WORKING TOGETHER FOR CHILDREN.

Loosely coupled systems and inter-professional relations with particular reference to child protection.

Merrill Luen Clarke

Ph.D.

Institute of Education

Abstract

This study explored the impact in Britain of policies to improve co-ordination of services concerned with children and their welfare. To do this, it viewed the agencies as forming a child welfare system which could be described as *loosely coupled*. Such systems may be characterised by unpredictability and uncertainty, demanding that those involved in them exercise skills of interpretation to make sense of the world in which they operate. The insights gained from the literature on loosely coupled systems were used to explore the organisation of services relevant to children and, in particular, change over time in the strength and pattern of coupling.

The study took a twin approach. First, it incorporated an historical analysis of policies designed to improve working relationships between workers and agencies. Second, it drew on fieldwork with practitioners, responsible for the delivery of services, to explore change over time in the experience of working together. The fieldwork focused on issues concerning school aged children, which could fall under the umbrella of child protection. The methodology involved interviews with primary school head teachers, education welfare officers, school nurses and local authority social workers. A *vignette* approach was used to explore their perceptions of situations involving children. In order to study change, two rounds of interviews were conducted. These took place in 1984/5 and 1993/94. This longitudinal element is a distinguishing feature of the study.

Loosely coupled systems theory provided a useful basis for analysis. The study found that policies aimed at co-ordination have reflected changing ideologies and perceptions of the task to be done. The interviews indicated a number of changes in perception of practice and areas of greater agreement. To that extent there is evidence that the looseness of the system had tightened, at least in part, but elements of looseness remained.

Acknowledgements.

CONTENTS

LIST OF TABLES AND EXHIBITS

Exhibits

Chapter 1
INTRODUCTION

This study is concerned with exploring issues of how welfare practitioners work together in the interests of children and how the ways in which they do so have changed. It had its genesis in the early 1980s. At that time governments, particularly in the preceding two decades, could be seen to have been attempting to renew and develop the optimistic aspirations of the welfare state to meet needs by rational planning and co-ordination [Challis et al, 1988; Webb 1991]. There had been major reforms in the 1970s of the organisation of health services, local government and the personal social services. In spite of these efforts, problems of effective service provision seemed to continue to emerge rather than to be solved. As far as services for children were concerned, the problem of abuse of children by their carers had come to the fore in the 1960s and 70s and presented a continuing challenge [Parton, 1985]. The deficiencies seemed to be linked regularly to the failure of agencies and workers to relate efficiently and effectively to one another [DHSS, 1982]. A range of overlapping labels have been used to characterise the deficient quality. What was missing was identified variously as co-ordination, collaboration, co-operation or, occasionally, integration. Leathard [1994: 5] referred to "a terminological quagmire" and produced a table which included 31 terms used to describe the process. Whatever the terminology, commentators seemed to be agreed that deficiency in the quality described was a perennial problem [Webb 1991, Whittington 1983] and that its remedy was essential.

The terms used have been the subject of many semantic debates but have also stimulated the construction of a number of models to represent the dimensions of the relevant links. A useful overview of these was provided by Hallett and Birchall [1992] and will not be rehearsed in detail here. The main issues,

however, can be stated as follows. The terms can apply to relationships within and between organisations. These could be across levels or between tiers of organisations. They could be between professional groups or between individuals. These groups or individuals could be at the same or different levels in the same organisation or they could be in different organisations. Such relationships may be more or less formal and power relationships may be more or less equal. The focus could be on issues of policy or of implementation. The strength of the relationships could range from total commitment to low key mutual adjustment involving anything from information exchange to effective organisational merger. These links might occur only occasionally or with great regularity. The terminology of co-ordination, collaboration and related concepts, then, conceals a complex pattern of relationships.

It is not possible to avoid completely the traditional lexicon of such terms as co-ordination and collaboration. The use of the now accepted terminology of 'working together' represents an attempt to avoid some of the conceptual baggage which other labels have acquired. However, it is difficult to escape them. Where they do appear, a pragmatic approach to their interpretation should be taken. It is conceded that they often carry value messages implying that joint activity is a good thing and no doubt this is also true of the notion of 'working together'. It is recognised, however, that this assumption should be open to challenge.

The debates and disagreements over the meaning and usage of terms were well established when preliminary work on this project began [eg Slack 1966; Rodgers 1968; Warham 1970; Forder 1974; Wistow 1982]. More recently, the different approaches to these issues have been reviewed and summarised by Hallett and Birchall highlighting the conceptual heterogeneity which has persisted and characterised analysis and debate [1992: chapter 1]. Yet despite an extensive literature on the topic [Corby 1995:211] it could still be claimed that

there had "been relatively little attempt to focus on *inter*-organisational behaviour, particularly in the application to welfare policies in Britain" [Hudson 1987: 175]. What there was, it was suggested, "concentrated largely on inter-professional communication at case conferences" [Corby 1995: 212]. The study reported here was conceived as taking a broader approach which would help to fill this gap. Its early stages overlapped with the period when Hallett and Birchall were developing their research [Hallett and Birchall 1992; Birchall and Hallett 1995; Hallett 1995a] which was also targeted at this general area and it was therefore, subsequent to the start of this study that they published their review of the literature on inter-organisational relations [1992].

Hallett and Birchall [1992] identified three key perspectives to explain why agencies would collaborate. These were, firstly, those that use an exchange perspective. This model assumes mutuality. It is based upon the idea that members of organisations will willingly co-operate when there are benefits or gains to be made. Secondly there were power - dependency approaches which assume that organisations will try to reduce their dependency and maximise their resources in order to survive. This model assumes conflict. Powerful agencies will cause or influence other agencies to interact. Thirdly there were accounts based on the idea of mandated co-ordination. This model assumes a superordinate power. Agencies work together because they are required by a higher power to do so. While the first two approaches are concerned with horizontal or lateral relationships between agencies, the third is concerned with a hierarchical approach. These approaches set out to explain why agencies and their members develop the working relationships that they do. Their worth, though, is limited because of their concentration on selected explanatory variables. In practice, they are not mutually exclusive. This was recognised by Hallett who, in her subsequent study, identified a pragmatic approach which sought to balance the extent of acquiescence to a mandate with the rewards and constraints indicated by the other theories [1995a: 23-24]. A review by

15

Alaszewski and Harrison [1988] of approaches to the study of co-ordination also suggested three approaches. There is some overlap with the classification just outlined. They noted studies that examined variables in relationships such as power and dependency and also that looked at specific patterns of relations between networks and between participants in different organisations. They also, though, highlighted approaches which examined the assumptive worlds of different participants in collaborative ventures. What is highlighted is the complexity of the issue and the variety of different analytic approaches.

Hallett and Birchall subsequently published two major studies on inter-agency co-ordination and working together in child protection [Birchall & Hallett 1995; Hallett 1995a]. The first study was based on a postal survey of over 300 practitioners concerned to some degree with child protection in the north of England [Birchall & Hallett 1995]. This explored the perceptions by workers of how they would see child protection issues being handled and their experiences of their local inter-professional networks. The second [Hallett 1995a] was a case study of inter-agency co-ordination, again in the north of England. This study was based on a sample of child abuse cases and involved interviews with and questionnaires completed by relevant professionals. The publication of these studies occurred after the early research for the current study was complete. However, they have provided a valuable reference point in the discussion of data.

This study aimed to explore a series of issues:
- why the issue of working together has featured so consistently on the policy agenda;
- the nature of the responses advocated to deal with the challenge of securing appropriate relationships between agencies and workers;
- the perspectives of workers involved in different agencies and occupations on working with others;

-    the impact attempts to change these relationships have had over time. It therefore differs from the other studies in a number of important respects. In particular it is concerned with change over the duration of several years, with fieldwork covering the period from the mid 1980s to the mid 1990s. This is reflected firstly in its greater concentration on the changing thrust of policy aimed at facilitating or encouraging particular patterns of working together. Secondly it directly explores the changes in expectation of working with others by individuals responsible for delivering the service. Thirdly it is based on a distinctive theoretical framework using the concept of loosely coupled systems [Weick 1976]. This theory, which is described in Chapter 2, was chosen because it seemed to have the potential to cope with the complexity of relationships between workers in different settings and to accommodate changing situations. It also relates to the assumptive worlds of participants by stressing the importance of their interpretation of how the system, they are part of, works. Fourthly, through the fieldwork, the study focuses in particular on the relationships and perceptions of selected workers operating in educational settings as well as exploring the world of social workers. In so doing it responds to a concern that the idea that schools were an integral part of the welfare network was not at that time easily accepted by teachers and other welfare professions working with children and their families [Welton 1982:271]. It therefore has a greater focus on head teachers, education welfare officers and school nurses than the other studies.

The following chapter sets out the theoretical framework for the study. This, as indicated above, was developed from the theory of loosely coupled systems. The nature of the explanatory framework which this offers is explored and from that a rationale for examining the topic is developed. The research strategy derived from this is then described. In particular this sets out the approach to empirical methods for the fieldwork with education welfare officers, head teachers, social workers and school nurses. Unlike the other studies referred to above,

17

however, [Birchall and Hallett, 1995; Hallett, 1995a] the research site was visited twice with an interval of eight to nine years, so that a measurement of change to views on the handling of situations involving children could be made. Having set out the framework, the next sections analyze the policies that have been pursued to try to bring about appropriate patterns of working together. After that, the results of the fieldwork are reported. This involves first, the analysis of responses to the vignettes and secondly, an account of the views of workers on aspects of working together. This is followed by a discussion of the results and conclusions.

The next chapter, then, sets out the theoretical framework for the study.

Chapter 2

FRAMEWORK FOR ANALYSIS

Theoretical Perspectives: Systems Theory.

The analysis draws upon imagery developed from systems theory [see for example Beishon and Peters, 1976; Beishon, 1980; Cameron and Harry, 1983; Scott, 1992] to examine the co-ordination of welfare services for children at risk of abuse or neglect. In essence, a system is a series of parts which are assembled together to fulfil particular tasks or purposes with a recognition that those parts are somehow related. These parts interact in specific ways so that identifiable consequences or events follow. Above the level of the simplest systems, it is recognised that the component parts of a system may be systems in their own right and so can be viewed as subsystems. The observer by accepting the overall inter-relationship can therefore conceptualise these various parts as a single whole. At this level, the idea is a simple one reflecting the everyday usage of the word 'system'. It is, however, an omnibus term in that thus expressed it encompasses everything from the simplest physical construction to complex abstract assemblages like 'the economy'. Somewhere between these extremes are to be found a range of systems pursuing intermediate range goals. These include systems of people and equipment brought together in a variety of social organisations such as firms and public authorities. It is with the last of these that this study is concerned.

Systems theory has developed to encompass a range of different perspectives and interpretations the detailed analysis of which falls outside the scope of this work [for a useful overview see Scott 1992] but a brief review is offered to set the context. Early approaches treated systems as self contained entities 'closed' off from the wider environment and capable of being 'rationally' constructed to provide the most efficient means of attaining goals, leading to ideas of 'scientific

management'. From this starting point, systems theory has been challenged on both these central assumptions. First have developed ideas which question the 'rationality' of social systems. It is argued that systems do not necessarily present a picture of efficiently focused pursuit of stated goals. It is preferred, therefore, to present them as 'natural' organisms acknowledging conflicting interests at work within systems with a recognition of the importance of 'human relations'. These conflicting interests might operate at an individual level or reflect contested interests between subsystems. Second has been the argument that systems cannot be isolated from the wider environment but are 'open' to and interact with it. For some organisational systems, survival may depend upon success in adapting to the wider environment. A plethora of different approaches to explaining systems [see Scott 1992 especially chapter 5] balance their analysis with different weightings of rational, natural and open or closed characteristics.

This study adopts a perspective which allows for the openness of systems to their environment, recognises the potential for divergence among subsystems and attempts to grapple with the apparent irrationality of systems behaviour which can cause frustration for policy makers, managers and participants generally. This theory conceives of organisations as 'loosely coupled systems' [Glassman 1973; Weick 1976; Perrow 1984; Orton and Weick 1990]. This chapter will focus upon this theoretical approach. First, however, the nature of the child welfare system to which it will be applied is outlined.

The provision of services for children at risk of abuse or neglect involves a variety of agencies each with their own hierarchies and operating in different contexts. These agencies together form a child welfare system. In the case of the major relevant agencies, though, child welfare is only part of the task of those agencies. The child welfare system incorporates, from those agencies, the parts which are concerned with children at risk. So the relevant child

welfare system would include sub systems of different agencies such as health, education, social services the police and others. Put together these form a complex network. The different parts will be related to one another in the child protection system as well as being related to their parent system. They may at times also provide a conduit via which events in one parent system affect another. In such a situation, there can be no simple act of co-ordination but rather a multiplicity of adjustments to variety of relationships. At some times. co-ordination may be required within organisations or agencies, while at others, it may be required between agencies. The mechanisms for achieving this may include control by a parent organisation. Alternatively, horizontal adjustments and accommodations between partners who could be members of different organisations may be required.

Identifying Loosely Coupled Systems

As noted above, this study draws upon the theory of loosely coupled systems as an aid to the analysis and interpretation of issues of co-ordinating services for children at risk. Studies taking a loosely coupled systems framework have usefully been applied elsewhere in analysing inter-disciplinary situations [eg Koff et al, 1994] or situations raising issues of co-ordination [eg Schwartz, 1992 and 1994]. Approaches based on the theory of loosely coupled systems have flourished following a key article by Weick [1976] which raised many of the issues discussed in this chapter. Perrow [1984] and Scott [1992] provide accessible accounts of its main features. The idea of coupling is used to describe the relationship between sets of events. Events are coupled when they are responsive to one another. Action 'A' is followed by response 'B', for example a request for something to be done results in it happening. When this happens and the fact that it will happen can be predicted with a high degree of certainty the coupling could be said to be tight [Glassman 1973: 84-85]. The tightest of coupling would bring an automatic and inevitable response, as in a servo system. The theory suggests that often in complex organisations the

relationship between events is not clear. This is reflected by the addition of the descriptor "loose" to the nature of the coupling, reflecting the strength of responsiveness between events and the certainty with which the outcome can be predicted. Action 'A' may not be followed by response 'B'. A request for something to be done may not result in it happening. However there remains sufficient chance of cause and effect for the description of decoupled or non coupled to be inappropriate. Welfare agencies can be fitted into this pattern. Perrow, for example, sees them as complex organisations which can be characterised in this way [1984: 97]. The agencies and workers concerned with the needs of children operate in situations where responsiveness is expected when concerns are aroused for the welfare of a child. The perception that there is a co-ordination problem may suggest that coupling is too tight and is triggering off inappropriate responses and that workers are interfering where they should leave alone. More frequently, however,it suggests that the desired predictability is lacking, leading to frustration and anger that nothing has been done and that a child has been harmed. Both these problems have affected services for children [see chapter 4].

The mechanisms which are designed to facilitate the linking of events are embodied in organisational design. This organisational architecture can also be described as loosely coupled. It matches that identified as loosely coupled by computer scientists when describing interaction between processors when each unit can function independently but nevertheless can communicate with another [Lenehan and Fung 1980: 163]. The improvement of co-ordination can be seen as changing the strength of coupling to bring about desired outcomes. When couplings are described in terms of relationships between events the emphasis is upon coupling achieved through processes. When they are thought of in terms of architecture and the units that do the processing then the emphasis is upon structure.

In the case of services for children at risk of abuse or neglect, workers at the heart of the system are affected by various sets of couplings. These include those within their own particular sub-system, those back into their parent agency, and those across to relevant parts of other agencies. Outcomes will be affected by the relative balance of these different couplings. Within a systems approach, the improvement of co-ordination involves adjusting the couplings to achieve desired responses. This being the case, efforts to bring about change might be targeted within systems or across systems. In terms of analysis, this means a similar range of possible foci. The focus could be on the higher inter-organisational level or the more immediate intra-organisation level. Here Weick notes the assertion derived from Simon [1962] "that in any set of systems ties within a subsystem are stronger than ties between subsystems" [Weick 1982a: 383]. He goes on to observe that the concept of loose coupling has been said to apply only to higher levels of analysis [ibid]. If this were so it could be argued that couplings between agencies [viewed as subsystems] would be looser than those within agencies which would be tighter. It might therefore follow that the former case could be identified as loosely coupled and the latter not. This means though that the definition of looseness or otherwise would depend arbitrarily upon the level of organisation chosen by the analyst. Weick points out that "pragmatically, a higher level of analysis is *anything* above the level at which the investigator concentrates" [1982a: 383, original emphasis].

Loose coupling can however be fruitfully employed from the level of the individual organism to inter-organisational networks [ibid]. Loose coupling is not an absolute condition [Firestone et al 1984]. Coupling is a relative concept. Its usefulness lies in the relationship between altered states of coupling and resultant modification of events. Coupling is potentially a dynamic phenomenon and not a static condition. A study of co-ordination between the workers in different agencies concerned with children at risk at a higher level is concerned with a child welfare system. Thus, it puts the spotlight on the couplings at

inter-organisational level. In turn these may, though, be affected by events within those same organisations. So studying co-ordination between agencies or systems involves looking at how couplings at all levels tighten and loosen.

The challenge for the policy maker and manager is to identify strategies that will bring about the appropriate balance of couplings to provide an appropriately co-ordinated service. A range of strategies was discussed by Corwin [1981] who was concerned with patterns of organisational control in educational settings. He identified a number of methods of achieving this. In practice, those on his list overlap and intertwine so that the picture is always likely to be confused. From the tangle, Corwin pulled out means of control he categorised as follows. Firstly he identified authority, for example through hierarchy. Secondly he distinguished coercion, for example through strict styles of administration likely to be objectionable to members. Thirdly he listed exchange, for example through negotiation and reciprocity. Fourthly he added constraint under which he included sanctions and "co-ordinating mechanisms" [1981: 273]. Under the sub heading of "co-ordination" he identified further strategies including "standardisation" and "socialisation". Standardisation involves formal rules setting out qualifications, roles and methods of working. Socialisation would include occupational and organisational ideologies. Some of these issues will be looked at again when the ways in which researchers have used the theory of loosely coupled systems are examined.

The Nature of Loosely Coupled Systems
Weick has suggested a number of characteristics or functions of loosely coupled systems. He counsels against a normative approach but does concede a "mildly affectionate stance", arguing that some of these characteristics may be seen as advantages albeit counterbalanced by disadvantages. Loose coupling means that systems may not be immediately responsive to events. This protects them

from an intolerable degree of adjustment and change in a complex and turbulent environment and provides stability. Systems survive because they are not responsive to events rather than because they are. Loose coupling is therefore a means to persistence over time [Weick 1976: 6]. Much of the work on loosely coupled systems has dealt with educational systems where it has been argued that the teaching sub-systems have been loosely coupled to the administration with the result that, whatever attempts administrators have made to modify the behaviour of teachers, they have failed to elicit the desired response and existing teaching systems have survived [eg Deal and Celotti 1980]. Similarly Davenport suggests that Soviet civil-military relations in the Brezhnev era constituted a loosely coupled system where threats from restive military officers could be sealed off from the decision making process "thus ensuring the maintenance of a stable civil-military balance" [1995: 176]. Loose coupling then can be seen as a means to success measured by ability to survive. Problems arise when such perseverance is seen to be anachronistic or even detrimental to the achievement of desired goals. This would be the case, for example, if workers dealing with children continued to operate in established patterns and were unresponsive to stimuli to adapt in order to reflect new understandings of the needs of children. Corwin suggests that, although up to a point turbulence fosters loose coupling in a system to help it cope with its changing environment, eventually a threshold will be crossed and organisations will respond with "greater centralisation, standardisation, and close supervision" [1981:276].

Weick proceeds to suggest a further series of overlapping potential advantages of loosely coupled systems. Where a system is composed of loosely coupled sub-systems, it may be more sensitive to its environment. Such systems "preserve many more independent sensing elements and therefore 'know' their environments better than is true for more tightly coupled systems which have fewer externally constrained independent elements" [1976: 6]. So, for example in child welfare, if one agency or part of the system fails to respond to a hitherto

unrecognised problem it may be picked up elsewhere. Over sensitivity could however be a drawback in producing "faddish responses and interpretations" [ibid]. In a similar vein Weick argues that " a loosely coupled system may be a good system for localised adaptation" [ibid] in that adaptation can take place without the whole system being affected and he claims "the antithesis of localised adaptation is standardisation". Co-ordination aimed at standardisation therefore implies tight coupling. Loosely coupled systems on the other hand rather than being standardised can "retain a greater number of mutations and novel solutions than would be the case with tightly coupled systems [Weick 1976: 7] and should thus be better able to adapt to radical changes in their environment. This may seem particularly appropriate in protecting children at risk of abuse or neglect, where each situation will be unique in some way which may require a particular response. Conversely, it should be pointed out that the same 'looseness' could hinder the spread of advantageous adaptations between systems simply because of their quality of being little affected by one another. This in turn could represent an advantage where the adaptation might be seen as a 'breakdown' because that breakdown "is sealed off and does not affect other portions of the organisation" [Weick 1976: 7]. This isolation , however, Weick points out may also make repair difficult.

Developing his arguments further, Weick suggests "that in a loosely coupled system there is more room available for self determination by the actors" [1976: 7-8]. Because responses in a loosely coupled system are not precisely defined then a variety of responses could be justified or at least explained. This observation appears particularly pertinent in professional spheres where different sets of workers claim expertise and the right to exercise independent judgement. Indeed Lutz and Lutz [1988: 43] commend the affinity between loose coupling as an organisational model and professional organisations. If this is the case generally, then it is particularly so in the sphere of child welfare which is peopled by workers claiming to exercise professional judgement or to have discretion

over their actions. The implication is, though, that choice of action may need to be justified or explained. Thus there is scope for negotiation between actors within the system who may each defend their response to a situation as being consistent with a desired outcome. This could be seen as part of the process of participants trying to make sense of their world [Foster 1983: 12]. It follows from this, that part of the research task in analysing a system identified as loosely coupled is concerned with the perceptions and interpretations of individuals within the system, since this will reflect their construction of reality. This is an area which has been explored less than it has been acknowledged in studies using a loosely coupled systems framework.

Finally Weick suggests loosely coupled systems have resource implications. To increase the tightness of coupling would increase cost because it takes time and money to co-ordinate people [1976: 8]. Loose coupling, on the other hand, may mean that resource allocation, which could include personnel as well as money, may be irrational because the controls are not in place. In the case of child welfare, this may mean one part of the system being relatively deprived, say of money and staffing, relative to another. There is therefore a question concerning the extent to which allocation of resources is seen as problematic and how far altering the balance of coupling may lead to an improved situation. However, it should also be considered whether the allocation of resources should be seen as one of the mechanisms of control which may be used to bring about change in a loosely coupled situation. It could be viewed as an instrument in its own right [Covaleski and Dirsmith, 1983; Covaleski, Dirsmith & Jablonsky, 1985] or as a tool in one of Corwin's [1981] strategies of coercion, negotiation or the exercise of authority. This debate about what may be used as a controlling mechanism leads on to issues of what does determine the strength of coupling and what can be changed to bring about desired outcomes.

Coupling Variables

In an early paper developing the theory of loosely coupled systems, Glassman argued that

> The degree of coupling , or interaction, between two systems depends on the activity of the variables which they share [1973: 84].

Potentially there may be any number of variables held in common. These could include those wilfully engineered and those not necessarily deliberately intended. The idea of 'activity' of the variables introduces a qualitative aspect. One very active variable may be the equivalent of numerous less active ones. It may outweigh them or conversely be outweighed by them. If variables held in common tend to pull together, then conversely, if there are significant differences in key variables these will represent negative forces, repelling rather than attracting. The overall bond between systems may be a balance between both positive and negative forces. From this it follows that loosening coupling in one direction may lead to the slack being taken up with tighter coupling elsewhere. The situation is likely not to be static as the activity of particular variables may change or they may be activated only some of the time. This reinforces the point that to understand the success or otherwise of attempts to achieve co-ordination will involve understanding how different variables have become more or less potent at particular times. As these changes occur, different patterns of co-ordination will emerge so, for example, administrative controls and professionalism may ebb and flow in counterpoise to maintain equilibrium [Corwin 1981:275].

What precisely is it that is joined by these variables? The reply which Weick gives to these questions is very open. Although he denies that the list is infinite he suggests that the term 'loose coupling' connotes 'any things' that may be tied together either weakly or infrequently or slowly with minimal inter-dependence [1976: 5]. What is joined he terms 'elements'. Elements may be as diverse as "yesterday and tomorrow [what happened yesterday may be tightly or loosely

28

coupled with what happens tomorrow]" [ibid] or they may be tasks or roles or organisational positions or rewards or sanctions. This range of elements is almost too extensive to be helpful, covering as it does abstract concepts, activities, descriptions and events.

Given this wide focus, the selection of variables may be equally open and needs to be selected for its relevance to the situation under examination. It may range from something as general as the idea of 'culture' [Firestone 1985: 20] to the provision of curricular materials to a school [Gamoran and Dreeben 1986: 612]. One of the more frequently discussed coupling variables or mechanisms is the technical core of an organisation where couplings are task induced [Weick 1976: 4]. Services such as education, health, social work and the police are brought together because they share a task. In terms of the present study the task of enhancing child welfare is seen to be relevant to each of them. However if couplings are task induced then variations in the task will lead to changes in coupling patterns. The exact pattern of that coupling will reflect the significance to each sub-system [represented by the people in it] of that task. This may include not merely perceptions of relevance to themselves but also perceptions of relevance to others. If, for example, a task is seen by workers in education as central to education but peripheral to health this will set up a different set of couplings than if it is seen as central to both. It can be asked, therefore, how far changes in patterns of couplings in child welfare have occurred, not because they were inadequate to the task, but because the definition of the task changed. The definition of the task is something which may be changed in response to changes in the wider environment. So, for example, dramatic changes in the political environment can create pressures to alter the strength of couplings [eg Hagan 1989; Welsh and Pontell 1991]. These issues are discussed in chapters 3 and 4 which trace changing policies for co-ordinating services for children at risk and events stimulating these changes.

Focusing on the task emphasises goals or ends. The task, goal or end is now seen to be to protect a child. When organisations are set up to achieve these ends they may embody sophisticated and elaborate administrative structures. The rationale for this is that these structures are the embodiment of a coupling structure that ensures that goals are met. When organisations are described as loosely coupled, however, doubt is cast upon the efficacy of these structures. Outcomes may seem little affected, whatever adjustments are made to this structure [Regoli et al 1988]. Worse still outcomes may be "mischievous" or the product of "outrageous chance" [Lutz and Lutz 1988]. Why then is so much work done on developing these structures? Meyer and Rowan [1983] have argued that formal structure can be seen as myth and ceremony. This occurs in situations where intentions and outcomes are loosely coupled to the extent that goal achievement may in reality be problematic and, perhaps because the goal itself is not clear, or because of the complexity of the task , success may not be assured. At the same time there may exist a general expectation that the goal is attainable and the responsible agencies have the skills and resources to deliver. There may also be general expectations of what an agency should look like and what it should be doing. In these circumstances the administrative activities become ceremonies and they and the accompanying structures help to perpetuate a myth that the agency is efficiently pursuing its goals. They can, however, provide a coupling mechanism as symbols which reflect the [changing] definition of the task and create or reinforce value systems. This line of analysis has been pursued in a number of settings. Covaleski et al [1985] for example have seen budgeting mechanisms as a reflection of social construction reflecting what is seen as important rather than as a means to technical efficiency. Thomas [1983] has argued that the court process provides a ritual concealing a discrepancy between ideals and practice. Darden et al [1989] argue a similar case in product liability suits. In each of these cases the formal processes provide a veneer of rationality which hides other social factors and interactions.

These observations mirror the views of Peters and Waterman [1982] who concluded in their search for excellence that formal coupling mechanisms, aimed at supervising work and standardising processes and outcomes were looser than implicit social conventions [Firestone, 1985: 21]. They argued where tight coupling was required but standardisation was not enough it could be achieved through a shared culture and a common set of values and way of seeing things. One way of achieving this would be through ritual and ceremony as identified by Meyer and Rowan [1983] which would reinforce relevant values and sustain the appropriate culture.

Using a Coupling Framework

In this study, the aim is to use the theory of loosely coupled systems to provide a meta-theoretical perspective, to derive ways of looking at the issues of working together. The intention is not to offer a test of the robustness of the theory itself, but to capitalise on its value as a heuristic device. It has been used in such a way in a range of disciplines from educational administration where it came to prominence [eg Hoyle 1986] through social work [Gummer 1982] and political analysis [Phillips 1991], psychiatry [Niwa et al 1992], criminology [Marquat et al 1993] to military studies [Davenport 1995]. It has, however, remained an elusive set of concepts. In part this may be because loose coupling is conceived in terms of what does not happen rather than what does. While the dominant scientific paradigm has been one of rationality a loosely coupled world is one that challenges rationality. Das [1984] notes that Weick has observed that the umbrella of loose coupling covers a variety of different phenomena although there is no agreement on what those phenomena have in common. Das proceeds to argue that while any idea will have elements of ambiguity this will be the case particularly with the idea of loose coupling because

it manages to combine and mix up, in head on collision and coalescence, two apparently opposing 'qualities ' or conceptual schemata... [1984: 262].

It is impossible to apply a precise meaning to the term if one is to remain faithful to the meaning of the constituent words "coupling" and "loose". This, however, is also the characteristic which makes the idea so useful. Because it juxtaposes two unlikely 'idea terms' it stimulates new ways of looking at events and facilitates new insights.

Certainly the theory of loosely coupled systems has been a stimulant of a variety of research approaches. These have been reviewed by Orton and Weick [1990]. They acknowledge the tension between the elements of the terminology and argue that the imagery is intended to portray a dialectic. This being the case, the theory is intended to be used in a manner which emphasises process rather than flat static descriptions. There is a recognition that controls and influences do not pass in a steady predictable fashion from element to element so the focus needs to be on the variable tension between them. The work which Orton and Weick review is classified into five categories or voices. Their analysis is reviewed here and is supplemented, where appropriate by further examples from the literature.

1 *The voice of causation*

This asks why systems become loosely coupled. Three explanations are identified: "causal indeterminacy, fragmentation of the external environment and fragmentation of the internal environment" [Orton and Weick 1990: 206].

Causal indeterminacy relates to situations where the connections between ends and means are not clear [see for example Glassman 1973]. This may be because of limitations of perception where people cannot see the whole picture [cf March and Simon's concept of 'bounded rationality', 1958]. Or it may be

32

because of uncertainty about whether the tools available are capable of producing the desired product - a concern explored by Meyer and Rowan [1983]. Or it may be that there is ambiguity, for example, over what is wanted by decision makers. Contractor and Erlich, for example, offer a case study of the creation of an inter-disciplinary research facility to "argue that strategically ambiguous messages play a key role in the birth of loosely coupled organisations" [1993: 251].

Secondly the notion of a fragmented environment is said by Orton and Weick to usually take the form of either "dispersed stimuli or incompatible expectations" [1990: 207]. The first of these requires a mechanism that can deal with these stimuli as they occur. Ghosh [1993] outlines a relevant computer based model which offers a useful metaphor for human organisations in this respect. He describes a system of loosely coupled parallel processors which can allow a high throughput of dispersed, complex banking transactions thus performing a task far more successfully than a tightly coupled system could. The second, incompatibility of expectations, requires an organisational form that can appear at least to square the circle. Covaleski and Dirsmith [1983] describe such a scenario where health care organisations are expected to provide health care as a right but are simultaneously expected to contain costs. They suggest this will lead to new organisational forms and argue for the appropriateness of a loosely coupled system in this situation.

The third explanation for causal indeterminacy relates to a fragmented internal environment where most participants are involved only infrequently or to a limited extent. In Weick's terms if they are asked to respond

> suddenly [rather than continuously], ... occasionally [rather than constantly], ... negligibly [rather than significantly], ... indirectly [rather than directly, and, ... eventually [rather than immediately] [1982a: 380].

There is a risk here of tautology where characteristics of organisations might be

taken simultaneously as evidence of a loosely coupled system and as a cause of a loosely coupled system. This risk perhaps also applies to Orton and Weick's second example of a fragmented internal environment. This is when it is fragmented in terms of workers able to operate independently. Here, using the language of Lipsky [1980], they choose the example of 'street level bureaucrats' with power to re-interpret rules at the point of consumption, an issue which is explored in relation to social work by Sunesson [1985]. Through this example Orton and Weick locate the fragmentation at the level of the individual. They do not mention the possibility of other intermediate groupings within the system. However, Corwin for example, notes the issues raised by the number and distribution of what he terms 'echelons' within an organisation [1981: 279]. Orton and Weick's last illustration of a fragmented internal environment concerned competition for control of proceedings and meanings as for example in Thomas's 1983 study in which the goals of "due process" of law and the contradictions inherent in the conventions of judicial practice are examined.

From the perspective of the present study, it is possible to derive from this analysis of the theory, issues to be reviewed in considering whether there are legitimate grounds for expecting the child welfare system to be loosely coupled. Has it always been clear how the means available will achieve the ends desired? How far have the actors involved been able to see the whole picture relevant to their system? Have the tools available been capable of achieving the result? Have workers been subject to ambiguous expectations? Has the system evolved to deal with scattered stimuli? Have members of the child welfare system been subject to incompatible expectations? Have they an interest in all aspects of the system and are they constantly involved? Are there loosely coupled echelons of workers? Does the 'street bureaucrat' model [Lipsky, 1980; Sunesson, 1985] apply to the way they have worked - do workers have discretion? Has there been any evidence of competition between those in child welfare to impose their meanings and methods at the expense of others?

34

2. *The voice of typology*

This is found in studies of a more descriptive kind which use loose coupling as an analytic tool rather than a set of causal propositions. Orton and Weick identify the eight most frequently mentioned types of loose coupling. These can be classified into two categories as indicated earlier. First is the structural - among individuals, subunits, organisations and between hierarchical levels, and between organisations and environments. Second is the abstract - "among ideas, between activities, and between intentions and actions" [1990: 208].

Studies based on structural elements are straightforward to identify. Firstly, at the individual level, Rossmiller [1992] used the concepts of loosely coupled systems in making sense of the relationships between school principals and teachers. Secondly, the interaction of sub units within an organisation was looked at by Telem [1990], who explored relationships between administrative and instructional subsystems in schools. Thirdly, at the inter-organisational level, Schwartz [1992] used a structural approach as an explanatory framework when looking at issues of co-operation between libraries. Fourthly, vertical coupling was examined by Rubin[1979], who considered it in her attempt to understand the ability of universities to cope with cuts. Fifthly, in terms of organisations and their environment, Welsh and Pontell [1991] examined the relationship between patterns of coupling between organisations in the criminal justice system, in response to environmental pressures applied through court ordered change.

Moving on to the abstract formulations of loose coupling, the first of these identified above was between ideas. Examples of studies which represent this genre would be those that emphasise culture. When Peters and Waterman [1982] stressed culture as co-ordinating variable they were, in effect, arguing that there was a relationship between dominant ideas and patterns of coupling which managers could profitably manipulate. Conversely Meyerson and Martin [1987:

634] pointed to the possibility of sets of ideas in different parts of an organisation emerging outside the control of top management. Secondly, in terms of the abstract category, the idea of loose coupling between activities refers to "the actions, events, or sequences within organisations, rather than specific entities or levels" [Orton and Weick 1990: 209]. This focus is particularly pertinent in terms of co-ordination which is concerned with the 'proper' relationship between events. So, for example, Perrow [1984] is concerned to clarify how patterns of couplings relate to sequences of actions and events leading to disaster. When Corwin [1981] considers strategies for co-ordination he examines, inter alia, how supervisory activities relate to militant activity by teachers. Thirdly, in this the category of abstract typologies, are those studies which are concerned with loose coupling between intentions and actions. Here, the concern is to understand the unpredictable or failed implementation of intentions. One such study is that by Withane [1984] who argues that the balance of coupling between planning and local and central government in Sri Lanka led to failed policy implementation. Another is the work of Marquat et al [1993] which examines how 'war on drugs' policies aimed at tougher penalties were frustrated by "symbolic punishment" facilitated by "early" release of offenders.

In understanding issues of co-ordination in welfare services for children, the voice of typology is central. How relevant are these different types of coupling? What understandings about the relationships between the individuals working in this system can be gleaned from the field of loosely coupled systems theory? What does that theory tell us about the relationships between the different agencies which form the sub units of that system? Are there insights to be found on how the parent organisations of these sub units are related to one another? Is light shed on the relationship between those in the child welfare system and pressures on them from the wider social and political environment? Does the concept of loosely coupled ideas and divergent cultures help to explain the level of co-ordination in the system? Does the idea of loosely coupled activities

36

provide a useful model in comprehending the operation of the child welfare system? Can the extent of failure to successfully implement intended policies be understood better by the application of a loose coupling analysis? How can an analysis of co-ordination capture the dynamics of process and avoid the inertia of static description?

3. *The voice of direct effects*

Here Orton and Weick are concerned with studies predicated on the idea that loose coupling is good because of its effects for example in allowing adaptability. Whereas with studies of causation, loose coupling is the dependent variable, here it becomes the independent variable. To some extent the characteristics of an organisation which were seen to ease couplings are now seen to be desirable consequences of loose coupling. Orton and Weick identify as the three most frequent direct effects "modularity, requisite variety and discretion". Although Orton and Weick explicitly talk about direct effects in a context of desirability and attractiveness, it should be noted that the effects identified here are not in themselves good or bad. The evaluative component is derived from the perceived consequences of that effect.

When Orton and Weick refer to 'modularity' they are introducing a term not previously conspicuous in the literature on loosely coupled systems although the concept it implies is familiar territory. 'Modularity' suggests that loosely coupled systems will take the form of relatively free standing entities which may be linked to others but are not of themselves necessarily considered integral to the process. Their links may be as much lateral as vertical. In this respect a modular system may be thought of as one that is not linear. Perrow [1984] looks at the nuclear industry as inevitably complex as opposed to linear. That complexity is dealt with by a system with modular characteristics and although Perrow recognises the limitations of complexity thus arranged he also argues the benefits of efficiency [19840 :88-89]. Jones [1984: 692] refers to 'horizontal

37

differentiation' which again might be construed as a version of modularity. He argues that it facilitates greater organisational control. Useful parallels can also again be drawn from the world of computing. Boulanger and Escobar [1993] for example describe a computing system for analysing global climate change. Here the term 'module' is a proxy for 'processor'. One advantage argued here is allowing different parts to proceed at different rates and not be dominated by the most time sensitive elements. These advantages are also linked to the notion of 'requisite variety' which allows an organisation or system to sense accurately messages from the environment. Again examples can be found in the work of Perrow [1984] which explores the likelihood of impending problems being detected and that of Boulanger and Escobar [1993] which identifies the need to accurately collect and deal with climate information from different sources.

When Orton and Weick talk of 'discretion' as the last of their triumvirate of direct effects they are concerned with two types. The first is 'behavioural discretion' which relates to "the capacity for autonomous action". The second is 'cognitive discretion' which is "the freedom to perceive or construct an idiosyncratic meaning" [1990: 210-11]. Again these are not characteristics which are intrinsically good or bad but which may be seen to be desirable in relevant circumstances. Reference has been made earlier in this chapter to the study by Lutz and Lutz [1988] which accepts the appropriateness, in a loosely coupled system, of autonomy allowed to staff running a student teacher program [sic]. Still on the topic of teacher education Gideonse argues that

> Loose coupling is not, therefore , a deficiency that systemic reform should overcome so much as a desideratum for educators in highly idiosyncratic sites with changing particularities who must serve through means and ends that are themselves warmly contested [1993: 395].

Loose coupling is argued to be suitable in situations where technical competence is insufficient and a 'professional' approach is required because workers are dealing with situations that are intricate, specific and "defy direction from the

center" [Gideonse 1993: 421]. It should in passing be noted that while these examples refer to the connections between autonomy and professionalism with overtones of a framework of moral values, such autonomy may allow other ranges of choices operating different moral conventions. Indeed the example of behavioural discretion discussed by Orton and Weick concerns unlawful behaviour [Vaughan 1982].

The second variant of discretion mentioned was that of cognitive discretion. Here the logic is that actors in loosely coupled systems will create their own interpretation of their situation which may not accord with that of others. However, by doing so they make sense of events which might otherwise have no meaning and give themselves a workable framework for action. So Contractor and Erlich having argued that causal indeterminacy based on ambiguity led to the creation of a loosely coupled system [research facility] then follow the circuit to the observation that it was "well suited to foster multiple meanings among various constituents in this social market" [1993: 274]. Some interpretations may stay with the individual. Others may be shared as sub-cultures. Daft and Weick [1984] suggest that there is an organisational process which allows individuals to come and go but for organisational mental maps to persevere.

The notion of discretion, then, is in itself a complex one. When looking at a system it raises issues not only of the type of discretion as discussed above but also its size and scope, its legitimacy and the hierarchical level at which it is exercised.

The presentation of "Direct Effects" within a normative framework suggests the need for a cautious research approach. Modularity, requisite variety and discretion can only be scored on a scale of virtue in a given context. What these studies do, however, is put a range of issues in the research spotlight. What are

39

the implications for efficiency of altered states of coupling? Does looseness of coupling help child welfare agencies deal effectively with the complexity of the situations faced? Do different degrees of coupling, for example. have an impact on coping with issues of time scale? Does loose coupling enable agencies involved in child welfare to operate at an appropriate pace without being harried or hindered by other parts of the system? How does the spread of sensing through a range of elements [if indeed that is the situation] relate to the nature of coupling and the achievement of goals? Do agencies, connected in a loosely coupled system, successfully identify the needs of children and deal with them effectively? What is the evidence of behavioural discretion and how does it relate to task completion? How free are workers in the child welfare system to act as they wish and what are the results? What is the evidence for cognitive discretion? To what extent do different workers in the child welfare system agree with one another in their interpretations of situations which they face? What evidence of changes in coupling can be found in changing levels of agreement between workers?

4. *The voice of compensation*

Here Orton and Weick identify studies which criticise loose coupling as an unsatisfactory condition in need of tightening and explore strategies to achieve this end. They suggest that researchers "search for non-obvious sources of order that administrators can use to influence dispersed organisations" and claim that the strategies for regularity [which others may not necessarily consider that obscure] most often identified are "enhanced leadership, focused effort, and shared values" [1990: 211]. Usually the focus is on one or few variables which may be manipulated.

Enhanced leadership could take a variety of forms. It could provide a clear focal point piercing the ambiguity to give a sense of direction and goal. Alternatively it could be pragmatic dexterity negotiating a balance between independence and

40

control. This dilemma for leaders is captured by Johnson who observes in her study of school leadership that

> superintendents must adapt their visions to the decentralised, loosely coupled character of schools ... Visions that are clear and captivating but that ignore the complexity of this environment may be dazzling in the short run, but useless in the long run ... [1993: 29].

By 'focused attention' is meant a concentration on specific aspects of the system. It reflects an incrementalist approach. Such an approach is advocated by Horne who writing about change within educational systems notes the failure to bring in changes via strategies based on rationalistic, bureaucratic models [1992: 97]. Orton and Weick do not, in this context, talk specifically about the imposition of rules. Rules may be seen to be dysfunctional in complex loosely coupled systems. Corwin, for example, observes that "if rules are not suspended so that specialists can function as such, conflict will ensue" [1981: 281]. However Orton and Weick do refer to a "focus on controllable and essential behaviours" [1990: 212]. Such a focus may involve the application of rules where behaviour can be controlled. The need, therefore, is to find the right balance of rules to produce desired rather than undesired outcomes.

The third mechanism for compensating loose coupling is the use of shared values. Shared values can be seen as the essential glue in a loosely coupled system as Orton and Weick observe:

> If organisations are determinate means-ends structures for attaining preferred outcomes, and if loose coupling is produced by uncertainties about these means-ends structures ... then agreement about preferences is the only source of order that is left. [1990: 212].

Again we can revisit the concepts of myths [Meyer and Rowan 1983] and culture [Peters and Waterman 1982] acting as counterweights to any decoupling tendency. Corwin [1981] talks of 'socialisation' and 'ideological models' and links this to the idea of organisational control through "self restraint". The need for these may be diminished by 'selective admission' into membership, allowing

in only those who have the basic accepted social outlook. At a practical level strategies for inculcating shared values might include training and staff development [Joyce 1982; Glatthorn 1981] as well as the successfully enhanced leadership already discussed.

These perspectives of compensation could usefully inform research by highlighting strategies that might be employed in situations where the system could be considered loosely coupled. Have any of these strategies been attempted by policy makers and managers in the child welfare system? Have they relied on strong leadership? Have they focused attention on particular behaviours in an attempt to control them? Have they sought to promote shared values? If any of these strategies have been attempted is there any evidence of impact on outcomes which could be attributed to them? How has the pattern of coupling been affected? The question of whether or not any possible changes might be considered desirable is a separate and evaluative issue.

5   The voice of organisational outcomes

This is the final voice identified by Orton and Weick and relates to studies which predict and measure the effect loose coupling will have on organisational performance. How do these studies differ from those concerned with 'direct effects' or 'compensation'? One answer would be to suggest that perhaps there is no normative pre-judgement on the desirability of loosely coupled systems. The other is based on the argument that it is the quality of looseness of a system which is the important factor. Analysts focus on this rather than particular coupling variables. Being a loosely coupled organisation is the independent variable rather than selected coupling mechanisms being independent variables. This voice, then, returns the discussion to many of the characteristics that were identified by theorists such as Weick and Glassman and discussed earlier in this chapter.

The outcomes suggested by Orton and Weick are "persistence, buffering, adaptability, satisfaction and effectiveness" [1990: 213]. A number of these 'outcomes' have already been discussed as characteristics of loosely coupled systems. For example the first 'persistence' which refers to the stability of a system and its ability to soak up stimuli without response has been discussed earlier as one to which Weick has a "mild affection" [1976: 6]. Similarly the second, 'Buffering', refers to the characteristic of being able to seal off parts of the system and insulate the rest against destabilising events. Such buffering might, however, equally cut out important stimuli for system survival.

Reference has also been made to adaptability, the third outcome, as a characteristic of loosely coupled systems. This refers to accommodation to change which Orton and Weick suggest [1990: 214] could be one of three types. The first is experimentation. So, for example, Koff argues that loosely coupled inter-disciplinary training programmes "can support creative and novel solutions to problems" [Koff et al, 1994: 11]. Secondly, adaptability is argued by Orton and Weick to be facilitated by 'collective judgement' [1990: 214]. They suggest this is why so many studies of loosely coupled systems have focused on organisations where collegial forms of management have been seen to be appropriate, for example schools. Thirdly, dissent is instrumental in facilitating adaptability because it acts as a catalyst. Loosely coupled systems will always contain this potential for dissent because of the elements of ambiguity and the need for actors to construct their own reality from it.

After adaptability Orton and Weick identify an outcome they label 'satisfaction' [1990: 215]. The use of this term suggests a favourable quality. Although they acknowledge the possibility of loneliness in a loosely coupled system, they refer positively to reduction in conflict, a sense of security and social exchange. Potentially, any study which examined the feelings of well being of participants in a loosely coupled setting could be said to be dealing with the outcome of

satisfaction So, for example, when Orton and Weick refer to the idea that a loosely coupled system provides a "haven of psychological safety in which deviance and experimentation are protected" [1990: 215] they are simply putting an evaluative spin on to processes which they have separately identified.

The final organisational outcome identified is that of 'effectiveness'. Do loosely coupled systems work to attain desired goals? The 'voices' of 'direct effects' and 'compensation' presuppose the answer to this question one way or the other and reference has already been made in that earlier discussion to studies which seek to comment on the success of loosely coupled organisations. Orton and Weick are concerned to avoid over simple interpretations which might suggest that loose coupling is either good or bad and are keen to foster a "dialectical interpretation" [1990: 216] which would explore the impact of different patterns of coupling on effectiveness. The appropriate pattern of tightness and looseness would depend upon a range of factors such as environmental factors and the approach to the task in hand.

For the purposes of the study of the child welfare system, the voice of outcomes serves as a reminder of the need to explore the extent to which the qualities of a loosely coupled system are evident and with what results. Has the child welfare system persisted unaffected by pressures for change? Have those within it displayed adaptability by adopting new approaches to sustain its continued functioning? Does the decision making style allow for participation and tolerate the existence of debate? In terms of satisfaction, how do those within the system feel about it? Does the child welfare system work?

The attempt to distinguish five distinct voices, representing different approaches to the use of the theory of loosely coupled systems reveals categories which are in practice inter-twined. For example, to talk of types of loose coupling will raise issues of the causes of loose coupling and the outcomes of loose coupling. To

44

talk of direct effects or compensation assumes particular organisational outcomes. Ideally Orton and Weick would like analysts to hold in mind the complex interplay of the different factors highlighted by these different voices and they lament the tendency of researchers to seek simple cause and effect relationships and to portray organisations in static descriptive terms. They argue instead for approaches which recognise the dynamic characteristics of organisations and recognise a coupling dialectic with ever-shifting patterns. They see the description of a system as loosely coupled as a beginning not an end. They argue, therefore, for studies which see organisations as part of an on going process [1990: 219]. They argue that the concept of loose coupling should be a useful tool in "understanding interpretive systems" and suggest that "what is most likely to be socially constructed is the system itself, not the world it faces" [1990: 218] and argue that members of loosely coupled systems are "likely to have thought deeply about interactions between couplings and decouplings" [1990: 219].

It is clear from this that, where possible, studies should recognise that patterns of couplings will change over time and that the interpretation of the system by its members is a fertile research ground.

Commentary

The discussion of the theory of loosely coupled systems has indicated a framework which has relevance for the organisation of child welfare and child protection services which contain the stimulants to loose coupling and display the typical characteristics of such a system. There is complexity and unpredictability. In the case of child welfare, the system is composed of a range of organisations [social work, education, health] putting the focus on inter-agency relationships and co-ordination. Loosely coupled systems have also been depicted as particularly pertinent in settings staffed by professionals, and the child welfare and protection system is staffed by a range of such workers, so

45

again this seems an appropriate model. In loosely coupled systems, a significant feature which was noted was the need for participants to interpret and make sense of their world, which suggests that a study of child welfare and protection should concern itself with the perceptions of those involved.

Loosely coupled systems have been seen to contain qualities of simultaneous virtue and vice, both of which seem relevant to the child welfare and protection services. In favour of loosely coupled systems was the argument that they could be adaptable because of the freedom allowed by loose ties - a desirable quality in a service designed to meet individual human need. Conversely they could be cushioned and sluggish when urgency and responsiveness were more appropriately the order of the day - a charge periodically laid against welfare services. What such services require, therefore, is a balance of coupling that is sufficiently loose to allow for sensitive response to complex and variable situations but which is not loose to the extent that there is a failure to acknowledge, respond and learn. As Corwin suggests "The pattern is what matters" [1981: 285].

Rationale for the Present Study

It has been shown that any analysis of the child welfare system drawing upon the theory of loosely coupled systems allows a range of foci. Couplings could be analyzed for example by reference to structures, processes or resources. The relationships between agencies will be affected by a balance of couplings within as well as between systems. In dynamic systems the balance of these couplings will change so relationships between different parts of the system will change. The balance of coupling could change for a number of reasons. This could reflect unplanned responses to events or be the result of deliberate policy interventions. In particular, it was suggested that the technical core of a system might be altered as the task required changed or the goal posts were moved. Such changes could be in response to significant events in the wider

46

environment. Things may not, however, be quite so straightforward. If couplings get adjusted in response to events it might be expected that outcomes would change in line with the new couplings. However, it has also been argued in this chapter that all the activity focused on changing relationships may in reality be a symbolic ritual offering reassurance but making no practical difference. Maybe changes which in themselves appear to have little immediate impact may nevertheless be increments to significant value shifts and change in the culture of an organisation. This suggests that an important research task would be to examine a system over time to assess whether attempts to change patterns of coupling did affect system *outcomes* or whether change was more apparent than real.

Most studies have taken fairly short periods in which to examine the reactions of loosely coupled systems. The key feature of this study, however, is that it examines the system over a longer period of time and is not just a snapshot or short clip. It thus takes into account the possibility that significant changes may take some time to have an effect and that some changes which may in the short term appear dramatic may in the longer view be less so.

The intention is to avoid the normative approaches to loosely coupled systems which suggest that they are intrinsically good or bad. The focus is much more upon using the insights of loose coupling theory as the cartographers tool to map and then re-map an organisational setting. As such it is concerned primarily with the voices of *Typology* and *Outcomes* [Orton and Weick 1990] using the theory to provide a framework for analysing patterns of relationships and developing a measure of the extent to which attempts to change the system had had an impact. The study takes a two fold approach to these tasks. Firstly it incorporates an analysis of policy and secondly it draws on fieldwork carried out with those operating the system.

The analysis of policy looks at how, over time, the map may have come to look how it does. It examines the twentieth century development of the relevant services and the relationships between them. It looks, in particular, at developments over the last quarter of the century, or so, when it focuses on the child protection system. It illustrates the extent to which there has been adaptation and change to the child welfare and protection system as a result of changes in the environment or conversely the extent to which the system has persisted. Changes in the environment would include those brought about by tragic events such as the death of a child or those incorporated in legislation, for example the Children Act 1989.

In examining these issues, the policy analysis raises issues about variables identified by theorists as important in loosely coupled systems. Such variables could include the nature of the task to be done or key social values or belief systems. What has been the significance of such variables? For example, has a redefinition of the task to be done led to changes in organisation or procedures? How did any such changes relate to shifts in value systems? Did ways of working reflect underlying beliefs about the nature of the task and did the way of viewing the task change as a result of particular events or initiatives?

As well as exploring changes to the organisational shape and conventions of the system, the policy analysis also provides a basis for exploring the Meyer and Rowan thesis that the value of formal structures and processes is symbolic [1983]. There is a dilemma here. On the one hand the idea that activities are 'symbolic' can be interpreted to suggest that there may be no significant change in outcomes. What is important is the legitimacy conferred on the system. The outside world will be reassured, by the ritual of activity, that issues are being faced and action taken, but for the participants the reality will be that the existing system has been preserved and enabled to persevere. This can be illustrated,

48

for example, by the study reported by Hagan et al. [1979] which noted the legitimation of the court sentencing process by the involvement of probation officers but the relative ineffectiveness of probation officers in affecting sentencing outcomes. On the other hand is the argument that symbols and ritual provide a potent force for change. Rituals can reinforce values and goals [Pettigrew 1979 cited by Meyerson and Martin, 1987]. The sharing of such values and goals can be seen as central to the idea of culture providing a beacon of clarity in the fog of ambiguity and doubt thus providing the certainties of tight coupling which Peters and Waterman [1982] saw as important. For the purposes of analysis, this dilemma raises the following questions. To what extent have changes in child welfare policy been a means of conferring legitimacy on the whole system by providing a justification for the behaviour of workers in the agencies dealing with children? How far have they produced a significant change in professional practice? To what extent is the significance of those policies less in the technical changes they bring about than in the role they play in helping to create across the sub-systems a child welfare centred culture which reinforces key values, re-affirms the task to be done and generally keeps the important issues to the forefront of the consciousness of those people involved?

While the policy analysis provides an overview of changes to the system for working together for children, the fieldwork, which forms the second leg of the research strategy, complements this by exploring the experience of those changes at the level of implementation. In particular, it looks at a local child protection system in the 1980s and the 1990s and how workers involved made sense of it at different stages. As was shown earlier, loosely coupled worlds are characterised by uncertainty and ambiguity. This allows for different actors to have and negotiate different understandings of the system and how it works. Indeed Weick uses the example of the battered child syndrome to introduce his thesis on sense making in organisations [1995: 1]. If events or policy initiatives

49

have led to the system becoming more tightly coupled, then predictability should increase and perceptions should converge. As Weick has argued in the past [1982b] close attention should be paid to the issues on which people agree because agreement facilitates co-ordination. This part of the study investigates whether on this basis there is evidence of the degree of coupling in the child protection system having been tightened. Is there evidence that workers are more or less likely to agree as a result of policy initiatives aimed at improving co-ordination? The exploration of this aspect concentrates in particular upon the *technical* core which has been identified as a key coupling variable, by examining how workers would expect a child welfare referral to be handled. By revisiting the scene of the original fieldwork after the lapse of several years, the study investigates how over time perceptions have changed. For example workers may have changed their understanding of the extent or nature of their own contribution in a child welfare scenario or they may have changed ideas about the involvement of others. They may have revised ideas about the nature of the job to be done or about their priorities or may feel a changed sense of autonomy. The fieldwork also provides an opportunity to get the perspective of those involved on some of the issues raised in the policy analysis. This could include beliefs about the reality of impact of some of the policy changes. Is it the experience of those involved that attempts to adjust coupling to improve co-ordination have improved outcomes? How do they view relevant changes in organisation or procedure?

Summary

This study applies a loosely coupled systems framework to agencies and workers who may come into contact with children potentially at risk of abuse and neglect and looks at attempts to bring these agencies into new relationships and to improve co-ordination. This involves looking at the broad welfare policy agenda which has been relevant for these groups. Much of the analysis, however, concentrates on what has been termed *child protection* because it has

been at the centre of much of the policy attention in the late twentieth century. The investigation moves studies drawing on the perspective of loosely coupled systems theory forward by taking a longitudinal approach rather than a short tem view to examine change. It also capitalises on the capacity of a loosely coupled systems framework to be applied at both macro and micro levels. The first part of the study emphasises macro concerns by focusing on the development of policy in the child welfare and protection arena. This provides the historical context of change and explores the explanatory contribution of the theory within that framework. The second part of the study takes a micro focus by exploring the perceptions of the workers involved. It will consider how far at the start of the investigation it was appropriate to describe the child welfare system as loosely coupled. In what respects at the beginning of the study did the perceptions of the workers involved reflect such a world? Given the aim of the study to explore *change* in the system, these perceptions provide a baseline for doing so. This makes it possible to explore further questions. Do the perceptions of workers after considerable policy activity indicate that there has been a tightening of coupling? Do they suggest not a tightening of coupling but simply a different pattern? Is there evidence of a culture of working together with shared values affecting the beliefs and actions of workers? How far can any changes be attributed to attempts to improve co-ordination?

Subsequent chapters will explore the policy process, outline the methodological framework for the fieldwork and report upon the findings from it.

Chapter 3

CO-ORDINATION POLICY - THE EARLY DAYS

I have argued that services for children are provided by a range of agencies each with their own core functions which come together in ways which fit the model of loosely coupled systems. This chapter and the next look at the twentieth century history of these services to explore how the balance of coupling has varied at different times and how policy initiatives have been shaped to achieve an appropriate balance of coupling to achieve desired outcomes. The analysis begins with a focus on child welfare services broadly defined. After a brief overview of early approaches, the analysis concentrates on the period after the second world war and in particular the next chapter focuses on the more modern period since child abuse and protection has become a high profile social issue.

The purpose of this historical overview is to identify changes which have taken place in the system and the factors or variables which have contributed to those changes. As it looks at shifting patterns of coupling, it focuses on those aspects of concern which at any time were driving change in the relationships between agencies. This will involve exploring the policy initiatives which have shaped the patterns of couplings in the system. It will examine how the tasks which have shaped policy initiatives have been defined and identify the ideas behind the proposals made. It will look at how parts of the system have been fitted together and examine the strategies to adjust patterns of coupling to compensate for perceived deficiencies. It will explore two main strategies of change. First, it will review the extent to which adjustments to the pattern have been proposed or made by adjustments to the organisational architecture. Second, it will look at the extent to which the focus has been on altering the responsiveness between events by adjusting the process of working together.

The Development of Policies 1900-1950

The nineteenth century all-purpose poor law treated the family as a unit, acting as an agency of last resort, essentially receiving those for whom other systems had failed. The problem of co-ordination for the Poor Law lay in the non-statutory sector, where the potential for manipulation by recipients and duplication of provision by the charities was seen to dilute the deterrent threat of the workhouse. It was in the voluntary sector that explicit machinery for a co-ordinated approach was attempted through the Charity Organisation Society which sought to co-ordinate charities by providing a "clearing house" through which the activities of organisations could be channelled.

For the statutory services, the issues of co-ordination were brought to the fore with the 1905-09 Royal Commission on the Poor Laws when the structural arrangements for poor relief were debated. In urging an all purpose authority of last resort concentrating on a basic minimum for a family unit, within a context of extended specialist services, the majority of those on the Commission minimised the problem of co-ordination. They did, even so, see the need for a co-ordinating registrar to maintain a record of all those receiving assistance. The "Minority", however, aimed for the break up of the Poor Law and its replacement with a series of specialist agencies largely designed to forestall the problem of poverty. To the extent that their view carried the day through the first half of the twentieth century and the break up took place, the tight coupling of provision within a single system disappeared. Independent agencies might be focused more successfully on specific needs, quite possibly improving the quality of service and provision within their sphere, but at the same time new inter-agency relationships would be created with the increased potential for problems of co-ordination between for example health and welfare services, services sustaining the poor and so on.

Services for children in the 1940's reflected the tensions involved in getting the

balance of couplings right. The needs of children had been brought to the fore by the pressures and disruptions of war and by the death while boarded out of Denis O'Neill in 1945 [Monckton Report 1945]. It was against this background that the Curtis Committee on the Care of Children reported in 1946. The picture it painted was one of administrative confusion. Instructed to "inquire into existing methods of providing for children who from loss of parents or from any other cause whatever, are deprived of a normal home life with their own parents or relatives", the committee was appointed jointly by three central government departments, reflecting division of responsibility at central level between the Home Department, the Ministry of Health and the Ministry of Education. At local level, the relevant services were still mostly linked by being provided by the one local authority. However, within local authorities there was fragmentation of responsibility. This can be demonstrated by the case of destitute children who were provided for under the Poor Law function supervised by the Ministry of Health. However. in practice, at local level responsibility might be shared between the Public Assistance Committee, the Public Health Committee and the Education Committee [Curtis, 1946: para. 117]. The Curtis committee found that couplings between these departments could be negatively charged. It found competition between agencies which the voice of causation would recognise as creating loosley coupled systems. The report refers to "traditional inter-departmental antagonism which was sometimes thinly veiled by changes in organisation" [Curtis 1946: para 131]. The solution proposed by Curtis and adopted by the 1948 Children Act was to restructure provision sweeping away problems of departmental conflict by the creation of a single department with a focus on children. Couplings with other departments, though, still needed to be forged because Curtis wished children in the care of its new department to have health care and education on the same basis and from the same authority as other children. In discussing arrangements at central government level, the Curtis committee recommended that a single government department should be responsible for children who lacked an acceptable home background. It

rejected, however, the recommendation put to it that the new department should be responsible "for every aspect of the life of the deprived child" [Curtis 1946: para 434]. This might have provided a neat administrative solution to the set of needs confronting the committee, but it would have marked out such children from their home based contemporaries. The focus on the child might have suggested a leading role for the education service with children as its main client group. However, while leaving it open for the Ministry of Education to be responsible at central level, the Curtis committee rejected the claims of the education departments to be the local agency for the child. Curtis saw these departments as clearly focused on education of the mind, dealing with ever increasing duties and feared the home finding and support work for children would be seen as peripheral to the main education tasks and be relegated to an office procedure rather than being a centrepiece of their work. Tight coupling to the educational task could mean too loose a coupling to the welfare one. However, the new children's officer heading the new children's department would be a specialist, as was the director of education or the medical officer of health and she would "have no other duties to distract her interests" [Curtis 1946: para 443]. The new children's departments were established by the 1948 Children Act. Central government oversight was vested in the Home Office and not with the Ministry of education.

The claims of education departments to be the focus for work with children were not, however, finished. They were to surface a generation later in Scotland with the publication of the Kilbrandon Report [1964] which will be considered later.

The Development of Policies 1950 to Plowden

Introduction

Although responsibility for children in care was rationalised within one department, linkages with agencies responsible for services available to the

wider range of children needed to be created, even though many of them remained within the local authority orbit. The recognition of new needs for co-ordination reflected an ever widening concern with the needs of children Patterns of coupling needed to change because new ideas about the tasks to be done had developed. The Curtis Report had focused on children recognised as deprived of a normal home life and needing to be received into care. It had, however, pointed the way for services to be concerned with the prevention of ill treatment of children. By the 1960's the debates about services were strongly focused on those children whose "problems" were made manifest in delinquent behaviour and the possibility of "prevention" in that arena.

As the demands on children's services became extended, ideas on the nature of co-ordinating machinery became more far reaching. In the 1950's the approach to ensuring appropriate coupling between agencies was to insert a co-ordinating mechanism to pull services together as and when necessary. By the end of the 1960's, however, the favoured approach was radical organisational restructuring to bring previously separate systems together under one management. At the same time, linkages for client groups other than children were reinforced in the same structures perhaps blurring the focus on children established in 1948. This section traces the changing focus on policies through the 1950s and 1960s.

The 1950 Joint Circular
As early as 1949, ministers were urging local authorities to secure more effective co-operation between services responsible for the welfare of young people [Packman 1981: 104-5 - drawn from the seventh Report of the Children's Department of the Home Office 1955]. More public direction came with a joint circular in July 1950 [157/50 Home Office, 78/50 Ministry of Health, 225/50 Ministry of Education]. The circular noted that neglect or ill treatment could be related to a variety of causes which if tackled might eliminate the need to

remove the child from home. Such causes, however, might be tackled by a range of departments within or without local authorities. The circular urged that "If effective help is to be given at an early stage, it is essential that there should be co-ordinated use of the statutory and voluntary services" [para 6]. The solution proposed was to introduce a position into the system designed to tighten couplings. The circular suggested that local authorities could designate an officer who would be responsible for making arrangements for co-operation between agencies concerned with the welfare of children in their own homes. Coupling was not tightened to the extent that it might have been because there was in the circular a lack of conceptual clarity over the type or level of co-ordination envisaged. The recommendations anticipated, firstly, that the designated officer would hold regular meetings with relevant officers of appropriate agencies. They also, secondly, suggested "significant cases of child neglect, and all cases of ill treatment" should be considered by this co-ordinating committee. The former would suggest a general policy making role while the latter would be concerned with implementation in respect of particular cases. This distinction was delineated and elaborated by the Younghusband Report [1959] which reviewed how local authorities had implemented these recommendations. Younghusband distinguished between co-ordinating committees "to work out and operate a plan for co-operation in general terms, and to consider general questions of principle or policy" as opposed to case conferences "for a limited number of workers involved in the case under consideration to assess the total situation or need, to work out a concerted plan of action, and to carry it into operation with each other, and with the person or family involved" [Younghusband 1959: para 1065]. With this lack of clarity in the original circular it is perhaps not surprising that Younghusband found a lack of understanding over the roles of the two types of co-ordination.

The Younghusband report did, though, reveal a considerable investment in co-ordinating machinery by local authorities. Information which was gathered

in response to a circular in 1956 [18/56 Home Office, 16/56 Ministry of Health, 311/56 Ministry of Education] revealed that over 90% of local authorities had set up some kind of co-ordinating machinery demonstrating, as Packman [1981: 62] commented, that "The need to co-ordinate and co-operate was very plain". The precise arrangements varied from one local authority to another. This variety linked to local adaptation was approved by the Younghusband committee which believed no single pattern would be appropriate for all, and was prepared to concede that if informal arrangements could be operated successfully there would be no need for formal arrangements at all [Younghusband 1959: para 1081]. In practice, though, most local authorities had designated a co-ordinating officer. The importance of co-ordination for children's services was reflected in the fact that half of these were children's officers and they significantly outnumbered medical officers of health or county or town clerks who were the other chief nominees for the co-ordinating role.

Younghusband reported that generally local authorities found the arrangements for co-ordination helpful [Younghusband 1959: para 1071]. Co-ordinating committees brought about tighter coupling in a number of ways. They could encourage team spirit, improve mutual understanding, create a feeling of partnership as well as exchange information [Younghusband 1959: para 1076]. There were though, not surprisingly, a number of reservations. The co-ordinating committees were best suited to dealing with matters of policy rather than being a focus for case discussion as implied by the 1950 circular. What are now familiar criticisms of meetings were voiced. They were time consuming, the personalities of the participants played too great a part and they failed to improve mutual understanding so there was no meeting of minds. Discussion of individual cases was best left to sub-committees or case conferences. Such sub-committees might be based on the model advocated by Donnison in *The Neglected Child and the Social Services* [1954: 116] who had argued for a single social worker taking primary responsibility for a case and for

58

there to be case conferences to allocate a worker to each family [Younghusband: para 1076]. Even case conferences were criticised, though, because cases were brought too late, conferences lacked sense of direction and failed to reflect a 'casework' approach because of the 'lay' characteristics of some of the membership. These reflect the concerns of the *voice of causation* of ambiguity of expectation and doubt that the means available would achieve the desired result.

Overall, though, whatever the shortcomings, the Younghusband committee believed the principles on which the co-ordinating machinery was based were sound. They noted in support that the general procedures were being applied to other areas of need [para 1079]. If any reform was needed it was to clarify the role of the co-ordinating committee to be concerned with policy and principle, leaving discussion of individual cases to appropriately constituted case conferences. Concern over issues such as overlap or multiplicity of visiting to families was not the problem that was sometimes supposed [para 1098]. Co-ordinating machinery should be developed so that visiting workers had a common purpose and knowledge of what was going on. The review by Younghusband suggested that the existing system should be developed in accord with local circumstance and its use should be encouraged. Fundamental change in arrangements for co-ordination was not necessary. However, dramatic changes were to come. The 1960s, saw the development of ideas to achieve co-ordination by the regroupings of service providers. By the time the Seebohm committee reported in 1968 on the future of local authority personal social services [Seebohm 1968a], co-ordinating committees were considered inadequate. The couplings they created were too loose to elicit responses. This was because they lacked authority, responsibility and the capacity to give orders [Seebohm 1968b: 8]. Concerns reflected the *voice of compensation*.

A Shifting Focus

Why was a system which had apparently been given a seal of approval by Younghusband at the start of the decade considered so inappropriate before the end? The answer lies in evolving beliefs about the nature of the task. The task was changing so the couplings shaping the system needed to change. In 1948 the focus had been on the child and remedying the deprivation of a normal home life. Organisation of services reflected the child focus with the creation of children's departments. Other links were secondary and so couplings could be weaker. In the 1960s the ideology of prevention so children did not reach the stage of being deprived of a normal home life became dominant. At the same time theoretical perspectives on causation which emphasised the social environment were ousting more individualistic psychoanalytic theories. The upshot was to shift the focus of attention away from the individual child to the family. At the same time, the need to look at the needs of individuals within their social environment was reinforced by an emphasis on community care policies particularly following the 1959 Mental Health Act. Welfare providers needed, therefore to reflect these changing tasks and this meant changing the patterns of couplings between services. Yet another thrust for change came from social workers themselves. A variety of social work callings had developed, usually linked to particular categories of client, for example, children or mentally disordered people. The organisation of services had reflected these client-based linkages. In the 1960s the emphasis among social workers was less on their differentiation by client group and more on their unity as an aspiring profession with common skills. Professional skills such as interviewing, 'social diagnosis', recording and counselling were the same whether the client was a child or an adult.

Changing philosophies of social work and its claims to professional status might not of themselves have pushed issues of the organisation of services to the fore. The dynamic for change was, however, reinforced by a further factor.

60

Services for children were high on the political agenda not just because of concerns about childhood deprivation but also because of a strong concern about a rising trend of juvenile delinquency. Here too, a concern with prevention led to a focus of attention on the role and organisation of welfare services.

How then did the change come about in practice? The seeds were sown by the Ingleby Committee which was sitting even before the 1959 Younghusband report. Part of its terms of reference was to consider whether local authorities should "Be given new powers and duties to prevent or forestall the suffering of children through neglect in their own homes" [Ingleby 1960]. Ingleby fought shy of providing any particular organisational arrangements [para 43] but did venture to suggest

> It may be that the long term solution will be in a re-organisation of the various services concerned with the family and their combination into a unified family service... [para 47].

Powers for preventive social work for children were introduced in the 1963 Children and Young Persons Act. Structural changes were not, however, introduced at this time. Nevertheless the long term corollary of a "family service" was there waiting to be addressed and willing advocates for change were to be found [eg Hastings and Jay 1965].

Before any change, however, the emphasis on prevention was also highlighted in the sphere of juvenile delinquency by the influential Longford Report [1964]. This argued powerfully for early intervention to forestall delinquency. Longford argued

> The administrative structure of the social services is ripe for review ... the first step needed is the establishment of a new Family Service [quoted by Packman, 1981: 158].

These ideas were taken up by the newly elected Labour government of which

Longford was a member. The 1965 White Paper *The Child the Family and the Young Offender* [Cmnd 2742] acknowledged the need for a family service but argued that its precise form would need to be considered and the White Paper announced the appointment of a committee

> to review the organisation and responsibilities of the local authority personal social services and to consider what changes are necessary to ensure an effective family service.

This was the Seebohm committee which produced its *Report of the Committee on Local Authority and Allied Personal Social Services* in 1968. The deliberations of this committee, its report and the implementation of its proposals relevant to co-ordination will be discussed later.

Kilbrandon

Before that discussion, however, it is important to recall that the debate on whether, in a climate of changed priorities favouring prevention rather than repair, services should be regrouped for greater coherence did not only apply to England. In Scotland the debate was running further ahead - but not entirely on the same tracks it was to follow in England. In 1963 the McBoyle Committee [McBoyle, 1963] had recommended a comprehensive family service to eliminate overlapping and gaps [Younghusband 1978: 250]. A year later the Kilbrandon Committee produced a vision with similar themes but a different emphasis. Kilbrandon saw children whether they were neglected or delinquent as children in need. This was a theme that was to be reflected in England in the debates leading to *Children in Trouble*, the 1968 White Paper, and the subsequent 1969 Children and Young Person Act. In order to co-ordinate efforts to meet the needs of these children, Kilbrandon recommended a re-ordering and amalgamation of relevant services, stating:

> ... what is required is not some entirely new and different form of machinery for identification, diagnosis and assessment, and supervision, but a merging and reorganisation of those existing services whose primary concern is with the problem of children in special need [Kilbrandon 1964: para 233].

The emphasis on the child led the committee to be guarded in its reaction to the suggestion that there should be a "family" service.

Contrary to the Curtis committee in England a generation earlier, Kilbrandon placed the emphasis on education as the service for children and put education departments at the organisational heart. The committee ignored the reservations which the Curtis Committee had expressed that education departments were too closely tied to formal schooling. The diagnosis from Kilbrandon suggested that children in need required either remedial or compensatory education. This, it was argued, should be provided by a social education department. This would be *within* the existing education department. It would be headed by a depute director of education directly answerable to the director. It would incorporate the existing child care service including field and residential services and a substantial number of members of the probation service [Kilbrandon 1964: para 242-2]. The problem of co-ordination between education and the welfare services for children would be overcome because they would all be part of one education department. In the event the measures introduced by the government in Scotland departed from the Kilbrandon proposals. The 1966 White Paper *Social Work and the Community* and the 1968 Social Work [Scotland] Act merged services but not specifically for children and, significantly, not with the education department. Instead, a common task of social work was recognised and workers were included in the new social work departments on the basis of their work and particular skills. The Kilbrandon view emphasised the needs of the child as the potent coupling variable and saw the fulfilment of those needs in educational provision, therefore, suggesting an organisational framework based on the education departments. However, the

view which prevailed identified a broader social task as dictating the coupling framework which would be built around the skills of the service provider, independent of the service user.

Plowden

In England and Wales, too, where the extent to which education and welfare services should be merged was also under consideration, the education service was no more destined to lie at the heart of the coupling network than in Scotland. The Plowden Committee working on *Children and their Primary Schools* [1967], though, had social issues very much at the forefront of its agenda.

The deliberations of the Plowden committee overlapped with those of the Seebohm enquiry. The Plowden committee had been appointed in 1963, two years earlier than Seebohm. By the time it reported in 1967, the debates on merging services in England were well under way. The Plowden report saw a system in need of *compensation*. It commented on the limitations of the then existing ad hoc arrangements for co-ordination and recognised that solutions might demand radical legislative change [Plowden: para 233]. It accepted the thrust towards integration and talked of a "unified structure". Integration of services would avoid the "atomisation" of services and reflect the need to focus on families [para 280]. Despite its educational origins the Plowden committee did not seek to emulate the claims of the Kilbrandon Report for education to be *the* service for children. Rather it emphasised the need for improved relationships between schools and social services and access to a known, trustworthy and responsive social worker [para 235]. It also put forward the claim of schools to be bases for integration of provision even if the focus was to widen from children to families. Children, it argued spent much time in school and schools were readily accessible to parents. Coupling of services would be on the basis of the child and the family as common client. Other client groups

of social services would need to be supported through other bases [para 240].
The Plowden Committee, of course, had other major concerns and was to make
significant proposals for other areas of social policy. It was, therefore,
"deliberately tentative" and content to leave more specific proposals to the
Seebohm Committee [Plowden: para 242].

The Seebohm Report

This account so far has reflected the emphasis on the needs of children and the
implications for the co-ordination of education and child welfare services if the
needs of the child are to provide the coupling rationale. However, the potential
for integration of services spreads over the range of social work clients and not
just children. The impetus for change may have begun with the needs of
children but once the debate was under way it was no longer so confined. The
breadth of the debate was recognised in the Seebohm report. Although the
original terms of reference of the committee had referred explicitly to "family" the
report notes:

> We decided very early in our discussions that it would be impossible to
> restrict our work solely to the needs of two or even three generations
> families. We could only make sense of our task by considering also
> childless couples and individuals without relatives: in other words
> everybody [1968a: para 32].

Any proposals for integrating services would be based therefore on this wider
consumer group and not necessarily predominantly on children and their
families. Such a shift had been advocated by what Packman [1981: 162] refers
to as "the powerful voice of Professor Titmuss". He had argued in a speech at
Eastbourne in 1965 that thinking on the future organisation of social work had
been too family and child centred. He pointed out that many needs were not
family needs and that a broader based social services department could include
relevant services for children [Titmuss 1968: 89]. His recommendation, then,
was for

departments providing services; not departments organised around categories of client or particular fragments of need [1968: 90] [original emphasis].

When it was published in 1968, the Seebohm Report represented the culmination of the argument for tightening coupling by drawing together a wide range of overlapping interests into a co-ordinated whole by structural reform. The range of interests being drawn together was, though, much wider than had been envisaged by the earlier advocates of change.

The committee considered and rejected a number of proposals. The idea of retaining the existing structure and attempting to formalise and improve co-ordinating machinery was rejected. There would be a lack of clear authority in such a system and there would be little likelihood of comprehensive approaches to families being developed. The proposal for creating two departments - one for providing social work services for children and families and the other for old and handicapped adults was rejected. Seebohm argued this would perpetuate a symptom centred approach and split the responsibility for care between two departments. Although in one sense it contained a clear family focus the perception of family needs was not as broad as Seebohm envisaged. Also rejected was the suggestion of a social casework department which would act on an agency basis for other departments. This would have established professional coherence for social workers who would all have been in a single department. It would, though, have left other issues of co-ordination remaining or even exacerbated. Separate departments with their existing boundaries would have remained and new boundary problems would have been created between the existing department and the new casework agency. What would be the power relationship if there was a difference of view between the client based departments and the casework agency? Next Seebohm considered and rejected the idea that children's and welfare departments should be abolished and "absorbed into enlarged health and education departments"

[Seebohm 1968a: para 132-136]. If the links were made with education it would lead to something similar to the social education department proposed by Kilbrandon. These ideas received short shrift. Social services needed to be the focus of attention if their development was to be nurtured. The competing health or education demands would detract from this. The idea of co-ordinated family care might also be lost because it would not be the main focus of the parent agency. The final idea to be discarded by Seebohm was that of taking the personal social services away from local government. While some twenty years later [when Mrs Thatcher was Prime Minister] this idea might have found favour with the general tenor of government, it was seen by Seebohm as lying outside the committee's terms of reference.

The proposal brought forward by Seebohm was for a unified social services department:

> to meet the social needs of individuals, families, and communities, which would incorporate the present functions of children's and welfare departments, with important additional responsibilities designed to ensure an effective family service [Seebohm 1968a: para 138].

In arriving at this proposal, the issue of co-ordination had been a significant factor. Seebohm described the need for it as "crucial" [para 143]. By unifying the welfare functions of different departments the problems of external inter-agency collaboration were converted into problems of internal co-ordination and administration. The significance of the needs of the child as a coupling variable was relegated to that of one factor among many rather than being the most active and potent one.

As has been noted earlier, the unification with health and welfare interests shifted children from centre stage as other debates entered the arena, for example between the medical and social interests [eg see Jones in Association of Municipal Corporations & County Councils' Association, 1968: 3]. Prior to

Seebohm, for example, some local authorities had combined their children's and welfare services with health under the Medical Officer of Health - a move which according to Younghusband [1978: 239] was "fiercely contested" by the social work organisations who considered it "would have resulted in a medical rather than a social direction" of those services. Co-ordination of services with children and their relationship with education were then but part of the argument. They did, nonetheless, have their part to play. Initially, they perhaps seemed relatively uncontentious [Hall, 1976: 64]. There were some concerns over the provision for the pre-school child. Perhaps the links between pre-school activities and education should have been seen as more potent and led in this sphere to education being made the responsible department rather than Social Services. This was a view taken by Lady Plowden *[Social Work* 25,4,35 quoted by Hall 1976: 95] but to no avail. More generally Seebohm acknowledged the fear that educational needs would not be met as a whole in a social services department but felt the potential advantages of a social services department outweighed the risks.

To some extent the intention that relevant services should be coherently coupled within one organisation was frustrated. In particular the tight couplings which already existed between education welfare and the education department led to resistance to the new structure. Seebohm was frustrated by the educational interest. The committee's recommendation that the education welfare service should be integrated within the new social services department made only limited progress. The committee argued:

> First and foremost it is essential to consider and, if necessary deal with a child in his total environment which includes his family and his neighbourhood as well as his school. Social workers within the social services department will more readily achieve this objective and deal with the whole range of family problems... [para 226].

A separate social work service in the education department would constitute a loosely coupled echelon of workers and continue the existing fragmented

system. An integrated service would bring extra resources to bear, give the school a link with the social services department and provide more opportunities for the workers. Seebohm looked favourably upon the idea of social workers being based in schools, seeing it as a way of binding services together at a county level [para 621]. However, the lack of a statutory basis for the education welfare service meant that it was not necessary for it to be included in the legislation to implement the recommendations of the Seebohm committee. The 1970 Local Authority Social Services Act was restricted to the minimum statutory changes. It remained up to local authorities, therefore, whether they responded to the invitation from government to incorporate education welfare into the new social service departments. In the event very few did so [ADSS 1978: 6]. The scene was set for skirmishing between the new directors of social services and education officers. Essentially the directors of social services wanted a social work service in schools coupled to the wider community-based social objectives of their departments. The education officers wanted a service coupled and responsive to the needs of educational institutions. The social services directors staked their claim in an ADSS paper in 1978 [ADSS 1978] while the Society of Education Officers hit back in the following year [SEO 1979]. The ADSS paper called upon the spirit of Seebohm to support its claim [eg p 12]. It argued that within the education department, the social work function would "retain its relatively insignificant status" [p 6], largely limited to attendance monitoring, with workers treated by head teachers as junior members of school staff and with no opportunity to develop the practice linked to the professional training which the Ralphs Report [1974] had recommended. To reinforce their case it cited the inquiry report into the death of Maria Colwell [Field-Fisher 1974] [discussed in Chapter 4] to the effect:

> that had the committee's [Seebohm] proposal that the Education Welfare Service should join the Social Services Department been accepted one of the more conspicuous difficulties in communication would have been lessened.

Despite the claim by the social services directors that they were looking for partnership not take-over [ADSS 1978: 1], they were decisively rejected by the education officers. The SEO saw the talk of partnership rather than take-over as "a misuse of language" which did not square with the message and tone of the ADSS paper. The SEO paper reflected a clear desire to have a service tightly coupled to the values and aims of the education service. An education based service, it was argued, could provide a "more efficient service" [p 7] whereas the "indifferent record of social services departments ... does not inspire confidence that an integrated social services approach would be any better" [p 8]. The education officers were clearly stung by the dismissal of values significant to them such as dealing with problem of attendance [p 4]. Despite claims in the paper about the desirability of co-operation it notes with approval and no trace of demur:

> the common feeling among head teachers ... that in their experience even the least efficient education welfare officer is likely to be more effectively helpful than a social worker [p 8].

This dispute between the ADSS and the SEO highlights how attempts to tighten particular sets of coupling can be seen to threaten couplings elsewhere. In this instance the educational interest was successfully defended and the Seebohm plan was not implemented in its entirety. Applying the *voice of causation* would indicate that the system would be loosely coupled with the existence of such competition.

Linking with Health
The reorganisation following Seebohm may not have been as complete as its architects might have wished, particularly on the education front. It remains, nevertheless, the major landmark to improved co-ordination of personal social services, including those for children, by structural means bringing them together with local health and welfare services. It was, though, limited to

services which were already linked together under a local authority umbrella. The 1970s saw attempts to improve co-ordination on a wider front, rationalising local authority and health services. The tripartite structure of the NHS when it was created by the 1946 NHS Act meant that responsibility for health was shared between hospitals, family doctors and other services linked to the Executive Councils and local authorities. A number of critical services for children lay within the local authority sphere although remaining outside the social services departments - in particular health visitors and the school health service can be identified. Whereas the reforms in the personal social services field had been driven in large part by a concern for a coherent delivery of service, the dynamic for the health service reforms was largely conceived in terms of policy, planning and administration [Brown, 1982: 142]. Much of the debate in the Green papers and Consultative documents [Ministry of Health, 1968; Department of Health and Social Security, 1970, 1971] was concerned, therefore, with structures which would unify health provision in arrangements where control and accountability would be clear and health policy could be planned in a coherent fashion. The 'issue' was conceived in terms of couplings based on the providers rather than the recipients. The solution followed the Seebohm pattern of a unified, unitary authority for health - the Area Health Authority - created in April 1974. This involved, however, removing health workers from the local authorities. This was done on the basis of primary skill. Doctors, health visitors and school nurses were therefore transferred to the new authorities. Their administrative couplings with other local authority workers, perhaps dealing with the same client groups were therefore loosened in the interests of tighter coupling with their medical colleagues. They were placed in settings favouring a medical rather than a social orientation. Perhaps partly in recognition of this, the second Green Paper, the Consultative Document and White Paper and the Act gave issues of co-ordination a high profile. Indeed Webb and Wistow have described collaboration as a "fundamental feature of the reorganisation in 1974" [1986: 162]. The mechanisms to reinforce this were

pitched at the planning level [Webb and Wistow 1986: 156]. The 1973 National Health Service Act required health and local authorities to collaborate. Joint Consultative Committees were established at member level. Joint finance was introduced in 1976 [Webb and Wistow 1986: 22]. County councils and Area Health Authorities were for the most part given coterminous boundaries. Subsequent changes, such as the abolition of Area Health Authorities, later undermined to some extent the coherence of these arrangements. In terms of services for children, these policies for collaboration seem to have had a low profile relative to, say, issues of community care relevant to the mentally disordered or elderly. For services relating to children, the quest for improved co-ordination between health, welfare and education by major structural changes had run its course. From the 1970s approaches which focused on process and tightening coupling by means of laid down procedures became the fashion.

The issues raised in this chapter resonate with the voices of loosely coupled systems theory. For example, in line with the *voice of causation*, it is possible to identify the factors which led to loose coupling, including shifting expectations, conflict over aims and methods and separate echelons of workers. In terms suggested by the *voices of typology* and *outcomes*, they indicate how different variables were active at different times, affecting organisational features, shaping and reshaping the relationships between agencies and their sub-units. They show, too, how wider shifts in the socio political environment have affected the system.

In the last quarter of the twentieth century, the dominant pressures on the system concerned issues of child abuse. These problems and the response to them are considered in the next chapter.

Chapter 4

CO-ORDINATION POLICY - RESPONDING TO PRESSURE

From the early 1970s the pattern of coupling reflected different types of concern. The factors which now drove the debate over co-ordination were fuelled by concerns about operational failure. It was not ideas about administration and policy that were at the forefront of debate but concern at the fate of children in whose interests the system was supposed to pull together. The solutions brought forward, as well as adjusting organisations and structures, put a high premium on establishing processes to tighten coupling to ensure agencies responded to concerns identified by others.

Maria Colwell's Legacy

The trigger for this concern to tighten procedures was the death in 1973 of Maria Colwell at the hands of her stepfather, despite the involvement of a range of agencies with the child. It is worth considering this case in detail because it represents a watershed in the development of policies for co-ordination in services for children. It can be viewed as charting a point of turbulence which as Corwin [1981] suggested led to the thresholds of action being crossed. The publicity which attended the inquiry into the death of Maria Colwell brought the issue of co-ordination - or more precisely the lack of it - to the forefront of public concern. The structural systems to ensure coherent patterns of working following Seebohm were already in place, albeit for a limited time, but had not been sufficient to save Maria. Reference has already been made to the issue of incorporation of education welfare within the social services department and the claim that had it been, as Seebohm intended, Maria might have been saved. That debate apart, structural solutions were not on the agenda. Instead the emphasis was on communication to ensure appropriate responses when the structural linkages were not enough. The evidence to the enquiry showed that

key couplings were simply not activated. Agencies at times worked as if in isolation from one another. The malaise affected all agencies as Stevenson in her minority report observed:

> The social workers who bore the ultimate responsibility for Maria's case and supervision had a right to receive information from their colleagues in other disciplines as well as to convey it [Field Fisher 1974: 8].

As far as protecting Maria was concerned, agencies may have failed to respond because they did not receive the stimulus to do so. It has been argued earlier that if loosely-coupled systems are to operate to advantage, then knowledge by those involved of the context and specific situation in hand is an important variable in facilitating an appropriate response. The report on Maria Colwell contains many examples of situations where this understanding and knowledge was missing or incomplete. This occurred at a number of levels. At times there may have been

> a lack of confidence in, and understanding of, respective roles and responsibilities between the professions [Field Fisher 1974: 68].

Crucially, the social worker and the NSPCC officer dealing with Maria were never clear about their respective roles. More immediately, workers did not know what was going on and did not tell one another what they did know. The report refers to

> many times when social workers concerned with Maria simply did not know who else was involved and the nature of their involvement [para 152].

The police did not know of the social services department's interest in Maria - but nor did they inform the department when they were called when children were left alone at night while their parents went out [para 117]. The housing department failed to pass on information with any sense of urgency when they were involved [para 119]. The report acknowledges that with better information of the developing situation, the range of workers involved would have responded more appropriately [eg para 109]. These problems may have been compounded

because the central workers did not know one another as individuals - the social worker did not know the health visitor nor did she know the EWO. All these issues are pertinent to the education system. The schools might have played a key role in protecting Maria, but lack of knowledge prevented this. The report noted the lack of knowledge by the social worker of school organisation and speculated that this might be quite common among social workers generally. In Maria's case, this may have led to false confidence on the part of the social worker that the school and Maria's teachers had knowledge which they did not. In any case, the school was not kept informed as it might have been and the report describes it as "operating in a vacuum" [para 115]. Nor was the EWO better informed. As has already been mentioned, the social worker did not know the EWO. Communication difficulties may have been increased by administrative divisions. Crucially, though, the EWO and the social worker were never in contact [DHSS 1982: 15].

It was in this wider context of a system that was so loosely coupled that agencies failed to engage with and respond to one another that individual workers made mistakes. It was a system raising the *voice of compensation*. The report into the death of Maria concluded that:

> while individuals made mistakes it was 'the system' using the word in the widest sense, which failed her [para 242].

The report emphasised the need for an "efficient system" [para 241] arguing that

> A system should so far as possible be able to absorb individual errors and yet function adequately [para 240].

This implies a system which retains elements of loose-coupling. An over tight system would break down because mistaken acts of commission would lead to inappropriate responses by others while acts of omission would lead to no response at all. For Maria, the system had been too loose - to the point of a lack of coupling at all in some circumstances. It therefore needed tightening but

in a way that would still leave agencies and workers with some command over their response and independence of action.

The *compensation* strategy was to focus on particular behaviours or activities. The Colwell report was short on prescription, but it focused attention on communication and liaison [para 240]. It was on this that attempts to improve co-ordination now concentrated. These attempts were directed at two levels. First, there was the policy and planning level between departments and agencies and second, there was the operational level of the handling of particular cases.

The former approaches can be seen as a development of the co-ordinating committee system urged by the 1950 circular [Home Office 157/50, Min. of Health 78/50, Min. of Education 225/50] although this system may appear to have become moribund. Prior to Maria's case, the DHSS had been tentatively exploring the extent to which authorities were working together. In February 1970, the government had issued a circular, *Battered Babies*, [CMO 2/70] which seemed to assume there was little discussion between agencies on relevant policy matters. It pointed out that:

> All agencies concerned with child care and the police may be involved in the problems associated with the battered child

and continued as though proposing something novel:

> We are therefore writing jointly to Children's Officers and Medical Officers of Health to ask you to consult together and to bring into your discussions the others involved .... The group could review the situation in your area and decide what arrangements should be made to ensure that all necessary protection and assistance can be made available ....

It further noted that it was known some formal schemes already existed and asked to be informed of them and their effect. The circular concluded

> We have suggested these consultations because we think there is much that can be done by local co-operation, by the fostering of an increased medical and social awareness.

This led to attention again being focused upon the idea of co-ordinating committees. As has been seen these could be traced back to the 1950s but the 1970 circular gave new impetus to this approach. The 1972 circular [LASSL 26/72] confirmed the existence in many local authorities of what it termed "review committees" to deal with matters of local policy, management procedures and relationships with adjoining areas. The membership of these review committees was varied although "many" included representation of social work, health and police interests. However, the education interest was less frequently represented [LASSL 26/72]. Perhaps this is not too surprising given that in the early 1970s the emphasis was on "battered babies". Agencies were coupled together therefore to the extent that they shared a common client - in this case a baby. Education departments were concerned with the post baby stage and so did not need to be prominent in the co-ordinating machinery.

The review committees are significant because they represent the gelling of a co-ordinating concept which has been refined and clarified over subsequent decades. In 1972 the "set" was still fairly soft and the urgings of the DHSS gentle. It was suggested that the review committee should be a standing committee meeting at regular intervals, that it should ensure the carrying out of research, education and training programmes, co-operate with neighbouring review committees and review the work of committees dealing with individual cases. The reference to individual cases directs attention the second main feature of organisation to provide a co-ordinated response to the problem of "battered babies". This is what the 1972 circular referred to as the smaller "case committee" which was made up of the professional staff in "primary contact" with the child and family. The aim of this type of committee was to "consider the action to be taken in individual cases of children who have been or are at risk of being injured". The orientation of these committees differed from that of their heirs. Although the aim was a familiar one of ensuring effective communication and competent assessment, the dominant focus was a medical one leading to

77

couplings centred around a medical practitioner. The 1972 circular notes

> the consensus was for the consultant paediatrician normally to be the convenor [LASSL 26/72].

This was linked to the notion that the time to ensure a case conference was held "for every suspected battered baby case" was soon after the child's admission to hospital" [LASSL 26/72]. The police were generally not invited reflecting

> the reluctance of doctors and social workers to involve the police before they have been able to assess the social consequences of such action in situations which are so often complex [LASSL 26/72].

More generally, clear conventions on the operation of case committees were not always in place and the circular contains comments on uncertainties such as who should co-ordinate action decided by the committee and the need for basic information about committees to be available to GPs and social workers.

The 1972 circular also dealt with the third element which has come to be seen as a central plank in co-ordinating services for children - the register. This, too, can be seen as part of the strategy of *compensation* by focusing attention of workers on specific aspects of the task. The use of registers too was in embryonic form in 1972 having been argued for in a NSPCC publication in 1969 [Jones et al, 1987:64]. Only "some reports referred to the use of a register of cases of possible and actual battering" and the circular noted the lack of detail on their use. Registers were compiled by the then medical officers of health or by social services departments. Again there was a strong suggestion that the problem being tackled was a medical one concerning doctors with, for example, the need for confidentiality being stressed against the observation that "The point was made that the names in the register would only be available to medical practitioners" [LASSL 26/72].

The mechanisms and devices described in the 1972 circular are those which were developing as general good practice while the events leading to the death

of Maria Colwell were unfolding, with the circular being issued about six months before her death. It is possible to understand from the circular why couplings between agencies which might have saved Maria were ineffectual. The system was predicated upon the idea of a "battered baby" rather than a seven year old child. If the trigger for a case conference was to be admission to hospital then Maria did not cross the relevant threshold until it was too late. The lack of communication between agencies such as the police and social services was not out of line with a national picture, where police concerns were deliberately kept distant. The detailed clarification of policy for agencies working together, which a review committee might have drawn up, had not been developed in Sussex [Field-Fisher 1975, para 189]. Effectively, the administrative system did little to tauten the coupling between workers at all. Taken with the observation that the main workers in contact with Maria were overworked, "depending heavily on the other to spot trouble" [para 188] it can be suggested that pressure on resources completed the decoupling process.

The solution taken up by government to these problems of co-ordination was to tighten coupling by pulling together more purposefully and coherently the system described in the 1972 circular. These developments took place against the background of a steady stream of reports attracting media attention to situations where agencies had failed to protect children and where co-ordination was often an issue [DHSS, 1982: paras 1.42 and 2.62]. As has already been noted, dramatic changes were occurring in the organisation of health and local government with the 1974 restructuring. These developments seem to have progressed independently of one another. Services for children did not figure prominently in the debate behind structural rearrangement. In some respects organisational links between workers concerned with children were weakened making some counter remedy even more desirable. Health visitors and school nurses were moved out of local authorities into the new health authorities. As the Stephen Meurs inquiry observed, this created a new divide between workers

which needed to be bridged [DHSS, 1982: para 3.48]. This provides a clear example of a circumstances in which tight coupling in one direction leads to decoupling in another.

These broader organisational concerns, though, remained part of a different reform agenda. On the child protection agenda the focus was, as Parton [1985: 114] observed

> to move social work away from a woolly paternalism towards a sharper decisiveness.

Local authorities were encouraged to develop their systems for dealing with child abuse [LASSL [74] 13/CMO [74]8 April 1974]. In 1976 the DHSS was able to issue guidance on the extent to which Area Review Committees [ARCs], case conferences [the term case committee had now disappeared] and registers were in place. In addition, in 1976 the DHSS circulated examples of "operational instructions" which represented good practice. Such instructions had been asked for in the 1974 circular. They were expected to detail in writing the duties of all workers involved in any aspect of a child abuse case. The emphasis on instructions, by again providing a clear focus on attention or behaviour, can be seen as a key factor in tightening coupling. Workers were given specific instructions, usually in a procedural handbook, on how to respond in situations involving child abuse. Their independence was reduced and predictability of action increased. The provision of procedural manuals was to become highly significant, building up, as will be seen later, to a situation when the *Working Together* papers spelling out national guidelines lay at the heart of government polices for child protection [DHSS, 1988 and DoH et al., 1991]. At this stage, though, it is worth examining in more detail the operation of the Area Review Committees, case conferences, register systems and the procedural guidelines that accompanied them.

The debates surrounding the operation of these specific mechanisms reflected

the issues of inter-professional relationships raised in situations of joint working. They highlight the issues of competition, identified by the *voice of causation*, and help to explain the patterns of coupling which developed. Dingwall et al observed that Area Review Committees were a "microcosm of the various national struggles for control of child welfare policy between social work, health visiting, medical and legal interests" [1983: 126]. In 1974 the medical/social axis was dominant on the Area Review Committees. By 1976 there was a change in orientation. The 1976 circular expressed concern at the domination by members of the medical profession [Dingwall et al 1983: 125; LASSL [76] 2 para 3] although it did not question the general medical social focus. However, a challenge was mounted by the police - in particular by the Police Superintendents Association in their Annual conference at Eastbourne in 1974 who criticised social workers and doctors for failing to bring cases of "battered babies" to the attention of the police [Parton 1985: 108]. The initial response of the DHSS in its circular of February 1976 was simply to report that

> In a few local authorities the police are automatically informed if a child is put on the register: others consider that what information is passed to the police should be for the case conference to decide.

However, in November the DHSS and the Home Office issued a joint circular specifically on "The Police and Case Conferences" [LASS: [76] 26; HOC 179/76]. The tone positively encouraged police involvement

> the police have a valuable contribution to make to the multidisciplinary management of non-accidental injury cases and ... this can best be achieved by involving them as closely as possible in the case conference structure.

This advice was apparently heeded and police became active participants. In subsequent years, as the emphasis shifted to child protection the significance of their contribution was reinforced as will be discussed later. The underlying tensions emanating from differences of approach and objectives, however, remained. The right of the police, as of other agencies, to take independent

action contrary to the views of others at a case conference was spelled out although such a decision was in theory to be made "by the chief officer of police". The police view was, though, that they had a prime duty to investigate and prosecute and that a case conference should not be able to stand in their way [DHSS, 1978: 15 para 44].

While the problem of child abuse was being redefined in a way that necessitated the involvement of the police, the educational interest seems to have remained peripheral, although it was not excluded. Most ARCs had a representative from education. Education welfare officers, head teachers and local education officials were involved on other committees. However while the February 1976 circular was distributed to a long list of professional health and welfare bodies, representatives of educational workers were omitted.

The mechanisms for co-ordination, then, were based at this stage on a system with social work and health interests at the centre, with police concerns gaining in prominence, while education workers were seen to have a part to play but one which placed their work more on the margins of the system being developed. With the legal interest becoming more potent, it should not perhaps be surprising that approaches to the management of co-ordination were to become more rule bound and prescriptive. The Government attempted through circulars in 1976 and 1980 to clarify some of the issues surrounding the developing system. However, concerns were expressed over the efficiency and effectiveness of the mechanisms created.

Turning specifically to the Area Review Committees, the Parliamentary and government view was that they were a great success [DHSS, 1978: para 46]. They had the potential to increase understanding between senior officers, although as the Cleveland episode was to show later, this could not be guaranteed [Butler-Sloss 1988]. They were, though, non-statutory bodies with

no legal framework for their structure operation and resourcing. Apart from the guidance to meet quarterly, there was no guideline on how they were to operate. The ability of ARCs to develop joint policies and practices was hindered by the different degrees of power of members to commit the agency they represented [Hallett and Stevenson, 1980: 7]. Furthermore, any policy development took place within the context of agency autonomy [Dingwall et al, 1983: 146-7]. Dingwall and his colleagues [1983: 124] noted the concerns expressed that ARCs were not geared to follow up their advice - to ensure action was taken. They had not developed effective systems or tackled specific resource issues. The impression gained could be that ARCs were somewhat remote bodies detached from the day to day realities.

The coupling between agencies through ARCs could be seen as very loose. The stimulus to firmer tension lay in the recognition that agencies could defend themselves against criticism by spreading the risks of error through following an agreed policy but this required giving up previously cherished rights [Dingwall et al, 1983: 146-7]. The system was held together by a prevailing common interest but the potential for it to be threatened by a stronger competing interest was present, given that the system was not buttressed by statutory requirements.

While the prevailing view was that ARCs were successful, but with a number of queries hanging over them, the question marks over the efficacy of the case conference committees were even greater. As with the Area Review Committees, there were no real guidelines on how they were to operate. There was no clear statement of who should chair them and the scope and balance of membership was a matter for debate. Should they be chaired by a consultant or a senior social worker for example [Dingwall et al, 1983: 149]? Should the police be represented? How extensive should the medical membership be? Such issues would be significant given the fear noted by Jones and Pickett [1987: 159] that case conferences might be used to manipulate other agencies

and shift the responsibility. At an even more basic level the need for further clarification of the nature of these meetings was apparent in the 1976 circular. It was observed that nomenclature was a problem. Some ARCs referred to "standing case conferences" presenting an ambiguity between the ad hoc case conferences directly concerned with a particular family and case review committees set up by some ARCs to review decisions made by case conferences. The decision making powers of case conferences also required clarification. Potentially case conferences could have provided a mechanism for tight coupling by drawing all the relevant interests together in a particular case and making decisions to which all would respond. This was the aspiration of the 1974 circular which recommended conferences should make a collective decision [Jones and Pickett, 1987: 161]. In practice, though, the coupling was loose. Agencies might be coupled by all having an input into decisions but beyond that there was no required commitment. The 1976 circular

> acknowledged that the decision of a case conference cannot be binding on the representatives of bodies with statutory powers and duties in relation to children

Effectively decisions could not be binding on anyone.

While case conferences can be seen as the practical manifestation of a desire for joint working and co-ordination, considerable doubts have been cast on their achievement. Geach argued that they were unrealistically conceived insofar as they "largely ignored the problems which can make proper co-operation difficult or impossible such as the different agency functions, the role, perspectives, status and professional attitudes of the participants" [Geach, 1983: 50]. In a similar vein Freeman argued that case conferences were "expensive, loosely organised and structured and often badly chaired and one wonders what they achieve" [1983: 130]. Hallett and Stevenson [1980: 63] raised the concern that the mechanical operation of procedures could not replace professional judgement, reflecting a concern perhaps that workers might retreat to the security

84

of knowing they could not be criticised for failing to follow procedures and the blame would not accrue to them as individuals if a case conference had made the decision. This could be seen as a warning that conferences should not become mechanisms of tight coupling producing automaton-like workers. The review of child abuse inquiry reports in the 1970s drew attention to further problems of an over reliance on case conferences, indicating that the existence of a case conference mechanism was not of itself a sufficient guarantee of good practice [DHSS, 1982]. The DHSS review noted variously that case conferences were not held, were ineffective [para 1.50] or there was a danger of their over-use [para 1.56]. Perhaps the system could have been tightened up without detriment to good practice by clearer rules on when to call a case conference. However, while committees of inquiry pointed out the lack of criteria they were, as the DHSS review observed, reluctant to offer any [DHSS, 1982: para 1.57]. A degree of looseness at this point seems inevitable when the exact stimulus to instigate a conference could not be precisely defined.

Case conferences were supposed to produce an appropriate response through coupling together those with a relevant contribution to make. This did not occur. Family doctors, for example, were early on picked out as failing to attend [Freeman, 1983: 127], while more generally the DHSS review pointed to the failure of workers, with a potential contribution to make, to attend conferences.

In summary, case conferences, then seemed an appropriate coupling mechanism. The coupling between the precipitating events and the conferences was loose because of the vagueness of the criteria for calling a conference. The coupling between the conference and the action that follows was loose. Its recommendations could be ignored. Part of the reason for this could be that those people who constituted the case conference or should have done so were themselves more tightly coupled to their parent agency than the conference committee.

85

The third mechanism through which agencies were to come together through sharing information was the register. The register can be seen as an archetypal loose coupling mechanism with agencies joined by their common attachment to a single point [in the same way that a computing system is said to be loosely coupled when potentially independent processors communicate through co-ordinated signals maintained in a commonly accessible store [Lenehan & Kung, 1980: 163]. Any abuse or suspected abuse would be reported to this central point and the information stored there [Geach, 1983: 42]. Registration would increase the stimulus on agencies to respond insofar as registration was seen by the DHSS as "essentially an agreement between agencies to co-ordinate their efforts in respect of a particular family" [LASSL [80] 4; HN [80] 20]. For this reason, decisions to register or deregister had to be joint ones taken through the medium of a case conference. Jones et al [1987: 64] claim that registers have been the focus of considerable controversy since their inception. Although registers were referred to in the 1972 circular they were not highlighted in the areas picked out for future study, but by 1976 very few of the Area Review Committees had not either established a register or at least initiated the process of doing so. However, as Hallett and Stevenson [1980: 7] observed, the government had not instituted a legal duty to report child abuse and had so avoided the problem of having to define precisely how and in what circumstances reports should be made. The result was considerable variation in practice in different parts of the country highlighted by research by the British Association of Social Workers [Jones and Picket, 1987: 152]. The 1978 White Paper on *Violence to Children* proposed a study into the possibility of standardising practice in the use of registers [Cmnd. 7123: para 47]. A draft circular was issued in December 1978 requesting comments and in 1980 a circular [LASSL [80] 4, HN [80] 20] was issued. One of the areas of concern had been the extent to which abuse should be considered to extend beyond 'physical' harm for the purpose of registration. The 1980 circular responded to these concerns and extended the definition of abuse. It made clear that concern did not just focus

86

on the young child but extended to all children up to the age of 17. It moved the boundary beyond physical injury to encompass also physical neglect, failure to thrive and emotional abuse. The 1980 circular also recognised a far wider constituency of interest in child abuse than its 1976 predecessor. Whereas with the exception of the DES, educational interests had been excluded from the circulation list in 1976, in 1980 groups representing heads, teachers, education welfare officers and education officers were all included.

Despite the attempt to clarify the situation in terms of which children should be registered as subject to or at risk of abuse, there remained slack in the coupling because the circular did not address the issues of the threshold at which harm to the child crossed the boundary of tolerance. Jones and Pickett [1987: 152] point out that different definitions of abuse continued to be used causing confusion in particular when families moved between areas. The circular also discussed the possibility that sexual abuse might be included as a separate category on registers but rejected the idea. Considerations such as these could lead to the conclusion that the 1980 circular was high on identifying problems but low on stating solutions.

The value of registers when they were in operation was also subject to debate. There was the criticism that they were over-used. Freeman [1983: 131] refers to "an epidemic of registering children" with the consequence of diluting the service available to those in need. This perhaps linked with the concern of Hallett and Stevenson [1980: 8] that while registers needed to be large enough to be useful screening mechanisms they should not become so large as to become unmanageable, creating an unrealistic workload in reviewing all cases. Perhaps the desire to register children was as Freeman [1983: 131] argued a means "to protect the agencies involved rather than the children". Conversely, it has been argued by Geach that in their early years very few enquiries were made of registers [1983: 53]. He was also sceptical of the extent to which

registers would improve inter-professional communication [p 43] while the DHSS warned in its 1980 circular that "An administrative procedure can never be substituted for professional judgement and practice". It is possible to see why Freeman [1983: 134] found it "Tempting to recommend that registers be dispensed with altogether" or at least be subject to a thorough re-examination of their aims.

Despite the doubts, the value of registers as bank of information with potential to alert professionals to the need to protect children prevailed and registers with all their shortcomings have survived.

Finally, the fourth component of the system, again used the *compensation* strategy of focusing attention on specific behaviours. This was developed in the 1970s and involved the establishment of procedural guidelines for workers. These were clearly seen as tightening up the system, with the 1976 circular emphasising the need for "uniformity of procedure". Hallett and Stevenson [1980: 60] commented on the prescriptive nature of the guidance in the examples offered as good practice, observing that the Area Review Committee was "directing" professional staff on how to act in a way that eroded professional discretion and increased bureaucracy. The virtues of handbooks and procedural guidance lay in making clear routes of communication, mechanisms of decision making, distribution of responsibility and allocation of tasks. The greater certainty and predictability could be seen as reducing anxiety, indicating appropriate standards of work and acting as a useful prompt to workers. Several of the reports into child abuse reviewed by the DHSS mentioned the importance of clear written instructions on policy and procedure for all staff [DHSS, 1982: para 3.18].

However, while procedures might reduce anxiety for the professionals, this could be seen as much in terms of safeguarding the agency as promoting the interests

of the child and family. Louis Blom-Cooper in his preamble to the report on the Jasmine Beckford case noted the emphasis which had increasingly been "placed on the importance of social workers 'covering' themselves by ensuring they have gone through all the necessary procedures..." [1985: 15]. In these circumstances workers may feel unsafe in departing from the rules. In a tightly coupled system where the rules dictate the actions of workers there is always the danger of a situation in which the rule is inappropriate and so too is the response. An example of this would arise from procedures which reflected the strong advice of the April 1974 circular [LASSL [74] 13, CMO [74] 8] that in all instances of non accidental injury the child should "at once be admitted to hospital, for diagnosis and his own safety". Subsequent ideas on good practice have moved away from this view. It is perhaps not surprising therefore that Hallett and Stevenson [1980: 63] suggest, as has been noted earlier that "mechanical operational procedures can never be a substitute for professional judgement". Procedures would have to be designed for the "worst" case. As such they would in some cases lead to over reaction, or conversely be ignored because of a desire of workers not to set in motion an unstoppable train of events.

Despite the reservations, laid-down procedures have remained a key aspect of responding to child abuse. In the 1970s the focus was on local procedures. In the 1980s and 1990s there was to be a national focus in the wake of inquiries by Blom-Cooper and Butler-Sloss.

Blom-Cooper, Butler-Sloss and Working Together

The Blom-Cooper Inquiries

In the 1980s, policies for children at risk of abuse or neglect were kept on the public and political agenda by a continuing series of inquiries. Many of these may have contributed to the development of policy. However, some had a particularly high profile. This section considers three such. Two inquiries were conducted by Louis Blom-Cooper: one into the death of Jasmine Beckford and

the other into the death of Kimberly Carlile [Blom-Cooper, 1985 and 1987]. The third dealt not with the death of a child but highlighted the increasingly recognised problem of alleged child sexual abuse and the difficulties of different agencies in trying to agree the appropriate response to it. This was the inquiry into events in Cleveland by Butler-Sloss [1988].

Jasmine Beckford was killed by her step-father in July 1984. Once more a child had been failed despite the involvement of a range of public agencies. In the view of Blom-Cooper, the weaknesses in the system were not unique to Brent where she died but could be found in almost any Borough [Clarke, 1986b]. The inquiry and the subsequent report moved the debate forward, focusing on a number of themes which highlighted a range of possible couplings. First, it focused on concerns at senior officer level. Second, it clarified and reinforced rules on practice and in so doing affirmed the place of the police at the centre of the system. Third, it focused on the legal dimension at agency level in terms of the need for agencies to co-operate.

Taking the first of these themes, at senior officer level the generally favourable view of the Area Review Committees as a co-ordinating mechanism was challenged. The report urged that all relevant departments and agencies should be committed to the work of the Area Review Committee. It should not be dominated by social services but encourage a "truly multi-disciplinary approach" [Blom-Cooper, 1985: 241]. The members of this committee needed to recognise procedures as their own. If not, then policy and action would be decoupled and the Area Review Committee "merely be paying lip service to the multi-disciplinary approach that is so loudly proclaimed as the desideratum of the child abuse system" [1985: 241]. The education department did not escape stricture for failing to follow through with sufficient vigour the policies of the Area Review Committee. In particular, members of the department had failed to ensure that the handbook of procedural guidance was not merely distributed to schools but

was "both seen and digested by staff and .... ready to hand when required" [p 233]. The staff at Jasmine's nursery were apparently unaware of the existence of the Brent manual of procedures.

The Area Review Committee was also too loosely coupled to the management of work with children at risk. There was not an effective system for monitoring individual cases. The Area Review Committee knew nothing of Jasmine's case. Blom-Cooper favoured an Area Review Committee more integrated into the system, scrutinising and responding to the work of case conferences [1985: 241]. He saw the case conference properly organised and purposeful as "an indispensable ingredient in managing the child abuse system" [p 247] and it was here that the second theme can be seen when he sought to establish ground rules for the operation of the system. The difficulty with case conferences continued to be who should attend. Blom-Cooper sought to tighten the system by reinforcing the guidance of this issue. The report indicated the expected degree of involvement of different types of workers. At the heart of the system along with social workers were police officers. The report highlighted the recommendation

> that the Area Review Committee should indicate the desirability of the *attendance* of police officers [p 248 - added emphasis].

The second type of worker to be the subject of a highlighted recommendation was the family's general practitioner who "should invariably be *invited*" [p 248 - added emphasis]. It was recognised, however, that the pull on GPs to attend was often insufficient to loosen them from their primary commitments. While the involvement of other workers was recommended in the report it was not highlighted in the same way. However the role of schools and the school nursing service was recognised. While it was "axiomatic" that the health visitor should attend in the case of a child under five, for older children - in this instance those at nursery school - "the school nurse would be the appropriate person to be invited" [p 247]. When a child was at school it was "essential that his school

should be represented at every case conference" [p 248]. Similarly to the situation with the attendance of GPs, Blom-Cooper recognised that class teachers who know the child best might have difficulty detaching themselves from their school commitments. His solution to this problem was the suggestion that every school should have a "member of educational staff who is designated as the liaison officer with social services in respect of every child who is in care of the local authority and/or is on the Child Abuse Register" [p 156 and 248]. The staff member could then represent the school at case conferences. This proposal would suggest a loose coupling mechanism between key points through a single node to be activated when necessary to co-ordinate responses, but at other times relatively inactive allowing social services and the education system to operate independently. There appears to have been little enthusiasm in the education world for this suggestion. Mayer [1987: 199], for example, questions the appropriateness of placing this responsibility on one person and expresses the fear that the appointment of such a person could be interpreted by other teachers as relieving them of responsibility. Rather than providing a valuable coupling point it might instead encourage decoupling.

The third issue which Blom-Cooper brought to the fore related to the legal framework at the level of agency. Coupling could be tightened and responsiveness required by legislative means. Blom-Cooper not only saw the law reinforcing good professional practice but also defining relationships between workers and to some extent the balance of power between them. The National Health Service Act 1977 already imposed a duty on health and local authorities to co-operate with one another in the discharge of their functions [922 (1)]. This was not, however, specific enough hence the recommendation for further legislation. Blom-Cooper argued that there were "sound reasons for wanting to impose, *by statute*, some duties that will reflect the need to secure the collaborative efforts of the Health and Social Services in the management by Social Services of the child abuse system" [p 144 - added emphasis]. The

92

emphasis on law differed from the existing pattern of co-ordination which was administratively based rather than statutorily defined [eg Hallett in Stevenson, 1989: 139]. It could be argued a change was necessary because inquiries in the 1980s had indicated that agencies sometimes did not assist the local authority as they should. However, even while making the proposal, Blom-Cooper recognised that to some extent a legal duty would be cosmetic. Good professional practice already indicated the level of communication and co-operation that statute could lay down. The law would have to recognise the need for professional judgement on when, for example, the social services department needed to be informed. There would though, Blom-Cooper considered, be important symbolic value in reflecting through legislation the concern of society in this respect. The desirability of legislation was subsequently accepted by the government (see below) [DHSS, 1987, Cm. 62: para 43; Children Act, 1989: S27 & 28].

Blom-Cooper developed his ideas further with his inquiry into the death of Kimberly Carlile, killed by her step father in 1986, despite being a cause for concern of Greenwich social services department. Blom-Cooper again reinforced a number of procedural points similar to those which had emerged from the succession of inquiries over the years. More significantly, however, he questioned how far it was possible to improve the system by continuing to focus on individual cases. What was really needed, he argued, was structural change. It was, however, the individual failings which received the higher public profile. The report drew attention to what were seen as the shortcomings of the social worker, denied access to Kimberly, only able to view her [if it was her] through a glass panel at the top of a door, who failed to activate the system, for example by failing to call a case conference [Blom-Cooper, 1987: 216]. Less prominent were the echoes of the view propounded in the Maria Colwell report that it was the system which had failed [1987: 209]. The familiar problems were there. For example the communication between agencies was lacking [1987: 89].

Blom-Cooper regretted that, even after his earlier report, personnel had not responded to this professional and public duty [p 129]. He again indicated his predilection for coupling to be reinforced by law arguing that health authorities should be bound by a specific duty to promote the welfare of children [p 129] and their duties concerning child health should be spelt out in statutory fc.m [p 142].

The report draws attention to the context in which social workers were operating. A chapter was devoted to resource issues. It noted the background of financial stringency and rate capping, highlighting the turbulent and stressed context in which the child protection system was operating. The system was itself defective. it allowed "too much reliance" to be placed on one person [p 210] and it "spluttered and malfunctioned, because ... other agencies did not act fully in accepting responsibility alongside Mr Ruddock" [the social worker] [p 210]. Compensating leadership from managers was lacking, indeed their responsibility for the system was "usually absent" [p 141]. The Area Review Committee could be seen to be a weak coupling mechanism because its role was ill defined. It was unfunded and was unable to exercise real authority. Overall the diagnosis lead to the conclusion that:

> The present system, which is a fudge of the divided responsibilities - social services in respect of child care and the health and educational authorities for the physical and developmental health of children - should not be allowed to continue [1987: 210].

The prescription was for a different type of structure to protect children:-

> Nothing short of a joint organisation incorporation child care and child health will suffice [1987: 143].

Blom-Cooper, however, struggled to produce a revised structure which would be workable and politically acceptable [p 139]. His conclusions on the necessary reforms were not particularly clear cut. He contemplated entrusting overall management of the child protection system to one authority. This he suggested could be done by establishing a single statutory child protection authority

employing all relevant staff and doing all the work, but he conceded such a proposal would be too radical to gain support. An alternative means to the same end, he suggested, would be to give the overall responsibility for the child protection service to one authority together with the powers to require the assistance of professionals working in other authorities. It must be asked what stresses would be likely to be created when workers in one agency were effectively controlled by staff in another and whether any such system could long survive. Blom-Cooper had to acknowledge that control of child protection by a single agency might not be a readily realised aim. If it was not attainable, then he thought it should be possible to create a truly multi-disciplinary system with shared responsibility for management. In order to work, this would need an executive body appointed by the contributory agencies and, unlike the existing Area Review Committees, this body would have to be able to command. Such a solution, however, also throws up a number of problems. In particular, workers could find themselves trying to resolve conflicting orders from different bosses while the relationships between the parent authorities and this newly created creature could become fraught if interests clashed. The problems of loose coupling would be likely to persist.

Blom-Cooper preferred the radical solution of a Child Protection Service with a single controlling authority [p 143]. It would be nationally funded and answerable to a Minister of the Crown. It would operate regionally through local committees. It would employ its own staff "or be able to command the services of those with expertise in child care and child health" and control all professional staff necessary for it to perform its statutory functions. Apart from the continuing role of the NSPCC, it would have the exclusive function of investigation [p 143]. This approach represents an attempt to use the *task* as the organising rationale and coupling focus. The emphasis is on "Child Protection" rather than services dealing with child abuse. It follows an assumption that the correct strength of coupling cannot readily be assured within existing systems and therefore

proposes a structural response. Blom-Cooper's ideas for structural reform have not, however, been pursued by government. Instead there has been as Stevenson observed a "deafening silence" [1989: 179]. The failings in the system, it might be suggested, did not warrant the pursuit of solutions which would inevitably create a high degree of organisational turbulence with a risk perhaps, at least in the short term, of undermining those parts of the system which on the whole were working satisfactorily to protect children.

Butler-Sloss and Cleveland

Events in Cleveland caused working practices of social services departments and others to be examined from a different perspective. This time the concern was not with the death of a child but with the problems arising where there were suspicions of sexual abuse of children. In Cleveland, relationships between staff in health, police and social services authorities became a cause for concern when there was an "unprecedented rise in the diagnosis of child sexual abuse" and there was a bitter and public breakdown in those relationships [Stevenson, 1989: 173]. At the time, much of the publicity related to the decision making of the hospital consultant using the controversial anal dilation test and the subsequent use of 'Place of Safety' orders by social workers to remove children from the care of their parents [Butler-Sloss, 1988: para 2]. However, in terms of the analysis in the report, the focus this time was less on any individual child and more on issues of policy and management. The issue was put starkly by Stevenson with the question: "Put crudely, what happens when there is trouble in the higher echelons"? [Stevenson, 1989: 181]. In fact, Blom-Cooper had already focused attention on co-ordination at senior level and Butler-Sloss also pursued this theme. There were problems in Cleveland with the Area Review Committee [by now renamed the Joint Child Abuse Committee - JCAC]. Its potential to provide an effective coupling mechanism was limited because there was a need to clarify its goal and there were questions as to the extent to which participating authorities were committed to its policies and the idea of

96

co-ordination. Members of the committee needed to have enough authority to bind the agency they represented to its agreements [Butler-Sloss, 1988: para 3.67]. They needed also to identify themselves with the JCAC and loosen their allegiance to their parent agency to deflect the criticism that they were more concerned with protecting departmental interests than establishing an effective co-ordinating mechanism [Stevenson, 1989: 179-80; Butler-Sloss, 1988: para 3.64]. The report comments on the need for chief officers, for example the Director of Social Services and the Chief Constable to resolve problems at a policy level [eg paragraph 4.122] and draws attention to the way in which:

> The issue of divergent instructions increased the difficulties of operational staff in both organisations [Butler-Sloss, 1988: para 4.88].

Senior staff failed to recognise, and by implication deal with, differences of view at middle management level.

While the trend of policy over the years had been to tighten coupling by more prescriptive rules, the Cleveland inquiry also suggested that a degree of loose-coupling may be desirable. One of the complicating factors in the situation was a memorandum from the Director of Social Services indicating steps to be taken when sexual abuse was alleged or suspected. In particular this instructed social workers that

> where the consultant paediatrician is of the opinion that there is evidence of sexual abuse, *an immediate place of safety order should be taken* to protect the child's interests during investigation [Butler-Sloss 1988: para 4.86] (emphasis added).

This instruction removed any damping mechanism in the system which would have been provided by the ability of a social worker to exercise judgement to weigh up the risks to the child relative to its total situation. [Butler-Sloss has subsequently argued that in cases of sexual abuse the danger to children left at home was limited - *The Times* 9/3/92 p 3]. The memo also illustrates the problems of organisations developing their own procedures and coupling

97

responses to their own internal rules at the expense of coupling with external agencies. The social services memo created a rule for social workers that gave the key role in diagnosis to the consultant paediatrician while at the same time a police directive advised officers to look for substantial corroboration before taking positive steps on the diagnosis of the same consultants. Thus both agencies had "adopted without notifying the other, a formal stance which was likely to affect the mode of operation" of the other [Butler-Sloss: para 6.77].

Clearly in this instance the system failed to absorb conflicts inherent in the child protection system. Butler-Sloss acknowledged the need for agencies to act in pursuit of their primary tasks, to accept responsibility for their actions, yet not to be inhibited by arrangements for collaboration. The need was for information to flow between agencies prior to the implementation of new policies. This would be a responsibility of management.

Butler-Sloss concluded that the child protection system in the case of child sexual abuse required a more sensitive mode of inter-agency working. It should be loosely-coupled in the sense that it should not inhibit an immediate response by any professional agency where this was necessary in the best interests of the child [Butler-Sloss, 1988: 248]. The report reminded managers of their responsibilities for ensuring effective co-operation. It also, though, suggested improving co-ordination at operational level through the establishment of Specialist Assessment Teams [SATs]. Workers would remain with their parent agency but would be coupled together in multi-disciplinary teams containing "an approved medical practitioner, a senior social worker, and a police officer with sufficient authority to co-ordinate the investigation of cases". These workers should all be competent in working with child sexual abuse [Butler-Sloss 1988: 249]. This approach is akin to the multi-disciplinary Mental Handicap Teams. It is, however, more restricted because the SATs would operate only at the initial stage leaving follow up to others, raising the question as to whether such a

limited brief could be justified [Stevenson, 1989: 176]. The sexual abuse remit of these workers would, though, be embedded within their wider workload. Butler-Sloss stopped short of a team exclusively operating in this area of practice arguing it should only be part of their job. The SATs should be seen, therefore, as coalitions rather than fixed entities. They would be a node in the network of linkages binding the different agencies together. They would not be a fixed point rigidly constraining the activities of different agencies.

The Government Response to Reports in the 1980s

In the aftermath of the Beckford case but before the events in Cleveland, the DHSS brought forward a draft circular *Child Abuse: Working Together for the Protection of Children* and guide *Child Abuse - Working Together* [1986a & 1986b] which were to be developed, revised and extended through versions in 1988 and 1991 to provide more detailed guidance on inter-agency working than had previously existed. This move continued the *compensation* strategy of focusing on key aspects of the system. It can also be seen as part of a developing strategy of a more pronounced leadership role from the centre. The initial drafts reflected the concerns from the Beckford case [Parton, 1991: 122]. The advice given was not prescriptive on professional practice but was presented as "a guide" [DHSS, 1986a: 1]. There was not seen to be a need at this point for fundamental changes, but simply for an updating and development of existing guidance. Some significant changes in emphasis can, however, be found. These had implications for the definition of the task to be done and the pattern of couplings required to do it.

First, the circular and guide responded to concern expressed by Blom-Cooper about weaknesses at Area Review Committee level. These committees, it was proposed, should be fixed within a more structured framework of accountability, by being made answerable to the Joint Consultative Committee of the health and local authority [JCC], and annual reports which would also go to the Secretary

99

of State were recommended. The Area Review Committees were also to be renamed "Joint Child Abuse Committees" [JCAC] reflecting the emphasis on the child which the Beckford report had reinforced. Alongside this and reflecting the same theme by the removal of reference to the acts of the abuser, child abuse registers were to be retitled "Child Protection Registers".

Second, at the level of implementation, the part to be played by the "key worker" was spelled out. The concept of a key worker had been recommended in the 1976 circular [LASSL [76] 2] when it was suggested that "one of the participants in the case conference" could be this person, with the implication that they would be "The professional most closely concerned with the case and responsible for the actual management of it", who would be "identified as the focal point through whom information is channelled and made responsible for ensuring that it reaches all other participants" [LASSL [76] 2]. The agency from which this worker should be drawn and the extent of the responsibilities of this worker were vague. The 1986 circular and guide indicated the need for this feature of the system to be more clearly defined and it was clear that the worker was to be nominated by the Social Services Department [or where appropriate the NSPCC]. The role of the key worker was to be further clarified. This point was taken up in the subsequent definitive versions of the guidance document and is discussed later in that context [see Parton, 1991: 128 and DoH et al. 1991: 42].

Third, the tone of the circular and guide reflected the emphasis, again from the Beckford report, on the legal framework for protecting children at risk. Statutory responsibilities were spelled out. Duties and powers of authorities were identified. Health and local authorities were reminded of their statutory duty under S. 22 of the 1977 National Health Service Act to co-operate with each other.

Overall, then, while the 1986 circular and guide proposed no dramatic changes, their overall impact was to respond to earlier criticisms and begin a process whereby parts of the system which had previously been ill defined in terms of duties, responsibilities and relationships were more precisely stated and slotted into place. Couplings were effectively tightened without major rule or structural changes as the system was more tightly pinned in place by clarification of roles and explication of the legal framework.

This process was continued as the themes identified in the 1986 circular and guide were further developed through the 1987 White Paper, 1989 Children Act and further versions of *Working Together* [DHSS, 1988; DoH et al 1991]. The 1987 White Paper was concerned with the broad sweep of child care law and not specifically with the problems of multi-agency involvement. However, in the wake of the Beckford report these issues earned a high profile. In this respect, the White Paper pursued familiar themes. The statutory framework retained its prominence. The need for clearer laws was recognised [para 7]. In particular, it was accepted in the White Paper that the duties of health and local authorities to co-operate should be made more specific in the sphere of child abuse as had been recommended in the Beckford report. As far as education authorities were concerned, the White Paper foreshadowed the loss of their powers to initiate care order proceedings but the potential importance of their role was recognised with the indication that in care proceedings social services departments would be "required" [para 44] to consult LEAs. The 1989 Children Act subsequently laid out in explicit terms the duties of different agencies to co-operate with one another in safeguarding or promoting the welfare of a child in need. The position of the local authority as the leading body was indicated by the legislation. Section 27 of the Act gave the power to request the help of local authorities, local education authorities, local housing authorities, health authorities or any person authorised by the Secretary of State. Furthermore, those authorities were required to comply with such a request unless it was incompatible with their

statutory or other duties or unduly prejudiced the discharge of their functions. While there may still be room for judgement on what may constitute undue prejudice, this represents a clear attempt to tighten the system by statutory means. Local authorities through their social services departments should be able to request action by others with a high degree of predictability that the relevant response would be forthcoming. This was a process set in train before the events in Cleveland. Those events and the subsequent report were, though, to stimulate thinking and redirect the ideas emerging in the *Working Together* papers.

The first definitive *Working Together* document emerged in 1988 in the wake of the Butler-Sloss report. The familiar emphasis on the legal framework building up to the 1989 Children Act was there with the specification again of legal duties and powers [DHSS, 1988: paras 50-59]. While the overall approach in terms of policy and practice can be seen as incremental, building on and adapting what had been done before, the whole issue of working together was perceived as much more problematic than had been the case before. The change revolved around the issue of child sexual abuse. Dealing with sexual abuse was now seen as significantly different from dealing with other forms of abuse. This represents a clear redefinition of the problem to be solved. The implication is that a changed task will require changed patterns of coupling. In the 1970s sexual abuse had been subsumed within other categories of abuse. The 1986 circular had proposed that "sexual abuse should be brought within the system of handling child abuse work generally [1986a: para 14(g)]. The 1988 version of *Working Together* represents the observation of the 1986 draft guide to arrangements for inter-agency co-operation that "the handling of cases of child sexual abuse is usually complex" [DHSS, 1986b: 24 para 3.1] but continues:

> The experience gained in developing procedures for inter-agency co-operation and joint working by other agencies on other forms of abuse will be helpful in developing similar procedures for co-operation on sexual abuse but will not be sufficient. Sexual abuse has features which require

separate consideration in order to see how existing inter-agency procedures can be adapted to include it [DHSS, 1988: 33].

The document is silent on the nature of those particular features and Stevenson observes that "to those who have long stressed the importance of multi-professional work in various fields, the emphasis that it is receiving in child sexual abuse is puzzling and requires further analysis" [Stevenson, 1989: 173]. The significance perhaps lies in the renewed emphasis on inter-professional work given by the events in Cleveland, exposing the need for further clarification of issues. In terms of questions of loose or tight coupling, the problems dealing with alleged child sexual abuse had revealed that mechanistic procedures alone did not guarantee appropriate responses. While in some instances tighter coupling may have been desirable, in others it may have led to inappropriate responses. The 1988 reaction was one of further clarification and renewed definition. Parton detects an important change of emphasis from 1986 with much more weight on "working together" rather than developing knowledge and skills within the individual professions [1991: 125]. This emphasis can be seen in the advice on procedural handbooks which it was argued "should be concerned mainly with inter-agency procedures rather than detailed professional practice" [DHSS, 1988: para 7.13].

Attention in *Working Together* continued to be focused on the higher managerial echelons. Area Review Committees, redesignated Joint Child Abuse Committees in 1986, were again retitled Child Protection Committees bringing them into line with the already renamed Child Protection Registers. The change reflects the altering emphasis of work with the focus clearly now the child and its protection. Other aspects of the work of individual agencies, such as supporting families, whatever the emphasis in the Children Act about parental rights and responsibility, are secondary. Doubts, though, seem to have set in as to the appropriate lines of accountability. The principle of accountability to the Joint Consultative Committee of the health and local authority [JCC] was diluted

Agencies with ACPC members are "Jointly responsible for ACPC actions [DHSS, 1988: 38]. The JCC was merely to be informed of decisions when appropriate.

At operational level the document reaffirmed the centrality of the case conference. Care should be taken to arrange conferences so that those "with inflexible commitments, for example single handed general medical practitioners or teachers" could attend [DHSS, 1988: para S. 43]. Teachers had not been mentioned in this context in the 1986 guide [DHSS, 1986b: para 2.20]. Despite a general trend towards rule tightening, however, Parton [1991: 127] has pointed out that the 1988 document did allow a little more flexibility in the procedures at this stage than had previously been the case. The advantages of some looseness in the system were recognised. The 1974 edict was that a case conference should meet "as soon as possible" [LASSL [74] 13 / CMO [74] 8 April 1974] whereas by 1988 it was agreed the timing could vary perhaps after a 'strategy discussion'. This relaxation and the introduction of the 'strategy discussion' concept makes some allowance for professional discretion, perhaps to prevent the problems of automatic but inappropriate responses from a too tightly coupled system.

The powers of the case conference were also clarified. It was again made clear, as it had been in the 1986 draft guide [DHSS, 1986b: para 2.16], that it did not have executive powers. Its remit was to make recommendations to individual agencies. The only control on those agencies would be that they would be expected to inform the key worker if they were not to follow those recommendations. The document reaffirms the importance of the key worker to co-ordinate inter-agency activity. The position of this worker, it was made clear, derived from the agency with statutory powers [ie the Social Services Department or the NSPCC] which would be the "lead agency". This was quite a different perspective to that adopted in the 1970s. By 1988 it was explicit that the key worker would not necessarily be the person with the most face to face

contact with the child as had been assumed a generation earlier. In terms of co-ordination, it was no longer a case of co-operation between equals. To *compensate* for the problems of looseness in the system, coupling was to be tightened to the extent that there was now a clear leader, albeit with limited powers of coercion, except for the powers to request help given in the 1989 Children Act.

Other mechanisms to improve inter-agency working were outlined. Again, building on the 1986 draft guide [1986b: para 2.36], agencies were urged to ensure that there would be expert advice available to staff by appointing a suitably qualified and experienced officer to provide it. These experts were seen as further couplings in the systems network for inter-agency work although at a general rather than a case level. They

> should also be given responsibilities for example to act as a liaison point for contact and co-ordination with other agencies, to promote good policy and practice developments with the agency, and advise on training needs. Identification of officers with experience to act as central points of advice and contact will do much to facilitate inter-agency co-operation [DHSS, 1988: para 5.33].

In terms of schools, the 1988 document can be seen as very significant in establishing them as part of the system. It identified the role of teachers and other school staff as "particularly well placed to observe outward signs of abuse, changes in behaviour or failure to develop" [DHSS, 1988: para 4.1]. Parton observes that "this was the first time that teachers were officially identified as having a significant role" [1991: 123-4]. It was also envisaged that they had a role in prevention in the short term through a curriculum aimed at inculcating the responsibilities of adult life.

Generally, however, it is possible to detect in the 1988 document an emphasis on tightening coupling by the identification of rules to be followed. The problem for this type of approach is that the more precisely the rules are laid down the

more vulnerable they are to changing circumstance. Hardly were the 1988 guidelines in place than a new and expanded version of *Working Together* was produced [DoH et al, 1991] to take into account the 1989 Children Act. In many respects this confirmed the ideas of the 1988 version but with the amplification came changes of emphasis. In the same year, 1991, the Department of Health also published its review of child abuse inquiry reports [1980-89] [DoH, 1991a] and new guidelines on *Working with Child Sexual Abuse* [DoH, 1991b]. There were also "new" problems to respond to with allegations in the late 1980s and early 1990s of ritual and organised abuse eg in Nottingham, Manchester, Liverpool, Rochdale and Orkney [see for example Neate and Sone 1991].

The 1991 version of *Working Together* reflected the inter-agency approach, again emphasising the need for co-operation and the need to share information. It did so, however, from a wider government base. The sponsoring central departments now extended beyond the DHSS and Welsh Office who produced the 1988 version to incorporate also the Home Office and the Department of Education and Science.

The scope of the system recognised as relevant was extended. For the first time, there was official reference to the role of political accountability. It was not just chief officers but also "authority members" who "must take the responsibility for establishing and maintaining the inter-agency arrangements" and it was made clear that this related to Regional as well as District Authority members [DoH et al. 1991: para 2.3] The advice on the remit and constitution of the Area Child Protection Committee [ACPC] was extended. The problematic nature of its relationship with its parent agencies was again addressed. The attractiveness of tying it to the Joint Consultative Committee [JCC] appears to have dulled still further. The 1991 document made no reference to the JCC. Instead the advice was that there should be a clearly defined and agreed relationship with its constituent agencies, who should commit themselves to its policies and

procedures. The advice on ACPCs continued to emphasise the legal environment. First was the inclusion of the statement that the local authority should be responsible for making sure that there was adequate legal advice for the ACPC. Second was the addition as one of the main tasks of the ACPC "to monitor the implementation of legal procedures" in addition to reviewing local guidelines and procedures [DoH et al., 1991: para 2.12]. The importance of ensuring coupling was appropriate was more evident. The tasks of the ACPC were also described with greater urgency - for example in relation to procedural handbooks the guidance had strengthened from the more relaxed "ACPCs should review and, where necessary, revise ..." [DHSS, 1988: para 7.13] to the more compelling "ACPCs should regularly examine and, where necessary revise ..." [DoH et al, 1991: para 2.18].

Similarly tightening can be found in the guidance on conferences. The emphasis on the concept of child protection was extended with the designation of the initial case conference as a Child Protection Conference, while subsequent conferences are distinguished as Child Protection Reviews. These conferences were therefore clearly distinguished from one another and also other types of case discussion. The document highlighted the integral role of the conference:-

> The child protection conference is central to child protection procedures ... The conference symbolises the inter-agency nature of assessment, treatment and the management of child protection ... the conference is the prime forum for sharing information and concerns, analysing risk and recommending responsibility for action. It draws together the staff from all agencies with specific responsibilities in the child protection process ... and provides them with a forum for conducting and agreeing their joint approach to work with the child and the family [DoH et al 1991: para 6.1].

Within this framework, though, the document brought to the fore the statutory powers of the Social Services Department [or the NSPCC] as the lead agency. A conference could only be called after an investigation had taken place and then it would be the lead agency which convened it when there was an "indication that a decision has to be made about further action" [DoH et al., 1991:

para 6.3]. The lead agency, then, was the linchpin of the system carrying the power to, and the responsibility for, the critical decision to set the wheels in motion. It would be the compensating mechanism for any excess looseness in the system.

Working Together in 1991 was also clear on the powers of the child protection conference. The only *decision* it could take was whether or not to place a child on the child protection register and, if this was agreed, to allocate the key worker. Even here, though, the mechanism was not clear. Absent from *all* the circulars and guidance from the 1970s on is any indication of *how* a conference should take a decision. Effectively it would appear to be the case that the decision is made by the chair person [DoH et al., 1991: para 6.29]. This person, unless there is a local arrangement with the NSPCC, must be a member of the Social Services Department [DoH, 1991:para 6.29]. This person, therefore, represents the agency with the statutory duty, as well as having the responsibility for reflecting the mood of the meeting. The position of the Social Services Department as the focal point for decision making and co-ordination is thus reinforced. There was no longer room for the 1972 suggestion that a consultant paediatrician was the appropriate person to convene a conference [see above p 78]. The pattern of coupling had changed significantly.

Once a decision to register has been taken, the *Working Together* documents reflect further tightening of the system. The 1988 document referred to the need for the key worker's agency to formulate a plan which "should clearly identify the contributions which individual agencies have stated they will make to it" and for this plan to "be recorded in the note of the case conference as the recommendation of the case conference to the constituent agencies" [DHSS, 1988: para 5.22]. By 1991 this is expressed more forcibly and the requirement is more specific.

A written plan will need to be constructed with the involvement of the

carers/parents and in the light of each agency's statutory duties and will identify the contributions each will make the child, to other family members the abuser...

Once the plan has been agreed, it will be the responsibility of individual agencies to implement the parts of the plan relating to them and to communicate with the key worker and others as necessary [DoH et al., 1991: paras 5.17.1 and 5.17.2]. There is a problem, raised by the *voice of causation*, of lack of clarity of how the means will achieve the ends desired. It is not clear from the documentation how this plan should be decided upon. Although initially it may appear to be so, it is not a conference decision. The conference is, however, the practical occasion for drawing it up when relevant agencies are present. The social services department, through the key worker, will be responsible for the management of the plan. It will therefore fall to the social services department representatives to take the lead in the formulation of this plan.

Working Together also extended guidance on other administrative arrangements beyond the hub of the child protection conference. The advice in the 1988 document to appoint experts to provide advice and carry a co-ordinating function was further built on. Agencies were given specific instruction to identify senior staff to co-ordinate child protection work within their organisation. Thus health authorities were told to "identify a senior doctor, a senior nurse with a health visiting qualification and a senior midwife [designated senior professional] as the co-ordinator of all aspects of child protection" [DoH et al., 1991: para 4.20]. Their role would extend beyond doctors and nurses to include other personnel such as physiotherapists and occupational therapists [1991: para 4.21]. Health authorities were advised that provision for the working of these arrangements should be incorporated in relevant contracts in the purchaser/ provider system of health care emerging at that time.

In a similar vein and in a clear response to the urgings of Blom-Cooper, the

Working Together documents recommend that in each school the head teacher or a senior member of staff should be nominated to liaise with social services and other departments over suspected or actual cases of child abuse. This would identify a clear linkage point and in that respect coupling could be said to have been tightened. The coupling remained loose, however, in that the role of the designated teacher was to "act as the channel for communicating to the social services department relevant concerns expressed by any member of the school staff about individual children" and if this channel is blocked or broken, then the originator of concern is decoupled from the social services department.

Not all the advice relevant to working together involved structural or organisational issues. In particular, the increasing emphasis on the paramountcy of the interests of the child can be seen. The Beckford report had set the tone in focusing on the interests of the child. This provided a principle, and clear task focus, to act as a guide for inter-agency working and as such is clearly a coupling mechanism. The emphasis on the child also provides a counterbalance to the increasing emphasis on legal aspects of child protection and the increasingly central role of the police. While *Working Together* [1991] acknowledges the primary responsibility of the police to protect the community and bring offenders to justice it states unequivocally "Their overriding consideration is the welfare of the child" [DoH et al., 1991: para 4.11]. This, it can be suggested, reinforces the power of the social services department because they, of all agencies, could be argued to have a primary remit to identify and protect the welfare of the child.

The government response post-Beckford, -Carlile and -Cleveland, then, reflected a heightened awareness of inter-agency, inter-professional relationships. Coupling was increasingly tightened. The *Working Together* documents were generally increasingly detailed and prescriptive. Although procedures continued to be based mostly on guidance, the legal framework was now more prominent

with the requirements to co-operate spelled out in the 1989 Children act. The shift to 'child protection' also reflected a more tightly specified task, reinforced by laid-down systems for its completion. Increasingly, managers and members were being called to account for ensuring effective inter-agency relationships. The documents recognised the contribution of agencies hitherto relatively neglected. In the case of education, the important role of schools was identified. Cumulatively, however, co-ordination was advanced by placing the social services departments in an increasingly powerful position. By the 1990s, with the backing of law, they could expect others to co-operate. The procedures clearly identified their position as the "lead agency" which, in the final analysis, could make critical decisions. Linked to this, the increasing emphasis on the welfare of the child gave them the authority of expertise in the decision making process. Overall, the child protection system had become more tightly coupled to the Social Services Departments. The tightness, though, may have been unidirectional, with Social Services Departments in a dominant role.

Commentary

The theory of loosely coupled systems, used as suggested by the voice of typology as a guide to understanding, has provided a useful imagery for exploring the development of policy to co-ordinate services. In explaining his ideas on loose coupling, Weick [1976] indicated that what was coupled could vary; it might be systems or it might be events. This distinction was reflected in the attempts to improve the co-ordination of services for children at risk of abuse or neglect through facilitating particular administrative structures [or systems] and processes [or event linking mechanisms]. At times, efforts were directed towards the coupling between administrative systems which were loosened or tightened as seemed appropriate. For example, an all purpose, integrated poor law was eased apart to loosen out services for children in 1948, only for these services to be pulled back into a tighter welfare organisation with the creation of social

111

services departments in the 1970s. Later, the attempt to integrate and tighten the organisational aspect of the system was pursued with the introduction of conferences, committees and posts designed to provide points of linkage. At other times the emphasis was on coupling events. This was particularly evident in the era following the death of Maria Colwell when procedural rules were introduced in a search for greater predictability of response. The passage of time was accompanied by these rules being developed with increasing elaboration and precision.

What influenced the patterns of coupling that were adopted? Undoubtedly a key factor was the changing perception of the task to be undertaken. Linked to this were changing ideas about the client being served - whether it was the family or the child. The all-purpose poor law and welfare departments reflected a perception of the child as a family member with no great emphasis on the child having distinctive individual needs. It was the recognition of the child as having particular needs which led, as mentioned above, to the loosening of services for the child from this system. It was the focus again on the family as client which saw the pattern of organisation change in the early 1970s. Despite the fact that education departments could be seen as child centred agencies, it was the perception of them as having as their main task the schooling of children which stood in the way of their becoming the agency for the child.

For most of the twentieth century, the patterns of organisation and coupling reflected a general perception of the task of welfare agencies in respect of children being "child care", that is to say a general welfare concern. The coupling between agencies and workers has changed as the focus has shifted. In the 1960s, the task was modified with the recognition of the *battered baby syndrome*. This was a medical "discovery" and was to be dealt with by a medical therapeutic model with doctors at the centre of the system. With the death of Maria Colwell, the task was redefined in terms of child abuse. It was

112

still, though, perceived in terms of a socio-medical problem with the focus on therapy once the problem was identified. The systems and processes set up in the 1970s reflected this with doctors and social workers at their heart. By the 1980s the legal dimension was recognised as significant and the dominant model become a socio-legal one [Parton, 1995]. Mechanisms again reflected this, with the police integrated tightly into the system while medical interests were eased out. As the task was construed in legal terms, stronger legislative elements to reinforce co-operation were introduced. It may be that the balance will swing to a more socio-therapeutic model as conflicts emerge between the need to collect evidence against abusers and the best interests of the child. In 1992, for example a NACRO committee chaired by Lady Howe urged treatment not punishment for sexual offenders against children - a move which would free support for the child from the strait-jacket of the requirements of criminal law [*The Times* 20/2/92]. These changes can be detected, too, in the terminology being varied from a focus on the act of child abuse to child protection.

Co-ordinating mechanisms have been shaped in other ways by how the task has been defined. Policy has largely been developed in the wake of perceived failures, followed by inquiries. Usually, the problem has been seen to be a consequence of loose coupling, arousing the *voice of compensation*. At times, though, the voice of *direct effects* has been heard, calling for looseness in the system to be preserved. Until the inquiries into failures in local authority residential care, such as 'Pindown' in Staffordshire and the case of Frank Beck in Leicestershire [Levy & Kahan, 1991; Kirkwood, 1993], these failures and inquiries have focused on the problem of identifying and responding to the endangered child in a preventive fashion. Most of the official pronouncements and attention, in circulars and guidance, have, therefore, related to the detection and assessment stage. As a result, it should not be surprising that those whose influence rested on therapeutic models have found their grip looser in the recommended systems. The element of these systems which projects into the

treatment stage is the key worker managing the action plan. Generally, though, co-ordination at the therapy stage is less prescribed and may reflect a range of other influences. Perhaps the models of case management adopted in community care and designed to simulate a market situation could develop here. The key worker is effectively the case manager responsible for putting together the package of care identified in the written plan. From this, it is a short step in principle to managing a budget and co-ordination through the power of the purse in the market place [although Hallett, 1991, questions some of the practical implications of such a move].

Some observations have already been made on ways in which changing ideas on the task in hand, linked to changing patterns of coupling and co-ordination have also been allied to the balance of power between agencies and professions. In the early 1970s, the medical profession was dominant. The task was defined in its terms and consultant paediatricians were seen as appropriate to chair case conferences. Events in Cleveland are symptomatic of their loss of power. By the 1990s, while seen as having a major role to play, the medical profession had been eased from its centre stage position. Teachers, although backed by Kilbrandon in Scotland and seen as having an important social role by Plowden, were kept on the periphery as were education welfare officers. Their presence has been recognised fitfully rather than consistently in the official documentation. School nurses have received only passing mention in the debates, in contrast to health visitors who have been more prominent, if only in supporting rather than a leading role. While in the 1970s the police had been left at the margins, in the 1980s they came to occupy an increasingly important position so that the practice of other workers was constrained by the police need to collect evidence for prosecution.

It is difficult to disentangle agencies from professions in welfare when examining the power struggle. Was the dispute over the organisational home of the

114

education welfare service a battle between the teaching profession and the social work profession or an inter-departmental local authority fight? Were the disputes in Cleveland between a police and a health authority or did they reflect divisions based on professional allegiance? By the early 1990s, there was evidence that the social work profession within the social services departments was attaining the dominant role with respect to children at risk. Seebohm had recognised that there were limits to co-ordination without a clear point of authority [see p 59 above]. The history of the Area Review Committees and Area Child Protection Committees indicates problems of accountability and command at policy level. The early hopes for the case conference as an authoritative decision making body have faded. The developments of the 1989 Children Act and *Working Together* have, however, put the social workers in the social services departments in a powerful position. The government may not have reacted positively to the Blom-Cooper call for a supremo agency, but in practice many of the features he sought have been realised within the social services department.

The question of the extent to which the policy developments described represented symbol rather than substance must remain open. Clearly, very real changes did take place in the way the system operated. There were changes in the balance of power between the workers involved. Whether this improved the service available to families and children is harder to assess. However, a case can be made, particularly in the crisis driven situations of child abuse inquiries, for arguing that the initiatives taken had high symbolic value. Policy makers would have wanted to signal to a concerned public that they took the protection of children seriously. Services under pressure could point to the legitimacy of their actions by references to procedures being followed, concerns that offenders were getting away with assaulting children could be assuaged by the presence of the police. The work done on producing procedural guidelines could be argued to have made sure that service providers were fully aware of the

need to work with one another in the interests of children. The changes were designed to have a real impact on the way people worked but even if their importance was symbolic, it can be suggested that they were potent symbols which could indirectly have real effects. If nothing else the discussion about the nature of mechanisms and roles helped to clarify the picture of how the system might be expected to look. The process of clarification would therefore tighten couplings as participants could be expected to move to closer agreement about the construction of their world.

Overall, the historical perspective shows that, predominantly, it has been the *voice of compensation* which has been heard. The trend has been for coupling mechanisms to be tightened. In organisational terms this has been achieved through structural reform in the 1970s and since then by increasing the significance of joint mechanisms and increasing and highlighting the points where agencies are expected to intermesh. In procedural terms this has been done by laying down clearer rules and invoking the power of the law. The *voice of direct effects* has, though, sometimes made itself heard. The constant need for amendment and revision of the workings of the child welfare system, indicates the desirability of retaining some looseness within the system. Looseness is also required because of problems of defining precisely when a child is at risk, so that the relevant parts of the system can be activated. These problems have ben illustrated by the disagreements about intervention in cases of alleged child sexual abuse. There are indications that this need for looseness is recognised, for example, with the loosening introduced by the possibility of strategy discussions before the full response system is triggered. A loosely coupled system, though, means that responses cannot be so easily predicted. If it is to be successful it will depend upon the appropriate orientation and judgement of individual workers and their ability to relate the situation to their own professional tasks. These are issues which are dealt with in subsequent chapters.

116

Chapter 5
FIELDWORK METHODOLOGY.

Identifying the fieldwork focus

The foregoing chapters have dealt with the first leg of the study which explored co-ordination, using the tool of a loosely coupled systems framework, to take apart policies designed to alter the structures and processes of relevant agencies. This part of the study moves on to the second leg, concerned with implementation, and focuses on the level of the individual worker. It explores how workers experienced the system in which they were employed. To do this, it explores their *perceptions* of how the system operated. As was argued in Chapter 2, participants in a system will interpret their world and construct ways of making sense of it [supra chapter 2, p 26 - 27]. The logic of the voice of *direct effects* included the proposition that loose coupling allows cognitive discretion. When coupling is loose there will be more movement in the system, so that workers in it will not see a consistent and easily calculable pattern. When coupling is tight, the pattern will be fixed and predictable. Conversely, changes in the tightness or looseness of coupling will, therefore, affect the extent to which different actors are able to hold different meanings of a situation. The looser the system, the more interpretations there will be. The tighter the system, the fewer there will be. It thus becomes possible, by looking at the extent of agreement and disagreement, to use these perceptions as indicators of levels of coupling. More importantly, by comparing them at different points in time, it becomes possible to identify *change* in the degree of coupling. The fieldwork in this study builds on this to explore the perceptions of workers to show the extent to which the changes in policy in recent years, described in the previous chapter, have had a real effect on them. The fieldwork, therefore, involved two stages. These were separated by nine years.

The original planning took place in the early 1980s and the first stage of fieldwork commenced in June of 1984. The first task was to establish who the relevant workers for study should be. A decision was taken to focus on relationships between those working in services which would have an interest in situations of potential or actual neglect or abuse, now often thought of in terms of child protection, and to concentrate fieldwork on them. In this context it was decided to select workers from sectors that traditionally could be said to have had primary responsibilities for children, namely education, or for welfare, including that of children, namely personal social services and health. It is acknowledged that this identifies only a partial system even in the context of neglect and abuse. It omits other sectors that could well be significant, such as the police, and there is undoubtedly scope for other studies to incorporate them [eg Birchall and Hallett, 1995]. The decision to exclude the police was a pragmatic one based on resource constraints for the study. However, the police contribution was not ignored in this study because it was recognised it would be incorporated in the analysis of policy development and reflected in the information collected through fieldwork. Once the education, health and personal social services sectors in relation to children who were at risk or had been victims of neglect or abuse had been chosen, there remained still many potential types of workers in each. If a broad definition of worker is taken to include not just paid employees but all those with a contribution to make, then the range runs from members of committees or authorities, through senior managers and specialists to front line workers. Some of the possibilities are set out in Table 5.1.

Table 5.1. Range of possible 'workers' in different agencies		
Education	**Social Services Departments**	**National Health Service**
Members of the Education Committee	Members of the Social Services Committee	Members of Health Authorities and Trusts
Education Officers	Directors and Managers	Managers
School Governors	Team leaders	Hospital based staff - medical (including Paediatricians) and nursing
Head Teachers		
	Senior Social Workers	
Classroom Teachers		
	Field social workers	Community Medical Officers/School Doctors
Teachers with specialist roles	Social work assistants	
Ancillary staff eg School meals supervisors	Child Guidance Social Workers	Community Nurses - Health Visitors School Nurses
Educational Psychologists	Heads and staff of Community Homes	General Practitioners
Education Welfare Officers		
Community based workers		

The above list is by no means exhaustive and many of the job titles changed during the course of study. From their different perspectives, though, all of these would be seeking to make sense of the child welfare and protection world and their part in it. It was decided for this study to concentrate on those who were close enough to the child to have direct personal contact with him or her but who were also 'boundary' workers who would have contact with workers in

other agencies and so would be engaged where different worlds might collide. It was also decided, given the identification of the education system, to concentrate on the main sphere of interest of that service and relate the study in particular to the child in school. The workers with whom fieldwork was to be carried out were, from education: head teachers and education welfare officers, from social services departments: field social workers and, from the National Health Service: school nurses. It had originally been hoped to include other types of worker but it was decided that it would be impractical to do so with the resources available.

Developing research instruments

As has been indicated earlier, the aim of the fieldwork was to explore in particular how workers made sense of the system in which they operated, by surveying matched samples of workers, at two well distanced points in time, to explore possible changes. There are a number of ways in which this could be done. One way would be to observe sets of events and collect from the participant workers information about their understanding and interpretation of those events. This is the type of approach favoured by Orton and Weick who recommend "ethnographies, case studies and systematic observations" [1990: 219]. However, such approaches would present many practical difficulties. It would be difficult to manage the necessary participation for an ethnographic approach which would entail the researcher being involved and from that involvement attempting to work out the understandings guiding the behaviour of participants. This would be the case particularly given the organisational and geographical dispersion of those involved and the time that this would consume. It assumes that it would be possible to negotiate access with all agencies at the relevant times and that significant events would be predictable enough to arrange for observation. These considerations would apply to any form of systematic observation and indeed to a case study approach involving observation and participation. It was also necessary to devise a research strategy which would

not suffer rejection because it was vulnerable to problems which might arise from considerations of issues of confidentiality.

The method chosen, therefore, was to use a projective technique. This involved the use of short vignettes which could be presented to workers who could then be asked a series of questions about them. Various projective techniques have been developed by social scientists [see Oppenheim, 1992 chapter 12], for example, picture interpretation and sentence or story completion. Projective techniques were originally most ambitiously developed by clinical psychologists and psychiatrists concerned with personality problems and diagnosing emotional disorder. In such circumstances projective techniques were often used to probe attitudes or aspects of the personality of which respondents might be unaware or even wishing to conceal. The aim in this study was to use similar means to tap into knowledge and belief systems in a like fashion. The use of a projective technique was also thought to offer a more relaxed scenario for respondents than what might be perceived as an inquisition on past activity where they would have to justify their actions. As Selltiz et al [1965: 295] noted, an advantage of projective techniques is the greater ease of obtaining 'free' responses and the lack of requirement to spend a long time developing rapport so that respondents would be willing to talk freely. This also circumvented many of the problems of respondents who would not wish to risk disclosing confidential information about clients or colleagues.

The technique used in this study was a development of the story completion technique. The story in this case would relate to a potential problem situation confronting the respondent about which he or she had to make decisions. A similar approach has been used by others seeking to explore knowledge and attitudes relevant to social welfare provision. Shepherd, Cooper, Brown and Kalton [1966] presented General Medical Practitioners with a series of vignettes

of socio-medical problems and asked them how they would respond to each of them. Glampson, Glastonbury and Fruin [1977] who set out "to discover how much knowledge the consumers and non-consumers had of the social services" preferred this technique on the grounds that "direct questions rarely tap the extent of knowledge and imagination sufficiently". Others concerned with the child protection services have also used this technique although sometimes with a more limited focus. Giavannoni and Becerra [1979] developed a series of vignettes of child abuse to elicit how severe respondents would rate them. Subsequently Fox and Dingwall [1985] conducted an exploratory study in Britain using a similar approach to explore the ways in which social workers and health visitors categorised child abuse. Most recently Birchall and Hallett used vignettes for their report on *Working Together in Child Protection* [1995]. They note the question marks over the extent to which vignette studies have been replicated and validated but nevertheless see potential in them for the generation of material for descriptive and interpretive analysis [1995:12-13]. As Finch observed in her review of the *Vignette Technique*, its strength lies in "eliciting material about commonly understood norms, concepts and rules about what ... relationships ought to be like" [1987:107]. In her study she was exploring family relationships but the general principle is transferable to other contexts.

A shortcoming of this kind of approach is that respondents could react in an 'ideal' way. They could indicate what they thought should be done which might not be the same as what would be done. The weakness is acknowledged, but there is no reason to believe that it should be more problematic here than in other forms of questioning. Even if answers did reflect ideals rather than actuality this could still tell us something about how respondents interpret their world [Birchall and Hallett, 1995: 15]. Whatever the basis of the response given by subjects, the crucial part of the research process lies in the interpretation. Paradoxically, the quality which characterises the vignette approach, that respondents answer in their own implicit terms, is both its weakness and its

strength.

When these various investigators used vignettes to probe knowledge and beliefs they used them in more structured and less open ended ways than when they had been used as a psychiatric technique. Vignettes have been used rather as a vehicle for presenting respondents with a series of specific questions with a mixture of closed and open options for answers [Finch, 1987; Birchall and Hallett 1995: Appendix 1]. Depending upon the nature of the study there is a trade off to be made between the advantages of spontaneity, breadth, depth, and subtlety [accompanied by problems of interpretation] and the advantages of precision, reliability and comparability [accompanied by problems of how fully they reflect respondent's views]. Other variations have reflected the amount of detail or complexity in the vignette offered to the respondent and the number of vignettes on which people have been asked to comment [Birchall and Hallett, 1995:12]. The less detail that is given the more freedom the respondents are given to impose their own understandings and contexts on the story. They might, however, seek more information in order to make a decision or offer a range of possibilities depending upon the exact circumstances. The more detail that is given, the greater control the researcher holds to the point that it would be possible to use vignettes in an experimental fashion by altering specific variables [Alexander and Becker, 1978]. Birchall and Hallett attempt to capture the strengths of both by a combination of short subjective vignettes and longer ones for more detailed exploration. Like Finch [1987] they employ the technique of unfolding the story as they progress through the questioning [1995: Appendix 1].

As has been indicated earlier, the emphasis for this study was on exploring the world maps of workers in different parts of the system and then re-exploring them again at a later date to see what evidence of change there had been in response to events and policies. Relatively brief vignettes were used which would allow

123

respondents freedom to develop their implicit understandings. It was decided to concentrate the situations under consideration to times of initial concern when information about the situation of a child had come to the attention of respondents. A series of possible scenarios was developed with situations ranging from what might have been seen as predisposition for abuse to acute abuse and with the age of the featured child ranging from new entrant to potential school leaver. These were to be probed by a series of questions to pursue the perceptions of respondents as to how the cases should be handled. It subsequently became clear that given the nature of the questions to be asked this range and complexity of vignettes was over ambitious because it would be too time consuming for each respondent to go through them all. For the same reason the strategy of unfolding the story as the questions progressed was not pursued.

The research was based on the design that a sample of the different types of worker would be presented with the vignettes and questioned about them. This would yield data that would provide a 'base-line' allowing a map of their perceptual worlds to be charted and compared. This would be followed up at a later date when the vignettes would be presented to further samples of these workers so that perception could be compared. To provide some identifiable grid lines it was considered that this data collection should be structured. Certain questions would be of the kind that would have a closed number of possible responses. However, to explore understanding further these would be supplemented by open ended questions which would allow explanation and contextualisation.

How should such data be collected? The relative merits of self completed questionnaires and interviews have been thoroughly debated elsewhere [eg. Moser and Kalton, 1971]. Questionnaires are relatively cheap and quick. They are suited to large samples and they ensure that every subject is responding to

exactly the same material. Their weaknesses include problems of poor response rates and the need for all respondents to be able to understand them. A questionnaire lengthened for clarity may present a thickness of paper to daunt hard pressed workers. Personal interviews have disadvantages of cost, particularly in the time taken per interview, and there are dangers of subjects responding to different interviewer stimulus as well as to the research material. Their main advantage lies in their potential for eliciting more qualitative explanations and in the added insights offered to the researcher who can see respondents in their work setting and may also be offered additional material through asides or comments which subjects would not wish to commit to paper. Skilfully conducted, they may also provide a more rewarding experience for those taking part who are able to explore their own questions about the project. It was for these advantages that an interview approach was preferred for this study. The interviews would be conducted by the one researcher. This would reduce the problems of different interviewer stimulus.

Once these decisions had been taken, the tools were designed and discussed with professional colleagues and then piloted on samples of teachers and social workers [Clarke, 1986a]. As a result of this work it was confirmed that two vignettes would be used per interview. More than one was thought to be desirable because of the limited picture only one would give. However, more than two was shown to be impractical if anything beyond the most superficial questioning was to be possible. It was also decided to limit the survey to the primary aged school child. This would reduce the number of scenarios and mean that the research could concentrate on primary head teachers whose role and perception could reasonably be expected to differ from those of secondary head teachers.

Operationalising the research strategy
Because the research was seeking to compare the commonality of view of

different workers of the child welfare or child protection system, it was important that they should all be operating within the same system. Fieldwork was therefore to be focused on workers operating within co-terminous boundaries. Permissions were therefore sought from relevant local health, social services and education authorities all operating exclusively within the same county and district health authority. These had to be obtained twice, once for the first stage and then again for the follow up. This was a challenging task. Some of the difficulties facing university researchers have been outlined by Platt [1976: chapter 4, see also Payne, Dingwall, Payne and Carter 1981] and include factors such as resistance to being over researched by organisations and the internal politics of those organisations. Because it was necessary to obtain the simultaneous agreement of all the agencies and because respondents from other child protection systems could not validly be substituted, the success of the research design rested precariously it seemed at times on the successful outcome of these requests for help.

Initial approval in principle to conduct the research was obtained from the agencies without difficulty. However the project was delayed in both stages because of other demands on the social services department. At the first stage of the research, the project was in competition for departmental support with other major research projects. This was at a time in the early 1980s when the department was also under pressure to meet externally imposed requirements, for example in relation to recent legislation in the field of mental health and of special educational needs. More specifically, the department was in the throes of implementing its new "Child Care Strategy" a major part of which was concerned with the relationship between social services and education. As a result, fieldwork was postponed for several months in order not to complicate what was seen by management as a sensitive situation. These sensitivities seemed to be confirmed by the suspicion of the project by of some education welfare officers.

At the second stage of the project, the timing of fieldwork was again affected by local politics and pressures on departments. When the education welfare service was approached for help, its future was under review and it seemed possible that it might not survive. Priority was therefore given to completing interviews with EWOs. The social service department was again feeling the pressure of all the demands placed upon it. These ranged from the everyday workload bombardment of staff, to a programme of change within the department and again competition from other research projects. As a result there was a delay of one year before agreement to proceed could be obtained.

The survey population

The workers who were to form the survey population have already been identified as social workers, school nurses, education welfare officers and primary school head teachers. The decision to conduct the survey by interview and to include open-ended elements generating discursive material within that interview restricted the number that could be questioned. At the first stage, a decision was taken that a target of 100 interviews would provide a sufficient basis for an overall picture to be painted and for the profiles of different categories of worker to be compared. In the event 93 interviews were carried out. At the second stage, the experience of the first round of interviews indicated that, within the resources available, it would not be possible to conduct such an extensive programme of interviews. The possibility of increasing the number of respondents by use of a postal questionnaire was rejected because there would be question marks over the comparability of data collected in different ways. It was therefore decided to persevere with the interview approach but to aim for a target which would be manageable but would be large enough to indicate possible patterns in responses. A target was therefore set of 50 interviews and 52 were conducted. The first round of fieldwork took place from June 1984 to August 1985. The second round started in March 1993 and was concluded in July 1994. There was thus a period of approximately eight

years for changes to become established.

In interpreting the information provided by these samples, it needs to be noted that acquiring the samples sometimes required methodological purity to be tempered with pragmatism. In both rounds of interviews, for example, the social services department wanted to limit the impact of the research on the department. So in the first round it restricted interviews to two teams, allowing the teams to decide whether or not they wished to co-operate. In the second round the department argued, no doubt with some justification, that inner city teams were deluged with work and should be protected from other demands. Samples were therefore drawn from elsewhere in the county. The nature of the social work sample was also affected because of organisational changes within the social services department. At the time of the first round of interviews, social workers had been organised into area teams dealing, for example, with the elderly and teams dealing with children and families. Social workers in all teams took their turn as 'duty' social worker fielding all new referrals to the department. Given that the research was focusing on children, though, interviewees were drawn primarily from the family and children teams. By the time of the second round of interviews there were specialist 'access' teams, receiving all new referrals, child care teams and other teams. Given the focus of the study on the early phase of a referral, the main concentration of respondents was drawn from access teams but this was not exclusively the case. Samples from the school nursing service and the education welfare service on both occasions were volunteers whose names were forwarded on by managers. The sample of primary head teachers was selected at random from the county list of primary schools. In order to ensure that heads would be responsible for children the same age as those described in the vignettes only those with schools covering both infant and junior sections were selected. Because the schools split between infants and juniors were predominantly in the major town, this did have the unintended consequence of skewing the distribution away from the major urban

setting. However, urban schools did continue to be represented in the sample.

Given the nature of the samples, the statistical limitations of the data are recognised. Interpretation of research material is focused upon identifying patterns and using the material to explore possible perceptual worlds.

The vignettes and interview schedules.

The vignettes which were adopted were designed to raise issues which could potentially be the concern of more than one agency. They did, however, retain some ambiguity as to the degree of risk to which the child was exposed. The vignettes are included as Appendix 1. In total three vignettes were used. Two were used in the original round. One highlighted social problems and one suggested behaviour problems and possible physical risk. Potential sexual issues were not incorporated. However, between the two rounds of interviews, considerable attention was given to the issue of child sexual abuse [see chapter 4] both in the media and by policy makers, not least because of events in Cleveland and Orkney [Butler-Sloss, 1988; Clyde, 1992]. It was therefore decided to replace the first vignette with one which raised these issues, to explore how far the concern and work on policy in this area had helped to produce a common map for the workers on the front line. The vignette which was retained from the first round was the one which had discriminated more markedly between respondents in the first round of interviews. In practice, when the interviews were carried out, the response from interviewees was generally encouraging. The legitimacy of the vignettes was confirmed by a number of workers from the different settings who commented on the similarity to cases they had been dealing with.

The interview schedule was designed to explore how respondents saw these scenarios, whom they saw being involved and why and how they saw the situations being handled [see appendix 2]. Interviewees were handed a copy

of the relevant vignette to retain while they answered questions on it. In the first round of interviews, these were supplemented by further questions examining what workers saw as the advantages and disadvantages of working together. In the second round, these latter questions were replaced by others which explored the impact which workers thought attempts to improve co-ordination had had. Both sets of interviews concluded by collecting basic profiles of the populations interviewed. For the reasons discussed earlier, a mixture of closed questions, to give structure, and open questions, to allow spontaneity and variation, was used.

Analysing the data

The information collected was analyzed with the help of SPSS-PC. Descriptive data from the open ended questions were also categorised and coded. To maintain consistency, all the coding was done by the researcher alone, with rules for dealing with ambiguity being refined as coding progressed. Having been coded once, data were then coded again to ensure consistent application of the rules. Because of the time lapse between the coding of the first and second round of interviews, a 10% sample of the original interviews was coded again to confirm that coding was consistent. Data were then entered and verified before analysis. Given the relatively small numbers in the survey, the analysis is concentrated on comparing the views of the different occupational groups. More detailed classification of respondents would have produced numbers too small to be meaningful.

The results of this analysis are presented in the following chapters.

Chapter 6

THE BACKGROUND TO THE RESULTS.

In the last chapter a methodology was described which involved the use of three vignettes to explore the perceptual worlds of workers in different settings. Subjects were to be presented with brief outlines of situations which would form the basis of questioning about how they saw them being dealt with. This would then provide a basis for exploring their perceptions and interpretation of the child welfare system of which they were part. It was thought that some patterns of perception might hold across different situations, whereas others might be dependent upon particular contexts. At the first round of interviews in 1984, two vignettes were therefore used to discover the extent to which this was the case. The two vignettes concerned Tony and David [see Exhibits One and Two, also reproduced in Appendix 1].

Both these situations were seen as being of potential interest to each group of respondents. In the case of Tony, social problems had greater prominence but these did not cause him to be overtly disruptive. There was, however, an educational problem insofar as he was failing to make progress at school, while his physical state and lethargy could have had health implications. In the case of David, however, the behavioural problems had greater prominence but there were also indicators of physical risk which could have involved health and welfare agencies.

Exhibit One

Vignette One - Tony

Tony who is now 5 has been brought up by his mother on her own. There are no close relations. Tony has always been a thin pale lethargic child. He qualifies for free meals at school which he devours ravenously and it appears this is all the food he gets. His home is a damp flat and the bathroom and toilet are shared with a number of other families. His mother has occasional evenings out when Tony is left to his own devices and he has often been seen on the streets until late at night.

Exhibit Two

Vignette Two - David

David is 11, he is an aggressive boy who attacks and bullies other children. At home he is often left alone in the evening while his parents go out to the pub. His parents believe they can only control him by firm physical discipline but on occasions this has resulted in considerable bruising. He has now started to steal.

The second round of interviews was concerned to explore what changes had occurred in perceptions between 1984/5 and 1993. The vignette relating to David was retained to provide continuity for comparative purposes. To distinguish the two rounds of interviews this will be referred to as David 1 or David 2 to indicate first or second round data. However, the period between the two stages of the research had featured considerable concern about appropriate methods of investigating possible child sexual abuse and so a new vignette concerning

Sandra [Exhibit Three, see also Appendix 1] was introduced to replace the vignette relating to Tony.

Exhibit Three

Sandra

The mother of Susan has spoken to you about Sandra who is a classmate of her daughter. Sandra is 9 years old and is known to be a "quiet" child who participates little in class. Her school attendance record has become erratic in the last year. Sandra has told Susan she wishes her father would stop coming into her bedroom and "doing things" to her. When Susan had asked what she meant Sandra had apparently refused to say any more.

Again there were concerns here that could have had relevance for each of the agencies involved in the survey. On the education side, there were issues relating to attendance and her behaviour in class although, like Tony, she was not overtly disruptive. Potentially there were sexual issues which could have concerned health and welfare professionals. In addition to responding to the vignettes, participants in the survey were also asked their views about their experience of working together.

The chief aim of the analysis has been to compare the patterns of perceptions between the different occupational groups. This needs, however, first to be set in the context of the circumstances of the time. The broad policy background is to be found in the account of policy development in chapter 4. What follows is a brief account which places this in its local context. Second, it needs to be framed against the characteristics of the people comprising those occupational groups who were questioned in the fieldwork. This information is provided in a profile of respondents.

The context of the fieldwork

The first round of interviews occurred in 1984 at a time when good practice was set out in the 1980 circular [LASSL(80) 4; HN (80) 20] informed by the responses to the Maria Colwell case, modified in the light of experience of inquiries into subsequent cases. One of these cases had occurred in the study area and had involved workers from the social services department and local health authority. This had given child protection issues a high profile in the study area in which the Area Review Committee had produced its own set of procedural guidelines. The death of Jasmine Beckford occurred during the first fieldwork phase and towards the end of the survey period was receiving high profile press coverage. The period between the two rounds of interviews was a time of intense activity in terms of child welfare and protection policy. The reports on Jasmine Beckford, Kimberly Carlile and events in Cleveland again raised these issues high on the political agenda. By the time of the second round of interviews in 1993 the 1989 Children Act had been in operation for just over a year having taken effect on October 25 1991. New local child protection procedures had been introduced to take into account the definitive version of *Working Together* published in 1991. Training had been taking place to introduce these changes and was continuing to do so. There had therefore been significant attempts to implement policies to improve the handling of situations raising concerns about children. Had these resulted in a more tightly coupled system? Would this be reflected in greater predictability leading to increased congruence in the perceptions of members of the system between the two surveys?

On a broader organisational front, significant changes had taken place locally which could also affect coupling. Some of these would have had immediate relevance for child protection while others would have been less direct. In the discussion on sampling, reference has already been made to the restructuring of the social services department in 1991 to create access teams as a clear first point of contact in all new referrals, whether from the public or other agencies.

Social workers in these teams would therefore specialise in dealing with the early stages of an investigation. They would, however, continue to be generic social workers dealing with all aspects of social services work for example referrals of people who were elderly or had a disability. It has also been noted in chapter 4 that, between the times of the two surveys, there was a significant change in the emphasis given to the role of the police. In 1984 issues of child welfare were dealt with locally by the Special Enquiry Unit. By 1993, following the concerns explored by the Cleveland inquiry, this had been replaced by a new Force Family Support Unit with a clear brief to investigate allegations of possible child abuse. Officers of this unit had received specialist joint training with social workers. This would have included work on interviewing children and the use of video equipment in video suites especially prepared for the purpose. Would the second round of research interviews reveal stronger agreement on the role of the police reflecting a more tightly coupled system? What evidence would there be of the impact of these changes on the experience of co-ordination by workers?

Other changes in organisation had more general antecedents but would have had potential impact on coupling between the two sets of interviews. The education department had been affected by considerable turbulence. Changes brought in by the Education Act 1986 introducing Local Management of Schools and allowing Grant Maintained Status had changed the relationship with schools. In practice, opted out schools were rare and none were included in the sample. Against this background, the department had struggled to find a balance between fiscal stringency and the increasing financial pressures arising from its commitments to meet mounting demands to provide for special educational needs. The numbers of educational welfare officers had been greatly reduced and there was considerable doubt as to whether the local service would continue to exist and if it did what its organisation might look like.

The health services, too, had undergone considerable changes as a result of the 1990 National Health Service and Community Care Act. General Practices had been able to become fund holders. Providers of services had been able to become trusts. In particular, in the research site, community nursing had detached itself from the district health authority and taken on trust status in April 1993, just prior to the second round of interviews. The changes in the governance of education and health would show a disengagement on an organisational chart. Would the perceptions of respondents reflect changes in coupling as a result of these modifications?

Changes in national and local policies had wrought visible changes in the area of the research. Some may have been targeted at easing apart established hierarchies. Others were deliberately targeted at bringing different parts of the system together. The latter were particularly targeted at child protection. What impact did this have on those operating within the system? What evidence is there in their perceptions for alterations in the balance of coupling? The findings outlined will answer these questions and explore thereby the extent to which changes are real or symbolic in their impact. A further preliminary stage is necessary though before the two sets of responses can be compared. That is to outline the characteristics of the samples so that comparisons can be made in light of the nature of the workers at the two points in time as well as the framework of the policy and organisational setting.

Profile of respondents

The views of workers will reflect factors which relate to their immediate work setting and experiences. Some of the major factors affecting those settings have just been described in the previous section. However, the processes which shape the views of workers will extend beyond the narrow occupational processes to broader social ones. The small size of the sample precludes detailed analysis of how these factors may have shaped the views of those

interviewed, but it may be reasonable to explore some of the possibilities. These may relate to factors of training and experience, including, for example, the experience of gender or the experience of working with others. Descriptions of respondents enable the research findings to be placed in their social context. At a basic level it will be possible to consider the similarity of the two samples to provide a background against which the comparability of their responses may be judged. The following sections provide this data. To distinguish the two rounds of data collection The first round [1984/5] will be referred to as Time 1[T1] and the second round [1993/4] as Time 2 [T2].

Numbers and occupational status of respondents

As was indicated in chapter 5, 93 interviews were conducted in the first round [T1] and 52 in round Two [T2]. These were distributed between the different categories of respondent as indicated in Table 6.1

Table 6.1	Occupational group of respondent			
	Time 1 [T1]		Time 2 [T2]	
Head Teachers	25	27%	13	25%
Social Workers	22	24%	14	27%
Educ. Welfare Officers	23	25%	9	17%
School Nurses	23	25%	16	31%
TOTAL	93	100%	52	100%

[Percentages do not always add up to 100 because of rounding]

As can be seen in the second round there were proportionately more school nurses interviewed and fewer education welfare officers [EWOs]. This reflected

the situation of the responding agencies. In the case of the education welfare service the number of EWOs in the county had dramatically reduced from around 50 to less than 30, the very future of the service was in question and managers were only able to offer 9 volunteers, slightly below the target figure. Conversely the sample of school nurses was based upon eight teams with interviews spread evenly between them. This gave 2 respondents from each team producing slightly more than the target figure.

Respondents have been grouped into four categories of worker. Within those groupings, though professional status was not uniform. Details are given in Table 6.2.

The differences between the samples were slight. Senior EWOs disappeared from the sample at Time 2 and the job titles of other than main grade social workers changed to reflect new organisational structures within the department. There was a slight shift towards a more fully professionally qualified sample. There were no unqualified social workers in the second round and all the nurses had general registration. This issue is examined further in the next section which looks at educational qualifications.

Table 6.2	Job title of respondent
TIME 1	**TIME 2**
Heads Acting Head - 1 (4%) Permanent Heads - 24 (96%)	**Heads** Permanent Heads - 13 (100%)
Social Workers Unqualified - 2 (9%) Qualified Soc Wkr 16 (73%); Seniors and above - 4 (18%)	**Social Workers** Qualified Soc Wkr - 12 (86%) Team Manager - 2 (14%)
Education Welfare Officers Main Grade - 19 (83%) Senior EWO - 4 (17%)	**Education Welfare Officers** Main Grade - 9 (100%)
School Nurses Enrolled Nurse - 1 (4%) Registered Nurse - 22 (96%)	**School Nurses** Registered Nurse - 16 (100%)

Educational attainment of respondents

One factor which might be expected to have an impact on co-operation between different occupational groups could be the level of educational attainment required to enter the occupation. This is one of the structural issues identified by Huntington [1981] in her study of social workers and doctors. Educational attainment could affect the ways in which workers would perceive their relative status and competence [Hallett and Birchall 1992: 159 et seq]. In this respect, the education welfare service was the only one which did not, certainly by the time of the second round of interviews, have a standard basic professional

Table 6.3 Highest Professional Qualification of different types of worker	
Time 1	**Time 2**
Heads	**Heads**
Teaching Certificate/Diploma	Teaching Certificate/ Diploma
22 (88%)	14 (100%)
M.Ed 3 (12%)	
Social Workers	**Social Workers**
	MA inc CQSW 1 (7%)
CQSW/DSW 19 (87%)	CQSW/DSW 13 (93%)
Other Qualification 2 (10%)	
No Qualification 1 (5%)	
School Nurses	**School Nurses**
School Nurse Cert. 4 (17%)	School Nurse Cert. 13 (81%)
Registered Nurse 18 (79%)	District Nurse Cert 1 (6%)
Enrolled Nurse 1 (4%)	Registered Nurse 2 (13%)
Education Welfare Officers	**Education Welfare Officers**
Education Welfare Cert 2 (9%)	
Cert in Social Studies [CSS]	Cert in Social Studies [CSS]
3 (13%)	2 (22%)
Other 3 (13%)	Other 6 (66%)
None 15 (65%)	None 1 (11%)

qualification for entry to the profession. There was a change in the balance of professional qualifications between the two surveys. At both times all heads were, of course, required to have a basic teaching qualification and all school

nurses to have a nursing qualification, although at the time of the first round of interviews this included one enrolled nurse as indicated in Table 6.3. All allowed non graduate entry.

The variation between the two samples was slight in respect of heads, social workers and education welfare officers. The first round of interviews identified three heads with an M.Ed. although there were none in the second. The social workers in the second sample were all professionally qualified. The proportions of EWOs with a relevant qualification was similar with the Education Welfare Certificate having been replaced by the CSS. Where the difference in qualifications between the surveys occurred was in respect of the school nurses. The balance of those with a specific school nursing qualification reversed so that by Time 2 to have one had become the norm rather than the exception. Would this represent a fellowship of professional qualification to tighten coupling or a centre of competitive expertise to maintain independence? The analysis of perception of the potential role of the school nurse may suggest answers to this question.

Relative status, of course, depends not just on whether workers hold a relevant professional qualification but on the ascribed status of that qualification and its relevance for the situation under consideration. Direct comparisons between them are difficult. As has already been noted none of the qualifications involved here required graduate status. A number of respondents did, though, have graduate or postgraduate level qualifications.

Table 6.4	Respondents with degrees			
	Time 1		Time 2	
Heads	3	12%	6	46%
Social Workers	8	36%	7	50%
School Nurses	-	-	-	-
Educ Welf Officers	-	-	2	22%

The figures reflect the general increase in graduate status although graduates were nowhere quite in a majority. There continued, though, to be a clear divide between the heads and social workers on the one hand and EWOs and school nurses on the other. Teaching and social work have had established graduate entry routes while nursing and education welfare have not.

Place of work

It was pointed out in the discussion of methodology that the location and work setting of respondents did show some variation between different groups of workers. These differences could well have influenced their experience of working with other agencies in child welfare and protection. The head teachers, for example, were in charge of schools with pupil rolls ranging from 25 to nearly 500 pupils. The probability of heads having experience of a child with similar problems to those outlined had perhaps

Table 6.5	School rolls				
Number of	**<100**	**100-199**	**200-299**	**300-399**	**400+**
No. of Schools Time 1	8 32%	5 20%	7 28%	4 16%	1 4%
No. of Schools Time 2	2 15%	2 15%	7 44%	2 15%	-

increased by the time of the second round with the proportion of smaller schools having fallen. Perhaps because of the nature of decentralised organisation of education and the variety of schools, heads were more likely to be based in rural areas than other more centrally organised occupations. While half the schools were in significant centres of population, with a quarter in the city, the rest served more rural populations.

Table 6.6 Geographical location of respondents percentage who were city based.		
	Time 1	**Time 2**
social workers	9 41%	-
heads	3 12%	4 31%
EWOs	16 70%	7 78%
School Nurses	14 61%	7 44%

Paradoxically the EWOs were most likely to be city based because they were often attached to upper schools and then served their feeder schools. The remainder were based in other urban centres. This remained the case for both rounds of interviews. Fewer of the school nurses were city based second time,

reflecting the way it was possible to draw the sample [see chapter 5]. While city based social workers were well represented in the first round this was not the case in the second round because of the constraints imposed by the social services department [ibid]. Too much about the experience of these workers should not perhaps be deduced from the nominal location of their work. Although they were all county rather than city based, they did still cover a range of settings with some of the local offices covering urban areas with problems similar to those found in the city.

Work experience
Did the various types of worker have different types of career path which might influence their perception of the world? Information was collected on the length of work experience of respondents and also their work experience outside their current occupation. Because of the interest in change, it was hoped in the second sample to include workers who would be able to reflect back having been involved for a number of years. While all groups of respondents included workers with longer experience in their present post, the school nurses were most likely to have been in their present job for some time [see Table 6.7]. By the second round of interviews the profile of school nurse respondents showed a shift to longer service. Indeed half of them would have been in post at the time of the first round of interviews and 13 [81%] when the 1989 Children Act was passed This compares with 4 heads [31%] in post at T1 and also when the 1989 Act was passed. The comparable figures for social workers are nil and 3 [21%] respectively and for EWOs 1 [11%]. and 2 [22%]. The second sample of heads was proportionately more weighted to recent appointments while the profile of EWOs was similar. The figures for social workers are confused in part because of a restructuring of the social services department leading to many changes of job designation. Nevertheless the pattern is similar to Time 1. For the social workers, therefore, it might be more helpful to think in terms of years in the profession rather than years in present post.

Table 6.7	Years in present post				
	0-4	**5-9**	**10-14**	**15+**	**No Inf**
Soc Wkrs					
Time 1	15 68%	5 23%	2 9%		
Time 2	10 71%	4 29%			
Heads					
Time 1	12 48%	5 20%	5 20%	3 12%	
Time 2	9 69%	- -	2 15%	2 15%	
EWOs					
Time 1	14 61%	5 22%	3 13%		1 4%
Time 2	7 78%	1 11%	1 11%		
S.Nurses					
Time 1	10 43%	5 22%	6 26%	2 9%	
Time 2	3 19%	5 31%	3 19%	5 31%	

Classifying workers into their current profession was not easy. In some settings there was no ambiguity. All the EWOs had been appointed as such and this had represented a distinct occupational shift. Similarly all the social workers had a clear professional social work identification independent of their specific job title. Even those who had moved into management would still have seen themselves as social workers rising through the hierarchy. For similar reasons it was decided to take teachers as the professional group of head teachers. Again they had moved into management but this was a progression up an established hierarchy. A key difference would be that they would added to their range of responsibilities including taking on a higher profile in dealing with outside agencies. However, although it was recognised that similar arguments might be

put forward that school nursing was a natural progression from nursing it was nevertheless decided to identify the professional group of these respondents as school nursing rather than nursing more generally. This was done on the basis that school nursing, while requiring a basic nursing qualification also represented a significantly different sphere of work compared for example with hospital nursing This decision was reinforced to the extent that, certainly by the time of the second round of interviews, a specific school nursing qualification could be identified.

Table 6.8	Years in current profession		
	0-10	11-19	20+
Social Workers - T1	19 86%	3 14%	- -
- T2	11 79%	3 21%	- -
Heads - T1	1 4%	9 36%	15 60%
- T2	- -	4 31%	9 69%
EWOs - T1	11 48%	11 48%	1 4%
- T2	8 89%	1 11%	- -
School Nurses - T1	15 65%	8 35%	- -
- T2	6 38%	7 44%	3 19%

For social workers and head teachers, the two samples show a similar pattern of professional experience, while the pattern for EWOs and school nurses differs. The longer length of service of heads on both occasions reflects the rise through the ranks to one of the top jobs. Other workers were in their 'career' grade and experienced. ambitious staff would have moved on. The second sample of EWOs was considerably less experienced than the first. This may well reflect the changes which had taken place in the service with staffing reductions concentrated among the longer serving members. There had been a converse

change in the profile of the school nurses. This time there had been a shift to greater experience with the majority having years of service into double figures.

These figures also reflect the broader career patterns of respondents. The longevity of the educational experience of heads reflected the fact that most heads had always worked in schools. The pattern was similar on both occasions with 76% [T1] and 77% [T2] falling into this category. If the school nurses are viewed in terms of their nursing careers overall rather than just their time as school nurses, a similar pattern emerges. At Time 1, 17 [74%] had spent their whole career in nursing compared with 13 [81%] at Time 2. On both occasions, a majority of social work respondents had had other careers before moving into social work. However the proportion was lower in the second sample at 8 [54%] compared with [86%] in the first. On both occasions the EWOs had all had other occupations before they joined the service. Apart from a fluctuation in the social work sample, then, the two samples were comparable in terms of their wider occupational experience before taking up their current career. Often those with previous careers had worked in cognate settings with a drift between the two samples away from experience in commerce and industry - perhaps a reflection of broader socio-economic trends.

It is likely that respondents would also bring to their work experience of voluntary work. This was explored at the first round of interviews as a potential indicator of the extent of linkages people might have with welfare systems. Most appeared to have a wider welfare orientation. It was most common among the social workers [86%] for whom, perhaps, it had been part of a recognised route to their chosen career. Next came education welfare officers and school nurses [both 70%]. It was least frequent among heads [52%] - again highlighting their more limited experience beyond their chosen career or possibly that the role of the head entails the sort of community involvement that makes voluntary work

147

redundant. Although this information was not collected on the second sample of interviewees, there is sufficient consistency between the two sets of samples to suggest that the overall pattern of workers with a range of experiences would continue.

Age

The age pattern reflects some of the career factors noted above. On both occasions social workers were relatively younger with more in the 20 to 39 age range than other respondents. However, the age pattern in the sample shows more mature respondents at Time 2. This could represent a broader demographic trend with 'ageing' occupational cohorts. The sample was still however younger than that surveyed by Birchall and Hallett. Their sample contained between 50% and 68% between the ages of 30 and 45 in all the occupational groups relevant to this study. Here, however, even in the 'older' second sample the proportion was always less than 50%. Part of the explanation for this for the social worker group could be that their sample included "principal", "senior" and "main" grades [Birchall and Hallett 1995: 25] whereas this study did not include the first category. For the other groups, however, alternative explanations would need to be sought.

Table 6.9					
Age of respondents at T1 and T2 (% of each type of worker)					
	< 30	**30 - 39**	**40 - 49**	**50 -59**	**60+**
Soc Wkrs Time 1 Time 2	 1 5% 3 21%	 11 50% 3 21%	 6 27% 6 43%	 4 18% 2 14%	
Heads Time 1 Time 2		 10 40% 1 8%	 10 40% 7 54%	 4 16% 3 23%	 1 4% 2 14%
EWOs Time 1 Time 2	 1 4% 1 11%	 4 17%	 8 35% 7 78%	 9 39% 1 11%	 1 4%
S. Nurses Time 1 Time 2	 1 4%	 7 30% 2 13%	 9 39% 7 44%	 6 26% 7 44%	

Gender

The samples reflected the gender composition of the populations from which they were drawn in that the majority were women except for the head teachers and the EWOs in the first phase of the research.   On both occasions all the school nurses were women.   The gender balance of heads was similar between the two samples.   However, elsewhere the second sample contained a greater proportion of women.

Table 6.10		Gender distribution by type of worker			
		Women		**Men**	
Soc Workers	T1	14	64%	8	36%
	T2	13	93%	1	7%
Heads	T1	9	36%	16	64%
	T2	5	39%	8	62%
EWOs	T1	8	35%	15	65%
	T2	7	78%	2	22%
S Nurses	T1	23	100%		
	T2	16	100%		

There is some evidence that gender can be a significant factor in how professional workers view situations and make decisions. Women may be more sensitive to the seriousness of issues of abuse and be more keen to intervene to protect the child. However, the evidence is not clear cut and it may be other factors such as closeness of involvement or professional identity are more dominant variables [Hallett and Birchall 1992: 112; Birchall and Hallett 1995:36]. Sexual politics may also play a role in inter-professional relations. Huntington [1981] identifies gender as one of her structural variables arguing that beliefs and attitudes from the wider social system colour working practices and expectations. Because the samples in this study consist overwhelmingly of women it is difficult to disentangle any gender effects from other factors. However, the pictures painted will be predominantly from the perspective of women.

Experience of working with others

In making sense of their worlds, people will draw upon the received wisdom of others and their own personal experiences. Some workers would be interpreting knowledge and events from involvement at the heart of the system, while others would have a view from the periphery. For these reasons it was considered desirable to establish how far respondents had experience of working with others. Clearly this experience could take a number of forms. Workers might meet in informal settings or at general gatherings such as symposia as well as dealing with immediate issues which had arisen in the course of their work. A number of respondents mentioned inter-professional breakfasts or lunches with guest speakers and the opportunity for general discussion. It was decided, however, to identify contact which was more focused on work with children. What was sought was a general image which would show up broad patterns of professional contact. Respondents were therefore asked to indicate from a list workers [see questionnaires in Appendix 2] those with whom they had had direct contact in the preceding 12 months concerning a child or children for whom they had professional responsibility. This was broader than child protection, including a range of education health and welfare needs. This was considered appropriate because it was thought such contact would be relevant and also it did not raise issues about the definition of child abuse or what was or was not counted as child protection. From the replies, an index of involvement for the different types of respondent was constructed. This was done by taking the total number of possible contacts for each worker on the list, that is assuming every respondent had contacted every other listed worker. The number of actual contacts was then expressed as a percentage of this total and this is shown in Table 6.11. Where job titles had changed but a reasonable equivalent could be found - for example team leader for nursing officer - these were used. Four categories of worker who appeared in only one list were excluded from the calculation which was based on a spread of 21 different workers.

151

Table 6.11 Index of involvement with other workers %		
	Time 1	Time 2
social workers	70	82
head teachers	36	40
EWOs	77	73
School Nurses	57	65

With the exception of the EWOs, the figures suggest a slight upward trend in involvement with others. The broad pattern though remains similar. Head teachers are clearly shown to have fewer dealings with other workers . Not surprisingly, their main focus of contact was workers with a clear educational link. Most frequently mentioned by heads in both rounds of interviews were the education psychologist and the class teacher. These were then followed by the school nurse, school medical officer and EWO. Perhaps somewhat surprisingly, heads had a consistently lesser rate of contact with EWOs than either school nurses or social workers. Of the non-school linked agents, the most frequently mentioned on both occasions were social workers and police officers. The pattern of contact at the first set of interviews indicated that lack of contact could lead to heads being unfamiliar with social services protocols. At that time, less than half [12, 48%] had had dealings with a social worker. It is possible that this situation might have changed with more heads [8, 62%] reporting contact by Time 2. Despite having fewer contacts than others, heads are placed at the centre of the system to the extent that they are the worker most contacted by others. They were the only worker in both rounds of interviews with whom all the others had had contact. The centrality of the school is emphasised by the fact that the second most frequently mentioned contact both times was the class teacher contacted by 88% [T1] and 94% [T2]. Perhaps class teachers are not

so marooned in the classroom as may sometimes be supposed.   Primary
school teachers with their closer contacts with children in their class are likely to
be more involved than subject centred teachers in secondary schools.

As might be expected, replies showed that local authority social workers had the
most extensive contacts and had dealt with a wide range of workers.   By Time
2 they had moved ahead of EWOs who were the only group to show a easing
of involvement.   On both occasions EWOs reported more contact with
educational psychologists, child guidance social workers and NSPCC officers as
well as their own managers.   However, by the second set of interviews, social
workers had overtaken them in their level of contact with pastoral and classroom
teachers and school doctors. In each case contact by EWOs had fallen and that
by social workers had risen.   The pattern of contact reported by the school
nurses occupied an intermediate position with their levels of involvement
showing, if anything, an increase by Time 2. They were regularly coupled into
the health and education networks with over 90% contact on both occasions
with heads and class teachers and school medical officers, family doctors and
health visitors.   By Time 2 they had penetrated further into the social services
department hierarchy. The proportion having had contact with a social worker
rose marginally from 96% to 100%.   However, while only 52% [12] had had
contact with a senior social worker in the previous twelve months at Time 1, at
Time 2 94% [15] had had contact with a social services department team leader,
which would be the nearest equivalent post.   Like education welfare officers,
school nurses were at both times workers with whom others had contact. In the
first round of interviews the lowest rate of contact came from social workers at
73%. By the time of the second round the coupling had been tightened to 100%
with the social workers to match the EWOs who were at that figure on both
occasions while the rate for heads was also constant at 84%.

The foregoing discussion is based upon a simple measure of contact. A detached written communication counts equally with an animated meeting. To colour in this picture, the nature of the contact which respondents had with different types of worker was examined. This highlighted for both rounds the importance of personal contact. At T1 face to face contact was most frequently reported as the dominant mode by all respondents. Telephone contact was also frequent but written communication was uncommon. Most workers were rarely written to _ The pattern did though vary with agency. There were examples where written communication was expected, perhaps as part of a formal referral process. This was clearly indicated in the case of the educational psychologist 44 out of 63 respondents [70%] reporting contact had written at some stage. Other workers scoring higher than most in terms of written communication at this stage of the research were the social services area director [29 ex 60, 48%]; paediatricians [12 ex 29, 41%]; psychiatrists [15 ex 32, 47%] and school medical officers [31 ex 63, 49%]. These could be seen as persons occupying key positions in terms of action to be taken. It might also be observed that they were in positions of high status in the welfare professions, mostly with a very specific and valued expertise. Perhaps to some extent they were also relatively remote figures not inviting personal approaches.

The second stage of the fieldwork suggested a changing pattern. Personal contact was still more notable than written communication, but use of the telephone had become more noticeable. Social workers in particular were as likely to report speaking to people on the phone as meeting them face to face. Education Welfare Officers who had stood out as face to face operators at T1 were also making greater use of the telephone. School nurses by T2 were those for whom face to face contact seemed most prevalent. The pattern for heads remained similar. Although more personal forms of contact were favoured, the educational psychologist continued to be the worker most likely to be written to. However, the number writing had fallen as a proportion of those

154

making contact to 20 out of 44 [45%]. Elsewhere, however, while the numbers were small, there was a drift to an increased proportion of written communication, particularly from social workers, where other workers were contacted [Full tables containing this data are available in appendix 3].

Overall, the picture of contact shows a continuity in the patterns of involvement with head teachers relatively less absorbed into the system. Within that general pattern, however, there is evidence of changes for example the recognition of school nurses at more senior levels in social services departments or the subtle shifts in modes of communication. As was indicated earlier, the measure on which these observations are based are based was rough and ready being based on any contact within the preceding year. It does not attempt to measure the frequency or intensity of contact. However, it does seem to provide a useful indicator of levels of contact. It reveals that, although there were variations in the amount and nature of communication, there was sufficient contact between different categories of workers to suggest that most were likely to have some familiarity with workers in the majority of agencies. If this was true at the time of the first round of interviews, it was more so by the time of the second. For the most part, respondents had at both times sufficient involvement with others for their interpretation of the child welfare system to be based upon experience rather than imagination.

Commentary

This chapter has set the context within which the responses of interviewees can be interpreted. The vignettes to which respondents were asked to react have been outlined indicating how the research tool has been developed to establish a baseline measure, but then adapted to provide elements of continuity and adaptability to a changing focus of concern in child protection. An overview of shifting national policy and local changes has been provided. The main contextual focus has, however, been concentrated on profiling the

characteristics of respondent samples at the different stages of the research.

The data suggests that, while there was much continuity between the samples, there was also evidence of change. Some of the differences between the samples may have been imposed by the nature of access to workers which different agencies were able to provide - for example the lack of city based social workers. Others, however, reflect real changes.

The sample of heads was geographically dispersed on both occasions, although the second sample had fewer county based heads and the proportion in smaller schools had fallen. At both times all had relevant basic professional qualifications, but by Time 2 the proportion of graduates had increased to be similar to that of social workers. They continued to be the most experienced in their own profession in terms of years of service. The pattern of relatively little outside experience of work was sustained. The gender distribution was also consistent with approaching two thirds being men on each occasion. The level of contact between heads and other types of worker remained similar with them continuing to be those with the lowest level of involvement despite the fact that other workers all reported contact with them.

Social workers were usually but not necessarily professionally qualified at Time 1, however, by Time 2 all were. They continued to be the worker most likely to have a graduate qualification although as has been noted this position was being challenged by the head teachers by Time 2. They retained their position of having more relatively younger workers than others and continued, with the exception of the EWOs at Time 2, to be the group who had spent the shortest length of time in their profession. These factors perhaps reflect their main grade status as the recognised entry grade to the profession. Both samples were composed predominantly of women. At both times they were the workers with the most extensive range of contacts with others.

Education welfare officers represented a numerically reduced service by the second round of interviews and this may well have affected the sample with fewer long servers in the profession by Time 2. They had also lost their position of having more older workers which had characterised them in the first round. They continued though to be the group with the most experience in terms of alternative employment, reflecting, the second career nature of the post for many of them. There had been a notable change in the gender balance which had reversed a male to a female majority. Their level of involvement with other workers stayed similar although if they had been in line with other respondents a small rise rather than a small fall might have been expected. There were also suggestions of a shift in the patten of their contacts away from traditional 'legwork' to other forms.

The school nurses provided evidence of clear shifts in local policy which could have a significant impact. In particular the shift to the majority having a specific school nursing qualification should be noted linked to greater occupational experience. On both occasions they were an all female occupational group.

These characteristics indicate a variety of factors in which may influence the strength of coupling. Each of the variables discussed in this chapter has been examined to show how respondents have drawn more closely together or eased apart. At this stage a couple of brief examples should be sufficient to illustrate the point. The influences of say gender responsiveness might change as the heads become isolated as the only male dominated group. Alternatively as heads and social workers move together as graduate groups they may distance themselves from the others. Conversely the greater professional qualification level of the school nurses might draw them further in towards social workers and heads. Personal factors, such as these, provide a coupling context in which other initiatives, aimed at altering the strength of coupling, were introduced. Any

157

changes in the balance of coupling which occurred, would, therefore, reflect the interaction of both individual and organisational variables.

This, then, is the background against which the next chapter moves on to examine how the perceptions of these different groups compared, when they were asked to consider the vignettes. To what extent was it possible to establish variations in perception between the different groups of respondents? To what extent did these persist between different situations and across time? Was there evidence of increased agreement, indicating tighter coupling?

Chapter 7
INITIAL RESPONSE TO THE VIGNETTES.

This and the succeeding chapters assess how the perceptions of workers show changes in couplings in the system in which they operate. How far has the effect of the recent policy changes, outlined in chapter 4, been to alter the experience of coupling of those involved? As has been indicated earlier, in chapter 2, the voice of *direct effects* gives rise to the proposition that a loosely coupled system will allow different participants to hold a range of interpretations or explanations of situations. In contrast, a tightly coupled system would produce an agreed picture. Therefore, changes in the balance of couplings will affect the diversity of these interpretations. Applying this to services for children will mean, that, if the effect of policies has been to tighten couplings, then, there will be greater agreement between workers about their situation than before. If couplings are looser, then, there will be less. If there has been no impact, then, the degree of variety will be similar. However, because of the complexity of inter-professional relationships, it is likely that, while couplings may tighten in respect of some variables, they will loosen for others - indeed the theory proposes that tightening the coupling on one variable will loosen it on another. For this reason, the analysis probes the extent of agreement throughout the key stages of handling new cases, where working with others might be required, in order to get a more complete picture of the pattern. This chapter deals with the initial stage. It deals with assessments of the severity of the situation for the child and the initial thoughts of the respondent worker, on the extent of inter-agency involvement required. Subsequent chapters will examine the evidence for changes in the balance of couplings revealed by the extent of change of views of respondents on the more detailed aspects of who should be involved, why and how. Perceptions at Time 1 [T1] are explored to provide a baseline on the levels of agreement which will show a measure of the strength of couplings

on this indicator.   This will then be compared with the pattern at Time 2 [T2] and the extent to which there may have been change over time discussed.

Perceptions of Severity

The first stage in assessing how far the respondents in this study would agree on their interpretation of a situation was to explore their perception of severity of cases presented to them. This relates to a crucial point in the coupling process as it will determine whether or not the situation crosses the "critical threshold" [DoH (SSI), 1995: para 4.12] where responses are expected from different agencies. Views on this may determine such aspects as the speed with which workers respond and their interpretation of the part others can play in dealing with the situation.   If some people construe the situation differently then, to the extent that they do, the system is loosely coupled.   Viewed negatively, through the *voice of causation*, this would mean that there is potential for the system to be seen as failing because actors will be observed to be behaving inappropriately, either by failing to react, or reacting when they should not. Viewed positively as a *direct effect*, it could indicate that there are checks and balances to encourage a considered, rather than an automatic, response. Greater agreement would suggest that a classification variable had become more active, leading to a tightening of coupling.

Tapping people's perception of severity is a task for which the vignette approach has been used on a number of occasions [Giovannoni J. and Becerra R, 1979; Fox S. & Dingwall R, 1985, Birchall E. & Hallett C., 1995].   Questions can be raised about the readiness of respondents to give ratings on potentially complex situations which are devoid of context. However, Birchall and Hallett [1995:118] were reassured that this was not a stumbling block.   Nearly all respondents in the current study were prepared to make a qualified assessment although the desire for more context was expressed by some - for example

160

> Well the first thing I'd want ... before I felt able to answer that the first thing I'd want to do is ask more questions about it really ... Is that difficult?
>
> [Social Worker 3 on David, T2]

or

> Again it's a matter of knowing the child and knowing whether or not the child is a child who fantasises about things .... assuming that the child isn't fantasising ...
>
> [head 5 on Sandra, T2]

In practice, perhaps, workers have to make these judgements on limited ranges of information. The necessity to work with others at the initial stage is to firm up couplings by establishing the context so that key variables can be identified, more measured judgements made and considered plans of action developed. The direction to workers is bounded by a statutory framework [developed after fieldwork had begun] which requires them to act if a child is at risk of "significant harm" and gives powers for intervention when a child is seen as a child "in need" [Children Act 1989] or as having special educational needs [Education Act 1993]. However, the precise meaning of these terms is still opaque. Hallett and Birchall [1992: chapter 6] review the problems of defining unacceptable treatment of children. They conclude that what is labelled as abusive emerges from conflicts of standards and theories. As was shown in chapters 3 and 4 which examined policy developments, the balance of dominance of the competing models for dealing with abused children has changed. When the study had begun a social model had edged out the medical one. However, the 1980s had seen a legal model taking over. Would there be a change in perceptions of workers to reflect this shift?

Earlier studies using a vignette approach aimed to classify types of behaviour which might be considered abusive [eg Giovannoni and Becerra, 1979; Fox and Dingwall, 1985]. They therefore used large numbers of vignettes. The aim of this study, like that of Birchall and Hallett [1995: 118] was not to identify this threshold but to explore the extent to which workers would make sense of

situations in the same way. This was done with just three vignettes. As indicated in Chapters 5 and 6, at Time 1 two vignettes, Tony and David, were used to explore the potential for variance in different situations and to establish a baseline. At Time 2 the exercise was repeated using the vignette concerning David but replacing Tony with a vignette about Sandra which raised issues of possible sexual abuse, something which had been high on the child protection agenda [for vignettes see appendix 1]. The aim was to get an immediate reaction from respondents about the scenarios so they were asked to rate severity on a four point scale given to them which ranged through *not at all severe, not very severe, moderately severe* and *very severe*. In the event, similarly to other studies [Birchall and Hallett 1995: 123], respondents all ignored the first of these possibilities making it a three point scale. The vignettes were always presented in the same order. In the first round respondents answered questions about Tony first followed by those concerning David. In the second round they were presented with David first and then with Sandra. There is a risk which must be acknowledged that respondents may be influenced in their responses to the second vignette by those they made to the first. This relativity might matter if the aim was to establish some absolute severity score. However, given that the aim of this study was to compare the relativity of perception evidenced through degrees of agreement of different workers to identical stimuli, the weakness is less of a problem.

In the analysis that follows the cases of Tony and David will be considered first. The perception of David at Time 2 will then be compared and finally the responses to the situation of Sandra will be considered. The tables indicate the complexity of the problem. In the case of Tony, there was general agreement that his situation was "Moderately" severe. However, social workers seemed much more likely to see it as less serious than other workers, those not seeing it as moderately severe opting for the "not very" classification when other respondents varied to the "very" category. In the case of David, the pattern of

responses showed a move to perceive the situation as more severe. However, there was again evidence that social workers were likely to see the situation as less serious than their colleagues. While the majority of all other types of worker perceived the situation as "Very severe" less than a quarter of the social workers did so. There was a degree of looseness between the social workers and others on this variable on both vignettes.

Table 7.1 Perception of severity at T1 - Tony			
	Not very severe	Moderately severe	Very severe
Soc Workers n = 22	8 36%	13 59%	1 5%
Head Teachers n = 25	2 8%	16 64%	7 28%
EWOs n = 23	2 9%	14 61%	7 30%
School Nurses n = 23	0 0%	19 83%	4 17%

Table 7.2 Perception of severity at T1 - David			
	Not very severe	Moderately severe	Very severe
Soc Workers n = 22	4 18%	13 59%	5 23%
Head Teachers n = 25	2 8%	9 36%	14 56%
EWOs n = 23	0 0%	8 35%	15 65%
School Nurses n = 23	0 0%	8 35%	15 65%

How persistent were these differences? The responses for David at Time 2 are set out in Table 7.3. There seems to be evidence here of a convergence of view. The majority of all types of respondent now see "Moderately severe" as the appropriate category. The minority of social workers and head teachers who previously placed it in the "not very severe" class have disappeared. While the proportion of social workers seeing it as "very severe" has remained constant the balance of other types of worker doing so has decreased. This reduction was

Table 7.3 Perception of severity at T2 - David			
	Not very severe	**Moderately severe**	**Very severe**
Soc Workers n = 14	0 0%	11 79%	3 21%
Head Teachers n = 13	0 0%	11 85%	2 15%
EWOs n = 9	0 0%	5 56%	4 44%
School Nurses n = 16	0 0%	9 56%	7 44%

particularly marked in the case of head teachers whose perceptions move into line with those of the social workers. The figures show EWOs and school nurses still tilting to the more severe end of the spectrum although the numbers are too small to be conclusive. The trend to a central position, though, indicates that coupling had tightened on this variable.

If there had been convergence in perception of how severe the case of David was, would the focus on issues of sexual abuse produce a similar consensus in the case of Sandra? The answer is that it had not. All respondents eschewed the bottom categories. However, social workers again emerged as the group identifying the situation as crossing a lower threshold of severity. The majority

164

of them saw Sandra's situation as only "moderately severe" whereas at least three quarters of all the other groups saw it as very severe. Most concerned were the head teachers.

Table 7.4 Perception of severity at T2 - Sandra			
	Not very severe	**Moderately severe**	**Very severe**
Soc Workers n = 14	0 0%	8 57%	6 43%
Head Teachers n = 13	0 0%	2 15%	11 85%
EWOs n = 9	0 0%	2 22%	7 78%
School Nurses n = 16	0 0%	4 25%	12 75%

This finding seems to be at odds with that of Birchall and Hallett [1995: 130] who noted "the remarkable hardening and convergence of social workers' and health visitors' opinions" in relation to vignettes on sexual abuse repeated in their study from that of Fox an Dingwall [1985]. However, the present study differs in a number of significant ways. First, it demonstrates simply greater disagreement on this situation than that of David. There may or may not be more convergence than there would have been in the early 1980s. Second, in the present study the information presented was ambiguous, being suggestive of abuse but not definite. Third, the groups of workers involved are different and finally, the research is based on a site covered by a single Area Child Protection Committee. If the consensus on the case of David is greater perhaps this reflects a longer period of time in which such issues have been at the forefront of public and professional concern. The debate over sexual behaviour may have still have been moving towards a comparable accommodation of opinion.

This would be consistent with the notion of a loosely coupled system taking time to adjust.

Despite the variations, there is a consistency in the pattern of rankings between the different professional groups. This would suggest that, while there is looseness reflected in differing perceptions of degree, there are, at the same time, variables at work, pinning in place ideas on relative positions on the severity scale. At Time 1, the balance of answers from all respondents more frequently tilted to the higher level of severity with David than with Tony. At Time 2, Sandra 's situation was seen as very severe more frequently than that of David. Although not strictly comparable, this would be consistent with the findings in other studies that workers generally agree on the rank order of severity when comparing cases [Fox and Dingwall 1985: 473; Birchall and Hallett: 124].

If different types of worker do agree on ranking, what variables can explain the varying severity ratings. There are a number of possibilities. One set of variables would relate to the individual characteristics of workers such as their value system, professional training, social background or socialisation. On the present samples it is difficult to isolate these because of small numbers and because of the close correlation of some factors such as type of training with specific occupations. It is, though, worth revisiting the issue of gender discussed in the profile of the samples. There the question was discussed as to whether women may be more likely to assess abuse more severely than men particularly in relation to sexual abuse. Analysis of the case of Sandra suggests no difference between the sexes with 8 of the 11 men [73%] assessing her situation as very severe, compared with 28 of the 41 women [68%] doing so. Gender was not a relevant coupling variable in this context.

166

As well as explanatory variables linked to the individual, there are others which are linked to the settings in which workers operated. Social workers can be described as "secondary" workers in that they receive referrals when day to day systems are inadequate. Cases which reach them are therefore likely to start from a higher threshold of severity and include cases which would be beyond the severity threshold of other workers. School nurses and head teachers are "primary" workers who spend much of their time working with children in more straightforward situations - children who would probably never come into contact with a social worker. For these workers situations such as those of Tony, David or Sandra would be out of the ordinary and relatively severe. The education welfare officer may be a secondary worker in the sense of taking referrals when problems have arisen, but again may find such cases unusual in the day to day routine of their work dealing with issues of attendance and educational needs. This would also accord with the notion that greater familiarity with situations will allow for less alarm when making an initial assessment. However, if these explanations are taken to explain variance, they do not account for the movement over time of views in relation to David. If the movement is more than a statistical artefact why should it have taken place? It would be possible to suggest in the case of the school nurses, that their greater training has shifted their perspective to one closer to that of social workers. If that is so, why is it not mirrored also in views on Sandra? Are there any similar explanations which could suggest why the views of head teachers should also have moved so noticeably? One explanation is that the focus on child protection issues in the years between the studies has sharpened the picture regarding this kind of behavioural and abusive situation while the focus on sexual abuse has served only to heighten awareness and alarm among those with limited experience. The lesson for policy makers, wishing to encourage the same convergence of view on sexual abuse, would be to ensure that it is kept high on the professional agenda of workers, so a consensus can be worked out. Whatever the

processes, there clearly remains scope for negotiation on issues such as these.

There was overlap in ratings between the different professional groups and varying degrees of disagreement within them, even where there was a convergence of view. Does this disagreement matter?   It implies a continued degree of looseness within the system, even though there is evidence that in some aspects, such as circumstances like those of David, it is not so great as before.   Although views on severity are important as the trigger for action, all the workers in the study were agreed that this threshold had been crossed.   It may be, therefore, that varying views on severity, expressed in the abstract, are less important than what people would do in practice.   Predicability on that score may be far more significant as a measure of strength of coupling than disagreements on abstract relative judgements. Increased agreement, reflecting greater tightness of coupling about action, will show change in a key aspect of the system.   The next section therefore explores respondents' views on the extent to which others should be involved in handling these situations and again looks for evidence of changing levels of agreement, to indicate whether there had been any change in the balance of coupling.

Handling the situations

This section identifies those agencies and workers which respondents thought would have a part to play in handling the situations presented to them.   Again this is an area of potential conflict if expectations are not met.   Respondents were asked for each vignette to choose from a list [including the category 'other'] given to them, those agencies and those workers they thought should be involved.   It can be noted that by expressing the inquiry in terms of desirability, the question probed the ideological expectations of the respondent rather than asking about their experience of what would, in practice, happen.   Again it should be recognised that there was scope in the question for responses to vary

depending on how far the subject wished to impose an interpretation of the situation or how far into the future they were prepared to predict Although in some respects this could be seen as representing a weakness, it was thought that it would conversely reflect a useful view of the orientation of the respondent.

It may seem that asking people to name both agencies and workers introduces a degree of redundancy of material. However, although there will clearly be considerable overlap between the two, subtle distinctions can be at work and respondents did draw distinctions between the two.   For example, the school might be seen to have a part to play, but as a setting for a worker, such as an EWO not based at the school.   Alternatively, it is possible that an agency such as a school, as a summation of roles and responsibilities, might be considered significant, whereas the individuals taken singly might not.   Such distinctions may be detected in some of the subsequent figures.

Again the data is presented by considering Tony and David at Time 1 to establish a baseline and then re-examining David at Time 2 before looking at the case of Sandra.   At Time 1 the answers revealed a variation in the range of the number of agencies which respondents expected to be involved.

Table 7.5 Mean average number of agencies named by worker at Time 1				
	Tony - definite	Tony - def and poss	David definite	David Def and poss
Soc W'kers	3.27	3.73	3.00	4.00
heads	4.00	4.32	4.40	4.80
EWOs	4.91	5.30	5.78	6.22
S. Nurses	4.00	4.87	5.70	6.48
Overall	4.05	4.56	4.73	5.38

As can be seen the discrepancy was most marked between the social workers and the education welfare officers, although the school nurses overtake the EWOs in the final column. It might have been expected that the there would have been more agreement over those agencies that should definitely be involved reflecting a tightly coupled core with more variation as workers speculated about the wider possibilities. In fact this was not the case. The biggest variation occurred in relation to definite involvement with David where on average the EWOs named nearly double the number of workers that the social workers did [a ratio of 1.93: 1]. The difference was also greater for Tony before the 'possibles' were included [a ratio of 1.5: 1]. Would the picture for David at Time 2 reflect the same convergence of view, indicating tightened coupling, as had been seen in the assessment of its severity?

Table 7.6 Mean average number of agencies named by worker - David Time 1 and Time 2				
	David 1 definite	David 2 Definite	David 1 Def & poss	David 2 Def & poss
Soc W'kers	3.00	4.64	4.00	5.64
heads	4.40	4.15	4.80	4.69
EWOs	5.78	4.56	6.22	5.78
S. Nurses	5.70	4.88	6.48	5.56
Overall	4.73	4.58	5.38	5.40

Again there was evidence of a convergence of view. The ratio between the highest and lowest average for those who should definitely be involved had shrunk from 1.93: 1 to 1.18: 1 and the variation when possibles were included had also fallen. The main movement had come from the social workers. The average number of agencies named as definite by them had increased by 55%. At the same time there were reductions in the numbers identified by education welfare officers [down 21%] and school nurses [down 14%] while head teachers

170

hardly moved [down 6%] and became the group, on average, likely to name fewest agencies. Would this tighter coupling also be reflected in the case of Sandra, or would there be a similar variation to that seen in respect of 'severity' ratings?

Table 7.7 Mean average number of agencies named by worker - Sandra - Time 2		
	Definite	**Definite and Poss.**
Social Workers	4.79	5.00
Heads	4.15	4.62
EWOs	4.22	4.67
School Nurses	3.69	4.00
Overall	4.19	4.58

On this measure there seems to be a fair degree of agreement. This vignette draws attention to the change in the pattern of social worker responses. At Time 1, social workers named the lowest number of agencies and it has been seen that, by Time 2, this had changed, with them naming relatively more for David. When considering Sandra, they had moved to a position where they were the group naming most agencies. The school nurses, conversely, had moved most conspicuously in the other direction so that, on this vignette, they named the fewest agencies.

This picture, of a system becoming more tightly coupled over time, is reinforced when the figures on the workers who should be involved are examined. At time one there was again a spread in the number of choices. Social workers were predominantly at the bottom of the range and school nurses and education welfare officers at the top, with the latter two likely to name over a third more workers than the former.

Table 7.8 Mean average number of workers named - Tony & David - Time 1				
	Tony Definite	David Definite	Tony Definite & Poss.	David Definite & Poss
Social Workers	4.87	4.86	5.95	5.95
Heads	5.76	5.36	7.32	6.44
EWOs	6.78	7.00	8.09	8.26
School Nurses	6.39	7.04	8.48	8.39
Overall	5.96	6.01	7.19	7.19

Particularly in the case of David at Time 1 it was possible to identify a gap opening up between heads and social workers on the one hand, and education welfare officers and school nurses on the other. This could reflect a difference in their positions. Social workers and heads would have expected to manage total situations falling into their domain. School nurses on the other hand would have had a specialist input to make in a team, while the role of the education officer could be seen as that of a broker seeking out whatever expertise might be appropriate for a referral to be made. This difference would be more marked in the case of David because he presented more behaviours, for example bullying, with which heads would expect to deal.

However by Time 2 the picture has again changed dramatically.

	David 1 Definite	David 2 Definite	David 1 Definite and Poss	David 2 Definite and Poss
Table 7.9 Mean average number of workers named - David - Time 1 and 2				
Social Workers	4.86	6.57	5.95	8.50
Heads	5.36	6.15	6.44	7.15
EWOs	7.00	5.89	8.26	9.22
School Nurses	7.04	6.06	8.39	7.94
Overall	6.01	6.19	7.19	8.12

Social workers are again seen to have moved from naming fewest to naming most in terms of definite involvement.   Heads have also moved in the same direction, but to a lesser extent.   School nurses and education welfare officers have also moved toward the mean on definite involvement with a reduction in definite choices.   Any gap which may have existed between heads and social workers on the one hand and EWOs and school nurses on the other is not discernible. The majority now all see at least 6 workers definitely being involved in the situation [Social workers 71%; heads 69%; EWOs 66%; school nurses 56%].   The system is more tightly coupled.   Whereas at Time 1 it was suggested social workers and heads saw this situation as one for themselves to deal with, by Time 2 they have moved to a greater recognition of it as a multi-professional task.

The pattern is repeated in the case of Sandra.   Social workers, on average, again identify most workers as having a definite part to play. This is misleading because the average is distorted by a small number of "high scorers" obscuring the fact that the median score for social workers was 5 compared with 6 for the other groups of respondent.   However, there does seem to be a fair degree of

consensus around the figure of 5 or 6 workers, so as with David 2, less distinction than was identified with the vignettes at Time 1.

Table 7.10 Mean average number of workers named - Sandra - Time 2		
	Definite	Definite and Possible
Social Workers	6.50	8.07
Heads	5.62	6.92
EWOs	6.11	8.33
School Nurses	5.50	6.69
Overall	5.90	7.40

On a purely quantitative basis, then, there does appear to be evidence to suggest a change between Time 1 and Time 2. The system had become more tightly coupled. At Time 1 there were disagreements about the extent of involvement on a very basic level, concerning the spread of agencies and workers to be involved. Such disagreement could have formed the basis for conflict between agencies, when expectations were not fulfilled. By Time 2, the evidence for these differences was less strong. However, despite this coming together of perceptions overall, there was still scope for disagreement, indicating that overall the description of a loosely coupled system still applied. Each agency accommodated a spread of view which would allow for uncertainty and negotiation. The change was one of relative positioning, not a change in the fundamental nature of the system.

Chapter 8

WORKING WITH OTHERS - THE PLAYERS

This chapter explores in more detail the nature of the decisions made by workers about the framework for handling the situations outlined in the vignettes. The first part looks at which particular agencies and workers they identified to be involved. The second part looks at their choice of which of those agencies and workers had the major contribution to make in the situations described. Again, the aim is to explore changes in the patterns of response, between the times of the two sets of fieldwork. Two questions are posed. The first represents the major concern about the coherence of the overall system. The second raises related issues about changes in the pattern of couplings within it. They are:

1   Would there be greater agreement over time reflecting a more tightly coupled system?

2   Would particular couplings between agencies change their significance?

The answer to the first question would be revealed by the extent to which the views of respondents had moved to a common perception, to either include or exclude an agency or worker. The answer to the second would be shown by the extent of variation in recognition of a particular agency, whether there was evidence of a particular set of workers choosing an agency or worker which they had previously ignored, or vice versa. To answer these questions, the vignettes will be considered in turn, to establish a baseline of agreement at Time 1, so that changes by Time 2 can be identified as measures of whether the system had become more or less tightly coupled or simply changed its shape.

Choosing agencies and workers

Tony - Time 1

In the case of Tony at Time 1, there was evidence of varying strengths of coupling with a clear element of accord, set in a surround of varied choices. Views regarding Tony are set out in Tables 8.1 and 8.2. There was general, but not universal, agreement that the social services department and social workers should have a part to play. The head teachers were slightly adrift from the views of others, being less overwhelming in their endorsement of the department, although the distinction was less marked when it came to naming workers. There was also strong agreement about the place of the school, although it was less than it might have been because of the large minority of education welfare officers who failed to mention it. There was, though, a strong endorsement in all quarters of the contributions of the class and head teacher. There was also general agreement about some of the agencies that did not have a part to play, namely the police, child guidance and NSPCC. In between, however, there was much more scope for disagreement and negotiation.

	Soc Wkr	Head	EWO	S Nurse	Total
School	17 77%	23 92%	14 61%	18 78%	72 77%
Ed Welf	4 18%	19 76%	21 91%	8 34%	52 56%
SPS	- -	4 16%	5 22%	6 26%	15 16%
Ch G.	1 5%	1 4%	4 17%	1 4%	7 8%
SMS	7 32%	19 76%	17 74%	22 96%	65 70%
FMP	11 50%	8 32%	12 52%	11 48%	42 45%
LASS	20 91%	18 72%	22 96%	20 87%	80 86%
NSPCC	- -	- -	4 17%	1 4%	5 5%
Police	- -	1 4%	4 17%	2 9%	7 8%
Other	12 55%	5 20%	10 43%	3 13%	30 32%
Total	22 100%	25 100%	23 100%	23 100%	93 100%

Table 8.1. Agencies named as definitely having a part to play by job of respondent. Tony Time 1 [n=93]

[Key: Ed Welf = Education Welfare Service; SPS = School Psychological Service; Ch G = Child Guidance; SMS = School Medical Service; FMP = Family Medical Practice; LASS = Local Authority Social Services Department; NSPCC = National Society for Prevention of Cruelty to Children]

	Soc Wkr	Head	EWO	S. Nurse	Total
Head	15 68%	24 96%	17 74%	18 78%	74 80%
P. Teach	2 9%	2 8%	6 26%		10 11%
Cl Teach	16 73%	22 88%	18 78%	20 87%	76 81%
EWO	3 14%	17 68%	23 100%	8 35%	51 55%
Ch G SW	1 5%	3 12%	5 22%	1 4%	10 11%
Ed Psych	1 5%	4 16%	6 26%	3 13%	14 15%
LA SW	19 86%	20 80%	20 87%	21 91%	80 86%
Sch MO	3 14%	10 40%	9 39%	19 83%	41 44%
S Nurse	12 55%	21 84%	19 82%	23 100%	75 81%
Paediat			1 4%		1 1%
Fam Dr	11 50%	6 24%	9 39%	14 61%	40 43%
H V	10 46%	9 36%	11 48%	12 52%	42 45%
NSPCC I			2 9%	3 13%	5 5%
Pol Off		2 8%	3 13%		5 5%
Psychiat					
Off Vol	4 18%	3 12%	1 4%	1 4%	9 10%
Vol Wkr	1 5%			2 9%	3 3%
Other	5 23%		2 9%	1 4%	8 9%
Total	22 100%	25 100%	23 100%	23 100%	93 100%

Table 8.2 . Workers named as having definite involvement by job of respondent - Tony - Time 1

[Key: P.Teach = pastoral teacher; Cl Teach = Classroom teacher; EWO = education welfare Officer; Ch G SW = child guidance social worker; Ed Psych = educational psychologist; LA SW = local authority social worker; Sch MO = school medical officer; S Nurse = School Nurse; Paediat = paediatrician; Fam Dr = Family doctor; H V = health visitor; NSPCC I = NSPCC inspector; Pol Off = police officer; Psychiat = psychiatrist; Off Vol = officer of voluntary organisation; Vol Wkr = voluntary worker].

One cause of disagreement was that, for the most part workers could see a role for their own agency but this view was not always reflected in the perception of others. This may be a feature of the fact that "workers consistently rate

themselves as more important than other observers do [Birchall and Hallett 1995: 224]. Alternatively it may reflect the way that information was presented, which implied that the respondent had received the information in the vignette and was therefore involved. Education welfare, in this case, provides an example of an agency where there was a clear lack of agreement on whether or not they should be involved. Education welfare officers had no difficulty identifying a role for themselves. In this, they were supported by the head teachers. However, social workers saw little role for them. Similar variation was found in perceptions of the school medical or school health service. Social workers did not make this choice Other workers did. This may reflect ambiguity about what such a service consists of - whether, for example. it refers to the doctors linked to particular schools or whether it includes school nurses. Some of these issues can be clarified by reference to views about specific workers. Support for the school nurse tended to be higher, while that for the medical officer fell away. There was, though, a range of views over the role of the school nurse, from universal endorsement by the nurses themselves to recognition by a bare majority of social workers. The school medical officer or doctor was also seen to be a figure of disagreement. School nurses strongly identified with him or her while social workers did not. Disagreements on health services also reflect the extent to which the job setting of workers tilts them to a particular orientation. Social workers, tied to a community rather than an educational setting, preferred to involve the family medical practice. School nurses demonstrated their health orientation to the extent that they identified doctors most frequently.

As well as those areas where disagreements were identifiable between workers, differences also emerged because respondents within categories were split on whether or not to name a particular worker. This was true for example of the health visitor where, with the exception of the heads, respondents were evenly split on whether she or he had a part to play or not.

At Time 1, then, views on who should be involved with Tony showed a variety of patterns of agreement, with no universal endorsement for any agency or worker, but with some areas of strong consensus about who should be involved. There was also often general recognition of who would be the peripheral players in the situation. Conversely, there were areas of disagreement between the different categories of respondent where particular choices were significant for one set of workers but not another. In between were those agencies and workers where there was as much disagreement, over whether or not to name them, within as between respondent groups. This indicates that there were tight couplings on some agencies and workers, locking them into place, so there was little ambiguity about whether they should be involved in the situation or not. Others were more loosely coupled into their place in the system allowing for greater variation of perception.

David - Time 1

For David at this time a similar pattern emerged but there were some areas of sharper differentiation.

Table 8.3 Agencies named as definitely having a part to play by job of respondent. David Time 1					
	Soc Wkr	Head	EWO	S Nurse	Total
School	18 82%	23 92%	21 91%	21 91%	83 89%
Ed Welf	1 5%	12 48%	22 96%	4 17%	39 42%
SPS	3 14%	17 68%	19 83%	20 87%	59 63%
Ch G.	5 23%	7 28%	10 44%	12 52%	34 37%
SMS	3 14%	16 64%	21 91%	22 96%	62 67%
FMP	7 32%	6 24%	7 30%	13 57%	33 36%
LASS	20 91%	15 60%	20 87%	22 96%	77 83%
NSPCC		4 16%	4 17%	2 9%	10 11%
Police	6 27%	6 24%	8 35%	14 61%	34 37%
Other	3 14%	4 16%	1 4%	1 4%	9 10%

[Key: Ed Welf = Education Welfare Service; SPS = School Psychological Service; Ch G = Child Guidance; SMS = School Medical Service; FMP = Family Medical Practice; LASS = Local Authority Social Services Department; NSPCC = National Society for Prevention of Cruelty to Children]

	Soc Wkr	Head	EWO	S. Nurse	Total
Table 8.4. Workers named as having definite involvement by job of respondent - David - Time 1					
Head	12 55%	24 96%	15 65%	15 65%	66 71%
P. Teach	12 55%	2 8%	12 52%	11 48%	37 40%
Cl Teach	15 68%	22 88%	16 70%	18 78%	71 76%
EWO	4 18%	10 40%	21 91%	3 13%	38 41%
Ch G SW	5 23%	10 40%	7 30%	10 43%	32 34%
Ed Psych	4 18%	15 60%	16 70%	19 83%	54 58%
LA SW	19 86%	10 40%	19 83%	20 87%	68 73%
Sch MO	2 9%	8 32%	12 52%	16 70%	38 41%
S Nurse	7 32%	11 44%	11 48%	20 87%	49 52%
Paediat					
Fam Dr	7 32%	4 16%	10 44%	12 52%	33 36%
H V	3 14%	4 16%	3 13%	2 9%	12 13%
NSPCC	1 5%	3 12%	3 13%	3 13%	10 11%
Pol Off	5 23%	6 24%	6 26%	9 39%	26 28%
Psychiat			1 4%		1 1%
Off Vol	1 5%	1 4%	1 4%		3 3%
Vol Wkr	1 5%		1 4%		2 2%
Other	1 5%	3 12%	1 4%		5 5%

[Key: P.Teach = pastoral teacher; Cl Teach = Classroom teacher; EWO = education welfare Officer; Ch G SW = child guidance social worker; Ed Psych = educational psychologist; LA SW = local authority social worker; Sch MO = school medical officer; S Nurse = School Nurse; Paediat = paediatrician; Fam Dr = Family doctor; H V = health visitor; NSPCC I = NSPCC inspector; Pol Off = police officer; Psychiat = psychiatrist; Off Vol = officer of voluntary organisation; Vol Wkr = voluntary worker].

It was generally recognised, even more than had been the case with Tony, that this was a situation that should involve the school. The choice of workers

confirmed tight coupling around the need for the school to be involved, with the teachers consistently being picked. Indeed, they and the head teacher were the only workers to be recognised by a majority of all types of respondent workers. The variation in the recognition of the pastoral teacher almost certainly reflects the age of David, who at eleven could have been in a primary or a secondary school. Because the head teachers who were interviewed were in charge of primary schools, they would have identified David as a primary school child. They would also have recognised that it would be unusual for a primary school to have a teacher with a specialist designated pastoral role. Other workers may have assumed that, at 11, David would be in a secondary school where it would be normal for there to be a pastoral teacher.

There was also agreement that the social services department had a part to play. However, the loosening on this choice by the head teachers from the general view, noted in the case of Tony, was reinforced and shown in even sharper relief in their views on choosing social workers. A large minority of heads did not see a place for the social services department and less than half the heads nominated the social worker, who was at or near the top of everybody else's list. What is emerging here is a difference in orientation in conceptualising the problems posed by David. On the one hand, there is a perspective, favoured, for example, by the social workers, identifying social issues. On the other hand there are views, favoured by head teachers, seeing the problems in behavioural or educational terms. The evidence for this is reinforced by the split between social workers and others over the choice of the school psychological service and educational psychologist, rarely mentioned by the social workers but predominantly referred to by others. As far as the heads were concerned this was a problem within their domain to be dealt with by education based agencies and not necessarily something to be handed over to an outsider. Social workers did not agree. Other respondents fell between these two extremes.

There was less agreement than there had been in the case of Tony about those agencies that should not be involved. Of those offered to respondents, only the NSPCC was not suggested by a majority of any group of respondent workers. There continued to be examples of clear disagreement between groups of workers about who should be involved, for example social workers did not think in terms of school medical officers or doctors when others did, although a number of them did use the language of community physician. Again, respondents saw a role for their own agency and again this recognition was not necessarily acknowledged by others. Only one education welfare officer did not say their service had a part to play while only one social worker said that it did.

Overall the picture presented a more loosely coupled world, with more scope for negotiation, than in the case of Tony. Changes in the balance of coupling were revealed in a number of areas where there was movement in the pattern of choices. The police and child guidance moved into the groups where views on whether they should be involved or not were less clear cut. They were named predominantly by the school nurses, who were twice as likely as some other groups to do make this choice.

David - Time 2
How far had this picture changed by Time 2?' While some couplings were largely unaffected there was evidence that in some quarters the balance of coupling had changed, usually in the direction of drawing agencies more tightly in.

Table 8.5. Agencies named as definitely having a part to play by job of respondent. David Time 2					
	Soc Wkr	**Head**	**EWO**	**S Nurse**	**Total**
School	13 93%	10 77%	9 100%	15 94%	47 90%
Ed Welf	3 21%	5 39%	9 100%	2 13%	19 37%
SPS	4 29%	10 77%	3 33%	10 63%	27 52%
Ch G.	2 14%	3 15%	2 22%	9 56%	16 31%
SMS	8 57%	9 69%	1 11%	12 75%	30 58%
FMP	11 79%	3 23%	1 11%	5 31%	20 38%
LASS	14 100%	9 69%	9 100%	16 100%	48 92%
NSPCC		1 8%	3 33%	1 6%	5 10%
Police	10 71%	5 39%	4 44%	8 50%	27 52%
Other	1 7%				1 2%

[Key: Ed Welf = Education Welfare Service; SPS = School Psychological Service; Ch G = Child Guidance; SMS = School Medical Service; FMP = Family Medical Practice; LASS = Local Authority Social Services Department; NSPCC = National Society for Prevention of Cruelty to Children]

Table 8.6. Workers named as having definite involvement by job of respondent - David - Time 2					
	Soc Wkr	Head	EWO	S. Nurse	Total
Head	8 57%	12 92%	6 67%	10 63%	36 69%
P. Teach	7 50%	2 15%	5 56%	9 56%	23 44%
Cl Teach	12 86%	12 92%	4 44%	13 81%	41 79%
EWO	5 36%	5 39%	8 89%	2 13%	20 38%
Ch G SW	5 36%	2 15%	2 22%	6 38%	15 34%
Ed Psych	3 21%	10 77%	4 44%	4 25%	21 40%
LA SW	14 100%	9 69%	8 89%	16 100%	47 90%
Sch MO	2 14%	4 31%	3 33%	3 19%	12 23%
S Nurse	9 64%	11 85%	4 44%	13 81%	37 71%
Paediat	1 7%	1 8%			2 4%
Fam Dr	11 79%	3 23%	2 22%	6 38%	22 42%
H V	1 7%			1 6%	2 4%
NSPCC I		1 7%	2 22%		3 6%
Pol Off	13 93%	5 39%	2 22%	9 56%	29 56%
Psychiat		1 7%		1 6%	2 4%
Off Vol			1 11%		1 2%
Vol Wkr	1 7%		1 11%		2 4%
Other	1 7%	2 15%		2 13%	5 10%

[Key: P.Teach = pastoral teacher; Cl Teach = Classroom teacher; EWO = education welfare Officer; Ch G SW = child guidance social worker; Ed Psych = educational psychologist; LA SW = local authority social worker; Sch MO = school medical officer; S Nurse = School Nurse; Paediat = paediatrician; Fam Dr = Family doctor; H V = health visitor; NSPCC I = NSPCC inspector; Pol Off = police officer; Psychiat = psychiatrist; Off Vol = officer of voluntary organisation; Vol Wkr = voluntary worker].

The agencies and workers most frequently mentioned at Time 1 retained their position at Time 2. There continued to be strong agreement that this was a

matter for the school. However, while the drift of opinion among social workers was towards this point of view, that of head teachers was in the opposite direction. Indeed, by this stage, the heads were the least likely to see a role for the school. Views were remarkably consistent regarding school heads and teachers, with the classroom teacher continuing to be seen as a key player, even more so at Time 2, by the social workers. The pattern regarding the social services department was also confirmed. Views on the involvement of the local authority social worker showed tightening to the extent that all categories of respondent showed an upward trend, with social workers and school nurses unanimous in their choice. However, within the general pattern of agreement, the distinction between the head teachers and others appeared to have become even starker. Even though the proportion of heads picking the department and its workers was slightly up, at over two thirds, they were the only group that did not choose the department unanimously at Time 2. Elsewhere, any doubts that it was an issue for the social services had been removed. However, further analysis of the replies of head teachers shows them less adrift than might at first appear. Although they were less ready to commit themselves to the idea that this was a situation *requiring* the involvement of a social worker they all conceded that it was at least a *possibility*.

At the other end of the scale the NSPCC retained its position as the agency which respondents agreed did not have a part to play. In between some of the areas of disagreement had also been unaffected since Time 1. This was true of the education welfare service where officers still saw themselves playing a part, while others did not. Even here, though, variation in the views of the social workers could be detected. While still only naming the education welfare officers in a minority of cases, they were twice as likely to name them by Time 2.

Elsewhere however, more dramatic changes of view emerged. These were

particularly marked in relation to the replies of social workers about the police and the health services. Taking the police first, 71% of social workers now named the police as an agency and 93% identified the police officer, compared with 27% and 23% at Time 1. Although the views of others generally moved to include the police, there was no such major re-alignment. There had been a clear change of government policy here [see Chapter 4] but it seems to have had more impact on social workers than others. In the case of the family medical practice and doctor, recognition by social workers more than doubled from around a third of nominations to nearly all. Conversely the trend among other workers was for recognition to decline. This was particularly true for school nurse respondents.

Change was also noteworthy in the patterns of recognition of the role of the school nurse. The nurses themselves continued to see their profession as being involved. However while at Time 1 their potential contribution was definitely acknowledged by a minority of each other category of respondent this picture had changed dramatically by Time 2. Only the EWOs continued at the earlier level of nomination. The rate for heads and social workers approximately doubled. The rate for social workers rose from 32% to 64%. That for head teachers went up from 44% to 85%. The school nurse would appear to have moved in from the wings towards centre stage.

Views on other agencies sometimes reflected more complex shifts in the balance of coupling. The school psychological service provides an example of this. There was significant change but it was concentrated on the education welfare officers who no longer named the service. Elsewhere there were elements of continuity. Head teachers continued, as strongly as ever to identify the school psychological service while the social workers although catching up slightly did not. Combined with the views on the involvement of the social services department this shows that head teachers still understood the situation

differently. For them the balance of potency of social and behavioural variables still tilted to the latter in making their links more than it did for other workers. While the views of heads and social workers on the need for the educational psychologist to be involved were still the same, there was a fall in recognition by others and in particular by education welfare officers and school nurses whose rate of recognition dropped dramatically. There was, though a curious anomaly here in the response of the nurses. The majority at Time 2 [10, 63%] identified the school psychological service as an agency which "should be involved in handling this situation" but less than half that number identified the psychologist as a worker who "should have a part to play in dealing with this situation". The nurses were making distinctions based either on their perception of the organisation and the role of the psychologist within it or on the basis of the nature of the contribution which was to be made. This was a distinction which had not been there at Time 1.

Evidence on the changes in coupling strengths shown by the choice of other workers demonstrated that often the views of a particular set of respondents had been affected more than others. In some instances this related to increased recognition. The scale of these changes could be such that even if the general trend of view among other workers was in the same direction the distance between them increased. Examples of this have already been seen, for example in respect of social workers' views on the police and the family doctor. Alternatively some occupations reduced their nomination rate. While at Time 1 nurses were well ahead in naming the school doctor or medical officer [16, 70%], by Time 2 they were in line with the social workers at the lower end [3, 19%]. The result was greater agreement than at Time 1.

Overall, then there is evidence of clear shifts of view on agencies and workers by respondents in how they interpreted the demands of David's situation over the years. The extent to which this provides evidence of a more tightly coupled

system is mixed. Tightness of view around the school and social services department where agreement had already existed was confirmed. Elsewhere, it is less clear that the system has tightened in ways that make for greater agreement. There was evidence that the tension exerted on couplings was often to move them in the same direction. However, the pattern of these shifts fits the model of loosely coupled systems, in that the extent to which workers had responded in altering their view varied with occupation, for example with regard to views on the police, where social workers were even more likely than others to pick an agency they had previously ignored. Even though all might be propelled in the same direction, relative positions may be as loosely coupled as ever. There were, though, also indications of tightened coupling. For example some, such as the school nurse, with increased recognition, had become more tightly coupled into the system.

Sandra -Time 2

Given the level of concern evoked in the 1980s and 1990s about child sexual abuse and its prominence on the social policy agenda, would responses to the description of circumstances surrounding Sandra provide evidence of a more tightly coupled system?

Table 8.7. Agencies named as definitely having a part to play by job of respondent. Sandra Time 2					
	Soc Wkr	**Head**	**EWO**	**S Nurse**	**Total**
School	14 100%	11 85%	8 89%	10 63%	43 83%
Ed Welf	4 29%	6 46%	9 100%	5 31%	24 46%
SPS	1 7%	3 23%	1 11%	2 13%	7 13%
Ch G.	1 7%	2 15%	1 11%	1 6%	5 10%
SMS	8 57%	8 62%	2 22%	8 50%	26 50%
FMP	12 86%	4 31%	2 22%	8 50%	25 48%
LASS	13 93%	10 77%	9 100%	13 81%	45 87%
NSPCC	1 7%	3 23%	1 11%	2 13%	7 13%
Police	13 93%	7 54%	4 44%	10 63%	34 65%
Other	1 7%		1 11%		2 4%

[Key: Ed Welf = Education Welfare Service; SPS = School Psychological Service; Ch G = Child Guidance; SMS = School Medical Service; FMP = Family Medical Practice; LASS = Local Authority Social Services Department; NSPCC = National Society for Prevention of Cruelty to Children]

	Soc Wkr	Head	EWO	S. Nurse	Total
Head	10 71%	13 100%	5 56%	7 44%	35 67%
P. Teach	4 29%	3 23%	4 44%	2 13%	13 25%
Cl Teach	7 50%	12 92%	6 67%	8 50%	33 63%
EWO	2 14%	4 31%	8 89%	7 44%	21 40%
Ch G SW	1 7%	1 8%	2 22%	2 13%	6 12%
Ed Psych	1 7%	2 15%	3 33%	3 19%	9 17%
LA SW	14 100%	11 85%	9 100%	16 100%	50 96%
Sch MO	2 14%	4 31%	2 22%	3 19%	11 21%
S Nurse	9 64%	8 62%	4 44%	10 63%	31 60%
Paediat	1 7%	2 15%	1 11%	- -	4 8%
Fam Dr	10 71%	5 39%	2 22%	9 56%	26 50%
H V	2 14%	- -	1 11%	1 6%	4 8%
NSPCC I	- -	1 8%	4 44%	2 13%	7 13%
Pol Off	13 93%	6 46%	3 33%	12 75%	34 65%
Psychiat	- -	- -	- -	- -	- -
Off Vol	- -	- -	1 11%	- -	1 2%
Vol Wkr	- -	- -	- -	- -	- -
Other	1 7%	2 15%	- -	3 19%	6 12%

Table 8.8. Workers named as having definite involvement by job of respondent - Sandra - Time 2

[Key: P.Teach = pastoral teacher; Cl Teach = Classroom teacher; EWO = education welfare Officer; Ch G SW = child guidance social worker; Ed Psych = educational psychologist; LA SW = local authority social worker; Sch MO = school medical officer; S Nurse = School Nurse; Paediat = paediatrician; Fam Dr = Family doctor; H V = health visitor; NSPCC I = NSPCC inspector; Pol Off = police officer; Psychiat = psychiatrist; Off Vol = officer of voluntary organisation; Vol Wkr = voluntary worker].

In broad terms, many of the patterns of coupling showed little evidence of change from the other vignettes.   The same agencies were identified most

frequently. There was broad agreement that the school and the local authority social services department should be involved. The school was high in the inclusion chart for all groups. However, it was more significant for some than others. It was identified by *all* the social workers but by less than two thirds of the school nurses. There is evidence that couplings were looser than might have been expected because workers had in mind a different focus on who might make the school's contribution. Social workers moved strongly to identify the head teacher in the case of Sandra, whereas they had chosen the class teacher in greater numbers for David [T2]. School nurses, conversely, reduced their recognition of both of these teachers.

In terms of including the social services department the choice of the social worker to be involved produces the clearest evidence of tight coupling around the need for any worker or agency to play a role. There was overwhelming endorsement of the social worker, with nomination by every social worker, education welfare officer and school nurse. The lowest rate of nomination was from the head teachers who again stand out because although most of them recognised the need for the social worker, they were the only group who were not unanimous in this choice. It completes a consistent pattern across all the vignettes. At both times with all vignettes, the head teachers were the least likely to nominate the social services department, although the differential is less in the case of Sandra than any of the others. Again a number of respondents named the social worker when they had not named the agency. This suggests that workers map their world in terms of individuals rather than the agencies they represent.

There was evidence of tighter coupling around perceptions of police involvement. Recognition of their contribution was higher for this vignette than for others. This was the case for all respondents, except the education welfare officers. This general agreement could reflect the high profile given to issues

of interviewing abused children, the use of videos and so on. However, again there was a variation in the pattern across the different worker groups. The social workers stand well clear of other workers in their rate of identification of the police with 93% recognition. Only one social worker did not name them Although a majority of all others did list the police, only the nurses approached this rate. Heads and education welfare officers were more or less evenly divided on whether they named the police or not.

Those services which had been the subject of variation of view in the case of David continued to be so, for example, education welfare officers again stand out as wanting their service to be involved, but receiving only minority recognition from others. Similar differences of perception between social workers and the others, to those evident with David at Time 2, also emerged again in views about the involvement of the family medical practice and doctor. This reflects a sustained change in the views of social workers, contrasting with those they had held at Time 1. By Time 2 they had come to recognise the role of the family medical practice. Other workers had not.

The increased profile of the school nurse, identified in the case of David at Time 2, was confirmed. There was, indeed remarkable consistency at the level of choice of the school nurse, with only the education welfare officers out of line. However, for the nurses themselves, this seemed to represent an area where they were least confident of their contribution. True, they saw themselves as being involved as often as their strongest advocates, the social workers and head teachers but this was also the scenario where the usual desire to play a part, more than is recognised by others, was not observed. This happened even though the majority of others saw them playing a part.

There was, in the case of Sandra, then, evidence of a more tightly coupled system. This was notably around ideas on local authority social services

involvement. This vignette also confirmed changes over time, observed with David. The police and school nurses, for example, were again recognised more clearly as part of the system. It was apparent also that changes in some couplings were particularly significant for social workers, who had come to relate, more actively than anybody, to the police and family medical services.

The major contribution

The foregoing analysis has demonstrated variation in the balance of couplings between vignettes and over time. This has indicated changes in ideas about who should be involved in tackling situations. Such changes may reflect fine tuning , leaving the essence of the system unchanged, or they could be part of something more fundamental. This section explores whether there were changes of view about the main thrust of who should intervene. Change here would indicate changes to the coupling variables at the heart of the system. As a measure of this, respondents were therefore asked which of the bodies they had named they thought had "the major contribution to make in resolving" the situation and which worker they thought "*should* take the major role in actually handling" the situation. Strong agreement on this item would indicate that looseness elsewhere was peripheral. Variation of view would indicate a level of looseness at the centre of the system. Changes between vignettes and over time would represent significant shifts in the balance of coupling.

Respondents were encouraged to identify a single *major* agency and worker if possible, but were allowed the option of naming more than one if they could not do so. It would be fair to comment that this did on occasions move respondents on from their initial response, which may have been to suggest a joint approach. However, it was considered justified to force the decision in this way to get at their basic orientation in the handling of the situation. Overall, the results show a tightening of focus between time one and time two with a reduction in the spread of choices of answer to these questions. This was particularly apparent

195

in the choice of the worker to take the major role. In the first round of interviews nominations of who this should be were classified into eleven different categories of worker for both Tony and David. By time two, however, using the same system only five categories were identified for David while only 6 were used in the case of Sandra [Tables 8.9 to 8.16]. This tightening may, though, be less dramatic than it looks simply because the smaller size of the sample at time 2 allowed less opportunity for there to be aberrant responses

Tony - Time 1.

There was general agreement that, in the case of Tony, the social services department should be the major contributing agency. When respondents were asked, later in the interview, to identify workers a similar pattern emerged. However, the social work respondents displayed a notable shift, with the numbers identifying the social worker as the major worker being half as great again as those who saw the department as the major agency.

A third of respondents, however, did not name the social services department and of those, heads and social workers favoured the school, while the nurses favoured the school medical service.

Table 8.9.	Major contributing agency by job of respondent Tony. Time 1				
	Soc Wkr	**Head**	**EWO**	**S Nurse**	**Total**
School	5 23%	4 16%	1 4%	1 4%	11 12%
Ed Welf		3 12%	3 13%	1 4%	7 8%
SPS					
Ch G.					
SMS		2 8%	1 4%	5 22%	8 9%
FMP					
LASS	13 59%	15 60%	16 70%	16 70%	60 66%
NSPCC					
Police					
Other	3 14%				3 3%
Over 1	1 5%		2 9%		3 3%
Dif Resp		1 4%			1 1%

[Key: Ed Welf = Education Welfare Service; SPS = School Psychological Service; Ch G = Child Guidance; SMS = School Medical Service; FMP = Family Medical Practice; LASS = Local Authority Social Services Department; NSPCC = National Society for Prevention of Cruelty to Children; Over 1 = more than one agency named; Dif Resp = different type of response]

Table 8.10. Major contributing worker by job of respondent Tony - Time 1					
	Soc Wkr	**Head**	**EWO**	**S Nurse**	**Total**
Head	1 5%	4 16%	2 9%		7 8%
Cl Teach	1 5%				1 1%
EWO		3 12%	2 9%		5 5%
Ch G SW				1 45	1 1%
Ed Psych			1 4%		1 1%
LA SW	19 86%	13 52%	16 70%	17 74%	65 70%
Sch MO				1 4%	1 1%
S Nurse		1 4%		1 4%	2 2%
H V		1 4%		1 4%	2 2%
NSPCC I				1 4%	1 1%
None		2 8%	1 4%	1 4%	4 4%
Over 1	1 5%	1 4%	1 4%		3 3%

[Key: Cl Teach = Classroom teacher; EWO = education welfare Officer; Ch G SW = child guidance social worker; Ed Psych = educational psychologist; LA SW = local authority social worker; Sch MO = school medical officer; S Nurse = School Nurse; H V = health visitor; NSPCC I = NSPCC inspector; Over 1 = more than one worker named].

David - Time 1

In contrast to Tony, there was looser coupling around the question of the major agency in dealing with David, with no clear agreement. The social services department was chosen more often than any other, but there was a division of opinion. The choice of main agency for David at Time One reinforces the view that, at this stage, while social workers usually saw this as falling into their domain, others, in particular head teachers and education welfare officers, did not.

There was not, however, a rival on which others were agreed. The school was only identified by the heads, while agencies dealing with behavioural issues, such as the school psychological service, featured strongly, particularly among the education welfare officers and to a lesser extent the school nurses.

Table 8.11 Major contributing agency by job of respondent David. Time 1					
	Soc Wkr	Head	EWO	S Nurse	Total
School		5 20%			5 5%
Ed Welf		2 8%	1 4%		3 3%
SPS		2 8%	10 44%	6 26%	18 19%
Ch G.	2 9%	2 8%	1 4%	3 13%	8 9%
SMS		1 4%			1 1%
FMP					
LASS	18 82%	7 28%	6 26%	12 52%	43 46%
NSPCC			3 13%		3 3%
Police				1 4%	1 1%
Other	1 5%	1 4%			2 2%
Over 1	1 5%	3 12%	2 9%	1 4%	7 8%
Dif Resp		2 8%			2 2%

[Key: Ed Welf = Education Welfare Service; SPS = School Psychological Service; Ch G = Child Guidance; SMS = School Medical Service; FMP = Family Medical Practice; LASS = Local Authority Social Services Department; NSPCC = National Society for Prevention of Cruelty to Children; Over 1 = more than one agency named; Dif Resp = different type of response]

Table 8.12	Major contributing worker by job of respondent David -Time 1				
	Soc Wkr	**Head**	**EWO**	**S Nurse**	**Total**
Head		3 12%	1 4%		4 4%
P. Teach				1 4%	1 1%
Cl Teach		2 8%			2 2%
EWO		3 12%	2 9%		5 5%
Ch G SW	1 5%	4 16%	2 9%	3 13%	10 11%
Ed Psych		1 4%	5 22%	4 17%	10 11%
LA SW	17 77%	6 24%	8 35%	14 61%	45 48%
Sch MO		1 4%			1 1%
NSPCC I		1 4%	1 4%		2 2%
None	2 9%	2 8%			4 4%
Over 1	2 9%	2 8%	4 17%	1 4%	9 10%

[Key: Cl Teach = Classroom teacher; EWO = education welfare Officer; Ch G SW = child guidance social worker; Ed Psych = educational psychologist; LA SW = local authority social worker; Sch MO = school medical officer; S Nurse = School Nurse; H V = health visitor; NSPCC I = NSPCC inspector; Over 1= more than one worker named].

David - Time 2

By Time two responses suggested a more tightly coupled system. A clear change had taken place in the way respondents saw this situation. It was now

Table 8.13   Major contributing agency by job of respondent David. Time 2

	Soc Wkr	Head	EWO	S Nurse	Total
School	2 14%	2 15%	1 11%		5 10%
Ed Welf			1 11%		1 2%
SPS		1 8%		1 6%	2 4%
Ch G.				3 19%	3 6%
SMS		1 8%			1 2%
FMP					
LASS	11 78%	8 62%	5 56%	12 75%	36 69%
NSPCC					
Police	1 7%				1 2%
Other					
Over 1			2 22%		2 4%
Dif Resp		1 8%			1 2%

[Key: Ed Welf = Education Welfare Service; SPS = School Psychological Service; Ch G = Child Guidance; SMS = School Medical Service; FMP = Family Medical Practice; LASS = Local Authority Social Services Department; NSPCC = National Society for Prevention of Cruelty to Children; Over 1 = more than one agency named; Dif Resp = different type of response]

Table 8.14   Major contributing worker by job of respondent David -Time 2

	Soc Wkr	Head	EWO	S Nurse	Total
Head		4 31%	1 11%		5 10%
P. Teach				1 6%	1 2%
Ed Psych		1 8%			1 2%
LA SW	14 100%	8 62%	4 44%	15 94%	41 79%
Other			4 44%		4 8%

[Key: Cl Teach =P. Teach = pastoral teacher; Ed Psych = educational psychologist; LA SW = local authority social worker;

recognised by a majority of all workers that this was primarily a matter for the local authority social services department. The rate at which this choice was made by head teachers had doubled while school nurses who had started from a higher recognition rate showed a fifty per cent increase. This tightness was also reflected in the fading to the status of an 'also ran' of the school psychological service which had been the second most popular choice at Time 1. This picture was reinforced by the choice of the major worker. The social workers had moved to the point of unanimity in choosing the social worker, with the school nurses hard on their heels. The education welfare officers were more likely to be reluctant to commit themselves to identifying a single worker, for example :

> EWO: That depends which one surely that the child can relate to ...
> Interviewer: All other things being equal what would you say?
> EWO: I don't think you can say that because they've all got different expertise and ...
>
> [EWO 1, David, T2]

Others might have seen little choice in the matter, for example the school nurse who observed:

> Well I mean it is social services who take the key worker role so I don't think we have any choice in that matter... we're not allowed to be key workers even if we think we are more appropriate but we're not anyway so...
>
> [sn 9, David, T2]

No worker apart from the social worker got more than a single mention, except for the head teacher mentioned by a third of the head teacher respondents but only by them. This did, though, represent a greater recognition of their own contribution by the heads than had been the case previously.

Sandra - Time 2

This pattern, evidence of a more tightly coupled system, was again found when respondents were asked about Sandra. There was very little variation of choice. The predominant response was to name the local authority social services department and the social worker from that department. Again the social workers were unanimous that one of them should play the major role. Respondents often replied "Social Services" or the "social services social worker" without hesitation or elaboration. Otherwise only the school, the NSPCC and the police got more than one vote and the only worker to get more than a single endorsement was the NSPCC officer.

Taking the pattern of views on the major contribution over all four vignettes indicates tightening of coupling at the heart of the system. The local authority social services had become even more tightly coupled in than before. Despite the significant changes, though, head teachers and education welfare officers continued to contain an identifiable minority who were adrift from the main stream in their perceptions.

Table 8.15 Major contributing agency by job of respondent Sandra Time 2

	Soc Wkr	Head	EWO	S Nurse	Total
School		2 15%			2 4%
Ed Welf				1 6%	1 2%
SPS				1 6%	1 2%
Ch G.					
SMS		1 8%			1 2%
FMP					
LASS	13 92%	8 62%	7 78%	12 75%	40 77%
NSPCC		1 8%	2 22%		3 6%
Police				2 13%	2 4%
Other					
Over 1					
Dif Resp	1 7%	1 8%			2 4%

[Key: Ed Welf = Education Welfare Service; SPS = School Psychological Service; Ch G = Child Guidance; SMS = School Medical Service; FMP = Family Medical Practice; LASS = Local Authority Social Services Department; NSPCC = National Society for Prevention of Cruelty to Children; Over 1 = more than one agency named; Dif Resp = different type of response]

Table 8.16   Major contributing worker by job of respondent Sandra Time 2

	Soc Wkr	Head	EWO	S Nurse	Total
Head		1 8%			1 2%
P. Teach		1 8%			1 2%
LA SW	14 100%	9 70%	6 67%	14 88%	43 83%
NSPCC I		1 8%	1 11%	1 6%	3 6%
Pol Off				1 6%	1 2%
Other		1 8%	2 22%		3 6%

[Key: P. Teach = pastoral teacher; LA SW = local authority social worker; NSPCC I = NSPCC inspector; Pol Off = police officer].

Commentary

Overall, the map of choices of worker and agencies found over the two rounds of survey was in keeping with a social world constructed as a loosely coupled system. Two broad questions were posed at the start of this chapter. The first asked whether the system overall was becoming more tightly coupled. The second raised the issue of the significance of couplings between particular sets of workers.

In response to the first question, it can be concluded that there was evidence that the system was becoming more tightly coupled. Although, at Time 1, the situation of Tony had revealed a fair degree of consensus, more disagreement had been apparent in views on David. By Time 2 there was a lot less ambiguity on the key issues of who should be at the heart of dealing with the situations. The increased significance of the social services department and its workers was clear. This showed change in the case of David which was sustained in the case of Sandra.

The picture was more mixed when the focus moved away from this core. There, the evidence showed a large amount of agreement, but with couplings in a state of flux around it. Expectations were varied and interpretations changing. There was some evidence of a drift to consensus, indicating tighter coupling over the time span of the fieldwork. The division between heads and social workers in their responses to David showed the former becoming more social in their orientation, while the latter were more likely to acknowledge the educational contribution. There was increased recognition, by the heads, of the role of local authority social services departments and social workers, for example with the fading significance of the education psychologist. However, the system still retained its loosely coupled characteristics with signs that, at times, a division between an educational perspective, on the one hand, and a social orientation on the other persisted.

The significance of changes in particular couplings, relevant to the second question, was demonstrated. For some types of worker who were interviewed the change in view between the two rounds of interview was stark - for example in the views of social workers on the need for police involvement in the case of David and confirmed by the response to Sandra. Switches of choice such as this took place in contexts where attitudes towards the inclusion of some workers and agencies remained as varied as ever but where some workers were later seen to be included when they had not been originally or vice versa. For example the views of social workers on involving the family doctor and the school nurse in the case of David changed from Time 1 to Time 2 and this was also reflected in their recommendations concerning Sandra. The views of other workers , though, did not necessarily reflect these changes. Changes, then while having an impact were sometimes limited rather than general in their effects. They did not, necessarily, indicate a tightening of coupling in the system overall. However, as we have seen, there was sufficient evidence, on these measures, to suggest that the system was becoming more tightly coupled around its core.

These continuities and changes could reflect a range of factors. Some might reflect deliberate attempts to improve co-ordination though devices such as procedures. Others could reflect resource considerations affecting the likelihood of a service or worker being able to respond appropriately. Others could reflect the changing nature and responsibilities of agencies. Chapter 10 examines the explanation given by respondents of why they chose the agencies they did. First, however, views on how the agencies and workers would interact are examined.

206

Chapter 9

WORKING WITH OTHERS - THE MECHANICS

This chapter moves the analysis a stage further by looking at the mechanics of handling the situations in the vignettes, once the relevant agencies and workers have been identified. While the last chapter focused on the structural aspects of coupling in terms of mapping who should be involved, this one concentrates on coupling related to process, in terms of how contact would be made and sustained. It concentrates on key coupling points where different workers are expected to have contact with one another. How do they make initial contact? How do they expect to continue that contact? How far do they have common expectations of who will be involved in that contact? The level of agreement at Time 1 indicates the extent to which there was, then, loose coupling. The concerns about failures of the child protection system in the 1980s, which resulted in the production of procedural guidelines, suggest that greater clarity was needed. If these guidelines have been successful, then the tighter couplings found at Time 1 should be sustained at Time 2 and variations of view indicative of loose coupling should have decreased.

Making contact with others.

One of the first issues to arise in joint working is the awareness of the point where initial coupling with another agency should occur. Respondents were asked to indicate what their *first* point of contact would be if they were getting in touch with the agencies that they had named. In a tightly coupled system this should be a well recognised fixed point. It could, though, be a different point for different sets of workers. The key issue was whether the level of agreement had changed over time and what this indicated about the nature of the couplings in the system. The analysis looks at agencies relevant to the interview population and those which were more frequently selected for

involvement. The agencies which are not discussed either showed little change, or the numbers were too small to indicate any meaningful patterns. The overall image is of a complex pattern of changes; the picture which emerges is of increasing points of agreement, indicating a gradual tightening of the system.

Views on contacting the school showed little variation over time. There was always a clearly identifiable point of contact which was consistent across vignettes. Nearly everybody recognised the head teacher. The chief exceptions were education welfare officers, who while predominantly naming the head in all other situations, were scattered in their responses in the case of David at Time 2, being likely to suggest someone else in the school. They did not appear to recognise the relevance of the named person in the school, suggested in the *Working Together* guidelines, as a recognised contact point The position of schools indicated persistent tight coupling but with scope for adjustment. Attempts to tighten coupling seemed to have had little impact - even in aspects where some change might have been expected.

There were, though, indications that the couplings around the social services department had been pulled slightly tighter by Time 2. The difference concerned the views of head teachers. At Time 1, the social services department operated a 'duty social worker' system and this was the most clearly recognised entry route. However, while school nurses and education welfare officers would specifically identify the duty social worker, few head teachers used the 'duty' concept. They were more likely to suggest a more impersonal approach, for example a speculative phone call to the department

> I'd ring the area office I think [head 8, Tony T1]

or

> The number in the booklet [head 6, David, T1].

By Time 2, the Social Services Department had been restructured and 'access' teams introduced. These now provided a commonly recognised first contact point and head teachers, alongside other workers, seemed to be more in key with the idea of contacting these. Nearly half used this terminology. However, they continued to be those most likely to think in terms of impersonal approaches, for example

> Well we ha.. I mean we would have on record telephone numbers I can't tell you who the person I would contact with .... that information is actually in the school and would be readily followed [head 13, Sandra, T2].

This presumably reflects the more limited contact some head teachers have with social services departments [see for example Hallet, 1995a: 60]. However, heads officially represented a key link in the chain. For example, local procedures required school nurses, identifying a suspected or actual case of abuse or neglect, to inform the head teacher, who would have a responsibility to inform the social services department [ACPC, 1993:36]. Indeed, a number of school nurses did indicate this as their route to the social services department, in the case of David although not for Sandra. Heads may, therefore, be apparently nearer the centre and more tightly coupled into the system procedurally and formally than they are in everyday practice, even with the changes in levels of awareness between the two sets of fieldwork.

The evidence on the balance of coupling surrounding the education welfare service was mixed. From the perspective of head teachers it was tighter. For other workers the balance was similar, although the weights producing that balance may have been shuffled. Head teachers were clearer about the place of education welfare in the system. By Time 2, they were agreed that they would make direct contact with the relevant education welfare officer. At Time 1, they had been less sure with a significant minority suggesting more impersonal routes, for example by ringing 'County Hall' [8 ex 20, 40% in the

case of Tony: 2 ex 12, 17% in the case of David]. Conversely, school nurses, who had predominantly favoured going to the EWO direct at Time 1, favoured routing their interest through the school by Time 2. However, the level of agreement among the nurses was consistent over time. As far as they were concerned the overall balance of coupling in the system had not changed. One particular coupling has been replaced by another. The system had changed without becoming either tighter or looser overall. The changes reflect a combination of the acceptance by the nurses of revised procedures and the intervening changes to the education welfare service which had seen it greatly reduced in size, with a less centralised organisational base.

For the school medical or health services, the overall picture was one of subtly shifting expectations. Some elements did though indicate greater tightness. Social workers were much clearer by Time 2 that the school nurse would be their first point of contact into those services. Of the 13 occasions when social workers had named the school medical services at Time 1, they had named the school nurse as first contact on only 5 occasions [38%]. The corresponding figure for Time 2 was 16 out of 18 [89%]. Education welfare officers fell in line with this to the extent that whereas at Time 1 they were likely as not to think of direct contact with the nurse [19 ex 38, 50%], by Time 2 insofar as they saw a role for the school heath services, they saw their contact as being with the social services department [5 ex 6, 83%], with no direct contact with the nurse at all. This would suggest they were now classifying situations in terms of child protection and social services powers and responsibilities. The views of the heads showed no clear shift in pattern. For them, this part of the system was no more tightly coupled.

Views on links to the family medical services did show a much clearer picture, indicative of tighter coupling. The significance of the social services department as the route to relevant services was agreed at Time 2, in contrast

to Time 1, when a variety of routes had been presented. Then, heads and education welfare officers would have gone through the school medical services, while the school nurses and the social workers would have gone to the general practitioner (and in the case of Tony to the health visitor). By Time 2, majority opinion was that it would be for the social services department to make the contact. Social workers continued to see themselves linking directly with the doctor. Others, and particularly the school nurses, would refer to the social services department, for example

> That is formally done through the social services department
> [sn 8, Sandra, T2]

Overall at Time 1, only 3% [1 out of 30] non social workers who identified the family medical practice said their first contact would be with the social services department. By time two, this was 53% [8 out of 15].

Views on contacting the police also indicated a tightening of the system around the social services department, with a tight coupling between that department and the police. At Time 1, a variety of suggestions was made as to how the police would be contacted. Most consistent at that stage were the social workers, half of those who named the police nominating the special enquiry unit which dealt with child welfare issues at that time. At the time of the second survey, police responsibility was located in the Force Family Support Unit. Naming this was little short of an automatic response for social workers. It was picked by all in the case of Sandra and by all but one in the case of David at this time. It was also clear that this was a route which was exclusive to social services department social workers. Other workers recognised this reality in their responses, with a shift towards the nomination of the social services department as the route to the police. This was most marked for the school nurses. They had been the group most likely to think in terms of routing through the social services department at Time 1. This tendency was reinforced at Time 2 to the extent that, in the case of Sandra, every nurse who

named the police said that contact should be made through the social services department. The shift of view for other workers was less dramatic but was in the same direction. With the police, as with other agencies, the evidence indicates a coupling architecture with inputs from agencies going through the single social services department processor before onward transmission. The social services department was tightly coupled into the system, but other agencies were only loosely coupled to the police, to the extent that their links went through the social services department.

Analysis of the data on how respondents would contact other agencies also suggested important changes to how school nurses fitted into the system. At Time 1, school nurses were more tightly coupled into their parent agency than other workers. School nurses were more likely than other workers to refer first to their own managers, before making contact with others. This perhaps reflected an organisational culture which Hallett [1995a:81] also detected. By Time 2, however, school nurses, in the research location, had become more autonomous. They were, apparently, becoming more confident to think in terms of relating directly to other agencies, rather than depending on their own. In the first round of interviews, 15% of the possible responses given by nurses as to how they would contact other agencies suggested they would go to their own agency first. This had been most marked in their thoughts about contacting the social services department when 45% had given this type of reply in respect of David [10 ex 22] and 22% in the case of Tony [5 ex 23]. At the second survey, however, this proportion had fallen to 4% overall. Most of these again concerned the social services department but the numbers were much smaller, 6% in the case of David [1 ex 16] and 20% in the case of Sandra [3 ex 15]. This reflects a changed profile of the school nursing service. Nurses were acting more independently of their managers. This could represent increased 'professional' autonomy for them. As was seen in chapter 6, for example, they had developed a stronger qualification base.

The overall picture, then, was of a system in which expectations of participants had become clearer in a number of key areas such as local authority social services, health services and the police. The system has gradually become tighter around these. Some couplings have become much tighter. The link between the social services department and the police was one. This had effectively decoupled other agencies from the police at this juncture of the vignette scene. At the same time other couplings have eased as for example those of the school nurse to her own agency. For the most part, however, there was still scope for negotiation on how contact should be made, sufficient for the description of a loose coupling description to be applied.

Continuing contact with others

Once agencies have been drawn into situations, problems of working together will in part revolve around the extent to which they have shared beliefs about the nature of the contact they will have. Disappointed expectation here could be a cause of frustration and conflict. This section explores how far the strength of coupling at Time 1, as measured on the extent of agreement about what should happen, and compares the situation at Time 2 to look at the nature of any change.

Workers were asked first about the nature and formality of communication needed in each case. To do this, they selected from a list of options ranging from 'no contact' to a formal case or child protection conference. Nobody, at either time, thought that workers should operate in isolation. Sometimes, respondents gave a combination of choices, in which case the most structured or formalised is indicated in the table. The figures shown also represent definite choices only. It should perhaps be noted that some replies indicated a certain type of contact as a possibility, although this is not shown.

Table 9.1   Type of contact required (definite) - Tony   [T1]

	Contact between relevant people as necessary	A meeting of relevant people (Case discussion)	Case or Child Protection Conference
Soc Wkr (n=22)	12 55%	8 36%	2 9%
Head (n=25)	7 28%	13 52%	5 20%
EWO (n=23)	6 26%	8 34%	9 39%
S. Nurse (n=23)	4 17%	15 65%	4 17%

Table 9.2.   Type of contact required (definite) - David [T1]

	Contact between relevant people as necessary	A meeting of relevant people (Case discussion)	Case or Child Protection Conference
Soc Wkr (n=22)	4 18%	7 32%	11 50%
Head (n=25)	10 40%	8 32%	7 28%
EWO (n=23)	4 17%	1 4%	18 78%
S. Nurse (n=23)	2 9%	4 17%	17 74%

Table 9.3.   Type of contact required (definite) - David [T2]

	Contact between relevant people as necessary	A meeting of relevant people (Case discussion)	Case or Child Protection Conference
Soc Wkr (n=12*)	3 25%	2 17%	7 58%
Head (n=12*)	2 17%	7 60%	3 25%
EWO (n=9)		2 22%	7 78%
S. Nurse (n=16)		2 13%	14 88%

*2 social workers and 1 head did not make a definite choice

Table 9.4.   Type of contact required (definite) - Sandra [T2]

	Contact between relevant people as necessary	A meeting of relevant people (Case discussion)	Case or Child Protection Conference
Soc Wkr (n=14)	8 57%		6 43%
Head (n=12*)	1 8%	2 17%	9 75%
EWO (n=9)			9 100%
S. Nurse (n=16)		1 6%	15 94%

*1 head did not make a definite choice

The tables suggest a loosely coupled system where there was and continued to be considerable scope for variation in view.   No option represented a majority view for all workers, on any vignette.   The greatest areas of

agreement would be that there was no need for a case conference in the case of Tony and that some kind of meeting was needed on each occasion for David. There was, though no agreement on the particular course to follow. To what extent does the evidence indicate change in the balance of coupling over time? There was considerable consistency. In the case of David, for example, the relative balance of workers calling for a case conference or a child protection conference hardly changed over time. The head teachers stand out at both times, as a distinct group in not thinking one necessary. There was evidence of some tightening here, to the extent that the head teachers in the case of David had moved toward others with fewer of them thinking the situation could be dealt with by contact between individuals as necessary. The change, though, would again appear to be gradual rather than dramatic.

The expectations expressed in the case of Sandra, indicated a continued diversity. While the education welfare officers and school nurses were clear in anticipating a child protection conference, heads and particularly social workers did not necessarily do so. The social workers were most likely to think, initially, in terms of contacting others on an individual basis. They did not usually rule out a conference, though, seeing it as a later possibility. This may well reflect the recognition of their professional role in such situations, to carry out an initial investigation before further decisions on how to proceed were taken, including the decision on whether to hold a conference. For example, the social worker who replied

> Contact between the relevant people ... and at this stage until I'd actually established what was happening and knew a bit more about what was happening I wouldn't arrange a conference [sw 2, Sandra, T2].

Other respondents may well have made their decision on the basis that these investigations would produce cause for concern leading usually to a child protection conference.

Overall, then, the evidence of a tighter system making for clearer expectations about the type of contact required showed little change over time. There may have been indications of tightening, for example with the head teachers, but the change was at the margins.

Attendance at conferences and meetings

Where respondents had considered some form of meeting necessary, they were asked who should be at those meetings. The selection of people, who it was thought should attend conferences or meetings, reflected the choice of workers to be involved in the first place. There were definite signs of change. In terms of the number of attenders, there was a consistent pattern that, despite concerns at the size of meetings, on average more invitations were anticipated to conferences and meetings at Time 2 than had been the case at Time 1. All workers also saw more attenders at meeting concerning Sandra than any of the others. This did not, though, necessarily reflect a more tightly coupled system. There were variations in the pattern of nomination but the differences between workers remained and even increased.

Table 9.5. Average number of definite attenders at meetings (conferences and discussions)

	Social Workers	Head Teachers	Ed Welfare Officers	School Nurses
Tony (T1)	6.7	5.2	7.5	6.9
David (T1)	6.8	6.6	8.4	8.0
David (T2)	9.4	6.8	8.9	8.6
Sandra(T2)	9.9	6.8	9.0	8.6

The head teachers were consistent in naming fewer people to attend than other workers. This perhaps again reflects their lesser familiarity with the possibilities and protocols and the extent to which they were likely to favour less formalised

discussions rather than full conferences. However, the social workers had markedly changed their pattern of nomination. At Time 2 they named the most with their average having increased by nearly a half [48%] from the low for Tony to the high for Sandra. This change also registered strongly for David with the average number of nominations by social workers increasing by 38% compared with less than 10% for other workers with the heads showing very little movement at all. Even though everyone in the system had moved, some had moved a lot more than others, so that the looseness in the system remained or even increased.

Views on who should attend any meeting or conferences showed a considerable measure of agreement, around the core of who should be at conferences, which was consistent over time. The place of the social worker, for example, was assured once it was recognised that this stage had been reached. There was also consistent agreement that the head teacher should be there. The interviews also revealed a general desire, at both times, for the class teacher to be more involved but this was tempered by a recognition of the logistical difficulties facing schools in making this possible. Other choices showed changes reflected through the system. By Time 2, for example, it was the predominant expectation in all groups of workers [three quarters of the head teachers and around 90% of each other group] that parents would be at any meetings. Choices of other workers showed a general shift upwards in the number of choices, but with no clear implications for the balance of coupling in the system overall. Variation continued. For example, while social workers and school nurses thought the family doctor should attend child protection conferences, this was rarely recognised by the head teachers. Perhaps heads drew their list of potential attenders from those they had met on the occasions they had been to such meetings. The social workers indicated who they thought should be there, but as has been found in other studies [eg Birchall and Hallett 1995: 92; Hallett 1995a: 178; Birchall 1995: 125] indicated

218

that they thought it unlikely that GPs would attend.

Within this pattern, though, a number of important changes were identifiable which indicated that certain sets of agencies and workers had become more tightly coupled into the system and some couplings had become much more immediate. The school nursing service and the police force had become much more strongly recognised as part of the child protection system, in terms of expectation that they would be at a conference. It had reached 100% for social workers in their views of the police, although they had started from a relatively high base. Agreement that the police should participate increased among all categories of worker. It was most marked in the case of David but, although still a majority, was less sure in the case of Sandra. The critical issue for the social workers was whether or not the case got to the conference stage. Once it did, then all said the police should be there. For a minority of others in the education sphere, the idea that these were police matters was still not established, even at the conference stage.

Table 9.6.   Attenders at meetings - numbers who identify a conference as definitely needed who see police officer attending.

	soc wkr	head	ewo	S. nurse
Tony [T1]	1 ex 2 50%	2 ex 5 40%	2 ex 9 22%	0 ex 4 -
David [T1]	8 ex 11 73%	1 ex 7 14%	6 ex 18 33%	12 ex 17 71%
David [T2]	7 ex 7 100%	3 ex 3 100%	6 ex 7 85%	12 ex 14 86%
Sandra [T2]	6 ex 6 100%	5 ex 9 56%	5 ex 9 56%	14 ex 15 93%

In terms of views on the involvement of the school nurse at conferences, the social workers had again reached unanimity by Time 2. For them, the view

was of a tightly coupled system around these issues. This contrasts with their view at Time 1, when they predominantly agreed that there was no need for the school nurse to be there. With an overall pattern of greater receptivity to their inclusion, one of the possible sources of frustration for school nurses had eased. At Time 1, the school nurses had, almost without exception, thought it proper for them to be at meetings of any description. This view had not been shared by other workers. Now it was more often than not. Most importantly, it was by social workers in the department which would be responsible for convening any such meetings.

Table 9.7. Attenders at meetings - numbers who identify a conference as definitely needed who see school nurse attending

	soc wkr	head	ewo	S. nurse
Tony [T1]	0 ex 2 -	3 ex 5 60%	7 ex 9 78 %	4 ex 4 100%
David [T1]	4 ex 11 36%	0 ex 7 -	9 ex 18 50%	17 ex 17 100%
David [T2]	7 ex 7 100%	3 ex 3 100%	6 ex 7 86%	13 ex 14 93%
Sandra [T2]	5 ex 6 83%	5 ex 9 56%	7 ex 9 78 %	15 ex 15 100%

The research also shed light on other aspects of attendance at conferences which have been noted elsewhere. In particular, disagreement over the extent to which managers should attend conferences has been identified as an issue. There have been divergences of view, suggesting that the system has not been fixed at this point. This issue has been raised particularly with regard to nurse managers. Hallett [1995: 172-4], for example noted variation of practice between her research sites and observed that this was an issue that evoked comment. Some workers thought the nurse manager should not attend conferences but the main grade nurse should be accepted as competent to

represent the nursing agency. In the present study, the evidence was that the school nurses, themselves, consistently saw a place for their manager at conference, being even more sure by Time 2 - over two thirds in the case of Tony, over three quarters in the case of David at Time 1, over four in five in the repeated David scenario and in the case of Sandra. At Time 1, other workers did not acknowledge this. By Time 2, however, the social workers thought of nurse managers as much more tightly coupled into the system. They expected them to be at conference in a way they had not before. This can be illustrated by reference to the case of David, where at Time 1 36% [4 ex 11] of social workers thought the nurse manager should be there, in contrast to 100% [7 ex 7] at Time 2. Heads and education welfare officers usually failed to recognise the nurse manager, with the heads producing a nil return across all the vignettes. In this respect then the nurse manager is linked more tightly, as far as the social workers are concerned, but this does not necessarily reflect a tighter wider system.

This same dichotomy was shown over views on the presence of social services department managers. Head teachers again lagged behind other workers in naming such managers. At Time 1, only one head in eight suggesting a conference suggested a social work manager should be present. At Time 2, this had increased to a half. They, thus, came closer to the views of nurses and education welfare officers but still brought up the rear. This again reflects either their unfamiliarity with the local procedures or their expectation that social workers would have autonomy or decision making powers in such situations or the reality of practice in the conferences they had attended. In terms of strength of coupling, the pattern suggests that on this variable heads have been drawn in more tightly, but still not to the point of an agreed automatic response.

Commentary

The evidence indicates that there was evidence of movement and tightening around perceptions of the mechanics of working together. The pattern was not, however, clear cut. Certain elements had always been relatively distinct, such as the contact points for schools or social services departments. Even though there was scope for greater tightness in these areas, the changes over time seemed limited suggesting a slow or gradual change. So, for example, the views of head teachers were being drawn closer to those of others, but still showed signs of being more loosely tied in on a range of their views. Conversely, school nurses could be seen to be coming more strongly coupled into the wider system as they detached themselves from their earlier tight coupling into their parent sub-system. Other views showed changes in parts of the system but did not necessarily reflect alteration in the strength of coupling in the system overall.

There were, though some notable changes which recognised the social services department much more clearly at the hub of the system. By Time 2 views on the vignettes reflected a conceptualisation in terms of child protection, with which social services departments were concerned. Replies suggested an architecturally tighter system around the social services department, with communications to a number of agencies such as the police or health workers routed through it. Increasingly the social services department was seen as a central body to make links rather than being just one of a number that could be activated.

Looking in more detail at the nature of meetings and who should be at them, confirmed that, at this level of analysis, the changes which had taken place were slow and gradual. The head teachers again were shown to continue to pursue a different line to the others. They were, though, moving towards the general view, for example on the need for meetings. Ideas on who should

participate in meetings about the children described in the vignettes showed that there was movement in the system, with for example increased numbers of attenders identified. However, because of the differential rates at which groups of respondents had responded to this movement, the differences between them remained as great as ever indicating that the system overall was no more tightly coupled than it had been before.

There always had been general agreement about the presence of certain workers at conferences, reflecting tighter coupling around this core. This was so in the choice of the social worker and the head teacher to be there, for example. There was also change. Certain workers had, by Time 2, become recognised as part of the system. The police were seen to be more tightly coupled in. This was particularly the case as far as the social workers were concerned. Those in education still seemed less sure in the case of Sandra. Other workers were recognised more strongly by some, but with no change in the views of others. The school nurse came to be recognised as part of the system by the social workers at Time 2, in contrast to Time 1, but this was not reflected in the views of other workers. The same pattern was found in respect of her manager. Nurses were more tightly coupled in parts of the system, but continued to be loosely coupled elsewhere.

The overall picture is confirmed as one of shifting patterns of expectation, albeit contained within a general framework of agreement. Again some couplings have tightened and some responses become more predictable, but ample scope for negotiation and interpretation still appears to remain and some differences still persist. Changes to the system overall were again gradual, rather than dramatic.

Chapter 10

WORKING WITH OTHERS -
EXPLANATIONS AND UNDERSTANDINGS

So far, the data presented has shown a number of changes and some consistencies in the decision making of workers, with evidence of gradual tightening in parts of the system. The analysis has focused on the structural and mechanical aspects of the system. This chapter explores conceptual components. Respondents were asked for explanations of why they thought particular agencies or workers should be involved. The discussion considers a number of questions based on their answers. In what ways had views changed over time? Do these views reflect different understandings and changing interpretations by respondents of their working world? Would any changes be sufficient to indicate a change in culture? Would there be greater agreement over time, suggesting the system had become more tightly coupled? Exploring these issues involves the analysis of answers to open ended questions which asked respondents why they thought particular agencies should be involved, what they thought the worker with the major role brought to the situation that other workers could not and what respondents thought they, themselves, could offer in each situation. The answers given by those taking part in the survey have been grouped into themes, derived from the answers given. These themes are concerned with ideas that are about the

- *domain* of a particular agency;
- relationship of the agency to the *child and family*;
- role of agencies as linkages or in *co-ordination*;
- handling of *information*;
- relevance of *procedures*.

The analysis incorporates accounts offered where agencies were suggested as possible players or maybe as alternatives to others, in addition to those where

definite involvement was envisaged. The agencies looked at in detail are those associated with the workers who were interviewed. The discussion, therefore, covers schools, the education welfare service, health services with which the school nurse might be associated, including family as well as school health services, and social services departments. In addition because of their increasing policy profile views on the police are also examined.

Domain issues

There was considerable consistency, over time, in the nature of explanations given by respondents which indicated that there were particular issues or problems which would fall fairly automatically into the domain of particular agencies. There were also some changes which reflected a changing focus, although these were not always consistent.

Schools

The head teachers were most confident and consistent about their role, and that of the school, on both occasions when they were dealing with David. They stressed the role of the school in working with the boy because of the impact he and his circumstances had on the school

> If the child behaves that way in school we need to put a lot of work in to help contain him, protect the other children ... need regular discussions to decide the respective roles of head and class teacher deciding how to deal with him - for example- some respond to responsibility, trying to channel the aggression. We often spend two to three hours after school discussing a child. We do a lot of one to one counselling. We've all done courses. [head 11, David, T1].

This need to control behaviour problems was again evident at Time 2, expressed most graphically by the head who explained

> ... the teacher would come to you with ... tearing their hair out and saying well I can't deal with this boy there's problem here and he's affecting the work of the class and I don't know what to do with him so you'd obviously ... you don't turn your back on him and say go away and don't be stupid you've got to do something otherwise it's going to explode and cause a

bigger situation in school [head 11, David, T2].

Perhaps the pressures which led the heads to carve out an active role for themselves and the school were summed up by the head who commented

> Unless you exclude this lad you've got to be positive - he is your responsibility [head 3, David, T1].

At Time 1, it had been chiefly the head teachers, and to a lesser extent the school nurses, who had recognised that the school was involved because that is where the problems with David were occurring. By Time 2, there was evidence that the views of other workers were firming up around this perspective. An increased proportion of all types of worker incorporated this consideration in their reply. It was the most frequent explanation for the school being involved given by school nurses and education welfare officers as well as by heads. As one education welfare officer observed

> Very often similar cases come direct to me because I drop in there and so with it being a school I'm involved and the school's involved where this comes out of it ... especially now as he's aged 11 he's got a few years and he's going to have problems at school [EWO 1, David, T2]

or a school nurse

> Because he is going to be a problem to them with his aggression and bullying ... maybe he is stealing in school. They would be aware of the bruising and would report it to the school nurse or the school medical officer.
>
> [sn 10, David T2].

However, social workers were again the least likely to talk in these terms. Of course the orientation of all but the social workers would be affected by the fact that their posts were specifically school linked, with a brief to respond to concerns arising from schools. These organisational linkages had always been present and it seemed that for these workers there was in addition, by Time 2, a greater readiness to recognise the role of the school. For some, then, the system was more tightly defined around these school based issues. However, this was not so for the social workers who continued to recognise it less.

Judged by the responses, the claim which head teachers held for active intervention rested on the behavioural aspects of the situation. In the cases of Tony and Sandra the heads did not lay claim to issues which may have fallen into their domain, such as lack of educational progress or lack of participation in class, even if other workers were prepared to do so. If the presence of the child in school in these cases had relevance, it was as a part of the background rather than because of the opportunities presented for positive intervention.

Health Agencies

The vignettes also raised issues about the need for medical intervention, which were seen by respondents as putting the situations described into the domain of health workers. Once respondents had identified health agencies as having a role, explanations which referred to medical checks or interventions were consistent. Variations reflected different orientations of workers and varying approaches to situations as much as changes over time. So, social workers consistently showed a community based orientation by putting these issues, when they recognised them, in the court of the family medical practice. Head teachers consistently turned to the school linked health services. The school nurses changed their approach with the vignette, being more likely to think in terms of the GP when sexual concerns were apparent.

In the case of Tony there was a spread of views about the need for medical intervention. Of the head teachers, social workers and education welfare officers that mentioned health agencies, less that half mentioned specifically medical aspects. This contrasted with the views of the school nurses where two thirds [15 ex 23, 65%] justified the involvement of the school medical service in such terms - for example

> If the child is pale and thin we should be looking to see if there are any other physical problems. He may have some physical illness. [sn 6, Tony, T1].

This disparity was still there in the case of David at Time 1. It was less extreme because the enthusiasm of the school nurses to refer to medical aspects had waned to two fifths [9 ex 22, 41%], although the case could still be made

> Need to have him referred for a school medical to make sure he's quite well ... no hearing loss .... it could be part of the problem with his aggressiveness. To check about the discipline ... about the bruising. [sn 11 David T1].

However, still only one social worker thought in these terms.

By Time 2, there were signs that views were changing. Heads and education welfare officers continued at similar low levels in suggesting this type of explanation. However, the views of social workers were coming into line with those of the school nurses, with around half of each group who named health agencies giving this type of explanation. At first glance, then, there was evidence of the system tightening. There remained, though, an important difference of orientation. The social workers looked to the family medical practice [6 ex 12, 50%]:

> ... it would mean that if we needed to have a medical on this child given that it's considerable bruising it's preferable really that we involve the family practitioner. There are times when that isn't always possible because you don't want to jeopardise their relationship with the family .... good practice would be that you go there first [sw 3 David T2].

Those school nurses who referred to the family practice were as likely to give this sort of explanation but they were less likely to identify the family medical practice at all. They focused their replies on the school health services which they had usually named, perhaps because this was where they saw their own contribution. In this context they gave this type of reply in similar proportion [7 ex 13, 54%] to that of the social workers who had referred to the family medical practice. There was, then tighter coupling between the social workers and the school nurses on the recognition of a particular need but not on the route to meeting that need.

228

The picture changed again, though, in the case of Sandra. The head teachers who had been low scorers on the other vignettes became those most concerned about medical procedures. Usually they allocated this role to the school medical service. Only one suggested this was something for the family medical practice, compared to six of the eight [75%] who named the school medical service , for example

> Yes well I would want to involve the school medical service certainly at the appropriate point because I think that the child obviously has to be physically examined at some point ... in the course of a normal medical ... albeit in the course of a normal medical but certainly it needs to be seen [Head 7, Sandra, T2]

or

> Well this is physical abu ... well alleged physical abuse until the child has had a medical as such it might just be that she *could* be making it up [Head 11, Sandra, T2 - original emphasis].

However, although the head teachers now saw a need for medical intervention, the school nurses and social workers who had done so in the case of David now rarely did. If they did, then, even the school nurse who had in the past thought in terms of the school medical service now preferred the family medical practice. Usually they thought it preferable to use this agency in the interests of the child, a view summed up by one in the following terms -

> I was thinking from the medical point of view if she did need a medical at any point it would be more comfortable for her [sn 16, Sandra, T2].

The shifting patterns of choices suggest that coupling around medical concerns was loose and remained so. The balance of views changed according to the vignette. There was greater agreement, suggestive of increased tightness of coupling, between the social workers and school nurses, over time, in the case of David but the overall pattern remained one of diversity. New lines of disagreement appeared in the case of Sandra. Concern about the sexual nature of possible abuse had more of an effect on the head teachers but was less potent for other workers, so rather than tightening, the system was loosened out

in different directions.

Social services departments

Explanations of the involvement of social services showed signs over time of a sharper focus, suggesting tighter coupling. At Time 1, many of the answers to the question of why the department should be involved were phrased in very general terms, doing little more than stating the situation fell within the job description of a social worker or stating a problem as sufficient explanation in itself, for example

> because it's a social problem [ewo 19, Tony, T1]

or

> I don't know ... because it seems to be the sort of case they are normally involved with. I would refer to them to see if they were involved [sn 6, David, T1].

For social worker respondents the explanation might have an air of inevitability

> Because there's a child who's being bruised and has started to steal so he will come to the attention of social services sooner or later anyway [sw 17, David, T1].

Perhaps these answers reflect a general perception that when situations, for whatever reason, cross critical thresholds of concern or anxiety responsibility gets passed to the social services department.

Answers which included the suggestion that social services should be involved because the situations presented the type of issue with which they dealt continued to be given by a majority of respondents at Time 2. There was a difference, though, in that in the later interviews, there was a stronger focus on the child abuse issues. This was true for both David and Sandra, for example

> because they have responsibility for child abuse in this particular area [sn 6, David, T2]

or

> Because if there is abuse they've got to be involved. We've not established actually that there is abuse, but if there is, at the present moment we haven't established there is any abuse but if there was they would have to be involved [ewo 4, Sandra, T2].

Within these replies, another trend was also discernible, particularly in the answers about David at Time 2. Although workers had generally come to focus much more on the child abuse issues, the majority of the social workers used the label *child protection*

> Well the social services because it's quite clearly a child protection referral ... there's an allegation first of all that the child's left alone ... and there's also an allegation that in the past he's been injured by his parents on more than one occasion [sw 7, David, T2].

While others acknowledged that it was appropriate for social services departments to be involved and responsible, the social workers, by classifying it as child protection, claimed it as their territory. The system was tightening up around the issue of abuse but others lagged behind the social workers in focusing on child protection.

Police

The key issues in terms of how the vignettes raised matters in the police domain were found in the case of David. Few respondents had picked out the police as having a role in the case of Tony. Where they did, the general view seemed to be that it was a situation involving general policing and checking rather than a cause for particular intervention. Typical would be the suggestion

> I would make them aware he is sometimes left alone. I would relate to the beat bobby ... could they keep an eye for him being around [ewo 8, Tony T1].

However, in the case of David it was possible to identify different strands in the arguments put forward. There were those who identified the offences committed by the child and those who identified elements relating to the welfare of the child [see Tables 10.1 and 10.2]. At Time 1, most social workers referred to the

discipline, bruising and possible abuse and under half to the stealing but the picture was reversed for all other categories of respondent who were more likely to identify the stealing as a relevant factor [the figures for these welfare aspects in the table also include those that mentioned the procedural aspects of possible non- accidental injury [NAI] which would involve the police]. A head teacher explained

> If there was stealing from outside ... a healthy warning. Parents in the past have asked us to get the constable to scare the lad [Head 9, David, T1]

while a school nurse who referred to both sets of issues reasoned

> Because of the stealing and if he is physically punished it's not necessarily bad for the parents to know the police are around [sn 14, David, T1].

and an education welfare officer argued

> Because he has now started stealing. He might have been caught and come to their attention [ewo 14, David, T1].

Although they were often focused on the stealing, replies were divided between those that perhaps saw it as providing an entrée or a source of information in terms of the situation generally and those like the head teacher quoted above who looked to the authority of the police, focused on the stealing behaviour.

Table 10.1
Grounds for involving the police by job of respondent, David - Time 1

	Stealing		Abuse/ discipline/ bruising/ procedures.		Stealing *and* abuse/ discipline etc		None of the foregoing mentioned	
Soc Wkr n = 14	4	29%	6	43%	2	14%	2	14%
Head n = 7	5	71%	0	0%	1	14%	1	14%
EWO n = 13	7	54%	3	23%	2	15%	1	8%
Sch Nurse n = 17	10	59%	0	0%	6	35%	1	6%
Total n = 51	26	51%	9	18%	11	22%	5	10%

[n = numbers having mentioned police as having either definite or possible involvement]

Table 10.2.
Grounds for involving the police by job of respondent, David - Time 2

	Stealing		Abuse/ discipline/ bruising/ procedures.		Stealing *and* abuse/ discipline etc		None of the foregoing mentioned	
Soc Wkr n = 13			9	69%	3	23%	1	8%
Head n = 7	1	14%	4	57%	1	14%	1	14%
EWO n = 7	1	14%	5	71%			1	14%
Sch Nurse n = 12	5	42%	2	17%	3	25%	2	17%
Total n = 39	7	18%	20	51%	7	18%	5	13%

[n = numbers having mentioned police as having either definite or possible involvement]

233

By Time 2, there was increased recognition particularly from the social workers that the police had a part to play. The pattern of responses also showed a much tighter focus on the welfare issues with significant reduction in references to the stealing. Answers also occasionally evidenced an aspect not clear at Time 1 and that was the notion that child protection was a law enforcement as well as a welfare issue, for example the police should be involved because

> Criminal offences might have been committed - and by that I don't mean the stealing I mean the .. fact that this kid's been left alone and allegedly been injured [sw 7, David, T2].

Within this picture of a system, generally more tightly coupled through its views on the police role, the school nurses provided a contrast with other workers in that the majority of them still referred to the stealing - more than double the rate for any other worker. Scope for further tightening remained.

Perhaps because there were fewer variables in Sandra's situation, there was less scope for differentiating the replies given. To the extent that there was variation the school nurses again could be distinguished insofar as they were more likely [6 ex 10, 60%] to highlight the criminal dimension or refer to the possibility of prosecution, for example

> because legally they can arrest this person for abusing [sn 6, Sandra, T2].

This does, however, perhaps suggest that they too were being drawn into a more tightly coupled system in which offences against the child increasingly took precedence over offences by the child.

The education welfare service

For the education welfare service, views were consistent in not identifying issues which would suggest any of these situations fell naturally into their domain. On this score, they were and remained loosely coupled to the system, responding to the situations presented. There was some movement which suggested a sharpening up of focus but the impact was very marginal.

It was mostly head teachers and education welfare officers who saw a role for the service. At Time 1, though, there were a number who seemed vague about the role of the service. There was at times a feeling that the service ought to be involved, rather than a clear expectation of a particular contribution. This was made explicit by one head who when asked about the role of the education welfare service, which he had suggested should have a part to play, replied:

> I can't answer ... I hope they would tell me... I haven't got a clue what they do. I know they are available to help heads and children ... You find out by experience ... pick it up as you go along. It would be useful if the education welfare service came and told us what they did. [head 1. David T1]

By Time 2, understanding of the role of the education welfare service had improved to the extent that none of the head teachers claimed to be in doubt as to what they did. Sometimes, however, their explanations of the part to be played were little elaborated for example

> The welfare service because it's the welfare service ... in the nature of the body determines that they would be involved [head 10 David T2].

The chances of the education welfare service becoming more tightly coupled into the child welfare system are remote when even those who are their primary sponsors are vague about what they do. On this score, the service seems likely to remain loosely coupled.

The most consistency emerged in the case of Sandra when a number of workers picked up on the issue of erratic attendance. For the heads this might suggest education welfare would already have become involved:

> The attendance is the other situation, of course, and if it's become seriously erratic then obviously education welfare would have been involved [Head 6 Sandra T2].

For the nurses explanations were even more limited

> Well because of her school attendance record [sn 9 Sandra, T2]

while the EWOs might pursue the implications a little further, for example

The fact that her attendance is erratic [indistinct] would suggest that she knows the family [EWO 3, Sandra, T2].

Although these issues were recognised occasionally by other workers they were not mentioned by the social workers. For them, attendance worries were secondary to concerns about the investigation of the child protection.

Summary

Overall, the evidence on domain recognition suggests a gradual tightening. The change was however, subtle rather than stark. There was a general recognition, particularly around views on the role of social services departments and the police, of the need to respond to child abuse. At the same time there were signs of increased awareness of the extent to which situations fell into the domain of others, for example recognition of the impact of David's behaviour on the school, or the recognition by social workers of the relevance of health concerns. There remained, though, evidence of looseness. The education welfare service continued to have a vague profile, so that it was not pulled in. Even where some recognised a clear hook for involvement through attendance issues, the social workers, with their focus on a child protection investigation, did not acknowledge it. Head teachers had moved their position on health issues but continued to be distinct from others in their orientation. Although everybody moved towards a recognition of concerns about child abuse, the social workers by focusing on child protection moved differently to the others and so maintained some differentiation.

Child and family concerns

This theme concerns the need for agencies or workers to intervene in a supportive, therapeutic or problem solving way with the family and child. This need was recognised, with a majority of respondents at some point offering an explanation that identified this approach. There was not necessarily clear agreement on the extent to which working with the child and family was the

responsibility of particular agencies or workers. Although the patterns of expectation were in some cases different at Time 2, reflecting changes in the system, there was little greater shared clarity of perception suggesting a continued looseness of coupling.

Schools

There were differences of perception between groups of workers on the extent to which the school would become involved in working with the family. In the case of Tony, heads saw the role of the school and themselves extending beyond the school precincts to dealing with the family. In this they were supported by the social workers. So, for example heads explained

> I would talk to the parent, see if there is any way we can help.
> [Head 1, Tony, T1]

or indicating the skills to be used

> To talk to the mum if possible - if she will talk ... I suppose it's a counselling role isn't it [Head 9, Tony, T1]

while a social worker could explain

> It's not clear who gave us this information. If the school hadn't referred they offer at least a monitoring service. I would expect the school to be concerned and want to do more in looking at what can be done. They would be doing a lot of back up work with the family [sw 19, Tony, T1].

The school nurses and education welfare officers did not, however, refer to this aspect of the school's role. For them, the focus was much more on the child himself and the school was involved with his needs because he was there to be monitored and cared for.

When it came to David, however, the head teachers were even more isolated. The social workers joined the education welfare officers and school nurses as predominantly seeing family work as outside the sphere of the head teacher. The head teachers, though, argued that the behavioural problems suggested they should contact the family, for example

> He's an aggressive boy ... there will be playground problems and going to and from school and in the classroom. There will be difficulties with relations with other children I would have the parents in to talk about it. [Head 18, David, T1].

There was no change at Time 2. Heads continued in similar proportions to reckon on contacting the parents as a consequence of the behavioural issues and not the bruising. For them, this was one of the first levels of intervention

> Well obviously the school would have been involved because the child was aggressive to others and was bullying other children ... that would have led us initially to have made contact with parents ... we do have a policy in school that allows us to go through stages for children who are anti ... display anti social behaviour [head 5, David, T2].

Other agencies, though, again failed to recognise this role.

Virtually all disagreement had disappeared in the case of Sandra. Only one head teacher would have contacted the family.

Clearly the nature of the problem is a factor in whether or not the school is seen to have a role in dealing with the family. Social workers, for example recognised a role for the school in the case of Tony but not elsewhere. The heads recognised a contribution for themselves in the case of David where others did not. In this case the divide between the heads and others was consistent over time. The balance of coupling was unchanged. Coupling became tight, however, around the case of Sandra where there was near unanimity that this was not an issue where the school would involve itself with the family. It can be concluded that different ways of envisaging situations were at work. For example, in the case of David head teachers consistently recognised the behaviour problems. They therefore explored a variety of avenues including contact with the parents to resolve these. Other workers construed the situation differently, putting emphasis on other problems such as the bruising and stealing and believed these outstripped the remit of the school to work with

the family. For them a critical threshold had been passed. In the case of Sandra, head teachers also believed this threshold to have been crossed.

Health Agencies

The picture regarding the extent to which health agencies and workers would work with the child and family also showed little sign of change. There was a consistent reluctance to see the health services in this type of role. This reluctance was shared by the school nurses at Time 1, when only a couple picked it out as an agency task in each case. By Time 2, though, they had become bolder. Half of those naming the school health service gave this type of reply in the case of Sandra [4 ex 8] and a quarter in the case of David [3 ex 13]. This movement was reinforced by head teachers, who also started to see a role for the school health services in the case of Sandra [3 ex 9, 33%]. Conversely, the education welfare officers and social workers did not change their position at all.

Exploring in greater depth possible ways in which the school nurses thought they might contribute to dealing with the situation revealed greater potential for involvement than suggested by their accounts of agency roles. The majority consistently recognised that there was scope for inter-personal work. However, the target of their intervention varied with the vignette. In the case of Tony the majority saw the mother as a person they could work with. Only a quarter focused on the support they could give the child. Conversely in all the other vignettes they were reluctant to get involved with the wider family but preferred instead to focus on the child.

Table 10.3. School nurses' focus on their own contribution in each vignette [columns are not mutually exclusive]				
	Work with parent/family		Work with child	
Tony Time 1 [n=23]	18	78%	6	26%
David Time 1 [n=23]	6	26%	15	65%
David Time 2 [n=16]	2	13%	10	63%
Sandra Time 2 [n=16]	2	13%	14	88%

So in the case of Tony a nurse might explain she would

> visit the mother very early ... try to get her to open up and assess the situation... let her know someone is trying to help. The family is living in a hovel ... she has not got family and is probably lonely .. probably no friends. she would possibly welcome someone who could help ... talk on a simple woman to woman basis. [sn 14, Tony, Time 1]

while the focus on David changed

> I could do some counselling with the child at school and generally keep an eye on him to see his health doesn't deteriorate [SN 20, David , T1]

to be repeated at Time 2

> My part would be to David when he is in School ... as if I was involved my normal role would be to observe and support and I see myself as a supporter and someone who could encourage David. And just make observations of his general care and try to work up ... have a relationship with him. [SN 4, David, T2].

A similar role was envisaged for Sandra

> I think we could be there as ... I mean obviously we can monitor the child's physical development and we also can be there in a capacity of because we perhaps know the child she will feel she can talk to us so maybe perhaps counselling her in a small way. Also to support possibly her friend and friends in the school [SN 3, Sandra, T2].

The role of the school nurse is seen to be a limited one in terms of working in an ongoing way with children and their families. There had been little change

in this, although some indication of increased confidence among the nurses and head teachers. For the nurse, however, the extent to which they would focus on work with the child or work with the family varies with the situation.

Social services departments

When explaining why the social services department should be involved, the idea of working with the child and family was one of the most frequent responses because of the extent to which it was mentioned by all types of worker. However, the pattern of responses again suggested continued looseness of coupling. There were no clear patterns of agreement between types of workers and there were inconsistent movements between views over time. The complexities of pattern and movement are shown in Table 10.4.

Table 10.4. Those suggesting the role of the social services department would be to work with the family or child as a % of those naming the social services department

	Soc Wkr	Head	EWO	S. Nurse
Tony T1,	6 ex 21 29%	4 ex 19 21%	10 ex 22 45%	10 ex 23 43%
David T1	9 ex 22 41%	6 ex 15 40%	5 ex 20 25%	5 ex 23 22%
David T2	3 ex 14 21%	3 ex 9 33%	3 ex 9 33%	7 ex 16 44%
Sandra T2	3 ex 13 23%	3 ex 11 27%	2 ex 9 22%	0 ex 15 0%

At Time 1, working with the family or child was emphasised by the education welfare officers and school nurses in the case of Tony, more than by the heads and social workers. However, at the same time the pattern was reversed in the case of David. By Time 2, the enthusiasm of social workers to explain their

contribution in terms of general family support or therapy in the case of David had declined. Conversely that of school nurses had increased. However, while at Time 2 the social workers were consistent across the vignettes the school nurses were not. They did not see the social workers as 'family' workers at all in the case of Sandra.

The variation may be exaggerated by small numbers, but the picture here is of a moving but unpredictable scene. Social workers could be drifting away from models of social work based on ideas of working with families. School nurses may be drawn to this as a role in some circumstances but clearly not in others. The increased emphasis on classifying cases as child protection could be pushing accounts which talk of family involvement into the background in some circumstances, but not sufficiently strongly to produce a commonly recognised system at this point.

The education welfare service

There was consistent agreement, for the most part, that the education welfare service would not be expected to be involved with the family. Expectation of this role from others was mostly limited to the small number of head teachers who, at Time 1, identified the education welfare service and the education welfare officer as playing the major role. The education welfare officers were in line with the others in their reluctance to identify this as part of their work when discussing how their agency would be involved. When asked about their personal contribution, though, they often elaborated in terms of working with the family - about two thirds doing so on each vignette at both times. Responses varied from the modest to the more ambitious. For example

> Somebody who is available at any time to see the home , see mum ... a shoulder to cry on. Someone who could establish a relationship if possible with the child ... that would be difficult. EWOs are always available and tend to stay on in an area a long time which social workers and others don't. With a little bit of luck I would have known about this

242

child long before and known mum ...[EWO 3, Tony, T1]

or

Only befriending - but in a friendly but firm way talk to the parents and try to befriend the 11 year old boy [EWO 1 David T1]

or

I would work very much alongside the lines I've just described the social worker working.. supporting the family, supporting the child within that family and looking at perhaps why he's aggressive ..what leads to the aggression ... and talking to mum very similarly along the lines of the social worker about how she can cope with him without feeling the need to actually injure him. The difference being that the social worker if it's considerable bruising and its an NAI could well be on the Child Protection Register which gives the social worker statutory involvement on him. That's the difference. [EWO 3, David, T2]

or

Again I'd say counselling but again that depends because you've got a female here that's got a bad thing with a male but then again you've got to start building up trust in males again. And yes, I'd still say counselling ... counselling and befriending the family and that's all the family ... including if it is abuse the abuser [EWO 1 Sandra , Time 2].

The system here, then, was fairly firmly set. Education welfare was not recognised for its contribution to families. There was though a tension insofar as education welfare officers could see potential to operate in this way, although this was suppressed until they were asked to elaborate on what they thought they personally could offer.

Summary

Perceptions of whether different agencies and workers would deal with the family or child showed consistent agreement that this was an important type of activity. However, the extent to which this activity was locked into place within the welfare system was variable. The picture was clear cut, for example, in that it was agreed this was not a place for schools in the case of Sandra. It was, though, seen differently in the case of David where the heads disagreed with other workers. This

243

variation persisted over time. Yet another picture was discernible in the case of Tony where a coalition of heads and social workers took a different view to education welfare officers and school nurses. In the case of the health agencies, there was general agreement that family concerns fell outside their remit. Signs of increased possibilities of involvement by school nurses brought no response from social workers and education welfare officers. Looseness in the system was illustrated, in what looked like haphazard fashion, by the extent to which social workers were expected to deal with the family. Most consistent were views on the role of the education welfare service where there was steady expectation of limited involvement. As such it was peripheral to the wider system.

This lack of focus and the difficulty of identifying consistent shifts over time indicates that, on this measure, the system was and continued to be loosely coupled. Shifting patterns of perception reflect a system with ease in the seams, allowing it to stretch or contract in a variety of ways.

Co-ordination
This theme reflects the recognition that all the agencies under consideration had the potential to forge links or act as channels of communication between others. At points, issues of liaison or co-ordination were seen to be important aspects of the role of agencies. In a tightly coupled system, it would be expected that on this activity, above others, there would be agreement on responsibility for carrying it out. The situation in practice, though, was not so straightforward.

Schools
Although heads often saw the school as an important contact point or co-ordinator, this was not recognised by other workers. This pattern was consistent over time, suggesting that any change to the system had not had an impact on this aspect. The changing nature of the presenting problem did, though, have

a bearing. In the case of Tony, when over a third of heads [8 ex 23] thought of the school in this way, some saw the school as central

> The correlation point ... the agency that is picking up the difficulties and will report. There is a close relationship between the school and other agencies which will report back to the school when they have assessed. I see the school as the focal point of all this. [Head 14, Tony, T1].

Heads also saw a linking role for the school in the case of David at Time 1 [6 ex 23, 26%]. Their views were usually focused on the educational or behavioural aspects of the situation, for example

> If we are not successful in the way we discipline him we've got to look further for help in containing this child ... for example the school psychological service etc. [head 17, David T1].

Only one head explicitly mentioned the bruising in this context. However, by Time 2, while the heads continued to be the only workers who identified a co-ordinating role for the school, there had been a shift in focus. They were at least as likely to suggest co-ordinating activities [4 ex 10, 40%], but now the bruising was more prominent as an issue in their discourse

> If we found signs of bruising we would obviously check with the register straight away ... we would get in touch with social services immediately and say we had seen bruising which we considered non accidental injury ... [head 2, David, T2].

or

> once you're sure of your facts and you've checked these things out by going down into the classroom and seeing there is this aggressive boy and he does seem to be bruised etc well then it's a case of fetching in the other people [head 11, David, T2].

There was a marked contrast in the case of Sandra. When discussing the role of the school in this case, head teachers did not mention this linking or liaison role at all. In this, they fell into line with the accounts of other types of worker. They did not talk of contacting other agencies or workers. In their discourse it was, however, usually implicit that this would have been done. Perhaps the nature of the case here is one that they see much more clearly as falling outside

their remit. In the cases of David and Tony, they see co-ordination as a task for schools because they accept a continuing role. In the case of Sandra, they simply handed the problem over to somebody else. The case of Sandra crosses a critical threshold, where the system becomes tightly coupled around agreement that certain agencies will not be involved. The other cases do not. The motivation for heads to see a need to co-ordinate had changed over time, from concern about behaviour to recognition of abuse of the child. There was, though, no sign of increased agreement over time with other workers which would be indicative of tighter coupling in the system as a whole. The agreement, indicating tight coupling, was, however, present in the case of Sandra when nobody saw the school as the co-ordinating hub.

Health agencies

The pattern of views, on the extent to which health agencies could co-ordinate provision, presented a similar picture. There was no general recognition of this role. Although changes in perception were detected, they indicated a changing balance within the system, rather than tighter coupling. It was primarily the school nurses who thought that the school medical services could link, liaise and co-ordinate concern. At Time 1, this was most marked in the case of Tony, when a third of those naming the school medical service gave it this role. They were supported in that case by a quarter of the head teachers. However, social workers and education welfare officers did not take this view. The divergence of opinion may well reflect the position of the various actors in the welfare network. The education welfare officers and social workers would have acted as brokers having direct contact with other agencies and so needed no intermediaries. Conversely, for a head teacher the school medical service could be seen, at this time, as having staff:

> who will alert the social services department and the health visitor as necessary [Head 16, Tony, T1].

Disagreement, at Time 1, disappeared when David was considered. A handful

of nurses [3 ex 22] still pursued this role for the school medical service but the remainder were in line with others in not doing so . At that time, the case crossed the critical threshold where this responsibility was thought of as belonging to others. However, by Time 2 the picture had changed. The school nurses now claimed a linking role for the school medical service in the case of David when they had not before. Around a third of those naming the school medical service as being involved, a similar proportion to that for Tony at Time 1, did so. If this reflected increased confidence by school nurses in the role of the health services it evaporated in the case of Sandra. Then only one nurse spoke in these terms.

On this score, there was some evidence of movement within the system. There was nothing to indicate it has become tighter or looser. The overall balance remained similar. On both occasions, one of the vignettes saw the nurses claiming a role others did not acknowledge. On both occasions, there was agreement that one case was outside the limits of the health services to co-ordinate. What had changed was the views of nurses of what could be claimed.

Social services departments
The extent to which respondents saw the social services department as fulfilling a co-ordinating role again varied across the vignettes. The pattern of expectation changed over time. The extent of agreement did not, however, change. Patterns of coupling again can be said to have changed but not to have consistently tightened or loosened.

	Tony, T1	David, T1	David, T2	Sandra, T2
Table 10.5. Workers attributing a co-ordinating or liaising role to the social services department as a proportion of those seeing that department as having a part to play.				
soc wkrs	8 ex 21, 38%	6 ex 22, 27%	3 ex 14, 21%	2 ex 13, 15%
heads	3 ex 19, 16%	3 ex 15, 20%	4 ex 9, 44%	6 ex 11, 55%
ewos	2 ex 22, 9%	1 ex 20, 5%	1 ex 9, 11%	0 ex 9, -
s. nurses	2 ex 23, 9%	2 ex 23, 9%	0 ex 16, -	4 ex 15, 27%

At Time 1, the social workers were most likely to attribute a co-ordinating role to their department, particularly in the case of Tony. The head teachers were next most likely to expect this. By Time 2, the head teachers gave this a higher profile, particularly in the case of Sandra when they were twice as likely as any other worker to suggest this. So in the case of Tony a social worker could argue:

> As a co-ordinating function ... we seem to be in that role ... we want to check on all the services on any input they give   [sw 22, Tony, T1]

while in the case of Sandra it was a head teacher arguing:

> It's to do with co-ordination really... it's to do with co-ordination and overview ... of the relevant bodies that should look to be involved in this case... I know you're looking very much at co-ordination and perhaps that's sowed the seed in my mind but it seems to me when we're looking at these lists that's actually what we're looking for anyway ... the role of co-ordination ... social services is the one that I look to for that kind of co-ordination [head 7, Sandra, T2].

Education welfare officers and school nurse were far less likely to think in these terms, although the school nurses present a stark contrast at Time 2 in not talking in terms of the social services department co-ordinating services for

David, but moving to that position in regard to Sandra. The education welfare officers, in contrast, did not identify this aspect at all in the case of Sandra. The evidence suggests that the system continued to be loosely coupled, allowing for a variety of interpretations. It had changed, and maybe for the head teachers the social services department had become more significant in this respect, but there had been no tightening overall.

The education welfare service
Co-ordination and linking with other agencies was something which education welfare officers wanted to do, but this desire was not usually reciprocated by others. To the extent that the child welfare system tightened up, the effect was to reduce support for the education welfare officer in this role. At Time 1, education welfare officers were confident that this was a role they anticipated their service playing. Two thirds of them claimed this role in the case of Tony[14 ex 21, 67%]. They received support in this from half of the head teachers [9 ex 19, 47%], some of whom put great faith in them:

> The officer here is extremely good ... he works in a gentle way. People are used to seeing him around. Parents and other agencies talk to him. He has immediate contact with other services ... educational psychologist or social services department ... A link man I can really trust. [Head 15, T1].

Similar ideas were advanced in the case of David at Time 1, although with less certainty [10 ex 22 ewos, 45%; 3 ex 12 heads, 25%].

By Time 2, the education welfare officers had become even more isolated in their view. They again carved out a linking role for themselves in the case of David [6 ex 9, 67%], sometimes with great confidence

> I see the education welfare service as the main service involved because they would deal with both aspects of this young man's problems. They would be involved in the school in the aggressive behaviour and the fact that he bullies other children. They would also be involved with the social services and the parents and the fact that he's being left at home during

the evenings and also the fact that he's [pause] both the school and the social services with the physical discipline. And also the police the fact that he is stealing. But I think the education welfare service is the main liaison agency there. [EWO 5 David, T2].

There was no sign of this expectation among any of the other workers. Even the head teachers, who had supported them before, failed to do so on this occasion. There was, though, much greater agreement in the case of Sandra. Here the education welfare officers were less confident, with only two claiming a liaison role. In this situation they were happy to see themselves much more in the supporting cast. Others agreed that this was not a role for them.

The responses on this issue suggest that there had been gradual realignment of the head teachers into a tighter accord with other workers. The education welfare officer, though, remained loose on this dimension. However, even if there was no consistent change over time there was variation in terms of type of case. Where sexual issues were raised there was much tighter agreement and coupling around the notion that the education welfare service should not attempt to co-ordinate concern.

Summary

Views on what agencies should have a co-ordinating role showed a loosely coupled system which retained its potential for ambiguity. There were movements, for example by head teachers, in their increased expectations of social services departments or their switch of emphasis on the role of schools with the issue of bruising. These changes are symptomatic of an underlying reorientation observed elsewhere, to give greater prominence to the child protection issues. This variation, though, was not strong enough to bring about agreement as to when it was appropriate for agencies to take on a co-ordinating role. Workers tended to see the possibilities in the agencies with which they were linked rather than recognising them in others.

Information

The focus of this theme was the potential of agencies to provide information about the situations under consideration. The need for this, as the basis of an assessment, was important on both occasions particularly for the social workers. Over time its importance increased. At Time 2, social workers looked to agencies, they had previously not talked of in this way, for information. In particular, they looked to schools and health services. Although there was a marginal increase int the extent to which the education welfare service was thought of as a provider of information, it was never seen as a significant function for that service and so education welfare is not included in the following analysis. While the need for information was seen as important by social workers, those in other agencies were fitful in their recognition of its importance. Their accounts were consistent in highlighting it far less than the social workers did.

Schools

Views on the role of school as a provider of information provided a picture of movement in the system, but not always in the same direction. In the case of Tony, the balance of views between different workers was relatively consistent. The potential for the school to provide information in the case of Tony was seen to rest, not so much on data that it would already hold, but on the potential for keeping an eye on the situation. Around a third to a half of workers naming the school thought this was a role it could fulfil. The emphasis, here, was very much on monitoring the child and keeping his situation under review. The responses in the case of David, at Time 1, showed more divergent views. While the social workers became more likely to look to the school as a source of information, other agencies did not respond to the same extent. Indeed, the head teachers, in particular, were far less likely to talk of their knowledge of the child and his background or of the potential of the school to monitor the situation.

	Tony T1	David T1	David T2	Sandra T2
Table 10.6. Numbers of respondents seeing the school as having a role in providing information or monitoring the situation as a proportion of those naming the school as having a contribution to make.				
social workers	7 ex 17 41%	13 ex 18 72%	9 ex 14 64%	13 ex 14 93%
head teachers	7 ex 23 30%	3 ex 24 13%	4 ex 10 40%	3 ex 11 27%
education welf offs	7 ex 14 50%	9 ex 21 43%	1 ex 9 11%	0 ex 8 - -
School nurses	8 ex 18 44%	6 ex 21 29%	7 ex 16 44%	6 ex 10 60%

It was also possible to detect a different tenor to the replies. While those of other workers tended to emphasise on going monitoring, those of the social workers emphasised a more general need for knowledge, for example:

> More information than anything else [sw 22, David, T1]

or

> They would have a wealth of knowledge and possibly some assistance they might be able to offer .. [sw 7, David, T1].

The change by Time 2 was mixed. Table 10.6 shows that, in the case of David, social workers continued to see the school as a source of information, in similar proportion to Time 1.   Head teachers and school nurses had moved closer to the social workers than they had been on the same vignette before.   In particular, both emphasised the monitoring role of the school.   However education welfare officers no longer spoke in these terms. This pattern was confirmed, and in some respects reinforced, in the case of Sandra. The provision of information by the school became even moreimportant for the social workers. Overwhelmingly [13, 93%] they saw the school as a pool of knowledge

to be drawn on. Comments ranged from the general:

> We need to talk to the school to get more information about her behaviour in school [sw 12, Sandra, T2]

to the detailed:

> The school because ... I'd want to check out the story about that she's ... she's a quiet child and check at the school whether they have any concerns about her ... I know from my experience of the past that some teachers have actually had disclosures from children and then not involved a statutory agency because they've felt that you know they have to preserve confidentiality of the child disclosing to them when they don't want to tell anybody then ... the teacher will keep that information. [sw 3, Sandra, T2].

The school nurses also increased their expectation with the majority suggesting the school as a provider of information but continued to trail the social workers in this regard. Education welfare officers, from having been the most prominent in providing this sort of account in the case of Tony at Time 1, now did not mention it at all.

There would appear to be here a continuing divergence of perspective on the contribution of the school. Particularly in the case of Sandra, social workers and school nurses anticipate the school as a provider of intelligence. However, the heads and education welfare officers disagree. If there was tightened coupling it was between the first of these pairs in one direction and the second of the pairs in another. Even this is moderated in that because the social workers had moved so far the gap between them and the nurses did not close. There was no necessary tightening overall.

Health agencies

The importance of health agencies as a source of information increased between the two surveys. However, the effect was not to produce a greater consensus among workers. The significance of health agencies as providers of information was particularly marked for social workers, so that the differential in view

between them and other workers widened. There was no tightening of coupling in the overall system.

Respondents saw the school medical services and the family medical practice differently in terms of their ability to provide information. At Time 1, the majority were all agreed that this was not a contribution for the school based health services. By Time 2, however, this had changed. In the case of David at this time, only 2 education welfare officers saw any part for the school medical service. Of the rest there was a clear divide between the social workers and the heads and nurses. None of the school nurses and only the occasional head [2 ex 10] thought the school medical service could be looked to for the provision of information. However two thirds of the social workers [6 ex 9] looked for information and the remainder [3 ex 9] looked to the service to monitor the situation. The following provides an example of the information sought:

> The school medical service might have something to contribute in terms of this lad's general health and development and also any evidence they might have about previous injuries, incidents, concerns [sw 7 David T2].

This divide was reinforced in the case of Sandra when all the social workers [9 ex 9] were hoping the school medical service would provide information, for example:

> To give us information about Sandra's general health ... have they noticed anything different ... anything that makes them suspicious of any abuse going on ... has ... has Sandra herself said anything to them that may give them cause for concern [sw 9, Sandra, T2].

Other workers on the whole did not share these concerns, although in contrast to the situation with David, when none had suggested this, the few who did so, in respect of Sandra, were school nurses [3 ex 8, 38%].

Perhaps not surprisingly, it was the family medical practice which was more usually thought of as a potential source of information. What was revealed here was a polarisation of view across time. At Time 1, the spread of views about

whether or not the provision of information was expected was similar across types of respondent.

Table 10.7. Numbers of respondents seeing the family medical practice as having a role in providing information or monitoring the situation as a proportion of those naming the family medical practice as having a contribution to make.				
	Tony T1	**David T1**	**David T2**	**Sandra T2**
social workers	6 ex 13 46%	3 ex 9 33%	11 ex 12 92%	12 ex 12 100%
head teachers	2 ex 9 22%	2 ex 6 33%	3 ex 4 75%	1 ex 5 20%
education welf offs	4 ex 12 33%	2 ex 7 29%	1 ex 2 50%	1 ex 3 33%
School nurses	6 ex 14 43%	5 ex 16 31%	1 ex 7 14%	0 ex 8 --

It was the social workers and school nurses who if anything thought in these terms, being more likely to have mentioned the family medical practice to begin with and then being as, or more, likely to see it as a source of information. This could come from either the doctor or the health visitor, for example:

> Because until recently presumably there has been a health visitor visiting and they might have a lot of information on the situation [sw 16, Tony, T1]

or

> [We] ... need some medical history and if the family has been in the area for a long time the GPs will know the family and give some information ... they may have been abused as children.   In a village practice the GP will know them   [sn 5, David T1].

By Time 2, there was a marked shift in views.   The numbers of heads and education welfare officers naming the family medical service was small, preventing meaningful interpretation.   However, the social workers showed a much greater desire for information to be provided from this source.   Most

named the doctor and his or her practice and most then saw information as the justification:

> Again give some background to Sandra's health and welfare ... when was the last time they saw her ... do they have regular ... or does the family have regular access to them and is it one GP that sees them or is it a group of GPs so therefore the family see a different one each time ... do they have any concerns [sw 9, Sandra, T2].

The school nurses, surprisingly did not talk in these terms.

A clear and increased division in view had appeared. The social workers saw the family medical practice as a source of information in a way that others did not. Such discrepancies to some extent reflect the extent to which workers see the roles of others in relation to the task they, themselves, have to do. The social workers need this information in order to make decisions about their own future work in a way that others do not. People do not make detached assessments of situations without reference to their own role. However, again clearly the social workers had moved to an extent that other workers had not. The system had changed, but if it had become more tightly coupled this was not reflected in greater agreement on this score.

Social services departments

Whereas with other agencies information was seen as important because particular agencies could provide it, the picture was noticeably different in the case of the social services department. At no time was there any great recognition that it would be a source of information. However, it did emerge as a recipient of information. Social workers consistently saw it in this light. Other workers did not often do so at Time 1 although at Time 2 this idea could be clearly detected in relation to Sandra, even if it was not in the case of David.

In the case of Tony, social workers referred to assessment as the role of their department. They needed to establish the facts and appraise the situation.

This was mentioned by 57% [12 ex 21] of the social workers identifying their department. A fuller account of this role is provided by the following:

> What is needed is an assessment and social services is in the most neutral position to make an assessment - for example 'the occasional evening out' is open to interpretation ...Tony out 'late at night' is normal - it depends what is 'late'. Where did this information come from? Some may think 7 p.m. or 9 p.m. Social services are best placed to make an objective assessment. We get that sort of value statement in relation to children ... We're best placed to co-ordinate information in a calm manner [sw 15, Tony, T1].

Other workers hardly mentioned this assessment role. Only 4 from a possible total of 64 [6%] did so. There is presumably potential for conflict here. Workers wishing to draw in the social services department having themselves assessed the situation as requiring such involvement may feel rebuffed if social workers re-assess and disagree.

This division was still there in the case of David at Time 1, but was less marked because although others still did not refer to this function, fewer social workers [5 ex 22, 23%] did so. Possibly the situation at this time was seen as more clear cut.

There was a change by Time 2, with the distinction between the social workers and others being re-established in the case of David. Social workers were again likely to mention their assessment role with half [7, 50%] doing so. This represents an increase on David at Time 1, nearer the levels reported for Tony at that time. The language used by social workers at Time 2 reflects a more forensic orientation with the terminology of *investigation* a noticeable addition to their vocabulary. Explanations by social workers of this kind include:

> Well because the major issue that needs addressing in the first instance is the child protection ... issue... and we have a statutory obligation to investigate and to protect so ... we would have a primary role in that and ... and in assessing really what else we felt needed to be done for this child and his family [sw 2, David, T2]

or

>Ourselves because we would have to take up the issue of whether it was non-accidental injury ... so we would have to be involved in order to do a child protection investigation [sw 3, David, T2].

Again this aspect of the social services department brief was rarely referred to in this way by other workers.

This conception of their role was even more marked for social workers in the case of Sandra.   Nearly two thirds [8 ex 13, 62%] gave this type of reply and this aspect was implicit in the replies of others of them.   Head teachers failed to suggest this role for the social services department at all but there was increased recognition of it from education welfare officers [4 ex 9, 44%] and school nurses [5 ex 15, 33%]. It would seem for some at least, that the focus on sexual abuse has affected their view of the role of the social services department, even if this had not been apparent when there were non-sexual concerns.

Again in the case of Sandra, it was possible to detect a change from Time 1 in the tenor of replies in this category. The terminology of *investigation* was again more pronounced with all the social workers talking in these terms and most others mentioning this aspect doing so too.   For one school nurse the recognition of this role for the social services department was born of experience:

>I've had an incidence of this type of behaviour and I actually referred the child to child and family guidance but because of the implications in my referral letter they said they wouldn't touch it until it had been investigated by social services so ... [sn 9, sandra, T2]

From a social worker this crucial role was described as follows:

>It looks as though this would be a sexual abuse investigation and again this would be ... social services would be the lead agency in conducting the investigation [sw 14, Sandra, T2].

The message on the extent to which there was a move to a consensus is mixed.

Social workers have perhaps come to see assessment as a role of their department. This was, though, there at Time 1 in the case of Tony. Other workers failed to recognise this role at either time in the case of David and Tony but did so to a limited extent in the case of Sandra. On this basis it would appear that the system was tighter at Time 2 where sexual concerns were involved but not necessarily in other cases.

Summary

Again the evidence is that there had been a shift in the system but any tightening was marginal or partial. Although school nurses and social workers may have moved closer in their views in respect of the schools being a source of information others, in particularly the education welfare officers had moved in the opposite direction. Views on the health agencies again showed a persisting divide. There was evidence that over time the ideas of the school nurses were being pulled in the same direction as those of the social workers and again these workers could be distinguished from the others who did not respond in this way. Even here though, the social workers moved to such an extent that they maintained the differential between themselves and the school nurses who had also shifted markedly, for example in their expectations of the family medical practice. Social workers also maintained the differential between themselves and others in their views on their own assessment role. Their conceptualisation of this role showed signs of having changed, with a different use of language to describe the activity. Others had begun to recognise this change, particularly in the case of Sandra where they also began to pick up the same language. However, there was still no consensus between workers, because others were slower to adopt these views than the social workers. On this score, too, namely ideas about the extent to which agencies could be sources of information, while some couplings may have become tighter the system itself remained loosely coupled.

Procedures

The last theme relates to one of the main instruments for making sure that all relevant agencies are involved in dealing with situations. That is the statement of procedures. Much of the policy effort to ensure that the child welfare system would be tightly coupled and responsive to protect children had been concentrated on this type of protocol. If procedures had been significant in achieving this end, then it could be expected that workers would refer to them in explaining their actions and justifying the incorporation of other agencies. At the time of the first survey, the Area Review Committee had in place what, for the time, were detailed guidelines on child abuse procedures [Area Review Committee 1983]. These were subsequently revised and a later version was in place for the second survey [ACPC: 1993]. Replies were analyzed to see how prominent these were in the thinking of respondents about the vignettes. The analysis includes answers that referred to a requirement to participate in activities laid down in the procedures. Procedures were not referred to as an explanation for involving the education welfare service so it is not included in the discussion.

Schools

Child protection procedures had a virtually non existent profile in accounts of the need to involve the school. At Time 1, the only references were by an education welfare officer to the need for the school "to take NAI action" [EWO 15, David, T1] and by a school nurse to the possible role of the head who "would be involved if there was a case conference" [sn 15, David, T1]. Procedural concerns were not raised by either the social workers or the heads. The situation at Time 2 was little changed. Procedural requirements in the case of David may have been edging into the decision making consciousness of social workers but not others. At the first round, social workers had not mentioned them at all whereas they were now mentioned by 3 of them [ie 21%]. Otherwise they were only mentioned by one education welfare officer and nobody else.

260

Even this flicker of recognition was extinguished when workers were talking about Sandra. Nobody suggested there was a procedural need to involve the school. If procedures had an impact, it would seem that workers had internalised the message of contacting relevant agencies and it had become axiomatic, in a case such as this, that the school was such an agency. There was hardly any external evidence of change.

Health agencies

The accounts given by workers in respect of health agencies suggested that far from becoming more significant over the years, procedures had declined in the consciousness of workers. References were always to David. Nobody raised them in respect of either Tony or Sandra. Procedures were rarely mentioned in respect of the family medical practice. Only one respondent mentioned them at Time 1 and four, three of them social workers, at Time 2. They were, however, more frequently mentioned in respect of the school health services.

Table 10.8. Number of respondents referring to procedural concerns in respect of school medical service involvement with David at Time 1 and Time 2 as a proportion of those naming the service as having a contribution to make.		
	David - Time 1	**David - Time 2**
social workers	1 ex 5 20%	2 ex 9 22%
head teachers	5 ex 16 31%	0 ex 10 -
ed welf officers	9 ex 21 43%	2 ex 2 100%
school nurses	5 ex 22 23%	2 ex 13 15%

At Time 1, the social workers were unlikely to mention the school health services at all and were then not usually thinking in procedural terms. Other workers were all more likely to identify this service and to offer procedure based explanations, for example suggesting the school medical service was:

vital from the beginning ... put the child on the "at risk register".

Otherwise it's not a medical problem at this stage [Head 20 David T1]

or would:

... come into the aspect of the bruising. The school medical officer would be called in as part of the child abuse procedures [EWO 23 David T1].

At Time 2 there was a noticeable shift in the balance of accounts. In particular, the head teachers did not refer to procedures at all. The education welfare officers rarely mentioned the school medical service, although those that did referred to the procedures. This was not the movement which might have been expected. Far from creating an image of tighter coupling, responses referring to procedures reinforced the idea of looseness in the system. This was confirmed when the lack of reference to procedures in the case of Sandra was added. It seems they had their highest profile when physical injury was concerned. Again, if they were significant for Sandra, it was because they had been assimilated into the world of workers to the point that they did not need to be referred to because they were taken for granted in such situations. Alternatively it could be argued that the message conveyed by the procedures had changed. Head teachers no longer saw the procedural need to call in the health services because for them the procedures had changed. Whatever the logic the importance of procedures as far as the school linked health services was concerned had become marginal. They were not an instrument for tight coupling - except in the negative sense that workers were agreed in not acknowledging them. Their potency in this arena had declined.

Social services departments
The mention of procedures was most significant as a ground for involving the social services department. Levels of agreement between types of worker as to their potency did not, however, appear to have been increased.

Table 10.9. Number of respondents referring to procedural concerns in respect of social services department involvement with David at Time 1 and Time 2 as a proportion of those naming the department as having a contribution to make.				
	Tony T1	David T1	David T2	Sandra T2
Social Worker	1 ex 21 5%	10 ex 22 45%	9 ex 14 64%	7 ex 13 54%
Head Teacher	0 ex 19 -	2 ex 15 13%	2 ex 9 22%	4 ex 11 36%
educ welf officer	2 ex 22 9%	9 ex 20 45%	2 ex 9 22%	2 ex 9 22%
School nurse	2 ex 23 9%	8 ex 23 35%	5 ex 16 31%	3 ex 15 20%

As had been the case with other agencies, procedures were rarely cited as a reason for involving the department in the case of Tony and never by the head teachers. However, for 12 year old David, at Time 1, with the suggestion of "considerable bruising" the picture was somewhat different. The trigger for official procedures was recognised and reference to them was made. The procedural requirement that the social services department should be involved because this was NAI was most significant for social workers and education welfare officers, with school nurses not far behind. Social workers were most likely to explicitly use the terminology of procedures while for other workers the existence of procedures might be implicit rather than explicit in their discourse. Explanations include:

> we are dealing with a situation which has been in the past and looks as if it might be over chastisement which equals NAI which brings in formal procedures. We have formal responsibilities. [sw 4, David, T1]

> [Social services] would be brought in through the bruising and child abuse procedures. There would be a strong aspect there [ewo 23, David, T1]

> I see this as a case of child abuse. I would put that system into

operation with the child possibly being put on the at risk register ... in which case the social worker would probably be key worker [sn 15, David, T1].

For the head teachers, however, the concept of procedures rarely figured. It should be noted that 10 heads [40%] had not mentioned social services departments at all. This could reflect different definitions of the problem, for example that they saw this as a behavioural rather than an abuse issue, or it might reflect the relatively smaller significance to them of these procedures in their working role.

The gap in frequency of reference to procedures between the social workers and others was as great, if not greater, when David was reconsidered at Time 2. The statutory framework and the procedural guidelines associated with it had become even more prominent in the accounts of social workers. Two thirds of them gave accounts of social service departments in these terms - approximately half as many again as at Time 1. An example of this type of reply would be:

> Well I think we would need to follow our child protection procedures because it's saying that parents believe they can only control him by firm physical discipline but on occasion that's resulted in considerable bruising so we'd obviously have to look at it from a child protection point of view ... and also the protection of other children if he's attacking and bullying other children ... and the fact that the parents are leaving him alone [sw 6, David, T2].

Other workers seemed no more or less likely to talk in these terms than they had at Time 1. School nurses were the next most likely to do so but at half the rate of the social workers - a similar proportion to Time 1. As before their language was usually less explicit in using the terminology of 'procedures' and statutory obligations with the recognition of procedures being implicit in their accounts, for example the school nurse who said of the social services department:

> Well they would be involved because of the bruising on the child ... they're primary the first ones in child protection ... we have to go through social services [sn 5, David, T2]

or

> Well I think ... it's the bruising bit really because that's our brief is to contact social services if [indistinct] worry about a child with a non accidental injury and they .. they presumably would visit and try to get down to helping the parents [sn 7, David, T2].

The numbers of education welfare officers and head teachers naming the social services department and explaining their role in these terms was small giving no cause to conclude that these factors had become more prominent for them in this scenario. The impact would seem to have been concentrated on the social workers.

In the case of Sandra, references to the legal and procedural framework were made at a similar rate to the case of David at Time 2.   The pattern also remained similar, with most social workers giving this type of answer, while the proportion of education welfare officers and school nurses giving this type of reply continued to run at less that half the social worker rate. The proportion of head teachers recognising these requirements showed a possible increase, although the numbers involved were small. Again the language used to reflect the requirement for social services departments to be involved revealed a stark difference in the expression of this obligation. However, whereas in the case of David at this time, social workers had frequently claimed involvement by classifying it as *child protection* in the case of Sandra this terminology declined but instead the reply of every relevant social worker incorporated the word *duty* or the qualifier *statutory*:

> We'd have a duty to investigate under the Children Act [sw 12, Sandra, T2]

or

> Because the referral has come to us ... because we have a statutory responsibility to investigate possible sexual abuse [sw 2, Sandra, T2].

While other categories of respondent sometimes referred to the Children Act or

procedures they were as likely to simply pick out aspects such as the need for a child protection conference which would be covered by the local procedures. Examples of each type of reply wold be:

> We would ... we are bound in law now to let them know of such case quickly and we do so ... and although occasionally it gets us into trouble ... because we have the child's needs ... the child's needs are paramount ... but occasionally we do get irate parents coming round afterwards saying you know why did you do this ... why did you contact social services instead of contacting us first   [head 2, Sandra, T2]

and

> Well as it is said there it sounds quite .. everything is 'Ify' but if you spoke to her at any point at all she said anything more then obviously it's got to be then obviously it's got to be classified as sexual abuse and you go straight through the channels [sn 16, Sandra, T2]

or

> because they would be responsible for holding a child protection conference [ewo 8, Sandra, T2].

Although procedures were an important variable in explaining the involvement of the social services department, it would be hard to conclude that they had become better established in the views of workers overall in explaining social services department commitment.   The proportion of workers justifying their choice of the social services department by reference to them changed little over time.   Within that global picture there were signs of a re-alignment. Their importance fell away in the accounts of the education welfare officers and school nurses.   They were most relevant for the head teachers in the case of Sandra. However, they were becoming more potent for the social workers, particularly with reference to a situation such as that of David.   This was reflected not just in the statistics but in the nature of the language used.   Other workers tended to talk about the things that happened because of procedures, while the social workers were more explicit about the legal aspects and the imposition of duties. This was reflected in the case of David by the use of the term *child protection*

and in the case of Sandra by the concepts of legal duty and statutory obligation. For social workers the system seemed clearer and tighter but this was not necessarily the case for others.

The police.

It was primarily the social workers who identified procedural grounds for police participation. Others rarely referred to them at all with no more than 3 mentions between them on any vignette. Social workers did not mention them either in the case of Tony but mentioned them consistently on the other vignettes.

Table 10.10. Number of social workers referring to procedural concerns in respect of police involvement as a proportion of those naming the police as having a definite or possible contribution to make.			
Tony T1	**David T1**	**David T2**	**Sandra T2**
0 ex 2 0%	6 ex 14 43%	4 ex 13 31%	4 ex 14 29%

They argued in the case of David at Time 1, for example:

> Procedurally it is laid down that the Special Enquiry Unit[1] should always be informed in NAI. We have good co-operation from them. They have a positive effect in re-emphasising to the parents what is acceptable and what is not. They have the potential for taking parents to court for assault - it's rare but it has considerable effect. As a deterrent it seems to work. In a case of severe bruising they often do the initial investigation themselves and are more adept at weeding out essential information as to what has really gone on - but I'd be wary of the social worker going along jointly - you tend to get lumped in and have a difficult role of support at a later stage [sw 6, David, T1].

In the light of subsequent policy, this response points to some of the benefits and fears related to joint police and social worker investigations. The general thrust was similar at Time 2:

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[1]The Special Enquiry Unit was at this time the police arm which dealt with such welfare issues.

we always have to inform the police of any referrals that we get about children being left on their own a lot and about children who are ... possibly being .. being hit and bruised by their parents.. so we would have a statutory responsibility to inform the police... they would be the first people we would inform um and then after that they would need to decide whether they felt they had a role in investigating jointly or whether they'd just want us to look into the circumstances and keep them informed.... They'd also want to check whether they'd got any previous records on the family or on the parents [sw 2 David T2].

In the case of Sandra the response could be more succinct, for example one social worker explained the police were involved because they:

have a duty and it's a joint investigation [sw 10, Sandra, T2].

The reference to the idea of a joint investigation draws attention to a way of working indicated in the local child protection procedures, namely that all investigations of suspected child abuse should be jointly planned between the police and the social services department. In the case of Sandra, the majority of social workers [8 ex 14, 57%] referred to doing a joint investigation although they did not necessarily justify it by reference to the procedures. It may be therefore that they had assimilated the message without thinking of it in terms of the procedures. Most other workers did not talk in these terms. Regarding loosely coupled systems theory, there was no greater agreement at Time 2 than there had been at Time 1, suggesting that on this measure the system still allowed for different explanations. There could, though, have been movement around this variable in the way the message had become implicit in the views of social workers, even if they did not acknowledge the written rule.

Summary
The way in which workers constructed their accounts around the procedural elements of the system suggest that they provided a recognisable but loose coupling mechanism at Time 1. There had been change in their impact over time. This had affected parts of the system but measured on the extent to which

268

there was increased consensus had not led to a more tightly coupled system overall. Only the social workers were more likely to incorporate references to procedures in their accounts of why they thought particular agencies should be drawn in. That increase was focused on their own department. Even where the pattern of workers identifying procedural concerns changed, there was no greater overall agreement between them. As has been seen, for example, the head teachers and social workers remained as distinct as before in their responses, even where they were both moving in the same direction.

It could be that the failure of workers to respond in terms of the procedures does not reflect a lack of potency on their part. The procedures themselves had changed. In some circumstances it could have become clearer to workers that they did not apply. This could be an explanation for the fall in references to them in accounts of the involvement of health agencies. Alternatively, workers may not have referred to them because they had assimilated the message. Procedures had become so much part of their world that they did not recognise them as a trigger for their action but looked beyond them for other explanations. This could well be the case for social workers. By Time 2, they talked of joint working with the police and their task in terms of child protection. Perhaps, too, the failure to refer to the procedural recommendations to contact the school were subsumed in the quest for information already noted.

The message from an analysis of the impact of procedures is, then, mixed. In terms of their profile in the discourse of workers, they do not seem to have been a force for tighter coupling. They have, though, had impact on parts of the system and this picture is reinforced by qualitative aspects of the accounts given by workers. A more general review of the thoughts of respondents is included in chapter 11.

Overview

The way in which respondents talked about why agencies and workers should be involved and what they should do showed that some views had changed over time. There were indications that the balance of coupling within the system was changing, but the case for arguing that the system overall was more tightly coupled was less clear cut.

The pattern of change over time in the responses to the vignettes was complex. At times workers in different agencies moved closer in their views - for example social workers and nurses in their expectation that the school could be a source of information. This is indicative of tighter coupling between parts of the system but does not necessarily amount to the increased consensus overall which would indicate that the total system was tighter. Indeed, just as it was possible to point to increased agreement on some points it was possible to identify loss of agreement on others, for example in the emphasis on the extent to which social workers should work with the family and child in the case of David at Time 1 and Time 2. So, tighter coupling on some aspects was counterbalanced by looser coupling elsewhere. At times the discrepancy of view between workers arose because one set of workers had shifted markedly in their views, for example the proportion of social workers in comparison to head teachers seeing the family medical practice as a source of information. At times there was clear disagreement, for example between the social workers and the school nurses on the same issue. At others agreement may have been partial, for example when social workers and school nurses moved into line on recognising the need for medical expertise but disagreed on the relevant agency.

While the general picture which emerged from these accounts was of a persistently loosely coupled system there were indications of tightening in some ways. Agreement was easily identifiable in situations where respondents did *not* suggest particular options or where there was agreement that situations fell

outside the remit of particular agencies - as was seen, for example, with the education welfare service on a number of dimensions. By Time 2 there was greater agreement around the case of Sandra, than was evident in the other vignettes or earlier, that there were aspects that certain agencies would not get involved in. Nobody, for example, would see the school dealing with the family in this situation.

Other signs of increased tightness of coupling were more subtle. There were indications of increased clarity of role for certain agencies. This was true, for example, for the education welfare service. Most significant, however, was the shift evident at a number of points of a re-orientation of focus so that situations were perceived in a stronger welfare and child protection context. This was seen in changes of view over time about David and reinforced in the case of Sandra. The change suggests a more fundamental cultural shift in how workers view their world. signs of this were evident in the changed perspective on the role of the police. Not only were they more frequently recognised but the ground for involving them had shifted. Similarly the accounts given of the role of the social services department at Time 2 were couched in terms which identified abuse issues more strongly. Even here there was evidence that the social workers had been most greatly moved with others following in their wake. They went even further in identifying the language of child protection and investigation.

It is also possible that certain elements were not mentioned in the accounts of workers not because of a lack of influence but because they had become taken for granted. On the face of it procedures had not acquired the profile that might have been expected. This could be because they had been incorporated into the minds of workers to the extent that they were no longer conscious of them. The procedures themselves may have been seen as mechanistic devices rather than a rationale for action so not meriting mention in explanations of actions. Conversely, of course, they may not have been mentioned because they had

little impact. Some of these issues are explored in the next chapter.

Overall, then, the picture is mixed.   On the basis of the reasons given for the involvement of particular agencies and workers, the system is demonstrated to have continued to be loosely coupled. This is not to say that it had not changed. Opinions and views clearly reflected revised understandings.   There were also indications of a broader sea change in the approach to work with children which would provide the body for a more tightly coupled system.

The next chapter moves on from the vignettes to explore whether overall the changes in child welfare policy and practice had produced a system which workers experienced as more coherent over time.

Chapter 11

BENEFICIAL PROGRESS?

Earlier chapters have explored how policy initiatives attempted to adjust the patterns and strengths of couplings in the child welfare and protection system and how the accounts of their world, by workers, indicated that change had taken place. This chapter explores whether the revised balance of couplings had had a positive impact. If the balance of couplings was better for the members working in that system, then they could be expected to report increased satisfaction. Advocates of the *voice of compensation*, seeing loose coupling as problematic, would consider this indicative of tighter coupling. Supporters of the beneficial *direct effects* of a loosely coupled system would see it as evidence of the success of such a system. A more positive evaluation would, then, give no indication of whether the system had become more or less tightly coupled. It would, though, indicate that change had taken place and that the new balance was experienced as an improvement. Conversely, a negative evaluation would not indicate the direction of change in patterns of coupling except to confirm that it was undesirable. The evaluations offered therefore need to be seen in the context of the complex patterns of changes which have been described so far.

This study takes as a baseline, accounts which were collected from workers at Time 1, of the benefits and problems of working together. These show how local co-ordination was viewed in the mid 1980s. At Time 2, respondents were asked to evaluate changes in the quality of co-ordination in the intervening years. Because of limitations of interview time, it was not possible to explore in detail their views on benefits and problems. However, it has been possible to comment on the extent to which some of the issues raised have remained on the agenda by reference to the Department of Health funded project undertaken by Christine Hallett and Elizabeth Birchall [Hallett and Birchall 1995; Hallett 1995a].

The final part of the chapter returns to the issue of child protection procedures and the impact they had had on the system. The picture shown was that the pattern of relationships was at all times viewed in a generally positive light, but that the changes between Time 1 and Time 2 were generally welcomed.

Perceived advantages and disadvantages of working together

The replies received at Time 1 [see Appendix 3] indicated that the ability of respondents to work comfortably with others was not particularly upset by a troublesome balance of coupling. For workers themselves, co-ordination did not present the problems which the tragedy-prompted inquiries demonstrated. They were generally positive about working with others. This general image was confirmed by the subsequent studies by Birchall and Hallett [1995: 75] and Hallett [1995a: 319] which also explored, with workers from various professions, their experiences of working with others. That is not to say, however, that there were not reservations and some of these will be discussed later. When workers in this study were asked in an open question what they thought were the main advantages of working with others, the main benefit identified was the improved availability of information or getting a better picture. This reflects the need, in a loosely coupled world, for participants to clarify situations in order to make appropriate responses. It was most frequently mentioned by all groups apart from the education welfare officers for whom it came second. Its significance for the social workers is noteworthy. They were more likely to mention it than any other worker. It was mentioned by twice as many social workers as mentioned any other advantage. Responses varied from the blunt:

Information [sw 16, T1]

to the more developed benefit of:

A wider range of being informed about the background really ... and you have some idea about how to approach the case [sw T1].

This emphasis on information is consistent with the tendency of social workers to see others as a source of information, a tendency which re-emerged

274

vigorously at Time 2, suggesting this would still be a significant benefit for social workers. The implication is that improved information enhances the prospects of rational decision making. While the term 'information' relates to hard data, social workers also highlighted the help in viewing the picture provided by the different perspectives brought by others. This would indicate that understanding was enhanced by being made aware of the different frame of reference of others or the explanatory system that they were applying to a situation. Again this reflects the need for workers in a loosely coupled system to develop a comprehensive picture. This type of answer was often linked to the idea of collecting information, for example:

> Other points of view[...]You can actually get ideas on how to cope with a situation modified by having other aspects of how to look at it. Things can be missed by a single worker where three or four can be helpful. If you've got a good relationship in schools, heads will ring you up - things we wouldn't know that could be pointers [...] The more good relationships you have with other professionals, the better chance you've got of having a balanced view [sw 5, T1].

This type of answer, though, was largely confined to social workers and perhaps reflected their ultimate responsibility, in many cases, for making sense of and dealing with situations in a broader social context than others.

The other advantage which was generally suggested by all groups, and was most significant for the education welfare officers, was to do with the sharing of expertise. In classifying replies, this was taken to include specialist skills, knowledge and training. This indicates that some people saw a more tightly coupled framework. There was not the ambiguity of a loosely coupled system. The distinctiveness of the contributions of workers was more clearly marked. Replies were not concerned with making sense of the world, but recognising a need or stimulus and activating the appropriate response. So, for example, a head teacher emphasising her own expertise as well as others explained:

> They've got different skills to offer ... the head is an expert in education. They can deal with social problems, physical and psychological problems [head 17, T1].

This emphasis on expertise is recognition that co-operation is not necessary just because different agencies have expanded on their core and overlap [cf Welton 1985: 62-63], but also there remains a specialist division of labour in the field of welfare which entails joint working for whole person care to be achieved. The idea that there were more tightly coupled elements, in terms of greater predictability of who would do what, was confirmed by Hallett in her later study with her finding that:

> a relatively clear division of labour has been established in the field of child protection, at least from the perspective of the professionals involved [1995a: 303].

The major benefits identified at Time 1, then, reflected a system with both looser and tighter coupling characteristics. The former demanded sharing of information, so the stimulus for action could be made clear. The latter meant that, when the stimulus was revealed there were clear points of the system to be activated.

Before leaving the advantages to be gained from co-operating, it is perhaps worth commenting briefly on perceptions of its relationship to resource efficiency. In the cost conscious times in which this study was conducted, resource efficiency would seem to be a desirable outcome. It was overall the third most popular choice although no individual group of workers rated it so highly and it was always a long way behind their main choice. It was consistently mentioned, rather than particularly significant for any given group of workers. Front line workers were clearly aware of resource issues, but these did not figure so highly as individual understanding of needs and skills of delivery of service. At Time 1, field workers did not spontaneously raise resources as a problem, although it may well be that lack of resources may have underlain some of the issues they

did raise. Resource concerns seem as likely to be a barrier as a stimulus to working together and this again is drawn out in Hallett's later study [1995a: 242]. Their importance as a coupling variable was dependent on circumstances.

When workers were asked about problems, they expressed them in terms of the day to day handling of cases. The most commonly expressed concern was to do with problems of communication. This would point to coupling, loose to the point that necessary stimuli could not be passed through the system. There were two types of problem. First, there were practical problems to do with the mechanics of communication. Second, there were problems arising from agencies or workers not being recognised as meriting communication. Whatever the cause, communication problems were most significant for the school nurses, over half of whom mentioned them at Time 1, for example:

> Lack of communication very often. Being able to get hold of the social worker is the biggest problem. It is very difficult sometimes. Obviously they're out in the field and only in at certain times. I may leave a message to ring but then I can be out [sn 14, T1].

or

> I think we are the ones who come at the end of the line ... somebody says 'have you mentioned it to the school nurse?' and everybody says 'Oh no...' [sn 8, T1].

While communication problems were a steady theme in the replies of all other workers, they were not dominant. The sensitivity of the nurses, in particular to this issue reflects the tendency at Time 1, shown earlier, for them to be seen as peripheral and not fully incorporated into the system - perhaps accepted as providers of information but without a professional role demanding feedback. Improvement in systems of working together ought to lessen this sense of grievance among the nurses. The discussion of the vignettes suggested that they were more involved by Time 2. Their accounts of any improvement in co-ordination which suggest movement on this issue will be examined later in this chapter.

277

The issue of communication continues to be a significant factor for inter-professional working. Birchall and Hallett [1995: 76] highlight good communication as the factor most frequently viewed as conducive to good co-ordination. They noted that difficulties can arise from basic practical difficulties like access to a telephone [1995: 85]. It is perhaps inevitable that problems of communication will remain, if only because of the potentially large numbers of players in the field and the fact that the nature of the work done distances them from the means of communication [mobile welfare workers still do not often have their own mobile telephones]. To some extent, these are the type of problem that should have been mitigated by procedural improvements and modifications to systems of information recording and transmission with, for example, check-lists to ensure relevant people get informed. Procedural guidelines can ensure that workers are reminded of others who are part of the system and have been developed in the drawing up of new codes of practice in the light of *Working Together*. If successful, these developments should be reflected in the views of workers on changes in the quality of inter-agency working between the two phases of the study.

While it may be expected that mechanical solutions could help with problems of communication, they would not appear to be likely to do so for the other prominent concerns. After communication, the problems that most frequently emerged at Time 1 could be characterised by the fact that workers do not always agree. This would be an expected characteristic of a loosely coupled system. Seen positively as a *direct effect*, it would lead to a negotiated outcome. Viewed negatively as requiring *compensation,* it could result in a power struggle to be resolved by coercion. The existence of disagreement, as a problem, was most strongly emphasised by social workers and for them it was the most frequently mentioned problem, for example:

When you are working at cross purposes, it can easily happen [sw 10, T1]

or more fundamentally:

278

... sometimes the different philosophies and often different goals [sw 15,T1]

You can think you are talking the same ideology ... but you don't know [sw 20, T2].

Specific examples given included health workers simply seeing a medical problem, or the conflict between the needs of a school to relieve itself of a disruptive pupil and a social worker keen to sustain a child in school.

The *direct effect* is to force workers to examine the situation before them and consider a range of possibilities before acting. Although this makes co-operative working difficult, it also, paradoxically, stimulates workers and agencies to collaborate. It is the same characteristic, in some respects, which social workers saw as helpful in pulling together different perspectives. It may not be possible, or even desirable, to eliminate these differences, but it may be possible for negotiations to take place and bargains to be struck, or at the very least for the attitudes of others to be clearly known so they can be taken into account in any programme planned. The continued importance of these issues was again indicated in the study by Birchall and Hallett [1995: 82 et seq]. They talked of professional obstacles and at the top of their list were to be found "Different overall workload priorities", "conflicting values about goals of intervention" and "different case evaluations". Improving the experience of working together would either involve harmonising the views of different workers or enabling them to deal effectively with their divergent views.

Taking the negative view of the *voice of compensation*, where views diverged there could be a struggle for power, for example, between the social services department and others. This was not usually raised in terms of professional conflict which was rarely expressly mentioned. However, non-social workers referred to the problem of losing control to social workers perhaps with the suggestion that they could handle the situation better. Negative references to

social workers of this kind include:

> The people with the upper hand who can pull the strings and make the final decisions [ewo 1,T1]

> ... like the cat who had the cream - they want to lick it all [sn 4, T1]

> ... a definite danger, particularly with social services that they take over and act quite drastically and cause a lot of fuss [head 25,T1].

> ... you might want some action - particularly from social services. You know you can't do a thing [head 9, T1].

These comments help to explain why social workers did not complain of loss of control. In many instances they were seen as the ones taking control. The complaint voiced by social workers [but not by others] was the converse one - not of losing control - but having to resist pressure from others. This could happen in formal settings like case conferences or in day to day working, for example:

> ... the case conference syndrome where it gets to voting by numbers so if you bring your nursing officer and medical officer you can get your own way because there's a lot of you [sw 14, T1]

or

> You can get into the situation where there is a lot of pressure from say head teachers to take certain action which isn't the policy of our department - particularly through things like kids on care orders at home. You can get pressure from the head to take the child back into care because the kid is not attending school [sw 16,T1].

At the heart of these contrasting perceptions of a common phenomenon lies the inevitable tension between on the one hand joint working which by its very nature implies discussion of options, with the possibility of changing the minds of key actors as to what should be done, and on the other hand the necessity for agencies to have ultimate responsibility in certain spheres which may mean them taking decisions irrespective of what others may desire. Workers sometimes recognised this, but it did not necessarily reduce the frustration at the time. It is, though, perhaps an area where tighter coupling strengthened by improved

general awareness of roles and responsibilities could help to reduce some of the conflict generated. The studies by Birchall and Hallet give some cause for optimism on this front, but also some areas of concern. They found that, in their samples, most workers were clear about the role of social workers and the police [Birchall and Hallett, 1995: 235; Hallett, 1995a:301] but views on others were not always so clear. For example, in the joint report they found the role of teachers little understood, including by themselves while "Only a quarter of respondents feel clear about the school nurses and education welfare officers" [Birchall and Hallett, 1995: 237& 238]. Both studies also found concerns at the lack of clarity of the role of the general practitioner [Birchall and Hallett, 1995: 237 & Hallett, 1995a:301]. More could be done to increase knowledge here and enhance the prospects of tighter coupling when required.

Of the disadvantages not so far discussed, the most frequently mentioned was the difficulty of too many people being involved. Sometimes this was seen as a problem of itself, at others it could be said to lie behind other problems such as communication. As such it could be seen as a deficiency of loose coupling, needing stronger coupling to bring all these parts into their proper relationship. Viewed from the perspective of the client family, however, it was a problem of over-tight coupling. It was a system which activated too many parts when a lower key response would have been preferred. As one school nurse explained:

> It's also a disadvantage if too many people are visiting the family ... it's best to keep the numbers down so the family gets a good relationship with the key worker [sn 11, T1].

For head teachers in particular, problems of indecision and time were stressed. These were symptomatic of a system which was too loosely coupled. Time was important to heads who had conversely also looked to good use of time as a benefit of working with others. They had a different orientation, perhaps reflecting their managerial role or that this was work additional to their core function. Sometimes the problem was the necessary consumption of time which

was a valuable resource - at others it was, more critically, a lack of decisiveness, for example the:

> necessary but frustrating time factor when nothing seems to be happening [head 10, T1]

or

> waffling around when what was needed was a clear cut simple decision [head 22, T1].

Time was the most explicit resource referred to by workers as problematic when working with others.

Other factors were mentioned infrequently, even though they might be expected to have a bearing. Individual explanations such as personality clashes which could fracture coupling were rarely mentioned although Birchall and Hallett later identified the stress put on personal relationships as a facilitator of good co-ordination, or in the terms of this study a coupling variable. Confidentiality was only occasionally seen as a barrier to coupling, perhaps because of the open nature of the questioning. The Birchall and Hallett study found it mentioned little until they asked specifically about it when it was endorsed as an issue [1995: 83].

The issues which affect how positively people see the experience of working together are constant. There was a consistency between the findings of this study at Time 1 and the later studies by Birchall and Hallett [1995] . Interpreting these issues in terms of loosely coupled systems theory presented a complex picture. Responses indicated that the system was loosely coupled. This was evident in the replies which were positive as well as critical. The idea that getting more information was a benefit of working together is symptomatic of a loosely coupled system. Similarly the problem of time delays reflects the same image - perhaps because delays could be caused while information was exchanged and processed.

However, it is too simple just to say that the system was loosely coupled. There was evidence of a complex balance of tight and loose couplings. While, as has been noted, the system behaved in a loosely coupled fashion, some points could be fixed and clear to observers. This was the case, for example, when observers could identify seats of specialist expertise. The complexity was compounded because the same events could convey contradictory coupling messages. Some phenomena, such as the numbers of workers involved in situations, could be indicative of both tight and loose coupling, depending on the perspective from which they were viewed. Others, such as the level of resources, could lead to either tighter or looser coupling depending on circumstance. Yet other situations could be viewed as either positive or negative outcomes of the strength of coupling, for example different views held by workers could be seen as a healthy stimulus to negotiation and carefully argued out practice or as inviting conflict and resolution by coercion. Complexity was also evident in the levels at which coupling was an issue. At times it could be mechanical problems, requiring parts to be oiled and adjusted to run more smoothly. At others the issues concerned whether certain elements were seen as part of the system at all.

The pattern shown is too complex to suggest that the benefits could be gained, or the problems overcome, by simply making the system tighter or looser. In such circumstances workers can be empowered by knowledge. Information about the situation with which they are dealing and about the role of others can enable them to make sense of what is happening. Much of the work carried out to improve services for children between the surveys was aimed at increasing clarity and ensuring that information was shared. New procedural guidelines were in part concerned with this clarification and ensuring all parts of the system were recognised, while at the same time making sure that the mechanics were in place. How far had these and other changes had an impact on the experience of members of the system when they had to work with one another? Did they

have a sense of improved co-ordination?

Improved co-ordination?

Respondents were asked whether in their experience they thought the quality of inter-agency working had stayed about the same, improved or got worse since the mid 1980s. In practice, the number of workers who had been working in this setting for such a long period was limited, so that what was obtained was often a much more immediate view of change, based on more recent experience perhaps measured against the accounts from others of how things used to be. The general view was that there had been an improvement. This confirms the picture observed by Hallett, who also reported an improvement in relationships in recent years [1995a: 305].

Table 11.1
Perception of change to quality of inter-agency work since mid 1980s

	Social workers	Head teachers	EWOs	School nurses
Improved	10 (71%)	4 (31%)	4 (44%)	12 (74%)
Got worse		2 (15%)	1 (11%)	1 (6%)
Same	3 (21%)	4 (31%)	2 (22%)	1 (6%)
Other	1 (7%)	3 (23%)	2 (22%)	2 (13%)

Length of employment made little difference to the likelihood of workers thinking thing had improved. Of those who had been working in their current profession in 1985. 57% noted an improvement while 59% of those who had entered later did so. It may be worthy of note, that although few thought that there had been a deterioration, all those that did so had worked in their current profession since

at least 1986. There appeared to be a difference between types of worker as to whether or not they thought there had been an improvement. The school nurses and the social workers were positive about the change and no social worker thought matters had got worse. The head teachers and education welfare officers were far less likely to perceive this. This may either reflect their relative lack of involvement in this type of work or that the changes have in the system have had a less frequently beneficial impact on their experience.

Although respondents were 'forced' into making a general judgement about the quality of inter-agency working, many of them indicated that there was some form of qualification to their judgement. This was true of both positive and negative verdicts, although of course there were far fewer of the latter. Effectively, it was mostly the social workers, who while arguing things had improved, wanted to express some reservation, with nearly all of them doing so. One of the more general comments would be:

> I think there is more communication now between the agencies ....
> agencies are less precious if you like about you know... what they see as
> only *their* role.. I think we've learnt more about each other's roles and I
> like to think that we work together...... it's still not... I still don't think it's
> good ... I think there's still lots of room for improvement ... but I certainly
> think it's better than the 80s [sw 3, T2].

Others may have been less critical of the standards achieved, and even those who thought things were getting worse could put a positive gloss on their account, for example:

> ... my impression is it's got slightly worse because of pressure of time and
> the number of people trying to do the same job has reduced ... however...
> social services are very co-operative though sometimes they don't follow
> up things that I think ought to be followed up [head 8 T2].

Overall the impression given was that there were no major worries about inter-agency working in general but at the same time there were areas of concern.

When explaining why they evaluated the quality of working together in the way that they did, different groups of workers expressed this in different ways. The school nurses who, as a group, had most frequently identified improvement, gave replies that suggested they had become more tightly coupled into the system. They reported that they were more involved, that the quality of their involvement was better, that they were recognised where they had not been before and communication with them was better. This suggests that the problems of communication identified as a disadvantage by school nurses at Time 1 had been lessened. Examples of replies from school nurses include:

> I think it's improved since I've been here. We get far more contact now from social services... than we used to when I started... there were children that we didn't know about but now they do let us know [sn 1, T2]

> Well since the 1980s or even before that as a school nurse we were very rarely invited to take part in case conferences and not invited as a person that was naturally on the list so ... but that has improved we do get invited ... we are being asked to give our opinions as much as possible we do keep contact with the other agencies. They keep contact with us and we're invited to be on case discussions or review meetings and become part of core groups [sn 3, T2]

> Well they certainly seem to contact us more readily for case conferences now than they used to in the 1980s. I think we are invited to more... they used to forget the school nurse quite a bit before [sn 5, T2]

> I seem to get more personal contact from other agencies and we seem to have more case discussions over and above case conferences [sn 8, T2].

While the nurses gave descriptive answers stressing the level of their involvement, the social workers, who had in any case always been at the hub of the system talked more of the affective components of relationships. For them the system was enhanced by cultural changes or changed belief systems. They talked more, therefore, about improved awareness of the need to work together and of better understanding of the roles of different people as the following

286

examples illustrate:

> I think another reason I would give is that there's probably more commitment by other agencies.. um.. to become educated about child protection and to participate in multi agency training [sw 13, T2]

> .. some other workers have sort of .. they mention the training they had around the Children Act and what they now understand what they need to do following their training round the Children Act so I don't know whether that has been a sort of ... more training gone in sort of making their awareness really or simply because there's been new legislation and they needed to learn that [sw 8, T2]

> I find people more co-operative now and understanding about why it is so important to have information from them [sw 6, T2]

> Well ..., I think most of the agencies realise that we now have to work together ... otherwise we're going to miss out on important information sw 1, T2].

The first two of these examples draw attention to the significance of training. The last two confirm the importance to social workers of gathering information which was earlier seen as the main advantage of working with others. It is not surprising, therefore, that anything that improves this will lead to a more positive evaluation overall of co-ordination.

The different types of accounts given by nurses and social workers in this study reflect a similar phenomenon to that observed by Birchall and Hallett who noted that health visitors and general practitioners "were most likely to stress good communication between   workers while social workers more frequently emphasise personal relationships" [1995: 76]. There are two likely explanations for these differences. First, they reflect different cultures with the nurses more geared to hierarchies and proper channels than social workers who are geared to more independent inter-personal work. Alternatively, they are a function of the different places and tasks of the occupations in the child welfare system.

Either way, it points to the need to look to adjusting a blend of variables to bring about change throughout the system, rather than relying on a single mechanism.

Frequently workers would want to refer to specific agencies in explaining their view on change in the quality of inter-professional working. These accounts were a mixture of positive and negative observations which may or may not have tallied with the respondent's overall judgement of change. Not surprisingly, it was social workers and their department that were mentioned most frequently. Again, it was often cultural variables which were seen to be key in the improvement or otherwise of working relationships. On balance the judgement was favourable, with comments simply indicating satisfaction with a positive attitude, for example:

> I think the fact that there is more sexual and physical abuse cases coming to the fore we work a lot closer with social services and have a greater respect for each other [ewo 5, T2]

> Yes the contact with social services has been the area where improvement has been greatest as I indicated earlier there was often a feel that they knew things that we didn't and actually I certainly ... early to mid 80's there was a situation where they actually felt they didn't need or couldn't tell us all about certain situations in my experience. That doesn't seem to be the case now .. and I think that's right because schools have a great deal of responsibility in highlighting children's problems and they're nearly always the first agency to see and initiate responses to children's difficulties.. therefore they need to know about children's difficulties in order to deal with the child in school .. I think there was a feeling in the past that social .. social services felt they were the only people who could deal sensitively with the information [head 6 , T2].

However, sometimes the message was more mixed, for example:

> I do have to say that there are occasions when we when a particular department and I do have to say that invariably it is social services will ring us and say have we got any concerns in a very cloak and dagger type manner and we say no, should we have but there's nothing forthcoming on the other end alright? That is not always the case ... In

288

the last 2 years since they've set up core key . .you know core workers to work so that we don't just arrive at a case conference and each give our bit and ne'er the twain shall meet either before or after . it's it is a lot better so that, you know, inter-agency that way is quite a lot better but in the initial stages we very often don't get to know until a letter drops on our desk inviting us to a case conference... It can be a little bit infuriating given that we're all here for the welfare of children and sometimes when the case conference letter drops on your desk on the day of the case conference it does make life a little difficult because you're then scuttling around trying to gather information to take with you [...] I just feel there needs to be a better working relationship certainly, you know, with social services and welfare officers because we are .. we don't carry a caseload of perhaps a few weeks we could be dealing with a family for anything up to five years and so we do have a reasonable knowledge of our families and we you know very rarely are we refused access [ewo 6, T2]

or

I think from where I work anyway we work very closely with social services even its just ringing them for advice we don't know if we should be referring something .. we feel free we can pick the phone up and talk to them and be talked through a situation. The only thing I would say is that sometimes I feel we are handmaidens to social services and we can be pushing information at social services .. this is when children are on the register.. when really social services, the key workers, could be ringing us and saying .. ringing us more often I should say and saying have you seen this child recently.. how are things rather than us chasing and saying you know you ought to know various things [sn 2, T2].

The solely negative comments on social services departments were sharply focused on particular aspects, for example:

What has got worse is one aspect is the lack of flexibility on the part of social services in dealing with attendance matters which has been brought about through the Children's Act in the last year. They're almost exonerated from dealing with those problems [ewo 2, T2]

or

... since social services officers have moved away we feel we have lost touch with them. Also they have cut back a lot of their caseloads so there is not the same reason for contact [sn 10, T2].

The fact that the heads, school nurses and education welfare officers most

frequently referred to the social services department no doubt reflects the pattern of coupling within the system where in issues of child abuse they would be expected to refer to that department as the responsible agency. By the same token, social workers were conversely likely to comment on a wider variety of agencies with which they dealt. This tallies with the observation by Birchall and Hallett [1995:230] that social workers were the "most frequent critics of other's role performance". In particular in the present study their evaluations of the quality of inter-agency working referred to schools and their staff, the police and general practitioners. Other workers occasionally referred to the first two but none to the last. Most frequently mentioned by the social workers were the schools. The message here was of variability between schools. Respondents might comment on schools that were excellent but were balanced by others that were not:

> I think there can be enormous differences for example between schools [sw 7, T2].

or

> Schools ... are on the whole ... I suppose it depends on who ... are on the whole very helpful but sometimes have unrealistic expectations of what social services can and cannot do [sw 10, T2].

The overall impression was that there was some improvement. Where there were difficulties references were focused on schools, particularly in rural areas where coupling was loose because schools had only infrequent contact with the social services department

> I think education it's got better but clearly with some schools which have cause to refer frequently they have more confidence .. but in ... I'm thinking particularly of the rural areas ... there a lack of confidence to be sure as to where it is going, as to what we're doing with it .. what's going on [sw 12, T2].

Teachers have been judged to be poorly integrated into the child protection network [Birchall and Hallett 1995:238] and to perform rather poorly [Hallett 1995a: 320]. In the present study, comments were focused on schools rather

than the generality of teachers. However, it would appear that although there were problems in some circumstances, much depended upon the individual school.

Views on the part played by the police in the child protection system also varied. Hallett observes that a notable minority of other workers prefer not to collaborate with the police [1995a:315] although they were also among those thought to perform their role well [1995a:318]. In the present study, the views of those who commented on the role of the police were evenly divided between approving and disapproving comments. An example of general approbation would be:

> I feel it's improved with some agencies particularly the police... I think there are still a lot of problems but certainly in the field of sexual abuse I think there's been a lot of improvement at the beginning stages of investigation between social services and the police [sw 13, T2].

The suggestion, again, was that a change in culture, beliefs and attitudes had led to a more responsive system in relation to the police. However, this was not always sufficient and other variables offset this effect. Criticisms might be put in the context of general agreements that intentions were good, but that there were inevitable tensions over role, priorities, power and resources as the following replies illustrate:

> I think it's improved because there's been better liaison... between the various agencies... the police have set up the Family Support Unit... which gives them a more specialised unit which has its pros and its cons because whilst they're more experienced and more knowledgeable often they're so busy that they can't do the interviewing when you want them to do so .... and I sometimes think there are issues of .... of power between the police and the social services in that we might think an interview is very important they say they couldn't do it for a week and that's to do with pressure of work but also perhaps our priorities are not always the same . In terms of sexual abuse, we do joint video investigations which raises questions in that in the past it's always been the police's job to collect evidence with a view to prosecution ... physical abuse is apparent ... by its presence you can see a bruise or whatever.... sexual abuse is less easy to prove and that raises issues for social workers in the collection of evidence of sexual abuse and we share that role with the

police, whereas it was the police's role to gather the evidence for prosecution ..social services also have a strong part to play in that in terms of the way they interview and the questions they ask [sw 10, T2]

I would say the quality of working together with the police has deteriorated considerably during the last year since they centralised into the special unit... and that's mainly to do with staffing levels because before that we had every good working relationships with the two officers that just covered our area [sw 11, T2]

Probably resource issues also explained the complaint by a head teacher of having:

far less contact with the local police [head 11, T2].

Although the views expressed by social workers were varied in their critique of the police role, where they did exist the frustrations ran deep. Typical would be the social worker who at the conclusion of the interview returned to this theme:

I suppose although there have been improvements there's lots of room for more really ... I don't think we trust other agencies as we should do . maybe that's about not fully understanding their role ... You know I still get quite frustrated by the fact that the police are looking in terms of prosecution evidence and I'm looking from a therapeutic side you know I want to lessen the trauma for the child .. um.. the police want to gain as much evidence as they possibly can and I think we're in conflict often .... I mean the video interview procedures lessening the trauma for the child .. in reality I think actually it heightens the trauma for the child because often the .. facilities aren't available as readily they were when you just did a face to face interview ... children are taken off down to a police station .. however nice and new .. and well furnished it is .. at the end of the day it's still a police station .. .. For older children especially I think they're very well aware that they are on camera .. and that their.. what they say on the video can be used in evidence ... I recently had a case where there was a little girl who made a very detailed disclosure .. on video and her father was arrested and kept away from the family by the time it had actually taken 6 months to get back to court .. and that little girl has been so traumatised by all ... by ... the length of time it's taken following the procedures . and then what she's also been traumatised by is the fact what she said on that video ..it's constantly about that video .. is actually going to mean that her father is actually sentenced and she blames herself so I question whether ... that procedure is right for the child really.. and that little girl's lost her father .. she's also lost her mum ..because

292

mum has not been able to accept that her husband did this really so it's a little girl really who's been I think traumatised by the system we're operating in .... [sw 3, T2].

The complaint here is not so much about the police, but of a situation where an active criminal justice variable overpowers a child welfare one, creating a system without the flexibility or looseness to respond sensitively to the needs of a child.

The final group of workers to evoke regular spontaneous comment, but only by social workers, consisted of general practitioners. This group, perhaps as much as any other, has been identified as fitting least happily into a co-ordinated framework [Birchall and Hallett 1995: 229-230; Hallett 1995a: 305-306]. It is perhaps not surprising, therefore that apart from the recognition that there were sometimes exceptions, all those who commented, over a third of the social workers, were critical for example:

> We've got some ... we've got some excellent general.. GP practices [...] that know exactly what to do ... on the other hand we've got those that haven't a clue and actually ... are actually dangerous because they don't stick to the procedures [sw 1, T2]

or

> I mean we still have some difficulties from GPs ... who will say it's a break in confidentiality to give any information about families that they are working with ... we sometimes have to say you know the child's welfare and safety is paramount [sw 6, T2]

or

> I think one .. one group that I have experienced difficulties with and couldn't say it's improved really are GPs .... both in terms of investigation .. trying to get appointments and repeatedly having to point out under the child protection procedures the child has to be seen as soon as possible. I think I've only ever had a GP at a case conference twice in five years... they very rarely attend case conferences.... although obviously some do submit written reports but not all [sw 11, T2].

The impression given is of a group of workers that all attempts to improve inter-agency working, including changes to the law, have passed by. The social and

cultural factors which have defended the medical profession in sustained independence since it became established have, in the eyes of other workers, operated to keep general practitioners aloof from involvement in the child protection system. Changing the rules had failed to change the pattern of coupling. Attempts to manipulate the culture had also foundered.

Overall, workers at no stage gave the impression that working with others was a general cause for concern, but there were clear instances where it was apparent that at times, there were undoubted difficulties and frustrations. The perception was clearly that there had been improvements over time. This was reinforced to the extent that, for example, social workers found others more helpful and so were able to reap the advantages of fuller information which they saw as a benefit of working with others, while school nurses who had earlier felt cut off later felt themselves to be more involved. The majority of social workers [9 ex 14, 64%] stressed cultural changes for improvement, embodied in better attitudes. Examples of this have been seen in a number of the examples given. School nurses [10 ex 16, 63%] stressed better processes and, in particular, procedures, for example:

> It's been standardised and regulated to a professional standard of ... The procedures are much better known, I think for instance anything to do with a case conference is in a very set, structured fashion so I think there's a lot of loopholes been closed [sn 2, T2].

This could suggest that, for those at the periphery of the system, improvements were made by changes to the mechanics, which made sure they were brought in. For those at the heart of the system, the key variable was cultural. This was the need to make sure everyone was committed. On their own, though, these factors could still be undermined. The failure of the doctors to respond to the procedural requirements suggests that the cultural variable needed adjustment in order to reinforce the procedural rules. Difficulties between the police and social workers were rooted in sometimes incompatible objectives. Although

resource issues may have exacerbated these difficulties, they were not high in the consciousness of workers. Organisational structures did not particularly feature in their discourse either. The responses had been mixed in the importance attached to procedures in effecting change. However, because of their high profile in policies to deal with problems of co-ordination, they were specifically examined in their own right. The final part of this chapter explores these issues.

Views on procedures

The second round of interviews took place two years after the publication of the final *Working Together* document [DoH 1991]. The local Area Child Protection Committee had just replaced its 1990 procedures with a revised version [ACPC 1993]. Respondents were therefore asked to indicate whether or not they disagreed with a number of attitude statements concerning procedures following the government's *Working Together* papers. This method was used to try to obtain a quick but useful response near the end of a lengthy interview, when the desirability of more detailed questioning was offset by the need to keep the interview within manageable proportions. In introducing this set of questions, the reference to *Working Together* was occasionally confusing, indicating that several years of policy angst in the Department of Health had not necessarily penetrated to active workers, for example:

> Can I just ask you *Working Together* what is this paper? Is it the new file [ie the revised procedures] that has just come through? [sn 2, T2].

In practice respondents were guided to answer in terms of the local procedures as they had experienced them. The bulk of their experience would therefore have usually been gained working with the local 1990 procedures produced following the 1988 version of *Working Together* with the most recent using the then newly produced 1993 procedures. What effect had the procedural guidelines had on the workers who were expected to implement them? The following analysis examines this question in the light of the theory of loosely

295

coupled systems.

In a loosely coupled system, it might be predicted that attempts to produce change would simply be absorbed and the behaviour of people in the component parts would be unchanged. Alternatively, any impact would be localised and while it might produce changes in one part of the system, it would not affect other parts. On this basis, procedural guidelines would have a partial impact or no impact at all on the way child protection work was carried out. Although Hallett found that it was 'usual for the procedures to be followed fairly closely' [1995a: 272], suggesting they were a means of tight coupling, there was also evidence from Birchall and Hallett's study which showed that there was a belief by workers that procedural guidelines were often not complied with [1995: 68], indicating a lack of impact in a loosely coupled system. In the present study, in order to test the extent to which the loosely coupled model fitted the child protection system, respondents were asked two questions. First, they were asked, not whether they or others complied with the procedures, but whether they agreed or disagreed with the statement 'I have not significantly altered the way I work as a result of the introduction of procedures following *Working Together*'. The results are shown in Table 11.2.

Table 11.2. I have not significantly altered the way I work as a result of the introduction of procedures following *Working Together*				
	Social workers	Head teachers	EWOs	School nurses
Disagree	5 (35.7%)	2 (15.4%)	1 (11.1%)	4 (25%)
Tend to disagree	4 (28.6%)	1 (7.7%)	3 (33.3%)	6 (37.5%)
Tend to agree	2 (14.3%)	3 (23.1%)	1 (11.1%)	1 (6.3%)
agree	2 (14.3%)	7 (53.8%)	4 (44.4%)	5 (31.3%)

The numbers are too small for sophisticated statistical analysis but a pattern does seem to be discernible. The procedures do seem to have had an impact on certain parts of the system but this has not necessarily spread to the system as a whole. The social workers and school nurses both believe they have altered the way they work. The head teachers do not. The education welfare officers are more evenly divided. This makes sense for the social workers, insofar as they are central to child protection work in the new procedures and have a prime responsibility for their operation. The signs of tighter coupling with the school nurses are consistent with the findings already discussed which have shown them to have become less isolated than before. The position of the heads as more peripheral and less affected is confirmed [see also Hallett 1995a: 260]. This may reflect the fact that child protection work affected them rarely - as one head of a small rural school said of the procedures:

> yes I've got them here somewhere but it's in the depths of one of those things [pointing to a cabinet] I go into if I need it ... not one I've read from cover to cover [head 13, T2].

Conversely, the minority who thought they had altered the way they worked were

quite emphatic about it. Some workers may, of course, have felt that they did not need to change because it was the procedures which had caught up with their good practice rather than leading the way. Others, as Hallett [1995a:266] points out, may always have accepted procedures as customary.

This measure, suggesting that the child protection system was loosely coupled so that procedural changes only affected it partially, was reinforced by the replies to the second question designed to test whether the system fitted the loosely coupled model. This question asked respondents to agree or disagree with the statement 'workers would work as well together even if child protection procedures were not in place'. Table 11.3 shows the replies.

Table 11.3. Workers would work as well together even if child protection procedures were not in place				
	Social workers	Head teachers	EWOs	School nurses
Disagree	11 (78.6%)	5 (38.5%)	3 (33.3%)	10 (62.5%)
Tend to disagree	3 (21.4%)	2 (15.4%)	4 (44.4%)	2 (12.5%)
Tend to agree		3 (23.1%)	2 (22.2%)	2 (12.5%)
agree		3 (23.3%)		2 (12.5%)

The picture here is less clear cut but confirms a number of points. Social workers at the heart of the system related most positively to the adoption of procedural requirements. This is in line with Birchall and Hallett's finding that it was overwhelmingly social workers who found guidelines helpful [1995: 67] and who thought failure to comply with them was important [1995: 73]. While other workers were generally supportive [cf Hallett 1995a: 263], the head teachers are again revealed as the group most likely to be distanced from procedures. The

type of explanation offered for the lack of need for procedures called upon underlying values which it was hoped would provide the necessary impetus to act appropriately:

people are in the job because they care about children [head 8, T2].

Advocates of the procedures were more cynical:

I totally disagree with that ... there'd be chaos [sw 1, T2].

These two measures, then, support the proposition that the system was loosely coupled. Changing the rules was noticeably significant for parts of the system but not others. Perhaps part of the difference in the pattern of responses to the two items lies in the fact that people were less ready to acknowledge the need for change in their own practice to which the first item asked them to admit, the second allowed them to focus on the need for procedures to change the behaviour of others.

Another characteristic of a loosely coupled system which was noted was that it retains considerable scope for personnel in it to exercise discretion and to negotiate meanings. Following procedures would appear to run counter to this. This effect was confirmed by Hallett to the extent that she concluded that procedures 'had made a significant contribution to the institutionalisation and routinisation of inter-agency collaboration in child protection' [1995a: 272]. However, the paradox has already been noted that significant numbers of workers could believe at the same time that procedures were being followed and yet there was failure to comply fully with them. This suggests a flexibility allowing for the exercise of judgement implying a looser coupling mechanism than might at first appear. There could be adjustments to the degree of rigour to which they were followed or there could be judgements made as to the necessity or desirability of certain actions being followed. Even where procedures are followed, however, there may be scope for professional judgement and discretion to negotiate appropriate courses of action. Procedures may offer only a general atlas which lacks the refinement needed as

Table 11.4. Although the guidelines outline procedures, the important decisions are still a matter of judgement for the workers involved

	Social workers	Head teachers	EWOs	School nurses
Disagree		1 (7.7%)		
Tend to disagree	3 (21.4%)	1 (7.7%)	2 (22.2%)	1 (6.3%)
Tend to agree	5 (35.7%)	3 (23.1%)		5 (31.3%)
agree	6 (42.9%)	8 (61.5%)	7 (77.8%)	8 (50%)

Table 11.5. The procedures have removed the uncertainties from working together

	Social workers	Head teachers	EWOs	School nurses
Disagree	3 (21.4%)	3 (23.1%)	4 (44.4%)	1 (6.3%)
Tend to disagree	5 (35.7%)	5 (38.5%)	2 (22.2%)	1 (6.3%)
Tend to agree	4 (28.6%)	3 (23.1%)	1 (11.1%)	6 (37.5%)
Agree	2 (14.3%)	1 (7.7%)	2 (22.2%)	8 (50%)
No Response		1 (7.7)		

a guide in a particular situation. A procedural manual can, as a number of respondents observed, provide a checklist and general point of reference but workers still need to exercise their skills and judgement. In order to check this interpretation, respondents in this study were asked their view on the statement:-

'Although the guidelines outline procedures, the important decisions are still a matter of judgement for the workers involved'. As Table 11.4 shows the majority endorsed this proposition and with it the idea that there was still significant looseness in the system at critical points. If there are these significant elements of judgement left in the system, then it would be expected that events would continue to be unpredictable and also workers would continue to experience uncertainty. The scale item used to check this [see Table 11.5] demonstrated that the situation was slightly less straightforward than this. Workers were asked to respond to the proposition that 'The procedures have removed the uncertainties from working together'. The majority of social workers, head teachers and education welfare officers disagreed with the proposition that the uncertainties had been removed, although about a third or more of them thought that they had been. The one head who declined to make a judgement pleaded 'I don't feel I know the procedures sufficiently' [head 13]. For the school nurses, however, it was a different story. They overwhelmingly thought that the uncertainties had been removed. This is perhaps related to their position shown at various points in the survey as the group moving from their more detached position on the periphery to a better recognised and involved position. For them the uncertainties which had been removed concerned basic issues of whether others would remember them, would they be asked to make a contribution and so on. The increased certainty there outweighed any more sophisticated uncertainties about the handling of situations once they were involved.

Reference has already been made to the potential for procedural guidelines to foster a move towards routinisation of activity. While this can be helpful in ensuring basic standards of practice [Hallett 1995a:265] and reducing the stresses of decision making, there is a converse danger that the rules may not always be sensitive to the nuances of particular situations. This could lead to the triggering of inappropriate responses. This phenomenon was recognised by the respondents in Birchall and Hallett's study who raised 'Questions about the

301

relevance or realism of the guidelines in all situations' especially when they were explaining their own 'occasional defaults' [1995: 72]. If procedural rules forced workers into doing the wrong thing, either by omission or commission, this would be a manifestation of over-tight coupling which could threaten parts or all of the system. To what extent, then, did workers feel the procedures required them to do things that were not appropriate to the situation?

Table 11.6. The procedures sometimes require workers to do things that are not appropriate to the situation				
	Social workers	Head teachers	EWOs	School nurses
Disagree	2 (14.3%)		1 (11.1%)	6 (37.5%)
Tend to disagree	5 (35.7%)	2 (15.4%)	1 (11.1%)	4 25%)
Tend to agree	4 (28.6%)	8 (61.5%)	5 (55.6%)	3 (18.8%)
agree	3 (21.4%)	2 (15.4%)	2 (22.2%)	3 (18.8%)

The picture was mixed. Social workers were evenly divided. Head teachers and education welfare officers usually agreed that there could be a problem. The school nurses are scattered in their response but are more likely to disagree with the proposition and to do so unequivocally. The dangers of over tight coupling leading to inappropriate responses, then, are recognised but only marginally more often than not. The school nurses are again confirmed as approving the procedures. The balance of view that procedures can lead to inappropriate responses is produced by the views of the head teachers and the education welfare officers. This could reflect their less frequent direct involvement with the procedures or it could be that sometimes the procedures upset the normal educational processes or leave heads holding uncomfortable situations while they wait for appropriate others to act after a referral. It may

also relate to the type of concerns expressed about working with others where there is a loss of control. One might have expected similar considerations to have applied to the school nurses, but this is again offset by the fact that their overall experiences of changes on the child protection system have been of more satisfying involvement. Overall, perception of the tensions of unsuitable tight coupling in parts of the system are offset by contrary perceptions elsewhere.

It may of course be that the main contribution of procedures to the system of child protection is symbolic in the way that was suggested by Meyer and Rowan [1983]. Procedures are part of a ritual and symbolic structure, which in the cases of child protection could also include systems like the child protection register and an institutionalised system of conferences, to reassure everybody that the task is being properly performed. The focus on these symbols could also have a positive effect in keeping the issues high in people's consciousness thereby promoting the will to work together and deal with the problems raised or more negatively phrased acting as a goad to action. What is important is that the structures are there, as much as the technicalities of process which they involve. To some extent, workers treat them in this way, for example when they feel procedures are a form of protection from criticism because they have followed them [Hallett 1995a:265] or when they find them a threat because they know that they provide a standard not of outcome but of process against which they may be judged or think of them as 'a big stick' [sn 2, T2]. The suggestion here is that procedures give the idea of working together high visibility, but do not necessarily make the fulfilment of that idea any easier. In responding to a scale item along these lines respondents endorsed this idea. This agreement was shared by all categories of worker. It can, of course, be debated what is understood by the term 'easier'. Working together may be seen as an activity like a gymnastic move with a given degree of difficulty unchanged by instructions on how to do it. However, if understanding the principles in the guidelines and implementing them to effect the relevant moves is seen as part of the activity

itself, then the successful completion of the task or manoeuvre should be easier because of their existence. To the extent that there is an implication that rules are helpful in carrying out a task while in practice they fail to make it any easier, a myth is being created which has symbolic rather than substantive value. The symbol, though, may be useful in protecting the system. Working together is

Table 11.7. The procedures highlight the need to work with other agencies but do not make it any easier				
	Social workers	Head teachers	EWOs	School nurses
Disagree	1 (7.1%)	3 (23.1%)		2 (12.5%)
Tend to disagree	3 (21.4%)			
Tend to agree	6 (42.9%)	7 (53.8%)	5 (55.6%)	8 (50%)
agree	4 (28.6%)	3 (23.1%)	4 (44.4%)	5 (31.3%)

confirmed as an important activity and everybody is reassured that the means to achieve this are in place.

Commentary

The system overall was at no stage perceived by the generality of workers to be in a state of breakdown. Any criticisms which workers made were outweighed by positive comments. Where deficiencies were identified, it would be over simplistic to suggest that they related to a system which was too tightly or too loosely coupled. The relationship between outcomes and the balance of couplings was complex. The evaluations, at Time 2, of the experience of working with others suggested that the changes to the system had, on balance, been beneficial. The tenor of replies suggested that the balance of the shift was in the direction of tighter coupling. Nurses felt more involved; social workers

felt others were more responsive. Explanations for the improvement reflected the mix of variables at work in coupling the system more tightly, with the social workers highlighting a change in culture while the school nurses highlighted the improved mechanics. In reality, the situation may be even more intricate with mechanical procedures fostering a new culture which in turn allows the machinery to operate.

Views on the impact of child protection procedures showed that the wider system could still be characterised as loosely coupled, although procedures had had some impact. They were confirmed as more potent for the social workers and the school nurses that the others. The former thought they had affected their own practice more, they saw them as more important and thought they left less discretion for workers. The school nurses also thought they removed the uncertainties from child protection work. Although it was the social workers and school nurses who thought they were most significant, it was, paradoxically, the heads and education welfare officers who feared they might become too tight in leading to unnecessary actions. This would be explained by a general distrust of procedures by those in education. Such a feeling would account for a reluctance by workers in that setting to change their practice, doubt the efficacy of the procedures and to seek out areas of discretion to avoid what they saw as potentially oppressive rules. The need here would be to modify these attitudes. This would involve either easing the procedures which might affect the perceptions of others, or convincing doubters of their worth. The symbolic significance of procedures was agreed by all. They were confirmed as a mechanism which could help to tighten the system by creating a culture in which the importance of working effectively with others was valued.

The picture which emerged was one that showed that the variables which were significant in working with others differed for the occupational groups. The changes which had taken place had affected them differentially. Overall, it

would be justifiable to argue that the system had become more tightly coupled. The impact though was greater for some workers than for others. The coupling variables which were felt to be important in bringing about the change also differed. Once again, the image was of complexity and the importance of pulling a range of levers to bring about desired changes.

CHAPTER 12
CONCLUSION

The provision of effective child care and protection services has continued to be a controversial high profile issue. At the start of 1997, an inquiry into the operation of services working with the family of Rikki Neave, a child abused by his mother who was subsequently acquitted of his murder, reported a raft of weaknesses which included problems of co-ordination. A medical practitioner had not been brought in to undertake a medical examination, the opinion of a child psychologist had been ignored and there were problems of poor communication between agencies and departments [*The Times*, 10/1/97 p. 5]. At the same time, the government was reported as ordering a review of the Children Act, 1989 [Valios, 1997]. We might be led by such events to question the extent to which anything had changed. Were these apparent failures in co-ordination the same now as before? Had all the effort put into improving this aspect of social provision been to no avail? It is clear from this study that such general conclusions fail to do justice to the changes which have taken place and to the improvements to co-ordination and the experience of working together.

This project set out, using a framework derived from loosely coupled systems theory, to explore and measure change in inter-professional relations among those expected to work together in the interests of children. It was stimulated by broad questions. Why was co-ordination so persistently an issue? What impact had changes in policy and administration had? These issues were examined by surveying the development of policies concerned with problems of co-ordination and by exploring, through fieldwork, the perceptions of relevant workers. The hallmark of this study was the emphasis on *change* and it is this which makes it different from others. Recent research by investigators such as Birchall and Hallett [1995] and Hallett [1995a] has considered the problems of

working together and I have frequently referred to this work. Their studies, however, differed from this one, in that they took a snapshot at one point in time while this investigation added a time dimension by returning to repeat the survey. In particular, the fieldwork compared the expectations of workers of what their work would look like at clearly separated points of time. It was thus possible to identify elements of stability and change in the child welfare system and to see it as a dynamic entity, rather than a static structure.

The theory of loosely coupled systems was chosen to provide the conceptual framework for the study because it provided a model which dealt with the issues of complexity and uncertainty, which were typically to be found among organisations dealing with children and concerned with their protection from harm. This theoretical perspective was valuable in a number of ways. First, the different *voices* of the theory generated a number of specific questions about the child welfare system. Second, it became possible to Identify general propositions about the nature of *change* in the child welfare system and how movement in the tightness of coupling might be measured. Third, it provided a perspective on *services* in the system to reveal how they were affected by change. These, *voices*, *change* and *services*, aspects will be examined in turn and then the usefulness of *loosely coupled system theory* will be reconsidered.

Voices

The theory of loosely coupled systems, introduced in Chapter 2, provided a framework which allowed a variety of applications. The types of approach were classified into a number of voices identified by Orton and Weick [1990]. Exploring these voices raised a series of issues about how far services for children would reflect the characteristics of loosely coupled systems. Revisiting these voices provides a useful starting point for reviewing the findings of this study and each will be considered below.

The voice of causation.

This voice was concerned with issues of why systems became loosely coupled. Were there grounds for expecting services for children to be loosely coupled? The questions raised concerned issues of the extent of clarity with which actors could see the system; the clarity of goals; the possibility of achieving goals with the means available; the extent to which workers or groups of workers were involved in the system and the extent to which workers were free to interpret rules and impose meanings and methods. These factors affect the legitimacy with which a system can be viewed as loosely coupled. They are reviewed in turn. The evidence suggested that, while the system had changed, it continued to display characteristics that would lead to loose coupling.

Taking first the questions of clarity and the possibility of achieving goals, showed that there were frequent grounds for expecting the system to be loosely coupled, but the movement was for these to tend to diminish. The views expressed by respondents indicated that there were certain aspects that were, in any case, clearly defined. All were agreed the situations described in the vignettes merited intervention and overwhelmingly they accepted the involvement of a range of workers, but, beyond that, there was always scope for differences in perception, for example over what particular agencies would do. As we have seen, the picture cleared over time leading to greater agreement in some respects but still left scope for disagreement. It was confirmed that workers often had only a partial view of the system. They focused on the bits they knew - so, for example, head teachers were more confident about school linked services and their contribution but did not necessary identify community based actors, such as family doctors. The review of policy showed how the clarity of goal was confused by a series of switches of emphasis from the family, to the child and back again. At the point of delivery, the vignettes revealed that there was scope for goals to be uncertain. As the choices of agencies and workers showed, goals could vary between educational, social or legal orientations. There could

be variation of view within professional groups as well as across groups. When the goal is unclear it is not possible to indicate whether it can be achieved. In the present study, respondents were generally positive that the system was working and there was no cause for alarm because of a failure to meet its goal. Over time, there was a tendency, particularly among social workers and school nurses to think it had become even better. However, given the range of possible goals, it is difficult to find a measure of whether or not this general confidence was justified. Policies in the 1990s sought to reduce this problem by emphasising the goal as *child protection*. The efficacy of the tools available to meet this challenge also remained difficult to measure. Research for the Department of Health [Farmer and Owen, 1995: 307] indicated that, although it was not necessarily the case, professional intervention could have a positive outcome. Working together can be seen as one of the tools for successfully achieving goals, but it remains unclear how far this was a direct factor in securing positive outcomes. In the present study, respondents were generally satisfied with joint working. This would suggest that lack of the right tools, in terms of working together, was not an issue causing the system to fragment. Indeed, our findings indicate that confidence had increased over time.

When the involvement of workers in the system was examined, it showed that lesser involvement for some would justify the description of the system as loosely coupled. There were always agencies or workers that were seen by some as playing a part, but not by the majority of respondents. There were, too, fluctuations between the vignettes, with the involvement of workers and agencies depending on the construction of the problem, for example, the educational psychologist was twice as likely to be named in the vignettes involving the case of David as for either of the other children described. The pattern of involvement changed over the years. If anything the balance was to increased involvement of a number of types of worker. The school nurses and the police, for example, moved in between the two survey times. There were no dramatic

departures.

Lastly, looking at whether workers were free to interpret rules and to act like 'street bureaucrats' confirmed that these opportunities existed. Even though the emphasis on rules and procedures had increased, workers still felt that, at key points, they had to make decisions and decide how to apply the rules. There was also the possibility for competition between those in the system to impose their meanings and methods on situations before them. The problems outlined at Time 1 reflected these conflicts between social workers and others, when fights for control were reported. At Time 2, concerns were occasionally but strongly expressed by social workers at problems arising from conflicts, caused by their seeing situations as welfare concerns while the police saw them as criminal cases. At the same time, though, there was evidence that some conflict had decreased, with reports by respondents of greater commitment and better attitudes towards joint working. Some battles were still being fought. The need to impose meanings and methods on general practitioners remained.

The evidence indicates that some of the causal agents for loose coupling had become less potent than before.

The voice of typology
This voice identified varieties of loose coupling. The main questions raised were related to the application of the theory as an aid to understanding systems. As such it informed the present study. More specific questions raised issues first, about the relevance of different types of coupling and how the theory could shed light, through them, on the relationships between different parts of the system and second, about the impact of the wider social and political environment and the importance of ideas and cultures.

This study examined the two main types of coupling identified by the theory.

First, coupling could relate to structural features and second, it could be based on more abstract entities such as events, activities and ideas. Both types were relevant to this study, but at different points. The former was particularly pertinent when policy was discussed. Chapters 3 and 4 traced how different configurations of services were suggested to achieve desired goals. Reaction to the wider political and social environment was most clearly shown at this level when change was stimulated by climates of public concern, following a perceived breakdown of services. The latter was relevant at the level of implementation and formed the basis of the fieldwork looking at the views and behaviours of participants, discussed in chapters 7 to 11. Ideas about the purpose of services were relevant at both the policy and implementation levels. At the policy level they shaped organisational structure and strategy, while at implementation level they shaped responses. Through the fieldwork it was possible to identify changing cultures towards working with others which explained for some, like the social workers the belief that working together was improving.

The voice of direct effects

This voice says that loose coupling produces desirable consequences and so raised questions about the implications of changed states of coupling. Again such concerns have informed the general propositions which were developed and have been discussed above. Changed states of coupling over time had brought with them general satisfaction for workers, such as the social workers and school nurses. They had, however, also brought new concerns, for example arising from greater involvement by the police. Other questions raised, concerned the scope for cognitive and behavioural discretion and the relationship between tightness of coupling and issues of timescale. The scope for discretion had decreased around the core to the extent, for example that more workers believed that there was no choice but that the social worker from the local authority should be involved. However, there remained large areas of discretion,

revealed, for example, by the accounts in chapter 10 of the contributions of agencies and workers. Those at the core, the social workers, and those being drawn to the core, the school nurses, thought the revised balance was an improvement. Those at the periphery, the head teachers and education welfare officers were less sure. The issue of timescale produced a mixed response. Loose coupling was a problem, for example for the head teachers who wanted action rather than delay [see chapter 11] but conversely over-tight coupling also led to difficulties. This was illustrated buy the complaints from social workers, where too tight coupling, imposed by the legal process, interfered with their goal of promoting the welfare of the child [see chapter 10].

The voice of compensation

Here the questions raised concerned possible strategies to remedy problems arising from loose coupling. Were changes desirable? To what extent had enhanced leadership been tried? Had attention focused on particular behaviours or the promotion of shared values? As has already been observed, the policies described in chapter 4 were predicated on the idea that the system needed to be made tighter. Their emphasis was primarily focused on particular behaviours which were laid out in the formal procedures that were developed. The possibility of change being engendered by strong charismatic leadership by an individual lay outside the scope of this study. However, Chapter 4 showed how the changes which were introduced had the effect of putting social services departments in a stronger leadership role than they had been hitherto. Their role, as the arbiter of the welfare of the child, was strengthened and their power to require the co-operation of other agencies was made specific. The changes to the law also introduced new value systems. The welfare of the child was made the over-riding consideration. The guidelines made clear that child protection was also a criminal matter which should involve the police. Respondents' evaluation of working together indicated that these strategies had had an impact. The changing culture which was emerging suggested that the

new values were being absorbed. However, there remained parts of the system such as general practitioners and some schools where this was not the case.

The voice of organisational outcomes

This voice questioned what happens when a system is loosely coupled. As well as raising issues concerning the success of the child welfare system, it also prompted question to do with how far the system had persisted unaffected by pressure to change; how far members of the system had adapted to sustain its continuing function; how far participation and debate were allowed.

Measuring how far the system had remained unchanged depends on how far those changes which have taken place are seen as significant. In some respects the major changes in structural terms occurred as a result of the 1948 Children Act and the 1970 Local Authority Social Services Act. The tail end of the century set services for children in a sea of change, with market based philosophies for organising public services established and general changes in local governance. The effects of these are still not clear. At the time of writing organisational changes had not been significantly felt. It could be argued, however, that those within the system had adapted to make sure the system continued within the existing structures. Social workers, for example, had changed their approach to reflect the child protection orientation and had adapted to working much more closely with the police. The changes which had been introduced fostered a decision making style which encouraged participation and accepted debate. The procedures developed in the *Working Together* papers had the effect of ensuring a full range of workers was involved. The expectations by workers seemed to be that, despite fears about too many people being involved, more people should have a part to play in handling the situations outlined in the vignettes. The overall system survived, but important modifications had been made to its functioning.

Between them the 'voices' raised issues which were relevant to services for children. The conditions for creating a loosely coupled system were present. Workers responded in ways that suggested the characteristics of a loosely coupled system. The consequences, strengths and weaknesses of a loosely coupled system could be identified. The heuristic value of a loosely coupled systems framework was confirmed. The next section reviews the applicability, in this study, of the theory for explaining change in services for children and looks at the extent to which it was possible to measure movements in the balance of coupling.

Change

Looking at the development of services for children, described in chapters 2 and 3, through the spectacles of loosely coupled systems theory, made clear that one of the reasons that inter-agency relationships have consistently been seen as problematic has been because services have constantly had to adjust to new expectations. The job they were expected to do changed. Because the job changed, new patterns of coupling were required if new tasks were to be successfuly completed. Agencies were variously expected to have a focus on rescue, prevention, the needs of the deprived child, the centrality of the family and the protection of the child. These changing expectations reflected changing paradigms, as the emphasis shifted from the use of medical/therapeutic to socio/legal models. New demands required new organisational patterns. The problem was not necessarily one of coupling that was too tight or too loose. It was one of tightening some couplings while loosening others. Those couplings holding the system to old ways of working needed to be eased while those pulling it to the new needed securing. The overall balance, though, could remain similar in the new context to what it had been before.

It was when attention was focused on a particular aspect of child welfare, the problem of child abuse, that the system was most frequently seen as exhibiting

315

the problems of a loosely coupled system in need of tightening. Workers did not react to one another when they should have done. There was a need for *compensation*, revealed in most of the child abuse inquiries in the last quarter of the century. However, the need for *more loosely* coupled systems was also revealed, in particular in the case of Cleveland. Here social workers were seen as responding too readily to the concerns of the paediatrician. What was needed here was more discretion. Such cases were, however, a minority. The shortcomings were usually characterised by failures of agencies within the child protection system to communicate with one another and react to concerns. This was seen a problem of co-ordination. Considerable effort, by central and local government, was made between the two sets of fieldwork to try to improve co-ordination, through issuing of guidelines and legislative change. The calls for improved co-ordination of services for children represented a demand for the system to be tightened.

While for some writers, such as Corwin [1981], co-ordination was seen as a mechanism to compensate for the deficiencies of loose coupling, for others, like Meyer and Rowan [1983], activities aimed at this might be interpreted as symbolic. Their function was to reassure the public that problems were being tackled. In these circumstances, a loosely coupled system would fail to respond to attempts at co-ordination, just as it failed to respond to other stimuli. This study, therefore, developed a measure to test whether or not the system was tighter, following attempts at increased co-ordination. I argued in chapters 2 and 5 that, when a system becomes more tightly coupled, the greater predictability of events will mean that participants see a clearer picture of their world. As this happens, there will be greater levels of agreement among them about what this world looks like. Thus, a central proposition of the research was that increased levels of agreement between workers would be indicative of a more tightly coupled system. Conversely, increased disagreement would be indicative of a more loosely coupled system. The extent of change and levels of agreement

were explored in chapters 7 to 10. The picture revealed was one of considerable complexity. It was clear that there were many areas where workers had responded to events. Views had changed. Tighter coupling, measured by increased agreement, was identifiable on a number of dimensions. There was, for example, more agreement about the numbers of workers who should be involved. There was tighter coupling around the core of activity needed in the situations described. There was greater recognition that the social services department and the social worker should play the major part. This was reinforced by more delicate indications of increasing agreement on domain issues. However, the patterns of change showed that it was too simple to think always of the system, overall, becoming tighter or looser. On a number of dimensions it was clear that coalitions were forming and dissolving. Selected sub-systems were altering the strength of coupling on particular dimensions but this did not necessarily mean the system overall was more tightly coupled. School nurses and social workers, for example, moved closer in their recognition of the school as a source of information, but this shift was not mirrored by other workers. On other occasions the views of workers may have all indicated a potential for tightening, to the extent that they were all moving in the same direction, but because some moved faster than others the extent of disagreement between them may have remained. This was seen to be the case, for example, in attitudes towards police involvement where social workers moved much more dramatically in their view than any other worker. It was not necessary to push far into the detail of the handling of situations to discover different interpretations of what would happen. Ideas on the nature of direct work with the child and family remained as varied as ever. At times, disagreement may have increased because one set of worker had changed when others had not. Social workers, for example were more likely to recognise the significance of *procedures* at Time 2, when others had not changed in this respect. It would, though, be fair to conclude that the system had become tighter around its core. The overall rate of tightening was slow, even if some of the localised changes had been dramatic.

The system continued to retain sufficient ground for different interpretation and disagreement for it to be thought of, more generally, as loosely coupled.

It would appear from this that activities aimed at co-ordination had been more than just ineffective symbols. They could have had an impact either directly, by influencing what people did thereby changing professional practice, or indirectly, by reinforcing meanings and activities because they highlighted key issues and values such as the importance placed on working together. In other words they not only coerced or required workers to act in particular ways, but they also helped to change the cultural climate. The analysis of views about the impact of child protection procedures supported this. Procedures were seen as important in highlighting issues although they were not always seen as helpful. They were not, however, purely symbolic. Social workers and school nurses believed they had had an impact on practice, indeed they believed there had been a general improvement in inter-agency work. This was borne out by the explanations of what the school nurses saw as an improved system of working together and, less sympathetically, by the head teachers and education welfare officers who feared *procedures* could lead to undesirable outcomes, and were less ready to see the system overall as improved.

As far as those working in the child welfare and protection system were concerned, the Meyer and Rowan [1983] thesis that much activity is just symbolic was not substantiated. Workers perceived the changes as having real impact. However, it continues to be possible that the thesis would hold good in terms of whether or not the system was more effective in preventing child abuse than it had been. Research into these issues lay outside the scope of this study. There is little information on whether or not children are better protected than they were. Despite the rhetoric of alarm stimulated by cases such as that of Rikki Neave, though, research would suggest that procedures and other changes have had an effect. Farmer and Owen concluded in respect of

318

the child protection system that "for some children and families there were considerable benefits" [1995: 326] but they expressed concern, too, that this may be to the detriment of meeting the wider needs of families and children [ibid p 328]. Improvement in co-ordination can also be seen as one of the factors contributing to the success that Pritchard [1996] attributed to the child protection services, in reducing child homicide better than other western countries as well as providing a service appreciated by consumers. Although limited, these types of data confirm the conclusion of this study that, insofar as they are symbols, the activities aimed at improving co-ordination have been potent. Behaviours have changed and new cultures been created. The impact had not however spread evenly throughout the system and had been experienced by different workers in contrasting ways. The next section reviews the impact for those working in the system of the changes to it.

Services

Exploring ways in which workers perceived their world, disclosed a number of important changes in how they fitted into the system. Some of these changes may have been anticipated as a consequence of policy change, but others were less anticipated. One such unheralded change was the establishment of the school nurse as a significant person in inter-agency working for children. There was increased recognition of her involvement by both social workers and head teachers. She was increasingly seen by social workers as their first contact into the school health services. Her place at the conference table was increasingly recognised by both social workers and head teachers. This greater recognition was appreciated and commented on by the nurses themselves. In the 1980s, nurse respondents had suggested that there were problems of communication when working with others. In the second round of interviews, they were much more positive about communication patterns. Nurses had also achieved greater penetration into social work systems. In the first round of interviews, a quarter of social workers had not had contact with a school nurse concerning a child in

319

the previous year. At the time of the second interview, there were no social workers who had not had contact. Nurses also reported increased contact with senior personnel in the social services department.

The reasons for this change in the acceptance of the school nurse reflect a number of factors. The local procedures introduced in the study area in 1993, for the first time explicitly identified, as an alternative to the health visitor, the school nurse as a person to be invited to child protection conferences. However, although the school nurses were as positive as any about the value of procedures, particularly in terms of reducing uncertainty, this change was probably too recent to account for the increased recognition of the school nurse. The explanation runs deeper than this. The school nursing service had increased its professional credentials since the mid 1980s. The local school nurses were more experienced by Time 2 and, like their counterparts nationally [Fletcher and Balding, 1992: 12-13], were better trained and qualified. The fact that they had become more tightly coupled into the system, reflects an increased confidence in their contribution as much as an obedient response to a set of changed instructions

The example of the school nurses in this study, suggests that the Department of Health could be more positive in its view of their role in child protection. The revised guidance on child protection [DoH, 1995] "acknowledged" the "evolving role of the school nurse in prevention and recognition of significant harm" [para 2.50]. This was still lukewarm in comparison to the "key role" accorded to the health visitor, the "importance" of which employing trusts "must" acknowledge [para 2.44]. With the increased standing of school nurses, the department of health requirements that the designated senior nurse should have a health visiting qualification [DoH, 1995: para 2.31] can also be questioned, particularly

now that the school nursing qualification is to have the same rigour and status as that for health visiting, leading to the designation of specialist practitioner [UKCC, 1994].

Head teachers emerged more tightly coupled into the system than before, but still as a group often more loosely pulled towards the core than others. This tallies with Birchall and Hallett's observation that head teachers were less likely to think in terms of contacting social services than other professionals [1995: 162]. The heads were least like other workers in their occupational careers. They had been in them longer and had less often, indeed rarely had other jobs. If gender is a factor in relationships, then it should be noted that the heads were distinctive for their male majority and this was even more marked in the second sample, with fewer men in the other occupations. The responses of the head teachers to the vignettes, showed a complex pattern of relationships. Over time, their views had moved in line with the general orthodoxy but this fell short of bringing them in line with others. Their pattern of contact with others was also significant, in that while they mirrored others in increasing their contacts with other types of worker, they remained the people least likely to have contact with the range of workers dealing with children. This was despite the fact that the head was likely to be the person nominated in a primary school to liaise with social services and through whom others should channel their concerns about child protection. However, while not all heads had had contact with social workers, education welfare officers and school nurses, other workers had all had contacts with head teachers. Heads are therefore important receptors but not always transmitters.

Changes to the system had, in many ways, had most effect on social workers. This should not be surprising, insofar as the thrust of policy had been to place them at its hub. Other workers were generally more ready to recognise the contribution of the social services department and to acknowledge its major role.

The social services department was more often recognised by others as the conduit to other agencies, such as the police or medical services. The general tenor of replies, in evaluating the experience of working together, would suggest that the professional image of social workers, at least among their collaborators, had improved on the low public esteem of the early 1980s. The survey sample indicated a more experienced, more mature and more highly educated corps of social workers. They had become less exclusive and anticipated increased involvement with others. For example, they were likely by Time 2 to expect involvement by a greater range of others in dealing with situations, including by attendance at child protection conferences. The changes by social workers in approach to dealing with situations were often notable. Their views on police involvement had changed most dramatically, with much greater recognition of it by the later survey. Their views on involvement by school nurses also showed a major increase in recognition. Their explanations of their choices and decisions also showed that they had been affected more than other workers by the policy initiatives. Their language reflected the new orthodoxy more strongly and they had reoriented their thinking to notions of *child protection* and *investigation* rather than *assessment* with more references to the legal framework and their resulting *duty*. They were the group of workers most likely to mention *procedures* in their accounts of why particular agencies should be involved and these references had increased over time.

The education welfare service in the area of study had changed greatly between the two surveys. It was smaller. Officers were better qualified, fewer in number, shorter in service and a greater proportion of them were women. However, the service also trailed in the wake of change. They were less involved with others generally and were still seen on the periphery in the vignette studies. There were signs that the role of the education welfare officer was better understood, with some recognition of the officer as a responsible individual operator. Head teachers were less likely to express doubts about the role of the

education welfare officer. There was more expectation by other workers to contact them directly. However, education welfare officers were not always confident they would be contacted. They were the group of workers who were least confident that working together had improved.

The messages, then for the education welfare service were mixed. Officers saw a role for themselves in working with others, many of whom recognised a potential contribution. However, the service had not broken through in the way the school nursing service had done, despite the fact that in the study area it had become a more compact and better qualified service. It can be argued that any progress on this front was offset by uncertainties about the future role of the service, with conflicting general messages about whether it should be a welfare or school attendance service [Dry, 1992] and doubts locally about its future organisation and viability.

The study also showed that the emphasis in policy development on the role of the police was reflected in the responses of practitioners. In the second round of interviews, there was increased recognition of their part in dealing with situations and their place at child protection conferences. This was particularly the case for the social workers who identified a police contribution in increased numbers at Time 2. When social workers identified the police, they had always predominantly justified it in terms of the welfare aspects and the change for them was the greater proportion naming the police. For other workers the example of David showed there was also a shift towards seeing the police role in these welfare terms rather than in terms of the stealing. The link between social workers and the police was reinforced by the patterns of communication which made the social services department an intermediary between the specialist police unit and other agencies. The police had become more tightly coupled into the system, but the most active coupling was between them and the social services department.

Overall, the evaluation of workers reflected a favourable perception of the changes to the experience of working together. The historical problems, however, should not be exaggerated. At Time 1, respondents were generally positive. The later survey revealed a general view that there had been an improvement in working together. The accounts of improvement fitted the idea of a loosely coupled system in which some parts had moved more than others in adapting to change. Thus, the experience of improvement was particularly marked for the school nurses and the social workers. The former were involved more, while the latter appreciated what they saw as a greater commitment by workers in other agencies to the need to work together. This observation by the social workers again points to the importance of factors which were not just mechanical. What was being acknowledged was a collaborative ethos. This would reflect the high profile given to the desirability of working together, reinforced by training emphasising it as good practice.

Where there were criticisms of lack of improvement, these also supported the description of the system as loosely coupled. They indicated that, while some parts of the system had adjusted, others had not been responsive. Complaints were often focused on particular agencies or even examples of a type of agency. So, criticisms were made of certain schools or certain general practitioners who failed to play the game properly. These are the same areas of weakness reported by Birchall and Hallett [Birchall and Hallett 1995: 238 & 229-30; Hallett 1995a 320 & 305-6]. Coupling here was too loose. Even though the mechanical means for integration existed they did not work because they were ignored. This weakness has been recognised in the case of general practitioners. The Department of Health acted to reiterate, elaborate and clarify in more forceful language how the existing guidelines applied in the new circumstances of the NHS [DoH, 1995]. The term "duty" was more prominent [eg para 2.5]. The mechanisms for ensuring proper representation for a fragmented system were spelled out. General Practitioners were told in no uncertain terms

that the welfare of the child comes first [para 2.63], that they should communicate with other statutory agencies [para 2.64] and should do so in good time [para 2.64]. Whether this will have the desired response remains to be seen.

The message for policy makers and practitioners is that attempts to bring about change within the system have moved the system in intended directions. How those changes have been evaluated depended on the position of actors within that system. The positive views emerged from those who could be considered at the heart of the system [the social workers] and those who felt they were becoming part of that system [the school nurses]. Less enthusiasm was shown by those who were more distanced from the core [the head teachers and education welfare officers] although even they were rarely overtly critical. System change had been built on a combination of organisational and attitudinal change. The former ensured that working together was technically possible and ensured that all elements were in place and ready to be activated. The latter lubricated the system and made sure that it worked smoothly and did not jam.

Loosely-coupled systems theory revisited

Loosely coupled systems theory was used as a framework for this study because it offered a picture of systems which seemed to match the reality of the welfare services. While the system worked for the most part, it could be seen as unresponsive with an apparent resistance to learning from experience, even when this resulted in the death of a child. By highlighting a network of variables becoming more or less active or powerful to produce a balance which would control the responsiveness of a system, the theory offered a model which could deal with the complexity of inter-professional and inter-agency relationships. It was capable of handling, at the same time, a range of aspects such as structure, process including events and activities and culture. Each of

these could generate or respond to variables which would affect the responsiveness of the system. It offered explanations which could be applied at both macro and micro levels. While it started with the level of the system, it related also to the experiences of individuals within the system. Finally it assumed the possibility of change. It therefore provided a lens for looking at policy and administrative development and exploring how these changes impacted on the worlds of actors in the system.

While having these attractions, the theory offers traps for the unwary. In particular, it offers a relativistic model. All social systems have the characteristics of loose coupling. Responsiveness is not always assured. They can only be defined as loosely coupled in comparison to other more tightly coupled systems. The theory suggests conditions that may cause couplings to loosen or tighten, characteristics that may be measured to gauge the tension of those couplings and outcomes that may result when couplings are inappropriately weak or strong. So, in the case of child welfare, for example, it might be that a lack of precision in defining the nature of child abuse could lead to a breakdown in activity and an ineffective outcome. Such analysis would point to the variable to be addressed to bring about desired change. In this example, the response was to specify causes for concern in documentation given to workers. Although the outcome may have been to tighten couplings, this is not the same as saying that the system had become tightly coupled.

There are also dangers in the evaluative 'baggage' that has been associated with the theory. It is dangerous to say that loose coupling is either desirable or undesirable, particularly when loose coupling is such a relative concept. It may well be that there is much in the task of working with children that makes certain loose coupling characteristics desirable. For example, it may be beneficial to allow judgement to facilitate flexible responses to complex situations. Equally, however, there are dangers with such loose coupling. It is detrimental to allow

people the discretion not to act when they should do so. Loosely coupled systems theory also carries the danger that system failure can be explained in too simplistic a way. There is a danger of rationalising any breakdown by suggesting sins of omission or tardiness are the result of the system being loosely coupled while those of commission or haste are the product of the system not being loosely coupled. However, it was seen in the present study that breakdowns occurred, not necessarily because the *system* was too tightly or too loosely coupled but because particular elements were inappropriately coupled. The problems of over reaction in Cleveland were not due to the system being too tightly coupled. It was, falling apart. It was particular couplings which were problematic. Conversely, it can be argued that the failures surrounding Jasmine Beckford were not problems of the system being too loosely coupled but of over tight coupling around one variable, concerned with the desire to keep families together.

Rather than characterise systems in absolute terms as either loosely coupled or not, what this project has sought to do is measure whether a system, which had been predominantly criticised for displaying the short-comings associated with too great a looseness, had become tighter as a result of pressures to change. The theory was useful in generating a methodology for measuring this change. To the extent that a system was loose, there would be potential for considerable movement of the component parts within it. As the system tightened, the movement would be reined in and elements would be pulled closer together with less movement possible. This increased tightness would be reflected in descriptions of those elements, which would become focused on this narrower range of movement. On this basis, the theory provided a clear framework on which it was possible to construct a measure of system change. As elements became more restricted in their movement perceptions of them would come into sharper focus, making them easier to see and describe while less restriction would make it harder to do so. The more clearly defined elements were, the

greater agreement there would be about them by members of the system. If the system overall was tighter, this would lead to the whole system becoming more compact with perceptions converging on all elements. In practice, such a neat outcome is unlikely. In this study, what happened was that agreement increased around some elements but not all. There was tightening around some of the core parts of the system, but other elements at the periphery did not respond. In terms of structure, for example, police and social services departments were more tightly coupled at the core, but general practitioner services appear to have continued just as independently at the periphery. What was produced was not an overall tightness score but a chart of changed positions.

Using the theory of loosely coupled systems to explore the nature of coupling and, in particular, to generate a method to map changes in coupling highlighted its strength. Loosely coupled systems theory provided a useful jumping off point for exploring organisational patterns. There are limitations, however, to a theory which restricts itself to a category of system characterised as loosely coupled, in contrast to one that is tightly coupled. This is particularly so when looseness or tightness is defined in relative, rather than absolute, terms. What is of interest is the changes to couplings, becoming tighter or looser. Such changes might lead to increased looseness or tightness of the system, or they may, as we have seen, shift the pattern without affecting the balance of looseness and tightness overall. It is suggested, therefore, that the theory could be more usefully approached as *coupling theory*. With this emphasis, the theoretical strengths and insights which have been identified could be retained. However, the focus would shift from systems which are loose or tight to propositions about *change* in coupling patterns and strengths. This study has moved the theory forward by applying it in this dynamic sense.

Appendix 1

Vignettes used in the interviews

Vignette One - Tony - Time 1

Tony who is now 5 has been brought up by his mother on her own. There are no close relations. Tony has always been a thin pale lethargic child . He qualifies for free meals at school which he devours ravenously and it appears this is all the food he gets. His home is a damp flat and the bathroom and toilet are shared with a number of other families. His mother has occasional evenings out when Tony is left to his own devices and he has often been seen on the streets until late at night.

Vignette Two - David - Time 1 and Time 2

David is 11, he is an aggressive boy who attacks and bullies other children. At home he is often left alone in the evening while his parents go out to the pub. His parents believe they can only control him by firm physical discipline but on occasions this has resulted in considerable bruising. He has now started to steal.

Vignette Three -Sandra - Time 2

The mother of Susan has spoken to you about Sandra who is a classmate of her daughter. Sandra is 9 years old and is known to be a "quiet" child who participates little in class. Her school attendance record has become erratic in the last year. Sandra has told Susan she wishes her father would stop coming into her bedroom and "doing things" to her. When Susan had asked what she meant Sandra had apparently refused to say any more.

Appendix 2

INTERVIEW SCHEDULES.

HAND RESPONDENT VIGNETTE.

1   Do you think that situation requires action by any agency or organisation
    (including your own) over and above that required by any other child?

		Vignette no.	
		1	2
1	No		
2	Yes		

IF 'NO' THEN GO TO NEXT VIGNETTE

IF 'YES' THEN GO TO q. 2.

2   HAND CHECKLIST 'A'.

    How severe do you consider this case to be?

		Vignette no.	
		1	2
1	Not at all		
2	Not very severe		
3	Moderately severe		
4	Very severe		

1.

SCHOOL OF APPLIED SOCIAL STUDIES AND PUBLIC ADMINISTRATION

LEICESTER POLYTECHNIC

PROJECT INTO EDUCATION AND WELFARE.

Interview schedule.

MERRILL L. CLARKE.

CONFIDENTIAL

331

3 In your opinion which of these agencies or organisations (including your own) do you think SHOULD be involved in handling this situation? (I'll come back to your reasons in a moment).

HAND CHECKLIST 'B'.

If there is another body which is not listed which you think should be involved please name it (or them).

(IF EITHER/OR TYPE ANSWERS ARE DEFIRED TICK BOTH AND MARK WITH AN ASTERISK OR ASTERISKS AS APPROPRIATE)

Vignette 1	Defin- itely	Poss- ibly	Major Contrib
1 The School			
2 The Education Welfare Service			
3 The School Psychological Service			
4 Child Guidance			
5 The School Medical Service			
6 The Family Medical Practice			
7 The Local Authority Social Services Department			
8 The NSPCC			
9 The Police			
0 Another body or agency (specify)			
X Not asked/Not Applicable			

Vignette 2			
1 The School			
2 The Education Welfare Service			
3 The School Psychological Service			
4 Child Guidance			
5 The School Medical Service			
6 The Family Medical Practice			
7 The Local Authority Social Services Department			
8 The NSPCC			
9 The Police			
0 Another body or agency (specify)			
X Not asked/Not applicable			

4 On the facts given which of the bodies you have named do you think has the major contribution to make in resolving this situation? (TRY TO OBTAIN A DEFINITE RESPONSE)

5 Why did you name those particular agencies or organisations? (all not just major)

RECORD ANSWER IN FULL.

Vignette 1

Vignette 2

6 If contact was being made with the other agencies or organisations you have mentioned who would be the first point of contact in those agencies?
(IF A GENERAL ANSWER IS GIVEN eg "THE SCHOOL" OR "COUNTY HALL" PROBE - "WHO IN..........?)

Agency	Position of contact	Ability to name a specific person or role	
		Yes *	No
Vignette 1			
Vignette 2			

7 Turning from agencies and organisations I would now like you to think about workers.

Which workers do you think should have a part to play in dealing with this situation?

HAND CHECKLIST 'C'

EXPLAIN - This list is intended as a guide to the main workers you might consider. You can name a worker not listed here.

NOTE ANY OTHER COMMENTS

RECORD CONDITIONAL ANSWERS DS "IF THEY WERE ALREADY INVOLVED..." AS POSSIBLY AND NOTE IN THE COMMENTS SECTION.

WORKERS (If answers are given in the form 'either'/'or' tick both and mark with an * or**)	Workers who should be involved? Vignette No.			
	1		2	
	Def	Poss	Def	Poss
1 School Head				
2 Teacher with Pastoral Responsibility				
3 Class Teacher				
4 Education Welfare Officer				
5 Child Guidance Social Worker				
6 Educational Psychologist				
7 Social Services Department Social Worker				
8 School Medical Officer				
9 School Nurse				
10 Paediatrician				
11 The Child's Family Doctor				
12 Health Visitor				
13 NSPCC Inspector				
14 Police Officer				
15 Psychiatrist				
16 Officer of a Voluntary Organisation				
17 Voluntary Worker				
18 Other				
19 None				
Question not asked				

IF 'NONE' GO TO 11.

Comments (if any offered)

8 Which particular worker, if any, do you think should take the major role in actually handling this situation?

TRY TO GET A DEFINITE ANSWER (eg ALL OTHER THINGS BEING EQUAL) IF ANSWER IS STILL 'EITHER/OR' TICK BOTH AND ASTERISK.

WORKERS	WORKER TO TAKE MAJOR ROLE VIGNETTE NO.	
	1	2
1 School Head		
2 Teacher with Pastoral Responsibility		
3 Class Teacher		
4 Education Welfare Officer		
5 Child Guidance Social Worker		
6 Educational Psychologist		
7 Social Services Department Social Worker		
8 School medical officer		
9 School nurse		
10 Paediatrician		
11 The Child's Family Doctor		
12 Health Visitor		
13 NSPCC Inspector		
14 Police Officer		
15 Psychiatrist		
16 Officer of a voluntary organisation		
17 Voluntary Worker		
18 Other		
19 None/No Particular Worker		
20 Don't Know		

IF WORKER NAMED GO TO 10.

IF 'NONE/NO PARTICULAR' OR 'EITHER/OR OR 'DON'T KNOW' -

9 Why do you say that?
RECORD ANSWER IN FULL

Vignette 1

Vignette 2

10 What in particular do you think the worker you have named could bring to the situation that other workers could not?

RECORD ANSWER IN FULL.

Vignette 1

Check for references to	Vignette	
	1	2
1 Skills		
2 Knowledge- Practical		
3 Knowledge- Understanding		
4 Training		
5 Contacts		
6 Values		
7 Resources		
8 Access to Child/Family		
9 Job Description		
10 Statut. Powers/ Responsibility		
11 Other		
12 Nothing		

Vignette 2

IF THE WORKER REFERRED TO IS THE SAME TYPE OF WORKER AS THE RESPONDENT GO TO 12. IF NOT GO TO 11.

11 If you were professionally involved in a situation like this what, in particular do you think you could offer?

RECORD ANSWERS IN FULL

Vignette 1

	Check for references to	Vignette	
		1	2
1	Skills		
2	Knowledge- Practical		
3	Knowledge- Understanding		
4	Training		
5	Contacts		
6	Values		
7	Resources		
8	Access to Child/Family		
9	Job Description		
10	Statut. Powers/ Responsibility		
11	Other		
12	Nothing		

Vignette 2

12 What type of action do you think SHOULD be taken in the case of this child?

HAND CHECKLIST 'D'.

		Vignette	
		1	2
1	No Action		
2	Monitoring/Surveillance		
3	General support to Child/Family		
4	Specific Treatment/Action		
5	Removal of child from school		
6	Removal of child from home		

COMMENTS (IF OFFERED)

Vignette 1

Vignette 2

335

13 What type of contact is required between people involved with this case?

HAND CHECKLIST 'E'.

TYPE OF CONTACT	Vignette 1		Vignette 2	
	Def	Poss	Def	Poss
1 No contact necessary				
2 Contact between relevant people as necessary				
3 A meeting of relevant people (eg a case discussion)				
4 A formal Case Conference				

IF 1 or 2 GO TO 15

IF 'DEF' TO 3 or 4 GO TO 14

IF 'POSS' TO 3or 4 Please Explain

Vignette 1

Vignette 2

GO TO 14

14 IF ANSWER TO Q. 13 IS 'YES' OR 'POSSIBLY' TO MEETING OR CASE CONFERENCE

Including workers from your own agency/organisation where appropriate - who should attend?

HAND CHECKLIST 'F'.

(Coding = for either/or answers tick both and mark with an asterisk)

PERSONS TO ATTEND ANY MEETING OR CASE CONFERENCE	VIGNETTE NO.		COMMENTS
	1	2	
1 School Head			
2 Teacher with Pastoral Responsibility			
3 Class Teacher			
4 Education Welfare Officer			
5 Child Guidance Social Worker			
6 Educational Psychologist			
7 Social Services Department Social Worker			
8 School Medical Officer			
9 School Nurse			
10 Paediatrician			
11 The Child's Family Doctor			
12 The Health Visitor			
13 NSPCC Inspector			
14 Police Officer			
15 Psychiatrist			
16 Officer of a Voluntary Organisation			
17 Voluntary Worker			
18 Senior Social Worker			
19 Social Services Area Director			
20 Senior Education Welfare Officer			
21 Education Officer (Admin)			
22 Nursing Officer			
23 Parents			
24 Probation Officer			
25 Senior Probation Officer			
26 Other			
27 Not Applicable/Question not asked			

15 If this situation had been observed by or referred to another agency or department do you think they should contact your agency?

	Vignette No	
	1	2
1 No		
2 Yes		
3 Depends		

IF 'NO' OR 'YES' GO TO 17

IF 'DEPENDS' GO TO 16

16 If 'Depends' - in what way?

Vignette 1

Vignette 2

12

17 In your opinion do you think that in practice your agency or organisation would be contacted?

	Vignette No.	
	1	2
1 No		
2 Yes		
3 Depends (Probe)		
4 Don't Know		

Comments (if any)

Vignette 1

Vignette 2

IF 'NO' GO TO 19

13

18 If contact was made with your organisation who do you think would be contacted in the first instance?

Vignette 1

Vignette 2

19 If another agency was involved in this case and you had had some professional involvement would you expect to continue to be involved?

	Vignette No.	
	1	2
1 No		
2 Yes		
3 Depends (Probe)		
4 Not Asked		

Comments

Vignette 1

Vignette 2

IF 'NO' GO TO 22

20 IF 'YES' OR 'DEPENDS'

Would you expect to deal personally and directly with the relevant worker in the other agency or would you expect to communicate through someone else?

	Vignette No.	
	1	2
1 Direct		
2 Through Somebody Else		
3 Not Asked		

21 If 'through somebody else' - please specify

	Vignette No.	
	1	2
1 In own agency		
2 In other agency		
3 In both agencies		
4 Other		
5 Not asked		

Details

Vignette 1

Vignette 2

22 Have you any other comments on issues of working together raised by this example we have been considering?

Vignette 1

GENERAL

A   What, if any, do you think are the main advantages derived from working with other organisations, agencies and professions?

B   What, if any, do you think are the main disadvantages?

Vignette 2

GO TO NEXT VIGNETTE

IF LAST VIGNETTE - GO TO 'A'.

16,

Please indicate those workers with whom you have had direct contact since this time last year regarding a child for whom you have had professional responsibility.

Please tick in the box indicating the type of contact this was.

		Written	'Phone	Face to Face
1	School Head			
2	Teacher with Pastoral Responsibility			
3	Class Teacher			
4	Education Officer (Admin)			
5	Education Welfare Officer			
6	Child Guidance Social Worker			
7	Educational Psychologist			
8	School Medical Officer			
9	School Nurse			
10	Nursing Officer			
11	Paediatrician			
12	A Child's Family Doctor			
13	Health Visitor			
14	Psychiatrist			
15	Police Officer			
16	Officer of a Voluntary Organisation			
17	Voluntary Worker			
18	Social Services Area Director			
19	Senior Social Worker			
20	Social Services Department Social Worker			
21	Senior Education Welfare Officer			
22	NSPCC Inspector			
23	Senior Probation Officer			
24	Probation Officer			
25	Other			

19

Are there any other comments or observations which you would like to make on the area of co-operation and co-ordination in education, health and welfare?

18

PERSONAL PROFILE

Present Post...................   If TEACHER: age of children taught................

Place of Work..................

Total number of years in present profession..............

Number of years in present post..............

Previous professions or occupations & number of years in those professions etc;

....

....

....

Professional and post A-Level qualifications

    Certificates.......................

    Diplomas..........................

    Degrees...................

Other courses relevant to education, health or welfare not leading to qualification

Voluntar work experience in the fields of health, education or welfare: Yes

                    No

Details

Age: 1 20-24; 2 25-29; 3 30-34; 4 35-39; 5 40-44;
     6 45-49; 7 50-54; 8 55-59; 9 60-65

M F

20

341

[QUESE]

I D

TYPE

DE MONTFORT UNIVERSITY

LEICESTER BUSINESS SCHOOL

DEPARTMENT OF PUBLIC POLICY AND MANAGERIAL STUDIES

PROJECT INTO EDUCATION AND WELFARE

Interview schedule 1993

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1

1] How severe do you consider this case to be? [checklist]

	Vignette No	
	SEVT	SEVF
|1| Not at all		
|2| Not very severe		
|3| Moderately severe		
|4| Very severe		

2. In your opinion which of these agencies or organisations including your own, where appropriate, SHOULD be involved in handling this situation? (I'll come back to your reasons in a moment) [checklist]

Vignette 3	Agencies Named	Very likely	Poss-ibly	Major Contrib
|01|	The School			
|02|	The Education Welfare Service			
|03|	The School Psychological Service			
|04|	Child Guidance			
|05|	School Medical Service			
|06|	The family Medical Practice			
|07|	The Local Authority SSD			
|08|	The NSPCC			
|09|	The Police			
|10|	Any other body or agency (specify)			
|11|	None (Go to 6)			
|12|	Not asked not applicable			
	Number of agencies named [NAGNT]			

On the facts given which of the bodies you have named do you think has the major contribution to make in resolving this situation? (TRY TO OBTAIN A DEFINITE RESPONSE BUT IF NOT POSSIBLE RECORD COMBINATION OF AGENCIES)

2

4 (VJ) Why did you name those particular agencies or organisations
[all not just major]
[Record answers in full]
[a] Vignette 3 [David]

Vignette 4
2 In your opinion which of these agencies or organisations
Including your own, where appropriate, SHOULD be involved in
handling this situation?   [I'll come back to your reasons in a
moment] [checklist]

Vignette 4 Agencies Named	Defin itely	Poss ibly	Major Contrib
[01] The School			
[02] The Education Welfare Service			
[03] The School Psychological Service			
[04] Child Guidance			
[05] School Medical Service			
[06] The Family Medical Practice			
[07] The Local Authority SSD			
[08] The NSPCC			
[09] The Police			
[10] Any other body or agency [specify]			
[11] None [Go to 6]			
[12] Not asked not applicable			
Number of agencies named [NAGNF]			

3 On the facts given which of the bodies you have named do you
think has the major contribution to make in resolving this
situation? [TRY TO OBTAIN A DEFINITE RESPONSE. BUT IF NOT POSSIBLE
RECORD COMBINATION OF AGENCIES]

5 If you were making contact with the other agencies or organisations you have mentioned who would be your first point of contact?

[If a general answer is given eg "The School" or "County Hall" then probe "Who in..."]

Agency	Position of Contact
Vignette 3	CNTT 1-9
Vignette 4	CNTF 1-9

6

4 (V4) Why did you name those particular agencies or organisations (all not just major)
(Record answers in full)
(b) Vignette 4 (Sandra)

5

344

7. Which particular worker, if any, do you think should take the
major role in actually handling this situation?
TRY TO GET A DEFINITE ANSWER (eg ALL OTHER THINGS BEING EQUAL). IF
THE ANSWER IS STILL EITHER/OR TICK BOTH AND ASTERISK

WORKERS	WORKER NO TICK MAJOR ROLE VIGNETTE NO.
1 School Head	
2 Teacher with pastoral responsibility	
3 Class Teacher	
4 Educ. Welfare Officer	
5 Ch. Guidance Soc Wkr	
6 Educ. Psychologist	
7 Social Services Dept social worker	
8 School Medical Officer	
9 School Nurse	
10 Paediatrician	
11 The Child's family Dr	
12 Health Visitor	
13 NSPCC Inspector	
14 Police Officer	
15 Psychiatrist	
16 Officer of a voluntary organisation	
17 Voluntary worker?	
18 Other	
19 None	
20 Don't know	

IF WORKER NAMED GO TO 9 OR IF SAME AS RESPONDENT TO 10
IF 'NONE/NO PARTICULAR' OR 'EITHER/OR' OR 'DON'T KNOW':-
8 Why do you say that?
Vignette 4

Vignette 4

---

6. Turning from agencies and organisations I would now like you to
think about workers
Which workers do you think should have apart to play in dealing
with this situation? HAND CHECKLIST
EXPLAIN:- This list is intended as a guide to the main workers you
might consider. You can name a worker not listed here.
RECORD CONDITIONAL ANSWERS EG "IF THEY WERE ALREADY INVOLVED
AS POSSIBLY AND NOTE IN THE COMMENTS SECTION. Note any comments

WORKERS If answers are given in the form either/ or tick both and mark with * or **	Workers who should be involved Vignette No.		
	Def	Poss	Def	Poss
1 School Head				
2 Teacher with pastoral responsibility				
3 Class Teacher				
4 Educ. Welfare Officer				
5 Ch. Guidance Soc Wkr				
6 Educ. Psychologist				
7 Social Services Dept social worker				
8 School Medical Officer				
9 School Nurse				
10 Paediatrician				
11 The Child's family Dr				
12 Health Visitor				
13 NSPCC Inspector				
14 Police Officer				
15 Psychiatrist				
16 Officer of a voluntary organisation				
17 Voluntary worker				
18 Other				
19 None				
20 Question not asked				

If None go to 10
Comments.

9 What in particular do you think the worker you have named could bring to the situation that other workers could not? (RECORD ANSWER IN FULL)
IF THE WORKER REFERRED TO IS THE SAME TYPE OF WORKER AS THE RESPONDENT GO TO 10.

Vignette 3

CMT 1 - 12
MCT 1 - 6

Vignette 4

CMF 1 - 12
MCF 1 - 6

10. If you were professionally involved in a situation like this what in particular do you think you could offer? (RECORD ANSWERS IN FULL)

Vignette 3

YCT 1 - 12
YCRT 1 - 6

Vignette 4

YCF 1 - 12
YCRF 1 - 6

11 What type of action do you think SHOULD be taken in the case of this child?

HAND CHECKLIST

	VIGNETTE			
	3		11	4
	ACTION T		ACTION F	
	Idef|Poss		Idef	Def|Poss
No Action				
Monitoring/Surveillance				
General support to child and family				
Specific Treatment Action				
Removal of child from school				
Removal of child from home				

COMMENTS (If any offered) [Record all responses, code highest definite]

Vignette 3

Vignette 4

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12 What type of contact is required between people (workers) involved with this case?
HAND CHECKLIST

	Vignette			
	3	11	4	
	def|poss	def|poss		
				TCONTD TCDNTP
1 No contact necessary				
2 Contact between relevant people as necessary				TCONFD TCCNFP
3 A meeting of relevant people eg a case discussion				
4 A child Protection Conference				

IF 1 OR 2 GO TO 14
IF POSITIVE RESPONSE TO 3 OR 4 GO TO 13

If poss to 3 or 4 please explain
vignette 3

vignette 4

347

14 If this situation had come to the attention of another agency or department do you think they should contact your agency?

Vignette No

	OSCT	OSCF
	3	4
1	no	
2	Yes	
3	Depends	

15 In your opinion do you think that in practice your agency or organisation would be contacted?

Vignette No

	OMCT	OMCF
	3	4
1	no	
2	Yes	
3	Depends	
4	D.K.	

If contact was made with your organisation who do you think would be contacted in the first instance?

V4

V5

GO TO NEXT VIGNETTE
IF LAST VIGNETTE GO TO 16

13 IF ANSWER TO Q 12 IS YES OR POSS TO A MEETING OR CASE CONFERENCE including workers from your own agency/organisation where appropriate - who should attend?
Hand Checklist
Either or answers tick both and mark with •

PERSONS TO ATTEND ANY MEETING OR CASE CONFERENCE	VIGNETTE 4 AMT1-26	VIGNETTE NO AMF1-26	COMMENTS
1	School Head		
2	Teacher with pastoral responsibility		
3	Class Teacher		
4	Educ. Welfare Officer		
5	Ch. Guidance soc wkr		
6	Educ. Psychologist		
7	Social Services Dept Social Worker		
8	School Medical Officer		
9	School Nurse		
10	Paediatrician		
11	The Child's Family Dr		
12	Health Visitor		
13	NSPCC Inspector		
14	Police Officer		
15	Psychiatrist		
16	Officer of Vol Org		
17	Voluntary Worker		
18	Soc Work Team Manager		
19	SSD Service Manager		
20	EWO Team Leader		
21	Educ Officer (admin)		
22	Nurse Team Leader		
23	Parents		
24	Probation Officer		
25	Senior Probation Off		
26	Other		
27	Not Applic/not asked		

No. of workers V3   NWT
No. of Workers V4   NWF

GENERAL

I WANT NOW TO TURN FROM SPECIFIC EXAMPLES TO MORE GENERAL ISSUES WHERE INTER AGENCY WORKING IS INVOLVED:

16. In your experience has the quality of inter agency working stayed about the same, improved or got worse since the mid 1980s?

Improved
got worse
stayed the same

Why do you say that?

17. On a scale of 1 to 4 where 4 = Agree, 3 = tend to agree, 2 = tend to disagree and 1 = disagree to what extent do you agree or disagree with the following statements about the Child Protection Procedures following the government's Working Together papers?

a. The procedures highlight the need to work with other agencies but do not make it any easier.
   1 2 3 4

b. I have not significantly altered the way I work as a result of the introduction of procedures following Working Together
   1 2 3 4

c. The procedures sometimes require workers to do things that are not appropriate to the situation.
   1 2 3 4

d. The procedures may change but the fundamental problems of working together remain unaltered.
   1 2 3 4

e. Although the guidelines outline procedures the important decisions are still a matter of judgement for the workers involved.
   1 2 3 4

f. The procedures have removed the uncertainties from working together.
   1 2 3 4

g. Workers would work as well together even if child protection procedures were not in place.
   1 2 3 4

16

349

19. Please indicate those workers with whom you have had direct contact since this time last year regarding a child or children for whom you have had professional responsibility (ie not always the same child)
Please tick in the box indicating the type of contact this was.

	Written or Fax	Phone	Face to Face
1| School head			
2| Teacher with Pastoral respons			
3| Class teacher			
4| Education Officer (Admin)			
5| Education Welfare Officer			
6| Child Guidance Social Worker			
7| Educational Psychologist			
8| School medical Officer			
9| School Nurse			
10| Nurse Manager			
11| Paediatrician			
12| A child's Family Doctor			
13| Health Visitor			
14| Psychiatrist			
15| Police officer			
16| Senior Police Officer eg Inspector			
17| Voluntary Worker			
18| Service Manager SSD			
19| Team leader SSD			
20| Social Worker SSD			
21| EWO Team Leader			
22| NSPCC Inspector			
25| Other			

18. What effect if any do you think the following changes will have, if any, on inter agency working?

a. the introduction of NHS trusts

Why?

b. schools opting out of local authority control

Why?

c. Current an proposed changes in local government eg reform generally, changes in organisation of L...
services

Why?

350

Are there any other comments or observations which you would like to make on the area of co-operation and co-ordination concerned with services for children?

PERSONAL PROFILE
CAN I FINISH BY COLLECTING A FEW BRIEF DETAILS ABOUT YOURSELF

Present Post (if social worker include team) ....

Place of Work (if head type of school) ....

Total number of years in present profession ....

Number of years in present post ....

Previous professions or occupations and years in those professions etc

Professional and post A level qualifications

Certificates

Diplomas

Degrees

AGE 1 20-24   2 25-29   3 30-34   4 35-39   5 40-44
     6 45-49   7 50-54   8 55-59   9 60-65

19

351

Appendix 3

SUPPLEMENTARY TABLES

Table A1. Contact with other workers - social workers [n=22] Time 1				
Type of worker contacted	Written or fax	Phone	Face to face	TOTAL
School Head	6	21	20	22
Teacher with Pastoral responsibility	3	10	11	15
Class Teacher	2	11	19	21
Education Officer (Admin)	3	11	3	13
Education Welfare Officer	4	18	18	19
Child Guidance Social Worker	4	10	5	11
Educational Psychologist	7	15	13	17
School Medical Officer	3	4	5	7
School Nurse		10	14	16
Nursing Officer	3	14	14	14
Paediatrician	4	3	6	11
Child's family doctor	6	18	11	22
Health Visitor	6	20	19	21
Psychiatrist	6	10	11	13
Police Officer	2	19	18	21
Officer of Voluntary Organisation	4	17	10	18
Voluntary Worker	5	6	13	15
Soc Serv Area Director	11	13	21	21
Senior Social Worker	7	11	11	18
Senior EWO		14	9	16
Social Worker SSD				
NSPCC Inspector	9	9	11	12
Senior Probation Officer	3	11	6	12
Probation Officer	6	17	16	18
Other	4	6	5	7

Table A2. Contact with other workers Head Teacher [n=25] Time 1				
Type of worker contacted	Written or fax	Phone	Face to face	TOTAL
School Head				
Teacher with Pastoral responsibility		2	6	6
Class Teacher	1	2	23	23
Education Officer (Admin)	4	8	3	10
Education Welfare Officer	2	9	13	15
Child Guidance Social Worker	3	2		4
Educational Psychologist	19	17	23	23
School Medical Officer	10	8	16	18
School Nurse	3	12	21	21
Nursing Officer		1	2	2
Paediatrician	2	3	1	4
Child's family doctor	3	4	2	6
Health Visitor	1	7	6	8
Psychiatrist	2	2	2	2
Police Officer		6	11	11
Officer of Voluntary Organisation	1	2	2	3
Voluntary Worker	1	1	1	1
Soc Serv Area Director	2	4	5	5
Senior Social Worker	2	4	4	6
Social Worker SSD	4	12	8	12
Senior EWO	2	2	3	4
NSPCC Inspector				
Senior Probation Officer		1	1	1
Probation Officer		2	2	2
Other	2	4	7	7

Table A3. Contact with other workers EWOs [n=23] Time 1				
Type of worker contacted	Written or fax	Phone	Face to face	TOTAL
School Head	4	13	23	23
Teacher with Pastoral responsibility	4	10	23	23
Class Teacher	4	9	22	22
Education Officer (Admin)	7	15	23	23
Education Welfare Officer				
Child Guidance Social Worker	4	12	10	15
Educational Psychologist	14	15	20	23
School Medical Officer	4	9	12	15
School Nurse	3	11	23	23
Nursing Officer		2	5	6
Paediatrician	2	1	4	6
Child's family doctor	3	14	13	20
Health Visitor		11	16	19
Psychiatrist	5	7	4	10
Police Officer	3	16	20	22
Officer of Voluntary Organisation	3	10	10	13
Voluntary Worker	1	5	8	10
Soc Serv Area Director	12	11	20	22
Senior Social Worker	8	16	22	23
Social Worker SSD	9	11	23	23
Senior EWO	5	14	19	19
NSPCC Inspector	1	11	10	14
Senior Probation Officer	1	7	8	9
Probation Officer	1	14	18	21
Other	2	7	8	9

Table A4. Contact with other workers School Nurses [n=23] Time 1				
Type of worker contacted	Written or fax	Phone	Face to face	TOTAL
School Head	3	18	23	23
Teacher with Pastoral responsibility	2	7	17	17
Class Teacher	1	8	22	22
Education Officer (Admin)	1	1	2	4
Education Welfare Officer	3	9	18	18
Child Guidance Social Worker	3	2	6	6
Educational Psychologist	4	2	9	10
School Medical Officer	14	14	23	23
School Nurse				
Nursing Officer	14	19	21	22
Paediatrician	4	3	3	8
Child's family doctor	2	15	18	21
Health Visitor	11	20	22	23
Psychiatrist	2	4	4	7
Police Officer		3	8	8
Officer of Voluntary Organisation	1	3	5	6
Voluntary Worker		4	5	7
Soc Serv Area Director	4	3	9	12
Senior Social Worker	3	6	11	12
Social Worker SSD	4	16	20	22
Senior EWO		1	3	4
NSPCC Inspector	1	3	4	6
Senior Probation Officer				0
Probation Officer	1	2	4	5
Other				0

Table A5. Contact with other workers - social workers [n=14] Time 2				
Type of worker contacted	Written or fax	Phone	Face to face	TOTAL
School Head	10	13	12	14
Teacher with Pastoral responsibility	4	10	11	11
Class Teacher	3	11	12	14
Education Officer (Admin)		4	1	4
Education Welfare Officer	1	11	9	12
Child Guidance Social Worker	9	12	8	12
Educational Psychologist	4	11	4	12
School Medical Officer	3	6	5	10
School Nurse	4	12	13	14
Nurse Manager	5	11	11	12
Paediatrician	4	9	7	11
Child's family doctor	11	13	12	13
Health Visitor	10	13	11	13
Psychiatrist	9	12	6	13
Police Officer	11	13	14	14
Senior Police Officer	5	13	5	13
Voluntary Worker	5	11	10	12
Soc Serv. Service Manager	10	12	14	14
Soc Serv. Team Leader	8	11	14	14
Social Worker SSD				
EWO Team Leader	2	4		5
NSPCC Inspector	1	5		5
Other	3	3	3	4

Table A6 Contact with other workers Head Teacher [n=13] Time 2				
Type of worker contacted	Written or fax	Phone	Face to face	TOTAL
School Head				
Teacher with Pastoral responsibility			4	4
Class Teacher	1	2	11	11
Education Officer (Admin)	3	6	1	7
Education Welfare Officer	1	6	6	9
Child Guidance Social Worker		2		2
Educational Psychologist	8	10	12	12
School Medical Officer	3	5	7	10
School Nurse	3	7	11	11
Nurse Manager			1	1
Paediatrician		1		1
Child's family doctor	1	3	2	6
Health Visitor		1	3	3
Psychiatrist	2	2	2	4
Police Officer		5	7	7
Senior Police Officer		2	1	2
Voluntary Worker			1	1
Soc Serv. Service Manager	1	2	3	4
Soc Serv. Team Leader		2	3	3
Social Worker SSD	2	7	6	8
EWO Team Leader		2		2
NSPCC Inspector		2	1	2
Other		1	1	1

Table A7.				
Contact with other workers Education Welfare Officers [n=9] Time 2				
Type of worker contacted	Written or fax	Phone	Face to face	TOTAL
School Head	5	8	9	9
Teacher with Pastoral responsibility	3	8	9	9
Class Teacher	1	5	8	8
Education Officer (Admin)	5	3	3	5
Education Welfare Officer				
Child Guidance Social Worker	1	8	6	8
Educational Psychologist	6	9	8	9
School Medical Officer		4	1	4
School Nurse	4	8	9	9
Nurse Manager		3	1	4
Paediatrician	1	1		1
Child's family doctor	3	3	2	5
Health Visitor		6	2	6
Psychiatrist	2	7	3	8
Police Officer	1	8	9	9
Senior Police Officer	1	1	3	3
Voluntary Worker	1	4	2	5
Soc Serv. Service Manager	2	4	5	6
Soc Serv. Team Leader	4	7	8	8
Social Worker SSD	5	9	9	9
EWO Team Leader	7	8	8	8
NSPCC Inspector	1	4	1	4
Other	1	4	3	4

Table A8. Contact with other workers - School Nurses [n=16] Time 2				
Type of worker contacted	Written or fax	Phone	Face to face	TOTAL
School Head	5	13	16	16
Teacher with Pastoral responsibility	3	8	13	13
Class Teacher	4	8	16	16
Education Officer (Admin)	1	2	2	2
Education Welfare Officer	3	12	13	14
Child Guidance Social Worker	2	5	2	6
Educational Psychologist	2	7	9	11
School Medical Officer	11	13	16	16
School Nurse				
Nurse Manager	11	10	16	16
Paediatrician	9	7	6	12
Child's family doctor	5	10	12	16
Health Visitor	8	14	15	15
Psychiatrist	6	3	3	7
Police Officer		2	9	10
Senior Police Officer			1	1
Voluntary Worker		3	3	5
Soc Serv. Service Manager	2	2	9	9
Soc Serv. Team Leader	3	9	14	15
Social Worker SSD	8	15	16	16
EWO Team Leader			1	1
NSPCC Inspector				
Other	1	1	2	3

	soc wkr n = 22	head n = 25	EWO n = 23	s. nurse n = 23	Total n = 93
Expert-ise	7 32%	12 48%	8 35%	5 22%	32 34%
Re-sources	6 27%	5 20%	4 17%	1 4%	16 17%
Time	1 5%	6 24%	3 13%	1 4%	11 12%
Inform-ation	15 68%	14 56%	7 30%	8 35%	44 47%
Whole situat-ion coverage		5 20%	4 17%	4 17%	13 14%
Mutual help	4 18%	2 8%	6 26%	2 9%	14 15%
Diff. Perspecti ves	8 36%	1 4%	2 9%	5 22%	16 17%
Coher-ence/ clear roles/ shared persp-ectives	7 32%	1 4%	4 17%	3 13%	15 16%

Table A9.   Advantages of working with others

	soc wkr n = 22		head n = 25		EWO n = 23		s. nurse n = 23		Total n = 93	
Commun-ication	8	30%	8	32%	7	30%	12	52%	35	38%
Indecisio n/delay	2	9%	9	36%	3	13%	1	4%	15	16%
Time	4	18%	9	36%	2	9%	2	9%	17	18%
Loss of Control			7	28%	4	17%	5	22%	16	17%
Pressure from others	7	32%	1	4%					8	9%
Disagree ment	10	45%	4	16%	7	30%	5	21%	26	28%
worsens problems	7	32%	1	4%					8	9%
Too many people	6	27%	5	20%	4	17%	7	30%	22	24%
Ignor-ance of others	5	23%	3	12%			3	13%	11	12%
Personalit ies			1	4%	1	4%	3	13%	5	5%
Profess-ions	3	14%			1	4%	2	9%	6	7%
Confident iality	3	14%	1	4%	3	13%	2	9%	9	10%

Table A10. Disadvantages of working with others

Appendix 4

Glossary of abbreviations.

General

ACPC	Area Child Protection Committee
ADSS	Association of Directors of Social Services
ARC	Area Review Committee
CQSW	Certificate of Qualification in Social Work
CSS	Certificate in Social Studies
DHSS	Department of Health and Social Security
DoH	Department of Health
DSW	Diploma in Social Work
EWO	Education Welfare Officer
EWS	Education Welfare Service
GP	General Practitioner
JCAC	Joint Child Abuse Committee
JCC	Joint Consultative Committee
LEA	Local Education Authority
MA	Master of Arts
MEd	Master of Education
NACRO	National Association for the Care and Resettlement of Offenders
NAI	Non-Accidental Injury
NHS	National Health Service
NSPCC	National Society for the Prevention of Cruelty to Children
SAT	Specialist Assessment Team
SEO	Society of Education Officers
SPSS-PC	Statistical Package for the Social Sciences [Personal Computer version]
SSI	Social Services Inspectorate

nb Those abbreviations which are used to reference publications are not included.

Abbreviations specific to this study

sn	school nurse
sw	social worker
T1	Time 1
T2	Time 2

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