INSIGHTS A SERIES OF EVIDENCE SUMMARIES



Social media and social service workers

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Key points

- Social media presents significant opportunity for social service workers
- Social media, when used effectively can be a tool for workers to improve practice, encourage collaboration, create virtual communities of practice, facilitate greater integration and track CPD
- Social media is about more than just Facebook and Twitter; there are a range of other channels to help practitioners develop and improve practice
- Organisations should recognise the potential of social media for practice and be supportive of its use, providing clear guidance to avoid confusion and anxiety about risk
- Lessons on the use of social media can be taken from other disciplines including healthcare and education

Introduction

The opportunities presented to social service workers by the arrival of social media are in many ways unprecedented. Although the so called 'digital revolution' is not unique to social services, in few other disciplines are the challenges presented by the use of social media so blurred and fraught with potential risks to the professional.

Understanding the social media landscape and the potential benefits for social care practice is vital for the workforce, yet research and guidance has been slow to keep up with the demand for support coming from those working within the sector. While anecdotal stories have highlighted extensive individual use of social media to improve and enhance practice, there is limited research available looking at the wider implications for the workforce. What research is available is relatively limited, with a focus on small-scale studies including specific caveats on social media usage, rather than large-scale generalisable and scalable research projects. This *Insight* seeks to address part of that gap. It will explore what is understood by 'social media'; perceived risks of using it; opportunities provided; relationship to workforce wellbeing; and future implications for practice.

Context for practice

In Scotland, the policy foundations to enable social service workers to begin using technologies more widely within practice have to a large extent already been laid, although specific guidance for practice could be clearer in some areas. Many of the latest Scottish government policies emphasise the opportunities that digital technologies, including social media, can have on both the practice and experience of care, and how they can support the wider agenda of person-centred care planning.

Scotland's digital health and care strategy (Scottish Government, 2018) which builds on previous digital strategies, highlights that while there are opportunities to develop new technologies for the sector, there is also an opportunity to make use of existing channels which are already familiar to the general public, like social media. At a practitioner level the strategy stresses the importance of buy-in from all care delivering organisations and proposes that they should sign up to the Digital Participation Charter to ensure basic digital literacy among staff and embed it in practice.

A Health and Sport Committee report (2018) on technology and innovation in health and social care identified that digital technology 'has the potential to change the face of health and social care delivery', and highlights the drive to promote technology enabled care, while stressing the importance of developing a national approach to align priorities, standards and the effective delivery of a digital approach to health and care at a local and national level. A report from Scottish Care (2018) highlights that digital tools have not only transformed the way staff work and communicate, but also have significantly impacted how and what data can and should be collected from service users.

More than just Facebook: mapping the landscape

Social media is a broad term, covering communication and interaction across a range of platforms and channels.

The term 'social media' makes one immediately think of social networking sites like Facebook, Twitter and Linkedln. While these are useful tools, they are not the only tools available to workers. The Scottish

Social Services Council (2017) defines social media as the online platforms you 'use to engage – to create relationships, have conversations and communicate with others'. It is a platform you use to upload content, share and interact with others, and is often closely associated with the rise in the use of digital technologies including smartphones and tablets.

In January 2018, NHS Digital published a report, which highlighted the accessibility and availability of digital platforms to help social workers in their roles. The research, which was compiled from survey data, sought to understand not only how social work could be supported through the use of digital, but also to assess the current level of usage and understanding of digital technologies among the workforce. While more than half of survey respondents said they had access to a smartphone as part of their role, fewer were actually able to access case notes and other necessary documents digitally when outside the office.

The survey found there was an appetite for greater and better use of digital media in day-to-day work, which practitioners felt would not only improve their ability to work more flexibly, but could also be used to forge better relationships with people who use services.

An NHS Confederation survey (2012) looking at social media use in the public health and media sectors found that the vast majority of survey participants in senior roles were using social media, with preferred channels being Twitter, LinkedIn, Facebook and YouTube.

Frederic Reamer (2013) and C Lee Ventola (2014a; 2014b) both identify multiple social media platforms and what their potential uses could be; the table below (pages 8 and 9) is an adapted version of the 'types' and 'uses' of social media platforms they present. It is by no means exhaustive; rather it is designed to be an overview, with options for further reading, of the types of social media that social service workers may come across in their work.

Understanding risk to reap the reward

One of the most common barriers to the uptake of social media within social services is anxiety among both professionals and organisations about the potential challenges, ethical considerations and risk in relation to social media use. Boddy and Dominelli (2017) explore the challenges of what they refer to as the 'new ethical space' that has been created by

the rise in the use of social media. They discuss the importance of social workers retaining their own professional judgement when it comes to scenarios like boundary crossing, and call for greater organisational support and guidance to help social workers make informed decisions when using social media. While this research is mainly focused on direct engagement with service users, the findings are applicable to the social services profession more broadly.

Actions like changing names or leaving out identifying factors when discussing cases online, even in a closed group, or removing names from scenarios in blogs, are some of the ways researchers suggest social workers can use their professional judgement to mitigate for risk around safeguarding (Greer, 2016). One of the key messages from the research and existing guidance is to always stop and ask colleagues if you are unsure at any stage.

Another key takeaway from the research is from an organisational perspective. Organisations, in particular local authorities, do not like to be exposed to risk, and in many instances social media is viewed as a risk (BDO, 2015; Mack, 2013). There is a need to address the inherent unease

around social media within organisations, and to highlight that the potential benefits for employee wellbeing and practice far outweigh any potential risks, provided they have proper guidance and structures in place to support staff who choose to use social media in their work (Morgan, 2004).

Positive risk-taking is a concept of increasing interest in the sphere of adult social care (Titterton, 2010). However, particularly in relation to 'new technologies' managing and supporting risk-taking in practice can be challenging. Morgan (2004), who has written on positive risk taking in social work, emphasises the importance of a culture of professional support for frontline staff, which in many instances comes from senior management, and specifically their influence over practice. To enable staff to feel confident in promoting risk-taking in practice, Morgan suggests managers need to have a good understanding of positive risk-taking and be able to articulate the rationale for it, with defined accountability, transparency and opportunity for reflection and change if it is needed. This approach to risk-taking requires a significant level of trust and communication within social service teams and senior management, but as Morgan and others have shown, the potential benefits can be significant (Morgan, 2000; Taylor, 2006).

Challenges around GDPR and cyber security pose significant worries for individuals and organisations, particularly those using social media platforms like Evernote, Dropbox or Slack to communicate and share documents remotely. Having robust security systems and efficient software is important. as is effective training for staff. Organisational investment in this is important, and while there is a limited amount of research carried out in a social services specific context, studies conducted by the Local Government Association (LGA) and the local government professional magazine, MJ, show that organisational investment in software and training has a significant long-term benefit, not only for reducing risk, but improving overall proficiency (LGA, 2016; Jameson, 2014).

What the research consistently stresses is that social service workers should apply common sense when using social media, and if they are ever unsure should approach a colleague or senior member of staff to discuss (Carson and Stevenson, 2017). Similarly, organisations should not be afraid to take opportunities to learn when mistakes have been made. The research highlights that while organisations, particularly those who operate in a care environment

TYPES	EXAMPLES	USES	NOTES
Social networking	FacebookWhatsApp	 Closed groups allow for a level of 'safety' for practitioners Peer support forum opportunities Helpful from practice as well as personal wellbeing perspective 	United Lincolnshire Hospitals NHS Trust (ULHT) ¹ uses a closed Facebook group to share patient feedback with staff. Groups can be created informally among staff and are safe spaces for colleagues to discuss practice.
Professional networking	LinkedInTwitterDiigoSlideShare	 Record and view professional and academic profiles Create professional networks Explore practice and connect with colleagues nationally and internationally Keep up to date with research/policy 	Research around the use of social media in professional networking in healthcare and medicine considers potential benefits for job progression, keeping up to date with innovative practice, and the benefits of engaging with people about issues on a professional level (Ventola, 2014b).
Multimedia (e-notes, videos, live streaming, podcasts)	EvernoteYouTubeVimeoInstagramVoiceNotes	 Take and save notes 'on the go' and easily organise them Ease of sharing best practice with colleagues Alternative ways to communicate with and engage colleagues 	The Open University ² regularly publish webinar and podcast sessions for social service workers. Social Care TV ³ is a platform used by SCIE where new publications and best practice are made available through video.
Blog writing	WordPressTumblrMediumBlogger	 Enhanced visibility Provides an effective way to reflect on practice Can be published anonymously but shared and read widely 	Many care workers are encouraged to blog both during training and once they are practising. In July 2018 NHS England ⁴ ran a 'blogging month' campaign encouraging nurses to blog about their experiences and link them to a number of hashtags and Twitter accounts to allow others to see them.

¹ Using social media to share patient opinion with staff: https://bit.ly/2RJ3c6h

² Open University webinars: https://bit.ly/2QwiCFW and podcasts: https://bit.ly/2GWNoIG

³ Social Care TV: https://www.scie.org.uk/socialcaretv/

⁴ Care together, share together blogging campaign: https://bit.ly/2TyUuoj

TYPES	EXAMPLES	USES	NOTES
Workforce planning	SlackWorkdayJointly	 Day-to-day planning as well as wider strategic workforce planning Can be used by practitioners as well as management to ensure the needs of the team are met 	Calderdale council ⁵ developed a case management tool to support their day-to-day work, in areas such as child protection, looked after children, and fostering and adopting.
Professional, interdisciplinary collaboration	TrelloDropboxGoogle Docs	 Sharing information across teams Collaboration among teams Multiple authors can contribute to, amend and read documents 	North Tyneside Council ⁶ are developing an integrated system where social housing, health and social care teams all use the same systems to share information about at-risk tenants.
CPD monitoring and e-learning	CPDme Specifically designed apps and training sites	 Logging and tracking CPD E-learning and webinars Support and learning from teaching staff, as well as peers Apps which use scenario based games to 'play out' scenarios and consider potential outcomes 	CPDme is widely used in the NHS. The Skills for Care 'Digital capabilities in social care' report found that 95% of organisations used e-learning courses to support staff development. Academics at the University of Birmingham developed The Social Work Social Media App ⁸ which enables staff to experience real-life scenarios in a simulated environment – make decisions and see the potential outcomes of choices.

⁵ Council on track to implementing new social care management system: https://bit.ly/2siCxyt

⁶ Approaches to integrated housing, health and social care services: https://bit.ly/2TAPO17

⁷ Digital capabilities in social care: https://bit.ly/2TB9uSq

⁸ The social work social media app: https://sites.google.com/site/socialworksocialmedia

are traditionally very risk averse, putting frameworks and national level guidance in place to safeguard staff, as well as service users, would allow social care teams to innovate when it comes to social media.

The new way to create modern communities of practice

Hennessey and Anderson (2013) outline a useful working definition of 'traditional' communities of practice, suggesting that they are groups of people who come together regularly to discuss and share knowledge and expertise on a shared subject area. They go on to say that they can be useful vehicles for promoting integrated services by bringing together practitioners who may otherwise not collaborate. This definition is widely supported across the literature (Wenger, 2010; Lomax, 2015; Pyrko and colleagues, 2016)

Using social media to support the creation of communities of practice can encourage the creation of connections even further afield and break down many of the traditional barriers associated with communities of practice. It has been found to be particularly helpful in forging relationships between policy makers, practitioners and academics, who

may find it quite difficult to communicate due to geographical or time constraints (Reeves, 2017; Pyrko and colleagues, 2016). Modern communities of practice, also referred to as Virtual communities of practice (VCoPs), operate in the same way as traditional communities of practice in principle, but allow for greater flexibility, inclusivity and more extensive, longer term discussion (Ford, 2015; McLoughlin and colleagues, 2018).

Research has shown that Facebook, WhatsApp and Yammer closed groups are potentially useful for social workers, although the research for social care more generally is less robust. Walsall Council has used Yammer since 2010 and has. according to anecdotal evidence (Hardy, 2014), found that usage has encouraged collaboration and greater integration. Other groups who have used platforms like Twitter suggest that using social media creates a more equal footing for interaction, lifting barriers and encouraging discussion across 'professional levels' (Hitchcock, 2016). Twitter also enables professionals to keep up-to-date with the latest academic research and policy developments. Social media platforms allow for a level of professional networking, which many in social care may struggle to engage in otherwise (Morgenshtern and colleagues, 2014).

The Health Foundation (nd) has created a guide for those using social media in online health care improvement, with suggestions on how it can be used more widely, and how and why others should be encouraged to use it to create more vibrant

Research from the University of Edinburgh (Daneshvar and Anderson, 2017), investigates the current and possible future for social media as an enabler of co-production in health and social care. Further research from Daneshvar, Anderson and colleagues (2018) explores how specific platforms like Facebook.

communities of practice.

Twitter and blog sites can support principles of co production in social work with older people. They found that social media platforms open up discussion and make practice more transparent.

A tool to facilitate excellence

Social care can and should look to other disciplines to see how they are using social media effectively. It provides an opportunity to learn from other disciplines, including health, education and housing, but also within the profession itself (LGA, 2014).

Social care can and should look to other disciplines to see how they are using social media effectively The report Social media and e-participation in NHS Scotland (Healthcare Improvement Scotland, 2013) reviews progress on how NHS Scotland is using social media and e-participation tools to engage with patients, carers and the wider community, and looks at the levels of uptake among specific NHS boards. This effective use in health services suggests that there can be some

lessons taken from the roll out within health which could provide useful foundations for any roll out of use across the social services sector.

Social media is increasingly being promoted as a tool for newly qualified social workers as part of their training, with many social work departments at universities using Facebook groups and encouraging students to 'get creative' with apps like YouTube and Snapchat. This use in a 'safe' environment allows them to get to grips with social media and how it should and should not be used in a professional context (Lomax, 2015; Cooner, 2013). It also teaches them about the importance of boundaries and the right to privacy away from work. However, for many within the workforce, social media is something that they have had to adapt to 'on the job', rather than something which has been integrated into work from the beginning. It is vital that social workers who have been practising for a number of years, or who are returning to the profession are given suitable time and support through mentoring and CPD training to make best use of social media.

Social media tools for mapping professional and workforce development are increasingly being used by organisations keen to push staff development, both with newly qualified practitioners and those who are experienced within the workforce to maintain excellence in practice (Rossi, 2015).

CIPD research (Gifford, 2014) suggests that social media can also be a potentially useful tool for senior staff to communicate with others in the team. It can provide an opportunity for those who feel less comfortable with face-to-face meetings to instigate conversation, and can also be useful for managers to 'just check in with staff' to see how they are, particularly if those staff are not regularly in the office.

Implications for personal wellbeing

There is a growing body of literature which relates to effective practice and the impact that stress, 'burnout', depression and other work-related mental health issues can have on individual practice and team morale (McFadden, 2015; Revalier, 2016; Greer, 2016b). With this, there is also a growing awareness of the importance of social media in supporting personal wellbeing. In their research, Ravalier and Boichat (2018) explored social worker wellbeing in detail. They examined the impact of workload, support and working conditions on levels of stress and job satisfaction among social workers. While not focussing specifically on social media, they highlight

some of the stress impact that can be caused by social media, particularly in relation to public criticism of social workers on social media platforms, something which, of those who took part in their survey 6 in 10 said they had experienced.

However, it is not all bad. As highlighted, communities of practice can, in the right context, provide an opportunity for professionals to communicate with other social service workers, both within their organisation and outside; this is for many a positive therapeutic experience. The use of forums can provide a 'safe' environment among colleagues from similar backgrounds who can act as a sounding board and support network (Gandy-Guedes, 2016; Westwood, 2014).

There are opportunities for personal reflective practice; blogging and note-taking apps can provide useful opportunities for social workers to keep diaries which they can use to create a learning log. These have been shown to help the workforce at a personal level, but can also be useful for those in a leadership role to use anonymously as examples of good practice, or opportunities for improvement (Ventola, 2014).

Additionally, literature focused more on management perspectives has shown that social media provides potential opportunities for staff who work remotely to work more flexibly, allowing them to complete paperwork or attend meetings while they are out of the office through document sharing apps or video conferencing software which can be used on tablet computers or smartphones. As highlighted, Nottinghamshire Council equipped staff with iPads which allowed them to do virtual paperwork 'on the go' and to easily keep in touch with colleagues (Donovan, 2014). However, it is also important to stress, that while a potentially invaluable tool, the ability to work anywhere, should not be seen as an invitation to work anytime and staff should, as Green (2016a) emphasises, be reminded that they also have the right to 'switch off', even when using those technologies that promote 24/7 connectivity.

Implications for practice

The implications of social media for social services practice are wide ranging. Social media is in no way designed to be a replacement for traditional models of practice. Instead, it is a tool to be used to support development and more effective and

efficient practice, with more and better tools to help practitioners in their work.

For the workforce and the profession, it is important to recognise the potential risks and to offer solutions. As highlighted by Turner (2016), it is an important opportunity to open up a dialogue between organisations and their workforce about the benefits of using social media and how it can and should be used to support the practice needs of staff.

Wider implications include: driving innovation within the workforce; fostering greater engagement and partnership working between professionals; promoting greater integration between disciplines such as health; and wider learning around how social services teams can integrate practice more thoroughly, to work more closely and better align services (Greer, 2016). Social media use also presents opportunities for greater positive risk-taking within organisations, where staff are encouraged and supported to manage risk, on the expectation that it will lead to far improved outcomes for people and services.

Conclusion

Social media has the potential to be a revolutionary tool for social service workers. The research highlights that despite concerns, innovative, creative and informed staff, who use social media effectively with knowledge and support regarding risks and uncertainties around practice, will help the profession to innovate and develop, and support the workforce in unprecedented ways, to the benefit of practitioners, organisations and service users alike.

References

- Anderson-Carpenter K, Watson-Thompson J, Jones M et al (2014) Using communities of practice to support implementation of evidence-based prevention strategies. *Journal of Community Practice*, 22, 1–2, 176–188
- **British Association of Social Work** (2012) Social media policy. London: BASW
- **Bates** P, **Smith** S and **Nisbet** R (2015) Should social care staff be Facebook friends with the people they support? *Journal of Adult Protection*, 17, 2, 88-98
- **Best** P, **Manktelow** R and **Taylor** BJ (2016) Social work and social media: online help-seeking and the mental well-being of adolescent males. *British Journal of Social Work*, 42, 1, 1-20
- **BDO** (2015) A review of social media usage in UK local government. London: BDO LLP
- **Boddy** J and **Dominelli** L (2016) Social media and social work: the challenges of a new ethical space. *Australian Social Work*, 70, 2, 172-184
- **Carson** G and **Stevenson** L (2017) Why and how social workers should use social media. *Community Care*. Available at: https://bit.ly/2FeWizA
- Cook-Craig PG and Sabah Y (2009) The role of virtual communities of practice in supporting collaborative learning among social workers. *British Journal of Social Work*, 39, 4, 725-739

- **Cooner** TS, **Knowles** A and **Stout** B (2016) Creating a mobile app to teach ethical social media practices. *Social Work Education*, 35, 3, 245-259
- **Crawford** K (2011) *Interprofessional collaboration in social work practice*. London: Sage Publications
- **Daneshvar** H et al (2018) How can social media lead to coproduction (co-delivery) of new services for the elderly population? A qualitative study. *JMIR Human Factors*, 5, 1
- **Daneshvar** H and **Anderson** S (2017) Challenges and opportunities of health and care co-production with social media: a qualitative study. Denmark: University of Aarhus
- **Donovan** T (2014) Case work on the go: how iPads are shaking up social work practice in Nottinghamshire. *Community Care*. Available at: https://bit.ly/2Fffrla
- **Estelles** E, **del Moral** E and **Gonzales** F (2010) Social bookmarking tools as facilitators of learning and research collaborative processes: the Diigo case. *Interdisciplinary Journal of E-Learning and Learning Objects*, 6, 175-191
- **Farmer** D (2016) The revolution will be digitised (innovative information management), *MJ*, May 16-17
- **Ford** J et al (2015) Virtual communities of practice: can they support the prevention agenda in public health? *Journal of Public Health Informatics*, 7, 2, 1-12

- **Gandy-Guedes**, ME et al. (2016) Using Facebook as a tool for informal peer support: a case example. *Social Work Education*, 35, 3, 323-332
- **Gifford** J et al (2014) Putting social media to work: lessons from employers. London: CIPD
- **Greer** J (2016a) Looking after the vulnerable requires social workers to prioritise their own wellbeing too. *Community Care*. Available at: https://bit.ly/2ReC7bu
- **Greer** J (2016) *Resilience and personal effectiveness for social* workers. London: Sage
- **Harden** G (2012) Knowledge sharing in the workplace: a social networking site assessment (Conference paper). 45th Hawaii International Conference on system sciences. Maui: IEEE
- **Hardy** R (2014) Social care meets social media what's holding the sector back? *The Guardian*. Available at: https://bit.ly/2CVCUoS
- Hart M et al (2017) Twitter and public health (Part 1): How individual public health professionals use Twitter for professional development. JMIR Public Health and Surveillance, 3, 3
- **Haynes** L (2018) Digital capabilities should be improved to help staff practice wherever, NHS Digital fellow says. *Community Care*. Available at: https://bit.ly/2OwlgsC
- **Health and Care Professions Council** (2017) Guidance on social media (including related podcast). London: HCPC

- **Health and Sport Committee** (2018) Technology and innovation in health and social care. Edinburgh: The Scottish Parliament
- **Health Foundation** (nd) Social media in online health care improvement: a guide. London: Health Foundation. Available at: https://bit.ly/2FfiwSc
- **Healthcare Improvement Scotland** (2013) Social media and e-participation in NHS Scotland. Glasgow: HIS
- **Hennessey** C and **Anderson** S (2013) Toolkit for developing communities of practice. London: Revolving Doors Agency
- **Hitchcock** L and **Young** JA (2016) Tweet, tweet!: using live Twitter chats in social work education. *Social Work Education*, 35, 1, 457-468
- **Hitchcock** L and **Battista** A (2013) Social media for professional practice: integrating twitter with social work pedagogy. *The Journal of Baccalaureate Social Work*, 18, 33-45
- **Holder** H, **Kumpunen** S, **Castle-Clark** S et al (2018) Managing the hospital and social care interface. London: Nuffield Trust
- **Jameson** H (2014) Growing pains (digitisation of local government services), MJ, July, 18-19
- **Kaplan** AM and **Haenlein** M (2010) Users of the world unite! The challenges and opportunities of social media. *Business Horizons*. 53. 59-68
- **Knowles** A and **Cooner** TS (2016) International collaborative learning using social media to learn about social work ethics and social media. *Social Work Education*, 35, 3, 260-270

- **Local Government Association** (2018) Family front door: smart information-sharing portal (Digital Transformation Programme case study). London: LGA
- **Local Government Association** (2016) Transforming social care through the use of information and technology. London: LGA
- **Local Government Association** (2014) Connecting health and wellbeing boards: a social media guide. London: LGA
- **Local Government Executive** (2014) Networking opportunities (social media). London: LGA
- **Lomax** R and **Nix** I (2015) Social media and social work students: the boundaries just got more complicated. Joint Social Work Education Conference (JSWEC 2015), 15-17 Jul 2015. London: The Open University
- **McFadden** P, **Campbell** A and **Taylor** B (2015) Resilience and burnout in child protection social work: individual and organisational themes from a systematic literature review. *British Journal of Social Work*, 45, 5, 1546-1563
- **McLoughlin** C, **Patel** KD, **O'Callaghan** T et al (2018) The use of virtual communities of practice to improve interprofessional collaboration and education: findings from an integrated review. *Journal of Interprofessional Care*, 32, 2, 136-142
- **Mack** R (2013) Breaking the silicone ceiling (digital transformation in local government), MJ, November, 16-17
- **Maguire** D, **Evans** H, **Honeyman** M et al (2018) Digital change in health and social care. London: King's Fund

- **Morgan** S (2004) Positive risk-taking: an idea whose time has come. Health Care Risk Report, 10, 10, 18-19
- **Morgan** S (2000) Risk-making or risk-taking? *Open Mind*, 101, January/February. Available at: https://bit.ly/2RMnBXO
- Morgenshtern M, Freymond N, Hong L et al (2014) Researcher? Social worker? "Let us be both": exploring the binaries that condition graduate social work research training. *Procedia-Social and Behavioural Sciences*, 191, 2002-2007
- NHS Confederation (2012) Current use, future trends and opportunities in public sector social media. London: NHS Confederation
- **NHS Digital** (2018) Social workers and information technology. London: NHS Digital
- **Open University** (2018) Social workers and social media: a webinar debating the issues for social work students. London: Open University
- **Pyrko** I, **Dorfler** V and **Eden** C (2016) Thinking together: what makes communities of practice work? *Human Relations*, 70, 4, 389-409
- **Quilter-Pinner** H and **Kibasi** T (2018) Better health and care for all: a 10-point plan for the 2020s. London: IPPR
- **Ravalier** JM and **Boichat** C (2018) UK social workers: working conditions and wellbeing. Bath: Bath Spa University
- **Reamer** FG (2013) Social work in a digital age. *Ethical and Risk Management Challenges*, 58, 2, 163-172

- **Reeves** S, **Xyrichis** A and **Zwarenstein** M (2017) Teamwork, collaboration, coordination, and networking: why we need to distinguish between different types of interprofessional practice. *Journal of Interprofessional Care*, 32, 1, 1-3
- **Rossi** B (2015) How emulating Facebook in the enterprise can boost business. Information Age, May edition.
- **Scottish Care** (2018) Techrights: human rights, technology and social care. Ayr: Scottish Care
- **Scottish Government** (2018) Scotland's digital health and care strategy: enabling, connecting and empowering. Edinburgh: Scottish Government
- **Scottish Social Services Council** (2017) Social media guidance for social service workers. Dundee: SSSC
- **Simpson** JE (2016) A divergence of opinion: how those involved in child and family social work are responding to the challenges of the internet and social media. *British Journal of Social Work*, 21, 1, 94-102
- Sitter KC And Curnew AH (2016) The application of social media in social work community practice. Social Work Education, 35, 3. 271-283
- **Skills for Care** (2016) Digital working strategy update. Leeds: Skills for Care
- **Stanfield** D, **Beddoe** E, **Ballantyne** N et al (2017) Critical conversations: social workers' perceptions of the use of a closed Facebook group as a participatory professional space. *Aotearoa New Zealand Social Work*, 29, 3, 42-54

- **Taylor** B (2006) Risk management paradigms in health and social services for professional decision making on the long-term care of older people. *British Journal of Social Work*, 36, 8, 1411-1429
- **Titterton** M (2010) Positive risk-taking with people at risk of harm. In Kemshall H and Wilkinson B (eds) *Good practice in risk assessment and risk management, volume 3.* London:

 Jessica Kingsley Publishers
- **Turner** D (2016) 'Only connect': unifying the social in social work and social media. *Journal of Social Work Practice*, 30, 3, 313-327
- **Ventola** CL (2014a) Mobile devices and apps for healthcare professionals: uses and benefits. *Pharmacy and Therapeutics*, 39. 5. 356-364
- **Ventola** CL (2014b) Social media and health care professionals: benefits, risks, and best practices. *Pharmacy and Therapeutics*, 39, 7, 491-499
- **Wenger** E (2010) Communities of practice and social learning systems: the career of a concept. In Blackmore C (ed.) *Social learning systems and communities of practice*. Milton Keynes: Springer Verlag and the Open University, 179–198
- **Westwood** J (ed.) (2014) *Social media in social work education*. 1st ed. Northwich: Critical Publishing
- **Wilkinson** (ed.) *Good practice in risk assessment and risk management, volume 3.* London: Jessica Kingsley Publishers
- Young JA, McLeod DA and Brady SR (2018) The ethics challenge: 21st century social work education, social media, and digital literacies. *Journal of Social Work Values and Ethics*, 15, 1, 13-22

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The focus of this *Insight* is pre-birth child protection assessment and care planning, and more specifically, the lead social work role within this work.

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