

Identified training (development) needs	Plan to address training needs	How will this help the Registrant in their job?	Achievement timescale
<p>To continue to access training in respect of Building Better Futures and to promote this assessment tool into team practice</p>	<p>Attend all training in relation to this assessment offered by the Trust and also training associated with this training to include Risk Assessment and management.</p>	<p>To develop my knowledge base further of this new assessment and how it can be incorporated into practice in the Team.</p>	<p>1 year</p>
<p>To explore leadership training provided by the Trust</p>	<p>To explore most relevant training in line with my current role</p>	<p>To assist me in ongoing development of my Social Work knowledge, skill and values and management of the team</p>	<p>1 year</p>
<p>To continue to keep updated on all policies, procedures, new developments</p>	<p>To attend relevant training, ongoing attendance at Senior Management meetings</p>	<p>To continue to build on my knowledge of all relevant policies and procedures</p>	<p>Ongoing</p>

**Signed** (Registrant).....  
**Signed Line Manager/Mentor** (if available)  
 .....

# PRTL Submission Form

Full name:

Employer name (if in employment):

Registration Number:

Summary of Work Role (maximum 500 words)

Total words: 400

I am employed as a Senior Social Worker in a Family Support and Intervention Team. I have been based in this Team for 19 years starting as a newly qualified Social Worker and then progressing to a Senior Practitioner. I have been a Senior Social Worker since 2011.

I work within a small but busy FSIT and have responsibility for the management of 1 Senior Practitioner, 4 Social Workers and a Social Work Assistant. I also supervise 2 Social Workers in a MASTS team in relation to the development of their Social Work practice and skills. On an ongoing basis the Team offers student Social Work placements with either myself or one of the Social Workers acting as on-site supervisor.

The team works with families where the children's needs are reviewed under the Family Support Process, Child Protection Process and on occasions the Looked After Children Review Process. Referrals will be transferred directly from the Central Gateway Team or other Trust areas. I have direct responsibility within my role of the allocation of these referrals in a timely and effective manner and implementing the Management of Unallocated Policy when necessary.

The delivery of an efficient, effective and safe service is key to my role and this requires the effective development and implementation of adequate systems. There is a clear and effective Family Support process in place in addition to the Child Protection processes. I chair all Core Group Meetings and Family Support Meetings.

Supervision of staff is provided in accordance with agency policy and procedures and this is key in ensuring that staff are able to reflect on their own practice; are accessing training to promote their own learning and development and are able to demonstrate accountability in their practice. High standards of accountability are promoted in my role.

Working within the Trust's Governance framework and the implementation of all agency policies and procedures is key in all areas of my daily practice and

being a role model giving leadership and support to all team members. Decision making is also a key requirement in day to day practice and this is in supervision with Social Work Services Manager.

FSIT is based in quite a rural community and liaising with both statutory agencies and community organisations is key in all areas of my work. I attend Locality Partnership meetings and have established close networks with a number of community organisations.

## **PRTL Submission**

Personal Statement (Page1) (Maximum 1500 words):

*This should demonstrate that you have evaluated your learning and describe how you met standards 3 and 4. Additional space is provided on pages 20 and 21.*

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Total words: 1228

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## PRTL Submission

Personal Statement (Page 2) (Maximum 1500 words):

Total words: 1227

I have been employed in FSIT now for 19 years and it is within this team that I can fully identify how:

'Social Work engages people and structures to address life challenges and enhance well-being' (Global Definition of Social Work).

Working with families to enhance parenting to promote better outcomes for children is a strong motivating factor for me.

Being professionally accountable and having a suitable level of expertise, skills and knowledge has required learning on an ongoing basis and always being fully informed of any new policies and procedures. In addition to specific training events I feel that Supervision and attendance at Senior Managements meetings are very relevant to promote my ongoing professional development.

In reflecting on my experience, practice and learning I can identify that I have high standards and strive for high quality practice with the view that my own good practice can enable team members to adopt their own high standards of conduct and practice. It is this standard that can achieve better service user outcomes.

The areas of Family Support and Child Protection are challenging and increasingly involve supporting service users to have a right in taking control over their own lives and having the ability to make informed choices. This includes helping them to identify and manage potential and actual risks to themselves and others.

An area of learning that I have a specific interest in is Safe Care Planning. Whilst there was a specific training event I attended, Safe Care Plans have been a key theme in many others to include for example Child Protection thresholding training and Domestic Violence training. I feel Safe Care Plans are a key example of, 'Working in partnership to promote the active participation of service users and carers in all aspects of decisions and actions affecting their lives'. (Standards of Code and Practice for Social Workers).

In reflecting on the purpose of Safe Care Plans I feel these are an effective tool to identify behaviours and environments that present potential risk of harm to specific children in a family. The training has very much highlighted to me the clear benefits of setting out in clear language and in partnership with parents the steps needed to reduce the risk to a child. A Safe Care Plan cannot be imposed by the Trust or it can be seen in isolation from a family and in my practice I promote these being completed in partnership with a family with the service user being empowered to communicate their views.

An example of a family where a Safe Care Plan was agreed and adopted by a family:

"Ms. A was a victim of a very serious incident of domestic violence perpetrated by Mr. X and in the presence of baby A. Mr. X was intoxicated when this took place. Ms. A did not wish to pursue a formal complaint; however the Trust had clear safeguarding concerns."

The initial contact with the family was to complete a clear assessment of risk to baby A and to have the necessary safeguards in place to ensure baby A could be protected from significant harm. Assessment is a key tool in Social Worker and the UNOCINI highlights the needs, strengths, risk and protective factors that is also in written form for the family. The skills of listening, communicating, having empathy, being able to appropriately challenge and dealing with anger were all required during my input with this specific family. Listening to the needs of Ms. A and her fear and anxiety re her safety and her baby's safety and having the ability to safely challenge Mr. X and respond effectively to his anger was required. Using persistence and assertiveness appropriately was required for me. I was able to effectively respond to Mr. X's anger and communicate the Child Protection risks to baby A if parents were together with baby prior to an assessment taking place re the safety of this. I feel I was able to empower them to reach an agreement that ensured that the care provided to baby A was safe.

I feel that Ms. A and Mr. X were engaged fully in the formulation of the plan and were able to reach an agreement that they should not be together in the presence of baby A until further assessment. Safe Care Plans, as also outlined in the training should be proportionate to identified risks and it was not proportionate to stipulate that Ms. A and Mr. X should not be together if baby A was not present. Whilst the family's right to private family life was considered, safeguarding baby A was the priority. Safe Care Plans are an indication of the parent's level of compliance and in this situation parents were co-operative.

This Plan did work effectively and Mr. X agreed to see baby A when a Social Worker was present. Ms. A and Mr. X were well informed of the Child Protection concerns and the safeguards deemed necessary. Having the ability to work with this family in a respectful way whilst challenging Mr. X's behaviour was achieved effectively.

I consider that Safe Care Plans cannot be the sole document of the Trust and have ensured that the team is very aware of the need to adopt a practice of sharing these with other professionals involved who can have a role then in monitoring their implementation and the effectiveness of these. A key lesson to be learnt in almost all Serious Case Reviews is the importance of multi-agency working and the Public Health Interface meetings I attend allows for open discussion re such plans being implemented and promotes timely and effective liaison.

The outcome for this family was that baby A was protected from significant harm. Further incidents did take place in the community when Mr. X was violent, however this was not with Ms. A or baby A present but would have clearly placed baby A at risk if he had been. Clearly communicating the risks, outlining the expectations of Ms. A in her role as

protector and with a written agreement as to the Trust's expectations and legal implications if this plan was breached allowed Ms. A and Mr. X to take the necessary steps. I feel that building on Ms A's social networks and connecting her to community supports to include Women's Aid empowered her in making safe decisions. My attendances at Locality Meetings have been an important forum for learning about such resources to include therapeutic support services that were of benefit to Ms. A.

Ms. A did not reconcile with Mr. X and was able to cope positively in her parenting of baby A to the point that I was confident that her priority was to protect him and Social Work involvement closed in a planned way.

Whilst not relevant to this specific case it is important to highlight that when working with Ethnic Minority families Safe Care Plans should be communicated with families with an interpreter present and should be translated to their own language and training also highlighted the need for this.

I have reflected on this specific piece of learning as I feel this evidences the importance of making judgements about needs, risks and protective factors that then informed planning whilst balancing service users' rights and responsibilities. Having a clear knowledge of policies, procedures and legislation that underpins practice is essential.

## PRTL Submission

### Summary of PRTL Activities

<b>Date</b>	<b>Duration (hours)</b>	<b>Brief description of activity</b>
04.10.17 07.09.17 11.04.17 20.02.17 20.01.17	22 hours	Building Better Future Assessment Training - Training on this model - Assessing and Enhancing parenting Capacity in Child Protection. FSIT is pilot for this new assessment module.
28.09.17	3 hours	Reflective Forum
12.09.17 12.06.17 13.03.17	12 hours	Attendance at SSW/SWSM meetings - this provides an important opportunity to learn about new developments within the Trust that can also then be shared with the Team - recent examples are presentation re Outcome Star Model; PATT placements/ Strengthening Communities Workshops; Trust's Business Plan; NIECR
13.09.17 21.03.17	4 hours	Public Health Nursing Interface meetings - locality based and attended by SSW and Senior Management in FSIT and Nursing to discuss any new developments in both; learning experiences and any interface issues

21.06.17	4 hours	Child Protection Pathway Assessments Blue Screen - I am also a nominated superuser in these
28.04.17	4 hours	Strengthening Families Workshop - focusing on interface with community resources
10.03.17	5 hours	Child Care Conference
09.02.17	2 hours	Safe Care Plans training
30.01.17	7 hours	Child Protection Workshop
17.01.17	4 hours	Child Protection Workshop
2017	24 hours	Supervision with SWSM
2017	10 hours	Team Meetings
06.12.16	2 hours	Joint Protocol Manager's Training
17.11.16	3 hours	POPI training
24.10.16	2 hours	Thresholding Workshop
17.10.16	3 hours	Bruising - pre-mobile babies
14.10.16	3 hours	Child Protection thresholding
04.04.16	3 hours	UNOCINI Project Meeting
03.03.16	7 hours	Child sexual Exploitation Training
12.12.16 12.09.16 13.06.16 14.03.16 05.02.16	20 hours	Senior Social Worker/SWSM Meetings
03.11.15	3 hours	CSE Risk assessments
12.10.15	2 hours	Supporting Family Strategy
09.06.15	2 hours	Family Strategy Support Workshop
20.04.15	2 hours	Responding to Child Abduction training
15.04.15	6 hours	Domestic Violence Risk Assessment training
28.01.17 21.01.15	6 hours	Specialist Domestic Violence Risk assessment training
2017	30+ hours	Reading to include Serious Case Reviews that I would have a particular interest in re lessons to be learnt.

**Total training and learning for period of registration**

**Total Hours:**

**Registrant Declaration**

I confirm that I have undertaken the activities recorded on this form and that the details I have provided are accurate. I understand that failure to meet Post Registration Training and Learning Requirements, or the provision of false information in relation to meeting these requirements, may be considered by the Northern Ireland Social Care Council as misconduct.

**Signed (Registrant):**