SOCIAL WORK EFFECTIVENESS AND BURNOUT: HOW SHOULD WE EXPLORE THE LINKS?

Jo Moriarty & Jill Manthorpe
International Long Term Care Policy Network (ILPN) Conference 2016
INTRODUCTION

Background to talking about this today
Suspension by regulator

Social worker suspended for a year by social work regulator for falsifying records of contact with clients

Worker said he was suffering from stress and “unable to cope with the demands of his work”

HCPC said service users had been ‘harmed’ because their reviews were delayed ‘significantly’
Our task

The aim of the review ... was to provide insight into, and aid our understanding of, the current research and evidence base for social work, including potential gaps and areas for development.
Review for Professional Standards Authority

Role includes:

Conducting audits and investigations and appealing fitness to practise cases to the courts if sanctions are unduly lenient & in the public interest

Promoting dialogue and debate on regulatory policy and practice

Health and Social Care Act 2012 expanded its role to oversee regulation of social workers in England.

Review to help inform this work

Literature review of roles and issues within the social work profession in England

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5 Sept 2016  ILPN Conference
METHODS

Two scoping reviews
Methods

- Different views about what a ‘scoping review’ is and what it should include
- Purpose is to act as a starting point – not the ‘last word’
- Asks where there are gaps as well as what has been researched
- Comments on methodologies adopted in published research on the topic
  - Qualitative, quantitative or mixed methods?
  - Large scale or small scale?
  - Different views about value of ‘ranking’ studies
  - Should (in our view!) consider where existing studies undertaken
FINDINGS

Summary of some findings relevant to effectiveness, roles and burnout
### Measuring effectiveness (1)

<table>
<thead>
<tr>
<th>Methods</th>
<th>Can it be done?</th>
<th>How and/or challenges</th>
</tr>
</thead>
<tbody>
<tr>
<td>Success versus failure?</td>
<td>Sometimes ✓</td>
<td>But whose definition of success? Social work does not always lend itself to binary distinctions</td>
</tr>
<tr>
<td>e.g. Boulware et al, 2013</td>
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<td>Uptake of living donor kidney transplants</td>
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<tr>
<td>User and carer satisfaction</td>
<td>To an extent ✓</td>
<td>Rarely includes those who refused/gave up service</td>
</tr>
<tr>
<td>Outcomes for users and carers</td>
<td>Some outcomes easier to achieve and measure ✓</td>
<td>Changes in e.g. wellbeing, quality of life, sense of control</td>
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# Measuring effectiveness (2)

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<tr>
<th>Methods</th>
<th>Can it be done?</th>
<th>How and/or challenges</th>
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<tbody>
<tr>
<td>Views of other professionals</td>
<td>✔</td>
<td>May have limited knowledge about what social workers do</td>
</tr>
<tr>
<td>Views of social workers</td>
<td>✔</td>
<td>Risks accusations of bias in absence of other evidence. Hard to separate from other factors like workload or autonomy</td>
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<tr>
<td>Cost effectiveness</td>
<td>Rarely ✔</td>
<td>Depends how costs calculated. Risks measuring cost shunting unless comprehensive</td>
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Some overall patterns emerged

- Successful where social workers were undertaking multiple roles
  - Combination of advice and arranging practical support
  - Hard to separate into separate components (and probably wrong too)

- Where practitioners’ level of skill/experience was reported, it seemed to make a difference
  - e.g. US study on patients receiving dialysis (Beder 1999)
But ....

Social work contribution sometimes unrecorded

Example of an excluded study from 2001 which recorded community nurse time but not social work time

Treatment fidelity increasingly recognised as important – compare UK & US literature on care management

**Stroke rehabilitation after hospital discharge: a randomized trial comparing domiciliary and day-hospital care**

Paul Roderick, Joe Low¹, Richard Day², Tessa Peasgood³, Mark A. Mullee⁴, Joanne C. Turnbull⁴, Tracey Villar², James Raftery⁵
By contrast much larger literature on stress and burnout

Job stress among social workers: determinants and attitude effects in the Nordic countries

Social workers' caregiver identity and distress: examining the moderating role of self-esteem and social support

Revisiting the causes of stress in social work: sources of job demands, control and support in personalised adult social care

Factors predicting the likelihood of seeking help from social workers in Israel
(1) Nature of the work

Daily, social workers face the busy and complex world of human behaviour in social contexts—a world in which relationships break down, emotions run high and personal needs go unmet

(Hamama 2012)

The social worker is an outsider who can share the burden. A further social work role is that of helping the dying person to undertake a life review, which may include important family milestones, instructions to survivors and the documenting of values and beliefs that have given meaning to their life

(Watts, 2013)

The meeting ends and Mr N asks to see his wife. He is tearful. The social worker, who drove him to the meeting, tells him she does not have the time to wait for him but if he wants to see her he can, but he will have to get a taxi home. He agrees to this and goes to sit beside the wife he is to be forcibly estranged from and for whose care he will need to pay for without any contribution from the state

(Hastings and Rogowski, 2014)
(2) Workloads

Our 2009 survey using time diaries (Baginsky et al, 2009) showed many workers did equivalent of an extra day a week over their contracted hours.

Methodological challenge to find ways of matching individual caseloads with workloads.

Most nights I wake up in the night worrying about work I have not had time to do. I struggle to enjoy life outside work as I’m so exhausted.

(Worker in Community Care TMP survey)

Instead, job control appears to mitigate the negative consequences of high work demands through the significant interaction effect (Wilberforce et al 2014).
The challenges and changes that are occurring in the health care environment have produced job demands and expectations that are incompatible with workers’ expectations about how they want to use their skills and function at work (Acker & Lawrence 2009).

... with stress deriving in particular from role conflict between client advocacy and meeting agency needs (Lloyd et al 2002).

This study [of professionals supporting people with dementia living alone] also suggest[s] the need for emotional supports for professionals to manage the contradictory feelings experienced when meeting their professional roles worked against flexibly adjusting the system to carry out person-centered care (de Witt & Ploeg 2016).

Social work is often characterised by a combination of high demands and limited resources, and therefore innate conflicts can be seen as a natural part of the work (Blomberg et al 2014).
What helps?

Some positive factors identified
- Organisational culture
- Good quality supervision
- Positive coping styles
- Good quality training (initial and post qualifying)
- Manageable workloads (but not all workers with high workloads are stressed)
- Role clarity and/or job control
DISCUSSION

Consequences and improvements
And the negative consequences?
Discussion

- Clear messages about effects of burnout/compassion fatigue on performance
- Rare to see effects on workers and service users/carers examined together
  - Need different research designs
- Consideration of ‘treatment fidelity’
  - For example, UK/US care management
## Sources and references

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Thanks for listening