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# The influence of binding administrative procedures on social workers' decision-making

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**First draft. Please do not quote.**

## *Abstract*

Decision-support tools and other kinds of standards for decision-making in social services have been widely used in western welfare states. The hopes are that these instruments will homogenise decision-making as well as documentation. The tools have often been seen as generating 'red tape' and minimising the room for discretion for social workers in the frontline. The picture obviously is more complex than that. In the article the relation between tool design and effect on case workers' decision-making is explored. This article reports on findings on three different mechanisms of effect and their influence on case workers' room for discretion in decision-making. Findings are based on a qualitative cross-sector study of three decision-support tools employed by social workers trying to decide if a client (an unemployed, a child or a senior citizen) should be granted a service, and if so, which. The empirical data are 30 group interviews with social workers employing the tools in their daily decision-making practice. The article concludes that tools which are founded on a solid theory affect the room for discretion more, than instruments mainly functioning as monitoring devices. The findings also show that even a theory-based tool cannot compensate for poor professional skills amongst social workers.

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## Introduction:

The core activity in frontline welfare services is decision-making. But as Lipsky first stated frontline workers' decision-making is often taking place unobserved by managers and it makes it hard to evaluate the quality of the work (Lipsky 1980).

Alongside the general changes in the Danish public sector the governing of social services and care giving have changed as well. One of the cornerstones in the provision of social services in modern welfare states is decision-making about who is eligible for particular services or benefits. The welfare state is, as some put it, built on decision factories (Jorna and Wagenaar 2007). The central decision-maker is the street-level bureaucrat who assesses clients' needs and obligations. The purchaser-provider split tends to change the roles of professional caregivers, with less emphasis on care, and more on assessments of needs and rights (Ellis 2007), which makes decision-making an even more central activity to certain groups of professionals.

Street-level bureaucrats in various countries have been criticised for being subjective, prejudiced, and making unjustified differentiation amongst clients – or for coping with workloads in ways which distort policy goals. Failure to pick up on and address clients' needs – especially those of children – has led to public scandals in countries such as Australia, U.K., Belgium and Denmark. The standard reaction from legislators on occurrence of a scandal is often attempted to reduce frontline workers' (as well as municipals') room for discretion in order to avoid further scandals (Hupe and Hill 2007).

In attempt to address these problems, alongside a wish to control expenditures, much government attention has been directed towards the development and implementation of efficient ways to organise and improve case management. This has led to a series of binding administrative procedures directed at individual case workers' tasks and practices. The general idea being that the tools would affect the decision-making by defining formal structures and procedures. Administrative procedures can in other words be an instrument of political control (Weingast, Noll et al. 1987) and in that sense an indirect way of governing decision-making.

Decision-making is not a product existing after end production, but is tied to a particular time and space and needs to be registered on paper or in digital form in order to make it subject to scrutiny at a later occasion. The written record constitutes in that sense a proxy for the frontline decision-making practice.

In general, the literature on public organisation and implementation agrees on room for discretion for frontline workers as both desirable and unavoidable. It is due to the simple fact that it is impossible to anticipate – and thereby regulate – all possible events and circumstances a citizen might experience. This, however, has not prevented legislators from trying to regulate frontline workers' use of discretion. More common in recent years is regulation in the form of administrative procedures directing how a decision should be made and documented. This type of regulation is an indirect mean of governing.

Also the trend towards evidence-based practice has made room for developing and implementing procedural tools as decision supportive or *assessment tools*, which is based on an understanding that it is possible to find the best way to decisions (Munro 2002).

The intention with procedural regulation of social workers' decision-making is to frame or guide their use of discretion in order to enhance a) uniformity in decisions on service provision, b) quality in terms of covering a predefined area of topics and c) to ensure a systematic case management, where no cases get lost in the stack of files. In other words to address the problems listed above. But what kind of difference regulation of the decision-making process makes in practice for case workers' room for discretion is still open for debate.

### **Concepts: the relation between administrative procedures and room for discretion**

There has been a lively debate whether social workers still have room for discretion in their work. Some have argued that the room for discretion is very much diminished by management techniques and/or ICT (Bovens and Zouridis 2002). Others have argued that the room for discretion might be even bigger, when social workers need to choose between a wide range of rules. *“Political efforts to control discretion through the promulgation of detailed rules and procedures often produce the contrary result, forcing frontline workers to selectively apply rules that are too voluminous to enforce in their totality (Simon 1983). As Maynard-Moody and Musheno (2003) observe: ‘street-level work is, ironically, rule saturated but not rule bound (p 8)’ (pp 247) (Meyers and Vorsanger 2005).*

It is certain that a variety of attempts are made to guide or restrain use of discretion from policy-makers and management. *“In the public welfare bureaucracy, management techniques are focused on minimizing variation in individual work and curtailing discretion regarding how staff respond to clients” (Sandfort 2000): 735).*

The literature on frontline workers and regulation gives no clear answers as to what is the relation between regulation and room for discretion and what kind of effects different tool designs might facilitate. This underlines the need for:

*“more fully developed conceptual models that account for multiple, oftentimes competing sources of influence on front-line workers [...]. Given the complexity of implementation structures, neither organisational models of hierarchical control nor economic theories of individual incentives fully describe the influences on street-level workers. It is clear that hierarchical accountability structures and formal policy directives influence but only partially control the actions of front-line workers. We need to develop theoretical models that explain how the power of these political tools is mediated by factors such as the congruence of new policies with existing organisational culture [...] or with the collective schemas that staff develop to make sense of their task environments” (Meyers and Vorsanger 2005, 2nd: 252).*

Having too many binding administrative procedures appears to be generally disliked, but there has been very little research into what these procedures entail, not to mention how they function.

Only few research-based assumptions/hypotheses are formulated concerning the effect from administrative tools (such as decision-support tools) on frontline decision-making. Going through the literature on regulation, technology and social case work that deal with the street-level bureaucracy control problem, three mechanisms of effect seem to be anticipated from implementing binding administrative procedures. Based on a literature review<sup>1</sup> conducted in relation to the study three types of mechanisms of effects have been identified as being at play in decision-support tools.

**The mechanisms identified are:**

- Reduction of decision alternatives: Ideally it is ensured that decision choices always will be within a range of predefined solutions. Limitation of the range of choices. By limiting the range of decision outcomes control of service provision is gained (Hasenfeld 1983, Boven and Zouridis 2002). *“Undoubtedly, the reduction of decision alternatives, coupled with coordination by plan, is one of the most effective indirect control mechanisms in human service organisations because it circumscribes workers’ discretion and specifies rules workers must follow in making service decisions”* (Hasenfeld 1983: 169).
- Delimitation of information: Rules on collection and use of information. Ideally supposed to uniform the decision base and ensure that only relevant circumstances are considered during decision-making. Decision-making will be affected by limitations on which information is allowable as a basis for decision-making. Rules will define formal structures on the preceding information gathering (Weingast et. Al. 1987, Hasenfeld 1983, (Brunsson and Jacobsson 2000). *“Details of administrative law as applied to any given decision problem will affect the outcome. The basis for this assumption is the presumption that decisions depend on the information that underpins them and on the means for relating that information to decisions that are permissible according to the structures of administrative law”* (Weingast et. Al. 1987).

- Surveillance of records and timeliness: Decision-making will be affected by rules on recording. Case workers' problem perception will be influenced by the recording template and the performance measurement conducted (Power 1997), (Bovens and Zouridis 2002).

At the same time the literature points to various side effects or barriers when regulating by administrative procedures:

- The regulation becomes too complex and vast forcing case workers to choose which rules out of a wide range of rules to apply (Sandfort 2000) (Meyers and Vorsanger 2005).
- The working procedures become too fragmented causing loss of sight of the client (Holt, Hvid et al. 2009) and making clients run the gauntlet.
- The administrative procedures getting decoupled from the decision-making, are used mainly as recording tool, and are considered a waste of time by case workers (Gillingham 2009).

Another recurring finding is that the most powerful governing effect from the administrative procedures is their time-consuming capabilities. Whether being an intended or unintended effect there are findings suggesting that it definitely alters the role of the social case worker by requiring more time spent on administration and less on face to face contact with clients holt (Holt, Hvid et al. 2009) (Dearman 2005) (Høybye-Mortensen 2011)

### **Aim of the article**

The aim of this article is to render visible the interplay of procedural tools and decision-making. More specifically the article explores how frontline workers perceive the influence from procedural tools in order to determine the degree of impact three different mechanisms of effect imposes on discretion.

The tools under scrutiny are 'Common Language' used in elder care services, 'The Dialogue Guide' used in the employment services, and the 'Integrated Children's System' used in child protection. They each represent a different constellation of the three mechanisms of effect. This means that each of the instruments contain all three mechanisms, but one is more prevalent. Integrated Children's System's main mechanism of effect is restrain on information base, reduction of decision alternatives is what we find in Common Language, and the Dialogue Guide relies on surveillance. Implementing binding administrative procedures such as the Dialogue Guide, Common Language and Integrated Children's System is an indirect way of governing (Lundquist 1992).

Evans and Harris (2004) argue that it is not a matter of whether discretion exists or not, but a matter of size of the room for discretion. With Dworkin they argue that room for discretion can be understood as a continuum from 1) 'judgment that has to be employed to apply a standard (in circumstances where judgment cannot be applied mechanically), 2) the final

responsibility for making a decision (within the rules), and 3) discretion in a strong sense, which give the decisions and the criteria of decision-making to professionals.” (Evans and Harris 2004)(p. 881).

I want to add to this distinction of discretion, by arguing the need for taking into account that the room for discretion might also vary in different part of the decision-making process. By doing this one might analyse if and when decision-support tools affect case workers’ room for discretion in the frontline. I will return to this later.

### **The study**

This paper explores how three different procedural case management tools affect decision-making of street-level bureaucrats working in the Danish public welfare sector. The tools are ‘Common Language’ used in elder care services, ‘the Dialogue Guide’ used in the employment services, and the ‘Integrated Children’s System’ used in child protection. A policy goal in all three service areas has been to standardise the assessment process and reduce discretion of frontline workers (Caswell, Marston et al. 2010) (Dahl 2009) (Shaw, Bell et al. 2009)

	The Dialogue Guide	Common Language	Integrated Children's System
<b>Policy area:</b>	Employment service	Home care services for the elderly	Child protection /welfare
<b>The decisions to be made:</b>	How far away is the unemployed from the labour market?	How is the physical and psychological functional level of the elderly?	How much is the child at risk?
<b>Primary mechanism of effect</b>	Surveillance	Limitations on decision alternatives	Information framing

What is common to all three tools are their function as 'gateway instruments' mediating the assessment of the client. They are to be used in the same kind of situations; when clients' needs are assessed prior to a decision on granting welfare service. They all consist of forms used, when interviewing and assessing clients' needs and when documenting the decision.

Similar kinds of tools are used in other countries such as the UK, Australia and the Scandinavian countries. The ICS is copied from the British version (Shaw, Bell et al. 2009), which is also used in Sweden and Australia, systems resembling Common Language are used in the UK, Norway and Sweden (Hansen and Vedung 2005) , and the Dialogue Guide resembles the JSCI (the Job Seeker Classification Instrument) found in Australia. For a thorough description of the similarities and differences between employment services in Denmark and Australia see (Caswell, Marston et al. 2010).

From a distance the Dialogue Guide, Common Language and Integrated Children's System look the same, based on purpose and general design. Given a closer look the tools, however, vary on different parameters.

Characteristics of the Dialogue Guide, Common Language and Integrated Children's System (Høybye-Mortensen 2011):

	Dialogue Guide	Common Language	Integrated Children's System
The form and points of attention in the assessment	5 areas covered: 1) own labour market perspective, 2) professional and practical competences, 3) personal competences, 4) economy and network,	8 areas covered: 1) personal hygiene, 2) eating and drinking, 3) mobility, 4) daily housekeeping, 5) activities, 6) social relations,	5 areas are covered: 1) health, 2) school and learning, 3)friendship and activities, 4)development and behavior, 5)family and relations.

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	and 5) health, also substance abuse.  Sphere of interest: narrow. Few and open categories, only headlines. Basically a recording template. Focus on employability.	7) mental health, 8) illness/impediments.  Sphere of interest: wide (daily life coping).  Several and closed categories, assessments should be given as a number.	Focuses on daily life coping and surroundings (environment and relations).  Sphere of interest: very wide. Detailed description of what should be considered under each area. Open categories.
Knowledge base	Poor knowledge base. Unformulated assumptions about barriers for employability. No programme theory.	International standard on functional level (ICF).	International standard on children's well being.

### Empirical data and analyses

The empirical data consist of written documents, such as policy papers, law texts and guidelines, and of group interviews conducted with case workers in different municipalities. In total 30 semi-structured group interviews were conducted, 10 interviews on each of the tools. Participants in interviews were case workers employing the tools in every day client interaction. All participants held same position in the organisation, but with variation in seniority. The focus of the interviews was case workers' use of the tool in their every day decision-making and case workers' perception of what constituted the tool.

The interviews served as a source of information on practice. Both the proper and actual practice might be subject to negotiation internally in the organisation, and accounts given in the interviews might be linked to personal positions and preferences within the organisation. The question is therefore what kind of knowledge was gained from the interviews. Firstly, there are the answers to directly asked questions like: How do you decide which match/function level the unemployed/elderly fits into? When asked a question, people normally (try to) produce meaningful answers (Goffman 1959). In that sense these parts of the interview constitute the construction of a socially acceptable truth amongst the participants, and might have been a replication of the declaration of intent. But a large part of the interviews conducted was much more explorative and concrete (when discussing the nuts and bolts of the daily practical work), and this 'tool talk' I consider to reflect the case workers conception of what the tool is (for). But could not 'tool talk' be prone to strategic storytelling? Yes, if the 'tool talk' by the participants in the interview is viewed as reflecting whether they do their work as intended by their supervisors and politicians. So evidently, there are clear limits for what the case workers can and will say during the interviews. They must comply with rules and accept the overall political purpose of the tool, but since the criteria for a *good tool use* are vaguely described – if described at all – in policy papers, legislation or other formal descriptions there seems to be a wide range of acceptable 'tool stories'. Therefore – and

because of the restraints posed by co-workers participating in the interview, I consider the case workers' descriptions of their tool use to be of high validity.

To analyse the interplay between tool and decision-making, the interviews were systematically looked through for descriptions of decision-making in order to determine whether the tools played a part in the decision-making. Decision-making here understood as a process consisting of three phases: phase 1) defining the problem, phase 2) investigating the situation, and phase 3) making a choice between possible actions. This understanding of decision-making inspired by O'Sullivan (1999 figure 1.2 page 20) and Simons' description of decision-making as consisting of 'finding an occasion', 'inventing possible outcomes', 'choices' (Simon 1947).

The conclusions concerning the tools restraint on case workers' room for discretion draw on the continuum described by Evans and Harris, where discretion can vary from 1) 'judgment that has to be employed to apply a standard (in circumstances where judgment cannot be applied mechanically), 2) the final responsibility for making a decision (within the rules), and 3) discretion in a strong sense, which gives the decisions and the criteria of decision-making to professionals (2004) page 881.

## Findings

In the following results from the study will be presented. The study consisted of three analyses. First, the design of the tools was studied; secondly, it was examined how case workers use the tool in their decision-making process; and, ultimately, the mechanisms of effect were under scrutiny. This paper reports on findings on the mechanisms of effect and their influence on case workers' room for discretion in decision-making.

### Reduction of decision alternatives

The most prevalent mechanism of effect in Common Language is reduction of decision alternatives. In Common Language the assessment of client need and available services are closely linked. This is due to a standardised service supply, which means that the social workers in the elder care are not supposed to 'invent' services, they just have to choose services from a predefined catalogue.

As Hasenfeld indicated reduction of decision alternatives is a powerful way to effective indirect control because it circumscribes workers' discretion (1983). There are two ways to reduce decision alternatives in decisions on eligibility. One is via categories for clients, which reduces the spectrum of client need. The other is via categories for services, which reduces the number of possible service supplies, both of which exist in Common Language.

Combining the two, as we will see in the example below, is an extremely powerful tool if management wants to compare cases and to reduce (or enhance) service level.

*"We are employing a tool and it needs to make sense, obviously there needs to be some kind of coherence between the level of need and the service granted. When the elderly is coping*

*perfectly, it's a 1, right? And of course, when I'm running through the assessment and writes 1, 1, 1 – and then ends up granting help to shower, to every meal, and on top of that he gets an electrical bed, wheelchair etc. That doesn't really add up".<sup>ii</sup>*

The quote demonstrates that even though the link between functional level and service provision is not automatic the limitations of decision alternatives still influence this particular case worker. This is due to the transparency caused by the standardised way to describe needs (the elderly is given a number from 1 to 4, 1 indicating no need of help and 4 indicating massive need of help) and service provision (the standardised services), which makes discrepancy between the two visible. So in order to make a legitimate decision there has to be coherence according to the case workers. A case worker describes a strong influence.

*It's really political, because in reality we don't have much room of manoeuvre, I mean as a case worker. I've got Common Language, the categories for functional level and then I have 'concrete, individual assessment' [phrase taken from the legislation], which gives a bit of a wiggle room, but there need to be a really, really good explanation in order to move up and down in the service categories. And you can adjust downwards as well, right? You know, to reduce the help given<sup>iii</sup>.*

For some case workers the standardisation of service provision via catalogues combined with standardised assessment categories makes the decision-making unambiguous – a matter of deciding which (if any) of the services the elderly is entitled to. A case worker explains: "actually it's pretty simple, in our municipality we don't walk the dog for instance".

The case workers do not express the consequences as a restraint on their work, but as the phrases below indicates, it has consequences for the assessment, since the investigation might only focus on needs that can be met by one of the standardised services. This means that needs not matched by a service (for instance loneliness) will be ignored or overlooked.

*"I believe that Common Language is all right as a tool which ensures that we get all around that person. Whenever I go visit an elderly citizen I normally say 'the basis to grant you assistance is my assessment of your functional level' and then I go through the categories in the form. And like my colleague, I think, well it's a form, but it ensures that we remember most of the relevant aspects of most people's lives. The aspects that we can compensate for with our services anyway<sup>iv</sup>".*

To sum up: reduction of decision alternatives gives little or medium room for discretion to the individual case worker. What we do not know is whether coherency exists across case workers' assessment of elderly.

	Problem definition	Investigation	Decision
<b>Common Language</b>	<p><b>Little room for discretion – applying a standard</b></p> <p>Needs to be formulated as an application for a specific service.</p>	<p><b>Medium room for discretion – making a decision within the rules</b></p> <p>Freedom as to how to conduct the interview with the elderly.</p>	<p><b>Little room for discretion – applying a standard</b></p> <p>Only possible to grant pre-defined services.</p>

### Delimitation of information

When it comes to delimitation of information the analyses show the existence of two different types of sorting of information. Type 1 is rules on delimitation of information on a concrete level such as the limitation given by use of a form during information gathering and recording. Type 2 is delimitation on a cognitive level, where ways to interpret information are suggested.

Integrated Children's System is built on theories on children's development and case workers' familiar with the theoretical foundation indicate that ICS affects their assessment of children's needs.

*"The new thing with ICS is the theory. There's some science and research which specify, what is a good life for a kid and which elements we should consider in the inquiry – and the resilience. We haven't had that before, earlier on it was more like your own knowledge you used. It's also a new thing that we can lean on the points of attention specified for each age group; what is expected by parents to a 5-year-old? How to know if a child is age-appropriate? And one last thing which is different: you have to consider the uncovered needs of the child, you know? To know which elements you need to work with".*

Since the Dialogue Guide, Common Language and ICS all rely on forms of documentation and assessment, obviously type 1 sorting of information is at stake. ICS contains both type 1 and type 2 delimitation. Nevertheless Integrated Children's System can be used as just a type 1 tool. The paragraph below is from an interview with a case worker with less than a year's professional experience. She has never been introduced to the theory behind ICS. She describes her use of the ICS form.

*You make your assessments in your head. You meet the family and think 'oh no, something is really wrong', by then you have already made your decision, but it is not until afterwards you write everything down, because you have to write it down, the decision needs to be*

*documented. Personally, my problem is that I investigate and make handwritten notes and store all decisions in my head, and then afterwards I write everything down in the form. Well, then the method goes by the board.*<sup>vi</sup>

The paragraph below illustrates how the difference between type 1 and type 2 information framing is experienced by case workers using the Integrated Children’s System.

*We want to integrate the way of thinking that lies beneath the method [ICS]. Because, if you don’t know the theory, then it’s hard to see the point with the method. Then it’s just a form with some blanks you need to fill in, and then you fill them in because somebody told you to do it. But suddenly the method gets another impact, when the theory is applied. We need to know the theory all of us, and then we need to see the point in using the form. The form – which for us up until recently – was nothing more than a form. ‘Oh well, whether it says ICS or something else doesn’t matter, it’s an inquiry’. It’s just a form we fill in thinking ‘next year they might come up with something different’<sup>vii</sup>.*

When there is a lack of time, skills or experience the tool is not making any difference, no matter the mechanisms of effect.

To sum up: delimitation of information on a cognitive level influences the investigation part of the decision-making.

	Problem definition	Investigation	Decision
<b>ICS</b>	<p><b>Discretion in a strong sense</b></p> <p>Is not fully used. Families might be agenda-setting.</p>	<p><b>Little room for discretion – applying a standard</b></p> <p>The points for investigation are exhaustively described, the originator of information needs to be explicit, and information needs to be interpreted within a certain frame.</p>	<p><b>Discretion in a strong sense</b></p> <p>No pre-defined services in ICS. There might be other organisational restrains on granting of services.</p>

## Surveillance

There is an element of surveillance in all the tools, since the forms serve as documentation platform, and are therefore potentially subject to scrutiny by managers, politicians and The National Social Appeals Board. But according to the description given by the interviewed case workers only the Dialogue Guide seems to be solely based on monitoring techniques. The surveillance mechanism supposedly makes case workers change their behaviour to match the criteria of the audit. The general assumption is that audits or other kinds of performance

measurements will lead employees to direct time and effort to fulfil the criteria measured, which can lead to goal misplacement (Reference). On the basis of the study on micro level decision-making I will suggest a slightly different perspective. One thing is that managers and workers' attention might get directed at the points of measurements (for instance the timeliness of client interviews or the use of the right documentation form), but another thing is, whether this attention in any way guides or restrains discretion in decision-making. The findings on the Dialogue Guide suggest that the surveillance mechanism is far too crude to guide anything even though all the case workers dutifully use the Dialogue Guide as a base for interviewing and documentation. The fact that documentation (might) be subject to scrutiny, might affect the production of documentation, but this is too far away from the actual decision-making to affect the room of discretion.

Case workers using the Dialogue Guide talk of control and surveillance, a theme hardly touched upon in interviews with users of ICS and Common Language. The experience of surveillance is explained by the link between the Dialogue Guide and the central governmental system, where case workers' registrations are stored (The system is called 'Arbejdsmarkedsportalen'). The Dialogue Guide – as the only tool – exports information outside the municipal and on the basis of this information the central level monitors whether the interview with clients was conducted in a timeliness fashion.

Interviewer: *Is the jobcentre as such very attentive towards the demands on timeliness?*

Case worker 2: *Yes indeed! Oh dear, that's the most important thing whatsoever. Quantity rather than quality<sup>viii</sup>.*

This perception is shared by case workers from five other municipalities.

Even though demands on registrations are high and the municipalities make an effort to meet the demands registration practice varies. The interviewed social workers describe how two kinds of documentation practices are played out: one way is to write down what the client is saying, another way is to write down their own professional assessment of the client. Neither of the two practices is sanctioned by formal description, legislation, e.g. as the correct way to utilise the tool. This lack of precision indicates policy-makers believe in objective description of problems – and lack of programme theory (Pawson 1997). By lack of programme theory I'm referring to the circumstance that no assumptions are formulated or exist in the Dialogue Guide in regard to what keep people in unemployment. Therefore case workers call upon other types of knowledge whether it being from their own training, experience or prejudice. Delimitation of information on a cognitive level is absent, in other words absent in the Dialogue Guide, which results in inconclusiveness in how to assess the client. The inconclusiveness feeds into the frontline workers' use of the tool. So even though the demands on timeliness get a lot of attention from all levels in the organisation it does not seem to affect

the case workers' room for discretion. An obvious conclusion would be to assume the analytical potential in using the Dialogue Guide is influenced by this inconclusiveness.

Interviewer: *These five points of attention, do they make it easier to assess the work potential of an unemployed?*

Case worker 1: *No, I don't know that it does. It gives a better overview, when you go through the case file, but in regard to the actual assessment, it doesn't make any difference.*

Interviewer: *Have I understood it correctly, then, that the five points of attention is all right in terms of documentation, but they don't actually have anything to do with the assessment of the unemployed?*

Case worker 2: *The information you get while talking through the five points is important. This is how you get to know if they have a criminal record and such. So, you do get some information, it's not redundant.*

Case worker 1: *No, it's not redundant. It gives you some information, but you could do the assessment without it.*<sup>ix</sup>

The lack of type 2 information delimitation results in the Dialogue Guide being a minimum impact tool on the room of discretion. A relevant objection towards this total write-off of the efficiency of surveillance-based tools might be at place. The experienced case workers who remember the unemployment service *before* the Dialogue Guide tell that the focus in their work now is more narrowly on the clients' *employment perspectives* and not on various social problems. In that sense the Dialogue Guide might have affected the decision-making by narrowing down the allowable information base. But I will argue that this effect has nothing to do with the surveillance element in the tool, but rather to do with the strong political signals saturating the unemployment services, emphasising that the priority now is employment and not solving social problems, e.g. the work-first approach.

Asked how they know what kind of information is relevant under each of the five points of attention, a case worker using the Dialogue Guide when assessing potential for employment says:

Case worker 1: *We need to include what is relevant in regard to the job market. We know that's what we are supposed to include. And then I say, oh well 'personal qualifications', what is relevant? It could be a good attendance record that would be relevant. Not personal qualifications in regard to relationships. Well, that's how I confine it<sup>x</sup>.*

The quote above illustrates that the case worker herself needs to interpret and put meaning into the five points of attention/into the form categories in order to know which information is relevant or not.

To sum up: The Dialogue Guide in itself does not affect the case workers' room of discretion, even though much energy is spent on complying with the rules on timeliness.

	Problem definition	Investigation	Decision
<b>The Dialogue Guide</b>	<p><b>Medium room for discretion.</b></p> <p>Not defined who should make the problem definition.</p>	<p><b>Discretion in a strong sense.</b></p> <p>How to use the tool during investigation is not defined.</p>	<p><b>Little room for discretion – applying a standard</b></p> <p>The unemployed needs to be given a match category (from 1 to 3). The category has no link to the service provision, however.</p>

**Discussion:**

Points for discussion:

- Does it make sense to compare three different service areas? Is the differences due to different cultures and difference in tasks?
- The cases...what are the generalisation potentials in the study?

This understanding of the existence of one possible best way is described as the realistic approach in opposition to the reflective approach (Gillingham 2009). *“The difference between professional and procedural approaches to decision-making in social work can be seen as a dispute over the nature of the decision situations encountered within social work”* (O’Sullivan 1999: 14). This difference in understanding of the nature of decision-making in social work originates in the conflict between an understanding of social problems as tame or wicked.

**Conclusion:**

Different tools affect different parts of the decision-making.

<b>Mechanism of effect</b>	Delimitation of information on a concrete level.  Type 1 <sup>1</sup> (Case: all three instruments)	Delimitation of information on a cognitive level.  Type 2 (Case: Integrated Children's System)	Reduction of decision alternatives  (Case: Common Language)	Surveillance of records and timeliness  (Case: The Dialogue Guide)
Affected part of the decision-making	Recording practice/documentation of decisions. Ex-post decision-making.	Problem definition and investigation.	Problem definition and decision.	Documentation of decisions. Ex-post decision-making.

Another conclusion might be that tools build on the assumption that a best way to make decisions exist has shortcomings compared with tools supporting the reflective/professional approach.

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<sup>1</sup> Type 1 is rules on delimitation of information on a concrete level such as the limitation given by use of a form during information gathering and recording. Type 2 is delimitation on a cognitive level, where ways to interpret information [areis](#) suggested.

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<sup>i</sup> Conducted in relation to PhD-project

<sup>ii</sup> Visitator: Vi bruger et redskab og der skal være fornuft i galskaben, ikke, der skal selvfølgelig være en sammenhæng mellem funktionsniveau og så det vi tildeler. Når den ældre kan det hele selv, så er det et 1-tal, ikke. Og det er klart, at hvis jeg løber funktionsvurderingen hurtigt i gennem og skriver 1, 1, 1, 1 – og så ender jeg med at give folk hjælp til morgentoilette, alle måltider, og i øvrigt skal de både have en elseng, og kørestol osv. Det hænger jo ligesom ikke rigtig sammen.

<sup>iii</sup> Visitator: Der er rigtig meget politik, fordi vi har jo i realiteten nogle meget små bevægerum, altså som visitator. Du har ikke ret mange muligheder for at bevæge dig. [...] jeg har Fælles sprog, og jeg har de funktionsniveauer, jeg skal gå efter, og så har jeg konkret, individuel vurdering, som kan flytte en anelse, men der skal virkelig, virkelig være en begrundelse for at kunne flytte ret meget, og den kan også bruges i nedadgående retning, ikke, altså i reducere af hjælp.

<sup>iv</sup> Visitator 1: Jeg synes Fælles sprog er et fint nok redskab til ligesom at sikre sig, at man kommer hele vejen rundt. Altså, jeg plejer at sige når jeg kommer [hjem til en borger]: ”.. et grundlag for at tildele hjælp, det er min funktionsvurdering af dig”, og så gennemgår jeg de her punkter: personlig pleje, mobilitet, mad og drikke osv. Og jeg synes også som min kollega, ja, det er jo et skema, men det sikrer jo, at man lige husker de allerfleste relevante områder i de allerfleste menneskers liv. I hvert fald med det vi kan kompensere for.

<sup>v</sup> Familierådgiver: det nye er netop, at der er noget teori koblet på. Der er noget videnskab og der er noget forskning som jo går ind og præciserer, hvad er et godt barneliv og hvad er det for nogle faktorer som man skal være opmærksom på i sin undersøgelse, med resiliens, med udviklingsteori. Det har vi jo ikke nogen andre steder, altså der har det mere været vores egen rygrad og hvad er det vi har med i vores egen bagage. Her er det teoretiske med og plus det hele tiden skal opgraderes. Det der også er anderledes det er, at du i vid udstrækning har aldersopdelte fokusområder. Det er også noget nyt, at vi kan gå ind og læne os op af; hvad forventes der, hvad skal forældre gøre af omsorg for barnet fra 0-1 år, fra 1-3 år. Det er hele vejen op til 18 år faktisk. Hvad er det for nogle ting forældrene skal kunne? Hvordan kan vi se, at barnet er udviklet som det skal. Og hvis det ikke er, på hvilke områder.. Plus en sidste ting, som jo også er anderledes, det er, at du går ind og skal forholde dig til barnets udækkede behov. At du skal gå ind og kigge på, jamen hvad er det for nogle ting, der skal arbejdes med.

<sup>vi</sup> ICS-bruger: At man allerede laver sin faglige vurderinger inde i hovedet, [...] man møder dem, snakker i telefon med dem og [tænker] pyha, der er noget rivende galt, så har man allerede truffet en afgørelse og så er det først bagefter man skal til at skrive det ned, for det skal man jo, det skal jo dokumenteres. Der kan man jo sige, at så går hele metoden jo egentlig fløjten [pause]. Jeg har det problem, at jeg undersøger og skriver notater i hånden og har alle beslutninger oppe i hovedet og så skriver jeg det hele ned i skemaet bagefter

<sup>vii</sup> ICS-bruger: ”Vi vil jo gerne have tænkningen ind, der ligger bag metoden. Fordi hvis man ikke har tænkningen, så er det også svært at se ideen med metoden. Fordi så bliver det et skema med nogle firkanter i, som man skal udfylde, og så udfylder man det, og tænker, at vi har vi gjort det, fordi det er det, man har sagt, at vi skulle. [...] Og så begynder den pludselig at få en anden betydning, når teorien så kommer på”.

Vi skal have samme tænkning, og så skal vi kunne se ideen med at bruge skemaet. Som for os – indtil for nylig – bare har været et skema, som vi nu får lært, Nåja, om der står ICS, eller noget andet, på det skema, er lige meget – det er jo en § 50'er, og sådan er det. Det var bare noget, vi udfyldte og tænkte ”måske finder de på noget andet næste år”.

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<sup>viii</sup> Interviewer: Er det [rettidighed og aktiveringsgrad] noget som jobcentret sådan samlet set er meget opmærksom på?

Jobrådgiver 2: Ja det! Uha, oh skræk da, det er næsten vigtigere end noget andet. Altså, kvantitet frem for kvalitet.

<sup>ix</sup> Interviewer: Gør de her fem opmærksomhedspunkter... gør de det nemmere, at finde ud af hvilket match folk skal have?

Jobrådgiver 1: Nej. Det synes jeg ikke, det gør. Det giver et bedre overblik... [...] når man går ind og kigger i journalerne, hvad er det lige, vi har her? Og man sådan lige hurtigt kan skille det lidt ud og skille det lidt fra hinanden, ikke. Men selve det der med matchning, der har det sgu ikke nogen betydning.

Interviewer: Men skal jeg forstå det sådan, at de her fem opmærksomhedspunkter, de er gode nok til at ..., kan man sige dokumentation? Men de har egentlig ikke noget at gøre med, hvordan der så bliver matchet bagefter?

Jobrådgiver 2: De oplysninger du får, altså, nu du snakker de der opmærksomhedspunkter igennem, de har jo en betydning, altså, ... det er jo også der, du får at vide, om der er den der straffeattest og sådan. Så selvfølgelig ... det giver nogle oplysninger [...] Så den er ikke spildt.

Jobrådgiver 1: Nej, den er ikke spildt. Den lægger jo grundlag for det, men man kunne godt gøre det uden.

<sup>x</sup> Jobrådgiver 1: Men det vi skal have med, det er jo det, der er relevant ift. arbejdsmarkedet. Det er jo det, vi skal have med ind, og det ved vi jo godt. Og så tænker jeg, jamen personlige kompetencer, hvad kan være relevant ift. arbejdsmarkedet? Det kan være mødestabilitet, altså, det ville fx være relevant. Hvordan man samarbejder med andre. Så på den måde, så bred synes jeg heller ikke, den er, fordi vi hele tiden skal forholde os til, hvordan de her borgere de kommer i arbejde, og hvordan, altså, hvor langt de egentlig er fra arbejdsmarkedet, altså, det er jo ikke personlige kompetencer ift. måske deres parforhold, jeg tænker. Det er personlige kompetencer, som kan benyttes på arbejdsmarkedet. Altså, det er sådan, jeg indsnævrer det.