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Chapter 1

Learning from Stories of Practice

Denise Lyons and Noel Howard

INTRODUCTION

‘We need a book about the practice of social care, written by people on the front line, workers and managers.’ I (Denise) had this thought several times over the years, sparked mostly by a need for realistic case studies to share with students. Becoming a member of the executive of Social Care Ireland (SCI) in 2010, the umbrella group for the three representative bodies of social care, enabled me to meet social care workers who were also interested in the idea of a book about practice. As well as needing a selection of stories from experienced workers, this book required a veteran social care worker to guide the process. I was privileged to work with Noel Howard on the committee of SCI and fortunately he required no persuasion or bribing to take up the challenge.

This book is the collaborative effort of a number of social care workers who were brave enough to share insightful stories of practice with us. Each worker has valuable experience worth sharing about his or her own area of work, with enlightenment gained from years working with vulnerable people. The stories you will read in this book are based on real practice experiences. In some you will see the personality of the author coming through and this is refreshing at a time when personality in social care is being slowly eroded. This factor alone distinguishes the book from worthy studies that deal with theory alone.

Nothing in this book is specifically presented as a panacea or recipe for best practice in social care. Neither should it be taken that the editors are necessarily endorsing any of the methods, approaches or interventions outlined in any of the chapters. We would advise that methods of intervention and therapeutic techniques outlined in some of these chapters are the advanced practice of social care workers with expertise, training, experience and supervision. The social care workers using therapy in their practice have advanced training. Such practice is therapy rather than the general therapeutic benefits that flow from

effective social care practice. Many of the interventions and approaches may apply in a general sense, but social care workers do not need to be reminded that what worked yesterday may not work today because of the ever-changing dynamic that is so much part and parcel of what they do. The stories are offered as a lens through which we can bear witness to the emergence and continued professional development of each worker that go beyond the challenges that working with vulnerable people inevitably brings.

WHERE DO WE WORK AND WHAT DO WE DO?

Each individual author was given the challenge to write about their practice through the guise of a case study, or by using real examples to demonstrate the issues they deemed pertinent to their specific area. As you will discover from reading this book, the emphasis here is on practice rather than the theoretical approaches that have influenced or that underpin the approach. As a lecturer I continuously drill home to students that they should support all their opinions and discussion with relevant theory. In this case we invited social care workers to focus on practice, with an acknowledgment that all the contributors to this book are either qualified social care workers or are eligible for statutory registration. Several of the contributors have engaged in further education to support the practice they are involved in and consider the degree as the foundation of their education. Many explain why they were attracted to social care, and how the chosen issue impacted upon them as a worker. We hope this book will spark discussions in lecture theatres and staffrooms about what theories may be relevant to the case studies presented.

We also aimed to provide a broad picture of social care from a variety of different practice areas, which led us to the question, 'Where do social care workers in Ireland work?' In 2011 social care workers, managers and educators collaboratively described the range of social care settings as 'children and adolescents in residential care; young people in detention schools; people with intellectual or physical disabilities; people who are homeless; people with alcohol/drug dependency; families in the community; or older people' (Lalor & Share 2013:5). This may not represent the full spectrum of practice, as there is currently no empirical data available on where social care workers actually work or how many are employed in the different areas. According to the 2009 report of the Skills and Labour Market Research Unit (SLMRU), there were 7,900 social care workers employed in Ireland (SLMRU 2009:92), which may include workers in the Health Service Executive (HSE), the voluntary sector, agencies and the private sector. The statutory registration of social care workers will enable us to know the exact number of people in Ireland eligible

to legally use the title Social Care Worker and to determine where those who are employed are working.

This book does not include every area of practice. Of that we are sure. However, we are confident that the themes and issues identified within the chapters are relevant to a wide audience of workers struggling to form and maintain relationships; trying to engage with people in various types of care provision; or dealing with a variety of challenges every day. Many of the scenarios are mirrored across numerous areas of social care work. We also hope that this book will encourage other social care workers to write about practice and increase our knowledge base on the broad profession that is social care. You will notice that some chapters are heavily referenced; others less so. The editors believe this is a healthy reflection on the practice issues as well as theory supporting that practice.

SOCIAL CARE STORIES

At the 2012 annual planning meeting of the Health and Social Care Professions (H&SCP) Advisory Group, Dr Michael Byrne presented some of the findings from the 2011 *Survey of the Research Activity, Skills and Training Needs of Health and Social Care Professionals in Ireland*, specifically the twelve professions covered by the 2005 Health and Social Care Professionals Act (McHugh & Byrne 2011). According to the report there were 3,367 social care workers employed by the HSE in Ireland. This figure is much lower than that quoted in the SLMRU report (7,900), but this may reflect the large number of social care workers estimated to work for agencies and the private sector. In his presentation, Dr Byrne took social care workers as an example, stating that for the largest professional group covered under the H&SCP Act, we had the smallest number (n=3) of workers engaged in evidence-based research. The reasons presented in the report for the low engagement of our profession in research included: the heavy workload, leaving no time for research; workers feeling insecure about academic writing skills; that research was not valued in the service by management; and that there was no culture of undertaking research (McHugh & Byrne 2011).

After attending the planning meeting I felt disheartened about the statistics presented and wondered if there was something we could do to encourage people to write about their practice. The education sub-group of the H&SCP Advisory Body is interested in 'mentoring' as a possible way to encourage workers to engage in research. Here the worker becomes a research partner with an academic or student on placement. The worker is the link to practice, using his or her experience as evidence. Each contributor to this book has

demonstrated that the insights social care workers have acquired through experience in specific social care settings are worth sharing for the development of our profession.

The 2011 report was funded by the HSE because of a recognition that each of the twelve professions due for statutory registration will need current information about the profession. Social care is no exception. So we need to encourage workers to write about practice and we need to do it soon in preparation for statutory registration. The 2011 survey was distributed to HSE staff only and the results do not include any social care workers engaged in research from any other sector, or those who are employed in education. This is interesting because social care educators are the main contributors to the knowledge base for social care, evident from the *Irish Journal of Applied Social Studies (IJASS)*, the various Irish texts on social care and the role of educators in the development of the educational guide for social care education, *Awards Standards – Social Care Work* (HETAC 2010).

The Higher Education and Training Awards Council (HETAC) devised standards that may help guide the future Social Care Registration Board on the 'Draft Criteria and Standards of Proficiency for Education and Training' for social care education. The board members included Lorraine Ryan, who was nominated by the Irish Association of Social Care Workers (IASCW) and the Resident Managers' Association (RMA), now the Irish Association of Social Care Management (IASCM); John Fox, who was released by the HSE; and David Power (IASCW Vice President at the time), who represented the Health and Social Care Professional Council (CORU). The following were also included in the group, which was chaired by Pat McGarty (IT Tralee and IASCE): Kevin Lalor (DIT and IASCE); Karen Finnerty (Open Training College); Judy Doyle (DIT); Margaret Gilmore (IT Sligo); Mark Smith (Edinburgh University) and Reidar Osterhaug (Stavanger University, Norway) (HETAC 2010:2).

The standards were presented as a guide for programme development and accreditation and thus applied to the majority of social care institutes of education. The document frames the knowledge, skills and competencies of social care under the standards expected at each National Framework of Qualifications award level (levels 6 to 9). The members of the board were invited because of their involvement in social care education and practice, and several members had experience of social care work. Williams and Lalor (2001:82) state that the 'training of social care personnel must be appropriate and informed by the needs of the profession', which should include all services. However, as social care is such a broad profession it is practically impossible

to have all sections of practice represented on this board. By writing about practice, social care workers from diverse services can ensure that educators include the core competencies of practice specific to their area in social care programmes.

ARE THESE STORIES RESEARCH?

When you ask questions about your practice or reflect on how you could have done something differently, you are engaging in research (Farrelly 2013). Pawson *et al.* (2003) devised a table depicting the types and sources of social care knowledge. ‘Practitioner knowledge’ was listed as one of the four types, and surmised by Farrelly (2013:126) as knowledge ‘gained from doing social care, which tends to be tacit, personal and context specific’. In their article on sharing knowledge between health workers and academics, Bartunek *et al.* (2003) stated that both tacit and explicit knowledge are required for an in-depth understanding of practice. Tacit knowledge is described as individual, subjective and based within a setting, whereas explicit knowledge is articulated through deduction and theorising, and can be coded and generalised. Practitioner knowledge is tacit knowledge, and according to Bartunek *et al.* (2003) it is essential to have both: ‘Practitioner knowledge is acquired directly through the practice of social caring and the distillation of collective wisdom at many points through media such as education and training, requesting and receiving advice, attending team meetings and case conferences, and comparing notes’ (Pawson *et al.* 2003:17). The chapters are evidence of both a tacit and an explicit approach to understanding social care practice.

In this book social care workers explore and question practice, describe new and interesting ways of working and reflect on the merits or otherwise of the different approaches used. These stories are our contribution to the knowledge base for social care into the future.

USING POETRY TO TELL A STORY

We are very fortunate to have two original poems by Caroline Coyle featured in this book. Caroline was a social care worker caring for young people through traumatic experiences, which she has narrated in her poems. The first poem, ‘My Daddy Didn’t Hold Me Down’ (page xvi), was inspired by the intimate and trusting relationship between the carer and the young person, who feels safe enough to disclose, or safe enough to deny disclosure. Through the shared experience of receiving a young person’s story, the social care worker can help on many different levels. The actual verbalisation of the stories can act as an

avenue for those experiences to escape, thus helping to alleviate the young person's stress and their internalisation of the experience.

This book concludes with a second poem, 'No Womb at the Inn' (page 275), which explores the story of a Traveller girl in care becoming pregnant and being moved, looking at religion in the Travelling community, its importance and the connected symbolism. Themes such as generational experiences of being in care, knowing about the care systems and trying to prevent your own child from going into care, feelings of powerlessness, pleading for help and the perception that nobody cares emerge from this poem. The poem highlights the intergenerational culture of being in care for some groups in Irish society.

Chapters 2 and 3 illustrate where both editors have spent most of their working lives: Noel in practice and working with the IASCW (Chapter 2); and Denise in social care education and the Irish Association of Social Care Educators (IASCE) (Chapter 3).

Chapter 2 gives an overview of the origin and development of what is today the IASCW. The road travelled over forty years is one of hope and despair; relative success overshadowed by broken trust; enormous generosity of spirit, but also its very antithesis. It is a road strewn, literally, with blood, sweat and tears. The chapter sketches the ebb and flow of major social and political influences on the lives of social care workers and those for whom they care over years marked by huge social change, upheavals and scandals as well as legislative and regulatory change. What has not changed is the simple, yet enormously complicated, task that social care workers face daily – how can I make a difference?

Social care education is the focus of Chapter 3, which looks at how it has evolved since the first training programme began in 1971. The change from the single focus of child care to the multi-faceted profession of social care has implications on the ability of programmes to be fit for purpose and to educate workers for diverse fields of practice. On the front line, educators have themselves collaborated in order to improve the education provided across the country. In particular, the role the IASCE plays in this process is worth noting.

In Chapter 4, 'Keith' graphically describes the journey from dysfunctional yet loving family through the residential and aftercare system. As with many of the chapters in the book, this one throws the importance of the key worker, the 'I', into sharp focus. It proves that one person in a vulnerable individual's life, in this case the right person at the right time, can make all the difference. The editors believe that this account, from someone who has seen the best and worst of the care system and its aftermath, is well placed at the book's beginning. In the chapters that follow, other 'Keiths' emerge in many different guises.

We are fortunate to have Keith's story reflected from the other side, as it were, by Maurice Fenton in Chapter 5. Maurice has allowed himself to be identified in order to contextualise the lessons learned and the implications of wider issues – as relevant today as then – that were at play when he worked with Keith. 'The Impossible Task: Which Wolf will Win?' is an intriguing title and the chapter, *inter alia*, challenges some of the conventional wisdom around what works and what doesn't.

In a similar vein, Chapter 6 is the story, by Dr John Digney and Max Smart, of doing small things with great kindness. Both John and Max have worked on the floor, in management and clinical roles, for fifty-plus years between them. Here the authors challenge us to learn a new dance where change is 'inside-out', to use the concepts of love and kindness, through the relationship as a vehicle for this. They present a model for practice illustrated as the therapeutic use of daily events, where the main characteristics of practice are explained in depth, supported throughout with real-life stories. Central to working inside-out is taking the risk to show genuine love and kindness in an attempt to create positive change.

Pauline Clarke Orohoo's chapter (Chapter 7) raises some pertinent question about social care work, flooded – as are other disciplines – with jargon posing as clarity. Much of the language we automatically use as professionals can confuse and, at times, intimidate vulnerable people. Terms that to us are routine and don't cost us a second thought can leave those we care for, who are sometimes educationally disadvantaged, even more disadvantaged: we must be clear, deliberate and definite in the language we use and in how we explain what professional terms actually mean.

As social care expands into different areas of practice, workers are now involved in family assessment and all the challenges that the worker experiences in trying to encourage families to engage in the service. In Chapter 8 Angela Feeney explains the benefits of the 'home-based ecological assessment' tool in her practice, and brings us on a journey from our usual habitat in a service setting into the home.

The home is also featured in Chapter 9, in which Aoife Killeen talks about the benefits of living semi-independently in a congregated setting. Aoife provides instruction on the relevant policies and legislation for social care workers in the disability sector, using examples from her practice and the voice of her colleagues to critically explore this as an approach to semi-independent living. Frontline staff are faced with a virtual reversal in policy, where due to budget constraints service users are returning to almost institutional living; and Aoife offers a practical, cost-saving alternative.

In Chapter 10 we stay with the disability sector, but this time the setting is a day care centre for people with an intellectual disability, and Iseult Paul explores the challenges her team faces with an ageing population. Central to her practice is the notion that the worker integrates personal and professional past experiences into their practice, and that our placements, part-time jobs and life experience influence the worker we become.

In a similar vein, in Chapter 11 Frank Mulville draws on many years of experience to concentrate on the 'I' and self-understanding in social care. He is forthright and honest in looking at himself in the context of examples where one is not only powerless physically but also, at times, emotionally. Times, indeed, when we feel silly, worthless and at the bottom of the pile. He looks at areas where social care workers need downtime as a team, something rare in today's bureaucratic world of social care, and stresses the need for self care and the necessity of a life outside work, without which we benefit nobody, least of all those who need our care so much.

Focusing, developed by Eugene Gendelin, is a topic taken by Derek McDonnell in Chapter 12, 'Precious Cargo'. It details the development of an 'inner dialogue' that can be used to great advantage in relation to any aspect of one's life. The examples from Derek's practice outline in a step-by-step process the key elements that focusing requires in order to be effective in addressing specific areas of difficulty, past or present, in one's life.

Des Mooney begins Chapter 13 by also stressing the influence past life experiences had on his practice; and his understanding of resisting the urge to rush in, and what can happen when we adopt the approach of 'waiting'. He is not telling us to do nothing; waiting is purposeful and we are actively listening, present, learning, reflecting, journaling and providing a space for things to happen.

In Chapter 14 Maria O'Sullivan turns the modern concept of the word 'containment' in social care on its head, drawing heavily on Bion's theory. In this chapter she explores how an understanding of behaviour indicating need must not only be accepted by social care workers but persistently pursued in terms of what might work best when all hope of even any basic changes is slowly ebbing away.

Remaining with the therapeutic theme, in Chapter 15 Laura Behan describes the use of the therapeutic relationship in a residential care home in a therapeutic community. Laura highlights the daily challenges of using this approach in a sometimes chaotic world of care plans, challenging behaviour and our urge as workers to 'fix things'. Unconditional positive regard is at the core of this approach and through the example of Sarah's story Laura

describes how the often challenging but always worthwhile journey of such a relationship can inspire healing and growth in the young people we work with. Laura stresses the importance of remembering that small shifts can lead to huge ripples of change for these young people and it is vital that we hold on to this in a profession that can so often leave us feeling helpless and disheartened.

The theme of therapeutic approaches to practice continues in Chapter 16. Helen Buggle explains the ‘therapeutic alliance’, describing a slow, painstaking process involving the bringing together of three separate elements. All three are necessary if the staff team, most particularly the key worker, is to be effective in addressing issues that are often deeply rooted, sometimes almost completely resistant to intervention. Her examples are interesting and indeed challenging, especially in today’s work, where vital concepts such as touch and token, with all they imply, can be so easily misinterpreted.

Chapter 17, by Niall Reynolds, is challenging in many aspects, not least in exploring the task faced by social care workers as part of a multidisciplinary team dealing with a young person who might otherwise be on his way to a placement in another jurisdiction. The lengths to which the team was prepared to go may raise questions for some. One of those questions might well be: Could I or would I work in such a unique situation where tolerance and patience are tested to the limit and ingenuity is called for not only daily but sometimes from minute to minute?

Another unique situation is the focus of Chapter 18, in which David Williams shines the spotlight on his experience of working with young people who self injure in a residential setting. This chapter outlines key definitions of deliberate self harm and examines the implications of managing self-injurious behaviour for social care students and workers. The causes and functions of self-injurious behaviour are described, and David exposes his own personal fears when faced with a young person who self injures.

Chapter 19 presents an overview of challenging behaviour in a setting for adults with acquired brain injury. Here Marguerita Walsh describes her approach as cognitive in origin but developed from her practice experience of working with children with an intellectual disability. Dealing with challenging behaviour is difficult on a practical and personal level and using an ABC form can help social care workers understand more about the role they played in the incident, and how best to support people through these experiences.

In Chapter 20 Lillian Byrne-Lancaster begins by discussing how being both a placement supervisor on practice and a placement tutor in college kindled her interest in the role of placement in social care education. Placement is where students learn how to put theory into practice. They are supervised by

a social care worker who has volunteered – or not, as the case may be – to invest their time and energy in this experience for the student. Agencies and workers understand the importance of placement but also acknowledge that the student learns in the real-life setting of the service user, and their needs are paramount. This chapter provides tips for the student on how to approach and secure a placement, and describes the benefits for the student if they are willing to engage, use their own initiative, listen and learn.

The importance of having the right placement experience is evident from the personal reflections at the beginning of Chapter 21. Here we continue to discuss the role and importance of the social care team, but this time in the disability sector. Claire Leonard describes how the team managed to change from a workshop model to a ‘day activation unit’ with a ‘bottom-up’ style of management. Claire also provides an insight into the personal and professional challenges faced by social care workers in management roles.

As mentioned in Chapter 21, supervision is essential as a support mechanism for staff and in Chapter 22 Fiona Doyle describes the process of supervision in social care. Supervision is relevant to all social care settings, and Fiona outlines the benefits effective supervision can have for the health and productivity of the team, evident in the two case studies presented.

Kathy D’Arcy’s chapter, Chapter 23, provides us with an example of direct work with young people in residential care, looking at the challenges of teaching independent living skills and the importance of the ‘small things’.

A whole range of areas are covered by Paddy Ormond in Chapter 24, in which he ranges from the impact of recent political and social upheaval, to acknowledging positive change, to the nitty gritty of pertinent examples and the devastation that can result when what goes on in dysfunctional staff teams is not addressed. Where does today’s social care worker personally and as a team member stand in all of this and how can he or she maintain themselves as a *good enough* social care worker in the important context of that phrase? This chapter can leave no one in doubt about the ever-changing world of social care and the social care worker’s responsibility in it. Paddy looks at what we can learn from those we work with and how those very people, disadvantaged and marginalised, can see through bluff, bluster and incompetency and recognise when they are being treated with empathy, care and compassion.

Fittingly, our final chapter complements Paddy Ormond’s chapter, as Chapter 5 did with Keith’s account. If *good enough* social care workers are needed, so are *good enough* managers. John Molloy’s rather unique take on the management role in social care, based on over thirty years as a manager, leaves no one off the hook. Catching social care workers doing good work, he posits,

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is just as vital as detecting what they are not doing right. Moral discernment is his touchstone and, like Paddy Ormond's in Chapter 24, John's range is wide and varied.

A note on terminology: Throughout the book terms such as 'client' and 'service user' are used frequently. These may not be the preferred terms for many social care workers and may require further discussion by our profession.