DfE Project 2A

User research into social worker inputted data to CMS

30 November 2023

A collaboration between Essex County Council, Camden Council, Croydon Council, Sutton Council and Data to Insight (East Sussex County Council)

Report written by Dr Niamh O'Brien and Faye Acton (Anglia Ruskin University)

User Researchers: Monica Ferraro and Nel Mathams

Contact for enquiries: Chloe McSweeney (chloe.mcsweeney@essex.gov.uk)

Contents

Acronyms

ARU: Anglia Ruskin University

CiCC: Children in Care Council

CLA: Children Looked After

CMS: Case Management System

CSC: Children's Social Care

D2I: Data to Insight

DfE: Department for Education

ECC: Essex County Council

LA: Local Authority

PA: Personal Adviser

ICO: Information Commissioner's Office

IRO: Independent Reviewing Officer

SW: Social Worker

Report structure

This report is presented in three distinct sections:

Section 1: Executive summary

Presents an overview of the key findings and insights from the project.

Section 2: Key messages and recommendations

Presents the main take-aways from the study. These key messages and recommendations are embedded in the research findings and in steering group meetings and monthly show and tells organised by the Department for Education.

Section 3: Main report

Details the research process, findings, and conclusion from the study.

Section 1: Executive summary

This report outlines a research project commissioned by the Department for Education (DfE). It addresses point two of the DfE's data and digital priorities as part of their Children's Social Care (CSC) Data and Digital Solutions Fund (DDSF):

> **"Improving case management systems (CMS) to reduce burdens on the frontline and support practice."**

The aim of the project was to produce evidence to:

- help the DfE think about how recording could be made less burdensome and time-consuming for social workers
- understand in more detail what information and data social workers are recording, and how social workers' data recording is impacting their practice
- understand more about the value of the information and data that social workers record through their CMS (to them, the children, young people, and families they work with, and to others)
- understand whether there might be ways to gather information and data that is of benefit to the wider CSC system in a way that reduces the recording burden on social workers and makes it easier to design CMS that support good social work practice

A joint bid to undertake this work was written by Essex County Council, three London Borough Councils - Camden, Croydon and Sutton, and Data to Insight (D2I). User researchers were employed to recruit participants and carry out the research. Anglia Ruskin University (ARU) joined this consortium later to undertake in-depth data analysis and develop the report.

The following four research questions developed by the DfE for this project were subsequently addressed:

1. Whether social workers do or do not consider the data items helpful to record in their work with children and families?
2. If the data item is considered not helpful for a social worker to record – why is this?
3. If the item is considered not helpful for a social worker to record, does it nonetheless contain information that is helpful to others in the local authority (LA), such as service managers or audit teams? Why is this?
4. Whether the item is 'local' data, statutory data, or Ofsted Annex A data (with any additional categories of data also specified); and for each local data item, why it is being recorded?

Research design and methodology

This research project was divided into three phases:

1. Development of a data matrix by D2I
2. User research to understand CSC workers' experiences of working with their CMS data entry points, including:
    - Focus groups and individual interviews with practitioners

    - Individual interviews with data consumers
3. Interviews with care experienced young people in one LA through a sub-project called 'Missing Chapters'

Practice context

The four participating LAs are all rated as good or outstanding by Ofsted. They have varied practice contexts whereby they use differently configured CMS, follow different practice models, and have differing levels of business support.

Findings

The below presents the high-level findings from across the dataset drawing on the data matrix and qualitative research methods outlined above.

Data matrix

Across the forms looked at during the research, 1,575 data fields were evaluated. Of these, 1,497 items are collected as 'local' data. However, each LA collects different types of local data; only 38 of the 1,497 local data items are collected by all four participating LAs. The main and most important insight emerging from the project is that all data items collected are helpful. All information collected is important and directly helps practitioners and other colleagues within the LA to support children, young people, and their families, throughout their care journeys. On occasions when data items are considered unhelpful, it is usually because they are duplicated, or the language/guidance/design is not user friendly.

Theme 1: Understanding which data is helpful for practitioners

One of the main research goals of the project was to understand whether practitioners do or do not consider the data items collected helpful to record in their work with children and families. The research shows that data items are considered helpful by practitioners to understand the child, young person, and wider family. Data consumers reported that the forms provide enough information for them and enable them to see the bigger picture as well as focus on smaller sections of information needed.

Specific forms and data items are considered helpful for record-keeping purposes; for the child, for example, if they choose to access their file they can see why certain decisions were made; for practitioners to ensure they are recording the necessary information and as a reminder of anything that needs to be followed up; for statutory recording; for an audit trail of the decision-making and planning processes surrounding a child/young person; and for evaluating and monitoring workload.

Additional helpful aspects of some forms and data items relate to the structure and types of questions asked. For example, practitioners identified subjectivity and flexibility as helpful.

There was a consensus between all participants, that the forms supported their ability to understand a child/young person's journey through care and the relationships they have both with those involved in the CSC system and beyond.

The Missing Chapters report shows that children and young people believe that record keeping about their lives should reflect their lives and who they are. They placed a higher importance on this than the business and practice side of record keeping. Most said they do not know what information practitioners write about them.

Theme 2: Understanding problems with recording and reporting data

No item was considered ‘not helpful’ to record by practitioners in their work with children and families, rather specific data items are considered useful to collect but unhelpful in certain contexts primarily due to duplication and the use of language, guidance, and design.

Duplication is problematic for the following reasons: when the same information that does not change is requested more than once; the data item is collected twice within the same form; or the same information is collected in more than one form.

Language, guidance, and design can be unhelpful when forms and case notes are written using jargon and terminology not accessible to other practitioners or children and young people. In addition, practitioners do not always understand the wording of some questions and what information they are required to collect for specific data items. The design of the form and the order of the questions asked within the same form do not flow naturally, often not making sense to practitioners.

The Missing Chapters research reiterates the importance of using jargon free language so children and young people can understand what was written about them should they access their records.

Much of the information collected about a child or young person is collected through a series of closed questions, drop-down lists and scoring questions. Many participants stated that it is not always possible to capture the context of a meeting with a child or young person in this way and that conversations are needed to support this data.

The data reported by practitioners is intended to meet both their frontline needs and the needs of those consuming the data for performance management, local strategic decision-making, or national reporting purposes. Whilst practitioners want more contextual information, the data consumers need some data that the practitioners do not.

Sometimes it is not clear how much information needs to be recorded by practitioners. Some record too much while others too little. Data consumers regard this as an issue which needs to be addressed because they want to see the right and appropriate level of information including practitioner reflections.

Three of the participating LAs use the same CMS, but they have been set up differently and are, therefore, used in different ways. Although no usability testing, reviews or accessibility testing were carried out during the research, practitioners reported problems using their organisation’s CMS. Many issues were reported, including confusing workflows and not being able to update a case or complete a task if somebody else was inputting to the same case.

Practitioners reported that at times the forms can redirect the conversation and not focus on the issue for that child/young person at the time. Against a backdrop of high caseloads and tight deadlines, this has been reported as burdensome by some practitioners.

Theme 3: Data we do not collect that could be useful

At the outset of the research, it was thought that a secondary list of data items could be collated to include information that is not currently recorded but which practitioners feel should be. During the research, one or two practitioners suggested types of information which could potentially be helpful to collect, but there was not a unanimous feeling among those interviewed that valuable data was missing from forms or not being recorded.

Although all data items were considered helpful, practitioners often felt overwhelmed at the volume of information they are expected to collect. The data matrix shows that most data items were identified as 'local' data. This finding shows that much of the data is required by LAs and not specifically for statutory returns. However, much of what is collected feeds the statutory returns. This data has to be analysed in different ways to understand the final data items submitted on the statutory returns. For example, to understand the rate of completion of the initial health assessments requires many dates to be collected, clarified and analysed between the social care systems and health systems. This is largely a manual task. In our interviews with practitioners and data consumers, we found that these numbers do not convey the bigger picture, including the complexity of cases.

The research shows that there is some information and data, specifically about education, health, immigration status, and missing episodes, which is recorded either by other teams within the same service, or by other government departments such as health, education, or the police, and might be missing from the child/young person's records. This is because it hasn't been shared or it has been uploaded to the CMS as an 'attachment' on the child/young person's file, either in Word or PDF documents. Information in documents saved in these formats is not easily findable, and the information contained within the documents cannot be searched. Consequently, practitioners spend a lot of time searching to find the information they need.

Practitioners and data consumers spoke about the need for a summary sheet or chronology to act as a cover sheet, providing an overview of key information contained in the form or overall file. In addition, a single form with static data such as name, surname and date of birth, as well as 'transactional data', was welcomed. Both could reduce the number of questions practitioners need to ask children and young people and allow them to only record information that is meaningful to that visit.

Often, practitioners are sent voice notes, WhatsApp messages, images and videos from children and young people and they want to be able to embed these into the forms and case notes as an accurate record of that child/young person's life and what is happening at different times. The Missing Chapters research found that children and young people consider photographs, films, and audio to be important things for adults to keep for them.

Theme 4: Information that is helpful to the wider local authority

Some practitioners were uncertain about the reasons why certain information is collected, but data consumers were able to explain how they use this information. Data consumers largely agreed with practitioners that duplication and language/guidance/design are the key reasons why certain data items are unhelpful. They felt that these items either need to be looked at in the forms or addressed via practice/training.

Most data items collected as 'local' data are collected for children and young people themselves, and for practitioners to help them learn the child's story, plan interventions, and provide the right support.

Practitioners acknowledged that some of the data they collect during their work with children, young people, and families may not appear relevant at the time, but it can be useful to somebody else in the wider LA, including senior managers and other practitioners. It is also useful to central government to support decisions regarding funding distribution and other broader decisions.

The research shows that practitioners are not always aware of why certain information is collected or why there is duplication. However, both practitioners and data consumers advocate that regardless of how the data is collected, the way the child's views and perspectives are recorded is paramount.

Theme 5: Voices of children and young people

The voices of children and young people emerged as a paramount concern for all involved in the recording of their records. Across the data, it was reiterated that the views and perspectives of children, young people and their families will continue to be muted within case records if jargon and complicated language is used without explanation.

Across the four LAs, participants were concerned about how the child or young person would feel about what is recorded about them and questioned the child-friendliness of the forms and whether they provide a comprehensive overview of that child or young person.

The Missing Chapters Project found that children and young people understand the need for professionals involved in their lives to share information about them, but they were concerned about who has access to this, including their teachers. Many felt their permission should be sought before their data is shared or that they should be informed about who is seeing this information.

The Missing Chapters study also found that most young people think that records should be structured with sections to help them to navigate through them. They feel their records should not be redacted and should include an accurate reflection of their lives.

Although technology could be viewed as an enabler of wider participation and of hearing the unique views and perspectives of children and young people, caution needs to be exercised around issues of coercion, particularly for those who do not want to have their voices recorded in this way.

Key messages

The following key messages emerged from the research and from conversations with CSC professionals in the project steering group and the project show & tells. These conversations contextualised the findings and helped to align them with practice. These key messages are expanded upon in section 2 of this report, alongside our full set of recommendations for the DfE and for LAs.

Key message 1: Record keeping is an essential part of 'good' social work

Links to theme 1, theme 2, theme 4

Record keeping is an essential part of 'good' social work practice and forms enable practitioners and others to understand a child/young person's journey through care. Most data items are considered helpful, and practitioners understand the value of collecting this data. However, the time it takes to collect all the necessary data needs to be acknowledged. It is not as straightforward as looking at the volume of data and information that practitioners have to record.

Key message 2: Duplication, jargon and design problems can be a blocker to collecting data

Links to theme 2, theme 3 and Missing Chapters

Forms or data items were considered unhelpful mainly due to duplication, language, guidance, or design. Although this research was not a CMS usability study, our data - coupled with wider discussions - highlight some indicative insights on system problems contributing to duplication, language, guidance, or design that the practitioners identified:

- Auto-populated data pulls through without timestamps or an audit trail
- Improved form building capabilities within CMS systems would make it easier for LAs to address issues of duplication and design
- Limited search functionality makes finding information difficult and adds to practitioner time pressure
- Functionality exists to upload most file types, but it is often not a user-friendly process. Enabling a variety of media to be easily and directly added to forms and not as attachments which sits outside of the case note would help LAs to design forms that better incorporate the voices of children and young people

Key message 3: The number of data items does not correlate to the amount of data recording taking place

Links to data matrix

The number of statutory data items is not indicative of the amount of data recording that takes place. Statutory data is not collected in isolation and a seemingly small addition to statutory data collection requirements can have a significant impact on the recording process in LAs. This can add to the burden on practitioners because they are often required to collect supporting data for evidence and audit trails.

Key message 4: The data serves multiple purposes, some of which do not align

Links to theme 1, theme 5, Missing Chapters

Records are for the child/young person and the adult they will become and, as such, should be written for them. Children and young people would like to be able to access and contribute to their records. However, the research also recognises that there are multiple consumers of a child’s record who all use it for different purposes. Often these purposes do not align, which makes it challenging to design forms that fulfil the needs of all consumers.

Key message 5: Access to records should be simpler

Links to Missing Chapters

Access to records should be simpler, with more support for those accessing them and have less redaction. This would enable young people to access more of their record and reduce the burden on the LA due to redaction.

Key message 6: There is an opportunity to collaborate with other research projects

Links to theme 5 and Missing Chapters

Collaboration and innovation – the findings of this research resonate with those from other projects such as MIRRA and Right to Your Own History (in Denmark). There is opportunity to collaborate with these projects, and others, to share and build on learning.

Recommendations for the Department for Education and local authorities based on these key messages are outlined in Section 2.

Conclusions

The research began with the premise that the volume of data recorded by practitioners is generally burdensome. Although this burden was evident, the research suggests that by improving the usability and functionality of CMS and the form design, including a review of language and terminology used by LAs, it could be reduced. We also found that large amounts of data is collected as supporting evidence for statutory and local data requirements. Alongside this, increasing business support resources available to social work practitioners would further reduce the burden of collection.

The research did not identify any data that was currently not being recorded that could add significant value if it was collected. Practitioners told us that the data they collect is useful and supports good social work practice and it ultimately provides an understanding of the child/young person and their care journey.

The research also crucially shows that the voices of children and young people are not always present within their care records. Practitioners, data consumers and young people acknowledged that these voices should be at the heart of good practice and recording. This research recommends that a co-produced set of data recording principles is developed between those who record the data, those who use the data, care experienced young people and their families. This can be achieved through an iterative and participatory approach that involves all users of this data.

Section 2: Key messages and recommendations

The following key messages and recommendations have been created using the data derived from all three phases of the research, and from conversations which took place with CSC professionals in the project steering group and the project show & tells. These conversations contextualised the findings and helped to align them with practice.

Key message 1: Record keeping is an essential part of 'good' social work

Links to theme 1, theme 2, theme 4

There was a consensus between all participants, regardless of role or responsibility, that record keeping is an essential part of 'good' social work practice. Participants acknowledged that forms support the ability to understand a child/young person's journey through care and the relationships they have, both with those involved in the CSC system and beyond. All the data and information collected on the forms was considered helpful by practitioners or by somebody else in the LA. Although they could see the value of the data and information, a perceived challenge was the length of time it takes to complete all the necessary data items across all the relevant forms. Understanding the recording burden on social workers is, therefore, not as straightforward as looking at the volume of data and information that they have to record.

Recommendations for DfE:

- The DfE's Improving CSC CMS project team should explore further the end-to-end process to better understand the recording burdens faced by social work practitioners. Look at the whole CSC 'ecosystem', including forms and workflows and:
    - Undertake high level service design activity, mapping out user journeys and visualising what happens in practice
    - Enable user-centred design practices to explore the CSC space. For example, as part of service design, explore user groups and their associated needs to visualise similarities and differences
- Provide opportunities and facilitate regional working groups to enable LAs to collaborate and share knowledge to establish what good practice looks like regardless of the CMS they use
- Review guidance regarding maximum caseload numbers, taking into account the complexity of cases and not just numbers

Recommendations for LAs:

- When designing new forms or making changes to existing forms, consider the whole CSC workflow including all the questions in previous forms to reduce repetition and benefit from pulling through existing information
- Follow user-centred design principles when reviewing and designing forms and at practice level
- Develop design standards for consistency in form design
- Provide admin support to help social work practitioners to source and enter data on the system, such as medical and dental appointment dates
- Work with other agencies (for example, health, police, education, Home Office) to help them understand their responsibilities and impact with regard to accurate and timely data recording in their areas, as they are all corporate parents

Key message 2: Duplication, jargon and design problems can be a blocker to collecting data

Links to theme 2, theme 3, theme 5 and Missing Chapters

When practitioners told us that a form was unhelpful, they told us it was unhelpful due to duplication, language, guidance, or design. This meant that practitioners' time was being taken up by recording the same thing more than once. This research was not a CMS usability study but, based on the focus groups and interviews with participants and contextualised by CSC professionals in the project steering group and the project show & tells, the following are some indicative insights on system problems that contribute to the issues of duplication, language, guidance, or design that users identified:

- Auto-populated data pulls through without timestamps or an audit trail. If it were possible to clearly see when data had last been updated, LAs could reduce some duplication by allowing more data to be auto populated on forms
- Form-building software is not intuitive to use. Improved form building capabilities within CMS systems would make it easier for LAs to address issues of duplication and design
- Limited search functionality. Having no overall search function or limited search criteria makes finding information difficult and contributes to existing information on the system (for example, uploaded PDFs) being recorded multiple times. Improved search functionality could, therefore, minimise duplication and reduce the time spent searching for documents and information
- Functionality exists to upload most file types, but it is often not a user-friendly process. Enabling voice notes and media, such as video messages and WhatsApp messages, to be easily and directly added to forms - and not as an attachment which sits outside of the case note - would help LAs to design forms that better incorporate the voice of the child

Recommendations for DfE:

- Design - Encourage CMS providers to follow the Government Digital Standard (GDS) Service Manual (https://www.gov.uk/service-manual/service-standard) to create user centred products and services
- Accessibility - Encourage CMS providers to follow the GDS Service Manual to make sure everyone can use their products and services and all accessibility requirements are met (https://www.gov.uk/service-manual/helping-people-to-use-your-service/testing-for-accessibility)
- Encourage CSC and other child-centred application suppliers to develop a default standard of connectivity to support the sharing of relevant data across a range of systems and suppliers
- Test the accessibility of the CMSs on the market and publish the results. Work with CMS providers to set and achieve a target date for becoming compliant with Web Content Accessibility Guidelines (WCAG) guidelines
- Enforce government digital standards (GDS) on CMS, test compliance with them and publish the results
- Work with existing CMS providers to explore the common system problems identified above in key message 2
- Develop national standardised guidance and a set of principles to determine the suitability of language on forms, including age appropriateness and trauma-informed language

Recommendations for LAs:

- Review the language and wording on forms to ensure that it is jargon free, age appropriate, and child/young person friendly

- Develop cross-system data sharing abilities for all systems used in the CSC landscape (for example, Youth Justice System, Education, Benefits) to improve purposeful sharing of relevant data and information across systems
- Gather feedback from practitioners on usability issues within the CMS (specific problems using the CMS). For example, this could be undertaken through a survey to a small number of users and consequently working with User-Centred Design teams within the LA
- Work with CMS developers to understand how to add media, such as voice notes, video messages and WhatsApp messages, directly to forms. It is important that media can be uploaded to the relevant part of a form and not just sit alongside it as an attachment on the case file. If the functionality does not exist or is not user-friendly, work together to develop this

Key message 3: The number of data items does not correlate to the amount of data recording taking place

Links to data matrix

The number of statutory data items is not indicative of the amount of data recording that takes place. Statutory data is collected alongside a vast amount of other important local data and information, much of which is scrutinised too. Statutory data is not collected in isolation and a seemingly small addition to statutory data collection requirements can have a significant impact on the recording process in LAs. This can add to the burden on practitioners because they are often required to collect supporting data for evidence and audit trails.

Recommendations for DfE:

Review the approach to statutory data changes to better involve the full range of LAs perspectives:

- Practice leads say they are not currently well-informed as to proposed changes – this might be improved by supporting LAs to communicate proposals more effectively internally, or by engaging directly with practice-focused membership groups, and/or by specifically requesting input from practice leads when communicating change proposals
- Data and performance leads say they are not currently engaged early in the data design process – this might be improved by sharing a roadmap of future data development areas, providing updates via sector networks as to future plans (prior to star chamber approval process), or specifically requesting input from local data and performance leads when communicating change proposals
- Local officers say that the rationale for new data collection (or decision not to collect) is not always clearly communicated – this might be improved by including rationale and/or discarded options in some targeted communications
- Local officers say that the current process for introducing new data items creates significant burden on data and systems teams, and that some new statutory data collections seem to arrive without legal basis to ensure supplier support, and that there is a high volume of new change on the horizon which is not currently clearly organised – this might be improved by sharing a roadmap of future data development areas, and/or reviewing the current process to ensure it suits its purpose, and/or exploring options for ensuring LAs have capacity for adapting to new changes

Recommendations for LAs:

- Review the local data items on forms to check for relevancy to current practice and priorities and delete any data and information fields not used for an agreed period of time
- Revise CMS training regarding best practice to include good examples of recording, explain purpose of the forms used, set expectations of the data to be collected, and clarify the purpose of the local and statutory data which the forms capture
- Ensure an appropriate level of check and challenge is applied when considering local requests to add additional data and information fields to forms
- Provide monthly opportunities for practitioners within the LAs to provide feedback, share knowledge, experiences, concerns, and ask questions about the CMS (a free space where they can ask questions and do not feel judged). These opportunities could be extended to all agencies and practitioners working with the child. They could be in person, or facilitated by organising a space online where practitioners could share knowledge and examples of good practice, and ask questions

Key message 4: The data serves multiple purposes, some of which do not align

Links to theme 1, theme 5, and Missing Chapters

Records are for the child/young person and the adult they will become and as such should be written for them. Children and young people would like to be able to access and contribute to their records. However, the research also recognises that there are multiple consumers of a child's record who all use it for different purposes. Often these purposes do not align, which makes it challenging to design forms that fulfil the needs of all consumers.

Recommendations for DfE:

- Children in care and care leavers should have access to case management systems and be able to directly add to their records; no providers in the UK offer this. Encourage CMS providers to add functionalities to their products for children and young people to be able to add their own voice and/or viewpoints to the records
- Sponsor a pilot with a large reputable tech company to work with a large LA (or LAs) to develop software that gives young people appropriate access to their files and the ability to add to them
- Alongside the pilot, work with LAs to develop guidance for practitioners about ownership of files and how to navigate children and young people inputting directly into them to avoid this adding to the recording burden on social workers
- Set guidelines to ensure that Article 17 of the UNCRC (United Nations Convention on the Rights of the Child) Rights to Information are raised in every child's plan

Recommendations for LAs:

- Engage with Children in Care Councils to understand more about what is important for young people when understanding their records and accessing them
- Local authorities should develop a common set of writing principles for social workers and all professionals who contribute to records. The DfE can then enable and create a wider platform for these to be refined and shared

- Ensure that Article 17 of the UNCRC (United Nations Convention on the Rights of the Child) Rights to Information are raised in every child's plan
- Explore the dichotomy of consumer need with regard to the use of the various forms within workflows. Where possible, make clearer the purposes of forms, the links between them, and the contribution expectations of the different practitioners

Key message 5: Access to records should be simpler

Links to theme 5 and Missing Chapters

Access to records should be simpler, with more support for those accessing them and have less redaction. This would enable young people to access more of their records and reduce the burden on the LA caused by perceived redaction requirements.

Recommendations for DfE:

- Develop guidance which provides clear information to children in care and to care leavers about what they can access, when and how and setting out clear expectations of what records look like and the legislation which shapes this
- Work with the Information Commissioner's Office (ICO) to update data protection law to enable children in care and care leavers to have the same legislative rights to access support (including emotional support) as adopted children and adults when accessing their records

Recommendations for LAs:

- Work with Information Governance teams in each LA to ask them to review their policies when releasing subject access requests for young people
- Local authorities should engage with care leavers to develop what records should look like. It is important to consider how records are structured, including whether they are in date order, so it reads like a story
- Include access to records as part of the Care Leavers process and include guidance and support within pathway plans

Key message 6: There is an opportunity to collaborate with other research projects

Links to theme 5 and Missing Chapters

Collaboration and innovation – the findings of this research resonate with those from other projects such as MIRRA and Right to Your Own History (in Denmark), which consists of eight different sub-groups led by the Danish Museum of Welfare, University College Copenhagen, The Danish National Archives and the National Association for Current and Former Placements. There is opportunity to collaborate with these projects, and others, to share and build on learning.

Recommendations for DfE:

- Fund further collaborative work with LAs and other related projects, such as MIRRA project or Right to Your Own History, to join the dots, identify synergies and learn from one another

- Fund and enable research to collate insights from building tools, initiatives and products aimed at giving children and young people access to their records. Explore how these learnings can be built upon and develop new and innovative ideas based on the learning from previous work
- To ensure the learnings from this research remain relevant, return to them at regular intervals to refresh the findings

Recommendations for LAs:

- Support teams to be involved in multi authority and multi-national work to share and embed learning from previous and current projects
- Work with care experienced people to redevelop or reconceptualise forms with regard to question types, and ensure the child's voice is captured adequately

Section 3: Main report

1. Introduction

This report outlines a research project commissioned by the Department for Education (DfE) as part of their £7 million Children's Social Care (CSC) Data and Digital Solutions Fund (DDSF). This fund launched on 6 October 2022 and is running over two years with 11 projects on information sharing, data analytics, improving case management systems, and data improvement, with the aim of contributing to three data and digital priorities:

1. Improving CSC data collection and how it is shared to inform decision making
2. Improving case management systems (CMS) to reduce burdens on the frontline and support practice
3. Using technology to achieve frictionless sharing of information between safeguarding partners

The evidence gathered and products delivered by these projects will play a key part in delivering the DfE's ambition in this area.

Background

The DfE want to take a step forward in children's social care and enable better use of data and advances in technology to make significant progress for children and unlock better use of resources.

Recording of information and data is an important element of social work. It both provides information for decision-making and creates lasting records that help people with care experience make sense of their life story.

Part of what social workers record is directly relevant to their work with the children and families on their caseload. However, social workers also spend time recording information and data for wider audiences and purposes.

CMS are designed to support both social work with children and families and statutory data collection, but statutory data collection is often prioritised in how CMS are structured. This can get in the way of CMS supporting good social work practice.

To contribute to priority two above, the DfE commissioned the project reported here to explore, through user research, recording practices regarding the data social workers input to CMS.

The inclusion criteria meant that only local authorities (LA) rated as good or outstanding by Ofsted were eligible to lead the work.

The DfE commissioned both Essex County Council and Leeds City Council to lead on the above project. Essex focused on Children Looked After (CLA) pathways and Leeds focused on Children in Need and Child Protection pathways.

Essex County Council submitted a successful joint bid to undertake this work with three London Borough Councils - Camden, Croydon and Sutton, and Data to Insight (D2I). User researchers were employed to recruit participants and carry out the research. Anglia Ruskin University (ARU) joined this consortium later to undertake in-depth data analysis and develop the report.

Research goals

The aim of the project given by the DfE was to produce evidence to:

- help the DfE think about how recording could be made less burdensome and time-consuming for social workers
- understand in more detail what information and data social workers are recording, and how social workers' data recording is impacting their practice
- understand more about the value of the information and data that social workers record through their CMS (to them, the children, young people, and families they work with, and to others)
- understand whether there might be ways to gather information and data that is of benefit to the wider CSC system in a way that reduces the recording burden on social workers and makes it easier to design CMS that support good social work practice

When commissioning the project, the DfE suggested the following assumptions regarding social worker data recording value and potential burdens to be tested through the research:

1. It is at least partly <u>what</u> data collection is required, and the volume of that, which is adding to social worker burden
2. Some statutory data may be offering low value to practitioners (and wider LA consumers) and therefore might be a candidate for cutting
3. There might be potential for data, that is not directly helpful to social workers in their role, to be collected some other way
4. There is data <u>not</u> being recorded nationally that could add value if it was
5. Local perceptions of what national bodies expect to be recorded (over and above the clear 903 and Annex A requirements) could be driving excessive data collection

To address these assumptions the DfE developed the following four questions which have been addressed through the research project:

1. Whether social workers do or do not consider the item helpful to record in their work with children and families?
2. If the item is considered not helpful to a social worker – why is this?
3. If the item is considered not helpful to a social worker, does it nonetheless contain information that is helpful to others in the local authority, such as service managers or audit teams? Why is this?
4. Whether the item is 'local' data, statutory data, or Ofsted Annex A data (with any additional categories of data specified); and for each local data item, why it is being recorded?

2. Research design and methodology

How the research was conducted

This research project was conducted across four LAs in England and was divided into three phases, with different groups of researchers, organisations and participants contributing to different phases. These included:

1. Development of a data matrix by D2I
2. User research to understand CSC workers' experiences of working with their CMS data entry points, including:
    - Focus groups and individual interviews with practitioners
    - Individual interviews with data consumers
3. Interviews with care experienced young people in one LA through a sub-project called 'Missing Chapters'

The research team included:

- Leadership from the lead LA who was successful in securing the bid from the DfE
- User researchers recruited through the lead LA
- Data to Insight
- Service leads from the other three LAs
- Academic researchers from Anglia Ruskin University

The full team formed a steering group that guided and shaped the research as it evolved. The group met online monthly to discuss the direction of the research, agree on approaches for data collection and analysis, and assess how the objectives were being met.

In addition to these meetings, monthly online 'show and tell' meetings organised by the DfE took place to share good practice between this project and the one led by Leeds. Key stakeholders from the DfE, partner organisations and the two project teams attended. The purpose of the show and tell meetings was to discuss the research process and emerging findings from each project and to provide a steer on the direction of the research.

Research phases and methods

The three phases of the research adopted different methods, which included a mixture of qualitative and quantitative approaches.

Phase 1: Developing a data matrix

In phase one of the research, D2I developed a data matrix in a Microsoft Excel workbook. It was created by analysing specific forms related to CLA within the two Case Management Systems (CMS), Liquid Logic (used in one LA) and Mosaic (used in three LAs). It is worth noting that although three of the LAs use the same system, each has set it up differently and, therefore, there is variation in the way each of them uses the system.

D2I produced a data matrix (appendix one) that details every data item on every form provided by the four participating LAs which they use in relation to their work with CLA. The data matrix had three intended outcomes:

1. To identify and group data items which gather the same information for the same purpose but may be named differently across the four LAs
2. To provide a field-level overview of reasons for collecting particular data items
3. To enable field-level comparison of the data items and collection mechanisms across each of the four LAs

The data matrix lists 1,575 data items from 44 different forms used by practitioners to collect information about children, young people, and their families. Each LA operates differently and has a different workflow for their CLA forms, which means that the forms do not align across the four participating LAs.

Considering the extent of variation between LAs' forms, it was not possible to create the data matrix by matching data items form to form. Matching form to form would have been possible if only key forms, such as pathway plans, CLA reviews, and care plans, had been used. Instead, the data matrix was created by mapping together the data items contained within the forms, which were then put into categories with similar items placed in the same category.

For further details on the data matrix, how it was created and how it has been structured, please see appendix one.

Phase 2: Understanding children's social care workers' experiences of using case management systems

Phase two of the research involved qualitative data collection with members of the CSC teams (practitioners) across the four LAs to gather their experiences of using their case management systems.

Two data collection methods were used: face-to-face focus groups (Barbour and Barbour, 2018) and online individual interviews (O'Connor and Madge, 2017) through Microsoft Teams.

A final round of individual online interviews took place with professionals in the LAs who do not directly input data into the CMS but access and use the data contained in it (data consumers). Data consumption spans numerous activities from interacting directly with the CMS to extract specific data to working with dashboards and performance reports to interpret it.

The qualitative data collection was carried out by two user researchers from the lead LA.

Focus Groups

The user researchers purposively selected practitioners (Morris et al., 2017) with specific roles in each LA to ensure the representation of those collecting the data first-hand. These participants included social workers and student social workers, personal advisers, independent review officers (IROs), service managers and team managers (please see appendix two for a full list of roles and their main user needs). Contact was made with each LA requesting participant representation from the four identified groups. 17 individuals took part in a total of four focus group sessions; one focus group in each LA.

Focus groups began with an icebreaker activity and agreeing on ground rules for discussion, such as listening to each other, taking turns to speak and respecting confidentiality and different points of view. The sessions each lasted one hour and were audio-recorded with the permission of the participants (Greenwood et al., 2016). The participants were asked to bring with them forms which they found particularly helpful in their role and forms which they found were less helpful to use. In total, 17 forms were discussed. The user researchers supported the discussion to explore the particular reasons as to why the forms were helpful or unhelpful and also looked at each field on the forms in more detail. After each focus group, the participants were thanked for their time and for sharing their experiences, and were reminded that they could get in touch with the user researchers if they had any questions or concerns (O'Brien and Dadswell, 2020).

Following the focus groups, researchers from Anglia Ruskin University conducted a provisional thematic analysis to inform the questions and exploration focus of the second stage of phase two; the individual interviews with CSC workers.

Individual interviews with practitioners

Individual online interviews took place with 50 practitioners across the four LAs. Professional groups included child social workers, personal advisers, independent reviewing officers, team managers, heads of service and heads of corporate planning. Additionally, director level professionals were included, which provided helpful context for the data consumer phase of the research (please see appendix two for a full list of roles and their main user needs). Similar to the focus group recruitment strategy, contact was made with each LA requesting participants from the six identified user groups to take part. Interviews were subsequently arranged.

Interviews were semi-structured (Kallio et al., 2016), conducted online via Microsoft Teams (Al Balushi, 2016) and lasted for approximately one hour. In the first half of the interview, open questions were used to learn more about the participants' daily jobs, their main goals and focus, internal processes and tools used, their perceptions regarding the most and least valuable information they collect, thoughts about information that is not collected but should be and ideas for other ways of recording and collecting information other than text. In the second half of the interview, participants were asked to choose the most helpful form they use in their practice with regards to CLA. They were asked to describe the form and explain when they use it, and the reason why they consider it most helpful. The user researcher opened a blank copy of the chosen form and shared their screen. Closed questions were then used to explore the form in detail and understand if each data item collected is helpful or not, and why. The user researcher annotated the forms digitally as the discussions evolved.

It is important to note that although a blank form was opened, the user researchers were not able to do this directly in the CMS system, due to data protection regulations. The forms were, therefore, downloaded from the system and in some cases were in the process of being re-designed for improvement purposes.

Due to using a 'non-working' form there was sometimes confusion regarding which items were auto populated and where a response to one question led to additional questions opening.

Following the interviews, user researchers worked through the findings to establish where more information was needed and identified appropriate professionals who could provide additional information to fill any gaps in understanding identified during the practitioner interviews. Those considered 'consumers of the data' were thus identified for semi-structured interviews and the same recruitment process was followed. We refer to this group as 'data consumers' and details are given below.

Individual interviews with data consumers
This round of interviews was carried out online with 18 professionals across the four LAs. Professional groups interviewed included heads for safeguarding and quality assurance, heads of performance and business intelligence, governance and performance development managers, data and business managers, service managers, team managers, heads of service, directors, and business managers (please see appendix two for a list of all role types and their main user needs).

The interviews lasted for approximately one hour and were split into two parts. In the first half, a semi-structured approach was taken using open questions to understand the role of the data consumer, including questions to understand how and why they use the data and how they measure the quality of the service. In the second half, the interviews focused on reviewing the anonymised annotated forms from the interviews with the practitioners to seek data consumers' views on the data items practitioners identified as unhelpful.

Phase 3: Missing Chapters project - Interviews with young people by project workers

Phase 3 of the research, conducted only in the lead LA, took the form of peer research. This is a participatory method in which people with lived experience of the issue being studied take part in directing and conducting the research (Yang and Dibb, 2020). It aims to empower people to affect positive change by participating in research on their own communities (Lushey, 2017; O'Brien and Doyle, 2023). Three project workers were recruited by the lead LA to lead this phase of the research. All three were care leavers, meaning that they have a lived experience of being in the care system. The project workers collaborated with the Children in Care Council (CiCC) to enable the voices of children and young people directly impacted by recording practices to be heard.

The three project workers were provided with an intensive two-day research skills training programme with the academic researchers from ARU. Additional training and continuous support were also provided by members of the Involvement team at the lead LA to prepare them for undertaking qualitative research with children and young people. ARU researchers supported the project workers in the data analysis aspect of the work with a further session to guide and model the process of coding data and developing themes.

Two of the project workers, alongside other members of the CSC team, conducted face-to-face semi-structured qualitative interviews with young people in care (Yang and Dibb,2020) which focused on their knowledge and understanding of the information collected and recorded about them and their experiences and views of record keeping. The interviews took place during the 'Its My Life' festival which has been running for 25 years. The festival, which is open to children and young people in care in the lead LA, runs across five days in the school summer holidays and provides opportunities to come together with other children and young people from similar backgrounds, take part in activities and group discussions to have their say on issues regarding being in care.

Eighty-three children and young people took part in interview discussions across the five days, comprising:

- Care leavers: 18
- CLA aged 8 to 12 years: 12
- CLA aged 13 to 17 years: 32
- Children in Need/Child protection: 21

Over 100 children and young people took part in a voting exercise and spoke to team members informally. Data was recorded using handwritten notes and analysed using thematic analysis.

Following 'It's My Life', additional discussions were facilitated with care leavers via Zoom, and a question-and-answer session took place with managers and CSC staff. Approximately 20 to 25 CSC staff took part in the Missing Chapters data collection process.

One project worker worked alongside members of the Involvement team, researchers from Anglia Ruskin University and the user research team to thematically analyse the responses and create a report detailing the findings.

The full Missing Chapters report can be found in appendix three. Key insights from this work have been woven throughout the findings section of this report.

Ethical approval

Ethical approval was sought and granted both by the lead LA's research governance committee and the ARU School of Education and Social Care ethics panel to enable data collection and analysis to take place across phases one and two. The permission granted by the lead LA allowed user researchers and project workers to recruit participants and conduct data collection. The subsequent approval from ARU gave permission for the academic researchers to conduct an analysis of raw anonymised data to develop a high-level report. Consequently, all local authorities have been anonymised in this report using the codes LA1, LA2, LA3 and LA4 as appropriate.

3. Practice Context

This section provides an overview of the Children Looked After (CLA) practice context across the four local authorities involved in the research. It is important to note that CLA services are referred to differently across the LAs. Four different phrases can be seen below:

- Leaving Care and Children Looked After
- Children in Care (CiC)
- Children Looked After
- Looked After Children

For the purposes of this research, we are using the term 'Child Looked After' as used by the DfE, but in describing the context below, we use the language used by the individual LAs. The information provided in this section outlines the range of approaches and support across the LAs to provide an overview, rather than specific information for each LA.

The structure of Children Looked After services

The structure of LAs is dependent on a number of factors, including their size, the needs of their geographical areas and allocated funding.

Each LA has an overall director responsible for overseeing CLA practice and organising the local delivery of practice. Service managers and team leaders have responsibility for teams of practitioners each with their own caseloads.

There are a range of practitioners in CLA teams. Some of these include: senior practitioners, social workers, mental health coordinators, newly qualified social workers, personal assistants, occupational therapists, family support workers, play referral coordinators and business support workers.

Practice models

Each LA incorporates various theories and models of practice into their daily practice and underpinning ethos of the service.

Some LAs do not follow a prescribed practice model, instead they have a blended or hybrid approach between different types of practice; for example, between trauma informed practice, restorative practice and relationship-based practice. The blended approaches have a coherent theoretical grounding but also rely on an understanding of other factors. For example, family narratives; understanding how past experiences affect current attitude and behaviour and how work is carried out.

Relationship-based practice has six underpinning principles: strength-based approaches, trauma-informed practice, solution-focused brief intervention, systematic approaches, motivational interviewing and safe uncertainty (Mason, 1993). The aim of this practice model is to facilitate an environment for workers to be skilled and confident in their ability to confront, challenge and resolve when working with children, young people, and families.

For another LA the core premise of practice is that family is the best place for a child to thrive, develop and meet their potential. This practice model is based on avoiding 'transformation traps' whereby changes to practice are transient and not embedded as a way of being. It is recognised that relationships are fundamental to social work practice and the practice framework predicates this.

The practice model is not about collusive practice or minimising risks, it is about the whole system. Within the model, systemic practice is an overarching foundation, alongside several relationship-based techniques including strengthening families, restorative practice, and motivational interviewing.

Systemic practice enables practitioners to understand that children and families are in contextual relationships that shape their identity. Systemic practice posits that there is no single truth and that there are multiple ways of knowing the world. For practice this means that complexity is favoured over linearity in practitioners' understanding of children and families. With systemic practice there are six principles which are essential to social workers and their practice:

1. Relationships based – developing strong relationships between practitioners and families to make change
2. Evidence-based – using evidence-based interventions to support change
3. Strengths-based – doing more of what works and less of what doesn't, building on strengths
4. Self-reflective – thinking about own beliefs and values and their influence on practice
5. Confidently holding risk – whilst working with families to minimise risk through change
6. Supervision – Using supervision to generate ideas about how to make change

For one LA, the social work model of practice is based on a set of guiding principles and the core belief that the relationships between social workers and families are the key assets to understanding and being responsive to the pressures families are facing, to ensure positive change for children. The model seeks to make sense of the world through family relationships, focusing on the whole family system rather than individuals. Through a systemic approach, change can be achieved through exploring relationship patterns and understanding how they impact on children and their parents/carers.

Case Management Systems

The workflow/process flows for each LA vary considerably which, like the structure of teams, depends on many factors. However, each LA has a linear process flow with regard to how work moves through the team and where the input from various team members may be required.

Three out of four of the LAs involved in the research use Mosaic as their CMS and one other uses Liquid Logic. There is some flexibility in how the systems are set up and adaptations and customisations have been requested and implemented by some LAs.

Where the CMS systems have been customised, this is because they felt that the out-of-the-box functionality was too basic. In the last few years, they have tried to incorporate as much contextual formatting as possible. This is to try to only show the questions that practitioners need to complete based on the work they are doing, and to aid with mandatory data collection requirements.

One LA have implemented extensive customisation with regard to forms for CLA. Many have been simplified with the introduction of one form that pulls three together.

One LA has been able to configure profiles and set timescales for tasks, which team members they are allocated to, and which parts of a workflow need a manager to authorise. The forms that are in the pathways are provided by their specific CMS but are fully amendable. This allows the LA to add questions and alter the way in which they are answered; for example, remove everything to leave just a text box. They have also been able to create standalone forms and create customer-defined workflows where a non-standard pathway is needed that cannot be incorporated into existing forms. Some selection lists, such as reason for referral, can be edited, but generally nothing which is statutory and reportable for return.

One LA has almost moved completely from text box answers to selection fields such as radio buttons, drop down lists or tick boxes, and only use text boxes when 'other' has been selected. After selection occurs, a text box then appears, and a validation rule means that text box cannot be left empty. For qualitative information, there is a combination of text boxes and selection fields which they have tried to keep to a minimum.

Business support

LAs involved in the research were asked to comment on the level of business support their CLA teams receive. Business support can also be defined as administrative support.

Across the LAs there was a range of business support reported: from not having any, to limited support, and then to having a defined structure in place with varied responsibilities to support the wider CiC teams. Specific examples of these responsibilities from across the LAs are given below:

- Monitoring team inboxes and ensuring that appropriate responses are made, including submitting information and updating managers
- Processing weekly payments for those who do not have a bank account, through pre-paid cards or Payment Point vouchers
- Supporting Home Office ANNEX A returns submissions regarding Unaccompanied Asylum Seeking Children
- Raising quarterly purchase orders through the corporate payment system including setting up suppliers
- Issuing agreed finance requests for young people and staff
- Setting up and tracking young people’s allowances
- Providing support including organising, invites, minutes and filing of the minutes and other appropriate documentation
- Securely distributing Government Laptops to CLA and leaving care young people

There are many synergies in terms of findings from a recently published DfE research study (Johnson et al., 2023) which also mention paperwork, caseloads, duplication, turnover of staff and lack of administrative/business support as burdensome aspects of social work:

Over the five years of this longitudinal study, respondents have consistently cited excessive paperwork as one of the most time-consuming aspects of their work and a significant cause of stress. Respondents to the survey were asked an open question about admin support available to them in their current roles. Several respondents said that recording what happened to children during their involvement with Children's Services was an important part of the social workers role but that there were other admin and practical tasks that could safely be done by non-social workers.

Johnson et al., (2023) go into detail about the different types of tasks including more specialised admin tasks such as taking calls from families, answering questions and possible messages, carrying out standard checks and health checks for foster carers, preparing for analogies and court paperwork, which they felt could also be safely carried out by others and reduce pressure. This included recording direct contact they had with children and families and having support writing up documents involving social work analysis, such as case summaries, assessments and reports.

4. Findings

As explained in the introduction, only LAs with an Ofsted rating of good or outstanding were involved in this project. While this can be seen to be positive by drawing on the views of practice from higher-rated authorities, it is important to be aware that these LAs still face challenges with recording. The challenges and difficulties encountered by them could potentially be amplified in LAs who do not rate as highly.

4.1 Phase 1: Developing a data matrix

Key insights

- All data items and information collected is considered helpful by practitioners to record in their work with children, young people, and families
- Most data items are collected as 'local' data' but types of local data varies across LAs
- A small number of data items, 38 out of 1,575, is collected by all four participating LAs as local data

Qualitative feedback was collected for most of the data items listed in the data matrix. It is important to remember that we worked with a small sample of practitioners. Feedback was collected from only one practitioner for some data items. This means the insights presented here give a general overview of data and information collected by the four participating LAs. They are valid insights, but they are not statistically reliable.

The data matrix revealed that most data items, around 95%, are collected as 'local' data. The remaining 5% is collected as statutory data, for 903 returns, or for Ofsted Annex A or for both.

CSC professionals in each LA were asked to tag each local data item with the primary reason why it is collected locally. If applicable, they could tag it with a secondary reason too. Across all LAs, the top reason given for collecting local data items is to help social work practitioners and/or the child/young person.

The main and most important insight emerging from the project is that all information and data items collected are helpful. All information collected is important and directly helps practitioners and other colleagues within the LA supporting children, young people, and their families, throughout their care journeys. On occasions when data items are considered not helpful, it is usually because they are duplicated, or the language used is not user friendly.

Statutory data

A minority of data items included in the data matrix are collected as 'statutory data' for the 903 and/or Ofsted Annex A returns. Table 1 below shows the number of data items collected which can be considered as 903 data, Ofsted Annex A data, or both 903 and Ofsted Annex A data.

Table 1: Total number of data items collected by category

Categories of data items	Number by category	Percentage % of all data items
903	40	3%
Ofsted Annex A	20	1%
Both 903 + Annex A	18	1%
'Local' data	1,497	95%

Total number	**1,575**	

A total of 78 data items, out of 1,575 included in the data matrix, are categorised as 'statutory data' and collected as a statutory requirement.

Of these 78 data items, 21 are collected by all four participating LAs via the forms mapped onto the data matrix:

- 8 data items are collected for 903 (Table 2)
- 6 data items are collected for Ofsted Annex A (Table 3)
- 7 data items are collected for both 903 and Ofsted Annex A (Table 4)

The remaining statutory data items included in the data matrix, which appear to not be collected by some LAs, are stored in other parts of the CMS but not collected via the forms included in this project.

In general, practitioners found data items collected as 'statutory data' helpful in supporting children, young people, and their families.

Of the collected statutory data items, there are a small number that practitioners collect but for which they do not understand the reasons for collecting them. For example, 'Address' (item 11). The terms 'current address' and 'second address' are both used, making this confusing for practitioners. There is a need for either more guidance or for the language on the form to be improved.

Please refer to the data matrix in appendix one for more examples.

Table 2: Data items collected as '903' by all four participating LAs

Item number	Data Item	903	903 text
Item 11	Address	903	Home postcode
Item 32	Child's background, including reason for becoming looked after?	903	Reason for new episode of care
Item 419	Substance use	903	Substance misuse
Item 761	CLA proposed start date	903	Date Looked After Period is agreed to start
Item 771	Reason for placement change?	903	Reason for placement change
Item 784	CLA placement request type?	903	Placement Type
Item 791	CLA request placement address	903	Placement location/postcode
Item 1072	If not present at the CLA review, did the child not convey their views to the review in any way?	903	as above

Table 3: Data items collected as 'Ofsted Annex A' by all four participating LAs

Item number	Data Item	On Annex A, 903, Both or Neither?	Annex A text
Item 17	Was the child seen alone? (form relevant, not visits forms)	Annex A	Was the child seen alone
Item 142	SW - Team/Agency	Annex A	Allocated Team
Item 309	Accommodation type	Annex A	Accommodation type
Item 413	Disabilities	Annex A	Does the child have a disability?
Item 615	Specify permanency plan	Annex A	Child's permanence plan
Item 762	Date current placement started	Annex A	Start date of most recent placement

Table 4: Data items collected as 'Both: 903 and Ofsted Annex A' by all four participating LAs

Item number	Data Item	On Annex A, 903, Both or Neither?	Annex A text	903 text
Item 4	Date of Birth	Both Annex A & 903	DOB	DOB
Item 6	Gender	Both Annex A & 903	Sex	Sex
Item 9	ID	Both Annex A & 903	Child's Unique ID	Child's Unique ID
Item 14	Child's current legal status/is the child currently looked after?	Both Annex A & 903	Child's legal status	Child's legal status
Item 26	Ethnicity	Both Annex A & 903	Ethnicity	Ethnicity
Item 464	Date of health form/assessment completion?	Both Annex A & 903	Date of last health assessment	Date of last health assessment
Item 915	Placement location	Both Annex A & 903	Placement location	Placement location

Data items collected by all LAs as 'local' data

Table 5 below shows that there are 38 data items collected locally by all four LAs, but which are not collected as statutory data in either the 903 or Ofsted Annex A returns. Some of these data items appear very similar to those collected in the statutory returns but serve different purposes. For instance, 'Ethnic Identity' (item 27) is a 'local' data item, which is similar to the statutory data item 'Ethnicity' (item 26). While they are similar, 'Ethnic Identity' collects information that is more personal and specific to the child's experiences. It goes beyond just categorising ethnic groups (which 'Ethnicity' does) and may include more individualised information, such as religious persuasion, cultural and linguistic background, and racial origin. This is an example of where local data is collected to have a holistic view of the child/young person to provide the right support for them and meet their needs – something which the statutory data does not need to do.

When looking at the data items in table 5, we can see that these items often refer to practical considerations needed to care for the child that may flag up local procedures or considerations, but do not provide information about the quality of service provided that would be useful to collect in a statutory return. This includes data items related to a child's feelings about their situation, personal characteristics and identification, and their individual needs. These are the sorts of data items that are useful to people viewing each individual case holistically to help inform decisions, to social workers who need to understand how to best care for the child, and for the child themselves if they request to see their own care record.

Of these 38 data items, 24 are collected predominately for the practitioners and/or the child/young person (as shown in the final column of table 5 below). This reflects that the majority of data items collected as local data are collected directly for children and young people to help practitioners to support them.

Table 5: Data items which are collected locally by all four LAs

Item number	Data item	Collected for practitioners and/or child/young person
Item 1	First name	Yes
Item 2	Surname	Yes
Item 27	Ethnic identity	Yes
Item 29	Religion	Yes
Item 89	Child's vulnerability risks and what can be done to mitigate them?	
Item 105	Does the child have race, culture, language, interest, disability needs?	Yes
Item 106	Details of child's specific race, culture, language, interest, disability needs	Yes
Item 140	SW - Name	
Item 143	SW - Telephone	
Item 148	SW/Professional - Details	
Item 150	SW/Professional - Contact details	
Item 157	Carer / Keyworker - Name	
Item 158	Carer / Keyworker - Telephone	
Item 164	Independent Visitor/officer - Name	
Item 165	Independent Visitor/officer - Telephone	
Item 166	Independent Visitor/officer - Email	
Item 247	Does child save money?	Yes
Item 287	Financial arrangements for child	Yes
Item 305	Child happy with living place?	Yes
Item 327	Child in education/employment/training?	
Item 330	Current/proposed school name	Yes
Item 338	Child's development and education history	Yes
Item 350	Summary of EET needs	Yes

Item 432	Details and training for medical/clinical needs of child for carer	Yes
Item 442	Health or mental health issues?	Yes
Item 484	Contact (Who)	Yes
Item 520	People child is forbidden contact with, is the contact restricted by a court order?	Yes
Item 527	Detail any court orders relating to contact?	Yes
Item 651	Contingency plan for placement breakdown?	Yes
Item 662	Parent's views on placement plan?	Yes
Item 698	Overall plan for Child/Young Person?	Yes
Item 750	Why is a placement needed, what are its specific aims?	
Item 763	How long is the placement expected to last?	
Item 769	Reason for accommodation request?	
Item 806	Analysis for placement matching	Yes
Item 866	Placement Request: Outcome	Yes
Item 1002	Individual characteristics of the child/YP	Yes
Item 1033	Does the child have an Education Health Care Plan?	Yes

4.2 Phase 2: Understanding children's social care workers' experiences of using case management systems

This section predominantly focuses on the qualitative data collected with practitioners and data consumers. Insights from the data matrix are interwoven with the qualitative data to highlight examples from this data.

This section is split into five themes:

1. Understanding which data is helpful for practitioners
2. Understanding problems with recording and reporting data
3. Data we do not collect that could be useful
4. Information that is helpful to the wider local authority
5. Voices of children and young people

4.2.1 Theme 1: Understanding which data is helpful for practitioners

Key insights

- Data and information are collected for different reasons; for the child to capture their life story, for statutory returns purposes and for the practitioners to understand the child and their journey
- The main value of the recording process is how it supports practitioners to learn the child's journey through care, the rationale behind decisions which have been made, and plans for future interventions and care
- Specific forms were helpful as they support practitioners in learning the story of the child/young person. They highlight the child or young person's needs, views, and wishes, they give an overview of the child or young person at a specific time. They set out the overall objectives and timescales, they identify the services required to meet the child or young person's needs, and they are regularly reviewed at the CLA review

- The Missing Chapters report shows that children and young people believe that record keeping about their lives should reflect their lives and who they are. They placed a higher importance on this than the business and practice side of record keeping. Most said they do not know what information practitioners write about them
- Practitioners identified certain elements and tools on forms as particularly useful, such as observation boxes on visit forms
- The data items together make up a child's record and can be used to piece together history to understand an individual's past and current context

One of the main research goals of the project was to understand whether practitioners do or do not consider the data items collected helpful to record in their work with children, young people, and families. The research shows that data items are considered helpful by practitioners. They help to understand the child/young person's story, help build a holistic view of children's lives and build good relationships, plan interventions, provide the right care and support and engage in evaluation of practice and the service.

Practitioners across the four LAs selected different forms which they found specifically helpful to them. As these were personal choices of the participants, the forms chosen varied. The themes from these discussions are discussed below.

Understanding the child/young person and their family

There was agreement between practitioners that the recording of information and data is an important element of social work. User research revealed that the most important reason for collecting data and information is to be able to understand the child or young person's family situation, the child or young person's history, where they come from, why they are in care, their needs, likes, dislikes, wishes and their life experiences:

> "We collect information to help us understand the family situation or the children's situation, to be able to complete an analysis of what the next steps should be.... that's all part of our corporate parenting responsibility to make sure our children are being well looked after. It's looking holistically in lots of different ways." (Practitioner)

Most forms chosen were because, in the practitioner's view, they provided a holistic view of the child or young person. They were spoken about as being helpful as they support practitioners in learning the story of the child/young person. The forms all highlight the child or young person's needs, views, and wishes, and they give an overview of the child or young person at a specific time. They set out the overall objectives and timescales, they identify the services required to meet the child or young person's needs, and they are regularly reviewed at the CLA review:

> "I feel like those [forms] are a good sense of seeing where the child is. It goes through the different needs of the child, their independence, their health, their social wellbeing, it goes through money and finances and gives a good picture of where the child is at and what their ongoing needs are." (Practitioner)

Building a relationship with the child/young person is at the heart of social work practice. Data consumers reported that the forms provide enough information and enable them to see the bigger picture, as well as focus on smaller sections of information needed. They particularly liked that they support a holistic view of the child/young person:

> "[Form name] is most important [for] understanding the child's world and lived experiences. Photos are brilliant. When I have discussions with social workers, I always have the photo in front of me." (Practitioner)

Record Keeping

Data items were seen as useful for record keeping for various purposes:

- For the child or young person
- For the practitioners
- For statutory reporting purposes
- For decision-making and planning
- For evaluation and monitoring of workload

For the child or young person

Practitioners felt it is important to gather and record children and young people's views, especially with regard to their feelings and wishes. This is so that they can return to their file when they are older and understand the reasons why decisions were made. These records then help them reflect on their life, their experiences, and the journey they took.

Practitioners stated that they found forms which record information regarding visits to children and young people very helpful, especially when the content is written to the child, as it often provides contextual information:

> "We write everything to the child. So we'd be saying [name]'s there ...and we went out for coffee and you told me that this was really good in your life and this was a bit of an issue and you asked me to help with it." (Practitioner)

For practitioners

The records provide evidence that the right decisions were made at the time and provide an audit trail about what practitioners did. They also provide an update of what needs to be done and followed up on, and often remind practitioners if anything is missed:

> "I find what's really helpful from this is it's got its own box at the end for actions to be taken from that specific visit, and at the beginning the update with the actions from the last visit so that you can see that you are absolutely keeping on top of those actions. Or if there's any reasons why they've slipped or when they might be done at the wrong timescale, or if there's something that keeps coming up as an action to do each time, you can kind of track what's going on for that young person. I find that's really helpful." (Practitioner)

For statutory reporting purposes

The Children Act (1989) provides the legislation regarding the information and data that needs to be collected and when. Practitioners often go to court where they are asked to provide information not just about the child, but also about the family history. It was also recognised that statutory data is collected to report back to central government, including data such as health data and education data.

For decision-making and planning

Data is collected to support the process of making decisions about individual children/young people and to monitor the decisions made. Decisions can be assessed against the goals and outcomes for the child/young person and changes made if necessary.

Practitioners and data consumers agreed that the forms are helpful tools to be able to set and evaluate goals and objectives, as a tool for measurement and to be able to:

> "Provide good social work by supporting children and young people in focusing, achieving their best potentials, and having positive life experiences." (Practitioner)

Evaluation and monitoring of workload

Data and information contained in the records help managers to assess if children are seen within statutory timescales, monitor how practitioners manage their workload and determine if help is needed. They also help managers to assess if anything needs to change for the child or young person to receive the right care and support.

With regard to evaluation, it was spoken about not just in terms of evaluating goals and objectives but also evaluating practice:

> "If we don't record the information, how do we know that the outcomes for our care leavers are getting better or getting worse, if we have no form of information or data to evaluate or reconcile what our opinions and objectives are?" (Practitioner)

Data consumers use the information in forms to distribute regular and ad hoc reporting in a variety of formats, including dashboards, spreadsheets, slides, and Word documents. They also find the forms valuable for measuring different aspects of the CSC service. The forms on the system allow them to mine and explore data in different ways and look at measurement with a broad context, including monitoring best practice, identifying opportunities for improvement, and reporting on the progress of the service.

Questions

As well as whole forms, practitioners identified certain elements of forms and particular question types as useful. These included:

- Subjectivity – being able to convey detail and context in the data
- Flexibility – practitioners value being able to control how they input data
- Specific elements/tools – a variety of tools are used to gather data

Subjectivity

Questions which require a score to be assigned, such as identifying support needs on a scale of 1-10, were largely found to be unhelpful (discussed in theme 2 in the Data captured without context section) in providing information for quantitative purposes. However, what was found to be helpful is the discussion between the social worker and child/young person and assessing the level of need at that point in time, which this type of question generates:

> "Shows how the young person is progressing. It's not about making someone a number; it's about having the discussion. A numerical scale can be helpful in assessing need." (Practitioner)

Data consumers observed that these types of questions are subjective but felt they do not need to be seen as complicated. They pointed out that there is guidance to follow provided in the question.

Another subjective question is an open-ended question which asks the child/young person to provide feedback on the support they are receiving from their CSC team. Data consumers place value on these questions as, even if only a few responses are gained, it provides insights for the service.

An example of an open-ended question which both the practitioners and data consumers found to be helpful for service insights is one where practitioners are asked for their views regarding the support and care in place for the child/young person:

> "Highest context has to be practice; we need to know that we are doing good work." (Data consumer)

Flexibility

Forms with no flexibility in how they are used to input information were largely found to be unhelpful for practitioners. However, when they are flexible, practitioners highlighted this as being valuable to their practice of record keeping:

> "The good thing about this form is that you can select the sections you want to fill in and a lot of youngsters actually choose not to have that section in there." (Practitioner)

Specific elements/tools

Participants spoke about specific elements and tools which they find to be helpful and work well in helping practitioners to get a holistic view of the child or young person. Chronologies, for example, provide a timeline of significant events, key decisions made, and actions taken. They provide a 'road map' to help in identifying emerging patterns.

> "Chronologies definitely work well when it comes to prepare court cases and you need to know what the child's history is, and you need to go through it with a parent if a particular incident has taken place and you're trying to figure it out." (Practitioner)

Journey through care

There was a consensus between all participants, regardless of role or responsibility, that the forms support their ability to understand a child/young person's journey through care and the relationships they have both with those involved in the CSC system and beyond:

> "We have to know and understand the child's journey end to end. We have a helicopter view [because] seeing the bigger picture matters." (Data Consumer)

The data items together make up a child/young person's record and can be used to piece together history to understand an individual's past and current context:

> "When you're working with a child, something kind of clicks, and it's much easier if you can go back and look up the history of it. So, for example, I tend to look into a lot of the previous social workers notes. A lot of their statements I tend to use a lot because I'm in the looked after side and a lot of times those initial concerns came out of visits from let's say a child protection social worker". (Practitioner)

There was discussion about who the collected data is useful for and who it is used by. It is useful for the social workers themselves when taking on a new case, or reminding themselves of the details of a case, for practitioners with different roles and responsibilities in their team, for children and families to understand and to ensure the relevant support is put in place for them. Ultimately, data and information is reviewed by practitioners to enable them to understand the child or young person's journey though care:

> "If I get a new case, I often look at visit records first. That's normally the first place that I go to, to get a sense of how they're doing... the visit record's quite useful in terms of capturing that information." (Practitioner)

Finally, practitioners and data consumers were clear in understanding the impact that forms and paperwork can have. They highlighted specific paperwork as good examples of understanding the relationship that the child/young person has with their social worker and how they respond to them:

> "There's some fabulous examples of how children respond to it and have had the paperwork written to them." (Data consumer)

Missing Chapters Findings

When asked what they think social workers should be recording about them, children and young people commonly described building an understanding and picture of who the child is and how best to work with them. They placed a higher importance on this than the business and practice side of record keeping.

The majority of children in care and care leavers participating in this research said they do not know what information social workers or personal advisers write about them. When asked to consider why social workers write about them, children and young people broadly identified three categories: business and practice needs, to understand the child and for safeguarding purposes. However, few children and young people feel that social workers write and record for them which contradicts the view of practitioners in this research who spoke about ensuring that the child's record was kept for them to access later in life.

4.2.2 Theme 2: Understanding problems with recording and reporting data

Key insights

- No item was considered not helpful to record by practitioners in their work with children and families, rather specific data items are considered useful to collect but unhelpful in certain contexts primarily due to duplication and the use of language
- Duplication is apparent in three ways: the information is already in the system and does not change, the data item is collected twice within the same form, and the same information is collected in more than one form
- Practitioners felt that due to the wording of some questions, they do not always understand what information they are required to collect for specific data items
- The Missing Chapters research reiterates the importance of using jargon free language so children and young people can understand what was written about them should they access their records
- Practitioners record information in different ways, and some include more details than others. Therefore, consistency of what is recorded and examples of what 'good' looks like in terms of capturing data is missing
- Two audiences (practitioners and data consumers) require data to be collected for different purposes. Overall, practitioners prefer qualitative data to provide a contextual understanding (without burden), whilst data consumers also need quantitative data for statutory and other returns. Both data types are required, and the quantitative data identifies areas to drill down into the qualitative data for further exploration as needed
- Capturing the context of meetings with children and young people can be difficult when it is largely collected through a series of closed questions, drop-down lists and scoring questions
- Although no usability testing, reviews or accessibility testing were carried out during the research, practitioners reported problems using their organisation's CMS. Many did not believe it is user centred, with confusing workflows and an inaccessible interface. This often makes routine tasks time consuming, causing pressure and frustration which lead to low morale
- Practitioners reported that at times the forms can redirect the conversation and not focus on the issue for that child/young person at the time. Against a backdrop of high caseloads and tight deadlines, this has been reported as burdensome by some practitioners. This has implications for best use of practitioner time

No item was considered not helpful to record by practitioners in their work with children and families, rather specific data items are considered useful to collect but unhelpful in certain contexts, primarily due to duplication and the use of language.

The reasons practitioners gave for why they consider some data items burdensome have been tagged in the data matrix (see appendix one). Table 6 shows the number and percentage of data items that were assigned a certain tag. This show us that Duplication and Language/Guidance/Design were the top reasons practitioners gave for finding data items unhelpful.

Table 6: Reasons data items are found 'not helpful' by practitioners

‘Not helpful’ items Tag names	Number of data items by tag name	Percentage % by tag name
Duplication	84	33%
Language/Guidance/Design	80	32%
Not relevant	45	18%
Prepopulated	9	3%
Useful only to the child	8	3%
Useful to someone else in LA	27	11%
Total number of data items collected and found ‘not helpful’ (aggregated data)	**253**	

Duplication

Duplication of information is a problem across various forms, and this was highlighted by practitioners and data consumers.

The following duplication reasons were identified by practitioners as reasons for a data item not being helpful:

- the information is already in the system and does not change (for example: item 115 ‘Summary of child's background/history and why they need foster care’)
- the data item is collected twice within the same form (for example: item 39 ‘In the child's view: what makes you, you?' and item 40 ‘Where does the child feel they are at the moment?’)
- the same information is collected in more than one form (for example: item 11 ‘Address’)

This was further explained in the qualitative data:

> “The plan is reviewed every six months. The review is every six months, they don't always marry together at the same time, which is fine. But if I'm doing one form, I would hope that one form marries into the other forms... so that I'm not having to duplicate... when we're so rushed and we're holding such a high case volume.” (Practitioner)

Data consumers agree that the system could potentially pull certain information through (such as ethnicity, name, gender) and should be on the child or young person's front screen. Some data consumers propose that there are reasons why there is duplication in the system. They suggested that practitioners should avoid cut-and-paste activity and avoid feeling that they need to input a response to every question if it is unnecessary:

> “Auto populated - saves time. They are ignored, quality is not scrutinised, children's addresses are populated but not updated if moved... [this includes] wrong characteristics… What purpose does it serve? It's blank, they aren't even seeing the details. Every form doesn't have to say all these details.” (Data consumer)

Practitioners reported burden in the need to reiterate the same information at each visit. Some spoke about the case of long-term placements where certain data was irrelevant to continuously collect. For example, constantly recording the name, age and ethnicity of the child or young person every time:

> "I just think if it's long term and this is their home why are we doing [entering] everything?" (Practitioner)

Data consumers understood frustrations with forms and were able to articulate where there might be an opportunity to address this as part of continuous improvement:

> "I think we should have one page with a series of questions on it and that will be enough time for them to tell us their understanding of their world instead of going through pages and pages of tick boxes and things." (Data consumer)

Language/Guidance/Design

The research shows that often forms and case notes are written using social work jargon and terminology which make it difficult for other practitioners and children and young people, to understand them:

> "Sometimes it's too, jargonistic...quite social work language…I like it when it's done…for the child." (Practitioner)

Some practitioners suggested that the data items should be adapted to the child's level of understanding to take account of age, and competency levels. In essence, plain English and words verbatim should be used to best capture the voices and perspectives of children and young people:

> "…having it clear in the case notes, in plain English as well, because sometimes I find it very hard to read someone else's language, what they've written, because it's in it for them, not for everybody else, so just writing it in plain English so that someone else can pick up for you as well if needed [helps]." (Practitioner)

> "I feel strongly it needs to be completed using appropriate language for the child or young person to be able to read it at that point in time that they understand it and for it to be full and complete." (Practitioner)

Furthermore, practitioners felt that due to the wording of some questions, they do not always understand what information they are required to collect for specific data items. The design of the form and the order of the questions asked within the same form do not flow naturally, often not making sense to practitioners. Some suggested more guidance on what and how to write in these data fields. For example, data item 219 'Does the child have a care plan?' is collected as part of the pathway plan. Some practitioners said they never understood this question because it is within the pathway plan. In general, children have a care plan until they are 16 years old, and then they have a pathway plan. The question does not logically flow as part of the pathway plan, so these practitioners do not answer this question. It is also unclear to practitioners why the LA collects this information.

Practitioners and data consumers expressed that the wording of forms needs to be reviewed as in places it can be misleading and not clear about the information that is required. The wording and guidance to accompany questions could be made clearer which would support the right information being elicited and, in turn, prevent duplication:

> "Then you have the next item as young person's views. Again, it's a little misleading. Views about what? About the worker contacting them or is it about a specific issue? So this form, again, can be actually rejigged. So something similar like, this is a visit, this is what happened, we discussed and

> this is our analysis of what we did exactly because that's why some workers put a lot of details, get it right. Some workers are now putting just one line [of] data because you get confused what is asked of you. Is it the young person's view? You'll see variations." (Practitioner)

A review of the wording and guidance on forms was recognised as being helpful to develop consistency among different individuals in the detail and volume of responses. This is something that the data consumers expressed a need for. Some wording was referred to as vague and unrealistic and, therefore, not user friendly. An example of this is a question on a form regarding expectations and identified tasks which has suggestions for the child/young person to choose. For these particular questions, data consumers suggested that a free text box could be used in its place rather than having the specific options which removes the corporate non-personalised suggestions the form presents.

Practitioners and data consumers acknowledged that language is difficult to get right. Forms and questions are developed with the aim of them being used with all children and young people, however, individuals have different levels of understanding, different needs and therefore will understand and interact with the questions in different ways. Steps can be taken to support them to understand certain terminology which practitioners anticipate they will find difficult to understand. For example, one LA have specific staff members who will work with children and young people to explain language and the sentiment behind the questions.

Missing Chapters Findings

Children and young people voted clearly to understand the narrative of why they came into care and the reasons for social care involvement within their records. This was also validated in discussions with care leavers; the need to find out 'the truth' and 'their journey'. Therefore, ensuring that this is clearly communicated in their record using plain and jargon free language is of importance and echoes the viewpoints of the professionals in this research.

Data captured without context

Much of the information collected about a child or young person is collected through a series of closed questions, drop-down lists and scoring questions. Many participants stated that it is not always possible to capture the context of a meeting with a child or young person in this way:

> "The most important information that we're getting is from the children directly, and that's very difficult to quantify." (Practitioner)

Some practitioners suggested that a conversation to support this quantitative data collection can be useful to help contextualise what the child or young person is reporting or telling practitioners:

> "I sometimes just think some things need to be off of a form that everybody's going to get and it's like an open discussion. Then you can manage it a little bit better." (Practitioner)

Indeed, some managers reported that the forms do not always enable staff to collect the correct and necessary data and often data and/or events need to be followed up in conversation to gain context that the forms do not allow:

> "It's a tick box exercise and it's also I think because maybe senior managers don't trust managers to have oversight of things like self-harm. I would expect my managers to be discussing that in another

> section which is about this… I'd also expect the manager and the social worker to be having those discussions." (Practitioner)

Data consumers stated that data is not only captured for its quantitative measures and that the discussion between the child and social worker needs to inform the context. However, they noted the inconsistencies in some of the questions asked. Data consumers reported that they need practitioners to understand the context of the forms and to see the bigger picture about why this data is necessary. They described how some qualitative data recorded by practitioners can be harder to interpret and therefore analyse. Data consumers and practitioners concur that guidance is needed to ensure the necessary data is recorded accurately but that there is a need to reduce bureaucracy and burden for practitioners.

When quantitative data is collected with no space for context, practitioners can feel 'accused' by some of the items. For example, when visiting a child or young person, the form asks whether they were visited alone, with only 'yes/no' options and no free-text box to explain the context (item 17 'Was the child seen alone?') Some practitioners found this item helpful:

> "We need to try to see the child alone. We need to understand what they are feeling and thinking about the foster carers or parents, or about certain subject areas like contact with parents, because sometimes it's quite easy to be influenced by the carers or to have that divided loyalty between their own birth family and carers." (Practitioner)

However, others found this unhelpful because it is standard practice for a social worker to visit a child/young person unaccompanied but there are situations when another adult(s) is present. This could be when there is a change in social worker who is visiting the child/young person for the first time, and they might want their foster carer present, or in cases where the child is an infant, and the foster carer speaks to the social worker on their behalf:

> "That's one of the other things that [practitioners] need to do is see them on their own or see them with their carers sometimes. If you click on 'no' they ask you why which is annoying. I've got some kids that are pre-school, so I'm always going to see them with their [carer] or in nursery. I'm never going see them alone. So I click 'no' and I just put the child's pre-school age." (Practitioner).

> "A lot of the children that I visit are like babies, so you're not going to see them alone because, yeah, they're babies. And so, I do think that it needs to be worded a little bit differently or there needs to be some context for that because if you click 'no' it's very much like, well, why not? It's quite accusing." (Practitioner).

For some of the forms, practitioners are not always sure about the level of detail required with the various data items. Added to this is a sense of time-wasting with regard to completing the forms:

> "I think there is a lot of duplication in terms of what we do, and there is a lot of paperwork and form filling... For instance, we use a [CMS]. A lot of information can be populated through [CMS], for instance chronologies that we have to do. It doesn't manually populate it. There's a box that you can tick which says to add case notes and things like that to chronologies. It doesn't work, it's not fit for purpose. We have to write the case notes and then do a separate thing. I input separate information to the chronology section and even the way to do that is a longer process." (Practitioner)

With regard to the auto-population of some data items, data consumers acknowledged the tensions between reducing the burden for practitioners and the need for management to request more data to ensure the items are sufficiently scrutinised. Indeed, some auto-populated data items are intended to ensure practitioners carry out the necessary duties without burden. An example includes the question 'Has the child been given a copy of the complaints leaflet?'

The data reported by practitioners is intended to meet both their frontline needs and the needs of those consuming the data for performance management, local strategic decision-making, or national reporting purposes. Whilst practitioners want more contextual information, the data consumers need some data that the practitioners do not.

Discrepancy about the level of data required

In the interviews, data consumers suggested the likelihood that social workers over-record information and therefore record too much due to fear of leaving something out. In other cases, some practitioners record far less. Data consumers regard this as an issue which needs addressing as they want to see the right and appropriate level of information including practitioner reflections.

However, practitioners worried about their professional reputation with regard to how they record data. Some reflected that limited information is being recorded:

> "I guess what gets in the way is...assessments that aren't good quality, so I can't quite see what the risk is, and that might be social worker experience, or it might be their caseload, or they haven't had time to share with the parent, which then gets in the way of having an honest conversation with the family." (Practitioner)

> "You may think that you've done your absolute most and then you're still worried that you haven't done this form or this something's out of timescale. You're constantly on edge of where you are with paperwork you haven't done, because obviously the progress reports have a certain timeframe, the [name] plan has a certain timeframe, visits have a certain time[frame]. Everything's a timeframe. You might have focused on one area and feel like you've done your best but then you've also missed out something else. So that is a constant worry." (Practitioner)

Indeed, others reported that often the information is there, but it has not been uploaded from the outset:

> "It would be on a case-by-case basis. There are cases where we might not have enough information recorded about birth parents, for instance, or fathers, or other family members… It's not generally like no one has that information… We don't have this information because I suppose no one has dug deep enough to try and find that information in the first place. Or sometimes things get lost over time." (Practitioner)

Both situations were regarded as not helpful to the next practitioner and the decision-making that follows. Practitioners are therefore held accountable for decisions made supported by data they did not record. This can lead to a process of over-recording for fear of leaving something out.

Indeed, data consumers recognise that social workers might take it on themselves to over-record, but they also acknowledge the risk factors that practitioners carry if they omit any information:

> “Staff have become so wound up in this recording culture, they feel like they need to record everything for safeguarding of their own position - but it’s more beneficial for people to record important information. The things the social worker writes could cause distress if the child reads it. The social worker is deemed to be a superhero and pulls all the strings of a child's life.” (Data consumer)

The workflow

Three of the participating LAs use the same CMS, but they have been set up differently and are therefore used in different ways. Although no usability testing, reviews or accessibility testing were carried out during the research, practitioners reported problems using their organisation’s CMS. Many issues were reported, including confusing workflows and not being able to update a case or complete a task if somebody else was inputting to the same case. The interface was also described as not being accessible, which impacts decision-making. In addition, practitioners felt pressured to meet often tight timelines:

> “It [CMS] is really confusing, … if you're relying on someone else finishing something before you can do your bit that causes problems ... If something's not completed like a midpoint report in the middle…then the wrong decisions will pull through to the next report, which leads to slight inaccuracies. And I think you look really poor when you’ve got the wrong decisions...[and] if you're sending it out to other people. So, all those sorts of things are quite problematic.” (Practitioner)

> “...can be a tedious system [CMS]. I'm not gonna lie… I've had experiences of writing a document and it then not being there or the system crashing, and you've lost everything… so it can be a little bit time consuming.” (Practitioner)

Practitioners found it difficult sometimes to determine if the information is still relevant; for example, they questioned the relevancy of the document and the recording of relevant information that has not changed or potentially needs to change:

> “It’s a really difficult form to keep updated because you’re looking at it thinking is that information still relevant or not? And sometimes you’re looking at life plans and they’re the same life plan every time. It’s not that nothing’s changed but it’s hard to go into a life plan and change it all. It feels overwhelming as soon as that life plan comes up because you’re just thinking this needs a lot of information. It’s already prepopulated and you’re having to sort of sieve through it, aren’t you, to think is this still relevant, is this not relevant, does this need to change?” (Practitioner)

Given the timeframe for completion, the most up-to-date information is not always recorded:

> “You’re visiting that big piece of work which sort of plans your journey, your needs assessment and how you’re going to support those needs. It’s getting done on a five-month mark, signed off at the six-month mark, so there’s a delay. So there’s always going to be a lag in terms of issues.” (Practitioner)

Data consumers are aware of the issues identified with the workflow and accept that this system is not a perfect science. Suggestions around training for practitioners about what is required on the forms and how they can be completed with exemplar templates was suggested.

Not fit for purpose

Practitioners suggested that often documents within the CMS have had data items added to them over time as well as new forms. Therefore, the initial purpose has changed but a review of the information on the form does not take place. For example, there might be a section for a health plan but there is also an independent document from health for the health plan. This is the same with education:

> “And that’s because the document’s not fit for purpose because it used to be the one document was like a PEP, the health report and/or the health plan and the care plan, and then they changed it so the health plan comes in as an independent document for health….The PEP is an independent document from education, and so in order to pull it into this document you have to then, I don't know...” (Practitioner)

Certainly, not all data required on the forms is relevant to all children and young people that practitioners are responsible for:

> “If it’s been six months since the [CLA] review, some of those actions might be not relevant any more for the young person.” (Practitioner)

> “Not everything’s as pressing for every young person as our forms dictate…” (Practitioner)

Practitioners reported that at times the forms can redirect the conversation and not focus on the issue for that child or young person at the time. Against a backdrop of high caseloads and tight deadlines this has been reported as burdensome by some practitioners. However, at other times it is helpful to have the form or data item guide the practitioner in their conversation with children, young people, and families.

4.2.3 Theme 3: Data we do not collect that could be useful

Key insights

- An output requested by the DfE was to produce “a secondary list of any information or data items that the social workers are not asked to record but consider they should be recording – and why”. During the research, it was not evident that practitioners believed they should be recording any other data. However, often data related to education, health, immigration status, and missing episodes is missing from a child/young person’s file because it has either not been shared or has been uploaded as an attachment and this is difficult to find on the CMS. Practitioners need to be able to access this information more easily
- CMSs are limited in collecting voices of children and young people, as they do not allow for practitioners to accurately record these. Practitioners need to be able to record the voices of the child or young person in the media that they choose to use, and not just in text. The tool/CMS available to them does not allow for this to happen. Consequently, the nuanced voices of the child/young person are not captured accurately in their record
- The design of some forms in the CMS does not always flow or link appropriate information together
- Information relating to missing episodes is not routinely shared with IROs. This information is not pulled through the CMS for any forms used by IROs
- Practitioners record information in different ways, and some include more details than others. Therefore, consistency of what is recorded and examples of what ‘good’ looks like in terms of capturing data is missing

- The Missing Chapters research found that children and young people consider photographs, films, and audio as important for adults to keep for them

At the outset of the research, it was thought that a secondary list of data items could be collated which includes information not recorded but practitioners feel should be. The research found that one or two practitioners suggested information which may be helpful, but there was not a unanimous feeling among those interviewed that valuable data was missing from forms or not being recorded. The only information mentioned was with regard to immigration status, missing episodes, and parental personal details.

Although no data item was considered unhelpful, practitioners often felt overwhelmed at the volume of information they are expected to collect. This meant they found it challenging to identify information and data which is not captured but should be. The majority of data items included in the data matrix were identified as 'local' data collected for:

- practitioners and/or the child/young person
- management oversight of case decisions and accountability purposes
- LA reporting purposes and generating performance indicators
- statutory data requirements outside of the Annex A or 903 returns

This finding suggests that much of the data is required by LAs and not for statutory returns. However, much of what is collected contributes to statutory returns. In our interviews with practitioners and data consumers, we found that this does not convey the bigger picture. For example, what the data matrix is not able to identify is the complexity of cases in relation to the worktime it takes to complete both the statutory and local data items, which, as participants explained, also has an impact on their feeling of burden. Wider conversations highlighted that Ofsted inspections drive additional information to be recorded. If Ofsted ask LAs about a certain type of data, it then becomes a fixed part of the data set that LAs routinely collect in preparation for future inspections; for example, Public Law Outlier (PLO) and deprivation of liberty data.

Therefore, most information in this theme relates to the various elements of practice which practitioners and data consumers identified as ideal to make their practice more efficient.

Data sharing

It was found that there is some information and data, specifically about education, health, immigration status, and missing episodes, which is recorded either by other teams within the same service, or by other government departments such as health, education, or the police, and might be missing from the child/young person's records. The IT systems used by the different teams and agencies (Virtual Schools, Home Office, Police, NHS) work in silos and are not connected to the CMS used for CSC services. Often, information is missing either because it has not been shared (residentials not sharing their report with the IRO, foster parents not sharing health data, schools not sharing the PEP form) or it has been uploaded to the CMS as an 'attachment' on the child or young person's file, either in Word or PDF documents. Information in documents saved in these formats is not easily findable, and the information contained within the documents cannot be searched. The CMS search functionality is limited to only allowing searching at the file name level; it is not possible to perform a keyword search within the body of the document. Practitioners spend a lot of time searching to find the information they need:

> "Some things can be a bit difficult to find because some documents that come in either from emails or from court and we send them to our business support team, and then they will upload them to [CMS] so they form part of an attachment on the child or young person's file... Unless you know

> what that sort of file [it's saved as]...you can be scrolling for a few documents to find something. It can be a little bit time consuming." (Practitioner)

The Home Office place unaccompanied asylum-seeking children (UASC) in the care of LAs. Information about UASC is often fragmented, often missing information about family members already in the UK or the stage of the process in which the children are at. The Home Office shares letters and documents with the LA, which are uploaded to the CMS as an 'attachment' on the child or young person's file making information difficult to find:

> "We often have cases who will go through the whole of children's services. They'll go through the court team, then they come to our service and, all of a sudden, we find out they're not British citizens. And that hasn't been recorded somewhere on our system anywhere. I do think it would be good to try and collect as much information as we can on the unaccompanied young people…people they're in contact with…if they have any contact with family because I've read past reports and things that state that young people don't have any contact whatsoever and then I've built my relationship with the young person and been able to actually gather that they do have contact with their family back home or they do have maybe a brother that lives here in the UK. So, I think that information is really important when working especially with unaccompanied young people." (Practitioner)

It was also found that at times, information about the child/young person's parents has been missing due to unknown reasons. This has caused difficulties and delays to the social worker in applying for a child's passport:

> "I think things like when we try to obtain say, passports for a young person and you know quite often we need more than say the parents or the grandparents, documentations and information in order to apply for things like a passport and that can be a little bit difficult..." (Practitioner)

Participants were also concerned about how up-to-date and relevant some of the information in the CMS is and discussed having to work across the systems and forms to collate information from several platforms (such as health, education, police) to retrieve data and then check if it is up to date.

> "I think that life plans should be condensed and, yeah, really focus on what's important for that young person or child at that moment. Where we're in care proceedings for a child that's basically what's most important really because it's decisions on their life. I get that we have to comment on health and things like that if it's relevant but, you know." (Practitioner)

Missing episodes

A missing episode - when a looked-after child who is not at their placement or the place they are expected to be and their whereabouts is not known for a specific length of time - was identified as specific information which IROs need but is not necessarily routinely given to them. They need to know about missing episodes to assess if the care plan needs to be reviewed and changed to fit the needs of the child or the young person more accurately. Interviews found that IROs would know about missing episodes either by talking to the social worker directly or if the social worker has mentioned them in their forms. They are not pulled through by the system to any of the forms used by IROs:

> "It might be nice to have missing episodes… because what you don't want to do, in a busy social worker's life, is to give him/her yet another form in repeating the same thing. So maybe missing

> episodes could be pulled through by the system so people don't have to fill that all out. It can pull through from all the other forms on the system." (Practitioner)

The underlying issue is that the tools and/or software available to practitioners to record information and data items is not user centred in terms of it not working in the way that the users need it to collate and find information. Therefore, what practitioners need and wish for is a system that enables them to do their job efficiently.

Summary sheet

Practitioners and data consumers spoke about the need for a summary sheet or chronology that acts almost as a cover sheet providing an overview of key information contained in the form or overall file:

> "I need a summary sheet explaining what the situation the child is, who they are living with, whether it's a foster care placement or a semi-independent placement." (Practitioner)

A one-page sheet was also spoken about regarding collecting information from children and young people to reduce the number of questions they are asked, and support the information to be more meaningful:

> "I think we should have one page with a series of questions on it and that will be enough time for them to tell us their understanding of their world instead of going through pages and pages of tick boxes and things." (Practitioner)

Static/transactional data

Some practitioners mentioned the need to have a single form with 'static data', information that does not generally change, for example, name, surname, date of birth, etc as well as 'transactional data', information which is periodically updated when changes happen, and home visits and reviews are carried out. They believe that this will help eliminate duplication of information:

> "I could have little Johnny who's been in care since he was 12, he's now 17. Each time from the age of 12 to 17, I'm writing the same thing. Could I have it as once I fill it in once, it populates…it gives me an option to change it…so maybe disappearing boxes and that can pull up when you need them, because all sixty of my cases I need to be saying the same thing again and again. That's time taken away from me to be doing other things to be writing up another form…so just having those smart forms [would be useful]." (Practitioner)

Media

Practitioners want to record and share their interactions with the children and young people they work with and document accurately the relationship they have. Often, they are sent voice notes, WhatsApp messages, images and videos. Practitioners want a way to capture the way children and young people interact with them and their peers to reflect their voices and record a richer story which is directly inputted into their record and not lost as an interpretation by the practitioner or as an attachment:

> "So, for example, if I get a WhatsApp message, I will put it on the case notes as 'WhatsApp from said young person'…If someone sends a voice note on WhatsApp, we also have to record that in a way of typing it out. We can't obviously upload that voice note to the system, so trying to summarise in the best way we can becomes quite difficult." (Practitioner)

Media such as video was one medium that practitioners felt needs to be uploaded directly to a child or young person's case notes. They often receive videos of children/young people dancing, singing, performing, or showing something which is important to them at that particular point in time and practitioners felt that it is vitally important to have these embedded into the forms and case notes as an accurate record of that child/young person's life and what was happening at different times.

> "A lot of them have multiple placements moves. I think it might be nice for them to have those videos, maybe kind of captured on file and especially when they're 18, it must be lovely for them to sort of be able to look back on those …as part of big part of the life story work." (Practitioner)

Creativity

Some forms were regarded as too wordy and not accessible to young children. To work around this, practitioners find creative ways to talk to children about their care plan and the support they need through playing games, creating drawings and other images for example. The practitioners will often take photos of the direct work outcome, but many are not able to upload photos directly to the form they fill in after the visit. These photos are uploaded to the CMS as an attachment and are separated from the visit forms and the case notes. To counteract this, practitioners will write about the work done with the child in the visit forms. Similar to interpretating different forms of media communication, this leads to the loss of valuable information and impacts the ability for the child's views and experiences to be reflected accurately:

> "It would be lovely to be able to do a massive drawing with a young person and instead of just describing the drawing, you'd be able to refer to it because the person reading it could actually see the drawing that had been done." (Practitioner)

Missing Chapters Findings

Children and young people were invited to 'vote' on which things are most important for adults to keep safe for them. Photographs, films, and audio was the second highest scoring item out of all which were recorded.

"The truth, but everyone's version of the truth is different depending on their perspective at the given time." (Care Leaver)

Collaborative training

In one LA, suggestions were made about collaborative training between social workers using the CMS and the system managers/developers to ensure an understanding and that the forms and system are fit for purpose:

> "There needs to be a more collaborative approach between the people that are practising day in, day out and the people that are supporting the training aspect without a doubt. Because otherwise it becomes data input and it's not about the child." (Practitioner)

Another participant reiterated this saying what she would like to see:

> “…would be really good [name of form]...what’s expected in each section because I’m new to the local authority…and that would then help me know how to complete a good [name of form].” (Practitioner)

Practitioners referred to joint working around completing and compiling data related to health, education, and other government departments:

> “Yeah, so one of the things that had been difficult previously was because it was in a different system. It was being sent to the social worker to upload to [CMS] but they are now asking business support to take over doing that which is really helpful because there’s a lot of that back and forth and you guys having to update documents.” (Practitioner)

> “That’s the same with health assessments as well and the immunisations are logged in there.” (Practitioner)

Collaborative training between practitioners and data consumers was also referred to in terms of developing an understanding regarding the purpose and use of data and forms. An example of this is where a form asks if a child/young person has received information from their IRO regarding accessing their records. Practitioners identified that it appeared to be a duplication with another form, however, data consumers see this as an opportunity to engage with the child/young person regarding their needs and approaches to accessing their records. Therefore, the data consumers identified that in collaborative training, these perspectives could be shared and discussed.

4.2.4 Theme 4: Information that is helpful to the wider local authority

Key insights

- Data is collected for a variety of reasons and although this might not be helpful to practitioners, it can be useful to somebody else in the wider LA
- Practitioners identified the data as useful when taking on a new case or reminding themselves of the details of a case, for practitioners with different roles and responsibilities within their team, for children and families to understand and to ensure the relevant support is put in place for them
- Where practitioners identified the data as not useful for them or the child/young person, they also acknowledge its importance in statutory returns
- Practitioners are not always aware of why certain information is being collected or why there is duplication. However, both practitioners and data consumers advocate that regardless of how the data is collected, the way the child/young person’s views and perspectives are recorded is paramount

Practitioners

Practitioners acknowledged that some of the data they collect during their work with children, young people, and families, may not appear relevant at the time but it can be useful to somebody else in the wider LA:

> “There’s probably someone somewhere who’s monitoring this, maybe QA [quality assurance] or like senior managers who want that information because it’s harder to pull it from a text box than from a tick box.” (Practitioner)

Practitioners spoke about who the collected data is useful for in the wider LA and who it is used by:

> “So it would be for the young person, the family members, carer, potentially new to the network who have been a part of that meeting, but that's something that's discussed in the meeting, so I don't know whether it's information for people who weren't there or people who are picking it up later on down the line.” (Practitioner)

As discussed in theme one, in the Journey through Care section, practitioners identified the data as useful when taking on a new case or reminding themselves of the details of a case, for practitioners with different roles and responsibilities within their team, for children and families to understand and to ensure the relevant support is put in place for them.

Data consumers

Data consumers reiterated the importance of collected data to support the monitoring of the quality of the service offered to children, young people, and families. This type of measurement includes both qualitative and quantitative data collected through an array of data items to generate a bigger picture of what is going on across the service:

> “We need to appreciate the wider perspective and the wider ecology. This helps us scope insights and recommendations with the bigger picture in mind.” (Data consumer)

Interviews with practitioners found that there was uncertainty regarding why certain information is collected, but data consumers were able to explain how they use the information.

As part of the project, we also wanted to understand if data items considered ‘not helpful’ by practitioners are helpful to someone else within the LA’s CSC service, and why. To do this, we interviewed a range of data consumers and asked them about the data items that practitioners found unhelpful. They gave their opinion on items they were able to comment on.

The data consumers’ comments are mapped in the data matrix against data items considered ‘not helpful’ by practitioners. Data consumers’ comments were tagged as:

- Agree – needs to be looked at
- Duplication
- Practice / Training
- Useful to understanding the case
- Useful to LA

See appendix one for more information on information specific to each LA and the meaning of each tag.

User research found that data consumers agreed with practitioners that ‘duplication’ and ‘language/guidance/design’ are the key reasons why certain data items are unhelpful. They felt that these items either need to be looked at in the forms or addressed via practice/training.

Management Oversight

Each LA was asked to tag the data items collected as ‘local’ data to understand why the data was collected specifically in each LA. Most data items collected as local data are collected for children and young people themselves, and for practitioners to help them learn the child/young person’s story, plan interventions, and provide the right support.

Another main reason for collecting local data items is for management oversight. This is both for management to support practitioners, children, young people, and their families, and for accountability purposes. Managers need to be able to understand reasons as to why certain decisions were made, if necessary. Table 7 below shows that the second most common reason for collecting local data items, after collecting for practitioners and/or the child/young person, is for management oversight of case decisions and accountability purposes.

Table 7: Number of times LAs tagged ‘local’ data for a given reason

Number of times LAs tagged ‘local’ data for a given reason	
1.For social work practitioners and/or the child/YP	1790
2.For management oversight of case decisions and accountability purposes	264
3.For LA reporting purposes and generating performance indicators	79
4.For statutory data requirements outside of the Annex A or 903 returns	8

Government

Central government agencies require data to support decisions regarding funding distribution and other broader decisions. Accountability towards central government and ensuring accurate data is collected was evident in the research:

> "They're like, what difference is this going to make to my child now? But that's not the issue. The issue is all this data is collated and it's sent to central government next month. So central government are going to be looking at our data of our looked after children, immunisation, and health data, because of data input, and then they will judge how we're doing as a local authority to close the gap on health issues for looked-after children by that data input." (Practitioner)

Within this is the understanding of why the data is collected in the first place. Practitioners understood that although they may not consider a data item as relevant to the children and families in their care, it is relevant to other organisations:

> "There are lots of different data platforms and it feels different agendas for every aspect of things. Every agency will have their own agenda, their own purpose, their own outcome of where they're going to be going and what is important for them to collect with their data." (Practitioner)

> "I guess it's about whether that data impacts that specific child, but arguably the data impacts actually on the ability of the organisation to know that it's meeting expectations for all children who are identified." (Practitioner)

As the CMS do not transfer information and data across and between each other (including those used by different agencies working as part of the team around the child, such as education, health and police) it is important that information is recorded on all the relevant forms. This is generally not understood or known by practitioners, causing pain points in data entry:

> "I can see how many [CLA] reviews are held in timescales...will tell me late/overdue but systems don't talk to each other." (Data consumer)

Voice of the child/young person

Both practitioners and data consumers advocate that, regardless of how the data is collected, how and why the child/young person's views and perspectives are recorded is paramount:

> "The child's voice is at the centre of what we do – what it does is help us understand our practice in terms of participation, giving the young people an opportunity to input." (Data consumer)

4.2.5 Theme 5: Voices of children and young people

Key insights

- The views and perspectives of children, young people, and their families will continue to be muted within case records if jargon and complicated language is used without explanation
- A child/young person's form/file needs to provide a story to that child/young person at the current stage of their care process but also reflect the whole story of their care journey. Practitioners and data consumers are mindful that this is a respectful reflective account which acknowledges that the child or young person may read it one day
- The Missing Chapters project found that children and young people understand the need for professionals involved in their lives to share information about them, but they were concerned about who has access to this, including their teachers. Many felt their permission should be sought before their data is shared or they should be informed about who is seeing this information
- The Missing Chapters study also found that most young people think that records should be structured with sections to help navigate through them. They feel their records should not be redacted and should include an accurate reflection of their lives
- Often items are added to local forms which require additional data that may not be relevant to some children or young people. This raises issues about quality and version control on forms. There is a need to review these added items and ensure they remain relevant over time.

The voices of children and young people emerged as a paramount concern for all involved in the recording of their records. Across the qualitative data, it was reiterated that the views and perspectives of children, young people and their families will continue to be muted within case records if jargon and complicated language is used without explanation.

Reflections of children and young people in their records

Across the four local authorities, participants were concerned about how the child or young person would feel about what is recorded about them in their records. Participants questioned how child-friendly the forms are and whether they provide a comprehensive overview of that child or young person. In the view of the participants, the form/file needs to provide a story to that child/young person at the current stage of their care but also reflect the whole story of their care journey. This is particularly important for when a child makes a request to access their record when they leave care:

> "What would the child want us to write about them? What do they want to know about it if they access their records down the line?" (Practitioner)

In addition, some participants raised concern about how a child or young person would feel about data recorded about them that they do not want to see:

> "I've got a young girl who's changed her name by deed poll because she wants to leave that life behind her. On here it had her, I was going to say her new name but it's nowhere, on the system apart from in the known names previously... I want everything now to be in her new name because [in] whatever I print, she doesn't want to see her old name. "(Practitioner)

Tick box items that often do not ask for or require contextual information were seen as burdensome to social workers who felt that context needed to be provided to children and families:

> "These forms [name of form] are ugly. Why do they have to have boxes? Because I just think, take the boxes out and just have the wording. So sometimes you look at them and they've got empty boxes and I think for young people and families they're quite hard to follow because if you've looked at this and there are a few empty boxes it's like, well, why are they empty?" (Practitioner)

On some forms there are no options to make changes, so data is often repeated and duplicated (as shown in theme 2 in the Duplication section). Overall, practitioners described that tick-box answers are not always helpful and the lack of context can often add stress to what a child or young person reads about themselves. More information is needed to explain to children and young people why particular decisions were made, for example adoption/long-term fostering:

> "I just find it strange. I think there needs to be more narrative in terms of what you're putting down… Why didn't I do long-term fostering and I was really happy with my foster carer who I'd been with since birth and then you moved me? I know it's further explanations for later on, but I don't think young people's lives should be put down to a tick in a box." (Practitioner)

Some practitioners were concerned about the wording and the connotations associated with some data items. It was acknowledged that often items are added to local forms which require additional data that may not be relevant to some children or young people. This raises issues about quality and version control on forms. There is a need to review these added items and ensure they remain relevant over time:

> "A few years ago we had a number of young people self-harming and it came out of some review or some discussion and, therefore, it was put into a form but…if a young person accesses their records down the line and they see this, they're going to think, 'well, I never self-harmed, why would that be in there?' Why is there just an assumption that all children looked after self-harm?" (Practitioner)

In addition, 'scrutiny' over a child's life was questioned and who needs to know what information. In a child's review, all the paperwork is on the table for all professionals to see but some practitioners felt that this is not always necessary and in referring to their own life and private business stated:

> "We wouldn't have that much scrutiny in our lives. We wouldn't allow it." (Practitioner).

A sense of accountability towards children, young people, and families was evident in the wider findings about the way the data is collected and how it is recorded:

> "They're their children and they should have a copy of the plan and they should have a copy of the minutes. We are, we've got these kids on loan, we've said we can do a better job, we should be proving to these people that we are and what we're doing. So that's accountability for our practice." (Practitioner)

Missing Chapters Findings

Children in care and care leavers understood the need for professionals involved in their lives to see and read their records. However, they also express concern about who sees information about them. Particular concerns were raised about teachers and school staff seeing recorded information. Many children in care feel that permission should be sought from them before it is shared or they should be informed about what information is being shared with whom.

One practitioner spoke about changing plans when a young person turns sixteen. Often this can overwhelm the young person when they see the same data recorded but in a new way. This was also seen with regard to making future plans when they have not thought about or completed immediate ones:

> "A young person looks at that and they're like, what? Or just, it's our names but actually it's some of the same information just done in different ways. It's very confusing. Why, I haven't even done my GCSEs and you're telling me about where I'm going to be at 18." (Practitioner)

Practitioners spoke about how they want the child or young person to perceive their records when they receive them:

> "Thinking about the children and families back when I'm doing the visit, I guess it gives me even more motivation to write it properly." (Practitioner)

> "I would like every child that I've worked with…. if they ever read their files to see that I put detail in my time with them and to give them that detail. That's what I think to myself. Rather than put a couple of visits. For me, that shows that someone hasn't really cared that much. So, I always have that in mind, especially with children in care. If they ever come back to read their files that someone's taken that time to really put that detail in and make sure that there's positive information in there as well and you get a sense of who they were within that visit record. So that's something that I always think about when I'm doing visit records and that's why I put quite a lot of detail in because I want to reflect that child to people and bring them alive for the people that don't know them, so like management and things like that who have never met them can get a sense of who they are." (Practitioner)

Missing Chapters Findings

Most young people think that records should be structured with sections to help it make sense and many think it should be in chronological order. Many feel that files should not be redacted, and some young people think that records should include 'EVERYTHING'.

Data consumers reported on the importance of being able to see the child or young person's perspective in the data recorded about them. They are also keen to know that practitioners respond to the needs of children and young people and encourage interaction and input to the process and records. Overall, data consumers advocate that a holistic view of the child is reflected in their records which exhibit empathy and an understanding of the child or young person's care journey. Indeed, data consumers welcomed the opportunities for co-creation and collaboration with children and young people in the development of forms:

> "The child's voice is at the centre of what we do - what it does is help us understand our practice in terms of participation, giving the young people an opportunity to input." (Data consumer)

Including children and young people’s views

Some practitioners welcomed the use of technology to capture the views and opinions of children and young people ‘on the spot’ such as through WhatsApp or voice recordings. However, the CMS does not support the upload of these files resulting in practitioners transcribing the recordings sent to them or recorded during a visit. This not only creates tensions about the best use of practitioners’ time but there are issues around losing nuances, tones, and emphasis. Practitioners welcomed guidance on the best way to capture this data. However, they were also mindful about how creative methods could add another layer to accountability if not recorded and analysed correctly to reflect the views of the children and young people they work with.

Technology

Data consumers were aware of practitioners’ ideas around creative ways to collect information from children and young people but also raised questions about how these formats could be measured or extrapolated by the system. They also reported that there are multiple opportunities for multimedia formats to be uploaded but the system is not intuitive, which causes problems for its users. On the other hand, some data consumers suggested that practitioners might not use the systems to their full potential as they might not know how to do this. They alluded to a desire for a fresh mindset perspective with technology being an enabler for good practice rather than a hindrance:

> “Going forward there needs to be more of an emphasis of what tech can do...knowledge sharing of what the system can do. Social care tech is not that sophisticated. The system does support multimedia [uploading images] but there isn't a clear specification on where [they] are supposed to be used. (Data consumer)

> “If you want to capture true voices of young people, I can't think of a better way to do this than the portal. Asking young people what they want to have, something they are worried about and something to celebrate.” (Data consumer)

Although technology could be viewed as an enabler of wider participation and hearing the unique views and perspectives of children and young people, caution needs to be exercised around issues of coercion, particularly for those who do not want to have their voices recorded in this way.

One data consumer noted that the use of technology may not reduce the burden but could in fact shift it:

> “[The] portal won't change burden; it might shift it. On the one hand it means the social worker doesn’t have to write it, but they have to encourage the young person to fill it out and reflect on this.” (Data consumer)

Memory – Identity – Rights in Records – Access (MIRRA)

The Missing Chapters project team collaborated with a team of researchers at University College London working on the MIRRA project. The project explored how child social care records have been created, kept, and used in public and voluntary organisations in England since 1970 to date (Hoyle, 2019; Lomas, 2022).

MIRRA suggests three key actions to influence and encourage positive change with regard to developing a framework for human-centred record keeping. One of these is:

> “Those involved in the creation and management of care records should contribute to the redesign of practices, taking their lead from care-experienced people.” (Lomas, 2022)

They advocate reframing record keeping from the perspective of a child or young person, and as a caring and loving activity rather than a bureaucratic necessity. From this they see the child/young person as a co-owner or even the owner of information. This leads to the consideration of a co-creative response to record keeping, with multiple contributors.

Our research has synergies with the MIRRA project regarding how records are kept to accurately reflect a child/young person’s journey through care. Children and young people should be at the heart of record keeping which is reflective of their lives.

4.3 Phase 3: Missing Chapters project - Interviews with young people by project workers

The Missing Chapters project formed phase three of this research. However, it took place independently and was led by care-experienced junior project support workers employed by the lead LA.

The junior project support workers worked with their Children in Care Council to place the voices of those directly impacted at the forefront of the research. Grounded in participatory methodology, the project empowered care-experienced individuals as co-researchers, advocates, and experts in their own lives.

The findings from the Missing Chapters project have been interwoven throughout the findings from phase two of this research and synergies between the two projects identified.

Please see appendix three to read the full Missing Chapters report.

6. Conclusions

The project set out to test the assumption that the volume of data collected is a burden and that this burden could be alleviated by cutting some data items. The research disproved this assumption and found that it is in fact the way that data is collected and recorded which creates a burden on social care practitioners. Our research suggests that greatest impact on reducing social worker burden can be achieved by improving the usability and functionality of CMS and the form design. Alongside this, increasing business support resources available to social work practitioners would further reduce the burden of collection.

The research did not identify any data that was currently not being recorded that could add significant value if it was collected. This could, however, be an area for future investigation as there could be more to explore within other forms and teams. The research did find that a large amount of data is collected as supporting evidence for statutory and 'local' data requirements. A recommendation is to review the approach to statutory data changes to better involve the full range of LA perspectives. All practitioners told us that the data they collect is useful and supports good social work practice and it ultimately supports an understanding of the child and their journey.

Another area that the DfE wanted this project to explore was data that could be recorded nationally. The research was not conclusive in identifying specific data items to collect nationally. However, the research does indicate that there are two key factors to be considered in relation to any future work on standardised data recording. The first is the wide range of practice contexts across LAs and how this impacts the information they need to collect. The second is the variation in language and terminology used by LAs, and ensuring that it is accessible to all users of the data. As such, we recommend the DfE develops and implements national guidelines for quality open standards and recording processes.

The research also crucially showed that the voices of children and young people are a paramount concern for all those we spoke to, and they should be at the heart of good practice and recording. The research recommends that young people should be able to access the CMS in a format that ensures they have their voices heard and recorded. They should also be able to easily access their records and have support to do this in a safe way when they feel ready to do so. There needs to be engagement with young people to understand what is important to them and co-produce a common set of writing principles to be developed and shared nationally.

Above all, there is a challenge and a collective responsibility to balance the needs of those who collect data, those who use it, care experienced young people and their families to whom it ultimately belongs. Our research evidences that to tackle this challenge effectively, an iterative and participatory approach that involves all users is imperative.

References

Al Balushi, K., 2016. The use of online semi-structured interviews in interpretive research. International Journal of Science and Research (IJSR), 57(4), pp.2319-7064

Barbour, R.S. and Barbour, R., 2018. Doing focus groups (Vol. 4). Sage

Child Safeguarding Practice Review Panel., 2022. Child Protection in England: National review into the murders of Arthur Labinjo-Hughes and Star Hobson. Available from: Child Protection in England - May 2022 (publishing.service.gov.uk) Accessed 18.10.23

Greenwood, N., Holley, J., Ellmers, T., Mein, G. and Cloud, G., 2016. Qualitative focus group study investigating experiences of accessing and engaging with social care services: perspectives of carers from diverse ethnic groups caring for stroke survivors. BMJ open, 6(1), p.e009498

Hoyle, V., Shepherd, E., Flinn, A. and Lomas, E., 2019. Child social-care recording and the information rights of care-experienced people: A recordkeeping perspective. The British Journal of Social Work, 49(7), pp.1856-1874

Johnson, C., Jouahri, S., Earl, S., White, Y., Woods, D., Pollock, S., Scholar, H. and McCaughan, S., 2023. Longitudinal study of local authority child and family social workers (Wave 5) Research Report. Available from: Longitudinal study of local authority child and family social workers (Wave 5) (publishing.service.gov.uk)

Kallio, H., Pietilä, A.M., Johnson, M. and Kangasniemi, M., 2016. Systematic methodological review: developing a framework for a qualitative semi-structured interview guide. Journal of advanced nursing, 72(12), pp.2954-2965

Lomas, E., Shepherd, E., Hoyle, V., Sexton, A. and Flinn, A., 2022. A Framework for Person-Centred Recordkeeping Drawn through the Lens of Out-of-Home Child-Care Contexts. Archivaria, (94), pp.64-93

Lushey, C., 2017. ‘Peer Research Methodology: Challenges and Solutions’ (online). SAGE Research Methods Cases. Available from: https://dx-doi-org.ezproxy.is.ed.ac.uk/10.4135/9781473994614

Mason, B. 1993. ‘Towards positions of safe uncertainty’ Human Systems. The journal of systemic Consultation and Management. Vol 4 pp189-200

Morris, S.M., Payne, S., Ockenden, N. and Hill, M., 2017. Hospice volunteers: bridging the gap to the community?. Health & social care in the community, 25(6), pp.1704-1713

O’Brien, N. and Dadswell, A., 2020. Reflections on a participatory research project exploring bullying and school self-exclusion: Power dynamics, practicalities and partnership working. Pastoral Care in Education, 38(3), pp.208-229

O’Brien, N. and Doyle, A., 2023. Exploring School Bullying: Designing the Research Question with Young Co-Researchers. Social Sciences, 12(5), p.276

O’Connor, H. and Madge, C., 2017. Online interviewing. The SAGE handbook of online research methods, 2, pp.416-434

Yang, C. and Dibb, Z., 2020. Peer Research in the UK. Available from: http://pub344.jb4-2.eprints-hosting.org/id/eprint/1022/1/ICS-WP-Peer-Research-in-the-UK.pdf

Appendices

Appendix one: Data matrix

This section provides some detailed information about the data matrix and includes:

- Forms – where the data items come from
- Structure: Data categories, Item number and Data item
- Structure: Statutory data
- Structure: Information specific to each LA

Forms: where the data items come from

Each LA has a different workflow for their CLA forms. The data matrix lists 1,575 data items from 44 different forms (listed in figure 1 below) used by practitioners to collect information about the children and their family.

Figure 1: List of forms used by practitioners to collect information about CLA

Types of form	LA 1	LA 2	LA 3	LA 4
Care Plan	All About Me Review and Care Plan; SW Assessment Report and Care Plan	Life Plan	Care Panel; CLA Care Plan	CLA Chair's report and Updated Care Plan
Placement	Placement Plan and Delegated Authority; Placement Referral Request; Placement Record; Transfer in CLA; CLA Decision, Placement change or Step Down; CLA/LCT Case Supervision Record; CLA Review Invitation Confirmation	Placement Referral Form; Placement Plan; Children and Families Panel Request	CLA Request; Placement Agreement; Placement Request	Placement Plan; Placement and Health Consent; Record of Accommodation Decision; Request for Placement and Matching
CLA Reviews	LAC Midpoint Review; LAC Review Referral		CLA Progress Report (Worker); CLA Review Record of Decisions	CLA Updated Assessment/Progress on Care Plan
Health		IHA Health Assessment Monitoring		
End of CLA	Turning 18 End CLA Status			Discharge from Care
Record of visit	Visit Recording Template	CYP Record of Visit		CLA Visit
IRO Forms		IRO report (1 and 2)		CLA IRO Monitoring info
Pathway	My Pathway Plan	My Pathway Plan and Needs Assessment	Pathway Plan (Assessment, Plan, and Review, Outcomes)	Pathway Needs Assessment
Other	Summary of All About Me Review		Letter to Child/Young Person	

The LAs do not all use the same CMS, so looking at the total number of forms from each LA does not give a deep insight into the workflow for each LA. Furthermore, some LAs collect information outside of the form workflow, explaining why they do not have forms for every section. In addition to this, some procedural forms, such as costing forms and invoice forms, were left out of the data matrix.

Considering the breadth of forms used by LAs, it was not possible to create the data matrix by matching data items form-to-form, as LAs use many forms that do not match any form from other LAs. Form-to-form matching would be possible if only key forms were used, for instance Pathway Plan forms, CLA Review forms, and Care Plan forms. Instead, the data matrix was created by mapping together data items, which were then put into categories with similar items being placed in the same category.

Structure: Data categories, Item number and Data item

Data items in the data matrix were categorised together into 28 categories as shown in figure 2 below. Data items were put into categories with similar items put in the same category.

Data categories were created following an inductive method, by reading the names of data items from each LA form and grouping them together through interpretation, rather than deciding the categories in advance. For example, category ‘Child’s details’ includes data items about the child’s name, surname, date of birth, etc.; category ‘Getting to know the child meeting/review’ contains data items about meetings practitioners attend through the care journey, like the type of meeting or the date of the meeting.

It is important to remember that the categorisation of data items is not fixed and is open to interpretation. To a lesser extent this is also true of the data-item-to-question matching. When creating the form, it may have appeared to the creator(s) that an item fits in one category better than another and has been placed in that category, but another reader may question and suggest that the data item may best fit in another category. Also, the categories themselves may rightfully be contested and themselves changed. One reason this has been done is to reduce the total number of rows. The other option would have been to repeat data items for each category it was relevant to, but this would have resulted in having a very large data matrix.

Figure 2: Data categories

Data categories	**Data Item numbers**
Child's details	1 to 33
Getting to know the child meeting/reviews	34 to 79
General	80 to 138
Relevant Professionals (inc. SW and IRO)	139 to 194
Child's documents	195 to 227
Child's general aspirations and worries	228 to 244
Money	245 to 302
Accommodation	303 to 325
Education/Employment/Training	326 to 375
Health	376 to 469
Contact/friends/relationships	470 to 553
Placement expectations	554 to 583

Data categories	Data Item numbers
Independence	584 to 603
Plans: Care, Pathway, Permanency and Parallel	604 to 744
CLA/Placement Requests and panels	745 to 1000
Routines/Behaviours/Interests	1001 to 1027
Immigration	1028 to 1032
Education Health Care Plan	1033 to 1036
Care Plan & CLA meetings/reviews	1037 to 1240
CLA Progress Report	1241 to 1310
letters/invitations	1311 to 1325
Turning 18/discharge from care	1326 to 1347
Worker's view on Pathway Plan	1348 to 1398
Placement Agreements	1399 to 1433
Visit Recording	1434 to 1473
903 return specific	1474 to 1478
Delegated Authority	1479 to 1526
IRO review of CLA specific	1527 to 1575

Each data item has been given a specific identifiable number, 'Item Number', and a common name, 'Data Item'. There is no consistency in how LAs name data items with the same information. We grouped these data items within the same 'Data Item' in the data matrix. For example: Item 1 – 'First name' contains data items named as the following: First Name(s), Full name, Name, My Name, Name, First Name, Name. These all relate to the child' first name.

Structure: Statutory data

The next group of fields in the data matrix is about defining if each data item is either 'local' data or statutory data, data collected for SSDA903 return (903), or for Ofsted Annex A data or both, 903 and Ofsted Annex A.

In the matching of 903/Ofsted Annex A data items to the data items in the data matrix, not all LAs indicated when questions on each form were 903/Ofsted Annex A. In cases where LAs did provide information about which data items were collected for the 903 and/or Annex A, this was not always done comprehensively. As such, matching data items from various forms to 903/Ofsted Annex A data items was done largely by hand using best judgement.

Another important thing to note is the mapping of 903/Ofsted Annex A to data items. Whilst there is technically an objective mapping for this, the data matrix cannot be said to be objective. This is partly because only one LA included information about which data items were for statutory returns. Accordingly, best judgement was used to go through every data item on the 903/Ofsted Annex A lists and map those to the data items from the form (rather than specific questions). This means that, whilst specific data items may be collected by statutory returns, the questions mapped to those data items may not be the ones used by each LA to capture them. This was necessary as LAs often capture the same information in different ways and, without each LA providing a full list of which questions are statutory, it is impossible to know which questions are the ones that, the results of which, are compiled for returns.

Structure: Information specific to each LA

The next fields in the data matrix are specific to each LA. Some of these fields include:

- LA Text – how the data item is named in local forms.
- LA Forms – the name of the local form where the data item is collected.
- Reason(s) why the data item was not found helpful by local practitioners.
- The tag for the 'unhelpful' reason.
- Data consumer feedback.
- Data consumer feedback's tag.

Practitioner tags

Feedback from practitioners is included in the data matrix for data items that were found 'not helpful'. All feedback was tagged with one of the following tags:

Duplication	Practitioners feel it is a case of repetition, information filled in somewhere else.
Language/Guidance/Design	Practitioners do not understand what they are required to do due to language used to ask questions, or they might need more guidance or the design of the form / the order of the questions asked does not flow naturally, and therefore does not make sense.
Not relevant	Practitioners feel the data item collected is not relevant in helping the child.
Prepopulated	Practitioners feel the data item could be brought forward directly by the system instead of them repeating this data collection (including issues with systems not connected and working in silos).
Useful only to the child	Practitioners feel the data item is collected only to help the child, and it doesn't help them helping the child.
Useful to someone else in LA	Practitioners feel the data item is collected only because it is helpful to someone else in the LA (for reporting purposes, or statistics, etc.).

Tags were created following an inductive method, looking at the feedback and allowing the tags to reveal themselves, rather than deciding the name of the tags in advance. For example, we used the tag 'Duplication' when practitioners talked about repetition, and the same data item was collected on different forms.

Data consumer tags

Data consumers feedback on practitioners' feedback on data item found 'not helpful' were added to the data matrix. Data consumers feedback was tagged with one of the following tags:

Agree - needs to be looked at	Data consumers agree with practitioners and the data item needs to be looked at
Duplication	Data consumers agree with the practitioners in cases where data items are duplicated
Practice / Training	Data consumers believe there is an issue with the LA practice and/or practitioners might need more guidance/training
Useful for understanding the case	Data consumers believe the data item is useful to understand the child's story, needs and wishes
Useful to LA	Data consumers believe the data item is collected for internal use such as reporting, statistics, etc.

As per the practitioner tags, the data consumer tags were also created following an inductive method, looking at the feedback received from data consumers and allowing the tags to reveal themselves, rather than deciding the name of the tags in advance.

Local data tags – reasons why data items are collected as 'local' data

Each LA was asked to tag the data items collected as local data (and give a second tag if applicable) to understand the principal reasons why 'local' data is collected. The following tags were agreed between the participating LAs:

- For social work practitioners and/or the child/young person
- For management oversight of case decisions and accountability purposes
- For LA reporting purposes and generating performance indicators
- For statutory data requirements outside of the Annex A or 903 returns

Appendix Two: User groups and user needs

Practitioners

Role	Goals	Main user needs
Social workers Social workers (SWs) work with children aged between 0 to 18	The main goal of SWs is to support children and young people (YP) in care, living a stable, good childhood, and to go on and live a good adulthood. Their focus is to: • listen to the child/YP and make sure their voice is heard • make sure the child/YP is happy • make sure the child/YP's needs are fully met • make sure the child /YP is safe and well looked after • make sure the child/YP has an opportunity to have a good relationship with their birth family, parents, siblings	As a social worker I need as much information as possible around the child/YP to make sure they're being provided with the right care and are being well looked after
Personal Adviser Personal advisers (PAs) work with YP aged 18 + to 25.	The main goal of PAs is to support YP transitioning to adults' life. Their focus is to: 1. advise them in planning their future independence • empower them to reach their aspirational goals • make sure they get the training and funding they need • support them with various applications (passport, driving licence, VISA, etc.) • support their safety and their wellbeing. That's the priority	As a Personal Adviser I need to know the reason why the young person came into care so that I am able to provide the right support.
Independent Review Officer IROs work with children aged between 0 to 18. The number of cases assigned to them varies. They are independent from the LA they work for, and their focus is to support and advocate for children and YP in care, make sure that the LA is doing what is	Their focus is to: • listen to the children/YP feelings and wishes • advocate for the children/YP • chair review meetings • review the care plan and make sure it works for them • ensure all children/YP's needs are met • children/YP are being looked after well	As an IRO I need to have an overview, an update of what has happened to the child over the last three to six months so that I have key points to expand in the review conversation.

expected of them in terms of its corporate parenting responsibilities. Reviews meeting are usually held: • 1 month from when the child/YP comes into care • After that: every 3 months • After that: every 6 months • If there's some significant issue like them going missing or concerns, they could still be held every 3 months	• decide what plans need to be made for your future	
Team Manager Team managers (TMs) line manage a team of SWs and PAs.	The focus of TMs is to enable SWs and PAs supporting the children/YP, make sure the children/YP are being seen, and their needs are supported and met. Their focus is to: • support SWs and PAs in their daily job • ensure stability within their team/pod • help children/YP to have a good childhood and to go on and live useful adulthood • support the interaction between children/YP and their family	As a manager I need to have an oversight of what's going on with the child to make sure the child is progressing well.
We also interviewed two participants who fall into the Heads and Directors User Group for Data Consumers. These helped up design and set up for the Data Consumer interviews.		

Data Consumers

User Groupings/ Roles	Description	Key goal/need
Heads and Directors (4 interviews)	Involved in and hold responsibility for strategy work, service planning, and strategic drive for all teams. Typically hold responsibility for multiple services led by Service Managers. Service Managers hold	I need to understand all of the journey of a child/YP including those parts that the SW

	responsibility for team managers who look after Practitioners	doesn't see from the point they come in.
Service Managers (4 interviews)	Hold overall responsibility for their direct reports. Remit includes policy, procedure, managing team managers. Responsibility areas might involve children in care, separated migrant young people, leaving aftercare, fostering, mental health co-ordination and court proceedings.	I need consistency of recording approaches in-line with LA expectations and practice standards
Data-focused roles (6 interviews)	Typically will be involved in the collection of data, analysis of data, providing business with performance information informing teams with business insight. Work with corporate colleagues and directing them how to work with the business and data intelligence. Help to uncover pain points/challenges in the system in and provide opportunities for improvement.	I need to measure service to monitor best practice
Other managers (3 interviews)	Includes IRO and placement team managers. IRO team management: Involves supervising and supporting IROs. Placement team management: Involves team management responsibility for sourcing and commissioning placements.	I need practitioner analysis to reflect consistent good practice.

Overall user needs of data consumers

Child/YP Voice	**Technology**	**Form flow**	**Best practice**	**Measurement**
Co-creation and collaboration would be at the heart of the practice. Having a holistic view of the child/YP is key.	Opportunity sits with technology and media. Non digital needs are also key	Language isn't user friendly enough Form flow isn't always intuitive. There is duplication	Understanding what best practice looks like to support consistency. Business support could impact this in a positive way	Information flows among data consumers, front line staff and the child/YP but it's not always clear why data is being collected
* I need to know that the child/YP has the opportunity to participate	*I need systems to be seen as enablers for the practice to help	*I need a fine balance between being too prescriptive about what	*I need consistency of recording approaches in-line with LA	*I need to measure service to monitor best practice

I need to know that the child's voice is at the centre of our practice I need to understand the child's world and lived experiences	us move forward I need user engagement to be at the heart of the practice I need the appropriate practitioners to record information as it's more than a recording session and provides us with a holistic view of the child/YP I need to understand all of the journey of a child/YP including those parts that the SW doesn't see from the point they come in	should be inputted or not so that there is sufficient information I need user-friendly language to be used to support practitioners so that they better understand the value of the questions asked I need the system to support data inputting to save time I need practitioner analysis to reflect consistent good practice	expectations and practice standards I need practitioners to reflect and be proactive in their approach to recording data so it's more about recording the important information I need teams to understand and implement what best practice looks like to support consistency	I need to measure service to identify opportunities for improvement I need to measure service to report on progress

Appendix three: Missing Chapters report

Missing Chapters Project

A collaboration with peer researchers exploring children in care and care leavers’ understanding and experience of accessing social care records

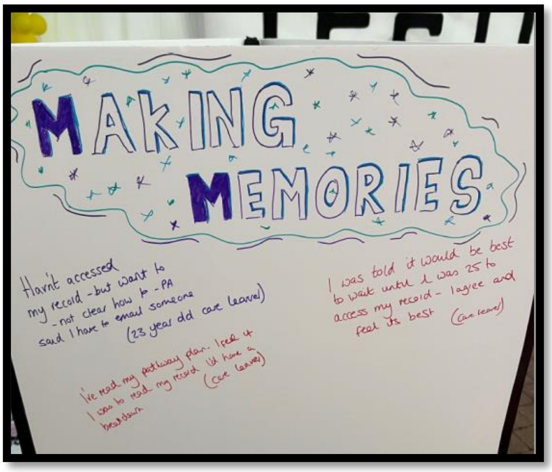
Essex County Council

ESSEX CHILDREN IN CARE COUNCIL

1. Introduction

The Missing Chapters project forms part of the wider '*Recording with Purpose, Reducing the Burden'* user research which explores the recording of information by social work teams in relation to care-experienced children and young people. The Department for Education commissioned Essex County Council and delivery partners Camden Council, Croydon Council, Sutton Council and Anglia Ruskin University to deliver the user research in 2023. Essex County Council recruited care-experienced peer researchers to collaborate with the Essex Children in Care Council to place the voices of those directly impacted at the forefront of the research. Grounded in participatory methodologies, this project has empowered care-experienced individuals as co-researchers, advocates, and experts in their own lives.

The need for social care records is multi-faceted, providing a detailed documentation of a child's journey through their life in care and providing an essential platform to share information and safeguard children. Records play a key role in shaping policy and practice, as well as providing data which informs ongoing development of strategies to address complex social care challenges. At the same time, records provide local authorities and government with the insight to challenge difficulties and celebrate success.



This research, undertaken by care-experienced project workers in Essex, explores a rich tapestry of themes, perspectives and recommendations that have emerged from a collaboration between children in care, care leavers, the care-experienced workforce, the Involvement Service, User Research teams and managers and leaders at Essex County Council.

2. Foreword from Anya Pretty

My name is Anya and I'm a care-experienced Junior Project Support Worker employed by Essex County Council. This job has meant a lot to me as I have loved learning about research.

I started my journey in June 2023 at Anglia Ruskin University and learnt a lot about the different types of research. I then had meetings with managers at Essex County Council and listened to their views about records. I spoke to our Access to Records Manager about the access to files process, exploring the issue of redacted information and data protection. They answered some of our questions and it turns out a lot of work goes into this and it is not just a straight forward process. We have also linked up with different organisations doing similar projects to share learning, including the University College London, Mirra and the University of Copenhagen.

We used this learning to come up with questions and activities to explore with children and young people at It's My Life Festival. We came up with ideas for art and crafts activities about memories and made photo magnets for them to take home to remember the day. Whilst doing this, we also had important conversations with young people and listened to their stories and views. We had a voting poll to find out what the most important things are that they want to be kept safe. I have met lots of inspiring people during this journey that have shared their stories.

After It's My Life, we analysed the research by spending time picking out and coding the data and then wrote a summary of what we learnt. I have been sharing our findings with the service and leaders at Essex County Council, making a difference through all I have learnt about records and files.

One of the important things I have learnt through this project is that I realised a lot of young people are confused about records and not sure about the process of getting them. I feel like it needs to be explained more and the care leavers we spoke to suggested a YouTube video to explain this. I've realised just how much work goes into creating records and know how much young people would love to have an input in this as **it's their life and it's their story** and they should have access to this through a login so they can always read their record.

Working at Essex County Council is amazing and I'm very proud of myself. I've been working in a very supportive team and everyone has made me feel welcome, always been there and offered help when I needed it.

I would love to stay working here as I feel in my element when I get to see how children in care and care leavers are getting on and seeing them become amazing, strong people. I want to support them through hard times as I know it's not easy and to show them that, if you work hard, you can get where you want to be. They can look at me and see that it is possible to do a job you love, and I can show them that there are opportunities for care-experienced people.

Anya Pretty
Care-Experienced Junior Project Support Worker

3. Essex's Journey

Essex has a well-established culture of listening to and learning from children in care and care leavers, and is committed to empowering children in care to have influence and oversight of their plans. The co-design and delivery of Life Plans in Essex, replacing 'care plans' and other documentation, as well as a continued shift in how social workers write to the child in their Life Plan, enables children and young people to recognise their own voices and experiences in their plans and gives them a sense of ownership and autonomy over their care experience.

Life Story Work plays a pivotal role in helping children understand their past and develop a sense of identity and belonging. Essex is on an ongoing development journey to ensure that Life Story

Work is embedded throughout social work practice and that the workforce is well equipped with the skills and tools to deliver this essential work with children in care. Essex is exploring opportunities to recognise and draw on good practice in adoption services including writing *later life letters* to children in care and care leavers. It is also exploring the benefit and impact of creating a letter or document which describes 'what happened on the day you came into care'.

The project team will continue to work collaboratively within Essex to ensure the findings from this Missing Chapters research influences ongoing developments in this area of work.

4. Collaboration

The project team have collaborated with the University College London which has undertaken extensive research through the MIRRA (Memory, Identity, Rights in Records, Action) project, exploring how child social care records have been created, kept and used in public and voluntary organisations in England from 1970 to the current day.

Interviews with care-experienced adults explore how childhood records can affect individuals throughout all their lives. The research findings from MIRRA helped our project team shape its own research questions and the team continues to share learning with colleagues at UCL.

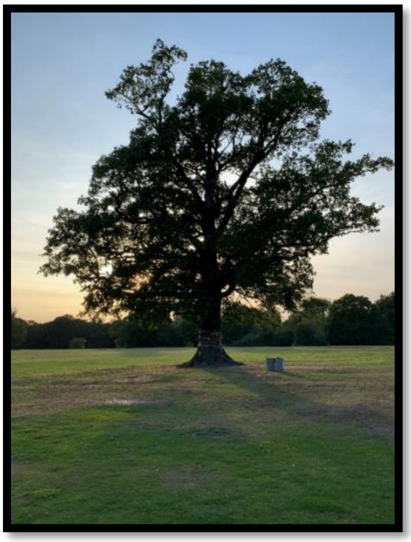
The project team were introduced to professionals from the University of Copenhagen who have been on a similar journey researching the experiences of children in care and care leavers and exploring the practice of how social workers write and record. The project team will continue to work with the University of Copenhagen to share learning, particularly in relation to developing writing principles for social workers. Discussions continue to explore how opportunities can be provided for care leavers from Essex to share their experiences with care leavers from Denmark.

In scoping the project brief, care-experienced project workers sought the expertise and direction from managers and directors in Essex County Council. Direction for the research included the following:

- This is the **child's story** and journey, and records are 'crucial' in telling this
- **Language** is important; we have to hold the child in mind as we write to or about them
- Accessing records is a **journey** and not limited to a one-off event
- Individuals accessing their records should be able to recognise their own **voice and agency**
- Children and young people should be able to **easily contribute** to their records
- Redaction can have a negative impact and make files **ineligible**
- Photos, videos and voice notes are all important in building a sense of **identity**

5. It’s My Life Festival

It’s My Life provides a unique opportunity for children and young people receiving services from Children and Families to come together from across Essex and share their experiences. Children and young people have an opportunity to meet new friends, try challenging activities, share experiences and contribute their views on social care services and how they might be improved.



It’s My Life is an established and celebrated five-day event, now in its 25th year, developed and delivered by the Involvement Service alongside members of the Essex Children in Care Council at Danbury Outdoors Centre outside Chelmsford. Click here to watch a short film about It’s My Life.

Essex County Council, as co-parent, has pledged to ensure that children in care and care leavers receive the very best chance possible to go on and lead fulfilled and successful adult lives. The Essex Co-Parenting Pledge, ‘We Care About You’ was developed with children and young people and sets out their priorities. Research discussions at It’s My Life are a crucial component in evaluating co-parenting responsibilities.

The Missing Chapters project team facilitated interviews with 83 children and young people and supported over 100 children and young people to cast their votes at the voting station.

6. Research findings

6.1 Understanding why social workers record

The majority of children in care and care leavers say they do not know what information social workers or personal advisers write about them. When asked to consider *why* social workers write about them, children and young people broadly identified three categories:

(i) **Business and practice needs,** such as legal reports, building evidence, keeping track of progress, for planning, accountability, for accuracy, to have transparency and to be able to share information with others

“To keep an accurate track of everything, so if anything goes wrong they have the evidence they did everything they were supposed to” (care leaver)

(ii) **To understand the child**; to know the child, to understand their past and their story, why they are in care, their triggers, trauma, family and friends, interests, mental health and well-being

(iii) **For safeguarding purposes**; to help keep the child safe and to affect change

"She needs to know enough to make good decisions" (child in care)

"So they can pass on the information that people should know to keep me safe" (child in care)

Few children and young people feel that social workers write and record for them.

When asked what they think social workers *should* be recording about them, children and young people commonly describe building an understanding and picture of who the child is and how best to work with them.

"To check on my well-being and what I'm up to" (child in care)

6.2 Seeing what social workers write

There is a mix of views from children in care about who sees or does not see what social workers write about them. Care leavers more frequently say they see what their personal adviser writes about them. Of those children and young people who say they do see what is written, they most commonly describe seeing what is written in their Life Plans or Pathway Plans.

"I have seen my life plan" (child in care)

"Social workers keep information away from me" (child in care)

Nearly all children in care and care leavers feel it is important to see what social workers write about them. Many children and young people feel it is important to read what is written so that they have an opportunity to change and correct the narrative. Some children and young people want to write things together with their social worker or for their social worker to write things down in front of them.

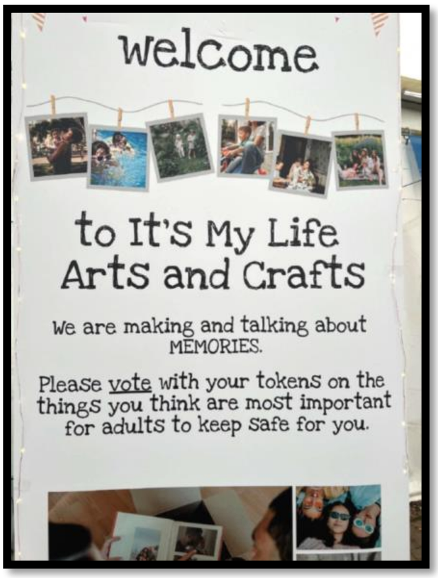
A common view from children in care is that 'it's their right' and 'it's fair' for them to see what is written about them.

"I think it's fair for me to see what is written" (child in care)

"If I wanted to see it, I should be able to" (child in care)

Many children in care want to have a better understanding of why social workers ask and capture so much and many want to have sight of what their social worker is writing.

6.3 What's important to keep safe



Welcome

to It's My Life Arts and Crafts

We are making and talking about MEMORIES.

Please vote with your tokens on the things you think are most important for adults to keep safe for you.

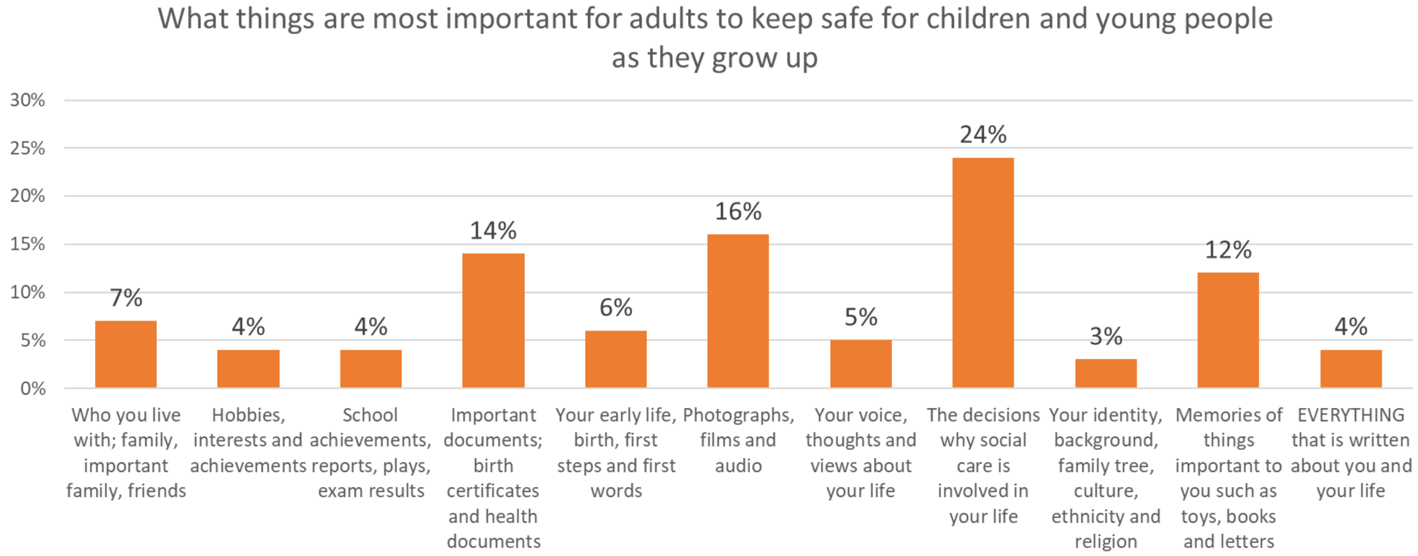
Children and young people were invited to 'vote' on which things are most important for adults to keep safe for them. Over 300 votes were cast by over 100 individuals.

Children and young people clearly want to understand the narrative of why they came into care and the reasons for social care involvement within their records. This was also validated in discussions with care leavers around the need to find out 'the truth' and 'their journey'.

Children in care and care leavers want adults to keep photographs, videos and audio files of their childhood. It is also important for key documents to be kept safe, such as birth certificates and health documents.

"The truth, but everyone's version of the truth is different depending on their perspective at the given time" (care leaver)

"Evidence the journey I've made" (care leaver)



Discussions with separated migrant young people reveal the importance of keeping resident permits, passports and leave to remain cards safe.

"The residence permit is important. Must keep it safe in the house" (separated migrant young person)

6.4 Accessing records

Most care leavers say that they don't know how to access their records, although many said that they would approach their personal adviser or other professionals to find out how. One care leaver said they did know the process and that they had accessed their records.

The majority of care leavers think that records should be available in both paper and electronic formats. A few care leavers suggested they would like a system that they can log into so that they have continuous access.

Most young people think that records should be structured with sections to help it make sense and many think it should be in chronological order. Many feel that files should not be redacted and some young people think that records should include ‘EVERYTHING’.

It is important that someone is there with the young person when they read it.

There is a very clear message that some children in care and care leavers do not want to see or know what is written in their files. Some feel that the ‘bad stuff’ shouldn’t be in their plans and that this could prevent care leavers accessing their records.

“I don’t want to hear about my past and the bad stuff. I just want to know about the person I’m becoming” (care leaver)

Children in care talk about information being age-appropriate and care leavers observe how things could be written down and recorded for discussions later in life, when the child or young person is ready. It is important to recognise that accessing records is a journey and not always a one-time request and experience.

6.5 Safe, secure and confidential record-keeping

Overwhelmingly, children in care and care leavers feel it is important for written information about them to be kept safe and confidential. Some children in care say that they feel assured that information is kept safe and secure. A few say they understand the need for others to see it and read it.

Children in care and care leavers commonly express concern about who sees information about them, and particular concerns are raised about teachers and school staff seeing recorded information.

Many children in care feel that permission should be sought from them before it is shared, or that they should be informed about what information is being shared with whom. It’s important for children in care and care leavers to know where information is stored and how to access it.

“As a kid all teachers knew I was in care. I didn’t know them so why should they see information about me?” (care leaver)

“I am worried about who it is being shared with” (child in care)

“Please ask my permission to share information (child in care)

6.6 Learning from care leavers

Additional discussions were facilitated with care leavers, comprising of Zoom discussions and a face-to-face Q&A session with managers. Common themes from these discussions include:

Redaction
- Is a common concern and can make files more confusing

Emotional support
- Should be available throughout the whole process of accessing records

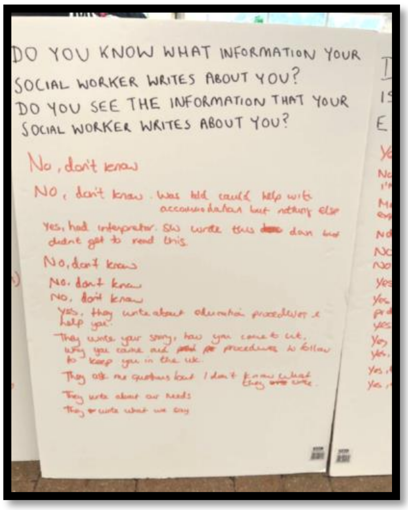
Clear guidance
- Is needed to explain how to acesss records and what to expect

Children's rights
- Young people feel it is their information and they have a 'right' to see it

“So they redacted my siblings names and it didn’t make sense, the file wasn’t in order I was just given a USB file that was missing 10 years of files” (care leaver)

“It shouldn’t be hidden; we should have access through a website as the information is about us” (care leaver)

6.7 Views of Separated Migrant Young People



DO YOU KNOW WHAT INFORMATION YOUR SOCIAL WORKER WRITES ABOUT YOU?
DO YOU SEE THE INFORMATION THAT YOUR SOCIAL WORKER WRITES ABOUT YOU?

No, don't know
NO, don't know. Was told could help with accommodation but nothing else
Yes, had interpreter. SW wrote this [illegible] down but didnt get to read this
No, dont know
No. dont know
No, dont know
Yes, they write about education procedures & help you.
They write your story, how you came to uk, why you came and [illegible] procedures to follow to keep you in the uk.
They ask me questions but I don't know what they [illegible] write.
They write about our needs
They write what we say

Around half of the separated migrant young people who engaged in the discussions said they understand what social workers record. They described social workers writing about the young person’s story, their journey, about their views and their needs. Some described social workers writing about education plans and processes for staying in the UK.

When asked what information is important to keep safe as they grow up in the UK, young people emphasised the importance of official government documents such as passports, resident permits, nationality documents and leave to remain cards.

A few young people described not knowing what information is important to keep safe.

“They write about your story, how you came to the UK, why you came and procedures to follow to keep you in the UK” (separated migrant young person)

6.8 Views of parents and carers of children and young people with disabilities

Approximately half of parents and carers of children and young people with disabilities say they know what information social workers write about them and their child, describing plans and reports. Of those who don't know, many say they want to know. Few parents say they know where information is stored.

When asked what the most important thing for social workers to know about their child and family is, parents and carers most commonly describe the 'history', because they do not want to 'repeat' themselves. It is also important for social workers to have a good understanding of the child, their needs, behaviours, likes and dislikes, condition, ability and communication needs.

Many parents and carers think that children and families should have access to information recorded by social workers. Although some acknowledge that their child would not understand or would have limited understanding, they would like to know so that they can share some understanding with their child.

"I have no idea what the information given to panel is and why they sometimes say no." (parent)

"No, but I probably should know where it is kept and who can look at it." (parent)

6.9 Views of children in need and children subject of child protection (CiN/CP)

Children and young people subject of CiN/CP plans appear to report a better understanding of the information social workers write about them compared to children in care.

Children and young people say that the reasons why social workers record information includes:

- Keeping them safe - which is a similar narrative to children in care and care leavers
- To create a record which is not forgotten or lost - children in care and care leavers rarely raise this as a reason
- To build an understanding of the child or young person - the same narrative as children in care and care leavers

Children and young people feel that social workers should be capturing a good understanding of the child or young person in order to help keep them safe.

Children and young people commonly say they don't see the things that social workers write about them, although they see them writing, and of those who say they do see what is written they often describe inaccuracies.

Most children and young people feel it's important to see what is written by social workers because its 'about me' and 'it's my life', whilst some do not feel it's important.

Children and young people overwhelmingly think it's important or very important for written information to be kept safe and confidential and there is a common narrative that they 'do not want everyone knowing all about me'. Children and young people want social workers to tell them when information will be shared (particularly with schools) and to explain what will be shared and what won't.

6.10 Views of professionals

Professionals feel that the challenges for care leavers accessing their files includes:

- There being too much jargon
- A lack of emotional and mental health support
- The files being overwhelming with too much information and too little structure
- Finding out information they didn't know
- Incorrect information and difficult language

Professionals feel the experience could be improved if workers:

- Use more positive language
- Reduce jargon
- Write directly to the child
- Organise files to make sense
- Challenge incorrect files

6.11 Talking to Fatima Whitbread, MBE

Our care-experienced project workers were fortunate to meet and talk with Fatima Whitbread MBE during the It's My Life Festival.

Fatima told us that it wasn't until her 20s that she tried to access her care records. Before that, she felt that it wouldn't have been helpful as she thought it might have a negative impact on her family life.

Fatima described her hand being forced by the press, who published a story about her early life and making contact with her birth mum. She felt she needed to tell her own story, in her own words, and to do that she needed to see her files.

Fatima described having to pay for her social care files. Our researchers were shocked by this as this isn't practice in Essex. The team has since learnt that some authorities continue to charge for access to records.

Fatima found her files to be very factual, describing placement moves, and with none of her views and thoughts. She described how much social work has changed over the years. Fatima wants to make a difference to the lives of children in care and care leavers and she is challenging the negative stereotypes of care.

"Sport saved me. Every child in care should have something or someone to save them." Fatima Whitbread

7. Recommendations for the DfE

The Missing Chapters project team is making the following recommendations for the Department for Education:

1. **Develop guidance** which provides clear information to children in care and to care leavers about what they can access, as well as when and how they can access this, and sets out clear expectations of what records look like and the legislation which shapes this

2. Children in care and care leavers should have the same **legislative rights** to access support as adopted children and adults, and emotional support should be provided to care leavers throughout their journey of accessing records, regardless of their age

3. Local authorities should engage with care leavers to develop an idea of **what records should look like**; it is important to consider whether records should be structured in chronological order

4. Ensure that Article 17 of the UNCRC (United Nations Convention on the Rights of the Child), '**Rights to Information'** are raised in every child's plan

5. Local authorities should develop **writing principles** for social workers and all professionals who contribute to records

6. Children in care and care leavers should have access to case management systems and be able to add to their records; no providers in the UK offer this and the government should **address the current monopoly** which is stifling innovation and technology in the field

7. Implement mandatory **trauma-informed training** which educates whole school professionals in the needs and behaviours of children in care

Next steps in Essex

Essex will be utilising the insight from this valuable Missing Chapters project to inform its ongoing journey of improvement and excellence and is exploring the following next steps:

1. Agree an Essex Position Statement clearly communicating the rights of children in care and care leavers to access their story and records and describing the process; the statement to be available across the Access to Records web pages, the CiCC website and within the Local Offer

2. Co-design an information film exploring frequently asked questions for children in care and care leavers

3. Conversations about rights to access information (Life Stories and Records) to be brought into Life Plans, Pathway Plans and to Reviews

4. Virtual School to collaborate with the CiCC to develop training for schools

5. Access to Records to provide immediate signposting to care leavers accessing their records with an automatic reply email containing the link to direct care leavers to the Family Connect website

6. Use learning from this project to inform our current and developing work relating to Life Story Work, Life Story Books and Later Life Letters, and to develop and embed the ‘what happened on the day I came into care’ letter

7. Promote the recording of photographs, videos and audio and develop guidance for professionals around this

8. Support the project team to attend development and quadrant days to share learning

9. Develop a proposal on a care leaver exchange trip with Copenhagen to learn about difference and share developing practice

10. Support us to develop a proposal to host an international conference in 2024/25 bringing leaders in this field together to educate and empower; partners in this work would be UCL, MIRRA and University of Copenhagen

11. Explore the benefits and challenges of conducting a small test study pilot of giving care leavers a login to their CMS record

With thanks to the Care Experienced Project Workers, care leavers from the Essex Children in Care Council, the workforce and volunteers who support the It's My Life Festival, and every child and young person who shared their views with us.

This Missing Chapters report is issued by:

The Essex Children in Care Council
Quality Assurance and Safeguarding
Children and Families
Essex County Council
Duke Street
Chelmsford
CM1 1JP

Contact us by email at involvement@essex.gov.uk

The information contained in this document can be translated and/or made available in different formats on request.