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Independent Social Work Practices with Adults in England:
An Appreciative Inquiry of a Pilot Programme

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Abstract

Summary: Social Work Practice Pilots (SWPP) with adults was a government initiative in England (2011-2014) that created seven social work practices independent from local authorities/government. The stated aims were to reduce bureaucracy, promote professional discretion and expertise, and reduce the size of the public sector. The SWPPs were social work-led and comprised between five and one hundred social workers and/or other professionals/non-professionals. This paper describes how the methodology of appreciative inquiry (AI), was used to investigate how the SWPPs in England were developing as independent practices. Information was obtained through two, two-day site visits at each SWPP, and two shared learning workshops with representatives from the SWPPs.

Findings: SWPPs were found to be developing in accord with the following four key aims of the pilots: (1) Spend more time with clients (service users); (2) A more responsive service; (3) More control over the day-to-day management; and (4) Think creatively about resource use. SWPPs reported a reduction in bureaucracy and an ability to create flexible practices that more appropriately met the needs of the communities.

Applications: The findings provide an initial indication of how social work practice could develop independently of local authorities and suggest possible benefits to staff and clients. The study demonstrated how the AI approach to research and consultancy can serve as a participative learning process when exploring social work practice. The strengths and limitations of the approach are discussed.

Keywords: Appreciative Inquiry; Social Work Practice; Adult Care; Social Enterprise; Social Workers; Social Work
Independent Social Work Practices with Adults in England:
An appreciative inquiry of a Pilot Programme

This paper describes the use of appreciative inquiry (AI) in the investigation of the piloting of a new model of social work with adults in England, Social Work Practices (SWP). We begin by outlining the SWP model first piloted in children’s services in England and subsequently in services for adults. We then present the AI approach to research and consultancy, formulated by Cooperrider and Srivastva (1987), and highlight its use as a participative learning process. We explain how we employed it in a project to explore how the Social Work Practice Pilots with adults (SWPPs) were developing and in providing consultation on their development. The findings from the AI not only provide a picture of how SWPPs are developing in England, but also contribute to the methodological literature on researching social work practice.

Literature Review

Social Work Practices

The SWPs embodied two divergent trends which, although they attracted very different types of support, converged in the United Kingdom (UK) government’s thinking about social work and its organisation. The first was a resistance to bureaucracy and a call for reliance on procedures and targets to be replaced by professional discretion and expertise. In the UK, this trend emerged from critiques of managerialism in social welfare published in the 1990s (e.g. Clarke & Newman, 1997) and culminated in the Munro Review of children’s services which recommended a reduction in central prescription to achieve a shift “from a compliance culture to a learning culture” (Munro, 2011, p. 7). This report was widely welcomed by the social work profession in England.

The second of these trends was a government-led drive towards reducing the size of the public sector by moving employees into the independent sector which embraced
voluntary organisations, commercial businesses and emerging organisational models such as social enterprises, whose workers have some share in or ownership of the business (HM Government, 2010). SWPs were to be autonomous organisations contracted to local authorities (LA) and it was envisaged that, while some of these new organisations would be managed by large voluntary or commercial organisations, others, described as professional practices, would be created by groups of social workers moving out of the LA to form independent organisations or businesses (Le Grand, 2007).

In England, the Department for Education (DfE) (i.e. the governmental body responsible for overseeing social work services to children and families) piloted SWPs with children where five independent organisations were commissioned by LAs to provide services to looked-after children (Stanley et al., 2012). The organisational structure of the pilots consisted of either a separate and discrete unit housed within a LA, a professional practice run by a private or voluntary organisation, or a newly established professional non-for-profit practice (e.g. social enterprise) developed by social workers. The aim in developing the pilots was to enhance the services to looked after children and care leavers by providing consistency and stability of care, particularly by improving the morale and retention of social workers and by providing opportunities to bring decision making closer to front-line practice (Stanley et al., 2012).

As is often the case with pilots, implementation of the SWP model for children was uneven, with significant variation between sites and substantial dilution of the model in practice. Some key features such as autonomy from the LA, devolution of budgets to front-line staff, a flattened hierarchy and a round-the-clock service for children were implemented only partially (Stanley et al., 2014). Nevertheless, the practices were heralded by the DfE as a success and in 2010 the Department of Health (DoH) (the governmental body responsible for
overseeing social work services to adults) announced seven social work practice pilots (SWPPs) with adults in England to begin in July 2011.

SWPPs were to consist of organisations contracted to carry out the functions and duties of LAs for adults in need of social care and support, such as assessment, care planning and reviews (Manthorpe, Harris, Hussein, Cornes, & Moriarity, 2014). Although intended to be independent from LAs, the SWPPs were commissioned to provide social work services by their host LA (i.e. the LA responsible for delivering social work services in a geographical area and who applied to the DoH to participate in the pilot). Therefore, they received funding and varying degrees of support such as information technology (IT), human resource (HR) management, and pension programmes from their host LAs, which were ultimately responsible for holding “strategic and corporate responsibilities and for managing the contract and partnership” between the LA and the SWPP (Manthorpe et al., 2014, p. 11). The SWPPs also received funding from central government, primarily through the DoH, as part of the pilot project.

The intentions of the SWPPs were to enable social care workers to:

- Spend more time with the individuals in their care and reduce the bureaucratic burden on individual social workers;
- Take decisions much closer to their clients, resulting in a more responsive service;
- Feel empowered with more control over the day-to-day management of the practice;
- Make use of the increased flexibility to deliver better outcomes by stepping back and thinking more creatively about resource use; and
- Enjoy their jobs more (DoH, 2010).

The SWPPs were to be social work-led, which although did not have an exact definition, was often interpreted as managers having a social work qualification or the majority of the board of directors or advisory board being comprised of social workers (Manthorpe et al., 2014). The SWPPs consisted of professionals and non-professionals with
and without social work qualifications; other professionals included occupational therapists or British Sign Language interpreters.

The seven SWPPs provided different, specific social work functions for adults: those with physical disabilities; long-term neurological conditions; sensory impairment; d/Deaf and hard of hearing services; a short-term reablement service; a community-outreach information and advocacy service; and one large generic service. Their remit was initially identified in the expression of interest by the LA to the DoH and once accepted in the pilot, the SWPP was further developed and refined by the LA and then, subsequently, by the SWPP employees and board members. The SWPPs ranged from five employees to over 100, with many of the employees merely moving laterally from the LA to the SWPP, while other SWPPs employed new social work and non-social work staff. The SWPPs were non-profit businesses with their governance consisting of the following: five registered as a Community Interest Company (CIC); one a Limited Guarantee company owned by the LA; and one as a business within a pre-existing registered charity.

The development of the SWPPs overall was supported by a high-level national advisory group, which included senior civil servants, and consultants from the Social Care Institute for Excellence (SCIE) – an independent charity that shares knowledge of social care services and programmes, as well as provides services to assist in putting knowledge into practice (www.scie.org.uk). In addition to the seven pilots, SCIE supported ten pioneers, social work practices that did not apply for the initial DoH SWPP project, yet were deemed to be developing innovative social work practices with adults. The pioneers were supported by SCIE and were provided with seed funding to develop their practices. Although the focus on this paper is on the development of the SSWPs, representatives from the pioneers were involved in this AI through the shared learning workshops.

The Project
The project described here was commissioned by SCIE. The project remit was to identify what was being learned from work in the SWPPs (for the benefit of the practitioners and social work in general) and to support development in the practices themselves. In this respect, it was characterised as a consultancy project which required systematic research to achieve its goals, rather than a conventional research project which, having collected data and analysed the findings, presents conclusions of relevance to practice. A parallel formal evaluation was commissioned by the DoH, which involved semi-structured interviews with SSWP stakeholders and online surveys of SSWPs and practitioners in three comparison LAs using standardised measures at two time-points (Manthorpe et al., 2014).

Appreciative Inquiry

Appreciative inquiry (AI) comes from the field of organisational development in the United States. As Bushe (2011) explained, the originator, Cooperrider, saw AI as a philosophy rather than a technique; described by Cooperrider and Srivastva (1987), the principles are that inquiry should begin with appreciation, be collaborative, but provocative, and must be applicable. There are many different methods for doing AI, but they share the aims to create an environment and opportunities for people to learn together (in this case, consultants, employees and stakeholders) and provide a process whereby all involved can investigate the transformation of learning over time. It works by creating a collaborative relationship where the stakeholders feel a sense of ownership over their learning, development of new skills and, thus, transformations of their practice.

Bellinger and Elliot (2011) have pointed out that AI is congruent with strengths-based and participatory and inclusive methods in social work; they provide a helpful introduction to the approach and a brief illustration of its application in an evaluation of the role of a practice learning manager in a social work education programme. Hughes (2012) illustrated the use of creative media as well as interviews in a study of the experiences of five undergraduate social
work students. Wendt, Tuckey and Prosser (2011) used appreciative enquiry as an interviewing method to research how experienced social workers and teachers thrived in demanding jobs. While the first two examples focussed largely on the potential of the approach and its philosophy, the third study is a conventional piece of academic-led qualitative research with no mention of collaboration and organisational development; it is however the only one to report the substantive findings in any detail. What is currently lacking in the social work research literature is a presentation of both how AI can be applied and the findings which emerge; this paper aims to fill that gap.

**Participants**

The participants in this AI consisted primarily of staff from each SWPPs, but also included clients (service users) and carers, partner agencies and client bodies such as MS: Multiple Sclerosis Society and the Deaf Forum, commissioners and funders, and SWPP Board members.

**Objectives and Methods**

The inquiry sought to identify *what works*, specifically the social work methods being developed in the new practice context and how the values and principles of social enterprise were evident. The approach was *appreciative*, rather than problem-orientated inquiry or research (Preskill & Catsambas, 2006). It was intended to assist participants to identify their strengths and achievements, asking first “What do you do best?” and exploring how they do it. They were asked to review “What do you value most about the nature of the work and the organisation of the practice?” and to underline the positive values on which they could build. The next step involved looking ahead to envisage how the practice could develop over the next few years; in this they were invited in shared learning workshops, to be imaginative and provocative in order to challenge themselves, and each other.
Al methods are less formal than research. For example, practitioners were invited to tell their stories and to engage in conversations rather than semi-structured interviews. They were asked to “Show us what you do?” as well as to talk about it.

**Procedures**

The inquiry followed five stages.

**Stage 1: Establishing relationships.** Establishing positive and productive relationships with the SWPPs was crucial. Initially, the first author worked through SCIE’s project manager to make contact, providing an information sheet, which explained the aims of the project, the proposed affirmative approach and the anticipated benefits for all. She organised two-day visits to each SWPP. These were carefully planned to make the best of time; the schedule depended on the size and physical space of the organisation as well as their suggestions for how to identify, discuss and capture the learning and practice.

**Stage 2: Focusing the inquiry.** The visits were informal and conversational, focusing on their achievements. They included one-to-one conversations and group discussions in the office, over coffee or lunch and after working hours as convenient. She accompanied practitioners on home visits, observed team meetings and supervision sessions, and had informal chats with stakeholders. She took opportunities to ask questions and encourage reflections. Through the observations and discussions, she explored and identified the actions, methods, processes, and the values and principles that underpinned the work of the practices. She summarised her thoughts and observations and sought confirmation of their validity.

The first author and the stakeholders determined the most feasible and appropriate ways to document practice. She took photos and videos, with permission, of the physical environment, group meetings or practice settings. Some of these were subsequently shared in the shared learning workshops with the other SWPPs. One member was asked to volunteer as practice correspondent, providing regular news of developments and accounts of the team’s
work. She contacted this person by phone for regular conversations. Information was posted on a shared www site.

The site visits only captured the events and learning to date but prompted emerging practice ideas and methods as well as challenges. The continual development was therefore captured through the next stage.

**Stage 3: Reflection on the initial inquiry stages and continual learning.** After the two-day site visits, the first author summarised the visit by specifying *how* (e.g. home visit; staff group discussion) and *from whom* (e.g. clients; carers; Board members; staff) information was gathered, and collated the information in themes. For example, information about the SWPs often fell under broad themes of: (1) Key ingredients for setting up a SWP/social enterprise; (2) What is the SWP doing differently: key learning points; (3) How are the values of social enterprise being evidenced in the SWP?; (4) What does it mean to be social worker led?; and (5) Why would a social worker work for a SWP?. She provided each SWP with a written summary, which structured the shared learning workshops.

**Stage 4: Sharing the learning.** The authors jointly facilitated two shared learning workshops attended by representatives of each pilot and pioneer practice. Participants partnered another practice and used AI to explore each other’s experiences and to present them to the group. For example, one task was to identify each SWP’s unique selling points by asking:

- What do you do best?
- What do you do to make that happen?
- How is it different from adult social care in LAs?
- What do you value most about the nature of the work and organisation of the practice?
After each SWPP completed the interview, the interviewing SWPP created a poster of the interviewed SWPP that completed the following statements:

- [SSWP] is really great at doing this…
- This is how they do it…
- This is what they value…
- Their key selling points…

Another AI exercise elicited the buzzwords they were using to describe their practices, such as: less bureaucracy; creative; innovative; freedom; flexibility and fit-for-purpose. They then asked each other: “Tell me a little story of how you are: flexible, free, creative, innovative, fit-for-purpose, independent, less bureaucratic”.

After the first workshop, stages 2 and 3 were repeated with the pilots: another two-day site visit; continual communication and consultation; a written summary based on emerging themes and a final workshop, which also included the pioneers.

**Stage 5: Review and dissemination.** The second workshop reviewed achievements and planned the future. This final step involved looking ahead to envisage how the SWPPs could develop in line with their strengths; they were encouraged to be imaginative and to challenge themselves and each other. Again, the SWPPs interviewed each other and were tasked with asking the following questions:

- Are you clear about what you are selling?
- What’s special about it?
- How can you sell it?
- Who do you need to convince?

Participants identified medium term goals (12/18 months or 2 years) and the people who needed to be involved in change and development. We encouraged a solution-focused
approach to particular identified difficulties. We helped participants to identify key emerging messages to share with the field in general.

The information gathered from the final site visits and the workshop informed the end-point feedback reports to each SWPP and the final report for SCIE. The formats of the feedback reports were agreed with each SWPP and typically included a written report or PowerPoint presentation plus case studies, videos, pictures, and/or practice documents and forms. The final report for SCIE also included case studies, photos, and hyperlinks to short podcasts and materials provided by the practice themselves.

Findings

How the SWPPs were Developing their Practice: Key Themes

The material collected through the AI were reviewed and collated through a process of thematic analysis (Guest, MacQueen, & Namey, 2012) against predetermined themes consisting of the aims of the SWPPs (as listed in the literature review) and how the SWPPs were developing as independent practices with a focus on social enterprise.

Features of the SWPPs’ development as social enterprises included:

- Participation and contribution by all staff in decision-making;
- Having a voice and a say in management issues;
- Being customer led by supporting the needs of the community for which the SWPP represents; and
- Being socially and politically aware

Being social work-led meant that values and principles of social work underpinned the SWPP at every level, which includes direct work with clients, to working as a staff team, to engaging communities to running the business. In this sense, social work process and skills guided the practice. This includes solid assessment skills, and applying the social work process (assessment, planning, implementation and review) when delivering services but
equally to the business development process. As one participant explained: “We are all social workers and we can all work from a social work perspective all the time – we are focused on communication, listening to people, acting appropriate, acting as social workers and not information takers” (SWPP 2)

The following four key themes highlighted how the SWPPs were developing their practice.

1. **Spend more time with individuals – less bureaucracy.** The SWPPs structures and values had allowed for more flexible and creative ways of working. This doesn’t mean that this *couldn’t* have happened in the LA, but due to large caseloads, budget constraints, time lags in accessing services, IT restrictions and overstretched social workers, this *wasn’t* being done.

One SWPP reported that they were able to develop relationships with clients because they were a small, specialised team. The smaller organisation meant that all workers tended to know about all clients; a client could call into the office and speak directly and instantly to a social worker. There was greater crossover between the workers as all workers participated in duty work and, therefore, knew of each other’s cases. Because the SWPP specialised in a specific area of social work, the client could be reassured that one of the social workers would know about his/her situation or experience. The SWPP stated that they were more focused on building relationships (during initial contact) rather than determining eligibility and filling in the boxes. One worker stated:

“We don’t have the systems, policies and procedures at the forefront of our mind. We can listen to what the person perceives to be the problem at that time, which may or may not be directly related to their disease. They don’t have to go through the call centre first. We can look at what is important to them and then all the information can...
come together in an assessment. [Being unwell] may not be the most important thing to consider right now (SWPP 1)

2. A more responsive service. The SWPPs were able to provide a more responsive service by reducing bureaucracy, asking the community what they needed and working more closely with clients to meet their needs. An example is of a SWPP who opened a resource centre consisting of an accessible building where individuals with sensory impairment or loss could come and meet with SWPP employees, such as rehab officers, equipment officers and senior support workers. The Centre provided advice and guidance, benefits drop-in sessions, fax machines and other communications equipment. There was a kitchen for teaching independent living skills, meeting rooms to rent, rooms to provide sign language classes and sensory awareness training. Local people and organisations were able to rent rooms and partner agencies considered having a presence within the Centre as well, such as a private Audiologist. Although social workers were not permanently based there, they used the Centre to meet clients. The Centre ultimately aimed to raise awareness of the needs of people with sight and hearing loss and provide easier access to social work services and other services, such as benefits and health.

Another example is of a SWPP whose staff attended community centres to give information and advice about LA services and deliver safeguarding messages. Being based in the community gave the practice the freedom to engage the community because they were not viewed as a council service. They could be more autonomous, objective and efficiency-focused. Their approach involved asking local people what they wanted, what resources and strengths they already had and then built upon these areas. In this sense, the SWPP was more holistic by looking at all the different areas within a person’s life and her/his community – the focus being on health and well-being and social aspects/issues. The SWPP staff believed that they were challenging the traditional role of the social worker and social services.
3. More control over the day-to-day management. The SWPPs were set up as social enterprises defining their business and established new ways of working. Staff were engaged in the development of new policies and procedures and were part of the day-to-day management through involvement in the Board of Directors, Steering Groups and/or Staff Advisory Groups.

One SWPP developed a supervision model to suit their particular needs. All staff were consulted about the actual standards to which they should be held and to establish a required set of standards related to the job description. Supervision was seen as an ongoing process rather than two-hours a month case management (as in the previous LA model). It took place formally: one-to-one, in groups and informally on near daily basis. Supervision was described as a “blank canvas” where the supervisee and supervisor decided together where to place the supervision focus. Every other supervision session should include a joint client visit. The model was seen as a shift away from the directive/authoritative supervision to new leadership.

Another SSWP exemplified greater freedom in their practice and more power in making decisions. Social workers were able to conduct an assessment, calculate the budget, have it approved and funding in place in a short time. A budget template ensured consistency and standards and served as the assessment for the requested budget and avoided the inevitable delay incurred by referral to a funding panel. Consequently, clients were able to have a package of care sooner.

4. Think creatively about resource use. The SWPPs were thinking creatively about their resources and about how to meet the needs of the community. One SWPP set up a peer support programme that brought local clients and carers together with clients and carers from the SWPP to assist in assessments and creating and implementing support plans. The approach aimed to be non-patronising and non-demanding and provided an opportunity to
explore individuals’ qualities and short and long-term goals. The programme was based on the premise that everyone can have control to overcome challenges. The challenge in promoting change can often be from the professionals who stand in the way. The SWPP stressed that “we” (professionals) need to change our approach and acknowledge that people do have strengths, resources and qualities that can be utilized and built upon to result in positive change. The peer support programme moved away from the idea that people are “done to” towards a collaborative approach where people identified their aims and outcomes and a support plan implemented to achieve them. As one peer support worker stated: “It’s quite satisfying because I can say what happens to me, hope it’s helpful, and point in the right direction” (SWPP 7). The peer support worker role not only empowered and aimed to support the client/carer, but also provided a sense of empowerment and self-confidence to the peer support worker. The support appears to be truly mutual.

Another example is from a SWPP who acknowledged that many clients were not receiving the information that they needed because it was not provided in the client’s language or in an accessible format. They trialed new ways of communicating, such as through video letters. Instead of translating English letters into British Sign Language (BSL), the staff started providing video letters on DVDs that contain BSL messages. The client could then view the video letter through their computer, thus, in their first language.

Another SWPP, in collaboration with the practice’s clients and carers, identified a need for hard of hearing communication training to care agencies and care home staff. This was tailored to the individual needs of the care staff, but could include looking after hearing aids, what equipment is available in care homes, how to slow communication or how to position oneself when working with clients who are deafened and hard of hearing. The training was offered, for a fee, as either formal half-day trainings or shorter “on the spot” training.
This SWPP also developed a five-week reablement course that aimed to give people the strategies they need to deal with hearing loss. This could include types of equipment, managing hearing aides, and learning about the Equality Act 2010 and the types of support people could be entitled to, such as note takers.

Finally, another example is from a SWPP where a group of staff members volunteered their services after-hours. One member told this story:

A client was in hospital awaiting discharge. A care agency had been identified but could not agree to start the care package until the ground area had been cleared of items that had accumulated. This clutter would cause problems as her bed had to be downstairs and carers needed sufficient space to hoist her and tend her needs. As her husband was also in a wheelchair and unable to do it, four of us went in and did a “blitz” of the downstairs area, clearing out plastic bags full of rubbish and cleaning the kitchen so that carers could start going in, which they did 2 days later (SWPP 5).

These volunteer activities enhanced team morale.

**Barriers to Developing SWPPs**

Although AI focuses on the strengths and developments of the SWPPs, the inquiry also enabled the SWPPs to identify barriers to their success, particularly in Stage 5, review and planning. One such barrier to independence was the extent to which the LAs would release control to the practices, a barrier also found in the evaluation of the SWPPs with children where all but one LA remained in control of “major spending decisions on placements” (Stanley et al., 2014, p. 374) and in the DoH evaluation where most financial decisions remained with the LAs (Manthorpe et al., 2014). The SWPPs with adults continued some dependency on LAs whether it was in terms of budgets or IT arrangements, which meant the SWPPs were not truly independent practices. Additional barriers included preparing staff for a cultural shift from a LA environment to an independent practice based
on values and principles of social enterprise, and the uncertainty about future of the practices, particularly in regard to funding of the practice, competitive salaries and pension benefits for staff.

**Discussion**

**The Development of SWPPs**

The findings of the AI appear to support the overall aims of the SWPPs, primarily in terms of reducing bureaucracy and enabling creative and flexible practices that more appropriately met the needs of the communities. The SWPPs reported developing as social enterprises where staff were involved in the day-to-day management of the practice and reported the ability to better meet the needs of the local community. The SWPPs reported being social work-led, which did not necessarily mean that the management were qualified social workers but, rather, that the principles and values were integrated throughout the management and daily function and decisions of the practice. The distance from the bureaucracy of the LA was reported to enable the employees to work more closely with clients and community members.

Most importantly to the SWPPs was the ability to be creative and flexible in their ways of working. Because of the perceived reduction in bureaucracy, the practices believed that they had more time to build relationships with clients and community members. The practices discussed reaching out to the local community and attempting to create or modify existing services to better meet their needs. The values of social enterprise fostered this by enabling clients, carers and community members to be on the Board of Directors and/or Advisory Boards and to serve as volunteers or advisors. Despite this information obtained through the AI approach, the DoH evaluation reported, “there was very little user involvement […] either as volunteers or peer supporters, or more general community engagement” (Manthorpe et al., 2014, p. 7).
Building relationships with clients and community members was seen as important in defining the work of the practice and several clients reported in this AI the importance of frequent contact and easier access to their social workers. The DoH evaluation (Manthorpe et al., 2014) supports this in that the pilot staff rated themselves better than host LA and comparison sites on items such as “maintaining close contact with service users [clients]; ensuring service users were able to manage support; being available and making time” (p. 5) and their view of the quality of care they provided increased over time. Whereas the evaluation of the SWPPs with children found the workers to have more opportunities for direct work with children (Ridley et al., 2013), the DoH evaluation found that over time the pilots reported spending rather less time in direct work with adults in need of care (Manthorpe et al., 2014).

In relation to reducing bureaucracy, the findings about greater decision-making powers and flexibility apparently allay some of the doubts about SWPPs expressed by Cardy (2010) amongst others. However, results from the surveys conducted as part of the DoH-commissioned evaluation of the SWPPs (Manthorpe et al., 2014), indicated that social workers were spending much the same proportion of their time on bureaucratic tasks as colleagues in the comparison sites.

Nevertheless, the DoH study provided evidence to support the AI findings concerning the high levels of enthusiasm for practice and team working. Manthorpe et al. (2014) reported that the social workers in the pilot sites had lower levels of psychological job demand, burnout and higher levels of decision authority when compared to the host LA and comparison sites. The pilots also reported “the potential for job satisfaction, autonomy and in some cases greater opportunities for team working than they had experienced working for the LA” (Manthorpe et al., 2014, p. 7). This is in contrast to the evaluation of the SWPPs with children, which found no significant differences in level of job satisfaction, decision latitude,
psychological job demand, or levels of burnout, although the SWPPs demonstrated higher levels of job insecurity and social support particularly from co-workers and supervisors (Hussein et al., 2014).

Setting up a SWPP requires careful consideration and the necessary skills for business development. In this context, it is interesting to read Henriksen et al.’s (2012) observation concerning the remarkable growth in training programmes in German universities and polytechnics, which focus on marketing and business development rather than social work. Readers will surely have noted the use of marketing terminology (e.g. USP) in the shared learning workshops reported above. The SWPPs indicated that essential ingredients include a committed leader who has knowledge of social work practice and business development, a detailed timescale that factors in the time to build infrastructure (e.g. bank accounts; credit limits; Board of Directors; policies; legal advice; job descriptions; pension planning) before going live, be clear about what service the practice is providing and consider marketing the service, be clear about initial targets and performance indicators (e.g. payment by results), consider sustainability from the beginning, and factor in time to address the cultural shift for staff moving from LAs into the practice. The time required to establish and roll-out a SWP was echoed through the DoH evaluation in that the pilots believed the timescales to develop as a practice and demonstrate effectiveness was too short (Manthorpe et al., 2014).

In August of 2014, Community Care reported the status of the SWPPs. Four of the SWPPs had funding from the LAs until April 2015 and were also relying on external sources of income, such as trainings and grants. One SWPP was fully independent as a social enterprise and had guaranteed funding till 2017. Two SWPPs are no longer in operation; one was taken back by the L.A, due to restructuring of adult social care into generic teams, and the other was taken back after an internal unpublished review (Schraer, 2014). The future of the SWPPs was unclear, yet despite this, the Care Act 2014, which was implemented in 2015 in
England, promotes the development of SWPPs by allowing LAs to contract out social work functions, such as assessment, resource allocation and care planning without final approval by LAs.

**The Appreciative Inquiry (AI) Process**

The use of an AI approach appeared to be successful in terms of finding out how the SWPPs were developing as a social work practice, yet there were key points of learning along each of the five stages that could inform the use of AI (or when researching) social work practice.

**Collecting information.** The inquirer will need to spend time preparing for the interaction with participants and consider the essential interpersonal, communication and counselling skills required to initiate engagement. We took a social constructivist approach with a position of curiosity: on the site visits, the first author would ask open-ended questions, such as “What does it mean to be social worker led?” or “Tell me what you do that is different from social work practice within a local authority?” Often the author had to ask probing or follow-up questions when information was vague. The use of reflective statements was important in ensuring information was recorded properly.

The use of AI within social work practices requires the availability of participants and their willingness to provide information. The inquirer needs to be flexible in the way in which information is collected and the time that it might take in order to do so. The programme of the site visits could often change, due to social workers responding to clients’ needs. The author was able to collect valuable information by observing such changes and even accompanying the social workers on last-minute visits or meetings. Finally, collecting data on social work practice requires respecting and adhering to confidentiality of both the participants and the information that they share.
Sharing information. We found that the SWPP staff members were willing and open to sharing information about their practice, but that time constraints often limited the amount of information that was shared. Many staff members were able to share information verbally through face-to-face interviews, email communication or through video recording and although there was a shared commitment to continue this process after the actual site visits occurred, many staff members became too busy and others were reluctant to be videoed or have photos taken. We also needed to acknowledge whose views were being put forward and whether or not this information was also shared by the other staff members and/or clients and carers. Finally, the sharing of information between the SWPPs, particularly through the publicly-made reports and the workshops, highlighted that some innovative practices were not to be shared. The SWPPs were independent businesses and innovations could be a source of future income and thus commercially confidential.

Reflecting. This AI highlighted the importance of reflecting on learning. The site visits enabled the SWPPs to identify their use of social work theories and methods and to discuss them. The DoH evaluation reported that this aspect of AI was highly valued, quoting one team manager as saying:

It was really great to look at social work theory and to have the time to see what’s happening now [...]. We really enjoyed that as a team to bring that together and to talk about theories at team meetings and to bring life to that again (Manthorpe et al., 2014, p. 33).

The DoH evaluation also observed that the shared learning workshops were unanimously appreciated. This bringing together of delegates from a number of different organisations for participative learning was not a common feature of the AIs in social work referenced above. They enabled the practices to step away from the day-to-day operations of
social work practice, listen to the experiences and perspectives of other SWPPs and begin to refine and detail the mission and purpose of their SWPP.

Planning. AI-type questions employed in the site visits and the workshops enabled the practices to identify what had been working well. Challenging them to think forward and, specifically, define who they are, what makes them unique, who they needed to convince of their selling points, and how they were going to get the key stakeholders on board. Feedback to the DoH evaluation was that this consultancy support had finished too early and that many practical issues remained unresolved.

Limitations

The findings from this AI should be considered against several limitations. Firstly, our involvement as consultants took place over the course of one year and was probably not sustained for long enough, although it is arguable that the further support required was of a technical and legalistic nature and not within our skills portfolio. Secondly, as will be discussed in further detail below, the results of this AI were not always consistent with the formal DoH evaluation and such discrepancies could be argued to be due to the positive nature of AI. Finally, we believe the findings from the AI have provided valuable lessons from the seven SWPPs in England, but acknowledge that the generalizability of the results to other independent social work practices is limited.

Discussion

AI Consultancy and Research?

AI was successful in engaging participants by working with them to identify the strengths of the model, and helping participants learn from their shared experiences and to plan for the future. In these respects, it served the project remit to provide consultancy support to the SWPPs. As an example of an approach to organisational development it was,
we think, faithful to the philosophy of AI as presented by Cooperider and Srivasta (1987) and consistent with social work values as claimed by Bellinger and Elliot (2011).

From a research perspective, this AI was successful in producing, in a relatively short space of time, a set of findings that appeared to capture some/most of the key messages subsequently corroborated by the formal DoH evaluation. Further, it accumulated a set of accessible stories, case examples, videos, pictures and other media for the use of both individual practices and the social work field as a whole. It is quite possible that these messages and materials had greater impact than the rather dry final report to funders, which we are used to providing.

But does AI simply produce a rosy picture? After all, as we have shown above, scrutiny of the findings from the formal evaluation report indicated that the results were mixed. Yes, there was great enthusiasm for the model but some of the claims, for example about time spent with clients were not evidenced by the results of the surveys. Does AI deserve to be called research or is it anecdote? And what does it do to the position of the researchers? Bellinger and Elliot (2011) were required to address such questions when they proposed their own AI project to sceptical “traditional” research colleagues in their university who considered that the involvement of many co-researchers would undermine reliability and the focus on positive messages would result in biased results (Bellinger & Elliott, 2011). Furthermore, the requirements of research ethics committee (institutional) review to which Bellinger and Elliot had to accommodate, “[…] led us to conclude that methods for evaluating AI [sic] and traditional approaches are not only incompatible, but are mutually corrosive” (p. 710). Partly because we were not required to convince a research ethics committee, we are much more optimistic about the potential for using both participative, action research models such as AI and conventional research methods in tandem. Whatever AI’s considerable merits (which we have tried to describe), we would not recommend using
AI alone; it is not sufficiently rigorous. But we believe it can add a great deal to traditional research and deserves its place in our toolkit.

**Research Ethics:** As noted above, because this project was classified by the funding body, SCIE, as consultancy and not research, it was exempt from formal ethical (institutional) review, although as social work researchers the authors were careful to follow the profession’s ethical codes and procedures.

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References


