



Promoting Safe Practice and Ensuring Accountability

Dear Social Service Practitioners,

The delivery of social services takes place in an increasingly complex and dynamic environment. The needs that our clients face have intensified and evolved, particularly due to the changes brought about by the pandemic. As we journey with our clients, we must not lose sight of putting priority on safety in our practice. Safe social work practice applies to both clients and practitioners. This practice is supported by organisational policies and systems, holistic case assessments and documentation, and a nurturing team that promotes accountability and support for one another. These processes enable us to carry out our duties safely as practitioners and at the same time, foster a safe environment for our clients and families.

What constitutes safe work practice?

Summary of Key Points of Safe Practice

1) Safe Practice for Practitioners

- Organisational leadership, policies, structures and systems contribute to a culture of safe practice
- Organisational processes and guidelines to report issues that infringe on safety should be made clear to practitioners
- Practitioners should know how to assess and respond to risks, and consult supervisors on case plans

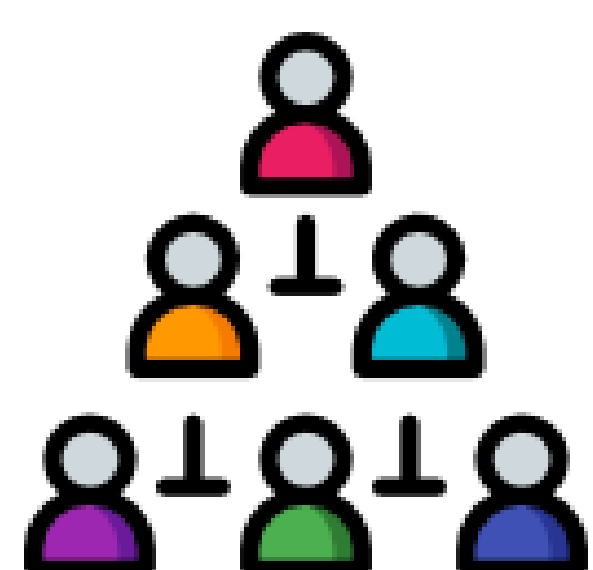
2) Safe Practice for Clients

- Practitioners should prioritise safety in their work with clients and families. Special attention should be given to vulnerable family members, to ensure their needs are cared for
- Case assessments should be holistic and evidence-based
- If client or vulnerable member have a caregiver, practitioners should be aware of the level of care given by caregiver to determine the intervention required

Safe social work practice is practice that promotes the safety of both the client and practitioner. It requires practitioners to attend and respond to issues or situations that potentially threaten the client's well-being and physical safety. Likewise, if practitioners or supervisors identify or sense potential threats that affect the safety of practitioners, steps need to be swiftly taken to protect practitioners. Here are some key principles for organisations and practitioners to follow.

Safe social work practice for practitioners and clients

Safe practice for practitioners



The practitioner's organisation plays a crucial role in ensuring safety as a priority for practitioners. The organisation's leadership, policies, structures and systems are integral factors in building a culture of safe practice (FSC-CSWP Casework Practice Guide, 2021).

Managerial staff and leaders play an important part in fostering a safe and open environment so that practitioners will feel comfortable to discuss or report issues and incidents that infringe on their safety. Reporting processes and guidelines should also be clear and made known to practitioners.

In our line of work, it is natural for practitioners to connect emotionally with clients as we support and advocate for them. While doing so, we must be **aware of limits and boundaries of practice** to avoid situations where safety is threatened or undermined (Health and Care Professions Council, 2017). In the course of making plans for cases, practitioners can consult supervisors on their plans to ensure that safety is prioritised for practitioners, clients and family members alike; particularly for cases that have concerns of violence and aggression. **Practitioners should also be trained to assess risks presented in cases and know how to respond to situations that threaten their safety.**

Safe practice for clients

Safe practice for clients is focused on promoting the safety and welfare of our client and family members involved in the case. Firstly, practitioners should be clear about their goals in working with the client and family and ensure that safe casework practice is considered, as they strive to meet the goals set. Secondly, practitioners should know how to conduct assessments that are holistic and evidence based. This can be done by considering the biopsychosocial perspective of the client and environment. We can then establish their needs, potential risks and the type of intervention required. We must also pay special attention to vulnerable members in the family such as children, elderly and persons with disability, and ensure that their needs are considered.

If the client or vulnerable member is being cared by a caregiver, practitioners should understand the level of care they receive to determine the support and intervention needed. A useful way of assessing this is to observe the care that is given, in person, through a home visit. Some things to observe during the visit are – What type of care is given by the caregiver and to what extent? What are the dynamics between the caregiver and client or vulnerable person? These observations will be helpful for the practitioner’s assessment and intervention plan.



Another important factor in conducting assessments would be ensuring that assessments are based on evidence. This is achieved through obtaining and corroborating essential information of the client and family from key stakeholders and professionals involved in this case. Their inputs would add value to the development of assessment and safety plans for the client and family. Collaboration with other professionals also prevents workers from working alone, by providing “additional eyes” to monitor the safety of clients and support in safety planning.

Good documentation is key to safe practice



Strong case documentation is integral to safe practice. Case documentation should show evidence of proper assessment, a plan that is followed and reviewed, and an evaluation of the intervention and outcome. The documentation should be clear, succinct, objective, and legible as it might be used for future reference.

It should also explain the **practitioner's thinking and principles behind key decisions, the professionals involved in the decision-making process and how the practice complies with the standard of care and protection.** If an inquiry is held on the case, the documentation would be used as evidence that appropriate attention and care was given.

Some key questions that should be asked in the documentation process will include but are not limited to the following (Chew, 2021):

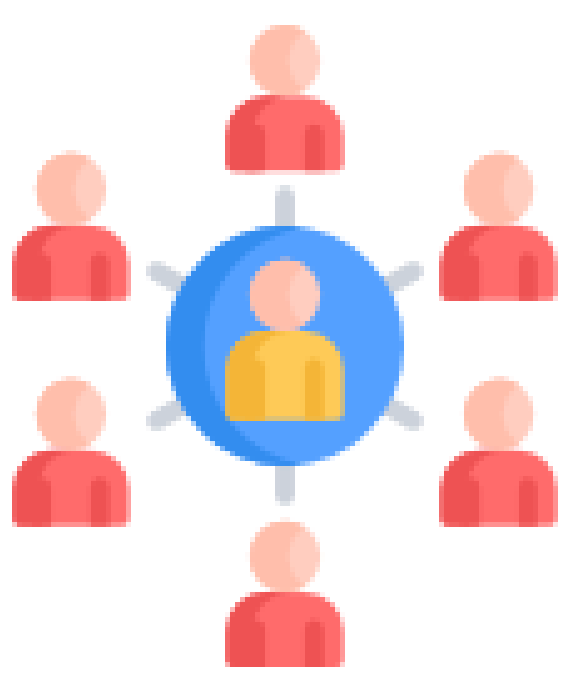
- Have I set the background and context to the case?
- Have I described facts/ issues/ observations of the case in sufficient detail that are relevant and material for a reader to understand the case?
- Are there related or contributing facts which are not directly relevant, but will help to explain the case? Have these facts been detailed?



These questions will benefit the practitioner's intervention as well, by assessing whether more information is needed to provide safe and effective intervention.

Ensuring accountability for safe practice

While these principles should be followed by practitioners, it would be impossible to follow these principles solely through one's individual efforts. **Organisational structures and protocols and support from colleagues** are essential in **helping practitioners stay accountable.**



Agency protocols such as having regular supervision sessions is a simple and effective way to promote accountability. Supervisors can check in and give inputs to cases to make sure that practitioners are on the right track and improve assessments and case plans, if necessary. Having consistent case reviews is equally important, to ensure that plans are up to date. During supervision, supervisors should check in on the workload and emotional health of practitioners. This ensures that workers can attend to the needs of clients, and those who are burnt out are provided with support.

In addition to agency protocols, **roles and responsibilities should be clearly stated by managerial staff.** This ensures due diligence where workers are doing work and making decisions that match their level of skills, professional judgment and seniority. If practitioners encounter cases that might be beyond their level of expertise, they should know who to approach for advice, instead of following up on the case without seeking consultation.

Providing adequate training to practitioners is another key factor of professional accountability. It is important that practitioners possess the right knowledge and analytical skills for safe and competent case management. At the same time, practitioners should take ownership of their learning and request for training and supervision, if necessary, to be accountable for their service to clients.

Playing our part in promoting safe practice

There are many factors that come into play in promoting safe social work practice. We see that organisational management, policies and protocols are fundamental in setting the right structure and culture to support safe practice for practitioners, and for practitioners to deliver safe practice to clients. Agency leaders and supervisors thus hold important roles in creating a supportive and nurturing environment where practitioners are comfortable to seek help or share issues that affect their safety and well-being. A supportive work culture also facilitates accountability where check-ins and follow-ups between colleagues or with supervisors, become a natural part of interactions. In our various positions, as practitioners, supervisors, or leaders, we all play an important part in making safety a priority for social service professionals, clients and families.

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References

Chew, L. (2021, May 11). *Forensic Reports and the Use of Language. An Appreciation of the Key Elements*. [PowerPoint slides]. School of Law, Singapore University of Social Sciences.

Health and Care Professions Council. (2017). *Social Workers in England*. Retrieved from Health and Care Professions Council's website.

Ministry of Social and Family Development. (2021). *FSC-CSWP Casework Practice Guide*. Retrieved from Ministry of Social and Family Development's website.