

Appendix

Interview Questions

1. To start off, I'd love to know a bit about what attracted you to working in children's services.
2. I'm also interested to know how long you've been working in the field? And can you describe your role?
3. I'd also love to know your age, and your qualifications?
4. My research is exploring how social workers feel about working with decision tools – like the tool you're working with. I'm interested in the tool itself and how you find working with it, and how it impacts on your decision-making. But before we dive into specifics around the tool, I'm interested to know more generally how you feel about using technology – a computer, a tool like this, whatever – in your work.
5. Now moving more specifically onto the tool - can you tell me a bit about it?
 - Specifically, can you tell me how it works?
 - Can you also tell me how you're using it day to day in your role??
6. When you first started using this tool, what did you think about it?
7. Did you get any training in how to use the tool?
8. Is this tool different from tools you've used in the past?
9. Do you rely on other tools as well?
10. Can you give me an example of a case recently where you used the tool to support your decision-making, and talk me through how you used the tool to make your decision.

11. Can you describe how you draw on the experience that you've gained from working in this field for x years to make decisions. Do you, for example, feel like you've developed a strong but informed 'gut' instinct about a case when you first review it?
12. Do you feel like the way you draw on your experience has changed at all since you've started using the tool?
13. More generally, do you feel like the tool has changed how you make decisions?
 - If so, can you tell me a bit more about this.
 - If not, why not?
14. Does the tool change the way you *feel* about your decisions?
 - Do you feel more or less confident, for example?
15. If you had an experience where the tool suggested that a child was very low risk, but then it turns out that the child was being abused, do you think that would affect your attitude to or willingness to use the tool in future?

Vignettes

Tool 1

Scenario 1 (Anchoring bias):

- You are reviewing the case of an eight-year-old boy and the tool identifies risk flags against all five of the indicators. However, you've had interactions with that child's family on two previous occasions and have found no cause for concern – they interact very nicely and the child and his brother seem calm and happy.
- Talk me through how you'd make a decision about how to manage this case?

Scenario 2 (Using expert judgment):

- You are reviewing a case about a ten-year-old girl. The tool identifies risk flags against only two of the indicators, neither of which cause you to normally feel particularly concerned. However, when you call the family to check in, the mother sounds very erratic over the phone.
- Can you talk me through what you would do, and why?

Scenario 3 (Recall/availability bias):

- You are reviewing the case of a six-year-old boy. The tool identifies only two risk flags; one has been triggered as a result of low school attendance. Just last week you dealt with an identical scenario and decided not to prioritise the case because there were only two risk flags, and you normally only prioritise cases with three or more flags. However, it was subsequently discovered that the child – who had been absent from school for eight consecutive days – was the victim of serious domestic abuse.

- Can you talk me through how you'd make a decision about the current case in light of that information?

Tool 2

Scenario 1 (Anchoring bias):

- You are reviewing the case of an eight-year-old boy. You and the team talk through the report and there is nothing in it that is particularly concerning. Also – you know the family and the child – you've had interactions with them before, and you feel that they interact nicely, and the child and his brother seem calm and happy.
- You and the team decide to screen the case out, but then you look at the tool and it gives the child a risk of x^1 (a very high number)
- Can you talk me through how you'd make a decision about how to manage this case?

Scenario 2 (Using expert judgment):

- You are reviewing a case about a ten-year-old girl. There are a lot of factors in the report that concern you – and you feel that there are grounds for assigning the case – so you assign it for an investigation within three calendar days.
- You look at the tool and the risk score is x (a very low number).
- Can you talk me through what you would do, and why?

Scenario 3 (Recall/availability bias):

- You are reviewing the case of a six-year-old boy. The referral has come through from his school and the reason for the referral is repeated low school attendance.

¹ Actual numbers have been redacted to preserve anonymity.

- When you reveal the score, it's x (very low).
- Just last week you dealt with a similar case. A child had been reported for low school attendance and had the same risk score. It turns out that you uncovered that child had been the victim of serious and ongoing domestic abuse.
- Could you talk me through your decision-making process again – how would you manage the case presenting to you now, with a very low risk score, but with a striking similarity to the case you dealt with last week?

Tools 3a and 3b

Scenario 1 (Anchoring bias):

- You are reviewing the case of an eight-year-old boy and the briefing identifies a number of significant causes for concern and notes that causes for concern seem to be increasing. However, you've had interactions with that child's family on two previous occasions and through those interactions have found no cause for concern – the family interact very nicely and the child and his brother seem calm and happy.
- Talk me through how you'd make a decision about how to manage this case?

Scenario 2 (Using expert judgment):

- You are reviewing a case about a ten-year-old girl. The briefing all looks fairly benign:
 - it identifies very few causes for concern;
 - there nothing noted as being a worry for the future;

- and the contextual information is not concerning²
- You decide nevertheless to call the family to check in and the mother sounds very erratic over the phone.
- Can you talk me through what you would do, and why?

Scenario 3 (Recall/availability bias):

- You are reviewing the case of a six-year-old boy and, again, the briefing is fairly un-concerning (similar to the one I've just outlined). However, the week before, you had dealt with a case which had an almost identical briefing and it turned out that that child had been the victim of serious domestic abuse.
- Could you talk me through your decision-making process again?

² Detail redacted to preserve anonymity.