Social Work Practice and Accountability

KATHRYN CAMERON

This chapter will look at accountability in relation to social work practice in Scotland. It will examine what is meant by the concept of accountability and then explore what this actually means in practice situations. Forms of accountability are present in all areas of service delivery but one area of practice, namely community care, will be used to illustrate some of the aspects of accountability of which workers should be aware in relation to their practice with service users. While there is a seductive simplicity in drawing lines of accountability which give a clear picture of the ways in which it is possible to hold someone to account, this belies the complexity of the tensions which exist. Some of these tensions will also be explored.

What do we mean by the term ‘accountability’? Broadly, being accountable means being obliged to give an explanation or being held to account for one’s actions or inaction. Is it the same as responsibility? It has been said (Clark with Asquith, 1985, p. 41) that the two are synonymous in conventional usage, but Coulshed (1990) argued that there is a difference between the two concepts. She saw responsibility as a personal entity which arises out of being a citizen and a human being and therefore being responsible for one’s own actions. Accountability, on the other hand, is an organisational entity and derives from holding a particular position.

Shardlow (1995, p. 67) defines accountability as arising ‘where social workers give an explanation and justification for their actions to somebody else who might reasonably expect to be given such an explanation’. The concept, therefore, encapsulates what Bray and Preston-Shoot
Kathryn Cameron (2001, p. 43) have described as ‘the twin concepts of “accountability to” – to those on whose authority professionals act – and “accountability for” – the range of activity that is open to scrutiny’. Why is an awareness of accountability important in social work practice? Social workers interact most frequently with the most vulnerable in society. Their clients are often those who, for a number of reasons, do not have a voice or who cannot make their voice heard. They are disadvantaged and frequently experience discrimination. They are oppressed and at risk of being overlooked and denied services. Many of the clients of social workers are the members of society who are least likely to hold the providers of services to account. Social work values of openness, partnership and empowerment are crucial factors in ensuring accountability to service users, as is an awareness of the inequality of power within the relationship between service users and service providers. The rights discourse which emerged strongly in the 1990s, culminating in the passing of the Human Rights Act in 1998, has contributed to the increasing significance of accountability in all the public services. If individuals have rights, then there needs to be a clear understanding of how these rights will be guaranteed, and a discernible system which can deal with infringements and breaches of these rights. Such a system requires that there be transparency at all levels. Only when there is such transparency can there be identification of possible areas where things have gone wrong and, consequently, the opportunity for challenge to take place.

Accountability within social work is complex. It involves the social worker being accountable to a number of individuals, groups, agencies and institutions. It encompasses public accountability to the state and to society. It embraces legal accountability in terms of the mandate to practise and the duties imposed by statute. It also requires accountability to professional bodies. There can often be tensions between the different demands made by all of these and it behoves social workers to be clear about where and to whom the accountability for their practice lies. The complexity of the task faced by workers is evident in the fact that workers can find themselves faced with a range of different responsibilities which may, at times, conflict with one another. Workers often find themselves working within families or other groups where there are conflicts of interest and opinions. Being clear to whom one owes allegiance can be problematic and the role of the worker can appear to be somewhat ambiguous. Social workers could, therefore, find themselves having to manage the tension between their duties to their agency and to their personal and professional values.
The different forms of accountability will be explored in some detail using the device of a fictional case study to highlight the different lines of accountability. Although a community care case is used, the issues raised are applicable to other areas of practice as well.

Mrs J is an 85-year-old woman who was widowed ten years ago. She has one son aged 60 who lives thirty miles away in another town and who himself has health problems but who has tried to visit as often as he can to help his mother. Mrs J has lived on her own since her husband’s death and has made her wishes clear to everyone that she wishes to remain independent. She has recently had a fall and had to be admitted to hospital. While there she began to show signs of forgetfulness and disorientation. A social worker was asked to do a community care assessment to determine what resources and supports Mrs J might need if she were to be returned home.

The worker involved in dealing with this case would be accountable in the following ways.

To the employer: the policies and procedures of the local authority which is her employer bind the social worker undertaking the assessment. Failure to work within these policy guidelines could leave the social worker open to disciplinary action and even personal liability for her actions. In undertaking their work, social workers act as agents for their employer, be that a statutory or voluntary agency. They are accountable to their employers for the work undertaken in their name and so must abide by the conditions of their employment and the policies of the agency. This, therefore, represents an unequal balance of power between the employer and the worker and could place the worker who speaks up against policies or practices in a vulnerable situation. Whistle-blowers have often been represented at worst as villains or at the very least as deluded. The passing of the Public Interest Disclosure Act in 1999 has set out a clear framework for raising concerns about malpractice and provides protection against victimisation for those workers who do raise concerns.

To other agencies: in line with joint working as envisaged in the Joint Future Agenda (Report of the Joint Future Group, 2000), the social worker in the above case would be involved in a single shared assessment and may be making recommendations which will involve health
and other professionals. Collaborative working of this kind requires that there are adequate arrangements for accountability and this is often achieved through the application of inter-agency agreements and protocols. Lines of accountability need to be transparent because in situations of collaborative practice there can sometimes be a lack of a clear hierarchical structure with no easy way of establishing who is responsible for particular aspects of the case and for what they are accountable. It can then be difficult for service users to hold anyone to account for a failure to provide services. The mixed welfare economy has contributed to a blurring of lines of accountability. In many cases there is no one person of whom it could be said ‘the buck stops here’. This can lead to confusion not only for service users but also for all agencies involved because the responsibility for decision-making is not clearly understood. Many service users find themselves in touch with a bewildering array of professionals whose roles and responsibilities are dimly understood, if at all. In such situations, there is little transparency and so the ability to hold individual professionals accountable is diminished. One way to address this could be the use of case conferences. These can be a useful mechanism for demonstrating accountability to service users by ensuring their presence and providing them with copies of relevant reports and action plans detailing the work of various agencies and clarifying the roles and responsibilities of all involved.

**Legal accountability:** local authorities derive their mandate to deliver services from statutory duties and responsibilities and these in turn are delegated to their employees. The social worker undertaking this community care assessment will, therefore, need to work within the appropriate legislative framework and may be held accountable for a failure to carry out duties. In this case there will be duties under s.12A of the Social Work (Scotland) Act 1968 to undertake an assessment of needs. Failure to carry out duties could lead to legal challenge by the service user. This could be by way of a judicial review which is a process which can be pursued through the Court of Session and can be raised where there are allegations that a decision taken was illegal, procedurally unfair or irrational. Alternatively, under s.6 of the Human Rights Act the service user could allege that her Convention rights have been breached.

**Public accountability:** public scrutiny of social work practice is now much more rigorous. The provision of social work services in the area of community care as in other areas will now be monitored through a national system of monitoring and inspection. The establishment of the
National Care Standards will ensure that the provision of services will meet identified standards and will enable the public to know what those standards are. The public can, therefore, hold authorities to account if they fall below the required standards in any way. The Scottish Council for the Regulation of Care, which was set up by the Regulation of Care (Scotland) Act 2001 and is now known as the Care Commission, has a responsibility for the registration and inspection of care provision. If Mrs J was admitted to residential care or offered a package of care to sustain her in her own home, then not only will the standards for her care be established but there will be regular inspection to ensure that these standards are met. If they are not, then the agency will be held to account for its failure. In addition, there is now a Public Services Ombudsman in Scotland. The Scottish Public Services Ombudsman Act 2002 established a one-stop shop to deal with complaints which relate to the public sector. While a full list of such authorities is set out in Schedule 2 to the Act, those which would have relevance to social work in particular include all Scottish public authorities, health boards, the Scottish Council for the Regulation of Care and the Scottish Social Services Council. Mrs J, or her son as her authorised representative, could make a complaint about any maladministration in respect of her case to the ombudsman. She could also complain to the Care Commission which has a procedure whereby a person or someone acting on a person’s behalf might make a complaint in relation to a care service. The description of what constitutes a care service is widely defined and covers almost all local authority services to children, support and day care, residential care, fostering and adoption.

To service users: the ethos of empowerment which underpins social work practice has resulted in a significant move towards accountability to service users. The idea of the service user as consumer rather than as the passive recipient of services has been crucial in this development. However, there is a tension here for social workers who formerly had a role in advocating for their clients where these same social workers are now gatekeepers to scarce resources and are also constrained by statutory powers. For some service users, negotiating their way through the labyrinth of services and agencies is a major problem. They have to understand different systems and structures as well as the jargon used by professionals, which is often baffling. Service users can also feel that they are isolated and fear that if they complain services might be withdrawn. For these reasons, the increasing number of pressure groups and user-led services now have an important role to play in holding service providers
to account. Service users could use the complaints procedures which have been set up by social services departments. Each local authority is bound to set up and publish details of a complaints procedure (s.5B(1) of the Social Work (Scotland) Act 1968). This allows an individual to make representations concerning the discharge of local authority functions under the 1968 Act and other designated statutes such as Part 2 of the Children (Scotland) Act, the Chronically Sick and Disabled Persons Act 1970, the Adoption (Scotland) Act 1978 and the Mental Health (Scotland) Act 1984. However, this limits the range of individuals who can raise a complaint in law, namely those to whom the local authority owes a duty under the Act. Local authorities are required to designate officers who will receive and investigate representations made. Authorities are expected to assist people to make complaints and direct them to sources of independent advice. Each formal complaint must be investigated by an independent officer of the local authority and responded to within a specified period of time. If the complainant is still dissatisfied he or she can refer the matter to a review committee with an independent chair. The decision of the review is not binding on the local authority though it does need to have regard to the recommendations. The review committee is of course not really independent from the local authority that was responsible for the decision in the first place and so the decision could be challenged either by way of a judicial review or under the Human Rights Act 1998. It could be argued that the process might be a breach of someone’s rights to a fair hearing by an independent and impartial tribunal under Article 6. Service users can always hold local authorities to account by using the procedures available to them within the legislation to challenge decisions which have been made. In addition it should not be forgotten that service users can take action against any public authority on the grounds that their rights under the ECHR have been breached.

Professional accountability: there are aspects of this which link with public accountability. Social service professionals in Scotland now have to adhere to the Code of Practice for Social Service Workers drawn up by the Scottish Social Services Council, which set out the standards of professional conduct and practice required of them. The Scottish Social Services Council was set up by the Regulation of Care (Scotland) Act 2001. It has three objectives:

- to strengthen and support the workforce;
- to raise standards of practice;
- to protect those who use services.
To fulfil these objectives to protect service users and their carers, the SSSC has responsibility for key areas:

- to establish registers of key groups of social services staff;
- to publish codes of practice for social services employees and employers;
- to regulate the training and education of the workforce.

Among the other standards, social services workers must be ‘accountable for the quality of their work and take responsibility for maintaining and improving their knowledge and skills’. Social services workers will also require to be registered by the Scottish Social Services Council and they may be disciplined or deregistered for misconduct. It will be a condition of employment that workers are registered with the Council. This ensures that social services workers will be held personally accountable for any failure to carry out their professional role.

In addition, the British Association of Social Workers has a Code of Ethics which outlines the values and principles which are integral to social work. These codes of practice and ethics, together, do convey a message that workers are accountable at a personal and professional level for the services which are offered. The Framework for Social Work Education in Scotland (Scottish Executive, 2003, p. 19) asserts that ‘social work is a moral activity’ and goes on to say that social workers ‘should be able to understand moral reasoning and make decisions in difficult ethical situations, especially where there are conflicting moral obligations’.

The tensions between accountability to one’s employer, to service users and to professional values could be illustrated by returning to our fictional case study. Let us imagine that the worker has undertaken the assessment. She has been influenced by the ethos of community care and her assessment has been needs- rather than resource-led. In her meetings with Mrs J, the latter has been very distressed at the idea that she might be placed in residential care. She is also worried about her son’s health and does not want to make unreasonable demands on him. The social worker has identified a package of care for Mrs J. However, her line manager has stated that it is not possible to meet all the expenses which would be incurred because the budget is already over-stretched. He suggests that Mrs J’s son will just have to do more for his mother and that the worker should put in place a much reduced care package. The worker feels that Mrs J and her son will be so pleased to get any kind of package which allows her home that they will accept what is offered, but
she fears that they will both suffer in the long term. The worker is torn between the professional value of protecting the rights and promoting the interests of Mrs J and her son. She is also accountable to them for the assessment which has been made and the plan for the kind of care which will be offered. Should she explain to them what has happened and what their rights are to challenge the decision which has been made? There is also her accountability to her employer to abide by agency policies. The social worker has a difficult task in finding an accommodation between these conflicting accountabilities.

The way ahead

One of the guiding principles highlighted in the introduction to *The Framework for Social Work Education in Scotland* (Scottish Executive, 2003, p. 18) states that social workers must ‘maintain public trust and confidence in social services’. The new structures for accountability which have been put into place by the Scottish Executive may help to reinforce this trust and confidence.

The Scottish Social Services Council (SSSC) has now published the procedures for registration. Registration of the estimated 100,000 workforce began in April 2003. The Council is also responsible for the training and education of the workforce and proposals for the reform in social work education. Accountability forms one of the Standards in Social Work Education (SiSWE), namely to ‘manage and be accountable, with supervision and support, for their own social work practice within their organisation’.

The Care Commission has begun its work and a Public Services Ombudsman has been appointed. In addition at the time of writing there is a Bill before the Scottish Parliament to appoint a children’s commissioner. However, all of these structures will only work if there is openness towards all the stakeholders who have an interest in the delivery of social services, and, in particular, there is real commitment towards ensuring that accountability to service users is not in the final analysis empty rhetoric.

References


