

## Ask the Experts 4

Kirsty Ayakwah:

Hello. My name is Kirsty Ayakwah, senior careers editor at Community Care. And welcome to another episode of *The Social Work Community* podcast mini-series, called *Ask the Experts*, where we put your career dilemmas from social workers to a panel of experts.

In this episode, we respond to a question from an experienced social worker who works at a local authority but is considering a switch to a hospital setting. [0:00:29.1]

Hello everyone, and thank you very much for joining us. My name is Kirsty, and I'm joined by our three experts, Dame Lorna Boreland-Kelly, Claire Barcham and Kayleigh-Rose Evans, who collectively have around 60 years of social work experience between them. So we're in good hands. Thank you so much for joining us again.

Before we jump into the introductions, I just want to remind those of you listening or watching that if you have any burning questions you'd like to share with our experts, please email us on [careersadvice@markallengroup.com](mailto:careersadvice@markallengroup.com). Please try and give as much detail as you can before you respond so that we can make sure that we give you as much help as possible.

And if you want to speak with peers in your community, we've got a network called *The Social Work Community*. It's a free, gated community for social workers which is designed to cater for those at the beginning of their careers, those on the cusp of qualifying, and those experienced practitioners with many years in the sector. So you can join by registering at [www.thesocialworkcommunity.com](http://www.thesocialworkcommunity.com), which connects you with a host of social workers.

And if you're on *The Social Work Community* already, you'll find our episodes with these experts there too.

Now, back to our illustrious panel. I'm going to start with you, Dame Lorna. Now, Dame Lorna has over 30 years of experience in the sector as a practitioner, a manager and workforce development lead. She brings a wealth of experience as head of service at various authorities, and has established social work academies across the country. She's currently chair of a charity that is very much focused on supporting young people and amplifying their voices. So welcome, Dame Lorna.

Now, like Dame Lorna, Claire has around 30 years of experience in the sector too, initially qualifying as a generic social worker, to working as a specialist, including as a mental health social worker, and more recently managing an emergency duty team. Claire currently delivers training in children's schools and for approved

mental health professionals. She also works for the Association of Directors of Adult Social Services in the area of policy, and is passionate about trying to join together both the practical experience of being a social worker and the policy work at a national level. So it's great to have you here, Claire. [0:03:05.4]

Claire Barcham:

Lovely to be with you, Kirsty.

Kirsty Ayakwah:

Thank you. And Kayleigh, Kayleigh is an accomplished social worker, practice educator and best interests assessor specialising in adult's services. She holds a Master's degree in professional development in social work, and is dedicated to advancing the field through education and advocacy. Alongside her social work practice, Kayleigh works as an independent trainer, sharing her knowledge and experience with others in the field. She also shares valuable advice and relatable educational content and reflections on social work through her popular YouTube channel, which is also called Kayleigh-Rose Evans. So it's great to have you here, Kayleigh. [0:03:51.8]

Kayleigh-Rose Evans:

Thanks. Great to be here.

Kirsty Ayakwah:

Brilliant. And for those of you who follow our *Social Work Community* podcast, you'll hear Kayleigh. She's on our podcast with another social worker called Lisa-Ann Edwards, and they're talking about the benefits and challenges of being a locum versus being a permanent member of staff. So please check that out.

So, I'm going to kick off with the first question, which I've heard a few times from social workers that are considering working outside of a local authority setting. And in this question, the social worker is experienced. They're considering a career in the NHS but want to know your thoughts on the benefits and drawbacks of working in the NHS compared to working in a local authority.

So I want to see if I could put that question to maybe Dame Lorna first? [0:04:40.8]

Dame Lorna Boreland-Kelly:

Okay. When I read this question it took me back many, many years when I was head of service in a local authority, and part of that responsibility was managing the hospital social work service. And there was a very able social worker in that hospital who, incidentally, I had recruited previously to work in another part of the service. And he has now gone on to be a professor in social work and may well see this. So I hope I will do the response in his honour good justice.

So he came to me and said, 'I just want you to know, I want to thank you for the support you've given me and this is my next career plan. I'm applying for this job. What do you think?' And it was to work directly with a major teaching hospital as a social worker employed by them. They'd had a bit of a difficult relationship with having hospital social workers from the two local authorities that covered their area, so they'd decided to recruit their own senior social worker.

I looked at the job advert with them and everything they'd put in it. I looked through it with him, and I said to him, 'Now, this exercise that we're doing together, it's very crucial. Because you need to look at what it is they say they want you to do. When you look at the role

functions and so on, and when you go for your interview – because I know there's no question that they'll shortlist you because you're very able and very talented – when it comes to the bit where they ask you about what questions do you have, your first question to them is, "Tell me about how you will support my continuous professional development." Your next question to them will be asking them – and this is non-negotiable – to talk to you about how you will have independent social work supervision. Because in the hospital, and from the medical side, clinical supervision is very important but it's not social work supervision.' And that was my advice to him. And I armed him with that and it served him well.

When he got the job, before he accepted the offer I sat down with him again and made sure that he had sorted out things like his pension, because his local government pension was not transferable to the hospital Trust, which I didn't know at the time – it surprised me. But you know, I asked him about his, you know, 'I know you're very young,' I said to him, 'but you'll need to start to think about your pension and so on, 'cause you've built up your local government pension scheme.'

So I spoke to him about his pension. I spoke to him about making sure that his continuous professional development was what they had promised during the interview. I made sure that he had worked out how they were going to support him to get independent supervision. The local authorities...had it been my local authority, I would have been happy to play ball and to offer to do supervision via the local authority, one of the local authorities' team. But both local authorities covering the hospital, they were not flexible enough to do that. And so I advised him to go down the independent route.

So I guess what I'm saying is, there are advantages and disadvantages but you can make the disadvantages become advantages and work in your favour. And when I last saw him about four years ago – at Community Care Live, incidentally – as I said, he's now a professor in a university, and he has said that he's always taken that advice about his continuous professional development and his supervision along with him. Hence being at Community Care Live!

Kirsty Ayakwah:

Thank you so much, Dame Lorna. And really good advice there. It's really crucial to keep up with your CPD. So that's fantastic. Claire, can I follow that up with you? Have you got anything else you'd like to add? [0:09:24.0]

Claire Barcham:

I think Lorna's made some really crucial points and I'm not sure about Kayleigh but I've certainly worked in both organisations. I've worked for health and I've worked for the local authorities. And these days you can switch your pension from one to another, although I can't advise you on that. Definitely get some more advice.

And I have to say, more social workers are working in the NHS, and particularly in mental health but probably in other areas as well. And some of the advantages people talk about is being able to focus on a particular area of work. So, being clear about what the job is you're going to do is really important. And I think the NHS is recognising the value of social work skills. The disadvantage can be isolation. Your

social work family that you're used to in the local authority, there'll be a different experience in health. You will have to be able to develop and maintain your own sense of your own professional identity. And that's where supervision and a peer group of other social workers becomes really important, because I think we underestimate – I certainly underestimated before I went into health – how differently I thought about the world. So I thought about the world as a social worker and I went into it looking at the person as a whole person, whereas my health colleagues were much more likely to be looking at the person from a particular health lens, so the thing that was wrong.

And also, having a different view of things like the way we use ourselves as social workers. We use ourselves and our experiences to engage with people, to get alongside them, to understand them. And we make informed decisions about what we share as a consequence about ourselves. Now, that can be quite alien to some health professionals where there is much more of a sense that you don't share anything. And that can feel really conflictual at times. But I think once you realise that actually it's about a different professional approach, it can be really helpful. So don't not go, but go with your eyes open and make sure you get the support in place to continue to help you develop. And if you want to be something like an AMP and you're going into a mental health trust because you're feeling the conditions are better, just make sure that your local authority and the Trust have a relationship that will allow you to train. Because that's the other thing to be conscious of, is depending on the relationship between the different bodies, you may get more or less access to some of the training opportunities that you would get automatically as an employee of the local authority.

Kirsty Ayakwah: That's really useful. I think one thing that I wanted to explore just before – and Kayleigh, maybe you can respond to this – is this idea of when you're a social worker you're bringing your whole self and all of that experience, whereas if you're working in the NHS it's a different approach. [0:12:31.9]

Claire Barcham: Shall I start, Kayleigh, and then you can join in?

Kayleigh-Rose Evans: Yes.

Claire Barcham: I think yes. I think we bring something very special to that because actually we bring that sense of improved engagement and the lack of 'them or us'. So we are also the people who use services. We are also the people who need help and support. And that ability to express that humanity, I think, is part of what helps us to engage with people and get alongside them, whereas I think, depending on the approach of health colleagues, it can feel quite critical in that, 'Oh well, you just need to do that, you just need to lose weight, you just need to, I don't know, change your whole lifestyle.' And actually, I think even health colleagues appreciate that that...just telling people, that's not going to change anything. You have to help people. You have to understand why people are behaving in a particular way and then help them to think of an alternative way.

Kirsty Ayakwah: Kayleigh? [0:13:36.4]

Kayleigh-Rose Evans:

It's important to have social workers, you know, working with the NHS or for the NHS, I'd say. But that only works well if you feel that your professional identity is maintained. Because there are situations you get in as a social worker working alongside the NHS where you can feel isolated or you can feel like you're the only one saying a certain thing. So quite often, you find yourself in a situation where you're advocating for people's rights because maybe physical safety is being seen above all else. And with the Care Act and the things we work within, we have to take that holistic view. And we're all working within the Care Act. So it's just that our training is very specific on that, and that we have to consider all aspects of wellbeing on an equal level. And sometimes when you're sort of calling that out in a room or a big meeting, sometimes that can be difficult. And having spaces for reflection and reassurance that you are doing the right thing and you're not just holding things up unnecessarily or that you're just, you know, trying to be difficult on purpose can be really important. And it shapes you and it makes you feel, 'Yes, I am on the right track.'

And that's why some of the training that we get as social workers is so important as well. Because often the legislation backs us up and we need to maintain that knowledge and up-to-date sort of awareness. And as a social worker working for a local authority, you do just get that training and you have to keep it up-to-date. If I was working for the NHS, like the others mentioned, I'd just want to be assured that I could still access that training, whereas with the NHS a perk is that sometimes getting promoted into management can be an easier transition because the types of training they have available for that sort of thing is better, potentially, than what the local authorities provide. Sometimes going from a social worker to a manager in a local authority can be a big jump or you feel like you're just learning from experience, whereas speaking to some people that are working for the NHS, they've had different types of training that have maybe made them feel more prepared. And some of their training, looking at statistics and things, has maybe made them feel more confident in that sort of work as well, 'cause it is different to social work.

So there's benefits and drawbacks to the different types of training you'll be offered, and potentially the different types of opportunities you'd get as well.

You learn a lot working with the NHS because they have a different skill set, and sometimes it can take a lot of frustration away because you're actually working with the other professionals. So rather than you being in isolation with a load of social workers from that information, you're directly there with them. So it takes away a lot of barriers.

There's definitely a lot of benefit, but only if you keep your own identity, I'd say. [0:16:29.7]

Dame Lorna Boreland-Kelly:

Kirsty...

Kirsty Ayakwah:

Really valuable.

- Dame Lorna Boreland-Kelly: ...yeah. What I'd like to also bring in here is that we mustn't forget that there are many social workers still who are employed by local authorities who are working in hospital settings, and we must remember the value that those social workers bring to the wider hospital teams. Having managed those services, I think that we must always remember that. And I'm going to be very sort of 'old Jamaican' here and say the grass isn't always greener.
- Kirsty Ayakwah: I think that is also valuable. I was going to say, do you maybe think that there's value in doing something like, for example, Kayleigh and Claire have worked in that hospital setting but stayed within local authority? Then you get a chance to understand what it's like in health and you've not made that massive leap. [0:17:24.6]
- Dame Lorna Boreland-Kelly: I think it's very valuable. I mean, my first advice would be, before making the switch, I wouldn't go straight into, for example, being a newly qualified social worker in a health setting. You run the risk of losing your professional identity and a whole host of other pitfalls. So I would say first of all that it's very valuable to have had that local authority experience. And possibly, you know, I started off working across what was then called child psychiatry, which is now CAMS. So there's lots of different NHS settings both for children and adult social workers, and we mustn't forget the valuable role that child and family social workers bring to hospital settings.
- Kirsty Ayakwah: Absolutely. And Kayleigh, were you going to add something there? [0:18:19.3]
- Kirsty Ayakwah: I was just going to say I am actually a hospital social worker right now. So I get what people are saying. I do feel like I'm respected in that office, you know, amongst the rest of the team. But I believe that, you know, it took time to establish that. And I think sometimes in these settings it does take time.
- But I agree with what Lorna's saying. Like, I think being in a generic...or being amongst other social workers is really important at first. I think you could feel very isolated. Or maybe you wouldn't get a sense for what was important in your role if you went straight into that.
- Also, your role might not be social worker. It might be something like mental health practitioner or care coordinator. You have to be careful that you don't get watered down or that you feel like you're being pressured to do things that are outside of your remit.
- So, some people said they had a situation where it was kind of seen like, 'Well, if you're not doing injections when we're under pressure to do them or jabs and things, like, what really is your value? We're all under pressure in here.' And it's like, 'Well, it's not my background. Like, I'm not medical.' So sometimes things like that could be more difficult. But if you've worked in a local authority already you kind of know your boundaries. 'Cause that takes time to learn. You wouldn't know that straight out of university, where you stand with that.
- Kirsty Ayakwah: Yeah, it does sound like it's not something that you would immediately transition into once you've just qualified. And that actually reminds me of a social worker who wrote into our *Choose*



*Social Work* campaign. So we did that last year, and she's actually a social worker in an NHS Trusts. And she talked about some of the things that you've all mentioned, but one of them was she'd got to a certain point in her career in local authority and she was trying to move up to become head of service. That was proving to be difficult. She was very experienced. So I think she was able to transfer that skill. She applied for a job at an NHS Trust and got it, where she hadn't at a local authority. But she was talking about maintaining her identity, her professional identity, and I think that's easier to do when you've had that experience of working in the sector and, you know, sort of I guess challenging that in lots of different spaces.

But she basically was saying that it was a leap of faith for her to do that because she was settled and, you know, working in a local authority. And it takes a lot to maybe move into another area that maybe you're not familiar with.

But I just wanted to leave us with just a little bit of what she said, 'cause I thought it was really powerful. She basically said, 'I took a leap of faith and applied for a head of social work NHS role and was successful. It was a difficult transition with a huge amount of growth and learning. Social work is a profession that has a huge number of opportunities, not only frontline but internationally, academically and in leadership. The world is your oyster. If you ever feel stuck, be bold enough to try something new.'

I thought that was quite inspirational. She works in adult safeguarding and mental health. So you did mention about mental health as an area that some people go into. But I thought I'd maybe share that with you and also everyone who's listening, yeah. [0:21:39.6]

Claire Barcham:

My last inspirational thing is I'd say that I actually became a better social worker being in health because it made me really think about what my identity was and why what I did was different from my colleagues, whereas actually within the local authority you just presume everybody understands it. So I think there is something...can be something important about being able and willing to actually say, 'Yes, this is what I do that is different but actually it's really valuable, it's really valuable.' You know, I can't give anyone an injection but the way in which I approach people is valuable and I will manage some of the complexity and some of the risk that other health professionals might find more challenging.

Kirsty Ayakwah:

Really powerful. So hopefully we've been able to answer that question for that social worker. And thank you so much to all of you today for just sharing your experiences, your guidance, your advice. So hopefully it's been useful.

So just to remind people in case they've forgotten, if they have a career dilemma please get in touch. You can do that by joining us on *The Social Work Community*, signing up, and also sending us an email. As I said, the email address is [careersadvice@markallengroup.com](mailto:careersadvice@markallengroup.com). And we'll be back next time for more career questions and dilemmas. Thank you so much.