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Through a case study of a London borough's children's social services department (CSD), this article highlights themes concerning the reorganization of children's social care provision. Reorganizations have been driven in part by tensions between the desire of social work professionals to maintain their autonomous modes of working, versus an increasingly managerialist outlook of more recent government initiatives. The acceptance and incorporation of managerialist ideals into working practices may be driven by a climate of greater risk aversion, leading to creeping risk management across CSDs.

In 2008, a serious case review into the death of Peter Connelly—'Baby P'—in London (Department for Education, 2010a), who was abused and ultimately killed by his mother and her partner, was published and widely reported in the media. This case is the latest in a long line of tragedies where the actions of local institutions in England, including social services, the National Health Service (NHS) and the police, have been examined. A revised review published in 2009 (Department for Education, 2010b) concluded that Peter's death could have been prevented and that the responses of local services were not sufficiently effective. Rustin (2004) notes the ubiquity of public calls for significant institutional reform to improve local authority services every time a tragedy occurs. Since the Children Act 1989, the current legal cornerstone of the child protection system in England, volumes of guidance and policy prescriptions have been issued by central government to ensure the implementation of the principles outlined in this act by local authority children's services departments (CSDs). Alongside this, an infrastructure for the assessment and inspection of local services has been built to enforce compliance. Yet Lord Laming's report (2009) on the protection of children in England laments that CSDs are still not implementing this policy and legislation as required (p. 7).

The provision of social care for children is an emotive topic, as the high public visibility of the consequences of organizational failings among CSDs in England ensures constant political involvement and reform. This article provides a sketch of the main organizational issues facing CSDs and aims to introduce themes for further research. In particular, we focus on how New Public Management (NPM) inspired ideas have been used in more recent attempts to reorganize CSDs in England along the lines of a more managerialist model, in contrast to existing modes of operation revolving around more traditional notions of the profession, detached from management. Our observations and conclusions are drawn from a case study involving Westminster City Council's CSD.

In the academic literature, Llewellyn (1998) discussed the boundary work in UK social services, where initial attempts to resist the merging of costing work (seen as the domain of managers) with caring (the domain professional social workers) had succumbed to a gradual alignment of the two as the roles of social workers begin to hybridize. Llewellyn (1998) attributed this role hybridization (i.e. incorporation of cost considerations into caring work) to the unique characteristics of social work. These include an undervaluation of the nurturing work provided by such feminized professions, its exclusive dependence on the state for customers, and difficulties among the social work professions in demonstrating its contribution relative to other professions (*op. cit.*, pp. 27–28). These characteristics make it more difficult for successful outcomes to be defined and evaluated, and weaken the profession's ability to resist incursions into its epistemological base and working practices. Contrast this to stronger professions such as accounting, law and medicine, which are much more able to defend their professional status and assert the high value of their work (Suddaby *et al.*, 2007).

The tension between professional versus a more managerialist approach (and its various shades of hybridization in between) is an important topic within the study of organizations. Organizational theorists (Greenwood and

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Hinings, 1993; Kitchener, 1998; Dent *et al.*, 2004) developed models (archetypes) to represent the evolving structures of organizations experiencing such tensions. We use this literature as a theoretical lens with which to illuminate the impact of frequent pressures for reorganization within CSDs in England. In heeding clarion calls for academics and practitioners to work together in developing shared understandings of organizational issues, we begin the task of addressing the perceived disconnect between academic and practitioner work (i.e. the 'relevance gap' highlighted by Orr and Bennett, 2010; Walker, 2010).

The emergence and reorganization of CSDs

Our starting point is the impact of the most recent legislation, the Children Act (1989, 2004) on the reorganization of CSDs. Prior to 1989, social work was more generic and professionals worked with a range of clients including children, the elderly and those with mental health difficulties. The Children Act 1989 was a significant milestone in the development of children's social work as a separate professional discipline from adults' social work. The Children Act 2004 reorganized social work by separating the management of children's and adult social care. CSDs emerged for the first time from social services departments (SSD), which involved the merger of children's social services with local authority education services.

In this article, organizational changes are considered under three dimensions (see table 1). Reform initiatives affecting operations at the level of the entire organization and/or field are included under 'strategic guidance'. 'Case work guidance' represents initiatives affecting operations at the level of the individual(s) social worker. The third dimension represents initiatives affecting the audit regime, and is included under 'assessment and inspection'. These dimensions are useful because they indicate the scale and location of impact from various initiatives aimed at reforming children's social services.

Strategic guidance
Initiatives included under this heading are compulsory and often of a rather prescriptive nature. However, the directions imposed by such initiatives are at a more strategic level and leave some scope for local interpretation and implementation. The Quality Protects (QP) programme (DH, 1998) reflected a shift towards a more overtly managerial agenda, where, in exchange for additional resources, managers had to provide information on the development of strategic plans, management information systems and the collection of quantitative performance data. The Every Child Matters programme (HM Government, 2004) directly relates to the implementation of the 2004 Act, and promotes a broader strategic role for CSD and places greater emphasis on the prevention of harm to children. The Working Together programme (HM Government, 2006) sets out how multi-agency working should be co-ordinated to safeguard children. This included the requirement to co-ordinate Area Child Protection Committees (ACPCs) to bring together various public agencies working with children at risk of harm. The latest version of Working Together has replaced ACPCs with Local Safeguarding Children's Boards (LSCBs).

Case work guidance
Here, we traced the development of reforms related to the assessment of individual cases and the procedures professionals are required to follow. The 'Orange Book' (DH, 1988) and the Framework for Assessment (DH, 2000) are very detailed and are generally prescriptive guides to the completion of assessments of children in need and their families. A database of children's social care, the Integrated Children's System (ICS), builds on this approach. The ICS requires professionals to follow the prescribed process and leaves very little room for local interpretation and implementation. In this sense, it can be seen as an attempt to micro-manage day-to-day practice (Calder, 2004; Garrett, 2005; Munro, 2005; Tregeagle and Darcy, 2008).

Assessment and inspection
Since the mid 1990s, a significant infrastructure for the assessment and inspections of CSDs has evolved. Inspections were originally carried out by the Social Services Inspectorate (SSI) which was a part of the Department of Health (DH). By 2004, the responsibility for inspection was handed over to the newly-formed independent body— the Commission for Social Care Inspection (CSCI). More recently, this responsibility has been handed over to the Office for Standards in Education, Children's Services and Skills (Ofsted). Over time, the inspection process has become more rigorous and taken place more frequently. Following the recent Laming (2009) report, annual unannounced inspections of CSDs' duty and assessment teams are now taking place. Over this same period, a performance measurement system that has enabled comparison between CSDs has evolved. This began with the introduction of the Performance Assessment Framework linked to the QP

Table 1. Chronology of key events in children's services.

	Key legislation	Strategic guidance	Case work guidance	Assessment and inspection	Selected serious case inquiries (from press)
1988			Protecting Children (the 'Orange book')		Gavin Mabey
1989	Children Act 1989				Liam Johnson, Stephanie Fox Doreen Aston
1991		Working Together 1991			
1992					Leanne White
1994					Rikki Neave
1996				Joint review teams established in SSI	
1998		Quality Protects Programme		Performance Assessment Framework	
1999		Working Together 1999			
2000			Framework for Assessment		Lauren Wright
2002				First star ratings of social services	
2003					Victoria Climbié
2004	Children Act 2004	Every Child Matters		CSCI established	
2005				APAs and JARs begin	
2006		Working Together 2006			
2007			Integrated Children's System	Ofsted take on inspections of children's social care	
2008					Peter Connelly
2009				Unannounced inspections begin	

programme (DH, 1998) and developed into the publication of star ratings and annual performance assessments (APAs).

Selected serious case inquiries
This column represents the most media-prominent cases in children's services. These are some of the cases that provoked significant public reaction leading to government intervention (Rustin, 2004), and therefore had a profound effect on the reform agenda. For example, the Children Act 2004 and the accompanying Every Child Matters programme are the outcomes of the inquiries following the death of Victoria Climbié. The report by Lord Laming (2009), and the current soul searching among children's services professionals, follow on from the inquiry into the death of Peter Connelly in 2008.

Method
We collected both primary and secondary data for our research. Our primary data consisted of eight interviews conducted in the summer of 2009 with senior children's services professionals from Westminster's CSD. The interviews seek to understand how government reforms have been interpreted and implemented within an organization—this illuminates the process of institutionalization and helps us challenge any functionalist assumptions (Cooper and Robson, 2006). Westminster was an attractive case study because of the availability of a long-serving senior

management team. All of our interviewees had worked in children's services for a minimum of 20 years, and Westminster's CSD has had a relatively stable management team and has been judged to have performed well by external inspectors. However, we do not assume that Westminster's CSD is a typical English CSD— this is not the intention of our research. Rather, the relative permanence of our interviewees at Westminster enabled us to secure valuable historical insights in what is typically a high turnover work environment.

Half of our interviewees had experience at executive level and the other half were experienced senior managers. We coded their anonymous responses as Director 1 to 4 and Senior manager 1 to 4. Our interviews focused on uncovering the dominant ideas, beliefs and values (the interpretative scheme) of directors and managers and understanding how these relate to structures, systems and decision-making. Interviews were semi-structured and were based on an adapted version of Greenwood and Hining's (1993) interview guide—see table 2. Our questions focused on eliciting participants' knowledge and impressions of organizational change within CSDs in England. All interviews were recorded and transcribed in full. Our secondary data consisted primarily of government publications, which provided a general understanding of the nature and weight of reforms that local authority CSDs have to respond to. This helped us to understand the

organizational field of children's services.

Evolving structures in the provision of children's social services

Asked to reflect on the development of management structures over the past 20 or so years, all interviewees confirmed that the current management structure was significantly more centralized and hierarchical. In addition, interviewees also mentioned that the number of specialist functions had grown and roles were now more clearly defined, describing the situation pre-1989 as the era of a more generalist area manager. Area managers covered specific locales within Westminster CSD's jurisdiction and were responsible for a wide range of services covering child protection, care for the elderly and mental health services. These teams were largely independent and each area manager had sufficient autonomy to pursue his or her own agenda. Our interviewees consistently stated that this was an ineffective way of working and not suited to current challenges:

> *Those area managers had a lot of autonomy about how they employed resources and I don't think there was any planning that went into the distribution of resources across those…areas* (Director 4).

The shift away from generic area-based social services towards a clear separation of children's and adults' services seemed a logical progression to those interviewed. The separate challenges laid by the Children Act 1989 and the NHS and Community Care Act 1990 have led to the social work profession responding by increasing their specialization, and marked the gradual development and maturation of children's social work as a separate profession. The Children Act 2004 formalized this split.

Interviewees were also generally positive about the reforms required under the Working Together programmes (DH, 1999; HM Government, 2006). However, the QP programme as seen to represent a more radical challenge. The spirit of the QP programme aligns more closely with the managerialist (NPM) agenda. However, a number of those interviewed were generally positive about this initiative, as it introduced a more structured way of working, reducing the potential for inconsistent working practices:

> *QP was a very powerful initiative…I thought it was a better way of working, because for the first time ever you [have] to articulate exactly what social workers should be doing and achieving* (Director 1).

> *I think the outcomes framework and all the QP indicators…took autonomy away from the social worker. But actually that might have been quite a good thing [as] that could also be a disguise for bad practice* (Director 4).

Taken as a whole, the changes outlined in table 1 can be seen to represent typical NPM transformations outlined in Hood (1991), which are characterized by: increasing hand's-on professional management; incorporation of performance measurement systems and control of outputs; greater use of competition as a motivational tool; and an emphasis on private sector styles of management (Dent *et al.*, 2004).

Professional autonomy, the managerialist agenda and hybridization

In common with trends elsewhere in the public sector (Miller *et al.*, 2008), many managers have accepted the need to reconcile their professional autonomy with broader managerialist trends associated with NPM reforms—such reconciliation indicates an acceptance of the need for hybridizing roles incorporating both elements from the profession and more managerialist outlook (Kurunmäki, 2004):

> *I don't think you can be truly professional without*

Table 2. Semi-structured interview questions.

Section	Illustrative questions
Structures and systems	How have management structures changed over the past 20 years?
	Have the roles and responsibilities of managers changed over the past 20 years?
	How much autonomy do social workers have now compared to 20 years a go?
	How have government requirements and guidance been responded to?
	How well have reforms been implemented?
Ideas and values	Have government reforms been helpful?
	Do you think children's services have improved over the past 20 years?
	Do you think reforms have changed the ethos of children's services?
Serious case inquiries	How do these cases affect social workers and their managers?
	How have senior management responded to the findings of these cases?

your managerial responsibilities and I don't think you can be a good manager without having a strong professional background. It's really trying to bring the two together (Director 1).

The pragmatic outlook in the quotation above also extended to assimilating new systems and decision-making processes that have emerged over the past 20 or so years. We found general support for NPM systems such as performance management systems. However, this was often qualified by interviewees conscious that there is insufficient reflection in the rush to implement such systems:

> *There's nothing wrong with the right targets and…with measuring what you do, whether that's quantity or quality, preferably both…So yes you need processes and procedures, but you also need a culture of enquiry and reflection. If you don't have that…you'll make terrible mistakes* (Director 2).

Critically, the evidence that emerged suggested that there are overlaps in core ideas and values from idealized archetypes (professionalism versus managerialism) at Westminster. Such findings are in tandem with other social work research (for example Llewellyn, 1998), where professional managers have adapted to management reforms without compromising on their underlying professional service ethos. Management positions in Westminster's CSD remained almost entirely occupied by professional social workers, thus enabling professional values to be retained and embedded within the wider reorganization imposed on it. Interviewees below spoke of the benefits of key professional values in moderating the potential downsides of a potentially hasty organizational shift towards excessive managerialism:

> *I think social work professionalism has had a good influence on managerialism…the things that are important in social work, like talking, consulting, reflecting are an important part of management. Dictatorial styles of management are so antithetic to social work that…managers…who want to take all decisions centrally are going to run into trouble* (Director 3).

> *Managers have to respect social work professionalism…There is a need…for managers not to undermine or underestimate the importance of professional values … Similarly there needs to be some respect from the professionals…Once you join an organization and you accept the responsibilities of being an employed person and the protection that*

that gives you, you have to balance your professionalism and the requirements of that organization (Director 2).

Notwithstanding a certain amount of attention diverted towards achieving managerialist reforms, all those interviewed demonstrated an ongoing and long standing commitment to put their clients (i.e. children) first, which has remained unshaken throughout their career:

> *I was in one of these corporate discussions the other day and I came out thinking I don't really regard the council as who I work for or the DCSF or even [the director]. I work for the children of Westminster. That would be something a lot of social workers in Westminster would agree with* (Senior manager 4).

Senior management positions in CSDs continue to be dominated by qualified professionals and Westminster is no exception. The views expressed below suggest that the adaptability of trained professionals is superior to a more managerialist approach:

> *As long as you are recruiting social work managers from the workforce you have a consistent ethos…I don't agree with the corporate view that you can have corporate managers…If you have a really solid [professional] base in social work, later on when there is difficult times you've actually got…a confident solid base to work with. You don't generate anxiety among your workforce, you calm them and help them through difficult times…Without that base you would struggle* (Senior manager 3).

Increasing risk aversion—role of risk management

There is an increasing trend for greater use of NPM systems in an attempt to manage (i.e. minimize) risk (Power, 2009). For example, the introduction of the ICS was criticised by our interviewees, who thought that this was an area where government reforms had gone too far. There was a resistance towards NPM systems designed to increase monitoring and workload compliance (for example ICS), which was seen as controlling day-to-day practices of social workers. Interviewees felt that the preceding written guidance outlining case procedures (Protecting Children and the Framework for Assessment) could instead be used more selectively to complement professional practice, serving as a source of reference when needed. ICS, on the other hand, was seen to be very inflexible as it created immense compliance

demands on individual workers:

Why do social workers spend 80% of the time at their PC? Who is all that tapping away for?…We still wrestle with recording and we still would even if ICS was perfect…who do you think is ever going to read that? And how does writing that down help the child? (Senior manager 4.)

The most difficult bit of the job is…being with a distressed child saying they can't live with their mummy and daddy and they've got to go and live with this new family. They are appallingly difficult things to actually do and if you are not competent at doing that, sitting in front of a computer complaining about a report you've got to write is an easy way out of that (Director 4).

At the time of writing, the aftershocks of Peter Connelly's case are still being felt in CSDs. Subsequently at Westminster, there had been a large increase in the number of children deemed to be at significant risk of harm and in need of a Child Protection Plan (CPP), indicative of an increasingly risk-averse environment. The reliance on risk management—by deflecting attention from undesired outcomes towards compliance with processes—reflects attempts to maintain organizational legitimacy in challenging times (Power, 2007):

The danger is that social workers see themselves as more defensive and carry out a process and someone else makes the decision (Senior manager 3).

Because of managers' anxiety about getting it right it means it is…led by monitoring compliance…rather than a reflective supervision model (Senior manager 2).

Our interviewees said that social workers were becoming more conservative in their judgement of thresholds to accommodate the reduced tolerance for failure, such as those rules that determine the frequency of visits and the timing of case reviews. Working practices were also subjected to performance indicators and generally encountered significantly more management scrutiny. Professional autonomy was becoming more tightly bound:

It's a very current debate we are having at the moment about the numbers of children on the register and are we being over cautious? We've got this great concern particularly about young children and domestic violence and I…sometimes I feel I've got two hats on. One is that I can't afford to take any risks, but what is this going to achieve?…That's a

tricky one because you need the whole organization to buy into that risk management and that feels much more of an issue now (Senior manager 2).

The current situation where we've got the 60% increase in the number of children subject to a CPP is not unrelated. I'm not necessarily saying it is direct cause and effect, but it's certainly not unrelated to the Baby P case…I think it makes people more risk averse. My judgement…is that there has been…an internal psychological adjustment of thresholds by the social workers and their managers (Director 3).

These observations suggest that an inflexion point between more managerialist versus professional modes of working is sensitive to current circumstances—a large negative shock such as Peter Connelly's case can destabilize the balance, with the defensive response tipping the organization towards adopting a more managerialist-oriented archetype. Such dynamics are in contrast with the existing literature (usually based on studies of accounting, medicine and law professions—see Greenwood and Hinings, 1993; Cooper *et al.*, 1996), which suggest coherence/convergence around a hybrid archetype and downplays instability (for a critique, see Kirkpatrick and Ackroyd, 2003a). Interviewees suggested that their confidence have been undermined in the wake of some of the serious case inquiries:

They make people feel how very easy it is to make a wrong judgement. It undermines self-confidence in workers…the increasing child protection numbers suggest that people are being a bit more cautious, not just social workers, but across the network (Director 4).

A crucial, unanswered question is what extent would the managerialist archetype remain the dominant mode? Kirkpatrick and Ackroyd's (2003b) study of adult social work concluded that it was a resilient profession that, on the whole, had resisted many attempts to reform it, which also corresponds with observations from other caring professions such as nursing (Blomgren, 2003). Asked about the strength of children's social work as a profession and its influence, our interviewees were more apprehensive, sympathizing with Llewellyn's (1998) and Munro's (2004) broader observations of social workers as belonging to a weaker profession: 'It's a feeble profession…we've never got it together…to have a strong professional voice' (Senior manager 4).

Interviewees emphasised the importance of

being able to manage their social relationships with clients' well. This comes with experience and can only be developed through specialist training and professional supervision. This skill cannot be easily codified and written into objective processes and procedures. One interviewee highlighted the potential pitfalls in the drive to maintain legitimacy through greater processual transparency, at the expense of trusting professional social workers to do the job properly:

The Baby P stuff—they are not about procedures or structures, they are about practice…if I feel this is too risky…I've got the professional skills and clout to do something about it. Now if they [social workers] feel I'll do my visit, I'll fill in ICS when I get back, they are following a process. They will not react to what's in front of them in the same way…You can invest in systems and structures and procedures…but if you're not careful you make the people a bit dull and they don't shout…We need to re-invest confidence in the professional, not in the process (Senior manager 3).

Conclusions

Our study has highlighted the evolving organizational structures in the provision of social care for children in England. Our observations support the general trend in the NPM literature, whereby such changes are driven in part by the profession's struggle to maintain autonomous modes of working versus an increasingly managerialist outlook required by government initiatives. As Llewellyn (1998) suggested, professional social workers in CSDs in particular are vulnerable to the potential loss of autonomy due to their heavy reliance on state funding and their weaker professional association. Constant adaptation to frequent government initiatives thus becomes a common operating mode, which may lead to hybridizing organizational structures where some social workers accept and recognize the value of increasing managerialist intrusions into their work autonomy. However, not all professionals undertaking caring work are prepared to adapt and hybridize, preferring instead to protect their professional autonomy. It is therefore important to consider the heterogeneity in attitudes towards hybridization—Blomgren (2003) describes the 'ordering' or increasing segmentation of work among nursing professionals according to such attitudes along NPM adopters (i.e. those accepting hybridizing roles) versus traditionalists (i.e. separation of professional values from NPM influence).

The increasing acceptance of managerialist ideals into working practices is influenced by a climate of greater risk aversion, leading to creeping risk management practices in English CSDs. At times, notably in the aftermath of a high-profile tragedy such as the death of Peter Connelly, this acceptance appears to be at least partly driven by a fear of not being perceived to have followed the prescribed managerial processes rigorously. Recording key discussions, decisions and events carefully to demonstrate compliance is seen as a way of ensuring that a sufficient audit trail is in place should a child come to harm. We also think that heterogeneous attitudes (Blomgren, 2003) is an issue among social work professionals, which results from a lack of professional consensus on what is good practice (Munro, 2004, p. 1087). Professionals who subscribe to the ideals of hybridization recognize that a more formalized structure can contribute to their work and the profession as a whole. In contrast, those subscribing more to the ideals of the professions see risk management practices primarily as an assurance process to protect them against changing societal attitudes towards risk (Power, 2007).

The high public visibility and the emotional public responses to tragic cases such as that of Peter Connelly have always been followed by political promises to fix the child protection system. Our research took place shortly after the publication of Lord Laming's (2009) report, itself a response to Peter Connelly's case. Since then, the Munro review (May 2011) has called for further reforms, suggesting that 'managerialist solutions are not a panacea'.

The professionals we interviewed had generally managed to adapt government reforms to local circumstances and had remained sensitive to professional values and working practices. However, we acknowledge the usual limitations to our research. For instance, we have not considered the opinions of front-line social workers in our study. In addition, what is also needed is a more systematic investigation into the organizational hybridization taking place across other CSDs, and whether such structures impede effective delivery of services. Not all CSDs enjoy the (relative) stability of Westminster. It would be invaluable to capture differences in organizational hybridization within other CSDs that experienced greater volatility among senior management and more managerial intrusion from central government agencies. Our research has focused specifically on the tension between a professional mode of organization and the development of risk management systems and processes. Given the reductions to public spending in the UK, it is an opportune moment

to revisit the themes raised in Llewellyn's (1998) work of how social work professionals respond to the tighter financial controls in an era of public sector economic austerity.

Acknowledgements

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