

Social Care Workers' perspectives on reflective practice as part of the  
implementation of Continuous Professional Development

By

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**Signed declaration**

I declare that this dissertation and the research involved in it are entirely my own work as part of the requirements for the Masters in Advanced Social Care Practice. This work, or part of it, has not been submitted for a qualification to any other institute or university.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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## **Abstract**

This research measured social care workers' perspectives on reflective practice as part of the implementation of CPD under the following sub headings:

- What is social care workers understanding and view on CPD?
- What do social care workers feel will be the challenges to engaging in reflective practice and the implementation of CPD?
- What supports do social care workers need to engage in reflective practice and CPD?

The research measured the views and feelings of social care workers towards the implementation of CPD. The challenges of CPD and supports that social care workers may require were measured and provided some rich findings. Social care workers perspectives and understanding of reflective practice were then measured in semi structured interview. Interviewees were asked to read a case study of social care worker who was involved in an incident with a resident in residential adult homeless service. The staff member in the case study has written a reflection on her experience and what she has learned from this. Interviewees were then asked about the reflection and reflective writing.

The findings from the research provided great insight into social care workers perspectives on both reflective practice and CPD. It was apparent from the findings that social care workers rated reflective practice to be the most important element of CPD. However, in the findings social care workers focused predominantly on formal learning and training when referring to understanding of CPD. Overall respondents gave positive feedback on the implementation of CPD and the use of reflective practice, however some felt that there would be some resistance from staff. Respondents and interviewees both noted that time was an issue for CPD and reflective practice. An emerging theme of a predominantly positive effect on service delivery was noted as by interviewees. Furthermore, they highlighted that engaging in reflective practice and developing new ways of working will enhance quality of care.

Respondents felt that training was a key element to CPD and also identified that participation in regular training could be a challenge. It was also evident that training may be required to upskill social care workers in reflective practice and reflective

writing. A strong theme emerged from the interviews around engaging in reflective writing. Interviewees felt that reflective writing will require training and mentoring as writing within the social care sector was predominantly for reports. Furthermore, it was found that there may be some resistance to this as it may not meet the learning needs of social care practitioners.

It is apparent that social care workers may require some additional supports such as training to help prepare for both engagement in ongoing reflective practice and CPD. Management teams will also need support in being up to date with the relevant requirements and access to appropriate CPD supports. One interviewee was aware of the theories of reflection and the remaining six were not aware. Social care workers may require coaching and mentoring in reflective practice models. It is clear that the scope of this research is limited due to the size of the study and also was carried out in one organisation. It would be beneficial to measure the perceptions of social care workers across multiple sectors to see what they perceive as challenges and supports required.

## **Literature Review**

### **Introduction**

Social Care Ireland (2017) highlights the importance of using critical reflection in social care work as the work is based on interpersonal relationships which, require empathy, strong communication skills and self-awareness.

The social care sector is an area that has been recently professionalised and its origins were primarily focused on residential care for young people and those with disabilities. The Health and Social Care Professionals Act 2005 established a registration board for social care work and other healthcare professions (Share and Lalor, 2009). The Health and Social Care Professionals Act also focused on qualifications for social care and other healthcare professionals. The relevant registration board had to approve their suitability, assessment and examinations (Irishstatutebook.ie, 2005 p. 48).

Coru was set up under the Health and Social Care Professionals Act 2005 and their role is to promote high standards of professional conduct, education, training and competence through statutory registrations for health and social care professionals. Coru are currently preparing for the regulation of Social Care Workers through setting standards that social care workers must meet and ensuring educational institutions deliver qualifications that prepare professional social care workers in delivering high quality care. A fitness to practice board will also be set up for dealing with complaints from the public in any practice complaints that are highlighted. Social care workers are then required to register and keep their skills up to date by participating in ongoing continuing professional development (Coru, 2010).

This research paper investigates social care workers' perspectives on reflective practice as part of the implementation of continuous professional development. CPD is vitally important for the development of social care practitioners' knowledge and skills so they can best support service users. It is vital that the issues are identified through research so that social care organisations, management and staff can prepare for upcoming registration whilst prioritising service users care and support.



## **Continuous Professional Development (CPD): In context**

Continuing Professional Development is the means by which health and social care professionals maintain and improve their knowledge, skills and competence, and develop the professional qualities required throughout their professional life. (Coru 2010)

The Allied Health Professions Project (2003, p. 9) defines CPD from a statutory perspective as ‘a range of learning activities through which health professionals maintain and develop throughout their career to ensure that they retain their capacity to practise safely, effectively and legally within their evolving scope of practice.’

It is apparent that CPD will be an integral part of the social care profession in the near future. It is important for social care workers to develop and improve new skills to support and care for vulnerable service users and the historical context of failings within social care services in the past must be considered to ensure that this is not repeated. CPD also serves as a quality assurance mechanism for ensuring high level of care for service users. CPD was identified as one of the findings in the Roscommon case. It was highlighted that there was a limited learning culture in the HSE West. Furthermore, the report also mentions that this also was an issue in the Kelly Fitzgerald (1996) and the West of Ireland Farmer case in 1995 (Roscommon Child Care Inquiry 2010 p. 79). This was also found in the United Kingdom where in cases such as Victoria Climbié and Baby P. There were huge shortfalls in the care provided and lack of clinical governance and quality assurance were contributing factors (Hearle, Lawson and Morris, 2016 p.2.) It is vital that the protection and welfare of all vulnerable service users is paramount importance and at the forefront in the development of social care practice. Social care professionals must learn from the shortcomings of previous work that jeopardised the safety and welfare of our most vulnerable. This is a reminder for practitioners of the importance of ensuring proper implementation of the CPD to ensure it meets the needs of service users.

## **Reflective Practice**

Cole (2000 p. 33) spoke about developing healthcare professionals through CPD that is learning focused. However, he highlighted the importance of experiential

learning through reflective practice. Cole argues that CPD should be outcome led rather than focused on inputs and suggests three reasons for CPD. Furthermore, practitioners should be given the opportunity to develop professional status, constantly develop as practitioners and overall deliver high quality services. It is suggested that practitioners should also complete an analysis of their professional needs and engage in regular reflection in action. This article highlights the value of reflective practice as part of the CPD process. Cole also highlights the importance of systemising reflective practice through the use of a journal. It is also suggested that each practitioner may develop their own system of recording reflections that suits their own specific learning needs. This article gives an overview of the use of reflective practice and CPD in the context of the healthcare sector in the United Kingdom. It raises the question of the use of recording reflections in a way that suits the practitioners own learning needs.

Chapman and Williams (2015) completed research on the use of CPD and critical reflective practice. The research explored the views of UK qualified Physiotherapists and students on the use of reflective practice in CPD. Ten qualified physiotherapists were interviewed with the use of semi structured interviews, three of which had recently graduated. One of the themes from Chapman and Williams research showed that both CPD and reflective practice were viewed as being important. However reflective practice predominantly took place within appraisals, or from regulatory bodies and in some cases from the practitioner themselves. The research found that participants acknowledged the difference between CPD which is delivered externally and the deeper learning resulting from reflective practice. However, reflective practice was quickly lost in practice after graduation emphasising the need for strategies to enhance the transition from student to graduate so that engagement in reflective practice continues. Chapman and Williams research also found that practitioners engaged in the use of e portfolios which was useful for some participants. However, some participants felt that this may not be useful for the recording of reflective practice as some preferred paper-based methods. This research highlighted similar issues around written reflections and also was based in healthcare sector in the UK. The research had a limited scope as only ten practitioners participated which gives a limited view of the use of reflective practice in

CPD. However, some of the findings raised some questions around the use of reflective practice after graduation.

Comer (2016) explores Schon's theory on reflection in action and applies this to nursing education and knowledge. The paper interprets reflection in action and on the spot experimentation. Schön's theory focuses on an epistemology of practice that will incorporate the realities faced by practitioners of the professions in their everyday work situations. Rolfe's theory focuses more on utilising reflection on action through on the spot experimentation and hypothesis testing. Furthermore, Rolfe suggests that repetitiveness and routines that occur within professional practice can often impact the practitioners "knowing on practice" skills. Practitioners' can become increasingly implicit and spontaneous when dealing with familiar routines or situations which may result in missed opportunities to think about what he or she is doing. Practitioners may also be at risk of burn out if they become rigid in their practices. This article focused on the use of reflective practice predominantly in the nursing sector and focused on the theory of reflective practice.

Kaija Collin, Beatrice Van der Heijden and Paul Lewis explore CPD and how it is difficult to define however is a very important concept in for practitioners across many sectors. Lifelong learning is explored and how professional regulation can impact participation in CPD. Both formal and informal learning are explored and the article argues that organisational culture that strongly supports workers further development is positively associated with employability. This article gives an overview of CPD across many sectors which gives a broader perspective of the CPD process. The two types of learning, formal and informal are explored which are strongly linked to the future implementation of CPD in the social care sector.

Neary (2015) completed a study involving a group of career development practitioners undertaking a postgraduate qualification as a form of CPD. The study offers insights into how these practitioners perceive and view different forms of CPD. A case study method was applied using twenty-one UK based practitioners. A case study methodology was adopted to gather examples of the CPD activities practitioners engaged in and the value placed on these in supporting the development of professional practice. Their views were synthesised to create a typology representing a differentiated model of CPD. The model proposes three

types of CPD: operational, experiential and formal. The research found that formal CPD is perceived as having the highest value in developing professional practice. Formal CPD was defined as professional qualifications in the sector. Operational CPD was outlined as organisational training provided by employers and experiential CPD was focused on the development of skills and knowledge through experience. The study supports a deeper understanding of how careers practitioners engage with and understand CPD. The research did find that there appeared to be a lack of consensus to the nature of CPD and its purpose. Some terms were also used interchangeably, such as training and CPD when describing learning opportunities that participants engaged in. This article was based in the career development sector which gave a different perspective on CPD which may not be as relevant. However the exploration of experiential and

Thompson and Pascal (2011) article on developing critical reflective practice focuses on the idea that traditional reflective practice can be oversimplified. Reflective practice needs to integrate theory and practice and move toward critical reflective practice. This article also considers challenges to reflective practice such as time constraints and introduces the concept of reflexivity. Reflexivity is defined as the ability to recognise our own influence on situations. Two elements of critically reflective practice are also explored, depth and breadth. Depth looks at being able to look beneath a situation to see what assumptions are being made and breadth looks at the broader sociological context and includes factors such as power relations, discrimination and oppression. Both elements can interact for practitioners to engage in their critical faculties and deliver high quality practice. This article provides a through oversight on reflective practice and also captures a practical view of the challenges of reflective practice.

Social care promotes the use of reflective practice in daily events and incidents to evaluate practice and learn from past practice. Nicol and Dosser (2016) define reflection, as being purposeful, focused and questioning when used in a professional setting. Reflective practice is also practiced within other caring professions such as nursing. Finch (2016) refers to revalidation in nursing where nurses are encouraged to reflect, learn and practise thoughtfully. This creates opportunities to promote self-awareness and be more responsive to their colleagues. Revalidation is a quality assurance mechanism that is used within the nursing sector and is the equivalent to

social care workers engaging in registration requirements. Kwaitek, McKenize, & Loads, (2005) identified that social care and healthcare staff are likely to support people with behaviours that challenge. Furthermore, research has found that some nursing students hold attributions about challenging behaviour which mean that they are unlikely to see it as open to change. This highlights the importance of CPD to enhance staff knowledge and values which, can have an impact on care and support for service users. It is vital that CPD is embraced by professional social care workers. (Davies, 2012).

### **CPD Portfolio**

Social care workers will be required to submit a portfolio demonstrating their engagement in continuing professional development. The portfolio will consist of a personal learning plan, records of written reflections and evidence of participation in continuing professional development Coru (2017 p.16). Redman (1994, p. 42) refers to a portfolio as a growing collection of evidence that mirrors the growth of its owner with reference to his or her hopes and plans for the future. Furthermore, it is not a historical record of achievement or current profile of competence. However, it is evident, that if a portfolio is a statutory obligation in the future, it will be a measure of professional competence of social care workers. Coru require social care workers to to keep written reflections within their portfolio to demonstrate their level of reflection and learning. Coru (2017 p. 17) This will allow Coru to measure the level of reflective practice that each social care worker is engaging in. This also highlights that it is vital for practitioners and organisations to be fully prepared to appropriately establish mechanisms and supports that will allow full engagement in continuous professional development.

### **Reflective Practice in theory**

Greene, A. (2017) examined social care practitioners' understanding of self-awareness and reflection. The varying reflective tools that practitioners used in the social care field were focused on. The study found that use of reflective practice was mainly used in critical incidents rather than general practice. It also found that social care workers did not consider the models of reflective practice. The impending registration of social care workers was highlighted by the researcher as an important pre-requisite for developing more research into this area. Reflection is a personal

matter as well as a statutory requirement. Nicol and Dosser, (2016) suggest that professional reflection requires a focused and strategic approach in contrast to reflection on personal and social circumstances. However, in contrast to this, Stuart, Sectish and Huffman (2005), report on a pilot programme where individual learning plans were implemented as part of a paediatric continuity clinic experience. This study was significant as it identified staff members experience of participating in the individual learning plans and found that overall it provided a framework for learning and it also enhanced their awareness of the learning process. However insufficient time, passivity or lack of motivation were identified as obstacles to engagement and this particular programme would benefit from more structure to enhance learning goals and dedicated time. The study also refers to the findings of Manning et al 1987 that found that staff were reluctant to define their own learning objectives and relied on education specialists rather than having ownership of their plans. The study identified that the participants were self-selected and this was a limitation to the study. Therefore, this suggests that those individuals that participated were interested in the process and this was not a representative sample that could be generalised to the overall population of staff. This highlights the importance of random selection of staff from varying projects to give a good overview of the reality of implementation. It is evident that continuing professional development leads to better outcomes for service users and social care professionals will benefit from this. It is important to the financial burden of this will not rest on social care staff. (Alsop and Alsop, 2013 p.7)

### **Mentoring & Learning**

Alsop and Alsop (2013 p.75), suggest that social care workers should have a mentor to assist them in their learning and development. The mentor should assist them in developing a personal vision of a future career and assess needs and establish a personal and professional development plan for the worker. The mentor should also recognise personal assets that will add to professional practice and identify gaps in experience. The mentor can also support the worker in identifying strengths, weaknesses and reflection skills. The mentor role is to challenge practitioner's beliefs and values as this could negatively impact support provided to service users. Mentoring in social care would take place as part of the supervision process

currently, this may prove challenging to provide extra mentoring support for organisations due to lack of resources.

Alsop and Alsop (2013 p. 71) also refer to formal learning which examines the participation in further academic studies. Alsop (2013 p. 72) also look at ways of incorporating formal learning into the workplace through e learning which provide online modules that will upskill staff without having to commit to long term education. Alsop (2013 p. 73) Informal learning is experiential learning that is not pre planned. An unexpected incident may happen and this may be critically evaluated and the social care team apply this learning to future situations. Werquin, (2012) defined formal learning as intentional and often exemplified by schools, universities or formal training provided by organisations. However, he defined informal learning as results from everyday activities from the workplace, home or communities. It can be referred to as experiential learning and may not be fully recognised by individuals until after the event. Informal learning can often have tangible outcomes for service users, for example when making decisions about an intervention previous experience and knowledge can often inform the quality of support provided.

### **Overall Literature Findings**

Alsop, A. and Alsop, A. (2013) provide a comprehensive insight into the process of the CPD and looks at the importance of regulation in the area for the protection and welfare of vulnerable service users. Alsop (2015) looks at CPD as a lifelong learning process that has benefits within the social care sector. It recognises the importance of regulation and the use of CPD as informing future practice. It also gives a varied overview of portfolio preparation from a range of perspectives. Alsop (2015 p. 36), also examines the area of mentoring and support and how it adds value to the CPD process. However, the limitations of Alsop's writing is that it focuses primarily on established CPD mechanisms rather than focusing on the preparation. It is clear from reading all relevant material and research that there are benefits to the social care sector in implementing a CPD system as part of the registration process however the implementation of this process is not explored in great detail. The research is predominantly focused on the healthcare sector and also in the UK. There is limited research in the social care field on CPD and the use of reflective practice. It is apparent that research is required to identify social care workers

perspectives on the implementation of CPD. It is important to explore the use of reflective practice as this will be an integral part of the future CPD process.

## **The Future**

This research project focused on the perspectives of social care workers on reflective practice, as part of the implementation of CPD. As part of the future regulation of social care workers, it is apparent that agencies need to prepare workers for CPD. The role of reflective practice is vitally important for practitioners in the field of social care workers. Green A et al. (2017 p.1) describes self-awareness and reflection as the cornerstone of professional development in social care practice. The research will measure social care workers' understanding of reflective practice as it is a major component of continuous professional development. The research will examine social care workers' understanding and view on CPD, the challenges to engaging in CPD and reflective practice and what supports are required. Social care workers' experience of CPD will be measured through a survey and a smaller group of social care workers took part in an interview that focused on reflective practice.

Social care has evolved and developed as a profession and it is important that practitioners have the opportunity to develop their professional skills. CPD can assist staff in their competence and awareness which assigns responsibility to workers in developing their practice and knowledge so they can best respond to vulnerable people. Participants of this research study are from Crosscare, which is the social care agency for the Catholic Dublin Diocese. Staff were randomly selected by the practice development team without influence from the researcher to participate in an interview. This study is limited in its scope due to the small group of interviewees and respondents. However, the research will offer some insight into social care workers' perspectives on reflective practice as part of the implementation of CPD.



## **Method**

This section will examine the research method used to complete obtain the findings. The rationale behind the method and the recruitment of participants will then be examined. The materials used for carrying out the research will then be examined and the ethical issues that were considered prior to completing the research. The procedure of carrying out the research and limitations will then be discussed.

## **Research Design**

This research paper used a mixed methods approach to the research to try and get a broad view of combined view of attitudes towards continuous professional development in social care work and in particular to focus specifically on reflective practice as this will be a significant component of the CPD process in the future. Mixed methods research has emerged as an approach where researchers explicitly integrate quantitative and qualitative research approaches to best understand a research problem by capitalizing on their complementary strengths and differences (Creswell & Plano Clark, 2011).

Firstly, the questionnaire examines the overall view social care workers have of CPD. The survey examines the understanding, feelings, and identified future challenges of CPD. The survey asked respondents to identify what components of CPD were the most important.

Secondly, semi structured interviews were used to gain an understanding into social care workers' lived experience of reflective practice and explore in more detail what this means to them in their everyday practice. However, the researcher wanted to gain a broader insight into the social care workers understanding of CPD. Plano Clark (2016) highlights that a qualitative research approach can describe culturally situated meanings and experiences related to character strengths and well-being; however, qualitative research alone cannot examine the prevalence or predictive power of such constructs. The researcher wanted to gain deeper insight into the area of reflective practice and selected a qualitative method to gain an understanding of social care workers experience. Open ended questions were used to deeply explore these views. In addition, a case study gave the interviewees the opportunity to develop their thinking around the area. It also gave them opportunity to have a practical example to focus on that was outside their own lived experience. Secondly,

the semi structured interview explored practitioners' views on reflective practice in the workplace and what models they may consider whilst reflecting on an incident. The interview examined the barriers to using reflective practice and what supports practitioners may require to participate in regular reflective practice.

DiCicco-Bloom and Crabtree (2006) refers to the importance of establishing a safe and comfortable environment for sharing the interviewee's personal experiences and attitudes as they actually occurred. It is through the connection of many truths that interview research contributes to our knowledge of the meaning of the human experience.

The researcher designed the survey using ten questions. The researcher used baseline questions to establish some background to the respondents. Basic open questions were used to measure participants' understanding of and, feelings towards CPD, as well as explore what supports were needed and what the challenges to CPD were. The use of surveys for measuring social care workers' views and understanding of CPD. This gave the researcher a broader overview of social care workers' understanding and views on this area. Social care workers were selected from Crosscare, the social care agency of the Dublin Diocese. One hundred and thirty surveys were sent out via email to managers of nine social care services. Five services provided residential care to homeless adults. One service provided supported housing to homeless families and another service provided residential care to young people from twelve to eighteen. Two community services were surveyed, one provided peer led support for adults who have moved on from homeless services. The remaining service was an aftercare service who provided support to young people who had left under eighteen residential care. The survey focused on views, values and challenges of CPD. The survey asked workers to outline their understanding, the benefits and the challenges of continuous professional development and asked workers to identify what they see as CPD. The survey asked social care workers to identify whether social care workers consider reflective practice to be an element of CPD. However, it was more useful to gain a deeper understanding of reflective practice as it was a leading component of the future CPD process. It is also a vital part of professional practice to ensure that workers are evaluating and developing their professional practice. The interviews asked some brief questions on interviewees experience of reflective practice.

Interviewees were then asked to read a case study and answer some questions on how the social care worker used written reflection to analyse her practice. (See appendix 3) The researcher felt that interviewees could potentially apply this to future reflective experiences. Byrne, M. (2001) also echoes this as it was found that quantitative data and findings have been criticized for being reductionistic and removed from human experience. Unlike qualitative methods seek to represent holism and to provide contextual knowledge of the phenomenon being studied. Furthermore, one goal of qualitative research is to increase understanding of a phenomenon as opposed to generalizing data extrapolated from the sample to the population at large. Rather than having a quantitative research outcome of generalized findings, qualitative researchers have an onus of richly describing the findings so they can be transferred to other situations. The qualitative researcher's responsibility includes providing enough description about the context of the sample so that others may adequately judge whether the findings apply to their own situations. This highlights the importance of the use of a case study in the interview format.

## **Participants**

The survey was sent to hundred staff members working in social care projects, they had a mix of experience and qualifications. The survey was emailed to managers of nine projects to redistribute to staff within their projects. The survey was attached on a url linked respondents to survey monkey. A reminder was sent out to respondents three days before the completion date. The researcher used a small sample size for interview of seven staff members working in varying roles of social care. The researcher consulted with the Practice Development Manager who acted as gatekeeper. The researcher outlined the criteria for interviewees. Each participant had to work in social care worker role or project in Crosscare. The gatekeeper selected twelve staff members and emailed them privately to ask would they participate. The researcher was working as Deputy Manager in a Family Hub so it was decided to not select social care workers from that project, so participants did not feel obliged to participate. Five staff agreed to participate from the group of twelve. The researcher then approached a social care manager who agreed to participate in an interview. He also nominated a staff member who worked alongside

him to participate. Seven people participated in the interviews from various different projects.

All participants worked or previously worked in the role of social care worker. Six of the interviewees were qualified social care workers, five of the participants worked as social care practitioners and one was social care leader. The remaining participant was project leader whose primary qualification was MA in Leadership and Management.

## **Materials**

The researcher designed a questionnaire (See appendix 1) to get an overview of the background of social care workers participating in the study. A pilot was carried out with three colleagues to get feedback around the structure of the layout of the questions which led to some minor changes around how questions were asked. Gudmundsdottir and Brock-Utne (2010) highlights the importance of a reflective piloting phase. It is likely to increase the validity of the research results and can in itself be viewed as action research. An outline of the rationale for the survey and an explanation for how the data will be used was presented to participants at the front cover of the survey. This gave the participants an overview of the survey and an opportunity to consent for participation in the survey.

The interview was piloted with one colleague prior to completion with the participants. Participants were sent an information sheet (See appendix 2) before agreeing to participate. Five participants gave consent to the gate keeper who passed on their details to the researcher and a time was then scheduled for interview. The remaining two participants gave their consent to the researcher to take part. Six of the participants completed their interview in the projects which they worked in and one participant agreed to interview in the researcher's project due to location being close to home. (See appendix 4) A Dictaphone was used to record every interview and written consent was obtained prior to each interview.

## **Procedure**

Ethical approval was sought and granted by Athlone Institute of Technology prior to commencing research. Permission was sought from Crosscare Human Resource

Senior Manager to allow research to be carried out. A survey link was sent to nine Crosscare Projects and relief staff. Interviewees were invited to interview by the both the gate keeper and researcher. A non-probability sampling method was used to select the representative sample. Stack et al (1982) suggest that non-probability samples are useful for an in-depth, insightful look at issues and often use qualitative methods such as open-ended interviews and observations. As there some challenges in recruiting interviewees, convenience sampling was used to recruit two of the interviewees. Kitson, G. C., et al (1982) suggest that convenience, haphazard or fortuitous sampling are often selected from organisations that are handy to the researcher or they may be volunteers. They also be often known to the researcher. Interviewees were contacted and recruited through Practice Development and given information sheets and consent forms prior to agreeing to participate. (See appendix 2) Seven interviews were arranged by the researcher agreeing a time and location that suited the participants. All interviews were then carried out in the project in which the interviewees were based with the exception of one interviewee who carried out interview in the researcher project due to location being close to interviewees home. All interviewees were reminded of their right to withdraw consent verbally prior to starting the interview. Each interviewee was given the opportunity to withdraw consent at any time. Each interview took from ten to fifteen minutes to complete.

Interviews were conducted over three weeks and each interview was transcribed which gave the researcher the opportunity to analyse the findings. The transcripts of the interviews gave the researcher the opportunity to analyse the data in detail.

The researcher felt that the use of questionnaire with brief open-ended questions gave an insight into the overall view of social care workers understanding of CPD, the benefits and the challenges. It was totally anonymous and confidential as it was completed through survey monkey, so respondents could be honest with their feedback. The questionnaire response rate was higher than predicted which gave the researcher a deeper insight into the views of forty-three staff members. It was apparent that there were some themes reoccurring which made the findings more valid.

WHO (2018) states that research ethics protects the dignity, rights and welfare of research participants by providing governance on standards of conduct.

Ethical approval was obtained by Athlone Institute of Technology for the research to be carried out. The ethics committee recommended some feedback around the interview process which was implemented. Interviewees were given an information letter and consent form before the interview. Interviewees were advised that they would be recorded and this would be transcribed but no identifying information would be used. It was agreed that the specific project would not be named but the type of project and role would be identified. Surveys and records of semi structured interviews will be kept in locked folder on the researcher's laptop and then destroyed two months after the research is submitted. The researcher kept notes printed surveys or notes in a locked cabinet and will be destroyed in July 2018. All interviewees were informed that they could view their transcripts of their interviews at any stage prior to May 2018 and will also be provided with copy of the research study.

The researcher identified some limitations to the research. The researcher has worked for eleven years in the organisation which meant that there was a previous working relationship with five of the interviewees which could have introduced a bias. The use of a gatekeeper was useful for recruitment being independent and participants did not feel obliged to participate. However, the response rate was low which resulted in the researcher approaching two interviewees which could have introduced a bias in participation in those two particular interviews. The researcher also had a limited amount of time to complete the research which impacted on the time allocated to interviews and resulted in less people being interviewed. The researcher also had full time job in busy project which also impacted the time allocated to the research. The response rate to the questionnaires was higher than predicted, however the relationship with the researcher could have created a bias in terms of participation. However, the surveys were completed anonymously which ensured that staff could respond honestly. The lack of knowledge around CPD may have been a limitation to respondents' feedback in the open-ended questions in the survey. However, this may highlight the supports and knowledge that may be required with preparing for registration.

The methodology used in this research paper was outlined in terms of the design of the research and the recruitment of participants. The materials used in carrying out the research and the procedure used. The ethical implications considered in carrying out the research are explored and acknowledgment in given to the limitations of the study.

## **Results**

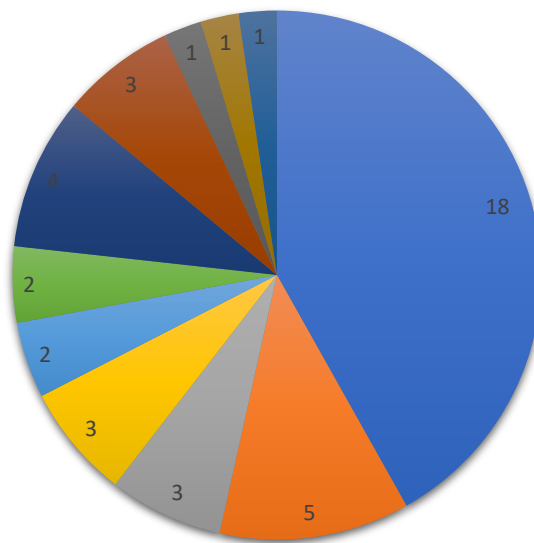
The aim of this research is to examine perspectives of social care workers of reflective practice as part of the implementation of CPD. The research used mixed methods approach to measure social care workers' understanding and experience of both CPD and reflective practice. The survey measures social care workers' understanding of CPD and asks respondents to give an overview of what areas they considered to be most important. The interviews looked predominantly at reflective practice in more detail. The results are divided into three areas, perspective on CPD and reflective practice, challenges to CPD and reflective practice and supports needed for implementation.

Under each heading there contains key findings and data which will be explored. Firstly, the perspectives of social care workers of CPD and reflective practice explores the views of staff members including the resistance to CPD that they identified. Secondly, challenges to CPD and reflective practice and the impact on service user will be explored. Thirdly and finally, the supports needed to implement reflective practice and CPD will be explored.

The graphs below outline the roles, age group and qualifications of those who participated in the survey. Forty-three respondents responded from one hundred and thirty distributed surveys which is a thirty-three per cent response rate.

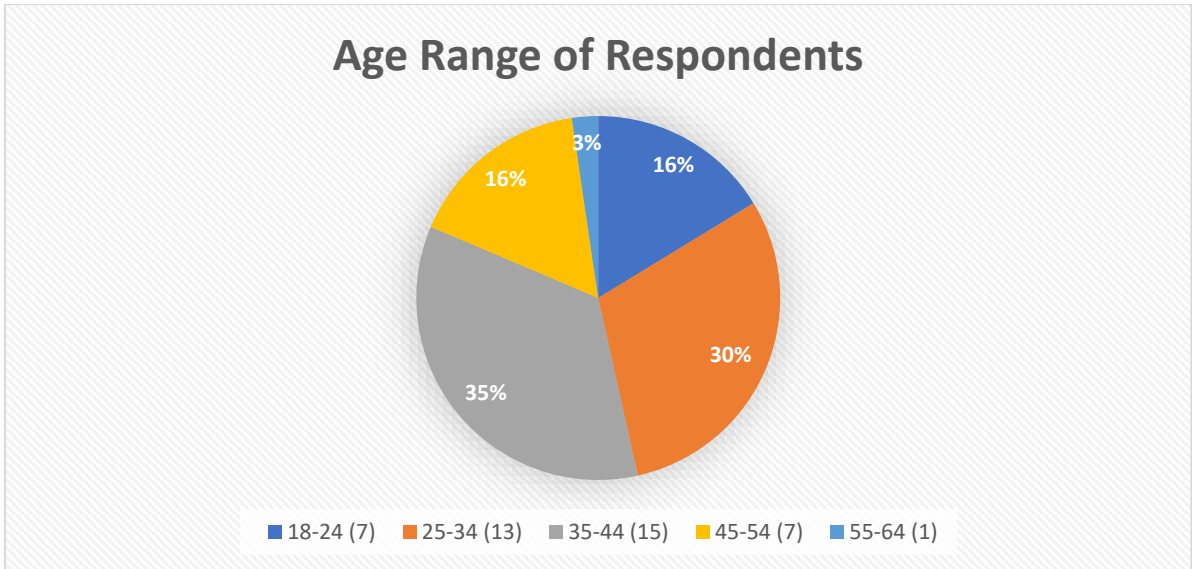


## Role of Respondents

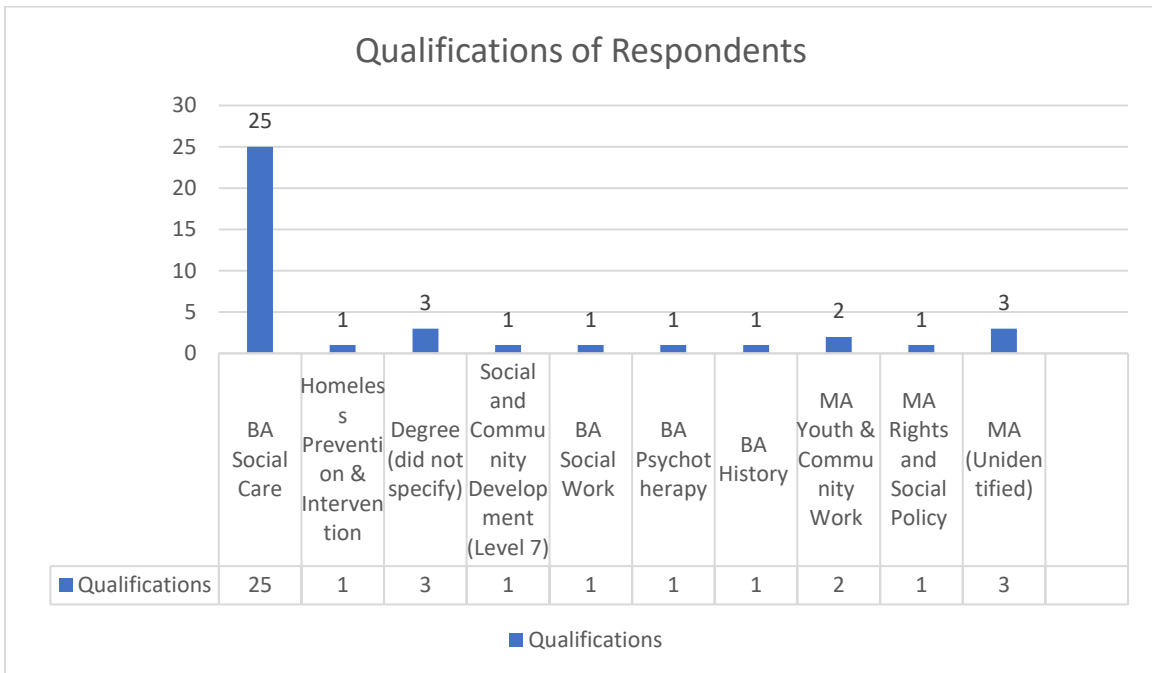


- |                        |                             |                                |
|------------------------|-----------------------------|--------------------------------|
| ■ Social Care Worker   | ■ Relief Social Care Worker | ■ Night Project Worker         |
| ■ Housing Case Worker  | ■ Social Care Team Leader   | ■ Deputy Project Leader        |
| ■ Project Leader       | ■ Care Attendant            | ■ Family Aftercare Link Worker |
| ■ Practice Development | ■ Project Worker            |                                |

The above results indicate that thirty-one respondents to the survey worked in roles that will require registration as a social care worker. Eighteen individuals work in social care worker roles, five respondents are employed as relief social care worker roles, two individuals are social care leaders, two deputy leaders and four project leaders. Three respondents work as housing case workers where the criteria for the role differs due to the focus of the role being specific to housing. Six respondents currently work as night project worker and care attendant. Night project worker and care attendant do not require a qualification in Social Care. Night project worker require a Level six qualification in related social science or the addiction field. Care attendant does not require third level qualification, however many staff who currently work in these roles have relevant qualifications.



The graph indicates a breakdown of the age range of respondents. It is evident that there is a diverse age range of respondents. However, the majority of respondents fall in the twenty-five to forty-four age categories.



The graph above indicates a mixed range of qualifications of those who participated in the survey. The majority of respondents are qualified social care workers with level eight degrees. Twenty-five respondents are qualified social care workers, three respondents did not specify what area they completed their BA.

In addition, the researcher interviewed seven interviewees who worked in social care services within the Crosscare organisation. Four interviewees worked in as frontline

residential homeless service provision. One interviewee worked in frontline homeless aftercare service and another interviewee worked as social care leader in homeless residential service. The remaining interviewee works as project leader in residential homeless service.

### Perspectives on CPD and Reflective Practice.

Overall, the feeling of engaging in CPD was optimistic and respondents responded positively when asked how they felt about CPD. Twelve respondents specified that they felt it would benefit their current and future practice. Two respondents spoke about CPD ensuring that they did not become complacent in their roles.

Respondents were asked to rank in order of importance the main components of CPD from one to ten. Below the board illustrates respondents' feedback in order of how they ranked. Reflective practice ranked the highest, followed by supervision. Interagency work scored the lowest. It is notable that respondents rated training at number four in order of importance. However, respondents predominantly referred to training when asked about their understanding of CPD.

### Main Components of CPD.

Component	1	2	3	4	5	6	7	8	9	10	Total	Score
Reflective Practice	25.00 % 10	17.50 % 7	7.50%  3	12.50 % 5	5.00%  2	10.00 % 4	5.00%  2	2.50%  1	2.50%  1	12.50 % 5	40	6.80
Supervision	10.00 % 4	17.50 % 7	17.50 % 7	5.00%  2	15.00 % 6	15.00 % 6	5.00%  2	10.00 % 4	2.50%  1	2.50%  1	40	6.55
One to one client support	17.95 % 7	12.82 % 5	12.82 % 5	2.56%  1	2.56%  1	7.69%  3	20.51 % 8	10.26 % 4	7.69%  3	5.13%  2	39	6.03
Organisational Training	16.22 % 6	8.11%  3	8.11%  3	10.81 % 4	13.51 % 5	5.41%  2	10.81 % 4	8.11%  3	8.11%  3	10.81 % 4	37	5.78

Component	1	2	3	4	5	6	7	8	9	10	Total	Score
Making decisions	7.32 % 3	0.00% 0	19.51 % 8	14.63 % 6	9.76% 4	9.76% 4	9.76% 4	12.20 % 5	7.32% 3	9.76% 4	41	5.39
Group work	2.44 % 1	12.20 % 5	4.88% 2	14.63 % 6	9.76% 4	19.51 % 8	7.32% 3	4.88% 2	12.20 % 5	12.20 % 5	41	5.12
Team meetings	5.13 % 2	5.13% 2	2.56% 1	17.95 % 7	12.82 % 5	10.26 % 4	10.26 % 4	12.82 % 5	17.95 % 7	5.13% 2	39	4.92
Formal Qualifications	6.98 % 3	4.65% 2	9.30% 4	4.65% 2	13.95 % 6	4.65% 2	13.95 % 6	16.28 % 7	11.63 % 5	13.95 % 6	43	4.67
Theory	2.38 % 1	9.52% 4	4.76% 2	7.14% 3	16.67 % 7	7.14% 3	11.90 % 5	11.90 % 5	9.52% 4	19.05 % 8	42	4.55
Interagency work	0.00 % 0	7.69% 3	7.69% 3	7.69% 3	5.13% 2	15.38 % 6	10.26 % 4	12.82 % 5	23.08 % 9	10.26 % 4	39	4.28

Overall, respondents and interviewees welcomed the opportunity to participate in CPD and felt that this was a positive step for them as professionals and also for the social care sector. The responses to how respondents felt about CPD was predominantly positive. The majority of respondents referred to the benefits for the sector and for service users. This was echoed by one respondent who welcomed the opportunity to develop skills and practices. Another respondent echoed this sentiment, by acknowledging that they were happy to participate in CPD as it will benefit their team and the people they work with.

Six of the respondents to the survey referred to the development of new skills that will enhance their practice. One respondent noted that they enjoyed learning and felt that upskilling practitioners and attending training was important. However, they did express concerns about the level of training required to meet the desired credits and the impact this may have on time with service users and rosters. One respondent raised the issue that they were unsure of how they felt as they had been recruited as a social care worker despite not having completed complete their degree.

However, resistance of staff to participate was highlighted in eight surveys as being a challenge to the implementation of CPD. Some participants identified that some staff are happy working in their current roles and are unwilling to participate in CPD as they may feel their ability is being questioned. This was echoed in another survey who identified people being out of their comfort zone may be a challenge.

Overall interviewees also responded positively to the use of reflective practice as part of their own professional practice. Interviewees felt that this was a positive tool that enhanced their practice and made them question how they support their residents. One interviewee noted that he utilised team meetings to learn from other colleagues what interventions they complete with their key residents. He then tries to implement any relevant new ideas into his future practice.

An interviewee focused on reflective practice as part of her every day practice and reflected on how she would go through most interactions she had that day. She analyses her communication skills and keeps a written record of what she felt she could do differently.

It is apparent that interviewees had differing perspectives on reflective practice and how it applies to their professional development. "You look at your own actions what you might have done and at the outcome, the best outcome could have been and what way it did happen in the end and I think after you tell other people about the event. I think when you get other people's opinion you realise what could have done and couldn't have"

Another interviewee highlighted the importance of engaging honestly in reflective practice as this can enhance the process. This was also echoed by another interviewee who felt that within the social care sector, practitioners can be afraid to admit weaknesses. The interviewee suggests that opening up honest conversation

about admitting weaknesses and that as a sector we do not admit that we have affected by events. An interviewee highlighted that honesty may be a challenge in engaging in reflective practice. “I suppose ego, god was I really wrong in that situation and maybe yeah, you know what, I could have handled that a bit better.” This was also highlighted by another interviewee. “It’s only as good or as honest as the individual allows themselves to be, I suppose that the problem with reflective practice.”

It is apparent that often it can be challenging for professionals to engage in reflective practice when it might question our practices. However, the importance of support from colleagues and team was identified by interviewee who spoke about using his team as a support before he approaches a difficult situation. “I suppose I soundcheck myself a lot with my closest colleagues and I would run things past them before I would enter into something maybe or I’m going to have a tricky conversation or if there is something difficult coming up.” The interviewer used his team to help him reflect on his future practice and also to try and look at how to best approach the conversation. It is noted by an interviewer that reflective practice can be a mindset and some practitioners may be more reflective than others. “I think it’s a mindset actually, I think you’re either a reflective type of person or you’re not and if you’re not I think it’s a skill you can learn.” It is apparent from the findings that the overall view of social care workers towards reflective practice is predominantly positive, however the interviewees do feel there may be resistance to the overall implementation.

### **Financial Support.**

Financial support was another finding that was identified through surveys. Five participants made reference to financial support from their organisation in terms of time in lieu and funding for training. “Encouragement in exploring the range and depth of courses available through CPD. Possibly financial support also.” Another respondent identified financial difficulties as being a challenge to CPD.

### **Challenges of finding time for CPD and Reflective Practice.**

Time constraints was a consistent theme and the main identified challenge to CPD and engagement in reflective practice. Time featured as a challenge by fifteen varying participants in their surveys. This was a key finding from the research. “Managing time when working full time can be challenging to dedicate specific time

for this.” Time was identified as an issue for those working in what they identify as busy or chaotic services. Respondents highlighted their concerns around the impact of the time that needs to be given to CPD will impact on the time given to the residents who they support. “Busyness of services is a constraint on allowing individuals develop.” This was also echoed by another participant who noted that they felt that time and staff restrictions was a possible challenge.

Another respondent identified that other external pressures such as learning and personal commitments may also be impacted as time will need to be allocated to CPD. “I think it's a good idea and very relevant but may prove difficult to get all your credits complete whilst working fulltime and being in college part time without even taking a social or family life into consideration.”

When interviewees were asked would they use written reflections, one interviewee noted time as a challenge. “I don't know if I'm going to take the time out, in work I don't know if I'd have the time to do it and outside of work I'm not sure I'd want to be delving into it that much outside of work hours. I could see the benefits to writing it out but me personally I don't think I'd have the time. I'm better off just thinking about it and knowing about it myself.” This was also echoed by another interviewer who spoke about time constraints being a challenge in her current work.

The challenge of working in busy chaotic services was also highlighted by another interviewer who spoke about trying to use reflective practice with her team. “It's just unfortunately sometimes if its chaotic right up until the time of handover in the evening you don't really have time to do that reflective piece with the team, but it is great when you do.” The interviewee noted the benefit to her own professional practice and the service.

Time featured as a primary concern to social care workers trying to engage in both CPD and reflective practice. Their concerns reflected the challenge of trying to allocate time to focus on client work, service delivery and their own development. The predominant finding was the issue of working in busy services that does not allow social care workers time to practice reflection whilst on shift.

## **Impact on Service users**

It is apparent that from the findings that respondents considered the impact of CPD on service users to be both positive and negative. Promoting best practice of care and developing services was highlighted as being of huge benefit to service users and this was identified by six respondents. Respondents spoke about improving the quality of service delivery through developing their skills and knowledge.

Respondents were asked about what their understanding of CPD was, "A practice involving self-reflection and critical analysis in order to improve and develop skills required to ensure best practice in care." This was also echoed by another respondent who spoke about providing high quality care and support to service users. "To continue to learn throughout your work and through learning provide a professional and committed service for the client in any area you work to do this through training and learning."

Two respondents noted that this may impact the residents of the service. If time is given to CPD, it would take from the care of the service users. "I enjoy learning and think we should strive to go on training and upskill ourselves where possible. However, I would be concerned about the amount of training needed to reach the desired credits and how this will impact a team with regards to costing, rosters, hours, residents within our services when a whole staff team must be meeting such targets." Another respondent suggested that pressure to achieve credits may affect service delivery

It is apparent from the findings of the interviews that the findings are predominantly positive when, interviewees spoke about the impact of engaging in reflective practice. An interviewee refers to this in his interview, he speaks about how reflective practice can have a positive impact. "Being more mindful of the residents and where they are coming from. Getting into a routine of yourself, every situation, if you do reflect more on it. Going through your Therapeutic Crisis Intervention. Being mindful of the room, the resident and the environment and what he is going through."

This was reflected by another interviewer who spoke about looking at where the service user is coming from and how she approaches every situation. She spoke about focusing on where service users are coming from when responding to



challenging behaviour. She also spoke about reflecting on her body language and approach.

This was highlighted by interviewees when speaking about challenges in engaging in reflective practice. An interviewee spoke about social care workers ability to be able to relate to service users. "Sometimes, we get very caught up in what we need to do and the rules and regulations. We become very inflexible and I think if we just for a moment think about what the other person is going through we may see it very differently."

Upon reflecting on the case study, one interviewee felt that when writing critical incidents, they can often read quite proper and may not reflect truthfully what happened. He felt that often social care workers will omit their role in challenging behaviour. This highlights the importance of open honest reflective practice within that will have positive impact on service users.

### **Organisational Culture**

Organisational culture is a key theme that emerged from the findings. Respondents were asked what supports staff need to participate in CPD. A key theme identified in the supports for staff is the support from management in encouraging and promoting CPD as part of the role of social care workers. Ten respondents identified management as a key support in encouraging social care workers and having a learning culture to support CPD. This was echoed in other respondent's feedback around the culture of the service. Furthermore, this was identified when respondents were asked about challenges to CPD. Some respondents identified that the organisation is supportive and on board in promoting professional development and this was identified by one participant as being from the top down. Some respondents identified that training will only be offered to certain roles and that this may impact their overall learning. Support from management and team members was identified as a challenge by one respondent, as they felt that is not always there. The respondents reflected mixed views of organisational culture both positive and negative. Some people reflected that their experience of CPD to date was positive and they were supported in their development. However, some respondents felt that this could improve. This theme also emerged in interviewees responses in looking at the use of reflective practice. Some interviewees reflected that organisationally we

needed to promote reflective practice. “The organisation needs to have a culture that supports the notion of reflective practice, I think the time, the space to do it.” This was also echoed by another interviewee. “It’s probably a cultural piece, wherever you work, I think that if that’s encouraged and if there is appropriate time and its considered a quality piece of work as opposed to an auxiliary thing that might happen for you.”

A respondent identified that if the staff team and management promote a inclusive culture and non-judgemental environment where everyone is listened to this would enhance reflective practice. Supervision is referred to as a supportive mechanism that will assist staff in participating in CPD, which is already in place for respondents. This is echoed by nine of the respondents refer to supervision as a key support. One respondent stated that they felt it would be beneficial to have a designated spot for CPD within supervision.

It is also noted by an interviewee that some practices that are currently in place support the use of reflective practice. “There are practices built into our work I suppose that encourage reflective practice and that is supervision, our significant event reviews, and our weekly meetings, we have got critical events in the past week and risk assessments. So, they are purposeful prompts for us to reflect upon our practice.” The interviewer speaks about how team meetings will reflect on incidents within the service and this can help review how this is being handled. Significant event reviews also look at significant events and track any trends in behaviour and staff approach to incidents to look at ways of improving practice. These current supports enhance the opportunity to engage in reflective practice.

### **The perception of CPD as being training.**

A high number of respondents identified the opportunity to take part in training as being a key support in participation in CPD, some staff felt that training was a key factor in the implementation of the CPD process. Opportunities to participate in identified training was identified and support in doing so within work environments and organisation was identified by respondents.

Another respondent identified that completing training within their work environment would support them in participation. Respondents highlighted that they felt that

access to training so they can upskill and this will assist them with meeting the requirements for CPD.

However, the knowledge around what CPD is and the impact this has on the organisation was also apparent in preparing for CPD engagement. Two respondents highlighted awareness around the benefits of CPD as being part of the support they require. Another respondent echoed this however also stated that they were unsure of what CPD means and required guidance.

It is apparent that the area of training emerged as a key part of what staff understood to be the key part of the CPD implementation process. This was reflected in numerous areas of the survey. Eighteen respondents made reference to attending training to upskill in changing trends within the sector as their understanding of CPD. This highlights a need for social care workers to gather some extra knowledge around the CPD process.

It was apparent from the interviews that only one participant knew a theory of reflection. The six other respondents were not aware of any theories. It was highlighted by an interviewer that education and training on reflective practice may enhance participation.

### **Writing Reflections.**

As part of the interview the interviewer explored how staff felt about writing reflections, there was a mixed response to this. An interviewee spoke about how she felt that staff may find having to engage in reflective writing to be a challenge and may not wish to engage. "Unless you were to bring it in as some form of supervision, you know a learning goal, but I really, I'm not sure how it would go down. But then I suppose if it's something that's coming in and its done before, like the students are so used to doing it. If it was something that was general practice, and you're coming straight out of college, it wouldn't be any different to you. You will have done so many of them already."

Another interviewee spoke about the use of written reports in social care to date have been predominantly used in a formal way and that changing the style of this may need some practice. Furthermore, the interviewee stated that social care workers are currently trained not to put in opinions and reflective writing is a very

different style to formal report writing. Another interviewee highlighted that if it was part of the paperwork and mandatory this may help prompt social care workers to engage.

Another interviewer highlighted that she felt there is a high level of paperwork within social care and that every practitioner may have their own way of reflecting on their practice and their own learning style. She stated that some people get more from writing than others and felt it would be unfair to ask all social care workers to engage in written reflections as it may not work for everybody. This was echoed by another interviewer who felt that writing in social care is often associated with accountability which can make it difficult to engage in.

However, some interviewees expressed that they felt that there would be benefits to writing reflections as they can take more time which makes the person think about the event. Another interviewer stated that writing reflections can often ensure that the learning does not get lost and can also ensure that the person commits to reflective process.

The results explored the views and perspectives of social care workers towards both reflective practice and CPD. The interviewees gave an in-depth insight to their views of each part of the reflective process which raised very interesting findings. The challenges to implementation highlighted areas such as time and the impact on service users and organisational culture. The perception of CPD as being training highlights and engagement in written reflections highlights an area of support. These findings will be explored further in the discussion section.

## **Discussion**

The results from the research are discussed from each of the emerging themes. Each theme will also be discussed in relation to relevant research. Social care workers' perspectives on CPD, time constraints and impact on service users are discussed. The research then examines organisational culture, training, writing reports, and financial support. The recommendations for future practice are then highlighted and suggestions for future research are made.

### **Perspectives on CPD**

The research has found that overall respondents had a positive view of participation in CPD. Respondents felt that it would benefit them as professionals and give them the opportunity to upskill and develop. "I feel that it is an essential part of my role as a social care worker to engage and learn as I continue in my role so that I can be at my best and offer my best self to the people I work with." This was echoed in research carried out to measure nurses' job satisfaction and perspectives on CPD. It was noted that nurses' perception of CPD was very good and they understood its importance of CPD and how it improved their competence as professionals. (Silva Pinheiro et al., 2014).

Social Care Ireland (2015) outlines the importance of CPD for social care workers and outlines the benefits of engagement. CPD gives social care workers the opportunity to maintain, improve and broaden their skills, knowledge base and expertise. Furthermore, CPD allows social care workers enhance the qualities and competencies required for professional practice. The importance of CPD for quality of care was highlighted in the research. One respondent noted the importance of CPD for professional and personal development and highlighted the benefit for service users, as social care workers can support further by acquiring extra knowledge and insight. It was noted by another respondent, that maintaining a high level of competence was part of the social care workers' duty of care. A respondent highlighted that the CPD process encourages social care workers to gain more skills and knowledge and it ensures that best practice is the main focus of services.

Social Care Ireland (2015) also highlights the importance of social care workers committing to the CPD process as it keeps their knowledge and skills updated to the highest possible standards to ensure they work safely legally and in the best

interests of service users. A respondent noted that they are happy to participate in continuous professional development. They felt that it would benefit their team and the people they work with. However, a respondent highlighted the difficulty some staff may have in being challenged by participating in CPD. Furthermore, they felt that they could struggle with learning new skills as they have been in a particular role for long time.

Interviewees had an overall positive view of utilising reflective practice within the workplace. It was evident that social care workers felt positive about engaging in the process and could see the benefit of it. The respondents could see the benefit of engagement both on their own professional practice and on the service users that they support. The importance of utilising reflective practice and developing as a practitioner is highlighted in Cole's (2000) research.

It has been argued that there is an intrinsic link between reflective practice, learning and development, changes in behaviour, and consequently improvements in quality of service" Cole (2000 p.34).

One interviewee noted that she was naturally a very reflective person and reflected on most interactions she had throughout the day to see what worked well and what could be done differently. This was also noted by another interviewee who stated that he was also naturally quite reflective and often asked his colleagues to help him reflect on his approach. Hatlevik (2011) argued that developing nursing students' reflective skills is widely viewed as a key component in helping them link theory and practice. Furthermore, reflective skills are primarily viewed as either a generic skill or a skill that is associated with specific professional content.

Interviewees also noted after reading the case study that it gave Mary the opportunity to reflect on theory that may assist her in her approach. An interviewee spoke about using her Therapeutic Crisis Intervention skills to apply to reflect on what she could have done. Furthermore, it is positive to look at evidence-based practice to enhance her practice. Another interviewee highlighted that looking at TCI skills can be useful rather than focusing on the routine of certain practices that we do daily. Comer, (2016 p.4) argues as practice becomes more repetitive and routine and our knowledge of varying practices becomes tacit and spontaneous. The

practitioner may miss opportunities to think about what he is doing. This suggests that routines may impact the quality of care for service users.

### **Financial Support**

Financial support was another key finding that was identified as being a support in implementation of CPD. Five participants made reference to financial support from their organisation in terms of time in lieu and funding for training. One respondent noted “Encouragement in exploring the range and depth of courses available through CPD. Possibly financial support also.” It is apparent from the researcher experience from working in the organisation that there are supports in place to assist staff members in attending training and also returning to formal education. The organisation grants five study days per study per year and also provides internal organisational training on an internal booking system. Staff have been assisted with part funding education where the course is relevant to the staff members’ role.

### **The challenge of finding time for CPD and Reflective Practice.**

It is apparent from the results that time was a strong theme that emerged from both the surveys and interviews. Respondents noted that having the time allocated to CPD engagement will be an ongoing challenge. Furthermore, this was apparent from respondents who worked in chaotic busy services.

The same point was made in relation to reflective practice. One interviewee noted that she strived to be reflective but on shift that can be a challenge due to the time constraints. “It’s just unfortunately sometimes if it is chaotic right up until the time of handover in the evening you don’t really have time to do that reflective piece with the team, but it’s great when you do.” Thompson and Pascal, (2012) also noted this as a response from practitioners that they do not have time due to being busy and under pressure. However, they highlight the busier we are as professionals, the more reflective we need to be. This highlights the importance of utilising reflective practice during busy times to ensure that we are reflecting on our practice and service delivery.

It was apparent from the research that respondents felt that CPD could have an impact on their own personal time. Schostak (2010) noted that there are barriers in participation in CPD which include work-life balance. A respondent also highlighted

the availability of time as a barrier to participation in CPD. “I think it's a good idea and very relevant but may prove difficult to get all your credits complete whilst working fulltime and being in college part time without even taking a social or family life into consideration.”

It is apparent that time featured as a strong finding that could pose a challenge to the implementation of CPD in the future. However, practitioners must strive to develop and learn so we can deliver and evolve services and ensure it is not at the detriment of current service provision.

### **Impact on Service Users**

It is apparent from the research that respondents felt that overall, CPD enhanced the care and support provided to service users through skill enhancement. This was also echoed by interviewees, who felt that overall reflection enhanced professional practice. In discussion about the case study illustrating the use of reflective writing every interviewee reflected on the enhanced relationship that Mary had with the resident John. One interviewee noted that Mary relationship with the service user improves after both parties discuss the incident and reflect on it. He also noted that being honest in the process enhances the outcome for both Mary and the service user John. This point was echoed by another interviewee who highlighted that Mary was very honest and this is a very hard thing to do in written reports. She also notes that Mary identifies what her approach and her skills that she used and those that may have benefitted her. Social Care Ireland (2015) also echoes this and they state that reflective practice is a process by which you stop and think about your practice, consciously analyse your decision making and draw on theory and relate it to what you do in practice (Chartered Society of Physiotherapy, 2013)

It was noted by interviewees that the use or lack of use of Marys' TCI skills is identified by Mary in her written reflection. Interviewees focussed on the benefit of identifying theoretical skills that could be used in future practice helped Mary to reflect on what she could have done differently. The routine of service delivery is also noted by interviewee and they identified how critical reflective practice can be in critiquing our practice rather than getting stuck in routine ways of service delivery that can often have a negative impact on service users. “I think, sometimes we get very caught up in what we need to do and the rules and the regulations and we can



become very inflexible. I think if we just for a moment think about what the other person is going through, we may see it very differently.” Thompson and Pascal (2012) also highlight that routinised forms of practice that do not incorporate an element of reflection not only bypass our mental capabilities, but also bypass our value base. Furthermore, if we are reacting to situations in a non-reflective way, there is a strong danger that our uncritical, ill-thought-through actions may run counter to our values.

It is apparent that respondents felt that the implementation of CPD would have an overall positive impact on enhancing and delivering social care services. Respondents noted that it would improve service delivery and best practice in care. This is also apparent in the nursing sector where nurses use revalidation to help them demonstrate that they practice thoughtfully. It encourages a culture of enquiry, reflection and learning which creates opportunities for nurses to become more self-aware and responsive to those they work alongside, if attended to as part of professional practice. (Finch, 2014 p.22)

Social care workers strive to support, protect, guide and advocate on behalf of clients. Social care work is based on interpersonal relationships which require empathy, strong communication skills, self-awareness and an ability to use critical reflection. (Share and Lalor, 2009 p.5) This was highlighted in an interviewee with social care worker on the use of reflective practice. An interviewee reflected on the use of honesty in reflective practice. She highlighted that it can be a huge challenge to admit weakness and events that have affected them. She felt that if this practice is fully embraced, professional practice can evolve and develop even further. This highlights the importance of the use of honest reflective writing in looking at how practitioners enhance and develop their own professional practice.

### **Organisational Culture**

Organisational culture is a key theme that was identified in terms of encouragement, and promotion of a learning culture. Some respondents felt that the promotion of engagement with CPD was present in their place of work. However, some respondents felt that this could improve in their project and this depended on the culture within the management and staff team. One respondent noted that they felt they needed support from management to discuss issues. Training and been given

the opportunity to explore their opinion with a team who listen to each other and are non-judgemental. This was also identified by another respondent who noted that they felt team and management would support and encourage participation in CPD. This highlights the importance of having an open minded positive learning culture which allows for development and learning. Social Care Ireland (2015) believe that meaningful engagement in CPD and effective integration of learning into practice requires a partnership approach between employers, managers and staff. Support from management and team featured as a dominant finding from the surveys.

Nauta et al. (2009) found that an organizational culture that strongly supports workers' further development is positively associated with potential and development of the worker, as the worker is receptive towards employability within their current organisation and overall future career success (Collin, Van der Heijden and Lewis, 2012). This research highlights the importance of positive organisational culture in enhancing the participation in the CPD process. Respondents highlighted the importance of providing support for staff to encourage them to participate in both reflective practice and CPD. It was a key theme that was reflected by respondents as being an integral part of the engagement in CPD. This is identified by Alsop and Alsop, (2013 p.75) who suggest that social care workers should have a mentor to assist them in their learning and development. The mentor should assist them in developing a personal vision of a future career and assess needs and establish a personal and professional development plan for the worker.

Another theme which emerged strongly from the interview was, for the promotion of reflective practice. One respondent noted that CPD needed to be part of the supervision process. He also highlighted that it is important to do this in a non-confrontational safe way. This was also noted by another interviewee who reflected on the importance of getting supervisors' perspective on incidents or interactions. Interviewees noted that they engaged well in reflective practice as part of the supervision process and found this to be supportive. One interviewee noted that she found it helpful to get another person's perspective, but currently does this with her supervisor. Each interviewee highlighted that they got insight from colleagues which they found to be beneficial. This emerged from every interview and demonstrated the importance of insight from colleagues. Interviewees noted that they did this to get advice on how to approach situations or on how their colleagues felt they handled

situations. Interviewees stated that they used this to analyse and critique their practice. Thompson and Pascal (2012) also argued the onus on leaders and managers in developing and sustaining working cultures that are supportive of critically reflective practice. Thompson and Pascal, (2012) also highlights the value of drawing on our critical faculties to make sure practice does not become mechanical. Furthermore, we can then miss the opportunity to use our understanding and power of analysis. The research highlights how this is currently analysed and also how this is used to improve future practice which will benefit the service users.

### **Perception of CPD as being training**

It is noted by feedback from the surveys that respondents felt that reflective practice was the highest priority and organisational training ranked fourth in order of the importance. Respondents were asked to scale from one to ten, what they felt were the main components of CPD. When asked about their understanding of CPD and eighteen respondents referred to training, developing and learning new skills.

One respondent noted that, "My understanding is that CPD will require us as Social Care workers to complete a certain level of training throughout a year. this is to ensure we are up to date with any relevant advancements in the field and also assist in our development and hopefully progression in employment."

It is apparent from the findings that respondents placed high value on organisational training as part of the CPD process. Neary, (2016) found that terminology used by participants was often interchangeable as the terms CPD and training often used together to describe the CPD process. Furthermore, some of the training activities were described as upskilling and enabling participants to deliver their role. Kennedy (2014) highlights that training is an effective way of introducing new knowledge. However, participants often have a passive role in training.

Neary's (2016) finding is reflected in the findings as respondents focused on time off the floor to attend training funding to provide extra staff cover. This result emerged from twenty surveys which highlights a possible dilemma between service delivery and staff development. Price and Reichert, (2017, p.17) found that training and education also emerged as a theme for mid to late career nurses, similar to students and early career nurses. Furthermore, it was found that mid- to late-career nurses

identified nursing as a profession which required lifelong learning, but they believed that continuing education and training were not a priority from a management perspective.

It is apparent from the findings that training is promoted within the organisation however, allocating time to complete relevant training presents a bigger challenge. It is apparent that training is viewed as an important entity, and it is apparent that staff currently have access to training and development within the organisation.

Respondents highlighted current engagement within training and development as part of their current practice.

### **Writing Reflections**

It was apparent from the findings that writing reflections featured as a both a positive and negative part of the process in both CPD and reflective practice. Interviewees noted that they felt that writing reflections may be a challenge for staff as they have been writing reports in a formal way for some time. Social care workers' may need some support with using a different style for reflective writing. It was apparent that social care workers' viewed paperwork to be necessary but also carried a weight of responsibility that ensured that it must be completed properly. "Sometimes when you're writing things down you feel very accountable for what you're writing down even if it is for something like that."

This same interviewee highlighted the onus of responsibility that can often come with paperwork that she felt may take away from the benefits of engaging in the process. This was also highlighted by another interviewee.

"If it was part of your practice all the time you'd get used to it but I think initially it would take a bit of getting used to because you can feel like things are very official when you write something down sometimes."

This highlights that writing reflections will present future challenges to social care workers. It is apparent that writing can often be equated with paperwork and other alternative methods may need to be explored. This is also highlighted by Cole (2000 p.34) who refers to systematising one's reflection, there is clearly great value in maintaining a practice journal. There are a number of ways of recording reflection (or

material that might provide the basis for future reflection), and each reflecting agent is likely to develop a system that best suits their style and specific learning needs.

“Usually when you’re writing paperwork in work things have to be worded a particular way you don’t you’re actually trained not to put in opinions, the things you need in a reflective piece, you’re doing the opposite most of the time. So, it would take a bit of getting used to.”

Another interviewer highlighted that she felt there is a high level of paperwork within social care and that every practitioner may have their own way of reflecting on their practice. This reflects that current report writing training focuses on the writing of incident reports and handovers, which are written factually. It is apparent that social care workers may require training on reflective writing.

However, another interviewee felt that writing would ensure that the practitioner commits to the reflective process, as they are writing down their thoughts.

“I think the written thing makes you commit to it a little bit more.” As part of the interview the interviewer explored how staff felt about writing reflections, there was a mixed response to this. One interviewee spoke about how she felt that staff may find having to engage in reflective writing to be a challenge and may not wish to engage.

“Unless you were to bring it in as some form of supervision, you know a learning goal, but I really, I’m not sure how it would go down. But then I suppose if it’s something that’s coming in and it is done before, like the students are so used to doing it. If it was something that was general practice, and you’re coming straight out of college, it wouldn’t be any different to you. You will have done so many of them already.”

Chapman and Williams (2015) in their research they acknowledged reflective practice was quickly lost in practice after graduation, emphasising the need for strategies to enhance the transition from student to graduate so that the impact on self-development is not lost. This was also highlighted by an interviewee who noted that students who complete placement within services are used to doing it. New graduates who qualify post registration may not have the same challenges as social care workers who are working in the sector for longer periods of time.

Another interviewee highlighted that if it was part of the paperwork, this may help prompt social care workers to complete the reflective writing. "If it was on the paperwork and it was mandatory, becomes more routine."

However, some interviewees expressed that they felt that there would be benefits to writing reflections as they can take more time which makes the person think about the event. "Use of written reflections takes more time, which gives you time to think about it more." Another interviewer stated that writing reflections can often ensure that the learning does not get lost and can also ensure that the person commits to reflective process.

### **Recommendations**

Social care workers appear to have an understanding of what is involved in the implementation of CPD. It is apparent that a deeper understanding the varying elements of the CPD process. It is evident that respondents focused on training and development when they spoke about their understanding of CPD.

Interviewees demonstrated a good understanding of reflective practice. It is evident that social care workers engage in this regularly and also recognise the importance of reflective practice. It is apparent that this reflective practice is used for significant events rather than everyday practice. Staff may require training on reflective practice to increase awareness. While one interviewee had knowledge of theories of reflective practice, which was Kolb experiential learning. Kolb's model emphasises on reflection and experience and is grounded in the humanist concept that people have a natural ability to learn (Akella D 2010 p.100). The six remaining interviewees were not aware of any theories. This highlights a need for training for social care workers to prepare for implementation of registration.

The perspectives of social care workers towards the implementation of the CPD process raised some interesting findings. It is apparent that social care workers viewed CPD positively and felt that it had huge benefits to their own personal development and the needs of service users. However, it is apparent that it may be daunting for some staff and that they may find challenges in engaging in the process. Supports will be required to assist social care staff to engage and prepare for implementation, such as allocated time and preparation. Respondents have suggested that management teams will need to prepare staff for implementation.

This highlights the need for knowledge and support for management and staff teams to help prepare them for registration. It is important to recognise the priority that has to be given to the needs of services and the importance support and care that is provided by services. CPD and reflective practice must complement service delivery and not add extra pressure to frontline work.

The research interviewed seven social care workers and surveyed forty three staff across services. Therefore, the scope of the research is limited. It is recommended that a review be carried out of the needs of social care workers' during after implementation to measure practitioners' experiences of the process. This will help identify any further supports required to assist in engagement and ensure that the development needs of social care workers are met.

## **Conclusion**

This research explored the experiences and views of social care workers of reflective practice and of CPD. It is vital that we establish the needs of organisations so that we can best prepare for the upcoming registration process. It is difficult to predict challenges of a process that has yet to be implemented. However, it is vital to be prepared so social care services can best respond to the needs of their staff which in turn will impact the service users experience of social care delivery. Social care organisations can be prepared to respond to the challenges of the CPD process in a positive way. There will always be challenges to engaging in a professional process that will create change within procedures and work practices. Social care workers will often face resistance in trying to fully engage and develop as practitioners and must always strive to be reflective.

Providing high quality care and support must always remain the priority despite the challenging nature of the sector. Social care has developed and evolved since professionalisation and it is vital that practitioners engage in every aspect of the professional process.



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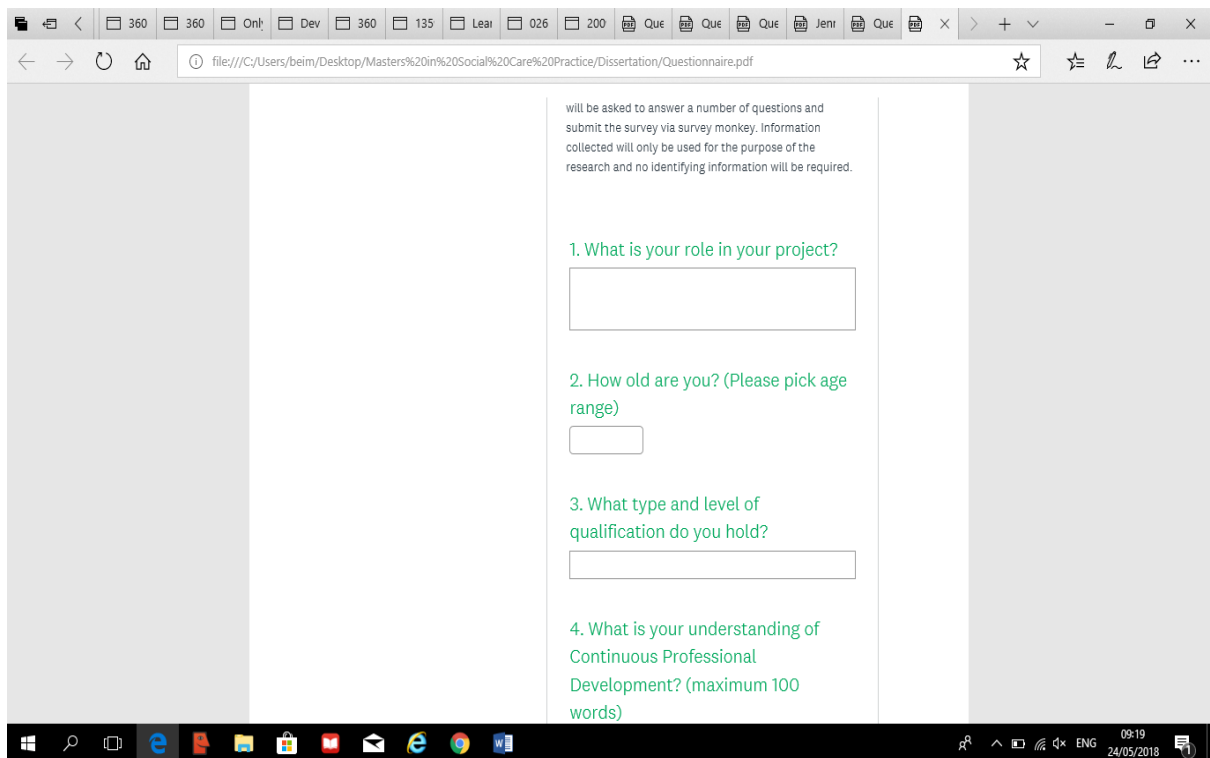
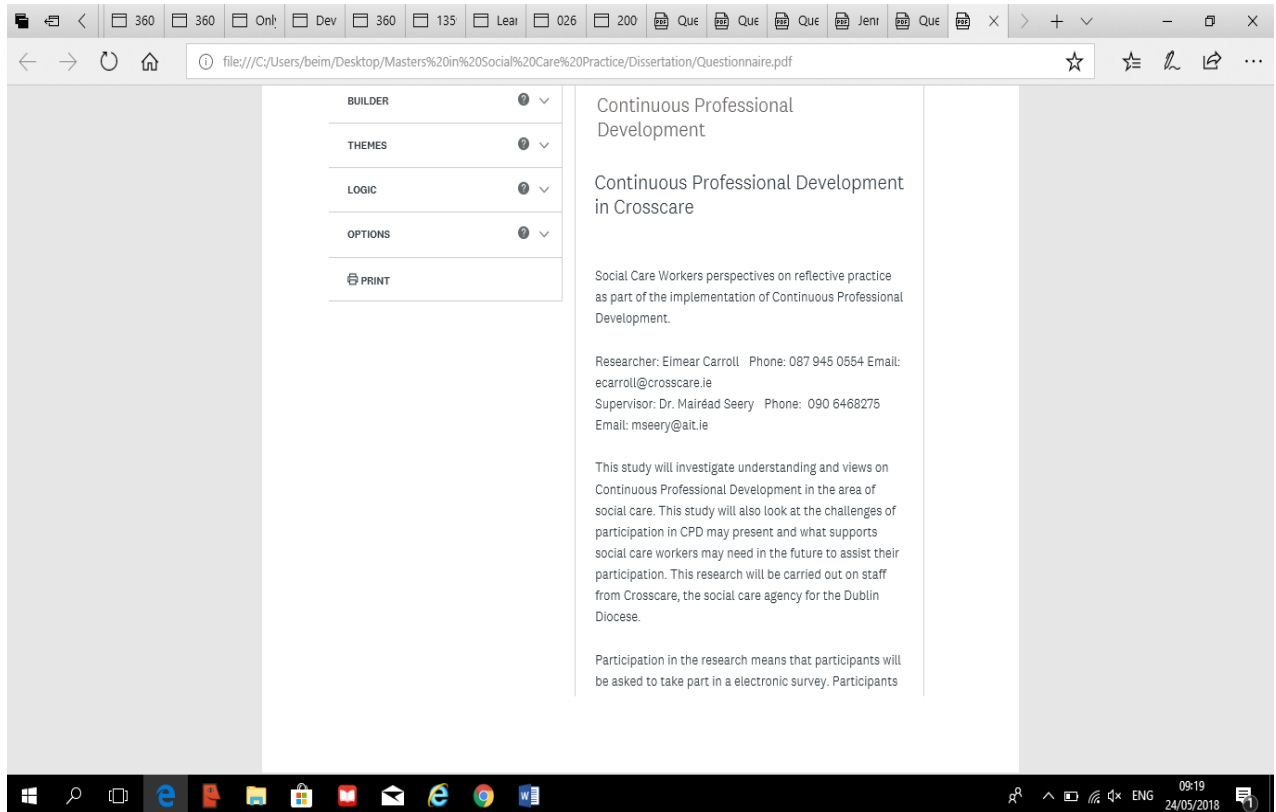
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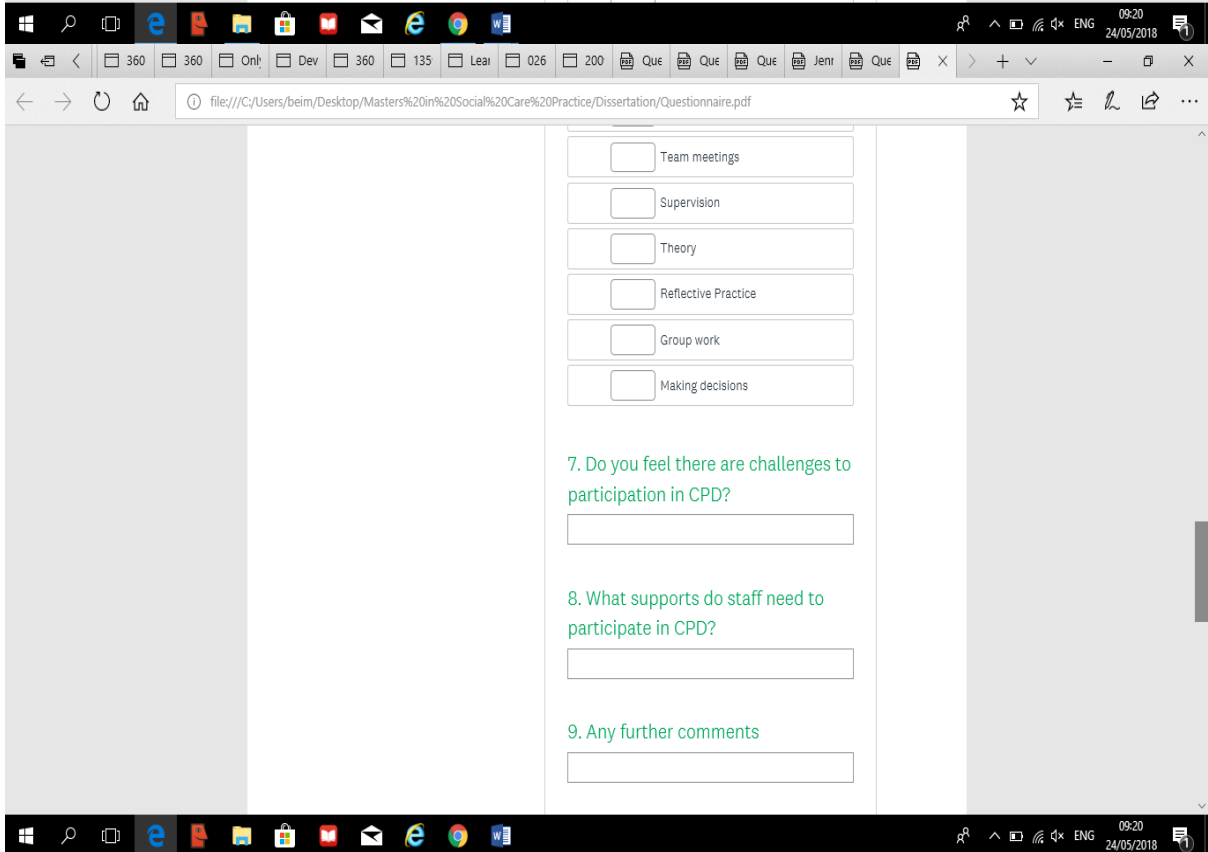
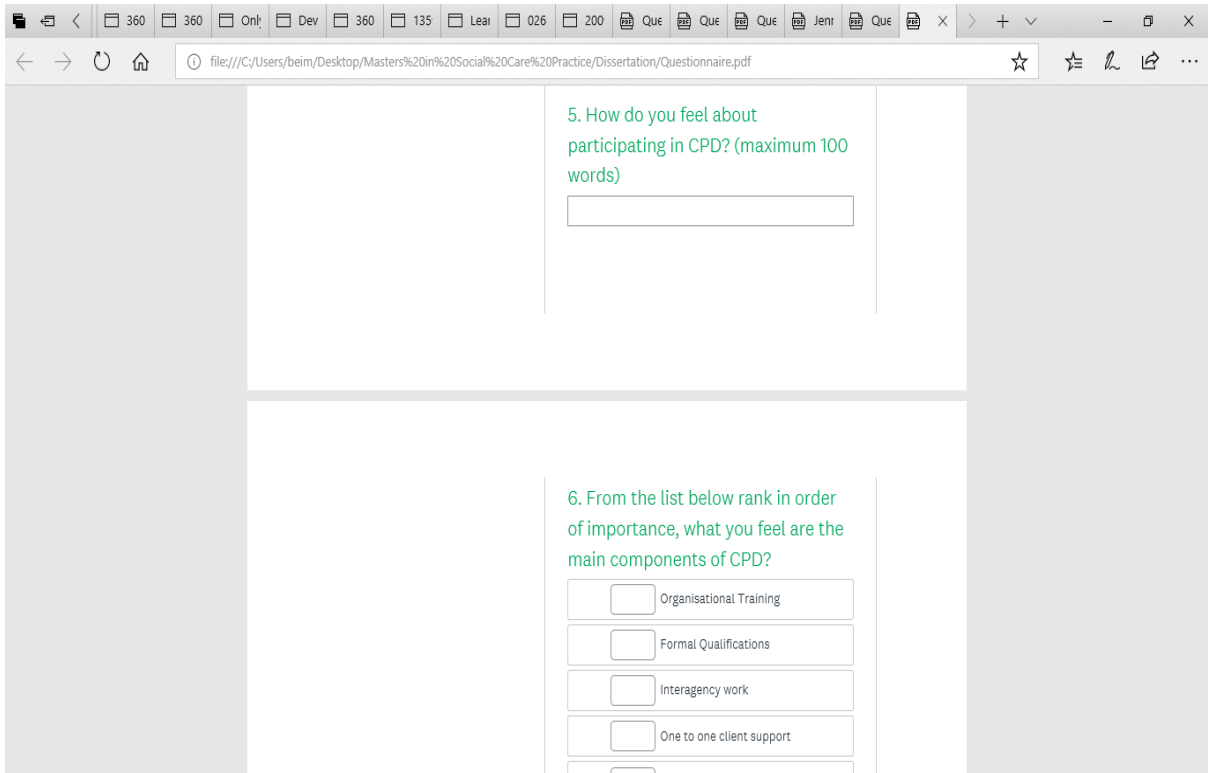
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# Appendices

## Appendix 1. Questionnaire





## Appendix 2. Interview Information Sheet and Consent Form



### **Social Care Workers perspectives on reflective practice as part of the implementation of Continuous Professional Development. Interview Information Sheet**

**Researcher:** Eimear Carroll **Phone:** 087 945 0554 **Email:** [ecarroll@crosscare.ie](mailto:ecarroll@crosscare.ie)

**Supervisor:** Dr. Mairéad Seery **Phone:** 090 6468275 **Email:** [mseery@ait.ie](mailto:mseery@ait.ie)

This study will investigate the use of reflective practice in the social care sector and look at how this is used by social care professionals in the workplace. This research will also examine social care workers understanding of reflective practice and the challenges this may present. This research will be carried out on staff from Crosscare, the social care agency for the Dublin Diocese.

Participation in the research means that participants will be asked to take part in a semi structured interview that will cover questions around the topic of reflective practice. Semi structured interviews will be carried out for approximately 40 minutes. You can withdraw your consent at any time before, throughout and after the interview. You can ask for data not to be used in the research project for up to three weeks post interview. Participants may be quoted within the research however no identifying information will be used.

Participants selected independently by the Crosscare Practice Development Team and not by the researcher. This research will be used to inform the organisation of what supports may be needed for staff to assist them with future continuous professional development.



**Social Care Workers perspectives on reflective practice as part of the implementation of Continuous Professional Development.**

**Consent form**

**Researcher:** Eimear Carroll **Phone:** 087 945 0554 **Email:** [ecarroll@crosscare.ie](mailto:ecarroll@crosscare.ie)

**Supervisor:** Dr. Mairéad Seery **Phone:** 090 6468275 **Email:** [mseery@ait.ie](mailto:mseery@ait.ie)

I would like to thank you for agreeing to take part in this semi structured interview on reflective practice. If you have any further concerns or queries please do not hesitate to contact me.

Please tick each blue box if you consent to each point and sign and date form.

I \_\_\_\_\_ agree to take part in a semi structured interview for the purposes of the research study on social care workers perspectives on reflective practice in Social Care.

I have read and understood the information sheet and been given the opportunity to ask questions about the study.

I understand that I can withdraw my consent at any time throughout the interview without penalty.

I can withdraw permission for my feedback to be used after completion of the interview for up to three weeks.

The aim, objective, purpose and nature of the study has been explained to me in writing and I have been given the opportunity to ask questions about the study.

I understand that that the report of the results of the study will be anonymous and my information will be kept confidential at all times.

I agree to my interview being audio recorded and that will be only used for the purposes of this research, my interview may be quoted anonymously in the research project, however no identifying data will be used.

Data from semi structured interview will be held for the duration of this study and deleted in July 2018.

Signed: \_\_\_\_\_  
Participant

Date: \_\_\_\_\_  
Participant

Signed: \_\_\_\_\_  
Researcher

Date: \_\_\_\_\_  
Researcher



## Appendix 3. Interview & Case Study.



### **Social Care Workers perspectives on reflective practice as part of the implementation of Continuous Professional Development.**

**Researcher:** Eimear Carroll **Phone:** 087 945 0554 **Email:** [ecarroll@crosscare.ie](mailto:ecarroll@crosscare.ie)

**Supervisor:** Dr. Mairéad Seery **Phone:** 090 6468275 **Email:** [mseery@ait.ie](mailto:mseery@ait.ie)

#### **Semi Structured Interview.**

Thank you for participating in this interview on reflective practice, it is vital that we hear the views and perspectives of social care workers so we can plan for the future. This interview should take about 40 minutes.

As part of our practice we have to deal with incidents for ourselves, so we can learn and develop. Do you do this?

Do you look at how you handle incidents regularly?

How do you do this?

How often?

1. I have a case study that looks at an incident that a social care worker is involved in. Can you read the reflection and tell me your thoughts on this writing?
2. What are the benefits of Mary looking at the incident?
3. What are the challenges for Mary in reflecting on an incident in this way?
4. Would you find it easier to process an incident like this verbally, perhaps with your supervisor, or in a written reflection, like in the example here?
5. What supports do you need to help you reflect?
6. Is there any further supports that would assist you in engaging in reflective practice?
7. Are you aware of any theories of reflection?
8. Any further comments?

I would like to thank you for participation in the interview and taking the time to assist me in my research. If you have any queries, please do not hesitate to contact me at any time.

## Reflective Practice Case Study

### The situation

Mary is Social Care Worker who is working night shift from 8pm to 8am. She is closing down the sitting room at 11pm, which entails the TV being turned off at 11pm and all residents are to return to their room. She enters one of the rooms and a resident John is watching TV. Mary goes to turn the TV off and John gets heightened and shouts at Mary. He uses derogatory terms and states that he does not want the TV to be turned off. Mary informs the resident that the rules state that the TV has to be turned off at 11pm and states that the resident is well aware of the rules of the service. The resident approaches Mary and Mary informs him that he is acting inappropriately and states that this behaviour is not acceptable, and he must follow the rules. The residents push Mary and storms out of the room. Mary disengages and returns to the office and fills in the handover and recommends for a consequence for the resident as this was not the first time, he has behaved this way.

Mary writes a reflection on the incident as part of her portfolio.

I was on shift completing my duties and went into the sitting room. Resident JS was sitting on the couch watching TV and I informed him that I was turning the TV off. He then got verbally abusive and shouted at me for some time and proceeded to push me and leave the room. JS has had a number of incidents of this nature in recent times and his behaviour appears to be escalating.

Reflecting on the incident, I looked at how I used my TCI skills in this particular incident. I felt anxious upon entering the room as I felt there may be an issue turning the TV off. I realise that I didn't use my four questions from TCI to ask myself how I was feeling, how was John feeling, how was the environment affecting the situation and how do I best respond. I also was not aware that John had recently relapsed in his drug use that morning, which may have impacted his reaction. John's reaction was not acceptable but I didn't assist him in managing his behaviour. I feel that if I had reminded him of the TV times prior to turning it off, it may have reminded him of the expectations but also help me identify that he was agitated.

I feel if I had used my TCI more effectively, it may have helped deescalate the situation. I feel that using the four questions would have helped me identify where I was at so I could best respond to John rather than reacting emotionally. I also used directive statement to remind John of the rules and expectations. I feel that this approach did not work with him as it escalated his behaviour. It may have been more useful for me to prompt him, as this reminds the resident of the expectations in a supportive way. John was agitated before I entered the room so he may have reacted negatively to any behaviour support technique I used however it may not have been targeted at me.

I spoke about the incident with my colleagues which helped me identify the triggers for the resident. I also spoke to the resident on the next night about the incident and apologised for my role in the incident. He was very taken aback by this and stated that he was very sorry for shouting and pushing me. We looked at how he could handle similar situations differently in the future. I feel that that I have a better relationship with the resident as a result of this conversation. I have also changed her night-time routine slightly and prompts all the residents at 22.40 so they are prepared.

## Appendix 4. Interview Schedule

### Interview Schedule:

<b>Interview Reference</b>	<b>Project</b>	<b>Role</b>	<b>Date</b>	<b>Time</b>
Interviewer A	Supported Temporary Accommodation	Social Care Worker	27 <sup>th</sup> of March 2018	8am
Interviewer B	Supported Temporary Accommodation	Social Care Worker	3 <sup>rd</sup> of April 2018	15.00
Interviewer C	Supported Temporary Accommodation	Social Care Worker	3 <sup>rd</sup> of April 2018	16.30
Interviewer D	Aftercare Support	Social Care Worker	5 <sup>th</sup> of April 2018	12.30
Interviewer E	Supported Temporary Accommodation	Social Care Leader	5 <sup>th</sup> of April 2018	13.30
Interviewer F	Supported Temporary Accommodation	Project Leader	5 <sup>th</sup> of April 2018	15.00
Interviewer G	Supported Temporary Accommodation	Social Care Worker	13 <sup>th</sup> of April 2018	16.00