



# PSDP—Resources and Tools: Using the five anchor assessment principles in supervision

## Introduction

This learning tool provides information about five 'anchor principles' which can be used to inform assessment planning and discussion. Summary information about each anchor principle is provided followed by key questions you might wish to use in supervision.

Using the five anchor principles ensures that analysis and critical thinking is an explicit thread running through an assessment process. They can be used at any stage in an assessment or as a framework for discussion in supervision.

The idea of using five anchor principles to guide assessments in social work was originally suggested in a literature review (Brown, Moore and Turney - 2014). This was then developed further by an analysis and critical thinking in assessment change project group (made up of social work managers and practitioners from ten local authorities across the country) within Research in Practice.

The term anchor principles was used because they underpin good assessment practice and help practitioners to become 'anchored' into what they need to know to analyse assessment practice with children and families.

It is essential that social workers have the opportunity to reflect on any factors related to difference, diversity and power when using anchor principles within supervision discussions.

'The problems in assessment seem to lie in the move from the collection of data or information to its use in practice to support judgement or decision-making... Social workers are generally good communicators and skilled at gathering information about families and their circumstances... then have difficulty in processing the material they have collected. The difficulties seem to lie in synthesising and analysing the data, evaluating it and drawing conclusions.' (Turney, 2009 in Brown, Moore and Turney, 2014, p2).

## The five anchor assessment principles

### Anchor principle one

What is the assessment for?



### Anchor principle two

What is the story?



### Anchor principle three

What does the story mean?



### Anchor principle four

What needs to happen?



### Anchor principle five

How will we know we are making progress?

## Anchor principle one: what is the assessment for?

Research highlights how important it is for social workers to be clear about their reason for involvement with a family, and to be able to work purposefully and collaboratively with families to help them make changes (Forrester, 2019).

Being clear about the purpose of the assessment from the beginning will give an immediate structure and basis for analysis. It prompts practitioners to start thinking about key issues as early as possible.

The first principle, therefore, asks, ‘What is the assessment for?’ (This is very different to asking, ‘Why are we doing the assessment?’ which could elicit a process-driven response.) Practitioners can then start to identify and collect knowledge that will be relevant for the assessment drawn from:

- > research
- > practice experience
- > views of family members
- > observation and interaction with the family.

Early work might involve constructing a chronology of family history, looking at what a worker already knows from observations, or identifying from research/experience what a practitioner knows about this particular issue. This helps practitioners collect relevant knowledge and structure conversations.

## Questions for practice supervisors to ask

What do you think the purpose of this assessment is?	What is your immediate response to the assessment task?	What ethical considerations are raised for you about doing this assessment?
Who needs to know you are doing this work?	What do you need permission to do and who needs to give their consent?	What is your understanding of the legal context you are working in?
What do you already know about this child/family and what sources have you used?	What sense have you made of the information already available to you?	What are the gaps and where will you go to find out more information?
What support might you need (e.g. interpreters)?	What is the child and family's understanding of the purpose of the assessment?	How are you going to find out how the child/family feel about what you want to do?
How much choice can you give the family about how you work with them?	What timescales are you working within?	How will you explain the assessment to the child and family?

## Questions for you to consider as practice supervisor include:

What do you need to make sure is discussed?	What theories are guiding your thinking?	What analytical tools help you make sense of information?
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How might any of the family or social worker's social GRRRAAACCEESSS (aspects of personal and social identity which include gender, geography, race, religion, age, ability, appearance, class, culture, education, ethnicity, employment, sexuality, sexual orientation and spirituality – Burnham, 2013) impact on how the assessment is carried out?

## Anchor principle two: what's the story?

Asking the question, 'What's the story?' will support the practitioner to think about how the family came to be here. The word 'story' was chosen deliberately because stories have characters, sub-plots, twists and turns, multiple perspectives and multiple possible endings.

Telling a story involves connecting relevant circumstances, facts and events to create a coherent narrative. Simple descriptions of events or lists of apparently unconnected or irrelevant facts do not constitute a story and cannot create a coherent picture or provide a sound basis on which to base a plan.

There may also be several stories depending on the differing perspectives of family members. It is our job to form these into a coherent narrative, and to acknowledge when people have different stories about the same event or situation.

Thinking about the story is a crucial part of analysis. As well as forming a sound basis for the next anchor, it also is an analytical stage in itself, since practitioners decide, in partnership with the child, family and significant others, what is and isn't relevant to the family's story. It is also an opportunity to find out if there are different perspectives emerging e.g. between the practitioner and the family or another agency e.g. the school.

Practitioners need space in supervision to reflect on the sources of information, what they know, who they have talked to, who they have observed, and build up the narrative that makes sense of the child or family's situation. By this point, supervisees are working with a number of hypotheses, some of which will emerge as the assessment progresses. Other hypotheses will develop from discussions with family members or other professionals.

They also need to reflect on the impact that meeting this particular family is having on them, and what emotional responses are present within the multi-agency group.

## Questions for practice supervisors to ask

Who else have you spoken to in the family?	Whose view is missing?	What is the family's story about what is going on?
What does each child or young person in the family think about what should happen?	What are the views and ideas of each family member about what is happening?	How might the family's class, culture, ethnicity, immigration status, economic status, etc. influence their story?
Which other professionals have you spoken to?	What are the different stories held by different professionals working with the family?	What do you think the story is?
What is the most important issue for you and why? How might this be influenced by your social GRRRAACCEEESSS lens?	What have you been surprised by?	How do you feel when you are with the child / other family members?
What is the most important issue for you and why?		

## Anchor principle three: what does the story mean?

Looking at what the story means will help to identify the impact that the situation is having on the child and family. In this phase, you will have ample opportunity to notice and give feedback about the supervisee's strengths and areas for development when analysing information in an assessment process.

Once the supervisee has worked through the information they have gathered, and can present a narrative that begins to answer the original question of what they are looking for, there needs to be a focus on what meaning can be ascribed to the various factors.

Discussion should now focus on:

- > **Hypothesising** – making suggestions about what could be happening and how you know this.
- > **Testing** – is all or part of your hypothesis correct? This could involve observation or interviews with the family.
- > **Reflecting** – what do we know about this child and family? What are the gaps in the story about the child and family? How can we find further information? Is this the only hypothesis, or are there other possibilities that need testing?
- > **Planning** – once we have a strong, evidence-informed hypothesis, how do we take this forward?
- > **Serious Case Reviews** continually point out the need to 'think the unthinkable' and so asking what might be forgotten, overlooked or assumed throughout is invaluable.

By the conclusion of this phase there should be a shared understanding of areas of risk and resilience for the child and family. You should have gained a detailed picture of the child, their abilities, needs and vulnerabilities. It is important to remember that if relevant new information comes to light, that will change the story, which then might change what the story means or the purpose of the assessment.



## Questions for practice supervisors to ask

What have you learnt about the child and how they are in the family and their community?	How might any of the social GRRRAACCEEESSS influence how the story is understood by the social worker or family members?	What is your assessment of the strengths in the family on offer to the child?
What factors are you worried about?	What support is available to the family?	How well do they use it? What is your assessment of risk and need?
What information is disputed and why is that?	What have you not been able to find out? Why is that?	What information is missing? What do we not know? How significant could this be?
Might your thinking be biased about what is happening to this child/family? What evidence do you have?	Tell me about a day in the life of this family from the child's point of view and the parent(s) point of view?	What are the most likeable things about this child, their parent/carer or extended family members?
Why is this child vulnerable?	Who asked for the assessment and why?	
Is there a difference between what you think should happen next and the family's views? What do you attribute this to? Would it be useful to consider whether any similarities or differences in the social GRRRAACCEEESSS between the social worker and family influence this?		

## Anchor principle four: what needs to happen?

This is the stage at which practitioners start to put a plan together about what they think should happen now. Plans should be clearly linked to the analytical assessment of the situation, and to the views of children and families.

The key to outcomes-based planning is analysis, and that is why going through the situation very carefully is key. If there is not a thorough analysis of the situation, then you cannot decide what the next course of action should be.

It is important to be aware of two common pitfalls at this stage which include:

- > Writing about universal rather than specific needs (for example saying simply, 'this child needs to be safe' rather than focusing on what this specific child needs to be safe from, exactly).
- > Stating what service provision a child needs. For example, 'Danny needs CAMHS input' rather than outlining what specific issues the child and family need support to work on, which might look more like, 'Danny needs help to understand his feelings and how they might be driving his behaviour' or 'Danny's parents need help to understand how they have contributed to his current situation'.

## Questions for practice supervisors to ask

<p>Tell me what the child's needs are and how you are prioritising them?</p>	<p>What do you think needs to happen next?</p>	<p>What does the child think needs to happen next?</p>
<p>What about the parent/ carer(s), what do they think the next steps are?</p>	<p>Is there a difference between what you think should happen next and the family's views? What do you attribute this to?</p>	<p>Who is best placed to meet this? How will they do this?</p>
<p>How able is the child or family to do this or work with this agency at this moment?</p>	<p>What support do they need and who/how is it provided?</p>	
<p>From all the information you have gathered what do you think is the most likely to happen next, what will deliver the best outcome and how will the child/parent/ agency judge how well things are going for them?</p>	<p>Have you shared your reasoning and the plan with the child and family and with other professionals? What do each of them think about the plan and do they have views about what this should focus on?</p>	

## Anchor principle five: how will we know we are making progress?

The clearer the plans and intended outcomes are, the easier it will be for all involved to understand them, and to review progress. This is especially true if there is an audit trail and clear recording of the rationale for decisions throughout the assessment process.

If interventions and support are not making a difference, you as a supervisor need to help the practitioner understand why and give them the confidence to try something that might be more likely to make a difference.

Where outcomes are not achieved or progressed towards in a timely fashion, more questions have to be asked and hypotheses retested. Not achieving outcomes will not necessarily be linked to flawed practice, which is important for supervisors to make clear to practitioners.

For example, when working with families in challenging and complex circumstances, information may not always be shared at the outset and new insights can emerge as time progresses, and plans will need to be altered.

The role of the supervisor is to help the practitioner to look at each outcome individually and prompt discussion about:

- > Has it been achieved? If not, why not?
- > Was the analysis flawed?
- > Has the hypothesis been disproved?
- > Is there an alternative hypothesis?
- > Has new information emerged?

None of us are infallible in our thinking processes. We are all subject to bias and traps. There is nothing inherently wrong with that. However, as social work practitioners, we have a duty to be alert to them and as supervisors we have the additional responsibility to be alert to them in other people. This is why the process of critical thinking is so invaluable.

## Questions for practice supervisors to ask

What changes do you want to see in the child and family's life?	How will we know the family is making progress? What steps will we see along the way? How will we measure these changes?	Was there a gap between the need and the service?
Has any unknown factor emerged affecting the family's ability to do the task at this stage? For example, financial setback, bereavement or serious illness?	What are the current priorities for this child/family?	What is working well and why?
What is not working well and why?	What would you have expected to have happened in the last three months?	What is urgent about this child's situation, how different is that from your last assessment?
What strengths could you work on more with this family, perhaps using extended family networks or their friendship group?	What is your role with this child?	

## Other ways you can use this tool

The five anchor principles can be used in a number of ways. In, for example:

individual supervision to guide practitioners' own reflection and critical thinking.

group supervisions discussions by asking the group to generate their own list of questions for each of the principles.

they can also be used by practitioners to help structure a written report or presentation.



**We want to hear more about your experiences of using PSDP resources and tools. Connect via Twitter using #PSDP to share your ideas and hear how other practice supervisors use the resources.**

## References


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Practice Supervisor Development Programme  
The Granary Dartington Hall  
Totnes Devon TQ9 6EE

tel 01803 867692  
email [ask@rip.org.uk](mailto:ask@rip.org.uk)  
 [@researchIP](https://twitter.com/researchIP) #PSDP

[www.practice-supervisors.rip.org.uk](http://www.practice-supervisors.rip.org.uk)

**Author:** Alison Domakin, Practice and  
Engagement Lead for the Practice  
Supervisor Development Programme

Penny Sturt, Registered Social Worker  
and Independent Trainer

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The Elmhirst Centre, Dartington Hall,  
Totnes TQ9 6EL