

## University of Dundee

### **NQSWs in Scotland: Experiences of practice during COVID-19**

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Scottish Social  
Services Council

# **Newly qualified social workers in Scotland: Experiences of practice during COVID-19**

**Trish McCulloch, David Clarke, Claire Ferrier,  
Maura Daly, Scott Grant, Robin Sen**

February 2022

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## Abbreviations

ECSW	Early career social worker
IP	Interview participant
NQSW	Newly qualified social worker
SP	Survey participant
SSSC	Scottish Social Services Council

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## **Executive summary**

This report presents findings from a national research study on newly qualified social workers' (NQSW) experiences of practice during the COVID-19 pandemic in Scotland.

It draws on findings from a review of the existing literature, 124 responses to a national online survey with NQSWs, and 12 follow up in-depth interviews. Data collection took place between November 2020 and February 2021 during which participants experienced a second national lockdown.

There are now several studies that report on different aspects of social work under the COVID-19 pandemic. Very few attend to the experiences of NQSWs and none focus on NQSWs' experiences in Scotland.

At the time of writing, this is the largest and most comprehensive published research study into NQSWs' experiences of practice during COVID-19.

### **Key Findings and recommendations**

COVID-19 has had a significant impact on NQSWs experiences of practice. However, our findings make clear that the impact and effects of the pandemic have not been uniform across the NQSW workforce. Rather, experiences are mixed and contingent on individual circumstances and differing approaches to early career support, learning and development across organisations. Efforts to understand the impacts of COVID-19 on NQSWs need to recognise the individualised, situated and temporal nature of this phenomenon. As Joan Tronto (2017) observes in respect of care generally: 'there are not singular but plural answers to questions about what it means to care well'. This means that if we wish to understand and support the needs of the early career workforce through COVID-19, then we need to work, think and learn through emerging knowledge together.

We offer below a summary of our key findings and recommendations.

#### **Education**

- COVID-19 has had a moderate but variable impact on NQSWs' experiences of qualifying learning.
- One in four NQSWs reported that their placement was concluded early with differing impacts on participants' sense of professional readiness.
- Many were completing research projects when COVID-19 unfolded and experienced this as a stressful and isolating experience.

Developing supports for NQSWs need to be responsive to the impacts of COVID-19 on recent experiences of qualifying education. Findings from this study suggest that attention to experiences of practice-based learning, and associated learning needs, is particularly important.

## **Induction and early support**

- Experiences of induction and early support remain inconsistent across Scotland. This appears to reflect longstanding differences in the quality of early career supports available to NQSWs across professional settings.
- Poor experiences of induction and early support were frequently followed by poor experiences of ongoing support, learning and development.

Employers should be supported to provide a more consistent experience of induction and early career support to NQSWs. This may be supported by current national activity to develop a Supported First Year in Practice. Frameworks for a Supported First Year should provide a clear outline of employer and NQSW responsibilities and clear lines of governance.

## **Ways of working**

- COVID-19 has had a significant impact on NQSWs' early experiences of work.
- Most NQSWs are working at a distance, from colleagues, social work offices, and people who use services.
- Home working is typically experienced as lone working and NQSWs miss routine opportunities to learn with and from others.
- The social work office emerges as an important professional and protective space.
- NQSWs report mixed and sometimes poor access to essential digital work tools.
- NQSWs are less positive about remote working than their more experienced colleagues. This appears to reflect the fact that early career learning is a thoroughly social and situated process.

Fuller research is needed into the impacts of remote and hybrid working practices on social workers and people who use services, including through attention to issues of diversity.

We need to better understand the role and contribution of different working environments to professional wellbeing, learning and development. This should include attention to the emotional labour of practice and the implications of this for the spaces in which social work is done.

## **In-person work with people who use services**

- In-person work with people who use services is much reduced and governed by increasingly centralised and/or remote assessments of risk.
- Most NQSWs spoke to the negative impacts of COVID-19 restrictions on the quality of in-person work, linked to challenges of building meaningful relationships.
- Some NQSWs felt that recent restrictions on practice are contributing to, or exacerbating, increasingly administrative and techno-rational forms of practice.
- A small number described working outside of COVID-19 related rules and restrictions, framed typically within efforts to provide a more humane and socially just practice.

As we move through and from the COVID-19 pandemic, we need to be attentive to its unfolding and enduring impacts on practice, including in respect of what, where and how social work is done.

## **Support**

- Most NQSWs continue to report regular and positive experiences of formal supervision.
- Experiences of informal support, identified as critical to early career learning and development, are varied.
- Physical distance from colleagues was identified as the key obstacle to positive experiences of informal support. Some organisations and teams have been more effective in overcoming this obstacle than others.

Organisational and professional commitment to excellent early career support and development needs to extend beyond the boundaries of supervision. More strategic and sustained attention should be given to understanding and developing the place of informal support as an important professional development tool.

## **Professional learning and development**

- NQSWs report contrasting experiences of learning and development during COVID-19.
- One third report good access to learning and development opportunities, one third report no meaningful opportunities, and one third describe a mix of the two. This contrasts with our 2017 findings where over two thirds of NQSWs reported being satisfied with the learning opportunities available.
- Positive accounts highlight the value of a structured, blended and multi-modal approach, including attention to formal and informal learning.
- Negative accounts were associated with poor employer recognition of NQSWs' learning and development needs, professional isolation and a reliance on mandatory opportunities.

Developing efforts to improve early career learning and development need to address the contrasting and situated accounts reported in this study and others.

Improvement efforts should better embrace the multi-dimensional, integrative and social nature of professional learning, including through attention to formal and informal modes.

## **Professional confidence and confidence**

- Accounts of professional confidence are mixed. This appears to reflect the developmental nature of professional confidence and differing access to key practice, learning and support opportunities.
- Positive accounts were associated with good quality practice-based learning opportunities prior to qualification and good quality practice, learning and support opportunities post qualification.



- Negative accounts were associated with professional isolation linked to COVID-19, practicing social work at a distance and limited access to learning and support.
- Overall, accounts of professional confidence under COVID-19 appear to depend heavily on the extent to which universities, employers, practitioners and others have been able to continue to provide critical support, learning and development opportunities to students and NQSWs, albeit in new and creative ways.

Social work is a practice-based profession and accounts of professional confidence appear to depend heavily on supported opportunities for practice-based learning. The profession needs to work together to protect and strengthen this identity and method, including through periods of change and crisis.

# 1. Introduction

## Background

In 2016 we were commissioned by the SSSC to conduct a five-year longitudinal research study into the experiences of newly qualified social workers (NQSWs) in Scotland. The aim was to develop a national picture of the experiences and support needs of social workers across their first five years of practice. We are in the final year of that study and have produced four annual reports which outline our findings (Grant et al., 2017, 2018, 2019, 2020). Our final project report will be available in 2022.

In March 2020, the COVID-19 pandemic unfolded across Scotland. It quickly became apparent that the impact of COVID-19 on social workers' experiences of practice was significant. We were keen to understand this and, with support from the SSSC, developed an additional COVID-19 strand to our study. The focus of this report is on newly qualified social workers' experiences of practice during COVID-19. Data collection took place between November 2020 and February 2021, during which Scotland endured a second national lockdown. The experiences of our 2017 cohort (NQSWs who graduated in 2016) will be reported on in our final longitudinal research report.

## Aims and objectives

1. To examine NQSWs' experiences of practice during COVID-19, including experiences of support.
2. To explore associated support needs for the workforce.

Specifically, we set out to understand the impacts of COVID-19 on NQSWs' experiences of:

- Education, induction and early support
- New ways of working
- Professional support
- Learning and development
- Professional confidence and competence

## Method

We employed a mixed methods approach to study, running from August 2020 to December 2021. In the first phase, we examined existing writing and research into social workers experiences during COVID-19. We found very little on newly qualified social workers' experiences in Scotland, however wider literature from across the UK provided a useful baseline overview of key themes and issues. We then conducted a national online questionnaire, with 124 responses from registered NQSWs situated across Scotland, from a total possible population of 296. This was followed by twelve in-depth interviews, again with NQSWs from across Scotland. Data was analysed thematically, guided by the research aims. Fuller detail of our method at each stage is provided in Appendix 1.

## Findings from the literature

In order to establish what was known on this topic, we conducted a review of the existing literature. Findings from this review are presented in Appendix 2. Summary findings are presented below.

- Much social work practice shifted to online or phone-based interactions with service users shortly after the first national lockdown. However, some face-to-face contact with people who use services continued in most cases, involving adult/child protection or risk management in justice social work (probation in England, Northern Ireland and Wales).
- Initial professional experiences of practice after lockdown were mostly expressed in positive terms, including reports of greater team interaction online, better professional attendance at multi-agency meetings, reductions in caseloads, improvements in work life balance for some and a general sense that local authorities had responded well to the rapidly changing context of the pandemic at the time.
- Towards the end of first lockdown, a number of challenges emerged. These included the additional burden placed on statutory services in the absence of voluntary and third sector agencies, and the growing complexity of some cases where social distancing and virtual contact restricted social workers' ability to conduct comprehensive assessments. The needs of service users also changed somewhat over this period, contributing to additional service demands.
- NQSWs generally had limited experience of professional statutory practice prior to new arrangements imposed under lockdown rules. There is some evidence to suggest that initial experiences were positive as many developed a strong sense of their importance to meeting social needs, thereby helping to strengthen their own professional identity. This stands in contrast to other evidence that many NQSWs also felt isolated from team members, experienced a loss in learning opportunities, often lacked adequate home working space and felt that the emotional impact of working under COVID-19 restrictions was not properly recognised.
- Lessons from existing research point to the importance of supportive managers and teams, as well as the crucial function played by shadowing opportunities and engaging in a wide range of learning at the start of professional careers. The emotional impact of practising under pandemic restrictions is also highlighted as an important need going forward.

# Findings

## 2. Education, induction and early support

### Key messages

- COVID-19 has had a moderate but variable impact on NQSWs' experiences of qualifying learning.
- The most significant impacts were on experiences of practice placements and completion of research projects.
- Experiences of induction and early support remain inconsistent across organizations.
- Many employers and teams have been able to provide excellent early career induction through COVID-19, but this is not the case for all.
- Poor experiences of induction and early support were frequently followed by poor experiences of ongoing support, learning and development.

NQSW participants were in their final year of study when COVID-19 unfolded in Scotland. Some were completing campus-based learning and associated assessment, others were completing their final practice placement. Academic learning and assessment provision promptly moved online at this point, however, in March 2020, in line with Scottish Government guidance, all social work practice placements were suspended. 76% of our participants reported being able to successfully complete their final year placement prior to suspension. 24% reported that their placement was suspended before completion. In the two months following, the SSSC and partners agreed modest revisions to the requirements for qualification, including adjustments to the required number of practice learning days. This meant that most students were able to complete their studies and associated assessment drawing on the number of placement days completed at the point of suspension. A small number completed outstanding days over the summer period, albeit in very altered circumstances.

Overall, our findings indicate that COVID-19 has had a moderate but variable impact on this cohort's experiences of qualifying learning. Variations reflect the differing personal and social circumstances of students, different patterns of study across courses and variable access to and experiences of supports. The impact of COVID-19 on early experiences of practice appears more significant, although again variable. This perhaps reflects the point at which COVID-19 unfolded in Scotland and the significance NQSWs place on learning **in** practice (Grant et al., 2017, 2018).

## **Education: campus-based learning**

The impacts of COVID-19 on campus-based learning experiences were moderate but variable. Responses indicate that many students had completed most of their classroom-based learning and prompt movement by HEIs to online learning methods allowed them to continue their studies and maintain good contact with academic staff:

We were able to overcome the difficulties by using skype and telephone. (SP)

Lecturers were very supportive. (SP)

However, for some, the shift to online learning was challenging and supports limited:

Teaching was online but was not well established and didn't work well for most of us. We were not well supported. (SP)

We got very little help and support from our lecturers during this period. (SP)

Just under half of participants described completing final-year research projects over this period which, for many, was difficult. Commonly discussed challenges included: limited opportunities for face-to-face exchange with staff and supervisors, the physical closure of university libraries, isolation from peers and balancing study with childcare and home schooling:

I feel I missed out on being able to meet the lecturer face to face to discuss key points about the dissertation process. (SP)

There was no access to the library...which restricted my ability to access books and research papers. (SP)

I am a single parent with limited support network. I was unable to study due to childcare responsibilities when the schools closed. (SP)

There are very few studies of NQSWs' experiences of education during COVID-19. However, the above findings accord with those from wider research which points to variations in individual and professional experiences during COVID-19. We can expect then that individual experiences of education will also differ as students manage particular individual circumstances and universities manage their own curricula structure and activity, including the structure of campus-based learning and the provision and timing of placements.

## **Education: practice-based learning**

As indicated, most NQSWs managed to complete their final practice placement as planned however one in four described significant disruption to placement. Again, experiences varied as regards the scale and impact of disruptions. Several participants, typically those in the final stages of placement, described a

sense of being lucky or fortunate:

I was lucky to have been nearing the end of my final placement as we went into lockdown. (SP)

Some described a sense of professional confidence linked to other prior learning experiences. Others lamented the loss of what they considered to be 'significant learning opportunities'.

Placement ended at mid-point. I had completed enough learning outcomes to pass the placement. However, on reflection I do not personally feel that I learned very much in my second placement as I was only starting to work with families. (SP)

This placement was my only experience of working within the statutory sector and really was not long enough. (SP)

A few participants, who had their placements cut short, described stresses associated with the time it took for decisions about qualification to be made. A small number discussed difficulties associated with having to leave placement abruptly, specifically the abrupt end to relationships with services users and colleagues. A few expressed a sense of loss at having no clear endpoint to their studies and no opportunity to formally mark their achievement with their family and peers.

It is clear from the above that COVID-19 has had a significant impact on the learning experience of social workers graduating in 2020. This cohort of NQSWs completed their studies amidst significant disruptions to learning and to wider social and professional life. However, almost all managed to successfully complete their studies, graduate and find work, outcomes that speak to the considerable agility and responsiveness of all involved (see also O'Rourke et al., 2020 and Senreich et al., 2021). We found that experiences of education under COVID-19 differed significantly for participants, linked to the often-different personal and social circumstances of individual students, different patterns of study across courses and differential access to and experiences of supports. Relatedly, we expect that future experiences of education during COVID-19 will continue to reflect the shifting impacts of COVID-19 on that. For example, social workers who graduated in 2021 will likely report different experiences again. The plural, contingent and temporal nature of NQSWs' experiences under COVID-19 are themes that run through the study findings and the wider COVID-19 research literature.

### **Education and preparedness for practice**

In common with findings from our 2017 study (Grant et al., 2017), participants presented mixed views on the extent to which they felt education had 'prepared' them for practice. Many reported feeling that they had the required theoretical knowledge and understanding and now needed to apply and develop that knowledge in relation to specific practice tasks and processes. Some, like interview participant (IP) 1, who had 'really good placements', described this as a positive transition:

the transition has actually been okay, much easier than I thought. ... What has been really good for me is owning my own practice. ... I know what I'm doing, I just don't know the methods of the tasks. (IP1)

Others, like IP2, reflected that 'theory and knowledge... does prepare you a lot' but identified a gap in knowledge with respect to local authority processes. IP3 felt similar and, like others, described a sharp learning curve linked to not having had a statutory placement:

... they don't teach you the specifics of how local authorities work. So it was a big shock realising how much more I actually had to learn when I got into the job ... I never had a statutory placement, so I suppose, yeah, that didn't quite prepare me as much as it could have done.

Relatedly, access to 'good' statutory learning opportunities was frequently associated with a positive transition experience. These findings align with findings from wider studies on the relationship between education and professional readiness and speak to the importance of field learning, and statutory based learning in particular, to NQSWs' sense of professional readiness (McCulloch and Taylor, 2018). However, access to statutory-based learning experiences in Scotland varies significantly across regions and is reliant on professional 'goodwill', a variable that continues to diminish in the face of wider structural and professional pressures on local authority organisations and teams (McCulloch and Taylor, 2018). While all agree that experience of statutory learning opportunities is an important dimension of professional learning, confidence and competence, there is currently no robust mechanism for delivering on this across Scotland. This is despite the fact that 95% of NQSWs start their career in statutory settings, a figure that remains broadly stable over the first five years of practice (Grant et al., 2020).

Overall, we found that relatively little attention was given by participants to the impact of COVID-19 on experiences of education and preparedness for practice, perhaps reflecting that participants were in the final stages of study when COVID-19 unfolded in Scotland. Rather, responses focused repeatedly on the impact of COVID-19 on learning experiences and opportunities *in* practice. In this respect, our findings underline that professional readiness does not rest on experiences of education alone but on an interplay of individual circumstances, education *and* early work experiences, and that these elements need to be considered together. As one survey respondent reflected: the 'real learning just started when we started working'.

### **Induction, shadowing and early support**

In common with findings from previous studies, NQSWs experiences of induction and early support during COVID-19 were marked by difference (Grant et al., 2017). We know from our longitudinal study that there is no standard or shared approach to induction for NQSWs entering practice in Scotland; rather the content, quality and delivery of induction differs across (Grant et al., 2017). This differential experience continues under COVID-19. Further, in common with

findings from our longitudinal research, findings from this study indicate that experiences of induction and early support have a significant impact on NQSWs' developing sense of professional confidence and competence.

Some participants described positive experiences of induction, despite COVID-19 restrictions:

My induction into the role was excellent. My Team Manager was very clear when I was offered the position that they would put a lot of support in place for me as a NQSW. (SP)

In this and similar accounts, induction often ran over several weeks or months and involved access to a mix of formal and informal learning and support opportunities and relationships. Positive examples included: access to an available mentor, supportive line management relationships, opportunities for shadowing, organisational training and access to peer-based learning and support:

My team leader is very supportive. She arranged a mentor for me who has been qualified for a few years. This has been incredibly helpful for me as it has been someone I can go to for advice and any help I need. (SP)

We currently attend a virtual NQSW induction programme which goes over different topics each week. (SP)

Positive induction experiences were also associated with being able to work in the office, opportunities for 'shadowing' colleagues and other shared office-based duties. These examples were described as providing 'integral' opportunities to learn through doing and to learn alongside colleagues rather than in isolation.

For the first two weeks I was given the opportunity to shadow meetings and visits with other workers. (SP)

... doing lots and lots of duty, a really good way of picking up the role and knowing exactly what goes where and speaking to lots of people and getting to know other professionals in other areas. (SP)

However, more regularly, NQSWs reported that induction had been limited or absent:

I do not feel as though I have had an induction. (SP)

Cases were given to me and I had to dive right in, with little to no guidance. (SP)

Some observed that poor induction opportunities reflected longstanding 'structural issues within [their] department'. Others observed that COVID-19 was an aggravating factor:

So there wasn't an induction. ... there wasn't any sort of settling in period... on my first day, I got eight cases and I was off... we were only in



lockdown a couple of months... everybody was trying to find their feet, so there just wasn't anything for us. (IP4)

I kind of got flung in the deep end...our managers aren't in the office, they're all working from home... it's all kind of managed on video calls, it's not been ideal at all' (IP3)

Others described induction activities re-shaped by COVID-19, characterised by descriptions of community services, 'online training [via] ... slides or just videos' and virtual introductions to new colleagues. Many found this unengaging or 'difficult to concentrate on'.

Several participants described how the cumulative effects of poor induction and a sustained absence of opportunities to learn with and alongside colleagues had contributed to low levels of professional confidence and to a sense of professional isolation and/or alienation:

I didn't feel ready for the situations that [have] arisen as I haven't got to shadow workers or learn from other staff. (SP)

I feel alienated and left without a guidance and support. Even th[ough], my manager is very supportive, I feel left out; I'm not able to easily interact with my colleagues to learn the processes etc. (SP)

While some had found their way through this 'lonely' experience, often linked to asking for and receiving 'additional support', for others, these challenges were ongoing and the effects 'huge'. IP5, for example, described having had no induction experience and no subsequent opportunities for role-related training. They likened the transition from education to practice as going 'from zero to a hundred' with deleterious effects on health, wellbeing and professional motivation:

And if you came up to me now and said, 'oh you can have your wage for a different job,' I would genuinely walk away right now... it's just totally different being an actual social worker just now... we've not had any training... so like SDS, Self-Directed Support, it's a minefield to me...I really dread seeing stuff like that on my caseload, because I just think, 'I have no idea what I'm doing'.

Other interview participants described similar experiences and effects where poor experiences of induction and early support were followed by limited access to guidance and training generally, leaving them feeling unprepared and afraid. IP6 explains:

I think we are not getting enough training ... and I don't have enough guidance to make sure I'm making the right decision... the reality of social work is that you will be blamed for not taking any action, and then you are blamed for taking actions... they just didn't prepare me for it... you learn by doing things but if that learning is affecting people lives ... I think, in the normal time there should be a supported year... And the Coronavirus definitely made that worse, ... I feel it's unfair.

The sharp contrasts in our findings in this area suggest that it is possible to continue to provide excellent induction and early support experiences for NQSWs through COVID-19. This is supported by findings reported by O'Rourke et al. (2020) and Senreich et al. (2021) who describe similarly positive experiences of transition and induction. However, a significant number of participants also described poor experiences. Our findings suggest that poorer experiences partly reflect the interruption and impacts of COVID-19 on routine and informal learning opportunities available to NQSWs, specifically opportunities to work and learn alongside more experienced colleagues (Cook et al., 2020). However, this also appears to reflect longstanding patterns of inconsistent and inadequate induction and early support across organisations. While many appear to have found their way through these challenges, a significant minority appeared lost, anxious and disillusioned.

Routine opportunities to learn through shadowing, direct work with service users and working alongside professional colleagues and partners continues to emerge as a cornerstone of early career learning (Grant et al., 2020). At the time of writing, work is underway in Scotland to improve the quality and consistency of NQSWs' experience of early career support, in the form of a Supported Year in Practice (SYP). Our findings provide clear support for this initiative and a developing picture of what good quality early career learning and support involves.

### 3. Ways of working

#### Key messages

- COVID-19 has had significant impacts on NQSWs' early experiences of work.
- Most NQSWs are working at a distance; from colleagues, from the social work office, and from people who use services.
- Home working is typically experienced as lone working and NQSWs miss routine opportunities to learn with and from others.
- NQSWs report mixed access to essential digital work tools.
- Experiences of in-person work with people who use services is much reduced and governed by increasingly centralised assessments of risk.
- The social work office emerges as an important professional and protective space.
- NQSWs are less positive about remote working than their more experienced colleagues. This appears to reflect the fact that early career learning is a thoroughly social and situated process.

As our review of the literature makes clear, some of the most significant impacts of COVID-19 on professional experiences of practice relate to what, where and how social work is done (Baginsky and Manthorpe, 2020; Cook and Zschomler, 2020; Ferguson et al., 2021). In this section, we review NQSWs' experiences of home working, new digital tools and technologies, remote practice, in person work and self-care.

#### Home working

Most survey and all interview participants reported working mostly and sometimes entirely from home, with limited amounts of time spent in office and community settings. Some described working to a rota system where they could access the office one or two days per week, or one week in three or four. A small number described being asked to work in the office for their first few weeks in post to support their transition and induction into role. Those that experienced this were uniformly positively about this experience.

For many, home working was described as an isolated and lonely experience, marked by lack of professional interaction, peer support and associated opportunities for peer learning. This chimes with emerging research findings in this area which suggest that NQSWs are less positive about home working than their more experienced colleagues (Cook et al., 2020). As the following

participants explain:

No one to turn to as you would in an office environment when working from home. (SP)

My average working day is mostly spent looking at my screen. Meetings are online, hearings are online, supervision is online. And when I do home visits they are short. As a NQSW this can be a quite isolating experience and it is difficult to learn when you are alone the majority of the working day. (SP)

Importantly, what is being described here is less an absence of formal support, learning or training; rather, it is a loss of ready access to the kinds of routine and informal learning and support accessed through working and learning with others. As IP8 explains, who started in the office with access to 'really good' shadowing and learning opportunities:

just ... overhearing people's phone calls and people dealing with difficult situations ... all that learning is integral.

For her and others, this has 'completely fallen off because you're just not in that environment anymore'. Similarly, IP1 explains:

It's obviously not the same as working in an office ... something comes into your head, you can ask ... that little piece of the puzzle, that little question that builds a bigger picture ... what's this? And how do I? And someone will show you ... but there's none of that ... its taking a long time to learn things that, well, you'd have picked up just without thinking about in an office environment.

Participants understood that they could approach colleagues for help and advice virtually. However, for most, this was not straightforward. Unlike their more established colleagues, most NQSWs have no pre-existing relationship with colleagues (Cook et al., 2020). Many also reported feeling reticent, guilty or silly asking for help with what they knew were basic questions:

Rather than just turning around and asking questions and discussing cases, I have to pick someone who I think could help (having little knowledge of the team) and hope they are available to skype/call. (SP)

I tend to not want to bother them with silly questions that I feel I should know the answers to by now, however due to working from home etc I don't. (SP)

I feel guilty for taking up their time when they are busy themselves. (SP)

More than half of the interview participants expressed that they felt the need to justify approaching colleagues, a feeling that added to their sense of professional isolation:

But having to phone someone and ask a question which seems not worthy

of a call, like you just don't do it. And not having that constant support of a team around you is really difficult. (IP7)

Importantly, there were exceptions to this general pattern, linked either to experiences of a proactive team or to accounts of personal confidence. As one participant noted:

I really enjoy working from home and I'm confident to ask for support and help when needed. (SP)

Relatedly, a small number of participants described 'practical' benefits of home working (discussed below). For most however, NQSW accounts of home working centred on the many challenges associated with it, specifically the very limited opportunities for peer connection, learning and support (see also, McFadden et al., 2021b; Cook et al., 2020; McGuinness, 2020).

### **The social work office as a professional and protective space**

Participants also spoke to the importance of the office environment on their developing professional identity and confidence. As IP8 explains:

You miss getting yourself in work mode ... when you're in the office surrounded by people and having those experiences - it's much easier to feel part of the role. Where at home, you could be anyone, it's someone sat in a bedroom.

The significance of the office as a physical, social and psychological space, and the strength, protections and boundaries often associated with that, was particularly evident in accounts of handling work pressures and strains. As IP8 continues, discussing the challenges of working from home:

... fine if you've just got quite straightforward stuff to get on with. But if you've got to do any sort of difficult phone calls or contentious stuff, it makes things much, much harder, because you need that team support.

Similarly, IP3 explains:

you're having quite a difficult conversation, or you've got like some parents that'll shout at you and bawl at you and call you names and stuff - I don't like that happening when I'm in my own house. I don't know if that's a bit odd, but it just feels different when you're getting shouted and bawled at in your bit of comfort of your own home rather than the office.

Participants also described having to take significant steps to maintain confidentiality when working from home, both to protect the rights of service users and to protect family and/or friends from the difficult aspects of their work. Baginsky and Manthorpe (2020) report similar, noting that early career social workers are also the group least likely to have an appropriate space from which to work.

Many participants also described a struggle to develop healthy work patterns

when working at home, a finding that also emerges from wider studies (Phillips et al., 2021; Sliman, 2020). For example, some described working more hours due to the increasingly blurred lines between home and work:

[there's] less routine, and there's no clear boundaries between work and not work... definitely working more hours than usual. I always feel if I have some unfinished thing, that I need to finish it because the computer's right there. (IP6)

Others discussed workload pressures as a key obstacle to establishing healthy work patterns, pressures that were, for some, exacerbated by COVID-19 related staff absence (see also Cook et al., 2021; Sliman, 2020). Others described a struggle to 'shut off' from work, linked sometimes to the impacts of COVID-19 on social and recreational activities available outside of work. One interview participant identified the development of healthy work patterns and associated practices of self-care as another new skill to be honed:

I think it's still a learning process ... becoming comfortable and accepting that your never gonna get [the work] all done. (IP7)

### **Benefits of home working**

In common with their more experienced colleagues, some NQSWs also discussed benefits associated with home working (Cook et al., 2021; McFadden et al., 2021b). Some noted time and money saved on travel. Others described the benefits of more flexible work patterns, reduced distractions, the ability to blend work and childcare, and reduced stress associated with not having to rush from place to place. However, mostly, participants were quick to point out that the benefits of home working did not outweigh the challenges:

I suppose if there were any pluses, it is that there isn't a commute. ... It takes me an hour to drive to work, but that is the only thing, and I actually don't mind the drive ... I would much rather be at work in an office. (IP1)

Slightly lazier days, slightly later mornings. So I prefer to start later and to finish later. But that's probably the main advantage. ... Probably the only positive, actually. (IP9)

Some interview participants also indicated that access to some of the benefits outlined above were not always easily available to NQSWs. For example, three of 12 interview participants felt that the potential flexibility of homeworking was offset by feeling monitored by seniors and others and an associated sense of needing to 'always be online'. As IP7 explains:

I guess it's good in that ... she can tell you to not work when [you] shouldn't be working, but it can be—you feel a bit under pressure sometimes during the day 'cause everyone on the team also can see if you're laptop's on. Like to say, like 'do not disturb' or like 'busy'. ... and like sometimes people 'll comment saying, 'Oh she's not been online for like an hour. What's she doing?' ... You do feel the pressure to always be online.

Similarly, IP5 explains:

... so we got told like, 'oh the seniors are looking at when you're last active.' So what I've found really difficult is like taking a break, like walking away. Because like the computer will go to... like inactive or away ... So that they can see ... what you're doing. So I find that really difficult, ... if I was in the office I'd prob- like you'd take a wee tea, and then you would have ... your lunch. But I feel like that, like that's quite difficult at home.

The above provides a snapshot of NQSW accounts of home working under COVID-19. In common with emerging research in this area, for many, home working means lone working and thus limited access to the people, places, provisions and protections considered crucial to the development of professional confidence, competence, identity, relationships and wellbeing (Cook et al., 2021; Grant et al., 2017). Further, our findings suggest that home working can be particularly challenging for NQSWs, who rely heavily on the physical, social and psychological support and protections of the social work office to build identity, peer relationships, healthy work patterns, and professional confidence (Baginsky and Manthorpe, 2020). Equally, some of the documented gains of home working, i.e., autonomy and flexibility, were found in this study to be less available to NQSWs who were still navigating professional norms and employer and colleague relationships and expectations.

In these respects, our findings underline that early career development is a thoroughly situated and social process, that is, NQSWs thrive in environments where they can work with and learn from others. Relatedly, our findings suggest that home working works best when it operates alongside regular opportunities for office and peer-based working, when NQSWs are supported to exercise flexibility, choice and control over their work patterns and when they have access to a suitable home space from which to work. Few participants discussed experiences of home working under COVID-19 in these terms.

Understanding NQSW experiences of home working is important as we continue to work through the enduring effects of COVID-19 and as we embrace agile and hybrid modes of working across social work services. While wider research on social workers' experiences of home and hybrid working presents a mixed picture, this mix is much less evident in NQSW accounts. Organisations and employers should pay close attention to the often-different experiences and needs of their workforce, including those at different stages in their professional journey.

### **Digital tools and technologies**

Closely associated with the move to home and hybrid working under COVID-19 is the increased reliance on digital work tools and technologies. For social workers in the UK, essential digital tools typically include a smart phone, a laptop and access to digital platforms that support remote working. Again, in common with emerging research in this area, our findings indicate a mixed picture regarding NQSWs access to and experiences of using digital technologies (Ferguson et al., 2021; Cook et al., 2020; Orr, 2020).

Around half of the participants described being provided with a mobile phone

and a laptop upon starting in role. For others, this was significantly delayed:

I had to wait approximately 1 month to get access to my own laptop and am now 4 months into my new role and do not yet have a work mobile phone. (SP)

I do not have a work laptop still, I started in April [2020]. (SP)

Others reported having a laptop and mobile phone but no access to platforms enabling remote communication. In these instances, participants reported having to either work from the office or use their personal devices for work, as the following survey response illustrates:

We use our own personal technology to complete the job, which is not ideal. My laptop is very old and has a lot of issues connecting to the remote servers. (SP)

For some, poor access to digital tools contributed to experiences of distance and disconnection from others. As one survey participant explains:

...I still do not have a work phone. It's very hard because most of my team is new and working has changed so everyone needs a laptop and everyone needs a phone too. I feel physically and technologically disconnected from the rest of my team. (SP)

A small number observed that the increased reliance on remote tools and technologies has contributed to important and unwelcome changes to professional identity:

I feel it's like a call centre, because we don't normally turn on our cameras, because of the broadband, ... and if we're just dealing with cases or answering the phone calls, or contacting different agencies, it's all done through telephone calls, so the majority of time it's just speaking over the headset, typing the notes, just like a call centre. (IP6)

Again, our findings in this area underline the divergent nature of NQSWs' experiences of home and hybrid working under COVID-19 and the significant impacts of poor access to essential digital work tools.

### **Remote practice with people who use services**

Across the data sets, participants were, at best, tentative about the value of remote technologies in their work with people who use services. While a few recognised some benefits, for example, associated with ensuring safe working practices, most spoke to the limits of working remotely. This contrasts slightly with accounts of social workers' experiences in this area, which tend to suggest a more mixed picture (Ferguson et al., 2021; Cook and Zschomler, 2020).

In common with Ferguson et al. (2021) and Kingstone et al.'s (2021) findings, some participants described practical difficulties accessing and/or using digital technology, including the impacts of digital exclusion for service users:



...not all families have access to smart phones, tablets and laptops making them more isolated and unable to participate. (SP)

Others spoke to the challenges of establishing new relationships with service users remotely and to the anxieties of conducting assessments at a distance; including, for example, a lack of opportunities to ask colleagues if they are asking the 'right' questions (see also Kingstone et al., 2021). IP8, for example, discusses the gaps between what is said and what is seen in remote assessment practice:

You're doing a lot of assessments when you have no idea what the person even looks like or how they're really living and it's almost like you're having conversations that are more based on assumptions rather than what you've really seen and assessed with your own eyes ... it's not ideal.

Another interview participant discussed concerns regarding opportunities for service user participation and involvement under COVID-19, including the involvement and participation of children and young people. Others expressed concern about the impact of digital tools on the 'kinds' of social work being done during COVID-19. IP6, for example, observed a move away from relational approaches and values towards 'pure case management ... it's less social, more managerial'. IP7 expressed something similar:

I was not expecting to be at my desk as much...I always thought that I would be out doing work face-to-face, and I'd be really involved ... . I find myself a lot of the time writing reports, writing case notes, at a desk.

Some of these concerns connect with those reported by NQSWs pre-COVID-19, for example, constraints on opportunities for relational and participatory practice (Grant et al., 2017; Tham and Lynch, 2014). It is impossible to measure the precise impacts of COVID-19 on these issues, however we can note that, for some NQSWs, these issues were particularly pronounced during COVID-19.

Considered comparatively, there are various reasons why NQSWs may be less positive about remote working with people who use services than their more experienced colleagues, many of which are touched on above. Similar to home working, remote working typically means lone working, therefore NQSWs have had few opportunities to observe how their colleagues are making the best use of remote working technologies. Also, NQSWs are almost always working within new relationships, meaning that both parties are finding their way, with no prior relationship to build on. Relatedly, the nature of the remote activity NQSWs are involved in is also mostly new, therefore NQSWs' capacity to attend to and make sense of the different dynamics at play in that process is likely to be in development. Some of these challenges may ease as future cohorts of graduates start practice with more experience of hybrid and remote working. However, for this cohort, the world they were navigating was, in many ways, entirely new.

### **In person work with people who use services**

Our findings suggest that in person working has continued during COVID-19 however, for almost all, this is significantly curtailed and now undertaken in the

context of shifting rules and restrictions (see also, Baginsky and Manthorpe, 2021; Banks et al., 2020; Cook and Zschomler 2020; Ferguson et al., 2021; Manthorpe, et al. 2021; O'Neill and McGreevy, 2020). Again, while there are clear patterns across our findings in this area, participants reported differing experiences as organisations, individuals and teams appeared to interpret and respond to guidance governing in person work in slightly different ways.

Almost all participants reported easy access to Personal Protective Equipment (PPE). Only 2% of survey participants described difficulties in this area. Similarly, access to PPE did not emerge as a significant issue within interview discussions. Rather, the challenges of in person work related to navigating changing government and/or organisational guidance and, though to a lesser extent, the perceived impacts of risk-centred practice on NQSWs' capacity for good social work practice.

Survey and interview participants variously described the rapid development of new risk-based categorisations and protocols governing in person work. For some, this was clear and straightforward, for other, less so. As one survey participant explains:

Risk assessments are done beforehand and no home visit that isn't child protection should be longer than 15 minutes. (SP)

Several interview participants described the creation of new categorisations of work which governed what could be done by whom, with whom and when. As IP3 explains, home visit decisions were now 'dependent on the [assessed] level of risk... category one, two and three'. Others explained that home visits could only be undertaken if they were considered 'life and limb' (IP8), 'urgent' (IP1), 'critical' (IP7) or 'like crisis or unavoidable' (IP11). Interview participants also outlined that all home visits 'have to be authorised by a manager' (IP7) and that new categorisations and protocols were made 'at senior managers level and above' (IP7, IP10). What appears to be being described here is the rapid development of newly centralised, top down, distal and risk-centred rule and protocols, where both the assessment of presenting risk, and decisions relating to it, were typically made at a distance and by social work managers. Interestingly, few participants commented on this shift – perhaps suggesting tacit acceptance - beyond noting that senior decision making was not always consistent and sometimes reflected 'a luck of the draw of who's on...' (IP5).

However, several interview participants discussed the ways in which new rules and restrictions on in person work were having a significant impact on their practice and on their development as a new practitioner. In common with findings from studies of social workers, accounts in this area highlighted adverse impacts on NQSWs' capacity to connect and build relationships with particular service users and user groups (see also Kingstone, et al., 2021). IP1, for example, discussed the difficulties of communicating with people from a 2m distance and of working with children outdoors and in cold temperatures. Similarly, IP2 described 'barriers' created through not being able to get close to teenagers who have little concept of the need for social distance; or with younger children who struggle with this and with workers wearing masks. Relatedly, IP7 reflected on the difficulties of working with service users who are

non-verbal and who rely on proximity and touch to communicate. In these ways and others, interview participants described the impacts of COVID-19 on their capacity to 'do' social work and to build the kinds of relationships on which this work often depends.

Again, in common with wider research findings, there were also exceptions to the above accounts of restriction and constraint (Banks et al., 2020). For example, one survey participant described that: '... at least half my day is spent visiting, supervising contacts, conducting assessments or attending hearings'. (SP). Relatedly, a small number of participants described in person work conducted at their discretion or 'outside' of the guidance, as the following responses illustrate:

I believe that workers were initially told they should only be completing home visits for Child Protection cases, however it is clear that all staff, including myself, are completing home visits which are not Child Protection related. (SP)

Since the pandemic, I've been helping my clients with shopping, cleaning, moving furniture, doing pest control etc. I am aware that it is in opposition to the current guidance but no one else would do it at this tough time and the clients would be left without the necessary support! (SP)

I have removed mine [face mask] to speak with children and when speaking to parents especially when delivering important information in a clear way. Masks make it difficult to effectively communicate. (SP)

These responses indicate that, at times, some NQSWs have judged it reasonable to depart from national/ organisational guidance governing in person work. Importantly, in the examples provided, this was not in response to emergency, high risk or critical incidents. Rather, it appeared to reflect efforts on the part of some NQSWs to continue to practice as humanely and relationally as possible.

Overall, and in common with wider research findings, our findings indicate that opportunities for and experiences of in person work with people who use services have continued but are significantly constrained. Further, professional decision making regarding what and how in person work takes place is now governed by new and typically distal assessments of presenting risk. There are some exceptions to this pattern, with a minority of NQSWs reporting more frequent in person work and/or the use of discretion in following guidance.

## 4. Support

### Key messages

- Most NQSWs continue to report regular and positive experiences of formal support and supervision.
- Experiences of informal support, identified as critical to early career learning and development, are varied.
- Physical distance from colleagues is a key obstacle to positive experiences of support. However, some organisations and teams have been able to overcome this.

### Professional supervision

Given the measurable nature of some aspects of supervision, this section provides opportunity to compare NQSWs' experiences of supervision across our 2020 cohort with those who graduated in 2016 (referred to as 2017 cohort/study reflecting the date of publication). While this provides opportunity for closer analysis of the impact of COVID-19 on NQSWs' experiences, our findings highlight the multiple variables impacting on NQSW experiences under COVID-19 and thus the dangers of looking for narrow explanations.

For NQSWs in this study, professional supervision continues to be the primary mechanism of formal support. For most, this now takes place virtually rather than face to face. 30% of participants reported having 'in-person' supervision, whilst half reported having supervision online, via video call platforms or telephone (40% and 10% respectively). 12% described a mix of in person and remote supervision.

Compared with findings from our 2017 study, our findings here indicate that the **frequency** of supervision has increased for many NQSWs, with 45% of participants reporting supervision *more than* once per month, (in 2017 the figure was 17%). This may indicate employer recognition of the additional support needs of NQSWs entering practice under COVID-19; equally, it may reflect the development, in some settings, of more frequent patterns of NQSW supervision over the last five years, linked, for example, to developing understanding of NQSWs' early career support needs (Grant et al., 2017). Findings from interview data suggest the latter; almost half of interview participants described receiving fortnightly supervision and for most this was described as standard practice for NQSWs in their team and not COVID-19 related.

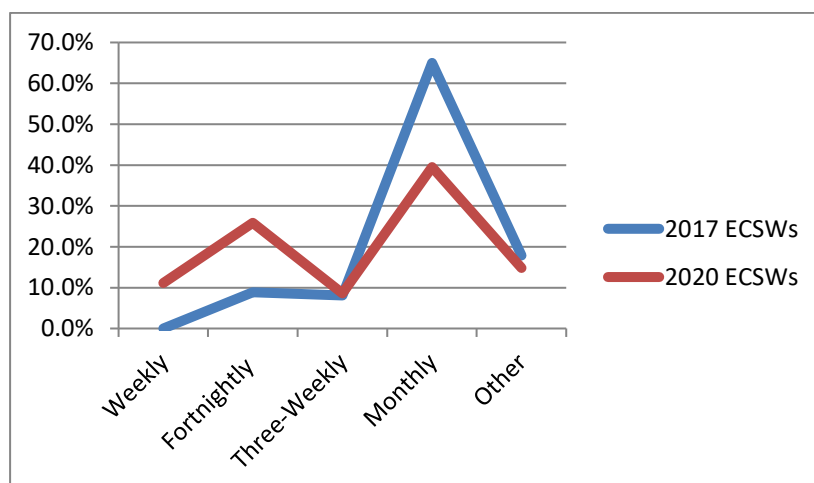
40% of participants reported monthly supervision, compared with 25% in 2017. 15% reported supervision on a less than monthly basis, a slight drop from 2017 figures. There may be role-related reasons for some of these differences (e.g., social workers in secondary settings without caseloads where perhaps less supervision is required), but this was not evident in our findings. In 2017 we found that frequency of supervision was contingent on a range of factors: nature

of role; variable models of supervision adopted by local authorities; individual needs of NQSWs; proximity and location of managers. Differences in the frequency of supervision are therefore expected. However, qualitative data suggests that differential access to supervision was also linked to inconsistencies in the quality of support available to NQSWs across local authority settings (see also Grant et al., 2017). These findings are further illustrated in tables 3.1 and 3.2 below.

**Table 3.1: Comparison of supervision frequency across 2017 and 2020 cohorts**

Supervision Frequency	2020 NQSWs (n=124)	2017 NQSWs (n=157)	Difference
Weekly	11.1%	11.1%	0.0%
Fortnightly	25.9%	8.9%	+17.0%
Three-Weekly	8.6%	8.1%	+0.5%
Monthly	39.5%	65%	-25.5%
Other	14.8%	17.9%	-3.1%

**Figure 3.1 Comparison of supervision frequency across 2017 and 2020 cohorts**

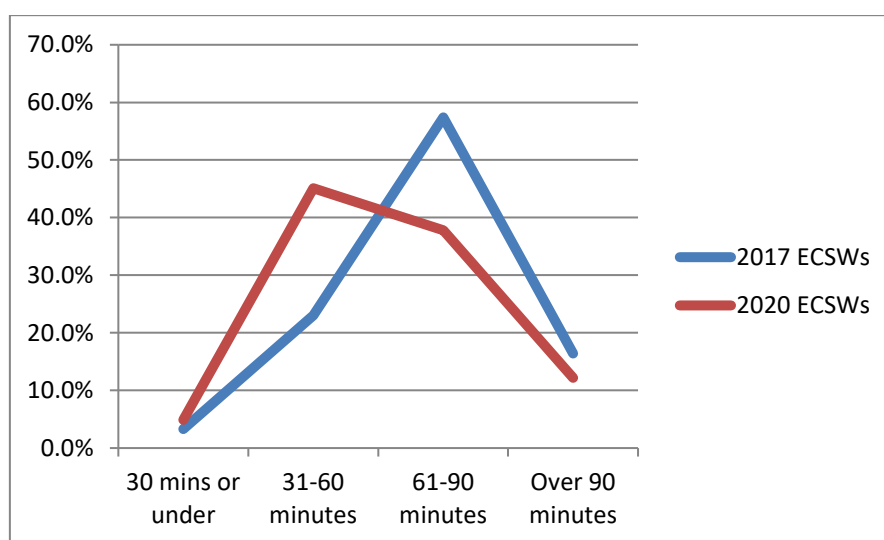


Our findings also show changes in the **duration** of supervision when compared with those from our 2017 data set. Despite the increased frequency of supervision for many of our 2020 cohort, it remained rare for supervision to be completed in less than 30 minutes. More NQSWs experienced supervision lasting between 31 and 60 minutes (45% compared to 23% in 2017) and less NQSWs experienced supervision lasting between 60 and 90 minutes (falling from 57% in 2017 to 38% in 2020). Again, changes in the duration of supervision may reflect developing patterns over the past five years, including changes to the frequency of supervision; equally, they may reflect changes linked to the now wide use of remote supervision under COVID-19. These findings are further illustrated in table 3.2 and figure 3.2 below.

**Table 3.2: Comparison of supervision length across 2017 and 2020 cohorts**

Supervision Length	2020 NQSWs (n=124)	2017 NQSWs (n=157)	Difference
30 mins or under	4.9%	3.3%	1.6%
31-60 minutes	45.1%	23.0%	22.1%
61-90 minutes	37.8%	57.4%	-19.6%
Over 90 minutes	12.2%	16.4%	-4.2%

**Figure 3.2: Comparison of supervision length across 2017 and 2020 cohorts**



### Experiences of supervision

Kadushin's (1992) seminal work argues that formal supervision has three main functions: educational, supportive and administrative, with each function to be considered as important as each other. However, research in this area frequently indicates that workload management is privileged over discussions around professional development and personal wellbeing during supervision sessions (Manthorpe et al., 2015; Grant et al., 2017). Alert to the likely importance of supervision for NQSWs during the pandemic, we were keen to understand their experiences of it.

Our survey findings suggest that the focus of supervision for most participants is on workload management and caseload-related discussions, with over two thirds strongly agreeing (17%) or agreeing (49%) with this statement. Most NQSWs reported receiving good advice from their manager (56% strongly agreed; 35% agreed) and most reported feeling supported by their manager (55% strongly agreed; 28% agreed). Less than 5% of NQSWs were unhappy with the quality of supervision they received and most (80%) felt that supervision was a safe space to express their emotions. These findings are amongst the most positive across

the study and are consistent with findings from our 2017 NQSW cohort.

Survey participants were particularly positive about supervision and few identified areas for improvement when invited to do so. A small number provided critical comment on the managerial focus of supervision, limited opportunities to reflect on and/or question practice, and an absence of attention to emotions, confidence and/or wellbeing:

As a student my supervision sessions were a safe space, a time I could question. Now myself and other colleagues comment that supervision is just effectively a 'tick box' exercise ... I would probably like supervision to have a role similar to that on placement. However, realistically it is now just a work-based exercise on work issues. (SP)

I feel there is no discussion surrounding theories etc, it's purely case management. Also we haven't yet spoken about my wellbeing. I feel that would be really useful as I do feel I am lacking in confidence and that my line manager expects more of me than I can currently give. (SP)

Findings from our interviews were similar with most reporting positive experiences. However, three of 12 described limited and/or poor experiences of supervision. For example, one participant (IP10) had been in post for twelve weeks and had not yet had formal supervision; another (IP7) described a pattern of ten-minute check-ins. Another participant (IP5) described a sense of tokenism and other things often taking priority.

Overall, and in common with findings from our 2017 cohort, findings from this study signal that NQSWs continue to place significant value on supervision and on the opportunities provided to talk through their caseload with their managers. Importantly, COVID-19 does not appear to have had any significant impact on access to or experiences of supervision. Rather, most NQSWs continue to describe regular access to good quality supervision and the movement to virtual supervision does not appear to have been problematic. Baginsky and Manthorpe (2020) report similar findings. Considered alongside the wider study findings, the consistency and quality of supervision experiences through COVID-19 is striking. It speaks we suggest to the centrality of supervision across social work organisations and cultures and to high levels of employer and practitioner commitment to delivering on that, including through periods of change and crisis. If we can achieve this standard of provision in supervision practice during the pandemic, we can and should strive to achieve similar standards of consistency and quality across other key learning and support mechanisms.

### **Informal Support**

Survey data suggests that most participants have been able to forge new relationships and maintain contact with team members reasonably frequently. Three-quarters describe contact with colleagues either a few times a week, or every day. However, 15% of survey participants describe access to informal support as being, at most, one day per week. This is some distance from the breadth and depth of informal support previously available to NQSWs on a day-

to-day basis (Grant et al., 2017).

Just over half of NQSW participants report that contact with colleagues now takes place remotely, either online (36%) or by telephone (16%). Just under one in three report that contact mostly takes place in person and face to face. Notably, this is the same proportion that report face to face supervision, suggesting that one in three participants enjoy regular access to the office and to colleagues (this may also at least partly explain the many dualities in the findings from this study). 15% of participants describe a mix of the two.

Looking beyond the form and frequency of informal support, survey participants were invited to reflect on the quality of their developing support networks. Just over three quarters (76.5%) of NQSWs either strongly agree (43%) or agree (33%) that they feel supported by their colleagues. Only two participants said that they did not feel supported. These findings are positive and, considered alongside wider research in this area, affirm that access to good quality support *can* be sustained over hybrid work models (Cook et al., 2020). However, it is important to note that just under one in four 2020 participants were neutral or ambivalent on this issue. This contrasts with 90% of participants who reported positively on this area in 2017.

NQSWs continue to value the advice and guidance received from colleagues, with 86% reporting positively on this. This figure is in line with findings from our 2017 study. However, only 70% of participants reported that they felt they were learning from their colleagues, compared to 90% of participants in 2017. In common with wider research findings, survey and interview data suggests that this drop reflects NQSWs' more limited opportunities under COVID-19 to work with and learn alongside colleagues in person.

#### Expressing and sharing emotions

Just under two thirds (64%) of participants agreed that they can express their emotions to colleagues. Just under a third felt either unsure or unable (32%) to share emotions with colleagues. This compares with 83% of 2017 participants who felt able to share their emotions with their colleagues in 2017, and 17% who felt unsure or unable. These findings indicate that while some NQSWs continue to enjoy opportunities to express emotions with colleagues, despite changes to working practices under COVID-19, again, these opportunities are not easily available to all.

Some responses confirm that unmet need in this area reflects the fact that colleagues are not near, easily accessible or aware when emotional support is needed. Further, as noted above, many NQSWs are reluctant to 'bother' their new colleagues and particularly so when the need is emotional. As participants IP3 and IP8 explain:

I can phone them but obviously I've not met them a hell of a lot because of how new that I am and how little we see each other. ... they'll all say, 'You can phone me if you really need to.' But if you come from a difficult visit and you're going home after that ... you don't have those people



there to vent to ... offer you advice if you were needing that or just generally be a support. (IP3)

It makes things much, much harder, because you need that team support, and although people are at the end of a phone line, at the end of a Skype, it's just not the same and it can be quite easy to feel isolated. (IP8)

Reduced access to informal support is, perhaps, to be expected during COVID-19 and/or movement towards hybrid work models. The nature of informal support is that it often occurs naturally and it is enabled through proximity, relationship and/or shared experience. However, our findings, suggest that there is more to positive experiences of informal support than in-person relationships or encounters. As demonstrated, many NQSWs continued to report positive experiences of informal support, despite obstacles presented by COVID-19; this finding is also supported by wider research studies. Examined closely, interview data suggest that positive experiences of informal support tend to be associated with a blend of the following: organisational recognition of the particular needs and experiences of NQSWs; a proactive and team-wide approach to peer support; early, regular and sustained opportunities to meet and work alongside colleagues; dynamic team meetings, proximity to other NQSWs and access to NQSW forums and communities. As one participant (IP4) reflects:

But my team are really, really encouraging and have just, even [when] I didn't have that relationship established with them, they were always really good at like firing an email, if they got an email that was, they thought, 'Oh, that's quite interesting, do you want to have a look at that?' Or, 'Do you want to support me on this visit?' Or like, if we could do that. We can't really do that now, but at the beginning we could. So, no, they were good, it was ... I definitely feel like I can, I can ask for help or ask for guidance and things, [and they] reach ... out to me'.

Another participant (IP7) makes a similar observation about the pro-active approach taken by her mentor:

So I've met my mentor ... when we were allowed in the office she'd be in all the time. So I've met her face-to-face. But when we are working from home, she'll Microsoft Teams me, just nearly every day tae ask, catch up on what I've done, if I've got any questions.

These kinds of supports and opportunities can appear natural and spontaneous. However, across our findings they often emerged as intentional actions on the part of organisations, teams and individuals who recognize and are committed to the provision of good quality support. Given the high value NQSWs and others consistently place on informal support from colleagues, addressing the differences across early professional experiences in this area is important (Grant et al., 2017; Donnellan and Jack, 2009). Expressed simply, for NQSWs at least, access to good quality informal support needs to be understood as an essential rather than an ideal provision.

## 5. Learning and development

### Key messages

- NQSWs' experiences of professional learning and development are highly contrasting.
- One third report good access to learning and development opportunities, one third report no meaningful opportunities, and one third describe a mix of the two. This compares with 2017 findings where over two thirds of NQSWs reported being satisfied with the learning opportunities available.
- COVID-19 has presented obstacles to the provision of good quality learning and development opportunities, but it does not emerge as a determining factor.
- Positive accounts highlight the value of a structured, blended and multi-modal approach, including attention to formal and informal learning.
- Negative accounts were associated with poor employer recognition of NQSWs' learning and development needs, professional isolation and a reliance on mandatory and online provision.

Professional learning and development is an expansive and often elastic frame. Even within the parameters of our focus here, it encompasses experiences of induction, shadowing, practice, supervision and support, learning from colleagues, formal learning and training and self-directed learning. Attempts to report on experiences of professional learning in a single or stand-alone section inevitably fail to do justice to the multi-dimensional and overlapping nature of this phenomena (see Ferguson, 2021). With this in mind, this section builds on the preceding discussion and focuses on responses to the following three themes:

- experiences of learning and development in post;
- perceived learning and development needs; and
- how can employers support learning and development?

### Experiences of learning and development

Survey and interview responses reveal sharp differences across NQSWs' experiences of learning and development during COVID-19. Some of these differences may reflect differing constructions of what counts as learning and development, however, even accounting for these variations, the differences across reported experiences remains stark.

A third of survey participants reported having no or very limited access to learning and development in post. In these instances, learning and development opportunities were sometimes constructed as formal training, with many responding in ways similar to those presented below:

There have been no training opportunities. (SP)

Sadly there have been none as yet because of restrictions. (SP)

Responses were often qualified by acknowledgement of the impact of COVID-19 on available learning opportunities, however, intersecting issues also emerged, indicating a relationship between limited learning opportunities and limited experiences of recognition and support generally:

I have not been on any training, I have applied but manager didn't endorse this in time and didn't get on it. There was online [training] for all new starts but was told to go out and prioritise my case load and couldn't attend. (SP)

Similarly, participant IP12 drew parallels between their limited experiences of learning and development and limited experiences of support in her first few weeks of work:

... so that was quite hard going, my first few weeks, as well, because it was a lot of me having to go and say to people, 'what else do I need? What is that? How do I find that out? Where do I get that form from?

In contrast, a third of participants described 'lots' of learning and development opportunities. Here, responses typically referenced a blend of opportunities, spanning: mandatory online training, access to a NQSW programme of learning, shadowing, practice opportunities, learning from colleagues and access to role-related training. The selected responses below provide a flavour of this experience:

Lots of learning and development, lots of new processes, new families to meet. Training courses to attend ... (SP)

I have been part of a NQSW group across my locality so I have been able to develop alongside other NQ social workers. I have been able to shadow others and have been given lots of online training options. (SP)

For the remaining third, opportunities for learning and development sat somewhere in between these two accounts. Here, participants mostly described completion of mandatory training requirements with some opportunities for learning through shadowing, practice and initial role-based training.

Across accounts, responses indicate that most formal training has been delivered entirely online though, again, with significant variations in the quality of online training experienced.

The above findings differ significantly from those reported by our 2017 cohort. Then, more than two thirds of NQSWs reported being satisfied or very satisfied

with the quantity and quality of learning and training available to them. In 2017, accounts typically spoke to a blended experience, encompassing shadowing, practice-based learning, mandatory training and role-related training provision.

## **Learning and development needs**

NQSWs' identified learning needs reflect the contrasting experiences of learning and development outlined above.

Just over a third of participants identified focused learning and development needs, linked to their role and duties. Responses in this area frequently described learning needs linked to (i) legislation, policy and procedure, (ii) child and/or adult protection and (iii) formal assessment and report writing. These findings align closely with findings from our 2017 cohort (Grant et al., 2017).

However, just under a third focused on a need for more routine 'practice' based learning opportunities, which many felt 'would be readily available' in 'normal circumstances'. Responses in this area underlined again the significant differences across NQSW experiences during COVID-19, with some participants reporting very limited caseloads and very limited opportunities to work with and learn from others. These participants placed emphasis on a need for 'more'; more 'hands on experience', more 'casework', more 'face to face contact' with service users and others, more 'shadowing', more 'professional meetings' and more regular 'supervision' and 'support'. Some of this is reflected in the following response to the question: what are your learning and development needs at this point?:

Experience - shadowing - working alongside others to see how it's done - all the experiences which under the current COVID-19 restrictions are not allowed! (SP)

Limited learning opportunities in the above areas was often linked to low levels of professional confidence and an identified need to build confidence. Compared to our 2017 cohort, the need to build confidence was expressed much more frequently in response to our question regarding learning needs. The following example responses illustrate this point:

I need to build confidence in myself. More experience in ... (SP)

At this point I think my professional learning/development needs are building up confidence. (SP)

I feel before the pandemic newly qualified social workers needed to build up their confidence as well. However, I think there is more obstacles for us, who ... qualified in the current climate. (SP)

A smaller but significant number of responses described very low levels of professional confidence and a sense of significant learning and development needs 'in all areas':

It's hard to say as I feel I just need to learn everything. (SP)

The stark differences reported here in respect of NQSWs experience of learning and development is new and was not a feature of our 2017 findings. Also, NQSWs appear more likely to experience challenges in respect of learning and development than their more experienced counterparts. Broadly, this appears to relate to the particular needs of NQSWs, COVID-19 related constraints on informal, peer and practice-based learning and the differing extents to which organisations, employers and teams have been able to recognise and respond to these needs during COVID-19.

### **How employers can help**

Responses re how employers can support learning and development, reflected the different experiences described above. Just over four in ten participants reported that there is little or nothing that employers need to do more of. This reflected a mix of some who felt well supported by employers and others who felt that the limitations they experienced were unavoidable under COVID-19.

By contrast, a third of participants identified clear and often multiple areas for improvement, best summarised as attending to the basics of workplace learning for NQSWs. These basics were often expressed differently but focused on improving experiences across: induction, supervision, access to digital tools, workplace support, shadowing, opportunities for in person work and role related training. As outlined, many NQSWs reported positive experiences across these areas but, as the responses below illustrate, this has not been the case for most:

Offer training (particularly for NQSW) and implement a formal induction. (SP)

Workplace development, I would like to feel supported by all colleagues and feel comfortable contacting anyone in my team. (SP)

Anything. Training, support, anything to show I wasn't just a number and they appreciated I'm fresh out of uni. (SP)

Importantly, what is being asked for here is what is being experienced by NQSWs in some teams and organisations, a reality which added to the dismay felt by some participants. As one survey respondent explains:

I sometimes phone a girl who started with me but end up getting upset as she has loads of training and support and it makes me feel worse when I come off the phone as I have 0 support and 0 guidance. (SP)

Remaining responses highlighted a need to provide: (i) more practical guidance on role related policies and procedures, linked to limited opportunities to easily acquire this knowledge through informal contact with colleagues; (ii) more role related training opportunities, reflecting the role-related learning needs identified above; and (iii) more face to face, interactive or smaller training sessions, linked to fatigue with the quality of existing online delivery methods.

As outlined, NQSWs' accounts of learning and development experiences are

amongst the most contrasting experiences reported in this study. It is clear COVID-19 has had a significant impact here, however, the nature and extent of COVID-19 related impacts differs significantly for individuals. Positive experiences of learning and development were associated with a proactive, holistic and blended approach to learning and development, alongside explicit recognition on the part of employers and others of the particular needs and experiences of NQSWs (see also O'Rourke et al., 2020). Poor experiences appeared to reflect limited recognition of the particular needs of NQSWs and limited provision of support generally. For a profession that stands on principles of equality and equity, the inequity of experience and opportunity in this area, and the potential impacts of this on developing confidence and competence, is troubling.

Our findings highlight that improving NQSWs' experiences of learning and development, including through COVID-19, requires us to attend to the multiple mechanisms that support that. For, example, it is clear from this study that supervision continues to be prioritised as an importance mechanism of professional support and development, however, experiences of induction, practice-based learning and informal support were much less consistent and more vulnerable to COVID-19 related disruptions. Relatedly, recent developments around agile and hybrid working demonstrate limited concern for the potential impacts of new working arrangements on informal and peer modes of learning (Jeyasingham, 2016). As we argue in our longitudinal study, this kind of partial and piecemeal approach to professional learning and development is inadequate to the nature, complexity and demands of contemporary social work practice.

## 6. Professional confidence and competence

### Key messages

- NQSWs' accounts of professional confidence are mixed and often contrasting. This appears to reflect the developmental nature of professional confidence and differing access to critical practice, learning and support opportunities.
- Positive accounts were associated with good quality practice-based learning opportunities prior to qualification and good quality practice, learning and support opportunities post qualification.
- Negative accounts were associated with professional isolation, practicing social work at a distance and limited access to early career learning and support.

Questions of professional readiness continue to be central to debates relating to NQSWs as they embark on their careers. In a context of rising expectations of public services and a notably challenging field of practice, political, public and professional stakeholders are united in their expectations of a 'ready', confident and competent workforce. However, as we note in our longitudinal study, notions of professional readiness are complex and, often, poorly understood. (Grant et al., forthcoming). Further, the first year of practice is recognised as a critical stage in social workers' professional development (Grant et al., 2017,2018). Specifically, it is through this period and process that most NQSWs *become* confident and competent, outcomes regularly linked to opportunities for learning in and through practice. Noting our findings that COVID-19 has had a significant and variable impact on the learning and development opportunities available to NQSWs over their first year, in this section we seek to understand if and how COVID-19 has impacted on NQSWs perceptions of professional confidence and competence.

### Preparedness

Survey participants were asked via open text question if they felt prepared for their current role and duties. Responses were split equally across those who felt prepared, unprepared and a mix of the two. Again, what is striking in our findings is the level of contrast across responses, as the following examples illustrate:

Yes. (SP)

Fully prepared. (SP)

Do I feel prepared for it – absolutely not. (SP)

Feel very vulnerable about conducting work. (SP)

Most definitely I was not prepared for this way of working, I have no previous work experience in social work children's services ... however ...I am fortunate enough to have a team leader who understands my experience and my abilities therefore I have been given the opportunity to slowly build up my case load. (SP)

Those who described feeling prepared frequently linked this to previous practical experience in a related role or setting and access to 'good' quality professional supports in role.

Accounts of feeling unprepared, or a mix of the two, mostly centered on challenges associated with COVID-19, specifically, interactive challenges of: (i) working from home, (ii) limited access to peer support and guidance and (iii) practicing social work at a distance:

I did not feel prepared to work mostly in isolation. It is challenging being a new worker and not being physically surrounded by a supportive team. (SP)

No. This was my first ever role as a social worker following my studies, and I feel anxious that my learning and knowledge of my current post is no where near where it should be after this length of time. My team are supportive, but the value of being in an office and around experienced members of staff cannot be overstated enough. This has impacted on my development as a social worker. (SP)

I don't think I'll ever be prepared for not engaging with people on a face-to-face basis. A huge part of the job is building relationships with people and that has proven to be extremely difficult over the phone/computer. (SP)

Across responses, a key message is that interactive mechanisms of induction, practice, supervision, support and learning - understood to be critical to early career development in normal times - are particularly important during COVID-19. Relatedly, positive accounts of preparedness during this period appear to depend heavily on the extent to which organisations and teams have been able to continue to provide critical support, learning and development opportunities, albeit in new and creative ways (O'Rourke et al., 2021; Senreich et al., 2020).

### **Professional confidence: knowledge and understanding**

Confidence in knowledge and understanding was probed by asking survey participants to report, using a 5-point scale, on levels of confidence across five core knowledge items:

1. Legislation
2. Statutory and professional codes, frameworks and guidance
3. Theories underpinning understanding of social issues
4. Theories of discrimination



## 5. Principles of risk assessment and risk management

Responses suggested that NQSWs were generally confident across the five items. Further, confidence levels were highest in relation to theories underpinning social issues and theories of discrimination, while confidence was lowest in relation to knowledge of legislation, closely followed by principles of risk assessment and management. Differences in NQSW confidence levels across the 2020 and 2017 cohorts are moderate, though 2020 participants appear slightly less confident in areas that might be considered more 'practical'. Specifically, 2020 NQSWs appeared less confident in their knowledge of legislation (down 9%), statutory codes and frameworks (down 5%) and risk assessment and management (down 6%). However, we found increased levels of confidence in theoretical areas, specifically, understanding of social issues (up 10%) and understanding of discrimination (up 3%). Our qualitative data suggests that these patterns reflect the reduced practical opportunities available to NQSWs under COVID-19 and reduced opportunities for feedback from colleagues on practice.

Notwithstanding the above reported variations, it is important to note that, in keeping with findings from our longitudinal study, high numbers of NQSWs continue to report reasonable levels of confidence across all five knowledge items, including legislation, policy and procedure and risk assessment and management.

### **Professional confidence: skills**

Survey participants were also asked to identify, via open text responses, areas of practice they felt most and least confident undertaking. Responses were coded and analysed and findings are presented in tables 5.1 and 5.2 below.

**Table 5.1: Most confident areas of practice**

<b>Theme</b>	<b>References</b>	<b>Percent of participants</b>
Assessment	23	30%
Generic casework / communication with service users	20	26%
Understanding and use of theory	19	25%
Building relationships	16	21%
Understanding legislation	9	12%
Understanding policy and procedure	9	12%
Interprofessional working	6	8%
Case note recording	3	4%

**Table 5.2 Least confident areas of practice**

<b>Theme</b>	<b>References</b>	<b>Percent of participants</b>
Using legislation in practice	23	30%
Statutory guidance and processes	16	21%
Understanding local processes	6	8%
Undertaking assessments	6	8%
Report writing	6	8%
Finding and accessing supports for service users	4	5%
Managing risk	4	5%

As the above tables show, NQSWs expressed confidence across different areas of practice. While the highest numbers expressed confidence in assessment, this reflects the views of only three in ten participants. Similar numbers expressed confidence in case work, use of theory and building relationships. Across these areas, professional confidence was frequently linked to prior learning and experience and to good quality supports in practice.

With regards to where participants felt 'least confident', the highest number reported a lack of confidence in using legislation:

I feel we were not taught enough of helpful legislation and legal processes that would be practical in our role in University ... I have tried to look it up to teach myself but a lot of legal jargon is difficult to understand. (SP)

This finding chimes with findings from previous studies which highlight lower levels of confidence amongst social workers in applying the law in practice (Braye and Preston-Shoot, 2016). However, again, it is important to read across the data here. First, only three in ten participants identify using legislation as the area they feel least confident in. Further, as outlined, two thirds of respondents reported feeling confident or somewhat confident in their knowledge of the law.

Lower levels of confidence (21%) were also reported in relation to working within statutory guidance and processes, extending across child and adult protection and justice work. Again, this is a familiar theme in the wider NQSW literature (Grant et al. 2017). Our qualitative findings indicate that NQSW confidence in this area has been adversely affected by the far fewer opportunities available under COVID-19 to check in on process and procedure with near colleagues. Again, it is important to read across the data sets here. While 21% of participants described feeling unconfident in working within statutory procedure and process, four in five (80%) reported feeling confident (34%) or somewhat confident (45%) in their knowledge and understanding of this item.

Far from being contradictory findings, these findings illustrate the diverse and sometimes dual nature of NQSWs' experiences of professional confidence (see Grant et al., forthcoming), dynamics that appear to be amplified by experiences of practice during COVID-19. This diversity and duality appear to reflect NQSWs'

different experiences of practice, learning and support during COVID-19, the developmental nature of professional confidence and competence and the often-conflicted nature of professional practice and development. These findings promote care in respect of how we read and respond to research findings relating to professional confidence and competence and the development of a more sophisticated modes of measurement.

Considered together, our findings indicate that COVID-19 has had important impacts on NQSWs' capacity to build and demonstrate professional confidence and competence through practice. Some organisations and NQSWs have found creative and effective ways through this; others have not. Here and across the study, our findings make clear that professional readiness, confidence and competence is bolstered by good quality practice-based learning and support opportunities prior to qualification *and* good quality practice, learning and support opportunities post-qualification. As professional leaders continue to lead and support the social work workforce through and beyond COVID-19, we need to give more integrative attention to these important issues.

## **7. Conclusion, key findings and recommendations**

This study set out to understand newly qualified social workers' experiences of practice during the COVID-19 pandemic in Scotland. It complements our five-year longitudinal study into the experiences of early career social workers, commissioned by the SSSC in 2016. Specifically, we set out to understand the impacts of COVID-19 on NQSWs' experiences of:

- Education, induction and early support
- Ways of working
- Professional support
- Learning and development
- Professional confidence and competence.

The findings reported are based on a synthesis of findings from a review of the existing literature, a national online survey of NQSWs and twelve in-depth interviews. Data collection took place between November 2020 and February 2021.

There are now several studies that report on different aspects of social work under the COVID-19 pandemic. Very few attend to the experiences of newly qualified and early career social workers and none focus on NQSWs' experiences in Scotland. At the time of writing, our research is the largest and most comprehensive study published on early career social workers' experiences of practice during the COVID-19 pandemic.

Overall, our findings indicate that COVID-19 has had a significant and profound impact on NQSWs' experience of their first year of practice. Most were required to work mostly from home, at a distance from key colleagues, a professional environment and people who use social work services. Accordingly, access to practice, learning and support opportunities occurred mostly online and were felt by most to be less than equal to face-to-face contact. However, NQSWs also described diverse and often contrasting experiences, shaped significantly by their different experiences of practice, learning and support. Indeed, in reviewing NQSWs accounts of their first year, COVID-19 does not emerge as a determining factor across positive, neutral or negative accounts. Rather, factors that emerged as most critical to NQSWs' experience during COVID-19 included:

- (i) employer recognition of NQSWs' particular practice, learning and support needs;
- (ii) the range and quality of practice, learning and development opportunities available; and
- (iii) the range and quality of supports.

In these respects, our findings speak to the profession's capacity to be agile, responsive and creative in supporting NQSWs through the COVID-19 pandemic, and its capacity to fall short of this standard.

Broadly, these findings align with findings from our longitudinal research study which repeatedly illuminate that early career social workers' experiences of practice are plural and situated. Similarly, while the developing literature on social workers' experience of practice during COVID-19 is beginning to demonstrate common themes, several studies also point to the diverse and contingent nature of professional experiences.

Our findings make clear that organisations, employers, teams and practitioners, individually and together, play a key role in shaping NQSWs' experiences of practice over their first year. Also, these actors, can mitigate or exacerbate facing challenges and crises – COVID-19 included. They do so, principally, through formal and informal contributions to the range and quality of practice, learning and support and opportunities made available to NQSWs in their first year.

The above findings suggest a need for greater recognition of the needs of NQSWs in their first year of practice and greater attention to the role and responsibilities of organisations and professionals in providing early career support and development, including through periods of change and challenge. Further outline of our key findings and recommendations is provided below.

## **Key findings and recommendations**

### **1. The impacts of COVID-19 on experiences of qualifying education for 2020 graduates were moderate.**

- The most significant impacts related to experiences of practice learning and completion of final year research projects.
- One in four participants reported that their placement was concluded early with differing impacts on participants' sense of professional readiness.
- Many were completing their research project when COVID-19 unfolded and experienced this as a stressful and isolating experience.

## **Recommendations**

Developing supports for NQSWs through the pandemic need to be informed by and responsive to recent experiences of qualifying education. Attention to experiences of practice-based learning appear particularly important.

The development of supported early career research opportunities may mitigate COVID-19 related impacts on NQSW research confidence and capacity. This could be considered as part of a wider research strategy for social work and social workers in Scotland.

### **2. COVID-19 has had a significant and profound impact on NQSWs' early experiences of work.**

- Most NQSW were required to navigate their transition into professional practice at a distance, including from the social work 'office', professional colleagues and people who use services.
- NQSWs missed opportunities to learn with and from new and experienced colleagues, particularly in relation to the daily detail of new practice,

- procedure and process.
- Remote working was felt to be a poor match for face-to-face practice, learning and support.
- Experiences of work were often diverse and shaped by a mix of individual circumstance and significant interactions of context.
- Employers, colleagues and others play a key role in professional transition, through their contributions (or not) to the range and quality of professional practice, learning and support opportunities available to NQSWs.

## **Recommendation**

We need to understand the particular learning, development and support needs of NQSWs through their first year of practice, and the roles that different professional actors play in this process. Attention to these issues is important in normal times and particularly so during periods of change and crisis.

### **3. NQSWs' experiences of induction during COVID-19 were varied.**

- Diverse experiences of induction during COVID-19 appear to reflect longstanding inconsistencies in the quality of early career support and provision across Scotland.
- Many organisations and teams have been able to provide excellent early career induction, support and learning opportunities during COVID-19, but this has not been the case for all.
- Positive experiences of induction were associated with:
  - employer recognition of NQSWs' needs;
  - access to a structured and multi-modal induction programme;
  - supported access to peer support, shadowing, office and community-based practice;
  - a mix of formal and informal learning and support opportunities.
- Poor experiences of induction and early support were frequently followed by poor experiences of ongoing support, learning and development.

## **Recommendations**

Employers need to be supported to provide a more consistent experience of induction and early career support to NQSWs. This should be met through a Supported Year in Practice, currently under development in Scotland (SSSC, 2020). Developing frameworks for a Supported Year in Practice should include a clear outline of employer and NQSW responsibilities and clear lines of governance.

### **4. NQSWs report mixed access to digital tools and platforms considered essential to remote working.**

- Some local authorities have struggled to respond to the digital needs of staff during COVID-19. Poor access to digital tools was found to exacerbate experiences of professional isolation and detachment.
- NQSWs spoke to the significant limits of remote working with people who use services. This was exacerbated by the fact that NQSWs were also building new relationships with people remotely.

- NQSWs highlighted the interactive challenges of remote working, reflecting the fact that they are often doing things for the first time, within new relationships and without opportunities to check in with colleagues for advice.
- Some NQSWs felt that the increased reliance on digital tools and technologies was contributing to a move away from practical, relational and social ways of working towards an increasingly administrative and techno-rational practice.

### **Recommendation**

Ready access to adequate digital tools is an essential requirement for all social workers practicing at a distance, NQSWs included.

Further research is needed to understand the impacts of new remote and hybrid working practices on social work practice, with attention to the experiences of all stakeholders, including marginalised groups and communities.

### **5. The physical social work 'office' emerges as an important and protective space for NQSWs.**

- NQSWs miss the physical, socio-educational and psychological opportunities and protections available to them in communal social work offices.
- The social work office was considered to aid the development of professional identity, particularly when confidence in identity and contribution is low or fragile.
- The office offers both practical and psychological protections to workers in the form of a confidential, supportive and bounded space. This was felt to be particularly important when handling sensitive or emotionally charged work.
- The office was perceived to support healthy boundaries between work and home life, supporting self-care.

### **Recommendations**

We need to better understand the role and contribution of different work sites to professional wellbeing, learning and development, including for those at different career stages. This is particularly relevant as the profession continues to move towards remote, agile and hybrid working practices.

A wider and more participatory conversation is needed on these issues at national and local levels. This should include attention to the emotional labour of social work practice and the implications of this for the spaces in which social work is done.

### **6. In person work with people who use services was much reduced for NQSWs and governed by increasingly remote and centralised assessments of risk.**

- Most NQSWs spoke to the negative impacts of COVID-19 restrictions on the quality of in-person work, linked to challenges of building relationships with children, teenagers and vulnerable groups.

- However, most appeared accepting of COVID-19 related restrictions on in-person work, with little critique of new rules and requirements.
- A small number described working outside of the rules and restrictions, framed typically within efforts to provide a more humane and socially just practice.
- Our findings suggest movement towards more centralised and top-down modes of professional leadership and management under COVID-19, mobilised by dominating rationales of risk and protection.

## **Recommendation**

As we move through the COVID-19 pandemic, we need to be alert to its unfolding and enduring impacts, including in respect of what and how social work is done.

### **7. NQSWs continue to report regular and positive experiences of formal support and supervision. Experiences of informal support, identified as crucial to early career learning and development, are varied.**

- Physical distance from colleagues was identified as a key obstacle to positive experiences of informal support. Some organisations and teams have been more agile in overcoming this obstacle than others.
- Positive experiences of informal support were associated with:
  - recognition of the particular needs of NQSWs;
  - a proactive and team based approach;
  - supported opportunities for office based/ communal working; and
  - proximity to other NQSWs.

## **Recommendations**

Organisational and professional commitment to excellent early career support and development needs to extend beyond the boundaries of supervision.

More strategic and sustained attention should be given to understanding and developing the place of informal support as an important professional development aid.

### **8. NQSWs report contrasting experiences of learning and development during COVID-19.**

- One third of participants reported good access to learning and development opportunities, one third reported no meaningful opportunities, and one third described a mix of the two. This compares with 2017 findings where over two thirds of NQSWs reported being satisfied with the quality and quantity of learning opportunities available.
- COVID-19 has presented obstacles to the provision of good quality learning and development opportunities, but it does not emerge as a determining factor in individual accounts.
- Positive accounts highlight the value of a structured, blended and multi-modal approach, including attention to formal and informal learning.



- Negative accounts were associated with poor employer recognition of NQSWs' learning and development needs, professional isolation and a reliance on mandatory and online opportunities.

### **Recommendations**

Developing efforts to improve early career learning and development need to address the contrasting and situated accounts of early career learning reported in this study and others.

Improvement efforts must embrace the multi-dimensional and integrative nature of professional learning, including through more integrative attention to formal and informal modes.

### **9. NQSWs' accounts of professional confidence and competence were often contrasting. This appeared to reflect the developmental nature of professional confidence and differing access to practice, learning and support opportunities.**

- Accounts of professional confidence were split equally between those who felt prepared, not prepared, and a mix of the two.
- Positive accounts were associated with good quality placement opportunities prior to qualification and good quality practice, learning and support opportunities post qualification.
- Negative accounts were associated with professional isolation linked to COVID-19, practicing social work at a distance and limited access to early career learning and support opportunities.
- Overall, accounts of professional confidence under COVID-19 appear to depend heavily on the extent to which universities, employers, practitioners and others have been able to continue to provide critical learning, support and development opportunities to students and NQSWs, albeit in new and creative ways.

### **Recommendation**

Social work is a practice-based profession and accounts of professional confidence depend heavily on supported opportunities for practice-based learning. The profession needs to work together to better strengthen and protect this identity and method, including through periods of change and crisis.

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# Appendix 1

## Method

We employed a mixed methods approach to study, running from October 2020 to September 2021. In the first phase, we examined existing writing and research into social workers experiences during COVID-19. We found very little on newly qualified social workers' experiences in Scotland, however wider literature from across the UK provided a useful baseline overview of key themes and issues. We then conducted a national online questionnaire and twelve in-depth interviews with registered NQSWs situated across Scotland. Fuller detail of each stage is provided below.

### (i) Review of literature

A narrative literature review was conducted at the beginning and towards the end of the research period. At each stage we employed a systematic literature search and selection strategy focused on three interlinked questions. These were:

LRQ1: What have been the principal changes to social work practices in the UK during the COVID-19 pandemic?

LRQ2: What has been the impact of these changes on social workers?

LRQ3: What has been the impact of these changes on early career social workers/NQSWs?

In total 22 items were selected for inclusion. The majority refer to qualitative data (interviews, focus groups, diary analysis, observations of practice and open-ended survey responses) with a small proportion focusing on quantitative data from surveys and government statistics. The remainder consist of two personal reflections written by social workers about their experiences of practice in Scotland (one written by an NQSW) and one peer reviewed expert opinion piece written by four trainers/educators. The latter offers insights into NQSWs' experiences of practice under COVID-19 in Northern Ireland.

### (ii) Online survey

We conducted one national online survey with NQSWs between November and December 2020. The survey was distributed by the SSSC to all registered<sup>1</sup> NQSWs in Scotland and followed the design and structure of the repeat measure annual online survey used in our above-noted longitudinal study. The survey consisted of seven sections and explored NQSW experiences of the following: education, employment, professional confidence, supervision, informal support, learning and development and professional identity, with attention to the impact of COVID-19 on these areas.

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<sup>1</sup> Includes all registered NQSWs who had provided consent to receive communications from SSSC.

We received 124 responses from a total possible population of 296 (SSSC, 2021), giving a response rate of 41.9%. Most participants described their gender as female (90%) and the rest as male. The largest proportion were aged between 25-34 years (51%), followed by 20-24 (23%), 35-44 (15%), and 45+ (10%).

Most participants described their ethnic origin as 'White Scottish' (78.3%), followed by 'Other white British' (6.7%), 'Other White' (8.4%), 'Chinese, Chinese Scottish or Chinese British' (2.5%), 'African, African Scottish or African British' (1.7%), 'Other African' (0.8%), and 'Indian, Indian Scottish or Indian British' (0.8%). Most participants reported no disability (94%). 2.4% reported a registered disability and 3.3% reported a self-defined disability.

### **(iii) Interviews**

Twelve in-depth interviews were conducted with NQSWs between January and February 2021. All registered NQSWs were invited to participate in the interviews and we selected the first twelve to respond. Ten of the participants described themselves as female and two as male. All participants were employed in statutory social work settings across a variety of geographical locations. Eight described working in Children and Families, three in Adult Social Work and one in Justice.

Interviews were semi-structured in nature and covered the following topics (see Appendix 3):

- Workplace settings and role
- Working environment
- A typical day, positives and challenges
- Experiences of support
- Opportunities for learning and development
- Impact of COVID-19 on professional identity
- What else matters?

Ten interviews were conducted over video platforms, recorded and subsequently transcribed by two of the researchers. Two interviews were conducted by phone, due to participants not having access to video platforms, and notes were taken by the interviewer.

### **(iv) Data analysis**

Data analysis combined statistical analysis of the quantitative survey data and thematic analysis of the qualitative survey data and interview data. Findings from the different data sets were then synthesised. The structure for reporting was guided by the research aims and by the themes and sub-themes emerging from data analysis.

## **Appendix 2**

### **Review of the literature**

#### **Introduction**

Little is known about the experiences of social workers engaging in frontline practice within the context of COVID-19 in Scotland. Even less is known about the experiences of newly-qualified staff who started their professional careers during this period. Literature here draws upon research available from across the UK, with one international study included from the USA (focusing specifically on early career/ newly qualified social workers). It should be noted that new research on this topic is still emerging.

#### **LRQ1: What have been the principal changes to social work practices in the UK during the COVID-19 pandemic?**

##### **The transition to hybrid working for social work practices**

The evidence suggests that from the first UK lockdown in March 2020, there was a notable move to online and phone contact to conduct social work practices under Covid in the UK. Face to face visits seemed to remain in place where risk of harm or concerns about child/adult protection were present. However, the increased risk of COVID-19 infection presented a number of new challenges to social workers in how they engaged with individuals and families in everyday practice (Baginsky and Manthorpe, 2021; Banks et al., 2020; Cook and Zschomler 2020; Ferguson et al., 2021; Manthorpe, 2021; O'Neill and McGreevy, 2020). In children's services in England, Cook and Zschomler (2020) found that most face to face visits to families were conducted by social workers wearing Personal Protective Equipment (PPE) and trying to abide by social distancing rules. In adult care in England, cases of self-neglect were reported as amongst those where social workers felt the need for face to face visits (Manthorpe et al., 2021). In probation work in Northern Ireland, 'high-risk offenders' were visited, which included violent and sexual offenders (O'Neill and McGreevy, 2020).

The evidence highlights a number of challenges presented to virtual and distanced forms of social work practice. Kingstone et al. (2021) found that some practitioners experienced difficulties in building relationships with service users without close physical contact. They also highlight that certain groups of social work service users were becoming overlooked, for example children and young people who were usually seen at or via schools. In Banks and colleagues' (2020) international survey, some social workers felt that maintaining relationships online or by phone was a particular challenge. Orr's (2020) personal reflection as a team leader in a youth justice setting in Scotland raised similar concerns about relationship building in that practice setting. Cook and Zschomler's (2020) interview-based study with 31 child and family social workers in England noted challenges in picking up on subtle communication signs during virtual or distanced contacts; and issues of confidentiality when conducting online calls, which was a particularly acute concern when responding to situations of



domestic violence. Where face to face visits did occur, there were found to be increased challenges around assessing situations accurately and fully. Phillips et al. (2021) highlighted difficulties faced by probation workers in England in assessing risk and employing risk management techniques during door-step visits.

### **The impact of virtual casework on social work practices**

There were also some clear positives in the move to virtual case work which were identified by practitioners in children's services, especially the enablement of more participative, co-produced ways of working with families, and particularly, children. Cook and Zschomler (2020) note that child and family social workers found they were able to be more responsive to families online having contact 'little and often', and that it was sometimes possible to have franker conversations online. Roberts et al. (2021) similarly found that practitioners supporting care leavers in Wales also believed they were more responsive following the shift to phone and virtual contact, as did probation workers in Northern Ireland (O'Neill and McGreevy, 2020). Pink et al. (2020) report that online 'home visits' in child and family social work could offer opportunity for 'digital intimacies' with families that would have been unlikely or impossible in face to face home visiting. In a linked paper, Ferguson et al. (2021), and also Cook and Zschomler (2020), reflect that the move to hybrid practice had involved practitioners creatively and successfully responding to these new contexts of social work practice. Ferguson et al. (2021, p.1) describe that for child and family social workers in England this involved: 'digital casework, movement and walking encounters, and...going into homes and taking risks by getting close to children and parents.' They suggest the need for creative practices such as these to continue post-pandemic.

The use of online platforms was also noted to have increased professional attendance at some multi-agency children's meetings with greater involvement of general practitioners and paediatricians in particular (Baginsky and Manthorpe, 2021). However, Baginsky et al., (2020) conducted a separate study on the experiences of virtual Child Protection Conferences in England and Wales. They found broad practitioner satisfaction with virtual conferences, but several reservations amongst parents about their ability to participate fully and properly.

It can be questioned whether the more formal child protection remit of these meetings, as opposed to 'routine' digital casework, may have influenced some of the negative parental feedback in this study. However, similar experiences and concerns were expressed by care leavers in Wales. Roberts et al. (2021) found that while practitioners were positive about online and phone contact with those using their service, some care leavers were critical of the support they had received from their Local Authorities during the first lockdown. Those unsatisfied included care leavers who struggled to access the technology required, and those who had poor relationships with their Local Authorities to begin with. The differences between the experiences of practitioners and some of those using social work services articulated in these two studies suggest that practitioners may have over-played the advantages of virtual and distanced contact without fully understanding the potential challenges and difficulties faced by some service users during this type of engagement.

### **The impact of Covid on the demand for social work services**

While it is clear that the first lockdown in the UK severely increased demands on health services, the impact on demand for social work services was less clear as some of the typical sources of referral to social work ceased during lockdown. Kingstone et al. (2021) found some evidence of a reduction in demand for adult care in the early part of the pandemic, such that caseloads had not risen. They also found there were general concerns amongst social workers in all practice settings over how they might manage an expected longer-term rise in demand for their services after lockdown. In contrast, a study of adult social workers in England by Manthorpe et al. (2021), conducted later in 2020 when the pandemic was progressing, found evidence that referrals had increased in the first UK lockdown. The increase was attributed to self-referrals and to members of the public who contacted adult social care with concerns about neighbours. It was also noted that a number of existing service users were subject to isolation during lockdown and had increased needs as result.

In children's services, Baginsky and Manthorpe (2021) found that overall activity in children's services was significantly reduced during the first UK lockdown – indeed they cite wider evidence that referrals to children's social care halved during this initial period. However, towards the end of this study lockdown had started to ease and referrals had gathered pace. Child and family social workers were concerned about how they would manage the anticipated spike in referrals post-lockdown.

A **Community Care** magazine survey of social workers (n=466) conducted in November 2020 (Turner, 2020), provides a useful snapshot of experiences as the pandemic was progressing (this survey included data from early career social workers). Turner (2020) reports that social workers felt under significant work pressure at this point in 2020: 92% felt the period since the start of the first national lockdown in March 2020 had driven increased levels of need among people they support. A number of social workers reported that a range of support agencies had pulled out during the pandemic, which put greater responsibility on statutory social work services to meet local needs. Three quarters of social workers completing the survey said their workload had increased, and similar proportions spoke of increased complexity in their workloads. Ferguson et al. (2021) suggest that the complexity of face to face visits in children's services increased because other statutory agencies such as schools and health visitors stopped home visits during the first lockdown.

Baginsky and Manthorpe (2021) cite wider evidence that there was a substantial increase in domestic violence in the UK in the first months of the pandemic. Such an increase will likely lead to greater demand for social work services over time, although not necessarily immediately – given that some of the traditional referral routes have been disrupted during COVID-19. Compared to previous years, O'Neill and McGreevy (2020) note a 20% increase in domestic violence reports in Northern Ireland in April 2020. The authors suggest this increase had direct implications for probation officers' workloads.

Ferguson et al. (2021) also illustrate some of the complexities in responding to domestic violence in children's services during the first lockdown. For example, one social worker they interviewed was working with a mother who was escaping physical abuse and coercive control from her children's father. While the mother

was offered accommodation in a new area during lockdown, no support from domestic abuse services was available. There were also serious ongoing concerns about the mother's own care of the children, which later saw the children being placed in care. In the intervening period, the social worker was fielding regular calls from the children's father, trying to locate them, while simultaneously supporting the family, alongside a family support worker. This entailed undertaking face to face visits to the family, where social distancing was all but impossible due to the young ages of the children and the need to get in close physical proximity to them.

## **LRQ2: What has been the impact of these changes on social workers?**

### **Social workers' adaptation to working contexts under Covid**

Evidence here suggests that social workers, including early career social workers, adapted successfully to new ways of working under COVID-19 in the sense that core statutory social work services were maintained throughout the pandemic across different services (Baginsky and Manthorpe, 2020; Cook et al., 2020; Ferguson et al., 2021), care leavers' services (Roberts et al, 2021) adult social work (Kingstone et al., 2021; Manthorpe et al., 2021) and youth and adult justice services (O'Neill and McGreevy, 2020; Orr, 2020; Phillips et al., 2021).

There were positive experiences of adaptation within this. Early into the pandemic, Cook et al. (2020) found that most social workers in their study described feeling 'very well supported' or 'more supported' than usual as a result of keeping in touch with colleagues virtually. The authors report that this sense of connectedness could help most social workers to feel valued within their teams, despite the physical distance. The combination of increased check-ins with colleagues and a reduction in travelling time also meant that some workers described feeling less tired and more energised. This may have been combined, for some social workers, with an initial decrease in workload in the immediate weeks of the pandemic (Baginsky and Manthorpe, 2021; Kingstone et al., 2021; also see above). Social workers also reported that supervision was continuing with the same regularity as before, usually virtually, but more briefly (Baginsky and Manthorpe, 2020). While the continued frequency seems positive, a caution may be that the shortening of supervision could mean that it had become more strictly focused on case management, rather than including discussion of social workers' well-being.

The cross-sectional survey of McFadden and colleagues (2021b) compared the quality of working life and mental well-being of UK social workers in 2018 and during the first months of the COVID-19 pandemic in 2020. Perhaps surprisingly, the comparison found both of these things to be significantly better during the pandemic in 2020 compared to two years previously. The authors suggest this may be due to increased support within social work organisations and positive changes to working practices. The timing of the McFadden et al. (2021b) paper – based on data in the early part of the pandemic – may also be a factor in their findings. A later survey they conducted in November – January 2021 (McFadden et al., 2021a) across health, social care and social work professionals in the UK found that all professionals' well-being had deteriorated compared to earlier in the pandemic, and the responses of social workers, alongside those of nurses, suggested their work had been the most affected by COVID-19 out of all the professional groups who took part in the survey.

More challenging or difficult social worker experiences are also reflected in the *Community Care* survey of nearly 466 social workers in November 2020, reported by Sliman (2020) and Turner (2020). Three-quarters of respondents felt either slightly (39%) or significantly (36%) more negative about their working life than a year previously, while 70% said their mental health was slightly (43%) or significantly (27%) worse (Turner, 2020). Sliman (2020) reported on some of the qualitative survey responses. These illustrate the degree to which some social workers were struggling at this point: these social workers expressed that the cumulative pressures of practising social work under COVID-19 was unyielding. Concerns were expressed about workloads, the ongoing erosion of home/life balance and the lack of protected personal space. Despite these insights from some social workers, it is interesting to note that the **Community Care** survey did also find that a clear majority of social workers (65%) were satisfied with how their service had responded and adapted to the COVID-19 context (Turner, 2020). In this respect these survey findings concur with more positive survey findings of McFadden et al. (2021b), as well as some of the more positive interview-based findings of social worker well-being in Cook et al. (2020).

### **Adapting to the use of new technology and home working**

The technical aspects of technology proved a challenge for some social workers in conducting communication online and in working from home, albeit this manifested differently for different practitioners according to context. Ferguson et al. (2021) found the lack of access to work smart phones was as an issue by child and family social workers in one of the four local authorities they researched – meaning they could not use WhatsApp, the platform most used by families. This in turn led to a greater need for face to face visits in that particular authority, with potential health implications. Cook et al. (2020) noted practitioners' frustration with technology that did not work or was not available for virtual communication. Tadam (2021) reports evidence from Black African social workers of some difficulty in contacting supervisors for advice by online methods for essential casework discussions. Orr (2020), a team leader in a Scottish Local Authority, noted the difficulties of technology in the move to home working for social workers in terms of accessing case data online and setting up Virtual Private Networks (VPNs). Kingstone et al. (2021) found that little support was offered to social workers who struggled to use new technology.

It would seem reasonable to question whether early career social workers, who are on average younger, may have been more at ease as 'digital natives' (Prensky, 2001) with the technological aspects of the move to virtual communication than some of their more experienced colleagues. However, no evidence was found to support this reflection in the literature.

Aside from technological difficulties, one of the main downsides of home working for social workers - emerging in the literature - seemed to be the erosion of the boundaries between home and work (Cook et al., 2020; Phillips et al., 2021; Sliman, 2020). Some social workers felt isolated in this context (Kingstone et al., 2021; Phillips et al., 2020). Self-care strategies and social workers acknowledging the importance of their own well-being needs were reported as a notable challenge for social workers during this period (Banks et al., 2020). Access to and use of PPE emerged as a particular point of difference between

experiences. Kingstone et al. (2021) found that whilst social workers had access to (PPE), there was a lack of clarity over when should be used. Ferguson et al. (2021, p.7) note that 'many local authorities could not initially provide sufficient PPE'. Black African social workers in England also reported difficulties in accessing PPE, while some also spoke of racist behaviours by some managers when deciding which social workers should be allowed to shield at home (Tedam, 2021).

### **LRQ3: What has been the impact of these changes on early career social workers/NQSWs specifically?**

#### **The contribution of early career social workers during the pandemic**

The evidence suggests that early career social workers may have played an important role in helping statutory social work services function during the COVID-19 crisis. A number of local authorities recruited more newly qualified social workers than usual to help respond to an expected surge in referrals to children and adult services when the first UK lockdown ended (Baginsky and Manthorpe, 2021). In Northern Ireland, such recruitment was made explicit: the Northern Irish Chief Social Work Officer approved the decision to withdraw social work students from practice learning on March 18<sup>th</sup>, 2020, with a view to final year students completing their degrees two months early, thereby expediting their entry into the social work profession in Northern Ireland (O'Rourke et al., 2020). In response to this early entry, the authors describe how organisations adapted induction training for NQSWs into shorter online sessions, alongside the opportunity to discuss the online material with mentors and supervisors. The authors also note that additional training on core elements of the social work knowledge base, such as safeguarding, was necessary to supplement readiness for practice among this particular group.

#### **The specific impacts on early career social workers**

Issues of isolation, the lack of boundaries between home and working life, and difficulties in acknowledging the need for self-care existed for many social workers during the pandemic (see LRQ2) but are likely to have been more acute for NQSWs. Cook et al. (2020) found those social workers who did not have established relationships with colleagues – such as NQSWs – may have been marginalised by the move to online team interaction. Baginsky and Manthorpe (2020) report that home working was thought to be particularly difficult for new social workers who were likely to be more dependent on colleagues' advice and support. They also note that new social workers were the group least likely to have an appropriate space from which to work. NQSWs were noted to be on average younger, more likely to live in their parents' homes or be in house or flat shares. As a result, home working for these social workers often meant working in bedrooms or on kitchen tables, with resulting difficulties in maintaining appropriate confidentiality. Senreich et al. (2020), writing about experiences of new social workers in the USA, also highlights marked difficulties in trying to balance home and work life under COVID-19.

Some NQSWs faced additional challenges of starting in teams with a combination of less experienced social workers, agency staff and practitioners on temporary contracts. These teams were more likely to struggle with the move from office working, as described by Cook et al., (2020, p.9):

For these teams, the loss of the office space was particularly significant. When working in the office, a worker might readily offer advice to a NQSW, or naturally fall into conversation with a new colleague. However, the lack of face-to-face contact could make it far more difficult to initiate supportive relationships. NQSWs were at particular risk, as they lost the important vicarious learning opportunities provided by the office environment. Lack of face-to-face interaction could make it difficult for colleagues to identify when they needed support.

McGuinness' (2020) personal reflection as an NQSW in Scotland also suggests the limitations of online engagement for connecting with, and learning from, colleagues. The focus group data in the study of McFadden et al. (2021b p.24) contains a statement from a manager raising a similar set of concerns about their perception of NQSWs' experiences under Covid: the manager refers to NQSWs' isolation from their colleagues and the impact of this on their learning and well-being. As a result of concerns of this kind, Cook et al. (2020) suggest the importance of managers paying attention to recognising where social workers have become isolated and supporting those workers. For NQSWs, they identify the importance of opportunities for shadowing colleagues on virtual home visits and setting up mentoring or 'buddying' opportunities.

Senreich et al. (2021) found that early career social workers in the USA expressed a sense of pride in providing support at a time of crisis, and a growing appreciation and understanding of themselves as social workers. However, they also found varying levels of agency responsiveness to social workers around the provision of PPE and managerial support. Fears of contracting COVID-19, and concerns about passing it on to older relatives, were also expressed by these early career social workers.

The sense of pride mixed with fear expressed by these US early career social workers, resonates strongly with McGuinness' (2020, no page number) personal account as a NQSW in a statutory social work team in Scotland:

I was undoubtedly nervous about the risk of contracting the virus or bringing it home to my husband but at the same time I was desperate to be able to use my skills to help those who were hurting, suffering and struggling to cope.

Similar to early career social workers in the USA, McGuinness also describes socially distancing from family members outside her household, for fear that she could transmit Covid to them. By implication, this suggests that some of the typical sources of personal social support available to newly-qualified staff may have been limited or restricted.

Some of the most striking findings from Senreich et al. (2021, p.12) are the data from early career social workers on the emotional impact of working under COVID-19 conditions. The researchers note:

participants used words and expressions such as anxiety, depressed, panic attacks, emotionally draining, isolating, exhausted, secondary trauma, stress, burnout, and forever impacted to describe their emotional states.

O'Rourke et al. (2020) note the need for 'fast-tracked' NQSWs to be provided with additional help to support their self-care, and consequently their well-being. Senreich et al. (2021) similarly note that a core implication of their study is the need for social work agencies to have better plans in place to support social workers during crises and disasters. Drawing on a literature which explored social workers' well-being after the September 11<sup>th</sup> terrorist attack in New York in 2001, they argue that a supportive work environment, and advice on how to control emotional fatigue, will help reduce the likelihood of new social workers experiencing subsequent burnout or secondary trauma.

## **Conclusion**

Evidence and data on the impact of COVID-19 on social work practice in the UK continues to emerge as authors begin to publish on existing studies. This body of work is expected to grow and refine with each iteration of findings. Existing literature however, is limited in scope and purpose as data was gathered at different points during the pandemic, leading to variation in experiences expressed by different cohorts. Nevertheless, key messages from early work are helpful in our efforts to understand the impact of COVID-19 as it unfolded across the UK. A summary of what is known is provided below:

Much of social work practice shifted to online or phone-based interactions with service users shortly after the first national lockdown.

Face to face contact continued in most cases involving adult/child protection or risk management in justice social work (or probation in England).

Initial professional experiences of practice after lockdown were mostly expressed in positive terms, including reports of greater team interaction online, better professional attendance at multi-agency meetings, reductions in caseloads, improvements in work life balance for some and a general sense that local authorities had responded well to the rapidly changing context of the pandemic at the time.

Towards the end of lockdown however, a number of difficulties and challenges were reported. These include the additional burden placed on statutory services in the absence of voluntary and third sector agencies (most of whom offered significantly reduced services), as well as growing recognition of the complexity involved in some cases where social distancing and virtual contact restricted social work's ability to conduct comprehensive assessments. The needs of service users also changed somewhat over this period, contributing to additional demand on services to meet new and complex issues.

Some evidence suggests that towards the end of 2020, social workers were struggling with the cumulative impact of COVID-19 on their working lives, and that a significant proportion felt their mental health had suffered as a result.

For newly qualified social workers, it might be important to note that most had not experienced professional practice prior to new arrangements imposed under lockdown rules. There is some evidence to suggest that initial experiences were positive as many developed a strong sense of their importance and contribution

to meeting social needs, thereby helping to strengthen their own professional identity as social workers. But early optimism stands in contrast to other evidence that suggests many NQSWs also felt isolated from team members (lack of access to easy advice and guidance), a loss in learning opportunities (lack of shadowing and a reduction in training), lack of adequate home working space for some (living with parents or living in shared accommodation) and a lack of recognition given to the emotional impact of working under COVID-19 restrictions.

Lessons from existing research point to the importance of supportive managers and teams, as well as the crucial function played by shadowing opportunities and engaging in a wide range of learning at the start of professional careers. The emotional impact of practising under pandemic restrictions must not be underplayed either (for new and experienced staff alike). As subsequent studies are published, our knowledge and understanding about what matters and what makes a difference to NQSWs' experiences will grow and improve, supporting evidenced-based recommendations for policy makers and leaders in the profession.



## **Appendix 3**

### **NQSW 2020 Interview schedule**

1. Can you please confirm your workplace, setting and role, and when you started?
2. Tell us about your working environment? (e.g. home or office; online or f2f)
3. What does an average day look like currently?
  - How does this compare to what your expectations were of the social work role?
  - What are the challenges?
  - What are the good bits?
4. How are you being supported? (formally and informally). How are you managing self-care?
5. What opportunities are available to facilitate your post-registration learning and development (PRTL)?
6. How do you feel that the changes brought about by COVID-19 may have impacted the development of your professional identity?
7. Is there anything else that you feel would help you navigate your first year as a social worker?