THE CONTRIBUTION OF SAFEGUARDING ADULT REVIEWS TO THE SOCIAL CONSTRUCTION OF SOCIAL WORK WITH ADULTS IN ENGLAND.

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Abstract

Safeguarding Adult Reviews (SARs) are a form of inquiry conducted retrospectively when it is agreed that an individual was not adequately safeguarded from harm and neglect. SARs are inquiries into tragic events structured by considering how the infrastructure tasked with safeguarding adults including social work services could have worked differently to prevent this tragedy. This thesis explores the contribution of SARs to the socially constructed narratives concerning what social work practice with adults in England is, and what social workers should do.

SARs as an evidence base are born from tragedy and therefore the services discussed within a SAR (including social work) will be appraised based on a negative outcome. I hypothesise that SARs contribute to a negative portrayal of social work and that they reinforce the narrative of failure. This research is a qualitative study grounded in the theoretical framework of Social Constructionism. Evidence of the contribution of SARs is sought by documentary analysis of a sample of SARs, and analysis of data from two focus groups and twenty-five interviews with social workers, senior adult safeguarding leads, and SAR authors.

The thesis finds that several contexts and objectives are shaping the work of SARs and that these infuse into the story of social work that is presented within. This thesis concludes that SARs hold considerable power in their ability to present a narrative about contemporary social work in England. This research

implies that SARs can have a negative effect on social workers' professional confidence which in turn will most likely impact their ability to advocate on behalf of people who use their services. Consequently, it has been suggested that the SAR process should prioritize enhancing the confidence of social workers as a key objective. This study provides new insights into contemporary practices in the field of SARs, adult safeguarding, and social work more broadly.

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Glossary

ADASS: The Association of Directors of Adult Social Services (ADASS) is an independent charity organization. It is comprised of current and former directors of adult social services, as well as principal social workers. ADASS provides a platform for its members to collectively inform and influence the development of policy and practice in adult social care.

Anti-oppressive practice (AOP) is an approach in social work that highlights the presence of structural oppression and exclusion in society, including racism, ableism, patriarchy, and poverty.

BASW: The British Association of Social Workers is an independent professional membership organisation for social work. Membership is voluntary. The organisation aims to promote professional social work and support social workers.

SWE: Social Work England is a specialist body established to regulate the practice of professional social work in England. Social Work England is a public body that sits outside of any government department. Registration with SWE is legally required to practice professional social work in England.

COP: Court of Protection is a judicial court established to preside over decisions on financial or welfare matters for people deemed to lack capacity concerning those decisions at the time they need to be made. One part of this function is to review the evidence that the individual lacks capacity.

Defensive Practice is the term used to describe when a health or social care practitioner practices in a way that defends or protects their position as a priority above the needs of their client. An example of this might be disregarding an individual's preference not to have a flu vaccine as it is deemed to be the safer and more defendable decision for the medical team in charge of their care.

DHR: A Domestic Homicide Review (DHR) is a specific type of review for instances of death of a person aged over 16 where it appears that their death was related to violence, abuse, or neglect by a person whom they had an intimate relationship with, or a member of their household. Like a SAR, a DHR is a multi-agency review led by an independent person, aiming to recommend changes to strengthen the system that prevents abuse. The statutory requirement for local areas to conduct DHRs arose from the Domestic Abuse Act 2010.

ELFT: East London Foundation Trust is an NHS organisation providing a wide range of mental health, and primary care services to the population of East London.

Emotional Resilience. In this thesis '*emotional resilience'* is understood as an individual's ability to withstand stress and to manage professional decision-making in a context of emotionally charged work tasks.

LBTH: London Borough of Tower Hamlets

MCA: Mental Capacity Act (2005) A UK Act of legislation to make provisions relating to persons who lack capacity.

NHS E and I: NHS England and NHS Improvement. The organisation that leads the NHS and NHS improvement strategies in England.

PCSN: People with care and support needs.

SAB: Safeguarding Adults Board. Aligned to local authority footprints, SABs lead adult safeguarding arrangements in their locality, overseeing the effectiveness of the safeguarding activity of its member and partner agencies.

SCIE: Social Care Institute for Excellence is a UK think tank that supports agencies delivering social care via research and provision of training.

SCR: Serious Case Reviews were the previous typical format established to review cases where a child or adult has died and abuse or neglect is known or suspected. SCRs could additionally be carried out where an individual has not died but has come to serious harm because of abuse or neglect. The Care Act 2014 introduced Safeguarding Adults Reviews (SARs) as a statutory duty under the Care Act and therefore replaced the previous SCR format.

SWE: Social Work England is a specialist body established to regulate the practice of professional social work in England. Social Work England is a public body that sits outside of any government department. Registration with SWE is legally required to practice professional social work in England.

Acknowledgements

In presenting this thesis I am bringing the culmination of my work over a period that spans more than five years. There are several people without whom this achievement would not have been possible. I first discussed doctoral-level study in my final weeks as a social work student at University College Dublin. My much-loved lecturer Dr. Mary Allen was her usually enthusiastic self and warmly encouraged the idea. I decided then to embrace my newly acquired qualification and pursue a busy career as a social worker. It was nine years later that I approached Professor Jo Finch to ask about joining the Doctor of Social Work programme at UEL. Her welcome, pragmatism and respect for professional experience meant that the programme seemed like an unmissable opportunity.

Though the goal of achieving the academic degree was set from the start the journey was genuinely enjoyable. I am truly grateful to the staff at UEL for their teaching and guidance, and efforts to build a graduate community – even on Saturday afternoons! I wish to thank my peers and friends that I made at UEL. I learned a great deal from the student community and value those personal connections.

In moving to the final thesis stage of the project we simultaneously had to retreat to our isolated bubbles in the era of COVID 19. It was then that I sought motivation and support from those closest to me. A few deserve special mention. I am grateful to my friends for their undoubting support. I am particularly grateful to my friend Sally for our weekly walks in Hallow Ponds discussing the mechanics of

research. Also, my NHS safeguarding colleagues including Rhiannon Hughes who proof-read this text and therefore deserves special mention!

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Finally, I wish to thank my family. I am grateful to my parents and brothers for continuing to raise the bar both in terms of hard work, and determination. I am grateful for my nieces and nephews who are conscientious and insightful. Watching them start their own University journeys has added motivation to complete this doctorate before one of them does! I am most deeply grateful to my husband Adam who genuinely loves a chat about research and is excellent at proof-reading. Adam never questioned or begrudged the time that this thesis took from our family life, and I am grateful for his encouragement. Our two children do not take kindly to being ignored and I am grateful that the rhythms of family life forced a constant work-life balance that greatly supports my mental health. Their qualities combined would make an outstanding social worker. For Rory who demonstrates innate kindness and deep thinking, along with reliability and record keeping; and for John who demonstrates that sometimes the system needs a 'wrecking ball' to change – the future is safe.

Dedication

This thesis is dedicated to my father Sean (recently deceased) and my mother Kathleen. From my early days, they taught me that power lies with the penholder. Their compassion for the challenges faced by workers and their commitment to social justice are threaded through this thesis.

Dad – thanks for always asking about my progress, I really appreciated your encouragement. I am so sorry that you missed the finish line.

Mam – thanks for not asking about my progress, I really appreciated this respite.

Chapter One: Introduction to the Research

This thesis seeks to explore contemporary social work in England and specifically to consider the influence on social workers of one form of inquiry: the Safeguarding Adults Review (SAR). A SAR is a retrospective inquiry, established if an adult experiences life-threatening levels of harm and neglect. The purpose of a SAR is to explore how relevant agencies performed their safeguarding duties towards that individual (SCIE, 2022a). SARs are a multi-agency locally based review which reports its findings and offers recommendations to the various agencies involved. In my current employment, I am actively involved in the arrangements that commission and oversee SARs. I am responsible for bringing the recommendations from SARs to my organisation (an NHS Integrated Commissioning Board), disseminating learning and implementing an action plan in response.

SAR reports detail difficult experiences of harm and neglect, and as a result, they may have an emotionally distressing effect on those who read them. As someone responsible for sharing the lessons learned from these reviews, I often reflect on how these distressing stories might impact front-line practitioners. As a social worker working in a senior role outside of front-line service provision, I am particularly interested in gaining a better understanding of the influence of SARs on social workers. A SAR shares a story which honours the harm and neglect experienced by an individual, however, this is also a story about the services surrounding that individual. I am curious to consider the stories about social work that are held within SARs and in return explore the stories that social workers hold about SARs. Considering the significant resources, both in terms of financial

and professional time, required to produce SARs, it is crucial to evaluate their impact on social work as well as other professions, although only social work is the profession under exploration in this thesis. This impact encompasses how these stories influence social workers' perception of their profession. The perception that social workers hold of their profession will likely act as a powerful framework that shapes their work and their professional confidence within their roles.

In this opening chapter, I will introduce my research study which explores SARs and social work. First, I will outline the purpose of the study, including the research questions, which anchor and orientate my work. As the study arises from my own professional experiences, I will then present a personal rationale as both background and motivation. Finally, I will provide context to demonstrate the value of this study and its timeliness to the available evidence on SARs. Whilst the research is of great interest and significance to me and my work, the findings and analysis are of much wider value. This research project aims to provide new evidence on the operational processes, purpose, and broader impact of SARs in social work and adult safeguarding practice. While the project will primarily focus on the influence of SARs on social workers in practice, it will also enable broader discussion on the role of inquiries in social work research and practice development. The analysis will have wider value to research on social work nationally and internationally, and across all professions involved in adult safeguarding.

The Purpose of the Study

This research focuses exclusively on one specific form of investigation - Safeguarding Adult Reviews (SARs) and uses these as artefacts in the

exploration of social work. In my view, the collective documents are worthy of further research as they represent a unique and published insight into the daily delivery of often highly complex multi-disciplinary support and care interventions for adults at risk of harm. The purpose of this study is to explore how SARs present stories of social work practice. As I will discuss in Chapter Two, the study is grounded in Social Constructionism as a theoretical approach. I am curious to understand the narratives and stories about social work that are published and circulated within the SAR process. Beyond this, I am curious to understand more about how SARs are experienced by front-line workers. In this study, I am exploring what they hear about their profession when they learn about a SAR and how they interpret these messages.

In approaching these questions, I have adopted research methods that put these questions directly to my target group. As I will outline in Chapter Three, I have chosen to use research methods that speak directly to social workers and other safeguarding professionals to hear from them as to how they view SARs and interpret the messages held within them. This data will be analysed to enable the research to report beyond the direct quotes and closer to the meaning that those statements carry for the respondents. Informed by social constructionism the analysis considers how the reported views fit with the wider context (including available research) and establishes a narrative around social work that then becomes a formative narrative for social workers. Specifically, as a social worker myself, I am curious to know how inquiries into social work practice could influence a social worker's professional identity and confidence – a concept that I will explore in Chapter Two.

In my current role, I am tasked on behalf of my organisation with participating in various inquiries and investigations which are initiated when it is felt that 'something went wrong'. The investigations that follow are on varying scales using different formats and methodologies. In some instances, it can be very quick to establish what could have happened differently. For example, if a person in a hospital happens to slip on a wet floor, it might be quickly established that more caution such as a danger sign could have been applied. In other cases, the details of the people with care and support needs' (PCSN)[1] presentation and their engagement with services can require a more complex analysis. Following this example of a wet floor, if there had been a danger sign but someone was physically unable to see it or could not appreciate this danger, then the provision of a warning sign would not adequately offset the risk of harm for some individuals. Therefore, an effective inquiry that seeks to prevent future harm often requires analysis beyond cause and effect.

SARs as a process of inquiry have been in existence since the launch of the Care Act (2014) in England, and though the exact number of completed SARs is unclear there are several hundred publicly available (SCIE, 2022b). This new format was seen by some (Braye and Preston-Shoot, 2017; Cooper and White,

[1] In this thesis I am adopting '*people with care and support needs (PCSNs)'* as the title or designation to refer to people who use social work services. I chose this for the inclusion of people who use and people who refuse those services. The term '*service user'* has been commonly used across health and social care literature as the prescribed title for people who use social work services. At time of writing social work in England is regulated by Social Work England who advocate use of the '*people with lived experience'* or '*experts by experience'* though many local authorities encourage variations on these. Over the course of my career there have been several adaptations and variations of this term. In my first role as a hospital social worker my work title was actually '*Self Directed Support Practitioner*' and the people using our social work service were referred to as '*customers*' or '*clients*' to avoid '*patients*'.

2017; Moriarty and Manthorpe, 2018; Preston-Shoot, 2018) to signal a shift of analysis away from blame for tasks not being done and more directly towards appreciating the systemic complexity that might hinder everyday safeguarding work with adults. The overall aim of a SAR is to examine how a particular set of circumstances occurred and for the relevant services to learn from this experience and seek to prevent a similar tragedy from occurring again (Cooper and White, 2017). The purpose of the SAR is not to apportion blame but to consider the collective working of each service's safeguarding procedures and how effectively services operate in partnership (Braye and Preston-Shoot, 2017). In many respects, SARs are the most available resource detailing the opportunities and challenges in managing adult safeguarding for front-line practitioners from a range of professions including nursing and social work.

SARs are produced by a senior lead professional with partnerships from stakeholder agencies and published by local Safeguarding Adults Boards (SABs). They are therefore the output of the collective work of individuals who may bring to the process their expectations of social service provision, their values of societal protection and inclusion, and their emotional engagement with the tragedy at the heart of the investigation. My research explores how through this work SARs may perform other functions for stakeholders including, for example, providing a platform to honour the individual who suffered and offering a vehicle to bring together multi-agency partners. The SAR's unique emphasis on human stories (Preston-Shoot, Cocker and Cooper, 2022) has been presented as an opportunity to critique service provision from the perspective of human rights and social inclusion (Dore, 2020).

The guidelines for good practice in SARs emphasise the participation of front-line workers (SCIE, 2015). This suggests a real potential for SARs to identify gaps in everyday practice and make tangible recommendations for many helping professions including for example social work practice which is my area of interest (Manthorpe and Martineau, 2015). The knowledge and recommendations within SARs form part of the evidence base for effective adult safeguarding practice, and therefore contribute to the available evidence base for social work more broadly. This includes both how social work is currently performing, and expectations of what might be done differently in future. This research aims to critically examine the impact of SARs on social work both in terms of how social work is presented within SAR reports and to explore with social workers how SARs influence their views of their profession and their daily work tasks.

The Significance of the Study

SARs are a relatively new format of inquiry and whilst there has been some academic interest to date, significant knowledge gaps remain. Currently, there is no specific research available considering the social worker's views on SARs, however, there is relevant literature related to learning from serious case reviews in social work with children (Rawlings et al., 2014) that can be examined as a starting point to this project. Rawlings et al's research explored social workers' perceptions of Serious Case Reviews (SCRs) and identified several wide-ranging perceived barriers to their effectiveness (Rawlings *et al.*, 2014). These included procedural issues such as a sense of being overburdened by the pace and volume of recommendations arising nationally, the tendency for an extensive

time delay between events and reports, and a critique that the recommendations appear to rely heavily on ‘all-staff training’ as a medium for change. In addition, social workers participating in the research spoke about their own experiences of being part of a serious case review raising concerns about the effectiveness of the process. A further review of the literature highlights that many higher-profile inquiries were met with criticism by social work stakeholders. This occurred particularly in instances when it was felt that the social work profession was being dismissed. For example; research with social workers reported that inquiries tended to not fully appreciate the ‘human’ aspect of social work tasks and emotional processes involved in decision-making (Rawlings *et al.*, 2014), or that inquiries unfairly blame social workers for ‘causing’ suffering (Frost, 2019). Further academic research on the issue has suggested that some inquiries can be seen to scapegoat social workers for wider system failings (Jones, 2014; Shoesmith, 2016; Frost, 2019). There has been some recent academic interest in detecting what SARs contribute to the evidence base around specific service areas including for example mental health services (Manthorpe and Martineau, 2019), but their impact on professional social work has not yet been explored. This research aims to establish and understand these narratives to appreciate the contribution that they bring to the wider context of the construction of a knowledge base about professional social work. The research outputs will provide further information about social workers’ experiences and a timely opportunity for professionals to reflect on how the work of SARs impacts their professional confidence. This is new research that brings analysis of the impact that SARs have on social work practice, and it is therefore a vital part of the SAR story that is yet untold.

Personal Context

I qualified as a social worker In Ireland in 2009, and at that time there was a government-imposed recruitment ban for statutory health and social care agencies as a national budget recovery measure. Along with a classmate I met with a recruitment team representing a local authority from the South of England who had travelled to Dublin to recruit social workers specifically to work in their adult social care services. I was successful in the interview process and offered my first professional role in a hospital social work team, thinking at the time that I would stay in England for a year or perhaps two. As might be expected I was very quickly aware of the differences in social work practice and conditions in England at that time, some of which I welcomed and others I found difficult to absorb. One significant feature dominated my thinking though, which was a sense that social work in England lacked esteem. I felt at that time an often hostile and dismissive atmosphere towards social care within the hospital's multi-disciplinary team (MDT) meetings. I became very aware of my profession being heavily critiqued in media reports. In my first post-qualifying months working as a social worker in England, I was shocked to discover that some colleagues did not openly admit their profession to strangers. Colleagues would tell me that such disclosure can invite an unwanted discussion about the failings of the profession. Less than a year later whilst travelling to work as a hospital social worker, I fell into conversation with a stranger. I heard myself stating that I worked ‘in admin’ in the hospital and realised that I too had developed hesitations about declaring myself to be a social worker. In my relatively short time as a social worker in England, I had experienced negative comments from others about social work and I had, it

seemed, developed a hesitation to identify as a member of my beloved profession with strangers.

It was around this time that a series of Government reviews of social work and social work 'reforms' were introduced. In 2007 in the London Borough of Harringay, there was a very high-profile death of a child Peter Connolly, known then as '*Baby P',* who was 17 months old. His death was related to the neglect and injuries caused by assaults inflicted by his mother and her then-boyfriend. The subsequent public inquiry documented a pattern of over eighty serious injuries from repeated assaults on him in the previous nine-month period (Haringey Local Safeguarding Children Board, 2010). Peter and his family had been known to his local social work child protection services and had visited local hospitals for treatment of injuries in the weeks before his death. His death captured media interest with several newspapers accusing the social work agency of neglecting their duty to protect children from harm. The notable tabloid newspaper headline 'BLOOD ON THEIR HANDS' suggests social workers' culpability in the causing of Peter's death (Elsey, 2010). The media interest and public outcry led to an uncommon event; the public sacking of a local Director of Children's Services, Ms. Shoesmith by a then-government minister Ed Balls, live on television. In the aftermath of this tragedy, the government launched the *Social Work Task Force* to complete a widescale review of social work education and services nationally (Department for Children, Schools and Families (DCSF), 2009). There followed the establishment of the *Social Work Reform Board* which aimed to improve social work training and practice following the findings of the task force (The Social Work Reform Board, 2010). It was during this same era that I joined the social work profession and I recall how unsettling the media

coverage around social work was for myself and my peers. There was a sense of heightened scrutiny on our profession and my colleagues, and I would share our fears that any social worker could be subject then to instant dismissal and public humiliation.

Much of this activity relates to social work practice with children rather than social work practice with adults, sometimes referred to as *Adult Social Work,* which is my area of experience. Social work with adults refers to any professional social work activity with individuals over the age of eighteen. Such social work roles exist across health and social care service settings, including for example, mental health services, learning disability services, disability, and older adult frailty, substance use and homelessness. Sadly, there have been many examples of abuse and neglect of adults who were known to social work services. For example, in 2019 a BBC panorama documentary exposed system-wide abuse and neglect at Whorlton Hall Hospital for people with learning disabilities (BBC News, 2023). In the subsequent media coverage including that of the investigation, there is scant mention of social workers or their potential role in safeguarding those at risk of harm and abuse (Disability News Service, 2023). Stories such as the events at Whorlton Hall are deeply disturbing and worthy of the broadest exploration. I mention them here simply to set the context that social workers are operational in all these service areas. It is my personal view that those practising in adult service areas are less commonly subject to media scrutiny and surveillance. However, the notion that in identifying as a social worker, a professional is adopting a toxic brand is interesting to me and it is this thinking that sparked my initial interest in this research.

My experiences as a newly qualified social worker in the South of England and my frequent shyness to admit my profession were formative experiences. I have since been intrigued by questions about social workers' role, their professional identity, and their confidence in their profession or lack thereof. In my first role as a social worker in a hospital setting, I recall a sense that other professional's expectations of social work practice were at times reduced to a limited number of typical social work tasks; namely commissioning social care packages and supporting distressed relatives. It was here that I first experienced my professional identity being socially constructed by the larger organisation around my team and I recall watching how social work colleagues sought to defend a broader and more esteemed vision of professional social work.

As my career developed and I moved into alternative roles in multi-disciplinary mental health teams, I found that having to explain or define my role was a recurrent feature. A frequent theme across these experiences was defining social work in terms of specific work tasks that a social worker might do and might not do. For example, a social worker in a mental health service does not administer injections (a common form of mental health treatment for individuals with severe and enduring mental illness). At times, these task-orientated descriptions felt reductionist and disloyal to my wider sense of my own social work identity, with its ample potential for empowering individuals and creating change. In MDT settings practitioners can stake their value by drawing on a particular knowledge and expertise imparted upon them in their initial training.

Social workers' technical expertise is derived from theories about people that stretch across multiple academic disciplines including psychology, counselling, sociology and social policy (Payne, 2019), alongside practice experience.

However, Social Work has an established theoretical framework (Maclean and Harrison, 2015; Payne, 2019) relating wider theories to the specific practice of social work and drawing on the ever-increasing research evidence base (Taylor, Killick and McGlade, 2015). One significant theory is that of 'Anti-Oppressive' practice which in brief encourages social workers to work with clients in a manner that challenges rather than reinforces socioeconomic oppression, racism and other forms of structural exclusion (Payne, 2019; Tedam, 2020). Put simply; social workers should use their status and experience to advocate for clients and push against established norms such as poverty, overcrowding, and school exclusion. This value is reflected in both the British Association of Social Worker's[2] Ethical Code (British Association of Social Work, 2014) and Social Work England's[3] statement of social worker's values (Social Work England, 2023b).

Anti-oppressive practice can be on an individual level, by supporting clients to access services and improve conditions, or on a macro level by for example lobbying and seeking policy change and addressing structural oppression. The basis of anti-oppressive practice is a call on the social worker to recognise their power and how this might contribute to reinforcing oppression, racism, and exclusion of those marginalised within mainstream society – even if this is very subtle. In following these values, social workers seek to ensure that any involvement with people with care and support needs (PCSNs) is not oppressive,

[2] British Association of Social Workers is an independent professional membership organisation for social work. Membership is voluntary. The aim of the organisation is to promote professional social work and support social workers (British Association of Social Work, 2023).
[3] Social Work England (SWE) is a specialist body established to regulate the practice of professional social work in England. Social Work England is a public body that sits outside of any government department. Registration with SWE is legally required in order to practice professional social work in England (SWE, 2023).

being mindful that for some PCSNs their experiences of oppression may be comprehensive and all-encompassing. Drawing from the experiences highlighted above, I am poised to ask whether a social worker who at times withdraws from disclosing their professional identity embraces their power sufficiently to deliver Anti-Oppressive Practice.

Doctorate of Social Work

Having worked as a social worker delivering services for a decade, I reached a moment in my personal life where I felt it necessary to take a break from front-line practice. I was a new mother and at the same time, I was abruptly thrown into the difficult challenge of coping with a severely ill parent in another country. It was a stage in my life when I could no longer tolerate the emotional work that comes with 'front-line' social work, or rather I felt that I could not offer enough emotional presence to be effective as a social worker. Upon moving to a strategic role in service commissioning, I once again found myself to be a lone social worker within my organisation of approximately seventy employees. In departing from busy front-line services, I felt a great sense of free time but also worried that I had a loosening grip on my professional purpose as a social worker. Pursuing doctoral study had been a long-standing ambition and it now fits well with my newly established pockets of time and my desire to surround myself with other social workers.

I joined the Doctorate in Social Work (DSW) programme at the University of East London (UEL) in the autumn of 2018 having very recently started in my current employment role as an Adult Safeguarding Lead in an NHS commissioning organisation. Within this new role, I continued to be driven by my core social work ethics and values and a commitment to social justice. Central to this is a desire

for social workers, myself included, to claim our social work identity with confidence and pride.

I began to consider this specific research project when I was approaching the end of the second year of the study programme. My initial research idea had been to explore social workers' experiences of social work practice within the framework of the Mental Capacity Act (2005). I was particularly interested in the experiences of social workers who were required to make best-interest decisions on behalf of persons deemed to lack the capacity to make that decision (for example persons who lack the capacity to consent to receive support with personal care). In my previous social work practice, I had felt the task of best-interest decision-making to be daunting and at times overwhelming. I felt great power and responsibility in executing these tasks. As I worked to bring those ideas into sharper focus, I was curious about the impact on social workers of this responsibility and how this power might shape their social work identity.

As an exploratory exercise, I began to read Court of Protection (CoP) case reports. The CoP is a statutory legal court in which complex or unresolved mental capacity disputes are presented for a judge to review, seek evidence, and then decide. These cases tend to be about decisions around accommodation, finances, and access to treatment but can include a broader range of issues. Examples include access to relationships with specific family members, or the ability to consent to sexual activity. Though the court hearings are private, the anonymised court reports are publicly available documents that report the judicial decision-making in each case. I first approached this work seeking case studies and in the hope of better understanding the CoP. After reading the CoP reports

and following contemporary research articles I started to write my first research proposal.

I had intended to explore social workers' experiences of working with MCA and presenting at CoP. However, before submitting this research proposal, a personal issue caused me to steer from this plan. My father in Ireland experienced a period of serious illness which led to a very sudden onset of cognitive decline. During this time, I attended many best-interest decision-making meetings within my family and with professionals about his care and support needs. This was a difficult milestone in what I was advised would become a steady health and cognitive decline. In reviewing my proposal and discussing it with my supervisor it soon became clear to me that the topic had become altogether too sensitive for me. Whilst I had hoped to bring my personal experiences to the research, I had to reflect that for this specific topic, the timing for me was not right. I was at that time sufficiently distracted by my own experience that I worried about my ability to listen thoroughly to that of others. As a novice researcher, I was concerned as to whether I had the necessary research skills or ability to overcome this distraction and I was worried about remaining committed to the project. I decided to keep the initial anchoring ideas of social workers, their experience and their professional confidence and seek to use another contemporary artefact to explore social work.

As I was newly but heavily involved in the work of SARs, I was curious to learn more from them and decided to use SARs as an artefact from which to explore social work. The previous scoping exercises concerning CoP were valuable

learning and I retained strong feelings that therein was a story about social work. I had been greatly inspired by new research about professional hierarchies and social work presence at the CoP by a law academic. I contacted this person and together we co-authored a paper discussing social work evidence at the CoP drawing on data from my initial scoping exercises. This publication was a milestone achievement for me, and it gave me enormous confidence in my research ideas, both in terms of their worth and my ability to contribute to social work research. Despite shifting my plans and repeatedly revising my research questions, I have not oscillated far from the core curiosity – which is to consider how social workers manage their professional identity amidst the various messages they receive about what social work is, what it could be, how it fails and what success looks like for social work.

The Research Questions

The research project is shaped by one central research question and three related sub-questions which I will explain briefly here. As discussed above, the SAR process is multi-agency, and the output is a story that has been created to explain the events that occurred and offer some assurance that similar events can be prevented in future. It is here that I believe a narrative about social work practice can be offered – and given the status awarded to SARs, this narrative can be powerful. I am investigating how the industry of SARs contributes to creating a broader comprehension or knowledge of social work. This knowledge

is held by social workers, professional partners in adult safeguarding and the wider public. In exploring this I am guided by the overarching question:

Q. How do SARs contribute to the Social Construction of Social Work in England?

SARs are stories that are authored to examine an individual's life experiences from the perspective of having been let down or neglected by the services responsible for their protection. The SAR's task is to describe the event's facts while also providing analysis and interpretation. Here, I am curious to understand how social work is discussed and interpreted. I am interested in the descriptors of social work and the types of evidence used to assess the quality of practice. In considering these issues I am guided by the first sub-question.

q. i. What are the identifiable narratives about social work practice within SARs?

The process of SARs is well-resourced and highly regarded in the realm of adult safeguarding. However, there is limited research evidence on how social workers perceive SARs in practice. This issue is guided by the second sub-question:

q.ii. How do social workers perceive the work of SARs?

In addition, the negative perception of social work due in part to media coverage may impact social workers' confidence in their profession. Therefore, the third sub-question is:

q.iii How do SARs influence social workers' sense of professional identity and confidence?

Further discussion on how these questions shaped the research will be presented in Chapter Four. These questions will also be revisited in Chapter Five and Chapter Six as the thesis examines the research findings that answer these questions.

The Thesis Map

This research forms part of a Doctor of Social Work degree and the project is therefore presented in a format that is like many other contemporary doctoral theses' papers. In total, there are six chapters including this introductory chapter, each of which seeks to present an aspect of the thesis. The research project arose from my experiences within my work responsibility to support SAR inquiries and then embed learning from SARs within an NHS commissioning organisation. To develop this first-hand experience into a robust thesis, it was necessary to orientate the research questions within a review of the currently available literature surrounding this topic. In Chapter Two I initially present a review of the literature concerning the social construction of knowledge, followed by a review of the broader literature concerning enquires before considering the literature about SARs and then finally bringing this evidence base to the available analysis of social work and social workers' professional identity. In Chapter Three I begin to demonstrate the development of the research project by first exploring research theory and then justifying the practical choices I made in this research design. This chapter also outlines in detail the practical steps taken for data

collection and analysis during the fieldwork stage of the project; this includes some early identified limitations within the project and an exploration of researcher positionality. In Chapter Four I present the findings from my data collection and analysis. These are reported sequentially as I first present results from a comprehensive documentary analysis, followed by initial findings and development of the early themes and then finally the results of the broad reflexive thematic analysis. The findings chapter summarizes six key themes identified in the field research and connects them to the analysis from the literature review while acknowledging the unique research conditions. Chapter Five presents an integrated discussion of how the evidence attempts to answer the research questions outlining the central argument that SARs contribute to the social construction of the social work role. This penultimate chapter highlights some of the political and emotional contexts that may infuse inquiries and seeks to demonstrate the unique impact of SARs on the knowledge of social work in England. The final chapter presents an overall summary and appraisal of the research. In this sixth and last chapter, I discuss how effective my research was in addressing my initial research questions, identifying limitations, and offering my conclusions. In addition, I share some recommendations for practice concerning SARs and future research. I include some comments on how this learning will be shared and disseminated to maximise impact.

Each chapter is distinct and internal headings are used to guide the reader. However, the research process was not as linear as this order and so there are moments when ideas or references may flow backwards and forwards across the chapters. As a social worker myself the research is unapologetically collegiate and purposefully defensive towards social workers. My warmth for my chosen

profession was embedded within the thesis and evidence of this is threaded throughout the text that follows. This undoubtedly impacts the research, accepting that I will be consciously or subconsciously drawn to evidence that supports or celebrates the capacity and potential of social workers. I have noted this personal influence at various intervals throughout the thesis where relevant.

Chapter Summary

This opening chapter introduces the research thesis using broad parameters. To set out the initial context for the paper. I have introduced myself as a researcher, the research project, and my wider understanding of the relevance of this study. I embarked on this project as an experienced social worker, but a novice researcher driven first and foremost by a curiosity to explore the experiences of my professional peers. It has been my long-standing view that social work in England lacks the level of esteem often afforded to other professions and I am keen to understand how this phenomenon impacts social workers in their practice. As my professional work involves retrospective investigations and inquiries, this area quickly presented itself as a pragmatic opportunity from which to probe further into contemporary social work in England.

In introducing the research, I have presented a preliminary understanding of SARs and their contribution to the evidence base for social work in capturing complex adult safeguarding practice. From my professional experience I argue that given their respected status via publication, they are therefore a contemporary artefact worthy of exploration. Utilising SARs as a research tool to explore adult safeguarding practice is not novel, however to date, there has not been any review of SARs with a unique focus on their presentation of social work. Beyond this, there has not been any research interest in how SARs impact social

workers either about their tragic content or their ability to offer practice recommendations. It is in identifying this gap that I have developed my research questions. The presiding question – that of exploring the contribution of SARs to the social construction of social work in England - guides each of the chapters that follow. This question requires further exploration, deconstruction, and clarification but in essence, I will be exploring the stories that SARs hold about social work and equally the impact of these stories on social workers themselves.

In the chapters that follow, the thesis seeks to integrate my research findings with previously established literature and knowledge, mindful at all stages of the subjective gaze that I apply both consciously and subconsciously. As noted above, the work of producing new SAR reports is active in local authorities across England with a continual stream of new publications. This research is therefore a timely addition to the knowledge pool in seeking to elevate the voice of social workers within this developing evidence base for adult safeguarding practice.

Chapter Two: Literature Review

The literature review chapter seeks to demonstrate how the examination of existing research led to the identification of some under-explored aspects of the impact of SARs and the development of the research questions that guide this project. My overarching research question is to consider how SARs might influence the construction of knowledge about '*What is social work*?' and therefore this chapter begins with an academic exploration of knowledge creation. From this base, I will then explore the theory of social constructionism, offering this as a theoretical framework for the research. I will then introduce a brief historical context for contemporary health and social care inquiries, considering their functionality and the role they perform for stakeholders. This broader knowledge of inquiries offers the context from which to explore SARs and an understanding of what SARs might be expected to contribute. In this light, I present a very brief synopsis of recent academic research that utilises SARs as a key informant. I will demonstrate how SARs provide insight into adult safeguarding and social work practice in England. The explicit purpose is to consider how the narratives about social work that are shared within SARs, might contribute to creating knowledge of social work, both for social workers and the wider audience. Below are the highlights of this exploration. Additionally, I examine research on the identification of professional identity and confidence in social workers and consider how socio-political narratives can inform this. Based on the available evidence, the literature review indicates that there are still gaps in current research. One of the untold stories is the voice of social workers regarding the stories held about their profession within SARs.

The Method of the Literature Review

The literature review began in the early conception stages of the project – before establishing the research questions and sometime before seeking ethical approval for the research. At that early stage, the literature was predominantly a scoping exercise. I inputted phrases such as 'Learning from Safeguarding Adult Reviews' and 'Social Work Inquiries' into the UEL library search facility but also common online search engines including Google Scholar and EBSCO host an academic journal search engine. In this scoping stage, I included only UK-based research dating from approximately 2010 onwards. After finding it overwhelming to manage my literature, I started using www.zotero.org as an online filing tool to keep a list of resources that I had read. In preparing my initial university registration application, I began shaping research questions to scope literature in three core areas:

i) Safeguarding Adult Reviews and any evidence of their use in contemporary research.
ii) Inquiries that relate to areas of health and social care practice
iii) Professional Social Work

I created a tag for each of these on the Zotero.org platform and made use of the option to record keywords for example '*newly qualified workers'* or '*media attention*' – which greatly assisted in the filing and organising of information.

My approach in mapping the literature for each of the above topics was broadly similar but with some differences. In the first section exploring literature specifically relating to SARs, I found my searches directed me mostly towards two key journals. I used a 'backwards snowballing' process to scour for useful

references within key articles (Sayers, 2007). This task did not require any exclusions as all evidence relating to SARs was deemed relevant and useful. For the second section exploring the impact of inquiries in health and social care, I initially used to same search tools. However, in my Google search, I encountered an academic conference presentation online that led me to several useful resources including two key texts which present details on the development of modern health and social care inquiries. (Butler and Drakeford, 2003; Stanley and Manthorpe, 2004). From these resources, I could trace suitable references for academic contributions on the key points of interest. In addition, I used them as the basis for 'forward snowballing' sourcing later articles via searching for papers that cited these texts (Sayers, 2007). The volume of inquiry reports available far exceeded my capacity but I included a selection based on their closer relevance to my topic, and offering valuable analysis. This process was refined throughout the writing stage.

Whilst the first two sections listed here were formative within the literature review, the third part exploring Professional Social Work was substantially more iterative in process. The theme evolved throughout the research project, and I was continually adding new papers, particularly as my findings developed. The final topic of Professional Social Work required searching a broader range of resource platforms starting with social work textbooks and contributions by social work theorists. At this stage, I also sought literature from media outputs including newspapers. The UEL librarian was very helpful in assisting with using the university newspaper search function. This help was particularly relevant when I was seeking to explore media coverage following specific events such as the

death of a named child. Again, there were some key texts discussing the influence of media on social work in Britain and I was able to use the bibliographies in those to source further literature. This part of the literature review was focused on gathering evidence to support my themes and demonstrate some gaps in current knowledge. For this reason, I included literature related to social work practice with children – as these studies highlighted key issues which I felt would be interesting to explore from the perspective of social work with adults. Whilst the focus of this study is social work in England, it was useful to include literature which explores social work in other countries in part to benchmark which parts of the role contribute to the construction of a professional identity. The issue was searched using key terms such as 'social work professional decision making', 'social work professional confidence', and 'social work identity'. The search results provided numerous resources which led to additional resources and my task was to synthesise these papers to take the most relevant evidence.

The Creation of Knowledge

As suggested above, SAR reports are artefacts which collectively hold a knowledge of the complexities in contemporary adult safeguarding practice. The SAR author is tasked with investigating the decision-making at the time of the events, given the information that was available to the practitioners at that time. This brings the additional advantage of hindsight knowledge to any inquiry, and it is through this lens of tragedy that the story of the SAR is created. The information published in a SAR report relates both to objective facts (for example the certainty that someone died) and subjective content such as reports of

distress or suggestions of actions that could have occurred (for example policy guidance on best practice) along with expressions of opinion and preference.

In seeking to further explore this knowledge held by SARs, it is helpful to first deconstruct and examine what is understood by knowledge. Here I draw on the knowledge distinctions presented by John Searle who explored the relationship between the tangible physical reality and a perceived social reality. As a framework for exploration Searle (1995) suggests that knowledge can be categorised between '*brute facts',* that is objective information, and '*mental facts',* information that is subjective (Searle, 1995). For Searle, '*brute facts'* are non-negotiable, for example, that money is physically made of paper and coins, whereas '*mental facts'* depend on a shared social understanding, for example, the value of money, and therefore our social relationships are a force that create negotiation around these 'mental' forms of knowledge.

In a retrospective inquiry such as a SAR, the report will present some of the known facts about an individual's life, for example their age, diagnoses and living arrangements, as well as facts about service provision, for example the date that a letter was sent offering an assessment. However, the SAR will also describe aspects of alternative events that could feasibly be expected given the context of the health and social care agencies involved. Alongside the fact of the date that a letter was sent, the SAR might include a narrative about how that practice of sending a letter could have been managed differently. For example, a SAR report might suggest how the agency could have worded the letter in a more accessible language or perhaps have followed that letter with a phone call if they did not

receive a response. These ideas about the potential or alternative interactions between the letter and the recipient can be understood to be within the realm of ‘mental facts’. It is here within this realm that a subjective narrative about professional practice begins to be negotiated. As I will explore further in Chapter Four, my findings report that many of the SAR authors view the task of authoring a SAR to be one of creating an impactful narrative from the available facts.

In the SAR report ‘*JoJo*’, it is recorded that a GP visited JoJo on the night before she died, but did not take any physical observations such as blood pressure readings (Winters, 2019). These are both ‘brute facts’ that are objective. However, the fact that physical observations were not conducted may be insufficient information. The inquiry may be interested to learn why those investigations were not conducted. Whether this was because the GP made a clinical decision that observations were unnecessary, or perhaps the GP did not personally want to take observations, perhaps the patient refused to consent, or perhaps the environment was not conducive to physical observations. By inviting the practitioner to contribute to the investigation a broader story emerges, that greatly alters the narrative and offers a wider understanding of the events of that evening. In this instance, the GP stated that JoJo was physically aggressive and refused any physical contact with the GP on the night in question and it was deemed more clinically appropriate to conduct these assessments in a hospital setting (Winters, 2019). Here the subjective knowledge of the events re-told by those involved shaped the SAR inquiry, which in turn shaped the objective artefact – the SAR report. This example of a ‘mental fact’ contribution to the

construction of knowledge can for this purpose be most helpfully understood under the theoretical framework of social constructionism.

The Theory of Social Constructionism

Social constructionism is a relativist philosophical perspective (Andrews, 2012). For social constructionists, there is no objective truth but rather there are versions of reality that individuals construct from their interactions (Berger and Luckmann, 1966). Social constructionism as a philosophical theory seeks to understand social life as an experience that is created by the interactions between individuals and how those individuals 'construct' an understanding of those interactions (Giddens, 2009). This is not to dispute the events or '*brute facts'* aka Searle (1995) but rather to say that the meaning of each event is constructed through the language of its description. As individuals interact using language, this has been a focus of enquiry for social constructionists including Emmanuel Levinas and Jurgen Habermas who sought to establish an understanding of how communication itself can create reality (Habermas, 1991; Levinas, 2005). In social constructionism, it is not the case that language expresses thoughts but rather language offers a framework that makes it possible for individuals to think and appreciate concepts – arguably through these processes language *creates* thoughts (Burr, 2015). The language used to describe an event informs how we interpret its meaning. Therefore, to draw on the above example in describing the GP arriving at a patient's home, it could be stated that:

	Statement reporting the event	Connotations evoked
A	The GP called to the patient's house	A voluntary benign and friendly act

B	The GP conducted a home visit on the patient	A more obliged act of duty
C	The GP gained entry to the patient's property to assess the patient	An unwelcome act.

In this example, the choice of language used can steer the reader towards an understanding of how power might be experienced in the relationship between the two people who share the event. This capacity of language to denote power has been interrogated by many linguistical scholars including the post-modernist philosopher Michael Foucault who offers his 'power-knowledge' theory. Foucault suggests that in a post-modernist evolved society, power is not simply physical strength but rather it is located within knowledge – those who have specific knowledge can hold power over those who don't (Foucault, 2002). For example, medical doctors who might have the sanctioned power to decide if a person should be admitted to a hospital use their knowledge of medicine, which is not universally understood by laypeople, to assert and defend their decision regarding hospital admission. For Foucault, in interrogating a form of knowledge (for example medical knowledge), it is important to also interrogate the power afforded to the owner of the knowledge by having this knowledge, and therefore the meanings attached to the knowledge. Following the example of a decision to admit a patient to a hospital, the doctor's knowledge about the patient will carry different meanings than another individual's knowledge about the patient. It may be almost impossible for a non-medical person to acquire the knowledge needed to match the medic's power concerning this decision. Following repeated similar interactions, the medic and the non-medic may come to a silent agreement that the 'doctor knows best' when it comes to hospital admission decisions.

It can be argued that those who hold power have the authority to create new knowledge. Following the above example, the surrounding institution that is the hospital might create a set of standard admission criteria. Therefore, decision-making about new patients will occur within the context of a set of admission criteria that have been created by those with the most powerful knowledge within the hospital system. For social constructionists, knowledge is created through language and one such form of 'knowledge creation' is the process of attaching meanings to language (Burr, 2015). Foucault offers the concept of 'discourses' referring to the meanings or shared understandings that society attaches to a particular use of language (Smart, 2004). In essence, discourses are stories that evolve using language to denote shared understandings of socio-political or even moral judgements that become attached to language. For example, in early British welfare policy references to '*abandoned mothers'* or '*unmarried mothers'* brought connotations to the fact of a term used to describe someone who independently raises a child – known as a 'lone parent' in contemporary British culture (Paton, 2012). Whilst the term is descriptive, the societal conversations about lone parents are discourses – descriptors that are infused with power i.e., '*abandoned*' denoting something weak and unwanted.

Foucault used the concept of discourses as a research tool to track and interrogate how particular use of language may create and attach meanings such that power can be asserted by one entity over another. This use of discourses he refers to as *'a Genealogy*' which is a method of examining the evolution of discourses on a particular theme or topic to establish how societal sentiments

may have changed over history (Smart, 2004). Foucault's '*Madness and Civilisation'* is one such genealogy which explores the historical evolution of discourses relating to the treatment of mental illness – from violent dangerous untouchables to fallen people with a loss of spirituality, to people who are weak and needy, to patients who need care, to people who can experience illness and benefit from treatment (Foucault, 1989). This genealogy method has been adopted by others who value a social constructionist approach to social research. Using '*discourses*' and '*social work'* as search words in an academic search tool *EBSCO Academic Search Ultimate* via the UEL library. I identified several papers utilising a social constructionist approach. My highlights from this include a study on the impact of children's safeguarding discourses on sports education (Garratt, Piper and Taylor, 2013) and a study on the discourses surrounding welfare 'reform' in Britain (Burman et al., 2017). In addition, I note a recent study examining the development of social policy concerning social work education in Britain (Hanley, 2019) containing ideas which are referenced throughout this thesis. The common thread across all studies utilising a social constructionist framework is an emphasis on where power is held within the narratives surrounding a particular topic.

The purpose of this research study is to explore how SAR reports contribute to knowledge of social work, and how this new knowledge impacts social workers' practice knowledge. As noted above, a SAR inquiry is commissioned by a local SAB and authored by an appointed independent safeguarding expert. Although practitioners are involved in the SAR process, the SAR report is written by a senior official who writes about the work of junior staff and the structures that

guide their work. In Chapter Four, my findings demonstrate that SAR authors emphasize their role as storytellers and their hopes that the stories can influence readers. Therefore, a social constructionist perspective provides an appropriate framework to recognise the power embedded within SARs and to critically engage with social workers' comprehension of their work.

SARs are human stories, and by their very definition, they report on a tragedy. A SAR report will seek to highlight examples of good practice (SCIE, 2015) but the opening premise is that an individual who was entitled to support experienced harm and neglect, often death. From a social constructionist perspective, any discussions within SARs about social work practice are positioned by the discourses of '*What went wrong*?' or '*Did we fail*?'. Several researchers have warned about the limitations of exploring social work from this position suggesting that elevating dominant discourses of harm and failure might be damaging to social work practice (Kettle, 2018; Martineau and Manthorpe, 2020; Preston-Shoot, Cocker and Cooper, 2022). If the only available narratives about social work are negative, will social work practice wisdom be fated to be negative from the outset – possibly tipping a curve towards 'defensive practice' (Preston-Shoot, Cocker and Cooper, 2022)? 'Defensive practice' is the term used to describe professionals whose decision-making prioritizes self-protection over supporting PCSNs with positive risk-taking (Whittaker and Havard, 2016). An example of this might include a social worker in adult social care actively promoting the use of residential care homes rather than care in the community for PCSNs as the latter comes with greater complications and risk of adversity. In my findings chapter I report testimonies from social workers who comment on awareness of their own

occasions of defensive practice and the factors that may influence this. This includes instances where respondents pursued social work interventions to demonstrate organisational efforts, rather than serving clients' best interests.

A social constructionist approach can be very valuable in the field of social work. It allows analysis of the knowledge base provided by SARs and an understanding of how social workers use this knowledge to create their narratives. This study focuses on tragic stories reported in SARs, but it is important to remember that these stories should be considered within the context of a wider story about social work – albeit that the wider story may not be readily available. By critically examining established knowledge, a challenge can be offered to the power dynamics that exist within it.

The Origins of Contemporary 'Inquiries'

It is difficult to trace the origins of 'the inquiry' as a method to understand and prevent the abuse of adults who receive care and support services. Research cites the inquiry following the death in 1944 of a child Dennis O Neill as the first widely known inquiry into neglect and abuse of a child in foster care (Hopkins, 2007). However, several researchers point to the 1969 '*Ely Hospital'* report as the first large-scale modern inquiry into allegations of widespread abuse in an NHS care setting (Walshe, 2002; Butler and Drakeford, 2003). The Ely Hospital in Cardiff first opened as an industrial school in 1862 and evolved as an institution in the same buildings into a long-stay hospital for adults with diagnoses concerning '*idiocy*' (Butler and Drakeford, 2003). In August 1967 a member of the care staff at the hospital 'Mr XY' released an anonymous whistle-blowing

statement which was published in the News of the World Newspaper. The statement did not name the institution but set out disturbing allegations of brutality, theft and degrading 'care' practices (News of the World, 1969). The following extract is distressing to read:

> 'A' takes a thick stick on his rounds and threatens patients with it if they are not quick enough. About four weeks ago he had a number of patients in the yard and told them he was going to give them a bath. He ordered them to strip and started hosing them down with cold water. One patient was screaming.
>
> 'A' caught a sight of another nurse watching him from a balcony and he handed the hose to Jonson. Jonson is mentally retarded but a powerful man. He is allowed to beat other patients on the slightest excuse and without any remonstration from the staff. When they sit in a line while waiting for a shave, Jonson will walk along the line, slapping them.
>
> The senior nursing staff often have the best cuts of meat and so on before they are issued to the patients. All the staff have breakfast on the hospital when they are not supposed to. On the days when each patient should have an orange, an apple and a banana, they are lucky to get just an orange between two of them. The amount of foodstuffs stolen by the staff is unbelievable and this applies to the sweets, fruit and other luxuries brought in for the patients…..At the beginning of May, clothing was brought into the hospital for distribution to patients. The senior staff shared it amongst themselves…….There are two doctors, the head psychiatrist and a JHMO. I do not think they care too much….. Patients are being beaten quite regularly when a little gentle persuasion is all that is necessary to obtain their co-operation .

Two years later, the '*Ely Hospital Inquiry Report'* which upheld the abuse allegations was presented to Parliament (Hansard Entry, 1969)Included within the report were recommendations about staff training, system capacity and additional resources within the hospital but also calls for the establishment of a robust internal complaints system and external system of hospital inspections (DHSS, 1969). By including external agency activities such as routine inspections, the report points to a wider and more systemic understanding of and responsibility for experiences of abuse and neglect. With this systemic leaning,

the Ely Hospital investigation could be viewed as the gateway to contemporary understandings of how poor quality and poorly monitored care can imbed cultures of malpractice (Butler and Drakeford, 2003) which are in themselves abusive but also foster conditions for extensive abuse and neglect (Stanley and Manthorpe, 2004).

In the decades that followed there were regular inquiries of varying size and scale where it was suspected that an individual child or adult experienced significant harm or abuse. Many inquiries were conducted by local agencies however for abuse of multiple persons in an institutional setting, often it is the central government that commissions an inquiry and sets the Terms of Reference. From the publicly available inquiry reports, I have chosen one example from each of the last three decades to illustrate the persistence of this practice over the lifespan of modern health and social care systems and the current workforce. I was familiar with the titles of each of these inquiries before conducting this research, most likely due to my own training and learning experiences.

- *The Leeways Inquiry Report* of 1985 was published after an investigation was launched to examine the events that occurred at Leeways Children's Home - a local authority establishment in South London. The facility's Officer in Charge, ‘Mr. Cooper,’ was convicted of offences related to taking pornographic photographs of the children under his care. The report was prepared by the London Borough of Lewisham (Lewisham Social Services Department, 1985).

- *The Inquiry into the Care and Treatment of Christopher Clunis* (1993) following the fatal stabbing of Jonathon Zito by Christopher Clunis who had no prior knowledge of him. Clunis was a person with long-standing mental health needs. He was found to have been living in squalid conditions, with evidence of non-compliance with prescribed medication for a substantial period before the assault. In a concurrent criminal trial, Clunis was found not guilty of manslaughter for reasons of insanity. The report stated that many professionals and their agencies including social workers, the police and hostel staff shared collective responsibility for allowing the events that had unfolded (Ritchie, 1994).

- *The Munro Review* (2011) reported the outcome of the inquiry following the death of a child Peter Connelly. The inquiry sought to consider whether the local authority had the capacity and ability to implement the reforms recommended in a previous inquiry the Laming Review (Munro, 2011). The *Munro Review* and its recommendations led to many changes including the establishment of a government position of Chief Social Worker role (Samuel, 2011).

Throughout the decades of inquiries in health and social care, there are common threads of a narrative describing a tragedy and a sequence of events before that. Depending on the profile of the inquiry, some such as the abovementioned three examples have had the power to make recommendations to the central government and therefore carry implications for practice nationally. Most contemporary inquiries will seek to establish some clarity on whether there were

‘missed opportunities’ to prevent harm and then the report holds the power to make recommendations to the relevant agencies (Stanley and Manthorpe, 2004). However, as I will explore subsequently, there has been some scepticism around the true impact of inquiries, largely due to the awareness that findings and recommendations of different inquiries are often quite similar. For example, a lack of communication between agencies was a key finding fifty years ago in the health and social care inquiry following the death of a child Maria Colwell in 1973 (Minty, 1994) and has featured recurrently as a key finding in inquiries in every decade since (Butler and Drakeford, 2003; Reder and Duncan, 2004; Powell, 2019). It is therefore worth considering whether inquiries in their current form persist for broader purposes beyond delivering practice recommendations.

The Purpose of an Inquiry

As stated above, inquiries generally arise from experiences of harm and often tragedy, and therefore the work of an inquiry is likely to be emotionally charged. Individuals and stakeholder agencies may hold varying ideas about the true purpose of the inquiry, and these differences are worthy of consideration. For example, those closest to the events may have different reasons for participating in an inquiry investigation. An individual might engage in the inquiry to represent a relative who experienced harm, or as an employee participating by the requirement of their employer; from these two positions, these individuals are likely to view the purpose of the inquiry differently. It is helpful to consider these as a context for analysing the stories held within an inquiry report and the potential impact of these stories. From an initial examination of the literature, six key areas of purpose or rationale for an inquiry stand out (Walshe, 2002; Butler and Drakeford, 2003; Cooper, 2018), and these are:

i) Establishing the facts

An explicit purpose of an inquiry is to seek to establish what happened to the individual involved. A family's cry to understand 'the facts' can characterise an inquiry as a truth-finding 'mission' tasked with challenging organisations and 'uncovering' information. Writing about the inquiry into the death of their son, Paul and Audrey Edwards reported:

> Our immediate reaction was to seek a full disclosure of all the facts surrounding the death of our son. It was… a desire for knowledge for its own sake not for vengeance or legal action' (Edwards and Edwards, 2004:41).

Oversight agencies including the central government may launch an inquiry with the declared aim of finding out what happened, often described as 'seeking answers'.

ii) Justice

For some, in establishing the facts, an inquiry should seek to establish who is at fault, or which organisation is to blame, and from that to seek appropriate retribution for those who have been hurt. For example, in a ministerial foreword to the Department of Health Report on the *Winterbourne View Inquiry*, the then-minister Norman Lamb stated that: '*first and foremost, where serious abuse happens, there should be serious consequences for those responsible'* (Lamb, 2012:1).

An inquiry may be considered just to honour the experience of those involved and make changes as a tribute to them, even if blame is not established. This can be made explicit by the decision to name the report after the individual at the centre of the events and often includes a photo of them. Some examples chosen from a simple google search of 'safeguarding inquiry' include '*The Murder of Steven Hoskin: Serious Case Review'* (Flynn, 2010); *The Life and Death of Elizabeth Dixon: A Catalyst for Change* (Kirkup, 2020); and *Thomas Oliver McGowan's LeDeR Review* (Ritchie, 2020).

iii) <u>Prevention</u>

For many stakeholders, the main purpose of an inquiry is to prevent future harm. This requires that the previous harmful events are fully understood, and suitable recommendations established, to prevent any such circumstances from repeating. In this spirit, a SAR in the London Borough of Hackney '*Ms. F'* closed with a direct quote from the lady at the centre of the inquiry who comments that: '…*it must not happen again, God no!*' (Gomez, 2019:11)

At a national level, *The Bristol Inquiry* (2001) produced recommendations for the development of clinical governance in the NHS, as a measure to prevent future incidences of harm. These recommendations were cited by the then government in their rationale for creating the Commission for Health Improvement (Department of Health, 2002).

iv) Catharsis or therapeutic exposure

Some observers argue that inquiries fulfil a therapeutic purpose for those involved and often for the wider society. Inquiries can be the mechanism for those not closely involved to understand and come to an acceptance of the shocking events that occurred – having a cathartic effect (Cooper, 2018). For example, the disturbing case of '*Chadrack*' a four-year-old boy from London whose mother passed away suddenly resulting in him being alone in their flat until he died of starvation two weeks later. Their family home was in a large tower block and many neighbours who were interviewed by journalists spoke of their sense of trauma that they were unaware of his plight and therefore unable to rescue him (Davies, 2017). In such instances, one purpose of an inquiry can be to create a formal space through which this trauma can be shared, and people can be supported to make sense of their experience.

On a practical level, an inquiry could be an opportunity for reconciliation and resolution, for example, by bringing together different individuals or agencies who might be blaming each other for events. Williams and Kevern (2016) refer to this process as a 'symbolic purpose' of inquiries, noting the challenge faced by inquiries in trying to manage the stakeholders' emotionally driven content therapeutically but also deliver practical recommendations (Williams and Kevern, 2016).

v) Political Considerations:

Some observers point to the political influences surrounding inquiries suggesting that the process of holding an inquiry may be utilised by an agency for political gains (Powell, 2019). For example, the purpose of the inquiry might be politically driven, so that an organisation including the central government can demonstrate that they are responding to a tragedy, or perhaps using an inquiry to bring about change.

Following the public inquiry into allegations of abuse of patients in the care of *Mid Staffordshire Hospital (*Francis*, 2013)*, the government at that time published a report to outline their response to the official investigation report. The report entitled '*Hard Truths'* opened with a statement by the then Minister for Health declaring that: '*First, we need to hear the patient, seeing everything from their perspective, not the system's interests'* (Hunt, 2014:1). Arguably by placing the minister's comments at the front of the report this could be seen as being politically motivated and an attempt to demonstrate leadership and decisiveness.

vi) <u>Reassurance:</u>

An inquiry might be commissioned with the hope that its outputs will rebuild public confidence in a particular service area– either locally or nationally. This purpose might be achieved by demonstrating a thorough investigation and explicitly outlining changes. The recent *Ockenden* inquiry into failings in maternity services opens with some positive comments welcoming government funding for '*workforce expansion*' in maternity services and learning that could be applied

nationally to enhance services (Ockenden, 2022). An inquiry might also seek to reassure the public that practitioners already have the skills and expertise but require more robust safeguarding systems. For example, the *Mid Staffordshire Hospital Inquiry* (Francis, 2013) led to national reforms to protect practitioners who may see problem areas and seek to become whistle-blowers (Powell, 2019).

In presenting this typology above, immediately it is evident that individual stakeholders might expect an inquiry to attempt to fulfil one, some or all these purposes. Perhaps some types of inquiries or methodologies might rise to this challenge more effectively. Given the potential for divergent aims, it is arguable that some inquiries might be debilitated by too many competing objectives. This issue was not reported explicitly in my research findings. However, as I will discuss in Chapter Four, some SAR authors did point to conflictual issues such as managing families' expectations that a SAR might specifically apportion blame. It could be argued that in some cases, objectives may have a hierarchy, leading to power dynamics influencing both the process and outputs. This issue is reported on more tangibly in Chapter Four as SAR Authors suggest that the impact of their work can be limited by what the SAB choose to do with the information. SARs are one specific contemporary form of inquiry created by the launch of the Care Act 2014. This research aims to draw on the knowledge base within and around SARs, therefore it is useful to first explore what constitutes a SAR – its origins, defined purpose and declared functions.

The Origins of SARs - The Care Act

The Care Act (2014) launched widespread legislation reform across England and Wales concerning the provision of care and support services for adults who require assistance to live independently. This includes older adults, working-age adults with physical disabilities, family carers, individuals with learning disabilities and anyone who for reasons of health, ability or mental capacity requires assistance to manage the tasks of daily living. The Care Act reforms led to significant changes across all aspects of adult social services work with an emphasis on PCSNs as citizens entitled to maximise their independence, well-being, and inclusion (Cooper and White, 2017).

The legislation includes a requirement to proactively seek to safeguard those at risk of harm and abuse. The Care Act defines the safeguarding duty towards adults as the requirement to protect an individual's right to live safely, adding an onus on organisations to work collectively to prevent abuse and neglect, whilst promoting an individual's personal wellbeing (Department of Health, 2014). Included in this statutory provision is the requirement for all local authorities in England to set up a local SAB (SCIE, 2015). The SAB is composed of core members, directors from the local authority, senior members of local police and the senior NHS representatives. However, SABs often call on other agencies to provide representation for example; fire services, housing agencies and voluntary sector organisations (SCIE, 2015). Among the numerous responsibilities of each local SAB, is the requirement to commission Safeguarding Reviews (SARs) following the death or significant harm to an adult in their area and in line with certain criteria.

What is a Safeguarding Adult Review

A SAR is commissioned when an adult with health and care needs has died locally or been seriously injured, and there appears to have been a failure by relevant agencies to work together to safeguard that person from harm (SCIE, 2015). A pre-requisite condition for a SAR is that significant harm has occurred and that it is thought that the harm could have been prevented. The individual at the centre of the SAR should be identified as having had care and support needs at the time of the incident, though it is not essential that they did receive care and support. In some instances, the SAR subjects were not in receipt of services and suffered life-threatening neglect. In other cases, the SAR subject was heavily involved with agencies who provided care and support but for various reasons, the agencies involved did not safeguard them adequately from harm. One such example, '*Ms. Z'* quoted above was the subject of a Safeguarding Adult Review commissioned by City and Hackney SAB in 2019. At the time of the incident, Ms. Z was 45, a mother of two adult children, living with the effects of a progressive illness. Ms. Z's mobility was compromised to the extent that she was limited to spending her day in bed, where she received care. She was supported by a comprehensive social care package of carers attending four times a day to support her personal care needs, and nursing care through a community nursing service. In addition, there was a live-in carer provided on alternate weeks. Ms. Z had been prescribed a pressure-relieving mattress to enable her to avoid injury related to skin breakdown and pressure sores, which are common risks for individuals who are unable to move position easily. It was reported that on a given day the pressure-relieving mattress malfunctioned and despite efforts by carers

and nurses to have it repaired or replaced, this was not achieved. Laying on a hard surface for over six days caused Ms. Z to develop multiple pressure ulcers which led to sepsis and a hospital admission lasting several months (Gomez, 2019). In this SAR, Ms. Z and her family were involved in the process, including participating in setting the terms of reference for the inquiry.

Though there are statutory guidelines that shape the processes around the commissioning of SARs (Department of Health and Social Care, 2022), there may be elements of variance across different SABs. The set statutory criteria for a SAR include that an individual experienced significant harm and that there are concerns that agencies could have worked better together (Department of Health and Social Care, 2022). It is local SABs who are tasked with deciding whether a set of circumstances meets the criteria for a SAR investigation or not. Decisions around specific cases might relate to aspects such as the cause of death or similarities between cases. In some instances, SAR panels have commissioned one SAR inquiry examining the experiences of a few people; for example '*Joanna, Jon and Ben'* (Norfolk Safeguarding Adults Board, 2021). Upon receiving the presentation, the SAB members then have the discretion to decide whether a case proceeds to a SAR inquiry and what level of inquiry is most appropriate.

In many cases, the individual at the centre of the SAR will be deceased and the circumstance of their death was key to triggering an inquiry, for example in the case of a young woman 'Ms C' in London who was known to mental health and housing services at the time when she died (Pearson, 2019). In such cases,

family or friends of the deceased may be invited to participate in the inquiry. In some instances, those at the centre of the SAR and their supporters have no knowledge of it. For example, ‘Drina’ a lady with a learning disability who was thought to have been the victim of slavery, sexual abuse and exploitation was uncontactable by the inquiry and presumed to be living abroad (Byford, 2017).

The statutory guidance for SARs states that the overall aim of a SAR should be to establish the learning and development needs that can improve service provision and seek to prevent a similar tragedy from occurring again (Department of Health and Social Care, 2022). When a SAB commissions a SAR, general best practice advises that an independent author is assigned to lead the review and produce the final report. The legislation requires a minimum publication of key findings and recommendations in the SAB’s annual report. SAR authors tend to have a clinical background in adult safeguarding and an understanding of the strategic landscape of adult safeguarding work. The Social Care Institute of Excellence (SCIE) has been supporting the work of SARs in various forms including the creation of a set of Quality Markers which were subsequently updated (SCIE, 2022a). SCIE guidance sets out several directives to steer SABs and SAR authors towards adherence to the proposed quality markers. These directives include:

- A focus on learning not blaming.
- A need to clarify how organisational factors can cause incidents.
- Use of established methodologies for the investigation that avoid hindsight bias.
- Being explicit about the reality of service provision. (SCIE, 2015).

To date, there have been several hundreds of SARs completed, though the precise figure is unknown. Most reports are published on each relevant local authority website (Preston-Shoot *et al.*, 2020). The establishment of a central repository of SARs has been initiated by both SCIE[4] and the organisation for National Health Service Education and Improvement (NHSE&I)[5].

Appraisal of SARs to date.

The launch of SARs as a new process was significant as they were expected to shift the format of investigations in adult social work practice away from adversarial serious case reviews (SCRs) and towards a more systemic inquiry format. This new format was seen by some to signal a shift of analysis away from tasks not done and more directly to the nuanced complexity of everyday social work with adults (Braye and Preston-Shoot, 2017; Moriarty and Manthorpe, 2018; Preston-Shoot, 2018) with risks understood to be shared across agencies (Cooper and White, 2017). To date, there has been a growing interest in academic research exploring SARs. This has predominantly involved using SARs as an evidence base to learn about how effective adult safeguarding practice is in specific service areas, or to explore what constitutes best practice. I had been aware of the contributions of Professor Michael Shoot having attended many seminars and learning sessions in which he presented analysis of SARs. I was aware that many of his papers are published in *The Journal of Adult Protection*

[4] SCIE – The Social Care Institute for Excellence is an independent Think Tank offering policy guidance and strategic development to agencies in the social care sector (SCIE, 2023a)

[5] NHSE & I – National Health Service England and Improvement is the strategic governing body that leads and maintains oversight of the commissioning of NHS services in England (NHSE & I, 2023)

and therefore searched this journal but also *EBSCO Academic Search* using the term '*Safeguarding Adult Reviews'.* Here I note research papers identified using SAR analysis to inform a range of areas relating to safeguarding practice:

- Working with individuals who self-neglect (Preston-Shoot, 2018).
- Safeguarding utilising the Mental Health Act (Manthorpe and Martineau, 2019).
- Working with homelessness (Martineau and Manthorpe, 2020).
- Supporting safety in care homes (Smith et al., 2022).
- Exploring the impact of discriminatory abuse (Mason, 2023).
- Working with young people transitioning from children's services to adult services (Preston-Shoot, Cocker and Cooper, 2022).

The findings of these SAR analysis papers offer several welcome contributions to the evidence base on what makes for good practice, and what contributes to the potential for services to miss opportunities to prevent harm.

In 2019 the Association of Directors of Adult Social Services (ADASS) published a report outlining a comprehensive and broad analysis of London SARs - amounting to three hundred and seventeen individual SAR reports (Braye and Preston-Shoot, 2017). Their analysis followed the format of previous smaller-scale local studies, by conducting a qualitative analysis of SAR reports. They organise their data by examining what the SARs contribute to knowledge organised across four categories which are:

(i) Direct practice with individuals

(ii) Interagency collaboration

(iii) Organisational structures

(iv) Senior management and corporate responsibilities including governance of learning from SARs

(Preston-Shoot *et al.*, 2020).

As this was the first publicly available large-scale thematic analysis of SARs, it effectively brings together the wealth of local area learnings and builds an unrivalled evidence base to develop adult safeguarding practice. However, it is the fourth category of analysis that also gives some consideration to the effectiveness of SARs themselves. Though the authors appear to remain steadfast in their commitment to the value of SARs, they highlight some familiar challenges such as the time scales of inquiries, suggestions of an over-reliance on routine staff training as a recommendation, and a concern that it was difficult for organizations to respond to the volume and pace of incoming recommendations (Preston-Shoot *et al.*, 2020). These are almost identical to those concerns raised in a previous study with social work practitioners on the effectiveness of serious case reviews in children's social care (Rawlings *et al.*, 2014), and a more recent study exploring learning from Domestic Homicide Reviews (DHR)s [6] both in terms of the practice of them and how these reviews are utilised in research (Cook *et al.*, 2023). This latter paper explores DHRs as a parallel process to conducting research as those involved are required to gather

[6] A Domestic Homicide Review (DHR) is a specific type of review for instances of death of a person aged over 16 where it appears that their death was related to violence, abuse, or neglect by a person that they had an intimate relationship with, or a member of their household. Like a SAR, a DHR is a multi-agency review led by an independent person, aiming to recommend changes to strengthen the system that prevents abuse. The statutory requirement for local areas to conduct DHRs arose from the Domestic Abuse Act 2010. Oversight of DHRs is provided by the UK government Home Office also publish statistics and thematic analysis of collective DHRs (Department of Home Office, 2023).

information and add analysis. Cook et al (2023) argue that for DHRs to be effective – stakeholders should pay greater attention to quality assuring methodological and ethical issues in the work of investigating DHRs (Cook *et al.*, 2023). This argument echoes my findings in Chapter 4 wherein practitioners reported that the process of bringing agencies together felt likely to them to be more valuable than the SAR report, and SAR authors reported their techniques in managing this process in a non-blaming manner. I will explore this further in Chapter Four under the identified theme '*Bouncing the Blame Ball'*.

The comprehensive analysis review of SARs critiqued the variance in SABs' level of adherence to prescribed processes and argued that in many SARs the processes and reports were somewhat distant from the realities of everyday social work practice. This points to a clear understanding that SARs as a mechanism are only as effective as the quality of the work that goes into them. The authors call for a strengthening of efforts to ensure quality in the SAR inquiries (Preston-Shoot *et al.*, 2020). Herein lies the acknowledgement of a clear dilemma in that SARs are simultaneously put forward as a resource for building an evidence base, whilst the quality of this evidence base is fragile.

This critique is followed by Preston-Shoot's analysis of SARs which points to a tendency for recommendations to focus on the micro detail of what happened in each case perhaps at the expense of examining wider systemic issues. (Preston-Shoot, 2018, 2019). This literature suggests that SARs may not be living up to their full potential to inform and transform practice. There is therefore a need for further research on SARs with a specific focus on their impact on practice and

practitioners. This thesis sets out to bring this timely specific focus on practitioners. The above suggests that for practitioners to be equipped to use SARs effectively for learning, they may need to be critically attuned to the potential imperfections within these processes.

The evidence from Rawlings et al (2014) suggests that social workers can feel a sense of cynicism towards inquiry processes and arguably opens the prospect that such inquiries have the potential to alienate practitioners. This notion is reinforced by Preston-Shoot's comments on the SARs not always reflecting the realities of social work practice (Preston-Shoot *et al.*, 2020). I argue that this evidence allows the suggestion that in some instances, practitioners may feel a sense of alienation from the inquiry report processes and therefore the learning potential may feel disrupted or disjointed. In learning from SARs, a social worker will encounter a narrative about social work practice along with contemporary health and social care systems and the actions of their professional peers. It is interesting then to consider the experience of a social worker in reading a SAR, mindful of the status awarded to SARs within the system and the influence that they carry in service development. It is possible that experiencing these narratives may bring a certain challenge to an individual social worker's sense of the potential held by their profession. This study therefore aims to research how, if at all, social workers are influenced by SARs in their work, or even in how they view their profession. The SAR report may demonstrate aspects of their working system that are not effective or examples of social workers' practices that have been called into question. My initial research findings outlined in Chapter Four present themes identified in SARs referring to failures in the system around social

work. These themes include manager's decision-making, multi-agency cooperation and highlighting challenges in the commissioning of services. As a professional colleague, I am curious to know how social workers experience receiving these reports. In my view, it is important to ask these questions to understand how social workers experience SARs given that these are documents that hold the potential power to influence their practice by shaping what social work is and what the profession should be.

Social Work Professional Identity and Confidence

In this study, social work professional identity and confidence are used to refer to social workers' understanding of their profession and their sense of confidence in executing their professional tasks. The question of '*What is the role of a professional social worker?*' has been the subject of much analysis in social work research literature. Such discussions often consider social work in terms of the tasks typically done by social workers and their expected capabilities. Here I draw from examples found in bibliographies of introductory social work textbooks and a Science Direct database search using the term '*What is Social Work?*'.

(i) Suggestions that social workers inspire and motivate people (Horner, 2009; Boddy *et al.*, 2018).

(ii) Identification of social workers as counsellors (Johns, Blackburn and McAuliffe, 2020).

(iii) Acknowledgements that social workers are skilled at managing crises and risk of harm (Fox, Hopkins and Crehan, 2022; Méndez-Fernández *et al.*, 2022).

(iv) The conviction that social workers work with the aim of improving conditions and alleviating distress (Trevithick, 2012).

However, these task-orientated descriptors may be somewhat reductionist, minimizing the impact that a social worker's statutory duties may have in shaping a social work role and identity. Research points to other factors that can be identified to distinguish 'a worker' from 'a professional'. These include but are not limited to specialised knowledge (Freidson, 2001), and autonomous decision-making with an accompanying ethical code (Taylor, 2012). The current professional body '*Social Work England'* locates the identity of social work firmly within its theoretically held '*core ethics and values'*, chief among which is a commitment to promoting social justice (Social Work England, 2019). Reflecting on these contributions, I argue that an individual's professional identity and confidence relate to knowing what the profession can offer to others (including limitations on this) and having the courage to make this offer.

In exploring social work identity and confidence, it seems reasonable to expect that professional training and education may be formative in this respect. Traditionally social work education splits students' learning across university-based academic teaching and supervised work-placed learning – offering a grounding in theory and ethics alongside an immediate focus on theory to practice (Social work England, 2023a). In England, a social work qualification is awarded as part of a university degree programme either at undergraduate or postgraduate level. An individual cannot legally work under the title of '*Social Worker'* until registered with the registration authority *Social Work England* who seeks evidence of continual professional development as part of the bi-annual re-registration process (Social Work England, 2023a). As noted in Chapter One,

health and social care inquiries following a tragedy often shine a focus on practitioner's skills and present recommendations for the 'training' (Walshe, 2002; Rawlings *et al.*, 2014; Preston-Shoot *et al.*, 2020; Jones *et al.*, 2022). Though additional training may be entirely appropriate, this focus arguably contributes to a narrative that practitioners lack certain skills and perhaps that their learning is incomplete.

In 2014 the social work community in England received the publication of two government-commissioned independent reports, on the suitability of social work education, with recommendations to enhance rigour in both initial training and ongoing professional development (Croisdale-Appleby, 2014; Narey, 2014). Recent social work research analysis has suggested that whether this was intended or not, the impact of these two reports in quick succession was to establish and embed a narrative that social work is underachieving as a profession in part because social workers simply are not capable (Burman *et al.*, 2017; Hanley, 2019)

More recently in England, there has been a government policy in support of fast-track social work training schemes – offering a quicker route to social work qualification with a stronger focus on workplace skills and reduced traditional academic input (Scourfield *et al.*, 2021). These include 'Front-Line' and 'Step-Up' two schemes established within the children's social care services (Department of Health and Social Care, 2023), and 'Think-Ahead' which is established within the adult mental health service areas (Think Ahead, 2023). Critics argue that these schemes seek to undermine the philosophical rigour of social work training, sidestepping the philosophy of social justice in favour of doing a job managing people who present a problem to society (Murphy, 2016;

Cartney, 2018; Hanley, 2021). In addition, the limited nature of candidate recruitment within these schemes enables criticism of their potential to be exclusionary and limits a much-welcomed diversity within the profession (Finch and Tedam, 2023).

This argument is supported by an analysis of over twenty years of central government ‘reviews’ of social work, each with its recommendations for making social work training more fit for practice, as a response to social injustices (Hanley, 2019). This literature is presented to demonstrate that whilst social work education is central in the formation of professional identity, there are contextual discourses that arguably shape the appraisal of social work education. Aspiring social workers in England will join a university programme and then if successful graduate as professionals, but those achievements will be within the context of an education that is subject to some disparaging narratives. This may not be the case for other less politicised professions for example accountancy or physiotherapy, and the impact of this negativity on a social worker’s future professional identity is somewhat unquantifiable.

Beyond initial education, social workers' development of professional self-identity in the workplace has been explored frequently within the literature. Social work researchers argue that professional confidence and assertiveness can flourish once practitioners have a clear sense of professional identity and role clarity (Herod and Lymbery, 2002; Hubbard, 2017; Hitchcock *et al.*, 2021; Smith, Harms and Brophy, 2021). A highlight from the available research on this topic is a highly comprehensive longitudinal study exploring pathways to enhance confidence in newly qualified social workers reported that professional confidence was greater in social workers with more clearly defined role clarity and job satisfaction

(Carpenter et al., 2015). This research identifies clear correlations between emotional resilience[7], role clarity, professional identity and social work confidence (Carpenter et al., 2015) which may seem unsurprising, however drawing on my professional experience I argue that these relationships are delicate and worthy of continual research focus. This thesis sets out to explore these concerns via the contribution of SARs.

Previous research has demonstrated that social workers often point to their relationships with clients and emancipatory goals as central to their understanding of the social work identity (Dominelli, 2007; Webb, 2017). However, the unique conditions of each employment may jostle this sense of identity. On this theme, a library search for academic papers exploring social worker's sense of professional identity highlighted formative factors that may vary in each workplace including for example; managerial influence (Bron and Thunborg, 2015) and quality of professional supervision (Smith, Harms and Brophy, 2021). Professional supervision offers a structured mentorship mechanism to support social workers in developing their practice, including facilitating debriefing and management of the emotional toll (Social Work England, 2019). Due to its variable nature, the actual influence of supervision may be difficult to measure, however, recent research identified that for social workers, successful management of emotions strongly correlates with professional confidence (Bogo et al., 2017). Both '*supportive management'* and the '*emotional toll of social work'* were themes identified within the initial research

[7] '*Emotional resilience'* is a contested term that may evoke different meanings within different professions (Southwick *et al.*, 2014). In this thesis '*emotional resilience'* is understood as an individual's ability to withstand stress and to manage professional decision making in a context of emotionally charged work tasks.

findings presented in Chapter Four. Beyond these themes, there is considerable research literature considering broader psycho-social issues that influence professional identity for example a history of tragedy in the organisation which can cast doubt on professionals over the effectiveness of their service area (Whittaker and Havard, 2016). This issue was not directly identified within the research findings but the anxiety amongst practitioners that a tragedy within their service setting was possible was identified as an overarching theme that is discussed further in Chapter Four.

This research project arises from the hypothesis that social work roles and professional expectations are contested spaces and that one location for this discussion is within the work of SARs. As documented, SARs comment on social workers' actions within a retrospective appraisal of the actions that might have been available – in a context that perhaps assumes successful navigation of emotional resilience, role clarity etc. In this research project, I establish notable themes in the descriptions of social work held within SARs (presented in Chapter Four) and then discuss how they can influence the shaping of a social worker's professional identity and confidence.

Influence of the 'Public Gaze' on Professional Social Workers

As argued above, researchers have forwarded the position that social work in England has been under a sustained period of 'attack' from the central government, with occasional support from the public, facilitated by discourses in the media (Butler, 2016; McKendrick and Finch, 2017; Frost, 2019). The media coverage surrounding high-profile child deaths has been frequently cited as contributing to this negativity (Butler and Drakeford, 2003; Butler, 2012; Jones,

2014; Shoesmith, 2016; Wills *et al.*, 2017). Though each social worker will navigate their sensemaking with the discourses around their profession, the impact of this 'gaze' or 'attack' on social workers and their practice warrants exploration. As my findings in Chapter Four will report, this issue of sensing a public attack on social work was frequently cited by the research respondents, in particular the social workers and strategic leads. Though there is a breadth of research specifically on this issue, here I draw on literature and evidence concerning depictions of social work in contemporary culture, the politicisation of social work and psychoanalytic perspectives of the potential impact of negative scrutiny.

As a keen observer, it is my personal view that there are relatively few depictions of social work in contemporary British culture. Again, drawing on comparisons with other professions, there are in British mainstream media ample fictional television programmes depicting heroic and entertaining doctors and nurses at work saving lives. Current examples include decades worth of BBC dramas *Casualty* and *Holby City* (Casualty, 1986; Holby City, 1999) alongside several reality television programmes following medics in British hospitals for example *24 Hours in A&E* (24 Hours in A&E, 2011), and *Geordie Hospital* ('Geordie Hospital', 2022). I recall watching similar shows with my parents as a young child and experiencing their sense of respect for the onscreen nurses and doctors. Alongside these, there are in my view relatively few portrayals of social workers in mainstream programming. In recent years Channel 4 produced two fictional dramas portraying social workers. The first of these *Damned* was a sitcom starring a famous comedy actor Jo Brand as a child protection social worker in a

busy team (‘Damned’, 2016). Reviews of this show were positive about the comedy value and the portrayal of some taboo subjects. However, it is noted that the social workers' lives appear to be overburdened and highly stretched in a manner that impacts their personal wellbeing (Dowling, 2018).

A more recent Channel 4 show entitled *Kiri* is a four-part fictional drama featuring a child protection social worker *Miriam* and the events surrounding the murder of a child awaiting adoption. The character of Miriam is portrayed as professionally unorthodox but dedicated to her colleagues and the families in her service (Ramaswamy, 2018). Her fictional practice steers from expected standards as she is frequently seen to be drinking alcohol whilst at work, and calling unannounced to adults whom she knew as children when she was their allocated social worker. Some critics voiced concern that this depiction of powerlessness and lack of professionalism would contribute to a wider diminished public perception of social work (McGrath, 2018). Such a characterisation is not dissimilar to other fictional characters of chaotic but brilliantly insightful medics committed to their craft. The difference here is that the main character is relatively powerless. Miriam does not ‘save the day’ at the end of the show and tragedy prevails. Such comparisons between fictional social workers and other professionals are worthy of a separate research investigation but are offered here to provide some context to suggest that contemporary examples of successful social workers are less readily available in mainstream English culture. For social workers, this absence of positive representation may impact their sense of their profession perhaps undermining belief in their value and contribution.

I noted above that critics have argued that the British government's discourses of social work reform, appear to coincide with points of social crisis. The management of anxiety concerning so-called 'wicked' social problems is an ongoing concern for the government, which frequently announces national policy objectives and initiatives; recent examples include the '*Homelessness Prevention Grant'* (Department for Levelling up, Housing and Communities, 2023). There is some research interest in how the central government in Britain communicates with the wider population around specific issues, examining the discourses and rhetoric used to describe these complex social challenges. Critics have argued that discourses are deliberately evoked to deflect responsibility onto individuals and their communities (McKendrick and Finch, 2017). If the prescribed task of social work is to alleviate the presence of some of the evil social problems such as abuse and neglect, then the persistence of these could be construed as evidence that social work has failed.

Critics have argued that the central government's spotlighting of social work's effectiveness is potentially an effort to dim the focus on structural inequalities and widening social injustices (Frost, 2019; Hanley, 2019). It is here that perceptions of professional social work may become jostled and entangled with a politicised view of social issues. Media reporting on these issues may purposefully, or inadvertently, provide a platform to these established narratives either with endorsement or challenge. For example, Shoesmith (2016) argued that a recurrent emphasis on 'in-competence' in the 'Baby P' investigation contributed to a narrative that social workers (presumed to be aligned with left-wing politics) were blind-sighted by collusion with the underclass. For perspective, this

incompetence narrative contrasts strongly with the ‘doctor knows best’ narratives commonly associated with medical professionals (Lindsey, 2020).

Media reporting of abuse and neglect can bring sharp and sudden focus to the painful reality that such suffering happens in local communities and that independence and safety is not everyone’s daily experience. The knowledge that children and adults can suffer harm and neglect, sometimes leading to death, can be difficult to understand and may lead to doubts about the capability of the systems charged with protecting those most at risk. Arguably it is very difficult to be confronted with the knowledge that, for example, an elderly neighbour ‘*JA*’ may be dead and decomposing for months in a home shared with their son (London Borough of Barking and Dagenham, 2021). Similarly, the knowledge that ‘*Miss E’*, a resident in a nursing home, would have the strength and ability to complete suicide by hanging (Bishop, 2020) seems outside of the typical image of a nursing home resident. Specifically concerning this research project, it is harrowing to know that despite over fifty years of learning from the Eli Hospital Inquiry (1969), adults with learning disabilities would be routinely spat at, punched, kicked and ridiculed by those employed to provide care and treatment at a residential facility in the North of England (BBC News, 2023).

From a psychoanalytic perspective, distressing stories of harm and neglect create such a powerful sense of discomfort and anxiety in the recipients that they may reach for mechanisms to resolve this psychological distress (Cooper, 2018). As noted in the literature review, calling for an inquiry, or placing faith in the process of an inquiry can be one mechanism to resolve the psychological distress

and anxiety caused by difficult knowledge (Walshe, 2002). It has been argued that whilst there is on one level an awareness that harm and abuse prevail, there may also be public anger that this difficult knowledge has not been discretely managed by social services, in a manner that protects the public from confronting the details of it (Cooper and Lousada, 2005). In this light, social work practice should be seen but not heard, and social workers are effective if their work remains in the shadows and outside of mainstream consciousness. Such a state of anxiety must surely infuse into a professional identity that then becomes self-doubting and paralysed – a stark contrast to the call from the British Association of Social Workers for professionals to be advocates, advancing social justice and challenging the status quo (British Association of Social Workers, 2018).

Chapter Summary

This literature review chapter further establishes the context for the research, but also highlights some voids in existing evidence and therefore offers a rationale and value for my research questions. The underlying premise of this thesis is that the work of SARs has the effect of creating a knowledge base concerning social work practice with adults. SARs offer a retrospective appraisal of the difficult experiences of one individual, and this story is authored by a senior professional who brings a subjective lens onto the previous work practices of more junior professional peers. It is here that a story of adult safeguarding practice which includes social work is authored and published, thus creating an evidence base for future social workers. In this chapter social constructionism is presented as a theoretical foundation from which to explore this suggestion of knowledge creation. Social constructionists highlight both the role of language and the

influence of power in creating knowledge, and both concepts are useful in analysing the literature relevant to the impact of SARs on social work.

SARs are a relatively recent form of inquiry, but a review of the literature confirms that inquiries are a long-established part of the English health and social care industry's response to allegations of serious harm and neglect. Research has evidenced that inquiries quite often report similar recommendations for the services under their review, which suggests that inquiries have a broader remit or purpose than simply establishing practice recommendations. The literature points to other related purposes including political agendas, and the need for those in leadership to try to manage any public outcry of anger following a high-profile tragedy. In considering these themes the literature review highlights how inquiries as a process are quite often infused with emotionally charged ideas and agendas. It is also highlighted that inquiries as a tool can appear to be repetitive and because of this they might seem almost futile. Drawing on this evidence, I have argued that this combination of upset following a tragedy and frustrations with the processes are the contextual forcefields through which SARs contribute their story of social work. This story is then available to be consumed by social workers as part of the wider knowledge about their profession.

In any profession, an individual may be drawn to join that profession if it feels like a good fit for their interests and skills but also if the profession fits with their own identity and values. The above argues that a practitioner's education, training, and experiences as a social worker in practice contribute to their establishment of a *professional identity* and confidence in this identity. Reviewing the available research evidence highlights that negative appraisals of social work are dominant

narratives in the analysis of social work education and service delivery. However, SARs with their emphasis on practitioner involvement may have the potential to broaden the discourses around social work. The literature review notes that current research on the contribution of SARs is limited to knowledge of service areas. There is a clear gap in available knowledge of what SARs contribute to the discourses and professional social work, and how those discourses impact on social workers.

Chapter Three: Methodology and Methods

This chapter outlines how the research project progressed from conceptualisation to actualisation. Any new offering of research evidence exists only as a statement of what a particular research project found, and it follows therefore that the credibility of the research results is intimately linked to the quality of the research. A transparent methodology is central to this quality assurance. This chapter aims to provide clarity on the mechanics of the research project and to contribute to a justification for making these research design choices. This chapter opens by revisiting the research questions and considering how these specific curiosities influenced how I approached the research and formulated its methodology. From this base, I will examine what is understood by methodology and the basic tenets of qualitative research. These are then considered in this specific context of researching professional social workers and their practice. A social constructionist theoretical framework anchors the project, and this is presented below, along with a discussion of its relevance to social work research. This methodology reflects the culmination of research decisions made during data collection and project evolution. The chapter closes by outlining the processes for analysing the data and establishing the first preliminary set of findings.

The Research Questions

The research project is guided by the following research questions:

Q. How do SARs contribute to the Social Construction of social work in England?

This question is exploratory and intentionally broad-based. In many respects, this is a scoping question seeking to broaden general knowledge of the subject rather than for example a question seeking to measure or quantify the impact. Given the parameters of the topic – that is the number of SARs and the number of social workers in England, it would likely not be possible for a study of this size to establish a measurement of the impact of SARs on social work in England. Instead, this question asks in what way SARs contribute to the story of social work, and this question can be answered by identifying the specific narratives within SARs. In developing this research project, the qualitative discovery question of 'how' is crucial. Three sub-questions are used to source evidence to answer the research question.

q. i. What are the identifiable narratives about social work practice within SARs?

q. ii. How do social workers in practice perceive the work of SARs?

q. iii. How do SARs influence social workers' sense of Professional Identity and Confidence?

Introducing Methodology – Ontology and Epistemology

A methodology report situates the research findings within the parameters of those orientating questions – the when, where, and how the study was conducted. In addressing these questions, a thorough methodology should not be limited to a practical outline of research methods but rather should discuss the study's broader philosophical orientation or theoretical context - for what and why (Clough and Nutbrown, 2012). For the latter, a discussion of the project in relation

firstly to *Ontology*, and secondly to *Epistemology* is helpful to evidence from where the basis of the methodology was formed. In first considering ontology, the philosophical pursuit of understanding what knowledge is, requires categorising of knowledge forms (Lowe, 2005). Lowe suggests that all entities can be categorised into *substantial entities* (objects and kinds) and *non-substantial entities* (modes and attributes). For this project, social workers and SARs are both *substantial entities*.

The ontological foundation accepts the existence of these entities and assumes, for example, that social workers adhere to their professional ethics and values. This serves as a starting point since diving into each respondent's personal values would be out of scope. *Non-substantial* categories in this arena could include '*modes,*' such as the extent to which social workers have knowledge of SARs or '*attributes*', such as the extent to which SARs carry influence in discourses around social work. It is surmisable that SARs through their existence may have some influence on social workers and their practice but the extent to which this is identifiable or even measurable is much less certain. Here it is necessary to review the epistemological paradigm guiding the project.

It is a basic premise of this study that the content within SARs forms part of the epistemology of social work as they contribute to developing the story of social work. As noted, SARs are authored by a senior professional, who therefore has a unique and hierarchical relationship to the knowledge creation. Herein lies the core curiosity of the research as it seeks to examine the knowledge created by SARs and in parallel explore how social workers view this knowledge base. The

study questions whether a social worker's hierarchical position correlates with their view of SARs. Thus, both substantial and non-substantial ontological considerations are combined allowing for an in-depth exploration of social workers' subjective knowledge of SARS.

Methodology and Methods

Research is often categorized as either quantitative, focusing on statistical correlations, or qualitative, exploring complexities between phenomena (Yilmaz, 2013). Whilst quantitative and qualitative methodologies may be deployed to study the same issue, their mechanisms for rating and scaling information are different and therefore there are marked differences in how they seek to collect data (Silverman, 2020). Many studies have used both qualitative and quantitative approaches; recent examples from social work research include a study exploring personalisation in safeguarding adults (Stevens et al., 2018), the challenges for practitioners of COVID-19 (Pritchard-Jones et al., 2022) and working with survivors of forced marriage (Chantler, Mirza and Mackenzie, 2022).

Establishing a research methodology as being qualitative or quantitative can support a rapid orientation of any project. However, this terminology is purely explanatory and descriptive; to view these methodologies as polarised is perhaps not a sufficiently nuanced understanding of research processes. It is argued that many researchers utilise quantitative techniques within their qualitative research and vice versa (Campbell, Taylor and McGlade, 2017). By counting the incidences of particular phrases the researcher can evidence which themes were more dominant within the conversation (Braun and Clarke, 2021; Elliott-

Mainwaring, 2021; Byrne, 2022). Equipped with this information, the research might then use further techniques of analysis to explore the meanings behind these more dominant themes (Braun and Clarke, 2021). This research project adopts a pragmatic approach by deploying a qualitative methodology which includes some quantitative techniques, namely counting the incidence of phrases within a transcript. The frequency of key ideas acted as an indicator of how commonly they were held among the participants. This quantitative recording then drove much of the subsequent reflexive thematic analysis.

Social Work and Qualitative Research

In the literature review, I presented some examples of relevant literature drawn from the research evidence base about social work. In the interests of clarity, I present social work research as comprising three subsets of topics as follows:

i) Firstly, research that examines professional social work from the perspective of people who use social work services. One example of this is a recent study exploring the experience of people who are Muslim working with non-Muslim professionals (Braganza and Hodge, 2023).

ii) Secondly, research studies that explore operational issues within social work such as how social workers make decisions (Gillingham and Whittaker, 2022) or the benefits of professional supervision (Ingram, 2013).

iii) Finally, research studies that explore the views and experiences of social workers about their work and their profession. An example of this is a recent study exploring social workers' views of working

during the COVID-19 pandemic (McKenna, Ross and Boskey, 2022).

In each of these above examples, the studies are qualitative in orientation seeking data that is nuanced concerning experience to explore their issue. As discussed in my introductory chapter, SARs are produced with the overall aim of improving services via learning and development (Department of Health and Social Care, 2022). There is inherent positivism within the work of SARs, including details of the historical facts that happened and what contemporary policies dictate. However, there is arguably a space between this positivism and how the report is experienced by those in receipt of it – in this instance social workers. This might be particularly expected by members of a profession that seeks to challenge the status quo, to be curious and to be empathetic to those who are socially excluded (Social Work England, 2019). I hypothesise that SARs will trigger some reaction within social workers which might be for example an emotional reaction, cynicism or perhaps motivation and inspiration. I have developed a qualitative research design that seeks to explore the issues with an awareness of the likely context of stakeholder dynamics, power, and the subject's (in this instance the social workers') voice.

Situating the Research in Theory

This research project stemmed from my own experiences working as a social worker. As stated in Chapter One, I felt frustrated by my perception that many social workers do not feel pride in their social work identity, and I am concerned that this may impact their ability to fulfil all the aspects of the role including that of an advocate. This project aimed to move beyond personal ideas and explore

whether research could potentially offer an empirical evidence base towards a greater understanding of this impact. In moving from a personal curiosity to a transparent and robust thesis, it felt important to consider formulating the project within an established theoretical framework.

In social science, there is a discussion surrounding the benefits of choosing a specific theoretical framework before beginning a research project versus conducting the research first and then considering theoretical frameworks based on the findings. It is a matter of debate which approach is more effective. It has been argued that anchoring a project to a theory from the outset could be reductionist as it could limit the potential of the research to prove a point rather than fully exploring a topic (McKenna, Ross and Boskey, 2022). The alternative practice of commencing a project outside of a specific theoretical frame can be understood as a 'Grounded Theory' approach (Glaser and Strauss, 1967). For followers of grounded theory, the research enquiry is best served by limiting the researcher's preconceived understanding of the issue and focusing on first collecting the data (Charmaz and Thornberg, 2021). In the subsequent analysis phase, the researchers apply inductive reasoning to seek to explain the phenomena and establish a theoretical framework that they see emerging from the data. Recent examples of grounded theory research exploring social workers' views include an exploration into how Social Care professionals view their assessment practices and decision-making (Symonds et al., 2018), a study considering social work decision-making in cases of sibling sexual abuse (Yates, 2018) and a study from Northern Ireland examining social worker's views of religion and spirituality (Carlisle, 2016).

As a novice researcher embarking on this project, I was initially attracted to Grounded Theory approaches, however, it became apparent that it was not a suitable framework for this project. I had come to this project with substantial knowledge and lived experience of the issues. I was honest and transparent about my existing ideas (that SARs might not have the reach they hope for), my biases (that social work is a worthy but undervalued profession) and my hopes (to explore whether SARs have an identifiable story about contemporary social work in England). As someone who has chosen social work as my beloved profession, I find it challenging to separate myself from the social theory that I have learned, worked with, and taught to students. As a researcher, it is almost impossible for me to ignore this foundation in social theory and completely detach myself from it. From this position, I felt that orientating the project to an established theoretical framework offered a more robust and accountable structure beyond my personal feelings. Though they are long established, they could appear to be whimsy or reactive (Taylor, Killick and McGlade, 2015).

Applying a theoretical framework allowed for an explicit assertion of the research positionality and the lens through which the data will be collected, analysed, and reported (Denzin and Lincoln, 2011). I commenced this research project by familiarising myself with SAR reports, and I soon began to order my thoughts around the idea that each SAR tells a story of events which is captured by a SAR author and then is retold to social workers as a learning tool offering guidance. Therefore, from this perspective, SARs in some capacity have the power to construct the narrative about what social work practice looks like and what it could

look like. From these humble ideas, the project became linked to the concept of social constructionism (outlined in Chapter Two) and a desire to explore how SARs contribute to the social construction of professional social work identity in England.

To fully utilise this theoretical foundation, I needed to choose research techniques that would allow me to pay equal attention to the stories and vocabulary used in social work practice. This includes both the language used within SARs and by those who are involved in providing adult safeguarding services. Social constructionism suggests that language creates reality and therefore the reality for social workers can be best understood by exploiting research methods that enable the research to analyse the language used and not used, and shared or divergent understandings of the same. For example, as this research will demonstrate the language of 'good social work practice' may have different interpretations for different people. An individual's interpretation of what is 'good social work' comes from their ability to consider the received messages about social work and add to them knowledge from the context of their own experiences. This interpretation is therefore a process of consciously or subconsciously deconstructing official knowledge and reconstructing the narrative with additional information – this is just one of the many processes by which professional social work can become a socially constructed concept.

Social Constructionism as a Research Framework to Consider Social Work

Social constructionism's perspective argues that all human knowledge is established through interaction and that there is no objective reality (Berger and Luckmann, 1966). SARs by their nature are based on retrospective analysis and interpretation of events. The SAR report could not claim to be scientifically proven but rather is the culmination of the ideas and interactions between those partaking in the SAR proceedings. Social constructionism offers a comprehensive theoretical framework through which to explore epistemological concerns – namely those issues about the creation of knowledge (Burr, 2015).

However, to critically analyse the contribution of SARs to the knowledge base about social work it is important to first examine what that knowledge base is, i.e., to engage with the ontology – the available knowledge base created within SARs. From this perspective, it is then possible to question how that knowledge contributes to informing social workers about the nature and scope of their profession. Therefore, the value offered by a social constructionist approach here is twofold. Firstly, social constructionism offers a framework to systematically unwrap the available discourses about social work held within SARs. By critically examining established knowledge there is an opportunity to challenge the power held within this knowledge. Secondly, a social constructionist perspective can support the exploration of how these discourses are reconstructed by social workers and how they shape social workers' sensemaking of their own professional identity.

The research methodology and methods were chosen with the expressed aim of privileging social work experience and the social worker's voice. I have argued that social constructionism appropriately supports theoretical scrutiny of this topic, however, there are additional personal reasons for adopting this approach. Firstly, social constructionism fits neatly with many contemporary theories and practice methods in social work practice, for example, solution-focused therapies and family systemic therapies (Dybicz, 2012). Both were integral in my previous work in social work practice. Beyond this, social constructionism as a theoretical approach fits neatly with my personal tendencies in the analysis of socio-political matters. Before my social work training, I studied Sociology at university and have an established academic grounding in these concepts. As a novice researcher, I was anxious to utilize any pre-existing skills available. Upon discovering the value that social constructionism could bring to this project, I quickly felt comfortable deploying it. I have reflected in my research diary that social constructionism sits easily in my mind, and I can recall the mechanics of this theory with relative ease and comfort. I liken this to having a permanent mind map of one's hometown, one that is firmly established but with new layers and ample emotional investment.

SARs are human stories, and they are by their very definition a tragedy. A SAR report will seek to highlight examples of good practice (Department of Health and Social Care, 2022) but the opening premise is that a human being who was entitled to support experienced harm or neglect which could perhaps have been prevented. Quite often the individual at the centre of the SAR inquiry is deceased or lacks the ability or capacity to engage with the investigation. Therefore, whilst a SAR might appear to be about a particular person, their voice is typically absent

and I suggest that it may be more accurate to consider that a SAR inquiry is not about an individual, but instead is about the agencies and services surrounding that person.

SARs are a lens through which service provision, including social work practice, can be viewed, and appraised; the industry around SARs including their publication lends legitimacy to these appraisals. Following a social constructionist orientation, stories within SARs about social work practice are positioned within the discourses of '*What went wrong*?' or '*Did we fail?'* and '*What can we do differently to prevent similar events from re-occurring*?'. Several social work researchers have warned about the limitations of exploring social work from this position of tragedy (Kettle, 2018; Martineau and Manthorpe, 2020; Preston-Shoot, Cocker and Cooper, 2022) suggesting that dominant discourses of harm and failure might be damaging to social work practice. Some social work research specifically seeks to highlight positive social work case studies noting their potential to build a broader narrative about social work. Recent examples of this include an English exploratory study of the role of social workers in multi-disciplinary teams supporting older adults (Willis et al., 2021),and a Spanish study celebrating the role of social workers during the crisis period of the COVID-19 pandemic (Redondo-Sama *et al.*, 2020). Whilst this study exclusively focuses on the reporting of these tragic stories, it is important to hold these stories within the context of a wider potential story about social work, albeit a story that may not be as readily available.

The Research Design

The project was anchored to the epistemological philosophy which I set out above, and therefore a research plan was required that fit these requirements. The research was designed to explore the evidence in SARs but also to ensure that the project gave voice to social workers on this issue. As the project was a task for one lone researcher, there were immediate limitations to the scope and potential. These are explored in greater detail later in this chapter; however, it is important to note that this also placed limitations on the methodological parameters. The project sought to use common and traditional methods of data collection for example focus groups and interviews. The methodological rationale for this decision is discussed below but one helpful aspect was that the research would be similar in process to other contemporary research and that those processes may be somewhat familiar to participants.

The initial data collection efforts via focus group were moderately successful. However, the online format brought some challenges – for example, in one group, I noted that two participants were continuing with other computer activities and perhaps not fully concentrating. There were also some practical challenges of workers engaging in a virtual meeting whilst in a busy office with colleagues often becoming distractions. Some social workers whom I contacted expressed disappointment at being unable to attend a focus group due to diary clashes – this included some late-notice cancellations. In response to these contacts, it was decided to continue to meet with social workers on a 1:1 basis and collect data via semi-structured interviews. The project had initially sought ethical approval for focus groups and interviews in case of this eventuality.

It was following the second one-to-one interview that I began to consider ordering the participants into cohorts. I discussed this with my research supervisors and devised my plan to also include SAR authors as participants. I felt that this might contribute to a triangulation of the data – by considering the SAR author's intentions and their views of the contribution of SARs. The research design was adjusted to include SAR authors and participants were sought as discussed below.

Practical limitations

Limitations to the potential robustness of the research were considered at every stage of the design, data collection and analysis processes. Where possible the processes were tweaked to mitigate against potential weaknesses and to maximise transparency and research integrity. However, two connected sampling issues stand out as prevailing limitations to the research. These concern the range and breadth of the SAR reports examined and that of the participants included in the study. First and foremost, the research is limited by its capacity to reach broadly across all the available SARs. Analysis of every SAR is well beyond the scope and indeed the intention of this project. The purpose of the documentary analysis was to equip the researcher with information about SARs and a greater understanding of the potential stories about social work held within. From the outset of the project, it was determined to limit the scope of documentary analysis to SARs from the geographical region that I am most familiar with. However, by choosing this area, I have accepted that the subjects of these SARs hail from a region of just seven local authorities, all urban settings,

and with broadly similar health and social care services available. In addition, there are known similarities to the strategic safeguarding governance arrangements across this patch. For example, two of the local authorities share the same SAB chair. The findings presented should be understood as being limited by this scope of context and the exclusion of stories from alternative settings, most notably rural areas.

It is estimated that currently there are 100,500 Social workers in the UK of whom approximately 31% are working in practice with adults (Social Work England, 2023b). To explore social workers' views and prompt discussion it was preferable to collect data via personal interviews, which limited the potential number of participants that could be included. I continued to invite new candidates for interviews until it was felt that the content of responses had become repetitive and there was sufficient data to interrogate the topic. As the participants were recruited through personal professional networks, almost all were working in service settings in urban Southeast England. This had the unfortunate consequence of excluding the voice of social workers in Northern England or rural settings. In both instances, accounting for these issues establishes that this specific project strives for integrity within the boundaries of its work plan but that there are inbuilt limitations to its potential. These issues are noted here and will be discussed further in chapter six when considering the potential for further research to follow this project.

Narrative Approaches

The research aims to explore both SARs' depiction of social work and social workers' views of SARs with a central interest in the language used by both to recount these stories. A research focus on storytelling could be orientated as a narrative enquiry following the narrative therapy traditions of Michael White (White and Epston, 1990; White, 2007). A narrative enquiry seeks to look beyond the presented dialogue and explore how that dialogue came to be the story that is being told, and what meaning is created for the storyteller in the act of telling this story (McLaughlin, 2012). Deconstructing a presented account has been effectively used in contemporary social work research to challenge dominant organisational views. For example, it has been used to reframe child protection work (Featherston, Gupta and Morris, 2018), to reframe the use of self in therapeutic social work (Ruch, 2010), and to challenge the perceived divide between service users and service providers (Beresford, 2012).

My research aim is to explore the gap between the potential positivism of published SARs and the experience of social workers in receiving them. To achieve this, a narrative approach is most suitable as it can help in understanding how stories of professional social work are created and re-created within this space. The research project was curious about how an individual uses language to present a story of their situation – including an interest in what is included in the story, or excluded, and crucially how this story about inquiries might give clues as to the wider story of social work professional identity. For example, concerning SARs, do social workers speak about their peers '*failing'* or '*their need to work*

differently"? I question whether their story about SARs is broadly positive or not, and which ideas influence these views.

The data sought in this study is in no way an attempt to challenge any facts reported in SAR reports nor to dismiss the integrity of their content – the reports have been published by local safeguarding boards and have undergone several quality assurance processes to achieve publication. Rather this research aims to invite social workers to comment on their knowledge, experience, and opinions of SARs, and to explore whether these ideas influence their social work confidence and professional identity. It is an opportunity to supplement the positivism of the SAR library with the construction of an 'additional story' (Glasby, Walshe and Harvey, 2007). This 'additional story' is descriptive and an expression of feelings – in essence, it is a qualitative account, attempting to document an aspect of life from the perspective of those people being studied (Silverman, 2020). When considering SARs, each SAR report holds value for learning and development but so too do analyses of SARs collectively. In parallel, each social worker's views on SARs are valuable – as is an analysis of collective views including when some responses may appear to deviate from the norm of others.

This apparent conflict in qualitative research between honouring the individual and seeking the collective voice has been identified by social scientists who argue that understanding this tension allows for a richer analysis of the data (Denzin and Lincoln, 2011; Taylor, Killick and McGlade, 2015; Silverman, 2020). Analysing individual responses around a particular topic should enable the

research to come closer to the aspects of that topic that are most meaningful and relevant for the participants. For example, participants might disagree amongst themselves on an issue such as the ideal length of a SAR report – but in exploring this disagreement the researcher might uncover that opinions on this topic are grounded in the same shared core value – that the SAR report be legible and accessible to many people. Many well-established research methods facilitate sourcing this type of qualitative data. These include established methods of gathering people's testimonies and offering with this collation some explicitly clear methodical analysis by the researcher. This study adopted research methods that are well-established within social work research and that fit with the pragmatic and practical requirements of the study.

Choosing Research Methods

In this section, I will outline the rationale for my chosen research methods and outline how my research plan developed. As I was developing a qualitative study, I immediately ruled out methods more typically associated with quantitative research. For example, I could have pursued a survey, to establish what percentage of social workers had experience or knowledge of SARs. This would be interesting and worthy of consideration in future studies; however, in this study, a survey would not yield the nuanced qualitative data that I was seeking. In reviewing the options, I initially sought out research methods that were familiar and fit with my skills drawn from my previous experiences in social work practice.

I quickly established that the most practical option for reviewing the stories held within SARs would be to conduct a systematic documentary analysis and I felt

confident to do this. Reviewing large documents such as case files and assessment reports is a common aspect of social work practice. Documentary analysis is a research method that approaches a collection of documents systematically seeking to identify any key ideas or phenomena. This style of exploration has been demonstrated effectively in similar contemporary case study report analyses such as an examination of mental capacity disputes in the CoP (Ruck Keene et al., 2019) and an exploration of the presence of social work in the CoP (Lindsey, 2020).

For the second part of the study – establishing social workers' views concerning SARs – I wanted to use research methods which I understood to be traditional for this type of study and therefore likely to be familiar to the participants. As SARs are often historical, and discussed with social workers on occasion, I did not feel that an ethnographic study would be feasible. I felt drawn to meeting with social workers and interacting directly with them. I hoped that this would enable me to best explain the purpose of the study and to be flexible in my questions, and that interacting directly would be enjoyable for me. It was anticipated that an invitation to a one-to-one interview might be daunting for some front-line social workers who have not encountered SARs or feel they have limited knowledge of them. On this basis I decided on focus groups as a research method, with the option of subsequently pursuing one-to-one interviews if needed. Focus groups are a long-established research method, noted for their potential to gather a range of opinions in one setting (Linhorst, 2002) with the potential benefit of participants delivering ideas that were not previously considered (Campbell, Taylor and McGlade, 2017). Focus Groups are a familiar method in social work research as

they have the benefit of allowing groups of social workers with varying levels of experience to discuss a topic; for example their professional views on palliative care (Waldron et al., 2013), or parenting (Nygren et al., 2021).

I conducted the focus groups quite early in the data-collecting stage and when transcribing them, I felt dissatisfied with the depth of the data I had gathered. It was at this time that I began to consider interviewing SAR authors. I did not doubt that SAR authors would have knowledge and familiarity with SARs, but I did question whether they would be comfortable participating in an open forum with junior colleagues such as a focus group. In addition, I had been contacted by some social workers who had expressed an interest in participating in the research but had been unavailable for the focus group timings. Therefore, I decided to progress the research by pursuing one-to-one research interviews – a method that I had been cautious to include in my initial request for ethical approval.

Research interviews are conversations designed to ascertain participants' views on a particular matter but can be ‘deceptively familiar’ to normal conversation (Knott *et al.*, 2022). Interviews are more orchestrated than conversations, as the research seeks to orientate the conversation around a specific topic and for specific types of information. In my research, the rationale for pursuing these interviews was to offer a more private format, hoping to enable different conversations to those that evolved in the focus groups. I was keen to create a space in which to explore further participants’ views on any emotional impact of SARs, and their wider views of their profession. Successful or fruitful research

interviews rely on the participants feeling some assurance that the interviewer can understand them and respect their contribution (Silverman, 2020).

As a social worker, I had often sought out different techniques to support assessment interviews or one-to-one sessions and so I began to consider ideas of conversation prompts to bring to these research sessions. When working in a mental health setting, I frequently used a method of offering people a collection of statements and asking them to choose the ones that they felt applied to them. Examples of this included statements such as: '*some days I feel very sad'* and '*I often think the television is talking about me'*. This was a beneficial way of allowing people to voice ideas that they might have worried were too unorthodox or ideas that they felt were difficult to describe. This method and variations of it may be familiar to practitioners working in mental health settings and are established within the practice guidance (Mentally Healthy Schools, 2023).

This method is somewhat similar in its orientation to a research method known as 'Q sort' that was first presented as central to the 'Q methodology' (Watts and Stenner, 2012). The Q sort method is a systematic process of creating a set of statements which are presented to individuals who are asked to rank them in order of their level of agreement – these results can then be compared across several participants yielding interesting data (Watts and Stenner, 2012). The use of set statements gently pushes the participants to have an opinion on each one, and the value of the process lies in being able to observe patterns – for example, participants who rank one statement highly can also signal their ranking on alternative statements (Rost, 2021). I was initially drawn to the possibilities of this

method and began to develop a draft set of statements. However, whilst doing this I reflected on the infusion of my opinions and biases – and wondered if I was by default setting the parameters of the respondents' stories. I had begun this research project with the core objective of elevating the voice of social workers – and exploring their experiences. I was continually mindful that some participants might have no prior experience or knowledge of SARs and wanted to be as inclusive of their testimony as possible. In following this reflection, I abandoned the planned Q-sort activity and resorted to a more typical semi-structured interview format.

I prepared a short vignette which was an extract of an executive summary of a SAR report. The use of case studies or vignettes to stimulate ideas and conversation has been common within social work research (Bain, 2023). I reviewed research practice guidelines on how to create a case study and thought about examples of SARs that would focus the conversation on the research questions rather than tangential issues of the particular case (Gourlay *et al.*, 2014). I chose a SAR that was London-based but not local to the work areas of any of the participants. The case study involved several different agencies that would typically employ social workers and therefore seemed relevant to the participants. However, the story was a little atypical as it featured the death by suicide of an older lady resident in a care home.

In summary, therefore, the research project was designed to collect data using three methods namely documentary analysis, focus groups and semi-structured interviews using a case study prompt. Once chosen, the research methods were

utilised across the cohorts in four stages, though not always successively. Firstly, I conducted a documentary analysis of SAR reports. Secondly, I conducted focus groups and semi-structured interviews with social workers in direct practice. Thirdly, I conducted semi-structured interviews with individuals who work as strategic leads for Adult Safeguarding. Finally, I conducted semi-structured interviews with SAR Authors. The mechanics of executing each method and the progression from one to the next are outlined below.

Documentary Analysis

At the time of writing, it is estimated that close to one thousand SAR have been completed across England (SCIE, 2022b) therefore, some method of sampling was required. As an NHS employee, I decided to focus on the geographical area connected to my work, an area which covers seven SAB regions. Selecting a sample exclusively from one geographical area does add significant limitations to the study as discussed above. However, this sampling decision carried some practical benefits including ease of access to the SAR reports, and some existing knowledge of the context within which the SAR inquiries were conducted making them and their recommendations easier to comprehend. Including all published SARs across the seven local authority areas covered within NHS North East London offered a sample of thirty-five reports as follows:

Area	Total Number	Name of SAR
City and Hackney	7	JoJo, Ms F, Ms Q, Mrs A and Mr B, Mr GH, Mrs Y, Mr BC

Waltham Forest	1	George
Tower Hamlets	11	Mrs Q, Mr K, Mrs A, Mr X and Mr Y, Ms L, Mr D, Ms C, Mr V, Ms H and Ms I, Ms E, Mr B
Newham	3	Yi, Ann, The Case of Four Men with Unidentified Needs
Redbridge	4	Alice, George, Ms A, Mr B
Havering	4	CM, GC, HM, A
Barking and Dagenham	5	Drina, Lawrence Beasley, Mary, Peter, RC

These were uploaded onto NVivo 12 which is a software tool designed to support researchers in the mechanics of qualitative research. The software has many functionalities including highlighting data for coding and ordering this to allow the researcher to label and collate the codes electronically (Iumivero, 2022). In essence, NVivo should be considered as a 'tool' that doesn't influence the research design or analysis but supports the research to hold and manage the data (Elliott-Mainwaring, 2021). I read each text and highlighted the presence of relevant indicators such as comments pertaining to good or bad social work practice; the number of recommendations that relate to social work practice; and recommendations for social work. I then reread each text to check for anything relevant that might have been overlooked. As an initial task, this was a purposeful copy of Preston-Shoot and colleagues' method of analysis of SARs (Braye and Preston-Shoot, 2017). The aim of the task was to answer the first sub-question

in the research question – identifying the narratives about social work within SARs. This data was collected and analysed first in advance of the focus groups and interviews.

Focus Groups

This research project was established, and data collection was completed during the COVID-19 pandemic of 2019 and 2020. The UK government introduced extended social contact restrictions and advised people to work from home during the public health crisis. The research project was therefore designed to use virtual technology and avoid physical face-to-face meetings. The traditional focus group around a table format (Morgan, 1997) was replaced by a video-conference group meeting. Though limited, there is some available research literature considering virtual focus groups as a research method in social science. Within these studies, the mechanics of face-to-face groups are often cited as the standard from which to compare the success of virtual methods (Flayelle, Brevers and Billieux, 2022). There are many cited advantages of working virtually which include the potential to widen participation, lower costs and reduced time implications (Tran *et al.*, 2021), and the awareness that for some participants it is preferable to discuss sensitive topics from a place of their choosing (Marques *et al.*, 2021). However alongside these advantages, it is acknowledged that moving to an online format may exclude some people (Eigege *et al.*, 2022), it may challenge confidentiality as individuals can discretely record or have others present in the room (Marques *et al.*, 2021) and, crucially for focus groups, working online might limit the potential to monitor interactions and unique data that arise from working with a group (Flayelle, Brevers and Billieux, 2022).

Proponents of online research account for their own ‘adaptations’ made from the traditional focus group format. Researchers may need to consider adapting the focus group method for virtual settings by for example running shorter sessions to avoid participants experiencing screen fatigue, and may need to think more broadly about the types of visual prompts or engagement tools used (Santhosh, Rojas and Lyons, 2021). Whilst an online focus group may offer less potential to monitor participants' body language and reactions, the use of the chat box may be an invaluable resource for collating commentary (Keemink *et al.*, 2022).

My research focus groups were intended to bring together groups of between three and seven social workers who would have some knowledge of adult safeguarding – though prior knowledge was not a prerequisite for participation. This decision was based on my own previous experience as a senior social worker and team manager with no awareness or knowledge of SARs. I was concerned that requiring participants to have some knowledge of SARs would limit the range of participants and perspectives. In both focus groups, the participants were colleagues of each other, and all were working as ‘front-line’ social workers delivering statutory local authority social work services. The first group had four participants and the second had five. The focus groups were conducted virtually in September 2021. The sessions lasted approximately ninety minutes, and each was recorded via MS Teams. Following the session, in the initial transcribing phase, the participants were each given a pseudonym to protect their anonymity. They were as follows:

Focus Group A

Identifier	Job Title	Years of Social work Service (Approx.)
Zina	Senior Practitioner	12
Lisa	Social Worker	2
Joy	Social Worker	10
Sarah	Senior Practitioner	25

Focus Group B

Identifier	Job Title	Years of Social work Service (Approx.)
Eve	Senior Practitioner	20+
Becky	Social worker	4
Nancy	Senior Practitioner	8
Jessica	Social worker	10+
Amy	Social worker	5

My research focus groups had a semi-structured format including introductions followed by some pre-planned open questions to prompt discussions about knowledge of SARs and views of their value. Though I have facilitated many group sessions across various roles, this was my first time facilitating a research focus group. In opening the session, I introduced myself as a social worker and explained both my current role and the research project. I carried some anxiety about this cohort feeling free to discuss SARs openly given my seniority relative to theirs within the arena of the work of SARs. I felt it was possible that

participants would report SARs as being valuable due to some expectation on their part that this might be my preferred response. The tendency for participants to set aside their views in favour of offering what they feel to be the researcher's preferred response is a form of 'acquaintance bias' – a generally established hazard in social science research (Lelkes and Weiss, 2015; Hill and Roberts, 2023) and particularly in peer research such as social work research (van Heugten, 2004; Lushey and Munro, 2015). I was also worried that the group format could heighten this risk if participants felt the need to support each other and signal agreement even if not in actual agreement. I attempted to offset this risk as best as possible by using probing questions and seeking examples to support expressed views.

In the latter half of each session, the participants were shown a synopsis of a SAR report, Ms E. (Bishop, 2020), and were invited to discuss their initial impressions of the text and ideas arising from it. The development of the group conversation prompted additional questions to consider if issues raised by one participant might be exceptional or an expression of commonly held feelings. In moderating the group, I attempted to ensure that participants felt free to speak and that those who were quieter were prompted to do so. When it was possible, I reflected participants' views back to the group seeking to establish whether other members agreed or disagreed.

Semi – Structured Interviews with Social Workers

Following the focus groups, I decided to seek out social workers to invite for one-to-one interviews. In line with my preferred narrative approach, I was less focused

on answering specific questions and more focused on establishing the participant's story (Andrews, Squire and Tamboukou, 2013), specifically their account of their experience of SARs. I sought to establish rapport with the interviewees and offered assurances regarding confidentiality and the value of their contribution. Again, mindful of the risk of '*acquaintance bias'* I prepared some planned questions which included specific questions designed to gently probe the interviewees further. Once again, the participants were given a pseudonym in the initial transcribing phase. They are as follows:

Identifier	Job Title	Years of Service
Layla	Social worker	6
Clare	Senior Practitioner	5
Charlotte	Social worker	2
Ann	Senior Practitioner	9
Claudia	Social worker	6
Susan	Social worker	2
Roberta	Social worker	1

Semi – Structured Interviews with Safeguarding Leads

To supplement the data from social workers in direct practice, the research also sought the views of senior personnel with strategic leadership responsibility for adult safeguarding. This is my own role within an NHS Organisation and so the expectations are very familiar to me. These are typically stand-alone posts occupied by senior clinicians with many years of nursing or social work experience and specialist knowledge of adult safeguarding. Ethical approval had

been approved for data collection with safeguarding professionals and therefore I deemed it acceptable to include safeguarding professionals who occupy key roles albeit non-social workers. These are typically higher banded posts which means they are commensurate with larger salaries. Designated safeguarding leads typically have leadership responsibility in relation to their organisation's adherence to fulfilling their statutory requirements in relation to adult safeguarding (RCN, 2018). These participants are required in their roles to complete work tasks in relation to organisational change or practice development but tend not to have responsibility for day-to-day clinical matters. My rationale for pursuing these interviews was to better understand how this cohort views the work of SARs, and how these perspectives may impact their work, which includes participating in SAR processes and then implementing learning from SARs. In explaining the research, I sought to assure participants that the discussions were confidential and that I welcomed all views even if they were not in line with the expectations of their role or organisation. The interviews followed a semi-structured format as discussed previously with some pre-decided questions aimed firstly at opening the conversation and then to guide towards my topics of interest. The participants were assigned a pseudonym in the transcribing phase, they are as follows:

Identifier	Job Title	Years of Service (Approx.)
Mo	Safeguarding Lead / Social Worker	10
Jenny	Safeguarding Lead / Social Worker	15
Liz	Safeguarding Lead / Nurse	8

Chris	Safeguarding Lead / Social worker	15
Rachel	Safeguarding Lead / Nurse	10
Katie	Safeguarding Lead / Social worker	25
Faiza	Safeguarding Lead / Social worker	20

Semi – Structured Interviews with SAR Authors

The final cohort of participants were SAR Authors. As noted above, SAR authors are generally highly experienced former clinicians who are contracted by a SAB to conduct a SAR inquiry as an independent expert. There are suggested methodologies for example the 'Learning Together Model' (SCIE, 2023b) and practice guidance (Local Government Association, 2023) but the SAR author is expected to work independently in leading the inquiry. The rationale for pursuing these interviews was to understand better the craft of authoring a SAR and the stories that individuals hold about their responsibilities in this process. The interviews followed a semi-structured format as discussed previously with some pre-decided questions aimed firstly at opening the conversation and then at guiding respondents towards my topics of interest. The interviewees were encouraged to speak candidly and broadly about their experiences. I offered assurances about confidentiality and data management. As before, each participant was given a pseudonym during the transcribing process. The SAR author participants were:

Identifier	Professional Background
Esther	Social Work

James	Police
Alison	Social Work
Sheila	Charity Sector
Joe	Social Work
Judy	Social Work
Nadia	Charity Sector
Simon	Social Work
Jade	Nursing
Lucy	Social Work
Emily	Nursing

Researcher Positionality

From the initial design phase, it was important to consider and interrogate my position as a researcher within this project. 'Positionality' can be understood as a consideration of how the researcher views themselves in relation to the subject population they are studying (Clough and Nutbrown, 2012). It might be explained by asking whether the researcher identifies themselves as being a member of the population they are studying, for example based on gender, age, and similar life experience. Such similarities are suggestive of 'insider' status (Santhosh, Rojas and Lyons, 2021). This compares objectively with 'outsider' status, for example a male scientist researching women's experiences of childbirth. However, such categories are often based on false dichotomies and restrictive prescriptions as to what counts as 'experience'. For example, research exploring childbirth could argue that only birth parents have experience with this. However, an individual might have vast experience with a range of related issues such as hospital

admissions, surgeries, physical pain, and step-parenthood which might stand them to have a more personal understanding.

For social work, the question of how to engage with clients around issues or behaviours that might seem very alien to the social work practitioner has long been a concern, particularly in education and training. Social workers are ‘outsiders’ joining an individual or family with the intention of discussing and perhaps seeking change on the most personal of issues. A social worker might have some direct experience of issues under consideration, for example, many social workers are themselves care leavers. This insider perspective was recently explored by Carter (2022) who highlighted that insider perspectives might be coupled with an outsider perspective of not knowing what it is to be in that family at this particular time in this particular set of circumstances, and a level of imposter syndrome at being called upon to be the professional in the room (Carter, 2022).

Though I am writing explicitly about my research positionality here, much of my positionality concerning the research project can be detected within the first and second chapters in which I outline how I arrived at the research questions and my own tentative hypotheses. As a social worker myself, I have long-standing professional experience in checking my positionality in relation to age, gender, ethnicity, and social privilege, both in terms of how I may be perceived by others and in acknowledging the lenses through which I view others. I introduced this project by sharing my experience that commencing work in England brought some element of culture shock following my training in Ireland. This is suggestive

of an outsider identification based on personal cultural identification (Carter, 2022). However, researcher positionality infuses beyond the initial conceptualisation of the subject to include how the researcher positions themselves with the participants and the research project (Howell Major and Savin-Badin, 2023). Seeking to understand one's research positionality is important as it signifies how individual personal identity might influence the direction of the project and the identification of findings.

In my daily employment duties, I regularly introduce myself first and foremost as a social worker and I feel a strong affinity for social work peers. In this instance the research participants are predominantly my fellow social workers – indeed for some participants, my job title is identical to theirs. This is suggestive of insider positionality. However, not all participants are social workers with some of the strategic leads and SAR author participants being from other professional backgrounds. In my view including these participants supports a broader perspective on what SARs are aiming to achieve. These voices were welcomed with anticipation that they might bring to the research questions and analysis – a welcome challenge to my potential social work bubble. In Chapter Four and Chapter Five, where a respondent is a non-social worker, this will be made explicit to add context.

Concurrently, I am also a member of a SAB that commissions SARs and assesses their quality – this is purposefully an outsider role, and yet it affords me vital insider knowledge. In reflecting on this I therefore consider that my status is predominantly insider, and on that, I should continually reflect on how much of

myself is steering the course of the findings. Furthermore, I am aware that certain aspects of the research, such as being a SAR author, may be less familiar to me. This presents a challenge in ensuring that all components are handled with the same level of research integrity and robustness, regardless of my level of familiarity. Nevertheless, I remain grounded in my social work ethics and values and am committed to advancing the field of professional social work.

Recruitment of Participants - Consent and Confidentiality

The recruitment of participants began in September 2021 and finished in March 2022. This coincided with a period of restrictions on social movement in England due to the impact of the COVID-19 virus (Institute for Government UK, 2022). The recruitment processes for all research participants were broadly similar with some minor differences between the cohorts. Focus group participants were recruited through professional networks. Contact was initiated via team managers who were informed about the study and asked to share a list of their social work staff. A direct email with initial information was then sent to these social workers inviting them to volunteer to participate in the study. Social workers who contacted me expressing an interest were given more information and a consent form to complete. The processes for recruitment and consent of social workers were identical to those outlined for the focus group participants. Some of the social workers interviewed had previously expressed an interest in the focus groups but for practical reasons were unable to join. In total seven social workers were interviewed using a semi-structured format. These interviews were conducted between October 2021 and February 2022. They were virtual via MS Teams and the sessions lasted between thirty-five minutes and eighty minutes. Upon

completing the session, a follow-up email was sent to each participant thanking them for their time and attaching a de-brief sheet that had been pre-approved by the ethics committee.

The process of recruiting adult safeguarding leads differed slightly as this role is more specific, therefore I needed to widen my search. I used an NHS England website platform called NHS Futures which is an information-sharing forum hosting various topic channels including one dedicated to adult safeguarding. Participants use the channel to post information and resources, and to ask peers for support with adult safeguarding leadership issues – for example, creating policy documents or job descriptions. I posted a brief note on the forum outlining my research study and inviting people to contact me for further information. Anyone who did contact me was provided with an information sheet and consent form identical to those outlined for the previously discussed participants.

In this recruitment drive, I was contacted by several willing participants who were nursing professionals rather than social workers. I reflected on how this might impact the research– would their views in some way contaminate the data set with its explicit focus on social work? I reflected on this dilemma with my peers and research supervisors. I decided that on balance I was curious to hear their views and surmised that as they had stepped forward to participate, they might have established opinions that they were hoping to share. I considered that by engaging non-social workers in interviews I would be open to hearing a broad and holistic perspective and a challenge to confirmation bias which McSweeney describes as a 'threat' to the trustworthiness of qualitative research (McSweeney,

2021). To support research integrity, I took caution in recording each participant's professional background but maintained broadly the same schedule of questions and a focus on the social worker's experiences. It was decided that when analysing the data from these participants if they presented views that were notable outliers, I would then have a low threshold for considering exclusion from the overall data set.

In total seven participants were interviewed remotely via MS Team; two of these were senior nursing professionals and five were senior social workers. These interviews were conducted between November 2021 and March 2022. The interview sessions lasted between 30 minutes and 75 minutes. All the participants were in broadly similar roles within their organisations delivering corporate safeguarding functions but not direct practice with PCSNs. The final cohort to be recruited was the SAR authors. Participants were sourced directly via professional networks and sought introductions from within this network. During the project, I was made aware of a SAR authors network group, and I approached the chair of that group asking her to share my project information sheet – three participants came forward from this appeal. In total eleven SAR authors were interviewed; six of these were social work professionals and the remaining five were from other occupational backgrounds. As with the previous cohort, I was interested in the views of any willing participant and remained open to the prospect of exclusion if their testimony presented a significant outlier. In the analysis stage, I found that the views of the SAR authors were broadly similar irrespective of their professional background. The consent sheet included

information on how to withdraw from the study (See Appendix A). This did not arise and so the complete data set included is as follows:

Social workers participating in Focus Groups	9
Social workers participating in Interviews	7
Practitioners with Lead Roles in Safeguarding / System Leads	7
SAR authors	11
Total Number of Interview Participants	34

Research Ethics

As a registered social worker, my professional activities are conducted in adherence with the combined ethics framework of professional social work in England as outlined by the British Association of Social Work (British Association of Social Work, 2014) and Social Work England (Social Work England, 2019). Both codes expect due diligence towards ethical practice in the design and execution of a research project with attention to any potential 'ethical issues'. Equally, as a research student, it is expected that my research activities adhere to the university code of ethics and that the university ethics committee approve any new research project (see Appendix D). Taylor et al (2015) suggest that ethical issues in qualitative research can relate to both the roles of participants and the researcher (Taylor, Killick and McGlade, 2015). For Taylor et al, research with people brings an ethical responsibility to safeguarding those participants from any harm including precautions around the possibility of emotional distress. Secondly, Taylor et al argue that in qualitative research there are ethical issues surrounding the researcher's unique position in interpreting the data – offering

greater potential to deliver unethical analysis that is steered more towards their own opinion. This was highlighted above as an identified ‘threat’ to qualitative research (McSweeney, 2021).

Academic guidance advises that researchers engage in reflexivity to examine their subjectivity and heighten their awareness of any potential ethical breaches from this angle (Etherington, 2004). This type of reflexivity should be a familiar practice to social workers though its applicability to a research project may require some conscious reflection and review (Campbell, Taylor and McGlade, 2017). However, beyond these two potential issues, there is a third key issue which is the ethical requirement to professionally act on any information that is shared within the research that indicates an interviewee may be breaching ethical guidelines in their own professional practice. Examples of this might include a social worker interview commenting that they make fraudulent case notes pretending to have made house calls that have not in fact happened. This information clearly demonstrates that the social worker is not adhering to ethical guidance and that their practice could be endangering others. In this instance, the researcher has an ethical duty to share and escalate concerns about this person to their employer or professional body (British Association of Social Work, 2014).

Ethical Approval

In February 2021 the project design was submitted to the UEL Ethics Committee seeking ethical approval for the activities involved in the data collection stage of the project. The committee sought assurance on the safety of research

participants during the recruitment and interview phases, and on the confidential management of participants' information. I used the term safeguarding professionals in the ethics application to UEL, my intention at that time was to interview front-line social workers and safeguarding leads. I was aware not all safeguarding leads are social workers or SAR authors are qualified or registered social work professionals but I was keen to hear their views. All safeguarding leads and SAR authors are experienced professionals with established track records of working in health and social care settings with people who are at risk of harm and abuse. In writing up my findings I decided that I perhaps should be specific about which respondents were social workers and which were not - to identify if there were any interesting notable differences within this small sample. In retrospect, I would be more specific in future ethics applications about which types of professionals are the intended research participants. Though broadly it is unlikely that one type of health and social care professional group would be deemed more vulnerable or at risk of harm when participating in a research project of this nature.

A participant information sheet was compiled which included details about the project, a template consent form and advice on where to seek support in the unlikely event that the research meeting was emotionally challenging (see Appendix A). These documents outlined the research project to the potential participants and explained the safety measures that would be in place to assure confidentiality and safe data management. The committee were assured by the proposed measures and agreed to ethical approval of the project in June 2021. The research was conducted during the period of the COVID-19 Public Health

restrictions and therefore ethical approval was granted for virtual research methods only. Throughout the data collection phase, no safeguarding concerns were noted in relation to the respondents or the discussions of their social work practice. A research diary was maintained to support researcher reflexivity and manage the subjectivity of the data analysis.

Data Analysis

A comprehensive data set comprising thirty-five SAR Reports along with transcripts from two focus groups and twenty-five interviews were uploaded onto NVivo software for analysis. I uploaded the data under two project sets – firstly the SAR reports as discussed above in 'Documentary Analysis', and secondly the field data transcripts. The project required a comprehensive data analysis method that would be effective across both these data sets. I chose Reflexive Thematic Analysis (RTA) as presented by Braun and Clarke (2021) as thematic analysis is a firmly established method in qualitative research and the RTA's explicit integration of researcher reflexivity suited my understanding of this project (Braun and Clarke, 2021). I was drawn to RTA specifically because in this method of analysis the role of the researcher is accepted as embedded within the process and not something to be managed or artificially discounted (Byrne, 2022).

Braun and Clarke's Reflexive Thematic Analysis has been presented and refined over two decades with several publications outlining the method in a series of steps for researchers (Braun and Clarke, 2006, 2021; Clarke and Braun, 2018). They theorise that analysis themes do not 'emerge' from the data but rather evolve from the research processes within the project which involve considerable

steer and presence by the researcher. A key feature of this method is its explicit management of the researcher's positionality and presence within the project. As the researcher I am aware that my views are embedded in the research questions, and I was seeking a method of analysis that would accept, if not encourage this positionality. For Braun and Clarke, this researcher reflexivity is the only authentic transparency available. As a researcher, I was concerned from the outset about social work voice; I was anxious to avoid being too dogmatic about 'this is what they are saying' but rather 'this is what I hear'. Based on my training in social work and narrative approaches, I have learned to approach ideas with an open mind, double-check and confirm assumptions, and be mindful of any communication challenges that may arise, especially when it comes to implied meanings that may not have been intended (White, 2007).

In brief, the RTA method outlines six stages as follows

1) Familiarisation with the data set.
2) Coding – compile the relevant segments of data under each code.
3) Generating initial themes.
4) Developing and reviewing themes.
5) Re-framing, defining, and naming themes.
6) Writing up findings (White, 2007).

Applying these to the data was broadly similar for each data source though, with the focus groups and interviews, I watched and re-watched the video recordings as part of the familiarisation process. In the second stage, 'coding', I prepared by reviewing guidance offered by Ryan and Bernard (2003) who offered a helpful list

of phenomena to be watchful for including statements, repetitions, categories and similarities or differences (Ryan and Bernard, 2003). I opted for inclusive ‘open coding’; to highlight words or passages of interest including at times noting the absence of something expected (Braun et al., 2019). Any word, comment or inference that sparked interest was given a code. In the first reading of each report, some of the codes were objective facts such as that the individual had a learning disability, or that social workers participated in the review process. However, the analysis also included subjective information for example suggestions that a social worker could have visited a person but didn’t or analysis that there was a ‘missed opportunity’. The codes were named and recorded and the relevant segment from the text was cut and filed under them using the NVivo software. Each SAR report and each transcript underwent this coding process which led to the creation of a substantial number of broad and varied codes. The documents were re-read several times until it was felt that no new useful codes were forthcoming.

Based on the research questions the coding specifically sought to identify any relevant nouns or verbs in the literature relating to different aspects of social work practice. These included for example professional decision-making, social workers’ accountability for practice, emotional aspects of managing risk, and organisational challenges. The coding process quickly generated a volume of codes that was so large it was unusable. Therefore, I began from the initial stages some process of ‘winnowing’ (Tight, 2019) that is, collating and fusing those that seemed to be too similar. Upon completing this the list of codes was still too broad therefore it was examined and re-examined in seeking to establish themes. For

example, the codes: *'busyness'*; '*diary pressures'*; '*staff shortages'* and '*caseload*' were all merged into one theme '*work pressures'*. These initial themes or '*Candidate Themes'* (Braun and Clarke, 2021) were then presented in list form ready for the next stage.

The fourth stage covers the tasks of reviewing and developing the Candidate Themes into workable themes that fully relate to the research questions. At this point, some are collated if too similar and some can be eliminated if they do not seem to best serve the research questions. This process seeks to produce a refined group of themes that exist on their own terms without too much overlap (Braun and Clarke, 2021). Researchers are cautioned at this stage to check themes for accuracy and seek to avoid 'topic summaries', a not uncommon pitfall reported by Braun and Clarke (2021). To understand this challenge, it is useful to explore the above example of '*work pressures'* which is a collation of a few codes on that topic, but it does not immediately indicate the social worker's feelings or views around this. Social workers' statements may comment positively about work pressures as being invigorating or showing the value of their work for their clients. The process of defining themes requires an examination of the text selections that were applied to each candidate theme and an excavation of the meanings for participants detected within these themes.

The fifth and penultimate stage in RTA is to take these refined themes and label them in a manner that provides insight and direction towards answering the research questions. Again, following the above example '*work pressures'* might be the base that defines a theme entitled: '*The negative impact of work pressures*

on staff morale'. Such a title signals a clear intention to the reader and demonstrates that the information gathered around that theme has depth and direction. The final stage in the RTA method is to write up the findings by demonstrating the evidence from which the themes were created and establishing an argument for how these constructed themes seek to speak to the project's research questions. In this writing up, the researcher has the opportunity to be explicit about their thought processes and their reflections on how they interacted with the data in the development of themes (Byrne, 2022).

Chapter Summary

In conclusion, the methodology chapter presents the mechanics of the research by first considering its philosophical and theoretical routes. A discussion of ontology and epistemology guides this and supports both clarity of understanding and the development of research integrity. The specific research methods used in the study are presented with some rationale and defence of their appropriateness for the task. The methodology chapter explores the specific context of practitioner research and views this as enriching the data collection and analysis processes. The literature is suggestive that some of the key skills in qualitative research including interviewing (McLaughlin, 2012), analysis of narratives (Andrews, Squire and Tamboukou, 2013), and reflexive awareness of positioning (Etherington, 2004) are familiar skills for social workers (Campbell, Taylor and McGlade, 2017). The research findings that follow are mindful that they incorporate a social worker's views of what SARs report on social work, and this is embraced for the understanding and nuance it may bring.

Chapter Four: The Research Findings

In Chapter Four I will report the findings from the research project, outlining them in a series of consecutive research stages. Therefore, this chapter is presented in three parts as follows:

Part One: Results of the Documentary Analysis

Part Two: Initial Findings from Focus Groups and Interviews

Part Three: Results of Reflexive Thematic Analysis

In the first stage, I present my findings from the documentary analysis of SAR reports which was completed in advance of the other field research. Information and analysis from this exercise were used to prompt conversation with participants in the subsequent focus groups and interviews. In the second stage, I present the results from analysis of the focus group and interview transcripts, leading to the establishment of a set of candidate themes. To organise my data, I placed the participants' transcripts into cohorts according to their professional seniority. Though the field data was not always collected via this sequence, these cohort divisions should be understood as an organising tool from which to understand how this extensive data was first organised and then woven into one comprehensive set of findings. The final stage reports the evolution of candidate themes into a set of overarching themes representative of the reflexive thematic analysis of this large data set. The below presents the findings as they are – the results of this research enquiry. They are laid out as the narratives that seek to address the research questions. The meaning of this story and its implications will be discussed further in the next chapter.

Part One: Results of the Documentary Analysis

As outlined in the previous methodology chapter, the initial familiarisation exercise produced many codes which were then re-organised and, in some instances, collated. This work was guided by the question '*What are the identifiable narratives about Social work within SARs?'* and so, for brevity, the results in the form of codes that did not relate to this question (for example 'physical abuse' or 'care homes') were discarded. Initial analysis identified patterns within the texts which were coded as follows:

A) Comments about Social work Practice:

- General Comments about social work including recommendations
- Descriptions of social work practice that fell short of expectations
- Descriptions of social work practice that is good or surpassed expectations
- Comments about relationships with PCSNs including those deemed to be 'complex'
- Use of the term '*Professional Curiosity'*

B) References to 'The System' around social work failing:

- Comments about multi-agency co-operation
- Comments about senior management and decision-making
- Comments about the commissioning of services and governance
- Discussion of learning events and implementing change

Social Work Practice

Each review opened with an introduction that set out its intention to '*highlight good practice*' along with system issues and recommendations for change. This is in line with the SAR guidance and recommendations (Department of Health and Social Care, 2022). Across the sample, '*social work'* was not always routinely referred to with '*adult social care'* and '*local authority professionals'* also used. This may reflect the system and organisational lens methodologies seeking to avoid emphasis on the actions of a particular professional (Cooper and White, 2017). It was noted that in twelve cases social work was not referenced; often this was to do with the individual not having been involved with social services. In the remaining twenty-eight reports, reference to '*good*' social work practice was recorded nine times (from six cases) versus reference to social work practice that fell short of expectations which were noted sixty times (from twenty-two cases). References to disappointing social work practice often commented on high turnover in allocated social workers for example in the case of Alice from the London Borough of Redbridge it was reported that:

> '*There was instability in social work arrangements, with times when Alice had no social worker and therefore no oversight of her care needs or plan.*' (Wiffin and Fish, 2021:10)

These expressed disappointments in the social work service were frequently contextualised by referring to '*the system'*, but with suggestions that a different version of social work could be available. For example, in the case of JoJo from the London Borough of Hackney, the SAR author asserts:

> ‘*The function and requirements of social care should not be diminished to a purchasing equation only.*’ (Winters, 2019:30)

In just one instance the specific actions and decisions taken by an individual social worker (who might be identifiable to themselves) were specifically criticised within the published report. Many reports attempted to highlight people’s lived experience of social work services by including service feedback from relatives, for example, the family of CM who reported that they did not feel that their opinions on their father’s care were listened to or valued (Morgan, 2018). This included at times a broader lifespan experience of social work, for example, JoJo’s mother reported that whilst she had positive experiences they were without an allocated social worker for many years and she found navigating the duty social worker system very frustrating (Winters, 2019).

Across the SAR reports social workers’ efforts to assertively engage with clients were noted. For example, for MS it was reported that:

> ‘*Persistence and the continuity of practitioners involved represents good practice’* (Preston-Shoot, 2020:20)

Additional or exceptional efforts to engage individuals who refused services were also noted, for example in the SAR report ‘*Mary*’ it was reported that:

> *‘Mary was at first reluctant to engage with the assessment, the social work records show that the social worker was diligent in attempting to build a*

relationship to support the development and implementation of a care plan.' (Wonnacott, 2017:5)

However, where this type of effort was not evident the tone was at times chastising. This includes, for example, reports of social work practice that was:

'…not person-centred…nor focussed on maximising Mr V's own resources and ability. It was often disabling, process and output-driven.' (Bishop, 2019:3)

and led by:

'*Professionals who neglected to explore further their clients' lives.'* (Stanforth, 2018:16)

The term '*Professional Curiosity*' is commonly mentioned in SAR reports, with over 21 instances of its use in this sample. Although there is no universal definition, it generally refers to a professional's ability to think critically and consider the broader context when working with a client. This includes identifying potential challenges that the client may not explicitly mention (Cooper and White, 2017). This is central to safeguarding practice as individuals who experience abuse and neglect may not always be aware of this or may not feel safe to disclose it. Therefore, a system that fosters safeguarding is thought to be a system in which practitioners are enabled to exercise professional curiosity and ask questions beyond their initial remit when required. The repeated finding that

there was a lack of professional curiosity could arguably be read as weighing heavily on practitioners with possible implications of lack of interest, work-to-rule style of an engagement or perhaps even fatigue or laziness. Some, but not all, of the SARs mitigated this directly by noting that systems around practitioners prevented curiosity due to for example the pressures of administration requirements (Morgan, 2018), an identified lack of organisational support for practitioners (London Borough of Barking and Dagenham, 2017), or more broadly highlighting limitations in resources and legal frameworks (Bateman, 2018).

The Systems Failing

As noted above, many SARs referred to '*the system'* and sought to place poor social work practice within the context of wider system failings. Many SARs reported failures working collectively across agencies including concerning sharing information for example:

'*Partnership working appeared totally absent.'* (Boxall, 2016:5)

A dominant finding within the documentary analysis was recommendations about improving systems including suggestions for multi-agency forums, closer working arrangements for service teams, and a call on practitioners to escalate challenges that they experience with neighbouring service teams. These findings suggest that there is strong confidence in the practitioners and hopefulness that the improved systems will create conditions for good practice to flourish. This type of finding within a SAR locates a need for change within the day-to-day operational and management activities and is often accompanied by specific practical

recommendations. Examples of this include the SAR '*Mr F and Mr G'* a recommendation that a local High-Risk Panel should review its terms of reference (Oates, 2020). Similarly, in the SAR '*Mrs Y',* it was noted that since the tragedy, local referral forms used to alert adult social care had been updated with certain prompts (Staines, 2016).

Many of the SARs did highlight evidence of specific failings within services. Examples of this include statements that the SAR reviewer:

> *'…was unable to find any evidence of a care plan, support plan, personal health plan or risk assessments for Ms A during the period.'* (Redbridge SAB, 2018:5)

or that in another case:

> '*The pathway planning process was unsuccessful in integrating the specialist services and support Alice was engaged in.'* (Wiffin and Fish, 2021:26)

The implication in these instances is that the systems and processes currently in place could be sufficient to prevent harm so long as they are appropriately executed by practitioners. This contrast is perhaps reflective of the overall complexity of safeguarding work which can be experienced by practitioners as jostling between individuals and systems. Clare articulated this dilemma as follows:

"*Sometimes people are not ready for our interventions when we are ready for them and then we can't close the case when we are supposed to*"

These findings established some insights into the type and style of stories about social work held in SARs. These findings were useful in themselves as a direct contribution to answering the research questions, but also these findings became a resource used to prompt conversation with the subsequent research participants.

Part Two: Initial Findings from Focus Groups and Interviews

The focus groups and interview transcripts all underwent the same processes of familiarisation, coding and recoding as described in the methodology chapter. The coding process was broad in both semantics, i.e., words spoken by participants, but also latent ideas, i.e. inferences that I may have picked up from the conversations. This is in line with Braun and Clarke's guidance around ensuring a wide scope when coding documents (Staines, 2016). For example, the words '*system*' and '*blame*' were used frequently across all participants, and these were recorded as codes. However, other codes arose from my interpretation for example 'anxiety' or 'concerns about nuance' – the latter being frequently alluded to but not in those exact words. The initial coding exercise produced a long list of well over eighty codes, but I continued to code and recode until I felt that I was not adding any new useful codes. I then considered the long list and tried to combine codes where relevant. For example, Throughout the process of coding and re-coding several codes such as '*Use of SARs', 'What are*

SARs for?' or '*Purpose of SARs'* were identified, and these were combined into one code entitled '*Value of SARs'*. Substantial extracts of the text were added to this collated code.

From the initial stages of becoming familiar with the data, it was immediately clear that the participants offered a range of ideas as to the purpose of SARs and their perceived value. Interestingly over the entirety of the data set, positive comments about the worthiness of SARs were most strongly correlated with the front-line social workers. Comments on this included for example Layla a social worker suggesting that SARs are:

"*Really useful*"

Susan a social worker stated her view that SARs are:

"*So important*"

Many participants cited SAR's contribution to learning for example Ann argues:

"*There is always something to learn from them."*

This was linked by respondents in the social worker's focus group to organisational learning and transparency for example Claudia states:

"*SARs show that the organisation is open and honest"*

I was initially careful about the possibility of respondent bias and utilized the given time to further investigate these comments and try to provide more context to the opinions expressed. Early on, I noticed a significant amount of fear or anxiety among the group of social workers regarding SARs. For example, when I asked Ann to describe her initial thoughts on hearing about a SAR publication she answered:

> "*Trepidation because SARs can overlook certain things. Overall, I find them scary.*"

Similarly, Layla commented:

> "*You can see so many parallels between, you know, I guess the patient who died, but also the work with that you might be doing with someone similar who is also subject to something very similar. Like it is those parallels and just knowing that in some ways SARs are closer to home than we might think it is… can be quite anxiety provoking."*

Criticism of SARs landed on familiar issues including timescales, length of reports and repetition of recommendations. Timescales were often the first cited concern for example Clare states:

> "It's *a 50-page report with a name, a big, long chronology and then well it happened in 2018 so everything is different now*"

Many participants commented negatively on the length of the reports suggesting this is a barrier for practitioners reading them, for example:

> "*They are so long, and you just wouldn't read them"* (Joy)

Finally, SARs were frequently criticised for being repetitive, particularly concerning the recommendations. Comments on this included for example:

> "*I can tell before they start the actions will be communication plan, handovers, mental capacity and training.*" (Lisa)

These comments are very much in line with contemporary research about social work inquiries more generally (Rawlings et al., 2014). In contrast, I anticipated that SAR authors would be broadly positive about the impact of SARs, however, there were some dissenting voices within this cohort with concerns relating to the general processes. For example, Nadia a SAR author from a charity sector background suggests:

> "*Different methodologies might be more useful.*"

Many authors questioned how widely their work is disseminated for example Emily a SAR author from a nursing background asks:

> "Can *the public actually ever get this information?*"

On this theme, many authors expressed doubt about the ability of their authored report to influence changes in practice, noting their limitations in influencing this. This challenge is captured succinctly by James, a SAR author, and former police officer. James suggests:

"*You produce the report, but it is up to the board to let it have an impact"*

However, I found it interesting that the strongest dissent vocalised against SARs as a mechanism came from the safeguarding leads. Cynicism was repeatedly detected amongst this cohort, for example, Mo comments:

"*And you just start to think well, is this of any benefit to anyone this whole process? I do question it sometimes*"

And Katie suggests:

"*SARs are a little butt-cover, a little judgy.*"

Like the '*Value of SARs'*, many of the participants commented on the *processes* and procedures surrounding SARs, namely the investigations and the final report writing. In interviews, some social workers and most safeguarding leads tended to speak more highly of the SAR processes than of the SAR reports. This view was unanimous including those whose experience of SARs was purely academic. Each participant agreed that bringing services together to reflect on a case is

useful for enhancing current working practices. For these participants, the SAR processes and the statutory nature of multi-agency involvement were perhaps the most useful beyond the SAR report. In some instances, particularly those social workers who were dismissive of SAR reports still offered positive affirmations about the potential of the SAR processes. These comments are congruous with SAR quality marker seven which suggests that the SAR process should be one that can facilitate resolving tensions between agencies (SCIE, 2022a). Codes pertaining to these issues were collated under one over-arching code entitled '*SAR processes'*.

In following the processes described in the above methodology chapter, coding, recoding and then collating codes, I produced a list of twenty themes. These themes were chosen based on which overarching codes had the most text extracts attached, and which spoke most directly to the research questions. At this stage, a couple of outliers were eliminated. For example, one of the participants had spoken at length about issues concerning PCSNs' cost of living and poverty. Upon reviewing the data, specific codes from this issue for example '*gas prices'* were only relevant to one respondent and therefore it was decided not to include them in the final list. Having repeated the processes of collating and organising the codes several times I finally produced a list of twenty candidate themes. These are displayed here in Table 1:

Table 1: The Candidate Themes

Failings	Learning and Development	The System	Professional Activity	Blame
Concerns about Nuance	SAR Processes	Anxiety	Supportive Management	Perceptions of Social Workers
Justice and Human Rights	Being a Worker	Change	Escalation and Advocacy	Abuse and Neglect
Good and Bad Practice	Social Work Advocacy	Value of SARs	Empathy	The Emotional Work of Social Work

Evidence of each theme was detected within each cohort of participants – though not with the same level of strength or consistency. I found that the discussions generated similar themes though perhaps with varying emphasis within these themes. For example, across all the participants the issue of service improvements was mentioned, however, for social workers this tended to centre on daily work conditions, whereas for SAR authors service improvements tended to orientate towards larger-scale systemic shifts in funding for services. In Table 2 below I present the most frequently occurring themes that were evidenced by analysis of the transcripts from each cohort.

Table 2: Frequent Themes by Cohort

Data Source	Most frequent themes		
Documentary Analysis	SARs are about Failings and Failure	Professional Curiosity	The system
Focus Groups	Learning and Development	Blame	Concerns about Nuance
Interviews with Social Workers	SAR Processes	Anxiety	Supportive Management
Interviews with Safeguarding Leads	Empathy with Front Line social workers	Perceptions of social work by others	Desire to support social workers to Self -Advocate
SAR Authors	Justice for PCSNs. Social Work Ethics and Values	Achieving Change	Reliance on Process

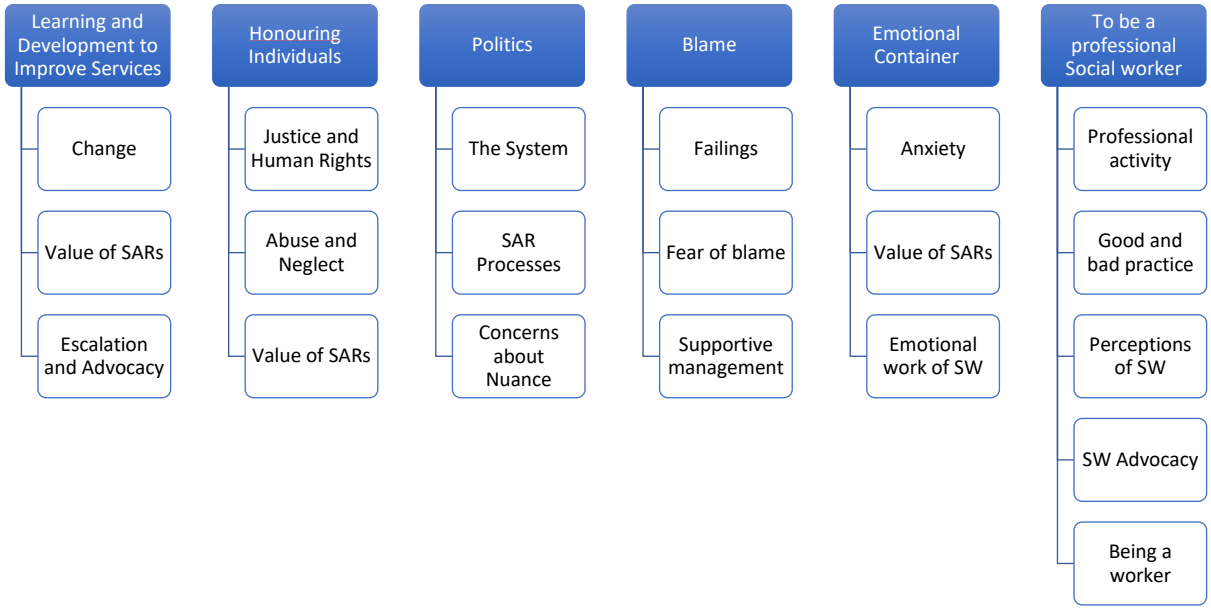
Whilst this is interesting, and a useful framework around the research, there are limits to how informative this information is for the research questions. From this, it is not clear as to what the participants' views are concerning these subjects, or indeed the degree of variation of views. Upon further consideration, it became clear that some of these candidate themes are more accurately understood as '*topic summaries'* as cautioned against in Chapter Three. With this perspective, the analysis of findings moves to the third section, developing in complexity to consider an overall thematic analysis of the entire data set. In reviewing and re-reviewing the candidate themes I began to see them as members of small clusters of ideas relating to an overarching theme. The analysis includes

consideration of how data from each of the cohorts gathered around the dominant themes. Reviewing these themes with a focus on their relevance to the research questions and their perceived dominance across the data allowed the development of six overarching themes which I will present here as the research findings.

Part Three: Results of Reflexive Thematic Analysis

In labelling these themes rather than describing a cluster I sought to follow Braun and Clarke's (2021) guidance and offer signalling to the reader about the meaning of the theme (Braun and Clarke, 2021). At this stage, none of the candidate themes were excluded and so the overarching themes are depicted here in Table 3 as follows:

Table 3: Developing the Overarching Themes



Herein I will discuss each of these with an emphasis on how they relate to my research questions.

Learning and Development to Improve Services

Across all the research conversations '*Learning and Development'* (L&D) was frequently cited by participants as being central to the work of SARs. L&D is often discussed as an explicit purpose for conducting a SAR, put succinctly, one SAR author Nadia from a charity sector background reported:

> "*I see each new SAR as fresh bitter learning.*"

However, this is a broad theme and can refer to a range of ideas and activities. In general, the social workers spoke with pride about their employer organisation's involvement in SARs. This work was seen as demonstrating a commitment to the objectives of openness and being an organisation committed to learning. However, there is little specified about who should be learning or where this development should occur. Across both the focus groups and the interviews with social workers there was considerable evidence of doubt about the potential learning from SARs. For example, Emily comments:

> "*Sometimes the learning is so obvious*"

Similarly, Clare asks:

> "*How can you say that they are about learning when they are so personal…so individual.*"

This hints towards suggestions that for these social workers, although L&D may be the stated aim of a SAR, they are doubtful about how this objective is met. I will consider just two aspects of L&D which I found to be dominant ideas across all the data, namely L&D for organisations participating in SAR processes, and secondly, L&D that uses SARs as training materials.

For this first aspect, considering the 'L&D' that occurs within services that are part of a SAR investigation, this can be about the specific incidents reported within the SAR and as a by-product of bringing agencies together. Objectively, L&D activities in this arena aim to improve services, and here is where the participants begin to diverge in their views of how SARs serve this function. Many of the participants spoke about the importance of 'the process' and the opportunities within the SAR processes for multi-agency reflection. All participants rely on the process to deliver some necessary recommendations for improvement however responsibility for implementing these can lie within '*the system'* which is often undefined.

Regarding the second aspect – that of using SARs as learning materials – some participants mentioned specific examples of learning from SARs, such as using them in supervision. When asked about their familiarity with SARs, many social workers pointed to training events as their source of knowledge about SARs. This was reflected in comments including for example Eve stating:

> "*I attend the learning events and we talk about them in our team."*

Similarly, Amy recalls:

> "*There was one recently that we talk about, and we refer to it when we are working together on a similar case."*

These are suggestive that for at least these social workers, SARs are part of general learning and development activities. From the perspective of research integrity, it must be noted that this familiarity could be specific to their geographic region, and of course, willingness to engage in research about SARs could be correlated to prior knowledge of SARs.

Most of the safeguarding leads spoke about using SARs as training materials and in supervision sessions, noting that the personal story is welcomed by participants. For example, one SAR author Esther reports:

"*I use them in training because they stick because the narrative and story are far more likely to stick than a process.*"

Participants in the first focus group reported discussing a recent SAR in a team meeting and drawing learning from it to support a current case. Joy captured this experience by commenting:

"*It is like the past informs the present and calls on people to make this one a different outcome.*"

However, there was equally some challenge to the effectiveness of SARs as a tool for learning and development. These challenges spoke to familiar concerns from the literature about the impact for example:

"*Are we actually learning from these? Have our interventions actually changed?*" (Nancy)

and Lisa states:

"*There are so many that it is like a tick box exercise, you know recommend training, awareness bit of this, bit of that, they need to be smarter to have an impact.* "

For the SAR authors, in general, their awareness of the potential to develop services and support system learning is seismic for example as Esther a SAR author comments:

"*SARs are a chance to bring the much-needed evidence for change."*

These ambitions are often tempered in their view predominantly by the infrastructure that embeds learning and development. The SAR authors demonstrated some variance in SABs' adherence to SAR processes and mixed

quality in the resultant SAR reports. For example, Simon a SAR author and states:

"*The impact is limited to what the SAB do with the report.*"

This view is consistent with previous research on SARs discussed in Chapter Two, wherein the SAB's governance of SAR learning implementation is noted as being integral to their effectiveness (Braye and Preston-Shoot, 2017).

It was noted in Chapter Two that the current literature on SARs is critical of '*staff training*' being overused as a recommendation from SARs as there are concerns that this may reduce the complexity of the systemic L&D need down to training individuals on specific issues. On this subject, some participants spoke about the usefulness of 7-minute briefing documents for staff teams to outline the key messages from SARs. However, several other participants dismissed these. For example, Joe a SAR author referred to 7-minute briefings as being:

"*reductive*"

Whilst Alison a SAR author regarded them to be:

"*gimmicks*"

These comments highlight the core challenge for SARs – in attempting to explore tragic circumstances using a systemic lens, but then achieving learning and development objectives that are meaningful and relevant to individual practitioners. The findings here suggest that the capability of SARs to assist with learning and development varies and social workers show scepticism towards their potential. A previous study exploring cynicism in social work suggests that such feelings are typically an emotional response to structural changes (Carey, 2014). Carey's study argues that cynicism in social workers can be enhanced or diminished by contextual factors including professional discourses, government rhetoric, the ability to communicate with PCSNs and the influence of colleagues.

Arguably these factors are equally relevant when considering the potential for learning and development activities within social work to be accepted by workers and to have an impact. Therefore, the potential for SARs to contribute to L&D may be reliant on the ability to overcome wider cynicism in relation to organisations and worker roles. Some SARs do make specific reference to over-stretched workers, including for example in SAR 'Phillip' in which the SAR author suggests that staff numbers were unsuitable for the level of workload (Williams and Bateman, 2022). My research finds that it is uncommon for service teams within SARs to highlight their ability to provide services with available resources.

Honouring Individuals

Several participants mentioned that acknowledging and honouring the harm experienced by an individual was a necessary task of SARs. When participants spoke about the individuals who were subject to a SAR investigation, often a sense of sadness was detected in their comments. Examples of this include:

"*This was someone's life.*" (Emily – A SAR author and nurse).

Also,

"*The pain he must have been in.*" (Claudia)

Along with this sadness, I also detected a sense of injustice for example. For example, Roberta asks:

"*How did anyone think this life was ok for him?*"

Whilst Joe states:

"*This was a family who was let down.*"

It was argued that the individuals subject to a SAR should not be forgotten and that service provision should be examined through the lens of that person's

experience. For some participants, SARs as an inquiry do maintain this individualised focus for example James a former police officer suggests that as a SAR author:

> "*There is a desire to put each case about an individual*"

SAR authors provide clarity on this by expressing the practice of sharing a human story but also retelling it for purpose for example Nadia explains her thought process when approaching a new SAR:

> "*I make sure that the person is at the centre of it, and I work outwards from there.*"

Likewise, Simon notes the centrality of the individual's story in his approach:

> "*When you get over the sadness etc of this individual you have to set to work drawing out evidence."*

Alongside these perspectives, some voices of dissent expressed concern about the potential for SARs to achieve this goal of honouring the individual. These doubts were most frequently articulated by the safeguarding leads with comments including for example:

> "*You've got such a responsibility to the family that you want to do the best you can but sometimes it feels like a dung beetle*" (Katie).

Therefore, whilst there is consensus that one purpose of SARs can be to honour the experience of an individual, the results point to some doubts as to the ability of SARs to achieve this. For SAR authors, the centrality of the individual story is vital but there is a sense that the story's purpose is to be motivational and, in some way, to act as a change agent. This was suggested quite directly by some SAR authors for example comments:

> "*We know that people listen to human stories."*

Similarly, Sheila a non-social worker from the charity sector states:

> "*The human experiences and stories give you an evidence base.*"

However, for some safeguarding leads, this individualised inquiry may be an uncomfortable method for interrogating current service provision with the above-noted concerns about being truly respectful of the person's experience. This highlights the challenges SARs face in achieving multiple aims, echoing the research evidence presented in relation to other inquiry formats in Chapter Two.

Politics

Though almost all participants spoke about SARs bringing change, the word politics or political was not strongly featured in the data from social workers. However, this was a theme felt among the safeguarding leads and a very strong theme among the SAR authors. In Chapter Two I presented research exploring the role or purpose of inquiries which cited political motivations as one of the key reasons why an inquiry might be commissioned. Walshe argued that organisations, including the central government, might commission an inquiry to be politically strategic (Walshe, 2002). For the SAR authors, SARs are political almost by definition as their purpose is to impact change. Many cited larger-scale reviews as having had significant policy influence, for example, James a former police officer suggests:

> "*The Winterbourne View Inquiry…led to a really strong commitment from the government to do something about the situation of people with Learning Disability and challenging behaviours being placed so far from home.*"

Alongside this, there was an expressed frustration that SARs do not fulfil their potential in this regard. Nadia a SAR author from a charity sector background comments on this directly:

> "*SARs are not as political as they should be.*"

Whilst Lucy recommends that to have the desired impact SARs should include:

"*Wider conversations with regulators and professional bodies.*"

Many participants modified this view by suggesting that for SARs, they were speaking about "*politics with a small p*" (Esther, Simon, Joe) intimating smaller, localised changes. It is interesting to note that these three respondents cited are all from the same professional background of social work / social work manager. However, in considering local impact, many SAR authors cited challenges around how boards manage the published reports and escalation pathways. Overall, there is a sense that, for many SAR authors, the objective of a SAR and its ability to influence are both inherently political. For example, Simon a SAR author asserts:

"*It is about social justice, human rights and equality…*"

Whilst Nadia suggests that, and the task of a SAR author is:

"*To figure out relationships and power structures.*"

For Lucy, the intention of a SAR is:

"*To have an impact on the status quo, not my personal agenda.*"

Liza argued that as members of the public are not routinely involved in the SAR process, there are therefore inherent limits to their democratization. The fact that this language of politics was not present in the social workers' responses is interesting. I can speculate that for these social workers SARs are viewed through a local lens of service adjustments rather than power structures. Perhaps this also points to a potential disconnect between a SAR author who carries a heartfelt sense of motivation to impact a system, and a local worker seeking support to improve their everyday practising conditions. There is considerable research discussion on how professionals such as social workers exercise power and

discretion within the arena that is available to them (Evans, 2011). Arguably, stakeholders may view the potential influence of SARs based on the gaps they see, which may exclude national policy or multi-agency strategy from the reach of social workers.

Bouncing the Blame Ball

Blame and fear of being blamed are recurrent topics within all the data sets. In collating and analysing the above data around the theme of blame, I introduce the metaphor of blame being understood as a ball that is being bounced around an enclosed court, like a basketball arena. However, within this metaphor the players do not want to touch or pass the ball – their fear is being left holding it – hence the description of bouncing the ball around but it remains inside the court seeking to land somehow. As discussed in the literature review, the Statutory Guidance for SARs asserts that the process should not be about appointing any blame (Department of Health and Social Care, 2022). However, for some participants blame is an inevitable part of any such process. For example, a social worker Roberta comments:

> "*This is what SARs are for, to find those responsible."*

Many noted that stakeholders such as relatives of individuals may want the SAR process to deliver a judgement on where the blame lies. On this issue, one author comments:

> "*Often families want the output to be that someone is blamed and accountable.*" (Esther)

In each of the interviews, social workers spoke about their anxiety about inquiries and there was a presiding theme about fear of blame – in the above metaphor this can be captured as 'fear of catching the ball'. All the social work participants made comments about record keeping and documenting actions as being necessary evidence of professional work with some directly implying this was needed to prove their activity in the event of an inquiry. There was uniform agreement across both focus groups that this potential for blame exists and that

social workers can often feel a fear of blame throughout their daily work tasks. On this issue, Ann points to the likely impact of this:

> *"It really makes me think that wow, you are one mistake away from being in an adult safeguarding review and I have a lot of fear about that to be honest, about that accountability. Because I think wow, its human life and we are all human and sometimes things take a lot longer than you want them to. Naturally…for example, are you covered because you referred to another agency? Your work becomes very anxiety driven and that's probably not a good thing for the service users. I hold people's lives… I want to be improving people's lives but potentially I could make a mistake…"*

In analysing the data, this articulated fear is a worry that neglect or harm could happen but also a more personal fear that the respondent as a professional could be held accountable for this harm. Arguably it is a combination of both these concerns. Social worker's comments on this latter issue included:

> '*I'll look on that website and read them up to scare myself…'cause you never wanna be involved in one of them*" (Nancy).

Some social workers reported concerns that the current style of inquiry influences their work practices. For example

> "*Inquiries lead to anxiety-driven practice"* (Jessica).

Many participants expressed concern that this would have an impact on professional decision-making. The impact of this was captured by many social workers for example:

> "*I think if I am honest that learning about SARs has the impact of bringing out the defensiveness in everybody…and my worry is that it can lead to rash decisions*" (Amy)

Likewise, Charlotte stated:

> *"When you know about SARs, I think it's quite hard not to fall into defensive practice and…You know often there are things that you want to be doing anyway related to sort of managing risk… you want to do safety plans for people regularly. But sometimes I suppose it can feel like you might do them more and sometimes it doesn't always feel as therapeutic the way that you do them because it feels like a bit of a tick box. And you do that partly because you want to know that you've documented that it has been done."*

These comments were consistent with recent research exploring the child-protection social workers in England and their reported fears of reprisal, and citing high-profile inquiries as sparking this fear (Murphy, 2022). Many participants pointed to well-known national inquiries into social work practice such as the death of a child Arthur Labingo-Hughes[8] and commented that they felt concerned or worried for their social work peers in those areas (Susan a practitioner and Alison a SAR author). About SARs specifically, social work participants tended to agree that an investigation could potentially lead to blaming a social worker unfairly for harm and neglect experienced by an individual. Comments on this include for example Layla stating:

> *"That last SAR in our area was top heavy with what a social worker did wrong. Social workers are always the ones being blamed*."

One social worker Jessica received emphatic agreement from her focus group peers when she stated:

> "*SARs make me feel angry but also sad and then mainly afraid, afraid it could happen to one of my cases."*

[8] Arthur Labingo-Hughes was a six-year boy from Birmingham who died following a prolonged experience of abuse and neglect by his father and stepmother. The circumstances of his death were widely reported in national media which included commentary on previous social services pursual of abuse allegations during his life (Murray, 2021; BBC news, 2022).

From the above evidence, I argue that SARs are contributing to the story of social work, a story that is consumed by social workers. This will be discussed further in the next chapter. The findings also point to a fear of passing blame, or to further exploit the metaphor a fear of throwing the blame ball at a peer. With this understanding that blame is an entity that can be easily passed around, the data further points to a sense that participants may fear their part in this process – the fear of blaming others. Many participants expressed aims to avoid being party to other colleagues experiencing blame for events outside of their control. In each focus group, the participants shared concerns about the pressures experienced by care workers. This was stated most succinctly by a Clare who commented:

> "*Obviously I don't want to be sitting here saying that all carers and care agencies are sh*t.*"

For some SAR authors, the fear of passing blame is a notable entity that impacts the work tasks and the processes within the SAR. Jade a SAR author and former nurse captured this in her comments:

> "*This one social worker used to come into the SAR panel meetings, and you could see the tension in her body movements almost… I had to keep reassuring her… it was relentless"*

In considering this issue, participants viewed the power to pass blame differently with some finding it to be inevitable in their industry or service setting, for example, Rachel a strategic need from a nursing background suggests:

> "*Front-line staff think that they are going to be blamed as they were the last ones to see the person, or not as the case may be."*

However, others point to the policy and legislation structure around adult safeguarding that may contribute to the potential to pass the blame onto social

work staff. Sheila a SAR author whose background is not in social work but in the charity sector captures this when she comments:

> "*Safeguarding has been legislated to be everyone's responsibility but structurally the responsibility is mostly on the shoulders of adult social care."*

In general, participants were quick to assert context such as workplace pressures etc. and it was interesting that suggestions of staff failings were frequently discussed through this lens. For example, concerning SARs finding practice that falls short of expectations, one interviewee Katie a strategic lead and social worker commented:

> "*Some social workers are just low quality, but then I think who is training and passing them and employing them, they are vulnerable people really"*

This is indicative of a much wider systemic scope in which to bounce the blame around.

Although the stated aim of SARs is to avoid blame, this study shows that social workers still fear being blamed and contributing to the blame of others. It is arguably the case that SAR processes can work harder to manage this issue and deliver a truly 'non-blaming' experience. The SAR authors generally acknowledged that efforts to avoid being blamed can dominate participants' contributions to SAR processes. For example, Joe a SAR author comments:

> "*We have signed on to blame… it's natural and you get into it very quickly.*"

Many SAR authors describe having to continually work to maintain a non-blaming stance for example Jade reports:

> "*I really try to emphasize that it is not about blame but I am going to be critically challenging.*"

Their strategy for this, as reported in the interviews, is a tendency to rely on the SAR processes to ensure that their work does not contribute to blaming individuals. Comments on these included reminders that the SAR task is to adhere to approved methodologies which support a non-blaming stance, for example, Alison states:

> "*We need to keep the principles and the methodology clear constantly."*

Similarly, James comments:

> "*I create conditions where people can be open and honest."*

Some authors more than others reported finding it challenging at times to manage blame within the process for example Joe comments:

> "*I find poor practice very very difficult to deal with and it can be so quickly evidenced."*

Some SAR authors shared their own personal strategies for managing blame in their SAR authorship, for example:

> "*I open every meeting, workshop and report with a statement that this is not about blame.*" (Lucy)

Likewise,

> "*I say to practitioners it's about holding a mirror up to our practice and seeing how we can support each other with changes."* (Jade)

In drawing from the findings in this research, the metaphor of a ball that players frantically bounce around a course has been very useful to the interrogation of how participants understand SARs in relation to blame. In pursuing the metaphor one question emerged: how do social workers manage this ongoing fear of

blame? It would be interesting to extend the research to a cohort of social workers who had direct experience of contributing to a SAR, and to explore their experiences of blame within this process. However, for various practical reasons this was beyond the scope of the current project. A key finding from social workers in this research that stands out is that each of the participants linked anxiety/fear of blame with their appraisal of how supportive their managers are. Each participant noted that supportive management made them feel safer and protected from unwarranted blame in the event of a bad outcome. It is noteworthy that in this study, these participants are supported by their managers to engage in a research project, and this may be indicative of a wider culture of support more generally. Arguably those social workers whose managers would not support their involvement in a research study may become silenced by default. In subsequent conversations, many participants linked supportive management with their decision to remain with a particular employer. This reflects research evidence from two recent longitudinal studies on the retention of social workers, one from Ireland (Burns, Christie and O'Sullivan, 2020) and a second from the United Kingdom (McLaughlin *et al.*, 2022a). Both studies argue that social workers in Ireland and the UK report feeling a risk of being scapegoated for issues beyond their control and view having a good relationship with their manager as a key mitigating factor.

In the context of SARs, this is interesting as it was noted above that many SAR authors feel permission to blame team managers where necessary. For example

> "*If I see management that is bureaucratic and budget-driven, I won't hesitate to identify that.*" (Joe)

Similarly,

> "*If I find that this happened because managers are bureaucratic and into care management rather than into people, I will have to report on this."* (Simon)

This signals that rather than fearing SARs, social workers might find that SARs could have the potential to be the tool that enables them to highlight weaknesses and strengthen their working conditions. The safeguarding leads touched on this with comments including:

> "*SARs might highlight conditions and support needs."* (Mo)

Likewise,

> "*All inquiries including routine safeguarding inquiries should be to empower social workers to self-advocate."* (Chris)

The literature review in Chapter Two highlighted some opinions by critics that social workers can be scapegoated in instances of human tragedy and in a sense blamed for events that may have been out of their control (Frost, 2016; Shoesmith, 2016; Gibson, 2019; Murphy, 2022). These findings here suggest that SARs could be part of a toolkit that provides social workers with the evidence needed to demonstrate how their work context or structures contribute to the established failings. Arguably, if SARs stay true to their promise of practitioner involvement (SCIE, 2015) in the processes, then they do offer potential for social workers to utilise the process and shift the spotlight of the blame off themselves. However, on this issue, the front-line social workers demonstrated a little more cynicism. Examples of comments on this include:

> "*Life doesn't work perfectly, and SARs are looking at it as though it's perfect… you can never legislate for every single thing."* (Ann)

Therefore, whilst it is arguable that SARs could contribute to an evidence base to improve professional social work, social workers express doubt that this is the story created by SARs. Examples of this include:

"*SARs are good at documenting what is needed in services but sometimes I wonder if we make those same demands for ourselves as a profession and as workers."* (Charlotte)

As noted above, adherence to quality processes is not uniform and this might contribute to SARs not being as emancipatory for social workers as they might otherwise have been. However, this finding is clear that for all cohorts of respondents, the issue of blame is hotly contested and often unresolved by the work of SARs. For social workers there is evidence that for them the SARs contribute to a fear of blame which they report can have an impact on their professional decision making.

Empathy Driven – A Container for Emotions

Knowing that SARs are born from tragic events, I hypothesised that the research conversations might touch on feelings or emotions. The above literature review has also suggested that enquires offer an emotional container for agencies to manage the emotional fall-out from tragedy (Walshe, 2002; Cooper and Lousada, 2005). Though emotions or feelings were largely absent from the results of the documentary analysis, the other data sources immediately presented extensive findings about emotions and empathy for others. To capture this theme, I have labelled it '*Empathy Driven as a Container for Emotions'* as it relates to the emotionally driven work of SARs and the potential use of SARs as a mechanism to contain such emotions. The data strongly reports empathy across the system for the individuals at the centre of the SAR. Examples of this include Joe commenting:

"*It is haunting me to think of what happened to that young woman.*"

Likewise, Jade states:

"*I was emotionally traumatised by a case, so I imagine everyone else was.*"

As reported above, many SAR authors noted that evoking empathy in the participants and readers is for them a key skill in producing an effective SAR

report. All the SAR authors who participated spoke about evoking empathy as a form of power. The participants commented on telling stories to influence others, for example, Jade shared:

> "*I will tell a story that is incredibly factual about the person, but I will author it in such a way so as to have an impact.*"

Likewise,

> "*We know that stories are motivating.*" (Simon)

For these authors, there is a drive to gather the emotions surrounding the tragedy and using the SAR processes to contain them, channel them into action. This was captured very simply by Lucy stating:

> *"Stories change minds.*"

This strategy by SAR authors of telling a story was matched in emotion by the responses reported by social workers and safeguarding leads. Many participants spoke about the emotional impact of hearing the SAR details or reading reports. Comments on this included Jessica stating:

> "*Your heart sinks really, that's the human reaction… even if you are not involved you know because… for the person involved, for their family, and for the staff involved.*"

Similarly, Jenny reports:

> "*I read it, I left the laptop and went into my kitchen here and there were a few tears, there was something about that case… I had a cry on my own.*"

Across many participants, this discussion led to broader conversations concerning how reading such reports will evoke empathy for the social workers

involved in that case. The sense of straddled empathy is captured well by the Simon's comment:

> "*You are furious and upset about someone's pain and once you get past those initial emotions there is a social worker probably not long qualified, probably unsupported."*

The findings noted that a dominant theme discussed by social workers, was a sense of wanting greater recognition of the emotional labour in the daily tasks that they do, with some suggesting that social work clinical supervision should be more robust and include mechanisms for governance of emotional burden.

There has been long-standing and extensive research literature exploring the emotional impact on social work practitioners of their roles, and how this emotional impact in turn affects their work. Recent examples from the UK exploring how additional contexts may add to the emotional toll of social work include a study exploring the impact of resource cuts and austerity (Grootegoed and Smith, 2018); and the crisis impact of COVID-19 (Ashcroft *et al.*, 2022; Murphy, 2023). However, the respondents in this study express low expectations that SARs and their recommendations would capture this issue. For example, Zina suggested that:

> "*A SAR would never give detail on why we weren't able to do what we needed to do… for example if a service user is aggressive, how do we get help with that."*

A unanimous theme across both focus groups was that the participants expressed concern that SAR reports emphasise tasks and might not have the potential to include the '*emotional toll'* of social work. Although everyone agreed on the issue, it is possible that the strong agreement was due to a need to show warmth and support for colleagues who spoke about emotional burdens, rather than everyone being equally concerned about SARs. However, the theme was strongly echoed in the interviews with social workers who frequently expressed

empathy for their colleagues in managing their daily tasks and having these represented fairly within any inquiry. Comments on this appeared to express a sense of peer solidarity including for example stating:

> "*I think that there is no escaping that it's malpractice, but I feel so sorry for the individual social worker."* (Becky)

Similarly, Susan a social worker who herself is less than two years post qualifying expressed a sense of being in that worker's position:

> "*Talking about the boy in Birmingham who died. I have so much sympathy for the social worker in this case, she wasn't very experienced.*"

These findings suggest that when considering inquiries, social workers' empathy for the person at the centre of the inquiry can become quickly entangled in concerns for their notional peer colleagues – other social workers.

The safeguarding leads similarly reported having empathy for social workers, with the evidence suggesting that this empathy is almost an interference with their work task of delivering learning from SARs. Safeguarding leads spoke about having to speak to social workers about SARs but feeling concerned that to do so is to add pressure on social workers. As noted above, many commented that they use SARs in training but again caveated these statements with comments about the challenges they experienced in doing this. For example:

> "*I do use SARs but sensitively."* (Faiza)

On this issue, Mo reports:

> "*It can be difficult to sell a SAR, you know here I am in my cosy office seeming superior."*

The participants frequently expressed concern for front-line social workers for example Katie states:

"*I have massive sympathy… the pressures on individual workers and the politics."*

The participants did generally note that SARs may carry evidence of poor social work practice however in these instances the participants quickly qualified these assertions with empathetic explanations. This is suggestive that for these participants they challenge their impression of the story of social work held within SARs.

For example, Mo states:

"*Yeah, maybe some things are fair cop like lack of professional curiosity but then that's never the whole picture… there can be a sense of shame in having to bring this.*"

Likewise, Clare suggests:

"*Social work is tough, and SARs are not always realistic.*"

Also, Nancy stated:

Events leading to a SAR won't be because a social worker wasn't trying their best."

I found that participants were generally very defensive of social workers, even those who were not themselves from a social work background. For example, Liz a nurse and strategic lead commented:

"*Social workers…they are selfless."*

Likewise, Rachel a nurse by background states:

"*To be a social worker is to want to make things better.*"

Overall, the data indicated that participants' empathy for social workers was the lens through which SARs were appraised and appreciated. I argue that this data demonstrates that the participants in this study appeared to align more empathetically with notional peer social workers than with the investigative and L&D tasks of the SAR. In connecting these ideas with the above discussion concerning cynicism regarding SARs, the understanding that cynicism may be an emotional response to structural change (Carey, 2014) can be readily applied here. Perhaps the empathy-charged context of SARs creates the conditions for such cynicism to thrive. This is in marked contrast to the reported aims reported by SAR authors seeking to evoke empathy and suggests that SARs may struggle to offer a robust mechanism to contain emotions.

To be a Professional (Social) Worker

The findings thus far suggest that in their daily tasks, social workers navigate a complex forcefield that includes client needs, agency demands, statutory protocols, personal emotional responses, and fear. The sixth and final theme brings together the data collected around this issue – of trying to be a professional social worker in the context of these familiar challenges. The label places 'social' in brackets as the findings include the challenges of being a professional social worker, called upon to make professional decisions, but also broader challenges of being a worker employed within a hierarchical system. This analysis brings forward ideas that relate to social work professional identity. The data points to practitioners' views that adult safeguarding work is murky and complex leading them to doubt that their role is understood by outsiders. Social workers frequently mentioned pressures and "*busyness*" as being difficult to record or account for examples of this include:

"*We all have constraints in our role including constraints of our ability and resilience.*" (Chris)

Likewise, Ann almost echoes this statement by commenting:

"Every social worker has constraints on their role and constraints on their own resilience levels."

It was a common thread across the data sets that social workers questioned whether SARs could have the capability of providing a nuance that is reflective of everyday social work. The below comment by Nancy yielded very emphatic agreement among her focus group peers:

"*Whether human error or… you know a genuine mistake… when something goes wrong… you know the background and the number of emails and the attempts… None of that I think gets really reflected. So, you get a few headliners, but not actually, well, you know how many times this social worker met this person. You should know how many times this social worker went looking for this person. You know how many you know other people this social worker has to work with. So yeah, I think… that can feel quite disheartening when that's not evidenced."*

Though limited, the findings from the documentary analysis do paradoxically demonstrate that some SARs include very clear examples of nuances and frequent critiques of the system for failing to enable practitioners to flourish. However, knowledge of these examples or this indeed of the capacity of SARs to be nuanced was not verbalised by any of the participants in this study. This is reflective of the findings in similar research with social workers in child protection settings (Rawlings et al., 2014; Leonard and O'Connor, 2018; Taylor and Whittaker, 2018). The scepticism noted may be a more general feature of social work, not limited to SARs, for example, recent research concerning adult safeguarding via the Mental Capacity Act (2005) noted considerable scepticism amongst practitioners including social workers about the objectivity of capacity assessments (Aspinwall-Roberts et al., 2022). The parallel suggestion here is that social workers are often sceptical and therefore some scepticism of SARs is to be expected.

Social workers spoke about their sense that the challenges of professional assessment and decision-making within their work contexts are in their view

under-appreciated. Comments about work pressures, limited information and challenging behaviours were common. Within the focus groups participants were quick to agree with each other on these themes but also a shared understanding that wider public perceptions can be unfavourable. For the strategic safeguarding leads, this negative public perception of social work was a very strongly held belief with comments including Katie stating:

> "*We always get bad press."*

Similarly, Liz a nurse and strategic lead for safeguarding suggests:

> "*Social work is misunderstood as a profession."*

Whilst Mo a social worker himself draws comparisons with other professions:

> "*Social work doesn't seem to hold itself so well compared to the other MDT* [multi-disciplinary team]."

These comments are suggestive of a desire to be protective or defensive of social work. Many of the participants cited high-profile inquiries as having an impact on all social workers and the wider perception of social work. It was noted for example by Katie that this negative perception does not often follow other professionals:

> "*One rogue doctor like Dr. Shipman would never turn people off medics but it is different for us.*"

As noted above, the documentary analysis highlights '*Professional Curiosity'* as a recurring theme. Some reports point to professional curiosity as lacking in individuals whilst others highlight systems that prevent professional curiosity such as fractured service teams, bureaucratic managers etc. The data from focus groups and interviews gather a sense from social workers that they often feel undervalued and that this in turn impacts their sense of professional identity and confidence. Comments on this included:

"*No one ever welcomes social workers with a cup of tea"* (Eve).

This simple statement started a discussion about social work which linked to the impact of inquiries on the profession. Another focus group member Lisa reported that when out socially she tends to tell strangers:

> "*If I am in a pub or a nightclub, I tend to say that I work in Tesco's rather than admit to being a social worker."*

This comment was not met by her peers with any surprise or disapproval. Similarly in interview social workers admitted to lacking pride in their profession and many linked this to broader media influences shaping the story of what social work is. For example:

> "*When the report was published about the child who died, I actually felt anxious that whole week going to work – like is this what social work becomes known as*" (Susan).

If social workers are struggling with professional identity and professional confidence (as evidenced by denial of their profession and reported anxiety), how does this impact their ability to transcend barriers with their professional curiosity? When social workers feel a low sense of value or professional self-worth, this is likely to impact their ability to perform the advocating, questioning and escalating parts of their role that fit with professional curiosity. The literature review highlighted some key drivers that are likely to impact on social worker's professional identity and confidence, namely work experiences, education and media reporting, however specifically considering SARs through this context poses some interesting questions. Arguably, SARs should contribute where possible to bolster the profession who are tasked with empowering others.

All the participants in this study spoke about '*the system'* and located the potential for positive change within '*the system'*. Regarding SARs, the practitioners saw the processes and the reports as having sufficient status within 'the system' to

influence change. Social workers' unanimous respect for SAR processes and in particular multi-agency review meetings suggests that other less resource-heavy systems for reviewing joint working arrangements might be useful. For example, the use of multi-agency case file audits or periodic managers forums. Openness and transparency are cited within the British Social Work Code of Ethics under section 5 of Principle 2.3 'Professional Integrity' (British Association of Social Workers, 2021) as being a core component of ethical social work practice in Britain. For social workers, it is reasonable to expect their employer organisations to exercise this same value. SARs therefore in process and product could be viewed by social workers as a symbol of their organisation's commitment to those core values, and in this light as a symbol of hope for professional social work.

Chapter Summary

In summary, in this chapter, I present the findings from my field research in three parts sequentially in order of how the data was analysed. Part One presents the findings from documentary analysis of a sample of SARs, reviewed to identify narratives about social work held within. My findings discussed how SARs presented and appraised social work practice in their related cases and highlighted some repeated narratives that are frequently deployed within SARs. Part two presents the initial analysis of field data, i.e. focus groups and interviews, and demonstrates how the initial candidate themes were derived from the raw transcript data using the RTA method described in Chapter Three. The final part of this chapter continues the RTA method and weaves the first and second parts into the establishment of six overarching themes; these are presented as the key findings in the research project. Participants reported varying views on what they consider to be the dominant purpose or the role of SARs including learning and development to improve services and honouring individuals. Some of the research participants' positive and negative views of SARs centred around their sense of SAR's ability to meet their own perceived purpose of SARs rather than any reference to statutory guidance.

My findings suggest that SARs may simultaneously serve multiple functions – with themes identified in relation to learning and development, honouring

individuals, political objects, and the management of blame and emotional investment in the work. Some of these may be intentional and some perhaps more accidental, some more explicit than others. The data showed that respondents did identify some politics and power play within the work of SARs. In addition, there was evidence in the data that respondents were concerned about the potential for practitioners to be unfairly blamed for harm and neglect of those in need of care and support. A sense of empathy towards those with care and support needs was identified but equally all respondents were unanimous in their empathy towards social work practitioners. The findings suggested that respondents did link SARs with triggering anxiety within their day-to-day work activities and having an impact on social workers' professional identity and confidence. The findings above report that whilst each SAR offers an appraisal of the safeguarding system available to that person, it can also offer a vision for what that system could have offered. This suggests that for some stakeholders, a discrete function of SARs could be to create an evidence base for social work practice that is optimistic. It was evidenced that for these participants, their expectations of SARs lay across several key organising concepts, all connected to a shared hope for 'change'. The relevance of these findings and analysis of how they address the research questions will be addressed in the discussion and conclusion chapters that follow.

Chapter Five: Discussion

In this fifth chapter, I will discuss the meaning of my findings and consider their value within the wider context of social work in England. To develop and communicate my arguments I draw on a breadth of social theory and current research literature. The discussion is anchored within the social constructionist framework and this influence is explored below. As outlined in the introductory chapter my curiosity is to explore the narratives held within SARs about social work, the narratives social workers hold about SARs and any evidence of impact on social work identity and confidence. The findings chapter demonstrated evidence from the research about a broad range of issues, however in the interests of brevity, I will focus on those I found to be most directly related to my initial research questions. To anchor the discussion, I will first revisit one issue raised within the literature review – that of using inquiries including SARs as an evidence base for developing professional practice. As SARs are the focus of this study, I will argue that the narratives about social work detected within SARs and the stories about SARs shared by social workers together contribute to the social construction of professional social work.

Having argued that SARs contribute to a social construction of social work – I will then explore this within the context of a politicised space, an anxious space and an emotionally charged space. My findings strongly detected an empathy for front-line social workers - for example, every one of the research participants explicitly reported feeling sorry for these workers and anxious about how SARs reflects their efforts. It is my contention (to be discussed below) that this empathy infuses into the SAR processes and has an impact. I will argue that SARs offer a platform by which stakeholders can host their anxieties about the nature of adult safeguarding work and defend against them. To this end, as a social worker myself I state from the outset that this research project is motivated by my empathy towards social workers, and I aim to present their narratives about SARs. Therefore, whilst I hold that SARs may offer a reductionist evidence base through which to explore social work, I add that this empathetic bias will bring its own limitations to the research discussion. Finally, given the complex and contested nature of this space, I discuss some aspects of its potential impact on

social workers whose own professional identity might be confronted by the work of SARs. Whilst acknowledging the limitations of the research findings, this discussion seeks to establish their value by highlighting their contribution to the evidence base for developing social workers and social work practice in England.

Inquiries as an Evidence Base

I have argued from the outset that SARs carry some industry respect as an evidence base, a respect which is drawn in part from their statutory origins, their published status, and their use in established social work research (Manthorpe and Martineau, 2015). I noted in the literature review that from the launch of the Care Act, it was anticipated by social work researchers that social workers' active participation in SAR processes would lend these processes to be more immediately applicable to developing practice. To date, the ability of SARs to fulfil this ambition has not yet been tested by research. However, some stakeholder analyses of recent high-profile child death inquiries suggested that the daily experiences of the social workers were notably absent from the presented narratives (Ferguson, 2022). In my findings, I reported similar concerns raised by social workers that SARs and their recommendations may not accurately represent those workers' daily work environment. The findings detected some frustration particularly within the frontline social worker cohort around SARs, which appears to arise from a perceived mismatch between how the social work role is presented by senior stakeholders within the report – and by the lived experience of practising social workers. This was captured succinctly by Clare stating her view that:

> "*SARs do not exist in the real world.*"

Social workers participating in the focus groups reflected that they may be working daily with a large caseload of clients – but the work done with an individual who becomes subject to an inquiry becomes elevated and privileged over all others in contributing to an appraisal of that worker's performance. This suggests that for social workers there may at times be some slight hostility

towards SARs and their elevated status as creators of the 'evidence base' for practice.

Several of the research participants made comments indicating their perceptions that the nature of commissioning SARs seemed to them to be ad hoc. My findings noted that democratising SAR processes may be difficult, and this was noted by some respondents as contributing to any cynicism they felt in relation to the 'evidence base' created by SARs. In considering the ability of SARs to offer an evidence base for contemporary practice it is worth pausing to consider the selectivity of case studies that are examined by SARs. For example, in the area in which I work, the SAB received a case presentation related to a man who died due to a fire at his accommodation. As this local area had already conducted a SAR investigation into a previous fire death, it was decided that system learning might benefit from this referral being considered as a SAR which encompassed an investigation into how learning from the previous SAR had impacted services (Braye, 2021). This example shows a SAB being responsive, flexible, and seeking to ensure that the system is tested in terms of its ability to implement change. However, to this end, the type of inquiry was influenced by the specific nature of the person's death and system concerns in addition to the specific experience of the named individual. There are therefore multiple layers to be considered around the commissioning of SARs and the decision-making around which human stories receive this specific level of inquiry and elevation. For my research, this presents a significant limitation as my enquiry includes only published SARs, therefore providing an additional platform for these narratives and reinforcing the exclusion of those other stories.

In Chapter Two I presented concerns raised within research literature about exploring social work practice through the lens of tragic outcomes (Kettle, 2018). SARs offer a snapshot view of a social work provision in action – what happened versus what potentially could have happened. Though SARs originate from a sense of system '*failure*' they also seek to establish evidence of '*good practice',* albeit these instances are less headline-catching for others outside of the system. However, whilst all social care inquiries are rooted in tragedy, not all social care tragedies necessarily become inquiries. As with many similar systems led by human beings there will likely be elements of variance and discretion in decision-

making around the commissioning of inquiries. These phenomena are corroborated by recent research examining the learning from Domestic Homicide Reviews[9] (DHRs) that reported local issues including the availability of resources influenced the processes of production and learning from these inquiries (Jones *et al.*, 2022). Similarly, SARs as commissioned and packaged types of inquiries represent one aspect of a wider complex system including many people whose experiences of neglect and suffering were never shared and those whose experiences were never known.

Across all cohorts, there were intimations of some disappointment in contemporary social work practice accompanied by suggestions that the professionals could be supported to achieve more in their roles. For SAR authors, SARs were offered as a mechanism for presenting this gap – using SARs as evidence. Whilst this is a unique case study-based resource for examining social work, I argue that the evidence from this study suggests that there is a need for some hesitancy with this approach. As noted, SARs are authored by senior independent personnel, and it is relevant to acknowledge the personal lens through which they might view contemporary social work. SAR authors are very experienced in their respective fields and some will have worked extensively in practice roles – though this may have been many years previously. Many SAR authors were practising social workers and team managers in their previous employments. I argue the need to be cautious to avoid a phenomenon that I present here as ‘grandparents' wisdom’. Put simply this is a scenario where very well-meaning grandparents may cast a view on the daily management of children whilst they are devoid of the everyday responsibility of said children.

My theory of grandparent’s wisdom does not comment on whether the grandparent's views are correct or otherwise and acknowledges that the grandparent is typically driven by an emotional connection to the child and their parents. It is merely a metaphor to capture the phenomenon of an individual

[9] Domestic Homicide Reviews (DHRs) are a specific form of retrospective inquiry that is commissioned when an individual dies by homicide that is thought to delated to domestic violence. The statutory guidance and oversight of DHRs is different to that of SARs though the investigation processes can be similar. Further information on DHRs is available here (The Home Office, 2016)

appraising a situation based on their own lived experience which might have been some time ago. These views may be informed by memories that are recalled with or without some of their nuanced context. Crucially my theory seeks to capture the scenario whereby parents with everyday responsibility are abruptly cast under the appraisal of a grandparent on their visit. This holds parallels to comments made by social workers about their perception of the seeming ad hoc nature of SARs. Social workers in the focus group reflected that they may be working daily with a large caseload of clients – but the work done with an individual who becomes subject to an inquiry becomes elevated and privileged over all others in contributing to an appraisal of that worker's performance. In presenting 'grand-parents' wisdom', I consider the fairness of examining social work practice through the lens of experience-tinted glasses. Are social workers being called to account for a vision of social work that is historic and overly positive, but crucially a version of social work that is not currently available to them?

In the context of learning from SARs, there may be several interpretations of the story of social work practice available however it is the SAR author who holds the task of choosing the words and shaping the text – and therein lies a unique power. It is here that applying the theory of social constructionism as outlined in the literature review offers a framework to unravel these multiple layers and seek to understand their influence. The facts of the SAR events may be objective however the SAR story is constructed through social interactions between individuals seeking to develop a shared meaning of events. For social constructionists, this shared story is then the confirmed reality, and therefore it is important to understand the processes of construction and to note the interpersonal power imbalances at play in this process (Burr, 2015). In establishing and developing a narrative the discussion is not limited to the facts that are *true* but rather a way of interpreting them that is *most useful* for those concerned (Gergen, 2015). The stakeholders in this process are members of different strata in the professional hierarchy and engage with SARs based on statutory requirements. There are multiple ways events can be interpreted and re-interpreted by the external author who then as noted in Chapter Four often adds a powerful narrative. I argue that this process holds the ability to construct the role of a social worker by presenting evidence from the events recounted

alongside suggestions of possible alternative courses of action events from academic practice guidance and policy documents.

A Social Construction of the Social Work Role

As noted previously SARs are authored by senior staff tracking the work outputs of more junior staff across multi-teams. My findings reported that the SAR process tends to package this story of someone's life experiences authored in such a way as to achieve 'impact'. I argue from professional experience that within this turbulence, the shared understanding of the social work role becomes constructed and re-constructed by strategic stakeholders, who then pass this story to front-line social workers. The findings in this study demonstrate evidence of these processes of construction and reconstruction. Arguably, social workers' most common engagement with SAR reports is in the context of learning and development sessions. Social workers receive this story and comprehend it – a process which might involve some aspects of resisting the story or some aspects of accepting the story that impact their own thoughts of professional identity.

SARs are stories surrounded by sadness, neglect and failure which sets the context for appraising social work activity, but the negative lens of a bad outcome is often not the entirety of the story. The data from my documentary analysis demonstrated that SARs contain multiple stories of '*good practice'* and an occasional tendency to characterise '*heroic*' social workers. The findings demonstrated that the latter tended to be accompanied by descriptions of events when an individual worker worked beyond expectations or transcended bureaucracy in some respect. I contend that it is here that nuance and detail are important in developing an understanding of why particular actions in themselves can be characterised as '*good*' or '*heroic*' practice. The latter whilst intended to celebrate an individual's efforts can present a rhetoric that is confusing and at times irreplaceable. Arguably, it is questionable whether a transcendence can be deemed to be '*good practice'* if perhaps it is also a breach of expected boundaries.

Previous research on social work has issued concerns about the hero rhetoric for example arguing that it offers a false promise to new social workers about their potential to change social ills (Marston and McDonald, 2012). During the era of the COVID-19 pandemic, it was very common for the media to present characterizations of health and social care workers as heroic. Examples include the Guardian newspaper front page photo of a nurse who died of COVID leading with: '*A Smiling Hero'* (Iqbal, 2020); The Telegraph newspaper reporting '*COVID Heroes*' as featuring in the New Year's honours list (Bird, 2020); and a Guardian news report about the National Social Work Awards entitled: '*They don't see themselves as heroes'* (Brindle, 2020). Whilst appreciative of the sentiment, it has been argued that this language can hurt workers as it is suggestive that there can be no meaningful discussion of limits to the expectation of their duty to protect others (Cox, 2020).

As noted in the literature review social workers are tasked with using their professional skills to predict risk and then engaging their clients towards preventing harm. The ask is that a social worker performs this risk management without overstepping on their client's autonomy or right to exercise independence (Social Work England, 2019). Social workers whose practice transcends their organisational structures or practitioners who work to their own set of standards might not be delivering ethical and defendable social work practice. Arguably when a SAR characterises '*good practice'* as heroic practice, this might be positioning the social worker against a set of standards that are not always available and are perhaps frequently discouraged by their managers.

Researchers have commented that the UK media has demonstrated a practice of attacking individual social workers on their practice if the outcomes turn out badly, which is irrespective of whether their practice was deemed competent and defendable (Sutcliffe and Bhatti-Sinclair, 2018). If for example the individual asserts their right to refuse support and continues with high-risk behaviour such as hoarding or self-neglect – are the efforts by the social worker deemed a failure? If a social worker visited someone at home, asked questions and then completed their assessment paperwork within a timely manner and made appropriate representations, this objectively appears to be a successful

intervention. However, the actual success of the intervention could equally be appraised on the outcome as experienced by the PCSN. As suggested by Amy:

> "It's *so difficult to get right… And when you hear of these… You know these instances where it goes terribly wrong. I'm sure it's not through the want of trying often."*

Practitioners might see aspects of success and failure in both the intervention processes and the outcomes simultaneously and then experience a related up-and-down emotional response. In exploring this, Frost (2016) offers a theoretical framework of *Shame and Recognition* wherein *Shame* is the emotion expected when a social work service is seen to fail, and *Recognition* is the cognitive comfort of feeling that as a practitioner one's efforts are noted (Frost, 2016). He argues that the sense of shame can be rapidly exacerbated by external factors including vilification by the media, whereas the sense of recognition often has fewer cheerleaders. For their professional recognition or success, social workers are more reliant on client outcomes and peer acknowledgement than any wider celebrants. Recent research examining social workers' sense of pride and shame in their roles within child welfare services presents evidence that practitioners set personal success standards according to the organisational context of their employer (Gibson, 2019). Gibson (2019) asserts that there is a cognitive comfort for social workers in knowing that they have completed all the tasks expected by their employer and this offers resilience to withstand the surrounding narratives of failure. He states that:

> '...*they believe themselves to be in relation to who they believe they are expected to be… and they can consider how vulnerable to being shamed and humiliated they are or will be in the future given these considerations'*. (Gibson, 2019:139).

Placing the work of SARs within this framework, SARs arguably start from a position of collective failure and therefore carry a strong potential for shaming. However, there is also potential to positively comment on practitioners' efforts in ways that support recognition (according to Frost) or pride (according to Gibson).

The role of the employer organisation in creating the tasks asked of social workers and thereby creating the social work role seems clear. However, SARs present an opportunity to review this interaction retrospectively and with the benefit of both hindsight and experienced consultancy. Within this space, the SAR author has the power to ask not only what a practitioner did but also:

- What they could have done?
- What did the agency expect of the practitioner?
- What did other agencies expect of the practitioner?
- What actions are available under the current legislation and guidance?

In Chapter Four I noted some efforts by SAR authors to argue for social work to reach beyond '*case management*' (Simon) and social work organisations to work beyond '*purchasing*' care services (Winters, 2019). By retrospectively requesting the agency to explain its social work practice deployment, the SAR author can gain a better understanding of any differences between the agency's understanding of the social work role and the views held by practitioners. This can help reveal any nuances in the deployment of social work practice. I suggest that in learning from SARs, social workers may cognitively engage their minds in wondering how they might have acted in those circumstances and whether their practice could withstand inquiry. SARs are an arena in which work practice and performance are scrutinised and this is understandably likely to be daunting for practitioners. As discussed in Chapter Four this tendency towards anxiety was noted by many research participants and its consequential impact on decision-making. Specific commentary on this included Roberta stating:

> "*The social workers we are lone soldiers in the field, we don't have anyone to back us up in the field, we have to use our evidence… I make sure that my case notes are you know updated.*"

Similarly, Charlotte states:

> "*But it is like a constant fear for social workers – the blame.*"

These comments are suggestive that even if social workers have an appetite to be 'heroic' and transcend expectations, there may be psychological barriers that prevent this from being actualised. There may be occasions when social workers as professionals decide to deviate from their agency's expectations and a myriad of explanations as to why this might occur. It seems likely that social workers' capacity and ability to adhere to agency expectations may be affected by issues including but not limited to a pressured work environment, their level of experience, and the issue of interest to this research – their emotional engagement with the work. Research evidence repeatedly finds that social workers deploy 'acts of resistance' in scenarios where there is a mismatch between their personal views and the organisational frameworks (Evans, 2013; Taylor, 2017). This could be understood therefore as a continuum between identification with the organisation and resistance – with the execution of work tasks straddling this nexus and evoking pride or shame on the same continuum. As noted, SAR reports present a retrospective evaluation of professional decision-making, offering a socially constructed narrative of how the involved workers negotiated the boundaries of their job roles and organisations. As cautioned above, this narrative is likely to be buffered by the negative lens associated with the tragedy that initiated the investigation.

I have echoed others' arguments that evaluations of social work practice primarily based on outcomes are reductive. An exclusive focus on the outcome will likely overshadow alternative measures and incremental micro successes including, for example, relationship building, within the larger picture of tragedy. I argue from my own professional experience that for a social worker organising one's thoughts around what constitutes success and failure for themselves as a professional is a difficult and at times emotional task. Social workers may receive these messages via informal routes such as media reporting, but I argue that this research evidences that messages can also be detected in formal learning resources such as SAR reports. In capturing '*bad practice'*, '*good practice'* and on occasion '*heroic efforts'* SARs present a story of social work that is given credible status by the seniority of those involved and the publishing processes. This story is then available and consumable by social workers and those who commission and structure social work services. It is within this context that

individual social workers may begin to appraise their role and their wider profession. However, it is important to note that this constructed story of social work held within SARs has been offered to social workers by those with leadership roles in their organisations. The SAR stories will therefore by default be infused with the power held by those who participate, and this element is worthy of further exploration.

Towards a Politics of SARs

As noted previously, the expressed aim of SARs is to be a form of non-blaming open inquiry – seeking to deliver improvements. There is considerable guidance available on methodologies to support an open unbiased process seeking a thorough and non-partisan investigation (SCIE, 2015). However, my data reported several respondents commenting that SARs and their processes could be deemed political with a small 'p'. SAR authors suggested that SARs may be infused with agency-level political agendas. My findings reported that many respondents viewed SARs as having the potential to deliver accountability and system change and these are powerful prospects. There was an expressed wish by several SAR authors that SARs would inform an evidence base in the case for change for example David commented:

> "*I guess I'm keen to try and make a small contribution to changing the system 'cause there seems to be. There seem to be some quite fundamental problems with the adult safeguarding system to me.*"

Some authors placed this need for change into politicised language for example Esther argues:

> *"There is a potential for social work to be far more radical than it is, and so there is something about…. the politics of SARs … you know, equality and inclusion and anti-discriminatory practice."*

Herein lies their greatest challenge – though they seek to identify systemic issues, SARs are inherently rooted in practice experiences based around one individual.

They are unapologetically micro-level inquiries, and the findings aim to influence local practices. However, there may be a concern that this practice focus might be a distraction from the context of national resource allocation and funding challenges. Research has argued that the UK government's neo-liberal agenda has eroded previously accepted social contracts regarding the protection of those in society who are at risk of harm and abuse (Brockmann and Garrett, 2022). When starting from micro-level individual events such as those within a SAR, it is challenging to deliver this macro-level analysis. Many SAR authors commented broadly on the British government's policy of austerity and reduced proportionate funding for social services. Some SARs go so far as to point specifically at these issues for example a recently published SAR entitled reporting on the experiences of 'Philip' who died by suicide in London in 2021 (Williams and Bateman, 2022). The SAR 'Philip' reported that during this period:

> '*The ward – and acute mental health services nationally – were facing overwhelming pressures from bed and staffing shortages.'* (Williams and Bateman, 2022:8)

Arguably for these SAR authors, as experienced professionals, the work of SARs offers an opportunity to, where possible, evidence weaknesses within adult safeguarding frameworks and thereby mount a resistance to the current status quo. When asked about whether SARs were political, Nadia suggested that SARs are not ambitious enough in this regard, commenting:

> "*They are not political enough.*"

Arguably presenting together a collection of SARs under a theme can add to the leverage of any claim to offer an evidence base for change. In Chapter Two I discussed examples of this concerning key themes including self-neglect and mental health. More recent publications of this thematic analysis have included an interest in whether lessons have been learned – whether the earlier SARs did have an impact and achieve change (Preston-Shoot, 2017, 2018; Martineau and Manthorpe, 2020). These papers signal further frustrations held by those who are closest to the argument that SARs can deliver change. This research evidence

suggests that by sharing these frustrations, there is an appeal for change and therefore by default, there is a politicization of the work of SAR authors and SARs more generally. As I have argued that SARs contribute to the social construction of the social work role, it is, therefore, pertinent to note that this construction is within an increasingly frustrated and politicised context.

SARs as an Emotional Container

As noted previously SARs arise out of tragedy, specifically death or significant harm but they also represent the fact that there has been a significant shock to the system of social protection. Research participants frequently expressed a connection to the individual whom they hadn't met yet understood to be someone who experienced vulnerability and therefore was entitled to support from wider society. This type of support typically comes in the form of social services assessments and interventions led and coordinated by social workers - though social workers, like many professionals, are limited in their power to force interventions. The research participants who are social workers demonstrated a shared sense of solidarity for social workers whose work was examined in SAR processes and a general sense of professional peer empathy. Included within Chapter Four was a discussion about the emotional impact on research participants of hearing the tragic stories. Comments on this included for example Jenny a strategic lead for safeguarding recalling:

> "*I read it and then I just shut the laptop and cried*"

Moreover, the evidence from SAR authors that they seek to evoke this empathy. For example:

> "*As we know that human stories have an impact*" (Lucy).

My data detected many references to emotional distress amongst respondents including but not limited to sadness, fear, anger, and frustration. It is within this emotionally charged context that the SAR narratives about social work are co-constructed by these parties. The available resources including professional

assessments, referrals and care plans have not been able to prevent serious harm. The knowledge of this may disrupt the expectations and status quo within both social services and across the wider society creating anxiety because the unthinkable has happened.

As outlined in Chapter Four, this research reported that there was some variation detected between cohorts in how these various emotional reactions were discussed and which aspects were emphasised. SAR authors predominantly acknowledged and emphasised their anger; safeguarding leads emphasised their felt need to be defensive of their staff, and social workers emphasised their fear and anxiety of reprisal. Here I will argue that SARs are emotionally charged processes that can offer stakeholders a platform on which to deposit these feelings and use them to mobilise towards their desired system changes. It is my view that SARs in effect offer a process that can be for individuals a defence against the anxiety of unthinkable events happening again. On a practical level, SAR processes set out a framework through which difficult conversations about multi-agency development work are coordinated. Arguably these processes offer a platform for various stakeholders to safely deposit their emotions around the work more generally. Therefore, like the political pressures mentioned above, there are emotional forces at play which infuse into the SAR processes and contribute to the version of social work that is then created.

However, I immediately qualify this discussion by noting my own emotional engagement with the work of SARs. As stated previously in my introduction chapter and my methodology chapter, the stories shared within SARs are emotive and upsetting for me, and equally I am emotionally motivated by discussions about social workers and challenges in social work practice. I add this reflection here as an unavoidable limitation to this research project – that my emotional investment will influence my analysis and reporting about detecting emotional content in this work. It is highly likely that I am drawn to these emotional statements and might be guilty of subconsciously offering them a privilege over other content due to my interest.

As noted in Chapter Four, many of the research participants expressed a call for greater acknowledgement within SARs of the emotional impact of their daily tasks and decision-making – namely the '*emotional labour'*. Social workers are tasked with '*engaging*' PCSNs and '*building positive relationships*' whilst maintaining professional boundaries, being actively supportive whilst respecting autonomy, and being curious and probing whilst respecting privacy in a system that is typically under-resourced. Navigating these requirements is thoughtful and a skilled task. This professional relationship with a PCSN typically starts when the latter is at a point of personal crisis and distress. A social worker is tasked with walking the tightrope of joining the individual in tackling their presenting problems but with managed engagement.

Social workers' services are delivered by forming a relationship between professionals and PCSNs – but these relationships are dissimilar to personal relationships or common friendships. In social work, these professional relationships are the base from which effective practice is delivered (Ingram and Smith, 2018). If a person feels trust and respect for their social worker, it is from this position that they can work collaboratively towards the established goals. This type of relationship-based practice will require a social worker to be emotionally available to develop a relationship with their client but also be mindful to avoid a level of emotional attachment that causes difficulty in creating challenges or in executing professional tasks. For example, in adult social care, social workers are frequently tasked with making best-interest decisions on behalf of people deemed to lack capacity concerning that decision such as the decision to move into a residential care home. Whilst a compassionate relationship with the client will inform this professional risk analysis needed, one's judgement could be clouded by an unchecked emotional engagement. Equally, given the frequency of such emotionally challenging tasks, social workers will require a level of emotional resilience to maintain their ability to function professionally (Hitchcock *et al.*, 2021; Méndez-Fernández *et al.*, 2022).

A thematic review of available research has argued that there are established patterns by which social workers navigate this emotional space (O'Connor, 2020) and that these are influenced by various factors including the quality of

supervision but also very personal factors such as whether aspects of the PCSNs personality are felt to be likeable or worthy (Ferguson *et al.*, 2021). This task of emotional navigation is often to be performed within the environmental context of busy caseloads and resource pressures as reported by several commentators including (British Association of Social Work, 2022; McLaughlin *et al.*, 2023; Ravalier *et al.*, 2022; Ravalier, 2023). In addition, there is an understanding within the literature that professionals' experiences of relationships with previous clients are likely to have a bearing on those client relationships currently in the navigation (Daemers *et al.*, 2017; Taylor, 2017; Gillingham and Whittaker, 2022). For example, if a person's circumstances are very similar to someone a social worker knew previously, they might unknowingly be influenced by a subconscious comparison of the individual's responses in the same way. This was most articulated clearly by Charlotte who suggested that:

> "*When you're working with people who have this clear inverted comma risk profile, it's hard not to get sucked into the pattern of just like constantly thinking that the same thing is going to happen over again and being really overly protective of them.*"

Even in the form of withholding emotional attachment, there is emotional labour at play. It is therefore integral to the social worker's role to erect thoughtful boundaries around any emotional engagement with their work and to have the cognitive presence to continually reflect on these with experience. In Chapter Two I introduced the fictional television character 'Miriam' whose actions in her role as a social worker appeared to be highly emotionally driven and chaotic – with critique suggesting that her work was 'boundaryless'. For social workers, the development of professional boundaries in their work with PCSNs is generally offered as the framework through which to establish and navigate such relationships. Professional boundaries are generally understood as the cognitive line drawn around which actions and behaviours are deemed acceptable in the context of a professional relationship (Trevithick, 2000). Practice guidance for example offered by SCIE cautions that a breach of professional boundaries can be dangerous for PCSNs and makes social work practice ineffective (General Social Care Council, 2023).

The requirement for professional boundaries around emotional engagement and at times practical engagement is a challenge that is evidenced within SARs. The findings chapter discussed '*Professional Curiosity'* as the term used frequently within SAR reports to capture the practice of professionals thinking beyond their assigned task and demonstrating a holistic curiosity about someone. The findings of this research demonstrated SAR reports commented on occasions when professionals including social workers exercised their *'professional curiosity'* and thought beyond the boundaries of their specific agency requirements. Drawing on the findings of this study I argue that by celebrating social workers who were seen to work beyond their agency expectations aka '*going the extra mile'* the SAR reports contribute to the social construction of a social work role that appears to call for a personal approach with reduced emphasis on fixed boundaries. It is here that the vision of what a social worker *could* do becomes presented as what a social worker *should* do with arguably little evidence for the wider impact of promoting a blurring of professional boundaries and tasks. In the process of sharing SARs for learning and development, social workers are responsible for negotiating the messages and incorporating them into their understanding of their professional responsibilities.

The Anxiety-Provoking Work of Social Work with Adults

For the social worker, hearing a difficult story about an individual's life, coupled with the retrospective appraisal of their peers' service offers potentially fertile ground for emotional triggers and discomforts. Drawing on my professional experience I argue that for social workers this is managed by evoking the same strategies used in managing their professional boundaries in their everyday tasks. One such strategy is the cognitive trick of '*othering'*. This is a process by which individuals or groups consciously or unconsciously present someone as different and not a part of their group, and often by extension inferior to them (Brons, 2015). 'Othering' can be a cognitive defence mechanism to enable individuals to cope with the challenge of witnessing fellow human beings in challenging situations. For example, hearing about children who are absconding from school and thinking that is an experience that happens to a specific type of

child – perhaps one whose parents are indulgent or chaotic. By applying 'othering' consciously or otherwise there is a degree of separation between us and the individuals who use our services. Explorations of this specific to social work with adults are limited, and I will discuss below my assertion that for social workers in adult safeguarding, 'othering' is less available as a cognitive defence.

Working with older adults in adult safeguarding challenges social workers who may be unable to evoke 'othering' as a subconscious method for self-protection. This comes from the idea that most working-age adults presume that, as life progresses, they will in the future become frail and dependent. They may be currently caring for an older relative with care and support needs. This may have the effect of making the client base appear to be more like the social worker than perhaps has been the case for some who work with children and families. The working hypothesis is that this familiarity means that the social worker is unable to evoke 'othering' as a protective measure to manage the anxiety-provoking working experiences (Trevithick, 2011).

Whilst "othering" might not be as readily available for social workers working in adult safeguarding, my research findings suggest that SARs could be conceived of as an attempt to 'other' the context of a tragic event. Put simply a SAR is an investigation into a set of circumstances, and the reports outline some events that occurred within specifically outlined circumstances with recommendations to make changes and prevent any re-occurrence. I argue that this research evidence demonstrates that SARs can allow a degree of cognitive separation from the fear of similar events happening again and the knowledge of this likelihood. This is in line with the aspects of the cathartic or therapeutic purpose of the inquiries (Cooper, 2018) discussed in the literature review.

The stories of individuals discussed within SARs represent the less everyday experiences of adults with care and support needs – often referred to as '*complex cases*' – and demonstrate a breakdown in the ability of services to respond to needs. In parallel the cases of individuals presented to the UK Court of Protection (CoP) for hearing similarly represent those with higher complexity and conflict among decision-makers. For a case to reach the CoP there has been a

breakdown in the ability of multi-agency partners, often including relatives, to reach an agreement. Research on the practices within the UK CoP demonstrates some evidence of 'othering' within the CoP particularly in judicial pronouncements (Pritchard Jones, 2016). Similarly, SARs can offer a mechanism by which stakeholders can place cognitive order on their fears and evoke 'othering' around the events leading to the death or neglect of the individual at the centre of the story. This defence seeks to locate the upset by viewing SARs as happening elsewhere and for specifically identified reasons. Practitioners may then seek to assure themselves that their own working arrangements are different and therefore less vulnerable. Some examples of this were evident in the interviews with social workers who for example commented favourably about supportive managers and colleagues, and at times celebrated their organisations. By seeking to identify specific factors, stakeholders are focusing on what might be tangible. These efforts might be understood as a defence against the daily stress of working in a role that is at times unpredictable and highly vulnerable to negative outcomes and possible sanctions.

Shame on Social Workers

Whilst new SARs are regularly published, they are not an everyday event in each local area, with some areas commissioning SARs less frequently than yearly. However, from their early learning as students, social workers are likely to be aware that catastrophic events are possible and so too is the potential for retrospective inquiries such as SARs. When discussing more general social work practice, Joy commented:

"*We are worried because we don't want this to become a SAR.*"

This comment received unanimous agreement from her colleagues. Arguably, the emphasis on SARs and learning from SARs within an organisation may have the potential to become a shadow of anxiety over practitioners. In appraising their work via their engagement with learning from SARs, this research evidence suggests that social workers are immersed into the pride-to-shame continuum concerning their peers and wider society, and I note the potential power of a SAR

in evoking this. The story of social work presented within a SAR might trigger a sense of pride or shame for social workers in a manner that then sets the tone for the expectations of their role. Arguably, the short-version story of social work held within SARs is a story of failure, and it is from this position that individual social workers develop their own stories about their practice and their services.

The suggestion that social workers may feel shame and stigma within their role has been explored in the literature review in Chapter Two. In 2020 the then-new regulatory authority *Social Work England* published findings of their research which included evidence from social workers of feeling their profession lacked esteem and was stigmatised (YouGov, 2020). In considering social work professional identity, Canadian researchers called for further study on how the professional identity of social workers is influenced by their experience of any disparity between social work values and their implementation within institutions (Lévesque *et al.*, 2019). Adding to this understanding the experiences of social workers in England can be greatly enhanced by learning from those social workers including myself who trained abroad and came to work in the UK bringing new perspectives to the system they are working in. For example, recent research reports that South African Social workers joining the workforce in England were unanimous in their sense that the esteem for social work here in England was much lower than in their country of origin (Hakak, Onokah and Shishane, 2022).

In drawing on a wealth of research regarding shame including formative contributions by Erving Goffman, Frost cautions about the impact this experience has on a social worker's sense of professional self-worth and confidence (Goffman, 1990; Frost, 2016). Frost's research detected a specific impact of shame and stigma on professional's decision-making in an interdisciplinary environment as professionals may struggle to feel their contribution is as valuable as that of other professions. This may be reinforced in social work by the reduced availability of exclusive technical language to support professional identity compared to other professions, for example, medics. This influence of language on social work presence has been explored elsewhere including an examination of social work performance in the multi-disciplinary arena of the CoP (Lindsey and O'Reardon, 2021).

Recent research by Gibson (2019) examining social work with children and families in England highlights the experiences of pride and shame in this work (Gibson, 2019). Gibson (2019) argues that these emotions are embedded within society's response to PCSNs and can be deployed by those in power as a mechanism to oppress social workers and their objectives. These ideas echo some of the literature discussed in Chapter Two in which media reporting was seen to fuse social workers with those guilty of deviance and an '*underclass*' (Butler, 2012). For Gibson (2019) and Frost (2016), the impact of this shaming is hugely detrimental to social worker's professional confidence and by default their ability to advocate for those in society most at risk of harm and neglect.

My research findings demonstrated an awareness across all cohorts of the challenge of social work confidence, but it was most keenly reported by the strategic safeguarding leads. The strategic safeguarding leads expressed a fear of being punishing towards social workers in their delivery of learning from SARs. The documentary analysis demonstrated that SARs are not unduly negative towards social workers with ample evidence of '*good practice'* and '*heroic efforts'*. However, despite this, the research participants reported a sense that the narratives about social work within SARs may be difficult to digest. SARs hold a story about social work which is likely to have an impact, even if this impact is not consistent or easily measurable. SARs offer a story that '*good practice'* is possible, and that 'bad practice' is detectable and changeable. I argue that the evidence from this study suggests that the constructed role of the social worker is often presented within the SARs as one who acts rationally but with emotional presence, an individual who accurately predicts harm but does not override PCSN's right to autonomy and choice. This echoes the long-standing debate within social work research as to whether the profession's chief purpose is to provide care for those who need support or to control human behaviours to reduce risks of harm (Alfandari *et al.*, 2023).

In the construction of social work, the narratives within SARs can be seen to oscillate between two strong messages to social workers which I attempt to capture by using the expressions 'do more of what you are doing' and 'you are

not doing enough'. The strategic leads demonstrated cautiousness in their efforts to deliver SAR learning informed by their empathy towards social workers. I argue that this research evidence of cautiousness to avoid stigmatising their peers may create personal struggles and anxiety for those tasked with implementing SAR learning. This links to available research on the anxiety felt by practice educators when passing on negative feedback to failing students (Finch and Taylor, 2013). Arguably this cautiousness may influence their style of learning delivery and their engagement in the development of SAR-led service action plans. This might be seen as a subtle threat to the potential impact of SARs if those tasked with implementing the learning become frightened by the task. Once again, this identifies an additional influence on how the story of social work is told and retold within the stories of SARs.

Chapter Summary

Chapter Five sought to discuss my research findings within the broader context of health and social care research and policy. Here I will summarise this chapter and revisit the original research questions by way of organising the discussion summary. The discussion opens from the position that whilst an acknowledged purpose of inquiries is to contribute to the evidence base for practice, there are substantial limitations to this that are worth noting. I presented research evidence highlighting the pitfalls of viewing practice through the lens of an inquiry into a tragedy and argued that SARs are not immune to these challenges. It was argued that the respect within the industry for SARs gives them a powerful voice, and with this voice, the SARs contribute to a social construction of the social work role. In accepting the latter, the discussion sought to address the sub-questions in relation to the identifiable narratives about social work held within SARs, the perception of these narratives held by practitioners, and the impact of these processes and stories on social work professional confidence. The discussion above argued that political and emotional forces may complicate the SAR processes and, in turn, impact the story that is told about social work.

In considering the research questions the reported findings and subsequent discussion argue that within SARs the identifiable narratives about social work

are mixed, and in many instances more favourable than might be expected given the tragic outcomes. However, where the narratives are favourable, they also veer towards 'heroic' narratives which I argue can create expectations that are unfair and perhaps even dangerous for social workers. In considering the second question, the data demonstrated that social workers have mixed views in relation to the work of SARs. Drawing on the data presented in the findings chapter it was argued that the negative lens may contribute to some cynicism within practitioners and a level of fear regarding the process amongst those strategic leaders tasked with implementation. I argued that the need for SARs represents a shock or crisis in a system tasked with protecting people. In this light, I suggest that the SAR processes can be a vehicle to carry the sadness, disappointment and fear felt by social workers.

SARs as a process and industry may foster opportunities for stakeholders to defend against anxiety – and 'othering' is suggested as one technique for doing so. However, these processes may be absorbing other influences including as noted some frustrations around the need for 'system change'. The combination of social workers' cynicism towards SARs and leadership fears of SAR learning implementation may be a confusing mismatch for the passionate energy of a SAR author seeking justice and change. Therefore, in considering the third question – that of SARs influence on social workers' professional identity and confidence – the above discussion issues warnings of an unwarranted negative impact. The use of SARs as an evidence base to mobilize change may inadvertently bring shame and stigma to social workers – which in turn will likely impact their professional confidence to advocate for those most at risk of harm.

Chapter Six: Conclusions and Recommendations

In this summary chapter, I will outline the implications of the research and establish my recommendations for future practice and research. Here I will also take the opportunity to reflect on how effectively the research processes were executed and how well they addressed the initial research questions. In presenting this research, I have argued firstly that SARs contribute to the creation of a narrative of what social work is, and secondly that this narrative holds power in shaping how social workers view their professional identity. It is central to my thesis that it is within the processes of SAR authorship and subsequent work of 'learning from SARs' that this narrative or knowledge of social work is created within the discussions and interactions between relevant stakeholders. From my initial literature review and throughout my findings and discussion chapters, I have suggested that the SAR narratives are a contested space, a politicised space, and an anxiety-provoking emotional space. It is my view that the construction of social work by SARs occurs within this contested and emotionally heightened arena. Throughout the thesis this story of social work held within SARs and its impact on social workers' professional activities and decision-making is explored.

Summary of the Research Journey

My research began with data collection from the analysis of published SAR reports. This was initially intended as a scoping exercise to provide context and evidence – intended for use in the subsequent field data research. On a practical note, this task was very accessible. It involved published documents and therefore I did not require ethical approval to begin, nor did I need to rely on the availability of others. I therefore began reading these reports at times suited to my other commitments for example in the evenings, and whilst travelling. Aside from the research output, having to complete this task offered me the chance to stay present and productive within my research project at times when external aspects such as ethical approval or recruiting participants felt a little stop-start. For completeness, I decided to read all the available SARs from my region of work and initially recorded my collated codes and themes on a spreadsheet. This

spreadsheet continued to expand with each additional report, and I recall feeling overwhelmed by the prospect of managing this and future data effectively.

I developed a research plan that involved focus groups as the mechanism by which I would meet with social workers and seek to establish their views. When previously working as a mental health social worker I had established many groups, and in my current role I frequently chair meetings, so I was not unduly daunted by the thought of focus groups. I was drawn to the potential for bringing participants to meet with others that might inspire conversations. My research plan and ethical approval had included using semi-structured interviews, as at the time I was mindful that there could be interested participants who were unavailable for the specific focus group timeslots. This did occur and I was grateful that I did not have to seek additional approval mid-way through the project. The mechanics of the focus groups are discussed in length in the methods section of my third chapter.

The day after the first focus group I watched the video recording and began to transcribe the data. In doing this I was able to review my performance and I was quite disappointed by what I saw. One participant was very clearly distracted by other activities on her computer, and another appeared to dominate and give advice to her fellow participants. I felt that, overall, the dialogue between the participants was stilted and in my appraisal of myself, I had not done enough to develop the group activity. I made some notes on this and resolved to use this feedback to bring a better performance to my next focus group which had already been scheduled. The second focus group did seem to have more fluent conversations and I noted greater energy than in the first. However, in transcribing the data from the second group I found several issues with my performance including the use of a closed question. I discussed my concerns with my supervisors and came to understand that I had been quite fixated on creating equity of access to speaking time for the participants, but also respectful of those with more experience than me – and that my efforts around this balance were becoming a distraction for me. On reflection, this is likely related to my core research aim, which is to give a voice to social workers. However, in practical terms, I felt that I was not skilled enough in the specific tasks of leading research

focus groups. I was grateful therefore that the research plan comprised also using semi-structured interviews for data collection. In moving to interviews I felt more confident and experienced less 'imposter syndrome'. I felt that the interviews were more of a guided conversation, and it was immediately easier to judge whether the participant and I were understanding each other, as distinct from managing six voices in the (virtual) room.

The first two interviewees were individuals who had intended to attend a focus group but were unavailable on the day. In transcribing each of these interviews I immediately felt that I had collected better-quality data and my confidence in the research project was restored. At this stage in the process, I began to observe some differences in the comments shared by social workers with decades of experience versus those who were newer to the profession. I decided to actively pursue having a diverse range of experience levels seeking out interviewees who held positions as strategic leads for safeguarding. In conversation with a university colleague, I shared this strategy, and she suggested that I might be interested in sharing my research ideas with SAR authors. With my blinkered focus on elevating the voice of social workers, I had not previously considered collecting data from SAR authors. I found the prospect exciting and immediately began to think about how the future data might be triangulated.

I reached out to SAR authors and did not struggle to source research participants. On reflection I found these interviews to be the most fascinating to me personally. Each of the SAR authors spoke about their motivations for engaging in the work of SARs and each communicated their ideas about SARs readily and fluently. Throughout the field research, I was continually struck by the passion and dedication of each of the research participants. Across the board, the interviewees spoke with concern about others more so than themselves. The research participants (even those who were not social workers) spoke with warmth and empathy towards social workers; they were undoubting about the value of the profession and certain of its contribution towards their community. As with many such research projects, the only real commodity utilised was professional time. Each of the research participants was gracious and generous in giving me their time, in a manner that assured me of the merits of the research

project. I am very grateful to the research participants for their time, their interest, and their ideas which I sought to embed across the findings and discussion chapters.

Reflections on the Effectiveness of the Research

In presenting this project it is prudent to reflect on the effectiveness of the research and how well the research plan was executed. I have referred to myself as a novice researcher and looking back I am surprised by my sense of confidence at the outset of the project. I embarked on the project believing that my experience as a social worker would guide me seamlessly through the stages. However, on reflection, I was continually gaining knowledge and skills as a researcher – and this gradual improvement in my abilities is evident when I reflect on the execution of the research plan. Having reflected on the project from conception to completion I am certain that my chosen research methods were suitable for the task and allowed me to work at the pace required by a part-time project such as this. If I were asked to repeat the study, I would opt for using the same methods as they align with the theoretical framework of social constructionism. Moreover, these methods provided me with extensive data that offered abundant evidence of the processes of deconstruction and reconstruction of messages within SARs.

There are many minor adjustments for example around questions that I would make with the benefit of hindsight and three major adjustments that are worthy of discussion. Firstly, in learning from my experience I think that the research would have benefitted from a pilot focus group. In hindsight, it was hasty of me to launch into data collection as a new researcher via focus groups in a new project and using a new format (virtual). As noted above I was disappointed by my first focus group, but I had already arranged the second one. Ideally, I would have run a pilot focus group first and then shared my observations with senior researchers and my project supervisors to advance my learning and abilities. Secondly, I regret not adopting NVivo software from the beginning. It was new to me, and I am generally low-skilled in IT. Once established I found this software to be transformative in how I managed data and it greatly helped in documenting my

thoughts. Considering this learning, I then uploaded copies of the relevant SAR reports and repeated the coding exercise using the NVivo software. I was able to swiftly move between these two data sets and see clearly where the codes and themes overlapped. I found this software to be enormously helpful and in future research projects I will review software options more readily.

Finally, I regret that I had not considered including SAR authors from the outset. I was so determined that the project would give voice to social workers in practice that I had not thought to include SAR authors. However, I greatly enjoyed these interviews, and on a personal note, they were invigorating to the project. Having trawled the SAR reports seeking evidence of stories about social work, it now seems obvious to put those questions directly to the SAR authors, to ask their views and greater nuance on their intentions within SARs. In considering this I am confronted with the fact that the stories captured in this research were from a limited range of voices. I was committed to giving social workers a voice and I believe that this was achieved in part but there are notable critiques. I included strategic leads for safeguarding and SAR authors, to fully triangulate an understanding of how the narratives within SARs are generated and then shared.

I reflected on this shift away from 'front-line' social workers and continually questioned whether their experience remained the anchoring focus of the inquiry. I aimed to continually refresh the question of who is given a platform and whose voice are we curious about. As noted in my discussion chapter there is no representation from social workers in rural areas, or social workers who did not wish to or feel able to participate in the research. To date, this question of who becomes a SAR author and diversity has not been raised within the available research on SARs. Beyond this, the most glaring absence is the voice of people who use services, and in particular, people who have been involved in SARs either about themselves or a family member or friend. This absence was noted by some of the research participants and captured most succinctly by one safeguarding lead and nurse Liz who commented about SARs:

> "*In some ways, it feels very intrusive on the person, you get to know them, but did they consent to this.*"

As noted above, I was initially blinkered towards exploring the views of social workers, and there were practical limits to my capacity to explore SARs more broadly. However, in reflecting on the shift to include SAR authors – and the triangulation that this brought, I am curious as to what could have been achieved by a concurrent or perhaps an alternative shift to include PCSNs. For example, in addressing Nadia's question about public awareness of SARs, the research could have sought to capture experiences from PCSNs or families in relation to SARs. Involving PCSNs or representatives in the focus groups might have brought different ideas to the discussions. Similarly, on reflection it might have been fruitful to conduct a focus group involving social workers and SAR authors together. This learning will be incorporated into follow-up studies and future research considerations.

I embarked on this project with my personal views about social work and a biased opinion that, in my view, social workers are often more oppressed than other professionals. However, this is not disregarding the fact that social workers do have access to platforms in which to voice their views on social work – arguably such arenas are less available for users of social work services. I set out to explore the story of social work, and in so doing, I have slipped mindlessly into a muting of another part of SAR stories. Given the nature of the work, most of the SAR reports are posthumous, though a minority are not, and in all cases individuals may have family, friends or even professionals who were part of their life story. The earlier SAR reports tended to protect PCSNs' anonymity by referring to the person as Ms A or Mr X; with more recent reports adopting pseudonyms such as '*Mary*' or '*John*' and a handful referring to the individual by their given name for example '*Jojo'*. As a Mary myself I have often read SARs wondering if I was *this* Mary; or if this was *my* son John, would I agree with this account of my life and my service experience? Though these stories of social work held by PCSNs are beyond the scope of this project, these reflections are worth sharing as they point to possible directions for future research.

Answering the research questions

It is pertinent to explicitly state whether the thesis answers my initial research questions. I cautioned in Chapter Three that some of the questions were more answerable than others. The research ideas and hypotheses arose from my own personal work experiences and a preliminary review of the available research literature. However, the research questions presented in my introductory chapter were crafted from these initial ideas, with the guidance and research insights from my project supervisors. Throughout the project I tended to think at times more broadly than those questions and equally at times less broadly than the project required. With each new dataset I found new ideas, and it is not an exaggeration to suggest that a new thesis topic presented itself to me frequently. I was therefore grateful to have had the established questions for direction and scope. Without them, there would be no endpoint for the thesis. In summarising my discussion in Chapter Five I synopsised the discussion above in relation to those guiding questions.

As noted above, the thesis quickly adopts the position that SARs do contribute to social construction of social work and then the subsequent sub-questions are addressed – though not in any linear sequence. In conclusion, I can assert that the thesis does answer the first question, asking what are the identifiable narratives about social work that are held within SARs? The findings chapter (Chapter Four) presents the identifiable narratives about social work held within SARs – those of failure and heroism. This finding highlights the sometimes impossibility of the social work task to be a boundaried professional that simultaneously holds duties to 'care and control' those at risk of harm and neglect.

The second question of how social workers perceive the work of SARs has been answered via the themes presented in Chapter Four. In broad summary, social workers appeared to be hopeful about the potential of SARs whilst simultaneously wary of them. These issues are interrogated further in Chapter Five where I report on the impact felt by social workers of inquiries such as SARs. Social workers spoke about the impact on them of knowing that there could be a future inquiry, which can lead to defensive practices. Some social workers spoke of interventions that were untherapeutic practices but that were pursued to satisfy their agencies' sense of anxiety. With this evidence I argued above that SARs

can become a vehicle in which stakeholders deposit their anxieties in relation to the work of adult safeguarding. The expectation is that the SAR processes will manage the complex issues at hand and produce an outcome that can prevent any future tragedies. However, as noted in Chapter Four and Chapter Five, SAR processes are imperfect. They are infused with their own hierarchies, emotions, and political objectives. As noted above, the processes may not be as inclusive and democratic as first hoped.

The final question – that of exploring the influence of SARs on social workers' professional identity and confidence – is addressed but with evidence that is less direct or explicitly clear. Arguably this thesis does not directly answer this third question but the findings and discussion above are a helpful interrogation of the issue and set out my suggestions as derived from the research evidence.

This thesis has argued that the work of SARs is heavily infused with emotional content and that for social workers this spans their relationship with their clients and their sense of solidarity with other social workers. It seems reasonable to suggest that as professionals, social workers carry memories of previous client work which naturally informs their understanding of what constitutes evidence-based practice. However, research on the topic of social work decision-making has argued that the reach of memories might go further, for if a client experiences a bad outcome, these memories might haunt a social worker influencing their resilience to decisions around risk (Morriss, 2015). Several of the research participants in this study alluded to this phenomenon. SARs as one form of inquiry have the potential to influence not only the social workers involved but also future social workers who encounter the SAR report. Given the sadness of the SAR stories, this influence may be a haunting one, and many social workers in this study expressed fear about SARs. In raising this, I am directing attention to the power held by SARs in process and report to influence social work. It is an influence mechanised through description and language. This research argues that in telling the story of social work – the good, the bad and the heroic – a (potentially haunting) story is created. It is my view that SAR authors and commissioners should practice awareness of this creative power and attempt to manage the fear of SARs held by practitioners.

Implications of the Research

This thesis presents new evidence to the existing knowledge base. Adding the impact of SARs on professional social work is timely and valuable. In my discussion chapter, I raised concerns about using inquiries such as SARs as a basis for researching social work and offered a defence of this. As outlined in the opening chapters, SARs as a process are embedded within adult safeguarding and there is a considerable resource available for them. It is pertinent therefore to seek to add to the evidence base around SARs and consider what implications this research might have. The implications of this study relate particularly to the work of SARs, and to social work more generally. However, beyond this, the study brings implications for the wider scope of professionals tasked with safeguarding adults at risk of harm and abuse. I will discuss each of these in turn.

1) Implications of the research for the work of SARs

i) This research suggests that all stakeholders value the transparency of SAR processes and a commitment to SARs delivering change for practice. The findings consistently pointed to an ask from social workers for SARs to be nuanced and to include evidence of the experience of practitioners. This emphasis suggests that for commissioners of SARs, any efforts to further democratise the SAR processes would be welcomed by practitioners. Perhaps there may be potential for a practitioner or junior staff member to co-chair or co-author a SAR, or to be central in the delivery of learning from SARs. Drawing on the evidence presented in this study I argue that this value of co-production could offer a core principle for the development of SAR methodologies.

ii) My research highlights the opinions of social workers who have observed that the commissioning of SARs seems to be done on an ad hoc basis. They question why some incidents are subjected to a SAR investigation while others are not. Based on this finding, I suggest that

local SABs consider an evaluation of their decision-making process when it comes to commissioning SARs. It could be beneficial to review cases that were referred to the SAB but did not go through a SAR investigation. There is a possibility of gaining valuable insights by applying the SAR process to a selection of cases that had positive outcomes, also known as '*good news'* stories.

2) Implications of the research for social work

i) This research provides additional evidence aligned with previous findings that social work in England faces challenges in maintaining its professional reputation amidst negative narratives and reports of failures. The study suggests that SARs may have an undesired effect of contributing to a negative perception of social work. An implication of this research is therefore a call on social workers and the organisations that represent social workers to assert efforts to offset this negative story. As I mentioned in Chapter Two, there are very few positive representations of social workers in mainstream entertainment such as television shows. It could be beneficial for social work organizations to support entertainment projects that showcase a successful and alternative narrative of social work and bring it to the mainstream media.

ii) This research implies that social work leaders can play a crucial role in identifying how the use of SARs can equip social workers with the necessary tools to improve their professional confidence, for instance by leveraging SARs as an evidence base to showcase areas of their roles that may be setting unrealistic or unjust expectations.

3) Implications of the research for other professionals and adult safeguarding

i) This research investigates how SARs influence the way social work is perceived and constructed. However, it is important to note that by implication other professions tasked with safeguarding adults will also

undergo similar processes of social construction, which warrants further exploration.

ii) This research identifies different contexts in which SARs operate, often with varying agendas, politics, and emotional charge. The thesis argues that SARs contain a unique power within this contested field to shape the narrative and create the established evidence base. As the subject matter is a specific account of adult safeguarding concerning a specific individual or small group of people, the research therefore implies that the work of adult safeguarding is similarly infused with the same challenging contexts. It is essential for all professionals working to prevent harm and abuse to be knowledgeable about this topic. Furthermore, leaders should provide practitioners with the necessary tools to navigate these issues successfully, while safeguarding the well-being of those who are most vulnerable to harm and neglect.

Quality Assurance and Limitations

Whilst arguing above that this thesis brings new and timely evidence it is pertinent to reflect on the quality of the research project acknowledging any limitations that might impact on its reliability in making these claims. This thesis has acknowledged from the outset that there are many limitations to the effectiveness of the research project, and where relevant these are discussed within the text. Here I will recall those research limitations and the move to consider the project more broadly through the lens of a quality assurance framework.

In Chapter Two I discuss the fundamental limitation that arises from any research that uses inquiries as an evidence base, noting that inquiries into tragedy are just part of a much wider story of social work and adult safeguarding practice. In Chapter Three, I mentioned that my primary interest was in social work, but many of the research participants did not come from a professional social work

background. While this diversity of backgrounds did offer a broad range of perspectives on the experience of social workers, it also had some limitations. Non-social workers were less likely to be influenced by the formative social work ideas of ethics and values, which may limit their perspectives. Nonetheless, in my analysis, I found that non-social workers were similarly compassionate and empathetic towards social workers, and their views on the impact of SARs were not significantly different from those of their peers who were social workers. However, it remains a fact that using a data sample that was exclusively comprised of social workers might brought richer and more detailed nuance to the theme *To be a Professional (Social) Worker.*

For this purpose, I draw on an established quality assurance framework suitable for qualitative research presented by Yvonna Lincoln and Egon Guba in '*Naturalistic Inquiry'* (1985). They argue that for qualitative research to claim rational results is inaccurate given that such projects rely on subjective understandings of central phenomena including for example the nature of reality (Lincoln and Guba, 1985). Instead, they argue that qualitative studies should claim validity by demonstrating adherence to specific quality assurance indicators. These are as follows:

1) Credibility – That the research claims confidently that the findings reported are a true description of the actual findings. In claiming that my research is credible I note the extensive data set, my inclusion of differing views and my use of direct quotes. By bringing the exact testimonies of the participants using their own choice of language I argue that the thesis presents an accurate description of the research findings.

2) Transferability – That the research findings be applied in other contexts – thick description. If this study was not about SARs but a different form of inquiry – or if it was not about social work. The descriptions in the thematic analysis apply to both sideways transfers – it is identifying how one process constructs the identity of a profession and this is I believe transferable. The thesis presents rich descriptions of the processes of narrative construction and reconstruction, and these descriptions will greatly aid transferability to either another professional or alternative form of inquiry.

3) Dependability – That the research can demonstrate that the research processes are reliable such that the findings would be the same if the study was repeated. Here I review the quality of the research in two parts. Firstly, I consider the first research sub-question which asks what the narratives about social work are found within SARs. I argue that this evidence is dependable – the method used for documentary analysis is commonly used and transparent. Some of the findings relate to counting the frequency of indicators and I believe that this would be the same if repeated with the same sample.

However, concerning the dependability of the second part of the study asking how social workers perceive SARs and how SAR influence their work, these aspects are trickier given that they appear to be more subjective. In asking about social workers' perceptions of the work of SARs

the research explores social workers' views, opinions, and feelings about SARs. This is subjective information drawn from personal experience. Answers to this question were sought in social workers' stories that they shared about SARs and the evidence that they drew on to inform their testimonies. In considering the third sub-question which considers how the work of SARs impacts social workers' sense of professional identity. This last question is somewhat less answerable than the previous two as it relies on social workers drawing a connection between two abstract influences, namely the work of SARs and their sense of professional identity. Answers were sought from social workers' testimonies by analysis of their direct commentary but also any views that run in parallel on these two influences. As the respondents tended to speak freely about their experiences, and the evidence showed clear patterns amongst the testimonies it is I believe fair to argue that concerning the second question the research thesis is dependable. However, a change in context might have a strong influence on those shared opinions, for example, if a social worker was directly involved in a SAR inquiry due to a tragedy on their own 'case-load'. This is a potential weakness in the study and in the interests of quality assurance, I am identifying it here as a threat to the dependability of the research.

4) Confirmability – That the research can claim that the findings are derived from the participants and not from researcher bias or agenda. In Chapter Four I discuss how the work of SARs is infused with emotion and acknowledge emotionally driven bias in my analysis. Throughout the thesis, I have identified myself as a social worker who is proud of this

profession and driven to promote its capabilities. This presents an inherent limitation and a high risk of confirmation bias in presenting the findings. As a researcher, I have adopted the practice of reflexivity and maintained a research diary to challenge myself in this area. In addition, I discussed my work with my peers and my supervisory team to ensure that my thoughts and analysis were driven by the rich data set rather than my preconceived ideas. I am confident that the thesis is an accurate presentation of the research findings – and that the respondents were challenged appropriately on their own confirmation bias where relevant.

In adopting this framework, I have identified that the essential markers of quality assurance suggested by Lincoln and Guba (1985) are present in the research. Therefore, while acknowledging the research's limitations, I conclude that the thesis accurately presents the research findings. The new evidence gathered through this research supports the argument that SARs do contribute to the social construction of social work in England and is credible.

Recommendations for Future Research

Considering the above implications of this research, I will highlight areas that I identified as being worthy of further research. These are as follows:

i) In my thesis, I raise questions about the usage of the term 'professional curiosity' and question its dominance in the analysis. To explore this topic further, I suggest conducting additional qualitative research. The evidence from my study highlights the need to consider the phenomenological aspects of how practitioners perceive the term 'professional curiosity' and how it may impact their views of their

profession, including how practitioners manage or challenge any limitations to their profession's ability to work.

ii) Chapter Four of my research highlighted that SARs are often used as a tool for learning and development, including staff training. However, my findings also noted that strategic leads who are responsible for disseminating the learning from SARs often find it challenging to do so. They express concerns about being perceived as punitive towards practitioners or dismissive of the challenges they face while delivering services. To address this issue, I suggest conducting additional research on methods for sensitively disseminating learning related to SARs. This research could focus on how to support strategic safeguarding leads to utilise learning from SARs in a manner that fits with their expressed desire to be fair, supportive and empowering towards practitioners.

iii) The focus of this research was on the experiences of social workers. However, to gain a more comprehensive understanding of social issues, it is recommended that the study be extended to include other professional groups, for example police officers or practitioners in drug and alcohol services. This will help to determine whether social work is more vulnerable to feeling oppressed by SARs in comparison to other professions. Additionally, examining the experiences of other professional groups may uncover specific nuances that contribute to the challenging impact of SARs on social workers.

Dissemination Plan

This research has provided new evidence, which I am committed to sharing widely across the fields of adult safeguarding practice development and social work in general. I am enthusiastic about the value of this research and eager to disseminate it as quickly as possible, particularly as the SARs referenced are still

fresh in the memory of relevant service areas. While tragic SAR stories are memorable and impactful, it is also important to highlight the stories of social workers who are responsible for preventing such tragedies. It is hoped that this thesis will, in some way, contribute to this elevation. I have devised a strategy to reach out to three related audiences: Safeguarding Adults Boards, SAR authors and social workers in practice.

In considering the first group, local area SABs, I have already agreed to present the findings of my research to a meeting of SAB chairs in Spring 2024. This will be an opportunity to share my findings and lead a discussion on their implications. Following this presentation, I intend to author a brief practical paper outlining my thesis and the above recommendations for SABs with SAB chairs and managers as my intended audience. I will seek publication of this in a practice journal for example the *Journal of Health and Social Care.*

The second group are the SAR authors and, as noted above, this cohort are arguably most invested in viewing SARs as making a positive contribution. It is my intention to seek an invitation to present my findings directly to the SAR authors' network. This will be in parallel with authoring a paper for the *Journal of Adult Protection.* This journal has published many articles that draw evidence from SARs and many SAR authors have contributed to it. Therefore, I view this journal as being a likely learning resource for this group. This paper will carefully highlight the power of SARs and my recommendations for SAR authors to consider evoking this power towards bolstering social work confidence.

The broader social work audience can be reached via publication in academic journals such as *The British Journal of Social Work*, but also practice magazines including *Social Work Practice* and *Community Care.* In addition, I will be submitting an abstract to present my thesis at the next Joint Social Work Education and Research Conference (JSWEC) in June 2024. The key message of this presentation and publication is to raise awareness of the contribution of inquiries to social workers' experience of shame and reduced professional confidence. In presenting my thesis I will be inviting social workers to reflect on the dominant narratives surrounding their profession. The overall aim of this

learning dissemination is to share my findings and my recommendations that social workers consider SARs as a tool for change – and seek to engage their surrounding structures to work positively towards achieving this.

Concluding Comments

In conclusion, this thesis argues that SARs have the power to contribute to the social construction of social work; however, these narratives are contested and contextualized. This thesis adds to the currently available evidence base which uses SARs as key informants noted in Chapter One, this research arose from my own formative experiences as a newly qualified social worker and my sense that social workers quickly feel fear in 'admitting' that they are social workers. This was my experience, but it was echoed in the findings presented in Chapter Four. It is hoped that this new knowledge might contribute to supporting social workers to re-author their own stories and to have greater ownership of the narratives of their profession.

The process of the research has brought me into contact with many social workers of various levels of seniority and each brought a passion and enthusiasm for their work. In my closing comments, I reflect here on the power, compassion and resilience demonstrated by the research participants. It is not a cliché to note that meeting them and conducting this project was inspiring, and motivational and that the experience re-invigorated any of my previously dwindling pride in my profession. As mentioned in Chapter One, I joined UEL during a transitional phase in my career. At that time, my employment role did not require me to interact with the public, and I did not have any colleagues in the

social work field. Therefore, UEL and this project became a crucial link to my profession, enabling me to connect with social workers, think alongside them, and contribute to the field of social work in some way.

I embarked on this project during a time of personal change – approaching UEL about the Doctor of Social Work programme just weeks after starting my current employment role but similarly just as I returned to work following my first period of maternity leave. As a mother of a toddler, I found myself overwhelmed and at times underwhelmed. Young children are wonderful and draining often in equal measure, but the isolation and tedium of motherhood can be brutally painful. This project has been a great friend to me during a challenging period of growing my own family and caring for my father during a slow and gradual deterioration of health and well-being. I was grateful to have the intellectual tunnel into which I could escape and to have a long-term project that I could return to slowly and steadily at a pace that suited me. This project provided me with a continuous connection to my profession, peers, and forward-thinking ideas, for which I am grateful. In completing this thesis, I have benefitted enormously from the research apprenticeship – the schooling in research philosophy and methods and rigorous evaluation. Learning the art of research has been intellectually challenging, and at times receiving feedback on written submissions has been emotionally challenging. I am confident my learning and development during this period has been transformative and I am grateful for it.

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Appendix A: Sample Consent Form and Information Sheet

Participant Information Sheet

Research Integrity

The University adheres to its responsibility to promote and support the highest standard of rigour and integrity in all aspects of research, observing the appropriate ethical, legal and professional frameworks.

The University is committed to preserving your dignity, rights, safety and well-being and as such it is a mandatory requirement of the University that formal ethical approval, from the appropriate Research Ethics Committee, is granted before research with human participants, human data, personal and/or sensitive data, or non-human animal commences.

The purpose of this Participant Information Sheet is to provide you with the information that you need to consider in deciding whether to participate in this research project.

Title of research project: Doctoral Research Project: The Contribution of Safeguarding Adult Reviews to the Social Construction of Social Work in England.

Principal Investigator/Director of Studies

Name(s): Dr Jo Finch

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Student **researcher**

Name**(s):** Ms Mary O'Reardon

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Research funding

This research is not funded.

External collaborators

This project does not involve external collaborators.

Location

In London using virtual meetings via MS Team

Aims and methodology

Aims and objectives of the project

Safeguarding Adult Reviews (SAR)s are a multi-agency inquiry following the death or serious harm of an adult with health and social care needs when there is some indication that the harm they experienced might have been preventable (SCIE, 2019). The goal of my research project is to understand the impact that SAR inquiries have on front-line social workers. My research will focus on SARs as a form of inquiry into the practice of everyday social work. To what extent can the reports improve and develop social work practice in the area of adult safeguarding? This research project aims to contribute to the growing body of practice research on social work with adults.

Methodology, data analysis and recruitment for the project.

This is exploratory qualitative research. The research is underpinned by the explicit aim to explore the perspectives of front-line practitioners and to understand their experiences concerning SARs. The research will adopt a mixed-methods approach as follows:

1. Analysis of SAR reports

I will examine all available SAR reports published within the North East London Commissioning Region between January 2019 and December 2020. I will use my professional experience to create a template from which to count the presence of key indicators such as social work participation in the SAR; the number of recommendations that relate to social work practice; and recommendations for social work as a percentage of overall recommendations. This work will be an empirical exploration and the outputs will be quantitative data to inform the further research plan. In addition to this quantitative recording and analysis, I will use thematic analysis to extract qualitative data from the SAR reports. The research will use thematic analysis to code the data following the Braun and Clarke (2013) method and identify any themes that might arise relating to social work practice.

2. Establishment of experimental reflective forums for social workers.

For the research, it is anticipated to establish a reflective group forum for local social workers with approximately five to seven participants. In this group, I will present a recent SAR report for discussion. The researcher will aim to facilitate a minimum of two sessions for each group, and the sessions will be recorded (subject to consent).

3. Semi-structured interviews with front-line social workers.

In seeking to explore these issues directly and in a confidential space, I will interview approximately ten to fifteen social workers individually. An interview schedule will be prepared to shape and prompt the discussions, but the participants will be encouraged to speak freely and widely. This confidential format should facilitate a safer space for the personal topic of professional self-identity. In this project, the interviews will be transcribed and the script explored using thematic analysis.

Recruitment of Participants.

Participants will be sourced using both formal and informal networks including workplace networks and social media. Participants will be encouraged to invite other participants where appropriate. All participants will be qualified registered social workers currently engaged in front-line social work practice with adults. Following a verbal invitation, each participant will be sent a written invitation with further information about the study and details about how information will be stored and shared. The participants will be asked to complete an information-sharing consent form before participation.

Research involving children or young people

This research project does not involve children or young people under the age of 16.

Participant recruitment

How will participants be recruited?

Use of professional networks to reach out to professional social workers across work areas close to my own. Participants will be encouraged to invite other participants when appropriate. Social workers who express an interest will receive a letter of introduction with a consent form to be returned before participation.

How long will participants be required for the project?

To participate in one session lasting between 40 and 90 minutes.

Participants will not be remunerated for their contribution.

Risk

The project involves potential hazards and / or emotional discomfort / distress.

Provide an outline of support, feedback or debriefing protocol.

with. If participants appear to be experiencing distress the researcher will offer a debrief session. If further support is required, the participants will be signposted towards the professional support provided by the professional body the British Association of Social Workers.

Confidentiality and anonymisation

Where possible, participants' confidentiality will be maintained unless a disclosure is made that indicates that the participant or someone else is at serious risk of harm. Such disclosures may be reported to the relevant authority.

Participants **will** be anonymised at the source.

The participants will be anonymised and given a alternative name for description purposes. A log of the participants names along with their new reference will be stored securely in the UEL H drive.

Participants' responses **will** be anonymised or are an anonymised sample.

Once transcribed, the participant's responses will be pseudonymised and recorded against their given alternative name for description purposes. A log of participants'

names and their given alternative names will be recorded separately and securely on the UEL One drive.

The samples and data **are** de-identified.

As above

Participants **will** be anonymised in publications that arise from the research.

Participants **will not** have the option of being identified in the research project and dissemination of research findings and / or publication.

Data security

The data generated during the research will be retained in accordance with the University's Data Protection Policy.

The data **will** be stored safely on a password-protected computer.

The raw data **will not** be shared with individuals outside of the research team.

Participants **will be** audio and/or video recorded.

How will you transfer, store and, where relevant, dispose of audio and/or video recordings?

The audio files will be uploaded onto MS Streams. In the unlikely event of face to face interviews using a digital recorder – the transcripts will be uploaded onto my UEL drive. The digital recorder will be locked into a secure box for transport and storage until the audio files are uploaded.

The transcripts will be saved separately from the coding map.

All of these files will be saved on the UEL H drive

Hard copies of the data **will not** be retained.

The research data **will** be encrypted and transferred inside of European Economic Area (EEA).

Third-party permission

The project **does not include** the involvement of an external organisation or institution.

Dissemination

The results **will** be disseminated.

How will the results of the research be reported and disseminated?

Dissertation / Thesis, Peer reviewed journal, Conference presentation

Possible impact on participants

Statement of impact where participants are in a dependent relationship with any of the researchers. Where participants are in a dependent relationship with any of the researchers include a clear statement that participation in the research will have no impact on assessment / treatment / service-use or support**.**

Statement where patients or participants are undergoing treatment. Where patients or participants are undergoing treatment explain whether the research project

forms of part of their treatment and whether or not any benefit is to be gained from their participation.

Confidentiality

Information shared by participants in both interviews and group sessions will be managed with confidentiality according to the research ethical guidelines forwarded by the University of East London and the British Association of Social Workers. Participants confidentiality will be maintained except in the case whereby a disclosure that arises that indicates safeguarding or safe practice concerns. In this scenario the researcher will share concerns with the relevant authorities.

To aid the research process the interviews and focus groups will be audio recorded using Microsoft Streams service and uploaded immediately using this system. The audio files will be password protected and stored securely on the UEL one drive data storage system. The researcher will personally transcribe the data and then immediately destroy the audio files. The transcripts will be stored using alternative names for the participants – and the system of allocating a name to a participant will be stored separately in the UEL H drive. The data will will be retained in accordance with the University's Data Protection and Data Management Policies'. The interview transcripts will be stored on the UEL one drive and H drive for the duration of the project and upon completion, the H drive files will be destroyed.

As professional social work can be a small community it is likely that participants in the group sessions may have some knowledge of each other. To enable participants to feel confident sharing their views, group members will be asked to commit to a confidentiality agreement. Participants will have a responsibility not to discuss or disclose any information relating to the group session except in the case where you as

a professional social worker may detect safeguarding or ethical concerns. Accordingly, your professional cooperation will be appreciated. Please sign the consent form below,

Disclaimer

Your participation in this research project is voluntary and you are free to withdraw at any time during the research. Should you choose to withdraw from the research project you may do so without disadvantage to yourself and without any an obligation to give a reason. Please note, that your data can be withdrawn up to the point of data analysis, however after this point it may not be possible. If you have any concerns regarding the conduct of the research in which you are being asked to participate, please contact:

Catherine Hitchens, Research Integrity and Ethics Manager, Graduate School, EB 1.43
University of East London, Docklands Campus, London, E16 2RD
Telephone: 020 8223 6683. Email: researchethics@uel.ac.uk.

For general enquiries about the research project, please contact the Principal Investigator on the contact details at the top of this sheet.

Consent to Participate in a Programme Involving the Use of Human Participants

Title of proposed research project: Doctoral Research Project: The Contribution of Safeguarding Adult Reviews to the Social Construction of Social Work in England.

Principal Investigator/Director of Studies
Name(s): Dr Jo Finch
UEL telephone/email address: j.finch@uel.ac.uk

Student researcher
Name(s): Ms Mary O'Reardon
Contact address: UEL telephone/email address: u1829285@uel.ac.uk

	YES	NO
I have read the Participant Information Sheet relating to the above research project in which I have been asked to participate and I have been given a copy to keep. The nature and purposes of the research project have been explained to me, and I have had the opportunity to discuss the details and ask questions about this information. I understand what is being proposed and the procedures in which I will be involved have been explained to me.		
I consent to my participation being audio or video recorded.		
I understand that my involvement in this project, and particular data from this research, will remain strictly confidential as far as possible. Only the researchers involved in the research project and will have access to the data.		
I understand that maintaining strict confidentiality is subject to limitations if the sample size is small or focus groups are used and that this may have implications for confidentiality/anonymity.		
Where possible, participants' confidentiality will be maintained unless a disclosure is made that indicates that the participant or someone else is at serious risk of harm. Such disclosures may be reported to the relevant authority.		
Participants **will** be anonymised in publications that arise from the research. I give my permission for anonymized quotes from my responses to be used in publications resulting from the project.		
The results **will** be disseminated. Dissertation / Thesis, Peer reviewed journal, Conference presentation I give my permission to be identified in the study and dissemination of research findings and / or publications resulting from the project.		
I give my permission for the research team to use the data I have provided in future research.		
I give my permission to be contacted by the research team regarding participation in future research projects.		
It has been explained to me what will happen once the research project has been completed.		

I understand that my participation in this research project is entirely voluntary, and I am free to withdraw at any time during the research without disadvantage to myself and without being obliged to give a reason. I understand that my data can be withdrawn up to the point of data analysis and that after this point it may not be possible.		
I hereby freely and fully consent to participate in the research project which has been fully explained to me and for the information obtained to be used in relevant research publications.		

Participant's Name:

Participant's Signature:

Principal Investigator's Name: Dr Jo Finch

Principal Investigator's Signature

Date:

Appendix B: Prepared Questions for Data Collection

Focus Groups:

- *Can you tell me about your own experience of SARs if any?*
- *Do you talk about SARs in Team Meetings or Supervision?*
- *Do you think that SARs have been useful in your practice?*
- *Do you think that SARs tell us anything about social work?*

Case Study Ms E – See Appendix 3

Semi Structured Interviews with Social workers

- *How would you describe your thoughts when you first hear about a SAR?*
- *Do you think that SARs are useful?*
- *Do you feel hopeful about social work as a profession?*

Semi Structured Interviews with Safeguarding Leads

- *Tell me about your previous involvement with SARs if any.*
- *What are the thoughts or feelings that come to you when you first hear about a SAR?*
- *My curiosity is about how social workers receive SARs – can you tell me about your experience with this?*
- *Do you identify with the position of your professional peers for example social workers in these investigations?*

Semi-Structured Interviews with SAR Authors

- *What draws you to the work of SARs?*
- *Can you describe any thoughts or feelings that arise for you when you are first approached about a new SAR commission?*
- *Some participants have suggested that SARs are political – are they political for you?*
- *How do you navigate blame within the process?*
- *Are you hopeful for the future of social work?*

Appendix C: Ms 'E' Case Summary

Ms E - Tower Hamlets

The Case 'Ms E'

Ms E was a 73-year-old lady residing at a standard residential care and nursing home typical of the type of facility that accommodates and cares for older adults. She died by suicide at her care home in Feb 2017. She had been living there for three years. She had previously been known to mental health services for many years however at the time of her death she had not been seen by a member of the mental health service team for several months.

Summary of events

- Miss E had a long-standing history of mental ill health and latterly was diagnosed with Bipolar Affective Disorder.
- Reportedly, Miss E had her first admission to a general hospital ward due to an overdose in 1986 and is also reported to have become unwell after the death of her mother in 1993.
- She had received support from the NHS East London Foundation Trust (ELFT) via the Stepney and Wapping Community Mental Health Team until 2010 when Miss E's support was transferred to ELFT's Tower Hamlets Community Mental Team for Older People (ELFT).
- Miss E was under the care of ELFT from 2011 until her death in February 2017. The LBTH had delegated the discharge of its statutory adult social care functions to the ELFT.
- Miss E's health and social care was care coordinated from 2011 to January 2016 by three successive staff members in ELFT under the Care Programme

Approach (CPA). Two of these were nursing members of the team until July 2014 when Miss E was allocated to a social worker.

- It was at about this time that Miss E agreed to move from sheltered accommodation to a 24-hour residential care home.
- The residential placement was arranged by the ELFT social worker and the placement at the RCH was commissioned by the London Borough of Tower Hamlets (LBTH) Adults' Brokerage team on behalf of LBTH Department of Adult Social Care . Throughout this period the ELFT team managed Miss E's treatment and support under the CPA or via the outpatient clinic. They were also responsible for undertaking risk assessments and for providing a care plan that was reviewed regularly across both health and social care.
- Care coordination was discontinued via a decision made by Miss E's Care coordinator and her manager (Team manager) in supervision in January 2016 and not via a Care Programme Approach meeting with Miss E and the Multi-Disciplinary Team.

Factors noted in the report.

- There was no evidence that LBTH's responsibilities regarding a minimum annual review under the Care Act were considered. The placement was not reviewed.
- Miss E was not herself involved in the decision to discharge herself from the CPA.
- There was no evidence that Miss E receive holistic assessments, focusing on her strengths and looking at the outcomes she desired.
- The residential care home was not supported by mental health professionals to work effectively with Miss E and find strategies to ease the symptoms of her mental ill health and unhappiness.

Recommendations noted in the report.

The report makes recommendations for health and social partners on:

- The governance arrangements between the LBTH and ELFT.
- Monitoring the quality of work undertaken under The Care Act.
- Ensuring people receive an appropriate holistic strengths-based assessment to support their needs.
- Reviewing the CPA process and its alignment with The Care Act.
- Ensuring the CPA is properly implemented and audited at regular intervals.
- Ensuring that health and social care legal duties and responsibilities and perspectives are fully understood with ELFT.
- Ensuring that providers have access to specialist mental health support for their residents; and
- The retention of records.

Q. 1: Please jot down your initial feelings having read this summary of a summary

Q.2: Having read this summary, do you have any thoughts about the social work professionals involved in this case?

Q3. Would you use a SAR such as this in training exercises with students or newly qualified social workers?

Appendix D: Confirmation of Ethical Approval

ResearchUEL

Dear Mary

Application ID: ETH2021-0155

Project title: The Contribution of Safeguarding Adult Reviews (SAR)s in the Social Construction of Social Work in England.

Lead researcher: Ms Mary O'Reardon

Your application to University Research Ethics Sub-Committee was considered on the 22nd of July 2021.

The decision is: **Approved**

The Committee's response is based on the protocol described in the application form and supporting documentation.

Your project has received ethical approval for 4 years from the approval date.

If you have any questions regarding this application please contact your supervisor or the secretary for the University Research Ethics Sub-Committee.

Approval has been given for the submitted application only and the research must be conducted accordingly.

Should you wish to make any changes in connection with this research project you must complete 'An application for approval of an amendment to an existing application'.

The approval of the proposed research applies to the following research site.

Research site: Remotely via video conferencing.

Principal Investigator / Local Collaborator: Ms Mary O'Reardon

Approval is given on the understanding that the UEL Code of Practice for Research and the Code of Practice for Research Ethics is adhered to.

Any adverse events or reactions that occur in connection with this research project should be reported using the University's form for Reporting an Adverse/Serious Adverse Event/Reaction.

The University will periodically audit a random sample of approved applications for ethical approval, to ensure that the research projects are conducted in compliance with the consent given by the Research Ethics Committee and to the highest standards of rigour and integrity.

Please note, it is your responsibility to retain this letter for your records.

With the Committee's best wishes for the success of the project

Yours sincerely

Fernanda Silva

Administrative Officer for Research Governance

Ethics ETH2021-0155: Ms Mary O'Reardon (High risk)