspective.

Focus groups – methods

Since the reflective practice days concluded in North Lanarkshire, outcomes focused assessment and planning tools are being developed across social work services, with both tools now built into the IT system. One year after the development events concluded, the view amongst management locally was that it would be useful to take stock of progress to date, and to identify where further effort should be focused to continue to develop the focus on outcomes.

At the same time, work was continuing to develop at a national level around outcomes focused assessment, care planning and review. North Lanarkshire has also been contributing to and informing this national development. There was therefore an interest at a national level in testing out the progress of outcomes focused assessment within North Lanarkshire, which had the potential to inform similar developments elsewhere. It was agreed that it would be useful to conduct focus groups with practitioners, senior social workers and managers at this stage, to obtain a range of views around the supports and barriers to focusing on outcomes.

Three focus groups were jointly conducted over two days within North Lanarkshire, by a researcher working with the Joint Improvement Team of the Scottish Government and a local community social work manager, who had played a key role in the review process and development of the guidance as well as developing and delivering the events locally. Teams across the authority were asked to nominate a practitioner and senior social worker to participate in the focus groups. While it is possible that participants were self-selecting, with a tendency for those more committed to outcomes being more likely to attend, participants also represented the range of care groups and localities within North Lanarkshire. The groups
included eight practitioners, five seniors and nine managers. Each focus group lasted between sixty and ninety minutes and was conducted with minimal facilitation. Questions asked were about the extent to which practice has shifted to focusing on outcomes, and around barriers and supports to further developing this. The discussions were recorded and subsequently transcribed, with written notes taken contemporaneously as backup. The notes of the focus groups were analysed under key themes, some of which were anticipated prior to the focus groups taking place, and some of which emerged from the data.

**Findings**

The following is an account of the combined findings of the three focus groups, organised under a series of headings which identify both the impact of the outcomes focus so far, and a range of issues which were raised by staff and managers relating to sustaining and building on the momentum that has been built.

**Development events (Reflective practice) and their impact**

Each focus group either began by discussing the development events or moved very quickly to talking about it. It was identified by participants in each of the three focus groups the reflective practice days had a significant impact on staff, in providing an opportunity to reflect on their professional values, and to begin the shift in thinking towards outcomes. One senior social worker described it as the ‘springboard’ towards thinking about outcomes. The development events were repeatedly described as having had a ‘positive’ impact:

Senior: Talking about positivity, I think that started with the training, initially three days then the fourth day follow up. I certainly got a lot of positive feedback from staff about that. I felt it myself. ..

Practitioner: I felt the training was absolutely excellent and actually since I’ve qualified it was probably the best that I’ve been on.
The following comment from an occupational therapist identified that focusing on outcomes had been part of her professional training and that she welcomed both the shift towards outcomes and the associated training:

Practitioner: As an OT outcomes was part of my training... we look at goals and steps to achieve these and they are an integral part of the assessment. So it's actually quite good to get back to the outcomes approach. I found the training very refreshing and the approach really positive.

**Culture shift**

One of the themes emphasised by both practitioners and seniors was that focusing on outcomes involved a shift in thinking; the word ‘culture shift’ was used by participants in both groups. The predominant view was that outcomes took them back to aspects of social work practice which they valued but felt had been lost, with several references to the importance staff placed on the relationships they had with service users. For some this was associated with values and principles in their professional training:

Practitioner: I feel as though I'm back to my core values about use of self and thinking about relationships.

The seniors and practitioners thought that the outcomes focus had given them ‘permission’ to practice in a different way and to break away from ‘process and procedure’:

Senior: One thing the outcomes has allowed you to do is if you're asking for authorisation for something, a service or whatever it is, it enables you to make a very clear argument about why it's appropriate and what will be achieved to delivery of that service.

The seniors were particularly critical of the role of care management in placing too much emphasis on services rather than the skills of staff and the role of ‘natural supports’ or families and friends, and working with individuals and families to identify their role:
Senior: If you think about ten or fifteen years ago you were always thinking outside the box because you didn’t have the resources.

There was also a view that the outcomes approach was consistent with new and developing national agendas. One senior social worker identified that making the links for people to national agendas around the Single Outcome Agreement would help, while another referred to *Changing Lives*.

Senior: I think it also ties in with the C21st review because it came at a crucial point when that had said we can’t keep doing things the way we’re doing them... We need to think outside the box. Social workers have primary skills to think outside the box and therefore the assessment and care planning training that came on board just kind of struck the nail at that point.

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*I feel I’m much more analytical and am able to take a step back to say ‘what do we need to do and where do we need to do it?’... I’ll give you an example. A girl I’m working with was going to college and there was an issue with her lack of confidence. So for the weeks running up to her going to college, what I did was I got someone to work with her so that they could support her in travelling in and out of Glasgow with a goal of travelling independently and by the time she was starting college she was able to go to Glasgow herself and her confidence was much improved, so, in some ways in order to achieve the longer term outcome about college I had to support her in the shorter term with an outcome about confidence building... So instead of just thinking about resources like taxis or something I did it in a different kind of way. Practitioner*

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**Clarity of purpose**

One of the themes emphasised most across the three focus groups was that outcomes had provided greater clarity, purpose and ‘ownership’ in working with individuals and families.

Practitioner: The review process is much clearer in what you are reviewing and also you can evidence the steps that you’ve taken through your action plans and your goals or you can say that you’re doing x, y and z and what are the next steps.

Manager: We have a potentially invaluable key in developing the quality of our fieldwork services because if you can come up with focused, clear,
achievable outcomes, you are going to have to really engage with people and you’re going to agree a plan with them as to how these will be achieved. It gives you something you can review and see if it’s still appropriate. It should make for better practice throughout... it helps us with purpose in everything we do.

In the practitioners group several participants commented on how focusing on outcomes can help to define the parameters of involvement, with some very honest reflections on the need for the professional to be able to recognise the appropriate time to disengage.

Practitioner: You set the plans with the people at the beginning and then hopefully you can achieve them, and it’s time for the service user to move on. But you know, this can be bittersweet as well because you get used to working with the service user and that brings job satisfaction as well so moving on can be difficult for workers as well as service users. But I do think it’s much healthier to be outcomes focused and when you should end pieces of work

One manager identified the place of agreeing the outcome plan as being critical in engaging service users, particularly in explicit recording of both agreed and disputed aspects, and in providing a means of negotiating with service users.

Manager: For our teams a lot of what goes wrong with service users is communication and that’s why I’m saying share the assessment, share the plan, have agreed outcomes. It would lead to a lot less complaints and if the complaint comes in it would be clearer in that process what it was about. What is it we’ve not done in that kind of timescale because a lot of the complaints are about drifting on communication.

Importantly for practitioners, the outcomes focus also provided a way of identifying progress against goals. It was identified that even in more crisis-oriented aspects of social work practice, this could still be the case:

Practitioner: There is still a bit of me that feels as though I’m running around like a headless chicken but at the end of the week I suppose because you’ve
broken it down to small more achievable goals, then actually when I get home on a Friday night sometimes I can see what I've achieved.

**Partnership with service users**

There were references in the three groups to improved partnership with service users:

Practitioner: I think that outcomes help you to re-engage with people and even though you may have a vision in your head it’s actually about the vision that that person has

One of the managers identified that part of the shift involved supporting families to identify solutions rather than necessarily the worker coming up with the answers. For the following senior, the outcomes focus was simply a way or reminding staff that individuals have similar goals whether they are in a service user or staff role:

Senior: I feel the outcomes approach is a shift in attitude and all the rest of it, but it reminds social workers that actually the people they are providing a service to are people just like them. They are not a different species or anything like that and some people need to be reminded of that. Actually their wished outcome will be no different from yours or mine and that sounds dead basic but I think maybe that’s what’s helped. It’s only a word, outcome, after all.

All three groups spoke about working backwards from identifying an outcome. As one manager explained, this means identifying the outcome with the person and then thinking about delivery and planning and what underpins that.

Manager: Now we’re actually saying ‘What’s the outcome you’re aiming for,’ and work back from there.

*We were trying to organise a holiday for a young man with severe physical disabilities. He didn’t want respite but did need a lot of support and his family were worried about his safety at night. He needed his specialised bed and other equipment that he required. Then the family had come up with the solution of hiring a van to take all the stuff with them, and that made us start to think about it a different way. It’s about listening to families and supporting families to resolve situations.* Manager
Challenges and strategies

Various levels of understanding

While there were many positive views expressed in each group about the role of outcomes in supporting good practice, it was also evident that this shift had not occurred across the board. In the main, seniors talked more about the mixed response of staff than managers did. Although seniors identified that they had noted a difference in staff overall, including some staff talking about outcomes in supervision, they also identified a ‘mixed response’ amongst staff.

Senior: Some staff will grasp it much quicker than other staff. I think some staff are still struggling with the whole concept of ‘what is an outcome?’

There were different views amongst seniors as to what made it easier for some staff to grasp the outcomes approach. While there was a view that it was easier for qualified staff to adapt, others had a different view:

Senior: I don’t think it’s to do with the qualifications. I think a lot of it is to do with value base and attitude.

One manager described how when it comes to the bit in the assessment where outcomes are identified, some practitioners are recording outcomes at the very high level, such as feeling safe and well. This was also identified as an issue by one of the seniors:

Senior: People’s outcomes can be quite general sometimes... you could have the same five outcomes for every child in the authority. You’d want them to be happy, safe, healthy and all that type of stuff but it’s pretty meaningless when it’s the same for everybody. It has to be narrowed down a little bit.

Another senior social worker identified that some practitioners are still confused about the differences between inputs, outputs and outcomes, and might for example identify day care as an outcome. One of the managers identified that there was still work to do in fine-tuning the approach:
Manager: In terms of the quality of work in setting outcomes with users and carers, the detailing, the timescales for instance, hasn’t been apparent in every case and people still haven’t developed the skill, familiarity, the mindset in negotiating with service users about realistic, reviewable, achievable outcomes. .. that allows them to use it at its best

Variations across care groups/teams

Participants within each focus group were clear that the outcomes approach fitted more easily with some teams than with others, although there were some variations in opinion around this. In particular, there was a view that reception services are more resource and input focused and therefore that there was more of a challenge to shift towards outcomes, particularly as the relationship with the client would by definition be short-lived. There was a view that staff in community care might be more accustomed to looking more broadly at different agencies and resources to deliver outcomes, although one of the seniors identified that within the mental health field, there were challenges around compulsory treatment and different interpretations of safety.

There were mixed views amongst the seniors as to how far the outcomes approach could be applied in statutory work. There was a view that processes and procedures could take over in child protection and in community care where it involves the protection of vulnerable adults, and that associated timescales set by courts or case conferences could be a barrier to thinking about outcomes. On the other hand, there was also a view that child protection procedures should only be used in order to achieve an outcome. A practitioner working in a justice team was asked whether there were particular difficulties with outcomes:

Practitioner: In actual fact it’s reasonably straightforward. I know what you’re saying about the statutory versus the voluntary bit, and you’re right, the offender might end up in prison, but you can agree goals... The other thing is, I suppose, that service users are quite motivated to look at outcomes because they don’t want to go to prison.
A view that was expressed repeatedly in relation to different care groups was the need for a flexible approach, and patience in supporting people to progress, in working with a wide range of circumstances:

Practitioner: I work with people who are terminally ill and one of the big messages from them that you need to have goals that are adjustable because sometimes when you begin that piece of work with that service user they quite rightly can’t face some of the really serious issues and therefore, some of their outcomes are not going to be achieved and you have to be able to work with them and flexibly change those outcomes to suit their needs. It’s very sensitive work and it means the relationship is really important and the ability to be flexible as well.

Within all three groups there were individuals who argued that it was possible to retain a focus on outcomes in the midst of crisis:

Manager: In social work a major social barrier in existence... is the tendency towards reactivity and crisis management and folk who were resistant to a systematic approach could hide behind that... You could counter argue that this approach should clarify why people are being distracted and what’s getting in the road of achieving goals if the tasks and timescales are properly spelled out... Even in a crisis you can have a short term outcome goal that can be agreed... It would help bring clarity

**Sustaining the momentum in practice: supervision and development days**

All three groups identified that there was a need to keep the emphasis on outcomes going in other ways following the initial training. Most of the comments on this theme were from the managers group, with a few comments from seniors.

Manager: ‘We’ve started on a journey with four days training... That’s really the beginning of the journey for them, the whole concept of moving towards an outcomes focus and that’s quite a difficult journey for them at times... it requires people to grasp quite specific concepts and I think there’s a danger of people slipping back... They quickly come back into their workplace, get
back doing what they’re familiar with and fall into familiar ways of working so we need to keep reinforcing this focus and outcomes in everything we do.’

There were two key ways identified in the groups of keeping the momentum going. There was first of all a need to ensure that in working with individuals, staff were encouraged through supervision to sustain momentum in their casework

Manager: ‘It’s very easy to train workers to be outcome focused but then to be very process focused in our supervision of workers ‘

Participants in both the seniors and managers group identified that the outcomes focus should be ingrained throughout the management structure:

Senior: In supervision sessions with my line manager.. you’re definitely listened to.. I definitely think out opinions are listened to and we can go the other way, you can influence people that you supervise hopefully

The second identified means of sustaining the momentum, mentioned by all three focus groups was development days. These were viewed as playing an important role in building on the training which had taken place, providing a forum for exchanging experiences and reflecting on practice. There was also a view expressed by some of the managers that efforts should be concentrated on senior social workers to ‘champion’ and drive the outcomes focus forward:

Manager: We have got a lot of work to do with our seniors in building up their confidence to work with the workers and work together... It’s about taking things forward... and breaking down some of the barriers of well, that’s just children and families, that’s just community care and that’s just home care.

One of the seniors identified at the end of the focus group that she had enjoyed participating as an opportunity of hearing others’ views and experiences.

Paperwork and IT
Practitioners discussed concerns around the recording of information. Although staff could see the value in evidencing their work, they had concerns around the time involved. There were different views amongst staff as to whether and how the assessment tool supported the recording of their work:

Practitioner: I think sometimes the tools we’ve got don’t lend themselves to looking at things like the emotional support and the relationship that we’ve just been talking about. I think it’s a bit too prescriptive, too tick-boxy... I don’t feel that I can emphasise the emotional work that I’m doing.

Practitioner 2: To a degree I agree with you initially but actually after I did the four days training I went back and thought about it and how I was actually using the tool and felt that I could adapt it to being more evidence based and reflective and I just adapt the community care assessment.

The managers group also discussed recording and evidencing work, including information about outcomes. One manager acknowledged staff reservations about recording outcomes in the IT system, but was not convinced either that the assessment tool or recording in IT were necessarily blocks to creativity. Reflecting the view of the practitioner who had changed her view of the assessment tool following the training, managers identified that not all components of the assessment required to be completed for each person, and that there was scope for creativity depending how the tool was used:

Manager: The analysis is where the creativity comes in, not the boxes where you record information... It’s how you actually analyse that’s important.

**Overcoming barriers in the system**

There were surprisingly few references to resources or the lack of them as a barrier to achieving outcomes. This seemed to relate to the emphasis in the training on use of self and thinking more broadly about how to achieve outcomes:
Practitioner 2: I think it’s back to values we held before and therefore less about resources and more about the social work role

However, staff did identify specific issues about resources which were not conducive to good outcomes:

   Practitioner: I feel that there’s issues about resources... Home care has I think become more inflexible. Well, remember when we had flexi-care, even the name says something about the care that was provided. Sometimes you see we are constrained by resources and therefore it is difficult to achieve the outcome.

One of the managers acknowledged that while starting with frontline practitioners in terms of training and adapting the assessment and care planning process was the right place to start, that there was a need to look beyond staff and managers to the wider system, including the finance and budgeting systems, to support the development of the outcomes approach.

**Partnership with other agencies**

Working with other agencies was a topic covered by all three groups. Different views were expressed as to whether and how focusing on outcomes had supported or could support partnership working. A practitioner, for example, thought that the outcomes focus was supporting better understanding between agencies. Practitioners also identified ways in which they were seeking to involve other agencies in achieving outcomes for individuals:

*I did actually work with someone recently who was needing a service to help them socialise and what happened was I got a volunteer service to provide it rather than our home care service. I suppose to some extent what I was doing was looking outside of the organisation and it was very helpful and I would definitely think about using them again.* Practitioner

On the other hand, an issue mentioned by the three groups was the tendency for other agencies to refer inappropriately to social work. Practitioners identified examples such as other agencies sending service users to social work to complete forms for them, which was viewed as encouraging dependency, where people were
capable of filling forms for themselves. Seniors also identified the role of health staff in giving out wrong messages about what can be expected from social services and this being a barrier to outcomes. One of the seniors thought there was a move away from other agencies routinely referring to social work and that there was a move towards sharing responsibilities, identifying GIRFEC as contributing to this change. An example was giving of school providing breakfast for vulnerable children as part of the plan. Participants in the managers group could see potential for better co-ordination through focusing on outcomes:

Manager: For every partner agency involved in someone’s support there will be another care or support plan or whatever you want to call it… I think this model gives the opportunity to say there’s one high level outcome plan or support plan for a person and these are other plans are really intervention plans that kind of link with it...

Several managers agreed that there was a need to share the outcomes approach with provider organisations. This was particularly the case if providers were to support the objective of enabling individuals to work towards solutions and goals.

**Measuring outcomes**

With regard to measuring collective outcomes delivered by social work services in North Lanarkshire, this topic was briefly touched upon by the seniors and practitioners but was a key discussion theme in the managers group. There was one relevant reference in the seniors’ group, which related the evidencing of outcomes in relation to local authority priorities:

Senior: It’s easier for people to tie in to council objectives – people can actually do that now quite easily with evidence and record, you know, increase safety and those kinds of things

The practitioners when asked about measuring outcomes, were doubtful both about how manageable this would be, and about the purpose of measurement. This seemed to be partly due to doubts about the validity of existing forms of measurement or ‘stats.’ For managers however, the issue of measurement was
viewed as critical to sustaining the focus on outcomes. There was a view within the managers group that local involvement in developing outcomes focused performance management was key to making it meaningful to staff and seniors. The following comment demonstrates awareness of the doubts held by practitioners, the challenges involved for seniors, and the associated need for staff to own the agenda:

Manager: We've started a discussion about what would make [performance management] more meaningful. What will be meaningful for you as a senior and your team to see the importance of performance management so it doesn't become almost a big scary term... Performance management is about looking at what we do, how we do it, if it's quality and if you can make better lives for people. .. And it's a big big challenge for seniors because there's so much more scrutiny and there's so much more monitoring and there's a mixture of staff. You know, some have got it, some haven't, some are struggling... How do we turn it around so that for them there's a bit about the ownership.

There was also a need to be accountable and demonstrate the value to the public purse. This would involve a shift in budgeting and contract monitoring, with an associated view that purchased services are often not delivering good value in terms of achieving outcomes. Part of the problem was that monitoring processes tend to focus on how busy the service is rather than what it is achieving. Considerable reservations were expressed around the need to compete with existing performance indicators, which were not necessarily conducive to an outcomes focus. One manager identified that pressure to measure the ‘wrong things’ at a higher level resulted in the ‘wrong practice’ on the ground. One example which was referenced by both a practitioner and a manager was time limits and numbers of reports delivered. The manager questioned whether focusing on time limited assessments was the right way to do it while the practitioner identified that she felt more confident about asking for extra time to complete a quality assessment:

Practitioner: Since the training I feel less concerned about the 28 days in getting my community care assessment finished because I feel more confident about being able to say that I need time to work this through with the person. Its’ about relationship building, it’s about trust and it’s not just about
me telling people this is the service that you fit into. You can’t always do that in two visits and I feel much more confident about going back to my senior and saying that.

Another pressure identified was the focus on delayed discharge:

Manager: Another factor pressurising the situation is the overriding and politicised target of freeing up acute beds in hospitals, and that drives and is hard wired into all the systems to the exclusion of almost everything else, and we have actually negotiated agreements that people will be referred to be assessed for services to get out of hospital in five days. It’s a service-led assessment.. and everybody understands that the task is to arrange services to clear a hospital bed... It’s not about being outcomes focused, it’s about bed clearing.

One manager identified that measurement of outcomes was going to be key to whether the outcomes approach would survive or not, and identified that there was a need to engage with universities and other external supports in progressing measurement

Manager: That’s actually where we want to take this. If it doesn’t go far it will actually become just a memory. It needs to go forward.

One of our staff went out to visit a man who had lost his wife and had a daughter with a learning disability. He wanted to keep going to the football and the worker tried to think differently about how to support that, instead of automatically organising a home care package. And they organised for the neighbour’s wife to look after the daughter while the father went to the football with the neighbour. That seemed to work well. Senior social worker

Discussion

One year after the reflective practice days for staff, it is clear that there has been a shift in the culture of social work in North Lanarkshire. In particular, the focus on outcomes is viewed positively by staff at all levels for both restoring some of the
values and principles of social work in practice, which were reduced through care management and bureaucracy, and as making social work more fit for the future, as recommended in *Changing Lives*. As suggested in the methods section, although it is possible that there was a degree of self-selection amongst participating practitioners, it is clear that practitioners valued the opportunity provided by the reflective practice days to refocus on values and skills. The focus on outcomes was viewed as providing a sense of clarity and purpose to practice and also as improving partnership working with service users.

Although the overall emphasis of the seniors’ discussion was positive, covering the same core as the practitioners, with a particular focus on culture shift and clarity of purpose, they also spent more time discussing variations amongst staff as to how successfully they had changed their practice towards an outcomes approach. A key theme for seniors was also perceived differences between care groups and teams in their capacity to adapt to outcomes. It is perhaps unsurprising that the seniors group was more cautiously optimistic about the shift towards outcomes, given their pivotal position in driving it forward, while carrying direct responsibility for managing mixed staff responses.

The managers group also covered key issues discussed by practitioners, including clarity of purpose, and they spent time discussing variations amongst staff in adapting to outcomes. The managers viewed working with and supporting seniors as important to the success of the approach. There was also more of a concern in this group to ensure that a methodology should be developed locally to measure and evidence outcomes, and to counterbalance existing performance indicators with user and carer outcomes. Otherwise, there was a risk that the outcomes approach would not endure.

Focus group participants referred to *Changing Lives* in their discussions. It is clear from the comments and observations from staff that the shift towards outcomes in North Lanarkshire has the capability to deliver on the key themes of *Changing Lives*. The views expressed by staff at all levels under the themes of ‘Culture shift’ and ‘Partnership with other agencies’ concur with the position that social work services don't have all of the answers, and that they need to work closely with other universal providers in all sectors to find new ways to design and deliver services across the
public sector. *Changing Lives* also identified the importance of social workers’ skills in meeting the changing needs of society, adding that these skills are not currently utilised. The focus groups identified the significant value placed by staff on being enabled to use their skills and revisit their values and principles in practice. Beyond this, the focus groups identified that relationships with individuals and families are key to supporting people to work towards their goals:

"Services should meet the needs of people. People shouldn't have to fit services. Social workers should be allowed the time to get to know their clients really well, so that they really understand the different needs of each individual." *(Changing Lives)*

The discussion under the theme of variations across care groups is relevant to the issue identified in *Changing Lives* of the challenges for social work in both managing complexity and working with people who are involved on a compulsory basis. Although a range of views were expressed on this theme, at least some staff at each level could see the role outcomes could play in such situations.

Despite the considerable progress made in North Lanarkshire however, it is also clear, as was anticipated prior to the focus groups, that a number of challenges remain. In particular, there is a need to keep revisiting outcomes in routine business practices in order to ensure that outcomes become fully embedded in practice. The most frequent and practicable suggestions from the focus groups centred around outcomes focused supervision and development days. These steps could support staff who have struggled with outcomes, as well as supporting progress with outcomes for different care groups and more complex cases. Perhaps more challenging, is the concern of the managers’ group to develop means of measuring outcomes. There are clear imperatives for resolving the measurement issue, as this would not only provide a feedback mechanism on performance for local purposes, but would help to sustain the focus on outcomes in the face of other performance indicators and targets. The measurement of outcomes could also be built into contract monitoring to ensure that partner agencies are working to the same agenda. The forthcoming reflective practice days involving both health and social work staff should also support this latter objective.
References


