BASW response to TCSW consultation on Roles and Tasks Requiring Social Workers

BASW are pleased to comment on the draft document entitled “Advice Note: Roles and Tasks Requiring Social Workers”.

Our comments are made on two levels:

1) the overall challenges of writing down roles and tasks and
2) detailed comments on the content.

1. The overall concept of writing down roles and tasks.

BASW has reflected for many years on the issues of defining social work and associated roles and tasks and recognises the complexity of the work. We take the view that the starting point for defining social work is ethics and principles. This approach fits with the international definition of social work:

“The social work profession promotes social change, problem solving in human relationships and the empowerment and liberation of people to enhance well-being. Utilising theories of human behaviour and social systems, social work intervenes at the points where people interact with their environments. Principles of human rights and social justice are fundamental to social work.” (IFSW)

The BASW Code of Ethics uses the international definition as a starting point for defining what social work is and goes on to describe the principles and values of social work in the UK (For details of the BASW Code of Ethics see the footnote.¹)

BASW recognises that there is a case for defining in more detail the roles and tasks of social work in England, particularly identifying those that are currently underpinned by English law. However BASW urge TCSW to consider that unless a broader context of social work is the starting point of the document that to define roles and tasks in a legislative way could lead to a reductionist approach to understanding social work – the tasks of social workers being the tasks that are defined in current legislation. Legislation of course is subject to change and therefore the definitions need to be written in such a way that they are relevant over a significant period of time. A reductionist approach, particularly in the context of social work being increasingly being commissioned, could lead to such statutory duties being the only ones that are commissioned. The consultation document does commence by describing the importance of social work, and this is welcomed, however BASW feel that a much better starting point would be the conceptual and theoretical point as described in the BASW Code of Ethics. Indeed it is felt that covertly there is reference to the BASW Code of Ethics and as a minimum this needs to be acknowledged.

There is concern that listing reserved tasks could legitimise changes happening in local authority social work teams which has seen a limitation of the social work role particularly in adult services. On the other hand BASW recognise that one of the trademarks of a profession is to have reserved
functions. BASW Scotland were very involved in developing the Governance Framework for Social Work, which details in broad terms restricted roles and tasks.¹

BASW supports the importance of the statement in paragraph of the heading “When must a social worker be used”?

“It would however be extremely unwise to restrict social workers to working solely on such ‘reserved tasks’ because this would be harmful for people who use social work services”.

BASW also feel that document needs to recognise the complexities and challenges that Government policy requiring the integration of services poses, with concepts of working collaboratively and breaking down barriers between professions to provide a better experience for service users. There is a danger that the list of roles and tasks could be seen as overly precious.

We also feel that there is an implied view that social work is conducted only in a local authority context. There also needs to be an overt acknowledgement that social work is practiced in a diverse range of settings and organisations. Reserved functions also need to need to apply to social workers working at different levels of management and in commissioning and inspection.

2. Detailed comments about the paper

Broadly there are two types of comments:

a. Layout and coherence of the document
b. Comments on factual inaccuracies.

2a) Layout and construction of the document.

It is recognised that this is a draft document and therefore that there is a process of development, which includes this consultation. We therefore make the following observations:

• There needs to be a clear statement about the scope of this document; if it applies to England only that should be stated in the title. This needs to include a statement at the outset stating to whom it is aimed and for what purpose

• As described in section 1 of the BASW response it is recommended that the introduction starts with the agreed international definition of social work and the principles that underlie social work as defined in the BASW Code of Ethics

• Numbering of sections would be helpful

• It would be useful to list key tasks regarding social work roles in mental health together and similarly for other specific areas such as safeguarding, reablement etc.

¹ The Role of the Registered Social Worker in Statutory Interventions: Guidance for Local Authorities. Scottish Government 2011
• BASW feel that there needs to be further consideration of whether there are tasks on the list that should be reserved and others that need to be added.

2 b) Some factual inaccuracies or ambiguities:

The following observations are made about some of the tasks listed:

Task C – admission to hospital under the Mental Health Act 1983

This is as task which in law requires an Approved Mental Health Professional. See “Schedule 1 Professional Requirements” of “The Mental Health (Approved Mental Health Professionals) (Approval) (England) Regulations 2008”. This makes it clear that a registered social worker is one of four registered professions that can undertake this work. Whether we think social workers are the best professionals to do this job is a lost debate and not relevant here. We cannot claim something as a reserved task for social workers when the law clearly says otherwise. There may be much in the Act we would like to campaign to change - but that is another matter. It may however be appropriate to acknowledge that the majority of AMHPs are still social workers.

Task N – social circumstances reports for courts for mental health patients

Mental health tribunals are effectively courts and the reports required here and for Hospital Managers’ hearings, where the liberty of a detained patient under the Mental Health Act is being reviewed, should both warrant a report from a qualified professional worker who is in the best position to provide the required information. However there is not a good case for this to be a reserved task of a social worker, even though in many cases a social worker will be the best person for this task. The assumption that this must be a social worker ignores the multidisciplinary nature of much mental health practice, where social workers work alongside nurses, occupational therapists and psychologists. Where a member of one of those professions is the patient’s care co-ordinator they are likely to be in the best position to provide a report into the social circumstances of the patient.

Task O – mental health aftercare

There are some specific tasks that require the involvement of an AMHP (see comment on Task C) but in relation to the general aftercare there is no good case for saying this task should be reserved for social workers (see comment on Task N).

Task P – meeting service user demand for a social worker

Managers need the flexibility to decide when a case needs allocating to a professional worker and in multidisciplinary teams to which profession and/or worker; depending on known service user needs, staff skills and workloads. It is unrealistic to suggest anyone who wants a social worker will be able to have one allocated.

Other Tasks

Task h – lead on community solutions under the Mental Health Act
It is not clear how this differs from the tasks under Task C of the Reserved Tasks, as exploring alternatives and implementing any practical ones is part of the overall AMHP role before concluding hospital admission is the only option remaining. There is recognition here that social workers are not the only professionals who may be AMHPs. AMHP training courses and the competencies that they have to demonstrate (“Schedule 2 Matters to be taken into account to determine competence” of the Approval Regulations referred to above) requires evidence that all professionals assert a social perspective. Other professionals may be offended by the apparent suggestion that they are not able to do this after having had to demonstrate that they can do this to meet the qualifying course requirements - and to maintain their approval (See Paragraph 7 (2) (b) of the Approval Regulations referred to above).

For further comments on some of the reserved tasks and suggested changes please see attached marked up document.

In conclusion

BASW support the attempt to define the roles and tasks requiring social workers. We hope that you see our comments as made in a spirit of consultation and openness and an indication of our desire to work co-operatively with TCSW on the document. We reserve however the right to make our reservations public about the final document if we are not in accord.

Social work in its various forms addresses the multiple, complex transactions between people and their environments. Its mission is to enable all people to develop their full potential, enrich their lives, and prevent dysfunction. Professional social work is focused on problem solving and change. As such, social workers are change agents in society and in the lives of the individuals, families and communities they serve. Social work is an interrelated system of values, theory and practice.

Theory:
Social work bases its methodology on a systematic body of evidence informed knowledge derived from research and practice evaluation, including local and indigenous knowledge specific to its context. It recognises the complexity of interactions between human beings and their environment, and the capacity of people both to be affected by and to alter the multiple influences upon them including bio-psychosocial factors. The social work profession draws on theories of human development and behaviour and social systems to analyse complex situations and to facilitate individual, organisational, social and cultural changes.

Practice:
Social work practice addresses the barriers, inequities and injustices that exist in society. It responds to crises and emergencies as well as to everyday personal and social problems. Social work utilises a variety of skills, techniques, and activities consistent with its holistic focus on persons and their environments. Social work interventions range from primarily person-focused psychosocial processes to involvement in social policy, planning and development. These include counselling, clinical social work, group work, social pedagogical work, and family treatment and therapy as well as efforts to help people obtain services and resources in the community. Interventions also include agency administration, community organisation and engaging in social and political action to impact social policy and economic development. The holistic focus of social work is universal, but the priorities of social work practice will vary from country to country and from time to time depending on cultural, historical, legal and socio-economic conditions.

It is understood that social work in the 21st century is dynamic and evolving, and therefore no definition should be regarded as exhaustive. (BASW Code of Ethics 2012).