Chapter 3
Applying Evidence in Practice: Isn’t that Straight-Forward?

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ABSTRACT
Judgement and decision-making lie at the heart of practice and are feats that practitioners perform under conditions that are complex and uncertain, the attainment of positive outcomes for service-users dependent upon the aptitude of those charged with the task and the scaffolding provided by their employing organisations. Faced with such a challenge, social workers somehow avoid paralysis and take action to support and protect those with whom they work, drawing on experience, skill, information, and intervention evidence. The way they negotiate, orientate, interpret, and apply this knowledge is often through unconscious thought processes that require illumination and balance. This chapter considers how practitioners make sense of the situations that they come into contact with and discusses the intuitive-analytical reasoning continuum integral to this. Attention is given to the role of value as an influence upon perception and subsequent interpretation, together with the role played by cognitive processes.

INTRODUCTION
Inherent Intuition
Social work’s multi-faceted nature makes it unique in many ways, the sphere of practice comprising an interplay of person-in-environment phenomena which the practitioner must orientate in order to realise positive change: emancipation, justice, or well-being. To do so, the individual worker travels alongside, within, and between the lives and experiences of individuals, attending to the idiosyncratic characteristics they encounter, unearthed as they move between indeterminate psychosocial worlds. To reach their destination, the positive outcome, the practitioner must make sense of that which confronts them, to make links between the worlds they discover (Schofield, 1998) and arrive at a judgement or decision capable of attaining that which first appears beyond comprehension. Social workers perform this task day in, day out, drawing on innate decision-making processes, often computed intuitively without conscious thought (Helm, 2011; Kirkman & Melrose, 2014; Munro, 2011). In tandem with this, practitioners, to a lesser or greater extent, apply external knowledge.

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to the situations they face, endeavouring to build a picture which attains a level of comprehension permitting judgement formation.

**APPLYING EVIDENCE IN PRACTICE**

Decision-making is clearly a fallible activity, yet when faced with high levels of uncertainty individuals do not necessarily attend to information which might offer insight or prove enlightening (Webb, 2006), our hardwired biases seemingly dismissive. With the backdrop set, this chapter considers the application of evidence in practice, centring on the concept of evidence-based practice as a decision-making process, affiliated with Sackett, Rosenberg, Muir Gray, Haynes, & Richardson’s (1996) definition of evidence-based medicine which sees it as “the conscientious, explicit, and judicious use of current best evidence in making decisions about the care of individual patients”; where best evidence is viewed as “clinically relevant research” (p. 71). Attention is, therefore, given to patterns of thinking, perception, and the influences which drive these processes. As the conduit for decision-making, the individual holds the key to the realisation of good practice and, therefore, efforts to foster their decision-making capabilities form part of the discussion.

Research indicates that biases cloud our ability to make decisions (Broadhurst et al., 2010; Kirkman & Melrose, 2014; Munro, 1999, 2011) and that effort and challenge is needed if they are to be in some way guarded against (Turney, 2009; Webb, 2006), often aided by the support of others (Helm, 2011; Kirkman & Melrose, 2014; Munro, 2011). For the purposes of utility, the role played by others will provide the foundations for a link to direct practice, as depicted in the following case study. This is positioned here as a thinking point, to be later used as an anchor for practice development.

**Case Study**

Jake is a newly appointed Practice Manager within a front-line child protection team responsible for the supervision of six social workers, each with varying degrees of experience. The team’s remit is the initial screening and, if appropriate, assessment of referrals related to possible incidents of child abuse or neglect. A recent inspection process has drawn attention to analysis as an area for development within the assessments completed by the team. Mindful of his new responsibilities with regard to practice standards and team development, Jake is keen to identify ways to improve this area of identified need. Understanding the importance of maintaining currency, Jake is currently signed up to bulletins from the government department responsible for children’s services, a professional magazine dedicated to developments in social care, and other key organisations, such as charities, who undertake work and research across the sector. While not expansive, these external knowledge sources offer insight and are likely to inform his mentoring of the team. Additionally, Jake retains access to literature accumulated from various training courses attended over the past six years when he first joined the department as a newly qualified social worker.

Situated in England, Jake has read the recent review of child protection by Munro (2011), identifying the importance of supervision in balancing practitioner reasoning, and also research from the National Society for Prevention of Cruelty to Children (NSPCC), concerned with common shortcomings that feature in the initial stage of assessment (Broadhurst et al., 2010). Armed with this information, Jake’s objective is to enhance the judgement-making capabilities of his supervisees, integral to which is the need to increase their alertness to evidence and skills in critical decision-making. His starting point is to gather together pertinent knowledge; that related to use of evidence, decision-making, and supervision.
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