

THE UNIVERSITY OF HULL

The Concept and Practice of Leadership in Social
Work

being a Thesis submitted for the Degree of PhD

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by

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DEDICATION AND ACKNOWLEDGEMENTS

This thesis is dedicated to my husband Paul Cullen who has consistently and lovingly supported me throughout the eight years of working on this research, at the expense of many disruptions to his own life.

And to my paternal grandmother Felicia Horowitz who was murdered in Auschwitz Concentration Camp in 1942, before I could know her. Her spirit survived through the lives and scholarship of her children, and is carried forward by her grandchildren, great grandchildren, and great great-grandchildren; all striving to make the world a more enlightened and compassionate place.

I am grateful to my grown-up children, Claire Cookson and Liam Cullen, for their continuing encouragement.

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ABSTRACT

The starting point for this research was a series of calls for leadership ‘at all levels’, addressed to the social work profession due to evidence of poor performance, low morale and high attrition. The aim of the research was to find out whether there were characteristic features of leadership that were shared by people who were qualified social workers operating within roles of frontline practice, organisational management and identified leadership, that could provide guidance in developing leadership capacity within the profession.

The research took the form of a qualitative study, comprising individual and group interviews with a purposive sample of 24 qualified social workers, in roles ranging from frontline practice to national leadership, and 12 other professionals. It identified three characteristic traits of social work leadership, ‘ethically inspired’, ‘empirically informed’, and ‘strategic’ and two characteristic leadership behaviours, ‘collaborating’ and ‘challenging’. It showed that these were combined to produce four characteristic features of social work leadership, which were demonstrated, to a greater or lesser degree, and in varying forms, by participants at different levels.

An innovative framework and model of ‘ethical-adaptive’ leadership was developed on the basis of the findings of this research that is distinctive to the social work profession and is applicable to both practitioners and those at different levels of organisational management and identified leadership. As such it has the potential to fulfil the intended purpose of the research and may also be of value to other human service professions.

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CHAPTER 1. INTRODUCTION

THE REASON FOR THIS RESEARCH

The scene for this research can be set by reference to three quotations. The first can be read as *cri de coeur*¹ from the members of the Social Work Taskforce that was commissioned by the national government in 2008 in response to long-standing concerns about the performance of social workers. It calls for social workers to exert leadership, collectively, by taking responsibility for shaping the requirements of their own professional role and, individually, by ensuring that they fulfil them. ‘Social workers need to develop a more powerful voice. They must take responsibility for setting their own high standards and for demonstrating high quality professional practice which makes a real difference for those they work with’ (Final Report of the Social Work Taskforce, 2009, p.11).

The second, taken from the final report of the Munro Inquiry into Child Protection (Munro, 2011b), calls for a decisive shift in the way that leadership is conceptualised and enacted so that the voice of practice can become a much more active influence on how organisations deliver their services. The shift that the report envisages is from a centralised, authority-based form of leadership based on the exercise of ‘command and control’ by senior managers and enforced by the managers below them to a more distributed one in which both managers and practitioners at all levels of the organisation are able and willing to play an active part in shaping, as well as delivering, its services. Munro (2011b) makes it clear that, under this new dispensation, front-line

¹ Literally a ‘cry from the heart’ or, in other words, a passionate appeal.

social workers should be both licensed and expected to exercise leadership by taking responsibility for formulating, as well as enacting, their professional interventions:

Leadership is often only understood in terms of individuals at the top of the hierarchy, but it is much more than the simple authority of one or two key figureheads. Leadership behaviours should be valued and encouraged at all levels of organisations. At the front line, personal qualities of leadership are needed to work with children and families when practising in a more professional, less rule bound, way. Practitioners need to challenge poor parenting and have the confidence to use their expertise in making principled judgments about how best to help the child and family. (Munro, 2011b, p.108)

The Munro report focuses specifically on services for children and families. The third quotation, however, expresses a similar plea for leadership at all levels in relation to services for adults. This is expressed by Platt (2007) in the covering letter that was published as an accompaniment to a government-commissioned report into the state of adult social care:

The services provided by social care, when done well, can transform people's lives, give them new opportunity, help them realise independence and provide personal care with dignity and understanding...Yet the service lacks confidence...This requires leadership across the sector and at all levels within it. (Platt, 2007, p.1)

Although this extract does not refer specifically to social workers, within the report itself, Platt ascribes a particular degree of responsibility to social workers as the lead professionals in this area of work.

These reports represent the culmination of a process in which stakeholders in social work services came to realise that existing organisational structures and models of practice, based on the principles of New Public Management (Hood, 1991), were undermining rather than promoting the delivery of effective practice. They show how

this influenced a shift in thinking about the nature of leadership away from a top-down process of imposing managerial authority to one that was incorporated in the activity of individuals throughout the organisation. They show how a result of this was an awakening of interest in the exercise of professional leadership and a concern to create conditions that would enable this to flourish.

This concern to enhance the capacity of social workers to exercise professional leadership within the front line of service delivery; and to realise the contribution that could be made by social workers to the provision of leadership at all levels, provided the focus for this research.

The researcher noted that these reports, especially those of the Social Work Taskforce (2009) and the Munro Inquiry (2011), proposed various practical measures to improve the leadership capacity within the social work profession, several of which were implemented. These included structural measures such as the creation of Chief Social Workers for Children's and Adults' services, whose function was to represent social work within government and influence policy developments that would improve practice together with Principal Social Worker roles to serve a similar function locally. Other measures included the creation of what turned out to be the short-lived College of Social Work (2011–2015) and the inception of programmes of leadership education and development, for example, under the auspices of the National Skills Academy (founded in 2008) that merged with the workforce development organisation, Skills for Care, in 2014. While each of these seemed valuable, it struck the researcher that they were based largely on drawing on models and sources of guidance derived from other professions. This was understandable, since their starting point was a diagnosis of leadership deficiency within the social work profession itself but still raised the

question as to whether it might be possible to identify such sources from within the practices of the social work profession itself.

This line of argument appeared to gain some support, first of all, from the consideration that each of the reports was authored by people who were, themselves, social workers by profession and had achieved positions of national leadership. Further encouragement came from the observation that, alongside a systematic critique of the profession, the Munro reports (2010; 2011a; 2011b) included various examples in which social work practitioners demonstrated practice leadership under the leadership of innovative organisational managers who were also qualified social workers.

A final source of encouragement came from the positive findings of the author's own previous research, in the form of a Master of Research (MRES) study that focused specifically on how leadership was provided by social work practitioners as an effect of their professional practice. This took the form of a case study of a team of specialist palliative care social workers who were career practitioners. The findings of this study (published as Cullen, 2012) showed that the characteristics and behaviour of these social workers were consistent with the model of 'servant and partner' leadership identified by Alimo-Metcalfe and Alban-Metcalfe (2005, p.64), which they later re-named as 'engaging' leadership (Alimo-Metcalfe et al., 2008, p.587), and had extrapolated from multi-site research involving managers in both public and private sector organisations. It showed that the effect of their practice was to enable palliative care patients and family members to become active participants in a process of synergistic collaboration with members of the multi-professional specialist palliative care team within which these social workers were based.

A review of the professional literature failed to identify other empirical studies that focused specifically on the nature of the leadership provided by people who were qualified social workers.

These considerations influenced the researcher to propose the present research. The focus of this project was to explore whether it might be possible to identify characteristic features, or possibly one or more models, of effective leadership that were shared by people who are qualified social workers working across different roles and settings, as practitioners, and at different levels of management. The informing rationale was that a model that was based on the thinking and practice of members of the profession could offer other social work practitioners, managers, and educators a source of reference and guidance for leadership development that was accessible and relevant because it was congruent with their own professional orientation. The aim of the research was, therefore, to gather data from social workers across this range of roles and to try to extrapolate features, or, if possible, one or more models of leadership that are distinctive to the profession.

THESIS STRUCTURE

The next chapter presents the literature review that was undertaken at the beginning of the research project. It begins by presenting material that provides the background to the calls for leadership referenced at the beginning of this chapter. It shows how accounts of the history of the social work profession provide indications as to why social workers were especially susceptible to the negative effects of New Public Management (Hood, 1991, p.3) and cites examples from the literature of what these effects were. It goes on to situate the thesis within the field of leadership theory by introducing the two conceptual models of leadership as a process of generating successful responses to ‘adaptive challenges’ (Heifetz and Laurie, 1997, p.19)) and

of eliciting ‘responsible followers’ (Grint and Holt, 2011, p.4) that informed the analysis of the research data.

The following chapter describes the methods used to collect and analyse the research data. It explains the choice of an adaptive methodology, which involved drawing on theory throughout the research process, including during the analysis of the data. It describes how a qualitative methodology was selected as the most effective means of eliciting rich data that had the potential to provide insights into the specific dynamics through which participants exercised leadership and the motivations that prompted them to do so. It explains how a purposive approach to the recruitment of participants was adopted, first, to obtain participants from across as wide a range as possible of roles and levels of social work practice, management, and formal leadership, and second, to secure participants whose own experience and achievements meant that they were more likely to be rewarding sources of data in relation to the focus of the research.

The chapter describes how data was obtained from research participants through a combination of individual and group interviews, including small group interviews in which social work practitioners were joined by colleagues from other professions, who contributed observations on their practice and the leadership effects it generated.

This chapter concludes by describing how the data was analysed, using NVivo, through successive processes of coding. It describes how this analysis identified three traits and two forms of behaviour that combined to produce four characteristic features of social work leadership, that were demonstrated, to a greater or lesser degree, and in varying forms, by participants at different levels. It describes how these were then brought together to produce a model of social work leadership.

Chapters four to seven of the thesis present the findings of the research, supported by extracts and examples from the data. The headings of these chapters refer to the four characteristic features that were identified: ‘ethically inspired’, ‘being strategic’, ‘collaborating’, and ‘being willing to challenge’.

The concluding chapter demonstrates how research participants combined these characteristics to produce a distinctive framework and model of ‘ethical-adaptive’ social work leadership that is applicable to both practitioners and those at different levels of organisational management and identified leadership. It discusses this in relation to theories and models of leadership that have been developed in other settings and argues that it is of potential relevance to the development of leadership in both social work and other human service professions.

The chapter shows that, in its fully realised form ‘ethical-adaptive’ leadership fulfilled the criteria of effective social work practice, as expressed by Helen (professor of social work, member of national working groups and president of national peer association for senior academics) within the research data, that ‘Social workers need to be clever and kind and rigorously sceptical – and all of those things at once’.

INTRODUCING THE RESEARCHER

Having introduced the research project itself and the way in which it is presented in the rest of this thesis, it seems relevant to introduce the researcher. This is, perhaps, all the more of an obligation because two of the findings chapters, ‘Ethically Inspired’ and ‘Being Strategic’ include substantial elements of biographical information about the research participants. The main reason for doing so, however, is to deal with the question of possible bias.

Except for this last section of the present chapter, I intend to observe the authorial practice adopted so far, of referring to myself in the third person, as ‘the researcher’, to avoid distracting attention from the narrative of the thesis and, above all, to enable the voices of the research participants to be clearly heard. For the purposes of this section, however, it would be artificial and clumsy to do this, so I am reverting to a first-person presentation.

It seems important to acknowledge that I did not come to this research as a dispassionate and objective academic researcher. More specifically, I did not originally encounter the features and effects of New Public Management (Hood, 1991) or ‘managerialism’ (Pollitt, 1993, p45) that are described in the literature review, as abstract contracts on the printed page but as the lived experience of the first two decades of my career as a local authority social work practitioner and manager. Like several of my research participants, my discomfort with the way that this model elevates the status of managers and circumscribes the role of social work practitioners, influenced my career path, leading me eventually to leave public sector employment for the more facilitative working conditions provided in the voluntary sector.

Like one of the research participants, Helen (professor of social work), but in a very much more modest way, this discomfort also influenced me to engage in research. As the earlier sections of this introduction have shown, the specific focus of my research interest is exploring the nature of professional leadership from a specific social work perspective.

The length and nature of my career means that the process of this research was susceptible to two possible sources of bias. The first is that since leaving local authority employment sixteen years ago, I have, at different times, worked in a national role and

chaired a small UK-wide professional association. This means that I already knew several of the research participants in other capacities

prior to this research. In practice, I think that this was, if anything, a benefit rather than a drawback, in that the participants knew that I was already familiar with the context of what they were relating and so did not feel the need to take time away from the focus of the research interview to explain it. As I observed the same standards of ethical practice in dealing with these participants as I did with the other research participants, such as obtaining informed consent and providing them with a copy of the interview transcript for review, I do not believe there was any feature of the research process that could be considered as an abuse of this prior relationship.

The second and more serious risk of bias associated with my position was, of course, that my own experience, and especially my acknowledged bias towards the social work practitioner perspective, together with my personal investment in finding evidence of professional leadership, would unduly influence my analysis of the data. I hope that simply being aware of this offered some protection, but I was also assisted by my research supervisors, who at times suggested alternative interpretations of elements of the data that I showed them, and at other times challenged me to more fully justify the ones that I proposed.

But my experience was also that, beyond this, it was the research process itself that kept me honest. The process of exposing myself to so many different perspectives on the subject of my research helped me to detach myself from my personal investment in it. My experience of this alteration of perspective was similar to the one description provided in the research data by Helen:

You can feel this sort of shift, from taking a normative position on practice that this is wrong, to also having this slightly meta, outside position which is a sort of sociology of social work; looking at the way ideas have shifted over time.

In simpler terms, my curiosity as a researcher and my fascination with the data itself became the dominant force in my activity.

A second important discovery was that, although the analysis of qualitative data has an unavoidable element of subjectivity, the data imposed its own discipline. Several times during the writing up process I selected an extract from the coded data that was intended to illustrate a feature that I believed I had captured, only to find that it did not, after all, support my interpretation, forcing me to go back and revise my analysis. So, in this sense at least, the research made me an honest woman.

I will now step back from this first-person narrative and allow the research itself to take centre stage.

CHAPTER 2. LITERATURE REVIEW

INTRODUCTION

This review situates the research, firstly by drawing on accounts of the profession's development to elucidate the context in which the 'calls for leadership' cited in the introductory chapter came to be expressed. Secondly, from the point of view of leadership theory, it shows how the terms in which these calls were expressed progress towards an aspiration for 'postheroic' leadership, in which the role of the leader is conceptualised primarily as one of engaging and sustaining relationships of collaboration and how this influenced the conception of this research.

This presentation of literature, in which authors describe the development of social work in this country (England), is not intended to provide a comprehensive history of this development but to selectively focus on features that appear to the researcher to have been of importance in creating the context of the calls for leadership. One of the central features that it highlights is the important part played in this by the profession's evolving relationship with the state. This review shows how this initially helped social work to become established as a profession but also how subsequent economic and political developments led to changes that compromised social workers' ability to operate as professionals and undermined their performance and morale. The chapter describes how, as these effects came to be recognised, the calls for leadership represented the expression of a need for social workers to develop an enhanced capacity for professional leadership, within the practice and on behalf of the profession.

THE DEVELOPMENT OF SOCIAL WORK AS A PROFESSION

The review is structured around accounts of the history of the profession, provided by Gregory and Holloway (2005), based on an analysis of the language and content of the professional literature at each stage in its development, up to the early years of the current (twenty-first) century, and by Rogowski (2010), but draws extensively on other sources.

The early period

Both Gregory and Holloway (2005) and Rogowski (2010), in common with other authors such as Lymbery (2001) and Ferguson (2008), trace the origins of the social work profession to the latter years of the 19th and early years of the 20th century, as a response to the social problems that had resulted from rapid industrialisation such as poverty, homelessness, and alcohol dependence. Payne (2006) adds to this analysis that social work developed as a distinct occupation, at least partly, because of the diminishing role of the Church, which necessitated the development of more secular-based sources of welfare provision. Gregory and Holloway (2005) describe how, during this period, social workers were employed chiefly by charitably funded welfare organisations, and how their visits combined providing moral advice to those who were deemed to be socially inadequate with providing practical assistance.

The immediate decades after World War II

Gregory and Holloway (2005) describe the period between the 1950s and the early 1970s as one in which social workers were able to develop an increasing sense of professional identity and confidence. They refer to this as the period of the 'therapeutic enterprise' (p.41) within the profession's development, suggesting that the rapidly

developing theoretical body of psychological and, later, sociological theory, during this period provided a framework that supported social workers in developing a distinctive casework methodology. The focus of the role became that of enabling the client to gain insight into the internal psychological or social aetiology of their difficulties and to support them in becoming more socially included. Reflecting on these developments, Gregory and Holloway (2005) note that the literature of this time was optimistic in tone.

Gregory and Holloway (2005) and Rogowski (2010) highlight how the conditions of relative economic stability and growing prosperity during the immediate decades that followed the end of the Second World War in 1945 helped to support the development of the profession. Rogowski (2010) highlights the part played in this by the way that government policy was heavily influenced by the prevailing Keynesian view of economics, which held that the economy and industry could be managed by government to avoid the boom and bust cycles of capitalism, fuelling the belief that it would be possible to achieve sustained economic growth and continuing economic prosperity. He observes, that, importantly, this provided the context for the political decision to honour the recommendations of the Beveridge Report (1942) that the state should be a substantial provider of public welfare services that would support the population from the cradle to the grave.

From the point of view of social work, Rogowski (2010) highlights how the establishment of Social Services Departments in the early 1970s following the Seebohm report (1968), provided social workers with a dedicated institutional base. He observes that under the auspices of these departments, social workers began to develop some of the features of a 'genuine profession', including a formal programme of preparatory training that equipped them with 'knowledge, understanding and skills'

that were specific to their role and that they were able to exercise a considerable degree of autonomy and discretion on how to practice' (Rogowski, 2010, p.46-47).

Rogowski's somewhat qualified characterisation of the status of social work as a profession reflects the view that he shares with Payne (2005) and Lymbery (2001) that the terms on which social workers acquired the powers and status that they exercised were those of a 'bureau-professional compact' (Parry and Parry, 1979, cited in Lymbery, 2001,p.376)). Lymbery (2001) provides an analysis of the implicit terms of this compact, citing Harris (1998) and Johnson (1970), to the effect that within the implicit terms of the bureau-professional compact social workers secured authority, status, and an institutional base, but did so by becoming 'state-mediated' professionals Lymbery, 2001, p.376), that is people who exercised authority through powers delegated by their organisations, rather than through having them enshrined within their own professional status. Drawing on the work of Jamous and Peloille (1970, cited in Lymbery,2001, p.376), Lymbery argues that one of the features of this compact was that it deprived social workers of an important aspect of full professional status, in that they had 'ceded ideological control of their work'. (Lymbery, 2001, p.376). Rogowski's account (Rogowski, 2010) indicates that this status was facilitative rather than otherwise during the early years of the Social Services Departments when these organisations were managed by people who were themselves social workers by profession and shared a common perspective with frontline social work practitioners. Drawing on Newman and Clarke (1994), Rogowski (2010, p.138) suggests that during this period the organisational structure of social services departments achieved a judicious balance of roles between social workers and the managerial hierarchy based on 'rational administration and professional discretion'. His description of how social workers were able to exercise this discretion is reflective of Lipsky's (1980),

characterisation of how individuals in such roles of delegated authority are able to operate as ‘street level bureaucrats’ who exercise considerable discretion in how they choose to deploy the power and resources available to them to the best effect (Lipsky, 1980 cited in Lymbery and Butler, 2004, p.55.)

The period of ‘instability and crisis’

This section of the review takes its nomenclature from Gregory and Holloway’s (2005) characterisation of this period, which derives from a quotation from Hobsbaum (1994, p.20, cited in Gregory and Holloway, 2005, p. 43).

In contrast to the positive developments of the immediate decades after the Second World War, accounts of the period from the early 1970s up to the time of the calls for leadership in the early years of the 21st century portray this as a much more troubled one for the social work profession, as a result of changes in the economic, social, and political context of their practice.

Accounts such as those of Lymbery (2001) and Ferguson (2008) identify the global economic crisis of 1973 as a critical turning point because this abruptly ended the pattern of steady economic growth and dispelled the confidence that governments could control the economy or afford the level of welfare provision that had been envisaged. Ferguson notes that a decisive shift in policy began in 1976, when the then Labour government found itself obliged to seek an urgent loan from the International Monetary Fund and was forced to embark on a policy of closely controlling public spending, beginning with a sharp reduction of 9.5% this expenditure in two years (Ferguson, 2008) and how this became a continuing priority for the Conservative administrations that succeeded it.

The accounts in the literature reviewed here suggest that the early effect of the economic downturn on social workers were associated with the effects of an increasing number of people living in poverty. Drawing on Young (1999) and Hutton (1995), Gregory and Holloway (2005) draw attention to the way in which the decline in the economy led to a rapid rise in unemployment. Lymbery and Butler (2004), citing George and Miller (1994) and Jones and Novak (1999), note that this decline, together with the impact of policy changes, meant that even among those who were able to find work, the number of those engaged in casual rather than regular employment rose.

Lymbery and Butler (2004) are among those who highlight how these economic pressures were compounded by the effects of demographic changes that altered the profile of the population. Citing Tinker (1997) and Finch (1990), these authors draw attention to an increase in the overall number of people over retirement age, and especially the proportion of people living into 'very old age', which meant that 'older people, children and people with disabilities [became] an increasing percentage of the population' (Lymbery and Butler, 2004, p.46).

Citing Finch (1990), they note that this resulted in a shift in the 'dependency ratio' between those who were economically active and the number of people who were financially dependent on them, either directly as breadwinners or indirectly as taxpayers funding services and benefits (Lymbery and Butler, 2004, p.46).

One of main indications that Gregory and Holloway (2005) draw from their review of the literature of the period was that the combined impact of increased economic insecurity and social change served to fuel social division and discord. They describe, for example, how, on one hand 'the loss of stable, life-long career expectations among the better off contribute[d] to a lack of tolerance of deviance and difference' and, on the other a 'sharpening experience of relative deprivation' within a society that was

becoming increasingly consumerist, contributed to a rise in consumer crime ‘among the poorest (Gregory and Holloway, 2005, p.44).

These authors’ accounts of the literature of the period highlight two main effects of these economic and social developments on social workers. Firstly, they describe how, from a practical point of view, social workers were becoming overwhelmed by the volume of need that they faced, against a reduction in the resources available to them. Secondly, that they were coming under increasing criticism from both right and left wing political positions. From the right, for failing to exercise their power more effectively to contain anti-social behaviour and from the left for using their power and resources in ways that were seen as inducing people who were socially disadvantaged to fit in with the expectations of an unfair social order rather than engaging in action to challenge and change it.

They describe how, under these various pressures, social workers came to experience themselves as an embattled profession, quoting Butrym’s observation, as early as 1976, that ‘Contemporary social work finds itself in a paradoxical situation in which an ever-increasing demand for its services is coupled with unprecedented criticism because of its failure to fulfil society’s expectations’ (Butrym, 1976, cited in Gregory and Holloway, 2005, p.45).

Gregory and Holloway (2005) add that under these conditions, the literature reflected a loss of confidence in the casework methods that had become the main feature of social work intervention and a corresponding retreat from claims of professionalism.

Rogowski (2010), Ferguson (2008) and Ferguson and Woodward (2011) describe how some social workers were themselves protagonists of the left-wing critique, influenced by social and political movements such as feminism and anti-racist and disability rights

activism. They refer to the emergence of radical social work as a strand of both theory and practice within social work and how, having rejected individual casework, on the basis that this approach amounted to ‘blaming clients for what were essentially structural problems’ (Ferguson and Woodward, 2011, p.23), these social workers adopted alternative forms of intervention such as community development and welfare rights activism. These authors acknowledge, however, that such activities brought these social workers directly up against the reality of their status as bureau professionals, in that by engaging in joint action with clients against the policies of local and central government (Ferguson, 2008, p.17), they were directly challenging the organisations that employed them and that licensed and resourced their activity.

In this connection, authors such as Payne (2006), Rogowski (2010), and Ferguson and Woodward (2011) comment that, although radical social work was only a minority position within the profession, events like these and the somewhat arcane discussions of anti-discriminatory practice provided politicians with ammunition that could be used to undermine the credibility of the profession. They refer to the development of a standard critique to the effect that social workers should be ‘less concerned with “political correctness” and “acquire more “commonsense” [sic]’ (Ferguson, 2008, p.96). They describe how this critique was used, both to justify imposing changes that curtailed social workers’ autonomy and to scapegoat social workers in the context of high profile child murders and other tragedies.

The picture that emerges from accounts of this period is thus of a profession whose members were externally beleaguered and internally divided and had collectively lost confidence in their professional identity. Gregory and Holloway (2005, p.45) quote Satyamurti (1979), who argues that this amounted to an existential crisis: ‘[There is] a crisis in social work. The crisis refers to a loss of a sense of direction among social

workers and a growing uncertainty about what they are doing and what they have to offer.’

The ‘Managerialist’ period

The following section of the review goes on to consider accounts that describe how this situation became exacerbated, as the influence of neo-liberal and neo-conservative political policies resulted in a redefinition of the role of public services, a radical restructuring of their model of service delivery, and a re-configuration of the roles of staff within them. These accounts describe the considerable, largely adverse, effects of these changes on social workers, to which they were especially susceptible because of the way in which the nature of their status and authority had come to be positioned by the bureau-professional compact.

Authors such as Pollitt (1993), Clarke and Newman (1997), Harris (2003), Davis and Garrett (2004), Lymbery (2001), Payne (2006), Lawler (2007), and Rogowski (2010) identify the approach to the delivery of public services that has come to be designated as ‘managerialism’ (Pollitt, 1993) or ‘New Public Management’ (Hood, 1991), with the advent of ‘neo-liberalism’, which replaced Keynesianism as the dominant economic paradigm and inspired the ‘neo-conservative’ or ‘new right’ political programme pursued by the Conservative government that was elected in 1979.

Ferguson and Woodward (2011), citing Harvey (2005), characterise the informing principles and values of the new right as being powerfully influenced by the economic theories of Hayek (1960; 1982) and Friedman (1962). They identify the central premise of these theories as being that the route to general prosperity lies in allowing market mechanisms of competition to take their course in determining levels of prices, wages, and employment, because enabling private sector entrepreneurs to succeed

would generate a 'trickle down' effect, by, for example, increasing employment (Ferguson and Woodward, 2011, p.38).

Drawing on Hill (1993), George and Wilding (1994), and Midwinter (1994), Lymbery (2001, 2004) describes how this economic orientation led politicians of the new right to regard public services as problematic for reasons that included, firstly, that the cost of providing them resulted in levels of taxation that acted as a disincentive to entrepreneurialism. And secondly, that they were ineffectively managed and consequently characterised by 'waste and inefficiency' (Lymbery, 2001, p.374).

Authors such as Pollitt (1993) and Clarke and Newman (1994) describe how these concerns were associated with a critique of professional power. This critique suggested that the dominant position of professionals within public sector organisations influenced their development towards arrangements that served to prioritise the interests of these professionals over those of service users and at the expense of budget control and business efficiency. Clarke and Newman (1997, p.38) describe how public services were represented as being 'unresponsive, paternalistic, leaden bureaucracies'. Gregory and Holloway (2005) observe that this representation gained further force and credibility because it was expressed, not only by the advocates of neo-liberalism and neo-conservatism on the right, for example, Wilding (1982), but also by people who were prominent within the disability self-advocacy movement, for example, Oliver (1983).

Based on this rationale, authors such as Pollitt (1993), Newman and Clarke (1997), Lymbery (2001), Gregory and Holloway (2005), and Rogowski (2010) describe how the approach that came to be designated as managerialism (Pollitt, 1993) or New Public Management (Hood, 1991) set out to create a new, business-inspired, model for the delivery of public services.

The literature relating to the implementation of New Public Management in relation to local authority social care services, for both children and adults, highlights two main features of this. The first was the introduction of features of the marketplace, with the aim of creating an element of competition to try to reduce costs and improve responsiveness. Authors such as Hood (1991), Jordan (2001), Butler and Drakeford (2002), Garrett (2002), and Lymbery and Butler (2004) describe how the NHS and Community Care Act (1990), provided the flagship legislation for the development of a mixed economy of care. Under this, local authorities were no longer to be the main providers of care services but took on functions of contracting or spot purchasing them, on behalf of service users, from private and voluntary sector organisations. Where elements of service provision were retained, the structure within which they were delivered was one where the functions of ‘purchaser’ and ‘provider’ were located within separate departments, to create a ‘quasi-market’ (Le Grand and Bartlett, 1993, quoted in Lymbery and Butler, 2004, p.42).

The second was a project of importing the characteristic managerial practices of successful private sector businesses into the running of public sector organisations themselves. Pollitt (1993, p.3) describes how, the name implies, one of the main elements of managerialism was to increase the authority of managers and to establish their ‘right to manage’ so that they could exert control over the activity of professionals as a means of containing costs and achieving consistent standards of service delivery. Clarke and Newman (1997, p.76) describe how this involved a restructuring of public sector organisations to create ‘a command structure which privileges the calculative framework of...how to improve efficiency and organisational performance’.

In the context of local authority social services, Lymbery (2001, p.375) describes how the role of organisational managers was reconfigured around this objective and

endowed with a distinctive status, that was presented as being ‘essentially different from and superior to the professional one’.

Along with other authors, Lymbery (2001) describes how managers used their authority to pursue their objectives through the use of methods that had proved successful within commercial organisations. This included increased proceduralisation and use of ICT systems and the use of targets and quantitative measures of performance management (Lymbery, 2001; Payne, 2006; Rogowski, 2010).

Accounts show how both these developments proved problematic from the point of view of social workers, in several different ways, that in many cases served to undermine the quality of their practice and their morale. What emerges from them is that under the managerialist regime, social workers, or at least many of those working within the context of statutory public-sector services, experienced the loss of all three of the defining features of a profession identified by Jamous and Peloille (1970, cited in Lymbery, 2001). As well as the loss of ideological control associated with the ‘bureau-professional compact’ described by Lymbery and referenced earlier (in Lymbery and Butler, 2004, p.33), accounts demonstrate how changes that were made to their roles substantially stripped social workers of the two remaining characteristics identified by these authors: the ability to define the technical (i.e. proceduralised) functions of their role and to maintain a reasonable balance between proceduralised functions and the exercise of professional autonomy and judgement.

Both Gregory and Holloway (2005) and Rogowski (2010) describe how the remodelling and restructuring of local authority Social Services Departments associated with the marketisation of social care, stripped social workers of some valued functions and refocused the purpose and nature of their work. Gregory and Holloway (2005, p.48), describe how the language of the literature at the time reflected

the way that one of the main functions was now being conceptualised as that of supplying customers with care as a 'commodity', and Rogowski (2010, p.144) describes how the implication of becoming managers of this commodity was to place these social workers in the position of being co-opted to the function of 'running the business'.

Rogowski's account draws out the implications of this in terms of ideological compromise and loss of autonomy in defining the parameters of activity. He describes how the role of the social worker in the capacity of care manager was no longer one in which practical services were provided in the context of an ongoing relationship of professional support but became instead one of providing brief episodes of intervention focused on assessing care needs, eligibility for support, and sources of provision. He suggests that in having the scope of their activity constrained in this way, social workers operating as care managers became complicit in a politically driven project to reduce costs, by adopting a model that gave a distorted account of the needs of some service users. He cites the example of older people, whose deteriorating health and increasing dependence meant that they needed continuing relationally based support, as well as repeated adjustments to their practical care arrangements. He describes his concern at how social workers had been induced to adopt a focus of 'gate-keeping access to resources... rather than engaging in a therapeutic relationship' (Rogowski, 2010, p.78).

Ruch (2010), citing Howe (1996), Adams (1998), and Smith and White (1997) expresses a similar concern that the effect of the reconfiguring of services, and the roles of social workers within them, amounted to a process of curtailing elements that involved the exercise of professional skills. Ruch describes how the separating out of functions such as counselling and other forms of psychosocial support from the role

of care manager amounted to a process of redesigning the role as one that involved the deployment of ‘technical-rational competencies’ rather than ‘professional values, knowledge and skills’ (Ruch, 2010, in Ruch, Turney, and Ward, 2010, p.23).

Pursuing this theme of ‘the deprofessionalisation of social work’ Rogowski (2010, p.150), highlights the part played in this by the managerialist project of proceduralisation. He describes how the activities of social workers, not only in care management but also in roles that involved ‘higher level assessment and planning’ such as child protection and adult safeguarding came to be, ‘dominated by standardised assessment forms and computer exemplars’ so that the nature of their roles became, ‘bureaucratic, standardised and largely technocratic’ (Rogowski, 2010, p.147).

Both Rogowski (2010) and Gregory and Holloway (2005) draw attention to the changes that were made to the role of probation officer as providing what amounted, in effect, to an apotheosis of this process of deprofessionalisation under the influence of managerialism. Gregory and Holloway describe how the more socially conservative orientation of the new right, as well as its commitment to running public services as businesses, was reflected in the abandonment of the service’s long-standing statement of purpose to ‘advise, assist and befriend’². Instead of this, Gregory and Holloway (2005) they describe how its functions were redefined in terms that amounted to ‘enforcement, control and achieving targets’³ (Gregory and Holloway, 2005, p.48) and how the recipients of its services were re-designated, from clients to offenders. They describe how, in line with this revised orientation of the service, the role of probation

² This statement of purpose originated in The Probation of Offenders Act, 1907.

officer ceased to be defined as one of exercising professional knowledge and skill through developing a rehabilitative relationship, to that of a technician whose function was to achieve targets by carrying out duties that were closely defined by standards, proforma, and templates. They describe how this change in function became enshrined in the decision to introduce a separate, lower-level technically focused qualification for probation officers. They describe these changes as representing the ‘explicit disconnection of Probation from its traditional social work identity’ (Gregory and Holloway, 2005, p.46).

Accounts of this period show that the positioning of social workers as being in the frontline of the confrontation between increasing need and inadequate resourcing, highlighted in the previous period, continued and was exacerbated by their diminished role and status under managerialism. Ferguson and Woodward (2011, p.59) cite findings from Jones and Novak (1993), which are strikingly similar to those of Butrym (1976, cited in Gregory and Holloway, 2005, p.45) nearly two decades earlier: ‘Facing a situation of increasing poverty and social stress, social workers have found themselves with ever fewer resources to meet the needs of more desperate clients’.

Writing at the turn of the twenty-first century, Lymbery (2001), describes how this situation persisted, portraying the position of social workers in the context of budget management, in language that conveys a sense of being embattled: ‘Social workers are caught in the crossfire between needs on the one hand and resources on the other...[having] to manage budgets that are unequal to the demands on them’ (Lymbery, 2001, p.374).

Drawing on their study of the experiences of social workers employed by a local authority to work in health and social care across the range of adult services, McDonald, Postle, and Dawson (2008) describe how social workers in the research

found themselves being effectively scapegoated by structures of authority and decision making. Their account of these social workers' experiences highlights how social workers experienced the effects of the distancing of managers from practice, and the disparity of power between them, was that their professional judgements were overruled but they were left to deal with the consequences. One such example that the researchers report was that social workers described examples of having the detailed assessments and care plans that they produced, in partnership with service users, rejected by managerial resource panels but being left to explain and justify these decisions to the service users in question. Another was that social workers described how their own assessments that proposed hospital discharges were potentially unsafe were overruled by managers' concerns to achieve performance targets for reducing delayed discharges.

Evidence from both this research and studies focusing on services for children and families provides a direct demonstration of how the proceduralisation and computerisation of their roles under the influence of managerialism served to undermine not only the morale but also the quality of social workers' practice.

In the context of social work with adults, McDonald et al. (2008) describe as a 'striking feature' of their research, how social workers in their study struggled to identify any coherent rationale that informed their assessments and decisions. Citing Howe (1996), and consistent with the arguments of Lymbery (2004) and Parton (2008), McDonald et al. attribute this to the way in which the constraints of standardised tools and processes enabled social workers to formulate only a 'superficial understanding of psycho-social needs' (McDonald et al., 2008, p.1377) rather than to make adequate assessments of the complex human situations with which their practice confronted them.

In the context of children's services, White, Hall, and Peckover (2008) report that their research into the effects of the implementation of the Common Assessment Framework (CAF), showed that rather than fulfilling the intended purpose of integrating the perspectives of staff across different agencies to provide a comprehensive and informative profile of children and young people, the effect of the system was to fragment and disrupt this process. They cite Gubrium, Buckholdt, and Lynott's (Gubrium et al., 1989, p. 197, quoted in White et al. 2008, p.1203) use of the epithet 'descriptive tyrannies' to refer to the way in which pre-structured methods of data collection, such as those embodied in the CAF, served to constrain recording in ways that prevented their users from accurately conveying their own descriptions, and in so doing, distorted the assessments that emerged: 'CAF constrains professional practice in particular ways—it is indeed designed to exert its own “descriptive demands”, which are intended to help and inform professional sense-making, but which can feel tyrannical to the form-completers' (White et al., 2008, p.1213).

A report by Shaw et al. (2009) presents similar findings from their evaluation of the implementation of the computerised Integrated Children's System (ICS). Again, these authors refer to a mismatch between the intentions of the system and the experience of its use in practice. They quote from the description of the system's purpose as presented in its introductory literature, as being to provide:

a conceptual framework, a method of practice and a business process to support practitioners and managers in undertaking the key tasks of assessment, planning, intervention and review. It aims to help them do this in a systematic manner, and to enable practitioners and managers to collect and use information systematically, efficiently and effectively.

(‘About the Integrated Children's System’, quoted in Shaw et al., 2009, p.614).

They describe how this positive description was in marked contrast to the consistent data that they obtained from social work practitioners and first line managers about their experiences of using the system. They report that this showed social workers found that the way in which the system required information to be entered was repetitive and time-consuming and that breaking the account of the child and their situation into ‘chunks’, or discrete items of data, meant that ‘the story was difficult to follow’ (Shaw et al., 2009, p.619). They quote one practitioner who summarised how, from their point of view, the main purpose of the system was undermined through the mechanism of its delivery: ‘what is lost in that is the child. You don’t get a picture of the child and their needs...It is all lost in these questions and jargon’ (Shaw et al., 2009, p.619).

Accounts show how, during this period, the morale of social workers continued to decline, not only because of the impact of these various processes of de-professionalisation but also because they continued to be heavily criticised. This point is forcefully made by Laming (2009) in his report of the findings of his inquiry into ‘The Protection of Children in England’ that he was commissioned by the government to undertake, following the domestic murder of Peter Connolly, or ‘Baby P’ in Haringey, in 2007. In his report, Laming draws attention to repeated negative portrayals of social workers in the mass media: ‘There has been a long-term appetite in the media to portray social workers in ways that are negative and undermining’ (Laming, 2009, p.44).

Laming argues that such hostile publicity has served to reinforce and further fuel negative responses to social workers by members of the public, and the damaging effect of this on social workers’ morale. He describes, further, how he regards this as a contributory factor in undermining their effectiveness: ‘Public vilification of social

workers has a negative effect on staff and has serious implications for the effectiveness, status and morale of the children's workforce' (Laming, 2009, p.44).

Other descriptions in the literature show that these observations of demoralisation in relation to social workers in the field of child protection were consistent with a more general picture across the profession, over an extended period. Ferguson and Woodward (2011, p.59) cite further evidence from Jones and Novak (1993) of poor morale among social workers employed by local authorities, as they faced 'increasing criticism and ridicule' that challenged the 'legitimacy and... identity' of their profession. In his 2001 article, 'Social Work at the Crossroads', Lymbery describes how this combination of high workload, lack of control, and continuing criticism was resulting in low morale among social workers and associated effects of high levels of sickness, attrition, and recruitment problems. He refers to social work as a profession in 'a condition of crisis' (Lymbery, 2001, p.369). Ferguson and Woodward (2011) note that further research by Jones in 2007, drawing principally on evidence from 40 social workers in statutory services in England, as well as others in Wales and Scotland, identified the persistence of a similar condition of demoralisation. Ferguson and Woodward (2011, p.49) refer to 'A depressing pattern, with staff experiencing physical and emotional exhaustion, stress, frustration, and resentment'.

The next section of this literature review looks at how rising concerns about the performance and morale of members of the social work profession, that reflected the cumulative effect of its troubled history over more recent decades, resulted in a series of calls for leadership.

THE CALLS FOR LEADERSHIP

This section of the review looks at how a prevailing view of the social work profession as being in a parlous state, was expressed in the reports of five influential, government commissioned, processes of inquiry or review, and how these led to the calls for leadership that prompted this research. It selectively reviews the findings of Lord Laming's (2003) inquiry into the death of Victoria Climbié and his subsequent (2009) inquiry into child protection in England, Dame Denise Platt's (2007) review of the state of the adult social care service and its workforce, the investigation into the problems of the social work profession undertaken by the Social Work Taskforce (2009a; 2009b) and the Munro Inquiry into Child protection (Munro, 2010; 2011a; 2011b).

The Laming Review into the Death of Victoria Climbié and the Protection of Children in England

Laming's (2003) report into the death of Victoria Climbié is unflinchingly critical of the performance of frontline social workers. He makes it clear that he regards these failures as even more disturbing because he does not believe that they were isolated lapses but, rather, the latest examples of an all too familiar pattern of inadequacy: 'Victoria's case, like several others which have prompted Inquiries of this nature, is one that is characterised by a consistent failure to do basic things properly' (Laming, 2003, p.196).

Laming makes it clear, however, that he does not consider frontline social workers to be as culpable as those in more senior positions. In support of this judgement, he cites evidence relating to each of the three London boroughs, whose staff were in contact at various times with Victoria and the relative who perpetrated the abuse, to demonstrate

that the social workers who dealt with Victoria were operating under conditions that undermined their ability to work effectively.

In each case, he describes how social workers felt inadequately prepared for the demands of their roles: facing a continuingly heavy influx of referrals; working in chaotic environments, where written guidance was missing, or at least not readily accessible; receiving erratic supervision and often minimal support from their line managers; and ineffective recording systems made it difficult to reliably track whether agreed actions had been followed through.

In this connection, it needs to be acknowledged that some of the managerialist developments, such as increased proceduralisation and the introduction of comprehensive, computer-based recording systems, represented valid responses to such findings, although, as has been described in the previous section, their form and extent created new problems of their own.

The main focus of interest from the point of view of the present review and the research project that is presented in this thesis, however, is that Laming presents these frontline social workers as being, in effect, secondary victims of the neglect by those in authority above them, and the way in which this influenced him to issue his call for leadership. Laming (2003) argues that it is senior managers and lead local councillors who should be held most directly to account because they had, simply but crucially, failed to pay sufficient attention to the experience and practice of staff working in the frontline of service delivery, and the impact of this on the quality of the services they were providing:

It is not to the handful of hapless...sometimes inexperienced, front-line staff that I direct most criticism for the events leading up to Victoria's death..., the greatest failure rests with the managers and senior members of the authorities whose task it was to ensure

that services for children, like Victoria, were properly financed, staffed, and able to deliver good quality support to children and families.

(Laming, 2003, p.4)

It is in this connection, and towards these individuals, that Laming issues his first call for leadership. As shown in the quotation below, Laming asserts that it is the role of managers to provide both an ethical and practical direction for their organisations, to lead from the front. He makes clear how much importance he attaches to leadership through the emotive language that he uses, associating this imperative with the memory of the dead child, by suggesting that improved management and leadership should be pursued as a lasting tribute to her:

The most lasting tribute to the memory of Victoria would be if her suffering and death resulted in an improvement in the quality of the management and leadership in these key services. What is needed are managers with a clear set of values about the role of public services, particularly in addressing the needs of vulnerable people, combined with the ability to 'lead from the front'.

(Laming, 2003, p.5)

In the report of his second inquiry (Laming, 2009), undertaken after the death of Peter Connolly, or Baby P, Laming returns to a similar theme. Despite acknowledging that progress has been made in response to at least some of the specific recommendations of his earlier report, he identifies a continuing lack of attention and resourcing on the part of people in the more senior echelons of local and national government as the source of the same fundamental problems of social work morale and practice as he had described in that report. He describes what is, in effect, the same vicious circle that he had depicted in his previous report: social workers, who lack confidence due to

inadequate preparation for their responsibilities, being faced with unmanageable caseloads, causing them to become demoralised to the point where they leave the organisation, which then struggles to recruit others because of the negative reputation of the service: ‘Low staff morale, poor supervision, high case-loads, under-resourcing, and inadequate training each contribute to high levels of stress and recruitment and retention difficulties’ (Laming, 2009, p.44).

He draws the following bleak conclusion that ‘the [low] morale of frontline social workers that is resulting in recruitment and retention problems... [is] ultimately...risking the safety of children’ (Laming, 2009, p.20).

As before, Laming argues that the stakes in protecting and supporting children and young people are so high that this must become a major priority for public services: ‘the social, emotional and financial consequences of not improving their wellbeing and keeping them safe at an early stage in their lives, dictate that resolving the challenges laid out... should be one of the highest priorities for national and local government and the other key services’ (Laming, 2009, p.13).

This judgement fuels Laming’s second call for leadership. He argues that the extent of the reforms needed is so major that it requires a ‘step change’ and that ‘strong and effective leadership’ is needed to achieve this (Laming, 2009, p.13). As in the previous report, this injunction is addressed, not to frontline social workers, but to those in senior positions of governance and management. He focuses specific attention on the role of senior figures in national government, and in particular, the Secretary of State for Children, Schools and Families (Laming, 2009, p.26). In local government, he singles out the roles of Council Leader and Lead Member for Children’s Services (Laming, 2009, p.17), together with the officer roles of Chief Executive and Director of Children’s Services (Laming, 2009, p.18). Like the earlier call, this second one

challenges senior figures to exercise leadership by setting high ethical standards and providing a clear sense of direction: ‘Effective leadership sets the direction of an organisation, its culture and value system, and ultimately drives the quality of and effectiveness of the services provided’ (Laming, 2009, p.14).

The Status of Adult Social Care

As its name indicates, a further government-commissioned report in the early 2000s during the first decade of the current century focuses on services for adults rather than children and families. Despite this very different focus of attention, however, Platt’s call for leadership reflects concerns that are strikingly similar to Laming’s: variable and too often unacceptably low standards of service, poor public image, and low morale, as a result of which, ‘the service lacks confidence’ (Platt, 2007, p.1).

In her report, Platt (2007) observes that both the public in general and some of those who have personal experience as users of adult social care services ‘are critical of the service overall’ due to poor standards of practice and conduct, and a general lack of flexibility, responsiveness, and creativity. She goes even further, suggesting that people are not only critical but, in some cases, even actively fearful of these services ‘because of reports about neglect and cruel treatment’ (Platt, year, p.6). She describes how, in other cases, people have found that their needs remain unmet because ‘they cannot find the service they need...the minimum standards are too low...services are insufficiently responsive to their needs... [and] the services are passive’ (Platt, 2007, p.6).

Platt (2007, p.1) tempers the more despondent findings of her review, however, by suggesting that there are also some positive experiences, which provide the basis for a more hopeful vision of what adult social care has to offer: ‘[Adult] social care, when

done well, can transform people's lives, give them new opportunity Platt (2007, p.1) , help them realise independence and provide personal care with dignity and understanding'.

The terms in which Platt's call for leadership, is expressed has close resonances with that of Laming, as evidenced in her statement of how the extent of reform required to realise this potential is so major as to amount to the need to achieve 'a step change in the way the service is organised and delivered' (Platt, 2007). She argues that this will require leadership that has the power to generate 'imagination, excitement and enthusiasm' (Platt, 2007, p.1).

Although its tone is in keeping with the vision of transformational leadership identified in Laming's reports (2003; 2009), however, Platt's call for leadership suggests that there is a need for transformational leadership to be delivered by individuals, not only in positions of seniority within the structures of local and national government but also 'across the sector and at all levels within it' (Platt, 2007, p.1). She expresses an ambition to develop 'world class practice leaders, service leaders, system leaders' (Platt, 2007, p.9) and argues for the establishment of a national skills academy, as a major vehicle for achieving this. This represents a change in perspective, towards a more distributed understanding of leadership that is also reflected in the two remaining calls. The implications of this, in terms of implicit theories or models of leadership, are discussed later in this section of the review, in the context of the discussion of the reports of the Munro Inquiry into Child Protection.

As referenced in the introduction chapter, while Platt is keen to make it clear that the adult social care workforce encompasses many people other than social workers, she identifies social workers as a particular target of this call, as representing the primary group of qualified professionals within this workforce.

The reports of the Social Work Taskforce

While the Laming and Platt reports focus, respectively, on services for children and families, and services for adults, and incorporate consideration of roles beyond those of social workers, the reports of the Social Work Taskforce (2009a; 2009b) encompass both these areas of practice, but, again as the name indicates, focus exclusively on social work.

The establishment of this task force by the central government, was, in itself, a clear indication of the level of concern with which both the morale and performance of the profession were regarded, by both those within and outside the profession. Chaired by Dame Moira Gibb, it consisted of senior staff from local authorities and other employer organisations, representative bodies, academics, and a journalist from a popular newspaper. The task force undertook a literature review and gathered evidence from stakeholders including social workers, people with direct experience of receiving social work services, employers, academics, and senior figures from representative bodies through calls for evidence, targeted surveys, consultation events, targeted meetings, focus groups, and visits to local authorities to observe practice and hold discussions (Social Work Taskforce, 2009a).

In its interim report, the Taskforce (2009a) reports the themes that had emerged from these consultations. Many of these repeat and elaborate concerns identified by Laming and Platt. The Taskforce reports that social workers felt under-prepared for their roles due to inadequacies in both pre- and post-qualifying training and education, were poorly supported by supervision practices that focused on business issues rather than professional development and were overstretched because of staff shortages. In addition, this report refers explicitly to social workers' experiences of the stress imposed by the tools and systems described in the previous section and the demands

of a performance management framework that did not reflect the priorities of the people they were there to serve (Social Work Taskforce, 2009a).

Like Laming (2003; 2009) and Platt (2007), the Taskforce reports that the morale of social workers was further impaired by the low esteem in which the profession was held by members of the public, reinforced by negative media coverage and how this served to deter others from entering the profession: ‘social workers feel that their profession is undervalued, poorly understood and under continuous media attack. This is making it hard for them to do their job and hard to attract people into the profession’ (Social Work Taskforce, 2009a, p.6).

Further underlining the conclusions drawn by both Laming and Platt, the Taskforce reports that social workers themselves were frustrated at the inability of the profession to exercise leadership on its own behalf and how this had made it an open target for politically informed changes to be imposed on it: ‘Many social workers have...expressed frustration at an absence of strong leadership within the profession: the profession is not setting standards for itself and is, therefore, vulnerable to being “done to” by government and others seeking reform’ (Social Work Taskforce, 2009a, p.60).

Like Platt, the reports of the Social Work Taskforce (2009a; 2009b) express an aspiration for distributed leadership, in the form of leadership ‘at every level’ (Social Work Taskforce, 2009b, p.5).

Accordingly, the distinctive feature of the Taskforce reports (2009a; 2009b) is their specific emphasis on the exercise of professional leadership, by social workers, not only within their own practice but also on behalf of the profession itself. The reports assert the need for social workers to exercise leadership at the levels of direct practice,

in the development and governance of the profession itself, and in influencing policy, both locally and nationally. The Taskforce calls for leadership ‘in frontline practice...influencing the shape and priorities of local services...setting and maintaining the highest possible standards within the profession; and... influencing policy developments and priorities at national and political level’ (Social Work Taskforce, 2009a, p.5).

To this end, the report proposes what amounts to an additional tier or level of leadership, in the form of a new professional body, ‘a national college of social work’ that would ‘articulate and promote the interests of good social work...give the profession...strong, independent leadership; a clear voice in public debate, policy development and policy delivery; and strong ownership ... [of its own professional] standards’ (Social Work Taskforce, 2009b, p.7).

In essence, therefore, the distinctive nature of the Social Work Taskforce’s call for leadership is in setting an aspiration for the development of a new tradition of professionally driven rather than managerially driven leadership, to be exercised by individuals in their practice as social workers and managers, and collectively, on behalf of the profession.

The reports of the Munro Inquiry into Child Protection

The three reports of the Munro Inquiry (2010; 2011a; 2011b) provide, first, an analysis of the dynamics through which managerialist practices have contributed to the features of low morale and poor performance on the part of social workers, identified in each of the previous reports. Second, they express their own version of a call for leadership that offers a model in which the respective knowledge and skills of social workers and managers can be combined to overcome these.

The reports of the Munro Inquiry draw together the findings of research and other literature (including the reports of the inquiries and reports of the Social Work Taskforce cited above) with oral and written stakeholder testimonies from social workers, managers, policymakers and other specialists to offer a comprehensive analysis of the dynamics and the impact of managerialism on the practice of frontline social workers, from a systemic perspective. Although the Inquiry is specific to child protection, the evident parallels with accounts of experiences of social workers in services for adults suggest that the analysis presented in its reports is of relevance to the profession more generally, as is borne out by the fact that various recommendations were subsequently extended to encompass adult social work as well as children and families.

This analysis draws on a systemic methodology to present the detrimental effects of managerialist practices such as the ICS, discussed in the previous section of this chapter, as the cumulative, unintended consequences of a succession of well-intentioned reforms designed to overcome the problems identified by earlier inquiries such as that of Laming (2003; 2009): ‘Each new reform, in isolation, has often been well designed, but the problem lies in the cumulative effect they have been having on practice’ (Munro, 2010, p.12).

Drawing on the systemic methodology that informed the Inquiry, Munro (2011b) argues that this was not recognised because of the prevalence of ‘single loop’ thinking, which was informed by, and, in turn, sustained two powerful, managerially informed, fallacious assumptions. The first was that it was possible to prevent all instances of non-accidental serious harm and death to children and young people. The second was that the most effective way to achieve this was to closely prescribe the processes that social workers should follow and embed this by means of structured tools and

procedures, reinforced by rigorous processes of performance management and inspection. Munro describes how this single loop thinking led to instances of non-accidental child deaths being interpreted as evidence of failures of compliance, triggering more rigorous enforcement and the scapegoating of individual social workers, as described by Laming (2003). Like Lymbery (2001) and Laming (2003; 2009), Munro draws attention to how this contributed to the generation of a vicious circle in which working in conditions of high stress and blame led to high levels of social worker sickness and attrition and problems of recruitment.

Munro suggests that one of the effects of this single loop thinking was that organisational managers and policymakers consistently over-estimated the capability of procedures and quantitative measures of performance and, correspondingly, failed to appreciate the essential part played by social work functions that go beyond procedures in protecting and promoting the welfare of children and young people. Munro (2010, p.12) describes how ‘efforts to improve practice...have tended to focus mainly on the process of case management, increasing regulation and standardised assessment frameworks...to seek to improve practice in child protection through targets and performance indicators [and] Inspection methodology...[based on] quantitative measures of process.’

Munro argues that the extent of the demands placed on social workers in complying with detailed procedural requirements has prevented them from exercising the crucial professional skill of working relationally with children and their families:

The level of increased prescription for social workers, while intended to improve the quality of practice, has created an imbalance. Complying with prescription and keeping records to demonstrate compliance has become too dominant. The centrality of forming

relationships with children and families to understand and help them has become obscured.

(Munro, 2011b, pp.7–8)

Munro concludes that this has undermined, rather than improved the quality of their practice:

The reforms have driven compliance with regulation and rules over time, with social workers increasingly operating within an over-standardised framework that makes it difficult for them to prioritise time with children, to get to know them, and understand their feelings, wishes, and worries. It is then in turn difficult to provide the flexible and sensitive responses that match the wide variety of needs and circumstances that are presented.

(Munro, 2010, p.9)

Based on her systemic analysis, Munro (2011b, p.108) argues for a cultural shift, ‘from a blaming, defensive culture to one that recognises the uncertainty inherent in the work’ and from ‘a compliance to a learning culture’ (Munro, 2011b, p.129). In support of these objectives, Munro’s call for leadership combines elements of each of the previous calls that have been discussed (i.e. Laming (2003; 2009), Platt (2007), and the Social Work Taskforce (2009a; 2009b)) in arguing for, first, the development of professional leadership and, second, a revised interpretation of the function of managerial leadership. As cited in the introduction chapter, she asserts that ‘Leadership behaviours should be valued and encouraged at all levels of organisations’ (Munro, 2011b, p.108) and goes on to provide proposals as to what this should comprise.

In the context of social work practice, Munro asserts that social workers need to demonstrate leadership by using their professional skills to devise their own approaches to working with individual children and families, and in using their authority judiciously:

At the frontline, personal qualities of leadership are needed to work with children and families when practising in a more professional, less rule bound, way...to challenge poor parenting, and [to] have the confidence to use their expertise in making principled judgments about how best to help the child and family.

(Munro 2011b, p.107)

In relation to managerial leadership, Munro does not suggest that systems and procedures should be abandoned, but that their value and effectiveness needs to be carefully evaluated so that they support high-quality practice rather than constraining it. She argues that one of the main functions of a revised managerial leadership should be to sustain an environment in which social workers can feel safe enough to exercise professional judgement and respond flexibly to the needs of individual children and their families, without the fear that they will become the targets of unrealistic blame. She cites expert advice provided to the Inquiry by William Tate, a specialist in systems theory, to the effect that 'Managers should use their leadership role to monitor and improve...what the system requires of frontline workers; and...how healthy and free of toxicity is the work environment' (Munro, 2011b, p.102).

She argues that to be able to do this, managers need to be able to work collaboratively with people who can provide leadership that is informed by the perspective and experience of social work practice. To achieve this, she proposes the creation of senior

posts of professional leadership within local authorities and at a national level. At the level of local authority children and families' departments, she proposes that:

Local authorities should designate a Principal Child and Family Social Worker, who is a senior manager with lead responsibility for practice in the local authority and who is still actively involved in frontline practice and who can report the views and experiences of the front line to all levels of management.

(Munro, 2011b, p.102)

At a national level, Munro argues for the establishment of a national post of Chief Social Worker, who can fulfil a similar function in respect of central government policymakers. She proposes that the person appointed should be, 'an experienced and highly respected social worker' who is, by that fact, 'capable of conveying "practice intelligence" and influencing Government policy at the highest level' (Munro, 2011b, p.120).

The final section of this literature review situates these calls for leadership and the present research in the context of leadership literature.

LEADERSHIP LITERATURE

Reflecting on these calls for leadership from the perspective of leadership theory, two features were readily evident to the researcher. The first was that each of the calls, with their insistent references to the need for leadership and the way that they are associated with the expression of an urgent need for radical, or step change, implicitly invokes the distinction originally proposed by Zaleznik (1977), and subsequently elaborated by other leadership theorists such as Kotter (1990) Bennis and Nanus (2007), and more recently, in the related context of the NHS, by Grint and Holt (2011). The main element of this distinction is that while management focuses on efficiency through developing

and deploying standardised tools, procedures, and systems, or standard operating procedures (SOPs) to achieve established organisational objectives effectively and efficiently, leadership is about envisioning and bringing about change. Authors such as those cited argue that organisations need people who can exercise both these functions, but that the qualities and skills that are required in times of rapid change and challenge are those of leadership. The second feature, as noted within the review of these calls in the previous section, was that there was clear evidence of a progression between the calls of Laming (2003; 2009) and those of Munro (2010; 2011a; 2011b) from a position in which leadership is conceptualised as the responsibility of those in the most senior positions of governance and management to one in which it is seen, to use a colloquial expression, as being, in effect, everybody's business.

Beyond this general direction of travel, however, it was difficult to extrapolate from the reports a more specific model of leadership. What each of them appeared to provide was an account of the purposes that the leadership they were calling for needed to achieve, together with recommendations for practical measures to develop it such as revised service structures, new posts and improved education and training, including a specific focus on leadership. What appeared to the researcher to be missing, however, was a specific model of how such leadership was envisaged to work, that is, what were the processes through which it was to be enacted and how were they expected to produce the effects that were envisaged?

Literature relating specifically to social work leadership

This section of the chapter reviews literature that focuses specifically on social work leadership. It describes the search process that was followed and then goes on to consider the two main themes identified in this literature: the reasons why authors

consider that a different approach to leadership is needed and the leadership approaches and models that they advocate.

Searches used EBSCO and IBSS (international Bibliography of the Social Sciences). Searches on EBSCO accessed Academic Search Premier, CINAHL Complete, Medline and PsychINFO. Search parameters specified peer reviewed journal articles published in the last 20 years (January 1999 to January 2019) in English and books published in the same period. Review articles were included the initial searches in order to identify relevant books that were not listed separately in the databases but were not reviewed per se.

Searches were made for the combined terms “social work” (i.e. precise term) AND leader*(i.e. fuzzy search). To ensure that this was the most effective formulation additional trial searches were made substituting “social worker” or “social workers” for “social work” but did not add any further relevant items. Substituting lead* for leader yielded many more results but none that were relevant. In the case of articles searches were made on *title* alone as trial searches that included either *abstract* or *main subject* proved too inclusive. i.e. all additional articles returned were outside the intended scope of the search. In the case of book reviews and books, however, trial searches on *title* proved too limiting and extending the criteria to include *abstracts* and *subject line* proved more productive.

Including the reviews, the EBSCO article search provided an initial total of 90 items and IBSS added 20. These figures take account of internal de-duplication functions that were applied within each database but there were also 14 duplications between the two lists. Removing these therefore resulted in a combined total of 96. 41 review articles were discarded, as discussed above, plus two letters to journals. Three articles

were removed because they were biographical accounts of people who were identified as leaders but did not include any theoretical discussion of their leadership. Six were removed because they were about specific tools and resources for leaders rather than discussions of leadership. 19 articles were excluded because their focus was to highlight areas of practice where leadership was considered to be needed, in which the authors were arguing for creating or increasing social worker posts to serve as practice exemplars. Nine articles were discarded because they were accounts of specific training courses and did not include a substantive discussion of the nature of the leadership they were intended to inculcate. This left a total of 16 articles for the review.

The EBSCO search did not identify any relevant books. The IBBS one returned one book and three book chapters (from separate books). A further four books were identified from the review articles (there was extensive duplication between these, i.e. some books were the subject of several reviews). Of the resulting total of eight books that were reviewed four were by a single author and four were edited books in which chapters were written by different authors, from which relevant ones were selected for review.

The need for a different kind of social work leadership

In line with authors discussed earlier, Lawler and Bilson (2010) argue that managerialist leadership practices, based on proceduralisation and the exercise of top down managerial authority, are too rigid and restrictive to be responsive to the multi-dimensional nature of the social work role, or the complex and rapidly changing environment of the organisations where they are employed.

They locate managerialism within what they characterise (p.6) as ‘rational-objectivist’ theories of leadership. They describe such theories of leadership as being based on

principles of linear rationality and the positivist belief that it is possible to identify leadership models and techniques that are universally applicable, irrespective of context. They suggest that such theories draw on principles that originated in military leadership and were taken up and developed for the purposes of commercial organisations, beginning in the early period of industrialisation. The underlying premise was that organisations could be made more efficient by applying the principles of mechanisation to the management of people as well as to the technical process of manufacturing. They suggest (p.9) that this led to the development of an ‘instrumental perspective’ towards people who became human resources, in relation to whom the task of leadership was construed as ‘the technical one of making human beings fit the requirements of the organisation.’ (Lawler and Bilson, 2010, p.77).

Lawler and Bilson (2010, p.161) argue that one of the main reasons why managerialist leadership is unsuitable for public services in general, and social work more specifically, is that the aims of commercial and public services are fundamentally different. Like other authors reviewed earlier, they argue that the purpose of social work (2010, p.138) is much wider than ‘simply to deliver “products” to “customers”’.

Sullivan (2016, p.555) argues that even within this area of direct provision there is a crucial difference of purpose. While the main purpose of commercial businesses is to secure a ‘healthy bottom-line’, i.e. to make a financial profit, for leaders and managers of social care and health services the primary aim is to be responsive to the specific needs, personalities and circumstances of each individual or community. Budgetary efficiency is important, but as a means of resourcing this rather than a primary aim. Sullivan adds to this that in practice the extended vertical hierarchies that characterise managerialist organisations undermine organisational leaders’ ability to gain a clear

understanding of service users' needs because it removes them too far from the front line of service delivery.

Colby Peters (2017, p.341) draws out this theme of contrasting aims and objectives further. She argues, first, that commercial businesses pursue competition with other organisations, while social workers and the services in which they operate aim to work collaboratively with both service users and with other organisations who have similar or allied responsibilities. Second, that commercial organisations seek to grow their markets by encouraging their customers to increase their use of them while human services, especially social workers, aim to enable service users to develop their own capabilities so that they can become more autonomous, with the intended effect of 'essentially *decreasing* demand for services and products'.

Jones (2013, p.93) shares the view that both the orientation and the mechanisms of managerialism pose an active threat to social workers' ability to work in accordance with their professional values': 'The cult of managerialism reflected in burgeoning bureaucracy and prescription... has a danger of undermining the value-base, with its focus on respecting individuals and their differences and recognising their worth and potential capacity.'

On similar lines, Colby Peters (2017) argues that social workers, whether they are working as practitioners, managers or organisational leaders, are motivated very differently from people in the world of industry and commerce. She suggests (p.341) that they are driven by their commitment to altruistic values rather than material ones: 'the primary purpose of social work is to increase human... and community well-being'. Lawler and Bilson (2010, p.161) also pursue this line of argument, asserting that social workers' values and principles lead them to identify obligations that go well

beyond assessing and responding to the needs of individuals, to 'advocate change in the wider social world' by 'challenging inequalities, inequity and oppression'.

Mizrahi and Berger's (2005) account of findings from a large-scale, longitudinal study of social work directors in hospitals across the USA provides empirical evidence that substantiates these authors' concerns. They report the conclusions of their analysis of evidence of returns from a qualitative survey that was sent three times to managers of social work services in 750 hospitals, at two-year intervals, achieving response rates of 46% in the first round and 42% in the second and third. They describe how accounts from social work directors showed that managerialist leadership measures, applied under circumstances of budgetary pressure, had the effect of circumscribing the role of social workers and compromising their values.

They explain that respondents described how social workers' roles were being progressively redefined to focus their efforts on practical tasks designed to achieve rapid hospital discharges, so that organisations could achieve targets for patient throughput and budgetary efficiency. They characterised social workers as becoming distressed, first, at having less opportunity to work relationally with patients and family members to provide emotional and psychological support. Second, at being put in a position that compromised their ability to act as patient and family advocates, because they had been enlisted as agents of an organisational process that prioritised throughput of patients at the expense of their individual needs.

The authors describe (p.163) how social workers and their leaders faced the dilemma of choosing between risking the extinction of their profession in this setting or becoming complicit in practices that could be actively harmful to the people they were there to help: 'social work survival has the potential to compromise social advocacy and commitment to social justice'.

Mizrahi and Berger describe their finding of a trend of lower level social work managers choosing to leave the service and of social work practitioners opting to remain in direct practice, rather than seeking to progress to roles of management and leadership in which they would have to engage more immediately with this dilemma. They express their sense of urgent concern about this, as this abnegation of social work leadership left social workers to be line managed by non-social workers who were neither equipped nor motivated to defend their perspective.

From within the UK context and a perspective of organisational leadership Jones (2013, p.93) identifies a further practical implication of the conflict between the values and methods that inform managerialism and those of social workers. He observes that the policy objectives set for social care services by central government are congruent with the values of social work but at odds with the standardised approach enshrined within managerialism. He argues that this:

challenges and potentially undermines... social policy intentions... about 'personalising' assistance and seeing people as having competence and with the status and esteem of making a contribution as active participating citizens within their communities. This all requires responsiveness, flexibility and creativity rather than regimentation and standardisation.

Lawler and Bilson (2010, p.9) argue further that managerialism's 'instrumentalist perspective' is out of keeping with not only the 'essentially moral' but also the 'emotionally charged' nature of social work. Colby Peters (2017) takes a similar view. Like Munro, (2011b), as discussed earlier, she observes that organisations based on this approach fail to provide social workers with the support that they need to cope with the 'potentially unsafe and emotionally wrenching situations' faced by service users, or the hostility they encounter from some of those who are involuntary subjects

of their interventions, ‘individuals who may not want their help.’ (Colby Peters, 2017, p. 341). Similarly, Ruch (2012) argues, like Munro (2011b) that managerialism promulgates a conceptualisation of the social work role that denies both its complexity and emotional charge and that this needs to be replaced with managerial leadership that supports and promotes both intellectual and emotional reflectiveness and learning. She argues, (p. 1328) for ‘structures **and** cultures that allow a reflective stance to permeate from the top to the bottom of the organisation.’

Lawler and Bilson (2010) and Webster (2013) are in accord with leadership theorists such as Grint and Holt (2011) in arguing that the proceduralised approach of managerialism is also ill suited to a complex and rapidly changing socio-economic and political landscape. They characterise the contemporary context of public services as an ‘environment that is fraught with uncertainty’ and ‘particularly turbulent’ (Lawler and Bilson, 2010, p,138-9). They argue that many of the problems faced by social work practitioners, managers and leaders fall within the realm of wicked rather than tame problems and share Jones’s view that this requires innovative rather than formulaic approaches. Accordingly, they advocate (e.g. pp. 20-21) the adoption of models of leadership that are ‘reflective-pluralist’ rather than rational-objectivist. These recognise that people within the same organisation will have different experiences and perspectives and treat this as a source of valuable ideas that can be activated through providing opportunities for shared reflection and exchange of views.

Like Munro (2011b,), Webster (2013, p.43) advocates a systemic approach to building explanations of the problems of both service users and the organisations that serve them. He draws on complexity theory to suggest that it may be more helpful to think of organisational development in organic rather than mechanistic terms. Writing from a New Zealand perspective, he suggests that there is an instructive parallel that can be

drawn between ‘social work ecological’ thinking and indigenous models of leadership. He observes approvingly (p.45) the emergence within the wider leadership literature of accounts that advocate values and practices that are in greater harmony with the aims and values of the social work profession, such as ‘authenticity, ethics, indigenous, shared and exemplary leadership’.

Approaches to developing social work leadership

Authors on social work leadership agree that such leadership is urgently needed but adopt different approaches to the question of how to develop it. Some do so by setting out to discover or develop a definition of leadership that is apposite to the needs and characteristics of social workers. Gilbert (2005, p.5) begins by exploring the etymology of the word *leadership* and related terms in English and other European languages. He notes that the origin of the English verb *to lead* is the Old English *laeden*, which conveys the concept of providing direction ‘to show the way... to give an example’ but prefers the connotations of the French verb ‘conduire’, which incorporates the Latin prefix *con* (with) and thus expresses a sense of collaboration, ‘a much more democratic value of walking with... a notion of doing leadership as a way of doing things together.’

Lawler (2007) argues for an interpretivist approach. He references an observation originally made by Stodgill (1974, p7) that ‘there are almost as many definitions of leadership as there are persons who have tried to define it’. He pursues Alvesson and Sveningsson’s (2003, p. 362) argument that this lack of consensus, despite the profusion of attempts, indicates that a more worthwhile approach may be to explore how the concept has been developed through social interaction. This is in line with Grint’s (2005) argument for understanding leadership as an ‘essentially contested concept’ (Gallie, 1955-6); i.e. a concept that is invoked in the course of debate or

argument for the purpose of differentiation. Lawler suggests (2007, p.125) that this may be helpful as a means of developing ‘new ideas and interesting ways of thinking’.

An alternative view is expressed, however, by both Holosko (2009) and Colby-Peters (2017). These authors argue that in order to overcome what Holosko (2009, p.454) refers to as the ‘leadership abyss’ in social work it will be necessary to provide focused leadership education for social workers and that to do so requires there to be a specification of what they need to learn. Both describe how they pursued this through undertaking literature reviews. Holosko (2019, p. 454) describes how he and two assistants undertook content analyses of articles by social work authors published in English in 70 academic journals between 1999 and 2002, as well books identified through searches of relevant bibliographic databases, in which leadership or a related term was referenced in the title and also in at least 15% of references. Colby Peters (2018, p. 34-35) describes a methodology that consisted of an analysis of articles that discussed theories or concepts of leadership in relation to social work in peer reviewed journals during the period 2005 to 2015.

Van Zwanenberg (2010) approaches her discussion of social work leadership by drawing on findings from the *21st Century Review of Social Work* (Scottish Exec, 2006) which involved consultations with a range of stakeholders, including service users and informal carers, social work practitioners and managers, related professionals and service providers, as well as contributions from academics within and beyond Scotland.

Other authors, such as Fisher (2005), Lawler and Bilson (2010), Ruch (2012), Jones (2013), Webster (2013) Hafford-Letchfield et al (2014) McKitterick (2015) Iachini et al (2013) and Gray and Schubert (2016), approach the subject of social work leadership thematically, drawing on a combination of theory and research findings

from the fields of social work and more general leadership literature, and examples from social work practice and management.

A smaller number of authors report findings and make recommendations based on their own empirical research in relation to social work leadership (Rank and Hutchison, 2000; Gellis, 2001; Mizrahi and Berger, 2005; Cullen, 2013; Yliruka, 2013; Tafvelin et al, 2014; and Vito 2015, 2018).

Proposed models and principles of social work leadership

Those writers on social work leadership who align themselves to a specific model of leadership opt chiefly for ‘servant’ or ‘transformational’ leadership, as will be discussed below. As characterised by these writers these models are by no means mutually exclusive, reflecting Lawler and Bilson’s observation (2010, p.75) that the development of such theories tends to proceed incrementally, ‘there is a tendency for new ... theories not to replace their older counterparts but to layer new concepts and ideas on top’.

Servant leadership

Reflecting the earlier discussion of the distinctive orientation of those who opt to work and exercise leadership in public services, Van Zwanenberg (2010, p.23), in common with Gilbert (2005) and McKitterick (2015), proposes that servant leadership is the appropriate model for organisational leaders of social work services. She draws on Greenleaf (1991) to argue that the over-arching purpose of social work leadership should be to engage the motivation of service users and community members and to inspire, support and encourage them to develop their own potential to provide leadership for themselves and others:

Greenleaf characterises the traditional institutional leader as driven by a will to be a leader first, a drive that tends to be more about power and material reward.... The servant leader is servant first, as the citizen, service users or carer is, and the drive that leads to taking a leadership role is the drive to serve, to create something better for others and the self.

Like Van Zwanenberg, as well as McKitterick (2010, pp. 10-12), Gilbert (p.115) argues that social workers have a moral responsibility not to operate paternalistically by imposing their own interpretations of service users' needs and providing services that reflect this. Instead they should use their own resources and skills to achieve working relationships of active cooperation with service users and communities. The focus of such partnerships is on enabling them to identify their own capabilities so that they are better equipped to define and play an active part in achieving the goals that are important to them, and in so doing to become leaders on their own behalf. Gilbert characterises this as:

shared and dispersed leadership – with the real emphasis on leadership by service users and carers Citizenship models of assessment and service delivery, rather than ‘the professional gift model’... building capacity by augmenting, rather than substituting... supporting rather than direct caring... leadership... which shares and distributes leadership, rather than micro-manages.

The present author's earlier research (Cullen, 2013) provides an illustration of this from a case study of the practice of a team of specialist palliative care social workers. This showed that these social workers used their own knowledge and skills to enable hospice patients and their families, first, to identify and communicate their priorities so that these could be used to focus the efforts of a hospice's multidisciplinary clinical team. Second, to become more conscious of their own capabilities and resources and

more able to mobilise them. The effect was that they became co-participants in the shared leadership of the hospice team.

In similar vein Van Zwanenberg (2010) describes how the *21st Century Review of Social Work* (Scottish Exec, 2006) developed an inclusive conceptualisation or 'construct' of leadership. In keeping with the more interactive and reciprocal interpretation of the leadership relationship proposed by Grint and Holt (2011) (discussed in the next section of this chapter) this envisages leadership, not as a process of unilateral influence in which only the identified leader is proactive and others are simply reactive, but as a more mutually influential one in which one in which each of the people concerned takes on responsibility for achieving the intended outcome. Van Zwanenberg describes (2010, p.19) how this interpretation of leadership is intended to embrace 'leadership of the profession, of services and organisations and of individual practice'... [It] goes beyond the concept of the individual named as 'leader' in any organisation, and [incorporates] individuals, their organisations and the whole profession of social work and social care services across organisational boundaries'.

This is in keeping with the principle of 'self-leadership' that is advocated by Gilbert (2005, p.37) and McKitterick (2015) for social workers across all roles, irrespective of hierarchical status. McKitterick (2015, p.16) explains that the concept of self-leadership that he advocates 'looks beyond leadership through position or role. It recognises the responsibility of everyone to take charge collectively in creating and maintaining direction, and to be motivated.'

Gilbert (2005, p.37) similarly advocates that self-leadership should be practised by staff at all levels from frontline practitioners to strategic leaders. This involves taking responsibility for 'developing their own narrative and vision for themselves and their work', 'stretching themselves mentally, emotionally, physically and spiritually' and

‘pushing forward the boundaries of practice’, in whatever role they are undertaking. He suggests that the behaviours needed to achieve this include ‘physical and mental self-care; self-organisation; and open communication and engagement with others’.

In common with other authors (Hafford-Letchfield, 2009. P.25; Lawler and Bilson, 2010, p. 169; Jones 2013, p.96; McKitterick 2015, p.25), Gilbert (2005, p.41) commends Goleman’s concept of ‘emotional intelligence’ or ‘EQ’ as an important supporting capability for self-leadership. Goleman (2001, p. 317) characterises this as the ability to become aware of and interpret the significance of one’s own emotional experience and that of others and to use this as a source of positive motivation and influence, ‘the capacity for recognising our own feelings and those of others, for motivating ourselves and our relationships’.

Gilbert argues (2005, p.107), like Munro (2011b), that for individuals to exercise the features of self-leadership they need to be supported by a context that embodies a commitment to continuing learning and development, for both individuals and the organisations in which they work. Fisher (2009, p.358) commends Senge’s (1990) model of the ‘learning organization’, with its component elements of ‘systems thinking, personal mastery, identifying and assessing mental models, building a shared vision, and team learning.’ Jones (2013, p. 95) joins her in advocating this as the basis for the development of ‘self-actualising organisations’ that are able to achieve ‘shared mental models (a common view) of how employees throughout the organisation should operate together’ and ‘a shared vision (a common aspiration) embraced by all in the organisation.’

Van Zwanenberg (2010, p.19) envisages that individuals and organisations with such characteristics will be equipped to extend these principles of relational working in

ways that will ‘actively support partnership working both with service users, carers and other service providers such as the National Health Service (NHS).’

Based on her review of the theoretical literature relating to social work leadership. Colby Peters (2018) also proposes an inclusive, multi-level conceptualisation of leadership. She offers a provisional definition (p.40), which incorporates similar features to those presented above:

A collection of organisational, relational and individual behaviours that effect positive change in order to address client and societal challenges through emotional competence and the full acceptance, validation, and trust of all individuals as capable human beings.

Like the authors referenced earlier, Colby Peters (2018) describes how this conceptualisation of leadership envisages that each individual’s practice, irrespective of role, will be based on values of social justice and personal integrity, together with a sense of vision. She describes how it involves behaviours that demonstrate an attitude of respecting and positively valuing other people and a disposition to avoid blame. Such behaviours include proactively using one’s own skills and knowledge to help both service users and colleagues to develop their own. In line with these other writers she describes how the capabilities and practices that are needed to support such leadership of self and others include, first, being aware of, able and willing to critically analyse one’s own thinking, emotions and behaviour, through practices such as personal reflection and professional supervision and, second, taking responsibility for identifying and finding ways to meet learning needs.

Again, like these authors, Colby Peters argues that organisational leaders should provide contexts that support active and distributed leadership. She advocates measures such as statements of organisational purpose and mission that are congruent

with values of social justice, together with policies and practices that prioritise staff wellbeing and development. Together with Ruch (2012) she argues that individuals should be valued for their abilities, supported to acknowledge weaknesses, and encouraged to express and process the emotions aroused by their work, both positive and negative.

Vito (2015) reports research findings that provides some empirical support for these arguments, from a small -scale qualitative study of how organisational leaders supported the practice of reflective social work supervision. This study involved a purposive sample of 10 experienced social work practitioners from different organisations. Indications from the research were that organisational leaders were highly influential in supporting this practice and in enabling the benefits of supervision to be realised. Recommendations based on the research findings were (p.162) that organisational leaders should model values that were congruent with social work, such as, 'integrity, humility and transparency' and promote a 'safe learning culture' in which 'workers are encouraged to try out new ideas, learn from them, and share their knowledge with one another.'

Social Change Model of Leadership

Iachini et al (2013, p.652) advocate the 'social change' model of leadership (Kommives and Wagner, 2009), as being congruent with the core values of the profession and aligned with current trends in thinking about social work leadership. Like servant leadership, this model focuses on enabling others to develop the capacity for self- leadership, in this case at the level of the community, together with an ability to inspire trust and elicit engagement through consistently demonstrating and communicating an authentic commitment to goals of social justice. A distinctive feature of this account is the principle of 'controversy with civility', i.e.

acknowledging that conflict is unavoidable but approaching it in a spirit of respect and restraint.

Transformational leadership

Characterisations of social work leadership advanced by Rank and Hutchison (2000) based on findings from a survey of 150 leading USA academics, and by Holosko (2009, p. 454), based on his review of the literature, identify similar features of commitment to altruistic values, vision and empowering others but envisage a more distinctive role of individual leadership. They emphasise the function of the individual leader in taking the initiative to set a new direction and sustain progress towards it, which Rank and Hutchison refer to as ‘proaction’ (2000, p.492). This is more reflective of theories of ‘transformational’ leadership (Bass, 1985, Bass and Alvolio, 1994). Fisher (2005) specifically commends transformational leadership as providing an apposite model for social work leadership.

As the leadership theorists Alimo-Metcalf and Alban-Metcalf (2005) describe, the model of transformational leadership differs from that of servant leadership in making a greater distinction between the role of leader and follower. In the transformational accounts the leader is seen as setting the direction as well as motivating and supports others to work with them to achieve it. In servant leadership the instigating leader takes their focus from the intended follower(s) and works to achieve a position where they can participate as peers in a process of shared and reciprocal leadership.

The four core features of transformational leadership are summarised below, drawing on Fisher’s (2005) account and that of the leadership theorist Northouse (2010, pp.177-179):

Inspirational Motivation: providing a vision and motivating intended followers to identify with this so that they are influenced to invest their own energies in pursuing it.

Idealized Influence: acting as a compelling role model, and, in some versions, demonstrating high moral standards and consistently ethical behaviour.

Intellectual Stimulation: influencing followers to extend their knowledge, challenge their thinking and to exercise creativity.

Individualized consideration: enabling followers to realise their own potential, providing advice, coaching, mentoring and opportunities for development.

Gray and Schubert (2016) put forward a feminist interpretation of transformational leadership. This includes (p.127) providing, powerfully communicating and proactively pursuing a transforming vision of altruistic social change through: ‘Action that is collaborative, community focused, and respectful...Learning that is empowering, reflexive] Ethical practices that promote inclusiveness, integrity and responsibility.’

Among the small number of research studies of social work leadership identified in the literature search, three were undertaken from a perspective that was aligned with transformational leadership.

Gellis (2001) reports a quantitative study in which questionnaires were completed by 234 hospital based social workers in the USA. Questions were designed to elicit social workers’ assessments of the extent to which their managers enacted behaviours attributed to transformational leaders, how much they valued them, and how they rated their effectiveness as leaders. She reports (p.21) findings of a strong positive correlation between respondents’ perceptions of their line managers’ effectiveness and

the four characteristic features of transformational leadership: 'Idealized attributes and behaviors, individual consideration, intellectual stimulation and inspirational motivation ...were significantly related to perceived leader effectiveness, satisfaction with the leader, and extra effort by social workers.'

Somewhat surprisingly in view of the findings of social worker demoralisation and attrition described earlier, Mizrahi and Berger (2005, p.164) report a positive assessment of the skills and influence of those social workers who stayed and progressed to upper levels of management within their hospitals (p.164). They describe how 'a majority of social work directors are strategic and transformational leaders [who are] using strategies that position social workers well for policy and practice roles in their institutions and in the community.'

They add the cautionary note, however, (p. 165) that the 'conflict and chaos ... inherent in today's health and social care environment' raise urgent questions for managers and researchers as to what strategies are effective in enabling social workers and their managers to withstand these pressures and remain positive under such circumstances.

Tafvelin et al. (2014) express a similar concern about the challenges facing the social work profession and the resulting need for leadership. They note that there has been little research into social work leadership, especially in Europe. They explain that they chose to focus of their own research on social work practitioner role clarity and commitment, because (p.890):

First, social service organisations face a challenging future with a rapidly changing environment where, in order to keep high performance and service quality levels, it will be important for employees to know what their specific role in the organisation is... and

to be committed to the organisation, as this buffers against stress and job displeasure during organisational change

They explain their decision to adopt transformational leadership as the base model for their research was based on evidence from studies of leadership in other contexts, that showed it to be beneficial in providing role clarity and eliciting commitment from staff.

Their study consisted of administering a postal survey to a representative, randomly sampled, cohort of 158 employees of a Swedish municipal social service organisation providing social welfare and care services focusing on older people and people with disabilities. The survey questions incorporated validated scales relating to the primary research questions. A further question, about how long respondents had been with the same line manager, was added to explore a second hypothesis that continuity of line manager might also be influential.

The authors report positive findings (p.896). These are, first, ‘a direct and positive effect of transformational leadership in social work on both employee role clarity and commitment’ and, second, that this effect was strengthened by keeping the same manager for a longer period.

Jones (2013, p.96) also commends the value of continuity of leadership, based on his own experience as a long serving local authority of social care and on findings from Collins’s studies of the characteristics of highly effective leaders (2001, 2006).

Tafvelin et al (2014) conclude by arguing (p. 898) that the findings of their research add to an accruing base of evidence in favour of this model as an apposite one for social work. They observe, first, that: ‘Our study, in line with previous studies in social work indicates that transformational leadership has positive effects in social service organisations’ Second, that: ‘studies of employee expectations demonstrate that

employees want a leader, not an administrator or manager’. Third, that: ‘leaders believe that a leadership based on vision, development and coaching is suitable for social work’. They conclude that: ‘these three pieces... seem to fit together and lead to the conclusion that transformational leadership will work well in social work.’

Based on her own research, however, Vito (2018) injects a cautionary note, that although transformational leadership may be the most relevant and helpful for social workers organisational pressures may undermine managers’ ability to provide this. She reports on a study that she and her colleagues made of three children’s services trusts in Ontario, Canada, that were implementing government mandated major structural change, based on considerations of business efficiency. This study focused on the leadership provided by senior organisational managers. Findings were that the organisations where decision making was democratic and participative were more effective in gaining the willing cooperation of social workers, because this was: ‘congruent with social work values’; and that this approach had ‘positive benefits in service organisations’ (p.1). However, the research also showed (p.13) that leaders in one organisation had resorted to more directive leadership because of the pressure imposed by the short time they were given to make major change. Vito concludes:

Where possible, practicing a participatory leadership approach and including staff in organisational decisions that affect them is helpful: but when pressed with competing internal and external pressures, and when making higher-level decisions, senior leaders may be forced to become directive.

Dialogical leadership

Yliruka and Karvinen-Niinikoski (2013) advocate a different approach to leadership, which does, however, embody some of the features that are advocated by the various authors whose work has been discussed above. Their model is based on a principle of

distributed leadership, delivered through structured practices of continuing dialogue, shared and reciprocal learning.

Although their study was done in Finland, Yliruka and Karvinen-Niinikoski identify similar imperatives for social work services to those described in the UK literature. They describe how the managerialist methods and their associated quantitative measures of productivity have failed to deliver adequate services and have excluded practising social workers from participating in discussions about to develop better ones. They argue that this has meant that managers responsible for the strategic development of services are failing to access the vital information and insights that practitioners could provide and has resulted in social workers feeling unvalued, demoralised and disaffected, leading to attrition.

In line with authors such as Munro (2011b) and Ruch (2012) Yliruka and Karvinen-Niinikoski argue for a more inclusive understanding of the social work role that attends to the emotional content of their work as well as the cognitive. They assert that taking account of the emotional impact of the work is important not just from the point of view of practitioner wellbeing but also because it is a vital source of insight that can be used to inform the development of organisational strategy. They contend that in the contemporary context of complexity and rapid change in the economic, social and political landscape the best way to develop and sustain social work productivity is for organisations to develop mechanisms that enable social work practitioners to reflect, analyse and develop proposals for change based on their practice experiences; and for direct line managers and those in strategic leadership roles to become co-participants, so that they can base their own work on direct evidence from frontline practice.

They describe a vehicle for this process in the form of a model that was co-developed between academic researchers and a social work service, designated the 'Mirror

method'. This has features of an action learning model but differs in having a more inclusive focus, designed to enable learning for the whole organisation rather than just an individual or small group. In this model a social worker identifies a case or practice situation that has caused them concern in relation to their own practice or features of their working context and writes a reflective evaluation of it, including, where possible, material contributed by the service user or users in question. This is then presented to the team, where other members are expected to engage with the material both emotionally and cognitively, providing a source of insights and lines of action for the practitioner and, reciprocally, for the team and organisation. This is followed up by subsequent formative and summative evaluation sessions to review progress and identify further learning points. Structured tools are provided for each stage of this process to enhance the scope of reflection and analysis. Operational and strategic managers are expected to participate as peer contributors, within a shared orientation of appreciative inquiry.

The authors report positive findings from the evaluation of this collaborative innovation, including feedback from practitioners of improved engagement and outcomes with service users, reduced need for urgent case- based meetings, impromptu consultations and time spent on case-focused supervision. They report that participants described the emergence of a culture that facilitated in-depth discussion and reflection about both cognitive and emotional aspects of the work. They report findings that this approach enhanced practitioner well-being and strengthened the engagement and commitment of practitioners and managers throughout the organisation.

Based on these findings the authors argue (p.201) for a radical revision of the concept of performance management in social work services, away from the managerialist one towards one that is more in keeping with social work values and objectives. They argue

that the dialogical model they describe provides the basis for a form of collaborative leadership that is apposite to this purpose. They summarise this account of leadership as one in which:

both managers and practitioners – regardless of their hierarchical positions – [to] become a part of the transformation processes.... leadership becomes more like a mediator in the meaning-making processes of solving the dilemmas of... the system.

Need for more research

Several of the authors whose publications have been reviewed in this section draw attention to the very limited amount of research evidence about social work leadership and argue that this is much needed (Rank and Hutchison, 2000; Fisher, 2005; Holosko; 2009; Tafvelin et al; 2014; Gray and Schubert, 2016; Sullivan, 2016; Colby Peters; 2018). Sullivan observes, (2016, p.559) that: ‘The call for a focused research agenda in this area is now decades old.’ The research reported in this thesis aimed to provide a contribution towards this.

Wider leadership literature

Although the present study identified some features that were in keeping with each of the servant, transformational and dialogic leadership models preferred by previous authors on social work leadership, the findings from this research were more in keeping with other theoretical formulations of leadership. The closest fit between the characteristic traits and behaviours of social workers identified from the research data was with those that are attributed by Heifetz and his colleagues (Heifetz and Laurie, 1997; Heifetz and Linsky, 2002; Heifetz et al. 2009, to those individuals whom they characterise as protagonists of ‘adaptive leadership’ (e.g. Heifetz et al. 2009, p.14). Additionally, there were also resonances with the account of leadership as a practice

of eliciting ‘responsible’ followership’ that Grint and Holt (2011, p.4) derive from a consideration of Rittel and Webber’s (1973) typology of tame and wicked problems. Both these models proved to be salient and were consequently used to provide a framework for elucidating the model of social work leadership that was identified through the analysis of the research data. Accordingly, the relevant features of each of these models are described below.

Adaptive leadership

Writing from a perspective of organisational development, Heifetz and his colleagues (Heifetz and Laurie, 1997; Heifetz and Linsky, 2002; Heifetz et al., 2009) invoke the distinction referenced earlier between the characteristic focus of management and leadership. More specifically, they derive their account of adaptive leadership from their observations of organisational leaders who have proved to be successful in developing rewarding responses to ‘adaptive challenges’, which they differentiate from ‘technical’ problems (Heifetz et al., 2009, p.19). Within this two-element typology, technical challenges are presented as being challenges in the limited sense that they involve some form of new requirement, but are sufficiently like those the organisation is used to fulfilling that managers can readily see how they can deploy existing tools and processes, or SOPs, to deliver them. In contrast, adaptive challenges represent situations in which the organisation needs to respond to changes that are so radical that its existing tools and processes are no longer adequate, and which actively threaten its continuing viability.

Under these circumstances, Heifetz and his colleagues (Heifetz and Laurie, 1997; Heifetz and Linsky, 2002; Heifetz et al., 2009) argue that leadership is needed, first, to enable the organisation to formulate an understanding of the nature of the challenge that will provide a basis on which to develop the new tools and processes that are

needed. Second, to instigate and facilitate a process through which it can develop these tools and processes. Heifetz and Laurie (1997), convey the nature of adaptive challenges by analogy with the situation of a group of chimpanzees, who have a well-established process of working together to avoid being individually picked off by predatory leopards, but are not equipped to deal with the new form of existential threat presented by human beings armed with rifles. The more positive corollary of adaptive challenges is that groups of animals, people, or corporate organisations, who can mobilise effective responses to adaptive challenges, are, by dint of developing this capability, able to turn them into opportunities to thrive.

Heifetz and his colleagues (Heifetz and Laurie, 1997; Heifetz and Linsky, 2002; Heifetz et al., 2009) argue that adaptive challenges require a qualitatively different approach and skill set to those that are applicable to managing technical problems. They suggest that solving technical problems involves deploying the characteristic expertise of managerial or, in their own terminology, ‘authoritative’ leadership (Heifetz and Laurie, 1997, p.134). This expertise comprises the managerial skills of, first, identifying which of the organisation’s established tools and processes needs to be deployed to achieve outcomes that are within its existing scope of competence and, second, using positional power to ensure that the relevant staff carry out the tasks involved. They contend that this form of top-down leadership is unsuitable in responding to adaptive challenges because, although the organisation’s leaders may have identified the need for change and the goals that need to be reached, they do not, by themselves, have the knowledge and skills needed to adequately specify what needs to be done to reach these goals. Under these circumstances, they argue that organisational leaders need to engage the capabilities and energies of other people throughout the organisation, as co-owners of the challenge and co-producers of the

response. The form of leadership needed is, therefore, not to direct or instruct, but to steer a process of organisational learning and development.

The...notion that leadership consists of having a vision and aligning people with that vision is bankrupt because it continues to treat adaptive situations as if they were technical: the authority figure is supposed to divine where the company is going, and people are supposed to follow. ...Such a perspective reveals a basic misconception about the way businesses succeed in addressing adaptive challenges. Adaptive situations are hard to define and resolve precisely because they demand the work and responsibility of...people throughout the organization.

(Heifetz and Laurie, 1997, p.134)

Heifetz and his colleagues (Heifetz and Laurie, 1997; Heifetz and Linsky, 2002; Heifetz et al., 2009) identify features and practices of individuals whom they have observed to be effective providers of this form of adaptive leadership. In summary, these include:

1. An ability to identify the presence and nature of an adaptive challenge and, based on this, the overall goals to be achieved.
2. Strategic and tactical agility. As the above quotation indicates, Heifetz and his colleagues (Heifetz and Laurie, 1997; Heifetz and Linsky, 2002; Heifetz et al., 2009) argue that adaptive leaders refrain from setting out a detailed blueprint or programme of organisational change. Instead, they steer the process of development by moving agilely between the perspectives of holistic overview and a direct engagement with the detail of operational service delivery. Heifetz et al. (2009, p.8) refer to these as the views from the 'balcony' and the 'floor'. By metaphorically standing on the balcony, adaptive leaders can make a holistic and systemic assessment of the dynamics of the organisation and assess

overall progress towards the goals of change. By engaging directly with the specific detail of what is happening on the operational floor, they are able to make continual, timely, adjustments in response to issues, opportunities, and insights, as these emerge throughout the change process.

3. Within this considered and progressive approach, Heifetz and his colleagues (Heifetz and Laurie, 1997; Heifetz and Linsky, 2002; Heifetz et al., 2009) describe how adaptive leaders make, or orchestrate, an assessment of how the organisation's existing tools and processes can be deployed usefully and adaptively in developing the new capabilities that are needed.
4. As the quotation also highlights, Heifetz and his colleagues (Heifetz and Laurie, 1997; Heifetz and Linsky, 2002; Heifetz et al., 2009) argue that, above all, adaptive leaders enlist and sustain the active collaboration of people across the various roles and functions within the organisation, throughout the process of change, as a crucial feature of adaptive leadership. They describe this as incorporating activities of engagement, support, and challenge.

Grint and Holt's concept of responsible followership

Grint and Holt (2011) base their argument for leadership as a process of eliciting responsible followership on Rittel and Webber's (1973) typology of tame and wicked problems. This is similar but not identical to the typology of technical and adaptive problems described above.

Rittel and Webber (1973) describe tame problems as being well defined and having boundaries, with clear terms of reference and transparent solution criteria. Tame problems may be complex, but once a solution to them has been worked out, it is definitive and readily replicable, independent of context; anyone with sufficient knowledge of the relevant subject matter should be able to confirm its validity and

adequacy and apply it to resolve similar problems. Rittel and Webber (1973) describe tame problems as being characteristic of fields such as maths, science, and technology, rather than of social science or related areas of practice. They provide examples: solving a mathematical equation, devising a system for achieving checkmate in chess in a defined number of moves, and analysing a newly discovered chemical compound. In contrast, they argue that the characteristic problems of the social world are examples of wicked problems. The sense in which they use this term is not intended to convey any suggestion that wicked problems are the product of any deliberate malevolence. Their wickedness consists instead in being inherently ill-defined and incapable of having a definitive solution. One of the main reasons for this is that they are embedded in multiple, mutually dependent, interacting systems, and cannot be extracted from these and dealt with in isolation because any action that is taken will affect these other systems in ways that cannot be reliably predicted. Deciding on how they should be approached is a matter for choice and judgement, depending on factors such as the priorities that are chosen, the tools that are available, and the scope of action that is acceptable or feasible. Rittel and Webber (1973) provide the example of dealing with a problem of traffic congestion, demonstrating that this can be defined variously as one of excess traffic that should be managed by imposing restrictions, an inadequate provision of roads that should be managed by building additional ones, traffic management that should be dealt with by devising new systems, or by any combination of these. In each case, however, these apparently straightforward solutions are not self-contained but have potential impacts such as restricting mobility, displacing housing in order to build roads, and costs that preclude other socially valuable projects.

The important implications of this are, first, that wicked problems need to be approached from a holistic perspective that takes account of the wider context in which

they are situated. Second, that the process of responding to wicked problems is one of development rather than of discovery. Third, that wicked problems cannot be adequately addressed solely by applying technical solutions or SOPs because these cannot, by themselves, take adequate account of features that are unique to their specific context and configuration. Finally, and relatedly, that responses that are developed in response to a wicked problem in one setting cannot be transferred without adjustment to another. Rittel and Webber (1973) make the important observation that because of the embedded nature of wicked problems, whatever response is developed will inevitably have unforeseen impacts that are likely to necessitate further action. For this reason, the process of developing and implementing a response to a wicked problem is inherently an iterative and incremental one, rather than a defined and bordered one. It is concluded when a solution has been found that is deemed to be good enough, at least for that time, rather than conclusive and definitive.

The findings of the Munro Inquiry into Child Protection (Munro, 2010; 2011a; 2011b) referenced in the previous section, can be construed as providing (among other things), an exposition of child protection social work as a process of dealing with a wicked rather than a tame problem. Munro argues that, because each child, and the context of their lives, is unique, it is not possible, even in principle, to devise a set of standardised tools or procedures that could, by itself, equip social workers to make an adequate assessment of their varied needs. Accordingly, she argues that social workers must be able, and permitted, to exercise professional judgement in assessing these needs and in devising interventions that are personalised to their individual characteristics, family situations and the wider social networks within which these are located and are in continual interaction. This includes being able to exercise discretion in deciding how far the available tools and processes are relevant to the needs of each individual child

or young person, ‘children’s needs and circumstances are very varied and this is not an area of work that can be reduced to a set response. Consequently, professional judgment needs to be exercised in determining how or whether to follow procedures and guidance in any specific case’ (Munro, 2011b, pt. 2.29, p.37).

This interpretation is reflected further, in her arguments, quoted earlier, of the need to support this at an organisational level by moving ‘from a blaming, defensive culture to one that recognises the uncertainty inherent in the work’ (Munro, 2011b, p.108) and from ‘a compliance to a learning culture’ (Munro, 2011b, p.129).

In a manner that is analogous to that of Heifetz and his colleagues (Heifetz and Laurie, 1997; Heifetz and Linsky, 2002; Heifetz et al., 2009), Grint and Holt (2011) argue that the novelty, uniqueness and complexity of wicked problems mean that those who are faced with them need to recognise their own limitations and be prepared to engage others, not as, in their own terms, ‘compliant followers’ but as active contributors to the process of developing and implementing an effective response: ‘since wicked problems are partly defined by the absence of an answer on the part of the leader then it behoves the individual leader to engage the collective followers in any attempt to come to terms with the problem’ (Grint and Holt, 2011, p.11).

They designate the role of these active collaborators as that of responsible followership, to convey that the relationship is one in which these followers take on a sense of shared ownership of the objective in hand, so that they are prepared to be proactive in contributing their knowledge, skills, and energy to the development and deployment of an adequate response.

These concepts of adaptive challenges, wicked problems, adaptive leadership, and responsible followership provided the theoretical framework for the later stages of the

analysis of the data. After the first of the findings chapters, which describes the ethical motivations that inform the leadership of social worker participants in this research, aspects of these concepts are reflected in each of the remaining findings chapters and in the model of social work leadership that is presented in the conclusion.

CONCLUSION

This chapter has traced the evolution of the situation in which evidence of widespread dysfunction and demoralisation gave rise to a succession of calls for leadership. Five of these calls were reviewed, identifying a progressive shift in the focus of these calls from a hierarchical one, in which leadership is confined to a small number of senior figures, to a function that is seen as being the responsibility of people at all levels. What is also evident from the review of the literature on social work leadership is that despite the value that writers on social work leadership place on distributed or shared leadership most studies have focused exclusively on leadership by managers. The exceptions to this are the author's own study (Cullen, 2013), which focused on practitioner leadership and Yliruka and Karvinen-Niinikoski's study (2013), which was the one example of research that focused on the part played in leadership by both practitioners and managers at different hierarchical levels. This last was thus the only one that could reasonably be considered as constituting some response to the calls for social work leadership 'at all levels'.

As noted in the Introduction chapter of this thesis, this review has also shown how the focus of research up to now has been based on applying concepts of leadership derived from other disciplines and areas of activity to social work, rather than seeking to identify distinctive features of leadership within the profession itself.

As referenced earlier it was these considerations that prompted the present study.

The thesis now goes on to describe the methodology and specific methods that were used to elicit and analyse the data, from which the resultant model of social work leadership was derived.

CHAPTER 3. METHODOLOGY

RESEARCH OBJECTIVES

In the context of a reputed dearth of leadership by and for social workers, the objectives of this study were:

- To find out how people who are qualified social workers interpret the concept of leadership.
- To find out whether there are distinctive features of social work leadership and followership that could be expressed as a model for use by social workers to enhance leadership capacity within and on behalf of the profession.

RESEARCH QUESTIONS

The specific questions the research was designed to answer were:

- How do social workers who are employed as practitioners, managers, and senior leaders conceptualise leadership?
- What features of leadership are explicit or implicit within the practice of qualified social workers operating at each of these levels?
- What factors encourage and support the engagement of social workers in leadership?
- What are the main barriers to the engagement of social workers in leadership activities?
- What (if any) distinctive effects are associated with leadership activity on the part of social workers operating at each of these levels?

INFORMING ONTOLOGY & EPISTEMOLOGY

This research is informed by a critical realist perspective. The key tenets of critical realist ontology are that there is an external physical reality that is governed by ‘enduring structures and generative mechanisms’ that produce the ‘observable phenomena and effects’ of the ‘natural world’ or physical universe (Bhaskar, 1989, p.2). Critical realists propose that although we cannot directly apprehend these mechanisms of cause and effect, we can infer them through the empirical procedures of the natural sciences.

In the case of the social world, critical realists propose that the cumulative effects of our interactions with one another create far-reaching mechanisms of cause and effect that are similarly beyond our direct apprehension or control. This means that, collectively, but unwittingly, we may contribute to creating effects that go beyond or even undermine our intentions. Archer in (Archer et al. 1998, pp.190–191) refers to this as the ‘riddle of structure and agency...what depends on intentional human action but...never conforms to these intentions...?’ Archer offers inflation as an example of a generative mechanism, or structuring force, within the social realm, whose effects can be identified through the practices of social scientists but is not apparent to the individuals whose actions as, for example, producers, sellers, and buyers of goods and services serve to create it. In the context of this research, the account of the unintended, systemic ripple effects of managerialist practices presented in the final report of the Munro Inquiry (2011) provides another. Critical realists propose that although we cannot directly perceive these effects, we can build an understanding of them inductively through ‘the practical and theoretical work of the social sciences’ (Bhaskar, 1989, p.2).

Consistent with this ontology, and in contrast to 'naïve realism' (Bryman, 2012, p.29), critical realism does not claim that the theoretical explanations that are constructed by either natural or social scientists provide a direct representation of the realities that they seek to elucidate. Rather, they are heuristic devices that enable us to develop comprehensive and coherent explanations that provide a convincing guide for action. Their epistemological status is, therefore, that of theoretical constructs. As such, they are open to being modified, developed, or superseded in response to new evidence or more adequate forms of explanation. Accordingly, the relevant validity criteria are those of coherence and pragmatic value rather than correspondence.

This is the epistemology adopted by Layder (1998), in the context of the research approach that he designates adaptive theory. His own formulation of this epistemology is that:

adaptive theory proposes that greater adequacy and validity should be understood as the best approximation to the truth, given the present state of knowledge and understanding. It is not a once-and-for-all notion...simply...the 'latest stage' in the elaboration of the theory. (Layder, 1998, p.9)

From a critical realist perspective, Layder rejects the claims of proponents of interpretivist and humanistic approaches to social research that researchers should confine their analysis to the empirical data that can be obtained within their own immediate research context. He considers acquiring such data about 'the experiences, meanings and understandings of people in face-to-face interaction' (Layder, 1998, p.17) to be an important element of the research process. He argues, however, that it is legitimate to go beyond what can be learned from examining the direct experience of research subjects by using theoretical material that has been derived from earlier research and analysis. He suggests that this makes it possible to develop interpretations

in terms of underlying structures as well as surface phenomena. This has the benefit of providing more rewarding explanations of ‘the multifarious way in which aspects of the lifeworld (behaviour, activity, everyday life) intersect with systemic aspects of the social world (culture, institutions, power and control, reproduced positions, practices and social relations)’ (Layder, 1998, p.171).

He characterises adaptive theorising as a process of continuous movement between empirical data and existing theory:

Adaptive theory both shapes and is shaped by the empirical data that emerges from research. It allows the dual influence of extant theory (theoretical models) as well as those that unfold from (and are enfolded in) the research. Adaptive theorising is an ever-present feature of the research process. (Layder, 1998, p.133)

Adopting this approach, the process that was followed in this research as to use indications from the review of relevant literature to develop an initial framework of concepts that were then used to focus the process of data collection and the initial stage of the analysis. During the later stages of the analysis, additional theoretical material was used to elucidate themes that were identified within the research data. The final stage of the research process was to use the findings of the analysis to build a new theoretical model of social work leadership.

RESEARCH METHODS

Selection of research method

A decision was taken to adopt a qualitative rather than a quantitative research strategy. Although a quantitative approach, such as a large-scale stratified survey, would have provided the potential benefits of scale and statistical credibility, this approach was rejected on the basis that it was less suited than a qualitative approach to the study’s

purpose of developing an understanding of the how rather than the what of social work leadership (Lawler, 2007), that is, an understanding of the dynamics of social work leadership rather than simply its effects or a description of the characteristics of people who were regarded as effective leaders.

A research approach featuring a mixture of individual and different forms of group interviews with a purposive sample of participants was selected in preference to alternatives such as ethnographic or case study methods because of the study's focus on leadership at all levels. These latter methods would have had the potential to provide rich, in-depth data but would have been unlikely to draw in the desired range of participants at different levels of practice such as managerial and national leadership. One of the benefits of the chosen research design was that it made it possible to recruit participants who were working in different areas of social work and in diverse geographical regions.

Although the recruitment process was not designed to achieve a research cohort that was formally representative of all the various types of settings in which social workers are employed, being able to reach this wider spread of participants meant that the research data was likely to provide more indications about contextual features that either facilitate or impede social work leadership than would have been accessible in a more localised study.

Another important feature of the recruitment process was that it was designed to secure participants who would be useful informants on the specific subject of the research, that is, social work leadership at all levels, rather than being representative of members of the profession in general. This informed a decision to recruit three distinct cohorts of research participants, reflecting three distinct levels of leadership: leadership in social work practice, managerial leadership, and national leadership in the sense of

providing leadership for and on behalf of other members of the profession at a national level.

Research design

As referenced above, the purposive recruitment strategy adopted for this research was designed to ensure the inclusion of qualified social workers from across a range of settings with experience of operating in positions of direct social work practice, management, and formal leadership at a national level. This involved the recruitment of three research cohorts:

- experienced social workers
- managers who had taken on responsibility for leading a specific area of service development
- individuals with experience of providing leadership for and on behalf of other members of the profession at a national level

The recruitment process for each of these groups is described in the next sub-section of this chapter.

The main method of data collection was semi-structured interviews using interview guides that were developed from themes and topics identified in the literature review.

Within this approach, different interview methods were adopted for each of the three participant cohorts.

In the case of the first cohort, that is, the experienced social workers, a two-stage interview process was adopted. The first stage was a small group interview that included the social worker and two close colleagues of their choosing from other disciplines. These colleagues provided complementary observations of the social worker's practice that helped to identify how social workers influenced the people they

worked with as colleagues or service users. The aim of this was to develop a more comprehensive picture of the social worker's activity and possible effects of leadership than could have been achieved by interviewing them alone. The second stage was to undertake a further interview at a later date with the social worker alone, to follow up on the identified themes and cover additional themes and topics.

The second cohort consisted of local authority assistant directors of adult social care from across a region, who were leading the implementation of a new national strategic framework for improving end-of-life social care (National End of Life Care Programme, 2010) within their own organisation and across the region. The method of data collection, in this case, was to attend one of the meetings of the regional group that they had established to coordinate their activity and access peer support, and to use part of that meeting to conduct a group interview. The main focus of the interview was the participants' experience of providing managerial leadership in their capacity as end-of-life leads. It was anticipated that the interactive format of a group interview would stimulate participants to access observations and reflections that were less likely to have surfaced in an individual interview.

In the case of people who had occupied positions of national leadership, data was collected through a single interview. A straightforward interview method was considered suitable because these participants were in positions that meant that they were likely to have well-developed views on the research topic of leadership.

RECRUITMENT OF RESEARCH COHORTS

As described above, the specification for the research cohort was designed to secure the involvement of qualified social workers across a range of different roles, settings, and levels, together with a smaller number of people from other occupational groups

who were close colleagues of the practising social workers. The process of assembling the research cohort is detailed below.

Experienced social work practitioners

This research cohort comprised six experienced social workers from different fields of social work practice, who had chosen to remain in front-line practice. The aim was to recruit social workers who were positive exponents of social work practice, had practised for long enough to have a supply of examples from their practice to call on in the interviews, who were in current practice, so that their examples would be readily accessible and relevant, and who had some interest in the topic of leadership itself. The researcher's desire to recruit social workers who were positive exponents of social work practice rather than those whose length of experience had led them to become burned out and disinvested in the role, led to the adoption of a two-stage process of recruitment.

The first stage was to place advertisements in two specialist publications and to enlist the support of professional organisations for the social work profession (British Association of Social Workers, The College of Social Work), social work educators (Joint Universities Council, Social Work Education Council), and employers (Association of Directors of Children's Services, Association of Directors of Adult Social Services) in disseminating the call for participants to individuals within their respective networks who fulfilled the specification. The content of these calls focused on the features of length and current practice experience, stipulating a minimum of five years, and an interest in the subject of leadership. The text of this call for participants is included in Appendix 1.

In practice, these approaches achieved only a limited degree of success, resulting in the recruitment of only four of the six social work practitioners needed. Several further potential contributors came forward but were not able to proceed, including one who was forbidden to take part by their (public sector) employer, despite being prepared to do so in their own time. A further recruitment strategy was, therefore, added in the form of making individual approaches to local authority directors and this proved successful in recruiting the two further social work practitioners needed to complete the intended research cohort.

The second element of the recruitment process was to conduct a short, informal phone interview with potential participants to screen out any who might have become burned out as a result of the nature and/or length of their practice experience, rather than having chosen to remain in practice for positive reasons. In practice, this did not apply to any of the potential participants who responded to the calls. The phone conversations also enabled the researcher to assess potential participants' suitability by finding out more about the variety and range of their practice experience, the level and scope of their responsibilities within their current roles, and the nature of their interest in leadership.

Six volunteer participants were recruited who each fulfilled the specification. Of these, five were in designated senior social work practitioner posts. The sixth held the post of team manager but also continued to practice and to act as a practice educator for social work students. These participants were based in three different geographical regions across the north, east, and south of England and in the following range of practice settings:

- A Youth Offending Services team
- A Children in Need and Child Protection team

- A Looked After Children and Care Leavers team
- A general hospital multidisciplinary team, working primarily with older people
- A specialist hospital multidisciplinary team
- A multidisciplinary community mental health team for adults

In addition to these primary participants, each of the social workers was requested to recruit two non-social worker colleagues with whom they worked closely, who would be willing to take part in a three-person small group discussion. The aim of these small group interviews was to gain additional perspectives on the practice of the social worker and the ways in which they contributed to the dynamics of leadership and followership within the team and its wider setting. The research design was for this small group interview to be followed up by an individual interview with the social worker once they had an opportunity to reflect on the group interview and review the transcript.

This model was followed in practice with four of the six social workers. In the other two cases, pragmatic adjustments were made to accommodate unanticipated developments in the research process.

In the first of these cases, the Youth Offending Services team, the circumstances of this were that the researcher discovered on arriving for the intended small group interview that the team manager had arranged for a total of five colleagues to join her. Two were experienced social workers, one, like herself, a team manager, who continued to be actively involved in social work practice, another a student social worker, and only one, a colleague from another profession (an experienced nurse). The researcher took the decision to proceed with the interview, including all those who had been assembled. The follow-up interview was undertaken in accordance with the intended model of a one-to-one interview with the primary research participant.

In the second case, the senior practitioner in the Child Protection and Children in Need team proved unable to arrange for any non-social worker colleagues to take part in a small group interview. She initially requested to do the interviews in reverse order, which the researcher agreed to, but was afterwards still unable to arrange the group interview and eventually withdrew from this element of the research process. In this case, what was intended to be an individual interview also departed from the original research design. On arrival, the researcher was asked and agreed to a newly qualified social worker who had just taken up a post in the team and was shadowing the senior practitioner that day, sitting in on the interview. As the interview proceeded, it became evident that the newly qualified social worker was willing to contribute experiences and ideas that were of potential value to the research, so she was consented and became a full participant in her own right.

These developments were not regarded as being seriously detrimental to the research, as the sampling process was not intended to be statistically representative and, therefore, allowed scope for some flexibility. A positive effect of the changes was to increase the total number and range of level of social workers whose views and experiences were included in the research data. These additional social worker participants consisted of the two experienced social work practitioners, the second team manager and social work student from the Youth Offending Services team, and the newly qualified social worker from the Children in Need and Child Protection team. Although the social work student and the newly qualified social worker did not meet the study's criteria for social work participants, their participation enhanced the data collection process in different ways. In the case of the student social worker, Grace, the experiences she described in the group discussion triggered contributions from the experienced social workers in the Youth Offending Service team that

provided rich data that might not have emerged without them. Additionally, her account of why she had chosen to come into the profession helped to confirm the fundamental place of ethical values in influencing both social work practice and leadership at all levels of the profession. In the case of the newly qualified social worker, Alice, the data shows that she had already begun to develop some of the features of practice leadership identified in the data from more experienced practitioners. An example of this is presented in the findings chapter that focuses on the characteristic leadership behaviour of eliciting and exerting influence within relationships of collaboration.

A potentially detrimental effect of the adjustments was that the number of non-social workers providing perspectives on the practice of social worker colleagues was reduced from an intended 12 to nine. However, this was partly mitigated by the fact that, even in the two cases where this was not achieved, there was still some form of peer discussion that provided valuable data about leadership dynamics in that setting and the role of social workers within this.

Organisational managers

As referenced earlier, the perspective of qualified social workers undertaking roles of organisational management was included in the research by means of a group interview with six members of a recently established working group of local authority assistant directors of adult social services, who had come together to lead the implementation of a strategy for improving end-of-life care throughout their region. These participants were recruited through a professional connection with the researcher's first supervisor. Two members of staff from a workforce development organisation, who were regular members of the group, also took part in the discussion. Data provided by these workforce development organisation staff were included in the

initial stages of the analysis but were then discarded as not being of direct relevance to the focus of the research.

National leaders

The final research cohort consisted of eight participants who were, or had recently been, organisational leaders but had also provided leadership at a national level for or on behalf of members of the social work profession, although in some cases their leadership extended to people beyond the profession as well. The aim in recruiting these individuals was to secure data from people who were qualified social workers and were also acknowledged leaders. Six of these had occupied positions in which they formally represented, variously, front-line social workers, chief officers, educators, and research academics, at a national level. Of the two remaining, one was an acknowledged leader in one area of specialist practice at a national and international level and the other was the leader of an influential model of service reform.

Several were people with whom the researcher had some form of previous professional involvement, unrelated to the research, and the approach taken to recruiting them was through individual email contacts by the researcher.

The past and present roles of the participants are as follows:

- Former local authority director of social services and chief executive, chair of successive government-commissioned working groups and bodies focusing on improving social work, NHS non-executive director.
- Local authority director of children's services and former president of a national association for chief officers.
- Local authority director of adult social care, chair of national organisations for social workers and social care.

- Acting chief executive of a professional organisation for social workers, member of national working groups focusing on improving social work.
- Professor of social work, secretary of a professional body for social work educators, member of national working groups focusing on improving social work.
- Professor of social work, chair of a professional association for leading academics, member of national working groups focusing on improving social work.
- Local authority deputy director of children's social care, the originator of a major social work reform initiative, consultancy director.
- Chief executive of a large specialist healthcare organisation in the voluntary sector that provides leadership to other organisations, nationally and internationally, in relation to its area of specialist practice.

For clarity of presentation, the first references to each of these individuals in the text of the findings chapters include the full list of their roles in brackets after the pseudonym they have been given and shorter descriptors are used for subsequent references.

The decision not to include service users

One of the limitations imposed by the time and resources of this study was that this made it unrealistic to include service users in a meaningful rather than a token manner. This was a source of regret since an important aspect of the social work role is to provide leadership for service users and to enable them to exercise leadership on their own behalf. The researcher touched on this area in an earlier study (Cullen, 2012) and would recommend it as a worthwhile subject for a separate research project.

Further specifics about the research activities & cohort

A total of 20 interviews were completed, including 13 individual interviews and seven group ones.

Thirty-six individuals participated, of whom 24 were qualified social workers. The non-social workers included two workforce development officers, two occupational therapists, five nurses, a bail support officer, a physiotherapist, a social work student, and two workforce development officers.

A table including the numbers of participants and the elements of the research process in which they participated is included as Appendix 2.

In total, the research data comprised approximately 21.5 hours of audio recording and approximately 13,700 words of transcript.

DATA COLLECTION PROCESS

The individual and group interviews that provided data for this research took place between October 2012 and August 2013. All interviews were semi-structured, using interview guides that aimed to ensure coverage of all main areas of interest within the research. The researcher also used follow-up questions to explore themes of potential relevance to the focus of the research as these emerged during the interviews. Participants were encouraged to provide specific examples to illustrate the observations and arguments that they were making.

Examples of the interview guides are included in Appendix 3.

Experienced social work practitioners

As referenced earlier, data was gathered from experienced social workers through a two-stage process. The first element of this process was a semi-structured small group

interview with the social worker and two colleagues of their choosing from other occupations. The focus of this interview was on developing an understanding of the part that social workers played in the delivery of the work of the team and the organisation in which they were based, including the activities they undertook and the dynamics between them and colleagues within and beyond their immediate team. There was also some exploration of how social workers were regarded more generally. The second was an individual interview, where the focus was on personal and professional biography and identity, including participants' heroes or role models, their experiences of providing and receiving leadership, and their views on leadership within and on behalf of the social work profession. Any specific areas of interest that had been identified during the small group interview were also followed up in this second interview.

Local authority assistant directors regional end-of-life leads group

This group was approached to provide the middle manager element of the research cohort because their involvement in a shared leadership initiative meant that they were well primed to describe activities and experiences that were of relevance to the focus of the research. This element of the research took the form of a single group interview. The arrangement represented an efficient use of participants' time as it was possible to incorporate the research interview within one of their scheduled meetings. The interview guide for this activity combined the themes from both the individual and small group interviews with social workers, together with customised elements that reflected the specific focus of the group.

Formal leaders

Formal leader participants were interviewed individually, using an interview guide that covered similar areas to those included in the individual interviews with social workers.

MANAGEMENT OF ETHICAL CONSIDERATIONS

Research ethics approval

In accordance with University policy, an application for research ethics approval was submitted to the University of Hull Faculty of Arts and Social Science before the start of the empirical research process. This was granted on 13th May 2012. Subsequently, the researcher accessed guidance provided by the National Social Care Research Ethics Committee to ascertain whether the research also required approval from this body. As this left some remaining doubt in the minds of the researcher and the research supervisors, the researcher consulted the convenor of the committee, who advised that no further scrutiny of the proposal was required since the research did not involve access to service users as participants in the research or confidential information about them. Documentary evidence in support of this was perused by the researcher's first supervisor and confirmed by her and by the head of the university's department of social work, under the auspices of which the research was undertaken, on 25th June 2012. This is included as Appendix 4.

In accordance with the terms of approval by the University, the following measures were put in place to protect the rights and wellbeing of research participants.

Participants' safety and wellbeing

An information sheet was provided to potential research participants before seeking their consent to take part. This set out the purpose of the research, the research process,

the expectations that would be placed on them, the measures that would be taken to protect their confidentiality, their rights in relation to their material once it became part of the research data, and the intended processes for disseminating the research findings. The information sheet is included in Appendix 5 and the consent form in Appendix 6.

As research participants were interviewed in a setting of their choice (in most cases this was their main employment base) the research did not expose them to any evident physical risk. It was also considered unlikely that the research interviews would compromise their emotional or psychological wellbeing.

Participants' rights to review & amend their contributions & to withdraw from the research

All participants were provided with transcripts of their interviews and invited to add comments, although they were not permitted to retract any of the data they had provided. In practice, only two participants chose to do so; one of the middle managers added a comment to clarify one of the contributions they had made to the discussion and one of the experienced social workers provided a printed copy of her own reflections on reading the transcript of the small group interview she had taken part in. Participants were also advised that they could withdraw from the research at any stage but could not retract the contributions they had made once they had been incorporated in the analysis. No one chose to withdraw from the research as such but, as discussed earlier, one social worker proved unable to recruit colleagues to join her in a three-person group interview and it was agreed that this would not be pursued further.

Confidentiality

The researcher used a digital recorder to create an audio recording of each interview and personally transcribed the transcripts. When not in use, the digital recorder was stored in a locked filing cabinet. Audio recordings were stored electronically on a password protected computer and transcripts were stored in a locked filing cabinet. Within the transcripts, participants were identified by a pseudonym and these are the names used to refer to them in this thesis. The record of which pseudonym was assigned to which participant was stored only on the researcher's password protected computer. Transcripts were accessed only by the researcher and research supervisors.

Within the thesis itself, care has been taken to avoid referring to details, such as geographical location, that might identify individuals.

These measures were considered sufficiently robust to protect the identity of all participants except the national leaders. In each of these cases, there was a discussion in which both the participant and the researcher acknowledged that because of their prominent positions and what was already known about them within the public sphere, it might prove difficult to fully protect their identities in any account of the research and its findings. In each case, they agreed to proceed with the interview on the basis that although the researcher would take all reasonable measures to avoid identifying them, there remained some risk of recognition. During the interviews, it was evident to the researcher that participants were alert to this, with some choosing to speak boldly nonetheless and others occasionally exercising a degree of restraint in their answers.

ANALYSIS

Data was coded by the researcher using NVivo. The strategy that was followed in analysing the data was based on a framework approach (Ritchie and Spencer, 1994;

Ritchie, Spencer, and O'Connor, 2003). Data was coded by the researcher using NVivo. In the first stage of the analysis, the data was coded line by line at manifest level under five categories of 'identity', 'traits', 'behaviours and skills', 'leadership', and 'barriers and threats', which had been identified through the literature review as the main areas of focus for the study. Each transcript was iteratively coded against each of these categories in turn. These codes were gathered within NVivo as a two-level node structure, with each of the five categories providing an apex node.

Having completed this initial stage of coding, the researcher reviewed the coded data to identify key themes. One line of inquiry was to look for frequently occurring terms and concepts via a systematic content search of both the codes and the raw transcript data. This identified, for example, that the concept of challenge was a prevalent theme throughout the research data.

Another analytical activity was to look for relationships of association between coded elements of the data that were consistent across transcripts from different participants in the research. One example of such an association was that participants across the different groups within the research cohort each stressed the importance that they placed on ethics and social justice, and often related this to formative experiences within their personal or professional biographies.

A further line of investigation was to pursue apparent contradictions within the data. An example of this was that one academic leader participant, who spoke authoritatively on the basis of both her own research and experience as a member of a national inquiry team, was forcefully critical of social workers in general for being insufficiently empirical, in that they often failed to seek out adequate evidence on which to base their assessments and recommendations, or were too ready to comply with controversial policy and guidance, without seeking to assure themselves that there

was a sound evidential basis for it. In contradiction to this, data from the interviews with some of the front-line social worker participants and their colleagues showed that one of the prominent features of their practice was that they actively sought out, scrutinised, and analysed the significance of the primary evidence. This was of particular interest from the point of view of the research in that the data showed that this capacity for empirical rigour played an important part in influencing and enabling them to exercise practice leadership, by influencing the decisions and actions of team colleagues and, occasionally, to go beyond this to initiate processes of change at the level of organisational policy and practice. Further analysis of the data showed that this characteristic feature of empirical rigour could be identified in different forms in the data from participants from each of the cohorts included within the research population of qualified social workers.

These analytical strategies were used to produce, first, a revised, thematically based, node structure, which represented a typology of social work leadership, comprising five key characteristics that represent a combination of traits and behaviours. These traits are ethically inspired, empirically informed, being strategic, collaborating, and challenging. Each of these elements formed the apex of a multi-level node structure, in which the lower nodes summarised the component elements of these characteristics, at progressively higher levels of coding.

This node structure is reproduced in the diagrams at Appendix 7.

Second, the relationships between these elements were mapped to produce a model of the dynamics of social work leadership, which is presented in the final chapter of the thesis.

During these later processes, and in accordance with the adaptive research methodology, reference was made to published accounts of related research and theoretical discussions, which are referenced in the literature review, relevant findings and concluding chapters.

In practice, the activity of analysis continued, to some extent, throughout the process of writing up the findings and setting out the model of social work leadership that was extrapolated from them. This was, first, because, as referenced in the introduction chapter, the process of setting out the findings and elucidating their significance drew the researcher's attention to flaws in the interpretation that had not been evident during the more structured procedures of the NVivo analysis. Second, because the writing up process led the researcher to identify hitherto overlooked nuances within the data that proved illuminating. Both these of these triggered successive re-examinations of portions of the data, resulting in further revisions and refinements of the analysis.

CRITICAL REFLECTION ON METHODOLOGY

Overall the choice of approach for this study, including a qualitative methodology and the specific research methods selected proved effective in achieving the aims of the project, i.e. finding evidence of leadership on the part of people who are qualified social workers and how this is enacted by individuals operating 'at all levels'. With the benefit of hindsight, discussion and reflection, however, there were aspects of both the design and execution of the research that could have been improved.

Sampling strategy

As described earlier and reflecting the study's focus on leadership 'at all levels', purposive sampling was used to recruit three cohorts of participants, with the aim of encompassing the main types of role held by members of the profession: social work

practitioner, manager and organisational/national leader. However, it needs to be acknowledged that the recently revised Professional Capabilities Framework (PCF) for social workers (BASW, 2018, p.6) specifies leadership capabilities that should be achieved at nine levels of social work practice, teaching and management, including six that relate to levels below that of ‘experienced social worker’, which was the level from which the first, practitioner, cohort was recruited. Four of these relate to social work students at successive stages of their training, and the others to social workers in the earlier stages of their careers, i.e. ‘newly qualified social worker’ or ASYE (Assessed and Supported Year in Employment) and ‘social worker’ This raises the question as to whether as a study of social work leadership ‘at all levels’ the research should have included social workers at an earlier stage in their careers or even perhaps at each of the levels suggested by the PCF.

On consideration, a more inclusive and differentiated sampling strategy could have enhanced the research by providing a more nuanced and detailed understanding of how and at what stage of career progression the various features of leadership develop. There are some indications that support this line of argument from within research itself. For example, the incidental inclusion of both a social work student and a newly qualified social worker provided data that showed that each of them already demonstrated one or more elements of the characteristic features of social work leadership. Again, the opportunistic inclusion of two participants who were first line managers, as well as continuing in social work practice, yielded data that gave some insight into the nature of the progression in the conceptualisation and practice of leadership that can take place as individuals move from solely practice based roles into managerial ones. These indications suggest that a more comprehensive sampling strategy could have been worthwhile, in providing, for example, more insight into how

indications of social work leadership potential could be identified at the point of selection entry to the profession. A more differentiated sampling strategy might also have provided more specific information about how to support leadership development at each stage of career progression.

However, adopting this approach within the limited resources of the present research would have been likely to detract from the main purpose of this study by diluting its focus, which was to develop a model of leadership, that is distinctive to social workers, and is applicable within each of the three domains in which they are called upon to exercise leadership, i.e. professional practice, management, and national leadership. Further research and development activities can now be done to elaborate this model and develop its application for the benefit of people in the earlier stages of their careers as practitioners and managers.

To this end, the researcher hopes to engage with a wider range of members of the profession, including social work students, recently qualified practitioners and first line managers, as well as people in more senior roles, as part of the process of disseminating the research. It is hoped that this will be the start of a continuing process of developing tools and processes that will enable the model to be taken up and used by social workers at all levels to develop their leadership practice. This is likely to lead to further development and refinement of the model, drawing on the involvement of a broader spectrum of participants than was possible within the scope of this project, and which will more adequately reflect the range of practice areas and demographic diversity of the profession.

Recruitment of social work practitioner cohort

One of the challenging aspects of the research was how to identify and engage a sample of practising social workers who could provide authentic first-hand accounts of leadership in social work practice. As has been described, the main criteria specified in the recruitment publicity was that applicants should have completed five years of post-qualifying practice and be in practice currently. It could reasonably be objected that, while it was useful to stipulate quantity and currency of experience as a means of ensuring that participants had a good supply of material to call on, these criteria by themselves were not sufficient to ensure the recruitment of participants who were exemplars of practice leadership. As referenced in the body of this chapter a particular risk was that this limited specification could have attracted people who had remained in frontline practice through inertia, rather than positive choice and whose practice had plateaued at a relatively low level. progress. As is also described there, however, this risk was obviated by undertaking an informal screening interview by phone, which established that this did not apply to any of the social workers who volunteered to take part in the research. A further source of reassurance was that each of them had achieved the status of senior practitioner or, in one case, team manager.

Were a similar study to be undertaken now, the process of identifying suitable social work practitioner participants would be more straightforward, due to the recent introduction of local authority Principal Social Workers, who are there to act as role models and exponents of high-quality social work practice.

Data collection

As described in the body of the chapter, the research data was generated through semi-structured individual and group interviews, using different formats for each of the three cohorts. The choice to use different processes reflected, firstly, considerations of how

to optimise the contribution of each participant and secondly, practical issues of access and availability. Consistency of coverage was achieved by using interview guides that focused on the same four main themes, which were derived from the literature review. These were identity and alienation, power and authority, leadership and followership, leadership in and for a profession.

As has been noted, in practice each of these formats proved effective in eliciting enough data of sufficient quantity and quality to identify core features of social work leadership in members of each of the three cohorts; and to detect differences between the ways in which these characteristics are manifested by individuals operating at the levels of social work practice, management and national leadership. However, it should be acknowledged that the interview formats chosen for the social work practitioners and the national leaders worked better than the one used for the manager cohort, in that they afforded more time and opportunity to pick up and follow through emergent themes and resulted in richer data.

Considering each format in turn, the two-stage interview with the social work practitioners served its intended purpose well. In the first stage interview social workers and their colleagues from other professions talked through examples of how they worked together, with a particular focus on the part played by the social worker, the effects of their interventions on the behaviour of others, and the outcomes of their work. There were also productive discussions about how both the social worker and their colleagues experienced their own and one another's professional identities and how social workers were regarded by members of other professions. Reading through and reflecting on the transcripts of these interviews in the intervening period between the small group and individual interviews enabled both the researcher and in some cases the participants themselves to identify insights and lines of inquiry that could be

profitably explored in the one-to-one session. A bonus was that the members of these groups themselves found their discussions informative and stimulating, providing them with new insights into each other's professional worlds and the dynamics of their shared activities.

The model of individual interviews with members of the national leader cohort also worked well. Most of these interviews were conducted within rigid time boundaries (usually an hour) but were content rich because, as anticipated, these participants had their ideas and examples of their own and others' leadership ready to hand and were confidently articulate within a straightforward, conventional interview format.

In the remaining case, the group interview with members of the managerial cohort, meeting with them in the context of a shared leadership project was helpful in providing focused discussion of members' leadership principles and conceptual models and accessing specific examples of leadership activities. However, the single large group format was more restrictive than the ones used with the other cohorts. Even though the members of the regional End Life Leads group took the initiative to extend the discussion well beyond the originally intended one-hour slot, because they were so engaged with the topic, there was less scope to pursue emergent lines of inquiry. This meant that the resulting data, though adequate, was not as discursive as that from the other two cohorts. For example, it provided less data about how these participants' thinking and practice in relation to leadership had been influenced by the context and events of their earlier personal and professional lives. With the benefit of hindsight, the research could have been enhanced by negotiating to undertake follow up interviews with at least some members of this cohort.

Data analysis

The researcher's subjective experience of undertaking the analysis was akin to Dey's (2004) description of qualitative data analysis as a process of discovering a 'picture slowly emerging as a patchwork mosaic' (Dey, in Seale et al., 2004, p.86). The account below expands on the one provided in the main part of this chapter to try to convey a picture of the challenges experienced and how they were handled.

As described in the body of the chapter, NVivo software (versions 10 and 11) was used to code the data, initially, at the level of manifest, or surface content. As again described, the second stage of coding consisted of identifying the underlying themes within the data that were salient to the purpose of the research, i.e. developing an understanding of how far and by what means social workers within each of the research cohorts exercised leadership.

In practice this was the most challenging part of the research process and for some time the researcher felt overwhelmed by the volume of the NVIVO nodes that had been produced and the extent to which elements of the data were coded under more than one node. Advice from one of the research supervisors was helpful in suggesting a series of free writing activities, designed to test out potential themes. Other strategies, as described earlier, were to use NVIVO tools to do content analyses to identify recurring words and phrases, and to run node reports, to review coding duplications and explore their significance.

From this stage there was an interesting parallel between the process of the research analysis and Munro's description of how experienced social workers sometimes make rapid assessments, through an unconscious process of intuitive pattern recognition, which can, and should, be raised to the level of consciousness, so that the evidence and

reasoning on which they are based can be subjected to systematic conscious review and critical analysis (Munro, 2011b, pt. 6.25, p.90, discussed further in Chapter 5 of the thesis (p.139-40). Evidence of experienced social workers demonstrating this capability for ‘dual processing’ is presented by Whittaker in a recent article that reports the findings of an ethnographic study of local authority child protection social work (Whittaker, 2018).

Through the free writing, the researcher developed a similar intuitive apprehension of the eventual model of social work leadership, although at this stage it was not fully defined. This provided some sense of direction but was treated with cautious scepticism so that it should not compromise the rigour of the process of building the analysis through systematic coding and progressive assembly of the NVIVO node hierarchies. The final model resembled the intuitively envisaged one but had important differences and provided a much more precise account of its dynamics.

An important learning point from this research was the value of keeping a detailed research log, especially when undertaking a relatively large piece of research, over an extended period. A log was maintained from the stage of the research proposal, through data collection and analysis, to writing up. This was especially useful during the analysis, enabling the researcher to hold on to emerging ideas and to go back at times to earlier ones that had been discarded but were later found to be helpful.

It was also helpful and reassuring to have some of the transcripts and codings reviewed at different times during the analysis by both of the research supervisors who were active during this period. These independent reviews of the research data and analysis, by more experienced researchers, led to productive discussions and challenges to some of the directions of analysis that were being developed. This informed revisions that

increased the researcher's confidence in the robustness of the analysis and the conclusions that were being developed.

As noted in the Introduction chapter and in the main body of this Methodology chapter, however, the process of revising the analysis continued to some degree throughout the stage of writing up the research, as further nuances and inconsistencies in the interpretation of the data presented themselves. The metaphor that came repeatedly to mind was of a series of intricate knots that needed to be painstakingly teased out, so that the narrative thread of the research findings could emerge as clearly and coherently as possible.

PRESENTATION OF FINDINGS

The findings of the research are presented over four chapters. The first of these, Chapter 4, is entitled, 'Ethically Inspired' and presents data that shows how ethical principles and the values that informed participants provided the foundation not only for social work practice but also for social work leadership. The succeeding chapters each present characteristic features of social work leadership that reflect different combinations of the traits and behaviours identified in the research data.

Chapter 5, 'Being Strategic' shows how participants were strategic, first, in operating within a clear sense of overall purpose and, second, in being tactically agile. It shows how their ability to do so was enhanced by the way in which their leadership practices were empirically informed in the first of two senses of this that were identified in the data, of acquiring knowledge and skills from direct experience, in this case from the accumulated experience of social work practice and management.

Chapter 6, 'Collaborating' shows how research participants were influenced by both ethical and strategic considerations to exercise leadership, by eliciting collaboration

from both service users and subordinate colleagues, as well as from others that they identified as potentially valuable contributors to the process of achieving the objectives they identified. It shows how participants used their strategic skills to secure this engagement and also to unobtrusively lead their collaborators towards the achievement of these objectives.

Chapter 7, 'Willing to Challenge' shows how participants demonstrated the trait of being empirically informed in the second sense that was identified in the data, which was that they actively sought out evidence and engaged in practices of rigorous analysis. It shows how this concern for evidential rigour in combination with their ethical values influenced and equipped them to exercise leadership by undertaking activities of an overt challenge.

It is important to make it clear that the research did not produce a finding that all the social workers who took part in the research were leaders. In the case of the social work practitioners especially, the data shows that each of them manifested some of the characteristic features of social work leadership but could be regarded as fully-fledged practice leaders. There was also a marked differentiation in the forms in which these characteristics were manifested by participants at different levels, with much higher levels of integration and sophistication being demonstrated by those in the national leadership cohort. This differentiation is demonstrated in each of the findings chapters that follow.

CHAPTER 4. ETHICALLY INSPIRED

INTRODUCTION

This first findings chapter presents the trait of being ethically inspired, as the foundation on which social work leadership is based. The designation of this trait and the resultant feature of social work leadership as ethically inspired was chosen to convey the strength of positive emotional investment in their ethical values that was frequently expressed by participants. The data presented in this chapter shows that this characteristic was identified in participants throughout the three research cohorts, but that there was an evident progression between these, in terms of the sophistication of the way that it was expressed and in the scale of the activity that participants were inspired to undertake. The main body of the chapter presents the four main themes in the data that contributed to the identification of this characteristic. The first two show how participants' personal and professional values were shaped by early life and career experiences and by value exemplars. The remaining two show how their values provided the basis for both their professional practice and leadership.

Prior to this main presentation, the next section of the chapter presents some theoretical material that is intended to support the elucidation of the specific values that were identified in the data and the source of participants' investment in them. This material draws on some recent healthcare literature relating to the dynamics of compassion and an article in which Clark (2006) advocates virtue ethics as the appropriate ethical orientation for members of the social work profession.

THE CONCEPTS OF COMPASSION & VIRTUE ETHICS

Compassion

In the context of nursing, authors such as Schantz (2007), Davison and Williams (2009), and Sinclair et al. (2017) comment that the terms ‘sympathy’, ‘empathy’, and ‘compassion’ are sometimes used interchangeably but argue that this has the detrimental effect of obscuring the differences between these emotions and the distinctive impact that each has on both the behaviour of people who provide care and the experience of the recipients.

In support of these arguments, Sinclair et al. (2017) report findings from an empirical study, which looked at how 53 in-patients with advanced cancer interpreted these terms in relation to the care they received from nurses and nursing assistants. Key findings were that subjects characterised ‘sympathy’ as an unhelpful reaction in which the caregiver conveyed the distressing impact that the cancer patient’s experience had on them rather than showing an appreciation of how it was affecting the patient themselves. In contrast, they regarded ‘empathy’ much more favourably, as the expression of an other-directed recognition of, and concern for, their suffering.

The authors report, however, that ‘compassion’ was especially prized by their subjects, because this term was applied to rare and precious experiences in which the caregiver had not only showed that they were emotionally responsive to the patient’s experience, but that this had impelled them to take some form of positive action to mitigate their distress. These responses were interpreted by patients as the nurses or nursing assistants going beyond their formal responsibilities to provide small acts of personal kindness that showed their genuine understanding of their individual needs and a spontaneous concern to bring them some source of comfort. Examples included the

touch of a hand or providing an extra, carefully placed, pillow. Sinclair et al. (2017, p. 444) report that such behaviour was characterised by their subjects as altruistic acts, in which the caregiver, 'put aside their needs to meet the needs of the patient.' They report further that their research subjects experienced these acts as being generated by fundamental virtues of character on the part of the caregiver, such as kindness, genuineness, and, above all, love, in the sense of a response that expressed an attitude of unconditional benevolence and active concern to try to relieve the suffering of those they worked with, irrespective of any considerations of deservedness.

In a reciprocal manner, Schantz (2007) and Davison and Williams (2009) consider the dynamic of compassion from the perspective of the protagonists rather than the recipients. They suggest that for people who act with compassion, the experience is one of being driven to do so by the force of their emotional response to others' distress, either to try to remedy the cause or to mitigate its impact. In Schantz's (2007, p.51) words, 'Compassion impels and empowers people to not only acknowledge but also to act toward alleviating or removing another's suffering or pain.'

Schantz (2007, p.51) adds that compassion may operate at the level of responding to the distress of an individual or in the form of a more broadly focused investment of effort in 'promoting overall social justice.'

Virtue ethics

This presentation of compassion as an intrinsic feature of personal character that galvanises the individual involved to act altruistically resonates with the account of virtue ethics, on the basis of which Clark (2006), advocates this as the appropriate ethical stance for members of the social work profession. Clark (2006, p.77) cites Slote (2000), who identifies the main tenets of virtue ethics as being, first, that, 'it treats

aretaic [i.e. pertaining to virtue] terms as fundamental’ and, second, that ‘it focuses mainly on inner character and/or motive rather than on rules for or consequences of actions.’ In simplistic terms, this is the view that in order to make sound ethical judgements (i.e. know how to do the right thing) people need to have and be guided by fundamental values or virtues of character. Clark (2006) specifically identifies compassion as an example of such a value, alongside others such as benevolence and loyalty. As Slote’s definition implies, this ethical view is distinguished from that of duty or deontological ethics, which considers that ethical conduct consists of following rules or codes of behaviour, and from pragmatic or consequentialist ethical approaches, which considers that ethical behaviour is based on following whatever course of action is considered likely to produce the beneficial effect that is intended.

The chapter now proceeds by presenting the themes from the research data that informed the identification of the characteristic of being ethically inspired.

THEMES THAT CONTRIBUTED TO THE IDENTIFICATION OF THIS CHARACTERISTIC

1. Shaped by early experiences

In keeping with these depictions of compassion and virtue ethics, a recurring feature of the accounts provided by participants in this research is that their choice of social work as a profession and the way in which they conduct themselves within it had been influenced by character-forming experiences in childhood or early adulthood that led them to follow a career focused on trying to mitigate the damaging impact of personal misfortune and social disadvantage. Some of these experiences were positive, while others were harmful or distressing.

Early experiences of providing care

For some participants, it was evident that their choice of a social work career, and the directions they took within it, represented a natural flow or logical progression along a path of caring for others, into which they had been inducted at an early stage in their lives. Two participants described backgrounds in which religious affiliation and service to others had been prominent features.

John

John (senior practitioner for care leavers and Looked After Children and young people) was the son of a Christian minister and a teacher. John described how he had grown up quite happily in a family home that was in effect, ‘an open house for people with mental health problems.’ This meant that, from an early age, he had been involved in providing practical care for people who were socially marginalised, ‘tramps would come and go...I would get involved in cooking and chat...[and]...clearing up the poo after they’d left. I found myself from a very early age chatting to people and really thriving on that.’

John described how, by the age of 15, he had rejected other career options, such as joining the armed forces, and subsequently remained consistent in his choice of becoming a social worker.

Frances

Frances (professor of social work, former secretary of a professional body for social work educators, and member of national working groups focusing on improving social work) described herself as having been influenced as a child and young person by regular church attendance and by studying at a school that created opportunities to do voluntary work, in her case with children who had special needs. She felt that her own

home life was ‘very fortunate and happy’ so that she was ‘privileged and lucky.’ She described how these experiences had formed her as an individual who found it personally rewarding to feel that she could be of service to others who were less fortunate than herself, ‘Social work was just a natural home for where I wanted to be. It matched who I was as a person.’

‘Fortunate’ exceptions

More surprisingly, a similar motivation was expressed by the two research participants who appeared to have come from the most economically disadvantaged backgrounds, but who nevertheless also referred to themselves as having been relatively privileged. Both Mary (Youth Offending Service team manager) and Ruth (chief executive of a large specialist healthcare organisation in the voluntary sector that provides leadership to other organisations nationally and internationally in relation to its area of specialist practice) described growing up in families that were especially impoverished, even by the standards of the working-class communities in which they lived. In each case this was due to specific features of their parents’ circumstances. But both felt that they had had privileged childhoods because, first, they were very much loved, and second, they were clever. Their early environments had, however, given them a vivid appreciation of the quality of the lives they had subsequently achieved and of the difference between their own experiences and those of their peers and other family members who had been less fortunate. In each case they referred, like Frances, to being influenced by a sense of ethical obligation, to want ‘to put something back.’

Mary

Mary explained that her father had left her and her mother when she was a small child and that her mother had to work long hours to keep the two of them at a barely adequate level. In her mother’s absence, however, her grandparents had been able to give her

the time and attention needed to bring out her natural ability. By the time she started school, she was already an accomplished learner who passed her 11 plus exam and started grammar school a year early. She explained that on leaving school she had moved away from home to work as a nanny. This took her into ‘a different world’, which led to her taking up opportunities to live abroad, run her own children’s nursery and, eventually, obtain a first-class degree in social work. Subsequently, she established her career within the Youth Offending Service and secured repeated promotions, becoming the manager of increasingly large and diverse teams of professionals. The contrast between her early experiences and her later success instilled a sense of gratitude and obligation:

From my perspective, I’ve lived a very advantaged life. It may not be advantaged in terms of millionaire status but from where I came from I’ve been very fortunate. As have my children...they’ve got masters’ degrees, they’ve got careers.... And maybe, no, not maybe, I just think, it sounds really cheesy, but I feel I have to put something back. I’m very passionate.

Ruth

Ruth described how her father’s chronic ill health limited his ability to work and that as a result, ‘We were absolutely not well off. I mean massively not well off...we didn’t have things like an inside loo and a bath until I was 11 or 12.’

In Ruth’s case, the contrast between her own opportunities and those of others was particularly close to home. Her brother, though equally loved and valued by their parents, had not been clever and had worked all his life in a factory. She, by contrast, had gone to grammar school and graduated from a prestigious university. This fuelled her sense of obligation, ‘I always had quite a strong sense of how fortunate I’d been

and how life just doled stuff out and you needed to do something constructive if you'd been lucky.'

Kay

In a less specific account, Kay (senior social worker in a multidisciplinary community mental health team) also alluded to choosing to enter social work because of an awareness of the contrast between the way that her own life had turned out and that of other people in a similar circumstance:

things haven't always been smooth in my life. I've had some ups and downs. Somehow, I've ended up OK. But there are lots of people the dice has landed the other way for. I suppose it's that desire to see what you can do to help. I'm lucky, things have conspired to make me survive.

Ian

Ian (consultancy director, former local authority deputy director of children's social care, the originator of a major social work reform initiative) also attributed his choice of career and continuing motivation within it to the experience of growing up in an economically disadvantaged community. He explained that he was influenced to some degree by experiences within his own family, but additionally by a more generalised awareness of the impact of social inequality. Like Mary and Ruth, this had informed his choice to pursue a career that would enable him to support people who had been less able to overcome the effects of early disadvantage, 'I suppose I wanted to work in an environment where I was helping people who were a lot worse off than myself.'

He added that his early experiences had led him to develop 'strong socialist views' and to become involved in trade union and political activism during his student years and early career. He chose social work as a career because he regarded it as one of the few

occupations consistent with his political views, especially his concern for social justice. He emphasised that he was not naïve but thought that he ‘could make some small differences to families’ lives who really suffer most because of the inequality we have in our society.’

Formative experiences of service failures

Sheila

In contrast to these accounts of fortunate exceptionalism, Sheila (acting chief executive of a professional organisation for social workers and member of national working groups focused on improving social work) explained that her own priorities as a practising social worker, manager, and leader had been shaped at an early stage by her experience of mental health services that she considered to have failed her own family and others within her social network.

Sheila explained that when she was in the latter stages of her school career, her mother had suffered an extended episode of acute depression. As the only child at home, she had found herself becoming her mother’s carer, at the cost of being unable to focus on her education, which affected her exam results and delayed her entry to university. She described how, during the same period, she had become involved in supporting the parents of a school friend who was suffering from a form of post-traumatic stress, which led to this friend being compulsorily detained in hospital for several months.

Sheila explained that, in both cases, the impact of the mental illness on other members of the family was exacerbated by the absence of information, explanation, or support from the professionals responsible for the care of the person who was mentally ill. In each case, the professionals sought to justify this inaction by reference to obligations of confidentiality. This left family members struggling with both the practicalities of

the situation and the additional burden of feeling that they were seen as having been in some way responsible for the illness. Her school friend's parents were especially disadvantaged because, unlike Sheila's own family, they were unused to dealing with professional systems.

Sheila explained that these experiences had left her feeling personally inadequate, as well as being critical of the mental health services that were failing families like her own. She considered that it was neither safe nor ethical to leave individuals and families who were 'vulnerable and in real difficulties' to be supported by people like herself who were not adequately equipped for this role, 'people...not least my own role in it, who didn't know enough about what they were doing. I just felt it was dangerous, that actually people deserved better treatment than that.'

These experiences instilled in her an enduring sense of responsibility to ensure that she was as well-equipped as possible for any job she undertook. She described this as:

an attitude that has carried me through my life really.... If you're going to be involved in something, to do a job, make sure you've got the knowledge and skills to do it to the best of your ability, supported by education or training.

Accordingly, when she was able to resume her education and training, Sheila was insistent on going straight from her first degree to her professional training in social work, even though the usual path at that time was to gain practical experience first. Her career pathway, which is described at greater length in the following chapter, showed how the experiences of her adolescence had fired Sheila with a determination to ensure that she herself and other social workers were not just well intentioned but also had the knowledge and skills that they needed, to provide support that was well informed and skilful. She demonstrated that this continued to be an aspiration for her

within her current role as acting chief executive of a professional membership organisation for social workers, describing how she was trying to find the means to enable social workers to derive an educational benefit from their engagement with it. She explained that she was attempting to move the organisation from being seen by members primarily as a source of advice and representation, towards a 'more positive engagement' with them that would provide opportunities to, 'develop...professional leadership, as part of their engagement, as part of our return to them.'

Paula

Paula (senior social worker in a multidisciplinary general hospital team) described a searing experience that had happened when she, like Sheila, was in her later teenage years, which, again she regarded as having been powerfully formative of her approach throughout her subsequent life and career. This was an incident that took place when she was working as a trainee nanny in a residential unit for children whose home situations had broken down. At the instigation of their social worker, a decision was made to rehabilitate two of the children with their mother. Despite two unsuccessful attempts, the children were sent home a third time. Paula wept as she related that soon after this, the flat in which the family were living caught fire, 'and those two children died, they were burned to death.' Although this incident had happened several decades earlier, she described how the experience remained vivid, 'I see those children's faces today.... It's stayed with me ever since.'

She described her sense that this experience had intensified the force of her ethical and emotional investment in her work. She described her determination that 'it won't happen to somebody I'm looking after...It...makes you turn over that extra stone. Maybe it makes you care, maybe it makes you a stronger person...I don't know.'

Lesley

In a third example, Lesley (local authority director of adult social care; chair of national organisation for social workers; former senior officer of national peer association of chief officers) explained that the way that she had conducted herself throughout the major part of her career had been strongly influenced by the consequences of what she regarded as her own failure to intervene in the context of ‘some very powerful incidents’ earlier on. She expressed her continuing regret that ‘I didn’t feel I had the courage to speak up.’

This had left her with a determination to be proactive in responding to situations of concern. ‘I’ve always had to retrieve that ever since. I feel I let things down because I didn’t have the confidence in my twenties to do it.’

2. Being inspired by virtuous exemplars

Choice of exemplars

One of the ways in which various participants manifested their affiliation with a virtue ethics position, and with compassion and social justice as prominent elements within this, was in their identification of professional exemplars.

In the extracts below, Andrea (senior practitioner in a Children in Need and Child Protection team) and Kay described people who had impressed them by the extent of their dedication to supporting and promoting the interests of young people who were disadvantaged by both their individual circumstances and the fact that they belonged to social groups whose needs were de-prioritised by others. In both cases, they described themselves as having been inspired by the consistency with which the exemplar demonstrated their concern. In each case, the exemplar was seen as being motivated to take action that went beyond the expectations of their role because of the

authenticity of their emotional connection with the young people and their situation and their commitment to social justice.

Andrea

Andrea (senior practitioner in a Children in Need and Child Protection team) described how she had been inspired to join the social work profession by working alongside a social worker in a service for unaccompanied asylum-seeking children and young people. While others were inclined to stigmatise and depersonalise these young people, it was evident to Andrea that this social worker genuinely valued them as individuals. Andrea described how she invested time and energy in developing an understanding of their specific needs and had championed their right to be treated on equal terms with their peers:

She really saw these young people as children first and at the time I think there was more of an atmosphere that they were asylum seekers first. She would really advocate on their behalf but also spend quite a lot of time with them individually to try to get a sense of how things were working for them and what they needed...There was one particular young man...He actually went on to university. So, for her, he's a child or young person who needs the same opportunity as anybody else...that inspired me.

Kay

Kay described as her own exemplar, a colleague who, again, enacted rather than articulated, their personal ethics of service in the way that they worked with young people who were disadvantaged and disaffected. She explained that this individual had demonstrated to the young people that they were genuinely valued, through practical measures, such as securing funding to upgrade the furniture in the centre where the support was provided, and by investing the time and patience needed to get beyond the

protective fronts that the young people's experiences had led them to develop, to connect with the underlying personalities beneath them. She described her colleague as 'having time...very quietly being there and listening...whatever persona they were presenting they were seeing behind.'

Kay elaborated that this colleague had impressed her because they had shown how it was possible, by authentically modelling values of respect and concern, to engage even young people who were established in a pattern of resisting authority, and to motivate them towards positive change:

It's about influencing people, just quietly, but they had a set of values that they worked to. They didn't impose them on other people; they just quietly worked by them and lived by them...working with young people and getting a lot of youngsters to respect them, to do things. To work with people who had a rough life and get them achieving, getting them interested in doing something rather than kicking against the system.

3. Compassion & virtue ethics as a motive force for action

The data within this theme shows, first, that compassion, as characterised by Schantz (2007), Davison and Williams (2009), and Sinclair et al. (2017), and an alignment with virtue ethics, as described by Clark (2006), was described by participants, within each of the three research cohorts, as a fundamental influence on the way in which they interpreted and enacted their respective roles. Second, however, the data also showed a marked difference in the sophistication with which this was described by participants across the different levels of roles that were included within the research cohorts and in the scope of the activity that their values influenced them to take.

The first two extracts are taken from the data provided by members of the social work practitioner cohort. In the first extract, Grace (student social worker approaching the

end of her final practice placement as a member of the Youth Offending Service team) and Paula (senior social worker in a multidisciplinary general hospital team) described the motivation that drove their work in terms of a direct and unmediated emotional response of compassion akin to that described, for example, by Sinclair et al. (2017) in relation to the behaviour of front-line nursing staff.

Grace

In the first extract, Grace demonstrated that the dynamic of compassion was a fundamental element of her practice even at this early stage of her career. She explained that she had chosen to break away from her original career in investment banking to train as a social worker because she believed that being a social worker represented an expression of her own personality. Reflecting Schantz's (2007) description of compassion as a force for positive action, Grace referred to her sense of being motivated in her work by the force of her emotional investment in the purpose of helping young people to reform their offending behaviour, 'With my personality, I'm a very caring person, a very loving person...that passion ...You want to see that change, to see them better people...that's who I am – it just pushes you to do the job.'

Paula

Paula provided an example of someone who had continued to be so powerfully influenced by the power and immediacy of her own emotion of compassion towards individuals who were distressed or disadvantaged that she made a deliberate choice to remain in social work practice so that she could focus her attention wholeheartedly on taking direct practical action to relieve this. She described how she recognised that she was 'too passionate' to be prepared to take on roles that would distract her from the primary task of working directly with and on behalf of service users, and had,

therefore, 'always put myself in a job where I can get things done, where I don't have to be involved in meeting upon meeting.'

She invoked the terminology of passion, for a second time, to convey her strong sense of personal identification and investment in her work, which mainly involved working with older people who were approaching the final weeks or months of life:

I feel passionate about the work I do. I feel I have a privileged but difficult job working with people who are so vulnerable. They share so many 'secrets'. It is often very emotional, confrontational, and frustrating...I believe so much in getting the end-of-life right.

Referring to the support that she provided to family members, as well as to hospital patients themselves, she added, 'We work with people for such a short period of time. We cause, if we're not careful, such a ripple effect that will last with them for the rest of their lives. We have to get it right.'

Paula provided further evidence of the intensity of her emotional investment in her work and the extent of her identification with it, in explaining that she had made a deliberate decision to stay single and not to have children and that, although she had interests and relationships outside her working life, it was her role as a social worker that provided the central focus of her life:

being single, unmarried, no children, no ties...my job is everything...whilst I'm here at work, work is all-encompassing, and I do what I can do as best I can...Perhaps I work the way I work because work has become my life.

The next two extracts are taken from the interviews with Mary (Youth Offending Service team manager) and Mike (local authority assistant director for adult social care and chair of regional end-of-life leads group). These show a progressive shift towards

a position where the emotion of compassion is integrated into a more reflective perspective and interpreted as an imperative to exercise managerial leadership.

Mary

Mary was recruited as a member of the social workers' practitioner cohort because she continued to practise as well as to operate as a first line manager. The data shows that, in practice, her perspective incorporates elements of those of both social work practitioners and those in more senior managerial roles. In the context of the focus of this chapter, she expressed a strong sense of personal alignment to a virtue ethics position as a primary influence on her approach to her work, but expressed this from a more reflective perspective, in which she extrapolated the informing principles of social work practice to her role as a manager:

I still do [see myself as a social worker]. I suppose that comes back to your principles and values, doesn't it? ... the value base is there. I suppose that's why it fits, because if it fits with you as a person, you're very lucky aren't you? It's not something you're trying to achieve, trying to be, it's who you are... I still would adhere to the Social Work Code of Practice⁴ in the way that I deal with colleagues, with staff, with young people, with other agencies.

⁴ There is no document with this specific name. The former registration body for social workers, the General Social Care Council produced a 'Code of Practice for Social Care Workers' (2012) and BASW produces a 'Code of Ethics for Social Work'. HCPC (current registration and inspection body) publishes 'Standards of Proficiency for Social Workers' and 'Standards of Conduct, Performance and Ethics'. The relevant interview was conducted

She conveyed both her commitment to her virtue ethics perspective and how she interpreted this as an imperative to exercise front-line managerial leadership. She described how she had come to recognise that there were some Youth Offending Service social workers for whom their work was ‘just a job.’ She described how her own very different interpretation of the role led her to be disturbed by the potential for this to lead to inequities in the quality of service provided to young people, including those who were subject to supervision orders imposed by the criminal courts. She referred to ‘the inconsistency in delivery based on individual staff, how passionate they are. So it’s a bit of a lottery who you get as your supervising officer, how proactive they are.’

She gave an example of how this inconsistency of delivery could have far-reaching implications for the future of the young people concerned. She explained that in cases where young people were in breach of supervision orders because they had failed to engage with their supervising officers, one of the options available was for the officer involved to recommend an order for conditional discharge. This meant that no further support would be offered, but that if the young person committed further offences they would be sentenced for the original offence as well as the new ones and would, therefore, face a more severe penalty.

Mary explained that in her role as court manager for the Youth Offending Service she would review reports from social workers in which they proposed this course of action. She described how a typical one would show that the young person ‘has all these risk factors – substance misuse...living accommodation issues...parenting issues...emotional health...bereavement, so – huge!’

She expressed her sense of indignation that a social worker could be prepared to leave a young person in this situation of vulnerability, ‘And we’re saying we’re not going to give any input into this young person, he won’t engage!’

She described how in this situation her response would be to exercise leadership by rejecting the recommendation and returning the responsibility to the social worker, ‘I turn round to the worker and I say, “It’s your job to get him to engage.” It’s not “He won’t engage” – you have got to get him to engage.’

Mike

Contributions made by Mike at different stages of the group interview with the regional end-of-life leads group, which he chaired, showed him to be, like Mary, both an exemplar of compassion and an advocate of virtue ethics. However, the canvas against which he set this was much broader, so that his compassion was directed not just to specific individuals, but inclusively towards everyone within the local population who might be facing the end of their life under conditions of adversity and was expressed in terms of an imperative to specific elements of organisational leadership.

In the first extract, Mike’s explanation as to why he had come forward to lead an initiative to improve care for people who were within their final weeks or months of life, showed that he had been influenced to do so because of the empathy and active concern he felt towards people who were facing their impending death under conditions of social disadvantage. He opened this explanation with a statement in which he aligned himself personally with an obligation to enable dying people to be cared for in the place of their choice:

it's very close to the heart. As a senior manager in a local authority, for me, it's realising that there are [more] people we're needing to care for, with others that we're just not getting right at the moment...we need...to respect the wishes of many that they would not wish to die in hospital but would wish to die at home.

He continued by making it evident that it was his ability and willingness to engage empathically with the situation of dying people that made him acutely conscious of the nature and urgency of dying people's needs:

for a lot of people coming towards the end of their life, the greatest fear is dying in intense pain, or dying lonely or on their own; and given that 23% of older people live on their own, it's something we've really got to change our response to...think how sad it must be when you're sitting in a house 24 hours a day, having moments not days, and there's not sufficient people looking after you.

As well as demonstrating that compassion provided an important motivating force in his leadership of this initiative, Mike argued that this value, which he referred to as being 'caring', should be considered an essential attribute of anyone aspiring to work, not only in social work but anywhere within health and social care services. He identified this as an issue of organisational leadership and argued for the adoption of a principle of values-based recruitment. Responding to a discussion that took place within the group interview about a recent TV documentary that exposed multiple instances of physical cruelty and emotional abuse in a residential care setting, he commented that 'If you watch that Panorama programme, and it doesn't matter whether you're in this business or not, you ask yourself why did someone employ this person?'

Building on this, he referred to what he considered to be:

a fundamental flaw in the way we recruit in local authority and in the NHS... You can have a two days assessment centre, a one-hour meeting; and it will look at your competencies and it'll look at your technical abilities and the presentation of it, whatever. It doesn't check your value system whatsoever.

He concluded that, in view of this, organisational leaders across the health, social care, and professional education sectors should take responsibility for ensuring that all applicants were assessed in relation to their values as well as their abilities:

I think what leadership's got to be about is, and it's got to be across the whole university system and whatever we do: people shouldn't come into this work because they want to, but [because] we believe they have the right values.

This data from some of Mike's contributions to the group interview with the end-of-life leads group showed how, from a managerial perspective, he was influenced by virtue ethics to take on delegated responsibility for the organisational objective of improving end-of-life care and also how he identified virtue-based recruitment as an organisational imperative. The final two sets of extracts within this theme, however, show how Lesley and Ian (director of a consultancy organisation and former local authority deputy director), who were members of the national leader cohort, took this to a further level by making their own principles of virtue ethics into the organising principles of their leadership strategies for the services they headed.

Lesley

The following extract from the interview with Lesley, showed, first, the forcefulness with which she expressed her enduring commitment to the values of the social work profession, and second, how her interpretation of these continued to provide the

guiding principle of the leadership she provided for her organisation, now that she was reaching the closing stages of her career:

as I draw to the end of my career, I see social work as being my profession – that drives me to make a difference, drives me to work in a partnership way with people...It drives me to put service users at the forefront of whatever we're doing.

Ian

As will be demonstrated in the next chapter, the data shows how the concern for social justice that Ian developed from the experience of growing up in a community affected by social disadvantage provided him with a clear sense of purpose throughout his career. It inspired him with a determination to develop services that would enable families in such situations to overcome the detrimental effects of such experiences on their ability to parent their children safely and successfully, and thus enable, 'more children to stay at home.' This provided the focus of his statement of his core principle as a leader, which he set out to embed within every aspect of the local authority children's services department that he set out to reform, 'you have to have a strong vision and values and you test out the right thing, whether it's a big thing or a little thing, against those strong values and that strong vision.'

Within the data, Ian provided examples of how he set out to embed this principle at every level of action within the department from policy to personal interaction. As an example of policy, he, like Mary and Mike, aligned himself with a virtue ethics perspective that values are an intrinsic feature of the character and an essential attribute of any social worker. In accordance with this, the data shows how he took decisive action to ensure that his own organisation adopted a policy of values-based recruitment, both in principle and in practice. He explained that either he or the senior

manager, who had been his closest associate in leading the radical reform, had personally chaired the final interview panel for every social worker appointed to work within the new practice units that they established ‘because we wanted people who shared our vision and values.’

At the level of personal interaction, Ian described how he resolutely challenged any indications that social workers in his department were failing to observe these values, even if this was only in their choice of language, despite having attracted some criticism from senior colleagues for the fierceness that he displayed. Ian invoked a principle of systemic theory to explain that this was because he saw such behaviour as being likely to have a material impact on the ability of the department to achieve the ‘ethically inspired’ vision of enabling more children to thrive within their birth families.

There were a couple of famous times when people said I was over the top. I heard a couple of people...being derogatory about a mother and that wasn't on. It was okay to talk about the risk, but you don't make judgements about how someone leads their life. What you do do, is to make judgements about the risks and help that mum make judgements about the risks...what systemic theory would say...is that language changes behaviour. So, it was really important – the language in the organisation – and that helped to change the social workers' behaviour and that helped to change the families' behaviour and that helped more children to stay at home.

4. An alternative ethical perspective

Although the prevailing ethical stance of participants in this research is that of virtue ethics, the data presented within this final theme shows that this perspective is not universal across all the research participants. This element of the data shows that two participants, within the national leader cohort, who had distinguished records as

leaders, both as appointed chief officers in local authority services and elected heads of their peer leadership networks, espoused deontological or duty, rather than virtue ethics. In each of these cases, the data shows that these participants, like Lesley and Ian, regarded their ethical values as a core principle of their leadership, but rather than basing their leadership primarily on their own personal or professional values, they privileged the value of fulfilling the responsibilities and expectations placed on them by those who invested them with their power and authority.

Catherine

Catherine (NHS non-executive director, former director of social services and local authority chief executive, chair of national working groups) and recalled that her appointment as a local authority Director of Social Services had coincided with the implementation of two Acts of Parliament that required ‘very big and very demanding’ changes in services for both children and adults. She explained that when she was reviewing the progress that her organisation had made, the questions that she asked herself were about whether they had faithfully fulfilled the intentions of the legislators, ‘did what Parliament wanted to happen, happen?...did we manage to accommodate the responsibilities?’

Suzanne

Suzanne (local authority director of children’s services) identified what was, in effect, a hierarchy of duty-based obligations. She explained that in taking on the post of a local authority director, she considered herself to have accepted an implicit obligation to subordinate her own principles and values to those of elected members. She qualified this, however, by adding that, although she saw her primary duty as being to deliver the policies of the councillors who governed the local authority, there were

exceptional circumstances in which this was overridden by a responsibility to assert the formal powers and obligations of a Director of Children's Services, in accordance with statute law. This hierarchy of ethical considerations is expressed in the following extract from the research data:

Interviewer: When you say that you don't necessarily agree with what the politicians want you to do, how do you work that out in your own mind?

Suzanne: It depends on what it is. If what they want me to do means that I'm going to compromise my own values, if I don't like it, I get out of the kitchen. If what they are proposing is in relation to a policy or an issue, a case-related issue or whatever it is, and it compromises what my statutory function is then I have – I've had to do this only once in my entire career – I've had to say to a politician, 'I'm advising you as your DCS [Director of Children's Services] you should not be doing that because it will have these consequences and I am placing on record that I am advising you.'...But most times, by and large as an officer, as a good officer, you are there to do the bidding of politicians, following due process. So, you have a choice. If you don't like the policy, you get out. If you're prepared to live with it, then you have to do it to the best of your ability.

Suzanne's sense of obligation to subjugate her own values and judgement to an overarching principle of democratic accountability was equally evident when she talked about her role as the elected president of a national association for chief officers:

when you're president of [national association] that kind of leadership requires you to lead on behalf of 152 disparate individuals who may all have different views. You're not representing your own views, you're representing the view of the consensus of the sector...I was representing views that I didn't agree with but that was the consensus of the sector, so off I went with it!

CONCLUSION

This chapter presents data from the research in which participants who are qualified social workers describe formative experiences in their early lives or careers that imbued them with a capacity for compassion and a concern for social justice. It shows how this led them to choose social work as their career because it provided the opportunity to take positive action to pursue the altruistic aspirations these experiences aroused in them. It shows, further, how participants testified to these values of compassion and social justice as a continuing and prominent, even the pre-eminent, influence on the way that they conducted themselves within the various roles they undertook within their careers, whether these were at the level of social work practitioner, organisational manager, or national leader.

It also shows, however, that there are differences between the three research cohorts in the way that these values are interpreted and enacted. This chapter shows how participants' responses range in scale from front-line social work practitioners, who experienced their values principally as a call to action to relieve the problems of individual service users, through organisational managers, who identified specific leadership imperatives, to national leaders, who incorporated their respective ethical values as the organising principles of comprehensive organisational or national strategies. It also shows a progression in the degree of reflection and sophistication in the way participants at these different levels conceptualise their values and their significance.

This chapter prepares the ground for subsequent chapters that show how participants' ethical values, and the force of their investment in them, play an important part in influencing them to exercise leadership and in shaping the focus and scale of this leadership.

CHAPTER 5. BEING STRATEGIC

INTRODUCTION

This chapter presents the characteristic of being strategic. This characteristic includes elements of being proactive, resourceful, and tactically agile in responding to situations that are complex and challenging. The data presented in this chapter shows, however, that while each of these elements is shown by participants within each of the research cohorts, there is a further element that was demonstrated by participants in the manager and national leader cohorts that was less consistently evident in practitioner participants. This is the presence of a sense of overarching strategic purpose and direction.

The first theme in the chapter is that participants' accounts of their career biographies show them being proactive and resourceful in developing their careers, including responding with considerable agility to both positive opportunities and apparent setbacks. The presentation of this theme shows, however, that there is a distinct difference between practitioners who were resourceful and adaptive in responding to each individual situation and national leaders who were equally resourceful and adaptive but used these qualities to progressively build the skills that equipped them to take on roles of progressively more inclusive leadership.

The second theme is that of being empirically informed, in the first of the two senses identified in the data. This refers to participants' ability to apply learning from experience to enable them to exercise skills that facilitates their leadership, by enhancing their authority and equipping them with specific strategic and tactical skills. The presentation of this theme shows that this characteristic is enacted differently between participants across the cohorts, with practitioners using such knowledge and

skills mainly intuitively and national leaders using them within a framework of conscious purpose.

The third theme shows that a readiness to take on 'wicked problems' (Rittel and Webber, 1973, p.160) or 'adaptive challenges' (Heifetz and Laurie, 1997, p.19) and the capability to respond effectively, based on conceptual ability and tactical agility, is shared by participants across the three research cohorts. However, the scale of the situations involved is of a different order.

The final theme is that of adaptive leadership, which shows how research participants combine the features of adaptive leadership, as characterised by Heifetz and Laurie (1997), Heifetz and Linsky (2002), and Heifetz et al. (2009), of conceptualising and analysing situations from a position of a holistic overview and being responsive to developments at the level of operational detail.

THEMES THAT CONTRIBUTED TO THE IDENTIFICATION OF THIS CHARACTERISTIC

ADAPTIVE CAREER PATHWAYS

Without suggesting that participants in this research were confronting existential threats, as suggested by the chimpanzee analogy by Heifetz and Laurie, 1997, as referenced in the Literature Review, above) what the following examples show is that they were adept at envisioning potential for constructive change in situations that presented themselves as either evident opportunities or unanticipated challenges, and proactive in finding the means to realise this.

As demonstrated below, the data shows how participants are not only receptive to opportunities that present themselves as such, but also that they respond to situations

that represent potential personal or career disruptions or setbacks, as positive incentives to launch into new enterprises of professional growth and development. The following accounts show participants as being, variously, proactive in negotiating their routes into the profession, enhancing the scope of the roles they undertook, and in finding, or generating, opportunities that were in keeping with their evolving needs, interests, or life stages.

What the data also shows, however, is that although both social work practitioners and those in positions of national leadership, in most cases, deny having followed any explicit career plan or strategy, those who achieved positions of national leadership were distinguished by a sense of purposive progression. The data shows that this took the form of using each of the posts they took on as an opportunity to build the informal portfolio of knowledge and skills that progressively equipped them to take on the positions of organisational and national leadership that they eventually attained.

Self-directed practitioner career pathways

Paula

The pattern of Paula's career is that she began by being positively responsive to opportunities identified for her by others and then became more proactive in purposively identifying and mobilising opportunities for herself. Although her career shows some element of progression, however, its main focus is that of following her interests as these developed. The data shows that she is mainly content to confine her leadership to developing the potential of the practitioner roles she had undertaken and playing an active role within the shared leadership dynamics of the multidisciplinary team, of which she was a member.

Paula explained that she had initially been undecided about what to do when she left school, beyond wanting to work with children. She described how she took up a suggestion from a family friend that she train as a nanny, attending a course that included working in a residential unit for children in care who came mainly from socially disadvantaged backgrounds. It was here that she experienced the deaths of the two children who were returned to the care of their mother, as referenced in the previous chapter, which left an enduring impact on her and contributed to her subsequent determination to champion the interests of people who were vulnerable.

After qualifying, Paula described how she embraced opportunities to broaden her life experience by working in families with a variety of lifestyles, and to travel, but then readily grasped a suggestion that she use her skills in a new context, when another friend suggested Paula should join her in working in a day nursery in a deprived area of a large city. She explained that, for some time, she found fulfilment in this role. Over a period of years, however, the function of the nursery became more specifically focused towards working remedially with families who were subject to child protection interventions, and, though supportive of this, Paula became increasingly frustrated at the limitations of her own role within it. 'I got so fed up of saying, "I don't know, go, and ask your social worker".'

She described how she responded proactively to this frustration, however, taking it as a spur to review her situation and consider her options. She explained that she identified how her personal circumstances of being single and without dependents gave her the scope to make an adaptive change in her career by taking time out to obtain a new qualification:

I thought, 'I've got to do something about this; either I'll go into management or I'll go and train to be a social worker.' I wasn't intending to have children.... So, I thought,

‘I’ll take two years off and go to university and do my social work training’, which I did.

Paula’s openness to new possibilities was again demonstrated by her decision to begin her career as a qualified social worker by moving into hospital social work, having discovered this hitherto unknown area of activity through her final student placement. ‘My last placement was here in “A” Hospital and I did not know that social workers worked in a hospital!’

Her account of her subsequent post-qualifying career shows her to have been proactive in developing both her own role and the services she worked in. Initially, this took the form of developing the scope of her role in the hospital’s unit for children with disabilities and their families, by setting up groups that enabled both parents and children to access peer support. Later, she extended her remit by becoming involved in counselling women who were considering termination of pregnancy, and then further, by working with women who were being treated by the hospital’s gynaecological services for other reasons.

Having developed an increasing interest in working with adults, Paula described how she created her own opportunity to move into a role that focused primarily on working with older people. She did this by responding proactively to a coffee break conversation with another hospital social worker, who mentioned that she had recently become dissatisfied with her own role. Paula explained that she had taken the initiative to propose a job swap that opened up a new phase in her career, which she continued to find fulfilling several years later:

One day my colleague and I - she had been to Rumania I think, and she’d been working with children but had come back into the role of working with adults - she was saying she was so fed up working with adults and wanted to return to working with children.

So.... overnight I said, 'I'll do the adults and you can do the children.' So, we just swapped our jobs! She's gone on to work with children and families and that's how I came to work with adults... I... have never looked back.

Kay

Kay's account of her career made it evident that from the outset, she both identified and responded proactively to opportunities that had arisen and created new ones for herself. Like Paula, the pattern of her career is one of following her interests, irrespective of any consideration of progression and, similarly, that she did not aspire to be a leader beyond the scope of the practice leadership that she exercised in providing support and advocacy for service users and in influencing decision-making within the multi-professional team of which she was a member.

Like Paula, Kay explained that she had not originally set out to become a social worker but worked her way towards it progressively. She explained that her first step towards becoming a social worker was to become a volunteer for the Probation Service, where she had already begun to take the initiative, by setting up a victim support service. Her experience there convinced her that she wanted to take on a professional role and she described how she was proactive in creating her own opportunity to do so. She explained that she negotiated her entry to social work by persuading the local authority where she lived to create a post especially for her, as an unqualified social worker, 'not a support worker, an unqualified social worker', and then to support her in obtaining her professional qualification.

Once qualified, Kay described how she continued to purposefully navigate her own unique career pathway. She explained that after qualifying, she progressed to the level of lead social work specialist within a community mental health service but had then

chosen to alter direction by pursuing what she regarded as a unique opportunity to take on a developmental role in another part of the world. She explained that she had seen, 'by sheer fluke' an advertisement for a time-limited post for a specialist mental health social worker to establish an adult social care service in a small and geographically distant British territory. She explained that she relished this challenge, forming a strong partnership with the social worker who came to establish a parallel service for children and extending her original two-year contract by a further six months.

On returning to the UK, Kay discovered that her mental health credentials had become outdated due to new legislation and that there was, in any case, no immediate vacancy available in the service that she left to work abroad. She described how she adapted to this potentially problematic situation by finding a senior social worker post in a small charity. Finding herself isolated in this role, as a lone social worker in a specialist addiction service, she demonstrated her proactive adaptivity by taking the initiative to establish a peer network. She explained that after a year in this post she successfully regained her accreditation as an approved mental health professional and took the opportunity of a vacancy in her original NHS community mental health team to revert to her preferred role as a practising senior mental health social worker.

Proactive responses to challenging life and career developments

Bernadette

Bernadette (Youth Offending Service social worker) showed her positivity and adaptability in explaining how training to be a social worker had been her method of turning a negative life event into a positive opportunity. Having married and had children at an early age, she had spent several years doing any job that 'would fit around my boys'. When her marriage broke down, however, she chose to see this as a

chance to 'do something I'd always wanted to do', by going to university to do a qualifying course in social work.

Having completed this, Bernadette explained that she had not had any specific career plan but had entered the Youth Offending Service, as an agency social worker, and then responded enthusiastically to 'this service I'd never heard of'. She showed her continuing openness and adaptability in the way that she chose to frame changes within the organisation, which others experienced as a source of distress, as providing her with a welcome opportunity to take on new challenges, including working with young people who had committed some of the most serious offences, 'My role's changed here in the last few months, like everyone's has. So now I'm the Court Officer and paired working with other members of the team, which is around the high-risk cases and is really good!'

This contribution was in keeping with the tenor of other data from Bernadette, which showed that, having already been in post for several years, she had no ambition to develop her leadership beyond the realm of direct social work practice.

Mary

Mary (Youth Offending Service team manager) showed a similar disposition and ability to respond with purposive agility to apparent setbacks in her personal life and career. Like Bernadette, she had found herself in the position of experiencing a divorce. This had far-reaching consequences, in that it involved being repatriated to the UK after an extended period of living abroad, leaving behind the children's nursery business that she had developed there. In what she represented as a characteristic response to adversity, however, Mary, like Bernadette, described how she had reframed this situation in terms of an opportunity to fulfil hitherto unrealised ambitions and open up new career possibilities:

I divorced, came back to England... I'm one of those people, probably would happen again if I found myself in the same position, I immediately looked for something else to do. Having been abroad and found myself back in England, I thought, "There's a lot more opportunities here for me". Having never had the chance to go to university, I decided I was going to go to university.

Relatively early in her social work career, however, Mary experienced a further setback. She described how she had left a more secure position to take on the challenge of establishing a children's home on behalf of an entrepreneur, only to find that once she had got it up and running he froze her out, causing her to leave and to subsequently take successful legal action against him.

Once again, however, the interview data showed how she had responded proactively. Again, like Bernadette, she described how she had entered the Youth Offending Service opportunistically, via an agency placement, but had rapidly established herself in this new setting. She described how she had subsequently been promoted to a management role, acquiring a progressively wider span of responsibilities, through a series of service re-structures. She was sanguine about the prospect of a further impending restructure, driven by the need to cut costs, choosing to focus on benefits to the service, even though these were short-term, and framing the prospect of redundancy as an incentive to generate new opportunities for her own professional development:

It's a good time in a way: productivity goes up. You start to see everybody's true colours. (laughs) It's going to be tough – but even if I happen to be one of those people that didn't have a job at the end of it, I'll just go on to the next thing. I'm already thinking, "What's Plan B?"

As in the data considered in the previous chapter, these contributions showed that Mary's perspective was more comprehensive than those of participants in purely practitioner roles, in that she was open to career progression, but, equally, that she did not pursue as consistent a path of progressive self-development as members of the national leader cohort.

Examples of career pathways based on adaptive synergies between personal and professional life

Like the practitioners, research participants who had reached positions of seniority explained their progression as an incremental process, rather than the fulfilment of a long-standing ambition to achieve this status. Like the practitioners, these participants' accounts of their career pathways showed that they had developed their careers both adaptively and strategically, in ways that accommodated and turned potentially disruptive features and developments in their personal lives into career enhancing opportunities. These careers differed, however, in that, although they denied being personally ambitious, the opportunities that these participants pursued and created for themselves resulted in a more sustained progression of developing their repertoire of skills and extending the scope of their responsibilities.

These features are illustrated in the examples below, which describe the career pathways of Ruth (Chief executive of a large specialist healthcare organisation in the voluntary sector), Frances (professor of social work) and Sheila (acting CEO of a membership organisation for social workers). In each case, these participants showed, in particular, how they had responded proactively and creatively to the challenge of finding and shaping career opportunities that accommodated the changing needs and expectations of other family members.

Ruth

As referenced in the 'Ethically Inspired' chapter, Ruth characterised herself as having been 'fortunate' from the outset, despite having grown up in a situation of relative poverty and material disadvantage. She was determinedly modest in her account of her career, ascribing her achievements in becoming chief executive of a major voluntary organisation, and building an international reputation as a leader in her area of specialist practice, chiefly to her good fortune in being intrinsically clever and the stability of her early life, 'I think I got lucky, with being clever, and I am clever... I was phenomenally fortunate, not only being a quite bright little girl but also because I had such a stable family.'

She went on, however, to describe how these advantages had formed her as an individual with a sense of positive obligation to use her ability by being continually proactive in identifying and in activating the potential to bring about improvement in any area of activity in which she engaged, 'So, I didn't need to be asked to do anything, I just kind of moved on from one thing to another thing – always thinking, "How can I do this best and make the most of it?"'

Ruth was keen to make it clear that she had never had a career plan for herself, describing how she had instead repeatedly adapted her own career to accommodate the moves required by her husband's progression, 'none of it's been planned. I've literally moved jobs, following my husband, and found myself in interesting jobs.'

What was evident from her account, however, was that within her career Ruth had been an active agent in both finding and shaping potential opportunities for growth and development, for both herself and the services themselves, within each of the posts she had occupied, and within the evolution of her personal circumstances. She had, in effect, continued to follow the pattern she had established in her childhood of 'moving

on from one thing to another thing' and 'always thinking, "How can I do this best and make the most of it?"' At each stage, she had responded to the potential career disruptions brought about by enforced family moves, and the arrival of her children, by being prepared to find new roles, and to acquire the knowledge and skills needed to do them well.

Ruth described how she had begun her post-qualification career as a probation officer in an inner-city Probation Service, where she had relished opportunities to be involved in experimental work with young offenders. After two years, however, her husband's work required them to relocate to a rural area in another part of the country. She explained that at that time Probation posts in such areas came up only when it was necessary to fill 'dead men's shoes'. She therefore made the decision to move into mainstream social work, which she was entitled to do because this was a period when there was a single qualification for both roles.

The post that she took on involved servicing an area of considerable social diversity. On one hand, it incorporated long-established 'feudal' villages, attached to a large country estate; on the other, it encompassed a new housing development, 'the biggest private housing estate in the UK ... with *all* the social problems you would expect, if you sling people into [a] sort of barren, massive acreage of low-cost housing with almost nothing around.'

Ruth described how she had taken full advantage of the opportunities that this post provided, to gain a wide variety of experience, to learn from a team of experienced colleagues, and to expand her formal credentials. This included achieving her Mental Welfare Officer (MWO) qualification and gaining experience in this role by being 'allowed' to be 'on call' outside regular office hours to deal with complicated mental health issues 'at a young age ... on your own in the middle of rural [name of county]'.

It was evident that even at this early stage in her career, Ruth had demonstrated practice leadership, by being proactive in identifying unmet needs and in initiating developmental activities that responded to them. She described how she had chosen to take on a newly created role of GP-attached social worker and, in this capacity, identified an unmet need within the community for a sexual health service. She explained how she had equipped herself with the qualification required to provide this and added a sexual health clinic to the services of the GP practice.

Ruth explained that during this period she had briefly interrupted the flow of her career to have two children but had used this period to expand her repertoire of skills and gain experience in another area of activity, by working part-time as a practice educator.

Subsequently, her husband's job required a further move, back into the city that they had originally come from. Ruth described how she had taken the opportunity to move into yet another area of practice, working part time as 'the only social worker in a specialist neurology and neurosurgery unit'. The data from her interview showed how she had been proactive and resourceful in this role, for example, by collaborating with a medical colleague to set up a national charity to improve support for people with a specific neurological condition and promote research. During this period, she described how she had also established herself as a provider of specialist education for professionals in health and social care.

She explained that her final move, to a different, though related, area of specialist practice, had come about because a colleague from another profession, whom she had met while presenting at a conference, alerted her to a social worker vacancy within her own organisation. Ruth described how, once she had established herself in this new area of practice, she had gone on to take up opportunities that arose, firstly, to become

Director of Social Work and, subsequently, to take on the greater responsibility involved in becoming the organisation's Director of Clinical Services.

She went on to explain that becoming Chief Executive 'genuinely hadn't been part of my game plan' but that she had done so in the context of what amounted to an 'adaptive challenge' that the organisation had faced when it became evident that its financial position was unsound, leading the existing CEO to step down. She explained that she had been approached to take on this role, initially on an interim basis. Despite the unplanned nature of this transition, it was evident that she had responded adaptively, proactively equipping herself with the specialist skills that she needed to resolve the financial crisis, by completing an intensive programme of study at a leading business school, 'one of those whistle-stop, everything you always wanted to know and never dared to ask about financial management [programmes].'

Having proved herself in the role for a year, she successfully applied for the substantive post. Once again, she presented this as a pragmatically adaptive response to a specific situation, rather than the achievement of a personal ambition:

I realised at that point that I'd either have to apply for the post or leave because it wouldn't be fair to go back to doing what I'd done, on the new person, and have someone sitting, an incubus on your shoulder going, "I've been doing it for a year and I wouldn't do it that way!"

Frances

Like Ruth, Frances (professor of social work) explained that she had married early. Rather than 'following' her husband, however, Frances explained that they had from the outset run their careers in tandem. Despite this, she had 'never had a career plan as such' but had built her career by 'being able to see opportunities and take them when

they come'. One of the notable features of Frances' career was the apparent deftness with which she had been repeatedly proactive in integrating the development of her professional and her family life, to the apparent benefit of both.

Frances explained that in the early stages of her career her main concern had been to develop a broad range of experience. As a student, she completed placements in Children's Services, Probation, GP-attached social work and residential care. After qualifying she applied for a post in mental health, by means of providing herself with the equivalent of a 'fifth placement'.

Like Ruth, Frances was quietly confident in her own intellectual capacity, having been identified at an early age as an individual of high ability and having graduated from a prestigious university. She suggested that this background had equipped her with the confidence and resourcefulness she needed to take advantage of the 'enormous amounts of flexibility to do creative things' that she was afforded in this post, despite her inexperience. Like Ruth, she showed that she had demonstrated practice leadership, from an early stage in her career, by being proactive and in identifying unmet needs and developing new forms of service provision, developing the skills she needed in the process. She described, for example, how she had taken the initiative to set up the first group home in the country for people with long-term mental illnesses, relying largely on her own resources to do so:

I wasn't following any blueprint; there wasn't any training. There weren't any instructions saying: If you want to set up a group home this is how you do it. You have to be personally quite resourceful... You have to burrow away: Is this right person to ask? Have I got to go away and find out? Do I need to go to a meeting?

The project was successful and helped to position her to become a manager within three years of qualifying as a social worker.

Having established herself within this role, Frances explained that she had then chosen to take a career break to have her first child and then to return to work part-time. She explained how she had created the opportunity to do this by finding a colleague in a similar position and arranging her own comprehensive job share opportunity, which included sharing ‘a job, a pool car and childcare’.

Having had her second child, Frances described how she had decided to take a more extended career break but during this period undertook various activities that she selected to both complement her role as a parent and enhance the repertoire of skills that she brought to her subsequent professional career. These included taking on a range of voluntary activities, including visiting older people, becoming a parent governor, and helping in a youth organisation.

In planning her return to paid work, Frances explained that she had taken a considered decision to move into working with children because this ‘matched my own life stage’. The data showed that she had done this on her own terms, initially negotiating to work very limited hours, but then taking the opportunity to move into a management role when the main post holder went on sabbatical.

Shortly after this, Frances moved on to work in a university, where she was still working at the time of the research interview, over two decades later, having progressed from lecturer to head of department and finally to the post of professor. Despite this continuity of employer, Frances explained that, in practice, ‘I’ve never done the same job two years running’ and that this had suited her because she had welcomed ‘having opportunities ... to take new directions and to follow new things’. Unlike some of her colleagues, who complained of ‘initiative fatigue’, she explained that she found these new challenges stimulating: ‘I was always able to embrace it and often found new energy and enthusiasm for working to achieve change.’

A notable feature of Frances's career during this later period was the positive way in which she had responded to what amounted to the personal 'adaptive challenge' of a perceived threat to her position in the university. She explained that she had experienced hostility from a senior colleague and had begun to feel that her position might be unsafe. Despite feeling threatened, however, she reported that she had been prepared to listen to the advice that this individual gave her, even though it challenged her to reconsider her fundamental priorities, which up until then had been to focus her energies on developing her own department and supporting the work of the university as an institution. The advice she was given was that she should become less preoccupied by internal matters and begin to look outwards. She chose to interpret this as an incentive to become proactive in pursuing activities and developing working relationships that took her beyond the confines of the university, 'if I can't trust the relationships in here then maybe I have to be like a spider and have some networks out into other places.'

Frances went on to describe how the route that she had followed had been to become more active in academic affairs at a national level, including taking on the leadership of a national academic network. This resulted in her being invited to take part in several major programmes to improve social work training and practice. She described how the experience of the contribution that she had been able to make through these activities had influenced her to negotiate to extend the scope of her leadership role at a national level and reduce her commitments within the university, because she judged that, at this by now later stage of her career, this would enable her to optimise her influence towards 'making people's lives better at the receiving end'. She explained that:

in a [nationally focused] leadership role ... you can have influence ... in a number of different spheres. It'll be students who have better experiences; it'll be lecturers, social work practitioners, managers and organisations that offer better social work services.

Sheila

The feature of finding the means to be proactive in developing constructive career outcomes from apparently adverse circumstances was an especially persistent theme in the career biography provided by Sheila (acting Chief Executive Officer of a representative organisation for social workers). Like Ruth, she described herself as 'fortunate', in this case in relation to the opportunities that her career had afforded her.

'I ... look back on my career as being really, really fortunate, being able to have lots of opportunities.'

On examination, it was evident that Sheila herself had played an active role in finding and at times actively creating these opportunities, through her ability to respond strategically to the challenges that she had faced in both her personal and professional life.

Like Frances, Sheila described how she and her husband had from the outset developed their working lives collaboratively, 'fitting our careers together and juggling all the other commitments.'

She explained, however, that, at the very start, the fact of her marriage had presented her with what amounted to an initial 'adaptive challenge' that potentially threatened her ability to become a social worker in the first place. Having married just before she began her one-year qualifying course, she discovered that she was no longer eligible for grant funding. She found a way to resolve this challenge, however, by taking the initiative to negotiate sponsorship from the local authority where she lived, in return

for an undertaking to work for them, once qualified. She described how she had then taken full advantage of the opportunities that her first post provided, to gain experience across a range of short- and longer-term interventions and areas of practice.

Sheila explained that after two years she had taken a career break to start her family, and that by the time she returned to practice four years later, the family had relocated to another area. She described how she had gone to work for the local authority where she now lived but had rapidly developed concerns about the lack of systems and accountability within her new organisation and had chosen to leave. From this stage, she described how she had effectively constructed her own 'portfolio' career. It was evident that she had been both adaptive and proactive in pursuing a career pathway that enabled her to progress professionally, while working part-time to accommodate the needs of her children. She described how she had done this by responding positively to a succession of opportunities that had been offered to her, 'the real advantage of having this sort of career of working quite a lot part-time is that you get asked, "Can you do...?" and if you're in a frame of mind of saying, "What does it involve? Well I'll give it a go!" so many things open up.'

Alongside this adaptiveness, her account showed that – reflecting the concern that she had developed from her family's experience of being poorly served by mental health providers who were inadequately knowledgeable and skilled to meet their needs – she was proactive in making sure that she was adequately qualified and skilled to acquit herself well within whatever role she took on. Having been invited to take on a one-year teaching post in social work, for example, she completed the qualification needed to become an accredited educator. She went on to describe how later, when she had returned to a local authority Social Services Department and begun to progress towards higher levels of management, she had unsuccessfully requested support to undertake a

Master's in Business Administration qualification but had then resourcefully found her own route. This involved enrolling as a distance learner with the Open University and contriving to combine studying with childcare, 'at the beginning of every term I picked up my box of videos and sat with the kids on Sunday mornings watching my videos.' She described how this had equipped her to take up further opportunities, initially to become the manager of a large university social work programme and subsequently to take on progressively more senior posts in a professional organisation for social workers, culminating in the position of Acting Chief Executive, which she held at the time of the interview. Like Ruth, she explained that she had not aspired to this role but had responded positively to being invited to take it on when, again, the previous incumbent had been displaced at short notice.

Strategic career adaptations in response to experiences of ethical dissonance

Both John (senior practitioner for Care Leavers and Looked After Children and young people) and Ian (consultancy director and former deputy director of a local authority children's social care department) described how they had consciously adjusted their career pathways to avoid having to make unacceptable compromises between their ethical principles and the requirements of specific roles and organisations. In each case, they defined their own stance in opposition to the practices of 'New Public Management' or 'managerialism'; especially its focus on formal plans and procedures and on enforcing compliance with these. Although they shared this common perspective, the descriptions of their respective careers below show that their adaptation took quite different forms. Above all, the distinguishing feature was that, while John interpreted the conflict between his own values and that of his organisation as a reason to confine his leadership to the level of professional practice, Ian saw this

instead as an incentive to position himself to exercise the strategic leadership needed to achieve reform.

John

John explained that his ethical objections to managerialist practices had led him to eschew the prospect of advancing his career by becoming a manager, although he had proved that he had the ability to perform this function well by successfully acting up as team manager to cover an extended period of sickness. He explained that he was not prepared to pursue a managerial career because he would have had to compromise his personal and professional values by endorsing and promoting practices that his experiences with young people had convinced him were detrimental to them. He was, for example, critical of requirements that the lives of children and young people who were ‘looked after’ should be managed by means of formal plans and meetings, as required by the ‘Looking After Children’ (LAC) procedures, which, however well intentioned, showed a lack of empathy with, and concern for, the well-being of young people:

The LAC review ... it’s born out of a good reason – include young people. But it’s just distressing... I certainly never went to meetings about me! That’s hard enough as an adult. Surrounded by all these professionals who’ve got all this power and, basically, you’re not where you want to be. Generally, you want to be at home with your family. Then you’ve got all these people around you, talking about you, often looking at negatives.

He observed that it was, in his experience, managers who were compliance focused that were likely to be promoted, ‘managers who progress ... they’re the ones that are saying, “You’ve got to reach this target”, and buying into that system.’

He explained that he could not bring himself to compromise his values in this way: 'I can't do that, hand on heart.' He did not dwell on this as a source of disappointment or frustration, however, but focused instead on the scope that he had found within his senior practitioner role to undertake functions that he found worthwhile and rewarding. This included exercising practice leadership through contributing to the development of others by acting as an adviser and mentor, without being burdened by the bureaucratic responsibilities of formal line management.

Having recently moved sideways from his former role in a Youth Offending Service team to his present role with care leavers and 'looked after' children and young people, John, like Frances, also identified the opportunity to achieve beneficial synergies between his work and personal life, through developing skills that he could use across his respective roles as a social worker, parent, and educational volunteer, 'I'll ... develop skills in that area: working with young kids, young children ... having my own children, and I help out in a local school as well.'

He concluded by explaining that he was, above all, concerned to be an ethical guide and exemplar for his own children, 'Hopefully, I'm going to impart some of that to my children and even if they don't want to carry on this kind of work they will end up having some social conscience.'

Ian

Reflecting similar concerns to John's, Ian (consultancy director and former local authority deputy director of children's services) specifically distinguished himself from what he considered to be the typical profile of a local authority senior manager. He explained that, throughout his career, he had been driven not by personal ambition

but by a strong sense of ethical purpose. This purpose was to improve services for families, irrespective of how this affected his own career prospects:

I think what has always driven me, which is different to other people I know that have done similar roles to me, is that I always felt that we could do a lot better for families than we were doing. That's what's always driven me. I think I was quite a thorn in the side of the local authorities that I've worked for, so if I'd been ambitious for myself I probably wouldn't have done that.

As covered in the last chapter, he described how he had, throughout his career, been guided by his commitment to ethical values and an encompassing vision that reflected these, you have to have ... a strong vision and values and ... test out the right thing, whether it's a big thing or a little thing, against those strong values and that strong vision.'

Like John, he expressed an awareness that in taking this approach he was out of step with what he perceived to be the prevailing expectation within local government that senior managers should prioritise the values of compliance and loyalty to the corporate agenda, rather than the exercise of independent judgement:

that's not ... something that's nurtured in local government. They want someone who's got much more of an open mind who can manage things, rather than having a strong vision of what's the right and what's the wrong thing to do.

Unlike John, however, Ian described a career pathway in which he had negotiated a route for himself that had enabled him to reach a position in which he was able to take positive action to change the practices that aroused his concern. In common with each of the examples discussed above, however, his was an account of progressive strategic adaptation rather than the pursuit of a concerted career plan.

Again, as referenced in the 'Ethically Inspired' chapter, Ian explained that he had chosen to become a social worker because it was one of the few careers that was compatible with his strong political views. He went on to elaborate, however, that, although he had already become interested in social work during his first degree, the process through which he had come into it was that he had needed to adjust his plans abruptly at the end of his course because he had, against expectations, failed to be elected to the sabbatical role of president of the university's student union. Against this background, he had been open to an opportunity that his mother suggested to him, 'My mum cut out a little thing from ... my home town – a little advert saying, 'Trainee social workers' and I applied for the job and got it.'

Like other participants, Ian denied having ever had a structured career plan or overall career ambition:

I don't think I had a very structured view about what I should do ... I didn't think my route was to become a director or anything like that ... I just responded. I suppose I was quite reactive really, rather than proactive, in trying to develop my career.

Without having had an active career plan on his own behalf, however, it was evident that Ian had repeatedly exercised purposeful agency in making career moves that enabled him to work in accordance with his values and eventually provided him with the scope he needed to systematically pursue his vision of how to set about the process of improving services for children and families. He showed how not only his career but also other life decisions were informed by a clear sense of 'ethically inspired' strategic direction. He explained, for example, that when his increasing family responsibilities required him to rationalise other areas of his life, he had made a considered decision to give up the union and political activities that had been important

to him up to then, and focus on his work, ‘because I thought I was better at that, I was making more of a difference.’

He showed how he had continued to be ethically purposive and strategic in shaping his career, by relating how he had taken the decision to forgo the prospect of a promotion that would have meant working with a line manager whose ‘direction of travel’ conflicted with his own. He chose instead to move to another authority, even though this meant moving out of his preferred area of working with children and families. He explained, however, that he had used this position as a springboard for moving into an equivalent role in an inner-city borough, which had become notorious for the deficiencies of its social care services, but where he identified political conditions that might be supportive of major change. He explained that he was able to use his achievements in this post to finally position himself to lead a service for children, young people, and families and to negotiate the resources and freedoms that he needed to bring in other senior staff to support him in developing and implementing a new model of service. He described how, at the time he took up his post, the council collectively was acknowledged to be ‘in serious trouble’ and that this, and the presence of a like-minded chief executive and supportive local councillors, provided an environment in which there was more scope to be allowed to instigate change.

EMPIRICALLY INFORMED

The identification of being ‘empirically informed’ as a characteristic feature of social work leadership resulted from a line of analysis that was prompted by data from Helen (professor of social work). Helen identified the American social work pioneer Mary Richmond as her professional role model or ‘hero’. She explained that this was because Richmond had been the first person to propose that social work should be considered a social science, and that this aligned with her own view that social work should be

‘an empirical profession’. She argued that social workers should be prepared to take responsibility for ensuring that there was a valid evidence base for their actions. She suggested that at a time when much of the policy and practice guidance promulgated by central government was, in her view, informed as much by ideology as empirical evidence, this was as important as being compassionate:

Unless people have good research skills, along with compassion ... they’re not going to be very good. If they don’t have a decent critical mind they’re going to be very prone to swallowing the latest nonsense that comes out of government ... It’s very important to be compassionate but also to be very rigorous ... Social workers need to be clever; clever and kind and rigorously sceptical – and all of those things at once! And sadly, not all of them are.

The data from this research showed that, notwithstanding Helen’s concerns, at least some social workers, whether in positions of frontline practice or national leadership demonstrated each of the qualities she advocated, albeit in different forms and at different levels. Further, that these qualities also played an important part in their exercise of leadership. The analysis of the data showed that participants across each of the three cohorts were ‘empirically informed’ in two different senses. The first of these is described in this chapter and the second in Chapter 7, ‘Willing to Challenge’.

The sense that is described in this chapter reflects the first element of an explanation of this concept provided by Bryman (2012, p.23), in which he describes empiricism as: ‘a general approach to the study of reality that suggests that only knowledge gained through experience and the senses is acceptable.’

The presentation of the two sub-themes below shows that, while participants in this research were not empiricists in the most literal sense, of discounting the value of theory, they, and others, identified experience-based knowledge and skills as an

important source of the knowledge and skills that enabled them to exert leadership influence. As in the case of other elements of leadership, however, the data showed that this feature was manifested at a different level by, respectively, social work practitioners and members of the national leader cohort. Specifically, the presentation of the two sub-themes below shows how social work practitioners often deployed their experience-based knowledge intuitively, whereas national leaders drew consciously on the capabilities they had developed in previous roles and purposefully adapted them to achieve their current strategic objectives.

Experience-based knowledge and skills as a source of credibility and influence in frontline social work practice

One of the notable features of the data, from both the individual interviews with practising social workers and the small group interviews that included their colleagues from other professions, was how much store both these colleagues and the social workers themselves placed on the knowledge and skills that they had gained from what were, in several cases, decades of experience in frontline social work practice.

The research data included several examples in which either one of the practising social workers themselves, or one of their colleagues, expressed a high level of confidence in their judgements, which they attributed to expertise that they had gained from experience, and associated this with an ability to exert influence over processes of decision-making within the multi-disciplinary teams of which they were members. A notable feature of some of these accounts was the way that these judgements appeared to be readily accepted by both the social worker and their colleagues, without any apparent sense of a need or expectation that they should provide either evidence or a supporting rationale.

A plausible explanation of this lack of curiosity was provided by the discovery that these examples were in keeping with the account of the operation of experientially-based intuitive judgement provided in the Final Report of the Munro Inquiry into Child Protection (Munro, 2011(b), pts. 6.23–6.26, pp.89–90). Drawing on sources such as Thiele (2006) and Hammond (2007), Munro suggests that intuition is a faculty of the human brain whose value tends to be denigrated in comparison to the exercise of conscious logic, but which has been shown by neuropsychological research to provide a complementary and valuable source of capability. She explains that intuitive processing generally takes place largely at an unconscious level and operates by identifying patterns in the primary empirical data that is received via the senses. This process takes place at high speed and largely independently of language but has what is often the useful effect of ‘integrating a wide range of data to produce a judgement in a relatively effortless way’ (Munro, 2011, pt. 6.25, p.90). Munro describes, further, how intuitive processing tends to carry with it a sense of confidence and conviction, or ‘feelings of certitude’ (Payne and Bettman, 2007, cited in Munro, 2011, pt. 6.30, p.91) but adds the cautionary note that, although these judgements are often highly accurate, they can also be subject to error due to factors such as confirmation bias. Because of this she advises cultivating the ability to bring these intuitive judgments to the level of consciousness, by paying, ‘explicit attention to eliciting the evidence that the unconscious was noting and interpreting’ (Munro, 2011, pt. 6.25, p.90).

Evidence from the research data

The data presented below, from interviews involving Kay (senior social worker in a multi-professional community mental health team), Paula (senior social worker in a general hospital multi-professional team) and Jack (senior social worker in a specialist hospital multi-professional team) shows how experienced practitioners within the

research cohort demonstrated the ability described by Munro of using intuitive expertise to make rapid and confident judgements that enabled them to exert leadership influence within the decision-making of their teams, without either offering or being asked for any supporting justification.

Kay

In the small group interview with an adult community mental health team, Melissa (community psychiatric nurse) commended Kay's (senior social worker) comprehensive knowledge of care resources. Melissa expressed a categorical belief that such knowledge could only have been derived through extensive practice experience. She referred to the extensiveness of Kay's, 'knowledge of care packages, and care homes and what's available, countywide, if not nationally.' She stated her conviction that, 'You can't get that in a book or a directory – that's years of building up the knowledge.'

Melissa cited a second feature that also accorded with Munro's characterisation of intuitive processing. This was the rapidity with which Kay was able to use her expertise to select a resource that was apposite to the needs of each individual service user. She commented that, 'it would take me days to do what Kay could do in an hour.'

Paula

In the small group interview with Paula (senior social worker in a general hospital multi-disciplinary team) and her two senior nurse colleagues, Julie and Sarah, Sarah expressed a similar appreciation of Paula's comprehensive working knowledge of care resources, 'with Paula's experience she ... knows the places out there.'

Like Melissa, she went on to remark on the speed and apparent accuracy with which Paula was able to identify a suitable resource. She gave a recent example of what she

characterised as one of ‘the more complicated cases’. This was a young man who had had a major stroke, from which he had recovered physically, so that he was mobile, but which had left him with brain damage that had impaired his cognitive ability and affected his personality. This meant that he was both prone to, and able to execute, impulsive and risky behaviour. She explained that she and other members of the team who had worked with this man on his rehabilitation programme, including a clinical psychologist and occupational therapist, had struggled over an extended period to work out how it might be possible to find a resource that could keep him safe, without restricting him in ways that would severely compromise his mental health. As soon as they had involved Paula, however, she had made her own rapid assessment and immediately targeted a potential placement provider, ‘We’ve explored every avenue ... and you [Paula] just said this place is going to be right for him – and that’s where he went!’

As this line of discussion proceeded, it became evident that the extent of her colleagues’ confidence in Paula’s judgement was such that other members of the multi-disciplinary team were prepared to set aside their own more cautious assessments and defer to hers, without requiring her to provide a supporting rationale, because, in keeping with Munro’s observation that intuitive, experience-based judgments were often highly accurate, their experience was that Paula’s judgments could generally be relied on. Sarah explained that:

we get a bit safety cautious ... you know, this person’s a worry ... [but] Paula feels that the person’s okay going home with a package of care ... There’s a number of times when we’ve said, “Paula recommended that, that’s OK, that’s good enough then” ... we all agree and feel comfortable because we know that ... her judgement is spot on, normally.

Perhaps reflecting some awareness of the limitations of intuitive judgements that Munro refers to, Sarah added the caveat, ‘We’ll go for “normally” – not jinx it completely!’

Jack

Jack (senior social worker in a specialist hospital multi-professional team) described how he had successfully advocated for a current inpatient, an older man who lived alone, to be supported to return home, via a programme of rehabilitation, rather than to move into residential accommodation, as had been proposed by medical and nursing colleagues. He acknowledged that there were significant risk factors, most notably that since his latest admission the man had developed a pattern of falling backwards, which made it particularly difficult to protect him from suffering serious injury. Despite having no specific solution to offer for this problem, Jack expressed confidence in his own judgement that the man should be supported to return home. He added that he had managed to convince his physiotherapist colleague, who was the lead decision-maker, that this was the preferred course of action. When asked to explain the basis of his conviction that this was the appropriate course of action, Jack’s response was to acknowledge that he was unable to provide a clear rationale. Instead he referred to the source of his sense of conviction in terms of an ‘instinct’, but one that was worthy of respect, because it was founded in experience, ‘It’s instinct. I don’t know, I’m not a physio... But I think he could go to a rehab bed and [we could] get him home... It’s instinct built of experience, knowledge and expertise.’

Experience-based knowledge and skills as a source of confidence and credibility in exercising managerial leadership

The research data showed that qualified social worker participants in the research who were in managerial and national leadership positions shared with practitioners the characteristic of placing a high valuation on learning from experience. The presentations of the data below illustrate how they, like the practitioners and their colleagues, considered that there were elements of their skills and knowledge that could only have been acquired experientially. These examples also show, however, that such participants were more self-consciously aware of the specific capabilities that they had developed, through their experience in previous roles, and the contribution that this made to their ability to exercise leadership. Mary, as a first line manager, showed a basic awareness that her experience as a practitioner enhanced her authority as a manager; Suzanne and Ruth, as organisational and national leaders, showed a much more sophisticated level of critical reflectiveness. Their data showed that they had identified that what their experience had equipped them with were generic, and therefore transferable, skills, which enabled them to analyse and interpret situations, and to purposively deploy specific techniques of influence, in pursuit of whatever leadership objectives they might be pursuing.

Mary

Mary (Youth Offending Service team manager) argued that her first-hand experience as a practitioner within this service enhanced both her own confidence and the authority that she carried as the manager of a Youth Offending Services team. In the following extract she described how her experience as a practitioner had not only equipped her with a detailed knowledge of the technical aspects of the role but also with an appreciation of the emotional labour involved. She explained that she

considered this to be a material factor in her ability to secure respect and, consequently, to exercise leadership:

staff, certainly in this organisation, prefer managers who have been practitioners. There are a couple who haven't and there's certainly some bad feeling, that "you have never done this so how could you understand?" I know that management theory says you can transfer those management skills wherever – so that I could go and work in a cake factory and that would be fine because I can transfer these skills. But I believe personally that having been at the coal face and done everything that they've done gives me a better understanding of the work that they do ... youth justice is very specialised work. The fact that I have been a practitioner and held a caseload and worked with young people and had all the frustrations means I completely understand how they feel.

Ruth

Referring to the specific negotiation skills that she had used to overcome the resistance of staff in her to programme of organisational change (described in the following chapter), Ruth (chief executive of a specialist health care organisation in the voluntary sector) credited her success to what she had been able to learn from her experience as a social work practitioner, 'I think years of social work do teach you to manage dissent and conflict in a reasonably transparent and hopefully creative way.'

Based on her own experience, she went on to express a strong sense of belief in the leadership potential of the social work profession generally, 'I think social work has huge potential ... for leadership roles, both within social work but also outside social work – massively so.'

She went on, however, to express her frustration that the majority of social workers failed to recognise or exploit this potential by responding to their own frustrations by limiting the scope of their leadership to the arena of direct practice, rather than exercising systematic leadership to overcome the source of these frustrations:

The *problem* with social workers is that they mostly don't move it beyond the kind of family/individual level to the kind of organisational perspective ... [they] ... find it easier to *blame* the system, than to say, "How do I *engage* with the system, to improve it?"

Suzanne

The data from the interview with Suzanne (local authority Director of Children's Services) showed that she credited her ability to recognise and adaptively deploy the expertise she had acquired from experience as a feature that distinguished her as an effective leader even among her chief officer peers.

She gave an example of how this capability had enabled her to feel confident to manage a crucial meeting with head teachers from across her large and diverse metropolitan borough, which took place soon after she had taken up her current post, despite various factors that placed her at an apparent disadvantage. These included the fact that she had replaced a popular predecessor, who, unlike her, was a teacher by profession, and that the purpose of the meeting was to gain the head teachers' cooperation with proposed changes to which many of them had already expressed opposition.

She explained that in preparing for this meeting she had identified parallels with an experience that she had faced much earlier in her managerial career. In this instance she had had to defend a budget-driven decision to cut a respite care service to a large group of parents of children with multiple disabilities, who had heavily relied on it. Reflecting on this had made her aware that having already been able to deal with this

emotionally-charged and volatile situation at a time when she was relatively inexperienced, she was, at this later one, well equipped to withstand what was likely to be the more restrained hostility of a group of professionals:

when you've ... as a manager, not even a senior manager, had to stand in front of a group of angry parents of disabled children who are not getting the resource that they want because you're having to ration care ... that prepares you more than anything for dealing with a crowd of educated, articulate head teachers.

She contrasted herself with peer senior managers who lacked this degree of self-awareness, describing how she had witnessed, 'a lot of very capable, skilled people actually go to pieces in front of head teachers, where they wouldn't in front of a group of parents.'

She went on to explain that her confidence in facing the head teachers was not only based on her awareness that she had successfully dealt with other confrontational group encounters in the past, but also on her ability to mobilise a specific skill that she had acquired through her experience in a succession of senior management posts. This was the ability to accurately gauge and to respond effectively to the power relationships that were unique to each setting, 'to understand the politics'. Specifically invoking the terminology of intuition, she expressed her conviction that this was a facility that could only be learned through observation and practice, 'You can't learn it from books – that's for sure... It can't be taught... Watch and learn... People always say to me it is intuition.'

Consistent with Munro's exposition (Munro, 2011(b)), she explained that to be able to use this skill of nuanced political sensitivity as a source of tactical agility she had had to learn how to become explicitly aware of what she had registered at this subliminal level. In describing the way in which she did this she evoked both Rittel and Webber's

(1973) paradigm of ‘wicked problems’ and Heifetz et al.’s (2009) characterisation of the tactical agility of adaptive leaders, as referenced in the Literature Review. She expressed her consciousness of the uniqueness of each leadership challenge, because of its embeddedness in its local context, and conveyed her sense of the extent of her own adaptability by invoking the metaphor of a chameleon that changes its colouring to blend into its surrounding context:

I’m a chameleon ... I will become the person I need to become in order to do the job that needs to be done ... because I understand that the way you put the skills together and indeed the solutions you find to intractable problems cannot be transposed from one place to another.

RELISHING WICKED PROBLEMS AS ADAPTIVE OPPORTUNITIES

In line with Suzanne’s comments, this section of the chapter presents data that shows how participants were not only prepared to accommodate themselves to ‘wicked problems’ and ‘adaptive challenges’ when they arose, but also actively relished the challenge presented by problems for which there was no evident source of solution.

The data presented within this theme tended to support Ruth’s argument that the skills that effective social workers developed through practice experience were potentially transferable to situations of organisational leadership but that this potential often remained unrecognised and therefore largely unrealised. This is shown by the data below from the interviews with Paula (senior social worker in a multi-disciplinary general hospital team) and Sheila (acting CEO of a social work membership organisation), in which they each described being invited and actively relishing the opportunity to take on the challenge of applying their skills to situations that others

had already identified as representing intractable problems. The similarities between the nature of these challenges suggests that Sheila, as an established manager and Paula, as an experienced practitioner, were invited to take on, and were able to respond to successfully, suggest that both Paula herself and the managers to whom she referred implicitly recognised that she had the potential to exercise leadership, beyond the realm of direct practice.

Paula

Paula (senior social worker in a general hospital multi-professional team) described how she had been asked by managers to go in, as a trouble-shooting practice leader, to hospital departments that were facing recalcitrant problems. She gave an example of how she had been asked to support the team in one hospital to respond to the adaptive challenge of meeting a requirement to reduce service users' length of stay, within the context of a 'wicked problem' of a chronically under-resourced local health and care system, 'I came back here [to the hospital where she was currently working] in 2003 when the delayed discharges⁵ were starting. I was asked to help because ... it was going to be an absolute nightmare.'

She described how, after she had guided the team through this process, she was then asked to go and deal with another entrenched situation in a different hospital, 'Then I went back over to [different hospital] to cover MAU [Medical Assessment Unit] because it was in a muddle at the time.'

authorities to ⁵ Community Care (Delayed Discharges etc.) Act 2003 CHAPTER 5 An Act to make provision requiring social services make payments in cases where the discharge of patients is delayed for reasons relating to the provision of community care services or services for carers.

She concluded by commenting that she actively welcomed invitations to take on tasks of this kind, 'I've always enjoyed those challenges that managers at the time have given to me.'

Sheila

Sheila (acting CEO of a social work membership organisation) spoke in similar terms of how, at an earlier stage in her career, she had been invited to apply for a new role of manager of a large university social work department. She explained that the post had been created specifically to deal with a situation that could reasonably be construed as both a 'wicked problem' and an 'adaptive challenge'. The 'wicked problem' was that senior academic staff had been unable to resolve long-standing problems of internal conflict within the department and between staff in the department and the university's academic hierarchy. The focus of the latter conflict was that social work staff had persistently refused to upgrade their own qualifications to conform with the university's standards for all academic staff, because of an entrenched ideological position that social work education should focus on developing practical rather than academic skills. The situation had now become acute because of the 'adaptive challenge' represented by the need for the department to implement the new honours degree-level social work qualification. As in the previous examples, Sheila concluded her exposition of the extent of the challenge she had taken on with an expression of the relish that she had experienced in taking on this responsibility:

it was a dysfunctional team ... So, I was asked to go in and sort out the team, which was challenging – all sorts of interesting things and a very turbulent time with new degrees coming in and all sorts of things going on in the university. I loved it!

Again, the data from interviews with John (senior practitioner for care leavers and looked after children and young people) and Suzanne (local authority Director of Children's Services) showed that they credited themselves with similar characteristics of resourcefulness and strategic agility that led them to relish situations of challenge but applied these on a radically different scale. John's description of his response to such challenging situations and of his confidence in doing so indicated that, as suggested by Ruth, he had the conceptual ability to analyse and interpret new and complex situations and the tactical skills to respond to them but exercised these at an intuitive rather than a more conscious level.

John

John explained that, as a social worker of some years standing, he had developed a sense of self-confidence in the role but was glad to be challenged to remain alert and agile, by the unpredictable novelty of the problems with which he was confronted in working with young people, and the way that this impelled him to keep on developing his practice, through personal reflection and in dialogue with others:

without sounding too arrogant ... generally, I feel quite confident in what I'm doing. It's always challenging ... with young people. That's what's so exciting. I've never got bored of it because sometimes you're still stuck for words and you think, "Phew, I don't know how to deal with this situation!" and you must step back and take a breath and discuss with managers, discuss with colleagues – but reflect a lot yourself. It's a bit like in life generally: when you stop reflecting you start to stagnate.

Suzanne

In similar vein, Suzanne described her enthusiasm for the demanding range of imperatives that she had been required to contend with in her present post:

it's a busy [metropolitan] borough, diverse population ... a very high political profile ... the three boroughs of [names] have a lower referral rate, combined. ... So high volume. I'm used to dealing with really tricky issues on a daily basis ... it's about managing people in a hugely difficult context, given the unprecedented levels of pressure and cost reduction on local government ... this job's been about taking huge quantities of resources out, while at the same time promoting and sustaining high-quality services.

Despite this apparently daunting account of her role, Suzanne described how, as an experienced senior manager, in her fourth position as a chief officer, she remained calm and confident in her own ability to deal with what she specifically referred to as the 'wicked issues' that routinely confronted her, 'nothing fazes me. I'm used to dealing with crises, difficulties, lots of wicked issues.'

Rather than being in any way concerned by this, her summative statement about her job was, like John's, that it was precisely the demanding nature of the job that gave it the appeal that it held for her, 'As Director of Children's Services in [borough], I'm told that I've probably got one of the more difficult jobs in the country ... it's great!'

ADAPTIVE LEADERSHIP: COMBINING THE PERSPECTIVES FROM THE BALCONY AND THE FLOOR

The final theme that informed the identification of the leadership feature of 'being strategic' was the way in which the data showed that participants in each of the research cohorts demonstrated 'adaptive leadership' (Heifetz and Laurie, 1997; Heifetz and Linsky, 2002; Heifetz et al., 2009), in the form of moving readily between the perspectives of holistic overview and responsiveness at the level of emerging practical detail.

Again, however, there was evidence of a clear progression between participants at different levels in the extent to which these were integrated within a coherent leadership strategy and the scope of the leadership that was exercised.

Practice leadership – holistic responses to ‘wicked problems’

Kay

Kay (senior social worker in a community mental health team) described a practice through which she exercised leadership at the level of direct practice by deploying the feature of ‘adaptive leadership’ that Heifetz and his collaborators refer to as adopting the perspective of the ‘balcony’ or, in other words, of holistic overview. The data showed that her purpose in doing so was, in terms of Rittel and Webber’s (1973) problem typology, to draw her professional colleagues away from an interpretation of service users’ situations as instances of ‘tame’ problems towards framing them as ‘wicked’, with the effect of expanding the scope of responses that could be mobilised.

She contrasted her own approach with that of the health professional colleagues in her own team, and, more specifically, doctors. Applying Rittel and Webber’s (1973) typology and Heifetz et al.’s (2009) ‘adaptive challenges’ (see also: Heifetz and Laurie, 1997; Heifetz and Linsky, 2002), it became evident that she was describing the difference between a medical approach of construing the presenting problems of mental health service users as ‘tame’ problems and applying ‘technical’ solutions, with her own approach, as a social worker, of responding to them as ‘wicked problems’ that could be more beneficially treated by developing individualised, ‘adaptive’ responses.

As Kay described it, doctors construed service users’ presenting problems as symptoms of specific mental illnesses. From this perspective, they interpreted their own role in responding to the ‘tame’ problem as one of diagnosing and treating a

disease, and the ‘technical’ one of using established diagnostic tools and procedures to identify the illness and prescribe the relevant, preformulated treatment protocol. She characterised her own approach, in contrast, as being based on developing a holistic and systemic understanding of the service users’ problems, by building a picture of the wider context of their lives, including their living conditions and relationships. In the extract below, she was interested not only to gain insights into the detail of systemic interactions that might be generating or exacerbating service users’ problems but also to understand how they themselves experienced these and what might be their own priorities for change:

We’re [social workers] not going to see just the person, which is what the doctor sees; I’m trying to look at their whole situation... We see what they’re working within, where they’re fitting in, where the pressures are, what they’re trying to achieve within it, whether they’re trying to get out of it... Whether it’s the system or the family set-up or whatever their support network is... Looking at what are the pressure points, what needs to work better. How the systems work, and, if you’re going to alter this, something else is going to change, and how’s that going to be? ... So, you don’t see the diagnosis or the mental illness – you see whatever else is going on.

This extract shows how Kay provided practice leadership to her team, by providing an alternative interpretation of service users’ situations as ‘wicked’ problems. From this perspective, the nature of the task became one of building an understanding of the unique dynamics of their situation and one of working with the service user to build an individualised response that could provide the basis of a productive response to the ‘adaptive challenge’ of improving their mental well-being and enabling them to achieve the goals that were important to them as an individual. She described how, by providing an alternative formulation of this kind, she was able to extend the scope of

support that the team offered beyond the elements of a conventional medical toolkit, it's not always medicine that's needed or hospitalisation. It's where they're living that's needed to change – that will make a tremendous impact on their mental health.'

Within the data, Kay also described how she would meet regularly with the service users she was supporting to keep up to date with developments in their situation so that she could adjust her own interventions and provide practice leadership to enable other members of the team who were involved with them to do so as well.

First line managerial leadership: exercising power of discretion

Colin and Mary

The following extracts from the interviews with members of the Youth Offending Service show how two team managers interpreted the context of their work from a holistic perspective and drew from this an imperative to exercise leadership by taking the initiative to use discretion in the way in which they used their managerial authority.

Colin explained that, on joining the service, he had initially struggled to reconcile his sense of duty as a social worker to provide care and support with the coercive elements of the responsibilities of his role as an officer of the criminal justice system:

Initially, when I came into youth justice, having a background in social work and all that, it felt a bit incongruent, the punitive side; alongside the caring side ... Coming to terms with the need for both of those ... that feels a bit alien.

He added, however, that he had learned from experience that, from a holistic perspective, using these powers to provide young people with the structure that was missing from their lives constituted an act of care:

when you start looking at the lack of parameters that some of the young people have – the poor parenting or other issues that are there. Once the parameters are there that young

person functions well. Often, they haven't been going to education but then when you put those around them, they attend, and they do well. They get qualifications and they succeed.

Mary developed this line of argument, explaining that obtaining orders from the court sometimes provided a means of engaging some of the neediest young people, who had up till then been let down by a succession of other agencies:

they've slipped through not one net but ten nets ... they've slipped through education; they've slipped past health. ... By the time they get to us they're in crisis, real crisis – it's multiple factors of need and risk that we're looking at.

She argued that, in the case of some of the young people they were dealing with, the only alternative to using orders from the courts was to allow a predictably destructive sequence of events to continue:

a young person who is prolifically offending is a safeguarding issue ... getting conviction after conviction and going into custody is a safeguarding issue for these young people because we are setting them up as the criminals of the future... So, even though you have this power through a court order, it's only about ... keeping these young people safe and achieving the best possible outcomes ... and ... public protection.

Mary explained, however, that, within this frame of reference, she regarded herself as being entitled, even ethically obliged, as a manager to exercise a degree of interpretive discretion in exercising her authority to allow or prevent members of her team using the coercive powers that these orders provided. She described, for example, how she would not authorise the practice of returning young people to court for breaching a specific provision of their orders if they were making good progress overall:

So, provided ... they're not about to go out and slit somebody's throat... [if] they're not attending their education provision but everything else they're doing [is fine] and this is the first time they've ever done that, in all the years we've been working with them, then that is a successful outcome. We must build on that. We can't just say, "Okay, we're going to breach you". Because this young person has already moved – they're coming with you and that would be to lose it. So that to me would be a misuse of power – because it's not using the system to get the best possible outcome for that young person

Managerial leadership: taking ownership of delegated leadership responsibility

End-of-life leads

Data from the group interview with the local authority assistant directors who comprised the membership of a regional end-of-life leads group showed that they operated from both a perspective of holistic overview and an attention to detail, both in developing their understanding of the leadership responsibility they had taken on and how it could be delivered.

The data showed that they had received the publication of a government-endorsed strategic framework for the development of social care services for people approaching the end of their lives (National End of Life Care Programme, 2010) as a welcome 'adaptive challenge'. The quote below, from Vivienne, one of the members of the group, illustrated how they had interpreted this as both a license to engage more comprehensively with this area of activity and a call to action:

The End of Life Social Care Framework document came out and that put much more emphasis on the role of social care in end of life. It was the big document that started to make you think you could actually start to do something about end of life in social care.

That put on a lot of weight on social care services to say, “Look, these are the objectives, have a look at what you’re doing currently - and what can you do?”

Secondly, as Vivienne’s further comment showed, they showed awareness of the potential value of this document, as a strategic tool that could be used to engage an important collaborator that had hitherto proved resistant, ‘Health had to take notice then.’

As the second sentence of the longer extract illustrates, however, the data showed that members of the group had taken ownership of the area of organisational leadership that had been delegated to them by making their own holistic appraisal of the needs of the situation and the potential resources available to respond to them.

Another member of the group, Marion, described, for example, how she had established that the needs of people dying from cancer were already comparatively well met by established protocols and services provided by health care organisations within the NHS and voluntary sector health care organisations. Referring to one of these protocols as the ‘end of life pathway’, she observed that, ‘if someone is at the end of life and they’re on that pathway and they’ve got Macmillan nurses going in ... that’s great, there’s someone looking after that family.’

Considering the situation of people with terminal conditions more generally, however, she drew on the detailed knowledge that she had gained from her experience as a practising social worker, which had shown her that service users who were dying from diseases other than cancer, and those close to them, were markedly less likely to get the support they needed:

if I’m a social worker working with someone who’s got really advanced Alzheimer’s disease or COPD [Chronic Obstructive Pulmonary Disease] or long-term conditions, if

they need intensive support for themselves from ... professionals for themselves or their family they won't get any – unless they've [also] got cancer.

As the discussion proceeded, members of the group described how, based on their holistic appraisal of end of life care needs, they were coming to develop a more comprehensive conceptualisation of the adaptive challenge that they were setting out to address. This went beyond making existing forms of service accessible to more people, to developing a new, more inclusive concept of what end-of-life social care should comprise. Mike, who chaired the group, expressed this on their behalf:

it's not always about a traditional social care response. There's a bit of a thing in social care that if someone doesn't need someone to wash and dress them we're not involved, but that's not right ... in dementia care, you've got people who need more hand-holding support.

The data showed how, as well as articulating the longer term strategic goal of developing more a comprehensive and responsive model of provision, members of the group had already begun to take practical steps incrementally towards this. Mike described, for example, how he had used his detailed knowledge of his own organisation's systems and processes to build on what was in place so that they could reach out to people who had not hitherto been able to access their service:

We believe that for people who are already known to us that need end of life care the system will take care of them...What we ain't got right are the people that we find out about too late. So, we want to have the discussion with them about what's important to them in the latter part of their lives, what we need to put in place, agree a plan with them. Then what we're going to do is we're going to log that electronically... People's needs can change very rapidly in end of life care. We want to guarantee if that if they contact [us] ... the little red flag will show up. We're trying to guarantee they'll have the same

social worker talk to them again within 48 hours and, also, we'll try to get services in place within 48 hours.

Organisational leadership: exercising autonomous judgment

The data within this final sub-theme showed how participants from the national leader cohort exercised a more comprehensive level of leadership by using their own ability to analyse the situations of their own organisations holistically and to use this to frame their own strategic objectives. It also showed, however, that they delivered these objectives by combining their clear sense of overall strategic purpose with a close attention and responsiveness to the detail of day to day operational developments.

Data from the interviews with both Catherine (NHS non-executive director, former director of social services and local authority chief executive) and Ian (consultancy director and former deputy director of a local authority children's social care department) showed how they had each approached their different programmes of organisational change by identifying a clear sense of overall strategic purpose, but proceeding incrementally and adaptively, on the basis of continually reviewing progress from the perspective of the frontline of service delivery.

Catherine

Like Heifetz and his collaborators (Heifetz and Laurie, 1997; Heifetz and Linsky, 2002; Heifetz et al., 2009) Catherine explained that she had always been sceptical about the value of 'top down' managerially designed programmes of wholesale structural change 'the idea that if you put all this on paper and put people in these slots you'd get a better result.'

She added that this scepticism was supported by the evidence of her own experience, ‘we’ve spent a lot of time in the time I’ve been in Social Services reorganising and not getting a very different outcome.’

She explained, however, that she had taken up her post as Director of Social Services at a time that coincided with major legislative changes in relation to both children’s and adult’s services’: ‘the 1989 Children Act, the Community Care changes, which were very big and very demanding.’

She added that she and her senior colleagues had anticipated that central government would follow up this legislation by providing prescriptive guidance to local authorities about how they should restructure their services to take account of the new requirements that were placed on them, but that over time it became apparent that this was not going to happen, ‘people kept saying, “There must be a structural change coming... We’ll just wait six months and we’ll hear what the structure is.” But we never did.’

Catherine explained that, in the context of an organisation that both she and external inspectors regarded as being fundamentally sound, she decided to pursue an incremental approach to delivering the aims of the new legislation. She recognised, however, that the organisation needed to have a sense of strategic purpose that would provide what she referred to as a ‘direction of travel’ that would enable practitioners and managers to translate these aspirations into practical operational objectives. Accordingly, she described how she had worked with her senior colleagues to identify a unifying theme within the elements of the legislation, which would provide an organising principle for the services, and a touchstone against which she and her senior colleagues could assess whether they were achieving the intention of the legislators. They distilled their analysis of the legislation into an overarching objective of

providing responsive services, with the test of this being whether they were ‘the kind of services we’d want to get for ourselves’.

In keeping with Heifetz and colleagues’ depiction of adaptive leadership (Heifetz and Laurie, 1997; Heifetz and Linsky, 2002; Heifetz et al., 2009), Catherine described how she had promoted the development of an organisational culture in which the attention of both managers and practitioners was directed consistently towards the detail of what was going on at the frontline of service delivery. Under the unifying slogan of ‘an obsession with the frontline’, this had focused the attention of managers at all levels of the organisation on supporting frontline staff to build on and adapt existing good practice to continually improve the quality and consistency of the services they provided, ‘So, the investment was in frontline practice and how you support it; and not on the kind of things that managers often think ... “This might work”’.

Catherine described how this approach had played an important part in enabling her to lead the organisation, ‘from good to great’.

Ian

In contrast to Catherine, Ian (consultancy director and former deputy director of a local authority children’s social care department), characterised the children’s social care department that he had inherited as one in which practice was ‘unsafe and unsound’ and thus in need of major reform. Like Catherine, however, he rejected the idea of setting out a detailed blueprint for organisational change because he judged that this approach was unrealistic, in view of the complexity and continually evolving dynamics of a large organisation and its external environment. He argued that, ‘it doesn’t matter how many strategic documents you write as an organisation, they don’t quite get delivered the way you wrote them.’

Instead of this, Ian, like Catherine, advocated an approach to organisational leadership that was based on setting out a clear sense of overall purpose and strategic direction but working adaptively within this, through staying closely attuned to the changing environment of ‘the floor’. Using the metaphor of a delicate flower, he argued that:

you shouldn’t write strategy documents – you want to write some sort of general direction of travel document and then what you’re like is a flower. On a sunny day, it comes out and it blooms; if it’s a cold day it’ll hide... You’ve got a complex environment every day; you need to try and understand where that environment is, and you need to adjust where you are in that environment to get where you want to.

He described how he and his senior colleagues had in practice kept in close touch with the experiences of staff involved in frontline service delivery. He explained how this had enabled them to make nuanced adaptations to the process of implementing change, while at the same time maintaining a clear sense of the overall purpose of the programme of change that they had instigated, ‘We looked carefully at what was happening on a day-to-day, week-to-week basis and adjusted what we were doing and always reminded ourselves of what were our final outcomes that we were working for.’

CONCLUSION

This chapter has presented the themes from the data that showed how the characteristic leadership feature of ‘being strategic’ consisted in responding to situations of novelty, complexity, and challenge by analysing them holistically and drawing on experience-based expertise to intervene proactively and with tactical agility. It has identified similarities in the way in which this characteristic was shown between participants in

different research cohorts but also substantial differences, which had important implications from the point of view of leadership.

In relation to the theme of career biography, the presentation of the data has shown that both social workers and national leaders were resourceful and proactive in responding to both opportunities and setbacks but that national leaders were more progressive in the way in which they did this. It showed that the effect of this is that they incrementally developed the skills that equipped them to take on positions of organisational and national leadership when these were presented.

In relation to the theme of deploying experience-based knowledge and skills, the presentation of the data has contrasted social work practitioners' intuitive deployment of specific subject expertise with national leaders' explicit recognition of experience as a source of generic skills of analysis and influencing that can be transferred and recombined for different purposes. It has also suggested, however, that social workers' relish for and ability to respond to situations of novelty and challenge provided an indication that they possessed similar conceptual and tactical skills, but that because they remained tacit, the scope and integration of their leadership was more limited.

In relation to the theme of adaptive leadership it has shown that to differing extents participants were conceptually agile in moving between the levels of holistic overview and attention to specific detail.

This chapter has prepared the ground for the following one, which shows how the characteristic of being 'ethically inspired', presented in the previous chapter, can be combined with that of 'being strategic', described in this one, in order to influence the adoption of practices of leading collaboratively.

CHAPTER 6: COLLABORATING

INTRODUCTION

This chapter shows how participants, across the different levels included in the different research cohorts deployed collaboration as a prominent element of their leadership, for both the ethical and strategic reasons that were identified in previous findings chapters.

As described in the ‘Ethically Inspired’ chapter, a consistent feature across social worker participants in this study, and across the range of roles encompassed, was that they were informed by a clear sense of ethical purpose. In the context of collaboration, this took the form of an explicit principle that, ultimately, whatever power, skills and resources they had at their disposal should be directed towards improving the quality of service users’ experience and enabling them to become more powerful in their own right. This principle was articulated in the following extract from the interview with Sheila (acting CEO of a professional organisation for social workers):

In being a professional you are in a position of having knowledge and power and skills... you can either say, “I will take that information away and I will make the decisions about it” or “I will work with you and equip you with some of that knowledge and skill so that ... you can become more empowered”.

The two further guiding principles that informed participants’ advocacy and adoption of a collaborative approach to leadership were more strategically focused. The first of these embodied a theory of change, to the effect that involving the intended ‘targets’ of leadership intervention as active and if possible willing participants in the process of change itself improved the likelihood that the achievements of the change would be sustained. This is expressed in the following extract from the data provided by Dan

(experienced social worker, Youth Offending Service team), ‘people are more likely to make changes in their behaviour if you do things *with* them instead of *to* them and *for* them.’

The second of these strategic principles was that engaging not only the ‘targets’ of change themselves but also other people with complementary skills, resources and responsibilities as willing and active co-producers of the change was likely to increase the potency of the change process. This possibility of synergy was expressed in the following extract from the interview with Frances (professor of social work), ‘It [power] isn’t a constant sum: I definitely have this sense that by having this shared power we have more of it.’

The data presented in this chapter shows that both their ethical and strategic orientations influenced participants, as a general rule, to use ‘soft’, but sophisticated, interpersonal skills of engagement and persuasion rather than formal authority to elicit collaboration. However, it shows also that such authority could be used as a constructive engagement strategy.

Having identified these common features of the way in which participants across the cohorts conceptualised and practised collaboration as a feature of the leadership, it is nevertheless important to say that the focus of the collaborative effort and of the range of collaborators involved was much more limited in the case of social worker participants than in the other cohorts. What the data in this chapter shows is that the collaborative principles and practices espoused by social work practitioners represented what might be considered to be a foundational level of the characteristic of leading through collaboration rather than a full instantiation of it.

The discussion in this chapter draws on French and Raven's (1959; Raven, 1965) typology of sources of power; accordingly, this is summarised below.

French and Raven's typology of power

French and Raven (1959) identify six potential sources of power in professional or business practice. Participants in this research referred implicitly to five of these, the exception being 'reward' power.

'Legitimate' power is the authority that an individual possesses because they hold a specific role or position.

'Reward' power is based in the ability to provide benefits to those who fulfil their requirements or expectations.

'Coercive' power is the power to enforce expectations or requirements through having the ability to apply punitive sanctions.

'Expert' power involves possessing specialist knowledge and skills.

'Information' power is achieved by having privileged access to information that is of potential value to others (Raven, 1965).

'Referent' power involves deploying personal skills and qualities, rather than drawing on externally conferred power from other sources.

The two themes that contributed to the identification of this feature were: 'collaboration in frontline social work' and 'collaboration in roles of formal leadership'.

COLLABORATION IN FRONTLINE SOCIAL WORK

As evidenced in the 'Ethically Inspired' chapter, the data presented within this theme shows that their guiding values of compassion and social justice imbued participants

who were practising social workers with a strong sense of obligation to use their skills and ‘legitimate’ power as effectively as possible for the benefit of service users, and to avoid using their power opportunistically for their own benefit. From a strategic perspective, the examples show that, in line with one of the principles of ‘adaptive leadership’ (Heifetz and Laurie, 1997; Heifetz and Linsky, 2002; Heifetz et al., 2009), they believed that by engaging service users as active collaborators they could help them to acquire capabilities that would make the outcomes of their interventions more sustainable. The first sub-theme below shows how these considerations led social work practitioner participants in the research to exercise practice leadership by using their own various sources of ‘expert’, ‘referent’ and ‘legitimate’ power to engage service users in activities that enabled them to become, as far as possible, the authors, or at least the co-producers, of their own solutions.

The second sub-theme shows how participants used these sources of influence to engage and sustain working relationships with other professionals, in which the latter acted as active contributors to the delivery of this approach.

Leadership relationships with service users

Paula

Paula described how one of the sources of fulfilment that she had found in her current role was that it did not require her to exercise any powers of control or coercion but simply, as referenced in the ‘Ethically Inspired’ chapter, to give practical expression to her ‘passion’ to ‘get the end of life right’ for patients and their families. This was evident in her description of one of the core elements, as a process in which she placed the ‘information’ and ‘expert’ power of the multi-professional team at the disposal of hospital patients and their families and used her own knowledge and skills to enable

them to make informed decisions about the patient's future care. She explained that this enabled patients and family members to exercise a genuine power of decision-making, because she and her colleagues would do their best to use their resources to try to implement whatever decisions patients and families chose to make, irrespective of whether this was in line with their own recommendations:

I love ... being able to say ... "We would really recommend you go with A, that is our recommendation. Because if you go with B, C, or D these are the risks... But if you want to go with B, C, or D that's your choice... Even though we've marked out the risks for you we'll support you."

Data from the small group interview with Paula and her senior nurse colleagues, Julie and Sarah, illustrated that she was, at times, able to do this within a single session. Sarah explained that many of the patients that the team worked with were older people, who were becoming increasingly frail. She described how their hospital admission often marked a point of crisis, and how during their stay it would often become evident that they would in future be heavily dependent on others to assist them with the activities of daily living. This meant that they and their families were faced with having to make decisions about how these needs were to be met.

As described by these participants, these situations represented 'wicked' rather than 'tame' problems (Rittel and Webber, 1973) because they involved taking account of a constellation of multiple, interacting considerations that were unique to each patient and family, including, for example, their specific physical and psychosocial needs, financial circumstances, personal values and preferences and the availability of resources. Patients and their families needed to weigh up considerations such as the feasibility and subjective acceptability of arrangements that involved family members

providing care for the service user, the respective cost and quality of life implications of paid domiciliary or residential care, and possible permutations between these.

A further consideration for Paula and her colleagues was that there was pressure to expedite the process of decision-making so that the patient could be discharged, and their place made available for someone who was in more acute need of the scarce resource of hospital care.

Sarah described how, when patients, family members and staff were evidently feeling overwhelmed by this pressure, she or another colleague would refer the patient and family for some 'Paula time'.

On being questioned about what happened in 'Paula time', Paula's immediate response was that she used 'traditional social work skills – talk, listen'. More specifically, she described how she would elicit the patient's and family members' cooperation in a shared enterprise, by explaining the purpose of the session and encouraging them to talk to her about themselves, their individual situations, and their priorities. She would then present the collective information and advice of the multi-professional team in a manner that was free of professional jargon and therefore readily accessible to them. She described how, in preparation for this, she would use her skills of empirical inquiry (discussed in more detail in the next chapter) to ensure that she herself had an accurate understanding of any unfamiliar technical terms. She gave a recent example:

Paula: This morning a physio said, "Oh she's got flickers in her shoulder". It's like, "What do you mean, 'flickers' in her shoulder?" "Well, you know, her muscles are starting to move but her arm's not functional." "Right, so she's going to get some movement back?" "Yes." "Right, got it now!" – so I can explain it.

Having provided the patient and family members with this information, Paula described how she would then draw on her own specialist knowledge about funding and care resources to talk them through the available care options, shaping these around what they had told her about themselves and their circumstances. She explained that she would give them as much time as they needed to question her and reflect on the implications of what they had heard, until they had achieved a viable outcome. Her colleague Sarah testified to the effectiveness of ‘Paula time’. She explained that, at the end of a session of this kind, Paula would finally emerge from the discussion with an agreed course of action that the team could support, ‘she’ll come out – “Yes – we’ve got a plan!” – and it’s sorted.’

Youth Offending Service team

In contrast to the previous example, the exercise of legal powers and responsibilities featured heavily in the interviews with members of the Youth Offending Service team who participated in this research. As shown in the extracts and examples cited in each of the previous findings chapters, members of this team expressed a high level of concern to use their considerable ‘legitimate’ and ‘coercive’ powers ethically. Mary (team manager) summed up this sense of responsibility:

I think we have to be very self-aware and use our reflective skills quite a lot in this job because we do have quite a lot of power in terms of these young people that we work with on orders from the criminal court, which is the highest power in the land basically... it’s that balance about how do you use that power, and do you use it fairly?

The response to this question that emerged from the data was that members of the team did so by using a combination of ‘legitimate’, ‘referent’ and ‘expert’ power to engage young people in a collaborative relationship that would enable them to take

responsibility for their offending behaviour and equip them to become constructive members of their communities.

As referenced in the 'Ethically Inspired' chapter, Mary argued that one of the primary ethical responsibilities of Youth Offending Service social workers was to avoid using the power vested in them in the form of Supervision Orders from the criminal courts (i.e. 'legitimate' power) opportunistically, to save them from having to make further efforts to engage young people who were resistant, by taking them back to court for breach of their orders. As referenced in the 'Being Strategic' chapter, she saw this as a betrayal of the opportunity to use the structure provided by these orders to protect both the young people and the community, to engage them with the sustained support and guidance that other organisations had failed to deliver. Accordingly, she urged that social workers should make every effort to use their professional skills, or 'expert' power, and personal resourcefulness, or 'referent' power, to find the means to engage young people whose previous experiences of authority had often made them highly resistant, 'It's really down to individuals' engagement skills and how good they are and how honed they are.'

Mary provided an example of how she herself had used her own strategic agility to provide a social work student with an approach that enabled her to engage a young person who had consistently resisted the more conventional methods she had used up till then:

I remember ... a student ... coming to me and saying, "I've tried everything". She thought she'd tried every way to get him engaged, to get a response. She said in her supervision, "I don't know what to do. I've tried this, and I've tried that – I've tried being a bit easy and I've asked him what his interests are. I just get a grunt – nothing!" She was tearing her hair out.

I said, “Has he expressed any sort of interest?”

“The only things he’s said, the only thing he’s interested in, is bikes.”

I said, “What kind of bikes?”

“Bicycles.”

I said, “Next time he comes in, take him by surprise and don’t let him sit down in the chair. Say, “Oh don’t sit down, we’re going out!” Take him to the Transport Museum – they’ve got a lot of very strange bicycles from way back at the Transport Museum.”

She said, “All right, I’ll try that.”

She came back, and she said, “I couldn’t shut him up!”

Other Youth Offending Service team participants in the research demonstrated that the team’s espousal of an approach based on engaging young people as active and willing collaborators was influenced by strategic considerations as well as ethical ones. Dan (experienced social work practitioner) explained that the team’s favoured theoretical model was ‘restorative practice’. His description showed how this model incorporated one of the principles of adaptive leadership (Heifetz and Laurie, 1997; Heifetz and Linsky, 2002; Heifetz et al., 2009), which was that involving those who needed to sustain the relevant change, as co-producers of it, meant that they were equipped with the relevant knowledge and skills, and motivation to do so, because they identified with its purpose.

As previously referenced, Dan explained that the core tenet of restorative practice was that, ‘people are more likely to make changes in their behaviour if you do things *with* them instead of *to* them and *for* them.’

Colin (team manager) described how the focus of this model was to provide leadership for young people by guiding and encouraging them to take responsibility for their offending, through taking practical steps to relieve or remediate some of the harm they had caused and to rehabilitate themselves within the community:

we try to show them the path, if you like – how they can lead their lives. So, we have things like victim letters where the young person will write ‘Sorry’ to them in various ways; or they’ll do a piece of work – maybe some direct reparations and some community work with them... all this kind of ownership by the young person.

Colin described how the model of restorative practice involved eliciting the active collaboration, not only of the young people themselves but also of other members of the community, including, where possible, victims of crime themselves. He described how, as well as benefitting the young person, this was considered ethical from the point of view of the victim themselves because involving them in this way could be ‘restorative’ for them as well. This was because it gave them the opportunity to move from being passive victims to becoming active agents in the project of rehabilitating the young person and thus reducing the chances that they, or other people, would be further victimised by them. He described an example of how members of the team had successfully guided and supported one such young person and the victim of his offence to embark on their own relationship of collaboration that strengthened the prospect of sustaining the positive outcomes of the Youth Offending Service team’s intervention in the longer term:

One example was ... a young person who went to work for someone he’s committed a crime against, did some reparation for that person, enjoyed it, worked so well that the person, who owned the business, gave that young person a job at the end of it.

John

Data from both the small group interview with John (senior practitioner for Looked After Children and care leavers) and his colleagues Hannah (assistant manager of a supported housing scheme for young people) and Molly (bail support officer), and his individual interview, made it evident that his commitment to working collaboratively with young people was strongly influenced by his ethical principles. Like members of the Youth Offending Service team, he described an approach that involved using his 'expert' and 'referent' power to engage young people in a collaborative relationship, within which he provided leadership for them by supporting and guiding them to develop the life-skills and behaviours that they would need as they moved into independence. The nature of this collaboration was that he set out to provide young people with the experience of an authentic relationship with a reliable adult, using what he learned about them within it to make congruent interventions that enabled them to gain insight, and to influence them towards constructive behaviours. The model of change that informed this approach was that it enabled young people to develop the self-awareness, capabilities and attitudes they would need to lead productive lives as adults, through a naturalistic process of continuing informal interaction with an adult who was able to convey that they were genuinely valued.

Reflecting this approach, John described a more gradual and organic approach to developing a relationship with young people, in which his own consistency of support and behaviour provided a framework, within which he provided unobtrusive guidance, that was responsive to, and congruent with, their needs as unique individuals:

I'm building a relationship, we're providing consistent support, looking after them, holding them as best we can... It's about the consistency a parent didn't have... The most important thing is about that relationship and building the relationships around

them and supporting that young person to do things at their pace, giving them a little nudge.

Data from both John and his colleagues showed that, rather than the more self-consciously strategic approach to engaging young people described by Mary, John's was based on consistently demonstrating the authenticity of his concern for them. He himself described, for example, how he was prepared to use the flexibility afforded by working part-time to 'go the extra mile' by adjusting his schedule to come in to support the young people he worked with, at times when this was important to them, even when such situations occurred at short notice. His colleague, Molly, commented on the positive impact that this could have, for example, in cases where a young person who had been arrested, found that John was prepared, even at minimal notice, to attend a bail hearing, 'it can mean a lot to the young person... Their experience is, "Even though this wasn't planned, and I was only held yesterday, and charged yesterday, John was still able to come"'.

John described how he was equally prepared to demonstrate reliability in his relationships with young people by providing consistent behavioural boundaries. He explained that this was an important corrective to the negative behaviours that they had developed in response to the inconsistency they had experienced in earlier relationships:

I think the big thing about the young people we work with is being consistent and sticking to your guns. Sometimes you have to be quite tough, I think, working with young people who misbehave, if you like to put it that way, and push boundaries all the time and have got a lot of the things they want through pushing boundaries and being abusive.

John described how, by working in this way he was able, over time, to develop a 'reflective relationship' with young people, in which, for example, having carefully judged his moment, he could deliver quite challenging forms of guidance. He described how, in the aftermath of an episode of disruptive behaviour, or 'blow up' on the part of a young person, he would allow just enough time for their emotional turmoil to begin to subside, but would intervene while the incident was still fresh, to engage them in a process of reflection, 'I can see why you behaved like that but it's not an excuse. It may be a reason, but it's not an excuse and you need to think about how that impacts on you and on others, your future.'

Like Colin, John cited evidence of the effectiveness of his approach. He described how he had recently ended his involvement with several young people with whom he had worked over a period of years and had reflected with them on the challenges they had presented, by way of drawing their attention to the extent of the progress they had made: "Look how far you've moved."

Providing 'system leadership' through engaging and sustaining the collaboration of other professionals

As referenced in the introduction to this chapter, the research data showed how participants recognised the nature of the problems or challenges they were dealing with meant that they needed to engage collaboratively with colleagues whose responsibilities and skills complemented their own. The data presented below illustrates how participants set out to engage these colleagues as active and willing collaborators rather than as simply compliant followers.

John

The research data showed that as well as developing and sustaining collaborative relationships with young people by providing a consistent source of support and containment, John fulfilled a similar role in respect of the professional colleagues who acted as his collaborators in this work. It showed that, in doing so, he was fulfilling a leadership function that Catherine (NHS non-executive director, former director of social services and local authority chief executive) argued that social workers should be prepared to provide. This was to take on the role of acting as ‘leader of the system’, by supporting other professionals to manage the anxiety that resulted from working in situations where children and young people were at risk:

I think the idea to be the leader of the system is really important in Children’s Services because, as I keep saying, an important part of social work is managing anxiety – and other people are particularly anxious around child protection, and the system needs to have a responsibility for that, I think. You can’t just say everyone’s equally responsible. I don’t believe in that.

Catherine explained that she had been told repeatedly by social workers that they did not feel able to exercise influence of this kind, because their profession was regarded as being of lower status by members of others. Catherine’s response to this, within the research data, was to argue that social workers should be prepared to exercise what amounted, in terms of French and Raven’s typology, to ‘referent’ power, i.e. the ability to exercise personal influence beyond the authority of position, ‘I think that sense of leadership through influence rather than hierarchy or position is one that we need to strengthen, really.’

John’s colleagues Hannah (assistant manager of a supported housing scheme for young people) and Molly (bail support officer) described how he fulfilled this function for

them. The data showed that he did this by deploying the same features of authentic concern and reliability that characterised his working relationships with young people.

Hannah gave an example of how John had supported her recently, in working with a young woman who repeatedly returned to a relationship of mutual domestic violence, in which she was at equally high risk of inflicting, or incurring, serious injury or death. Hannah explained that John would reliably take responsibility for providing clear direction, whenever this was needed:

What John brings to our working relationship is that there is very clear guidance if questions are asked. Even if you don't know the answer you will very clearly say, "I don't know the answer, but I will come back to you". You always come back.

Molly, similarly, described how John would provide containment and a welcome source of calm guidance to her in situations where she was under pressure to provide a court with a specific plan of action, within a short space of time:

When there has been a crisis John has been very good at saying let's figure this out together. I can be a bit scatty so it's good to have someone there to say, "Yes I can approve this funding. You can do this day; I can do that one, let's get on and do it."

Data from the individual interview with John showed how he himself readily acknowledged the responsibility proposed by Catherine. In the extract below he described how he extended this function of 'system leadership' beyond young people and supportive professional peers, such as Molly and Hannah, to include people in positions of authority over him. In the extract below he described how he used the same technique of modelling calmness and consistency of purpose, tactically, to avert the risk that more senior colleagues might disrupt the approach he was taking. He explained that his own approach was one of enabling young people to learn from

experience, while he and his colleagues could still be available to guide and support them through this, even when this meant that they were sometimes placing themselves in situations of risk. He explained that senior managers who were more removed from practice could sometimes react to hearing about such incidents in isolation, without having an appreciation of the overall strategy within which they were being managed. He described how this could sometimes trigger risk averse responses in which they intervened precipitately by exercising their managerial authority, or ‘legitimate’ power, to exert coercive control. He explained the principles of his ‘system leadership’ as follows:

I think working with other professionals a lot really does come back to you. There is a clear leadership role in it: leading by example. Both as a role model to young people but also to other professionals ... I think it’s really important not to over react... [people] can ... get really scared and panicky and ... suddenly a service manager goes, “Whoa!”

Alice

While it was, perhaps, relatively unsurprising that an experienced social worker, like John, who had attained the status of a senior practitioner, was able to provide such ‘system leadership’ it was notable that the research data also included an account in which Alice (recently qualified social worker in a Children in Need and Child Protection team) described how she had already had some success in doing so during her final placement as a student social worker.

Alice and her colleague Andrea (senior practitioner in the same team) described how, consistent with Catherine’s observations, their own experience was that other professionals were often resistant to attempts to engage them with child protection work, because they were afraid of possible repercussions if they were to be open with parents in expressing their concerns. Alice explained, however, that despite the

inhibitions described by Catherine, she had been able to mobilise ‘referent power’ or, in Catherine’s terms, to exercise ‘leadership through influence rather than hierarchy or position’ by using a strategic technique that was identified within the data from both practitioner and formal leader interviews, which was designated as ‘Socratic challenging’.

‘Socratic’ challenges provided a subtle and unobtrusive form of leadership influence that involved inducing those towards whom they were directed to adopt an alternative perspective on the situation in question. This influenced them, metaphorically speaking, to see for themselves the importance or potential value of the activity or purpose to which the research participant was seeking to elicit their collaboration, and to make a voluntary choice to engage with it.

Alice described how she had prepared the ground for the delivery of her ‘Socratic challenge’ firstly by applying the technique to herself. She explained that she had made a conscious effort to overcome her anxiety about the disparity in experience and status between her own ‘student stamp’ and those she was seeking to influence, who were ‘professionals who’ve got years of experience’, by maintaining a clear strategic focus on the purpose in hand, which was the welfare of the child.

Her ‘Socratic challenge’ to these other professionals took the form of inviting them to do the same, by setting aside their own concerns, and trying to view the situation from the perspective of the child:

I’ve tried to ... bring the focus back to the child... if you remove all the complexities of the relationship with the mum and the history of the family and their involvement with professionals, sometimes if you just strip it back it can be quite eye opening for a group of professionals just to say let’s look at the real, simple facts of the case and what the ... concerns were and what did that mean for the child? Let’s all put ourselves in their

point of view and what would you have liked if you were that child ... just trying to get that perspective back again? I think it's very easy to lose that with power, hierarchies... with all the different jargons and timescales and whirr...! Sometimes I think it's quite helpful to say, "What's our focus here? It's this child."

She went on to describe how, having guided the other professionals into this perspective, she was then able to negotiate with them to be more open in expressing their concerns directly to the child's parent:

So, does that mean having a different kind of conversation with Mum would benefit that child? Yes. So that's what we're going to do.

Paula

Two further examples of such challenges in the context of frontline practice came from the small group and individual interviews with Paula (senior social worker in a general hospital), who referred to this approach as one of 'playing devil's advocate'.

In the first example, she described how she had used this form of challenging to overcome resistance from hospital colleagues who were reluctant to complete the cumbersome forms needed to demonstrate that a service user's needs were at a level where they were entitled to have their care fully funded by the NHS, rather than having to apply for means-tested support under the provisions of social care legislation. Using a similar approach to the one adopted by Alice, she explained that she had suggested to colleagues that they put themselves in the position of the service user and their family:

I would say, "If for any of our parents there was a question about whether they should get Continuing Health Care funding or not, we would fight for that. Why should they [the service user in question] pay a service charge when their needs are so high?"

She related how this had sparked an immediate positive response, ‘The discharge coordinator said to me. “Yes, I get your point. I did it for my father in law.”’

In the second example, she described how she would sometimes engage her health profession colleagues in a classic process of Socratic reasoning, to influence them to revise poorly grounded judgements that service users lacked the mental capacity to make valid decisions about their care or treatment. She described how she would take them through a succession of questions that had the effect of prompting them to take account of their responsibility, under the Mental Capacity Act 2005, to assess capacity in relation to each specific decision, rather than globally:

“He hasn’t got capacity.” It’s like, “Whoa, it’s got to be decision specific”. “What are we talking about?” “He can decide whether he wants cornflakes or Rice Crispies, can he?” “Oh yes.” “So, he can make a decision about what he eats. So, what can’t he make a decision about?”

COLLABORATION IN ROLES OF FORMAL LEADERSHIP

The data from the interviews with research participants in positions of organisational and national leadership showed that they, like the social work practitioners, favoured collaboration for both ethical and strategic reasons.

It showed that they expressed a similar ethical motivation to that of practitioners, i.e. a concern not to abuse their power by using it coercively but to use it, instead, to enable other people to increase their own capability and potency.

From a strategic perspective, the data showed that, firstly, because participants in positions of formal leadership interpreted the situations they described as ‘adaptive challenges’ (Heifetz and Laurie, 1997; Heifetz and Linsky, 2002; Heifetz et al., 2009)

they set out to engage their subordinate colleagues as active co-participants in the process of achieving their objectives. The data showed that by doing this they aimed to enlist both their knowledge and skills, and their commitment to these objectives.

The data showed, also, that these participants extended the principle of collaboration beyond their own organisations, by engaging with other individuals and seeking to develop cross organisational alliances, to increase the potency of their own leadership efforts.

Despite these similarities of overall intention, however, the nature of the collaborations described by these participants was of a markedly different quality and scale to that of the social work practitioners. The data within this theme showed how these participants developed extensive and multi-layered networks of collaboration and used a range of carefully considered strategies and techniques to engage and influence these collaborators.

The data presented within this theme shows how formal leaders, like the social work practitioners, were both ethical and strategic, not only in intent but also in the approaches that they adopted to securing collaboration.

Ethically-inspired projects of collaboration

The data presented below shows how Lesley (local authority director of adult social care and chair of a professional body for social workers) and Sheila (acting CEO of a social work membership organisation) described one of aims of their leadership as being to harness the resources of their organisations as a means of enabling the people they were there to serve to develop their own capabilities. This is followed by data in which Ian (consultancy director and former deputy director of a local authority children's social care department) described how one of his reasons for both

advocating and adopting a collaborative approach was a rigorous concern to avoid abusing using 'legitimate' power, or positional authority, by using it coercively.

Lesley

Lesley (local authority director of adult social care and chair of a professional body for social workers) provided the most straightforward and comprehensive example of a project of exercising leadership to develop collaboration in pursuit of a transparently ethical purpose. She described how the main focus of her own and her organisation's strategy was to use their own power and skills to engage members of the local community in collaborative activities that would enable them to develop capabilities and resources that would equip them to become more able and autonomous:

we're ... developing a co-operative way of working with our communities that's built on the journey that we've undertaken with personalisation over the last six years to put service users in control of their lives; and now we're building that up through working with communities and citizens in a different way, in a more equal way.

Sheila

Sheila (acting CEO of a social work membership organisation) expressed a parallel concern in relation to her own organisation's 'service users'. She described how she was setting about fulfilling the commitment that she advocated on the part of social workers, as quoted at the beginning of this chapter, 'I will work with you and equip you with some of that knowledge and skill so that ... you can become more empowered.'

She explained that, reflecting the concern with professional education that had been a consistent theme throughout her career, she was now seeking to develop a model of

membership engagement between social workers and her own organisation that would serve them as a vehicle for developing their capacity for professional leadership:

Absolutely from the frontline job people [i.e. social workers] are leaders. But it's one of the things we're having a discussion about... that part of our job is to recognise and to develop those leadership skills... How do we set up a structure of membership, of engagement with our organisation ... a more positive engagement? ... How would you set it up so that part of what we are offering is helping to develop leadership skills ... this professional leadership that we're helping any member to develop ... through their engagement with the organisation?

Ian

Like Lesley, Ian described how his commitment to leading through collaboration was strongly influenced by ethical principles. He drew explicit parallels between the approach he advocated on the part of social work practitioners working with children and families and the one that he had followed in working towards organisational reform. In each case he referred to an imperative to operate within what was, in effect, his own 'ethically inspired' sense of strategic purpose and direction, by acting consistently, 'on the basis of you've got very sound values and a vision of where you're trying to get them.'

In the case of social work practitioners, he expressed his conviction that they should use their 'expert power', i.e. their professional skills, to elicit collaboration, by building a working relationship with families that was based on openness and negotiation:

If you go into a family and there's difficulty there, the first thing you have to do is make some sort of relationship with that family ... you have to hear very carefully where they are. ... It's about [being] ... very clear you're there because of risk ... [and] saying, "We've got a number of complex issues here, some 'must

dos’, so let’s work together, me and you, to find ways in which we can achieve these things.”

He contrasted this with the approach that he had observed, and of which he strongly disapproved, in which social workers used ‘legitimate’ and ‘coercive’ power derived from the statutory authority of their position to try to enforce compliance by issuing threats, ‘Not what unfortunately so many social workers do at the moment, which is to say, “Unless you do this in a couple of weeks’ time there’s consequences”’

Ian went on to describe how he and the assistant director who had been his close associate in leading his programme of organisational reform had set out to model and instil a similar model of leadership throughout the managerial hierarchy of their organisation, ‘We wouldn’t have tolerated any leader in the organisation who’s said something like, “You’ve got to do this because I’ve said so” or “You’ve got to do this because of the rules”.’

He described how, rather than exerting the ‘legitimate’ power attendant on their positions as senior managers they had set out, firstly, to establish a relationship of trust, by openly communicating the purpose of the intended change:

It’s ... about engaging people in conversation about why we need to do *that* rather than the other thing. It’s about soft issues and building relationships, building trust, being honest... It was interesting that when I left a number of people said, “What I liked about you was that you were honest with us”.

Strategically informed projects of collaboration

Data from the interviews with Ian (director of a consultancy organisation and former local authority deputy director), Ruth (chief executive of a large voluntary sector

organisation providing healthcare) and Suzanne (local authority director of children's services) show how participants who were organisational leaders were influenced by a conceptualisation of the situations they faced as instances of 'wicked problems' (Rittel and Webber, 1973) or 'adaptive challenges' (Heifetz and Laurie, 1997; Heifetz and Linsky, 2002; Heifetz et al, 2009) when devising strategies that were designed to gain the commitment of their staff to the objectives that they had identified. More specifically, they show how these participants set out to engage these colleagues as 'responsible' rather than 'compliant' followers (Grint and Holt, 2011); in other words, as active co-participants in their programmes of change. This is followed by a response that shows, reciprocally, how a practitioner recognised and appreciated the way in which this approach had been enacted by her own line manager.

Ian

As well as his powerful ethical concerns, Ian showed that he was also influenced to adopt a collaborative approach to leadership by more strategic considerations. He described how he and his close managerial colleague had recognised two key elements. Firstly, that the social workers employed within their organisation, who were the main 'targets' of change, represented an important source of information in developing a more specific understanding of the nature of the changes that their reforms needed to achieve. Secondly, that involving them as active participants throughout the process of developing and implementing the intended change represented an effective means of obviating the risk that they might become a source of resistance:

... the first thing we did was listen to what social workers were saying ... about the problems they were finding ... I think that's why they supported us ... that was our starting point as was [Assistant Director]'s views and my views about what we should be doing...

Ruth

Ruth described how, as an acting and later a substantive chief executive, she had inherited an organisation that was highly successful in delivering its specialist professional health care services but was in a perilous position as a business. She explained that she had worked out that the only way to regain financial viability was to develop a more cost-effective model for delivering the organisation's outpatient services. The main aim was to use staff time more effectively through reducing the number of home visits. This would be achieved by encouraging service users who were physically able to do so to travel to the organisation's clinical base to attend outpatient appointments.

She explained, however, that when she first proposed this she encountered strong opposition from each of the organisation's two primary clinical staff groups. She referred to a 'staggering amount of resistance' from specialist nurses and equally determined 'passive resistance' from doctors. She explained that she chose, not simply to overrule this by exerting the 'legitimate' power of her position as chief executive, but to deal with it in keeping with her belief that, to make the intended changes work, she needed the willing and active collaboration of a united team.

Her rationale for this reflected a conceptualisation of her project of change as, in effect, an 'adaptive challenge'. She described how she was conscious that she needed these staff, not to compliantly follow a detailed project plan, but to use their own local knowledge and understanding of the dynamics of health care services in each part of the organisation's catchment area in order to work out how to operationalise her strategy. This would include devising solutions to the practical problems that would inevitably arise in the course of its implementation. She explained that she was conscious that she had the potential 'legitimate' power, or hierarchical authority, as

well as the ‘referent power’, or personal influence, to simply impose the new service model, but did not believe that this was likely to be effective, ‘you *can* make things happen just by force of will [but] I don’t think they tend to have stickability and sustainability when you do that.’

She contrasted herself with her predecessor as chief executive who, as the individual who had conceived the original vision for the organisation and the innovative form of service that it embodied, had led it on a ‘top-down’ basis, as a charismatic figurehead. She argued that the organisation’s now very different circumstances, and the wider context provided by the complex dynamics of contemporary health care, called for a very different, self-effacing, ‘post-heroic’ form of leadership, whose function was to mobilise a dynamic of collaborative leadership:

I really do believe – I can’t remember which American soldier, colonel, or person, or whatever they call their chief soldier, said this,⁶ you can get anything done if you don’t care who takes the credit [and] I think that that issue is particularly important today. We don’t really need visionaries you know; we need people who understand that teams make things happen.

Reflecting this belief, she described how she had been prepared to take the time and effort required to engage in an intricate process of negotiation with each of the main stakeholder groups. As referenced in the ‘Being Strategic’ chapter, she described how, in doing so, she was conscious of using the negotiation skills that she had developed during her years as a social work practitioner. She viewed these skills as the source of

⁶ The saying ‘It is amazing what you can accomplish if you do not care who gets the credit’ has been attributed to President Harry S. Truman, US president: 1945-1953. *The Independent*, 20 January 2009.

what was, in effect, the ‘expert power’ that she was able to deploy as an organisation leader.

She described how she had begun by talking to each of the main stakeholder groups separately. This allowed her to develop a nuanced understanding of what was fuelling the differing forms of professional anxiety that she had detected as underlying the resistance she had encountered: understanding why people were feeling these things but from different perspectives. Why the doctors were making the clinical nurse specialists feel irritated, because their particular version of this made them feel that they were being demeaned. But equally they [doctors] were feeling that their role wasn’t being respected.

She explained that, having developed this understanding, she had engaged in an extended process of tactical discussions:

You come forward and you take the temperature and then you just move back a little bit and then you present the issue in a slightly different way. There’s a lot of dancing around making something complicated happen and not just thrashing away.

She described how this had eventually resulted in what was only ‘a slightly different version’ of her original proposal that preserved the strategic benefits she had envisaged. She explained, however, that the outcome of her delicate negotiating tactics was to engage the commitment of her staff to the proposal’s purpose so effectively that this version represented a plan that ‘actually everyone believed they had come up with’. This meant that each of the main stakeholders in the implementation of the new strategy now identified themselves as owners of it, rather than reluctant followers. She concluded by reporting that, then we had something more successful on our hands.’

Suzanne

The data from the research interview with Suzanne (local authority director of children's services) demonstrate the strategic use of 'legitimate power', or power of position, as a method of engaging subordinate members of staff as 'owners' of the organisation's objectives and, consequently, as active and willing collaborators in their implementation. She explained that she had, throughout her career, used delegation as a means of ensuring that her own time and skills could be used to best effect, but also to encourage people, from 'career grade staff' (i.e. senior social work practitioners) to all levels of management, to identify with and see themselves as sharing responsibility for the performance of the organisation. In her own words, this process of delegation enables them to begin to understand that 'it's not "them" and "us", it's about being accountable'.

Kay

A reciprocal perspective was provided by Kay (senior social worker in a community mental health team), providing evidence of how strategic delegation could be effective in this way. Kay gave an appreciative description of how Miriam, her team manager, had used delegation as a method of tackling a problem of low morale engendered by organisational changes. She described how 'we were having a lot of changes, [there were] threats of redundancy, morale was very low', and that Miriam had responded to this by delegating responsibility for leading the team meetings to members of the team themselves, in rotation. Kay described how she and her colleagues had interpreted this as a supportive intervention, designed to strengthen their engagement in the running of the team by enhancing their contribution to it, 'Miriam made an effort to bring us all in to own the meetings really, to contribute.'

Kay explained that this apparently small act of delegation had had an appreciable effect in terms of improving morale for herself and her colleagues. It enabled members of the team to feel that they had a more active stake in working out how the organisational changes that were being introduced would be implemented within their own area of activity.

Eliciting collaboration from a position of mentoring

The data below, from the interviews with both Frances (professor of social work) k) and Catherine (NHS non-executive director, former director of social services and local authority chief executive), show how they used more elaborated versions of the strategic technique of ‘Socratic challenging’, as described earlier, to exercise influence in the context of two different types of mentoring role. As in the case of the social work practitioners who used this technique, this can be seen as an exercise of ‘expert’ and ‘referent’ power, rather than formal authority. In the first of these examples, Frances described how she used this technique for the specific purpose of encouraging a collaborative approach to organisational leadership. This involved enabling a Director of Children’s Services to recognise for himself the benefits to be gained from adopting a more collaborative approach to the implementation of his strategy of organisational change. In the second example, Catherine described how she used another version of this approach within her role as a non-executive director to unobtrusively influence executive directors to consider courses of action that she regarded as likely to be more rewarding.

Frances

Frances (professor of social work and former secretary of a national academic network) explained that her own appreciation of the value of a collaborative approach

to the process of leading organisational change had come from witnessing the example of how business leader John Harvey-Jones had engaged with staff in the NHS. She described how he had been a role model for a process of engaging frontline staff as active co-participants in service reform. He achieved this by going out and meeting the staff in their own territory, listening attentively to their accounts of their experience, explaining the management rationale for change, and incorporating their suggestions in his recommendations. He had then also persuaded senior managers to come and listen to what their staff had to say. She described how this intervention had served to improve working relationships and achieve valuable service improvements:

Suddenly it began to unlock all these old battles, where people had said: “They're lazy, they don't do what they're told, we give them instructions and they don't follow it...”. Instead of which they actually managed to create some changes in wards and the management of services. They got rid of some the things that were just wasting people's time, and resources that... got thrown away... because they then understood what was needed.

Frances went on to describe how, in her role as consultant to a Director of Children's Services, she had persuaded him to undertake a similar exercise. She explained that the context of this intervention was that the director had set out with positive intentions to improve both services and working conditions by restructuring his department. In practice, however, the early effects had been to undermine staff morale and destabilise service delivery. She described how she had encouraged him to meet with a group of frontline managers, so that he could understand first-hand that staff were suffering from the disruption and insecurity associated with the changes, while having little understanding of the benefits that the changes were intended to deliver. She explained that by meeting directly with these managers, ‘he was able to hear some of the

discussions about “We don't quite know why we're doing this, why this change is being introduced”. ‘

Frances explained that, once he had heard the managers’ concerns, the director had been able to begin to allay them. He had also been able to engage the team’s support by setting out the vision that had informed the restructure in a way that clarified for the managers how it was intended to benefit them, their staff, and the users of the services:

The Director was able to say why he thought it was important and what were going to be the gains. He talked about it in idealistic terms – not just about structures and organisation and how it was going to be managed and who was going to do what. He talked about why; and it was all about values and principles and making it a better place to work.

She went on to describe how there had been an immediately positive response from the group of managers. A locum manager had reacted by saying that now that she knew ‘what this place was all about and that kind of vision’ she would be happy to become a direct employee rather than continue to work for an agency. Other managers had suggested that it would be helpful for the director to communicate his vision directly to frontline staff and he expressed his willingness to talk to any team that wished to invite him.

Catherine

Data from the interview with Catherine (NHS non-executive director, former director of social services and local authority chief executive) show how she used Socratic challenging in her mentoring of colleagues, both in her current role as a non-executive

director and in previous ones as a local authority inspector, director of Social Services and chief executive.

In explaining her reasons for adopting this approach in her current role she described a combination of both compassionate and strategic considerations. She explained that, as a non-executive director in the demanding context of a rapidly changing NHS, she was concerned with fulfilling her responsibility to use her own expertise and judgement to identify how the service could be improved. She was also committed, however, to advising and mentoring senior executives in a manner that would be experienced as supportive rather than demoralising. She observed that it was, ‘terribly easy for a non-executive to come in and be critical ‘

and that she was anxious not to add to the stress that they were already facing from other sources, they’ve had so much change to cope with that I’m deeply sympathetic to the pressures on them.’

Rather than presenting herself as a critical outsider, her approach was, therefore, to build an alliance with them – ‘somehow or other being alongside people’ – and to work within this position to offer them an alternative perspective from which to view themselves and their situation. Her objective was to enable them to see for themselves how they might be able to improve their performance, without feeling that they were being judged and criticised.

She explained that the approach that she adopted was based on one that she had developed in her previous roles. She cited a comment from one of her mentees who had experienced this, who had invoked the metaphor of a mirror to describe how, rather than offering direct criticism, Catherine offered her observations in a manner that enabled people to reflect on their practice from a more objective and inclusive

perspective. This enabled recipients of her feedback to develop insights that equipped them to critique their own work, rather than feeling that they were being externally judged and found wanting, ‘I think it was that, “You were able to hold up a mirror to us so that it was a sense of ourselves and it wasn't a criticism”.’

Applying this analogy of ‘holding up a mirror’ in terms of her present role, she explained that she was seeking to support her NHS executive colleagues by gently inviting them to review aspects of their work that she felt could be improved, and prompting them to consider alternative approaches, ‘that mirroring and saying, “Is there another way of doing this, and could we have done it differently?”.’

Enhancing leadership capacity by broadening the base of collaboration

Data from the interviews with two of the participants, both organisational leaders – Ian (consultancy director and former deputy director of a local authority children’s social care department) and Sheila (acting CEO of a social work membership organisation) – show how they each identified the novelty, complexity, and scale of the challenges they faced as a reason for drawing in other people who could supplement the range and quality of their own leadership, by providing additional sources of ‘expert’ power.

Ian

The data from Ian’s interview demonstrate parallels between his interpretations of the nature of the challenges faced by social workers and by organisational managers, in developing apposite responses to unique and complex situations. In each case he described how this awareness had led him to recognise the value of approaching these challenges as collaborative, rather than individual, projects, which he had achieved by

involving other people who could provide complementary knowledge and skills. In relation to social work practice, in the context of child protection, he argued that:

these jobs are so difficult, you're dealing with such complexity, that the idea that one person, one social worker, could understand what's going on in a family, and work with a family, just seemed to us very difficult to do.

He explained that this interpretation had influenced one of the main elements of his programme of reform, which was to move from the traditional social work model of individual caseloads, to a new organisational structure in which a caseload was held in common by members of small teams that included administrators and therapists working alongside social workers.

In his own case, Ian described how he, as an organisational manager, had rapidly come to see that the scale of the challenges he faced was beyond what he could accomplish by himself. He described how he had rapidly assessed that the practice of social workers within the department he had inherited was 'unsafe' and 'very poor' and had, in addition, found that the incumbent management team consisted of people who possessed neither the skills nor the values that were needed to reform it. He described how he had concluded that, 'basically... I needed more support in that management team'. He explained that he had gone about securing this support in two ways: firstly, by negotiating funding to employ two additional senior managers, whose different professional backgrounds and skills complemented his own. Secondly, he had engaged assistance from several leading academics, each with a different area of expertise in relation to social work practice and research, who could provide advice, consultation, and an independent evaluation of the effectiveness of the changes that were being made.

Sheila

Data from the interview with Sheila (acting CEO of a social work membership organisation) describe how, on being quite suddenly precipitated into the role of acting chief executive, she had (like Ian) identified a need to supplement her own leadership capabilities by drawing on support from other people with skills and knowledge that were different to her own. She described how she had proceeded, with a conscious sense of strategic purpose, to 'recruit' an informal team of advisers and mentors. She explained that, during the period of organisational turbulence that had preceded the departure of the previous chief executive, she had had several external contacts whose primary function had been to provide her with support, 'I've had some lifelines'. She added, however, that the changed circumstances of the organisation, and her assessment of the demands of her new role, had influenced her to make a new appraisal of the nature of the support she needed. Accordingly, she described how she was now 'looking for something different' in the form of people who had knowledge and expertise in elements of the role that were beyond her own experience:

identifying people that I can talk to and check things with... people with experience of being a chief executive or taking strong leadership roles... a group that I can have those conversations with ... for my own learning... and... as sounding boards... people who've got knowledge about aspects of our organisation [i.e. those functions she was herself unfamiliar with]... or the sort of decisions we're going to have to be making; that I can call on to test ideas ... what I'm needing is the expertise in leadership and running the company and ... in the politics of the broader area of work that we're involved in.

She described one of the capabilities that she identified in herself that gave her confidence in her ability to respond to the challenges she faced in becoming an

organisational leader in difficult times. This was that she possessed the strategic judgement and skills to identify and secure the specific support she needed:

t's knowing that's what you need and going out and creating it for yourself, nobody else would do it, nobody else creates it. I suppose it's partly about having the self-confidence. Also, about recognising what do I need to be a successful leader and trying to create that.

Increasing capacity by mobilising relationships of strategic collaboration with other organisations

Other participants, who were qualified social workers in positions of organisational leadership, described how the scale and difficulty of the challenges they faced influenced them to identify a need to exercise leadership in the form of negotiating strategic partnerships with other organisations, to enhance the 'resource' power available to respond to such challenges.

Suzanne

Suzanne (local authority director of children's services) described how she, and others in similar posts, found that they were expected to continually extend the scope of what they delivered, without a proportionate increase in resources. She argued that this created an imperative for organisational leaders like herself to become adept in orchestrating cross-sector collaborations:

against increasing demand... we... face decreasing resource ... the change in expectation... the principles of advocacy and entitlement... are now embedded out there. You can't do it on your own – that notion of partnership's important and will be more important. So, the kind of leadership that will be needed... will be leaders who can operate... across different sectors, with credibility.

End-of-life leads

A similar strategic imperative for collaborative leadership was expressed by the local authority assistant directors, who comprised the members of a regional end-of-life leads group. The data from this interview also show how members of the group demonstrated specific aspects of strategic agility in how they were achieving this, both by using informal approaches and making use of formal structures.

As described in the 'Being Strategic' chapter, members of the regional end-of-life leads group expressed a recognition that their holistic vision for a more responsive and inclusive model of care could only be achieved by means of an integrated strategy that brought together the resources of social care, Health, and voluntary sector organisations. As one of the members of the group, Steve (local authority assistant director for Adult Social Care) expressed it 'You can't move this forward just for social care, you've got to have partnerships... with people in Health... and in the third sector.'

The data showed that Steve had already begun to be strategic, at an informal level, by identifying the potential of his existing working relationships with colleagues in other sectors as a source of both the information and insights he needed to familiarise himself with what was, for him, a new area of activity, and to form new working alliances within it:

the advantage that I had was very good working relationships with Health as a lot of my programme management developments have been with people in Health who I know and trust, and in the third sector, that were generous with their time to bring me up to speed pretty quickly. So, I used their skills and knowledge, went out and networked.

As also referenced in the 'Being Strategic' chapter, Vivienne, another member of the group, was contributing to the work of the group by drawing attention to more formal

and structured approaches. She argued that the members of the group should gather their proposals together in the form of collated plans to be presented at a multi-agency strategic planning forum, 'it's putting it in the plans... it's done through your Health and Well-being boards... You need leadership.'

Informal coalitions of influence

In contrast to the formal structures of collaboration envisaged in the last two examples, Helen (professor of social work) described how she engaged in two forms of more informal and intermittent collaborative relationships.

The first of these was not an approach that she had purposefully set out to cultivate, but one which had evolved through the contacts she had built up while working on a national taskforce and inquiry team. Helen explained that she had developed a practice of keeping in touch with like-minded people within the profession who were based in different roles and locations. What she described was, in effect, a process in which she made her own 'expert power' available to them, by enabling them to access the evidence provided by her research, so that they could use it as a source of 'information power' to enhance their own ability to influence change.

I think once you've been on one of these big reviews you meet a load more people and tend to keep in touch with them. So, some of it's about that kind of interpersonal stuff... making alliances within the profession really, because social workers, the good ones, and the good managers, know what's wrong and they really like it when someone turns up and says you're right, it is wrong, and this is why it's wrong.

The second was a series of mutually supportive relationships that she had established informally with fellow senior social work academics from different universities, with whom she shared an ethical and theoretical perspective, which she referred to as 'this

very strong family support orientation'. The data from her interview demonstrate two ways in which Helen and other members of what she referred to as her 'academic network' combined their individual sources of power to produce an enhanced dynamic of collaborative leadership.

Firstly, Helen explained that she and some of her fellow academics had recognised that their respective research interests produced findings that served to reinforce one another 'We all do different kinds of research, which end up being complementary, end up triangulating.'

She explained that they had realised that they could enhance their individual credibility and add weight to their arguments by demonstrating these complementarities. Self-deprecatingly, she observed that 'you just look like a little bit of a nut case really, if it's only you'. She explained that she and some of these colleagues were, accordingly, in the process of co-authoring a book that would communicate the significance of their combined findings more powerfully by bringing them together in a single publication.

In addition to this process of synergistically combining their individual 'expert' power, she described how she and other members of this senior 'academic network' were collaborating to mobilise the potential of their respective sources of 'referent' power, as individuals who had each achieved various positions of eminence. She explained that this meant that, between them, they had an extensive network of connections with influential individuals and organisations and she described their imminent plans to use these relationships to target their collective efforts at groups of people who held power within the legislature and the courts. She referenced two relevant events that she was about to attend within the near future

we're going to meet with some politicians next week for a round table to talk about a range of things, which is something that [eminent academic colleague] has set up through her contacts.

We're going down to Gray's Inn in a couple of weeks to talk to the Judiciary.

CONCLUSION

This chapter has shown how research participants at all levels were influenced by both ethical and strategic considerations to exercise leadership by eliciting collaboration from both those over whom they were in positions of authority and others whom they identified as potentially valuable contributors. It has shown further that, in most cases, the participants chose to elicit collaboration and exercise their leadership influence by using 'soft' skills of engagement and persuasion, rather than resorting to more formal sources of power.

Although these features were common across each of the research cohorts, the data presented in this chapter have also shown a radical difference in the depth, scale and complexity of the collaboration described by frontline social worker participants and those in roles of organisational and national leadership.

On one hand, the social workers evidenced valuable foundational elements of leading through collaboration, in terms of having clear rationales and exercising tactical agility in engaging and sustaining the collaboration of both service users and immediate professional peers. On the other hand, organisational and national leaders described the development of extensive, multi-layered networks of collaboration, in which each relationship was designed to achieve a clearly defined leadership purpose. These relationships were shown to include: engaging subordinate colleagues as active and willing co-workers; informal alliances with colleagues and peers, across organisations;

judiciously selecting mentors and advisers; negotiating formal strategic alliances and partnerships, and building co-operative working relationships with individuals and groups throughout the community of a metropolitan borough.

As the data in this chapter have also shown, participants in positions of organisational and national leadership deployed a range of carefully considered and sophisticatedly executed techniques to engage their intended collaborators and exercise leadership within these relationships. The techniques mentioned included open communication, extended processes of delicate negotiation, cultivating contacts with people of influence, and negotiating proposals within formal strategic planning structures.

This chapter has demonstrated that, paradoxically, one of the techniques used by both social work practitioners and national leaders to elicit collaboration is an approach based on challenging, albeit in the unobtrusive form of ‘Socratic’ challenging. The next chapter goes on to present data that show why, and how, participants deployed techniques based on more overt types of challenge.

CHAPTER 7 WILLING TO CHALLENGE

INTRODUCTION

As referenced in the closing sentence of the previous chapter, this chapter shows how being ‘willing to challenge’, overtly, with a deliberate purpose of disruption, was mentioned as a characteristic feature of their leadership by participants in each of the three research cohorts. This chapter shows that this feature reflects a combination of the characteristics of being ‘ethically inspired’ that were previously presented in the chapter of that name and of being ‘empirically informed’, which was introduced in the earlier chapter ‘Being Strategic’.

Like the characteristic of being ‘empirically informed’ (drawing on experience derived from knowledge and skills), which was presented in the ‘Being Strategic’ chapter, the second element was identified through a line of analysis that was prompted by an assertion made in relation to social workers by Helen (professor of social work). As previously referenced, the context of Helen’s assertion was the argument that it was not sufficient for social workers to be motivated by strong ethical principles, but that it was also important for them to base their practice on sound evidence and rigorous analysis:

It's very important to be compassionate but also to be very rigorous... social workers need to be clever; clever and kind and rigorously sceptical – and all of those things at once! And sadly, not all of them are.

The data presented in this chapter show that participants in each of the cohorts were ‘empirically informed’, not at the level of full academic rigour that Helen intended, but in the more inclusive sense that they engaged in practices such as seeking direct

evidence and testing the adequacy of the information on which actions, decisions, policies, and plans were being based.

This chapter presents data that show how participants in the research were 'willing to challenge' decisions, actions, policies, or organisational systems that they regarded as either unjust or dysfunctional, or, in some cases, both, and how their challenges constituted individual, or more sustained, leadership activities. These data are presented in terms of three component themes: practice leadership through challenging; challenging through the pursuit of an empiricist career, and systemic challenging in organisational leadership.

PRACTICE LEADERSHIP THROUGH CHALLENGING

An ethical obligation to challenge

The data show that social work practitioner participants in the research regarded challenging as a core and distinctive component of their professional identity and related this to their ethical principles and values.

This is shown in the extracts below, from the small group interviews with Kay (senior social worker in a multi-professional community mental health team) and Paula (senior social worker in a general hospital multi-professional team) and their respective colleagues.

Kay

Kay contrasted her own orientation as a social worker with that of her nursing colleagues. Picking up on a reference by her fellow interviewee, Melissa, to the limitations placed on her by her status as a 'Band 5' community psychiatric nurse, Kay interpreted this in terms that amounted to characterising the culture of nursing as tending to favour procedural compliance and hierarchy. She contrasted this with social

work, as a culture in which such concerns are subordinated to those of ethics and individual judgement:

I think... there is a [sense of] hierarchy [in nursing] that doesn't exist in social work... you often hear a Band 5 nurse saying they're a Band 5 nurse; in a way that you would never hear a main grade social worker say, "I'm only a main grade social worker and therefore it's not my job". ... you [nurses] defer to what you're told to do, whereas as a social worker you challenge much more... I think it's going back to that anti-discriminatory practice – all part of the core ethics of social workers that if the system doesn't work for the client you're going to be challenging.

In her individual interview, Kay again emphasised the strength of her sense of obligation to challenge on behalf of service users. The following quotation from the interview shows the emotional force of her investment in this imperative to challenge.

She surprised even herself with the vehemence of her language:

It's working with people, fighting for their rights... I keep coming up with that word, don't I? I don't know that people would view me as a fighter. I don't see myself as a fighter – but I keep saying that word. I don't like a fight, it's something I shy away from – but I keep using the word!

Forensic challenges

A second element of challenging identified in the data from social work practitioner participants was sometimes prompted by the facility for subliminal pattern recognition identified by Munro (2011(b)), which was discussed in the 'Being Strategic' chapter. This facility allows practitioners to become aware of discrepancies between the features of evidence and the courses of action that are being followed in relation to the care of individual service users. The data show how they responded to such discoveries by engaging in processes of analysis to make further observations and, in some cases,

to undertake more sustained processes of empirical investigation. The data reflect how the findings of these activities led social work practitioners to make, as designated in the analysis, ‘forensic challenges’. These consisted, variously, of: drawing attention to evidence that appeared to have been overlooked or disregarded; raising questions about the adequacy of evidence, or the validity of inferences drawn from it, that was being used to inform or justify decisions, actions, policies, or procedures; or using empirical evidence to provide a convincing justification for an alternative course of action.

Paula

The following exchange between Paula (senior social worker in a general hospital multidisciplinary team) and her senior nurse colleague, Sarah, shows a shared understanding that challenging is a central feature of Paula’s practice, and how this combines both ethical and empirical concerns.

Paula: I don't think I sometimes challenge – I always challenge... You can't help it – there's always another question to ask! That's just how it is... Because the more you ask, the clearer that picture actually becomes. ... you never stop; it's an ongoing process.

Sarah: I think that your skill is that you challenge from all angles. You will be looking at the hospital side and you will be looking at the Social Services side of things. You want the best.

Paula: Oh yes, I'll challenge myself as much as I'll challenge anybody else!

Sarah: You'll say, “My manager's never going to agree to funding this. They've never had any kind of care before, you're promising her she can go into a nursing home – it doesn't work like that.” You'll be challenging the doctor, “How on earth is she going to manage at home with her leg in that cast and she can't walk?” You'll challenge from

every angle appropriate to that particular person. Or it may be a family member: “Oh I'm going off on holiday now, leave my mother in hospital” ... It's not done to be a troublemaker; it's done because it's the right thing to do – and there's always that patient in the heart of it. It's either we're delaying something, family are delaying something, the hospital are delaying something – it's always about the person.

Further data from Paula (senior social worker in a general hospital multi-professional team) and her senior nurse colleagues, Julie and Sarah, provided specific examples of ‘forensic challenges’ that Paula had presented.

In the first of these, Sarah recounted how Paula had intervened in an area of decision making that other members of the team considered to be beyond her primary remit. The account that she and Paula went on to provide showed that other members of the team had, however, been responsive to this intervention because Paula had been able to make explicit the empirical evidence on which her intervention was based and had provided a clear rationale for the course of action she advocated.

The extract below describes how Paula identified and then drew the attention of the rest of the team to the possible significance of an anomalous observation. This related to an older woman, who had until recently been proudly independent, but had been admitted to hospital due to a sudden decline in her health and had then had a stroke shortly before she was due to be discharged. Sarah described how Paula had listened to other members of the team relating how they had failed in their attempts to insert a feeding tube and, on the basis of her own observations and analysis, had alerted the team to the possibility that the woman, who could not speak, might be actively resisting their efforts to nourish her. Paula had further stated that, in this case, they had a legal and ethical responsibility to consider this in deciding whether they should make further attempts do so:

Sarah: there's been an issue about her eating and drinking... we were trying to insert nasogastric tubes and it wasn't successful. It was Paula that brought up at the MDT [daily multi-disciplinary team meeting]: at this point in time has she got capacity to refuse to have the treatment? So, it's not just Paula looking at packages of care and placement, there's more to it – so she will question. Although that's not her main role she will remind the team that that's important.

Paula: Because she has the ability to eat and drink – she has that swallow reflex – but she's not eating. So, is she making a decision; because nothing's preventing her? Because most people with nasogastric tubes or pegs you know...

Sarah: Can't physically swallow.

Paula: But she can. So, we have to make sure that either we're doing something in her best interests, or we have to acknowledge that she has capacity.

Another vignette from this group interview showed how Paula had used the detailed empirical knowledge she had gained from her experience of observing the work of other professionals to successfully present a detailed logistical justification that persuaded her team colleagues to agree to a plan of action that they had previously opposed. Her argument was perhaps more convincing because her analysis was not only well-informed, but also realistic in acknowledging the potential difficulties involved, and the uncertainty of its outcome:

He wants to be home, so he's a right to be there. Yes, he's 92, he's got an above-the-knee amputation, so there's complexities. He can't even get into the bathroom to go to the

toilet. He can't transfer from his wheelchair to line it up with the banana boards.⁷ So, in this one room someone will have to come in to help him transfer from his wheelchair using a banana board or from his wheelchair onto a commode. It's difficult but let's try it!

Paula described the response of her colleagues to the arguments she had presented, which demonstrated the effectiveness of her leadership intervention, 'When we start to talk about it you can slowly see the nods in the meeting – so this person goes home tomorrow.'

Jack

A further vignette from the data shows how, reflecting Munro's description of intuitive pattern recognition acquired through experience, Jack had exerted practice leadership by initiating and contributing to a process of investigation that improved the scope and effectiveness of his team's response to a patient's condition. He described how he had noticed the emergence of an anomalous sequence of hospital admissions regarding one of the hospital's long-term service users. He noticed that a woman whose condition had previously been quite stable had uncharacteristically had a succession of admissions within a short period of time. He had become concerned that, by dealing with each admission as a discrete episode and confining attention only to the service user's presenting symptoms of chest infections, the team might be missing an opportunity to detect an underlying cause that could enable them to intervene more productively to stem this pattern of recurrence:

⁷ A piece of equipment that enables someone with reduced mobility to transfer from one object to another by sliding.

She was in the end of last year and she's been in two or three times in fairly quick succession [during the current year]. Usually people come in for IV antibiotics for about a fortnight at a time. On a couple of occasions, they'd decided after 12 days she was fit to go home and she came in fairly quickly again.

Jack described how this observation had prompted him to initiate what amounted to a sustained process of empirical inquiry to try to find out whether there might be an underlying cause for the apparent change in this service user's health, which he had continued to pursue, despite encountering initial resistance from medical colleagues. He described how he had requested that the current admission be extended beyond the time needed to treat the presenting symptoms of the infection, so that a more thorough investigation could be made. He explained that this proposal was initially blocked by the consultants, but that he had persisted, and eventually succeeded, by exercising tactical agility. He approached a more junior doctor, who had a history of more continuity of contact with the service user and was therefore better placed to recognise the validity of Jack's observation, as well as to negotiate the extension with his senior colleagues.

Jack and his colleagues in the small group interview described how his intervention had been vindicated by the fact that, during the extended stay, the medical team themselves discovered that the service user had a hitherto-undiagnosed underlying heart condition, which they were able to treat. His colleagues also described how Jack himself had taken the initiative to pursue his concerns by taking the process of investigation in an additional direction, in the form of seeking to establish whether there was anything in the service user's home environment that might be contributing to the exacerbation of her health problems. Jack described how he had gained her

agreement to undertake a home visit and made a discovery, the significance of which is explained in the following extract:

Jack: I found that this lady's bedroom was damp and needed re-doing.

Rose (senior occupational therapist): It had mould...

Poppy (senior physiotherapist): If you've got someone who's got a chest complaint and they're breathing in fungal spores 24/7 they will be sicker...

Jack described the positive outcome of his interventions:

So... the relatives arranged for the mould to be treated and [the bedroom] redecorated... suffice to say that she hasn't been in since.

Dan

The data from the group interview with members of a Youth Offending Service team include a description of how recognition of a recurring pattern of evidence by an experienced social worker prompted a process of systematic empirical investigation that resulted in a challenge at the level of national policy. Dan (experienced social worker in a Youth Offending Service team) explained that, in a previous role as the team's Parenting Officer, he had become aware of a pattern of both Parenting and Anti-Social Behaviour Orders being issued predominantly in respect of mothers.

As in the vignettes from the data relating to Paula and Jack, Dan's account shows how he was influenced by a combination of both ethical and empirical concerns. He described that he had observed that the effect of such orders was often to further victimise women who were already struggling with multiple sources of adversity, including domestic abuse from the children for whose behaviour they were being held responsible. Dan explained that, having identified this pattern, he felt obliged to draw

attention to it, even though he was aware that the practices he was attempting to contest were advocated by central government policy:

... we were getting quite a lot of people pushing... Antisocial Behaviour Orders or Parenting Orders... A lot of the policies and guidelines are driven by a government [but] I remember signing up to BASW [British Association of Social Workers] that you'll challenge all forms of discrimination.

Dan described how he had brought his observations and related concerns to the attention of Colin (Youth Offending Service team manager), who was his line manager during this period, and that together they had instigated a process of systematic data collection. This yielded evidence that Colin was then able to feed through the organisation's hierarchy to policy makers, to support a case for saying, in Dan's own words, 'Hang on, this needs looking at in more detail to see whether that's... appropriate or not.'

Dan went on to show how he was now building on this insight by continuing to act as a protagonist in terms of empirically informed practice. He described how he was enthusiastically leading his team's involvement in a partnership between practice settings and university-based researchers to implement a new, research-based approach to tackling the problem of teenage domestic abuse:

... that's... why I've come on to do the TVAP [Teen Violence Against Parents]. It's a ... programme based in America.... We've had the opportunity to meet with them and share practice with them. So, it's quite an exciting time really.

Mary

A further case vignette, from the individual interview with Mary (Youth Offending Service team manager), described an example of a more confrontational forensic

challenge. This example showed clearly that her decision to challenge was both ‘ethically inspired’ and ‘empirically informed’. It demonstrated how her own commitment, as a social worker, to work to consistently high standards of ethical and empirical professional practice influenced her to present this challenge, which brought her into conflict with a member of another profession, who had chosen to pursue a more pragmatic course of action.

Mary explained that the incident in question had taken place when she had been acting as a court officer. There was a situation in which the court needed to decide whether a young man who had been charged with an offence should be remanded in custody, or whether arrangements could be made for him to be released on bail to the home of an older sister. She explained that the duty solicitor, who was responsible for advising the court on this matter, had been prepared to allow the court to proceed on the young man’s own statement that the latter was a viable option. She described that she had intervened because her own ethical standards, and her concern to ensure that the court was provided with the information it needed to make a responsible decision, meant that she was not prepared to be complicit in an insufficiently researched course of action. She therefore took the initiative to call the young man’s sister to check that she was able and willing to take on this responsibility. She had rapidly identified that she was not, ‘I rang sister, and she said: “never said any such thing, absolutely can’t come here, can’t cope with him, can’t cope with his behaviour”.’

When Mary passed this information on to the solicitor, she described how he had expressed his annoyance that she had introduced what he regarded as being an avoidable complication, ‘he almost accused me of putting barriers in place because all he needed to do – his job – all he needs to do – is to get him bailed.’

She explained that the outcome was that, despite the solicitor's impatience, the court had allowed her the time to find a suitable alternative placement for the young person.

CHALLENGING THROUGH THE PURSUIT OF AN EMPIRICIST CAREER

The data presented in the previous section illustrate cases where research participants operating in frontline social work practice and their colleagues used empirical investigation and forensic challenging to provide leadership to ensure ethical practice. The following section shows how Helen (professor of social work) herself, whose comments triggered this element of the research analysis, had been inspired by a similar combination of ethical and empirical concerns to pursue a career in which these activities provided the central focus and the defining characteristic of her leadership.

Helen

Helen explained that her concerns had begun quite early in her career, when she was working as the manager of a local authority's children and families social work team and became aware of a cultural shift towards formulaic thinking and standardisation of practice:

There were certain dogmatic positions, kind of "cant" phrases, simplistic thinking...
People wanting policies on this and policies on that.

She referred to a seminal moment, when her line manager had placed upon her what amounted to a requirement to become complicit in a process of organisational deception. The context of this was that she had told him that, because of the volume of work coming into her team, she was holding, and, in her own judgement, safely monitoring, cases that she was unable to allocate to social workers for active

intervention. She described how he had made it clear to her that openly admitting to a lack of capacity was no longer acceptable, ‘Suddenly it was: “Oh no, we mustn't say we've got unallocated cases – we've got to 'manage the impression”’.

She described her own reaction, framing this in explicitly ethical terms, ‘That just felt profoundly dangerous and wrong to me. There has to be some kind of organisational honesty. I think that's when it started to go wrong really.’

Like the other participants, whose career biographies have been discussed in the previous chapters, Helen described her own career pathway as having been opportunistic, rather than pre-planned. It became evident, however, that a guiding theme within it had been to pursue the concerns that she had developed as a team manager about the increasingly prescribed and restrictive nature of social work practice and the implications of this for children and families.

She described how, at the time of the quoted exchange with her line manager, she had already embarked on a course of PhD study, in the form of an ethnographic investigation of the local authority Children’s Services department in which she was working. She explained that this study served as a bridge into a career as a full-time academic. She described how she had then pursued opportunities for progression that were signposted by colleagues who had recognised the quality of her work. She described how she had subsequently ‘just worked my way up’, through a series of more senior appointments and increasingly large-scale research projects, culminating in successive professorial appointments and election to the position of chair of a prestigious professional body.

The data show that, within this progression, she had positioned herself in roles that enabled her to secure research funding, which provided her with the resources she

needed to undertake and lead increasingly comprehensive research projects, thus producing an evidence base through which to elucidate and substantiate her concerns. In the research interview, Helen described some of the mechanisms that she had identified that had operated to undermine the ability of social workers to practice empirically, the detrimental consequences of these systems, and the ways in which she had exercised leadership by making and taking opportunities to draw attention to these issues.

Helen ascribed the onset of the developments that had aroused her concerns to the 'roll-out of performance management'. She described how this insight had been crystallised by a multi-site research project that she and a group of fellow academics had conducted to evaluate the impact of an element of this process, in the form of the Integrated Children's System (ICS). The purpose of this system was to guide social workers through a comprehensive process of assessment and recording, designed to ensure consistency with prescribed practice and, at the same time, systematically monitor compliance.

Despite the positive intentions of this system, Helen described how she and her fellow researchers had found a striking consistency in the negative experiences of social work practitioners and first line managers across each of their study sites, who reported that, rather than enhancing the quality of professional practice, using the ICS undermined it. Findings included that the demands of the system reduced the amount of time that social workers were able to spend in direct contact with children and families and that the prescriptive and restrictive recording practices enforced by the system prevented social workers from developing a coherent narrative and analysis of the family situations and the needs of the children and young people for whose protection and well-being they were responsible.

Helen added that these findings, from an already substantial study, had been further reinforced by the consistent feedback on the system that she and her colleagues on a national taskforce had received via consultation meetings with social workers across the country, ‘you could go from Leeds to London and whatever, the same stories would be told.’

Considering these consistently negative findings, Helen described how she and her research colleagues had been surprised to discover from their subsequent internet research that many senior local authority managers had made a completely different evaluation of the ICS, ‘What would emerge were lots of testimonials from various directors saying: “it's marvellous, it's saving my staff lots of time”.’

This led Helen to ask the question, ‘Why is there such a mismatch between the experiences of people using the system and the testimonials of people managing them?’

Her explanation was in line with findings from the Munro Inquiry (Munro, 2010; 2011(a); 2011(b)) – that, under the prevalent influence of what she referred to as the ‘managerial paradigm’, many senior managers had turned their attention away from frontline practice to relying on indirect measures of performance. Further, they were being incentivised to do so by the extent and nature of the processes by which their organisations were being held accountable by central government. She referred to, ‘this massive amount of distraction and noise in the system caused by these systems of external scrutiny.’

She referred in particular to the influence of Ofsted inspections, which could lead to severe penalties in the case of a poor rating. She described how the sense of threat produced by these inspections had become so powerful that some senior managers had

become preoccupied with the task of trying to ensure that their service was proofed against this risk. She characterised this preoccupation in a vivid metaphor, ‘the ... Ofsted system is 'the uranium in the boat'. We're up the creek without a paddle – and we've got a throbbing lump of uranium on board! It's heavy, it's volatile and you've got to watch it all the time.

In this context, Helen argued that the ICS afforded senior managers ‘an element of comfort blanket and reassurance’, in that it provided them with a means of ensuring that their staff were following the practices and procedures enjoined by national policy and guidance, as well as with readily available evidence of how they were performing in relation to the corporate and national targets against which they were required to report. Helen observed that senior managers were often influenced to place their confidence in systems of this kind, rather than going out to seek their own direct evidence as to whether the information they were receiving was actually a reliable indication of the effectiveness of their services. She described how the ICS provided such managers with, ‘a kind of proxy, a surrogate for getting out and seeing what your workers were doing and experiencing.’

She emphasised that what the system provided was, ‘only an illusion of control, of course. It didn't really provide any control or any scrutiny or any safety.’.

The interview showed that Helen had not only been proactive in finding and creating opportunities to develop robust empirical evidence to substantiate her concerns but also in finding effective ways to disseminate this evidence, to make it more influential. She described how, as well as publishing extensively in the academic literature, she had, for example, responded to a widely reported case of a child who had died of injuries inflicted at home despite being subject to active child protection intervention by publishing an article in an influential national newspaper. In this article she replied

to the frequently asked question, 'How could this happen again?' by setting out her research findings to show that the answer was, 'Because the system is so bad'.

She gave other examples that showed how she was continuing to combine her empirical and strategic skills to develop and deliver powerful 'forensic challenges' to draw attention to policies and practices that aroused her ethical concerns. One of these was enlisting the support of a neuroscientist colleague to demonstrate that evidence from neurological research, which was being used to justify removing infants from the care of their parents at an early stage, was at too early a stage of development to be able to justify using it for this purpose. She described how she had co-authored a publication with this colleague to explain this and had used her own specialist knowledge to explain, from a sociological point of view, why, despite the paucity of evidence, the argument had gained currency:

we've been able to produce this kind of hybrid argument, which is: "This is what the neuroscience says, and this is the sociological reason why the argument is running even though the science doesn't say what people say it says".

She described how this approach had been effective: 'people *have* listened'. She explained that she was acting strategically to build on the interest that had been expressed by members of the judiciary, who are highly influential figures in that they are responsible for presenting the cases for and against removing children from their families and making decisions about this. She further explained that their own experience of fulfilling these functions had led some of them to express their own concerns about the significance that was being attributed to the findings of the neurological research. They had stated that she and her colleague had provided them with the evidence they needed to substantiate these concerns but had lacked the

capacity to develop for themselves: 'they've been concerned about it but they haven't got time'.

Although she acknowledged that her position as a professor and chair of a professional association for leading academics placed her in positions of formal leadership, Helen resisted the implication that she associated with the title of 'leader' in terms of seeking to engage others in a sustained programme of activity:

I haven't set out really to lead anything. It's not been an aspiration. ... I don't really consider myself to be a leader. I... have some strong ideas... I consider myself to have some influence, but I don't see myself as a leader.

To the extent that she was prepared to acknowledge a leadership intention, Helen characterised this in terms of being a determined, even a pugilistic, ethically inspired and empirically informed forensic challenger:

If I am leading anything, it's been about: "That's wrong and I'm going to go out and say something about it"... it's that: "This is wrong, this is why it's wrong, and if you don't agree come and argue with me!" That's fine and this is the argument.

SYSTEMIC CHALLENGING IN ORGANISATIONAL LEADERSHIP

The data show that, in the case of those involved in leading organisations, both locally and nationally, being 'willing to challenge' takes the form of initiating sustained programmes of systematic change that are designed to achieve radical shifts in organisational culture and direction.

Challenging organisational culture

Steve

At the level of taking on responsibility for a specific area of organisational leadership, Steve (local authority assistant director for adult social care and member of a regional end-of-life leads group) described how one of the learning points that he was taking from this experience was that stepping up to this level of responsibility required ‘leadership’ rather than the exercise of managerial authority. He explained that he had come to realise that, to achieve the objectives of integrated services for people at the end of their lives that he aspired to, he first needed to influence a shift in the culture of his own organisation, from regarding it as an area that could be left to health care services to accepting that it was a core responsibility for social care. He described how he had recognised that, to achieve this, he needed to win the support of those in the most senior positions of management and governance:

I think it’s about what’s on the tin, leadership, not ownership of the whole process... other people... in my wider department... [had] ... an ethos that “that’s Health’s business”, which was what had been the history... So ... I’ve had to work with the directorate leadership team, I’ve had to work with elected members who have had the view that it’s very much a Health area and with others, to, over time, change culture.

Challenging quality

Lesley

From the perspective of an organisational and national leader, Lesley (local authority director of adult social care) described how being ‘willing to challenge’ was one of the defining features of the leadership she aspired to provide, as it had been in other roles that she had undertaken earlier in her career. She explained that one of her central

concerns throughout her career had been to improve the quality of social work practice, describing how, in an earlier role as a senior regional inspector, she had determinedly challenged services in which she discovered evidence of deficiency:

I was the Deputy Chief Inspector for [city]. I was evil! I was relentless about improving performance, particularly at that time in Children's. I led [a major national quality improvement initiative]. I don't know where the passion came from, but I will challenge; and I'm not scared of it!

She described how she had continued to pursue this priority by becoming chair of a national organisation for social workers and through initiatives that she was taking in her role as a local authority director of adult social care. She gave an example of how she had initiated a programme that she referred to as 'grow your own social workers', which involved recruiting suitable candidates from the local community, who were then supported and sponsored by the organisation to become qualified social workers. She described how this was providing her with a means of 'fundamentally changing practice'. She explained that she was meeting with these emergent social workers to induct them as champions of high quality practice, who would be prepared to challenge on her behalf. She described how she was impressing upon them that, 'you have to be my whistle blowers. You have to be absolutely focused on good practice – and don't lose that!'

Challenging the 'managerial paradigm'

Although the overall tone of Helen's characterisation of local authority social workers and senior managers, as presented within the earlier theme of her 'empiricist career', was critical, she also readily acknowledged the presence of some 'good' social workers and managers. She described these as individuals who had independently recognised the problems she identified and were actively working to address them within their

own practice. Among those she cited were examples of senior local authority managers who had demonstrated that it was possible to operate empirically despite the prevalence and power of the ‘managerial paradigm’. She referenced local authority Children’s Services departments in which such managers had achieved reforms by constructing what amounted to a clear ‘empirically informed’ rationale in support of their programmes of service change and providing independent evidence of their effectiveness:

it can be done; if people marshal their arguments. And it wasn't just arguments. It was evidence as well. So right from the start they were looking at what were the effects of their reorganisations were on their system. They were able to show reduced numbers of children coming into the system and so on.

The data from this research show that both Catherine (NHS non-executive director, former director of social services and local authority chief executive) and Ian (consultancy director and former deputy director of a local authority children’s social care department) were protagonists of the empirically informed organisational leadership style advocated by Helen. They had resisted the influence of the managerial paradigm and ‘proxy’ information; instead, they had systematically challenged it by undertaking programmes of organisational development that focused on direct evidence from the front line of service delivery. Further, as independent thinkers, who were themselves ‘willing to challenge’, they were reciprocally responsive to individuals who were prepared to challenge them.

Catherine

Catherine (NHS non-executive director, former director of social services and local authority chief executive) shared Helen’s analysis that one of the main problems facing social work is that senior managers have become detached from frontline practice. She

asserted that, ‘a lot of what has gone wrong with social work is that moving away [on the part of senior managers] from knowing what practice is really like’.

As evidenced in the previous chapter, she described how, in each of her organisational leadership positions – as a director of Social Services and as a chief executive – she had directed her leadership towards inculcating an organisational culture with a sustained focus on the detail of the work that was being carried out by those staff who were directly engaged in delivering services. She gave an example of how she had promoted this ‘obsession with the front line’ through positive measures, we got people to talk to other people about their work. We had a whole day of every team showing what they did, and we even invited the public in to learn about it.’

Catherine explained that she had made efforts to use her leadership to inculcate a similar approach beyond her own organisation. She referred to having ‘talked about that a lot’ during the period when she was responsible for providing national leadership for peer senior managers in the capacity of president of their national association. She described further how she was continuing to advocate this approach in her role as a mentor to senior managers in local authorities that are the subjects of government-sponsored intervention. She made it clear that she was advocating, not simply that senior managers should engage intermittently and superficially with the problems arising on the front line, but that they should undertake processes of rigorous empirical investigation that would ensure that both they and those who were responsible to them achieved a full understanding of the underlying causes of these problems. This could provide a source of in-depth organisational learning that would promote systemic and sustainable improvement:

... an obsession with the front line doesn't just mean that you as a director go down to the front line and fix things and then go back up. This was what was happening in one

of the places where I was working – they were pleased with themselves that they'd fixed something for the social workers, something terribly simple, but they'd fixed it quickly. I said: “did you go back through the hierarchy and see what the people who were expected to fix this had done; and what had prevented them doing it?”. Because that's the way you learn – not sweeping in as the great “I am” from the top. So, the obsession with the front line is saying: “what are all the bits in the hierarchy that prevent the front line from being better than it is; and which things support it?”. So, it's not just that you spend a week at the front line and fix things. It's also about asking what went wrong and why did it not get fixed? It's your responsibility to do that.

Catherine also described how her determination to make constructive use of any available sources of evidence had influenced her to interpret her position as an organisational leader as imbuing her with a responsibility to avoid becoming defensive in response to any negative feedback; rather, she aimed to respond to it as representing a positive source of challenge in the form of a potential source of valuable data, which could be used to improve the organisation's functioning:

I think it's about not feeling that, somehow or other, when somebody says it's bad that's a terrible reflection on you and that you don't want to hear it, but saying: “this is good information I'm getting and it's part of my responsibility; so how do we make it better?”.

Ian

Like Catherine, Ian shared Helen's view that senior local authority managers had allowed the focus of their attention to be diverted from the frontline services for which they were responsible. He was critical of the prevailing tendency that he identified for these managers to operate from a corporate perspective that prioritised the interests of the organisation as a corporate body over encouraging and supporting departmental

leaders to improve the ability of its constituent departments to meet the needs of the people they were there to serve:

What most chief execs try to do is to have a set of directors who act corporately... directors in the main, and there are exceptions, aren't focused enough on what's going on in their own front line... In local government, the corporate centre is wanting you to feed it all the time, rather than it nurture you. What I think is needed is a much more dispersed leadership arrangement... where you allow people to develop their services... in a way that suits the delivery of that service.

He explained that, in the metropolitan borough where he had been the deputy director with responsibility for services to children and young people, he and his close managerial collaborators had asserted their own leadership by doing this, irrespective of the expectations of the corporate centre: 'whether they allowed it or not we did it!'. Ian showed that, again like Catherine, this focus on the front line of service delivery influenced him to seek his own direct empirical evidence of performance, rather than relying on favourable ratings provided by Ofsted inspectors or other 'proxy' measures.

As referenced in earlier chapters, he described how 'within a few weeks' his own direct observations of social work practice had convinced him that, far from being 'good', the standard of this practice was 'very poor' and even 'unsafe'. He explained that this realisation had influenced him, with the support of the additional senior colleagues that he had subsequently recruited, to undertake what was, in effect, an 'empirically informed' programme of organisational reform. As an example of this, he described how they had pursued the process of refocusing attention and expertise away from managerial concerns towards the front line of practice by retaining the skills of social workers who had demonstrated high standards of performance in practitioner roles, rather than incentivising them to become managers:

One of the fundamental things we had was we need to keep social workers in practice – there's no point in having your best social workers become managers and never practice. That led us to thinking that people at that level in the organisation, team managers, we had to get them back into practice, somehow.

Ian explained that, in practice, he and his senior colleagues had achieved this by incorporating a new role – consultant social worker – into the small units of social workers and support practitioners that provided the focus of the new organisational structure they had introduced. He described how they pursued this refocusing of organisational effort on frontline practice further by, as referenced in the previous chapter, engaging with leading social work academics and researchers. These academics supported them to develop a model of social work practice that could be delivered by the social workers in these units that was ‘empirically informed’ in the sense of being directly based on up-to-date research and theory. Ian described how the message that they were conveying to social workers was, ‘you're a professional; we're creating the environment where you can act professionally.’...

Further data from the interview with Ian show that, like Catherine, he had encouraged everyone in the department to focus their attention, on the outcomes they were achieving for children and families, not on corporate targets and performance measures. He explained that the department had in practice fully delivered against both external inspection requirements and corporate objectives, but that he and his senior colleagues had determinedly treated these as by-products of the improvements they had achieved in service delivery. In describing what they regarded as the truly salient measures of the effectiveness of the reforms, he made it clear that the ‘willingness to challenge’ that had influenced him to initiate them was the product of ‘ethical inspiration’ as well as empirical considerations:

We did that anyway... [and] ... we saved millions. But we never said anything about that. [Instead] we always talked about families ... where kids were really struggling and could have ended up in care and because of the good work we did families could stay together.

Like Catherine, Ian also readily acknowledged the importance of organisational leaders being receptive to challenge, 'I like people who challenge! ... I would always appoint people who are going to challenge us.'

He went on to provide an example of this by recounting how he had appointed a particular social worker even though this individual had used the recruitment interview as an opportunity to deliver a critique of managerial practice. He explained that he had he had advised the social worker subsequently that, 'No one else in the whole world would have given you a job the way you criticised!'

The data from the interview with Ian show that he elevated the activity of challenging to the level of a positive principle of constructive development. He explained how many of the ideas that had informed the programme of organisational reform he had instigated had been forged in the heat of debate with the person who he had appointed to be his closest associate in the implementation of his strategic vision:

we did a lot of talking and debating and shouting at one another about what we thought we should do... there was a lot of argument, a lot of debates, a lot of saying, "that's a really rubbish idea" and then coming back the next day and saying, "well, maybe it's not such a rubbish idea".

CONCLUSION: GUERRILLA LEADERSHIP OR RESPONSIBLE FOLLOWERSHIP?

This chapter has shown that being ‘willing to challenge’ was highlighted as an important feature of the leadership that was delivered by participants at all levels within the study. It has presented evidence from the data that this willingness to challenge was influenced by a sense of ethical obligation to achieve outcomes that were responsive to the needs and rights of service users and by a commitment to empirical rigour as a requisite of achieving this.

It has also shown, however, that this ‘willingness to challenge’ was expressed in different forms across the different roles that were present within the research cohorts. It has shown, firstly, that social work practitioner participants were ‘ethically inspired’ and ‘empirically informed’ in being willing to challenge ‘forensically’, as an element of practice leadership, mainly at the level of individual cases.

Secondly, it has shown that one individual within the national leader research cohort, Helen (professor of social work), pursued this activity on a far more comprehensive scale. She did so through a career based on providing rigorous and systematic evidence of the causes and effects of the limitations that she identified in social work practice and determinedly calling attention to these issues in order to challenge policy and practice at national level.

Thirdly, it has shown that, at the level of organisational leadership, being ‘willing to challenge’ took the form of initiating and delivering systematic programmes of culture and whole organisation change. There were participants in positions in organisational leadership whose concern for empirical evidence and rigour made them exceptional in resisting the influence of corporate practices that inhibited the ability of frontline social

workers elsewhere to develop and deploy their professional skills effectively. These participants exercised leadership by creating conditions that actively promoted social workers' ability to practice in a manner that was 'empirically informed' in the fullest sense, that of being consistent with current research and theory. Further, this characteristic influenced these organisational leaders to respond positively to challenge as a valued source of information and as a stimulus to the development of constructive plans of action.

As noted in the introduction to this chapter, the data presented has provided evidence of challenges that are of a markedly different character to the 'Socratic' ones described in the previous chapter. The decisions to challenge reflected in the data presented in this chapter were designed to be disruptive, as is emphasised by the bellicose language contained in some of the extracts quoted.

What also became evident in the analysis, however, was that the nature of the leadership activity involved in the activities of challenging undertaken by the social work practitioner participants and by Helen were of a different kind to those undertaken by those in positions of organisational and national leadership. While the latter amounted to sustained programmes of leadership, the former represented separate acts or episodes in which the individuals concerned asserted their own leadership as a means of disrupting and changing a course of action that others were leading. This interpretation of this aspect of the data is supported by Helen's declaration (cited above) – that, although she chose not to regard herself as a leader per se, she was prepared to be recognised as exercising leadership within the specific activity of asserting the findings of her research.

Considered in this light and reflecting both their powerful ethical charge and the pugilistic language in which these challenges are presented within the data, it seems

appropriate to characterise them as instances of 'guerrilla leadership'. However, the favourable responses to such challenges experienced by social work practitioner participants in multidisciplinary teams, and described by Catherine and Ian, show that they were also susceptible to being interpreted as acts of 'responsible followership', in the sense outlined by Grint and Holt (2011). As described by these authors, one of the features of 'responsible followership' is to be prepared to challenge a leader when their judgement appears to be flawed, provided that this is done from a position of loyalty to the purpose that they are pursuing. This line of discussion is pursued further in the concluding chapter.

CHAPTER 8 TOWARDS A FRAMEWORK FOR LEADERSHIP IN SOCIAL WORK

INTRODUCTION

This research has explored the characteristics and process of leadership in social work and has drawn out features that contribute to the delivery of leadership in each of the three domains. These were, firstly, frontline practice, secondly, organisational management in the context of providing leadership for a specific area of organisational development, and, thirdly, roles of identified leadership at the level of a whole organisation, and national and representative roles and activity, including teaching and research.

As presented within the findings chapters, data from this research showed that certain characteristics and ways of working were common across all three groups, but that some were more developed, or manifested differently, by those at higher levels of management or representation. This concluding chapter presents a framework for social work leadership that is applicable to social workers operating at all levels. It includes a discussion that compares this framework with theories and models of leadership that have been developed in other contexts.

One of the benefits of conducting research among members of a profession for which oral communication is a key tool of the trade is that the data is replete with pithy statements that encapsulate several important ideas in few words. One of these came from Helen (professor of social work), ‘I think what I’m saying is that social workers need to be clever and kind and rigorously sceptical - and all of those things at once! And sadly, not all of them are.’

At the level of a summary overview, this statement provides a neat summing up of the features of social work leadership that were identified in the findings of the research, with the vital caveat that not all of them were identified in participants at all levels.

In summary, the findings of this research are, firstly, that the participants showed themselves to be:

- ‘Kind’ – in the sense that many of them were driven by a sense of being attuned to and emotionally moved by other people’s distress to the extent that they felt an active need to take positive action to relieve it.
- ‘Rigorously sceptical’ in that they were alert to and prepared to follow up on indications of inconsistency or inadequacies in the evidence or rationale being presented in support of proposed courses of action. They were also concerned to base their own actions on, and lead others from, a firm base of evidence.
- ‘Clever’, in the two related senses of being:
 - strategic thinkers, who approached the situations that they faced in their different roles holistically and operated with a clear sense of direction and purpose
 - agile tacticians, who were adept in recognising the potential of the resources at their disposal and using them adaptively and creatively.

Their responses indicate that they are ‘all those things at once’, in that they:

- Engaged and sustained other people as active collaborators:
 - because they had a sense of ethical responsibility to use their own power to enable others, especially service users, to become more powerful and effective

- because their own experience and other sources of evidence demonstrated that engaging people as willing and active co-participants was more effective than imposing compliance by exercising authority over them
- because, from a strategic perspective, involving additional sources of support increased the range of skills, resources and influence that could be brought to bear on the objective or problem at hand.
- Challenged ‘Socratically’ to exert influence unobtrusively, but always with a clear sense of ethical purpose.
- Challenged ‘forensically’:
 - to draw attention to flaws in evidence that was used by others as a basis for action
 - to provide a supporting rationale for an alternative course of action.
- Challenged systemically:
 - to promote a clear and sustained focus on service users and their needs
 - to promote high standards of ethical and empirical practice as a means of continually improving services.

This concluding chapter now goes on to provide a more systematic summary of the elements of the research findings and then to present the model of ‘ethical-adaptive’ leadership that has been extrapolated from them.

THE LEADERSHIP CHARACTERISTICS OF SOCIAL WORKERS

As described in the Introduction to this thesis, the analysis of the data provided by the individual and group interviews undertaken in this study identified three traits that

informed two main forms of behaviour through which participants in this study exercised leadership. As the findings chapters have shown, these were combined to produce a model of the four characteristic features of social work leadership. Each of these traits and behaviours is summarised below. With the exception of the trait of being ‘empirically informed’, these traits and behaviours are summarised mainly at an aggregate level, rather than by distinguishing how, and to what extent, they were manifested by participants within the different research cohorts. This aspect of the findings is discussed in a later section of the chapter.

Ethically Inspired

The first trait that was identified by the analysis was that of being ‘ethically inspired’. One of the striking features of the research interviews, which still comes across powerfully even from reading the transcripts on the printed page, was the force of emotion with which the social worker participants expressed their sense of identification with the values of the profession, and the degree of their personal investment in these. While this was not entirely surprising, since values have always featured prominently in the discourse of the social work profession, the forcefulness with which participants at all levels expressed the significance that their values held for them was still something of a revelation to the researcher. It is notable that the word ‘passion’ and its cognates feature prominently in the data, both from practising social workers and other participants in roles of senior management and national leadership. Many others used different terminology to convey a similar sense of personal identification with, and investment in, the core social work values of compassion and social justice. As the ‘Ethically Inspired’ chapter showed, there were repeated instances in the research interviews in which participants described these values as fundamental features of their character or personality, and as a consistently powerful

motivating force throughout what were, in some cases, lengthy professional careers. Although the small minority of participants who aligned themselves with an ethical perspective defined by ‘deontological’ or ‘duty’, rather than ‘virtue’, ethics expressed themselves in less emotive language, they still made it clear that their ethical principles provided the foundation on which they built their approach to their work.

The significance of this from a leadership point of view is that it was this characteristic, above all, that both provided the motivational force or ‘inspiration’ that influenced participants to exercise leadership and also substantially shaped the forms that this leadership took. In the case of practitioners, it was evident that their compassion and concern for social justice made them determined advocates for service users and, more generally, champions of the rights of people who are suffering or disadvantaged. This led them to exercise leadership by engaging other people in programmes of work that were consistently focused on relieving service users’ distress and enabling them to become more autonomous. In addition, it influenced them to challenge any actions, practices, or policies that they regarded as compromising these principles.

In the case of organisational leaders, their ethical principles provided the focus for their programmes of organisational change – whether this was, as in the cases of Ian (consultancy director and former deputy director of a local authority children’s social care department) and Lesley (local authority director of adult social care), expressed in terms of a ‘virtue’-based ethical purpose of redesigning services to make them more responsive to the needs of service users or, as in the cases of Catherine (NHS non-executive director, former director of social services and local authority chief executive) and Suzanne (local authority director of children’s services), to fulfil the obligation of a ‘good officer’ by delivering the policies of elected members.

Empirically Informed

The second trait identified in the analysis of the data was that of being ‘empirically informed’.

It needs to be acknowledged that this designation was applied more inclusively for the purposes of this study than the sense in which it is more usually employed, especially in an academic context. For the purposes of this study, it was identified as consisting of two component elements, as outlined below.

Firstly, it refers to the way in which participants’ leadership was informed by knowledge and skills that they had gained from, in some cases, many years of social work practice and/or management.

In relation to social work practitioners, this sense of the term is applied to the way that they drew on such knowledge and skills intuitively, at a tacit level, as described in the final report of the Munro Inquiry into Child Protection (Munro, 2011(b)), enabling them to make rapid and generally reliable assessments. It was noted that this provided them with a source of ‘referent’ or personal power (French and Raven, 1959; Raven, 1965) and enhanced their ability to exert leadership influence.

As applied to participants operating at the levels of organisational and national leadership, this sense of the term is applied to the way in which such participants consciously deployed expertise derived from their experience adaptively in response to the demands of new problems and situations.

Secondly, this term is used in the more conventional sense of being concerned with operating on the basis of sound evidence and analytical rigour. In this connection, the analysis showed that practitioner participants were attentive to evidential detail within the specific context of their practice and displayed analytical rigour in testing and

challenging the adequacy of evidence or supporting rationales that were used to support decisions and actions. In relation to participants who were members of the national leader cohort, this term is also used in its more conventional i.e. academic sense to describe how they were concerned to exercise leadership on the basis of information derived from rigorous and systematic processes of formal research. It is also applied to describe how organisational and national leaders focused attention on obtaining direct information from the front line of practice, rather than relying on proxy data from performance management systems.

Strategic

The main features of this trait are those of being strategic in the sense of operating from the perspective of a holistic overview to develop a clear sense of overall purpose and direction, although the scope of this was more limited in the case of practitioners than in the more senior research cohorts. Across all three cohorts, however, the data showed that participants showed high levels of tactical agility in responding to changing features of the situations they were dealing with as they developed. The responses show that, whatever level they were operating at, participants conceptualised the situations that they dealt with as unique, complex and embedded, or in other words as ‘wicked problems’ (Rittel and Webber, 1973) and/or as ‘adaptive challenges’ (Heifetz and Laurie, 1997; Heifetz and Linsky, 2002; Heifetz et al., 2009). Therefore, they viewed them as requiring responses that were based on constructing customised solutions rather than just the deployment of existing tools and processes.

The results show that participants deployed the trait of being ‘empirically informed’ in formulating their assessments and in framing and deploying the approaches they adopted to developing their responses. They did this by using their existing, both tacit and explicit, knowledge and skills in making an initial appraisal and then engaging in

further processes of analysis and investigation. In some cases, they consciously re-deployed skills acquired in one context to deal with issues in different situations.

This showed that they were agile, adaptive, and highly resourceful in identifying and mobilising the resources needed to achieve the goals that they had identified. A major part of this involved enlisting and sustaining the collaboration of both those who were the primary ‘targets’ of their interventions and those whom they identified as sources of support in achieving their objectives.

Collaborating

The data show that participants’ choice of collaboration as one of their two main activities or behaviours of leadership reflected the traits of both being both ‘ethically inspired’ and ‘strategic’. They felt a sense of obligation to use the various resources at their disposal, ultimately for the benefit of service users and, more generally, to enable people who were disadvantaged to develop the capabilities they needed to become more effective on their own behalf. Under most circumstances, participants considered that using the various sources of power at their disposal to enforce compliance represented an abuse of such power.

From a strategic perspective, the data show that they were activated by the belief that the most effective way to achieve lasting change was to involve those who were the intended ‘targets’ of change as co-producers of it. They used ‘soft skills’ of engagement and persuasion because they believed this was the most effective way to achieve the level of engagement that they were seeking, i.e. to enlist collaborators who would take active ownership of the objective and invest their energies, abilities and resources in the process of working to achieve it.

Although in general, participants' ethical values influenced them to negotiate the willing engagement of the people whose activities and behaviours they were seeking to change, rather than to use their power to impose compliance, there were exceptions. One of these exceptions was when using statutory or positional sources of power represented the only viable strategy of engaging a vulnerable person, for whom the harm anticipated from failing to engage them outweighed concerns about deploying some degree of coercion.

Participants indicated that they believed that, in the process of building solutions to problems that they regarded as unique and complex, they could increase the potency of their own efforts by engaging other people who could contribute complementary information, skills and resources. Similar considerations to those described in the previous paragraph influenced their approach to engaging these intended collaborators, i.e. they sought to enlist them as willing and active co-owners of the purpose and co-producers of the process of change.

The analysis showed that participants combined the qualities of ethical integrity and strategic ingenuity in the methods that they used to sustain the progress and direction of the change processes that they were leading. This took forms such as providing consistent support, role modelling and unobtrusive 'nudges'. 'Socratic challenging' was highlighted as a distinctive technique that was used to administer such 'nudges', in the form of providing people with an alternative perspective on the situation in question to influence them to voluntarily revise their course of action.

Challenging

As demonstrated in the findings chapters, the concept of challenge featured prominently throughout the data, from participants across the three research cohorts.

As these chapters showed, participants spoke of relishing the prospect of taking on challenges that involved dealing with situations of novelty and complexity. They also frequently referred to situations where they had been influenced by the force of their ethical concerns to identify and act on a sense of imperative to challenge.

As referenced above, the data showed participants used the technique of ‘Socratic challenging’ as a sophisticated tactic of unobtrusive influence, or ‘nudging’, which inducted the people they were seeking to influence into an alternative perspective that enabled them to ‘see for themselves’ the value of the course of action that was being advocated.

In contrast, the ‘Willing to Challenge’ chapter presented examples of a form of challenging that was far removed from the subtlety of ‘Socratic’ challenges, in that it was overt and at times described by participants in explicitly pugilistic terms. This chapter showed how the combination of a powerful sense of ethical obligation and a concern for intellectual integrity combined to inform and motivate the practice of ‘forensic’ challenging on the part of social work practitioners and an academic researcher who participated in relevant research. As evidenced in that chapter, these activities were interpreted within the data as activities of ‘guerrilla leadership’, in the sense that they represented purposively disruptive interventions in activities at various levels, from case decisions to national policy, that were being led by other people.

As well as carrying a powerful charge of ethical conviction, the other defining feature of the ‘guerrilla leadership’ identified in the participants’ examples was that the challenges involved were ‘empirically informed’. They took the form of presenting evidence and reasoned arguments that demonstrated the justification for the change of direction advocated.

Finally, the analysis showed how individuals in roles of organisational and national leadership conceived and mobilised major projects of organisational development and reform that represented fundamental challenges, designed to achieve radical changes at the levels of organisational culture and models of service delivery.

These five elements of 'ethical-adaptive leadership' are set out in the form of a typology in Figure 1 below:

Figure 1: Typology of leadership characteristics

Traits			Behaviours	
Ethically inspired	Empirically Informed	Strategic	Collaborating	Challenging
<p>Influenced by:</p> <ul style="list-style-type: none"> • Family background – early sensitisation to social issues and services • Sense of being privileged • Own personality • Heroes and exemplars • Early career experiences <p>Manifested through:</p> <ul style="list-style-type: none"> • Emotionally invested – ‘passionate’, prepared to ‘go the extra mile’ • Sense of responsibility to subordinate own concerns to needs of others – emphasis on empathy and compassion • Principled, concerned with doing the right thing – close alignment of personal and professional values – professional integrity • Concerned with rights and social justice, especially in relation to people who are vulnerable, disadvantaged, and unable to express their own needs and wishes or expressing a sense of duty - 	<ul style="list-style-type: none"> • Learning from experience strongly valued as a source of own competence, confidence, and effectiveness • Concerned with empirical detail, e.g. seeking additional factual information to be assured of clear rationale for any proposed course of action • Using evidence from either direct observation or research to inform proposals for change • Sceptical, prepared to test, resist, and contest theoretical formulations, policies or procedures that are inconsistent with evidence, or for which there does not appear to be an adequate rationale 	<ul style="list-style-type: none"> • Interpreting situations as ‘wicked problems’ or ‘adaptive challenges’ that require the construction of new solutions, involving going beyond the application of available processes and tools • Undertaking a holistic and systemic analysis • Setting clear overall objectives and maintaining a clear and consistent sense of purpose/direction • Sustaining progress towards these objectives through monitoring and making continuing tactical adjustments in response to emerging developments • Relishing challenges, positively adaptive, adventurous. Responding positively to wicked problems or adaptive challenges because of being able to envisage positive outcomes and relatedly, seeing new positive opportunities. 	<p>Ethically inspired /developmental collaboration:</p> <ul style="list-style-type: none"> • Principle of using own power to enable other people to actualise their own • Taking responsibility for proactively engaging others • Encouraging and facilitating others (service users, subordinate colleagues, and people who are mentored, supervised, or managed) to make choices and achieve their own objectives • Guiding and supporting others to enable them to realise their own potential: ‘doing “with”, not “to” or “for”’ <p>Strategic:</p> <ul style="list-style-type: none"> • Invoking concept of synergy • Engaging with others as a means of accessing a larger pool of experience, knowledge, and skills, including actively seeking out new and complementary sources of expertise • Delegating to make optimum use of capacity and realise potential 	<p>Ethically inspired challenging:</p> <ul style="list-style-type: none"> • Sense of obligation to challenge in order to assert the rights and interests of people who are disadvantaged <p>Strategic ‘Socratic’ challenging:</p> <ul style="list-style-type: none"> • Inviting people to view situations from a different perspective to encourage them to extend their thinking and recognise new possibilities for action • Seeking to work with people who will challenge one’s own thinking <p>‘Forensic’ challenging:</p> <ul style="list-style-type: none"> • Focusing on, analysing, generating, and presenting empirical evidence to challenge decision making, plans, policies, and procedures. <p>Systemic challenging</p> <ul style="list-style-type: none"> • Re-focusing organisations around a clear sense of ethical purpose • Creating an organisational environment that enables continuing service improvement

THE MODEL OF ‘ETHICAL-ADAPTIVE’ LEADERSHIP

The model of leadership that was extrapolated from the data has been designated as ‘ethical-adaptive’ leadership. This choice of designation was made because it incorporated features of ‘adaptive’ leadership, as identified by Heifetz and his associates (Heifetz, and Laurie, 1997; Heifetz and Linsky 2002; Heifetz et al., 2009), but also went beyond this. What is distinctive about the ‘ethical-adaptive model of leadership is the way in which these features are set within, and modified by, an informing framework of ethical purpose.

Each of the features of ‘ethical-adaptive’ leadership could be identified in participants within each of the three cohorts, but to differing degrees of completeness and integration. The model was expressed in its most comprehensive form in the data from members of the national leader cohort. In contrast, the data relating to social worker participants demonstrated elements of the model of ‘ethical-adaptive leadership’, rather than a fully realised practice of leadership, but offered encouraging indications that at least some of the participants had the potential to develop into fully fledged leaders.

The dynamics of the ethical-adaptive model of leadership, as extrapolated from the data produced within this study, are summarised below.

1. The trait of being ‘ethically inspired’ was foundational to all the activities of leadership that were described in the data. Participants were motivated by a concern to relieve others’ distress and sought to use the various sources of power at their disposal to enhance the capability of people who were disadvantaged, so that they could become more powerful on their own behalf. Many of the leadership initiatives described in the data were prompted by ethical concerns and, for all participants in the research, the measure of success was the extent to which they had delivered the intended benefits for service users.

2. Participants approached the situations they were dealing with as ‘wicked problems’ (Rittel and Webber, 1973) or ‘adaptive challenges’ (Heifetz and Laurie, 1997; Heifetz and Linsky, 2002; Heifetz et al., 2009). This meant that they saw them as novel, complex and embedded in a context of interacting systems, whether at the level of the lives of individual service users or the environment of a large organisation.
3. Participants deployed the trait of being ‘strategic’ in making a holistic appraisal of each situation, in combination with the trait of being ‘empirically informed’ in the form of drawing on their existing knowledge and using skills of empirical investigation and analysis. On the basis of this appraisal they formulated the change objectives that provided the focus of their leadership.
4. Although they may have formulated a plan of action, participants recognised that the embedded nature of the problems or challenges that they were dealing with, within multiple, mutually interactive systems, meant that they needed to be tactically agile and adaptive. They achieved this by carefully monitoring developments and making repeated adjustments to keep the change process on track. They were thereby able to maintain the direction and momentum of the overall process of change that they were leading.
5. The main process through which leadership was delivered was based on engaging other people as active co-producers of change. Participants were influenced to try to lead collaboratively, i.e. through processes of engaging other people as active and willing collaborators, by both the traits of being ‘ethically inspired’ and ‘strategic’. In the case of service users and subordinates in relation to whom they were invested with formal sources of authority, they predominantly chose not to use these powers coercively. This was due, firstly, to an ethical inhibition against potential abuse of power, and secondly, to a strategically informed consciousness of the limitations of these formal powers. They considered that, at best, these provided a possible means of securing superficial compliance.

They chose instead to use ‘softer’, more sophisticated skills of engagement and persuasion, applying their experience-based judgement to conclude that more substantial and lasting gains could be achieved in this way by engaging service users or colleagues at the level of identifying themselves with the purpose and process of change. In other words, they sought to recruit them as ‘followers’ in the sense of becoming co-owners of the objectives and co-authors of the activities involved.

6. Participants were further influenced, by the trait of being ‘strategic’, to recognise that in responding to new and complex situations, they often did not have the skills, knowledge or breadth of influence needed to achieve the objectives they had identified. This influenced them to elicit various additional sources of collaboration from, for example, professional peers, external experts, and mentors, or in the form of formal alliances and strategic partnerships with other organisations. Again, what they sought to achieve from these relationships was that their collaborators would engage their own energies and skills proactively in the endeavour of building an effective response to the problem or challenge at hand – becoming, in Grint and Holt’s (2011) terminology, ‘responsible followers’.
7. Participants, however demonstrated the traits of being ‘ethically inspired’, ‘empirically informed’ and ‘strategic’ in the methods that they adopted to elicit collaboration, and in exercising influence within both of these forms of collaborative relationships.
8. They were resourceful and tactical in using their experience-derived skills to elicit collaboration. Within these relationships, they demonstrated the trait of ‘being ethically inspired’ by showing authentic concern and by using techniques such as role modelling, mentoring and, in the case of subordinate colleagues, delegation, so that the experience of the collaboration became an opportunity for leadership development. Equally, in these and other relationships of collaboration, they were ‘strategic’ in using more subtle forms of ‘nudging’; including, for example, the practice of ‘Socratic’ challenging.

9. As described previously, ‘challenging’ was the second characteristic leadership behaviour identified in the analysis, which at times took the more overt forms of ‘forensic’ or ‘systemic’ challenges. Although the behaviours of ‘collaborating’ and ‘challenging’ might appear to be contradictory, on further reflection it is evident that they are integral and mutually supportive elements of the model of ‘ethical-adaptive’ leadership. They were sometimes combined within some of the more sustained projects of leadership described within the data. The content of these more extended projects of collaborative activity amounted to the delivery of an extended process of challenge, while some of the more direct and overt forms of challenge were undertaken for specific purposes within this. Even the most confrontational challenges were, ultimately, a means of eliciting collaboration.
10. ‘Forensic’ challenges were ‘ethically inspired’ responses, often to the discovery of individual practices or policies that were operating to the detriment of service users, or of wider populations of people who were socially disadvantaged. They were ‘empirically informed’ in that they consisted of gathering and presenting evidence that demonstrated these effects. As described earlier in the thesis, they were essentially acts of ‘guerrilla’ leadership, in that they involved a discrete act of leadership that was intended to disrupt and re-direct a process of leadership by someone else.
11. ‘Systemic’ challenges, in contrast, represented more sustained projects of leadership that drew on all three traits of being ‘ethically inspired’, ‘empirically informed’ and ‘strategic’ and incorporated activities of ‘collaborating’. As noted earlier in the thesis, some of the participants in the national cohort received instances of ‘guerrilla leadership’ as constructive contributions by others to the projects of change that they were leading.
12. In summary, the dynamics of the model of ‘ethical-adaptive’ leadership are:
 - The traits of being ‘ethically inspired’, ‘empirically informed’ and ‘strategic’ are expressed through the behaviours of ‘collaborating’ and ‘challenging’.

- Their combined effect is to engage others as ‘followers’ in the sense of being willing and active collaborators in developing new and apposite responses to problematic situations.
- Especially in the case of subordinate colleagues, the outcome of ‘ethical-adaptive’ leadership is to enable the realisation of leadership potential.

These dynamics are summarised diagrammatically in Figure 2 below.

Figure 2: Leadership Model

Traits	Inform →	Leadership behaviours	Generate →	Leadership effects	Deliver →	Outcomes
Ethically inspired		Collaborating		'Followership' in the form of active collaboration		Customised, collaborative responses to 'wicked problems' and 'adaptive challenges'
Empirically informed		Challenging		Co-production		Enabling disadvantaged people to exercise power on their own behalf
Strategic						Facilitating leadership development

Levels of leadership

The starting point for this research project into social work leadership was the repeated calls for ‘leadership at all levels’ that were discussed in the Literature Review. Accordingly, as described in the methodology and evidenced in the findings chapters, this project explored the theory and practice of leadership by people who are qualified social workers at the three levels of experienced practitioner, organisational manager, and organisational/national leader.

Predictably, the research showed that there was a considerable difference between each of these levels, but especially between the social work practitioners and those in the managerial and national leader cohorts.

The table provided in Figure 3 below provides a summarised comparison between the way that each of the characteristic features of leadership – ‘ethically inspired’, ‘being strategic’ ‘collaborating’ and ‘willing to challenge’ – identified in the data was demonstrated by members of each of the three cohorts. This highlights a progressive increase in the comprehensiveness and sophistication of the forms in which the characteristics are manifested based on the scope of the leadership involved.

In relation to the feature of being ‘ethically inspired’, the summary reflects the way that practitioners tended to speak of their values in absolute terms, as self-evident justifications for particular decisions they had taken or courses of action they had chosen to pursue. In the case of the assistant directors, who comprised the membership of the regional end-of-life leads group, these participants were equally vehement supporters of ‘virtue ethics’, but applied this at the level of organisational leadership to argue for the adoption of a policy of values-based recruitment. In the case of the national leaders, values remained important but were systematically incorporated as informing principles of organisational strategy.

The characteristic feature of 'being strategic' was realised by the social work practitioner participants to the relatively limited extent of making holistic assessments and exercising tactical agility, mainly at the level of individual social work practice. The end-of-life leads were strategic in making assessments and identifying overarching objectives for a specific area of organisational development that had been delegated to them and tactical in using a national strategic framework for end-of-life social care to engage the collaboration of National Health Service colleagues. Participants in the national leader cohort, however, were more comprehensively strategic, autonomously identifying their own strategic priorities and developing and implementing programmes of systematic organisational change.

In relation to the feature of 'collaborating', social work practitioner participants were adept at leading through collaboration in relationships with service users and immediate colleagues, but rarely extended their influence beyond this limited context. End-of-life leads recognised the potential for, and identified the mechanisms that could be used to, elicit collaboration at both individual and corporate levels across agencies and sectors. Participants in the national leader cohort, however, described complex and inclusive networks of collaboration, each element of which had been cultivated for a clearly defined strategic purpose.

In relation to the feature of being 'willing to challenge', social work practitioner participants displayed skills of empirical investigation and analytical rigour at the level of direct evidence within the immediate context of their practice and were effective in presenting 'forensic' challenges at this level. In one case, this was extended to the level of challenging an element of national policy. End-of-life leads were more systematic and comprehensively 'empirically informed', achieved through reviewing the available literature and securing briefings from subject experts. They used the knowledge that they gained when devising their approaches to achieving their objectives of cultural and organisational change. The national leader cohort included both individuals who had engaged in sustained and systematic programmes of formal

empirical research and those who had delivered programmes of comprehensive organisational change that had challenged a major aspect of national policy and practice.

These are summarised in Table 3 below:

Figure 3: Levels of leadership

	Ethically Inspired	Being strategic	Collaborating	Willing to challenge
Practice Leadership	Strong emotional investment in ‘virtue ethics’ of compassion and social justice: identified as a core influence on practice.	Interpreting situations of service users as unique, complex, and ‘embedded’. Reflecting this, making holistic and systemic assessments at level of individual cases. Tactically agile and creative, drawing substantially on intuitive, experience-based expertise, at individual case level. Using available tools and frameworks with tactical agility to exert leadership influence within professional practice, mainly at level of individual casework.	Engaging service users as active collaborators based on sense of ethical purpose or ‘mission’ to use their own power to enable hitherto disadvantaged individuals to become equipped to exercise power and choice for themselves. Exercising ‘system leadership’ at casework level by using expert, legitimate and referent power to engage colleagues as co-workers, within a clear sense of overall purpose. Using Socratic challenges tactically as an unobtrusive technique of influence within the exercise of ‘system leadership’ at individual case level.	Empirical in the sense of systematically seeking and rigorously analysing direct evidence within the context of individual casework. Using ‘findings’ to disrupt course of action that someone else is leading and influencing the adoption of an alternative approach, at individual case level. Pursuing ‘forensic challenges’ at organisational level when prompted to do so by experiences within own direct practice.
Managerial leadership	Strong emotional investment in ‘virtue ethics’ of compassion and social justice: identified as a core influence on practice. Taking this to an organisational level by identifying the need for virtue-based recruitment.	Exercising delegated leadership at organisational level for responding to adaptive challenges that have been identified by those operating at a higher level of strategic leadership. Making a holistic assessment of the implications of this within a specific local/organisational context. Using this as the basis for developing overarching objectives for the organisation. Using available tools with tactical agility within the context of this objective.	Ethically motivated to collaborate as a means of enhancing choice and control but applying this at the level of a whole population, in relation to specific focus of delegated leadership. Looking beyond immediate organisation and operational networks to identify collaborators who can help to enhance own leadership competence. Exercising leadership to initiate and engage leaders in other organisations in new initiatives of cross-organisational strategic partnership, in relation to the area of delegated responsibility.	Empirical in approaching their task of delegated leadership by seeking additional information in relation to local needs and resources. Using the findings of these to inform the development and implementation of programmes of change that disrupt existing policies, procedures and practices and refocus the work around new objectives that reflect a different conceptualisation of the need or problem, in relation to a specific area of practice.
national leadership	Ethical values (both virtue and deontological) are a central driving force of leadership but are contextualised and integrated within a fully articulated statement of the strategic purpose of leadership.	Identifying the presence of adaptive challenges or ‘wicked problems’ at organisational or national levels and initiating programmes of strategic change in response. Making holistic assessments to defining far-reaching objectives of organisational or national change. Developing systematic programmes of change based on a fully articulated rationale. Making continued tactical adjustments based on sophisticated monitoring of progress and conditions. Exercising autonomy in adapting or discarding existing tools and frameworks.	Embedding collaboration as a core principle within programmes of service reform at organisational and national levels. Consciously adapting experience-based skills to devise sophisticated strategies for eliciting collaboration within and beyond their own organisation. Judiciously engaging individuals who could enable them to enhance specific elements of their leadership for particular purposes. Developing sustained relationships of strategic collaboration.	Empirical – firstly, in the sense of making their own direct assessment of the situations for which they are responsible, rather than relying on indirect or proxy measures. Empirical – secondly, in orchestrating or undertaking sustained systematic processes of empirical inquiry. Initiating projects of change that comprise radical challenges to policy and practice at whole organisation and national levels.

SITUATING ETHICAL-ADAPTIVE LEADERSHIP IN RELATION TO EXISTING MODELS OF LEADERSHIP

In general, the model of 'ethical-adaptive' leadership is in keeping with the recent direction within leadership theory towards a 'post-heroic' interpretation of the respective roles of leader and follower as a more fluid and reciprocal process of interaction, in which leaders and followers share a common sense of purpose and responsibility. This conceptualisation of leadership is conveyed in the following extract from an article by Fletcher (2004):

post-heroic leadership re-envision the "who" and "where" of leadership by focusing on the need to distribute the tasks and responsibilities of leadership up, down, and across the hierarchy. It re-envision the "what" of leadership by articulating leadership as a social process that occurs in and through human interactions, and it articulates the "how" of leadership by focusing on the more mutual, less hierarchical leadership practices and skills needed to engage collaborative, collective learning. (Fletcher, 2004, pp.647-8).

Among these models, as has been demonstrated within the thesis, the closest fit was with Heifetz and his collaborators' depiction of the characteristics and behaviours of individuals whom they characterise as being 'adaptive leaders'. (Heifetz, and Laurie, 1997; Heifetz and Linsky 2002; Heifetz et al, 2009). As has been referenced at various points in the thesis, 'ethical-adaptive' leadership as practised by participants in this research incorporated several of the features of such leadership. These included, firstly, construing the situations they dealt with as presenting new and complex situations that

required the development of original solutions, which went beyond the application of existing tools and processes. Secondly, proceeding towards this by making a thorough and systematic assessment of the situation that incorporated both a perspective of holistic overview and an attention to specific detail. Thirdly, identifying and sustaining a clear sense of overall strategic purpose and direction, but progressing towards this incrementally, by exercising tactical agility to take account of detailed information about the impact of change and the emergence of any new and potentially salient factors. Fourthly, appraising the continued usefulness or otherwise of available models, tools and processes and being prepared to adapt them or develop new ones. Fifthly, engaging the intended ‘targets’ of change as active collaborators in the project of responding to the situation of challenge; because they could provide useful information, to secure their cooperation and to enable them to develop the capabilities needed to sustain the benefits envisaged from the process of change.

As also referenced within both the Literature Review and findings chapters of the thesis there were also resonances with Grint and Holt’s (2011) conceptualisation of leadership, as an activity of engaging ‘responsible followership’ in responding to ‘wicked problems’ as characterised by Rittel and Webber (1973).

Each of these depictions of leadership capture, at least to some degree, firstly, the sense that was present in the research data that participants construed the situations that they were facing as unique and complex problems or challenges that required the construction of responses that went beyond deploying existing tools and processes.

Secondly, they both convey also the recognition that was evident in the data of the potential benefits in situations of this kind of engaging others as willing and active co-producers of solutions to such problems or challenges. Grint and Holt (2011) capture the element that in responding to problems that are ill-defined, novel and complex it is helpful to engage other people who can bring in additional sources of expertise.

They also capture the sense that is present in the data of the value of these collaborators or 'followers' being prepared to provide a source of constructive challenge. Heifetz and his associates (Heifetz and Laurie, 1997; Heifetz and Linsky, 2002; Heifetz et al., 2009) capture the element of engaging the intended 'targets' of change as active co-producers of it, as well as a sense of the combination of sustained strategic purpose and tactical agility that was found among participants in the national leader cohort.

Between them, therefore, the conceptualisations provided by these theorists capture several of the basic elements of the model of 'ethical-adaptive' leadership. Being written from the perspective of corporate leadership, and, in the case of Heifetz and his collaborators, a commercial context, however, what they do not capture is the way in which the powerful influence of ethical concerns shaped the way in which participants in this research enacted these practices. Above all, they fail to reflect the way in which these social workers engaged those in relation to whom they were in positions of authority as active co-producers of change, not primarily as instruments of a separate, corporate purpose, but as a means of enabling them to develop their own capabilities. Even from a strategic point of view these accounts do not do full justice

to the conceptual sophistication and tactical agility that members of the national leaders cohort showed in the way they developed their multi-layered networks of collaboration.

The powerful ethical charge that informed the leadership practices of participants in this research carried resonances with characterisations of ‘authentic’ leadership such as that proposed by West et al. (2015), who summarise authentic leadership as the activity of, ‘building leader legitimacy through honest relationships with followers by valuing their contributions and behaving ethically and transparently’ (West et al., 2015, p.11).

The focus on facilitating the development of others evoked resonances with the model of ‘Servant and partner’, or ‘Engaging’ leadership envisaged by Alimo-Metcalfe and Alban-Metcalfe (Alimo-Metcalfe and Alban-Metcalfe, 2005; Alimo-Metcalfe et al., 2008) in which the process of leadership is characterised as that of engaging subordinates in a process of shared activity that is designed to equip them to become more equal partners in subsequent projects of shared leadership.

Finally, there were also resonances with the dynamic identified by Gronn (2002) in his analysis of the various forms of ‘distributed leadership’, in which he refers to the way in which individuals working together within the context of a shared sense of purpose can, at times, combine their respective power so productively that the effect is one of synergy rather than aggregation.

None of these models, however, nor any other of which the researcher is aware, adequately captures the distinctive features and dynamics of leadership in social work. Accordingly, the conclusion of this thesis is that ‘ethical-adaptive’ leadership offers an original model of specifically social work leadership.

WHAT THIS MODEL OFFERS TO THE SOCIAL WORK PROFESSION

As described in the Introduction and the Literature Review, the context that prompted this research was one in which the profession had become fragmented and demoralised and in need of ‘leadership at all levels’. The indications from this review were, firstly, that as a relatively young profession, social work was still in the process of forging its distinctive identity and building the repertoire of theory and practice, as well as the organisational infrastructure, needed to become established as a confident and autonomous profession.

Secondly, that this project of development as a profession had been disrupted by both the pressures imposed on it by socio- economic conditions and the implications of the ‘bureau-professional compact’, which had made it especially vulnerable to the impact of ‘managerialism’ or ‘New Public Management’.

Thirdly, that the approaches to improving the quality and effectiveness of social work practice provided under the managerialist regime had proved ineffective and that the perspectives of managers and social workers had become detached from one another and that, to some degree, each was inhabiting a different form of cul-de-sac. Social workers were struggling with the effects of having their roles and day to day practice

fragmented by unsuitable tools and with the experience of being unable to work consistently in a manner that was in keeping with their professional values. Managers had become distanced and distracted from the reality of frontline social work by a model of managerialist practice that was inadequate to the complexity of the situations that it was intended to deal with.

In this context, the 'calls for leadership' can be interpreted as a plea for the development of a leadership approach that has the potential to reconnect these two elements, and, more generally, to enable the profession as a whole to get back on track with the project of becoming established as a profession.

One of the key strengths of this model of 'ethical-adaptive' leadership in this situation is that it integrates the thinking and practice of social workers in both frontline practice and in managerial roles. The findings of this research, as reflected in this model of ethical-adaptive leadership, have shown that there are fundamental features of leadership that are common to people across the levels of social work practice, management, and national leadership.

Despite the very important caveat that the degree to which these were developed and integrated was found to be very different between individuals at these different levels, what this means is that the model is potentially applicable to members of the profession at each of them. The implication of this is that it provides a framework that can be used to guide the realisation of the leadership potential that is present among social workers,

towards improving the profession's capacity for leadership, at the levels of practice, management, and national leadership.

CONCLUSION

This thesis began by presenting the context that led to the expression of repeated calls for leadership and their evolution into calls for leadership 'at all levels'. It showed how these calls reflected evidence of an escalating crisis in the profession, but also an awareness of the importance of the social worker role and the value of what could be achieved by social workers, when practising well. Some 15 years on from the first of these calls, the need for leadership in social work remains as compelling as ever, across all areas of service in which social workers are involved. The combined impact of sustained policies of austerity, demographic change, political and social insecurity has been to increase the demand on under-resourced and increasingly fragmented public services. Social workers have continued to find themselves at the sharp end of this, as a profession whose focus is on working with people who are most acutely affected and have continued to find themselves the target of media and more general public criticism. Social workers continue to find their values compromised by having to invoke statutory powers to remove children from their families for want of resources to work preventively. In services for adults, they continue to be gatekeepers of resources and to channel vulnerable people into care services they know to be of inadequate quality. Social workers continue to find that their ability to work relationally with service users is compromised by the extent of bureaucracy and by

working in conditions where they are isolated from peer support by practices such as hot desking. There are divisions within the profession about how best to train social workers and about whether social work should remain a single profession, or be split up into separate ones that focus exclusively on specific client groups.

Despite this context, the findings reported in this thesis have shown that it was possible to discover a distinctive model of social work leadership that could be of relevance to social workers 'at all levels'. On the basis of these a framework has been proposed, which draws on the first-hand accounts, experiences and reflections of social workers operating in the frontline of their respective domains, who were leaders, or showed elements of leadership, and had the potential to develop this capacity more systematically. This framework is encapsulated in the 'ethical-adaptive' model proposed for leadership in social work.

Although the concept of leadership at all levels is, to date, unique to the social work profession, it seems reasonable to argue that the proposed framework and model, of 'ethical-adaptive leadership, could be applicable to other human services professions and practice disciplines.

The final message from this research is that there are social workers, at all levels, who have the integrity and ingenuity to drive the profession forward in complex times, responding to policy and practice challenges, while holding fast to the core values and principles of social work.

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APPENDIX 1 CALL FOR EXPERIENCED SOCIAL WORKERS TO TAKE PART IN THE RESEARCH

Developing social work leadership – can you help?

According to a succession of reports, there is an urgent need for ‘leadership at all levels’ so that we as social workers can shape the future of our own profession. However, there is very limited research evidence about what social work leadership involves from a professional rather than a management perspective. If you are an experienced social work practitioner who would be interested in contributing to research that aims to develop an improved understanding of the leadership needs and potential of social workers, I would like to talk to you about a PhD study that I am conducting at Hull University. I am seeking to involve social workers with five or more years post-qualifying experience. You will participate in one small group discussion and one individual interview. You will not need to travel – I will come to you!

If you would like to hear more about this research (without making any commitment), please call Anne Cullen on 07791 622438 or email a.f.cullen@2009.hull.ac.uk.

APPENDIX 2 RESEARCH PARTICIPANTS

Cohort 1 National leaders

Pseudonym	Role(s)	Category	Qualified social worker	Gender	Age group	Ethnicity	Individual interview	Small group interview	Large group interview
Sheila	Acting CEO of social work membership organisation; former member of national working group to improve social work	National leader	✓	F	45–64	White British	✓		
	Professor of social work; former secretary of a national academic network; former member of national working group to improve social work	National leader	✓	F	45–64	White British	✓		
Catherine	NHS non-executive director; former director of social services and local authority chief executive; chair of national working groups	National leader	✓	F	45–64	White British	✓		
Suzanne	Local authority director of children's services; former president of a national peer association for chief officers	National leader	✓	F	45–64	White British	✓		
Ian	Consultancy director; former deputy director of local authority children's	National leader	✓	M	45–64	White British	✓		

	social care department; originator of a major social work reform initiative						
Lesley	Local authority director of adult social care; chair of national organisation for social workers; former senior officer of national peer association of chief officers	National leader	✓	F	45–64	White Irish	✓
Ruth	Chief executive of a large specialist healthcare organisation in the voluntary sector	National leader	✓	F	45–64	White British	✓
Helen	Professor of social work, member of national working groups and president of national peer association for senior academics	National leader	✓	F	45–64	White British	✓

Cohort 2 Organisational managers

Pseudonym	Role(s)	Category	Qualified social worker	Gender	Age group	Ethnicity	Individual interview	Small group interview	Large group interview
Mike	Local authority assistant director for adult social care	Organisational manager		M	45-64	White British			1
Chris	Local authority assistant director for adult social care	Organisational manager		M	45-64	White British			1
Viv	Local authority assistant director for adult social care	Organisational manager	✓	F	45-64	White British			1
Peter	Local authority assistant director for adult social care	Organisational manager		M	45-64	White British			1
Marion	Local authority assistant director for adult social care	Organisational manager	✓	F	22-45	White British			1
Steve	Local authority assistant director for adult social care	Organisational manager	✓	M	45-64	White British			1

Cohort 3 Experienced social workers

Pseudonym	Role(s)	Category	Qualified social worker	Gender	Age group	Ethnicity	Individual interview	Small group interview	Large group interview
Mary	Team manager, Youth Offending Service	Experienced social work practitioner	✓	F	45–64	White British	✓		1
Karen	Senior nurse, Youth Offending Service	Other professional		F	45–64	White British			1
Dan	Social worker, Youth Offending Service	Experienced social work practitioner	✓	M	25–44	White British			1
Bernadette	Social worker, Youth Offending Service	Experienced social work practitioner	✓	F	25–44	White British			1
Colin	Team manager, Youth Offending Service	Experienced social work practitioner	✓	M	45–64	White British			1
Grace	Student social worker, Youth Offending Service	Student social worker		F	45–64	White and Black African			1
Paula	Senior social worker, general hospital multi-professional team	Experienced social work practitioner	✓	F	45–64	White British	✓	✓	
Julie	Nurse-manager, general hospital multi-professional team	Other professional		F	25–44	White British			

Sarah	Nurse-manager, general hospital multi-professional team	Other professional		F	25–44			
Jack	Senior social worker, specialist hospital multi-professional team	Experienced social work practitioner	✓	M	45–64	White British	✓	✓
Rose	Senior occupational therapist, specialist hospital multi-professional team	Other professional		F	45–64	White British		
Poppy	Senior physiotherapist, specialist hospital multi-professional team	Other professional		F	25–44	White British		
Kay	Senior social worker, multi-professional community mental health team	Experienced social work practitioner	✓	F	45–64	White British	✓	✓
Jane	Community psychiatric nurse, multi-professional community mental health team	Other professional		F	25–44	White British		✓
Melissa	Occupational therapist, multi-professional community mental health team	Other professional		F	25–44	White British		✓
John	Senior practitioner, local authority team for care leavers and looked-after children and young people team	Experienced social work practitioner	✓	M	25–44	White British	✓	✓
Hannah	Assistant manager, supportive housing service for young people	Other professional		F	25–44	White British		✓
Molly	Bail officer, Youth Offending Service Team	Other professional		F	25–44	White British		✓

Andrea	Senior practitioner, local authority team for children in need and child protection	Experienced social work practitioner	✓	F	45–64	White British	
Alice	Social worker, local authority team for children in need and child protection	Newly qualified social worker	✓	F	25–44	White British	✓
			23				13

APPENDIX 3 INTERVIEW GUIDES

Interview guide A: Small group, social worker and two colleagues from other professions

1. Background information – for each person

Please say a little about your main professional qualifications and background. Please also say a little about your present job – your job title and what your role involves.

2. This particular working relationship

Please give me a bit of background about how long you have known each other and the nature of your working relationship [e.g. members of the same team or coming together from different agencies to undertake specific tasks? Is this a peer relationship or is one member more senior or in a role of formal authority over another?].

3. Practice example

Please talk about a case or other piece of work that you did together recently. Could you give me some background and then take me through what happened? [Possible areas to probe – how they planned the work, how they communicated with each other to review progress and agree what needed to be done, whether they consulted other colleagues for advice or information, or as a routine reporting requirement or to authorise a proposed course of action. Try to find out which of them took the initiative, who made the decisions, what the others did to either support or challenge.]

4. Reflections on their respective roles and contributions

Please could you each talk about what is distinctive about what each of your colleagues contributes to the work you do together. Where do you think their ability to make this contribution comes from? [Prompt, if needed: personality? Their professional training or practice experience? The authority invested in them by their role or the agency that employs them?]

5. Perceptions of social workers in general

How do you think social workers are perceived and valued by other people – for example, service users, colleagues in your own agencies? How much authority and status do you think they carry compared to people from other occupational groups? What do you think are the main factors that affect the way social workers are viewed by other people?

6. Is there anything else you would like to add or ask about this research?

Interview Guide B: Interview with individual social worker

Biographical information and career

Would you be kind enough to give me an overview of your career to date, starting with your professional training?

Please talk about what you feel may have influenced your choice of profession and the way your career has developed? [Prompt, if needed – e.g. family background or

personal experiences, someone they admired or a sense of their own particular skills and interests.]

1. Reflections on focus group

Having had time to think about the session and read the transcript, was there anything in it that surprised you or made you think? Is there anything else you would like to comment on?

2. Further specific questions that the researcher has identified from reflecting on the session and examining the transcripts.

3. Social work identity

How do you usually choose to describe yourself when you are introducing yourself or describing what you do in your working life? If you do this differently in different situations, please explain.

4. Who do you regard as being your closest peers, and why?

Do you have any professional role models or heroes? If so, who are they, and why?

Who are the people who have most strongly influenced your development as a social worker? Please talk about how they influenced you.

What does being a social worker mean to you?

5. Influence and authority

Who are the people who have the most influence on the way you work currently (either positively or negatively)? Could you explain and give me an example?

In what ways, if any, do you feel that you are able to exert influence to achieve what you see as important in the course of your day-to-day practice? Could you explain and give me an example?

Are there situations in which you are worried, angry, or upset because you do not have the power or authority to act? Could you explain and give me an example?

Are there situations in which you find yourself having to exercise power over people in ways that cause you concern? Could you explain and give me an example?

Are there any situations in which you feel that you are expected to exercise authority but feel unable to do this? Please could you talk about these?

Are there any other situations – for example, in relation to voluntary work, leisure activities or family life – in which you feel able to exercise influence more effectively than at work? Could you give an example and say what you think makes this situation different?

6. Leadership in relation to the social work profession

Who, if anyone, do you see as providing leadership for the social work profession currently? What does this involve?

What do you see as being the main challenges and priorities for the social work profession over the next 10 to 20 years? What sort of leadership will be needed?

7. Is there anything else you would like to say or ask about this research?

Interview guide C: Middle manager – end-of-life leads

1. The role of end-of-life leads

Please talk about what it means to each of you to take on the role of an end-of-life lead? Who are you aiming to influence and in what ways?

Please describe some of the activities that you have done in your roles as end-of-life leads, either as individuals or with others. Please describe what you set out to do and what happened in practice. How do you feel you influenced other people? Who were the people who influenced you, and in what ways?

What is rewarding about being an end-of-life lead? What are some of the frustrations?

2. Knowledge, skills and qualities

What kinds of knowledge, skills and qualities do you find yourselves drawing on in this role? Where do you think these come from? [Prompt, if needed: formal education and training? Experiences in present jobs or previous ones? Personal life experience – recent or past? Experiences of voluntary roles?]

In what ways, if any, do you think you draw on your training and experience as social workers in your roles as end-of-life leads?

3. How social workers influence others to achieve change

Can you think of examples of situations in which frontline social workers have made a significant contribution to improving the way that end-of-life care is provided by other people? Please describe what they did and how you feel this influenced the other people. If you can't think of any examples, do you have a sense of what might be preventing social workers from doing this?

4. Leadership for the social work profession

Who, if anyone, do you see as providing leadership for the social work profession currently? What does this involve?

What do you see as being the main challenges and priorities for the social work profession over the next 10 to 20 years? What sort of leadership will be needed?

5. Is there anything else you would like to add or ask about this research?

Interview guide D: Individual interview with national leader

1. Biographical information and career

Would you be kind enough to give me an overview of your career to date, starting with your professional training?

Please talk about what you feel may have influenced your choice of profession and the way your career has developed? [Prompt, if needed – e.g. family background or personal experiences, someone they admired or a sense of their own particular skills and interests.]

How would you characterise your own professional identity now? Who do you regard as your closest peers?

To what extent, and in what ways, do you currently identify yourself as a social worker?

Do you have any professional ‘heroes’? Who are they, and why?

What do you think has equipped you to fulfil your current leadership role or roles? [Prompt: for example, their own characteristics, life experiences, training and education, role models, mentors.] In what ways, if any, do you think your social work background has helped you to be an effective leader? In what ways, if any, do you think it may have been a hindrance?

2. Own leadership practice

Please tell me about your present post and what this involves.

How would you characterise your own leadership approach and style? Please illustrate this by describing the leadership relationship that you have with a group or team of people you work with on a regular basis.

Please talk about what is involved in providing leadership at the level of a large organisation/profession/ movement?

Who are the key people who support, enable and sustain you as a leader? How do they do this?

3. Leadership by frontline social workers

In what ways, if any, do you think frontline social workers exercise leadership in their day-to-day work? What hinders this? How can/could this be enhanced?

4. Leadership in relation to the social work profession

Who, if anyone, do you see as providing leadership for the social work profession currently? What does this involve?

What do you see as being the main challenges and priorities for the social work profession over the next 10 to 20 years? What sort of leadership will be needed?

5. Is there anything else you would like to add or to ask about this research?

APPENDIX 4 RESEARCH APPROVAL LETTER



Social Sciences
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E
m.l.holloway@hull.ac.uk

To whom it may concern

06 Feb. 13

Re: Researcher Anne Cullen

To whom it may concern

I am writing to provide information on the research undertaken by Anne Cullen towards her doctoral thesis.

Anne's PhD research project, 'The concept and practice of leadership in social work', has been considered by the Research Ethics Committee of the Faculty of Arts and Social Sciences and granted full approval and support. The consideration by this committee of any research involving human participants is a required stage for postgraduate research. The National Social Care Research Ethics Committee has confirmed that no further scrutiny of this proposal and approval is required.

Anne Cullen's PhD research is supervised by myself as first supervisor and Dr Lucy Michael as second supervisor. It is our pleasure and privilege to recommend her to you. Anne will be more than happy to provide any information you require about the aims of the research, and has prepared a full set of project briefings for the range of participant groups to be approached.

We hope that you will be happy to participate in this research. Should you require any further information from me, or if you would like to discuss any concerns you have about your involvement in the research, please feel free to contact me at m.l.holloway@hull.ac.uk. I hope that you will find engagement with this research a beneficial exercise for you and your colleagues.

Yours sincerely

Professor Margaret Holloway, PhD, BA, CQSW.
Professor of Social Work
Social Care Lead, National End of life Care Programme

APPENDIX 5 EXAMPLE PARTICIPANT INFORMATION SHEET

University of Hull

PhD Research Project: The Concept and Practice of Leadership in Social Work

INFORMATION FOR SOCIAL WORKER PARTICIPANTS

1. What is the purpose of this research?

This research sets out to develop an understanding of social work leadership, from both professional and managerial perspectives. The impetus for the research has come from the repeated concerns that have been expressed about the state of the social work profession in the UK, and in England particularly, in terms of both standards of practice and morale. In connection with this, a succession of reports have argued that the profession needs to develop 'leadership at all levels' (Platt, 2007; Social Work Taskforce, 2009; Munro, 2010).

The project will explore how social workers in frontline practice, management and national leadership roles think about leadership and how they provide leadership or enable the leadership of others. Equally importantly, it will explore the factors that impede or inhibit social workers from playing a more active part in the process of leadership.

2. Who is responsible for this research?

My name is Anne Cullen and I am a part-time PhD research student in the Department of Social Work at the University of Hull. I am also a registered and practising social worker and manager. The research is supervised by Professor Margaret Holloway and Dr Lucy Michael. The project has been granted research ethics approval by the university.

3. What are you being asked to do?

I will ask you to choose two people from other professions who you work with regularly to take part in a discussion with you about the work you do together. I will arrange to come and meet with the three of you at a date, time and place that is convenient to you. When we meet, I will invite you to discuss some questions relating to your experiences of working together and some more general questions about your respective perceptions of the social work role. The session should take about one hour.

I will then arrange a second interview with you on your own at a later date. This will be to talk about your reflections on the discussion and to ask you some more questions about your experiences and views on the social work role, focusing on aspects that are relevant to the issue of leadership.

4. What will be done with the information you provide?

I would like to record both the discussion and the interview on a digital audio recorder. I will then personally type up a transcript from this recording. Provided that you and your two colleagues agree to this, I will send each of you a transcript of the discussion session and invite you to feed back any comments or additions that you would like to make. I will add these to the transcript. I will also send you a transcript of your

individual interview and, again, include any comments you send back within a revised version.

When the research has been completed, I hope to present findings from it, for example, through journal articles and conference presentations.

5. How will your confidentiality be protected?

Firstly, it is important to emphasise that the information you provide will be used only for the purposes of this research. Secondly, I will take every reasonable care to protect the identity of the people who contribute to the research. For example, I will not include any names within the transcripts of the discussions or individual interviews and will remove any other potentially identifying details or change them in ways that do not affect the purpose of the research. I will not share the transcripts with anyone other than my research supervisors. In presentations and publications about the research, I will anonymise all references to the individuals and groups who have contributed to the research.

Audio recordings and transcripts from the research will be stored securely and will be confidentially destroyed no later than five years after the research has been completed.

6. Withdrawing from the research

You will be free to withdraw from the research at any time up to four weeks after your individual interview. After that time, it will not be possible to withdraw as the material will have been incorporated within the research analysis. If you choose to withdraw before this, all recordings and transcripts of your contribution will be destroyed and none of this material will be included within the study.

7. Feedback on findings from the study

When the research has been completed, I will send a summary of the main findings to everyone who has contributed to it, if they have chosen to be included in a circulation list for this. On the same basis, I will inform you when any papers or articles that draw on the research are published.

8. Further information

I am happy to discuss anything in this information sheet or to provide further details.

Anne Cullen

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APPENDIX 6 CONSENT FORM

University of Hull

Department of Social Work

PhD Research Project: The Concept and Practice of Leadership in Social Work

Researcher: Anne Cullen

CONSENT FORM FOR PARTICIPANTS

Name	Please initial each box
I confirm that I have read and understood the information sheet <i>PhD Research Project: The Concept and Practice of Leadership in Social Work: Information for Social Worker Participants</i> for the above study and have had the opportunity to ask questions.	
I understand that my participation is voluntary and that I am free to withdraw from this research at any time up to four weeks after the individual interview, without giving any reason, and that if I do so, no record will be retained of my participation in the research.	
I agree to the focus group and individual interview being audio recorded.	
I agree to the use of anonymised quotes in publications.	
I agree to take part in the above study.	

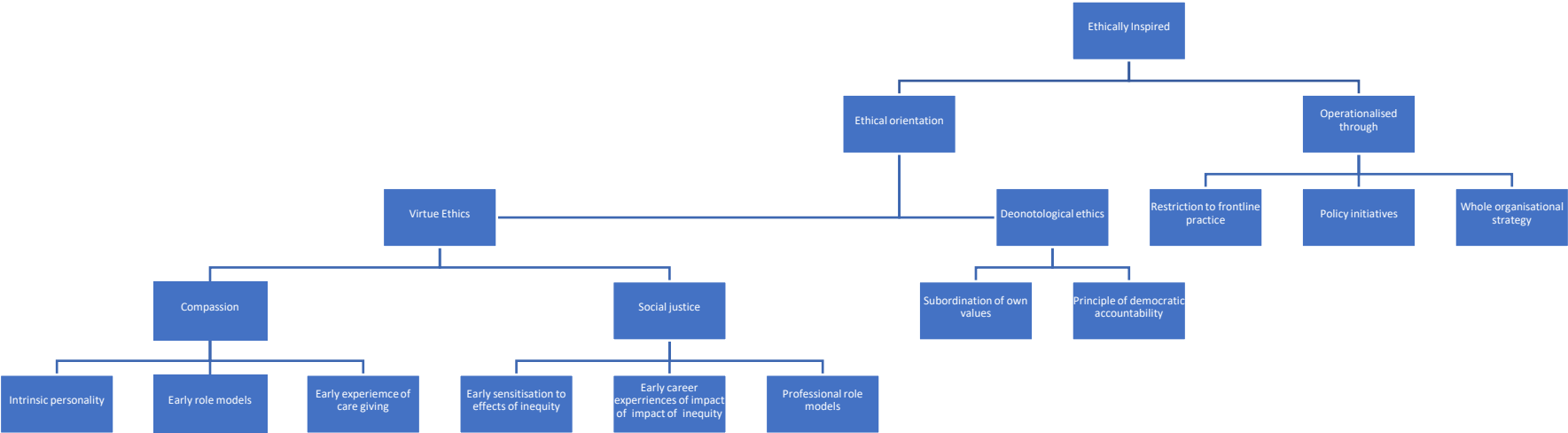
Signature.....Date

APPENDIX 7: ANALYSIS NODE DIAGRAMS

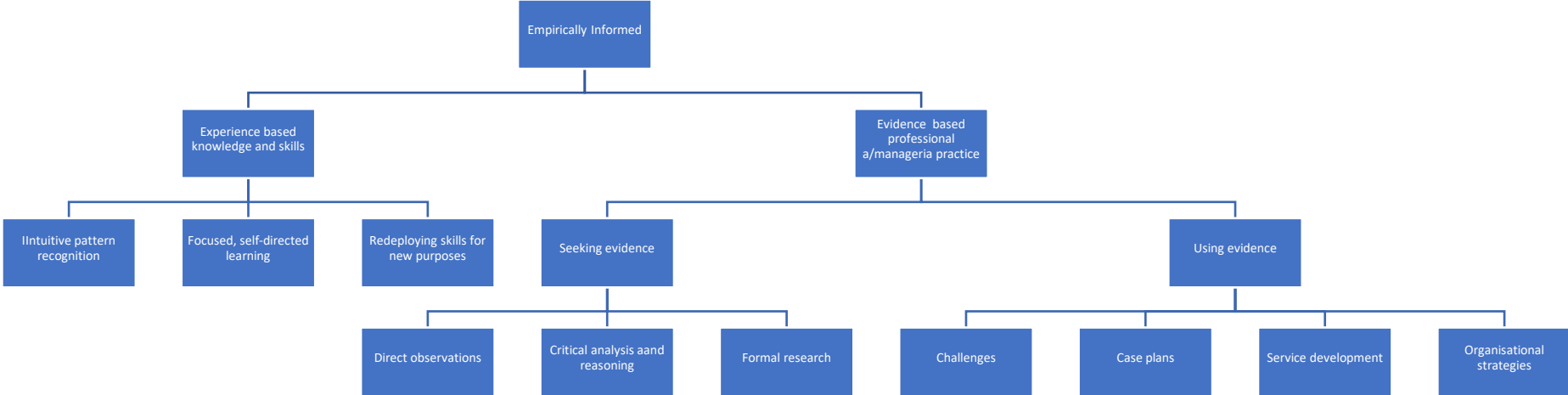
1. Node Structure: Overview



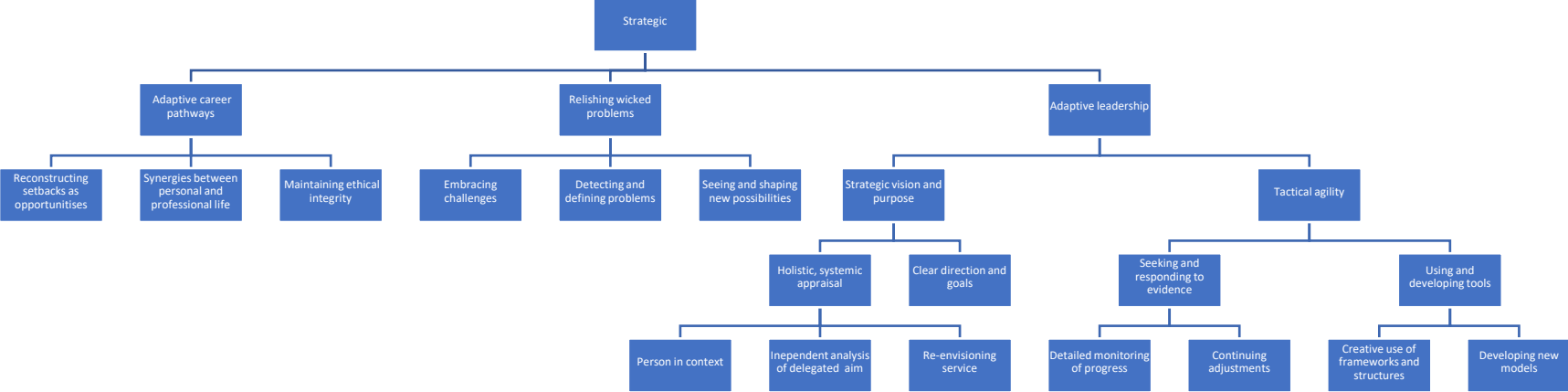
2. Node Structure: Ethically Inspired



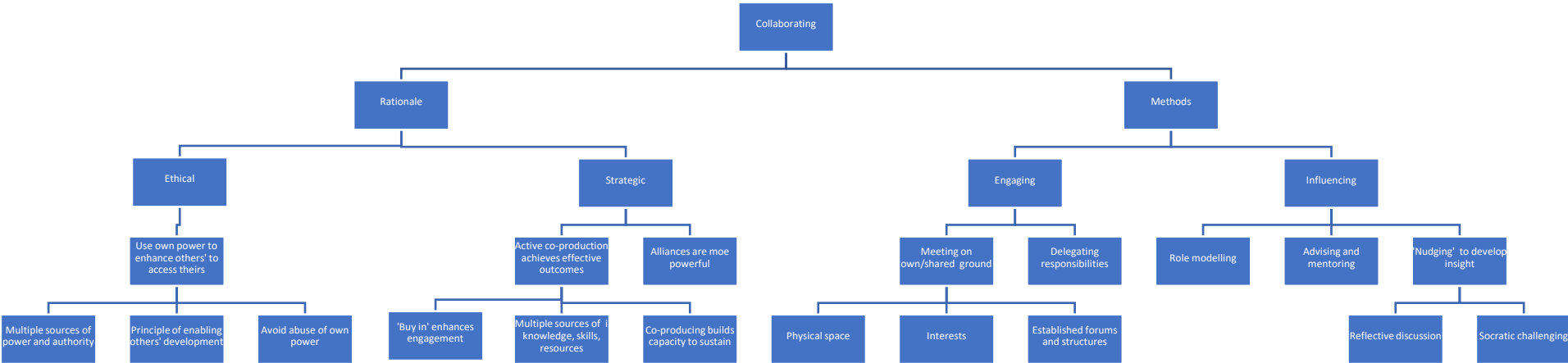
3. Node Structure: Empirically Informed



4. Node Structure: Strategic



5. Node Structure: Collaborating



6. Node Structure: Challenging

