

**WRITTEN QUESTION TO THE MINISTER FOR HEALTH AND SOCIAL SERVICES  
BY DEPUTY M.R. HIGGINS OF ST. HELIER  
ANSWER TO BE TABLED ON TUESDAY 14th APRIL 2015**

**Question**

Further to question (8633) of 24th March 2015, will the Minister show in a table –

- (i) the length of time each of the 94 social workers has worked for the department;
- (ii) the total length of service of each of the 94 social workers has in Jersey and elsewhere;
- (iii) the type and qualifications held by each of the 94 social workers;

Will he further explain the role and number of social workers engaged in operational and management capacities in each of the following areas -

- (a) Director Children's Services and Heads of Service for Community and Social Work; Specialist Support; Social Work and Residential and Support;
- (b) Director of Older Adult Services and Heads of Community and Social Work; Nursing (Mental Health) and (Residential Care); and,
- (c) Director of Adult Services and Heads of Alcohol and Drug, Community Services and Mental Health.

Will he provide the figures relating to days lost through sickness for the period 1st January 2014 to 31st December 2014?

Will he explain the nature of the 12 adult and 15 child placements in the UK and list the institutions involved and their specialisms and break down the annual cost of these placements?

**Answer**

- (i) **The length of time each of the 94 social workers has worked for the department**

	<b>Up to 5 years</b>	<b>5 years up to 10 years</b>	<b>10 years up to 15 years</b>	<b>15 years or more</b>	<b>Total</b>
Adult Services*	13	6	11	6	<b>36</b>
Children's Services **	20	21	11	6	<b>58</b>
<b>Total</b>	<b>33</b>	<b>27</b>	<b>22</b>	<b>12</b>	<b>94</b>

Please note, numbers across services have been aggregated so individual staff cannot be identified.

\*Adult Services includes Older Adults Social Work, Adult Mental Health, Adult Social Work, C&SS Governance, Occupational Therapy and Alcohol and Drugs Services

\*\* Children's Services includes Children's Mgmt & Administration, Children's Social Work and Residential & Support Services

**(ii) The total length of service of each of the 94 social workers has in Jersey and elsewhere**

The length of service in Jersey is answered under i). It is not possible to track the length of service of every individual member of staff prior to their employment by the Department. Staff coming to Jersey will range from newly qualified social workers who have just finished their degrees to those who have many years of service across a number of employers and service areas.

**(iii) The type and qualifications held by each of the 94 social workers**

The range of qualifications will depend on when an individual formally qualified as a social worker. Since 2003, social work has been a degree-based qualification and therefore all staff employed since then will hold either a first degree or Master's degree in social work.

The previous qualifications are listed below and all registered social workers in Jersey will have one or other of these, depending on when they qualified.

The main qualification for social work is the [undergraduate](#) Bachelor's degree (BA, BSc or BSW) in social work, offered at [British universities](#) from September 2003 onwards. There is also a Master's degree (MA, MSc or MSW).

These have replaced the previous qualifying award, the undergraduate Diploma in Social Work (DipSW), although the postgraduate counterpart, the Postgraduate Diploma in Social Work (PGDipSW) is still awarded and allows the holder to register and practice as a social worker. The DipSW was first awarded in 1991 and phased out across the UK by 2009. Prior to this, the recognised qualification was the Certificate of Qualification in Social Work (CQSW), awarded between 1975 and 1991.

**Will he further explain the role and number of social workers engaged in operational and management capacities in each of the following areas –**

**(a) Director Children's Services and Heads of Service for Community and Social Work; Specialist Support; Social Work and Residential and Support;**

The 2002 Children's Law establishes the legal framework for children's social work (CSW) in Jersey, the fundamental purpose of which is to safeguard and promote the welfare of children.

CSW can be understood as a pathway, which filters children and families, ensuring those at risk of significant harm receive appropriate protection and care services and those who have lower level needs are signposted to more appropriate services or stepped down when the risk of harm has been moderated to an acceptable level.

MASH (Multi Agency Safeguarding Hub) led by CSW receives all enquiries about children believed to be at risk of harm. MASH gathers information, assesses risk and need and makes a decision about next steps.

Cases which meet the threshold for CSW, as set out in multi-agency procedures, are referred from MASH to CIRT (Children's Initial Response Team). CIRT carries out Article 42 child protection enquiries and initial and core assessments, each designed to respond to a specified level of risk and

need. There are three routes from CIRT depending upon the assessed levels of risk and need. A family can be stepped down and the case closed to CSW or stepped up and allocated to a Social Worker in the Children in Need (CIN) Hub or Adolescent Hub or to a Social Worker in the Statutory Team. The hubs respond to lower levels of assessed risk/need and the Statutory Team responds to the higher levels for children requiring inclusion on the Child Protection Register and/or applications to court for Emergency Protection Order or Interim Care Orders.

Social workers working with children in the community will be leading a multi-agency system delivering interventions, directly or commissioned, designed to support, challenge or change parenting in ways that reduce the risk to children. They will also undertake direct work with children to satisfy themselves that the welfare of the child is being safeguarded and promoted and to support the child to deal with whatever adverse experiences s/he has encountered. Children can be stepped up or stepped down from community interventions. The Hubs will include some children who are in care as a result of voluntary agreement with the parents, where the intention is that ultimately the child will return home.

Where final care orders are made, or where a child is voluntarily accommodated without a planned return home, responsibility for the child transfers to the Permanence Planning Team (which includes responsibility for leaving care). The PPT delivers the care plan for a child who will not be returning to the care of parents (adoptions, long-term fostering, kinship care arrangements or residential care). Its task is to work with the multi-agency system and with those providing direct care to ensure the child achieves the best possible outcomes against the 6 domains in Jersey's Children and Young Peoples Strategic Framework.

A separate team for Children with Complex Needs deals with all aspects of the social work task (CIRT, CIN, Statutory, PPT) for disabled children and those with complex needs. The Fostering and Adoption Team recruits and assesses potential adopters and foster carers and trains and supports those that are recruited to look after children in the care of the States of Jersey. ISS, the Independent Safeguarding Service, is the quality assurance arm for CSW. ISS chairs all child protection conferences and reviews for looked-after-children as well as developing and maintaining the infrastructure for best practice and the quality assurance framework.

Qualified social workers have leadership roles in some of our residential homes. The task of the staff in the home is to deliver the care plan for the child.

Some aspects of work must be carried out by a professionally qualified social worker; others can be carried out by differently qualified staff. Each team (excluding residential) has a team manager, and at least one senior practitioner, social workers and family support workers. Practice supervision is shared between team manager and senior practitioner but management responsibility for all aspects of practice rests with the team manager in consultation with the Head of Service. There are two heads of service, one for safeguarding and one for children in care.

Across Children's Services\* there are 48 social workers in operational roles and 10 in managerial/team leader positions

\* Children's Services includes Children's Management & Administration, Children's Social Work and Residential & Support Services

**(b) Director of Older Adult Services and Heads of Community and Social Work; Nursing (Mental Health) and (Residential Care);**  
**and**

**(c) Director of Adult Services and Heads of Alcohol and Drug, Community Services and Mental Health.**

Unlike Children's Services, there is no statutory framework for the provision of social care for adults in Jersey. Therefore, all engagement with social care services is undertaken on a voluntary basis. The only area where statutory legislation applies to social work regarding adults is under the Mental Health (Jersey) Law 1969.

The Adult and Older Adult Services employ social workers at a number of levels within the organisation including Service Managers, Team Leaders, Senior Social Work Practitioners, basic grade Social Workers and Social Work Assistants. The social workers work very closely with other health and social care professionals such as nurses, doctors, occupational therapists and other allied health care professionals. The role of the social worker in Adult Services includes working towards promoting the best interests of individuals and groups in society and respecting the individual's right to self-determination whenever possible. Social workers should respect, promote and support people's dignity and right to make their own choices and decisions, provided this does not threaten the rights, safety and legitimate interests of others.

The social work teams will receive direct referrals from GPs, health and social care professionals, police and self- or family referrals. These referrals will be assessed and, where appropriate, allocated to an individual or multi-disciplinary team dependent on the complexity of the presenting issue.

Other than the direct social worker referrals, the Adult Social Work teams also provide:

- Long-term care assessments to establish the needs of individuals who have long-term care requirements and to support colleagues in the Social Security Department to establish if the individual is entitled to long-term care benefits.
- Hospital discharge planning and follow-up community support for those people who have had a hospital admission, either at the general hospital or in one of our mental health units.
- Adult safeguarding co-ordination and investigation as part of a multi-agency team. This includes protecting adults from the risk or effects of physical abuse, financial abuse, sexual abuse or neglect.
- The Mental Health Law (Jersey) Law 1969 requires a duly authorised officer, most commonly a social worker with specialist training in mental health law, to carry out assessments on people presenting with mental disorders. Through the assessment, the duly authorised officer will decide if an application for the person needs to be made to the Minister of Health and Social Services for the person to be detained for their own safety and/or the safety of others.
- Care co-ordination and case management of people with complex needs, which includes learning disabilities, mental ill health and physical disabilities.

Across Adult Services\* there are 29 social workers in operational roles and 7 in managerial/team leader positions.

\*Adult Services includes Older Adults Social Work, Adult Mental Health, Adult Social Work, C&SS Governance, Occupational Therapy and Alcohol and Drugs Services

**Will he provide the figures relating to days lost through sickness for the period 1st January 2014 to 31st December 2014?**

Adding to the information already provided in the response to Question 1240/5 (8633):

<b>Division</b>	<b>Percentage of days lost through sickness</b>	<b>Sickness days lost</b>
Older Adults Social Work	1.9%	69.2
Adult Mental Health	4.6%	36.3
Adult Social Work	1.7%	66.4
C&SS Governance	3.6%	28
Children's Mgmt & Admin	6.4%	185
Children's Social Work	4.7%	537.5
Residential & Support Services	2.3%	18.3

**Will he explain the nature of the 12 adult and 15 child placements in the UK and list the institutions involved and their specialisms and break down the annual cost of these placements?**

The UK placements involve a range of adults and children with highly complex needs that cannot be adequately met in Jersey. These complex needs may arise from learning disabilities, mental health challenges, physical disabilities, autism or sensory disabilities or indeed a combination of a number of these factors.

In order to accommodate these individuals' complex needs, we rely on a range of specialist service providers, which includes secure accommodation, specialist hospital provision, highly specialised children's resources and other units. All will be commissioned with the needs of the individual being paramount.

<b>Total UK Placement Expenditure</b>	<b>2012 (£)</b>	<b>2013 (£)</b>	<b>2014 (£)</b>	<b>Total 2012-2014 (£)</b>
<b>Adult Services</b>	2,121,879	2,318,782	2,102,006	<b>6,542,667</b>
<b>Children's Services</b>	1,783,115	1,984,617	1,660,641	<b>5,428,373</b>
<b>Grand Total</b>	<b>3,904,994</b>	<b>4,303,399</b>	<b>3,762,646</b>	<b>11,971,040</b>