



**MSF**

MINISTRY OF  
SOCIAL AND FAMILY  
DEVELOPMENT



## **FAMILY SERVICE CENTRE CODE OF SOCIAL WORK PRACTICE**



# FOREWORD



Family Service Centres (FSCs) are one of the key social work agencies by which Singapore seeks to respond to the individual, family and community problems and needs of its population. Throughout the history of FSCs, the provision of social work services has been a key part of the professional service response.

Reflecting the importance of the 'social work effort' within FSCs, there has been a desire amongst the Ministry of Social and Family Development (MSF) and FSC practitioners to provide a clear descriptor of social work practice within an FSC and its expected standard. With this descriptor, three outcomes will be derived. Firstly, to generally distinguish the social work effort from other FSC intervention efforts. Secondly, to acknowledge common aspects of intervention shared with other professions. Thirdly, to identify more clearly the service components of social work practice within an FSC.

The development of a Family Service Centre Code of Social Work Practice (FSC-CSWP) is an exciting opportunity in the history of FSCs. The consultative development of the FSC-CSWP provided an opportunity to best consider:

- Who the clients are;
- What the problems and the consequent service needs are; and
- How Social Work Practitioners (SWPs) can appropriately, effectively and efficiently respond to these needs.

The FSC-CSWP recognises the variety and range of cases now presenting to the FSCs. These cases vary significantly in complexity, risk and service demands. The FSC-CSWP clearly positions itself in relation to the balance of these three aspects.

The FSC-CSWP also orientates the predominant social work effort within an FSC towards a more comprehensive effort in responding to cases which have greater degree of case complexity, risk and service demand needs. In addition, the FSC-CSWP provides a means to sustain intervention outcomes through different methods of practice. The FSC-CSWP upholds the social work professional responsibility whilst maintaining this sustainability.

**Ms Denise Low**

*Director*

*Service Development and Management Division*

*Ministry of Social and Family Development*

*“Social Work involves entering into the lives of people who are in distress, conflict or trouble. To do this requires not only technical competence but also qualities of integrity, genuineness and self-awareness”.*

*Lishman (1994: 89)*



# ACKNOWLEDGEMENTS

This document outlines the expected standard of social work practice in Family Service Centres (FSCs). It marks the completion of a four-stage consultation and development process initiated by the National Council of Social Service (NCSS), in partnership with key service stakeholders in FSCs and the Ministry of Social and Family Development (MSF). With a move of MSF-funded programmes from NCSS to MSF in July 2013, MSF continued the consultation and development process.

Stage One involved extensive consultation with FSCs through focus group discussions and agency visits on the nature of social work practice in FSCs. In Stage Two, the FSC-CSWP draft was communicated to the FSCs to provide an understanding to the scope, content and structure of the FSC-CSWP. Feedback and concerns were collated for revision of the draft FSC-CSWP. This consultation and the following ones were conducted in smaller groups to ensure ample opportunities and time for SWPs in the FSCs to voice their concerns and share their views.

In Stage Three, the key areas of varying positions were surfaced for discussions. These included the way in which clients are served through the various methods of practice in the FSCs and the target client groups served by the FSCs.

In the final Stage Four, consensus to the varying positions were concluded and shared with the FSCs. Numerous revisions were made thereafter, taking into consideration the feedback and questions raised by the various stakeholders, in relation to social work practice in FSCs.

For the completion of the FSC-CSWP, we would like to extend our gratitude and appreciation to all who have contributed to the completion of this FSC-CSWP, with special mention to:

## ***FSC Social Work Practitioners***

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Mr Bong Benny  
Ms Choy Puay Wun  
Dr Katijah Bte Mohamed Dawood  
Mrs Lee Yean Wun  
Dr Ng Chee Keong Vincent  
Mr Udhia Kumar S/O Mukaya  
Ms Yogeswari D/O Munisamy

## ***Committee for Practice Standards***

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Mrs Lee Yean Wun, Chairperson  
Ms Chee Liew Chin, Member  
Mr Joachim Lee, Member  
Mr Mohd Ali Bin Mahmood, Member  
Dr Ng Chee Keong Vincent, Member  
Mr Samuel Ng, Member  
Ms Wu Mei Ling, Member

## ***Staff of Service Development and Management Division***

Mr Shawn Koh  
Mr Phua Chun Yat  
Ms Ng Peck Hoon  
Mr Wilson Mack  
Ms Esther Tan  
Mr Paulus Sutjipto  
Ms Poon Shen Lynn

# ABOUT FSC-CSWP (VER. 1.0)

The Family Service Centre Code of Social Work Practice (FSC-CSWP) 1.0 provides an important updates from the earlier version of FSC-CSWP Development Version 5.1 in order to bring about better clarity about the intent and the objectives of FSC-CSWP. Operational definitions are also included to make the definitions more relevant to FSCs' use.

A conceptual diagram on the integration of FSC methodologies is also included in this version. It is intended to depict how the longer term FSC practice would look like.

We have also appraised the principles of professional social work practice in the FSC-CSWP version 1.0 which are essential in FSCs' practices regardless of methodologies used.



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## 1 Mission and Role of Family Service Centres

Family Service Centres (FSCs) are community-based social work agencies that provide social support relating to the family. FSCs will focus on providing support to the low-income and vulnerable families predominantly through the provision of professional social work services. The long-term goal of FSC services is for families served to achieve independence, resilience and stability to manage life's challenges.

The FSC Service Model outlines the scope of work that should be undertaken by an FSC. The Family Service Centre Code of Social Work Practice (FSC-CSWP), in addition to the FSC Service Model, details the key components of professional social work practice.

## 2 Framing the Social Work Role within the Mission of FSCs

The social work profession contributes three areas in the provision of FSC services:

- A historical and contemporary psychosocial 'person-in-environment' understanding of human problems and needs;
- An integrated preventive and responsive practice to address needs and risks; and
- An integrated utilisation of casework, group work, community work and social policy and research intervention strategies.

The FSC-CSWP is shaped by the mission of FSCs to respond to both the generic and higher need and risk client base of FSCs. This dual focus means that the FSC-CSWP is to be positioned upon four service approach principles:

- i. Prioritisation towards more vulnerable and at-risk populations;
- ii. Prioritisation of professional assessment and timely response to the needs of vulnerable and at-risk populations;
- iii. Provision of multiple entry points for individuals and families; and
- iv. Provision of sequential services of casework, group work and community work dependent on the assessment of needs and risks of clients.

## 3 Purpose of the FSC-CSWP Document

Society has a right to expect that FSC Social Work Practitioners (SWPs) will provide services of high professional standards.

The FSC-CSWP is a key means through which the scope and component activities of professional social work practice are identified. This identification provides clarification to SWPs themselves, clients, partners and the community on the extent of the social work practice mandate and the component professional activities of this mandate. FSC SWPs are expected to perform at the required level of competency as dictated by these practice standards outlined in the FSC-CSWP.

The development of the FSC-CSWP provides a significant means of ensuring public faith in the legitimacy and capacity of social work practice in FSCs. This has to be supported by practices that adhere to the standards set by the FSC-CSWP. Most importantly, SWPs are able to carry out their duties confidently knowing that their practice meets the professional standards articulated by the larger FSC practice community.

## 4 The Four Principles of Professional Social Work Practice

The core element that sets apart professional practice from that conducted by a layperson is the higher-order thinking and reasoning skills. Additionally, professional social work practice requires that there be structure and rigour in critically thinking through the case, competencies in being able to undertake adequate and appropriate intervention, and good analytical skills to reflect and evaluate practice.

The following four principles undergird the intentionality and manner in which professional social work practice is to be undertaken.

**i. Practice is logically sequenced and reasoned**

Professional social work practice is a sequence of ordered activities commencing from the point of referral through to case closure. The fundamental elements of engaging clients and their issues in order to better understand and subsequently respond to those issues, followed by evaluation of the entire process is analogous across agency and practice contexts. Although not every case will proceed through all the stages from referral to case closure, they must nonetheless be treated as an operational journey that the worker, the client and the agency embark on.

In tandem with logically sequenced practice, it is also acknowledged that practice is not to be undertaken without thinking and proper consideration. Logical thinking and reasoning form the foundational platform of all professional practice. It is the ability to think through a case situation from a presenting 'story' (i.e. what the client is saying and presenting with) through to the formulation of a professional case.

**ii. Practice is theoretically informed and directed**

All logical thinking is guided, supported and informed by theoretical ideas. Theories provide the conceptual language and causal structure to think through a case as it is converted from a story to a case in logical thinking and as it is responded to. Concurrently, it is important that the conceptual ideas of the theories be weighed against their relevance and appropriateness to the needs of the case, and that only theoretical ideas which have practice validity be utilised in guiding the logical thinking and reasoning through the case. In addition to theoretical ideas and frameworks, knowledge of relevant and up-to-date legislations, policies and protocols are equally important in informing, guiding and directing professional practice.

**iii. Practice is purposive**

While the concept of 'therapeutic alliance' is important for practice, the danger lies in seeing this as an end in itself. Hence the purpose of entering into and forming professional working relationships with clients and/or their families must also be to facilitate the changes to achieve the outcomes that the client and worker had agreed upon.

**iv. Practice integrates multiple methods and approaches**

Integrated practice refers to the utilising and integration of different practice modalities from casework to group work and community work in order to ensure that intervention and service responses are better matched to the needs of the individual and/or family at that point in time. Hence, integrating multiple methods of practice would help to alleviate casework 'drifts'.

## **5 Definitions**

### **Definition of Social Work**

The International Federation of Social Workers (IFSW) recognises that the profession of social work practises within a diversity of social settings. The principles of humanitarianism and democratic ideals underpin the social work profession. The IFSW (2004) notes:

*“Professional social workers are dedicated to service for the welfare and self-fulfilment of human beings; to the development and disciplined use of scientific knowledge regarding human behaviour and society; to the development of resources to meet individual, group, national and international needs and aspirations; to the enhancement and improvement of the quality of life of people; and to the achievement of social justice.”*  
(2004, IFSW, Ethics Statement, p.1)



Social workers work towards the objectives of the profession within an increasingly complex and difficult environment. This environment within which practice is undertaken is characterised by three distinguishing features:

*Uncertainty* – the best objectives or the best ways to work with an individual(s) can never be ‘known’ in any absolute sense. Practice decisions, although needing to be made with professional confidence, always remain within a context of uncertainty.

*Contested* – within a democratic society, there are many views on how complex social, inter- and intra-personal problems should be responded to. The voice or position of social worker will be contested as part of the discussions and debates in relation to appropriate and effective practice.

*Accountability* – social workers practise within an environment of multiple levels of statutory, legal, community, and professional accountability. The rationale for and demonstration of the appropriateness and effectiveness of competent professional practice are essential components of accountable practice.

SWPs in FSCs must practise within this uncertain, contested and accountable practice environment in a professionally competent manner.

This professional helping process of utilising values, knowledge and skills may be represented as follows:

**Diagram 1: Values, Knowledge and Skills of Social Work Practitioners**

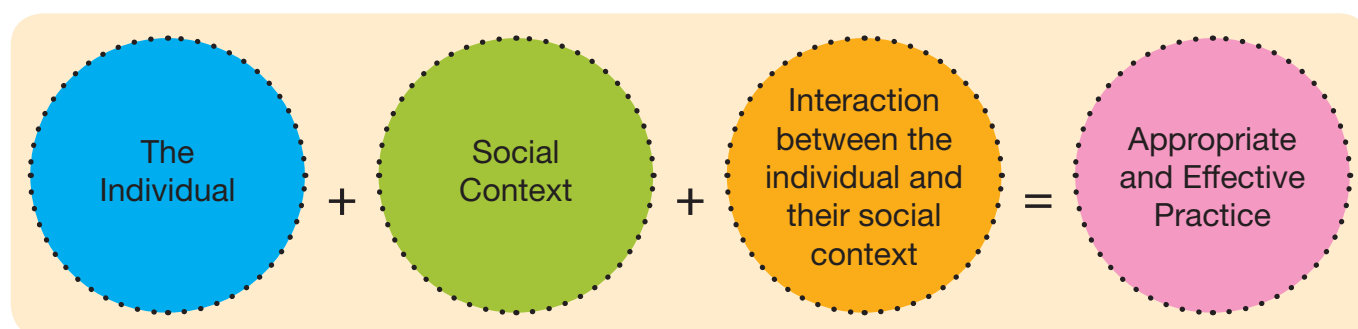
Values	Knowledge	Skills
A public and articulated value and ethical base	A capacity to undertake logically developed, considered and reasoned practice	An appropriate use of interpersonal communication
	A sensitivity and ability to apply multiple levels of explanatory analysis	An awareness and utilisation of the professional role
	A consistent and informed professional, theoretical and research knowledge base	An insight into the role of self

*Adapted from “Professionally Accountable Practice – A practice manual for logical reasoning in practice.” by P. Meemeduma, 2002, Unpublished manuscript. Edith Cowan University, Perth Western Australia, p. 11-12*

### Place of the Social Work Profession in an FSC

The SWP works in an FSC, a multidisciplinary environment, which recognises and values the respective expertise. The SWP is respectful and works in collaboration with other professions. The SWP also recognises social work values, knowledge and skills base, as well as sharing common values, knowledge and skills with other professional groups. The SWP recognises and works with person-in-environment, while considering the psychosocial dynamics. These dynamics require the SWP in their practice, to have professionally competent knowledge and skills, which facilitate an understanding of and responsiveness to appropriate and effective practice.

**Diagram 2: Appropriate and Effective Practice**



## Definition of Family Service Centre Code of Social Work Practice (FSC-CSWP)

The FSC-CSWP is defined as a document which indicates, through reference to social work theoretical, research and practice knowledge and skills, the:

- *Scope* of social work practice in an FSC setting;
- *Activities* of social work practice in an FSC setting; and
- *Indicators* of social work practice in an FSC setting.

The FSC-CSWP is specific to social work practice within FSCs' practice settings, although its contents share a common base with social work in other organisational practice settings.

The FSC-CSWP is specifically referenced in relation to:

- FSC Service Model;
- Social work practice in FSCs; and
- Client groups of FSCs.



The FSC-CSWP provides a key medium through which professional social work practice in FSCs can be referenced, guided and accountable to the clients, community and stakeholders.

## 1 The Integrated FSC-CSWP Framework

To guide the SWPs on the scope of social work activities and the professional standards of social work practice that is accountable to clients, community and stakeholders, the Integrated FSC-CSWP Framework is developed. It is made up of:

- a. Continuum of Practice
  - i. Risk and Complexity Classification
  - ii. Levels of Intervention Classification
- b. Methods of Practice
  - i. Casework practice
  - ii. Group Work practice
  - iii. Community Work practice

### a. Continuum of Practice

A *Continuum of Practice* is an approach to social work practice which recognises the varying types of needs for different groups of clients such as individuals, families, groups and communities. The approach acknowledges the heterogeneity and diversity of practice demands which would require different levels and types of intervention depending on the characteristics presented by the individuals, families, groups and communities.

The *Continuum of Practice* is made up of the Risk and Complexity Classification and Levels of Intervention Classification.

Each part provides a means of representing the range of needs that social work effort must respond to within an FSC. The FSC-CSWP describes the standards of practice SWPs are required to meet to respond to these needs.

#### i. Risk and Complexity Classification

The Risk and Complexity Classification illustrates the interaction of risk to an individual's safety and the level of complexity of needs presented by an individual or family, which differentiates the levels of intervention required for the individual or family

#### *Understanding Risk:*

Under the FSC-CSWP, risk is defined as "risk to individual's safety" (e.g. risk of abuse and neglect; risk of family violence; risk of suicide; risk of self-injury and risk of aggression etc). In this context, risk is defined in relation to abuse or violence which are closely associated with the concept of 'significant harm' to self and others. When making assessment on the risk presented by the families, the SWPs should focus on, but not restricted to the following:

- Risk of harm towards or by the family members which include child abuse, spousal abuse, elder abuse as well as vulnerable persons<sup>1</sup> abuse;
- Risk of harm towards self which include suicide, self harm and extreme risk-taking behaviours; and
- Risk of harm towards or by the members of the community which include sexual aggression and criminal behaviours.

<sup>1</sup> Vulnerable persons are people who are at a greater than normal risk of abuse by reason of disability, age or illness; and are or may be unable to protect themselves against harm or exploitation.

Understanding risk assessment

In the context of FSC-CSWP, risk assessment refers to an evaluation of the nature, likelihood, frequency, duration, seriousness and imminence of a behaviour that leads to harm which is perceived by a professional at a specific point of time. Risk tends to relate to vulnerability of a person, e.g. young children, victim of family violence and abuse and persons with mental condition. Risk can also be related to both situation or person that causes harm.

*Understanding Complexity:*

‘The defining characteristic of a complex system is that there are significant number of systems intertwining and mingling each other through multiple, recursive, nonlinear feedback loops (Gilpin & Murphy, 2008).

Complexity is recognised as relating to two interrelated features of a practice situation, namely:

- i. The number or extent of issues in three areas:**
  - a. *Instrumental aspect* - everyday living e.g. employment, income, housing, education, medical treatment
  - b. *Social aspect* - relationship with others within family, community
  - c. *Personal aspect* - relating to self-identity, self-worth and self-competency.
- ii. The ‘degree’ or ‘depth’ of the issue in relation to either or both:**
  - a. *Acute presentation* of problems at a heightened state
  - b. *Chronic presentation* of problems over an extended period of time

Given this nature, the multiple needs of such complex cases cannot be addressed by a single agency or professional group (Crawford 2012; Davies & Ward 2012; Hood 2012a).

In addition, complex systems (cases) are characterised by non-linear relationships, i.e. a change in one variable or set of variables, will be associated with disproportionate changes in another variable, or set of variables. Change is also the usual feature of these complex cases.

Considering the interactions or behaviours of the components in these complex systems, they reflect ‘a deeper level of patterned order’ and not random behaviours. As such, the interactions or behaviours cannot be predicted simply by the rules of those underlying interactions but are the results of the interactions between a large number of the relatively simple parts (Darley, 1994).

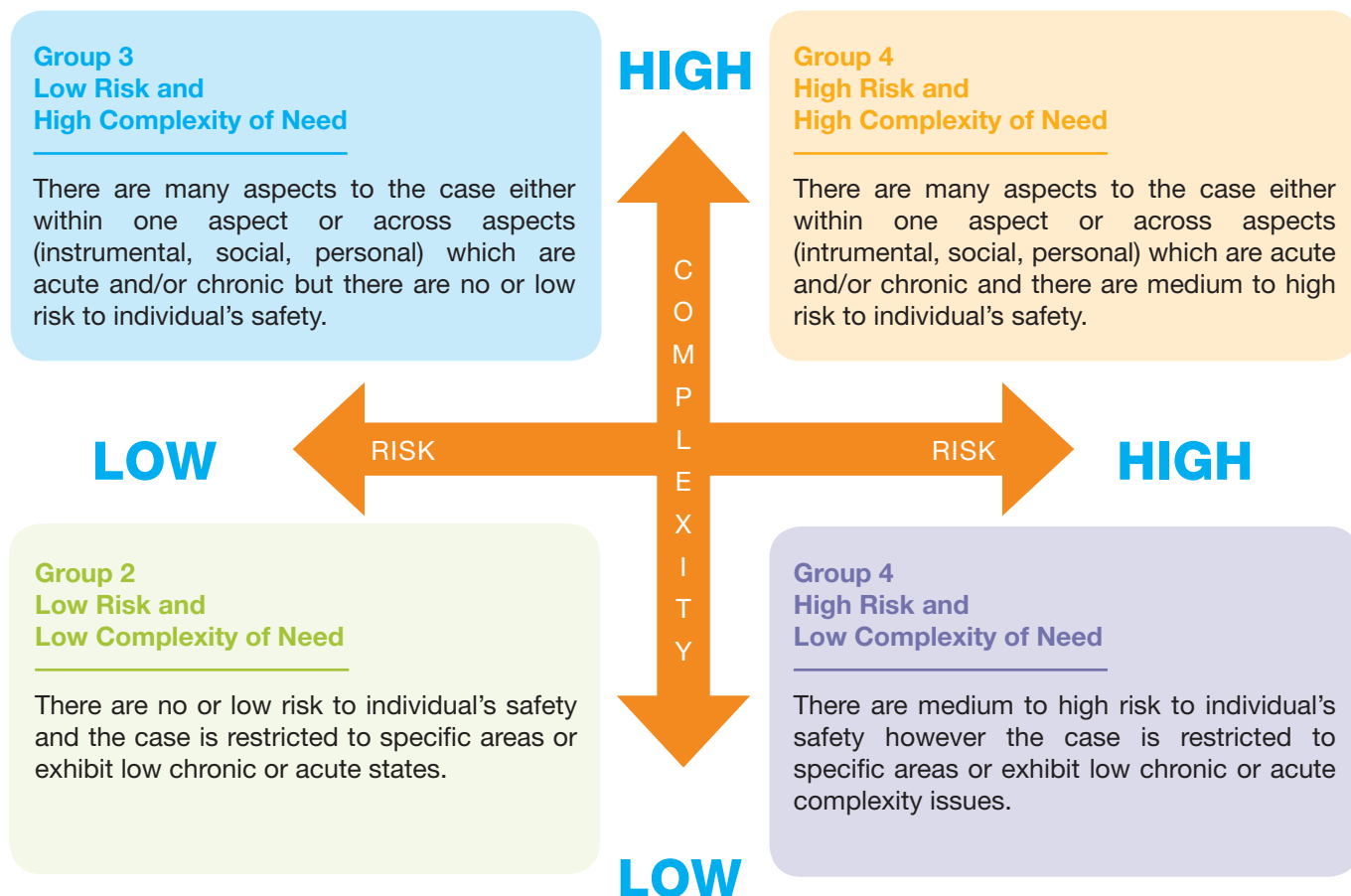
Based on the assessment on the level and interaction of risk and complexity, the individual or family the FSCs serve can be classified into different FSC-CSWP Groups.

**Table 1: FSC-CSWP Groups and Definitions**

FSC-CSWP Groups	Definition
Group 1	Normal Functioning <i>No risk; no complexity of needs</i>
Group 2	Emerging Risks <i>Low risk; low complexity of needs</i>
Group 3	Escalating Risks <i>Low risk; high complexity of needs</i>
Group 4	Higher Risks <i>High risk; either low or high complexity of needs</i>

The following diagram seeks to further the understanding on the types of risks and complexity of needs for clients under FSC-CSWP Group 2 to 4:

**Diagram 3: Risk and Complexity Classification for FSC-CSWP Group 2 to 4**



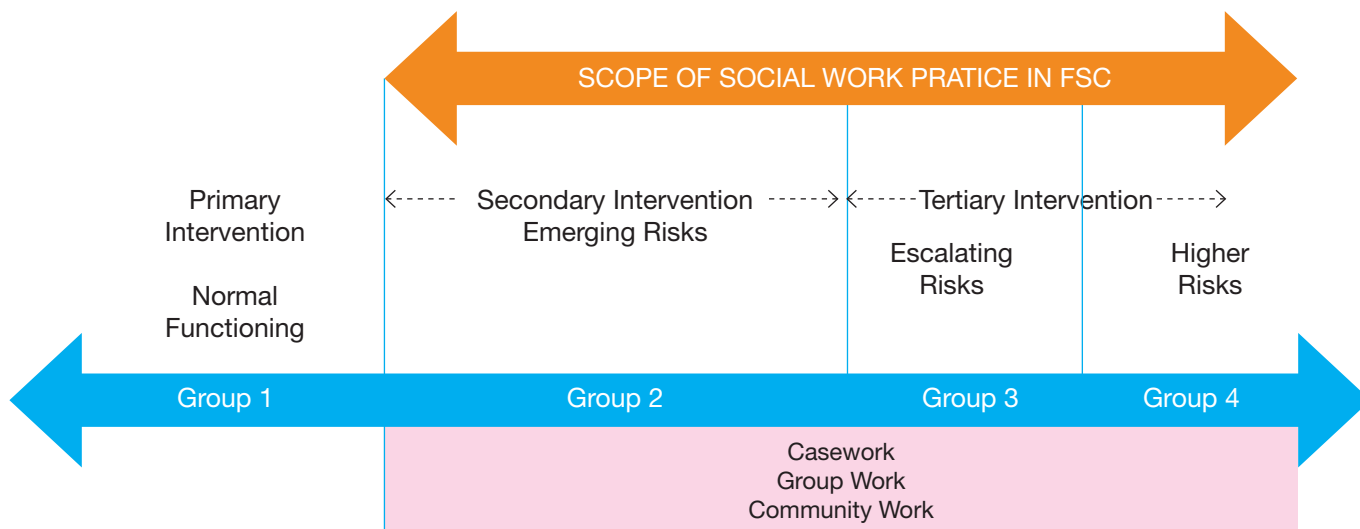
**ii. Levels of Intervention Classification**

The three levels of social work intervention are differentiated by the focus of the intervention effort – whether intervention is directed towards the whole of society, specific groups within society or towards specific individuals and families in the society. For the purpose of FSC-CSWP, three levels of intervention are defined:

- *Primary* – developmental services for the Normal Functioning Group which contribute towards the capacity-building of society and communities to enhance individual, family and social functioning to prevent the rise of social problems and needs.
- *Secondary* – preventive services for the Emerging Risks Group, which help to build resilience and focus on early intervention to address emerging risk factors that may undermine the functioning of individuals and families and place these individuals and/or families at-risk of future problems.
- *Tertiary* – remedial services for Escalating Risks and Higher Risks Groups which focus on mitigating risks that may undermine the safety of individuals and families.

The Continuum of Practice incorporates both the Risk and Complexity Classification and Levels of Intervention Classification to assist SWPs to determine the appropriate level of intervention (i.e tertiary, secondary and primary) in response to the risks and complexity of needs of clients in the respective FSC-CSWP Group classification. It is shown in the diagram below:

**Diagram 4: Continuum of Practice**



The *Continuum of Practice* provides a means of distinguishing the client groups upon which the social work effort within an FSC is focused on and delineates in a logical manner the range of service types and needs SWPs in an FSC will respond to.

The social work effort in FSCs will focus on secondary and tertiary intervention for FSC-CSWP Group 2 to Group 4 clients.

#### **b. Methods of Practice**

Traditionally, a methods approach involving casework, group work and community work were used in social work practice (Perlman, 1957; Pincus & Minahan, 1973 [Casework]; Konopka, 1963 [Group Work]; Rothman, Erlich, & Tropman, 2001 [Community Work]). Each method of practice is distinct in terms of the focus of intervention effort, and the utilisation of this focus is the principal means of bringing about change.

- *Casework* refers to a method of social work intervention whereby a SWP works directly with individuals and/or families and within their unique context and needs.
- *Group Work* refers to a method of social work intervention whereby a SWP utilises a group setting as a medium to bring about changes in individuals and/or families. Through the use of Group Work, the SWP facilitates group dynamics and provides opportunities for individual insight, problem solving, behaviour management and relationship network support.
- *Community Work* refers to a method of social work intervention whereby a SWP utilises the community setting as a medium to work with individuals and/or families. Community work have dual purposes. Firstly, to enhance individual and family social network support connection. Secondly, to build capacity in local communities to respond to the needs of individuals and families.

## i. Casework Practice

In this approach, the key service characteristics of casework are utilised to assess and respond to the needs of the case:

- Acknowledging individuals and/or families as key stakeholders and collaborators in the helping process;
- Focusing upon the individuals and/or families within the case context and how they perceive, understand, feel about and respond to the problems and needs of the case situation;
- Referencing the individuals and/or families in relation to their social context and environment – the individuals and/or families remain the focus of attention within the psychosocial milieu of the case, and where required, paying attention to their close social relationships;
- Having vigilance towards the individuals and/or families in relation to their vulnerabilities and resilience, their wider social environment and the possibility of harm to themselves or others;
- Utilising case assessment and intervention tools which provide an understanding of and responsiveness to individuals' and/or families' needs and risks;
- Identifying and collating data around service gaps and barriers to inform stakeholders and facilitate the development of social policies; and
- Working with the community in identifying and mobilising community resources for the individuals and/or families.

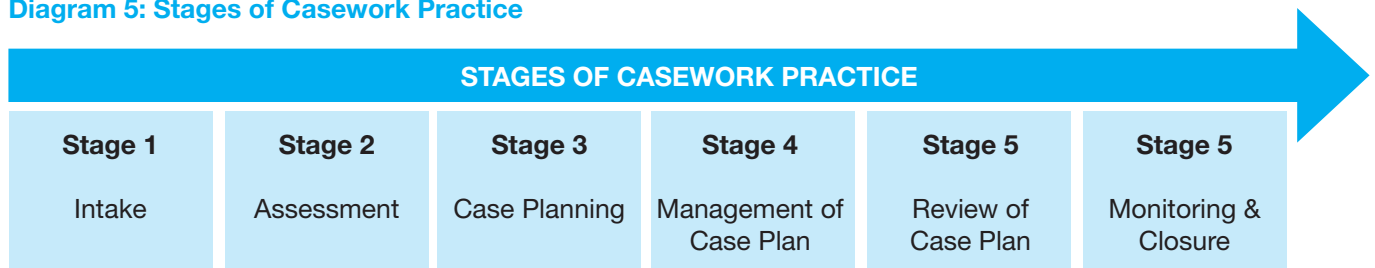


## Stages of Casework Practice

There are six stages of casework practice the SWPs undertake when responding to service needs. These are irrespective of variations in the nature of client need, level of risk and complexity and focus of intervention.

The stages of Casework practice is presented diagrammatically below:

**Diagram 5: Stages of Casework Practice**



- *Intake* – the entry point of social work service. At this stage, the FSC determines whether the referral can be appropriately matched to the resources and competencies available within the FSC.
- *Assessment* – assessing the nature, dynamics and risk of individual, family and community functioning, which would inform the Case Planning for the clients.
- *Case Planning* – designing the plan for intervention.
- *Management of Case Plan* – operationalising the case plan to achieve the desired outcomes through methods of practice, namely Casework, Group Work and Community Work.
- *Review of Case Plan* – reviewing and determining whether intervention outcomes of the case plan have been achieved appropriately, effectively and efficiently.
- *Monitoring* – overseeing the maintenance of the gains as a result of intervention for a period, before the closure of the case.
- *Closure* – terminating the case upon achieving sustainable service outcomes for individuals and families.

### ii. Group Work Practice

According to Toseland and Rivas (2012), group work practice consists of goal directed activity with small treatment and task groups aimed at meeting socio-emotional needs and accomplishing tasks. The group worker's task is to engage in activities that facilitate the growth and development of the group and its members during each developmental stage.

In tandem with the service context of the FSC that is predominantly targeted at the Emerging, Escalating and Higher Risks Groups, Group Work is utilised as a strategic method of practice to respond to the needs of the case. This is achieved through the individual Case Plan goals and mode of intervention, in which the characteristics of the group can be used to provide opportunities for:

- social network and mutual aid
- social relationship;
- social feedback;
- social role models;
- social action; and
- social lab for transition/integration to real life situation.



There are different purposes in the various types of Group Work that can be undertaken to gain access to the characteristics of the group for the growth and development of the group members (Toseland & Rivas, 2012).

- Purpose of Treatment Groups:
  - o Support Group – To help members cope with stressful life events and revitalise existing coping abilities;
  - o Therapy Group – To change behaviour; for correction, rehabilitation, coping, and problem solving through behaviour change interventions;
  - o Education and Experiential Group – To educate through presentations, discussions and experiences;
  - o Growth Group – To develop members' potential, awareness and insight; and
  - o Socialisation Group – To increase communication and social skills; to improve interpersonal relationships through programme activities, structured exercises, role plays, etc.
- Purpose of Task Groups:
  - o To accomplish a goal that is neither intrinsically nor immediately linked to the needs of the members.

With specific reference to the scope of Group Work practice in FSCs, both existing clients and service users (i.e. not known to the FSC under Casework) from predominantly the Emerging to Higher Risks groups can benefit from this method of practice, utilising either of the following three types of Group Work:

- i. Support group
- ii. Therapeutic group
- iii. Psycho-educational group



Characteristics of each of the three types of group are outlined in the table below:

**Table 2: Types of Group Work in FSCs**

Characteristics	Types of Group Work in FSCs		
	Therapeutic	Support	Psycho-educational
Purpose	Help individuals better understand themselves so that they can make more informed, healthy, and adaptive choices based on a deeper awareness of their feelings, interpersonal behaviours, reactions and patterns	Help members cope with stressful life events and revitalise existing coping abilities	Educate members through presentation and experiences  Focus on developing members' cognitive, affective and behavioural skills
Leadership	Leader as expert, authority figure or facilitator, depending on approach	Facilitator of empathic understanding and mutual aid	Leader as teacher and provide for structure for group discussion
Focus	<ul style="list-style-type: none"> <li>• Focus on healing and growth</li> <li>• Focus on self awareness and interpersonal relationship</li> <li>• Enhancing and discovering personal strengths</li> <li>• Exploration of new skills and behaviour</li> <li>• Experiencing transitional life stage problems</li> </ul>	<ul style="list-style-type: none"> <li>• Focus on problems individuals are having based on mutually shared difficulties, issues or life-stage events</li> <li>• Focus on mutual aid and support amongst group members</li> </ul>	<ul style="list-style-type: none"> <li>• Focus on imparting, discussing and integrating factual information</li> <li>• Help members through skill building exercises</li> </ul>
Examples of types of issues	<ul style="list-style-type: none"> <li>• Family violence, self-harm</li> <li>• Examples of exclusion criteria: acute risks and mental health issues</li> </ul>	<ul style="list-style-type: none"> <li>• Coping as single mothers, coping through grief</li> </ul>	<ul style="list-style-type: none"> <li>• Themes and topics based (e.g. financial management)</li> </ul>

Group Work is formulated in the Case Plan as an intervention when the individual has been assessed to benefit from the group and demonstrate capacity to:

- Recognise the presence and needs of others;
- Interact with and respond to others in a minimal socially appropriate manner; and
- Share a common sense of interest and linkage to the group purpose and medium of interaction.



### iii. Community Work Practice

According to Vasoo, Tang and Ng (1983), Community Work is a conscious and planned method utilised by SWP to focus on aspects which promote an individual's wellbeing and encourage the interaction of individuals, groups and organisation towards a concerted effort and action in a specified locality to achieve the specified objectives. An important tenet of Community Work is the employment of community resources to address social needs and to empower groups of people (Mendes, 2009).

Given this nature, Community Work has been adopted in varying extent across different countries and cultures. As such, it is pertinent to scope Community Work in the context of FSCs in Singapore.

Being community-based social work agencies, it is vital for FSC to understand its place and role in the community vis-à-vis other community partners for the common purpose of responding to the risks and needs of the individuals, family and community. Before FSCs embark on any Community Work, it is of priority to identify the key community partners for collaboration for twofold purpose: to avoid duplication of resources and to leverage on existing local knowledge and expertise to meet a service gap and maximise the reach and services to the community.

Given the versatility of Community Work, there are four key principles that FSCs will work within:

- i. Collaboration – To work together, in partnership with relevant stakeholders in responding to issues, risks, needs and identified issues in the community, to achieve common goals (Davies, 2000).
- ii. Community integration – To enable the existing FSC clients to assimilate back into the community.
- iii. Asset-building – To uncover the existing resources and strengths inherent within the community, and to harness them for the betterment of the community (Kretzmann & McKnight, 1993).
- iv. Empowerment<sup>2</sup>– To facilitate the people in the community to collectively identify issues, response to risks and mobilise resources to meet their own needs.

Through Community Work, FSCs will serve two distinctive groups. The first group refers to clients, i.e. those already known to the FSC and is currently receiving services from the FSCs. The use of Community Work for clients is purposed through the Case Plan. The objectives of Community Work for clients, as formulated through the Case Plan are:

- To promote more effective functioning of individuals and groups;
- To enhance the intervention gains made through Casework and/or Group Work through participation in the community process and decision-making activities; and
- To stimulate and increase self-awareness and capacity to cope and improve life situations of clients through mutual help and support in the community.

The second group refers to service users, i.e. those not already known to the FSCs but falls within the profile group to which FSCs seeks to reach: communities presenting emerging risks, escalating risks or higher risks. The objectives of Community Work developed for service users include:

- To respond to emerging social concerns and issues in the community within the purview of FSC;
- To advocate for the services users who are disadvantaged;
- To maximise the use of resources available, especially for the service users;
- To improve service delivery by developing ways of working with specific groups to maximise their level of functioning and integrate them into the community; and
- To collaborate with various stakeholders and authorities to be more responsive to the community needs and problems.

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<sup>2</sup> Empower is the "process of increasing personal, interpersonal, or political power so that individuals can take action to improve their life situations". (Gutierrez, 2001)

The objectives of Community Work utilised for each of these two groups have to be distinguished and clearly articulated so as ensure clarity and optimal use of resources for planning and execution of Community Work.

The following framework comprising of strategies, methods and activities aims to provide better clarity and understanding to Community Work in FSCs. At the apex, strategy refers to the overarching plan in conducting Community Work. It is singular and focused in nature. Moving downwards to broader terms, methods will be deployed as means to carry out the strategy. Similarly, activities have to be identified. As illustrated by the expanding base downwards, several activities can be utilised under each method, and several methods may be deployed to achieve the stated strategy.

**Diagram 6: Framework for Community Work in FSCs**



Following are the four broad strategies identified for Community Work in FSCs:

- i. *Harnessing Community Resources* – To identify and utilise formal, informal and potential resources in the community that can meet the needs or address local concerns.
- ii. *Networking* – To identify key community partners and create platforms for communication and collaboration to attend to service needs and gaps on social issues in the community.
- iii. *Outreach* – To reach out to the vulnerable and at-risk individuals and families in the community through a concerted and intentional effort; to raise awareness of services available in the FSC and provide assistance when necessary.
- iv. *Advocacy* – To address service needs and/or gaps and emerging social issues in the community through a process of appropriate and respectful engagement with the relevant authorities, leading to positive social change.

Methods may include, but not limited to the following:

- Needs Assessment
- Community Resource Mapping
- Community Mobilisation
- Public Education (to raise awareness)
- Community Engagement
- Creating Partnerships
- Community Forum
- Stakeholder Engagement
- Submission of Proposals (to other stakeholders)

Examples of the specific activities are:

- Community Walk
- Block Survey
- Needs Assessment Survey
- Roadshows
- Block Party
- Food Distribution
- Soccer Outreach
- Focus Group Discussions
- Service Directory
- Networking Meeting
- Community Hall Meeting

Besides SWPs, FSCs can also consider aspects of Community Work to be undertaken by non-SWPs, such as the non-SWPs in the FSCs or volunteers recruited by the FSCs.

Community Work practice can work closely with Group Work practice as it utilises the medium of the group to undertake Community Work. It is therefore important to assess the individual's capacity to operate and work within the group context prior to undertaking Community Work with the individual.

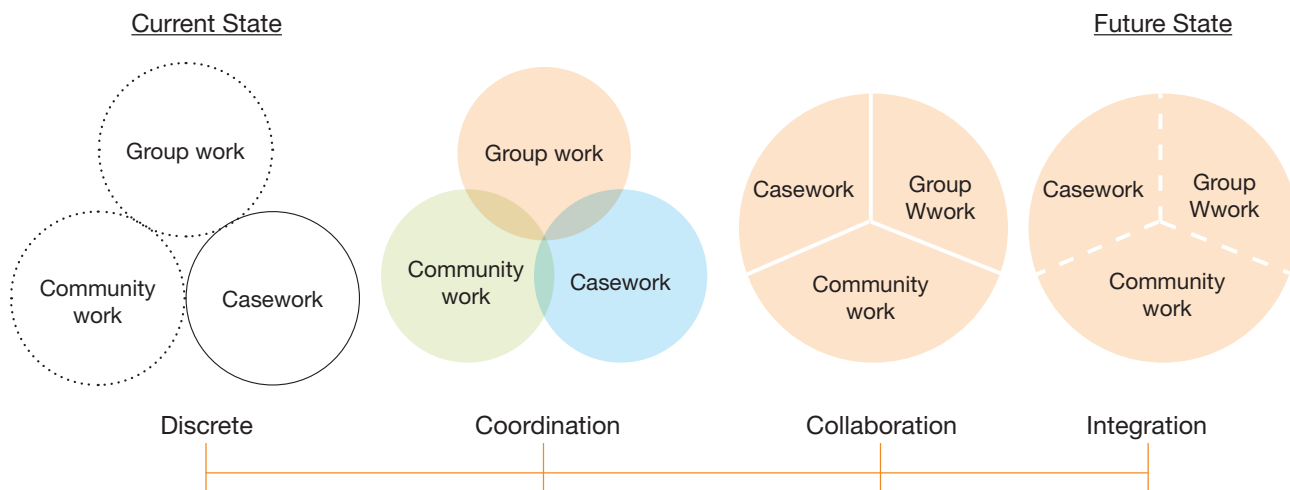
Given the focus of social work practice in FSCs upon clients from the Emerging Risks Group to the Higher Risks Group, the majority of cases will be managed through an integrated practice after an assessment of the suitable modality. In this integrated practice, Casework is the initial and central method of intervention whilst Group Work and Community Work are thereafter utilised intentionally to respond to the needs of clients, as formulated through the Case Plan.



#### IV. Integrated practice of casework, group work and community work

Integrated practice refers to the utilising and integration of different practice modalities from casework to group work and community work in order to ensure that intervention and service responses are better matched to the needs of the individual and/or family at that point in time. Additionally, integrating multiple methods of practice also helps to alleviate clients and/or families ‘drifting’ in casework for unnecessary periods of time due to the lack of other more suitable modalities that they can be transited to.

**Diagram 7: Continuum of Integration**



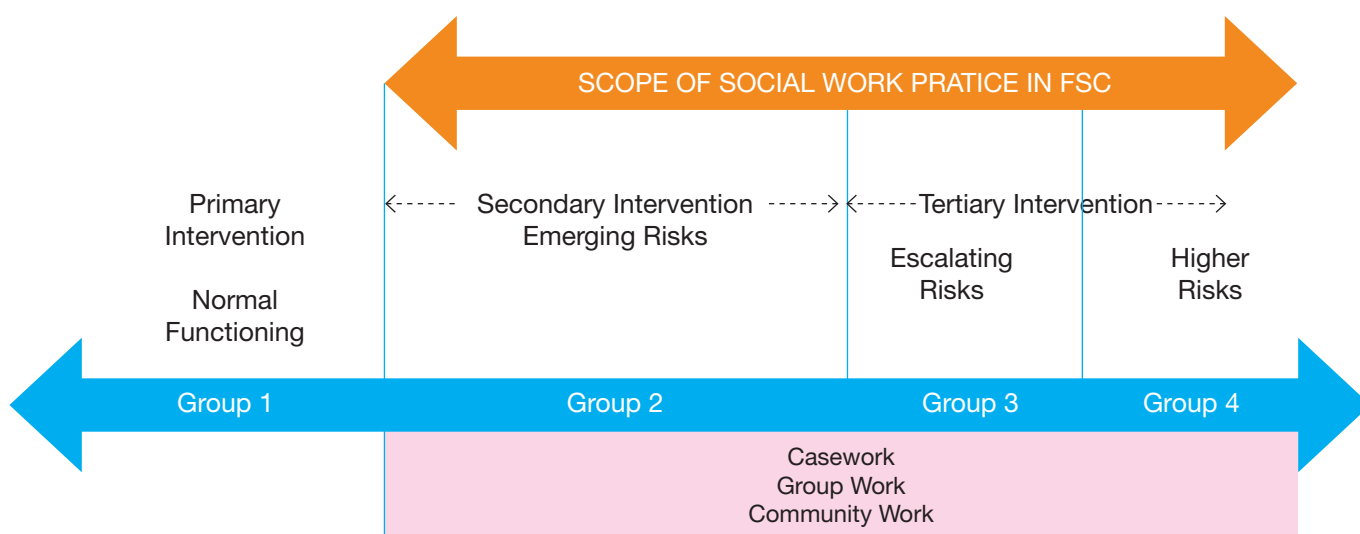
## 2 Framework Summary

The *Integrated FSC-CSWP Framework* enables the social work effort within an FSC to:

- Identify the type of risk and complexity status in relation to the *Levels of Intervention Classification*;
- Determine where on the *Continuum of Practice* FSC SWPs may appropriately and strategically direct intervention and utilise social work practice competencies efficiently;
- Match the methods of practice required to respond appropriately to the risk and complexity at the point of intervention while recognising that the complexity and risk of a case can escalate or de-escalate;
- Be an integrated practice whereby the methods of intervention are utilised in a logical manner to address the needs of the case and to facilitate the sustainable outcomes.

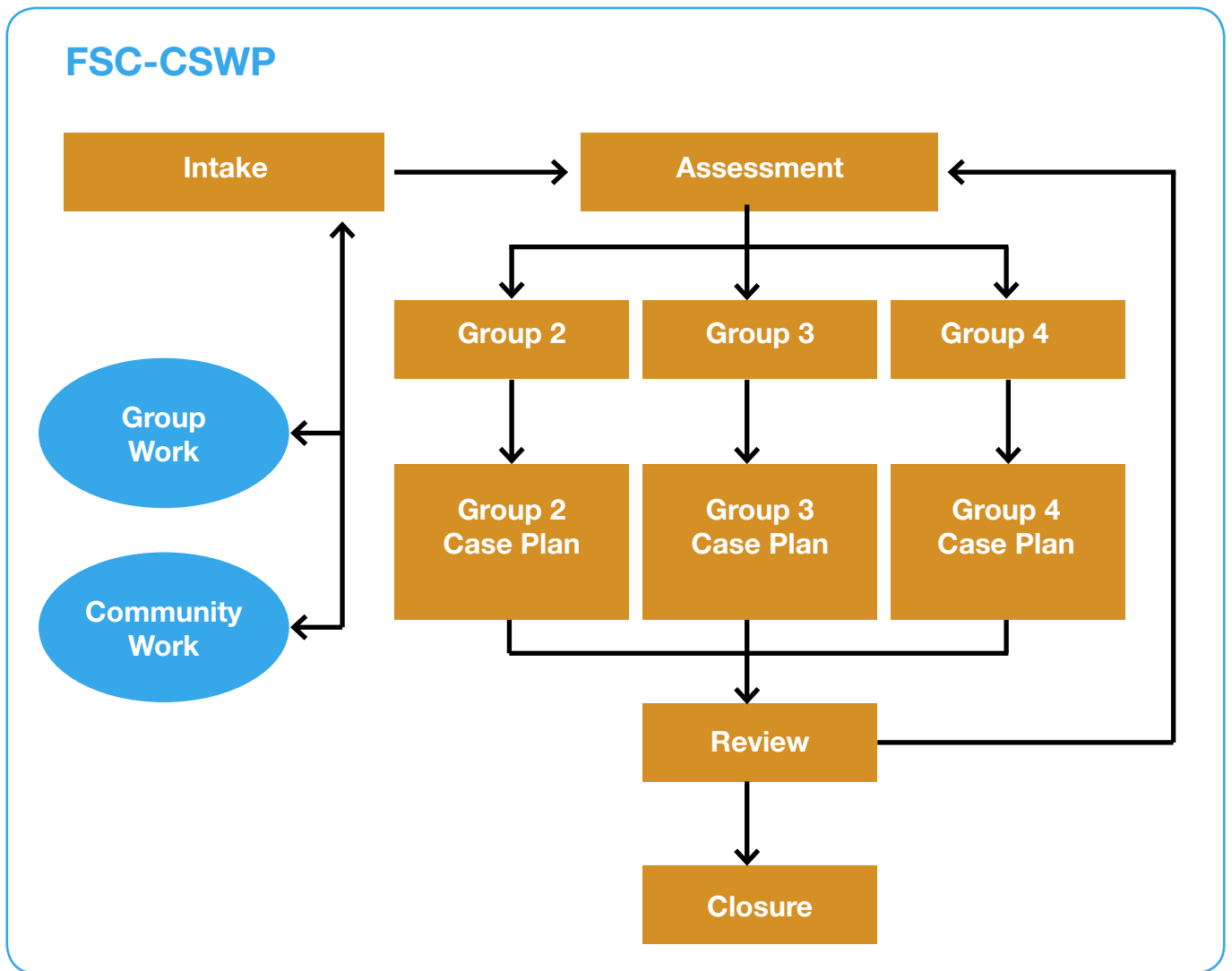
The *Integrated FSC-CSWP Framework* can be illustrated in the diagram below:

**Diagram 8: Integrated FSC-CSWP Framework**



The diagram below illustrates how the above Integrated FSC-CSWP Framework can be translated to the processes in the social work practice in FSCs:

**Diagram 9: Processes through the Integrated FSC-CSWP Framework**





# FAMILY SERVICE CENTRE CODE OF SOCIAL WORK PRACTICE

## 1 Functions of the FSC-CSWP

The FSC-CSWP has seven functions. These are:

- 1 Provides a referent position of what constitutes FSCs' social work practice;
- 2 Provides a means of enabling key stakeholders to identify the characteristics of social work practice within an FSC;
- 3 Provides a framework for practice audits to enable accountability for social work practice in an FSC;
- 4 Provides referent benchmarks for the development of standardisation of FSC social work practice in Singapore;
- 5 Provides guidance for FSCs on how to plan for and implement social work services and practice;
- 6 Provides a means to identify and develop professional competency standards required to comply with the FSC-CSWP; and
- 7 Informs recruitment and selection of staff for FSC practice.

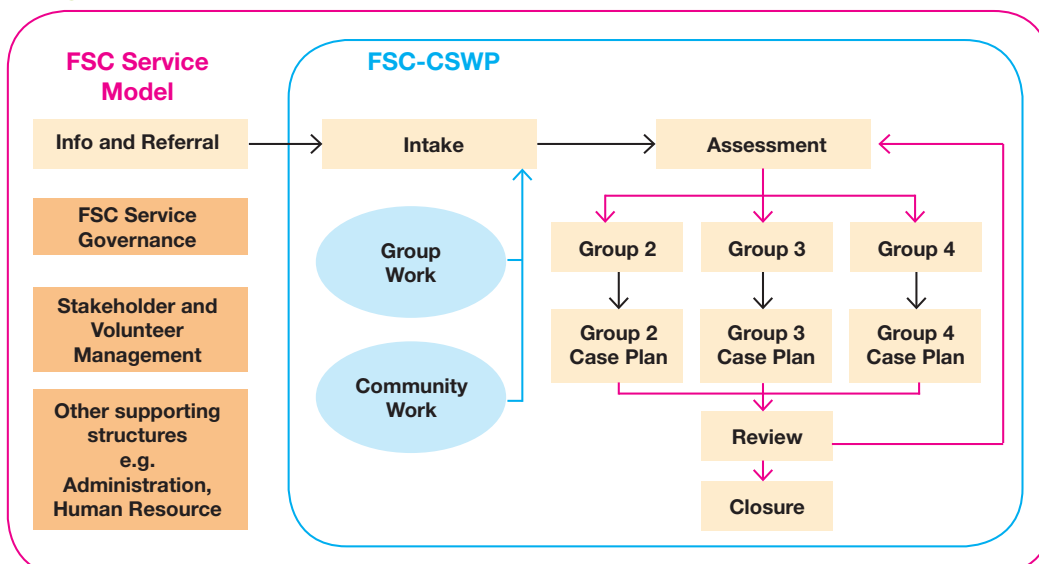
## 2 Application of the FSC-CSWP

The FSC-CSWP applies to the following groups of SWPs:

- Individuals with social work qualifications and hold social work designation in an FSC. They include the Social Workers and Senior Social Workers.
- Individuals with social work qualifications and hold a non-social work designation in a FSC. They include the Centre Managers and Executive Directors.
- Individuals without social work qualifications, hold a non-social work designation and undertake social work practice, such as Counsellors, Programme Assistants, Programme Coordinators and Social Work Associates.

Relating the FSC-CSWP to the FSC Service Model, it may be illustrated by the diagram below:

**Diagram 10: FSC-CSWP in relation to the FSC Service Model**



### 3 Integration with Code of Professional Ethics

The FSC-CSWP is an important, though not exclusive component of professional practice. The FSC-CSWP works in conjunction with the Singapore Association of Social Workers (SASW) Code of Professional Ethics (Refer to Appendix A).

### 4 Guiding Principles of the FSC-CSWP for SWPs

The FSC-CSWP is based upon two groups of principles:

- i. Principles relating to who SWPs work with; and
- ii. Principles relating to how SWPs work.

The SASW Code of Professional Ethics (2004) and the IFSW Code of Ethics (2012) inform the principles:

- i. Principles relating to who SWPs work with

#### *Principle 1*

- Uniqueness of each person – respect and regard for each person irrespective of nationality, ethnicity, gender, age, beliefs or socio-economic status.

#### *Principle 2*

- Those most disadvantaged and vulnerable and at escalating and significant risk of harm to themselves and/or others require:
  - o Social work professional values, knowledge and skills; and
  - o Social Workers who can demonstrate the practice application of professional values, knowledge and skills with excellent practice standards.

- ii. Principles relating to how SWPs work

#### *Principle 1*

- Self determination – each individual has the right to shape and determine their own lives provided there is no risk to themselves or others.

#### *Principle 2*

- Social justice – all within society have the right to share the resources and capacities of the society. SWPs have a particular, though not exclusive responsibility to work with those most disadvantaged and most at risk of harm.

#### *Principle 3*

- Extends compassion and empathy – responsiveness to human distress and need – in a manner which promotes and supports individual, family and community independence and resilience.

#### *Principle 4*

- Facilitates resilience – identifying and building upon capacity within individuals, families and communities.

*Principle 5*

- Be attentive to vulnerability and risk – vigilance in identifying and monitoring vulnerabilities, particularly those which may increase risk of harm.

*Principle 6*

- Social inclusion – reduces exclusion due to social disadvantage and marginalisation, through facilitating opportunities for social valuing, respect and engagement.

*Principle 7*

- Equity of access – professional social work services are provided to those in need.

*Principle 8*

- Maintains privacy – holding information relating to individuals, families and communities unless required for the provision of service (conditional confidentiality<sup>3</sup>).

*Principle 9*

- Social partnerships – works in service partnerships with clients, other services and communities to empower individuals, families and communities.

*Principle 10*

- Professional competency – provides service at a best practice professional standard.

## **5 Structure of the FSC-CSWP Practice Domains**

The FSC-CSWP is divided into four practice domains:

- Domain 1: Working with Individuals, Families and Communities in a Professional Manner
- Domain 2: Working in an Ethical Manner
- Domain 3: Working in an Organisational Setting
- Domain 4: Working with Reflective Practice

Each domain consists of the following:

- Description of domain
- Description of sub-domain
- Scope of sub-domain
- Objectives of sub-domain
- Standards of sub-domain
- Indicators of standards

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<sup>3</sup> Confidentiality is a principle of ethics according to which the social work practitioners or other professionals may not disclose information about a client without the client's consent. This information includes the identity of the clients, content of overt verbalisations, professional opinions about the client and material from case records.

*In very specific circumstances, social work practitioners and other professionals may be compelled by law or relevant stakeholders to reveal to designated authorities some information (such as threats of violence, commission of crimes, suspected child abuse, and other client behaviors) that would be relevant to legal judgments and of harm to clients and others.*

**Table 3: Overview of the Structure of the Practice Domains of FSC-CSWP**

<b>Domain 1: Working with Individuals, Families and Communities in a Professional Manner</b>		
<b>Sub-domain</b>	<b>Standards</b>	<b>Indicators</b>
Sub-domain 1a	Standard 1	8 indicators
	Standard 2	6 indicators
	Standard 3	4 indicators
	Standard 4	5 indicators
	Standard 5	5 indicators
Sub-domain 1b	Standard 6	5 indicators
	Standard 7	6 indicators
	Standard 8	4 indicators
	Standard 9	3 indicators
	Standard 10	3 indicators
	Standard 11	2 indicators
	Standard 12	3 indicators
	Standard 13	1 indicator
<b>Domain 2: Working in an Ethical Manner</b>		
Sub-domain 2	Standard 14	4 indicators
	Standard 15	4 indicators
	Standard 16	3 indicators
	Standard 17	4 indicators
	Standard 18	4 indicators
<b>Domain 3: Working in an Organisational Setting</b>		
Sub-domain 3a	Standard 19	9 indicators
Sub-domain 3b	Standard 20	4 indicators
Sub-domain 3c	Standard 21	6 indicators
<b>Domain 4: Working with Reflective Practice</b>		
Sub-domain 4a	Standard 22	4 Indicators
Sub-domain 4b	Standard 23	3 Indicators
Sub-domain 4c	Standard 24	3 Indicators
<b>10 Sub-domains</b>	<b>24 Standards</b>	<b>103 Indicators</b>

# PRACTICE DOMAINS OF THE FSC-CSWP

SWPs are responsible for utilising the professional values, knowledge and skills base of the social work profession to provide best-practice services in response to clients’ risks and needs.

The provision of quality professional services represents the commitment of the FSC to their clients. The SWP works in partnership, where appropriate with agency colleagues, as well as government and stakeholders to support and develop client’s self-reliance and resilience.

## 1 Domain 1: Working with Individuals, Families and Communities in a Professional Manner

Social work practice seeks to respond to the needs and risks of people within an FSC service boundary and, where appropriate, beyond the service boundary. This response seeks to reduce risks and vulnerabilities, whilst enhancing self-reliance and resilience capacities, including resources and competencies, of individuals, families, communities and, where relevant, the wider society.

### Sub-domain 1a

Level of Intervention: Secondary and Tertiary

Method of Practice: Casework

### Scope

Applicable to clients in the Emerging, Escalating and Higher Risks Groups.

### Objectives

1. To reduce risks and needs of clients by addressing factors which generate risks and vulnerabilities.
2. To reduce risks and needs of clients by working with stakeholders.
3. To enhance clients’ self-reliance and build clients’ resilience.
4. To utilise social work professional competency and expertise in an appropriate, effective and efficient manner.

STANDARDS	INDICATORS
<p>Standard 1 Undertake intervention through application of a logical sequence of practice tasks</p>	<p><b>Indicator 1: Case Intake</b></p> <ol style="list-style-type: none"> <li>1. The SWP obtains appropriate intake information with standard intake forms which include:               <ol style="list-style-type: none"> <li>a. Client demographic information;</li> <li>b. Immediate issues of concern;</li> <li>c. Service required; and</li> <li>d. Present, past and future risk issues, if any.</li> </ol> </li> <li>2. The SWP undertakes an intake assessment on the presenting issues of concerns and level of risk to ascertain the follow-up actions required:               <ol style="list-style-type: none"> <li>a. If there are risk issues to be addressed immediately, to consult the Supervisor for decision to escalate the case to relevant authorities;</li> <li>b. If the presenting issues match the resources and competencies available at the agency, to continue with case intervention within the agency;</li> <li>c. If the presenting issues do not match the agency’s resources and competencies, to refer the case to other appropriate agencies; and</li> <li>d. To close the intake if there is no follow up action required by the agency.</li> </ol> </li> </ol>

STANDARDS	INDICATORS
Standard 1 Undertake intervention through application of a logical sequence of practice tasks	<p><b>Indicator 2: Organising Information</b></p> <p>The SWP uses the following to organise information:</p> <ol style="list-style-type: none"> <li>a. Genogram;</li> <li>b. Timeline, which may include issues and themes impacting the case; and</li> <li>c. Ecomap of key people and systems.</li> </ol>
	<p><b>Indicator 3: Case Assessment</b></p> <ol style="list-style-type: none"> <li>1. The SWP also undertakes the following assessments:             <ol style="list-style-type: none"> <li>a. Bio-psycho-social-spiritual assessment;</li> <li>b. Risk assessment;</li> <li>c. Family functioning assessment;</li> <li>d. Aggression and violence assessment, when applicable; and</li> <li>e. Vulnerable persons needs assessment, when applicable.</li> </ol> </li> <li>2. Based on the assessment, prioritisation of the key need areas are identified.</li> </ol>
	<p><b>Indicator 4: Case Planning</b></p> <ol style="list-style-type: none"> <li>1. The SWP develops a Case Plan which includes:             <ol style="list-style-type: none"> <li>a. Identified concerns;</li> <li>b. Conceptualisation of the case;</li> <li>c. Goals of intervention; and</li> <li>d. Methods of intervention.</li> </ol> </li> <li>2. The SWP then develops a Case Management Plan which includes:             <ol style="list-style-type: none"> <li>a. Tasks to be undertaken to implement the Case Plan;</li> <li>b. Roles involved to carry out the tasks; and</li> <li>c. Timeframe for tasks' completion.</li> </ol> </li> </ol>
	<p><b>Indicator 5: Management of Case Plan</b></p> <ol style="list-style-type: none"> <li>1. The SWP executes the Case Management Plan, which includes but not limited to the following:             <ol style="list-style-type: none"> <li>a. Regular follow-up with clients and monitor progress;</li> <li>b. Regular networking, such as case conferences with partners on progress of clients and their intervention, if any;</li> <li>c. Completion of the relevant and necessary documentation, such as case notes and social reports; and</li> <li>d. Adequate and appropriate internal or external transfer of cases, if required.</li> </ol> </li> <li>2. The SWP makes relevant and necessary adjustment to the Case Management Plan to respond to the changes in the circumstances of individuals and/or family, which includes managing any additional risks or needs which may emerge during intervention.</li> </ol>

STANDARDS	INDICATORS
	<p><b>Indicator 6: Case Review</b></p> <ol style="list-style-type: none"> <li>1. The SWP conducts a Case Review, either at the scheduled period or when there are major changes to the circumstances of the individual and/or family, which includes but not limited to the following:               <ol style="list-style-type: none"> <li>a. Conducts a re-assessment based on the current circumstances on the risks and needs of the individual and/or family;</li> <li>b. Determines whether the goals of intervention have been appropriately, effectively and efficiently achieved;</li> <li>c. Determines whether the Case Management Plan has been completed;</li> <li>d. Identifies factors that affect the outcomes; and</li> <li>e. Makes recommendation, on either of the following:                   <ul style="list-style-type: none"> <li>• New Case Plan and/or Case Management Plan; or</li> <li>• Case Plan and/or Case Management Plan to be maintained; or</li> <li>• Proceed to Case Monitoring; or</li> <li>• Proceed to Case Closure.</li> </ul> </li> </ol> </li> <li>3. The SWP <b>works closely with their Supervisor</b> for Case Review. For cases with high complexities and risks, the review <b>may involve feedback from external professionals.</b></li> </ol> <p><b>Indicator 7: Case Monitoring</b></p> <p>The SWP monitors the case prior to the closure to ensure case outcomes are sustained over a period of time, and up to six months, with attention to:</p> <ol style="list-style-type: none"> <li>a. Monitoring professional partnerships;</li> <li>b. Monitoring responsibilities;</li> <li>c. Reporting feedback;</li> <li>d. Sustainability of case outcomes;</li> <li>e. Potential emerging risks and vulnerabilities; and</li> <li>f. Identified strengths to sustain intervention gains.</li> </ol> <p><b>Indicator 8: Case Closure</b></p> <p>The SWP closes the case when:</p> <ol style="list-style-type: none"> <li>a. Goals are met;</li> <li>b. Case outcomes are sustained;</li> <li>c. Risks and needs are reduced and/or managed; and</li> <li>d. Functioning capacity of the individual and/or family is enhanced.</li> </ol>
<p><b>Standard 2</b> Establish an engaged and empathic professional therapeutic relationship and partnership between the SWP and the client</p>	<p><b>Indicator 1: Engaging Client</b></p> <p>The SWP utilises key professional interpersonal skills to engage the client:</p> <ul style="list-style-type: none"> <li>• Listening</li> <li>• Empathising</li> <li>• Reflecting</li> <li>• Summarising</li> <li>• Questioning</li> <li>• Challenging</li> </ul> <p><b>Indicator 2: Professional Respect</b></p> <p>The SWP conveys professional respectfulness and mutuality in the conduct of the practice relationship with the client.</p> <p><b>Indicator 3: Sensitivity</b></p> <p>The SWP is sensitive to appropriate interpersonal communication values, protocols and best practices in relation to gender, age, cultural and religious differences.</p>

STANDARDS	INDICATORS
	<p><b>Indicator 4: Attentiveness</b></p> <p>The SWP is <b>attentive</b> to the communication needs of the family as a system of concern, whilst <b>being respectful and responsive</b> to recognising and working with differences between family members and differences in the prioritisation of service need.</p> <p><b>Indicator 5: Education and Empowerment</b></p> <p>The SWP <b>provides relevant information</b> relating to the client's concerns and needs to facilitate service response and to <b>educate and empower the client</b>.</p> <p><b>Indicator 6: Bridging Language Differences</b></p> <p>The SWP <b>accesses translation services</b> where language differences exist with clients.</p>
<p><b>Standard 3</b> Utilise professional practice experience, knowledge, theories and research to logically inform and guide practice thinking</p>	<p><b>Indicator 1: Practice Application</b></p> <p>The SWP <b>knows and understands the practice application</b> of the generic knowledge base of professional social work practice in relation to:</p> <ul style="list-style-type: none"> <li>• Human development</li> <li>• Care needs of vulnerable persons</li> <li>• Abuse, neglect and trauma of vulnerable persons</li> <li>• Family assessment</li> <li>• Risk, risk assessment and risk management</li> <li>• Group formation, dynamics and intervention</li> <li>• Community formation, support and management</li> <li>• Health and mental health</li> <li>• Social analysis and social policy</li> <li>• Practice theories</li> <li>• Organisational theories and organisational operation</li> <li>• Research methods and knowledge</li> <li>• Counselling skills and strategies</li> </ul> <p><b>Indicator 2: Articulation of Practice</b></p> <p>The SWP <b>articulates practice thinking and reasoning</b> in a professional, logical, theoretically informed and respectful manner, <b>in both written and oral forms</b>. These include, but not restricted to:</p> <ul style="list-style-type: none"> <li>• Social report</li> <li>• Review report</li> <li>• Progress report</li> <li>• Case referral</li> <li>• Case conference</li> <li>• Case discussion</li> <li>• Case presentation</li> </ul> <p><b>Indicator 3: Professional Development</b></p> <p>The SWP <b>undertakes professional development</b> to acquire and understand new theoretical, research and practice knowledge relevant to practice.</p> <p><b>Indicator 4: Professional Knowledge</b></p> <p>The SWP <b>considers a range of theoretical, research and practice knowledge</b> relevant to social work practice and needs of each case.</p>



STANDARDS	INDICATORS
<p><b>Standard 4</b> Collaborate with clients in service understanding and response</p>	<p><b>Indicator 1: Facilitating Participation</b></p> <p>The SWP <b>facilitates appropriate information transparency</b> and honesty (where no risk is assessed to be present) and <b>client participation</b> in case understanding and decision making.</p>
	<p><b>Indicator 2: Conveying Expected Behaviour</b></p> <p>The SWP <b>conveys</b> to the client and other key stakeholders the <b>expected behaviours stipulated by social policies and legislations</b>.</p>
	<p><b>Indicator 3: Empowering Clients</b></p> <p>The SWP works with the client in an empowering manner, which <b>recognises and values client competencies, strengths and demonstrated resilience capacities</b>.</p>
	<p><b>Indicator 4: Managing Conflict</b></p> <p>The SWP <b>manages</b> conflict with the client in relation to perception and understanding of case concerns and direction, and <b>responds with clarity the service purpose and responsibility</b> in relation to agency function, social policies and legislations.</p>
	<p><b>Indicator 5: Supporting Self-Advocacy</b></p> <p>The SWP <b>supports and encourages client self-advocacy</b> to access resources to meet client's goals.</p>
<p><b>Standard 5</b> Work with professionals from multidisciplinary to understand and respond to service needs and manage risks</p>	<p><b>Indicator 1: Professionalism</b></p> <p>The SWP values, respects and professionally <b>articulates and demonstrates professionalism</b> in all contacts.</p>
	<p><b>Indicator 2: Professional Relationships</b></p> <p>The SWP <b>develops professional relationships and networks</b> to facilitate the provision of services for clients.</p>
	<p><b>Indicator 3: Professional Partnerships</b></p> <p>The SWP <b>identifies relevant professional partnerships</b> and advocates for service access.</p>
	<p><b>Indicator 4: Team Work</b></p> <p>The SWP <b>works in a team</b> with other professionals and supports their practice activities to provide timely and professional response to meet client's needs.</p>
	<p><b>Indicator 5: Service Gaps</b></p> <p>The SWP <b>identifies service gaps</b> in response to client's needs and advocates for the provision of service development and provision in a professional and respectful manner.</p>

### Sub-domain 1b

Level of Intervention: Secondary and Tertiary

Method of Practice: Group Work

#### Scope

Applicable to clients and/or service users in the Emerging, Escalating and Higher Risks Groups; and only when needs of client and/or service users has been clearly established.

#### Objectives

1. To support the development of Group Work to enhance capacity of the clients and/or service users.
2. To identify common needs faced by the Emerging Risks to Higher Risks Groups and develop Group Work to address vulnerabilities and/or increase resilience capacities.

STANDARDS	INDICATORS
<b>Standard 6</b> Undertake Group Work practice to respond to the needs of clients who are of Emerging, Escalating and Higher Risks Groups	<b>Indicator 1: Ethical Consideration</b> The SWP <b>considers ethical aspects</b> and <b>contracts with client</b> before utilising Group Work.
	<b>Indicator 2: Assessment of Client's Capacity</b> The SWP, in consultation with client and where applicable, with other professionals, <b>assesses client's capacity to participate in Group Work</b> by conducting eligibility screening.
	<b>Indicator 3: Identification of Type of Group Work</b> The SWP <b>identifies the type</b> of Group Work suitable to be used as an integrated intervention strategy with Casework to meet the needs of clients.
	<b>Indicator 4: Taps on Existing Group Work</b> The SWP does environment scan, <b>identifies and taps on</b> existing Group Work for the clients.
	<b>Indicator 5: Professional Partnerships</b> The SWP works, where applicable, with professionals in agency and/or partners to <b>facilitate the development of new Group Work</b> to meet the needs of clients.
<b>Standard 7</b> Undertake Group Work practice to respond to groups with emerging and escalating risks in the community	<b>Indicator 1: Awareness of Service Needs and Gaps</b> The SWP works with relevant stakeholders to be <b>aware of the needs and gaps</b> in resource provision to an identified population within these groups.
	<b>Indicator 2: Ethical Consideration</b> The SWP considers ethical <b>aspects and contracts with service users</b> before utilising Group Work.
	<b>Indicator 3: Assessment of Service User's Capacity</b> The SWP, in consultation with service users and where applicable, with other professionals, <b>assesses service user's capacity to participate in Group Work</b> by conducting eligibility screening.
	<b>Indicator 4: Identification of Type of Group Work</b> The SWP <b>identifies the type</b> of Group Work suitable to meet the needs of service users.
	<b>Indicator 5: Taps on Existing Group Work</b> The SWP <b>taps on existing</b> Group Work or <b>facilitates the development</b> of new Group Work to meet gaps in services to the individuals and families.
	<b>Indicator 6: Follow up on Service User's Needs</b> The SWP <b>assesses service users' needs</b> for case work services and <b>makes referrals</b> when necessary.

STANDARDS	INDICATORS
<b>Standard 8</b> Utilise professional practice experience, knowledge, theories and research to logically inform and guide Group Work	<b>Indicator 1: Group Work Competencies</b>  The SWP <b>knows, understands and demonstrates application of the group work competencies</b> comprising of, but not restricted to: <ul style="list-style-type: none"> <li>• Group facilitation</li> <li>• Group behaviour and dynamics</li> <li>• Problem-solving processes in groups</li> <li>• Conflict resolution in groups</li> <li>• Understanding of diversity</li> <li>• Culture sensitivity</li> <li>• Therapeutic factors for group to be effective</li> <li>• Theories that inform group work practice</li> </ul>
	<b>Indicator 2: Articulation of Practice</b>  The SWP <b>articulates practice thinking and reasoning</b> in a professional, logical, theoretically informed and respectful manner during supervision, to stakeholders and clients and/or service users.
	<b>Indicator 3: Professional Development</b>  The SWP <b>undertakes professional development</b> to acquire and keep abreast of new theoretical, research and practice knowledge relevant to Group Work.
	<b>Indicator 4: Professional Knowledge</b>  The SWP <b>considers a range of theoretical, research and practice knowledge</b> relevant to Group Work.
<b>Standard 9</b> Undertake evaluation of Group Work	<b>Indicator 1: Evaluation</b>  The SWP <b>develops an evaluation process to assess the effectiveness of Group Work</b> and taking into consideration that from the relevant partners, if any.
	<b>Indicator 2: Evaluation Follow-up</b>  The SWP provides community partners, referring partners and funders with <b>evaluation report of client and/or service user's progress and possible follow up.</b>
	<b>Indicator 3: Relevance of Group Work</b>  The SWP <b>undertakes periodic evaluation of Group Work</b> to ensure its relevance in meeting needs of clients and/or service users.

### Sub-domain 1c

Level of Intervention: Secondary and Tertiary

Method of Practice: Community Work

### Scope

Applicable to clients and/or service users in the Emerging, Escalating and Higher Risks Groups.

### Principles

1. To work together, in partnership with relevant stakeholders in responding to issues, risks, needs and identified issues in the community, to achieve common goals (collaboration).
2. To enable the existing FSC clients to assimilate back into the community (community integration).
3. To uncover the existing resources and strengths inherent within the community, and to harness them for the betterment of the community (asset-building).
4. To facilitate the people in the community to collectively identify issues, response to risks and mobilise resources to meet their own needs (empowerment).

STANDARDS	INDICATORS
<b>Standard 10</b> Undertake Community Work to respond to the needs of clients	<b>Indicator 1: Identification of Gaps and Needs</b> The SWP <b>works with the relevant community partners</b> to <b>identify gaps or changes needed</b> in the provision of social services to the clients.
	<b>Indicator 2: Taps on Existing Resources</b> The SWP <b>taps on the existing resources and programmes</b> to respond to the needs of clients.
	<b>Indicator 3: Community Partnership</b> The SWP works with the relevant community partners to <b>facilitate the provision and development</b> of relevant community programmes to build capacity of the clients.
<b>Standard 11</b> Undertake Community Work practice for service users, who presents emerging, escalating and higher risks	<b>Indicator 1: Identification of Gaps and Needs</b> The SWP <b>works with other relevant community partners</b> to highlight the gaps in resource provision to the service users.
	<b>Indicator 2: Community Partnership</b> The SWP works with other relevant community partners to <b>discuss policy</b> implications and <b>increase resource allocation</b> to the service users.
<b>Standard 12</b> Utilise professional practice experience, knowledge, theories and research to logically inform and guide Community Work	<b>Indicator 1: Professional Knowledge</b> The SWP considers a range of theoretical, research and practice knowledge relevant to Community Work.
	<b>Indicator 2: Practice Application</b> The SWP knows and understands the practice application of related knowledge base comprising of, but not restricted to: <ul style="list-style-type: none"> <li>• Asset-based community development theory</li> <li>• Empowerment theory</li> <li>• Ecological model</li> <li>• Strengths perspective</li> </ul>
	<b>Indicator 3: Professional Development</b> The SWP keeps abreast on new trends and social development in the local community as well as social and economic development at the national level both present and future.
<b>Standard 13</b> Undertake evaluation of Community Work	<b>Indicator 1: Evaluation</b> The SWP works with the relevant community partners to monitor and evaluate the effectiveness of the developed Community Work to ensure that they are meeting the needs of the clients and remain relevant to changing needs.



## 2 Domain 2: Working in an Ethical Manner

Social work practice in an FSC is informed and guided by the humanistic values of respect for the individual, self-determination and social justice. SWPs in FSCs have a professional responsibility to conduct their professional practice with reference to professional ethical standards of social work.

### Sub-domain 2

SWP practises according to the ethical guidelines of the SASW.

### Scope

Unconditionally applicable to all clients, colleagues and stakeholders.

### Objectives

1. To believe in the value and dignity of individuals and to interact with them in a respectful manner and maintain the right of self-determination.
2. To demonstrate a commitment to social justice.
3. To uphold the integrity of social work practice.

STANDARDS	INDICATORS
<b>Standard 14</b> Practise with reference to the SASW Code of Professional Ethics	<b>Indicator 1: Ethical Guidelines</b> The SWP has <b>knowledge of ethical guidelines and relevant</b> codes of conduct and an understanding of how the ethical guidelines and codes of conduct are applied to professional practice
	<b>Indicator 2: Reflective Practice</b> The SWP is <b>observant and reflective of practice</b> to monitor and review the congruence of practice with ethical guidelines and codes of conduct.
	<b>Indicator 3: Commitment to Ethical Practice</b> The SWP is <b>committed to reflect</b> on own ethical practice based on feedback from colleagues and stakeholders.
	<b>Indicator 4: Breach of Code</b> The SWP <b>reports breaches of ethics or conduct</b> to relevant authorities or the police when there are concerns relating to criminal matters.
<b>Standard 15</b> Commit to respecting diversity and social integration within society	<b>Indicator 1: Embracing Diversity</b> The SWP <b>demonstrates knowledge and understanding</b> of social diversity within society.
	<b>Indicator 2: Sensitive Practice</b> The SWP is <b>sensitive in their practice</b> to social diversity within society.
	<b>Indicator 3: Social Responsibilities</b> The SWP <b>references practice to social responsibilities</b> of society.
	<b>Indicator 4: Enhancing Social Integration</b> The SWP <b>works with the strengths and challenges</b> of diverse groups and enhances social integration within society.

STANDARDS	INDICATORS
<p><b>Standard 16</b> Attend and respond to the disadvantaged and those facing injustice within society</p>	<p><b>Indicator 1: Protecting Rights</b></p> <p>The SWP is guided by a commitment to <b>protect the rights of others</b> which complies with Singapore Laws and the relevant United Nations Conventions.</p>
	<p><b>Indicator 2: Social Justice</b></p> <p>The SWP is <b>aware of the factors generating disadvantages and injustice</b> within society and promotes awareness of and responses to these factors.</p>
	<p><b>Indicator 3: Facilitating Access</b></p> <p>The SWP <b>facilitates access to social resources</b> which addresses the disadvantage and injustice within society.</p>
<p><b>Standard 17</b> Attend and respond to the care, safety and protection of vulnerable persons</p>	<p><b>Indicator 1: Care and Protection</b></p> <p>The SWP at all times <b>places the care, safety and protection of vulnerable persons as a priority</b> of service responsibility.</p>
	<p><b>Indicator 2: Empowerment and Support</b></p> <p>The SWP works to <b>empower and support families</b> to meet the care needs of vulnerable persons.</p>
	<p><b>Indicator 3: Work in Partnership</b></p> <p>The SWP <b>works in partnership with relevant stakeholders</b> to manage risks.</p>
	<p><b>Indicator 4: Risk Assessment</b></p> <p>The SWP <b>has professional knowledge and skills to undertake a risk assessment</b> and notify appropriate authorities when there are concerns or allegations relating to vulnerable persons' safety.</p>
<p><b>Standard 17</b> Maintain conditional confidentiality in the exchange of information relating to clients, colleagues and stakeholders</p>	<p><b>Indicator 1: Information Sharing</b></p> <p>The SWP only <b>acquires and shares information which is pertinent</b> to and facilitates service response.</p>
	<p><b>Indicator 2: Information Gathering</b></p> <p>The SWP <b>obtains information in a respectful manner</b> and <b>minimises intrusion into privacy</b>.</p>
	<p><b>Indicator 3: Informing Client</b></p> <p>The SWP, where appropriate, <b>informs the client</b> to whom the information will be shared with and the reasons for sharing.</p>
	<p><b>Indicator 4: Conditional Confidentiality</b></p> <p>The SWP <b>maintains conditional confidentiality</b> and respects client's refusal to give consent for the sharing of information.</p>

### 3 Domain 3: Working in an Organisational Setting

The organisational setting provides the operational structure and context for professional social work practice. SWPs have an organisational responsibility to meet organisational requirements and work with other areas of organisational response, in an integrated manner to provide a holistic service to clients. There is a commitment to avoid case practice isolation in the management of case practice responsibilities.

#### Sub-domain 3a

SWP meets organisational requirements of the social work role.

#### Scope

Enactment of the role responsibilities of the SWP in accordance with organisational policies, protocols and procedures.

#### Objectives

1. To contribute to the achievement of the organisational mission.
2. To provide quality professional social work services on behalf of the organisation.
3. To facilitate the use of organisational capacity to provide appropriate and effective professional services.
4. To maintain and contribute to the professional social work perspective on practice and organisational responsiveness functioning.

STANDARDS	INDICATORS
<b>Standard 19</b> Establish and maintain a professional social work role within the organisation consistent with social work values, knowledge and skills	<b>Indicator 1: Organisational Policies</b> The SWP <b>has knowledge and understanding of organisation's policies, protocols and procedures</b> and contributes to the achievement of the organisational mission.
	<b>Indicator 2: Social Work Values</b> The SWP <b>utilises social work values, knowledge and skills</b> to work in a professionally accountable manner within the designated organisational role.
	<b>Indicator 3: Professionalism</b> The SWP <b>engages with, learns from and follows directive from Supervisors and Management in a professional manner</b> to ensure professional services are delivered.
	<b>Indicator 4: Separation of Professional and Personal Concerns</b> The SWP <b>separates professional concerns from personal concerns</b> when providing professional services.
	<b>Indicator 5: Workload Management</b> The SWP <b>manages their workload to meet organisational deadlines.</b>
	<b>Indicator 6: Documentation</b> The SWP <b>complies with organisational requirements for record keeping, documentation and data collection.</b>
	<b>Indicator 7: Responsible Use of Resources</b> The SWP <b>ensures that resources are utilised in a responsible manner</b> for the intended professional purpose.
	<b>Indicator 8: Respect</b> The SWP <b>values and respects the social work professional role</b> within the organisation. When organisational role requirements and social work professional role are in conflict, the SWP will seek to address it with the relevant authorities.
	<b>Indicator 9: Professional Representation</b> The SWP <b>represents the organisation in a professional manner</b> which enhances the professional standing and community profile of the organisation.

### Sub-domain 3b

SWP works with other professionals within the organisation.

#### Scope

Collaboration with other professionals within the organisation.

#### Objectives

1. To integrate professional service provision to effectively respond to clients' needs.
2. To enrich professional service provision by working with multidisciplinary professionals.

STANDARDS	INDICATORS
<b>Standard 20</b> Perform the social work role as part of a multidisciplinary team	<b>Indicator 1: Multi-Disciplinary Work</b> The SWP <b>works with other service systems</b> within the organisation to contribute to the achievement of the organisational mission.
	<b>Indicator 2: Teamwork and Communication</b> The SWP <b>demonstrates effective teamwork and communication</b> to achieve the organisational mission.
	<b>Indicator 3: Professional Support</b> The SWP <b>contributes to the provision of ongoing professional support</b> to staff within the organisation.
	<b>Indicator 4: Networking</b> The SWP <b>represents the organisation to network with other stakeholders</b> to access appropriate resources for service delivery.

### Sub-domain 3c

SWP undertakes managerial responsibilities as a manager within an organisation (only applicable for identified staff).

#### Scope

Enactment of the managerial responsibilities of the SWP within the organisation.

#### Objective

To maintain and contribute a professional social work perspective on operational management within the organisation.





STANDARDS	INDICATORS
<b>Standard 21</b> Undertake the management role utilising social work values, knowledge and skills	<b>Indicator 1: Knowledge and Understanding</b> The SWP <b>develops a knowledge and understanding of the management role</b> from a social work perspective.
	<b>Indicator 2: Clarity of Purpose and Roles</b> The SWP <b>develops clarity of social work domain, purpose, roles and activities</b> within the management role in the organisation.
	<b>Indicator 3: Professional Service Delivery</b> The SWP <b>contributes to the development of operational procedures and systems</b> to ensure professional service delivery.
	<b>Indicator 4: Staff Performance and Organisational Mission</b> The SWP <b>contributes to the recruitment, support, mentoring, supervision and monitoring</b> of social work and non-social work staff in relation to staff performance and the achievement of the organisational mission.
	<b>Indicator 5: Organisational Strategic Planning</b> The SWP <b>contributes to the development of organisational strategic planning</b> through the input of social work values, knowledge and skills.
	<b>Indicator 6: Advocacy for the Profession</b> The SWP <b>advocates for the role of social work profession</b> within the organisation.

#### 4 Domain 4: Working with Reflective Practice

Social work practice is enhanced by the commitment to reflect upon the what, why and how the practice was undertaken, and the outcomes achieved through this. Reflective practice contributes to the development of social work understanding, knowledge and skills.

##### Sub-domain 4a

SWP undertakes self-reflective practice.

##### Scope

All areas of social work practice which the SWP has a responsibility to reflect upon.

##### Objectives

1. To commit to openness and continuous self learning.
2. To review, reflect upon and learn other practice contexts, functions, processes and outcomes.
3. **To apply learning to future practice.**

STANDARDS	INDICATORS
<b>Standard 22</b> Undertake reflective practice as an integral part to professional social work practice	<b>Indicator 1: Regular Reflection</b> The SWP <b>reflects regularly</b> upon key aspects of their practice.
	<b>Indicator 2: Utilising Knowledge</b> The SWP <b>utilises practice wisdom<sup>4</sup>, theoretical and research knowledge</b> to facilitate their reflection process.
	<b>Indicator 3: Applying Learning</b> The SWP <b>learns from reflective practice and applies learning to their future practice.</b>
	<b>Indicator 4: Reflective Dialogue</b> The SWP <b>engages in reflective dialogue with clients, colleagues, supervisors and stakeholders</b> to share their practice reflection and gather feedback to enhance reflective practice.

#### Sub-domain 4b

SWP undergoes clinical and professional supervision.

#### Scope

All areas of practice which the SWP undertakes in relation to organisational practice, management and policy development.

#### Objectives

1. To facilitate professional reflection in specific and future social work roles.
2. To facilitate the capacity to link theories to practice.
3. To enhance the SWP's ability to utilise practice wisdom, theoretical and research knowledge to guide and inform practice.



<sup>4</sup> A term used to describe the accumulation of information, assumptions, ideologies and judgments that have seemed practically useful in fulfilling the expectations of the job.

#### Sub-domain 4b

SWP undergoes clinical and professional supervision.

#### Scope

All areas of practice which the SWP undertakes in relation to organisational practice, management and policy development.

#### Objectives

1. To facilitate professional reflection in specific and future social work roles.
2. To facilitate the capacity to link theories to practice.
3. To enhance the SWP's ability to utilise practice wisdom, theoretical and research knowledge to guide and inform practice.

STANDARDS	INDICATORS
<b>Standard 23</b> Undergoes clinical and professional supervision as an important part of reflective learning and professional development	<b>Indicator 1: Clinical Supervision</b> The SWP <b>obtains regular clinical and professional supervision.</b>
	<b>Indicator 2: Proactive Use of Supervision</b> The SWP is <b>proactive in utilising clinical and professional supervision</b> for reflective learning, professional development and career planning.
	<b>Indicator 3: Personal Responsibility</b> The SWP <b>takes responsibility for and actively engages in self-care and the supervision process</b> to facilitate reflective learning and professional development.

#### Sub-domain 4c

SWP undertakes social work education

#### Scope

All areas of social work practice relating to current and future social work knowledge and skills need acquisition.

#### Objectives

1. To establish and maintain the value of professional development learning.
2. To increase relevant and required competencies in social work practice.
3. To increase the postgraduate educational participation of SWPs.
4. To improve the professional status of the social work profession.

STANDARDS	INDICATORS
<b>Standard 24</b> Remain abreast with theoretical, research and practice knowledge development relating to their areas of work	<b>Indicator 1: Keeping Current</b> The SWP <b>keeps abreast with current social work</b> and other professional discipline knowledge and skills development in practice areas relevant to present and future work.
	<b>Indicator 2: Utilising Knowledge</b> The SWP <b>utilises professional knowledge learnt in practice.</b>
	<b>Indicator 3: Further Studies and Accreditation</b> The SWP <b>undertakes post-graduate</b> and further studies, and <b>strives for social work related accreditations</b> , where relevant and applicable.

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## SINGAPORE ASSOCIATION OF SOCIAL WORKERS

### CODE OF PROFESSIONAL ETHICS

#### PREAMBLE/GUIDING PRINCIPLES

The profession of social work is based upon a belief in the value and dignity of all human beings, and a concern for their social well being.

Social work is dedicated to the enhancement of the lives of human beings through the provision and development of appropriate services and through the promotion of social planning and action. Members of the profession have sought through formal education to equip themselves to meet their responsibilities for the welfare of society as a whole.

The social work profession accepts the responsibility to contribute its knowledge and skills, to lend support to programmes of social welfare and endeavours to protect the community against unethical or incompetent practice in the social welfare field, which may be harmful to human welfare.

The Singapore Association of Social Workers (SASW) subscribes to the following basic principles and requires its members to observe them.

### PRINCIPLES OF PROFESSIONAL ETHICS

#### A. SOCIAL WORKERS' ETHICAL RESPONSIBILITY TO CLIENTS

1. Social workers avoid discrimination and prejudice, respect individual differences and accept that professional responsibility must take precedence over personal aims and views.
2. Social workers respect and safeguard the rights of persons served in a relationship of mutual trust, to privacy and confidentiality in their use of the service and to responsible use of all information given and received.

Responsible use entails the following:

- a) Not discussing the case outside the professional context.
- b) Restricting access on any records e.g. written, audio, video, e-mail on the client unless subpoenaed by the Courts to do so.
- c) Before making a video/audio recording, informed consent from the client must be sought in writing.
- d) Before making a video/audio recording, social workers must make a written undertaking, in the presence of the client, about restricted use of the recording which is:
  - (i) for use within the agency and for purposes benefiting the client
  - (ii) for relevant professionals and for training/consultation purposes

Permission must be sought in writing from the client again if the audio/video recording is to be used for public viewing and/or hearing.

- e) In the event that information relating to the client has to be shared with a professional and/or professional body, the client's permission has to be sought
- f) In the event that the client is a minor or is unable for physical, mental or emotional reasons to give consent, a responsible adult who plays a significant role in the life of the minor or adult client, needs to be informed and have his/her consent sought.
- g) Names and other sensitive personal particulars of the clients must be removed from the records when used for training or other educational purposes. Pseudonyms and other altered particulars may be substituted so as to maintain anonymity of the clients.
- h) All records (e.g. written, audio, video and e-mail) must be kept strictly confidential and in a safe place away from public viewing accessible only to professionals involved in the case.
- i) When destroying all forms of records deemed no longer active and useful, care must be taken by social workers to ensure that the principles of confidentiality continue to be maintained, i.e. that the records are completely destroyed leaving no evidence traceable to the identity of the clients.

Responsibility for protecting the clients' rights continues even after termination of the professional relationship.

- 3. Social workers affirm the rights of persons served to make their own decisions and to work out their own problems within the scope of their own resources, having due regard to their personal well-being.
- 4. Social workers affirm the right to client self determination which needs to be preceded by ensuring that the client is both aware of and has assessed alternative options. The role of social workers in this instance is to provide all relevant information that would allow the client to make an informed decision.
- 5. When social workers act on behalf of clients who lack the capacity to make an informed decision, social workers take steps to safeguard the interests and rights of these clients.
- 6. Social workers limit the rights to self-determination where in the social worker's professional judgment, clients' actions or potential actions pose a serious, foreseeable and imminent risk to themselves and others.
- 7. Social workers affirm that every person has the right to avail themselves to social services, unless this contravenes a specific policy of their employing agency. In practice, this means ensuring:
  - a) that the client will be able to communicate in a manner comfortable to him/her.
  - b) an atmosphere that respects all religions and cultures, race, and nationality regardless of political belief, gender, gender orientation, age, marital status, mental and physical ability.
- 8. Social workers use clear and respectful language in all communications (written and verbal) to and about clients.
- 9. Social workers take the responsibility for continuity of services for their own clients in the event that services are disrupted by any circumstance (e.g. going on leave, emergencies, resignation or termination of employment)

10. Social workers do not, under any circumstance, engage in sexual activities or sexual contact with current clients whether such contact is consensual or not. This principle applies also to:
  - a) Client's relatives
  - b) Other individuals with whom the client maintains a close personal relationship
  - c) Where there is a risk of exploitation or potential harm to the client.
11. Social workers do not provide clinical services to individuals with whom they have had a prior sexual relationship.
12. Social workers do not get involved in close personal relationships with former clients unless the professional relationship was ended at least two years prior to the new contact.
13. Social workers do not sexually harass clients. Sexual harassment includes sexual advances, sexual solicitation, requests for sexual favours, and other verbal or physical conduct of a sexual nature.
14. Social workers do not engage in physical contact with clients where there is a possibility of psychological harm to the client as a result of the contact such as cradling or caressing clients.

**B. SOCIAL WORKERS' ETHICAL RESPONSIBILITY TO COLLEAGUES INCLUDING INTER-DISCIPLINARY COLLEAGUES**

1. Social workers act on the recognition that effective service depends on co operation among professional disciplines and others with due regard to respective areas of competence.
2. Social workers treat with respect the professional judgment, statements and actions of colleagues. When criticisms of these appear unwarranted, social workers need to refer the matter to the Association.
3. Social workers who refer clients to other professionals take steps to facilitate an orderly transfer of responsibility, and to disclose all pertinent information to the new service providers, with clients' consent.
4. When working or consulting with other professional disciplines, social workers are aware of the parameters of their own power and expertise as well as that of other professionals, thereby maximizing effective working relationships and ensuring that neither social workers nor clients have inappropriate or unrealistic expectations of themselves and of the results of the help offered.

**C. SOCIAL WORKERS' ETHICAL RESPONSIBILITY IN PRACTICE SETTINGS**

1. Social workers are remunerated for their professional work, by a salary, fees, grants or other payments allowable under the terms of their service and by no other gain connected with their working practice. This means that social workers do not accept goods or services from clients as payment for professional services. Bartering arrangements particularly involving services create the potential for conflict of interests, exploitation and inappropriate boundaries in a social worker's relationship with clients.

#### **D. SOCIAL WORKERS' ETHICAL RESPONSIBILITY AS PROFESSIONALS AND TO THE SOCIAL WORK PROFESSION**

1. Social workers work for the continued development of professional competence for both themselves and the profession. This includes their support of continuing professional education in its widest sense.
2. Social workers strive to remain proficient in professional practice and the performance of professional functions by critically examining and keeping current with emerging knowledge relevant to social work, reviewing regularly professional literature and participating in continuing education relevant to social work practice and social work ethics.
3. Social workers provide services and represent themselves competent only within the boundaries of their education, training, licence certification, consultation received, supervised experience or other relevant professional experience.
4. Social workers refrain from any personal behaviour which damage the functioning of the profession, in accordance with the values stated in this Code.
5. When relevant, social workers make it clear in public statement or action, whether they are speaking or acting as individuals or as authorized representatives of a professional association, an agency, or any other organization.
6. Social workers do not condone, facilitate or collaborate with any form of discrimination, with regard to race, religion, nationality, gender, gender orientation, age, marital status, political belief, mental and physical ability.
7. Social workers acknowledge the work of and the contributions made by others.
8. Social workers take the responsibility of promoting the values of integrity and competence of the social work profession. These activities may include teaching, mentoring, research, consultation service, representation to public bodies, presentations to the community and participation in the activities of SASW.
9. When engaged in evaluation or research, the same principles of confidentiality and informed consent and respect as given to clients should be accorded to research projects. The process should be governed by the accepted ethics of research.
10. Social workers refrain from having any form of self-advertisement which makes unsubstantiated claims pertaining to their work, the services provided and the results that can be expected.

#### **E. SOCIAL WORKERS' ETHICAL RESPONSIBILITY TO SOCIETY**

1. Social workers accept as their primary professional obligation the welfare of those served - individuals, groups or communities - with due regard to the common welfare. This obligation may require actions to influence social conditions or policies.
2. Social workers are committed to correcting through professional channels, abuses to good standards perpetuated by those wrongly using the title "social worker".
3. Every social worker has the responsibility to give feedback on policies or social conditions which are detrimental to people he/she relates to in his/her professional capacity. The feedback should be given to appropriate bodies/persons with the aim of facilitating change.

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*The SASW Code of Professional Ethics (151 Revision) was edited by Dr Myrna Blake and Ms Prema Thirupathy in 1999. It was subsequently presented and accepted in principle by the SASW Annual General Meeting on 25 June 1999*

*The SASW Code of Professional Ethics (2'd Revision) was edited further by Dr Myrna Blake, Mrs Ngiam Geak Kim and Mr Benny Bong in 2004. The edited version of the SASW Code of Professional Ethics was circulated at the 34th AGM in 2004 for approval. There were no objections made to the revised version.*





Practice & Capability Development Branch (PCDB)  
Service Development & Management Division (SDMD)  
Ministry of Social and Family Development (MSF)  
Email: [SDMD\\_CSWP\\_TRG@msf.gov.sg](mailto:SDMD_CSWP_TRG@msf.gov.sg)

