

Centre of  
expertise  
on child  
sexual abuse

# Piloting the CSA Practice Leads Programme in social work Evaluation report

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We would like to thank all the people who took part in this evaluation by sharing their experiences and views of the pilot CSA Practice Leads Programme in social work. We would particularly like to thank Anna Glinski, the programme facilitator, for her support with the evaluation.

## About the author

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## About the Centre of expertise on child sexual abuse

The Centre of expertise on child sexual abuse (CSA Centre) wants children to be able to live free from the threat and harm of sexual abuse. Our aim is to reduce the impact of child sexual abuse through improved prevention and better response.

We are a multi-disciplinary team, funded by the Home Office and hosted by Barnardo's, working closely with key partners from academic institutions, local authorities, health, education, police and the voluntary sector. However, we are independent and will challenge any barriers, assumptions, taboos and ways of working that prevent us from increasing our understanding and improving our approach to child sexual abuse.

To tackle child sexual abuse we must understand its causes, scope, scale and impact. We know a lot about child sexual abuse and have made progress in dealing with it, but there are still many gaps in our knowledge and understanding which limit how effectively the issue is tackled.

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# Executive summary

This report presents the findings from an evaluation of a pilot programme, delivered by the Centre of expertise on child sexual abuse (CSA Centre), to develop 'CSA Practice Leads' in the field of social work. This was an intensive programme of training and development for social workers from across a range of teams in local authority children's services, which sought to build their understanding and confidence in identifying and responding to child sexual abuse (CSA), and support them to cascade their learning across services.

Improving the social work response to CSA is essential in order to reduce the long-term impact of this abuse on individuals and their families, and on public services and society as a whole. In working with some of the most vulnerable children in our society, social workers are well-placed not only to identify indicators of abuse and abusive behaviour but also to work alongside families in reducing the risk of abuse and the harm caused by it. However, research has shown that many social workers lack training in relation to CSA and therefore do not have the knowledge and expertise to work confidently with cases of CSA.

The CSA Practice Leads Programme in social work comprised 10 days of small-group learning sessions, held over 10 months, which included half-day reflective case discussions connecting evidence to 'on the ground' practice experiences. It covered key areas for understanding and addressing CSA identified through the CSA Centre's research, scoping work and engagement with the sector: the scale, nature and impact of CSA; disclosures and the social work role; CSA in different contexts (intra-familial, online-facilitated, CSE); working with children and non-offending parents/carers; working with children and young people who display harmful sexual behaviour; women who sexually abuse children; working with survivors; and child wellbeing and the child protection process. A variety of delivery approaches were used, such as presentations (including by guest speakers), videos, podcasts and audio materials.

The programme was piloted by the CSA Centre, free of charge, between October 2018 and January 2020 in three English local authorities. These were selected on the basis of strong evidence of need for the programme combined with support from the Principal Social Worker in each authority, which meant that there was real potential for the programme to make a difference to their organisational response to CSA.

The programme sought to build up participants' knowledge and skills over the monthly sessions, thereby improving their own practice and enabling them to respond confidently to concerns around CSA. It also aimed to develop their ability and confidence to disseminate their learning across their teams and organisations, and to support colleagues with CSA cases in order to influence change at a wider level.

## The evaluation

A final evaluation of the pilot programme was carried out by the CSA Centre's research and evaluation team at the end of the programme. It sought to explore the implementation of the programme and assess the extent to which it achieved its intended outcomes. It asked the following key questions:

- ▶ What did the programme involve and who took part? And how well did participants engage with the programme, and what did they think of its content and delivery?
- ▶ What difference has taking part made to participants and their organisations? And what factors influenced the programme's potential to achieve its aims?
- ▶ What improvements could be made to enhance the delivery of the programme?

The evaluation used a mixed methods approach which involved gathering, analysing and integrating quantitative and qualitative data in order to reflect the different experiences and views of those involved with the programme. Data collection methods included a questionnaire completed by Practice Leads at the start and the end of the programme; focus groups with Practice Leads; and interviews with Practice Leads' line managers, Principal Social Workers and the programme facilitator. It also involved analysis of monitoring data collected by the programme's facilitator.

## Key findings

### *Participation*

- ▶ A total of 38 professionals were chosen by their local authorities for the pilot programme. The programme was completed by 32 of these professionals; reasons for non-completion included long-term sickness, maternity leave and participants moving to other local authorities.
- ▶ Overall engagement was high, as was the level of attendance at almost all sessions. This was particularly remarkable given the length of the programme and the challenging settings in which it was run, suggesting that the programme was structured and delivered in a way that met participants' needs.
- ▶ Line managers played a key role in supporting Practice Leads' engagement in the programme and enabling them to share their learning with others.
- ▶ The experience, knowledge and skills that the facilitator brought to the programme in all three local authorities was a strength, but this reveals a potential challenge in rolling out the programme more widely.

### *Programme design and delivery*

- ▶ The quality of the programme's delivery emerged strongly in participants' feedback; they had particularly valued that such a sensitive and complex subject had been approached in a manner that felt both positive and safe.
- ▶ Attending monthly, day-long sessions over a period of 10 months allowed participants to focus on different aspects of CSA, and provided opportunities to develop their learning.
- ▶ Regular reflective, practice-based learning was central to participants' ability to apply their learning to their own practice and embed the learning over the course of the programme.

### *Programme outcomes*

- ▶ There was strong evidence of the programme's impact on participants' knowledge, skills and confidence in identifying and responding to CSA concerns; this had enhanced their practice and enabled them to develop as specialists within their teams and wider organisations.
- ▶ In addition, Practice Leads were starting to support colleagues to overcome the fear and uncertainty that surrounds concerns of CSA, and, at times, were challenging them to ask direct questions and not let CSA concerns be put aside owing to lack of proof.
- ▶ There was also evidence that the Practice Leads were disseminating their learning by sharing resources and delivering presentations to wider teams.
- ▶ There were some early indications that the programme may be beginning to have an impact on practitioners' response to CSA, which points to the programme's potential to effect longer-term change.

### *Embedding and sustaining the programme*

- ▶ Given that the evaluation was carried out soon after the end of the training programme in all three areas, it was encouraging to see some evidence that the Practice Lead role was already becoming embedded in local authorities. Further follow-up evaluation would be valuable in understanding how the role evolves and what enablers and challenges surface as this happens.

- ▶ It is also apparent that local authorities need to support the development of the programme, and in all three areas are already doing so, by providing time for Practice Leads to meet up for peer support; making plans for disseminating the learning from the programme; and ensuring that the Practice Lead's role is visible both within their team and more widely. However, further consideration may need to be given to the ongoing impact of the role on Practice Leads' workloads, as well as on local authority practices and policies.
- ▶ There may be a need for the programme facilitator to maintain an overview, and potentially to actively support the dissemination process, in order to ensure the quality of the training and support provided by Practice Leads and further strengthen their ability to take a lead in addressing CSA.

## Conclusion

Although the evaluation was carried out by the CSA Centre and cannot therefore be viewed as independent, it provides strong evidence of the programme's quality and value in enabling local authorities to improve their identification and response to concerns around CSA.

Questions that remain for the future centre around understanding how well Practice Leads are able to continue disseminating their learning, what support this requires and what challenges this may present. Above all, it remains to be seen what longer-term impact the programme has on local authorities' response to concerns of CSA. It is, therefore, important to understand that this evaluation has demonstrated the value and quality of the programme in the short term, but that further evaluation will be needed to assess the longer-term impact and value for local authorities in investing in a programme of such depth.

## Considerations for the future development of the CSA Practice Leads Programme

A number of key considerations for the programme's future development have emerged from this evaluation:

- ▶ The CSA Centre should continue to offer a programme for social workers within other local authority areas. The evaluation has shown that there appears to be a real value in delivering a programme tailored to the social work context and bringing together practitioners with similar roles and backgrounds.
- ▶ Local authorities could also benefit from follow-on support to embed the programme – for example, through consultation on cases, facilitated group learning sessions or sharing of new research as it is published.
- ▶ It would be valuable to test the programme in other settings (e.g. police, education and health) in order to explore what modifications would need to be made to the programme's content, structure and delivery, and to clarify whether the skills and experience of the facilitator need to be sector-specific.
- ▶ Testing the programme in a multi-agency format would also be useful in assessing the benefits and challenges of bringing together practitioners from different sectors, and the wider impact this might have.
- ▶ The evaluation of the programme should be continued through follow-up activities to explore the extent to which the programme's outcomes are sustained and evolve over time, and to consider the programme's value and sustainability over the longer term.
- ▶ Finally, and particularly in the light of the impact of Covid-19 pandemic on current social work practice, the CSA Centre should consider how it can use virtual channels to support and develop the expertise of social workers in identifying and responding to concerns of CSA.

# 1. Introduction

One of the key aims of the Centre of expertise on child sexual abuse (CSA Centre) is to develop understanding and practice so we can support local areas across England and Wales to have a confident and effective multi-agency response to child sexual abuse (CSA), based on access to evidence.

To that end, in 2018 the CSA Centre developed the CSA Practice Leads Programme, an intensive programme of training and development aimed at supporting organisations to build their understanding and confidence in identifying and responding to CSA. The programme was based on an earlier programme, designed and delivered in East Sussex by the programme facilitator (see section 4.1), which has since been developed and expanded considerably by the CSA Centre. It was piloted in three local authorities between October 2018 and January 2020.

Experienced social workers from across a range of teams in local authority children's services were trained as 'CSA Practice Leads', with the intention that they would then be able to cascade learning across their services. Another pilot, to develop Practice Leads within a national charity which primarily supports adults with drug and/or alcohol dependency support needs, was carried out and evaluated by the CSA Centre over the same period; see Graham (2020).

## 1.1 Context for the CSA Practice Leads Programme in social work

In November 2014, the NSPCC published research into social workers' confidence in identifying and managing cases of CSA (Martin et al, 2014). The study revealed that social workers were frequently working with cases of CSA without the support, time, knowledge and training that they needed to identify abuse and protect children. It also identified inconsistency in CSA teaching: social workers felt that the training they received was often out of date in the rapidly changing field of CSA, and reported that generic mandatory training tended to focus on child protection procedures rather than on their roles providing support and intervening in cases, particularly post-disclosure.

Some of these issues were further highlighted in *Protecting Children from Harm* (Office of the Children's Commissioner, 2015). This report drew a number of conclusions from its research into professional responses to intra-familial CSA that reflect the challenges faced within social work, including that:

- statutory services are largely disclosure-led, with the burden of responsibility being placed on the victim to disclose
- professionals are not always confident in their ability to identify abuse or how to progress their concerns
- the criminal burden of proof ('beyond reasonable doubt') is prioritised in joint investigations
- the impact of sexual abuse is multi-dimensional, with abuse causing harm to both the individual victim and their family relationships, and the responses of services often re-traumatising them.



The CSA Centre's most recent evidence review on the scale and nature of CSA (Parke and Karsna, 2019) highlighted a significant decrease in the number of children placed on the child protection register – or more recently, a child protection plan (CPP) – for CSA in England: between 1993/94 and 2008/09, the number fell by nearly two-thirds from 6,400 to 2,200, and it has remained below 3,000 since then. This coincided with a dramatic increase in the overall number of children made subject to CPPs, meaning that the proportion of children on CPPs under the primary category of CSA has fallen from 23% to 4% since 1993/94. In 2018/19, the latest year of data available, 2,960 children were made subject to CPPs under the category of sexual abuse – which for well over a decade has been the category of abuse recorded least commonly in the child protection system.

Far more children are being identified as *at risk* of CSA: in 2018/19 the figure was 30,720, with a further 18,720 at risk of child sexual exploitation (CSE), which local authorities record separately from CSA. However, this represents only 6% and 4% respectively of all risk factors identified at assessments, and these percentages have remained stable across the four years that this data has been published.

Improving the social work response to CSA is essential to reducing the long-term impact of this abuse on individuals and their families, and on public services and society as a whole. In working with some of the most vulnerable children in our society, social workers are well-placed not only to identify indicators of abuse and abusive behaviour but also to work alongside families in reducing the risk of abuse and the harm caused by it.

## 1.2 About the pilot programme

### *Aims and outcomes*

The CSA Practice Leads Programme is testing an approach which the CSA Centre believes has the potential to drive a system change in organisations' response to CSA. The programme aims to:

- ▶ develop the knowledge, skills and confidence of social workers to act as Practice Leads in identifying and responding to CSA
- ▶ enable Practice Leads to disseminate their learning throughout their teams/ organisations
- ▶ enable local authorities to develop a culture of learning and development which supports ongoing best practice in CSA.

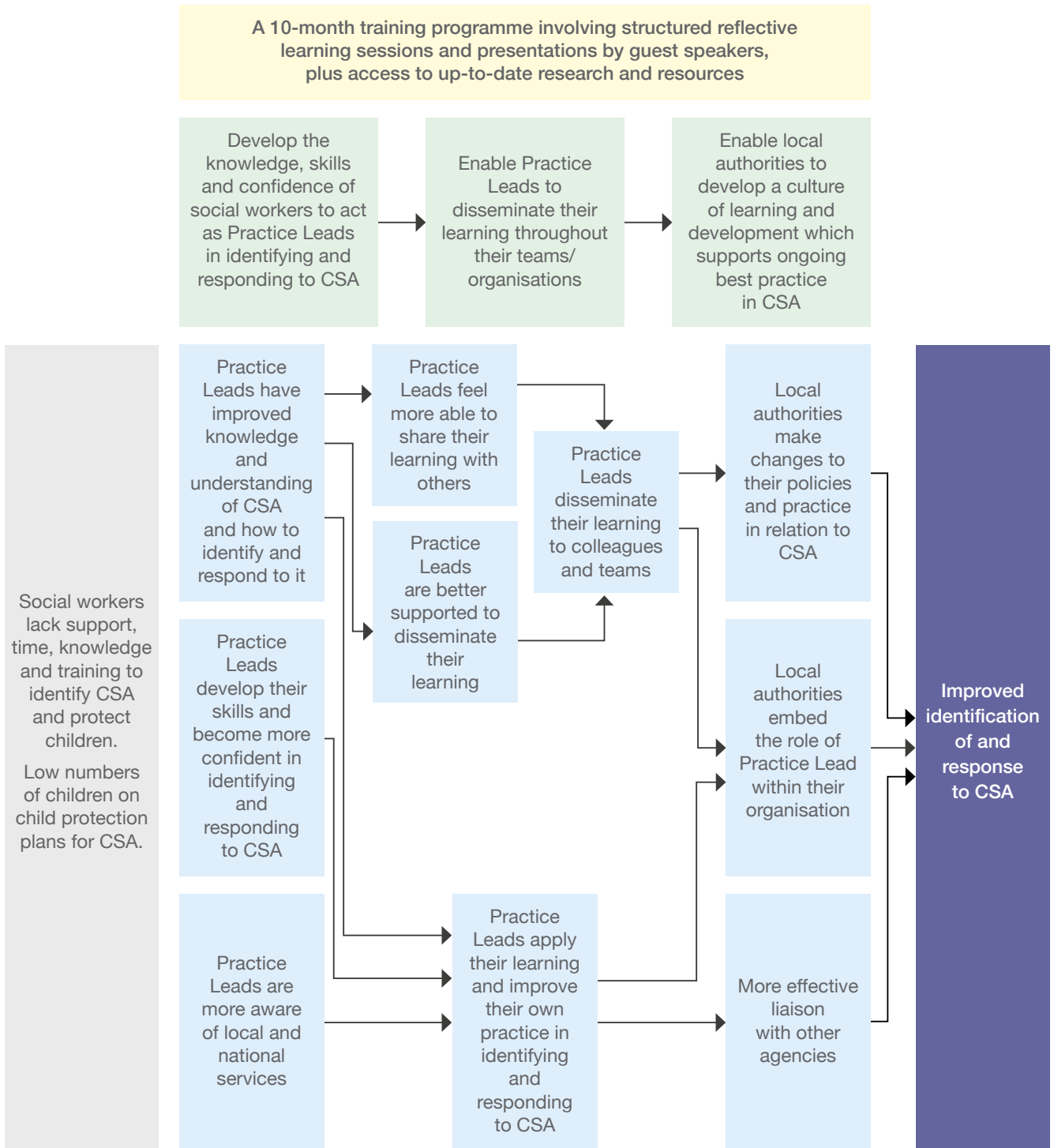
This is reflected in the theory of change for the programme (see Figure 1 overleaf), which shows how the programme's aims and outcomes contribute to an improved response to CSA.

### *Format and topics covered*

The CSA Practice Leads Programme in social work covered key areas for understanding and addressing CSA identified through the CSA Centre's research, scoping work and engagement with the sector. It focused on:

- ▶ the scale, nature and impact of CSA
- ▶ disclosures and the social work role
- ▶ CSA in the family context – offenders and offending
- ▶ working with children and non-offending parents/carers
- ▶ children and young people who display harmful sexual behaviour
- ▶ child sexual exploitation
- ▶ online-facilitated offending
- ▶ women who sexually abuse children
- ▶ working with survivors
- ▶ child wellbeing and the child protection process.

Figure 1. Theory of Change for the CSA Practice Leads Programme in social work



- ▶ The ‘right’ Practice Leads are recruited
- ▶ The right amount and type of training, information and resources are delivered by the CSA Centre
- ▶ Practice Leads get the right ‘dose’ – e.g. attend enough training
- ▶ Practice Leads have the capacity and scope to cascade the learning
- ▶ Practice Leads’ line managers support the approach
- ▶ Practice Leads’ colleagues and teams are sufficiently motivated and able to acquire and apply the new knowledge and skills
- ▶ Local authority systems enable and enhance the application of the learning and sharing of knowledge and skills across the organisation

Aims	Context	Output	Outcomes	Impact	Assumptions
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The programme was piloted free of charge in three English local authorities between October 2018 and January 2020. It involved 10 days of small-group learning sessions, held over 10 months, which included half-day reflective case discussions connecting evidence to ‘on the ground’ practice experiences. A variety of delivery approaches were used, such as presentations (including by guest speakers), videos, podcasts and audio materials. For a detailed programme outline, see Appendix 1.

### 1.3 Evaluating the pilot programme

The CSA Centre is committed to evaluating its work, in line with its own theory of change which stresses the need to engage key stakeholders, demonstrate the evidence and need for change, and show how that change can be achieved. We therefore carried out an evaluation of the pilot programme, in order to explore the implementation of the programme and assess the extent to which it has achieved its intended outcomes.

#### *Aims of the evaluation*

The evaluation aimed to enable the CSA Centre to learn from the delivery of the pilot programme, and to and share learning with its key stakeholders. It addressed the following key questions:

- What did the programme involve and who took part? And how well did participants engage with the programme, and what did they think of its content and delivery?
- What difference has taking part made to participants and their organisations? And what factors influenced the programme’s potential to achieve its aims?
- What improvements could be made to enhance the delivery of the programme?

#### *Presentation of the evaluation findings*

An interim evaluation was carried out in July 2019, when the pilot programme had been delivered in two of the local authorities. The report from this interim evaluation reviewed the programme’s delivery and progress towards its aims; it was shared with the local authorities and with the Home Office, as the primary funder of the CSA Centre.

A final evaluation of the programme was carried out at the end of the programme by the CSA Centre’s research and evaluation team. This report presents the findings from that final evaluation. Following a short chapter about the evaluation method, the evaluation findings are organised into four chapters:

- Participants in the pilot programme.
- Design and delivery of the pilot programme.
- Programme outcomes.
- Embedding and sustaining the programme.

A final chapter presents conclusions drawn from the evaluation, and considerations for the programme’s future development.


In reporting the data, percentages have been rounded up to the nearest whole number. Missing data (i.e. where respondents did not answer a question) have been excluded from the percentages given.

Direct quotations – taken from focus groups and interviews with Practice Leads (denoted PL), Principal Social Workers (PSW) and line managers (LM) – have been anonymised, and some have been edited for clarity. Where names are used, these have been redacted to protect participants’ identities.

The identity of the three participating local authorities is also confidential. They are, therefore, referred to in this report as LA1, LA2 and LA3.



Improving the social work response to CSA is essential to reducing its long-term impact on individuals, families and society



## 2. Method

This chapter provides a brief overview of the method used in the evaluation of the programme, which was carried out by the CSA Centre's research and evaluation team.

### 2.1 Data collection

The evaluation used a mixed methods approach (Creswell and Plano Clark, 2007), which involved gathering, analysing and integrating quantitative and qualitative data in order to reflect the different experiences and views of those involved with the programme. Data collection methods included:

- ▶ statements of interest completed by participants prior to joining the programme, in which they described their professional background, experience and motivation for becoming a Practice Lead
- ▶ questionnaires completed by Practice Leads at the beginning and the end of the programme to assess changes in their knowledge, confidence, skills and practice
- ▶ focus groups with Practice Leads at the beginning and the end of the programme, or interviews with those unable to attend a post-programme focus group
- ▶ midway reviews with Practice Leads' line managers during the programme, and interviews with Principal Social Workers (senior managers with lead responsibility for practice in their local authority) at the beginning and the end of the programme
- ▶ the programme attendance register and a log maintained by the programme facilitator to record the one-to-one support she provided to Practice Leads during and after the programme
- ▶ forms completed by Practice Leads to record the support they provided to colleagues during the programme
- ▶ an interview with the programme facilitator to reflect on her experience of delivering the programme.

All interviews and focus groups were audio-recorded with the participants' consent, and the recordings were subsequently transcribed in full.

Details of the data sources are provided in Appendix 2.

While we recognise that it is impossible to attribute longer-term changes in local authorities' response to CSA purely to this programme, we are planning to track data on the number of assessments carried out in one of the local authorities, and on the quality and quantity of its further interventions. This will enable us to compare data over time and observe any improvements in this local authority's response to CSA which may have resulted, at least in part, from the programme.

### 2.2 Analysis

Quantitative data from the programme attendance register was analysed in Excel to report on Practice Leads' participation in the programme. In addition, Excel was used to analyse the quantitative data from the pre/post programme questionnaire filled in by the Practice Leads, to assess changes in their levels of knowledge, confidence, skills and practice.

Qualitative data from the interviews, focus groups and questionnaires was imported into NVivo 12, a software programme that facilitates the coding of text. Thematic analysis was used to code the qualitative data into common themes, i.e. topics and ideas that came up repeatedly, using the evaluation framework (see Appendix 3) to structure and organise those themes.

The results from both analyses were then integrated so that the evaluation could draw from both the qualitative and the quantitative data.

## 2.3 Ethical issues

All the CSA Centre's research and evaluation projects are assessed to establish whether they require approval by its Research Ethics Committee (REC). Projects requiring the REC's approval include those that will involve:

- ▶ vulnerable people, including all children and young people, those at risk of or experiencing CSA, and individuals who have sexually abused children
- ▶ people who lack capacity to make decisions, or who come to lack capacity during the research process, as defined under the Mental Capacity Act 2005
- ▶ risk to the safety of the researcher, specifically where there is the potential for psychological or physical harm
- ▶ participatory research with members of the public, such as young people employed in the capacity of peer researchers
- ▶ social media research and participants recruited or identified through the internet, such as following up participants who have previously received services as victim-survivors or where individuals have sexually abused young people
- ▶ linking or sharing of personal data beyond the initial consent given, specifically where there is a risk of information being disclosed that would require researchers to breach participants' confidentiality.

This evaluation did not fall into any of the above categories and was therefore not taken to the REC. Nonetheless, consideration was given to ethical issues arising in the design and implementation of the evaluation. In particular:

- ▶ We were careful to explain to participants the purpose of our evaluation and how we would use the information they gave us. Participants were asked to complete consent forms before the focus groups, or to provide consent by email before taking part in telephone interviews.
- ▶ We made it clear that participation was optional, and that participants could choose not to participate or could withdraw at any point.

- ▶ Participants were also given different options for taking part in the evaluation. For example, Practice Leads were advised that, as well as taking part in focus groups, they could contact the evaluator by telephone or email if they wished to discuss issues privately.
- ▶ All data was stored anonymously, kept securely and will be destroyed once this report has been published.

## 2.4 Limitations

There are a number of factors which may have affected the results of this evaluation:

- ▶ We were unable to contact the six Practice Leads who withdrew from the programme (see section 3.6) in order to gather their feedback on the programme. It is possible that they had different experiences and views of the programme from those who were included in the evaluation.
- ▶ It is currently too early to capture much evidence of the programme's longer-term impact. It is therefore important that further follow-up activities are carried out in order to assess the programme's impact more thoroughly.
- ▶ Finally, it should be noted that the evaluation was carried out by the CSA Centre's research and evaluation team. This may have influenced the findings, as participants may have felt less able to disclose negative feedback.

Nonetheless, carrying out this evaluation has enabled the CSA Centre to draw together feedback on the programme's delivery and evidence of its outcomes, in order to highlight learning for its future development.



A mixed methods approach was used, to reflect the different experiences and views of those involved with the programme



## 3. Participants in the pilot programme

This chapter focuses on the local authorities and practitioners who took part in the pilot programme. It discusses their motivations for taking part, the recruitment and selection process, and levels of participation in the programme.

### 3.1 Local authorities' reasons for getting involved

The CSA Practice Leads Programme in social work was delivered free of charge across three local authority areas in different parts of England. A number of local authorities had been approached by the CSA Centre, and the three participating local authorities were selected on the basis that they were keen and ready to take part. In two areas, the local authorities' interest in taking part arose from a desire to improve practice following serious case reviews; however, all three authorities were keen to improve their practice generally.

"I had been writing a report in a separate serious case review... In unpicking that, both in terms of the history but also our practices now, I was thinking, 'We need to get better at this. We need to increase our skill. We need to increase our confidence and we need to understand tools that we can use.'" (PSW, LA1)

"I was aware that... we'd been so busy focusing on CSE... it's almost like [the rest of] sexual abuse had become a bit of a hidden subject." (PSW, LA2)

"In the local practice context, we needed to strengthen our learning and our knowledge and our confidence working with CSA." (PSW, LA3)

Additionally, Principal Social Workers felt that their workforces lacked expertise in CSA – either in terms of not having specialists within the workforce who could support others, or more generally because many of the workforce were younger, less experienced social workers.

All three local authorities described other challenges they faced in identifying and responding to CSA, particularly around the high volume and complex nature of social workers' caseloads as well as difficulties in maintaining a full workforce; in one case, nearly a fifth of social workers were reported to be agency staff. The geographical areas covered by the local authorities presented additional challenges, as they included both rural and urban districts with huge socio-economic variations.

The proportion of children on child protection plans for sexual abuse in the three local authorities ranged from 4% (LA2) to 6% (LA1) and 7% (LA3) in 2018/19; CSA accounted for between 5% (LA3) and 8% (LA2) of the risk factors identified in assessments of children in need, while CSE accounted for between 4% (LA3) and 5% (LA 1 and LA2). These figures are comparable to the national picture in England, as set out in section 1.1.



The geographical areas of the three local authorities included rural and urban districts, with huge socio-economic variations



### 3.2 Recruitment of participants

Information on the pilot programme was circulated to social workers by the Principal Social Worker at each local authority, and those who were interested were invited to apply. In the post-programme focus groups, however, some Practice Leads explained they had been placed on the programme, rather than having actively chosen to take part. Others had joined the programme without knowing much about it.

“I was on leave and came back to an email chain with my name next to it. But to be honest, if I had been here, I probably would have nominated myself anyway.” (PL, LA1)

A number had heard about the programme through word of mouth – in one case, a colleague had mentioned it on Twitter – and in some cases joined after the programme had already commenced. Some Practice Leads commented that it would have been helpful for more information on the programme to be sent out in advance.<sup>1</sup> Equally, one of the Principal Social Workers involved in the programme recommended that it should be made clear from the outset that participation required considerable, ongoing commitment:

“I think it’s about people being really clear about the time that it’s going to take, because it is so in-depth, you’re thinking about every aspect of it. It feels like a module on a degree course in some respect, that kind of depth of learning.” (PSW, PL2)



Information on the pilot programme was circulated to social workers by the Principal Social Worker at each local authority



### 3.3 Selection of participants

A total of 38 professionals were chosen for the pilot programme by the local authorities. Selection was carried out using guidance from the CSA Centre, which emphasised that participants should be put forward on the basis that they were competent practitioners and were:

- ▶ interested in developing their knowledge and expertise in the field of CSA
- ▶ skilled and experienced in sharing their knowledge with others
- ▶ planning to remain with the local authority for the foreseeable future
- ▶ committed to attending the programme and sharing their knowledge.

Each local authority was also advised to select people from across its geographical area, to enable maximum reach across different services.

Despite the above guidance, the programme facilitator reported that the programme was sometimes seen as a way of retaining staff who were considering leaving the local authority; nevertheless, seven Practice Leads left their local authority during the programme.

One of the local authorities felt that its communication around the programme could have been better managed, as some Practice Leads had had to join the programme after it had already commenced.

<sup>1</sup> Local authorities were sent a briefing about the programme, but no specific information was produced for Practice Leads or their line managers.

### 3.4 Participants' backgrounds

The baseline questionnaire was filled in by 37 of the 38 participants when they joined the programme. It revealed that they were located across a range of different teams, including:

- ▶ Child in Need
- ▶ Child Protection/Safeguarding
- ▶ Family Support
- ▶ Disability
- ▶ Early Help
- ▶ Fostering
- ▶ Looked After Children
- ▶ Independent Reviewing Unit
- ▶ Initial Response
- ▶ Multi-Agency Safeguarding Hub
- ▶ Through-Care
- ▶ Youth Offending
- ▶ Social Work Academy

In one local authority, the Social Work Academy (responsible for the training, support and practice development of trainee and newly qualified social workers) sent three participants on the programme; it felt that these professionals would have particular skills in sharing learning and supporting practice, so would be well placed to support students and newly qualified workers as well as sharing the learning more widely within their organisation. This approach was subsequently recommended to another local authority, which also included one member of its Social Work Academy team.

Nearly three-quarters (n=26, 70%) of the 37 respondents to the baseline questionnaire had been qualified for more than five years, and almost a third (n=12, 32%) for more than 10 years. More than two-thirds (n=25, 68%) had been in their current role for less than two years, however.

Half of the respondents (n=18, 49%) were in senior roles (i.e. in managerial roles or posts higher than social work level); this included team managers, specialist clinicians, consultant social workers and senior practitioners. Additionally, two local authorities (LA1 and LA2) chose to put a Child Protection Conference Chair/Independent Reviewing Officer on the programme, as these roles had the capacity to have an impact on a high number of children, young people and their families. The seniority of the participants varied across the three local authorities: around half of those in LA2 and LA3 were in senior roles, compared to more than two-thirds in LA1.

The vast majority (n=35, 95%) of the questionnaire respondents were female, reflecting the fact that women tend to be in the majority within social work. Nonetheless, men are more likely to occupy senior roles (McPhail, 2004), and it is perhaps surprising that there were not more male participants in the programme. One participant was recorded as having a disability. No information was collected on the ethnic background of participants.

While most participants had undertaken some previous training related to CSA, the extent and focus of this varied considerably. As Figure 2 shows, most had received training in child sexual exploitation, the impact of CSA, and signs and indicators of CSA, but far fewer had received training in how CSA happens in families, young people with harmful sexual behaviour, adults who perpetrate CSA, and sexual development. Moreover, the vast majority of the training that participants had attended in the past had lasted for less than a day.

“Around half of participants were in senior roles, including team managers, senior practitioners and specialist clinicians”



The baseline questionnaire also revealed varying levels of experience in working with children, young people and families affected by CSA. Some described their experience of this work:

“I have worked with children who had been sexually abused and with parents, and I wanted to be able to understand more, and to get people thinking.” (PL, LA1)

“I work with looked-after children who have disclosed sexual abuse and been removed from their family home to be safeguarded.” (PL, LA3)

One respondent indicated that they had experience of CSA within their own family and felt that participating in the programme would give them an opportunity to use this in a positive way:

“I have personal experience within my close family of child sexual abuse and grooming, and hope that I have used my learned knowledge to interpret and process my experiences in a way that helps me to support the learning of others.” (PL, LA2)

While a considerable proportion of participants (ranging from one-third in LA3 to more than two-thirds in LA2) had experience of training or supporting others to learn, a number said they lacked knowledge and skills relating to CSA:

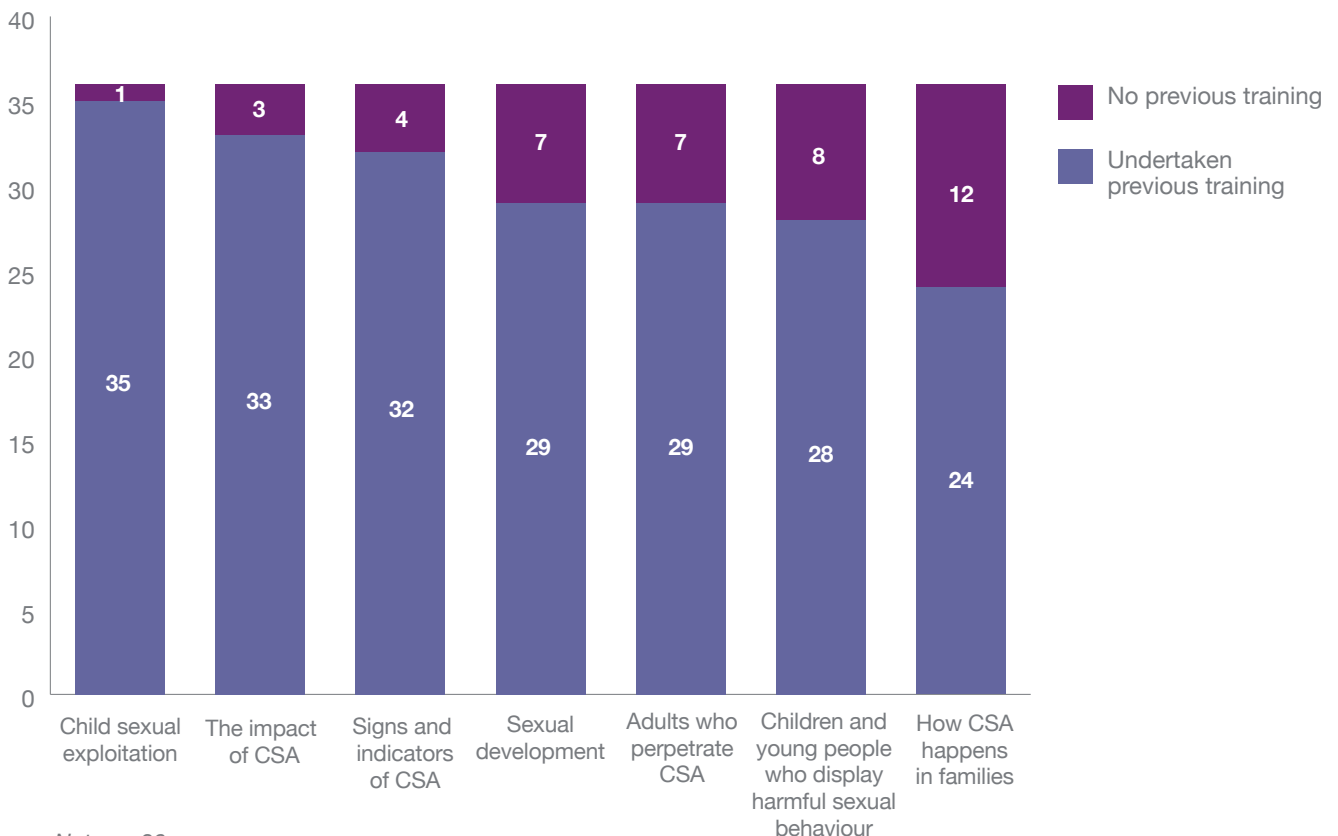
“I fear I could leave the child and family feeling unsupported and lacking in trust.” (PL, LA1)

“I don’t know much about supporting victims.” (PL, LA1)

“Sometimes I find it difficult to know what to say that won’t later harm any evidence I need to give.” (PL, LA2)

“I need to be able to make the right decisions but often don’t have the knowledge to do this appropriately.” (PL, LA3)

Figure 2. Participants’ previous training in CSA issues



### 3.5 Participants’ motivations

In the baseline questionnaire, participants indicated that they had signed up to the programme because they were keen to increase their knowledge and skills in responding to, or supporting others to respond to, concerns of CSA. Some felt that participating in the programme would help them establish a specialist role within their teams:

“I am relatively new to social work and I feel that this makes me determined and motivated to succeed in my career. I am eager to take all opportunities that are offered to me due to my interest in continuing my learning and development as a practitioner.” (PL, LA3)

“I am enthusiastic about extending my own professional understanding and practice around CSA, and in supporting professional colleagues to do likewise.” (PL, LA2)

One described how they had been particularly keen to take part in the programme as they felt it would provide an opportunity to develop their learning over an extensive period of time:

“I thought that I would like to do a training course which is a little bit more in-depth. What attracted me, really, was the length of time. I’d noticed that when you go on a one-day course, you go back to your day job and what you often use from the training is very little.” (PL, LA3)

A desire to improve their knowledge, skills and confidence in relation to CSA was also a strong motivating factor for participants with little or no previous experience of CSA work:

“The subject is one that I have not dealt with that much and have often chosen to avoid due to lack of appropriate knowledge around it.” (PL, LA2)

“I have no specialised knowledge in the area of child sexual abuse but recognise it is both a gap in my learning and in the understanding of the department as a whole.” (PL, LA2)

### 3.6 Levels of participation

The programme was delivered between October 2018 and July 2019 in LA1 and LA2, and between March 2019 and January 2020 in LA3. As Table 1 shows, a large majority (32) of the 38 participants completed the programme.

Analysis of the programme records reveals a high level of attendance at the vast majority of the sessions across the local authorities. This was despite one local authority (LA1) undergoing a restructure during the course of the programme, which had a destabilising effect on the workforce and affected attendance at some sessions.

Workforce retention was an issue in all three local authorities, with seven participants leaving their local authority during the programme. However, three of these participants were allowed by their new employers to continue participating in the programme, so that they could share their learning in their new teams and authorities. Two Practice Leads did not complete the programme because of sickness or maternity leave.

**Table 1. Attendance on the CSA Practice Leads programme in social work**

Local authority	No. starting the programme	No. completing the programme
LA1	13	11
LA2	13	12
LA3	12	9
<b>Total</b>	<b>38</b>	<b>32</b>

### 3.7 Reflections

A number of factors emerge that are important in selecting and supporting the participation of local authorities and individual Practice Leads in the programme:

#### *Responding to need*

- ▶ It appears that the programme addressed a need in children's services for social workers to develop their knowledge, skills and confidence in responding to CSA concerns.
- ▶ All three local authorities presented strong evidence of need for the programme which, combined with support from the Principal Social Workers, meant that there was real potential for the programme to make a difference to their organisational response to CSA. Indicators of need included a history of serious case reviews, lack of workforce expertise in CSA, and low numbers of children on child protection plans for CSA.
- ▶ At the same time, all the local authorities faced the kinds of contextual challenges (e.g. high caseloads, staff shortages, complex needs) that are likely to present in other areas and in relation to other types of work.

#### *Recruitment, selection and retention*

- ▶ The process of selecting participants appears to have been largely successful, in that participants' backgrounds generally reflected the criteria set by the CSA Centre; participants were distributed across a range of teams, many were in senior roles, and the vast majority were experienced practitioners. While not all participants had previous experience of CSA work, a commitment to improving practice was a strong motivating factor for them. Equally, the programme offered participants an opportunity to enhance their expertise, which could support future career development.
- ▶ However, the recruitment process could be improved in future by local authorities sending out adequate and timely information about the programme and ensuring that dates are fixed in advance of the programme's start. Specific information for Practice Leads and their line managers would also be helpful in ensuring they have a good understanding of what the programme involves.
- ▶ The levels of engagement and retention of participants in the programme were particularly remarkable given the length of the programme and the challenging settings in which it was run. This suggests that the programme was structured and delivered in a way that met participants' needs.



The levels of participant engagement and retention were remarkable given the challenging settings in which the programme was run



## 4. Design and delivery of the pilot programme

This chapter provides an overview of the programme design and delivery. Drawing from the post-programme focus groups, questionnaires and interviews, it looks at how well the different elements of the programme met participants' needs and at their general experience of the programme, highlighting the enablers and challenges to its implementation as well as opportunities for its future development.

### 4.1 Programme content and structure

The CSA Practice Leads Programme in social work aimed to offer in-depth training to improve social workers' knowledge, confidence and skills in identifying and responding to CSA. It was based on an earlier programme designed and delivered in East Sussex by Anna Glinski, the programme facilitator, who was at the time an advanced social work practitioner; Anna now leads on knowledge and practice development at the CSA Centre, where the programme was subsequently developed and expanded considerably.

Like that of its predecessor, the content of the CSA Centre programme was evidence-based, drawing from recent research as well as from the programme facilitator's extensive knowledge of practice. In addition, the programme's design was underpinned by the CSA Centre's ethos of keeping the child at the centre of everything it does.

The programme covered key areas for understanding and addressing CSA, identified through the CSA Centre's research, scoping work and engagement with the sector. It focused on key topics such as the scale, nature and impact of CSA; disclosures and the social work role; CSA in different contexts (intra-familial, online-facilitated, CSE); working with children and non-offending parents/carers; working with children and young people who display harmful sexual behaviour; women who sexually abuse; working with survivors; and child wellbeing and the child protection process (see Appendix 1).

Different exercises were used throughout the programme to assist the Practice Leads in developing their confidence and skills in talking about CSA. For example, role play exercises were used to give Practice Leads opportunities to think about what they would say to children and adults about sexual abuse and to practice doing so; experiential exercises were designed to help Practice Leads understand the impact of CSA on families and the obstacles to disclosure; and case studies were used to support Practice Leads in applying their learning from sessions to practice.

#### 4.1.1 Reflective sessions

In addition to the training sessions, the programme involved participation in regular, structured reflective discussions. These half-day sessions provided an opportunity for the Practice Leads to bring cases for discussion and apply the learning from the programme to their practice.

Practice Leads described how valuable these reflective sessions had been in giving them an opportunity to consolidate their learning:

"It's such an important part of the group, having that reflective time about cases." (PL, LA1)

"We had a lot of opportunity for discussion, to reflect and bring points in, and be quite critical." (PL, LA2)

"A lot of the time, you get a course where you just look at the theory, you don't look at how that's going to work in practice, so that's just really important, to bring it alive." (PL, LA3)

Furthermore, some Practice Leads emphasised the importance of discussing actual cases, rather than case-studies, as this had enabled them to see the development of the cases that had been brought to the sessions:

"Discussing actual children and families that we're working with and working over that period of time meant that we were able to actually say, 'What's happened?' It was real." (PL, LA3)

#### 4.1.2 Guest speakers

The programme also involved a range of external speakers from within the CSA Centre and beyond. These were chosen because of their specialist knowledge (e.g. CSA perpetrated by women) or because they offered perspectives from other agencies and the opportunity to create local contacts and networks that could be maintained moving forward. External speakers included:

- ▶ probation officers working with convicted sex offenders
- ▶ a doctor with a specific remit around safeguarding children
- ▶ a police officer with responsibility for the management of sex offenders
- ▶ a representative from a local sexual assault referral centre (SARC)
- ▶ the CSA Centre's multi-agency practice improvement adviser.

Bringing in guest speakers was felt to be useful. For example, one Practice Lead recalled how guest speakers had participated in a session on child wellbeing and the child protection process which had focused on a particular case:

“It was an amazing training day... talking through a case from police enquiries to Section 47<sup>2</sup> to SARC and just all the aspects of what people are looking for, about bail and arrest and things like that. It was brilliant, and having our local colleagues involved just really brought it alive.” (PL, LA2)

However, it seemed that the quality of the external speakers' contributions had been varied. In one case, Practice Leads described the presentation style of the speaker as disorganised and not conducive to learning; it was suggested that guest speakers should be asked to share their presentations in advance so that the quality of input could be checked.

Some Practice Leads also suggested that it would be useful to bring in other speakers, including professionals working in education, health, drugs and alcohol, and domestic violence.

#### 4.1.3 Information and resources

Throughout the programme, the Practice Leads were provided with additional resources such as research papers, guidance documents and tools, to support their learning or prompt exploration of issues that had come up in the sessions.

One of the Principal Social Workers interviewed noted how the information and resources had been made relevant to their local context:

“Anna [the programme facilitator] has supplemented the core programme with other research. For example, we've had an emerging challenge around criminal exploitation of young people, particularly gangs, and Anna's brought some thinking into that, and is supporting our practitioners with that learning.” (PSW, LA3)

Some Practice Leads identified topics that they would have liked more time to discuss, such as working with survivors and non-abusing parents; the legal process; institutional abuse; and child sexual exploitation. In addition, some felt that the way in which resources were shared with them could be improved, through the creation of a central resource which they could access on an ongoing basis:

“Otherwise you stay static...knowing that our local authority isn't going to offer them...We just haven't had the resources before.” (PL, LA1)

One participant would have liked more support in absorbing some of the research presented during the programme:

“I don't feel I have connected to the research as well as the course might have hoped. To do this, it would have been helpful to have specific research papers circulated in advance, to be read with a view for preparing for discussion on a particular topic.” (PL, LA1)

<sup>2</sup> Section 47 of the Children Act 1989 specifies that, where a local authority has reasonable cause to suspect that a child (who lives or is found in their area) is suffering or is likely to suffer significant harm, it has a duty to make such enquiries as it considers necessary to decide whether to take any action to safeguard or promote the child's welfare.

#### 4.1.4 Survivors' voices

Specific consideration was given throughout the programme to understanding the needs and experiences of children and young people from black, Asian and minority ethnic (BAME) backgrounds, and those with disabilities. Similarly, the programme sought to take account of the expertise of those with lived experience of sexual abuse, drawing on research carried out with them and using resources that highlighted their voices.

## 4.2 Programme support

### 4.2.1 Liaison with Principal Social Workers and line managers

Delivering the programme also involved close liaison with the Principal Social Worker in each local authority. As well as initial meetings and conversations to plan how the programme would be delivered, Principal Social Workers were invited to attend the introductory and last sessions of the programme, and were kept up to date with its progress. This allowed the Principal Social Workers to pick up on issues that needed their involvement:

“There have been blips along the way, in terms of people not attending and those kinds of things. She’s really kept me up to speed with that, and I’ve been able to make sure that we get it back on track.” (PSW, LA1)

In addition, the programme facilitator conducted midway review sessions with 20 line managers of the Practice Leads, to keep them up to date with the programme and participants’ progress.

### 4.2.2 Support from line managers

It was anticipated that participation in the programme would be actively supported by the Practice Leads’ line managers, and their support was clearly important to the Practice Leads:

“It meant that I was able to prioritise coming, whereas if they didn’t have an understanding of it, it would be like, ‘You can miss this one, you can miss that one.’” (PL, LA1)

As a result, line managers were invited to attend the first session of the programme. Although this did not always happen, it was felt to be valuable in ensuring line managers had a real understanding of the programme:

“I think that it helped them to understand... that it’s not really like normal training, and I think that’s how it was thought of at the start – ‘It’s typical training, come back and do whatever you need to do at the end of the day’ – but actually, there were times when I felt quite drained and emotional.” (PL, LA3)

However, a number of Practice Leads did not feel they had received much support from their line managers. One said:

“I was on my second or third manager since I’ve been doing the course, and I don’t even think my newest manager knew what I was doing or what it was all about.” (PL, LA2)

Others had found that they needed to ask their managers to provide opportunities for them to apply and share their learning, or to support them with this:

“I had to say to my manager, ‘If you get a case on sexual abuse, allocate that to me, or have a discussion when I am around.’” (PL, LA2)

As a result, some Practice Leads suggested that line managers should be encouraged to include a programme debrief in their regular supervision sessions:

“If there was some form of add-on to your supervision where they would be checking it out as it went on, I think that that would be a useful part of it, because that would then embed it even more for us, wouldn’t it?” (PL, LA3)

### 4.2.3 Post-training support

Once the training had come to an end, it was made clear to participants that they could contact the programme facilitator if issues arose with which they needed support. Records kept by the facilitator revealed three instances where she provided further support to participants. For example, one participant contacted the facilitator because they were supporting a colleague involved in a particularly complex case where a court had directed re-establishment of contact between birth parent and child, despite previous allegations by the child of sexual abuse. The facilitator was able to provide evidence around the impact on children of not being believed, and on the way in which children disclose experience of CSA.

Some Practice Leads commented on the importance of this ongoing support from the programme facilitator:

“That’s another particular strength of the programme. Sometimes, you can take part in training and then that’s it, the training’s gone, and there’s a kind of blue haze disappearing behind them... Having the [CSA] Centre behind us is going to be really helpful.” (PL, LA2)

Equally, the Practice Leads were encouraged to continue to meet as a group after the programme had ended so that they could support each other, share resources and plan their dissemination activities:

“We’re meeting as a group now, to look at what we’re going to deliver, how we’re going to deliver it, because there’s so much material.” (PL, LA2)

A number of Practice Leads had already begun to deliver training sessions to colleagues. Some noted the value of co-delivering these sessions, particularly when they encountered resistance from those participating in their sessions:

“A colleague did an area presentation the week before last, and one of the managers said, ‘I don’t believe these statistics, you could put anything up there.’ So we need to steel ourselves, prepare ourselves, we will encounter resistance.” (PL, LA2)



The programme addressed Practice Leads’ need for specific, evidence-informed training that they could not find anywhere else



## 4.3 Programme delivery

Overall, the Practice Leads were extremely positive about the programme and commented on how much they had enjoyed taking part:

“It was brilliant. I thoroughly enjoyed it.” (PL, LA2)

“It’s been an exceptionally valuable course.” (PL, LA1)

“I feel privileged to have been a part of it.” (PL, LA2)

This was echoed in the feedback from Principal Social Workers:

“I know that our Practice Leads just loved the teaching.” (PSW, LA2)

“I think the quality of the materials, the authority and knowledge of the facilitator and others who have been supporting and transferring the learning, has been really strong.” (PSW, LA3)

Some Practice Leads described how the programme had addressed a need for specific, evidence-informed training that they had been unable to find anywhere else:

“The training we have isn’t fit for purpose. It’s mandatory training, and it’s not something we are told that we have to review.” (PL, LA1)

Similarly, one of the Principal Social Workers commented:

“We need to be able to train every single social worker to this kind of level.” (PSW, LA2)

The focus groups and interviews also revealed specific aspects of the programme that were important to participants.

### 4.3.1 Skilled facilitation

Practice Leads emphasised how much they had both enjoyed and benefited from the programme facilitator's knowledge and approach. Some appreciated the depth of experience that she brought:

"I really enjoyed the delivery by somebody who is clearly so competent and who has walked the walk several times before. So everything is underpinned by examples, and examples that are pertinent to our context."  
(PL, LA1)

The facilitator's investment in the subject was valued:

"She's very passionate about it and knowledgeable... and she's such a great trainer because... I didn't once get bored. She's just very good."  
(PL, LA2)

Practice Leads also appreciated the manner in which the training had been delivered, emphasising how this was both 'calm' and 'non-judgmental' as well as appropriately challenging:

"I just felt she was really balanced, in terms of... there's quite a few strong personalities in the group that had a very strong, opinionated approach to a lot of things, and Anna gently but assertively challenged that."  
(PL, LA2)

Some questioned how anyone else could deliver the programme as effectively:

"It wouldn't have been the same without Anna ... She has been phenomenal. She wasn't just facilitating, she really knew her stuff and that really shone through."  
(PL, LA1)

### 4.3.2 Appropriate length and pace

Practice Leads felt that attending the programme for a whole day at a time gave them time to explore issues in depth:

"You have time to reflect and we could give enough time to a topic, rather than skirting over it."  
(PL, LA2)

They had enjoyed the mix of activities and learning:

"The mornings, we've got lots of learning, but then I think we've got an equal amount of learning from the case discussions."  
(PL, LA3)

The spread of information over the course of the programme was felt to be well-balanced by the Practice Leads, who generally found the depth of information given to be appropriate to their needs:

"You could probably have spent days and days on every single topic, but I think, for this, it felt about right."  
(PL, LA3)

Knowing the dates in advance was been important in enabling participants to commit fully to the programme:

"It is a big commitment, but we know the dates far in advance, it's one day a month, so you can fit things around that."  
(PL, LA3)

Some Practice Leads commented that the monthly nature of the programme facilitated their participation:

"It's a whole day out, and 10 sessions over the year is a lot. But because it's spread out once a month, that makes it manageable."  
(PL, LA2)

"The sessions can be quite intense... so if it was two or three days on the trot, or one day a week for 10 weeks, I think that would be really difficult."  
(PL, LA2)

The length of the programme was felt to be helpful in giving participants time to develop their understanding:

"I think doing the programme over such a long period of time enables the learning to be better embedded, especially as it is such an emotive subject."  
(PL, LA3)



In particular, it enabled participants to bring issues that were arising in their work for discussion:

“It’s really nice that it’s taken place over a year, because that learning has developed, and we’ve gone away and looked at things ourselves, rather than just having a couple of days or three days and then you go back to your job.” (LM, LA2)

“We could go away and new cases would come about or we’d become aware of something. We wouldn’t have been able to do that in any other way.” (PL, LA3)

Attending the programme over 10 months also gave Practice Leads a sense that they were investing in the programme as a whole, and would continue to do so:

“It’s knowing that it’s not just a short-term fad. Actually we’re looking at the long term as well. It’s not just in and out. It’s going to be sustained.” (PL, LA2)

While most participants found the impact on their workload relatively manageable, however, some noted that their heavy workload made it difficult to get the most from the training:

“We’ve looked at a model and I’d really like to learn more behind that but, unless I actually make my own time to do the reading around it, the space isn’t there.” (PL, LA2)

It was suggested that reducing their caseload would enable them to provide support for others with CSA cases:

“If you had a reduced caseload, you could specifically work on sexual abuse, by co-working with your colleagues, so that the knowledge can be shared and giving them the confidence to take that on.” (PL, LA2)

#### 4.3.3 A safe space

Practice Leads described feeling encouraged to share their views and perceptions, and to hear each other’s perspectives:

“I just felt that Anna allowed a safe environment to discuss things further. Particularly with female offending, it was such an emotive topic, and I think we only had one male in the room, and... she really encouraged him to have a voice as well.” (PL, LA2)

“It feels like a safe space... and I suppose having those case discussions when sometimes you think, ‘Oh, I’m going to get judged because I’m doing this or I’m not doing that,’ but... it doesn’t feel like that.” (PL, LA3)

Nonetheless, a number said that they would have valued a regular opportunity to debrief the sessions’ emotional impact on them, either one to one or as a group:

“It’s quite hard when you’ve done a group session like that. Not everybody wants to share in front of the whole group and sometimes something could have hit a nerve.” (PL, LA1)

Some suggested that, in addition to regular supervision from their line managers, it might be helpful for the programme to offer access to individual counselling:

“Even if someone was available, say, for a couple of hours or... if you could go and talk to them if we felt we needed – even if you could ring them.” (PL, LA1).



Practice Leads appreciated the delivery of the training, describing it as ‘calm’ and ‘non-judgmental’ as well as challenging



The programme facilitator also identified a need to keep in closer touch with participants and to monitor the personal impact on them. In the third local authority, she instituted midway review conversations with the Practice Leads, which were felt to be extremely supportive:

“That phone call that she had with us at the midway point, I found that really helpful. It was very sensitive. It wasn’t just about how we were finding the programme, it was, ‘How are you?’ which was really, really nice. I felt really supported.” (PL, LA3)

The need for this close attention to participants’ emotional wellbeing had emerged particularly clearly when a Practice Lead and their line manager in LA2 had contacted the facilitator after the programme had ended, to draw her attention to the impact of the Practice Lead’s own experiences of CSA on their participation in the programme. They had suggested that line managers should be made aware from the outset that some participants were likely to have had personal experience of CSA and that, whether or not they had disclosed this, participants should be given an opportunity to think about the personal impact of the programme and their own support needs before deciding to participate. This had prompted the programme facilitator to make immediate changes to the delivery of the programme, so that it included greater emphasis throughout on self-care. Participants in the third pilot valued the information on self-care:

“That first session she did was all about looking after ourselves, and that’s really, really helpful.” (PL, LA3)

#### 4.3.4 Participatory and inclusive

Practice Leads valued the participatory nature of the training, and particularly the opportunities to discuss cases:

“It wasn’t just PowerPoint-driven. Each month someone brings a case to discuss in depth... and you get different perspectives on it... ‘Did you look at that? Did you look at the family? Did you consider...?’” (PL, LA2)

Some highlighted the value of the role plays during the programme, where they were given opportunities to work through different situations:

“Even as simple as ‘How do you ask an adult if they’ve ever been sexually abused?’ It sounds basic, but it was so helpful to just talk through how different people would do that.” (PL, LA1)

Working with colleagues from across different departments was also felt to be beneficial:

“I think it’s been helpful that we are all from different areas, because I think we’ve been able to share: ‘In this area this is how we might do it.’ ... In each area there are complexities within that.” (PL, LA1)

Another participant noted how particular efforts had been made to ensure that everyone felt included:

“I have a visual disability and Anna has been so supportive in making sure I had slides ahead of time. I have never received such consistent support with this before.” (PL, LA1)

#### 4.3.5 Practical and positive

Some Practice Leads described how the programme had approached the subject of CSA in a positive and constructive way:

“It’s been generally hopeful as well, like there are things that we can do, actually do, which will help improve people’s lives... When you do the one- or two-day courses, you do come out like, ‘Oh god, once this has happened to a child, that’s kind of it,’ but... actually, yes, that has happened, and not taking any gravity away from that, but this is what we can do, now.” (PL, LA2)

“Each session has been really purposeful, and that’s probably the biggest thing that we can take away from it.” (PL, LA1)

## 4.4 Reflections

Reviewing the information and feedback on the programme's delivery highlights a number of factors that underpin or could potentially improve the programme's design and delivery:

### *Content and structure*

- ▶ Participants valued attending monthly, day-long sessions over a period of 10 months, as this allowed an in-depth focus on different aspects of CSA and provided opportunities for them to develop their learning.
- ▶ The structure of the programme also made it easier for participants to manage the impact on their workloads and themselves. However, some suggested that this could be further enhanced by giving Practice Leads reduced caseloads during the programme.
- ▶ Regular opportunities for reflective, practice-based learning were central to participants' ability to apply their learning to their own practice and embed the learning over the course of the programme.
- ▶ The programme was enhanced by input from external agencies. While the quality of this input was sometimes difficult to manage, it meant that the programme was informed by different perspectives and enabled participants to gain a greater understanding of other agencies' roles in responding to CSA in their local area.
- ▶ Some Practice Leads suggested that they would have liked to spend more time on particular topics. On the whole, however, there was a recognition that the programme had provided an in-depth focus on different aspects of CSA.
- ▶ Adapting the programme to each local area meant that the design of the programme could be customised to respond to specific local needs. However, such customisation requires time and resources; this needs to be taken into account if the programme is rolled out on a larger scale.
- ▶ While the programme sought to draw from the expertise of those with lived experience, it may be useful for those with lived experience to review the content and resources used, to ensure their voices are fully reflected in the programme.

### *Support*

- ▶ Line managers clearly played a key role in supporting Practice Leads' engagement in the programme and enabling them to share their learning with others. The importance of line managers attending the introductory session and having a good understanding of the programme should be highlighted during the process of selecting Practice Leads.
- ▶ The programme facilitator's communication with the Principal Social Worker in each local authority throughout the programme was also valuable in ensuring that they could support the programme's delivery when needed.

### *Delivery*

- ▶ Utilising a range of teaching methods and providing access to relevant, up-to-date resources increased participants' ability to make the most of the programme.
- ▶ The quality of the programme's delivery emerged strongly in participants' feedback; they particularly valued that such a sensitive and complex subject had been approached in a manner that felt both positive and safe.
- ▶ The experience, knowledge and skills that the facilitator brought to the programme was a strength, but this reveals a potential challenge in rolling out the programme more widely.



Regular opportunities for reflective, practice-based learning enabled Practice Leads to apply their learning to their own practice



## 5. Programme outcomes

This chapter looks at the programme's outcomes and considers the extent to which the programme developed Practice Leads' knowledge, skills and confidence, enabled them to disseminate their learning, and supported local authorities to develop a culture of learning and development around CSA.

### 5.1 Developing Practice Leads' knowledge, skills and confidence

Analysis of the feedback from Practice Leads, line managers and Principal Social Workers revealed strong evidence that Practice Leads had improved their knowledge, skills and confidence in identifying and responding to CSA:

"The programme has given me the confidence to talk about sexual abuse and has provided me [with] tools where I believe I could support children and families a lot more effectively than previously." (PL, LA3)

"I have a wealth of resources to refer to, have more confidence in the subject overall, know where I can go to find things out, and have colleagues from the course who I feel confident in speaking to about any matter to do with CSA." (PL, LA2)

#### 5.1.1 Improved knowledge of CSA

Giving Practice Leads a better understanding of CSA and of how to identify and respond to it was a key outcome of the programme. The Practice Leads themselves felt that they had gained a much deeper understanding of CSA:

"I have gained so much information on the nature and scale of sexual abuse." (PL, LA2)

"We had comprehensive opportunities to develop our thinking around and understanding of multiple aspects of CSA." (PL, LA2)

"The course has enabled me to give greater depth and understanding to what I know about CSA and to think about CSA in a different way." (PL, LA2)

"I feel my knowledge base in this area has increased significantly by attending this programme, and in turn my level of confidence in being able to share my knowledge base and learning with colleagues." (PL, LA3)

This was borne out in analysis of the 'pre/post' questionnaire filled in before and after the programme by the Practice Leads. By the end of the programme, all of those who completed the questionnaire felt confident in their knowledge of key topics related to CSA (see Figure 3).

Some Practice Leads emphasised the importance of learning more about online-facilitated CSA, as they felt this was an area where they had particularly lacked knowledge:

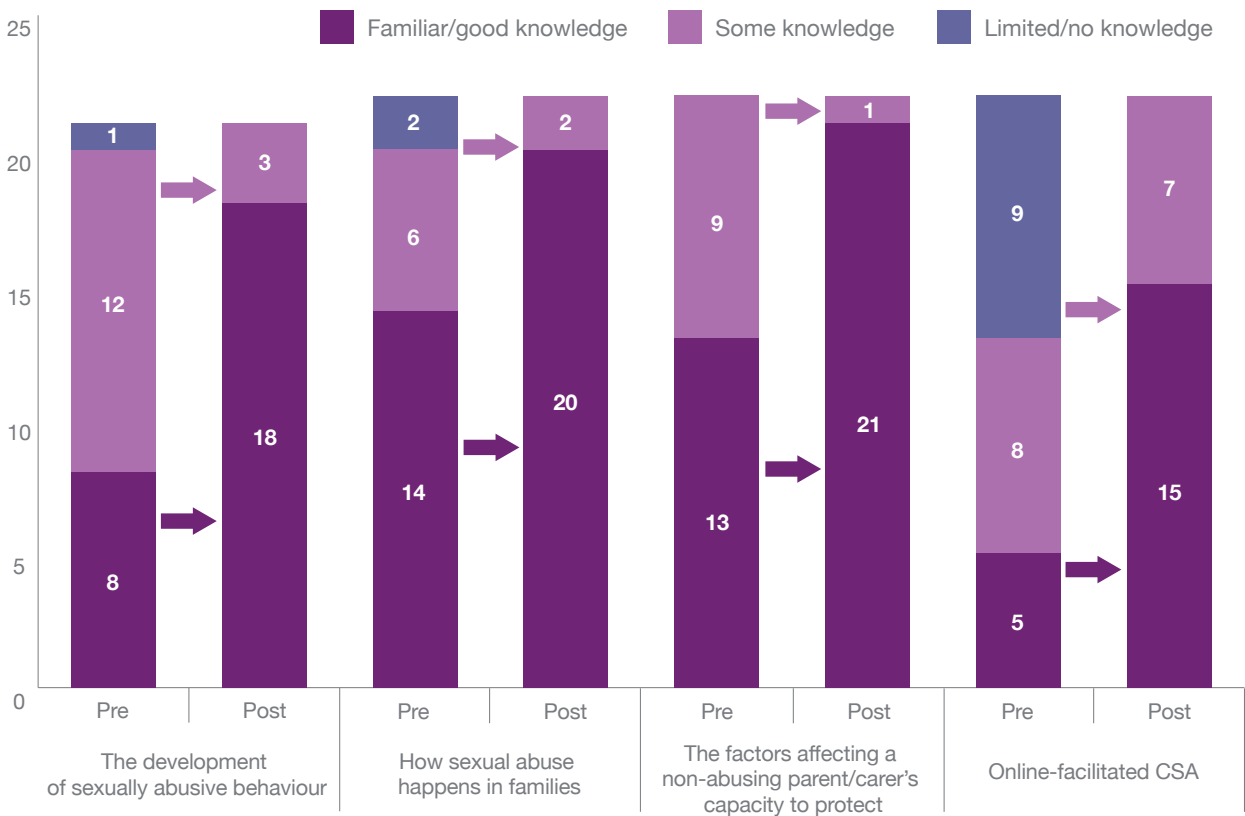
"The online stuff... That was a new discussion for quite a lot of us, especially given that a lot of us have been social workers for years and years – this is now new technology abuse." (PL, LA2)

Some recalled other aspects of CSA that had been new to them, such as female perpetration of CSA:

"I think when we normally think about sexual abuse, we think it's a he. But also knowing that it could be a she, that was also very important to think about." (PL, LA1)

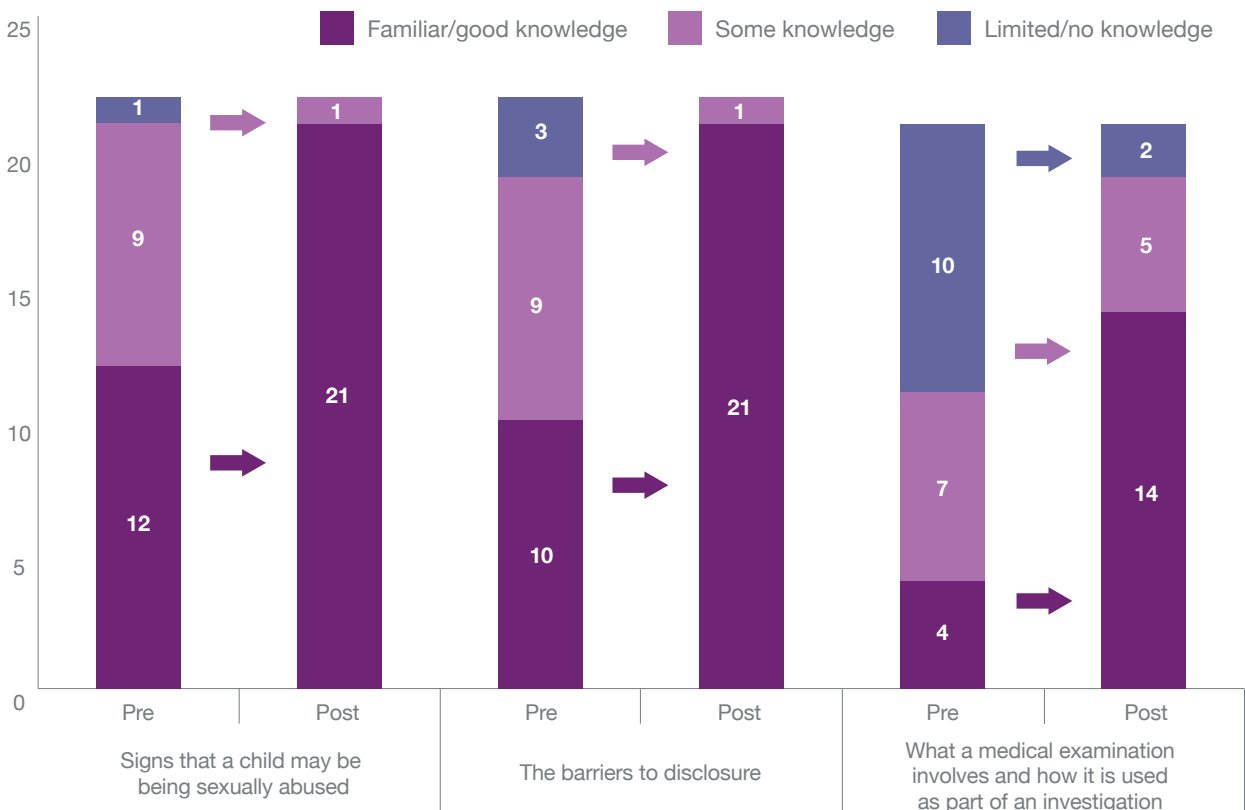
As Figure 4 shows, analysis of findings from the pre/post questionnaire also revealed increases in participants' knowledge of the signs of CSA, and the barriers that children and young people face in disclosing the abuse.

**Figure 3. Changes in participants' knowledge of CSA**



Note: n=21 ('The development of sexually abusive behaviour'); n=22 (other categories).

**Figure 4. Changes in participants' knowledge of signs of abuse, barriers to disclosure and medical examinations**



Note: n=21 ('What a medical examination involves...'); n=22 (other categories).

Several participants described how they had come to understand the importance of simply asking direct questions about CSA:

“Those videos evidence that there are a lot of adult survivors who just wanted to be asked: ‘Nobody’s ever asked me.’ And then we’re sitting there going, ‘I don’t know how we’d ask you.’” (PL, LA1)

Many Practice Leads (n=16) had also increased their knowledge of medical examinations, and how to talk about them:

“Now I know what to say to this young person, in terms of reassuring her, to do with medical examination. Without this, I probably wouldn’t know what to say to her. I’d have said it’s like a smear test or something, but it’s not.” (PL, LA1)

However, two Practice Leads still felt they had limited understanding of medical examinations, suggesting that this topic may require additional time or resources.

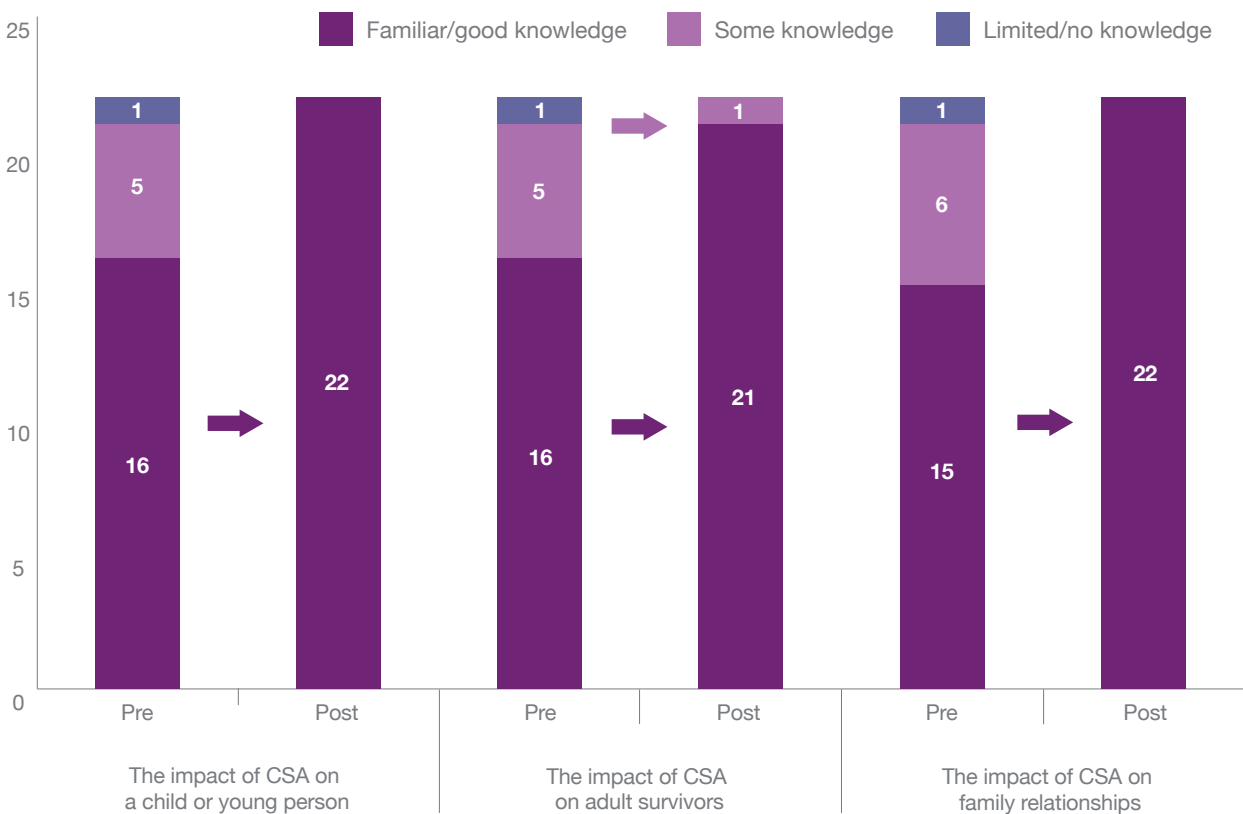
Figure 5 shows that the programme gave Practice Leads a better understanding of CSA’s impact on children, young people and their families, and its longer-term impact on adult survivors. One explained that they had found it helpful to have an “exploration of what happens to the victim” (PL, LA2) while another highlighted the value of the session on adult survivors.

Additionally, as Figure 6 shows, taking part in the programme, and in particular hearing from other agencies, gave participants a better understanding of the actions that need to be taken when a child or young person makes a disclosure of CSA.

For example, some described how they had increased their knowledge of the police response to a disclosure, and how they investigate an offence:

“In terms of the police, I knew before broadly what they’re supposed to do... but it’s helped us to understand the role of the police [following a disclosure].” (PL, LA1)

**Figure 5. Changes in participants’ understanding of the impact of CSA**



Note: n=22.

Although a small number still did not feel they knew enough about police investigations and how files are prepared for the Crown Prosecution Service, many had learnt more about other agencies and their role in relation to working with perpetrators and victims/survivors:

“We would just be told, ‘Probation has assessed this person as a high risk,’ but the guy who came was able to explain to us how they reached their conclusions... so now I would know, as a Chair, I would know what it means.” (PL, LA2)

“For me, the biggest [learning] is the SARC... I mean, I knew what they did, but I didn’t know what they actually did.” (PL, LA1)

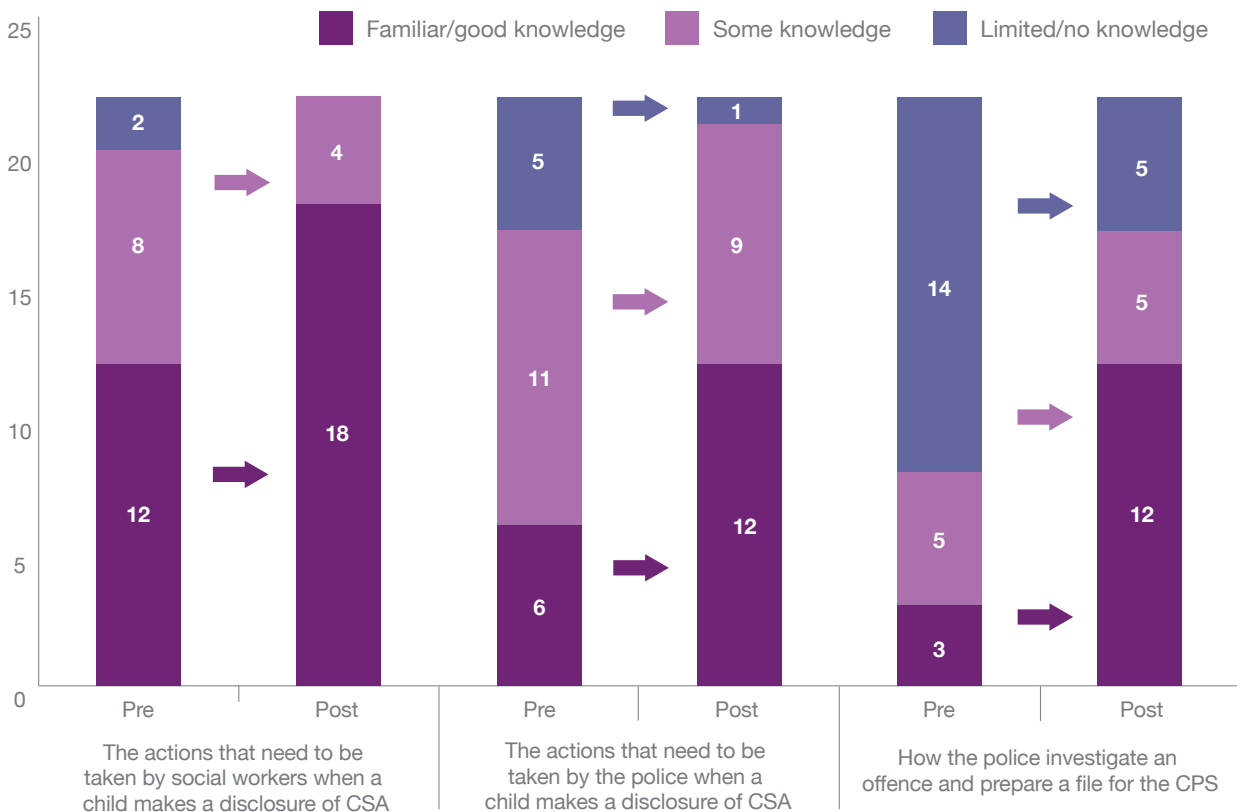
The vast majority of Practice Leads felt they had learnt about resources, many of which were new to them, that would support them in their work:

Several participants said they had come to understand the importance of simply asking direct questions about CSA

“I probably wasn’t aware of about 90% of the resources that have been shared.” (PL, LA1)

“I’ve gained lots of incredibly useful resources to help in day-to-day practice.” (PL, LA1)

**Figure 6. Changes in participants’ understanding of actions needed and how other agencies are involved**



Note: n=22.

### 5.1.2 Improved confidence in identifying and responding to CSA

As Figure 7 shows, analysis of responses to the pre/post questionnaire revealed a noticeable increase in Practice Leads' confidence. Fewer than half of participants had felt confident in identifying and responding to CSA before the programme, but all were feeling confident at the end of the programme.

This was reflected in the focus groups and interviews, where many Practice Leads said their practice was now supported by a stronger foundation of knowledge:

"I feel more confident as the advice I can give, and my understanding, is backed up with information provided by the CSA Centre, by research and by sharing experiences with colleagues." (PL, LA2)

"Having greater knowledge about CSA from various aspects just makes me feel more confident to work with families, and know decisions are being made from the right starting point in terms of knowledge and research." (PL, LA3)

Many described how taking part in the programme had helped them to recognise and overcome the fear that they, and others, felt around identifying and responding to concerns of CSA:

"I think the fear is, 'What if I'm wrong?' but, actually, what if I'm right? I think we need to overcome a lot of those barriers that are our own almost, internally. It's about asking." (PL, LA1)

"It's being more open to it and actually raising it if need be, and actually saying the word, rather than skirting around the edges." (PL, LA2)

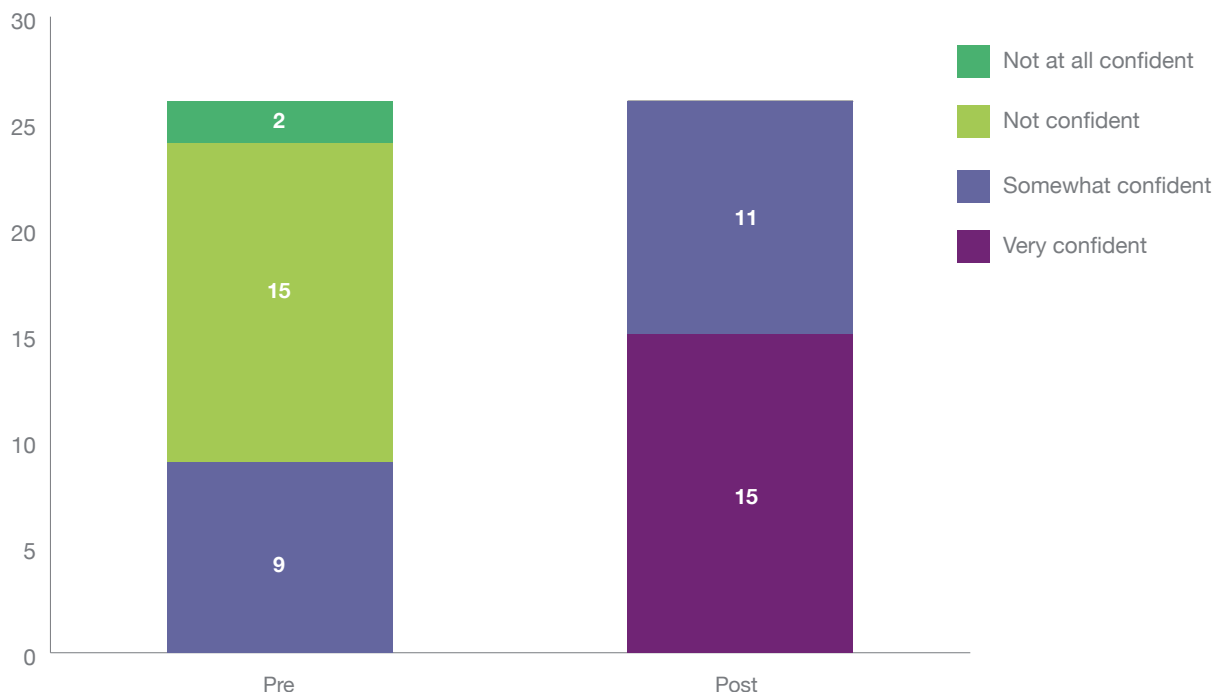
"I've learnt not to be scared of it, or afraid to go near it." (PL, LA3)

In particular, some said they felt more confident in assessing and recording risks of sexual abuse within the family:

"I feel that I have the background knowledge from research to support my assessment." (PL, LA2)

"I have more confidence to ask the questions around CSA." (PL, LA1)

Figure 7. Changes in participants' confidence in identifying and responding to CSA



Note: n=26.



“I have felt much more confident in being able to write down actions that we need to consider in terms of, ‘Is this sexual abuse?’” (PL, LA3)

Others felt more able to support families when a police investigation was under way:

“I feel a lot more confident about what work we can do with children and young people if there’s a police investigation... All my experience in practice it’s been a big ‘No, no, no, check the police,’ and actually, I found that really quite empowering.” (PL, LA3)

Analysis of the responses to the pre/post questionnaire confirmed that, by the end of the programme, Practice Leads felt more confident in talking to children and young people about CSA (see Figure 8), and in talking to parents and carers (see Figure 9).

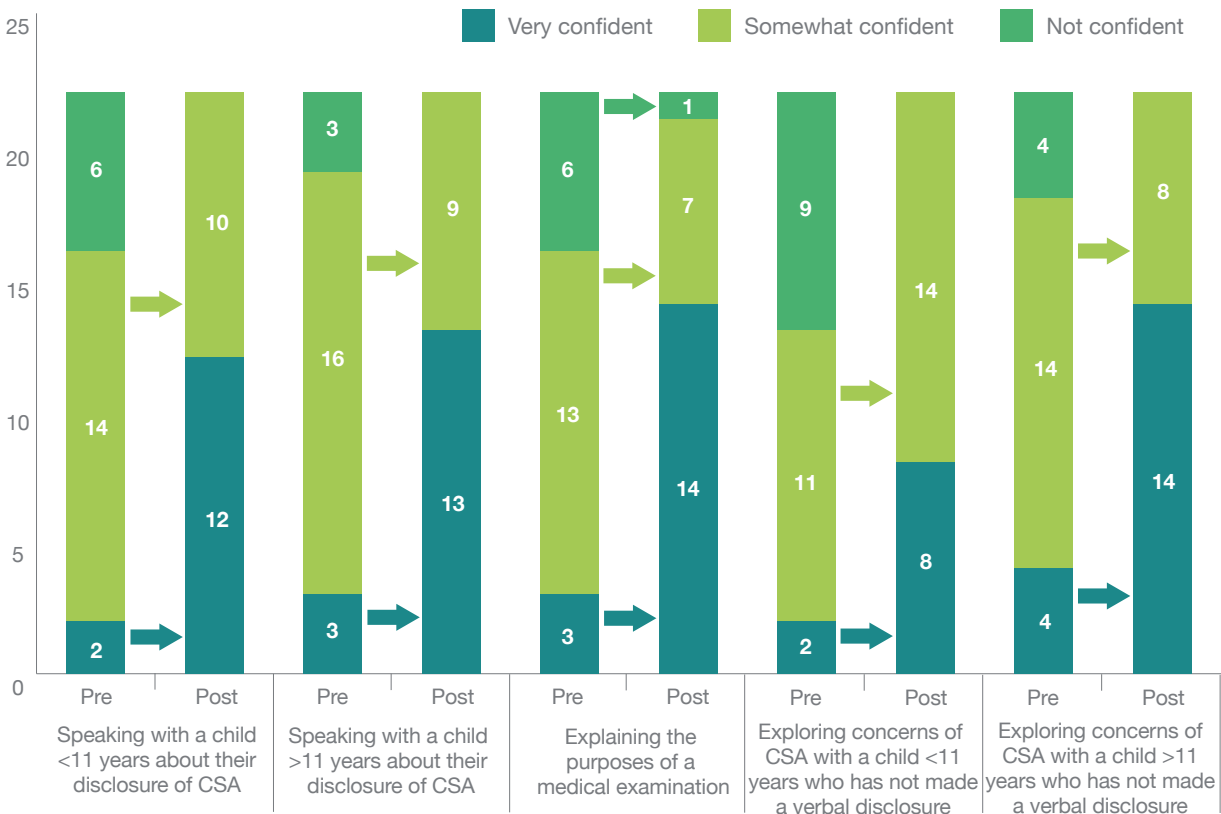
For example, some participants described how they felt more able to talk to adults about their concerns regarding CSA and their own experiences of CSA:

“I feel we have been given ‘permission’ to ask families about sexual abuse, even if the evidence is not strong (and if this is appropriate, of course).” (PL, LA2)

“I have more confidence in being able to talk to family members about their experiences of sexual abuse and the possibility that their children may be experiencing it.” (PL, LA2)

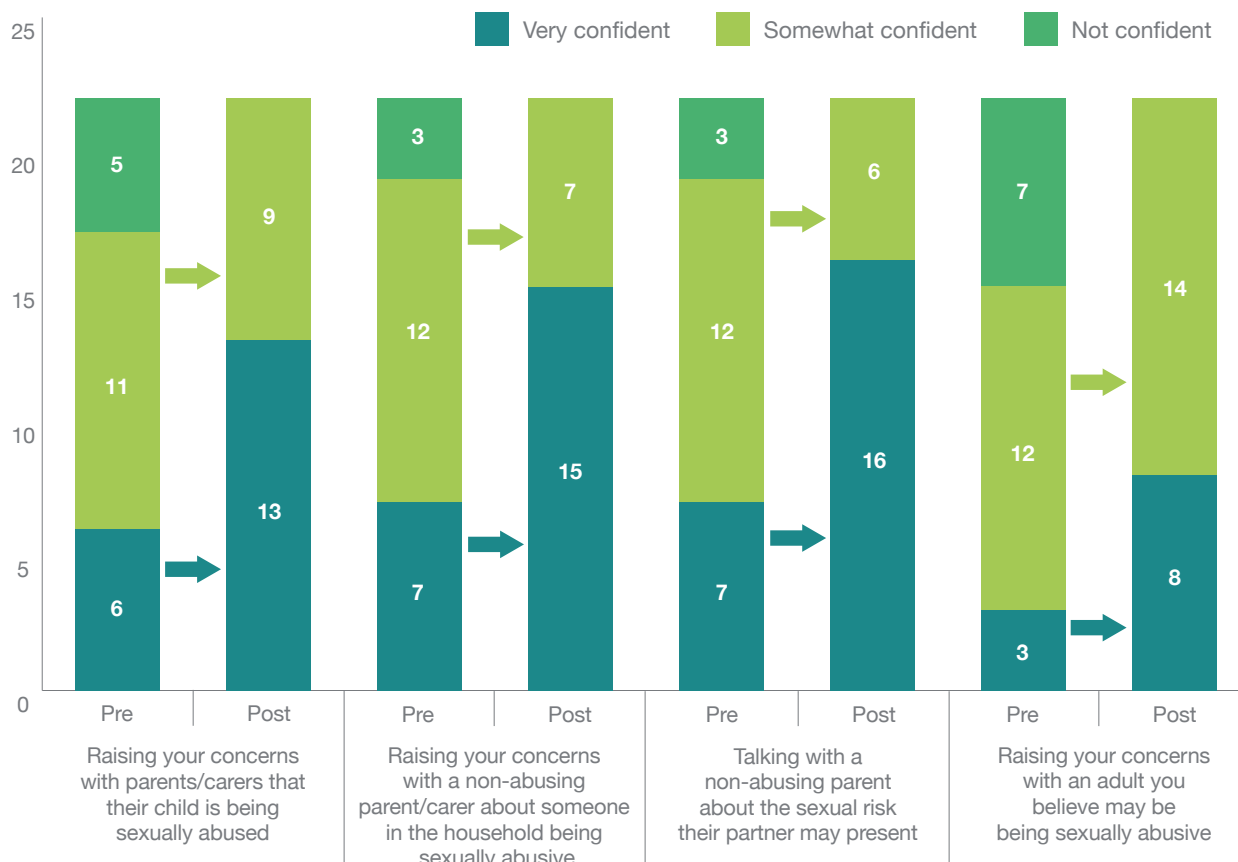
Participants were more confident about talking to parents and carers, and supporting families during a police investigation

Figure 8. Changes in participants’ confidence when talking with children and young people about CSA



Note: n=22.

Figure 9. Changes in participants' confidence when talking with parents and carers about CSA



Note: n=22.

### 5.1.3 Applying learning to practice

Practice Leads explained how taking part in the programme helped to improve their skills in identifying and responding to CSA:

“I have found the course incredibly useful and thought-provoking, and I feel it has absolutely enhanced my practice.” (PL, LA1)

“I feel up-skilled and know where to access resources to support my work in this field.” (PL, LA1)

“The programme has really expanded my knowledge and understanding of CSA from all aspects, and has allowed me to step back and look at it from the bigger picture and examine things I would have never thought of before.” (PL, LA1)

“The training has provided me a real insight into cases I have worked on and what I would have done differently. It has strengthened my professional curiosity when thinking about sexual abuse and has assisted me with me asking ‘the question’ during all of my assessments.” (PL, LA3)

This was borne out in the analysis of the pre/post questionnaire data; Figure 10 shows that most participants felt able to apply their learning to practice by the end of the programme; those reporting less ability to apply learning to practice indicated that this was because they had fewer opportunities to do so, as a result of their specific roles.

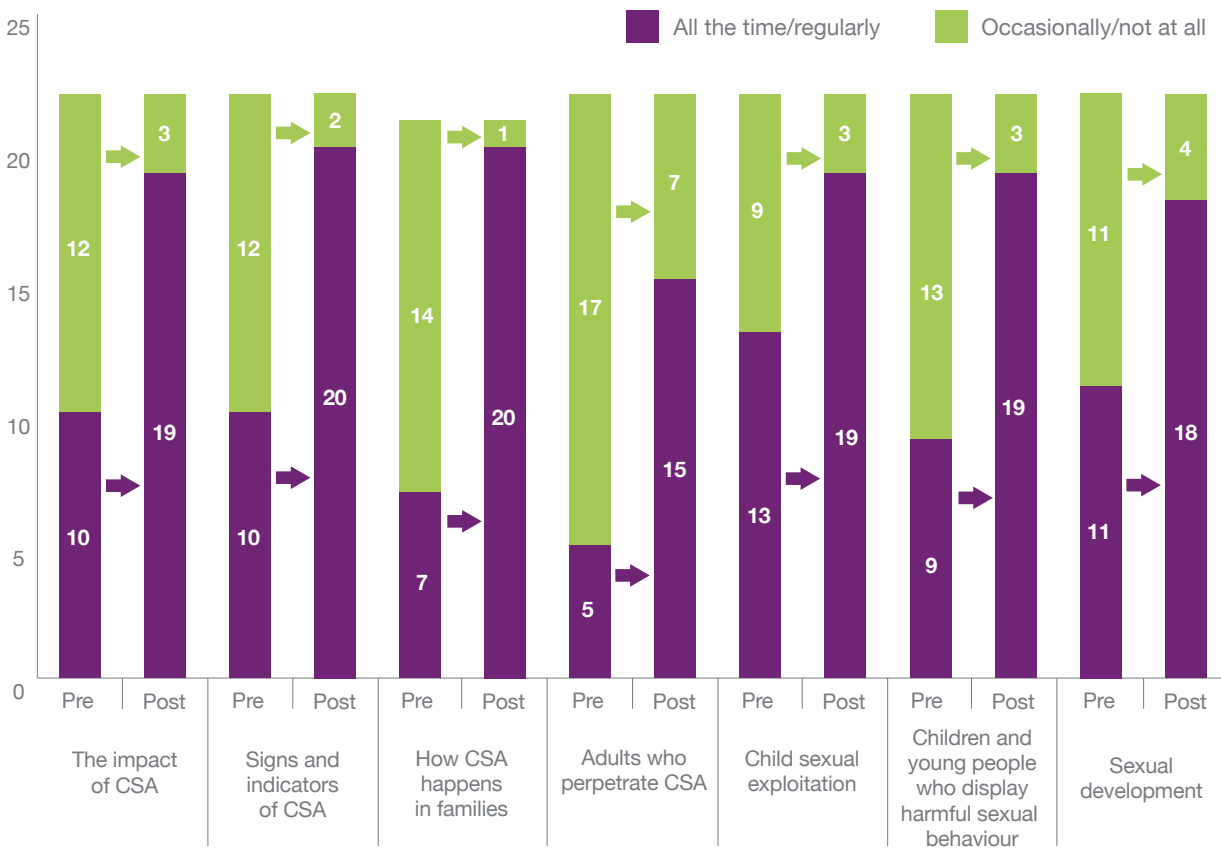
Several said the programme had helped them to think differently about the way they were working and adapt their practice:

“It has challenged my practice and some of my assumptions in a helpful way.” (PL, LA1)

A key learning point for many was around the importance of simply asking about CSA:

“Just asking the question. Because it’s always been that you don’t ask because you were worried that you could ruin the investigation or that you might be putting words into their mouths, and it was just... being given that permission... and [being told] that, actually, that’s the right thing to do.” (PL, LA3)

Figure 10. Changes in participants' ability to apply learning to practice



Note: n=21 ('How CSA happens in families'); n=22 (other categories).

Some Practice Leads had changed their approach to carrying out assessments and managing risk:

“We are all really mindful about not wanting to traumatise children, but then watching the videos, and then hearing continuously that as a child or a young adult they wanted to talk about it, they just never got asked. That really hit home.” (PL, LA1)

“I have been able to make recommendations on child protection plans to manage risk.” (PL, LA1)

Others felt they were more sensitive and attuned to the possibility of CSA in the cases in which they were involved:

“Just yesterday I had a referral that at first seemed quite ‘low-level’; however, as I gathered more information, I felt really confident in evidencing why the case needed to be escalated. It actually became a Strat<sup>3</sup> and I think passed over to another Practice Lead.” (PL, LA1)

This was also noted by a Principal Social Worker, who had seen changes in the way in which Practice Leads were thinking about CSA:

“It really made them think in a different way about the traditional idea of who sexually abuses children.” (PSW, LA1)

Some Practice Leads felt they were more sensitive and attuned to the possibility of CSA in the cases in which they were involved

<sup>3</sup> This refers to the case being taken to a Section 47 strategy meeting, which is held when there is reasonable cause to suspect that a child is suffering, or is likely to suffer, significant harm.

One Practice Lead gave an example of a case where they felt confident talking to a young person about their sexual behaviour:

“He didn’t want to really talk about it, and that’s OK because he wasn’t in the right place to, but I felt confident having that kind of step-in, which I don’t think I’d have had without doing that session.” (PL, LA2)

Another described how they had used information from the course to support a foster carer looking after a child who had begun displaying sexualised behaviour:

“I printed the information out and discussed it with the foster carer. She implemented it, and then two months later the placement was so much more stable.” (PL, LA3)

A number of participants said they had become more systematic and thorough in their analysis of situations related to CSA. One recalled a case discussion where a young person who had been abused was running away from an adoptive placement and had suggested the possibility of abuse in the new environment:

“It just opened my eyes to being more curious and to being alert to whatever signs that children are showing, and just listening to what they’re saying.” (PL, LA2)

For several Practice Leads, taking part in the programme had helped them to understand that exploring concerns of CSA did not require the level of evidence that they had previously thought was necessary:

“I will hear, ‘Oh, there’s no evidence’.... But what does evidence look like? I’m much more aware of that. That evidence is for the police. What are the risks to this child in this case? And so not getting too hung up about evidence.” (PL, LA2)

These changes in Practice Leads’ approach to CSA cases were witnessed by their line managers, one of whom described how the Practice Lead they supervised had been able to identify concerns of intra-familial abuse in a complex case:

“Her analysis on a recent assessment was amazing... She was able to analyse the difference between abuse and exploitation, and pick out the indicators to demonstrate that there were intra-familial abuse concerns. She used theory in her analysis and assessment that she hasn’t been able to do before.” (LM, LA3)

Furthermore, analysis of the pre/post questionnaire data shows that more than two-thirds (n=18, 69%) of the 26 Practice Leads completing both questionnaires felt more able to liaise with other agencies in relation to CSA after taking part in the programme (see Figure 11), and three-quarters (n=20, 77%) felt more able to liaise with them in relation to harmful sexual behaviour (see Figure 12).

One Principal Social Worker described how important it had been for Practice Leads to meet representatives from other agencies during the programme:

“There’s something about that relationship-building... It’s something as simple as picking up the phone and you know who it is that you’re talking to.” (PSW, LA1)

Meeting representatives of other agencies during the programme was considered to have been important for the Practice Leads

Figure 11. Changes in participants' ability to liaise with other agencies in relation to CSA

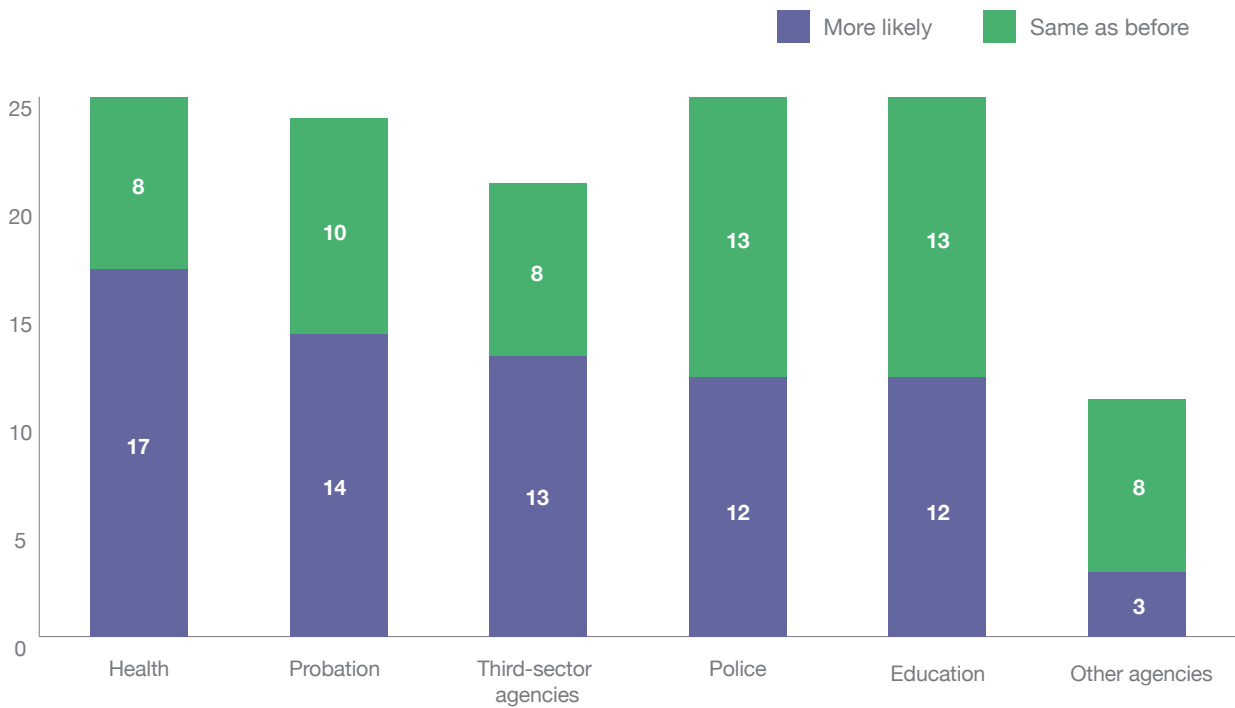
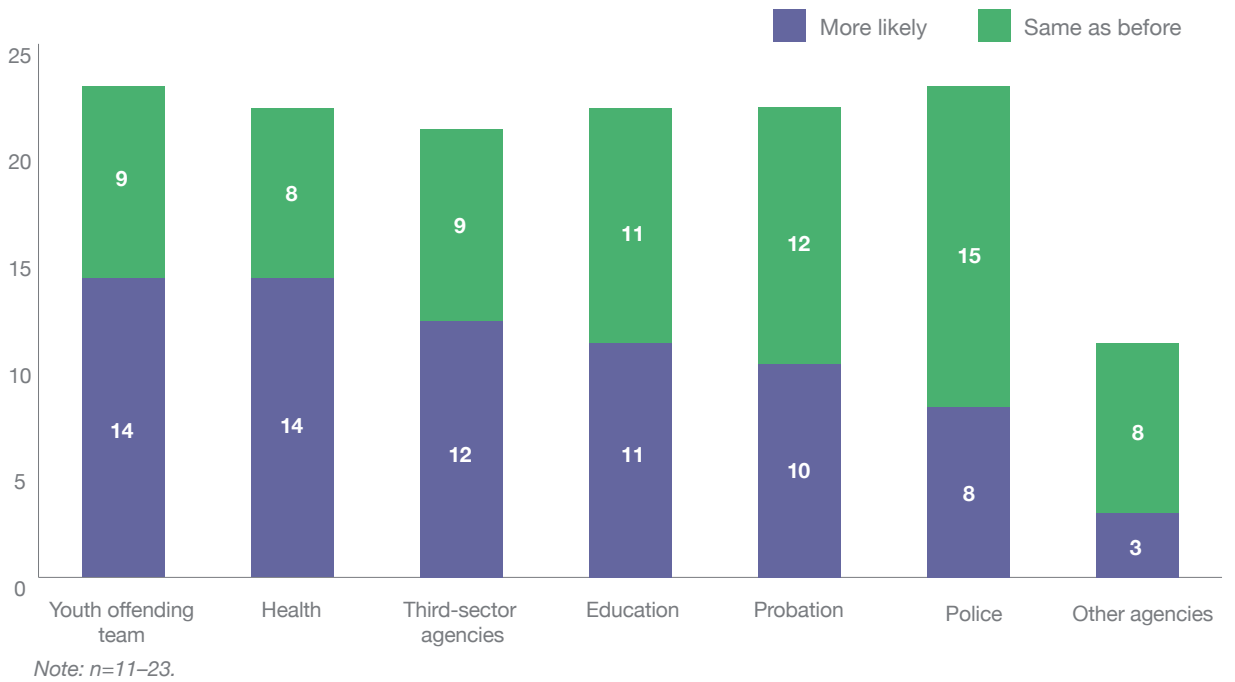


Figure 12. Changes in participants' ability to liaise with other agencies in relation to harmful sexual behaviour



## 5.2 Enabling Practice Leads to disseminate their learning

Alongside the changes in their knowledge, skills and confidence in working with CSA cases, Practice Leads generally felt that the programme had equipped them with resources and knowledge that they could share with others:

“It really gave me the confidence to come back to my students and newly qualified social workers and say, ‘Right, let’s look at this,’ and really challenge them and their thoughts. It definitely opened my eyes wider by doing the course.” (PL, LA2).

“I can support other colleagues in their direct work with more resources and help them to plan their interventions.” (PL, LA1).

### 5.2.1 Supporting colleagues

Practice Leads had already begun sharing their knowledge with colleagues and across their organisations in a range of ways. A number described instances where they had supported colleagues with cases involving or potentially involving CSA. One gave an example of support they had provided to a colleague dealing with sexual harm between siblings, while another had advised a colleague on how to respond appropriately to a service user who had disclosed historical sexual abuse.

“It’s supporting colleagues in those discussions that they’re going to be having with families about what steps to take next, what things to be considering during the assessment period – for example, all the different tools they can be using.” (PL, LA1)

Others said they had been able to share their learning through mentoring and supporting newly qualified social workers:

“I work with newly qualified social workers and I have used some of the information learnt in supervision with them; for example, on assessing perpetrators and non-abusing partners.” (PL, LA2)

One Practice Lead had been able to support colleagues in another team with a case involving a teenage girl who had been admitted to hospital and was refusing to go home. Line managers gave further examples of occasions when Practice Leads had supported colleagues working with cases of CSA:

“L helped her colleague to unpick what was normal and not normal... Part of this was about Grandma’s protective capacity. Grandma describes her granddaughter as being quite sexual, so L was able to pick this apart... and challenge this.” (LM, LA3)

“M had conversations with a colleague around harmful sexual behaviour and helping them understand what this could look like and being more vigilant to the signs.” (LM, LA3)

### 5.2.2 Sharing learning across teams and services

Practice Leads described how they had been able to share the learning from the programme within their teams and across services in their local authority:

“In case discussions, it’s prompted us to think about things and say, ‘Have you thought of this? Have you tried X, Y and Z?’ (PL, LA2)

“We’re giving general presentations to people in each area, and then following up with more sessions with teams.” (PL, LA2)

“We’re having those conversations a lot more. So it’s that ripple effect, I suppose, isn’t it? Just getting the word out there. And I suppose normalising it... We’d be having a conversation in the office, and just say, ‘Have you thought about...?’ which sparks a whole new conversation.” (PL, LA3)

Some line managers also noted how the Practice Leads in their teams had shared useful information with colleagues:

“In a team meeting recently, we had a case discussion. She was really helpful in this – it became live for the team.” (LM, LA3)

Another line manager commented:

“The learning that H’s brought back has been absolutely brilliant!” (LM, LA2)

Additionally, some Practice Leads said that taking part in the programme had changed how they related to some agencies and helped them feel more able to challenge others when necessary:

“Coming on this course has made me to think and push, because we’ve had joint strategy meetings with the police, and the police say, ‘We’re not going ahead because we don’t have enough evidence,’ and we had to push... ‘This is the second time she’s made allegations,’ so we needed to push it further... Having this training, I had to push it further, and we’re still working in there, but if it hadn’t been for this I would have just left it.” (PL, LA1)

“It’s helped me challenge the police on a case where a woman had been seen touching a teenage boy, and the police had put it down as horseplay, and what we spoke about here was flipping the genders. That’s really helpful in challenging the people who dismissed it because it was a woman and a teenage boy, and flipping that, so if it was a man and a teenage girl...” (PL, LA2)

“I’ve chaired strategy meetings where I felt so much more confident with saying, ‘Actually, let’s look at what signs we’ve got here, this could potentially...’ I’m much more confident, whereas before I might be going, ‘Hmm, could be...’” (PL, LA3)

It was clear that Practice Leads were actively planning how they would continue to cascade their learning following the programme. For example, Practice Leads in local authorities LA1 and LA2 had made plans to continue to meet as a group so they could coordinate their activities and support each other.

“We’re dividing into groups of two and condensing a day’s session into an hour. We’re meeting in September to plan how we’re going to do that so we can then roll it out.” (PL, LA1)

“I’m meeting with Anna [the programme facilitator], because I’m in the academy so working with all the newly qualified social workers. We are going to look at a workshop for them, and I think she’s going to co-deliver it with me the first time, and then I’ll keep doing it so it’s a running programme.” (PL, LA3)

### 5.2.3 Sharing resources

Having been given or learnt about resources through the programme, Practice Leads had shared these with others around them:

“I’ve shared the slides and handouts and have talked through them with my team at team meetings.” (PL, LA1)

“I’ve been working with colleagues about the impact of child sexual abuse on the children and families they are working with, and sharing some of the tools that Anna has introduced us to.” (PL, LA2)

“I have used some of the resources to inform social workers of how they can have conversations with foster carers about how to keep siblings safe.” (PL, LA1)

“I’ve shared tools such as the Brook Traffic Light Tool<sup>4</sup> and Understanding Children’s Sexual Behaviors<sup>5</sup> with Child and Family Centre staff and some Early Years settings to support their practice.” (PL, LA1)

In addition, one Practice Lead told us that she had set up a shared electronic folder and was putting useful articles and resources there for her colleagues to access.



Practice Leads were actively planning how they would continue to cascade their learning after the programme ended



4 A tool for categorising the sexual behaviour of young people; it distinguishes between normal and concerning sexual behaviour. See [www.brook.org.uk/training/wider-professional-training/sexual-behaviours-traffic-light-tool/](http://www.brook.org.uk/training/wider-professional-training/sexual-behaviours-traffic-light-tool/) for more information.

5 A booklet, aimed at parents, which classifies behaviours within four groups. See [www.tcavjohn.com](http://www.tcavjohn.com) for more information.

## 5.3 Enabling local authorities to develop a culture of learning and development

As the evaluation was carried out at the end of the programme in the three local authorities, it was not anticipated that there would be much evidence of wider changes in local authorities' practices and systems. Nonetheless, some anecdotal feedback suggested that the programme was beginning to have a wider impact.

### 5.3.1 Changes in local authorities' culture and practice

In some cases, it appeared that the programme had resulted in changes being made to local authorities' policies and practice around identifying and responding to CSA concerns. One Practice Lead described how they had initiated changes to the single assessment template that was used across all services:

"In our single assessment template we obviously talk about domestic violence and alcohol issues, but there's nothing about sexual abuse. So I was able to go back and say, 'You need to put it in there,' so it's now in there." (PL, LA1)

Another had begun talking to different teams to improve the way that young people displaying harmful sexual behaviour were assessed:

"The programme has motivated me to approach management and facilitate discussions between YOS [the Youth Offending Service] and [the] NSPCC Sexually Harmful Behaviour Team, to explore and identify new ways of co-working AIM Assessments<sup>6</sup> with children and young people who display sexually harmful behaviour." (PL, LA3)

A third Practice Lead had sought to empower colleagues so they could deal with CSA more confidently:

"It's abuse, and we don't need to be scared of it. We don't need a special expertise. We don't need to go running for experts. We can deal with it ourselves. We deal with neglect, and we deal with physical and emotional and domestic violence. We deal with all these things, and sexual abuse is no different to that." (PL, LA2)

They went on to explain that there was now a greater willingness to ask questions and create opportunities for disclosure:

"We've learned not to tiptoe around with it... We've been asking that person, and saying, 'We think something's happened to you – if you ever want to talk about it, we want you to know it's OK, and it's not your fault,' and just leaving that conversation open... Whereas before I think we haven't made good space for those disclosures to happen, but I think we are doing that better now." (PL, LA2)

The line manager of one Practice Lead said that staff were beginning to appreciate the importance of asking about CSA:

"It's helped overcome the fear that practitioners have in talking to children or families about any of this... that we might mess something up, when actually that's not the important part of the incident that's happened. The important part is making sure that person is OK and can come through that." (LM, LA2)

One Practice Lead was talking to different teams to improve the assessment of young people displaying harmful sexual behaviour

<sup>6</sup> AIM assessments are undertaken with children and young people who display harmful sexual behaviour. See [www.aimproject.org.uk](http://www.aimproject.org.uk) for more information.



Some of the Practice Leads described situations where the learning from the programme appeared to have had an impact on their colleagues' practice:

"I had an assessment through from one of my support coordinators, of a male who had disclosed historical abuse while he was in the Army, and I don't think that would have been in an assessment a year ago because I don't think they would have been thinking about it." (PL, LA1)

"It's actually written in there now that sexual abuse can't be ruled out. I don't think it would have been written in there previously, in that sense, because it would have been, 'There's not enough to say it definitely is, so we're not going to write it in there'... And it's actually gone to court with that in there." (PL, LA1)

And line managers gave examples of how they were using, or planning to use, learning from the programme:

"I facilitate professionals' meetings involving large number of professionals and have used some of those resources in facilitating conversations." (LM, LA1)

"I am leaving the team but I can take the learning to the south of the county, which is positive." (LM, LA2)

Some Practice Leads felt that a shift in awareness was beginning to happen around them:

"We're just starting to make people think in a different way about things. 'Statistically, within our whole service, you're telling me there's not one person who's been sexually abused?'... Just having that conversation is enough to get people thinking." (PL, LA1)

"I presented a session about the prevalence of child sexual abuse and online offending to newly qualified social workers and student social workers. This led to a discussion around other children who may be under-represented, such as young children, disabled children and young people, BAME communities and religious communities." (PL, LA2)

### 5.3.2 More children and young people identified as at risk of or experiencing CSA

It was suggested that the programme was beginning to have an impact on the numbers of children and young people being identified as at risk of or experiencing CSA:

"I have noticed that numbers have gone up on child protection plans for CSA." (LM, LA2)

"We've had quite a number of disclosures since." (PL, LA2)

There was recognition that the increases could have resulted from other work that the local authority was doing around sexual abuse. Nevertheless, Practice Leads who held roles chairing Child Protection Conferences said that the learning they had gained from the programme had caused more attention to be paid to the presence of CSA in the cases being discussed:

"I'm more aware of these things now... I can question, 'What does that mean?' or 'Why are you not following through on this bit?' because I'm more attuned to it." (PL, LA2)

"I've actually overruled some professionals and said, 'Well, I'm sorry, the neglect is there, but sexual abuse is the primary concern here, and that was what the child should be listed under.'" (PL, LA1)



It was reported that Child Protection Conferences were paying more attention to the presence of CSA in the cases discussed



## 5.4 Reflections

Providing an in-depth programme focusing on CSA appears to have had a considerable impact on participants' knowledge, skills and confidence in identifying and responding to CSA concerns. Moreover, this evaluation suggests that these three outcomes are both interlinked and interdependent; the increased confidence demonstrated by participants is built on a foundation of in-depth, up-to-date knowledge and skills development. However, there were some outcome areas – notably around understanding medical examinations and the role of the police following disclosure – in which some Practice Leads felt less confident. This suggests that minor amendments could be made to the programme design, to strengthen knowledge in these areas.

The evidence of the programme achieving its immediate outcomes is strong and emerges in the feedback from Practice Leads themselves as well as from their line managers and the local authorities' Principal Social Workers. Nonetheless, the evidence would be strengthened by conducting follow-up evaluation activities to explore the extent to which these outcomes are sustained over time.

There is also considerable evidence of the Practice Leads disseminating their learning by supporting colleagues with CSA issues, sharing resources and delivering presentations to wider teams. Equally, there are some early indications that the programme may be beginning to have an impact on practitioners' response to CSA, which points to the programme's potential to effect longer-term change. Carrying out further evaluation activities (e.g. six and 12 months after the end of the programme) would allow more time for the dissemination process to evolve and for the Practice Lead role to become embedded, as well as providing an opportunity to explore the sustainability of the programme.

The evaluation did not look for, and consequently did not find, any evidence that the programme supports more effective liaison between agencies. It would be beneficial for this to be expressed more explicitly as an aim of the programme and evaluated in future delivery.



Feedback from Practice Leads and others provides strong evidence of the programme achieving its immediate outcomes



# 6. Embedding and sustaining the programme

This chapter considers emerging evidence of the role of the Practice Lead becoming embedded in local authorities, as well as highlighting factors that may affect local authorities' ability to embed and sustain the programme.

## 6.1 Evidence of the Practice Lead role becoming embedded

During the interviews and focus groups carried out at the end of the programme, some evidence emerged that the Practice Leads' role was becoming embedded within each of the local authorities, with some Practice Leads beginning to act as experts in relation to CSA cases. For example, some described how they were now being consulted by colleagues:

"Lots of people are aware that I'm doing this now, so managers will point social workers to me and say, 'Go and have a chat with M and consult her about it.'" (PL, LA2)

"People in the office are being pointed in my direction if they've had questions on the subject of CSA." (PL, LA2)

"I've come to recognise that I'm the resource, and that's what I've been encouraging other Practice Leads to recognise about themselves." (PL, LA3)

This had also been noted by some line managers:

"She is a point of reference for other people with anything to do with CSA... I've been looking at cases where there is a history of CSA so I can send them her way." (LM, LA3)

"They see her as the champion and people within the unit are going to her for advice." (LM, LA3)

## 6.2 Factors to address in embedding the Practice Lead role and cascading learning

The programme facilitator has begun working with all three of the local authorities to develop a plan for disseminating the knowledge gained by the Practice Leads during the programme:

"It is important for each local authority to have a plan around how the knowledge will continue to be shared after the programme finishes. This will maximise the likelihood of 'virtuous' cycles of learning continuing over time, where the local authority learning on CSA is sustainable in the longer term." (Programme facilitator)

However, the interviews and focus groups surfaced a number of considerations around the programme's development within local authorities.

### 6.2.1 Clarity around the role

Some Practice Leads drew attention to a need for greater clarity around their role once the programme had ended, explaining that the Practice Lead role was not something that "you can just bolt on" (PL, LA3). They recognised the importance of the commitment that the local authority had already shown towards the programme, but wanted to know how this would be sustained. It was felt that their role needed to be more visible, both within their teams and more widely:

"My team would not know that I've done this, I'm pretty sure." (PL, LA1)

"To be the lead practitioner, it's got to mean something. We will take the time to invest in the knowledge and research. Equally, it's got to be seen as an important role." (PL, LA2)

The need for line managers to be aware of the ongoing nature and extent of the Practice Lead role was also raised:

“I don’t think managers necessarily realised that it’s not just ‘attend the 10 sessions and then they all just disappear’, that it’s going to be carried on.” (PL, LA3)

“We’ve got to make sure that we don’t put too much on them, because they can’t and shouldn’t make management decisions for other people, and they’re not professional trainers.” (PSW, LA2)

### 6.2.2 Impact on workload

One line manager highlighted the challenges around making the most of the Practice Lead’s role when the demands on their time were already so high:

“I have T who has all this information, and can use it on her own caseload, but she’s an extremely busy social worker. And so, in terms of trying to roll that out, it’s a real challenge.” (LM, LA2)

The importance was recognised of ensuring that expectations were explicit from the outset around the Practice Leads’ ongoing role once the programme had ended:

“That might be a conversation, when we select the people, for senior managers in the local authority to be saying, ‘Actually, these people aren’t just going to be expected to go to a training, they’re going to be expected to be given the time and the space after the training to pass that information on.’” (LM, LA2)

### 6.2.3 Further training and support

Practice Leads highlighted the need to continue meeting as a group in order to share their knowledge and develop in their role:

“We want to carry on working as a group, supporting each other, having that check-in and sharing information; that’s our plan.” (PL, LA2)

At the time of the evaluation, Practice Leads in all three local authorities were making plans or had already begun to meet up regularly as a group to jointly plan activities and support each other:

“It feels important to continue to meet as a group of Practice Leads, and to have opportunities to share up-to-date research and practice.” (PL, LA2)

In addition, some suggested that it would be helpful to receive regular top-up training in order to ensure they remained up to date with the subject:

“It’s staying linked in. I think if there’s anything new to come up, or anything new identified within the service itself, maybe to have little courses on that, that we could tap into. For me that would be good, because then it just keeps it alive.” (PL, LA2)

Furthermore, the Practice Leads in one local authority were keen to receive ongoing, regular support from the programme facilitator, as they felt that this would enable them to deepen their knowledge and increase their confidence in the role:

“It’s almost like that whole... you go on training, then you go and shadow it, and then you have a go, but the person you shadow is there with you to make sure you’re on track.” (PL, LA3)

It was also noted that, while the Practice Leads had increased their own knowledge, skills and confidence around CSA, they might not be fully equipped to train others:

“Sam doesn’t necessarily feel that she’s able to train other people in it or pass it on as well as it was delivered, because obviously, Anna’s [the programme facilitator] done it a lot. She was brilliant.” (LM, LA2)

### 6.2.4 Organisational capacity to change policies and practice

Some feedback from Practice Leads highlighted potential issues for local authorities around the need to make wider changes to their policies and practice as a result of the programme. For example, one described how their recommendations to keep cases open had been met with some resistance:

“We were being told, ‘Close cases down,’ the ones that are going through a police investigation. And I was not making myself very popular by saying in management meetings, ‘This is why I can’t and we need to complete these assessments, so we can get the appropriate plan and interventions in place.’” (PL, LA3)

Practice Leads expressed frustration at the need to close cases on the grounds that there was no clear safeguarding need when the perpetrators, often other family members, were being prosecuted; they highlighted the need for support for the young people involved, who were still likely to be subject to media attention as well as complex family situations. While recognising that such cases could be referred to other agencies, they felt that the support available was often limited:

“We can refer them on to another service but it’s not quite the same, and there’s waiting lists. Especially if the family, who you’ve known for a long time, you’ve got a relationship, and to then say, ‘Okay, this isn’t a resolved situation in your life, the trial is in six months’, 12 months’ time, however long down the line, but...” (PL, LA3)

### 6.3 Ensuring sustainability

Practice Leads also emphasised the need for the local authority to continue supporting the work in the longer term:

“We don’t want it to become a stagnant thing ... that’s high on the agenda at the moment, and when the next thing comes along then we flip to something new. We want it to be a constant.” (PL, LA3)

In addition, some suggested that the programme should be repeated in their area, partly to ensure that more teams across the local authority could be involved and also to take account of workforce attrition:

“We already have one [Practice Lead] moving to a job outside this local authority. Evidently this will happen, and I think we would just see it slowly fading away in the next few years.” (PL, LA3)

It was also felt that training more than one person within each local authority team would be helpful, to ensure that the learning and dissemination could be shared:

“Having the knowledge resting with one person can be a bit constraining, in that the risk can be that everyone just goes to that person without developing their own practice. So it would be really helpful if we had a couple of individuals who feel more confident with it.” (LM, LA1)

### 6.4 Reflections

Given that the evaluation was carried out soon after the end of the programme in all three areas, it was encouraging to see some evidence that the Practice Lead role was already becoming embedded in local authorities. Further follow-up evaluation would be valuable in understanding how the role evolves and what enablers and challenges surface as this happens.

It is also apparent already that local authorities need to support the development of the programme, and in all three areas are already doing so, by:

- ▶ providing time for Practice Leads to meet up for peer support
- ▶ making plans for disseminating the learning from the programme
- ▶ ensuring that the Practice Lead’s role is visible both within their teams and more widely.

However, further consideration may need to be given to the ongoing impact of the role on Practice Leads’ workloads, as well as on local authority practices and policies.

While cascading learning is one of the key aims of the programme, it is recognised that knowledge can be shared in different ways; there needs to be flexibility in the methods by which Practice Leads are expected to disseminate the information from the programme to others, taking account of their own skills and confidence. Some may feel ready to deliver training while others may prefer to provide one-to-one support to colleagues.

Local authorities will also need to maintain a balance, between enabling Practice Leads to make use of their learning by taking on cases involving concerns of CSA, and allowing other staff to develop their skills by managing such cases.

Furthermore, there may be a need for the facilitator of the programme to maintain an overview, and potentially to actively support the dissemination process, in order to ensure the quality of the training and support provided by Practice Leads and further strengthen their ability to take a lead in addressing CSA.

# 7. Conclusions and considerations for the future

## 7.1 Conclusions

This evaluation of the CSA Practice Leads Programme in social work set out to explore a number of key questions around participation, engagement, programme design and delivery, in addition to considering the difference the programme has made and the factors that have influenced this.

Although the evaluation was carried out by the CSA Centre and cannot therefore be viewed as independent, it provides strong evidence of the programme's quality and value in enabling local authorities to improve their identification and response to concerns of CSA.

### *Need*

The need for the programme emerged clearly during the evaluation; before the programme started, participants described the individual challenges they were experiencing in responding confidently to CSA concerns, while local authorities acknowledged the difficulties they faced in maintaining a consistent response. These issues are likely to be common to other local authorities, which suggests that a programme helping social workers to identify and respond appropriately to cases of CSA will be relevant and useful to local authorities across the country.

### *Programme design*

By providing CSA-focused training that involved regular sessions over an extended period of time, the programme enabled participants to explore and gain in-depth knowledge about CSA. The reflective sessions appear to have been particularly successful in enabling participants to apply the learning to their own practice.

While the evaluation found that the value of the programme was also enhanced by the input from external agencies, it was clear that the value of these inputs was occasionally mixed, suggesting that the design of the programme may need to be adjusted to maximise the value of this aspect.

### *Delivery*

The evaluation found strong evidence of the high quality of the programme delivery: participants valued the approach taken to the subject, the mix of participative and reflective learning, the resources provided and, in particular, the facilitator's expertise and skills. They therefore felt able to engage with a deeply difficult subject in a safe and supported manner.

Nonetheless, it is clear that taking part in this kind of programme can have both a personal and a professional impact on the participants, who need to receive ongoing support both during and after the programme.

### *Outcomes and impact*

There was strong evidence of the programme's immediate success in increasing participants' knowledge, skills and confidence; this had enhanced their practice and positioned them as specialists within their teams and wider organisations. In particular, Practice Leads were starting to support others to overcome the fear and uncertainty that surrounds concerns of CSA, and, at times, were challenging them to ask direct questions and not let CSA concerns be put aside owing to lack of proof.

There were indications, albeit anecdotal, that this was beginning to have an impact on local authorities' culture and systems, which points to the programme's potential to effect this level of change. However, there was also some evidence of the wider challenges that this may present for local authorities – for example, in recognising the impact on Practice Leads' workload and on their own systems and practices.

Owing to the timing and limited scale of the evaluation, there was no attempt to assess the programme's impact on children who have been sexually abused. This is an area that should be addressed through longer-term evaluation.

### Critical success factors

The evaluation highlighted a number of factors (or ‘assumptions’, in a theory of change context) that appear to be particularly key to the programme’s implementation. In particular, it seems that successful delivery was underpinned by:

- ▶ selecting local authorities where there was **strong evidence of need** for the programme (e.g. low numbers of children on child protection plans for sexual abuse), and where senior leadership demonstrated strong support for the programme aims
- ▶ selecting Practice Leads who had the **motivation, experience, skills and capacity** to share their learning and become champions for change within their local authorities
- ▶ **strong support** from line managers and local authorities, both during and after the programme, to facilitate Practice Leads’ engagement and embed their role within their organisations
- ▶ a high-quality programme which was **evidence-based, relevant, up-to-date and in-depth**, delivered in a **positive, supportive and safe** manner
- ▶ **ongoing access to up-to-date research and resources** which enabled the Practice Leads to find relevant information quickly, both to increase their own knowledge and to support others
- ▶ the availability and **effective engagement of external agencies** with whom Practice Leads could liaise in the future when responding to concerns of CSA
- ▶ **ongoing opportunities for support** from peers and from the CSA Centre, enabling participants to continue disseminating their learning and developing in their role as Practice Leads.

Questions that remain for the future centre around understanding how well the Practice Leads are able to continue disseminating their learning, what support they require and what challenges this may present. There is also the risk that Practice Leads will be regarded as experts who should handle all cases of CSA, resulting in other social workers becoming deskilled. Above all, however, it remains to be seen what longer-term impact the programme has on local authorities’ response to concerns of CSA. It is, therefore, important to understand that this evaluation has demonstrated the quality and value of the programme in the short term, but that further evaluation will be needed to assess the longer-term impact and value for local authorities in investing in a programme of such depth.



It remains to be seen what longer-term impact the programme has on local authorities’ response to concerns of CSA



## 7.2 Considerations for the future development of the CSA Practice Leads Programme

The evaluation has highlighted a number of points that may help to enhance the delivery and impact of the programme. The CSA Centre will explore the considerations outlined below as it develops the programme further.

### *Recruitment and support for Practice Leads*

While the retention rate was high across all three areas, some feedback suggested that the recruitment of participants should take greater account of social workers' personal and professional situations, so that those selected are both fully committed to the programme and aware of the impact that it is likely to have on them.

Local authorities also need to actively support the recruitment process, by sending out adequate and timely information about the programme and ensuring that dates are fixed in advance of the programme's start.

Furthermore, the need for participants' line managers to attend the introductory session and have a good understanding of the programme's methods, content and aims should be highlighted during the process of selecting Practice Leads; this will ensure that line managers appreciate the importance of their involvement and the support that they can offer Practice Leads during the programme. In particular, line managers should be encouraged to discuss participants' learning and experiences of the programme in their regular supervision sessions.

If feasible, giving Practice Leads reduced caseloads during the programme would make it easier for them to manage the impact on their workloads and themselves, and would allow more time for them to develop and share their learning.

Ongoing support for Practice Leads needs to be embedded in the programme delivery. This could include end-of-the-day group debrief sessions, with opportunities for additional one-to-one support if needed, as well as a midway check-in by the programme facilitator with Practice Leads and their line managers to review progress and support needs.

Local authorities need also to consider the support that is needed for all staff dealing with complex issues around CSA.

### *Programme content and delivery*

An online central resource bank, specific to the programme and maintained by the CSA Centre, would enable resources to be shared effectively both during the programme and after it ends.

Clear guidelines around the input from external agencies, particularly around the need for speakers to have experience of delivering training, would be helpful.

More focus could be placed on establishing strong links between Practice Leads and external agencies, which can be maintained after the programme ends.

### *Evaluating the programme in the local authorities*

Where possible, the evaluation of the programme should be continued through follow-up activities to explore the extent to which the programme's outcomes are sustained and evolve over time, and to consider the programme's effectiveness and sustainability over the longer term. This should include assessing the impact of the programme on children who have experienced CSA.

In addition, as the programme moves out of its pilot phase, its monitoring processes should be reviewed to ensure they are proportionate.

Consideration should be given to carrying out an external evaluation of the programme, to assess its quality and effectiveness independently.



### *Embedding the programme*

Practice Leads should be supported by their local authorities to continue deepening their knowledge and disseminating their learning after the programme ends. This could involve ongoing regular opportunities for peer support (e.g. monthly meetings to discuss cases and plan joint dissemination activities).

Local authorities could also benefit from follow-on support to embed the programme – for example, through consultation on cases, facilitated group learning sessions or sharing of new research as it is published.

The Practice Leads could also be supported to develop other routes for disseminating their learning, such as through the use of teaching partnerships where these exist locally.

Some Practice Leads could be invited to become trainers/facilitators on the programme and support its future delivery.

Additional models of dissemination could be considered, such as a regional or organisational ‘train the trainer’ programme: Practice Leads could be selected to receive further training and support which would enable them to deliver training in their organisation/region.

### *Rolling out the programme*

The evidence of the need for the programme, and of its value, suggests that the CSA Centre should continue to offer a programme for social workers in other local authority areas. The evaluation has shown that there appears to be a real value in delivering a programme tailored to the social work context and bringing together practitioners with similar roles and backgrounds. However, rolling out the programme to other local authorities would be subject to resources being made available.

Furthermore, consideration will need to be given to the facilitation of the programme, in order to ensure that this is sustainable. In the context of delivering the programme in social work settings, the facilitator needs in-depth experience both in social work and in responding to CSA, in addition to strong training/group facilitation skills.

Consideration could be given to bringing in individual trainers/speakers to deliver some sessions of the course. However, it is important for there to be continuity in the programme facilitation as a whole: having one person facilitate the programme maintains coherence across the sessions and helps create a safe space for discussions.

It would be valuable to test the programme in other settings (e.g. police, education and health) in order to explore what modifications would need to be made to the programme’s content, structure and delivery, and to clarify whether the skills and experience of the facilitator need to be sector-specific.

Testing the programme in a multi-agency format would also be useful in assessing the benefits and challenges of bringing together practitioners from different sectors, and the wider impact this might have.

Finally, and particularly in the light of the impact of Covid-19 pandemic on current social work practice, the CSA Centre should consider how it can use virtual channels to support and develop the expertise of social workers in identifying and responding to concerns of CSA. This could include:

- ▶ running the CSA Practice Leads Programme as a series of online training modules
- ▶ offering a telephone and email support service for practitioners needing guidance around specific aspects of CSA.



The programme could be tested in other settings (e.g. police, education, health), to see what modifications would be needed



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# Appendix 1

## Programme outline

The design of the programme was underpinned by the CSA Centre’s ethos of keeping the child at the centre of everything we do. The programme began by exploring how sexual abuse happens, and this provided the context for the remaining sessions: intra-familial CSA came first, in recognition of its being the most common form of abuse with the lowest level of knowledge, followed by sessions on other aspects of CSA that were most relevant to social workers.

**Table A1. Training and reflection sessions**

	Session	Focus
	Introduction	Introduction to the programme; the challenges for social work practice; self-care in the work
1	Scale, nature and impact of CSA	Focus on cases of known CSA
	Reflective case discussion	
2	Disclosures and the social work role	Focus on cases of suspected CSA
	Reflective case discussion	
3	CSA in the family context 1: Offenders and offending	Focus on applying theory to cases of known or suspected CSA
	Reflective case discussion	
4	CSA in the family context 2: Working with children and non-offending parents/carers	Focus on work with non-abusing partners of alleged or suspected adult intra-familial offenders
	Reflective case discussion	
5	Children and young people who display harmful sexual behaviour	Focus on cases of harmful sexual behaviour in child or young person
	Reflective case discussion	
6	Child sexual exploitation	Focus on cases of known or suspected CSE
	Reflective case discussion	
7	Online-facilitated offending	Focus on cases where online-facilitated offending has taken place
	Reflective case discussion	
8	Women who sexually abuse children	Focus on cases where the alleged or suspected offender is female
	Reflective case discussion	
9	Working with survivors	Focus on cases where the parent/carer who is a survivor of CSA
	Reflective case discussion	
10	Child wellbeing and the child protection process	Focus on multi-agency input throughout the child care system.
	End of programme focus group	

# Appendix 2

## Evaluation data

The evaluation drew on data collected at different points in the programme and using a range of methods:

- ▶ Participants were asked to complete a statement of interest prior to joining the programme, in which they described their professional background, experience and motivation for becoming a Practice Lead.
- ▶ They were also asked to fill in a questionnaire at the start and the end of the programme. The questionnaire asked them to assign ratings to their knowledge, confidence and skills in relation to working with cases of CSA. All but one of the participants filled in the baseline questionnaire, but six of those completing the programme failed to fill in the post-programme questionnaire despite several requests to do so.
- ▶ Focus groups involving the programme participants, and interviews with Principal Social Workers in each local authority, were carried out by the programme facilitator at the beginning of the programme. These informed her understanding of local context and needs, and were subsequently used to inform the evaluation.
- ▶ The programme facilitator also conducted midway reviews with the Practice Leads' line managers midway through the programme, in order to discuss the Practice Leads' engagement with the programme and explore their line managers' perceptions of their progress. Not all line managers took part in these interviews, as some could not be reached. Some line managers managed more than one Practice Lead, so a single interview could relate to multiple Practice Leads.<sup>7</sup>
- ▶ During the programme, Practice Leads were asked to record the support they provided to colleagues. Not all Practice Leads did this, partly because some were not in a position to support colleagues during the programme.
- ▶ At the end of the programme, an evaluator from the CSA Centre carried out a focus group with the Practice Leads in each local authority, to explore their opinions of the programme and how useful it had been for them. Some Practice Leads were unable to attend this session; where possible, individual interviews with these Practice Leads were carried out.
- ▶ A small number of interviews with Practice Leads' line managers were carried out by the evaluator at the end of the programme, to obtain their views of the programme and perceptions of its effects. These line managers were selected for interview on the basis of their high level of engagement with the programme.
- ▶ Similar interviews were carried out with the Principal Social Worker in each local authority.
- ▶ The programme facilitator was interviewed at the end of the programme, to explore her experience of delivering the programme and perceptions of its effects.
- ▶ In addition, an attendance register maintained by the programme facilitator to record Practice Leads' participation in the programme, and a log of the one-to-one support she provided to Practice Leads during and after the programme, were analysed.

<sup>7</sup> In the third local authority, the programme facilitator also instituted midway reviews with the Practice Leads. These were not used in the evaluation, as their purpose was to check participants' wellbeing rather than review progress.

**Table A2. Summary of evaluation data sources**

	LA1	LA2	LA3	Total
Statement of interest completed by Practice Leads prior to joining the programme	7	11	11	<b>29</b>
Baseline questionnaire completed by Practice Leads	11	14	12	<b>37</b>
Baseline focus groups with Practice Leads carried out by the programme facilitator	1	1	1	<b>3</b>
Baseline interviews with Principal Social Workers carried out by the programme facilitator	1	1	1	<b>3</b>
Midway reviews with Practice Leads' line managers carried out by the programme facilitator	5	7	8	<b>20</b>
Forms completed by Practice Leads to record the support they provided to colleagues	7	5	3	<b>15</b>
Attendance register	–	–	–	<b>1</b>
Log of one-to-one support provided by programme facilitator	–	–	–	<b>1</b>
Post-programme questionnaire completed by Practice Leads	10	10	6	<b>26</b>
Post-programme focus groups with Practice Leads carried out by the evaluator	1	1	1	<b>3</b>
Post-programme interviews with Practice Leads carried out by the evaluator	0	3	0	<b>3</b>
Post-programme interviews with line managers carried out by the evaluator	1	2	0	<b>3</b>
Post-programme interviews with Principal Social Workers carried out by the evaluator	1	1	1	<b>3</b>
Post-programme interview with programme facilitator carried out by the evaluator	–	–	–	<b>1</b>

# Appendix 3

## Evaluation framework

The evaluation framework set out the programme’s aims and outcomes, listed in Table A3, as well as indicators and data collection methods for each indicator.

It also covered the processes involved in delivering the programme, as shown in Table A4.

**Table A3. Programme aims and outcomes**

Aim	Outcomes
To develop the knowledge, skills and confidence of social workers to act as Practice Leads in identifying and responding to CSA	Practice Leads have improved knowledge and understanding of CSA and how to identify and respond to it
	Practice Leads develop their skills and become more confident in identifying and responding to CSA
	Practice Leads are more aware of local and national services
To enable Practice Leads to disseminate their learning throughout their teams/organisations	Practice Leads apply their learning and improve their own practice in identifying and responding to CSA
	Practice Leads feel more able to share their learning with others
	Practice Leads are better supported to disseminate their learning
	Practice Leads disseminate their learning to colleagues and teams
To enable local authorities to develop a culture of learning and development which supports ongoing best practice in CSA	Local authorities make changes to their policies and practice in relation to CSA
	Local authorities embed the role of Practice Lead within their organisation
	More effective liaison with other agencies


**Table A4. Programme delivery processes**

Processes	Process indicators
Programme design	How the programme was designed and why
	How the programme was modified and why
Recruitment and profile of local authorities	Which local authorities took part and what was their local context
	How local authorities were recruited and what attracted them to take part
Recruitment and profiles of Practice Leads	How many Practice Leads were recruited and what were their professional backgrounds
	How Practice Leads were recruited and what attracted them to take part
Engagement and retention of Practice Leads	How much Practice Leads engaged in the programme
	How many Practice Leads completed the programme
	Why Practice Leads did not fully engage in or complete the programme
	What helped Practice Leads to engage in and complete the programme
Support for Practice Leads	What support was provided to Practice Leads during and after the programme
Resources needed for programme delivery	What resources were required to deliver the programme
Quality of delivery	What Practice Leads thought of the quality of the programme delivery
Meeting need	How well the programme met Practice Leads' needs
	How well the programme met local authorities' needs
Enablers to programme implementation	What factors supported the programme's implementation
Challenges to programme implementation	What factors made it more difficult to deliver the programme

The logo features a vertical rectangular background with a geometric, low-poly pattern. The colors transition from dark blue at the top to light green at the bottom. The text is white and positioned on the left side of the rectangle.

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