Social Worker
Wellbeing and
Working Conditions:

Good Practice Toolkit

Version 1.2 – November 2020





Authors: Dr Jermaine M Ravalier Reader in Work and Wellbeing (Psychology) Bath Spa University

Dr Ruth Allen, CEO British Association of Social Workers Foreword by **John McGowan**,

General Secretary, Social Workers Union





Acknowledgements

Dr Allen and **Dr Ravalier** would particularly like to thank and acknowledge the following for their support and work on this toolkit.

Dr Oliver Clabburn for his work on the toolkit

Dr Charlotte Boichat for her work in interviewing, and analysing, and contributing to the toolkit.

Dr Paula McFadden for her expertise and excellence on this and the wider Global Working Conditions project.

Lien Watts for her invaluable input and expert knowledge of social work and representation of social workers n the workplace.

Lisa Cheatham for her input and experience.

Dr John Moriarty for his support in collecting data for the toolkit.

Contents:

1.	Introduction and background	5
2.	The evidence behind the toolkit	9
3.	An integrated model of wellbeing at work for social workers	14
4.	Tools for social workers: self-care; continuing professional development; professional community and collective identity; trade union support	18
5.	Tools for practice supervisors and practice leaders	33
6.	Tools for teams	37
7.	Tools for managers and organisational leaders	40

cite as: British Association of Social Workers (BASW), Bath Spa University and Social Workers Union (SWU) (2020)

Social Worker Wellbeing and Working Conditions: Good Practice Toolkit.

Users are welcome to quote from this report so long as the source is correctly cited as above, unattributed quotes are forbidden under copyright protection.





Foreword: John McGowan, General Secretary Social Workers Union



This 'Social Worker Wellbeing and Working Conditions: Good Practice Toolkit' is indeed further and continued evidence of the commitment of BASW, SWU and Bath Spa University to create positive working conditions for Social Workers.

Those who work in the sector are incredibly committed to their work, to maintaining the highest of standards for service users, and for the most part, they want to find a way to remain working in social work. However positive working conditions and wellbeing are necessary for social workers'

psychological and physical welfare and to keep social workers in posts. If this is not addressed then we will be facing a crisis; impacting on the loss of skilled, well trained and necessary staff who impact daily on our lives.

The "healthiest" workforces are unionised workforces in so far as they have someone fighting their corner for better working conditions behind the scenes. There is no doubt that working within the confines of imposed austerity creates great difficulties for public sector staff which ultimately impacts upon their personal and collective wellbeing. The current focus on self-help and personal resilience within the workplace is a positive step when adequate resources are provided to initiate it. The notion of individual staff members taking on the roles of "champions" and "guardians" in order to discuss wellbeing or whistleblowing is a great source of comfort to an anxious staff member, however the real champions and guardians of the workforce are the trade unions and this is something that we as a union can promote alongside this much needed tool kit. The toolkit provides tremendous information for social workers to reference and use regarding creating positive wellbeing and I have no doubt that this will be a valuable resource for those concerned about their own wellbeing.

John McGowan

General Secretary Social Workers Union

1. Introduction and background

Social workers provide vital services and support to people in communities across the UK. Like all professionals, social workers need the right context and resources to do their job, ongoing support, and development opportunities. They need respect and recognition from multi-professional colleagues, enough control over their workload and enough autonomy to use their professional skills to the full.

In 2017/2018, UK Bath Spa University, Social Workers Union (SWU) and the British Association of Social Workers (BASW) undertook research into social worker wellbeing across the UK. In surveys and follow up interviews we we had over 5000 social worker respondents who provided rich detail about their work circumstances, their views, and feelings about their jobs.

Our findings showed coordinated action is needed to improve social workers' working conditions across the UK to enable social workers to thrive, to prevent burn out and loss of staff, particularly from statutory roles. This finding is not new, but our research evidence helps define the changes social workers need. We have further consulted social workers and stakeholders to develop this resource.

Covid-19 issues

The publication of this toolkit was delayed by the arrival of the Covid-19 pandemic in March 2020. While much of what is covered in the document is about longstanding imperatives, we have added sections in boxes that reflect the Covid crisis and its unfolding impact on staff and society at relevant points in the document.

This toolkit is aimed at accelerating action across all parts of the workplace. It is built on the principle that improvement in organisations – for staff and for the people we serve – often needs everyone involved to work together, and that social workers in practice can be empowered to shape change and use their professional agency and power, individually and collectively.

The toolkit sits on the www.basw.co.uk website www.basw.co.uk/social-worker-wellbeing-and-working-conditions-0 where you will also find information about and links to the Social Workers Union. There you will find links and signposts to a range of resources.

Bath Spa University, BASW and SWU are not alone in their determination to improve the context and experience of social workers in the workplace. We believe our toolkit is a valuable and powerful contribution to joint efforts across our sector and we will signpost on the website to other key resources that also can make a difference.

Who is this toolkit for?

This toolkit is aimed at social workers in practice, social work supervisors, workforce development leads, managers, and leaders.

For social workers in practice, it should help you be more informed and empowered to look after yourself better at work; recognise when you need support and how to access it; develop knowledge and skills to influence your organisation; and know your rights and what you should expect from your employer.

Knowledge is power. Knowing your rights at work and the evidence of what constitutes a healthy workplace, understanding what is most likely to work in self-care and knowing more about how managers and employers can support you better, are all important and can make a big difference. The toolkit should help you feel more confident to make your workplace needs known to local and national authorities and to act to make changes yourself where you can.

Given the worrying findings from our research, we believe improvements in working conditions and wellbeing for social workers require major developments in the quality and consistency of management, leadership, organisational culture, and employment practices. Readers with operational, workforce development and strategic responsibility for working conditions should use this toolkit to work together with staff to achieve shared vision and actions for change.

Recognising this, the toolkit is holistic and integrated. What we mean by this is that it has key messages and signposting for all of the following people, parts of organisations and bodies providing support to social workers:

Fig. 1

- ✓ Social workers in direct practice
- ✓ Social work supervisors and practice leaders
- ✓ Teams and first line team leaders and managers
- ✓ Senior managers and organisational leaders
- ✓ Professional organisations/groups for social workers
- ✓ Trade unions

It is also holistic and integrated in recognising social workers' experiences at work, their tasks and pressures, are strongly shaped by national and local socio-economic and other policies and factors that affect the living conditions, incomes, safety and wellbeing of the communities they work with (see section on 'Context' below).

The toolkit will also be useful for educators of social work students preparing social workers for qualifying and entry into practice and providing continuing professional development.

Covid-19 issues

This toolkit is for the long term. But we are still in the midst of the Covid-19 pandemic and this is changing aspects of social work practice and population needs now and will continue to do so for many months if not years even after the acute period of the pandemic has passed. The pandemic brings additional challenges of heightened health inequality, the need to adapt social work practices including increased use of remote working, and take opportunities to learn for the long term from rapid innovations and new collaborations.

During the Covid-19 crisis, social workers have made huge changes in how and where they work. Although designated essential workers, social workers had little or no governmental or public health guidance on how to adapt their work and little access to personal protective equipment at the start of the outbreak (BASW Covid-19 survey of 2000+ social workers March-June 2020). Social workers and their employers had to manage changes and devise local protocols in the absence of comprehensive, national pandemic plans and in the absence of identification of the specific and distinctive roles of social workers in national public health strategy. BASW and SWU have provided guidance and information to support decision making from the start of the pandemic – www.basw.co.uk/coronavirus-covid-19-basw-updates

While guidance from government departments and social work leaders has developed during the pandemic, including rising recognition of the importance of reliable access to protective equipment and testing, social workers' vital roles continue to need promoting and making visible during the pandemic and in our vision of the future.

While there are many instances of social workers maintaining contact with people during lock down and continuing effectively in their safeguarding and rights protection activities, sustaining this has been challenging in many services. Amongst other challenges, social workers in services for adults have been hampered in safeguarding people in care and supported living homes. Because of the national drive for hospital discharge without testing in early weeks of the pandemic and ongoing issues of access to PPE and testing, social workers have not always been about to play their full, statutory roles in protecting people in care homes and other institutions. Children's services have been challenged in maintaining support to those most at risk particularly as school places for vulnerable children were not well taken up and wider support services closed. Rises in domestic violence and online abuse risks in lockdown are thought to have significantly built up hidden harms. Concerns about not having the right conditions to fulfil duties and professional commitments has caused ethical and emotional challenges for social workers, as BASW found in its rolling survey in the first months of Covid. In these next phases of the pandemics we need to ensure working conditions for social workers both maintain safety and effective risk assessment for staff and provide all the professional equipment and guidance needed for the discharge of professional and ethical duties.

As at June 2020 BASW's additional survey questions of 250 respondents found 60% believed their ability to safeguard children or adults was worse during Covid; under 50% reported good access to PPE; 60% reported more moral and ethical dilemmas; and notable minorities of respondents reported breaches of rights for people using services (27%); against themselves (16%) and against other staff (13%). More positively, 60% reported good support from managers and 73% reported more effective use of digital approaches. The vast majority of survey respondents from March onwards reported working from home all or much more of the time - which has worked well for many but brings new risks of isolation and lack of team connectedness if not well managed.

There is also considerable concern about capacity to manage expected steep increases in referrals to all social services following phases of lockdown and with the return to school of children.

The social work workforce is changing as a result of Covid across the UK with implications for staff support now and in coming months. In Northern Ireland, social work students have qualified earlier and taken up jobs; in Scotland social work students have come into paid assistant roles; in England social work students are continuing their studies but placements have been disrupted.

Across the UK, newly qualified social workers will need additional 'bridging' support after the disruption and crisis of Covid-19. Social workers have also re-joined the register and come back into practice, needing additional professional development.

Supporting the wellbeing and professional development needs of the workforce over coming months and into next year requires tailored responses from employers. This includes recognising the extra support needs of new staff brought in in crisis and the possibility of additional distress, trauma and worry amongst staff overall.

Professional Support Services

BASW has established a new Professional Support Service for members. This is funded for at least the whole of 2021. This provides coaching-based support online from trained and experienced 'peer' (social worker) coaches and supporters. The service was set up in recognition of the particular challenges of working in Covid, including the boundaries of personal and professional pressures and need for self-care and resilience, but offers support beyond that. More information is available here www.basw.co.uk/professional-support-service

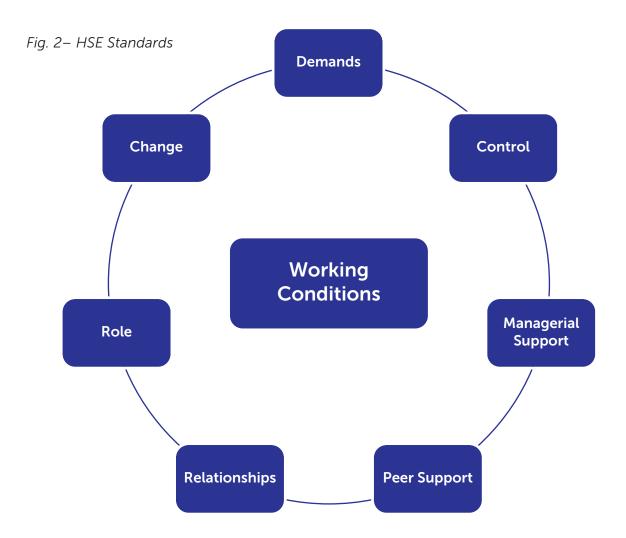
2. The evidence behind the social workers' working conditions and wellbeing toolkit

This toolkit draws on evidence from several sources.

Over the past two years Dr Jermaine Ravalier and colleagues from Bath Spa University have worked with BASW and SWU to conduct two of the largest surveys of social worker wellbeing and working conditions in the UK (Ravalier, 2019; Ravalier et al., 2020) which together had over 5000 respondents.

Using a methodology that had been used with other public sector professionals, the research identified where problems in working conditions impact negatively on social worker stress and wellbeing.

Amongst other measures, the research looked particularly at the factors identified by the Health and Safety Executive (HSE – see **www.hse.gov.uk/stress/**). In 2004, HSE released a set of 'management standards' which are based on 7 key factors affecting working conditions and workplace stress.



The concept is simple. When each of these seven areas are maintained and function at optimal levels, employees can thrive. Alternatively, poor practices or imbalances in one or more of these areas can lead to poor conditions of work and have a negative impact on employee health and wellbeing, turnover and sickness absence, amongst many other staff outcomes (Mackay et al., 2004; Ravalier, 2019).

For instance, if demand exceeds reasonable capacity, workloads will become unmanageable and pressured. If workers have too little control and autonomy in deciding how they do their work and use their time – particularly professions such as social workers dealing daily with novel challenges and human emotions – work may be unsatisfying, less productive and less 'owned'.

The HSE approach has been used widely, including in public professions, over many years, but less frequently within social work (Grant and Kinman 2014; Ravalier, 2019).

What is workplace 'stress'?

Problems with any of the HSE factors for workplace wellbeing may be described as creating 'stress' or 'stressful conditions' for social workers. The 'stress' term is often used loosely and imprecisely. There are many definitions, and an increasing amount is being written on the subject.

The HSE have defined stress as:

'the adverse reaction people have to excessive pressures or other types of demand placed on them'.

Employees feel stress when they cannot cope with pressures and other issues. Employers should match demands to employees' skills and knowledge. For example, employees can get stressed if they feel they do not have the skills or time to meet tight deadlines. Providing planning, training and support can reduce pressure and bring stress levels down.

Another clear and helpful definition is:

Workplace stress is the harmful physical and emotional responses that can happen when there is a conflict between job demands on the employee and the amount of control an employee has over meeting these demands. In general, the combination of high demands in a job and a low amount of control over the situation can lead to stress.

Stress in the workplace can have many origins or come from one single event. It can impact on both employees and employers alike. It is generally believed that some stress is okay (sometimes referred to as "challenge" or "positive stress") but when stress occurs in amounts that you cannot handle, both mental and physical changes may occur.

(Adapted from Canadian Association of Occupational Health and Safety 2018 www.ccohs.ca/oshanswers/psychosocial/stress.html)

Social workers may be particularly at risk of stress as defined above because of poor working conditions that are common in social work such as:

- A mismatch of resources and demand
- Lack of role clarity and boundaries
- Lack of control over workload or decisions
- Insufficient or inappropriate training and development
- 'Scapegoating' and blame cultures
- Poor or unsuitable management methods
- Inadequate supervision particularly to cope with complex work
- Inadequate support following serious incidents (such as an assault or a death)

Chronic stress at work arises when workers experience these types of working practices and cultures persistently.

Inequality at work: issues for black and minority ethnic social workers

Our research (Ravalier, 2019), demonstrated that black and minority ethnic social workers in the UK often face particular difficulties in their roles. Indeed, survey respondents have demonstrated that there are a number of specific difficulties that black and minority ethnic social workers experience during the course of their role – both organisationally and in terms of their work with service users.

The most frequently discussed topic was that of 'institutional racism' – respondents described being in career opportunities and development. There has also been more overt racism described as directed toward ethnic minority social workers both within their teams and experienced at times from service users. Use of discriminatory language, attitudes and discriminatory actions at work continue and affect black and more visible ethnically diverse colleagues and also (often) less visible minorities such as Jewish people, people from Gypsy, Roma and Traveller and other communities.

However, it is not all negative – our research also identified that being a minority ethnic social worker often supported being able to empathise and work more closely with service users from a wide range of backgrounds, and thus added new dimensions to relationship-based practice. Evidence from many fields of work beyond social work show that diversity of all forms in teams – diversity of background, experience, personal characteristics and thought – add to creativity and organisational success.

Risks of chronic stress

Chronic stress has been related to the development of a range of negative physiological, psychological, and behavioural health outcomes. It can be as negatively impactful to cardiovascular health as more well-known risk factors such as high blood pressure and smoking (Rosengren et al., 2004). Similarly, it is widely known that stress affects the psychological wellbeing of social workers (e.g. Ravalier & Walsh, 2018), whereas 'good' and 'healthy' work are known to have very positive effects on the wellbeing of workers.

Our research and findings from other studies (e.g. Grant and Kinman, 2014; McFadden, 2015) indicate many social workers work in an endemic culture of overwork, long hours, excessive caseloads and inadequate management support and understanding of social work roles and tasks. In 2018 we found social workers reported working an average of 11 additional (unpaid) hours each week across the UK, overstretching the wellbeing limits of 'going the extra mile' to meet complex needs and manage risk.

Employers have legal and moral responsibilities to protect social workers' fundamental rights and wellbeing as workers. In all four nations of the UK there are also national standards for employers of social workers and approaches to evaluating organisations for compliance with these.

England: www.local.gov.uk/sites/default/files/documents/workforce%20-%20social%20 workers%20publications%20-%20employer%20standards-guide-c8b.pdf

Wales: https://socialcare.wales/fitness-to-practise/codes-of-practice-and-quidance#section-29493-anchor

Scotland: www.sssc.uk.com/the-scottish-social-services-council/sssc-codes-of-practice/

Northern Ireland: https://niscc.info/registration-standards/standards-of-conduct-and-practice

This toolkit will help employers and their social work staff to meet those organisational standards.

Context: Social work in a highly unequal society

Unlike many models of workplace wellbeing, our approach includes recognition of the social, economic and community contexts in which social workers work. Social work is often – although not necessarily - focused on people who are most marginalised in society for reasons such as discrimination, social and legal exclusion, poverty, neglect, crime, and trauma. As well as helping people use their strengths and potentials, social workers often act as holders of hope and protectors of human rights through difficult times, while acting as practical gatekeepers, advocates and brokers of (sometimes insufficient) public resources.

Working conditions and wellbeing depend on national policies about social work and funding in public services. But national social and economic policies can also reduce or increase poverty, inequality, and disadvantage across society impacting demand for social work. Ten years of public sector, welfare and economic austerity have increased poverty and inequality in society as a whole while reducing the means and resources available to meet them. This has increased the gatekeeping role of social workers (particularly in statutory services), reduced early, preventive work and reduced the availability of community and voluntary sector resources in localities.

Over the past 10 years, the UK as a whole has experienced increases in inequality including a rise in adult and child poverty (Marmot et al., 2020 and see www.equalitytrust.org.uk/scale-economic-inequality-uk) increases in homelessness and destitution, rises in hate crime and racism, more in-work poverty and related family stress and an increase in mental health needs at all ages. As these social determinants of population wellbeing have worsened, the number of adults and children wanting and needing support has increased demand on social work and social care services - while funding has been cut in real terms.

Tackling these issues and helping people find their own ways forward can also be part of the huge reward of social work. It can also make social workers distinctively at risk of demand/capacity mis-match stress and burn out, particularly when the challenges of the job are not well enough supported, resourced or understood by employing organisations or system leaders.

These factors impact on social workers' workloads and can require them to implement more stringent 'gatekeeping' and narrower eligibility criteria. There is evidence these changes raise ethical and moral dilemmas for social workers who may be unable to fulfil their professional responsibilities to the full. For workforce morale and wellbeing, this must be addressed in the long run.

'Moral distress'

The concept of 'moral distress' is helpful in understanding the stress risk for social workers. It has been researched in other professions notably nursing (Jameton A. 1984) and defined in as (a) the psychological distress of (b) being in a situation in which one is constrained from acting (c) on what one knows to be right (Jameton A. 2017).

Social workers can find themselves negatively affected by being restricted from acting and/or unable to help people who are in severe need - or being required to work within policies that contradict professional ethics, standards, or expectations. This may be because of raised eligibility criteria, reduced funding, unfeasible workloads, practitioner and administrative staff cuts, lack of time for relationship-based practice, bureaucratisation, or a combination of all these and more.

BASW has produced guidance for social workers on anti-poverty practice, see BASW anti-poverty practice guide www.basw.co.uk/what-we-do/policy-and-research/anti-poverty-practice-guide-social-work which helps to empower practitioners to know how they can act and be helpful in contexts where people are facing (often) complex, structural, personal and material disadvantages. This includes understanding social determinants and socio-economic policy context affecting communities and society and understanding how to integrate this into day to day, relationship-based practice while sustaining your wellbeing.

Covid-19 issues

According to the BASW Covid-19 rolling survey and other studies of social workers during the crisis, social workers (like colleagues in other fields) have been dealing with new and unexpected ethical dilemmas and challenges.

In some cases, they have seen inequalities unfold before them with little direct control or power to intervene. This has included worries about not being able to meet child and adult safeguarding needs and statutory tasks raising concerns on at least two levels; fear and potential distress at not being able to provide services and protection to individuals and families; and fear of not being able to comply with statutory requirements and potentially being held to account by employers, other agencies and/or families and individuals for circumstances beyond their control.

For instance, the long term impact on social workers of witnessing – and being largely unable to intervene – in decisions that led to very high infection rates and mortality in care homes and supported living for older people and people with learning disabilities and other care and support needs may have a significant negative impact on individual social workers in adults services. The impact of this and other encounters with tragedy (at work and in home lives) during Covid-19 on the workforce will need to be discussed, understood and responded to within organisations to sustain staff morale and wellbeing. Concerns about staff 'burn out' are significant across social work organisations.

Social workers have been creative and innovative in meeting people's needs and keeping in touch with people in new ways when face to face work is not possible or minimised. This has included extending use of digital communications. National guidance for social workers on how to use online and remote communications in new ways – effectively, safely and legally – as the Covid crisis has unfolded has followed social workers' innovations and wish to change their practice.

Digital innovations and other new ways of doing things (e.g. online assessments, moving follow up contact online, the use of masks and distanced visits) have raised new ethical and moral dilemmas. While the 'new normal' is likely to include a return to much face to face, human to human contact, a continuation of more digital and remote forms of contact, service and communication might also be predicted. The practice, ethical, learning and resourcing implications of this need to be addressed in every workplace, and the acceptability of new ways of working to staff and people using services needs to be properly understood and taken into account.

Time for change, building on strengths

Alongside difficulties with poor working conditions, our two surveys also found widespread sense of high reward amongst social workers - from the job and from peer support - and high levels of commitment. Our 2018 research study (Ravalier, 2019) found social workers have with 'a distinct sense of vigour, dedication, and absorption in spite of negative working conditions' (p7).

Social workers need enough time and the right professional support to build quality relationships with people using services, to use their knowledge and skills, to reflect and achieve valued outcomes. Working in this way can improve morale, creativity, the emotional health of the workplace, recruitment, and retention. It can reduce days lost to sickness, stress and presenteeism, improve decisions and reduce risk of service failures or harm. Ultimately, healthier workplaces are linked to higher public trust and make better use of resources (Burton, 2010, WHO).

Even within generally well run, positive-culture, high-wellbeing organisations there will be instances of poor practice when practitioners or other individuals are rightly held to account. But most 'failures' of care or service have multiple contributory factors. Going 'upstream' to improve overall staff care and wellbeing reduces the risks of service failure and raises the chances of excellence and better staff/citizen working relationships.

Recognising and learning from the interrelated systemic, ergonomic and human factors behind service failures and 'near misses' is essential to improving worker experiences and care quality.

Further reading about the evidence base for reducing stress and improving working conditions in social work can be found in Appendix one.

3. An Integrated Model of Wellbeing at Work for Social Workers

Workplaces are human, technological, and cultural systems. Different parts of the system have more or less power and control, yet changes in any part of the system can make a difference for good, whether these are done individually or collectively.

We have created a holistic and Integrated approach to improving working conditions and wellbeing for social workers, rooted in the idea that anyone can play a part in creating a better workplace. This is the basis of our integrated model of wellbeing. (See attached different version of the Integrated Model) which shapes this toolkit.

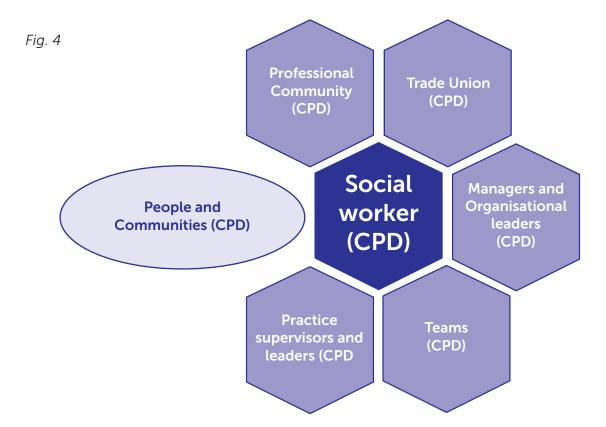
The Integrated Model addresses priority areas for change identified in our research, summarised in the box below:

Fig. 3: Priority areas for change. The Integrated Model addresses priority areas for change identified in our research.

Social workers need:

- Wellbeing and self-care information and options at work
- Continuing professional development
- Effective professional supervision
- Enough quality, relational time for primary tasks: work with and supporting individuals and families
- Skilled management support
- Effective and responsive professional and organisational leadership
- Sufficient social workers and other staff to meet demand
- Manageable workloads
- Improved technology and digital skills
- Fair pay and career opportunities
- To feel respected and recognised for good work: no more 'blame cultures'
- To be free from bullying and harassment at work
- To be protected from violence and aggression

'CPD' – continuing professional development – is shown as happening within all the other named parts of the system of support for social workers, within the community and with the people they work with, and is a responsibility of social workers themselves. This needs to be overlaid by understanding that responsibility to fund CPD needs to embedded in national policy and is locally held by of supervisors, managers and senior leaders.



The Integrated Model represents the interaction and interdependence between social workers, supervisors and practice leaders, teams, managers, organisational leaders, professional organisations and trade unions who all have part of the responsibility for making changes and working together better to enhance social workers' wellbeing.

Social workers also have professional responsibility to make their professional needs known, to influence 'up' the system, to challenge failings (e.g. in care or resource availability) and show professional leadership rooted in their practice and ethics. To do this, social workers need access to information - and they often need the support of their professional body, other collective professional groups, and their trade union.

The toolkit is organised around sections with practical ideas, examples, and signposted esources.

Toolkit section one: Social workers' in practice - self-care; Accessing continuing professional development; professional community and collective identity; trade union support; taking action

- Social workers: taking care of and empowering yourself This is aimed at social
 workers in practice. It provides practical information about preventive self-care at work
 and helps you to; identify and respond to stressors and signs of poorer wellbeing in
 yourself and colleagues; prioritise your wellbeing enough to be able to sustain and
 flourish in your role and to feel empowered to influence and improve your working
 situation wherever possible
- Accessing continuing professional development (CPD) Aimed at social workers and
 others responsible for CPD and workforce development, ensuring social workers have
 continuous and relevant access to improving their knowledge and skills relevant to
 current roles and to future aspirations is a necessary component of wellbeing at work.
 This can be augmented from usual training topics by CPD aimed at enabling social
 workers to address the HSE factors (see Fig 1) such as managing workload, building
 effective and supportive workplace relationships, influencing skills and getting the most
 out of supervision. The integration of wellbeing and CPD themes is recommended.
- Being part of your wider professional community Aimed at social workers in practice and social workers in any other role or setting (e.g. management, leadership, academia, training), this section emphasises the value of peer support and collective professionalism. These help you uphold ethics and values together; create collective learning opportunities; build collective influence; develop professional leadership alongside others; sustain and celebrate positive professional identity; develop the evidence base for social work from practice and research.
- Benefitting from a Trade Union This section promotes the importance of and benefits of trade unions who promote and protect your rights at work. It encourages social workers to join a trade union, and managers and leaders to build constructive relationships with trade unions to improve the workplace and the quality of services for all.

Toolkit section two: Practice supervisors and Practice Leaders

 Practice supervisors and leaders – This section focuses on the importance of practice supervision and leadership within organisations from the perspective of supervisors/ leaders and social workers. Both need to use skills to reflect and learn; make sure there is time and space for supervision and practice discussions; help build a learning culture; lead on the development of effective practice models. The section is also aimed at the managers and organisational leaders responsible for making good supervision and practice leadership available for social workers.

Toolkit section three: Teams and teamwork

• Teams – This section is for anyone working in a team – as a social worker, supervisor, team leader or in another role. Social work is often complex and intellectually and emotionally challenging. Effective teamwork can help social workers deal with complexity and risk and be supported, both formally and informally. Teams may be social work only, multiprofessional/integrated (e.g. with healthcare or education), face to face or virtual. The principles of good team working are the same although different contexts have their own benefits and challenges. This section will help you build healthy team relationships; clarify team purpose; increase time for direct work; create opportunities for peer support and coaching; recognise good work and celebrate. It also promotes expectations that teams will be well supported to thrive and support wellbeing by managers and leaders.

Toolkit section four: Managers and organisational leaders

- Managers This is for social work managers as well as social workers receiving management. Its key messages are managers' responsibilities to; reduce unhealthy stressors; recognise issues with wellbeing in the workforce; influence the context 'up and down' the organisation/system to ensure social work can thrive; facilitate manageable workloads; understand and address the Health and Safety Executive key factors (fig 2); develop and retain staff; address the need for social work management training; eradicate bullying, harassment and discrimination. Work with social workers to make change that works and sticks.
- Organisational and senior leaders This section provides guidance and ideas for
 organisational and senior practice leaders and those responsible for strategic decisions
 that can support social worker wellbeing and working conditions. It encourages
 organisational leaders to create and be role models for good working conditions;
 consult and communicate on priorities; influence the context for social work beyond
 the organisation. Work with social workers to make change that works and sticks.

4. Section one: Tools for social workers in practice: self-care; professional community; trade union support.

Self-care at work

It should go without saying that social workers need to look after their own wellbeing. But as committed helping professionals, sometimes delivering support of 'last resort', social workers can neglect their own wellbeing needs while 'going the extra mile' for the people they work with. This can lead to cycles of overwork and lack of time for self-care and reflection as implied by our research.

Our health and wellbeing at work can be thought of broadly in terms of our psychological, social, and physical wellbeing. Being in a state of good health and wellbeing means being free from - or effectively managing – illness, pain, and/or mental distress. This can require active attention, particularly when stressors are high and need to be actively balanced by restorative activities and constructive reflection.

Increasing your self-care knowledge

It is the right of all social workers to have knowledge and useful tools to improve self-care routinely, to recognise when they or colleagues might need some extra or different support, and to find out how to make work more rewarding and less stressful.

A sense of sufficient control in work is a key part of good working conditions. While control over workload and demand is vital, so too is taking enough control over self-care actions and routines. We can all find large or small ways to take back control over some of our time, finding ways to focus on and restore ourselves.

Remarkably, small self-care actions can make a big difference. Below are four simple self-care actions at work that can help anyone take more control of their wellbeing and set in train healthier patterns.



- Taking breaks at work is important you will be more focused, efficient, proactive, and it's good for wellbeing (van den Heuvel et al., 2003).
- Take regular, short breaks throughout the day, and take a lunchbreak away from your desk where possible.
- Managers should actively encourage staff to take breaks and lead by example by taking breaks themselves.
- Take even a short walk outside in daylight each day. Being outside the office and walking even 10-15 minutes, can have really positive impacts on wellbeing (Hogan et al., 2013).
- Exercise and breaks can be great alone or with others. See if there
 are any group exercises or classes available. Ask your employer to
 provide information about local exercise opportunities and what
 more they can do to help staff take breaks and exercise e.g. in
 their lunch break



- In our survey found social workers placed high value on peer and colleague relationships. When we are too busy, we forget about ourelves and our relationships. They can become less rich and trusting. At worst tensions, silos, misunderstandings and even hostility can arise.
- Social workers, supervisors, managers and leaders should actively support positive work relationships, peer support and identity.
 Shared activities such group lunches, bake sales, fundraising, birthday rituals etc can be really important
- Regular pause and reflection time can help us regain clarity in the midst of pressure and reduce anxiety or fear growing. It can ensure our responses to others are considered and emotionally well-regulated. It can be as simple as stopping to look at some thing uplifting
- Approaches such as mindfulness, www.scopt.co.uk/archives/352, Schwartz rounds www.pointofcarefoundation.org.uk/our-work/ schwartz-rounds/, peer reflective groups or guided centring provide indvidual or group approaches to pause and reflection which can enhance the value of 'time out'. None are a panacea, just tools you might like to explore for your toolbox.

Self-care outside of work

Our health at work often depends on our work-life balance. Making changes towards healthier self-care practices in our personal lives can help work health, grow our confidence, stamina, and physiological and psychological capacity to deal with stressors at work.

Building healthier eating and drinking habits into our daily routine, reducing or stopping smoking, increasing exercise and relaxation time, finding ways to sleep better, 'switching off' taking a 'digital detox' and making time for friends and family – we all know these are important. We all have days when we reach for a glass of wine, an 'unhealthy' takeaway, or a cigarette. This can be fine and fun and part of human coping – as long as it doesn't happen too often.

To do the valuable job of social work well for the long term — and to be emotionally and intellectually available for people requiring your support - means looking after yourself well in and out of work. You are encouraged here to explore ways to greater wellbeing that might work for you and to think about whether there is anything stopping you caring for yourself that bit better.

Social work can sometimes feel like an 'always on duty' vocation. Social workers sometimes even feel guilty about the privilege of being able to make choices to live well and better when working with people in great disadvantage.

Take time to reflect on whether your beliefs about yourself, your role in life and as a social worker get in the way of improving your self-care. Here are a few questions which might help you start your reflection.

- Do you believe you should always put the welfare of others before yourself?
- Is meeting a deadline often more important than your own health and wellbeing?
- Do you often cut short free time with family and friends because of work demands?
- Do you find it hard to finish work at an appropriate time?
- Do you take pride or satisfaction in being 'always on'?

Simple daily wellbeing checklist

There are a few things that we can all do each day, each week, or even longer-term to try and help maintain our own mental and physical health.

Below is a short checklist of simple things that we can all do at home and at work to support ourselves. Many of them can be undertaken whether you are working from home or in the office, and help you to support both yourself and the colleagues around you. The points in this checklist were developed through numerous interviews and surveys with both health care and social care workers, and thus are employee-developed and led.

Daily Wellbeing Considerations	Done?
Have you taken a lunch break?	
At the end of the day – have you handed over any outstanding tasks?	
Reflect upon one thing that was difficult today. What did you learn?	
However small, identify and reflect on three things that went well.	
Check in with your team/colleagues.	
Anything you need to talk about before you leave – take support from your team/colleagues.	
Go home and turn your attention to family and friends. Rest and Recharge.	
Weekly Wellbeing Considerations	
Have you eaten healthily throughout this week?	
Have you undertaken at least 150 minutes (2 and a half hours) of exercise including two strength activities, for example, yoga, carrying heavy shopping	j?
Monthly Wellbeing Considerations	
Have you met with your line manager and had a constructive discussion?	
Have you asked your peers for support when you needed it?	
Have you had useful reflective supervision session this month?	

If you answer no to some or many of these things, weigh up the impact on you for the short and long term. Identify how you could move one or two things on. Set yourself an achievable goal. Talk to someone helpful about the changes you want to make.

Self-care resources on BASW website:

www.basw.co.uk/quick-guide-self-care-social-workers-during-covid-19

www.basw.co.uk/media/news/2020/apr/messages-self-care-and-resilience-neil-thompson-basw-cymru-ambassador

www.gov.uk/government/publications/coronavirus-covid-19-health-and-wellbeing-of-the-adult-social-care-workforce/health-and-wellbeing-of-the-adult-social-care-workforce

When personal stressors affect wellbeing at work

As social workers, we face all the same challenges and opportunities in our personal and family lives as any other part of society. Common stressors in our personal lives might include:

- Caring responsibilities
- A long-term health condition or disability
- Personal trauma or tragedy
- Financial difficulties
- Relationship breakdown or family discord
- Domestic abuse
- Bereavement
- Mental health/emotional difficulties

When things are hard outside of work it is important to understand how to ask for support as early as possible. Developing your personal approach to seeking support, and building and maintaining support networks, are important professional and personal skills.

Personal stressors/life events and seeking support self-check

It can be helpful to pause and take stock of what is happening in our personal or home life that might be a tangible stressor affecting you private and work life. Below is a simple self-complete checklist to aid reflection. This is not a formal or validated self-assessment tool. It is adapted from an evidence-based assessment tool (Holmes and Rahe 1967) and tools used in relevant UK organisations (e.g. the Northern Ireland Health and Safety Executive (www.hseni.gov.uk/). It is a prompt list for reflection.

Fig 3 Reflecting on personal stressors self-completion tool.

Tick any of these that you have experienced in (approximately) the last 6 months. Make notes of all the apply and how/whether you think these things have affected you at work, and how.

- identify and think about any personal pressures and challenges
- reflect whether they are serious enough to seek help whether through work or other means (you might want to score them 1 (low) to 5 (high) to evaluate the level of impact
- reflect whether they are impacting on work and if so....
- whether it would be appropriate to discuss them with your supervisor to help manage them better

Family & relationships	Other personal and social stressors	Personal health	Daily hassles/ micro-aggressions
Death of close relative or friend	Financial difficulties/worries for self or family	Serious/significant illness or long-term condition	Poor/long commute
Divorce/separation Strife	Social isolation/loss of social contacts	Significant injury	Traffic jams
Marriage Making changes in habits e.g. stopping smoking, dieting		Feelings of distress, anxiety, depression or other mental health difficulties	Time pressures/ difficult daily routine
Family arguments	History of trauma, recent or historic	Major mental illness diagnosis	Verbal abuse from strangers or known people
Domestic abuse – physical, psychological, sexual, coercive	ohysical, psychological, confidence		
Worries about Experiencing prejudice, discrimination or abuse outside work			
Children leaving home	Assault/violence (non-domestic)		
Childcare	Threats (non domestic)		
Change in health of relative or friend	Significant accident (e.g. car crash)		
Concerns about or loss of pet	Poor living conditions		
Substantial caring e.g. Moving house older or disabled or unwell relatives			
Pregnancy/fertility issues	Neighbour disputes		
What else?	What else?	What else?	What else?

....Having identified any that relevant, think about those that are most troubling and whether you have already – or you need to – seek help or support. Consider whether any of this support could or should come from work, or from other sources.

Decide what, if anything, you should take to reflective supervision.

Your rights at work

It is important to understand your rights at work and how to exercise them in ways that are most likely to help get what you need, including when your personal circumstances are affecting your work as discussed in the previous section. Knowing your rights at work can help prevent difficulties for you (and your employer).

- Seek help as early as possible whoever it feels right and safe to approach.
- Make sure your employer provides you with all relevant policies on health, safety and wellbeing; all the different types of leave that you can apply for; flexible working options; sources of employer support e.g. through Employee Assistance Schemes, employer-funded counselling, or a referral to Occupational Health;
- If it feels safe to do so, speak to your supervisor and/or manager about how the organisation can help you
- Speak to BASW or your trade union who can provide you with information about your rights and support you talk to your employer
- If it feels right, talk to trusted colleagues about how they can help you
- Make a personal plan to fill any gaps you have in your knowledge of your rights and sources of support and information

For more information on your rights at work, see information from BASW and SWU on the BASW website.

Also see advice and information about your rights from ACAS – the Advisory, Conciliation and Arbitration Service for England, Wales and Scotland – here www.acas.org.uk/checking-your-employment-rights

Bullying and discrimination

Never underestimate the potential of social workers individually and collectively to bring about change in the workplace. But If a work culture is bullying, discriminatory and lacks understanding of the social work role, better individual self-care, and actions by individuals to address issues, while always important, will often not be enough.

Within this toolkit there are key messages for supervisors, managers, and organisational leaders. Their roles include ensuring the environment for social workers is as healthy as possible. This means ensuring an environment that is free from (and tackling when needed):

- Bullying
- Harassment
- Discrimination
- Unsafe practices
- Poor management methods

These should be replaced by a workplace that is

- Caring
- Honest
- Inclusive
- Safe
- Respectful
- Fair and just

At an individual level, you can inform yourself of your rights and how to spot negative behaviours and encourage positives at work. Self-care, rights and protected characteristics

Self-care, rights and protected characteristics

We are all protected across the UK under equalities legislation in force in each nation from discrimination at work based on specific 'protected' characteristics. These are:

- age
- disability
- gender reassignment
- marriage and civil partnership
- pregnancy and maternity
- race
- religion or belief
- sex
- sexual orientation

Our research (Ravalier, 2019), particularly found that black and minority ethnic social workers in the UK often face particular difficulties in their roles. Indeed, survey respondents have demonstrated that there are a number of specific difficulties that non-white social workers experience during the course of their role – both organisationally and in terms of their work with service users.

The most frequently discussed topic was that of 'institutional racism' – respondents described being overlooked when important decisions are made about themselves (for example through promotional processes) and the service users that they are working with. There has also been more overt racism described as directed toward ethnic minority social workers both within their teams and experienced at times from service users. However, it is not all negative – being a minority ethnic social worker meant being able to empathise and work more closely with service users from a wide range of backgrounds, and thus improve this relationship-based practice.

Covid-19 issues

Black and minority ethnic staff during Covid-19

Covid-19 has differentially impacted different parts of the workforce as well as being a threat to the whole population. People from black and minority ethnic groups have been shown to be particularly at risk of serious illness and dying from Covid-19 and sadly this has included some social workers.

Black men in England and Wales are 4.2 times more likely, while black women are 4.3 times more likely to die after contracting the virus (ONS May 2020) after accounting for age. People of Bangladeshi and Pakistani, Indian, and mixed ethnicities also have an increased risk of death involving Covid-19. Reports from Public Health England and other sources indicate historic racism and poorer experiences of healthcare or at work may mean black and Asian people are less likely to seek care when they needed or speak up if they have concerns about risk in the workplace.

Deaths of black and minority ethnic staff in health and social care roles have also been disproportionately high. A number of social workers have tragically died and include black and minority ethnic colleagues. Numbers are too low to draw definitive conclusions about disproportionality for social workers. However, higher numbers of deaths in healthcare show a definite disproportionate number of deaths with 64 per cent of over 200 deaths being from an ethnic minority background (only 20 per cent of NHS staff are from such backgrounds).

As for all occupations and particularly those providing direct services to the public, social workers need employers to work with to assess differential risks according to characteristics and circumstances including race and ethnicity.

BASW and SWU have provided guidance that supports enhanced risk assessment for social workers from black and minority ethnic communities and promotes good practice in assessing other protected characteristics and living circumstances that make the Covid-19 risk greater www.basw.co.uk/covid-19-staff-risk-assessment-guide-and-flowchart

Social workers may be at increased risk for a wide range of issues. Older age and pre-existing health conditions are two key issues which need to be taken into account through an equalities-driven, individual risk assessment for social workers with employers.

The impact of Covid may include stress risks from fear and worry about personal risk, but also the risk of becoming an infection risk to (e.g.) vulnerable family members or to service users.

Getting early support

Whether because of things happening in work or outside, our wellbeing and our rights can be compromised in ways that sneak up on us. It can happen to anybody depending on what is happening in your life and at work.

You may not notice early signs of stress, psychological or physical deterioration in yourself or colleagues. You may not notice early signs of bullying or discrimination from others. It is important to look out for early signs so you – and colleagues – can seek early support or take early action.

In relation to stress, we have broken down the signs and symptoms of stress/distress (whatever their causes) into four categories. This is not an exhaustive list but gives an idea of what to look out for

Fig. 5

Signs you may notice within yourself	Behaviours you notice in yourself and colleagues at work	Individual emotional signs in yourself that may be more evident to others first	Signs you may notice within yourself
 Feeling more anxious, having panic attacks. Difficulty getting to sleep (e.g. work always on your mind), staying asleep, fatigue. Muscle tension. Heart palpitations Eating more unhealthily than usual, drinking too much, taking drugs to cope with stressful work environments. 	 Taking lots of time off work. Presenteeism (attending work when so ill you should take time off). Changes in work hour practices (lateness, leaving early, extreme hours). Performing more poorly than usual, disorganised, indecisive, lacking confidence. 	 Mood swings or extremes of emotions (e.g. tearful, sensitive, irritable, aggressive). Quiet or withdrawn colleagues, or lacking usual commitment and motivation at work. Appearance changes (e.g. losing/gaining weight, losing interest in appearance) 	 Interpersonal and relationship issues (e.g. arguments, conflict). High turnover and/or sickness absence or presenteeism Low morale and mood. Increased complaints and/or grievances. Lack of interest in new ideas Poorer relationships with people using services

If you notice any of these in yourself, your colleagues or team, share your concerns with a trusted colleague or supervisor/manager or workplace wellbeing advisor. Talk to your colleagues where you can. Seek early support for your own wellbeing from your GP or another counsellor, advisor, or organisation. Talk to trusted friends. Seek support from Employee Assistance Programmes or staff counselling if available.

If it is appropriate, suggest a team or supervisory discussion about what you have noticed and what might help the situation.

Sometimes it can be hard to find help with these types of issues. And it is not always easy to seek help early.

Don't give up seeking help – sometimes lack of easy access can be a knock back, leading you to downplay or minimise the issue, or even blame yourself.

You have a right to support and healthcare and you owe it to yourself to find solutions to distress or stress at work.

Personal agency and choice

Asking ourselves squarely 'is the right place for me to work?' is important for wellbeing throughout a career. Good 'fit' between people (who you are, what is important to you, what you want from life and work) and their employers, colleagues and managers is important.

'A Good 'Fit'?'

Allow yourself from time to time to consider 'Is this place right for me? Does it deserve me? Could I flourish and offer more elsewhere?'. The answer might be

- This place is right for me
- This place could be right for me if I make some changes
- This place could be right for me if my employer/manager/supervisor make some changes
- This place isn't right for me and I don't think change is likely

The job market, economy, personal circumstances, and the nature of social work services can shape and limit our choices. But as qualified people with skills needed over the whole of the UK, social workers do have more choices than many. It is important to remember this and use our choices ethically.

Resilience and social work

Social work throws up new challenges and makes new demands on practitioners every day. The emotional, intellectual, and practical labour – and the nature of the decisions and responsibilities taken – mean social workers need a particular kind of interpersonal and professional resilience to do and sustain the amazing work they take on.

There has been a lot written and disseminated across the UK social work sector on practitioner 'resilience' recently. Louise Grant and Gail Kinman (Kinman and Grant 2014) have summarised the main dimensions of social worker professional resilience as emotional intelligence (Goleman 1996), reflective thinking skills, accurate empathy, and social skills.

However, resilience is a controversial term particularly when it is used to describe a wholly or largely internal or 'intrinsic' set of qualities within individual workers.

In our Integrated Model, resilience is understood as something that arises through the interaction of an individual's personal coping strategies, self-development and self-care and the context in which people work - the demands, expectations, ways they are treated and supported in the workplace.

Resilience is situation specific. Social workers often need to be able to work well in diverse situations, be responsive and flexible, and use professional skills and knowledge combined with accessible, human ways of relating.

We all may be resilient and able to cope and thrive in some work contexts and not in others. It may be that one poor quality or bullying relationship – with a colleague or manager for instance – gets 'under your skin', undermining your resilience, confidence, and self-worth, and renders the workplace intolerable.

An isolated or persistent experience of discrimination or exclusion, and a lack of places to raise concerns, may cause harm to you that feels like (or is labelled by others as) a 'lack of resilience' when it should be seen as an understandable, normal response to victimisation.

One highly stressful experience with a person we work with – a poor outcome, a death, a conflict, an injury – can also undermine 'resilience' and confidence for the future, particularly if skilled support for reflection and recovery is not available.

Trauma-causing incidents may have significant emotional impact and undermine previous coping strategies and positive self-concept - such as how you see yourself as a confident and able practitioner.

Practitioners may develop and adapt their resilience coping skills and find new ways to adapt or influence change within their context. However, sometimes (often) it is the context that needs to change. Our research highlighted this as we heard from 5000 social workers about their perceptions of their working environments and heard the detail of workplace inadequacies such as lack of control over tasks and workload, lack of time, too few and reducing numbers of staff (practitioners and administrators), lack of access to learning and development, lack of resources to offer people and poor management practices.

Social workers are not powerless and there are many things we can all do to improve individual wellbeing at work. Knowing about these – and giving yourself permission as a social worker to really care about yourself – is your right as a worker and a professional.

This can include social workers:

- developing more skills in influencing their organisations,
- widening their sphere of control,
- gaining confidence to advocate for themselves, for people using services and for organisational or practice changes.
- Using the support of BASW and their trade union

Important sources of help within and outside your organisation

Organisational wellbeing services

Stress is the biggest cause of sickness absence in the UK, and the Health and Social Care sectors are those most heavily affected in this country. Most organisations employing social workers have regular access to Occupational Health Services and many have Employee Assistance Programmes.

Occupational Health is a specialist branch of medicine which focuses on the risks of stress (among other things) in the workplace. The majority of large public sector organisations have access to either in-house or outsourced occupational health provision.

Occupational health providers are usually made up of occupational health physicians, consultants, nurses, counsellors and other professionals. Providers will therefore work with the employee, and their employer, to provide the best support possible for both physical and psychological complaints.

Different employers have different methods of referring to Occupational Health. In the space below, senior individuals with responsibility for employee wellbeing should fill in the below information for you and colleagues in your organisation.

Occupational Health Provider:		
Provider Email Address:		
Provider Website:		
The method of being referred to Occupational Health in my organisation is:		
Employee Assistance Programmes (EAPs) are counselling/support services available across many organisations. Each programme will be different but EAPs usually work confidentially and anonymously – this means that you can self-refer without anyone in your organisation knowing 24 hours a day, 7 days a week, either online or by phone.		
EAPs are also available for non-work problems, and many will also work (again anonymously) with the family of members of employees. Topics covered by EAP providers include physical and psychological health worries at work (e.g. psychological health), physical health worries at work and away (e.g. weight management, illness), problems at home (e.g. marital, financial, crime) – virtually anything that may be causing distress.		
Research has shown that employees who use EAPs are less likely to take time off due to sickness absence (Richmond, Pampel, Wood, & Nunes, 2017), and are less likely to have to go to work despite being so ill that they should stay at home.		
Once again, therefore, we suggest that senior individuals with responsibility for wellbeing fill in the information below for details of how to contact your organisation's EAP provider.		
EAP Provider:		
Provider Website and Password:		
Provider Email:		
Provider Phone Number:		
Continuing Professional Development		

Continuing Professional Development

Continuing professional development (CPD) is a cornerstone of professionalism. It also CPD supports wellbeing by ensuring social workers:

- Know they have the skills and knowledge to do their job well and safely
- Have confidence
- Connect with peers through shared learning experiences
- Have the intellectual and professional resilience to deal with challenges, dilemmas and new situations
- Can maintain registration standards
- Can progress in their career and aspirations
- Can contribute to their profession, knowledge creation and sharing
- Have a sense of pride and achievement beyond their daily work
- Feel respected and nurtured by their organisation

It is a professional expectation that social workers will maintain a personal commitment and will act to fulfil their own learning needs as much as possible. But our research suggests there is a significant gap in employers providing the right contexts for social workers to access and grow through learning. Improving this is a win-win for practitioners and employers; no organisation can achieve its aims without staff having the right skills, knowledge and motivation. Modern organisations should aim to be a 'learning organisation' throughout, making a learning (rather than a 'blaming' or reactive) culture the norm.

Social workers need to refresh their learning throughout their careers. This can be achieved through many types of activity and employers should work together with social workers to agree opportunities and frameworks for learning that are feasible and effective within the workplace and externally (e.g. with university partners).

Some local authority employers in England have established social work academies. Where these work well, they aim to develop and sustain resources and a culture of learning amongst social workers and sometimes across agencies. The best of these show what can be achieved in terms of staff morale, retention, quality and culture change. They provide a framework for learning with accountabilities on the part of employers and clarity of access and choice for social workers.

Amongst other CPD opportunities, social workers should be able to access opportunities for academic study and involvement in formal research. This is often most mutually beneficial to practitioners, organisations and people using service when it is integrated with practice and service user experience. Employers should consider opportunities for social workers to gain basic research and audit skills and to use them to support their own practice development and confidence and improvements in the organisation.

Wider professional community and collective identity

Being a social worker means being part of a profession with an identity and community of shared knowledge, skills and ethics that goes beyond your employer and job contract. Many social workers engage directly in collective activities to develop the profession and consolidate their professional identity. This provides access to peer support beyond the workplace, helping you to feel part of a profession, connected across specialisms. This builds collegial support and connection with the knowledge, evidence, values, ethics, and fundamental purposes of social work.

This includes working and acting together as social workers on matters of ethics and principle which are at the heart of social work's purpose. Upholding and advocating for people's rights,

Organising and acting together also enables social workers to learn more about and raise awareness of factors such as structural, social and health inequalities and trends which driving the nature and extent of the needs they see in their daily work. This can support social workers' resilience, professional purpose, capabilities, and ability to exercise professional leadership.

Fostering a collective professional identity can happen at local and regional levels (e.g. through social work groups and forums within organisations or in regional partnerships such as the Teaching Partnerships in England).

As a professional, it is also important to connect beyond the workplace and local arrangements, to ensure you maintain and develop independence of thought and perspective on your work. This can happen through topic specific networks and groups (e.g. for mental health, palliative care or child protection social workers).

BASW is the professional body for all social workers in the UK and provides opportunities for developing and as the key link between UK and global social work, through the International Federation of Social Workers. BASW provides a forums for social workers to meet and act together at UK and country level on fields of practice, policy, ethics, human rights and areas of special interest, and also enables members to coordinate branches and communities of practice by geographical area.

Collective national identity as a profession supports wellbeing at work. through:

- Experiencing peer support and a sense of professional community that stays with you
 wherever you work (e.g. within local authorities, NHS and other statutory organisations,
 the private of voluntary sector, as an independent, an agency worker and in any field of
 practice) at all stage of career
- Strengthening independent professional identity
- Developing professional confidence e.g. through contributing practice positions and commentaries
- Feeling represented and visible in national debates and decisions e.g. with governments, policy makers and the media
- Having a professional code of ethics linked to global principles of rights and justice
- Accessing continuing professional development opportunities for current work and career aspirations
- Being regularly linked to research and knowledge creation e.g. through contributing to research and having access to the BASW journals and magazine

Being part of a collective profession as social workers also helps us connect with the evidence-based 'Five Ways to Wellbeing' - NEF 2008 see

https://neweconomics.org/uploads/files/five-ways-to-wellbeing-1.pdf

- Connect
- Be active.
- Take Notice
- Keep Learning
- Give.....

It is in the interests of employers as well as citizens using services to know that social workers are connected within a professional community, continuing to develop their identities, commitment and knowledge beyond their job role, maintaining their motivation and enthusiasm and connecting to fundamental ethics and values that drive good practice for people they serve.

Trade Union Support

Being a member of a trade union is an important protection for social workers and there are several unions that offer options for social workers to belong to. Trade unions provide advice and ensure social workers know their legal rights as employees. They can also help both employees and employers explore how to create better working conditions, prevent employee dissatisfaction and grievances, and help to ensure professionals such as social workers have the right context in which to be effective.

The benefits for both practitioners and employers of constructive relationships between trade unions and employers is outlined.

 Being part of a unionised workforce means you are more likely to have better conditions than others in similar work who don't have the support of a union.

- Having your union involved with health and safety issues at every level makes your workplace safer.
- The support of your union can deliver results where your legal rights are not enough by themselves to remedy the unfairness you may be subjected to at work.
- If you have a problem at work, a union representative can give you expert advice, support, and representation from start to finish, including at disciplinary and grievance hearings. A union representative is normally someone who has experience of dealing with social work issues, so is well placed to resolve the issue amicably where possible and advise you on your next steps and tactics if not.
- If you are in a redundancy and/or restructuring situation or face a transfer of your work, or extensive changes to your terms and conditions, a union can advise you on how to secure your rights. In certain circumstances, a recognised union has rights to be consulted on behalf of you and your colleagues similarly affected and the right to claim an award for each affected employee if the employer fails to consult.
- You can make use of training opportunities offered to you by a union.
- You have a vote in ballots for industrial action or consultative ballots.
- You can participate in campaigns on work-related issues of importance to you.
- Most of all, being in a union goes some way towards redressing the often-unequal bargaining position between you and your employer. It gives you a voice that your employer is more likely to listen to because you are not standing alone as one individual but as part of a larger united group with the same aims.
- You can benefit from union membership whether or not your employer recognises a union. The more union members there are in the workforce, the greater the leverage the union can use on your behalf and the more likely it is that the union is able to gain recognition, which gives the union more legal rights to information, to be consulted and to negotiate terms and conditions on behalf of the workforce.
- Trade unions are also able to challenge poor employment practices at individual and policy levels.

As well as the above practical aspects of trade union membership which importantly enhance workplace protection and security, there are also benefits to personal and team wellbeing derived from collectivism and activism.

Being a trade union member enables you to be part of a strong established movement designed to protect rights and promote equality. It promotes camaraderie and of knowing "someone is on your side" and enables members to become more involved if they wish, undertaking training, supporting colleagues, taking group action, attending demonstrations, marches, and rallies. Collective activism promotes a sense of belonging, of fighting injustice, and enables us to feel that we are "making a stand".

Trade union membership also encourages us to take ownership of our employment and to feel confident in challenging diminishing working conditions and poor pay. As social workers we are in a fortunate position of being in a well-qualified profession with a protected title, and we are right to research prospective employers to discover the merits of choosing to work for them. Being part of the trade union movement also promotes solidarity with other workforces who may be in less secure and poorly paid jobs and educates members to broader political impacts upon staff and service users.

5. Tools for Practice Supervisors and Practice Leaders

Practice supervision

This part of the toolkit encourages social workers and their supervisors to think about the role of practice supervision and practice leadership within their organisation (or outside where relevant), its impact on overall working conditions and wellbeing, and whether it is:

- Accessible, Sufficient, Timely
- Reflective, Skilled, Knowledgeable
- Consistent, Reliable, Safe
- A joint endeavour between supervisor and supervisee
- Focused on the people using social work services and their outcomes and wishes
- Compliant with a reasonable organisational supervision policy
- Underpinned by positive social work values and ethics of promoting equality, rights, and justice

High quality supervision is important for social workers' wellbeing at work. At its best, it provides a vitally important space to work through and beyond the emotional, intellectual, and practical challenges of work. Supervisory discussions help to 'unstick' thorny issues, reduce the risk of vicarious or direct trauma and help social workers stay connected with the reward of good work done.

The BASW Supervision Guide provides principles for supervision based on the UK Code of Ethics and good practice evidence which all social workers in the UK can use to assert their right to effective supervision. It defines supervision as 'a regular, planned, accountable process, which must provide a supportive environment for reflecting on practice and making well informed decisions using professional judgement and discretion'. This could be a one to one, group or peer-led process.

There are many models of practice supervision that have merit, but most creditable approaches advocate combinations of

- reflection,
- support,
- safe space,
- safe challenge,
- emotional intelligence,
- clarity on standards and expectations,
- keeping people using services at the forefront.

Practice supervisors also help to mediate between managerial or organisational pressures and imperatives and the professional needs of social workers in practice. For instance, the Knowledge and Skills Statement for Practice Supervisors in Social Work with Children and Families in England states that practice supervisors (available here)

www.basw.co.uk/system/files/resources/basw_91811-4.pdf should: 'Protect practitioners from unnecessary bureaucratic or hierarchical pressures and have in place strategies to help manage the root causes of stress and anxiety. Continually energise and reaffirm commitment to support' (section 7: Emotionally intelligent practice supervision).

Practice supervision is also important to identify continuing professional development and learning needs, and in supporting access to resources to meet those needs.

Both social workers receiving supervision and supervisors have a professional responsibility to ensure supervision is effective. This dual responsibility is reflected in regulatory standards e.g. the regulator Social Work England's standard 4.2 (see website www.socialworkengland.org.uk/) states 'Use supervision and feedback to critically reflect on, and identify my learning needs, including how I use research and evidence to inform my practice' (www.socialworkengland.org.uk/standards/professional-standards/).

A framework for reflective supervision

Reflective supervision can be extremely helpful for a person's health and wellbeing (Hyrkäs, 2005). It can bring benefits to organisations and teams and its ultimate purpose is to improve outcomes for the people social workers work with.

A simple guide to establish good supervision can be for the social worker to consider the WWW approach: Creating an organisational culture of reflective practice supervision.

Fig. 6

Who?	For reflective supervision, it is vital that you feel able to open-up and talk to someone who you trust. That might be the person assigned to you. But there may be another supervisor, manager or practitioner in your team or organisation who you believe could provide this more effectively. Identify this person, discuss with your line manager and try to build a supervision arrangement which will be most beneficial for you and the people you work with. This could be in addition to a clear line management arrangement with someone else	
Remember	Remember, it is your opportunity to reflect, make sure the person helps you to do just that!	
Where?	It is important that the location is not only a quiet place in order to have appropriate conversations, but also somewhere that is safe. Find somewhere that is quiet and that you feel comfortable. Find somewhere that works for you. Increasingly (especially during Covid-19) supervision is happening remotely by videoconferencing or telephone. It is important to take the time to set up the best connection and use the best technology available to prevent problems such as loss of connection or interference. Video contact can be excellent especially if sound and vision are clear. But telephone supervision can be preferable if less subject to interruption. Discuss and plan for your technology needs with your supervisor/supervisee.	
Remember	Remember, it is your opportunity to reflect. Make sure your organisation and team create the environment to helps you to do just that!	
When?	Reflective supervision should be protected time, it is a good idea to create a plan a with your supervisor so that your reflective time is booked well in advance and this will also strengthen the value and importance of reflective supervision. Reflective supervision should therefore be organised to take place once a month.	
Remember	Remember reflective supervision is protected time, work with your supervisor/supervisee and colleagues to make this happen.	

Creating an organisational culture of reflective practice supervision

The provision of effective reflective supervision should

- be embedded in team and organisational routines,
- contribute to a culture of appreciation and learning,
- help to define shared expectations of standards and values between supervisees and supervisors.

Practice and reflective supervision in social work should not be driven primarily by resource management imperatives, finances, or organisational performance measures – important though these are to organisations and employers. It should be driven by the benefit citizens may get from good practice – and how the practitioner can develop as a professional

Social workers should have access to supervision that starts by putting people - practitioner/citizen interactions, skills, and professional understanding - at its heart.

BASW guidance on Code of Ethics and supervision

BASW's Code of Ethics states that social workers should use professional supervision and peer support to reflect on and improve practice. Social workers should take responsibility for requesting professional supervision and discussion which supports them to reflect and make sound professional judgements based on good practice. BASW expects all employers to provide appropriate professional supervision for social workers and promote effective teamwork and communication

Becoming a practice supervisor

Practice supervision is a skill that social workers may need to develop at different points in their careers as they move into various supervisory roles. They may be early career social workers studying for their Practice Educator Professional Standards (PEPs) stage one (in England and equivalent stages of development in the other nations), learning from working with a social work student. Or they may be Practice Mentor Assessors, supporting social workers to complete e.g. post-qualifying statutory mental health training under the different legislations across the four nations.

Supervisors need training and good supervision themselves to develop onto their role with skill and confidence. For instance, in England this has been recognised in the *Practice Supervisor Development Programme* for children and families social work. But all social workers moving into supervisory roles should have access to sufficient, appropriate training.

This applies equally to social worker supervisors in (e.g.) the NHS, private and voluntary sector contexts.

Group and peer supervision

Supervision is sometimes provided in action learning and/or peer group contexts. These can be powerful and beneficial and can supplement one to one supervision. In some work contexts – e.g. where work with service users is primarily done in groups – group and peer supervision may be the main form.

Group and peer supervisions ideas are explored in the section about Teams.

Practice leadership

There has been a lot more interest in recent years in the leadership that all social workers can bring to practice. Practice leadership may be provided by someone in a specific role – e.g. by a Principal Social Worker in England, a Consultant Social Worker in Wales, a specialist supervisor – but all social workers have professional responsibility to develop professional leadership skills. Put simply, this means having the knowledge, skills, and confidence to promote the best of social work, its practices, values, and ethos wherever you work.

Social workers with specific practice leadership roles have a crucial part to play in enhancing the wellbeing of colleagues. This may be through their provision of supervision, support, and advice – helping to create safe space for practice and clarity about standards and expectations. It should also be through enabling social workers to access the ongoing learning and development support they need.

Social workers we surveyed often highlighted that professional development was a soundbite offered by their organisation. Budgets are often stretched, meaning less availability of external opportunities, but even when there are external opportunities social workers are not provided the space and time to attend and participate in events. Professional development has been shown to be advantageous not only for individual social workers, but also for the organisation that they work for and service users worked with.

Professional development does not necessarily mean attending courses, although this is an important route. Allowing professionals to research through their work will update their skills. Bringing in external experts for the development of action research and appreciative inquiry skills, for example, can facilitate learning and development while working.

Other examples of cost-free and low-cost, accessible professional development include formal and informal peer support networks and the learning potential of reflective supervision.

A learning culture vs blame culture

People in formal practice leadership roles need to work closely with workforce managers, other managers, and organisational leaders to ensure there is investment in social work professional development and a commitment to developing a learning culture. This is characterised by a commitment to learn and reflect when things go wrong and when they go right, recognising that instincts towards 'blame' and 'scapegoating' – where individuals seem to carry responsibility for problems or failures with many contributory factors – should be rejected. Blame and scapegoating are not the same as accountability, but social workers reported in the survey that they still feel at risk of this.

Practice leadership – and a commitment to developing professional leadership and professionalism amongst all social workers - should help to promote a learning culture. If this isn't how things work in an organisation, start small:

- With colleagues, create a reflective and learning approach in your part of the organisation through creating some space and time.
- Try to chart the benefits for staff wellbeing and practice over time
- Talk to people using services about what they expect and want from social workers, to inform learning topics and approaches
- Seek support for the approach from managers and organisational leaders
- Ask to provide a presentation or workshop to other parts of the organisation about the benefits
- Over time, work up to making formal proposals to managers and organisational leaders about how learning and opportunities to develop professional leadership and professionalism amongst social workers can benefit the whole organisation and people you work with.

6. Tools for Teams

Team working (T):

Being part of a well-functioning team that supports has been shown across numerous studies to have among the most positive impact on health and wellbeing of staff and to produce better health and care services and outcomes than more individualised or fragmented ways of working (Borrill, C. et al 2000). Paying attention to relationships within teams – and resolving difficulties – can be a crucial building block to better workplace wellbeing for social workers.

The team interventions suggested here will help to integrate the mutual support between colleagues in teams and across organisations, always with an eye to how quality of care and support is being improved.

Make time for team and peers

Consciously 'making time' individually and collectively to build a peer and team ethos of wellbeing and support is everyone's responsibility, including identifying and building upon the rich and diverse strengths and contributions of each individual team member, regardless of role.

Creating dedicated time to meet as a team on a regular basis focusing on the professional identity, wisdom, experience, skills, knowledge of colleagues within the team and actively listening to each other will create opportunities for you and your team to build a culture of support . The organisational culture and leaders including team managers need to provide a context of 'permission' to meet, learn from each other and socialise outside of what is so often an 'allocation' team meeting

The demands and complexity of work that social workers have to deal with continue to increase and creating opportunities within teams for individuals and the team to reflect on their practice with peers and the team manager can be a hugely positive experience for all involved. The following model may be helpful to develop from strengths as a team.

Strengths Based Team Meeting (non-allocation) - The 10-point discussion model

- **1.** How am 'I' and how are 'We'?
- 2. What strengths and wisdom do I bring to the team and how can this be shared?
- **3.** What are our collective strengths?
- **4.** How can 'we' value and support each other better?
- 5. What needs to change to make this happen individually, in the team and the organisation?
- **6.** Buddy System creating who is 'my'/'our' go to person inside or outside of the team?
- 7. What are my/our signs of wellbeing and what can 'we' do to help if team members want help
- **8.** Non mandatory options of team engagement and support (what works for one person may not work for someone else)
- **9.** Celebrating our successes
- **10.** How can we improve our resilience and wellbeing?

Team to use different models to identify strengths.

Team Modelling – clarity of goals and problem solving

Clarity of vision, the culture and ethos of a team can have a direct impact on wellbeing, performance, and practice. It is important for teams to be clear about their vision, goals and to collectively develop wellbeing strategies and create a safe culture of working collectively to problem solve. Individually and collectively you and your colleagues are the most important resource within your team and your contribution and strengths, including peer support, coaching, and modelling good wellbeing practice will impact on your team.

"Teams are more effective and innovative to the extent that they routinely take time out to reflect upon their objectives, strategies, processes and environments and make changes accordingly". www.kingsfund.org.uk/sites/default/files/michael-west-developing-cultures-%20high-quality-care-kingsfund-feb13.pdf

Teams are built on relationships

Resource pressures, process-driven (rather than people-driven) practices and managerialist organisational cultures have a direct impact on relationships between colleagues and between practitioners and the people they work with.

Make time for direct work with people

Respondents to the BASW England '80/20' survey www.basw.co.uk/8020-campaign-relationship-based-social-work highlighted that the amount of time they spent on process driven activities far exceeded direct contact with colleagues and with children and families. Not having time to do the direct social work with people that you believed you were trained to do can be one of the potential sources of 'stress'. It can create profound dissonance between what the social worker wants and believes they should do, and what the agency is asking them to do, creating the conditions for stress.

The 80:20 campaign in BASW is focused on how to make time for direct social work with children, adults, and families. This is what social workers say they want and addressing this can also address dissonance and sources of 'moral distress'.

Peer support and coaching in teams and organisations

Numerous studies in both health and social care have demonstrated the power of peer support for improving and maintaining employee wellbeing. Recent research about working conditions for teachers (Ravalier & Walsh, 2018), police officers (Houdmont, 2013), and most importantly, social workers (Jermaine M. Ravalier, 2019), has shown that good support from peers can be a really important in preventing potentially harmful effects of chronic workplace stress and poor working conditions. Being around peers within a team and organisational context and feeling supported by colleagues is a key factor in preventing stress-related ill health in the workplace.

With this in mind, it is really important to think about how you interact with your colleagues. Perhaps taking the time to (and ensuring that you) have lunch away from the office environment and have a catch up. Or maybe something as simple as making a hot drink and a quick 'how are you doing today?'

Something mentioned frequently during interviews with social workers throughout our research, was about having a peer 'check-in'. This was often due to overhearing what sounded like a challenging or difficult conversation on the phone. Having a colleague come over and mention something about the phone call, exemplified a high level of peer support which was extremely valued.

Fig. 7. Peer 'Check-in'

Peer Check-in	Providing informal and formal support to peers and manager in the team	 How are you? Lunch / time for a coffee Checking in with a colleague after difficult conversation Checking in with colleagues returning to work following leave, sickness, compassionate leave Students and new staff – making time to make them feel welcome
---------------	--	--

Wellbeing Champions and Guardians in Teams and Organisations

These are, in essence, colleagues that you can talk to for a non-judgemental, confidential discussion. These discussions may be around wellbeing, whistleblowing, or something else – but often it is good to know that there is someone available to talk to.

While not all organisations will have Wellbeing Champions, our research has suggested that they may be a worthwhile investment for all organisation. Wellbeing Champions (there are various names for people who take these roles on!) are a point of contact in your organisation, and their roles are two-fold: first of all, a confidential person to talk to regarding your wellbeing, or that of colleagues. Secondly, they can signpost you toward the most appropriate source of help for the support you require. They therefore keep colleagues up to date with what is happening in health and wellbeing as well as supporting wellbeing initiatives.

Praise and celebration of achievements

Praise and celebration of successes and achievements can have a positive impact on the morale, wellbeing, and energy within a team. Think about when you last praised a colleague or received positive from a peer or your manager in writing or verbally. Rewards come in any many forms and acknowledgement of the work that you do in a team and that of your colleagues is important in building a culture of positive team modelling.

- Praise peers and your manager and celebrate individual and team successes
- Nominate your team for Awards (include all nation list of Awards): -
- Social Worker of the Year Awards
- Work collectively to explore how praise and motivation within the team can be improved

7. Tools for Managers and Organisational leaders

In this section, we distinguish management from organisational and practice leadership and from supervision. In reality, these roles are sometimes carried out by the same people. While there can be some overlap in their purpose, there are distinct differences in the role and functions of managers leaders (organisational and practice) and supervisors, however they are distributed amongst staff in the organisation.

Management focuses on provision of resources, administration, systems and providing the practical and process conditions for social work to be done. Managers are most often tasked with upholding compliance with policies and ensuring standards and performance measures are achieved. This was well examined in the Munro Report into children and families social work in England in 2011:

Many complain that practice has become focused on compliance with guidance and performance management criteria, rather than on using these as a framework to guide the provision of effective help to children. The review has concluded that statutory guidance needs to be revised and the inspection process modified so that they enable and encourage professionals to keep a clearer focus on children's needs and to exercise their judgment on how to provide services to children and families.

(p39 - Chapter 3: A system that values professional judgement)

Many of the issues raised in our survey identified problems related to management and managers such as whether there are enough resources – people and funding – to do the amount of work required.

The HSE factors affecting working conditions (fig 1) that were central to our survey are matters which managers – along with organisational senior leaders – can influence, shape and sometimes directly control through their day to day decision making.

A checklist for managers

Social work managers need to reflect on how well they are able to support social workers in respect of:

Demands:

- are resources balanced to workload and expectations?
- do systems including administrative and technology systems free up social workers to prioritise direct practice and professional work?
- are systems and resources in place to manage demand and prevent crises?

Control:

- are social workers enabled to have as much control as possible over their working day, use of time and appropriate professional decision making?
- how could these be extended while maintaining team and organisational standards and collective expectations?

Managerial support:

- as a manager, could you ask social workers what better support could look like?
- what are you already good at and what do you need to develop in order to be a more supportive manager?

Peer support:

- can you create better conditions for social workers to access more peer support?
- do you know the types of peer support that social workers value or might find more helpful?

Relationships:

- what is the 'emotional temperature' of relationships like in your organisation?
- where are they most positive and might make them become more positive in other parts of the organisation?
- what are¬ your relationships like with staff and how could they be improved?

Role:

- are social workers clear about and content with their roles?
- are their tasks, spheres of accountability, responsibilities, and status clear and appropriate for the level of their work?
- What could you do to improve role clarity and satisfaction?

Change:

- how do you approach change management when it affects staff?
- do you know best practice approaches to change management and where can you find out more about them?
- what have you learnt from previous change processes to improve the next?

Managers also need to be aware of the signs and indicators of positive and deteriorating wellbeing as described in *Fig 4* above. Having a shared understanding of what to look out for – and how to look out for each other – helps to create a culture of shared human concern, compassion, and kindness which in itself enhances workplace wellbeing.

Dialogue between social workers and managers about expectations on social workers, and what is needed to improve conditions for practice, is crucial for a healthy and honest workplace. Great managers are communicative and clear in their messages with staff.

Managers often have to decide whether practice or decisions by social workers meet required organisational standards. This can be complex and needs managers to understand and be competent to judge not only the standards defined in local policies and procedures, but how these fit with

- professional standards upon social workers laid down in the UK Code of Ethics
- standards and expectations of regulators
- other legal requirements

Sometimes these do not all align, and social workers find their professional judgement, ethics and expectations are at odds with the judgement of their organisational managers. This can be a one-off incident or can be an endemic tension and dissonance. This came over clearly from some respondents in our research who cited it as a key reason for dissatisfaction and stress at work.

Managers – particularly middle- and first-line managers – often do not have direct control themselves over strategic decisions about the allocation of resources across the organisation. They can often primarily be the implementers of strategic policies and funding decision beyond their direct control. However, they can have great influence 'up' the hierarchy and they can act as advocates for the resources and good working conditions social workers need. In order to advocate for social workers and the people using their services, managers need to develop their influencing and 'upward managing' skills. This can have material benefits (e.g. drawing down more resources) and relationships and wellbeing benefits if social workers feel that their managers 'have their backs'.

In healthier organisations, social workers, managers, practice supervisors and leaders and organisational leaders will work and learn together to find ways to align their perspectives and establish a culture of understanding and collaboration. Of course, models of practitioner rather than 'manager' led services exist and may have benefits for the organisation of more autonomous, professional and liberating social work in the future.

Social Exchange: a mutual benefit approach to wellbeing at work between staff and their managers

A well-established conceptual framework within which to consider the link between human resource management (HRM) and employee well-being is social exchange. A relevant example is the study by Tsui et al (1997), who explored different forms of exchange in the employment relationship. They found that a balanced exchange bringing mutual benefits to both the organisation and employees or an exchange that was to the advantage of employees both resulted in positive outcomes for employees, reflected in higher trust and perceived fairness. Importantly, it was also associated with higher commitment, citizenship behaviour and individual performance.

This suggests that one way of identifying a path from HRM to well-being is through the employment relationship. The proposition is that a distinctive set of HR practices can lead to a positive employment relationship with mutual benefits. These practices fall into five broad categories, namely investing in employees, providing interesting work, ensuring a positive physical and social environment, voice and organisational support. A positive employment relationship, at the individual level, will be characterised by perceptions of high trust, fairness, employment security, a positive and fulfilled psychological contract and a high quality of working life.

Manageable workloads

Our research found the number one source of unmanageable workload in social work related to 'caseload' (Jermaine M. Ravalier, 2019). Having too many cases (quantitative workload) or smaller number of cases which are extremely complex (qualitative workload) – or a large number of qualitative and quantitative workload – is the number one difficulty that social workers in the UK are frequently exposed to.

The need to improve staffing levels was a recurrent theme along with clearer and fairer approaches to caseload allocation.

More supportive and effective models of practice

The need for managers and practice leaders to explore different models of practice to manage workload, and in particular to deal with complex work, came through strongly. Ideas included

- more co-working and team-based working to increase support and sharing of ideas (e.g. team around the family, team around the person approaches)
- the availability of more support practitioners (e.g. family support workers)
- relief from administrative and technological activities (i.e. time in front of the computer) providing time for relationship based work and professional activities

Managerial training

Through interviews and focus groups we heard that social workers' talents are often recognised by promotion managerial positions. However, we also heard that social workers were promoted and not given adequate training and/or support in their new role. This not only affects their own wellbeing, but also has a knock-on effect on employees and subsequently people using services.

Managing social work services requires particular skills and knowledge. All social work managers should receive adequate training to support them in their roles, with regular updating of this training. This training should bring together managerial skills and an understanding of how managers can create the best conditions for social work practice.

Organisational and System Senior Leadership

In the opening section of this guidance the workplace is described as a 'human, technological and cultural system'. Changes in one part of the system can have a knock-on impact on other parts of the system, with positive or negative consequences. Organisations are complex systems and there is often a wide range of contributory factors at play which impact on organisational wellbeing.

Organisational senior leaders have a lot of formal and soft power. How individual leaders and leadership groups use it can have profound impacts on the environment created for social work practice. Organisational leaders can shape strategy, vision, culture, ethos, attitudes and behaviours across the organisation.

It's important that leaders of social work organisations develop a culture that places worker well-being — and respect for their professional roles - at the heart of how an organisation operates and fulfils its mission/vision. Worker wellbeing needs to at the core of organisational strategy overall.

Questions social workers can ask/ask about senior leaders

Some questions from social workers to organisational leaders may be:

- Do my organisational leaders understand and actively support the professional work I do?
- Are they committed to making the workplace healthier and happier?
- Will they provide the ongoing professional development I need?
- Have they ensured the organisation has best practice HR and workforce development policies and practice?
- What are my routes to raise issues and discuss solutions with senior leaders?

Appendix One: Bibliography and further reading on the evidence base

Jameton A. *Nursing Practice: The Ethical Issues*. Englewood Cliffs, NJ: Prentice-Hall; 1984:6)

Health and Safety Executive (n.d.), What are the menagement standards? [online].

Available at: www.hse.gov.uk/stress/standards/

Health and Safety Executive (n.d.), *Tackling work-related stress using the Management Standards approach* [online]. Available at: www.hse.gov.uk/pubns/wbk01.htm

Ravalier, J. (2019). Psycho-social working conditions and stress in UK social workers. *British Journal of Social Work*. 49, 371-390

Ravalier, J.M., McFadden, P., Boichat, C., Clabburn, O., & Moriarty, J. (2020). Social worker wellbeing: a mixed methods study. *British Journal of Social Work*. DOI: bcaa078

Rosengren, A., Hawken, S., Ounpuu, S., Sliwa, K., Zubaid, M., Almahmeed, W., Blackett, K., Sitthi-amorn, C., Sato, H., Yusuf, S. and INTERHEART investigators. (2004). Association of

psychosocial risk factors with risk of acute myocardial infarction in 11119 cases and 13648 controls from 52 countries (the INTERHEART study): case-control study. *Lancet*, 364(9438), 953-962 Backe, E-M., Seidler, A., Latza, U., Rossnagel, K., & Schumann, B. (2012). The role of

psychosocial stress at work or the development of Cardiovascular diseases: a systematic review. *International Archives of Occupational and Environmental Health*, 85(1), 67-79

Niedhammer, I., Milner, A., Geoffroy-Perez, B., Coutrot, T., LaMontagne, A.D., & Chastang, J-F (2020). Psychosocial work exposures of the job strain model and cardiovascular

mortality in France: results from the STRESSJEM prospective study, *Scandinavian Journal of Environmental Health*, doi:10.5271/sjweh.3902

Appendix Two: References:

- Kinman, G., & Grant, L. (2010). Exploring stress resilience in trainee social workers: the role of emotional and social competencies. *British Journal of Social Work*. 41, 261-275
- Mackay, CJ, Cousins, R, Kelly, PJ, Lee, S and McCaig, RH. (2004). 'Management Standards' and work-related stress in the UK: Policy background and science. Work & Stress, 18, 2: 91–112
- Marmot, M., Allen, J., Boyce, T., Goldblatt, P., Morrison, J. (2020). Health equity in England: The Marmot review 10 years on. *The Health Foundation* [online].
 Available: www.health.org.uk/publications/reports/the-marmot-review-10-years-on
- Office for National Statistics (ONS) 2020. Coronavirus (COVID-19) related deaths by ethnic group, England and Wales: 2 March 2020 to 15 May 2020 Available: www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/death s/articles/coronaviruscovid19relateddeathsbyethnicgroupenglandandwales/2march 2020to15may2020
- Ravalier, J.M. (2019). Psych-social working conditions and stress in UK social workers. British Journal of Social Work. 49, 371-390
- Ravalier, J.M., McFadden, P., Boichat, C., Clabburn, O., & Moriarty, J (2020). Social workers wellbeing: a large mixed methods study. *British Journal of Social Work*, in press. DOI: bcaa078
- Borrill, C. West, M. Shapiro, D & Rees, A. (2000). Team working and effectiveness in health care. *British Journal of Health Care Management*. 6. 364-371. 10.12968/bjhc.2000.6.8.19300
- Jameton A. Nursing Practice: The Ethical Issues. Englewood Cliffs, NJ: Prentice-Hall; 1984:6.
- Jametone A (2017) AMA J Ethics. 2017;19(6):617-628.

Appendix Three: Resources

BASW (2011). UK Supervision Policy. Available at: www.basw.co.uk/system/files/resources/basw_73346-6_0.pdf

Research in Practice (2017) *Reflective Supervision: Resource Pack.* Available at: www.rip.org.uk/resources/publications/practice-tools-and-guides/reflective-supervision-resource-pack-2017/ (Cost: £25 to non-RIP partners)

Social Care Institute for Excellence (2017) *Effective Supervision in a Variety of Contexts*. Available at: **www.scie.org.uk/publications/guides/guide50/** (Cost: free online to supervision)

Northern Ireland Social Care Council (2015) *Reflective Practice: A Model for Supervision and Practice in Social Work.* Available at: https://niscc.info/storage/events/2015_5 _reflectivepracticefullversion.pdf (Cost: free online guide)

Boorman Report - Absenteeism

Barbara Fredrickson www.positiveemotions.org

Fredrickson & Losada, American Psychologist (2005) 60, 678-686