‘How can we know the dancer from the dance?’

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Abstract

‘How can we know the dancer from the dance?’ Understanding Professional Identity Formation through Workplace Discursive Practices: A collective case study of ‘New-to-Practice’ Social Care Workers.

The focus of this study is on the Professional Identity Formation (PIF) of Social Care Workers. The timespan of the research coincided with the progression towards registration and regulation of Social Care as a profession in its own right in Ireland. The starting point of the study was with the lived professional experience of the workers themselves. Particular emphasis was placed on the written and verbal discursive practices encountered by, and engaged in, by the Social Care Worker. A core aim of the research was to gain a deeper understanding of how PIF occurs, and by doing so, to better understand the emerging profession at a critical time in its evolution.

Under a broad Social Constructionist banner, a theoretical framework based on Rhetorical Genre Theory and Enactment Theory was constructed that informed an approach to data collection and analysis in which the voice of the worker was central. The twin-theory approach allowed deeper contextual analysis of the individual worker’s experiences. The Collective-Case Study approach facilitated a greater breadth of experiences to be included. The data-gathering instruments of ‘Conversational Interviewing’ and ‘e-Diaries’ ensured that the newly qualified workers were active participants in generating the data. The ‘within-case’ analysis emphasised the individual voice of the worker, and themes emerging there fed forward to the cross-case analysis that followed. NVivo™ qualitative analysis software was used to assist the analytical process.

Three key themes emerged to frame the cross-case analysis:
1. Policy, power and ‘situated’ professional identity.
2. Worker Activity in context - professional identity as a socially constructed concept.
3. Workers Self Awareness - professional identity as an internalised construct.

The conclusions of the research are expressed as five ‘meaningful points’ that look inward to the research data and outward towards implications for professional practice. These, in turn, find more creative expression in a ‘Professional Identity Mixing Board’, that prototypes a reflexive tool for the Social Care Worker.
**Declaration**

I hereby declare that this project is entirely my own work, and that it has not been submitted for any other academic award, or part thereof, in this, or any other educational establishment.

Signature: _________________________________

Date: _____________________________________
Acknowledgements

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List of Acronyms and Abbreviations

CE Worker – Community Employment Worker (State scheme)
CAQDAS - Computer Assisted Qualitative Data Analysis Software
COP – Community of Practice (Wenger, 1998)
CORU – Ireland’s multi-profession health regulator
EOP – English for Occupational Purposes
ERIC - Education Resources Information Centre
ESP – English for Special Purposes
FESET - Formation d’Éducateurs Sociaux Européens (European Social Educator Training)
HEA – Higher Education Authority
HETAC – Higher Education and Training Awards Council
HIQA - Health Information and Quality Authority
HSCP - Health and Social Care Professionals
HSE – Health Services Executive
IASCE – Irish Association of Social Care Education
IASCW – Irish Association of Social Care Workers
JCSCP – Joint Committee on Social Care Profession
KPI – Key Performance Indicators
MDS – Minimum Data Sets
Nvivo™ - Data Analysis Software
PCP – Person-Centred-Planning
PIF – Professional Identity Formation
QQI – Quality and Qualifications Ireland
RGT – Rhetorical Genre Theory
RMA – Resident Managers Association
RTE – Radio Telifis Eireann (National Television Station in Ireland)
SCI – Social Care Ireland
SoCPIF – Social Care Professional Identity Formation
TUSLA - The Child and Family Agency (Ireland)
Chapter 1 Introduction

1.1 Research Aims

My first introduction to the education and training of Social Care Workers was as ‘practice mentor’ to final year students as they completed their professional practice placement. They were completing their degree level studies and enthusiastic about joining the workforce. There was a niggling and recurring theme that emerged in their accounts of their placement experience, namely, that they were not sure about where they fit into the workplace. Their doubt was more than a novice’s lack of confidence; it reflected a sense that their training and education was not fully embraced in the professional workplace. Their intuition was correct, and in the intervening fifteen years little has changed. As an active member of the Irish Association of Social Care Educators, I have been close to the action as progress towards statutory registration and regulation of Social Care Work has inched forward. With statutory registration will come greater recognition of the profession, however, it will not define the profession. Being registered as a Social Care Worker may promote a sense of ‘professional identity’, i.e. one’s sense of being a professional, but it is my belief that Social Care as a profession needs to root its identity in the lived professional experience of the workers themselves.

My experience of working with students and with their work placement supervisors has convinced me that the journey towards professionalization of Social Care Work is about understanding, and being able to express a professional identity. Its ‘emergent’ phase has been a long one, and therefore the imminent arrival of formal registration may be seen as a destination rather than a new departure for the profession. My starting point for this research takes a more optimistic view. It is based on the
professional resilience of students and newly graduated practitioners in finding a
distinct person-centred, relationship-based professional practice space, in the
multidisciplinary arena of Social and Health Services. It is important for those
professionals, for the profession, and for those it serves, that Social Care finds
expression for its professional identity.

This research focuses on how professional identity is established and maintained by
Social Care professionals. Its aim is to gain a deeper understanding of the factors, both
internal and external, that impact on the establishment of professional identity with
particular reference to Social Care Workers. ‘Workplace Discursive Practices’ are the
daily written and verbal engagements that the worker encounters in their professional
life. In simple terms they represent how the work is written about and talked about in
the professional context. The particular profession that is the focus of this study is
Social Care is itself at an emergent stage. The workers participating in this research are
recently qualified and are employed in a variety of sectors within the broad Social Care
professional field.

The aims of the research are:

(i) To identify the factors that influence professional identity formation;
(ii) To examine how these factors are mediated through the lived professional
    experiences of the Social Care Worker;
(iii) To locate professional identity formation within the complex interplay of
    policy, practice and development of the ‘professional self’ (Garfat, 2005 and
    others) by using Rhetorical Genre Theory (Miller, 1984; Artemeva and
    Freedman, 2008) and Enactment Theory (Weick, 1979; Ball 2001);
(iv) To develop a greater understanding of the emergent Social Care Profession
    and, by so doing, to propose a model of support for new-to-practice Social
    Care Workers.

1.2 Rationale

This research aims to shed light on what it means to be a Social Care professional at a
time when the full implementation of the Health and Social Care Professionals Act is
confering a legislative base on the profession. Lalor and Share (2013) refer to a
‘chicken and egg situation’ (pg. 3) that currently exists where a definition of Social Care
practice is difficult to pin down in the absence of a defined profession, but where any definition of a profession requires practice to exist. This research is timely in that it brings together practice and definition. By deepening our understanding of the experiences of those engaged in practicing Social Care and of the professional contexts in which those experiences occur, a clearer picture of the emerging profession is formed.

The research is motivated by a conviction that debates around the professionalization of Social Care are better informed if the lived professional experiences of Social Care Workers are included. The current focus on statutory registration and regulation of the Social Care profession does not equate to defining the profession; it contributes to but does not constitute the professional identity of Social Care Workers. This research is concerned with the overall ‘professionalization project’ (Share, 2009) and how it relates to Social Care. The emphasis is on how the perspective of the workers themselves can contribute to defining and shaping Social Care work as it emerges as a profession in its own right.

1.3 Social Care as an emerging profession

Donnellan and Jack (2010) in their ‘Survival Guide’ for newly qualified Social Workers, explore the complexity of how influencing factors such as power, policy, professional relationships, cultural and social expectations, interplay in the early careers of these workers and impact on professional identity formation. They point out that this complexity is not a reason to ‘prevent you from recognizing in others, as well as aspiring to develop yourself, the sorts of knowledge and skills that give rise to claims of professional expertise’ (pg. 24). An added ‘complexity’ for this study is the emergent status of the profession of Social Care in Ireland.

1.3.1 What is Social Care?

The Social Care profession is described by the Irish Association of Social Care Educators (IASCE) as one that is ‘committed to the planning and delivery of quality care and other support services for individuals and groups with identified needs’ (Share and Lalor, 2009: 9). The Health and Social Care Professionals Act was passed in 2005 with ‘Social
Care Worker’ listed amongst twelve Health and Social Care professions under its Council’s (CORU) regulatory remit. To date, CORU has registers open for six professions (Dietitians, Occupational Therapists, Radiographers and Radiation Therapists, Social Workers, Speech and Language Therapists, Optometrists and Dispensing Opticians). Registers for the other professions, including Social Care, will follow, on a phased basis, between 2015 and 2017. The Social Care Workers Registration Board was established and members appointed by the Minister for Health in March 2015. It is currently preparing for the registration of the profession. This includes the approval of education courses and requirements for registration including the code of Professional Conduct and Ethics.

The establishment of a statutory registration and regulation system places Social Care alongside other professions such as Nursing and Teaching in terms of objective ‘official’ recognition. The current absence of regulation of Social Care Work has led to an uneven monitoring of how vulnerable populations are cared for across a wide variety of sectors in the field. Each sector of care provision has its own set of ‘standards’ and inspection regime, with the Health Information and Quality Authority (HIQA) playing a central role.

The Joint Committee on Social Care Professionals sought to bring clarity to what was meant by Social Care. Their aim was to assist government and employers in the sector to recognise Social Care practice and practitioners in the professional work context. They defined Social Care as:

> ‘the professional provision of care, protection, support, welfare and advocacy for vulnerable or dependent clients, individually or in groups. This is achieved through the planning and evaluation of individualised and group programmes of care, which are based on needs, identified where possible in consultation with the client and delivered through day to day shared life experiences. All interventions are based on established best practice and in-depth knowledge of lifespan development’ (JCSCP in Lalor and Share, 2009:8).

The element within this definition that distinguishes Social Care as a profession, separate from other social professions, is its delivery through ‘day to day shared life experiences’. The professional titles used when referring to this kind of professional activity across mainland Europe, ‘Social Pedagogue’ (Hämäläinen, 2003, 2012), (Kronen, 1980), (Lorenz, 2006), (Cameron and Moss, 2011) and ‘Social Educateur’ (Muriel, 1973), (Kronbeck and Rosendal, 2011) reflect a similar continuous, supportive
professional relationship between worker and service user. The definition below illustrates the close linkage with the emerging Social Care profession in Ireland:

“Social Pedagogues aim to develop the personality and the social maturation of individuals in difficulty: they do so via activities or situations which they share with these persons, either within an institution or an agency, or within the framework of their daily lives, by interacting with the persons concerned as well as their milieu” (Wery and Jezierski, 1989: 10) (Translation: Kornbeck and Radermaecker)

Daly and Lewis (2000) locate the profession in the wider socio-political context, at ‘the intersection of public and private (in the sense of both state/family and state/market provision); formal and informal; paid and unpaid...’ (pg. 281). Locating the profession in this wider policy context raises questions about the influence of marketization (Ball, 1994; Dillon and Maguire, 2001; Brennan et al, 2012) and a neo-liberalist policy hegemony (Apple and Gandin, 2004; Angus, 2012) on the definition and understanding of what Social Care Work currently is and is expected to be in the future.

The professional context of this research, therefore, requires in-depth exploration of the term ‘professional’ itself; it needs to trace the evolution of Social Care in the Irish and European context; and it needs to analyse the impact of policy and public perception on this emerging profession.

1.3.2 ‘New-to-Practice’

Donnellan and Jack (2010) identify factors that impact on the formative experience of newly qualified Social Workers; these include workload, organizational structures, support and supervision, and wider policy context. The transition from higher education to work-life in other professional areas has been the subject of several studies over recent decades (e.g., Dahlgren et al, 2006; Axelsson, 2008; Johansson et al 2008; Johnston, 2003; Nilsson, 2007; Teichler, 1999a, 1999b). Other studies have focused on the progression from novice to expert, (Doel, 2010; Clouder et al, 2011; S.S.S.C., 2008; Benner, 1982). The focus of this research shares with these authors a recognition of the professional state ‘new-to-practice’. However, rather than examining the transition out of this stage, it seeks to take an in-depth look at the factors that influence how new practitioners establish professional identity. In this study, ‘new to practice’ exists primarily as a sampling criterion. The reason for this is
that it ensures a greater of degree consistency regarding the education and training qualifications of the workers at the centre of this multi-case study because all have qualified from programmes required to adhere to the Awards Standards published by HETAC (Higher Education and Training Awards Council) in 2010.

1.4 Professional Identity as a concept

The formation of professional identity may, according to Baxter (2011), be best understood by taking note of research on identity formation. She cites discourses from the fields of psychology (Bandura, 1977; Erikson, 1975; Piaget, 1953), social policy (Ball, 1998 and Gewirtz et al, 2008), philosophy (Foucault, 1980; Lyotard, 1984) as well as particular ideological perspectives including feminist (Davies & Thomas, 2001, 2003) and socio-political perspectives (Davies & Thomas, 2001, 2003; Öhlén & Segesten, 1998). All contribute to understanding identity formation and can offer useful insights into the contributing factors of professional identity formation. Baxter argues that professional identity needs to be conceptualized as being subjective in nature, linked to the evolving personal identity of the individual. Sachs (2001) concurs, and emphasizes the evolutionary aspect by drawing on Wenger’s (1998) five dimensions of identity as a useful ‘bridge’ between the personal and professional aspects of identity formation. These dimensions are as follows: identity as negotiated experience, as community membership, as a learning trajectory, as a nexus of multi-membership and as a relation between the local and the global. They provide a broad framework within which to explore professional identity formation and guide us towards a constructivist stance in that it recognizes the individual and his/her experience of the world as the starting point.

There is general agreement around the definitions of what constitutes ‘a professional’ as being someone who: possesses a systematic base of knowledge, belongs to a professional association, operates under a code of professional ethics, and is regulated throughout a recognised career ladder (Morgaine, 1999; Williams and Lalor, 2001). However there is an increasing tendency in the literature to point to the inadequacy of such a ‘checklist approach’ (Share, 2009). Harrisson and Pollit (1994) make a distinction between professionalism ‘that is defined by regulations, inspection and audit, and that
defined by identity, enterprise and self-regulation’ (pg. 282). Moving even further away from the empiricist definitional approach, Evetts (2003) argues that ‘The search for present-day professionalism is a search for communal or social identity and for appropriate work identities’ (in Noordegraaf, 2007: 763). The concept of professionalism itself is changing, and with it the process of establishing professional identity. This research views Professional Identity Formation as being socially constructed - a view that informs both methodological decisions and a theoretical framework for analysis.

1.5 Theoretical Framework

Fig 1.1 Theoretical framework for analysis of Case Study data

<table>
<thead>
<tr>
<th>Theoretical framework</th>
<th>Rhetorical Genre Theory (Miller, 1984; Pare, 2000)</th>
<th>Enactment Theory (Weick, 1979; Ball, 2001)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Focus of analysis</td>
<td>Lens to examine deliberative professional communication in written texts and formal spoken communication.</td>
<td>Lens to examine how policy (meta-genre) is experienced through professional activity</td>
</tr>
<tr>
<td>Associated Professional Activity</td>
<td>Team meetings, form-filling, report-writing, planning and review, multi-disciplinary interaction</td>
<td>Engagement with management and organizational structure, terms of employment, task and goal setting and completion, implementation of internal and external policy.</td>
</tr>
<tr>
<td>Associated data sources</td>
<td>Forms-in-use, Guidelines, Record logs, Day-books, Critical Incident Documents etc. Handovers, Supervision, Team Meetings, Multidisciplinary meetings.</td>
<td>Organisational guidelines, Professional Guidelines and Codes of Practice, Policy Documents, Circulars, Employment Contracts, Job Descriptions etc.</td>
</tr>
</tbody>
</table>

Fig 1.1, above, illustrates the theoretical framework that informs this research. Social Constructionism (Berger and Luckmann, 1991) is discussed by Burningham and Cooper (1999) in terms of being either ‘contextual’ or ‘strict’. They see the former as
recognising objective reality and its influence, while the latter maintains a relativist position. The specific theoretical lenses proposed for this research, Rhetorical Genre Theory (Miller, 1984) and Enactment Theory (Weik, 1979; Ball, 2001), are both compatible with Contextual Constructionalism (Burningham and Cooper, 1999). They share a common concern to include the experience, action and engagement of the individual with their (in this case ‘professional’) environment whilst facilitating consideration of external influences on that environment.

Rhetorical Genre Theory is described by Miller (1984) as social action, moving beyond traditional genre theory that concentrated on text content. Text, as understood by RGT, may be seen as more than the written word and may include ‘recurrent use of conventionalized forms and communicative practices that individuals develop relationships, establish communities, and get things done’ (Johns et al, 2006: 273). It is, therefore, seen as an appropriate theoretical framework with which to gain an understanding of professional identity formation of Social Care Workers. The data gathering focuses on workplace discursive practices, the written and spoken ‘texts’ generated through the deliberative communicative actions undertaken as part of daily professional activity.

Enactment Theory is concerned with developing an understanding of the relationships between policy making and what happens in practice, and how social actors, in this case Social Care Workers, enact policies in the workplace (Ball, 2006 and Maguire, 2011). It distinguishes between policy implementation and policy enactment. The former is seen as ensuring that the intended outcomes of the policy maker are carried out; the latter includes the ‘sensemaking’ by the professional of the policy-makers intent (Walshaw and Anthony, 2007).

Taken together these two theoretical perspectives provide a framework that facilitates analysis of the relationship between meta- and micro-genres. They both give a central role to the agency of the professional within their work context, irrespective of whether that agency is formally recognized in their professional role.
1.6 Methodology:

The ‘situations of practice’ (Schon, 1983) that provide the immediate context for this research contain ‘the complexity, uncertainty, instability, uniqueness and value conflicts which are increasingly perceived as central to the world of professional practice’ (Schon, 1983: 14). Such complexity calls for a qualitative rather than a quantitative approach. Whilst quantitative research concerns itself with ‘research questions and hypotheses from theoretical models and then tests them against empirical evidence’ (Flick, 2003: 3), the purpose of qualitative research is, according to Hull (1997), ‘to understand human experience to reveal both the processes by which people construct meaning about their worlds and to report what those meanings are’ (pg. 14).

1.6.1 A Phronetic Approach

Phronetic Social Science (Flyvbjerg, 2001; Flyvbjerg, Landman & Schram, 2012) favours a pragmatic approach to social research and in particular those research methods that engage with the social world in a contextually sensitive and flexible manner. It also demands congruence between subject, method, analysis and purpose of research inquiry. The approach, which is also adopted here, believes that, rather than mimicking the research methods of the natural sciences, Social Science research needs to facilitate a stronger connection between research subject matter and the experiences of the people being studied. The phronetic model, according to Flyvbjerg (2006), ‘sees social scientists and social science professionals as analysts who produce food for thought for the ongoing process of public deliberation, participation, and decision making’ (pg. 38).

1.6.2 Collective Case Study

Collective Case Study (Cresswell, 2007), also referred to as Multiple Case Study (Yin, 2004), is chosen as an effective research design through which to generate meaningful data in a manner that is flexible and sensitive. This design is in keeping with the phronetic approach outlined above and it is also congruent with the broad Social
Constructionist theoretical approach. The case study research method is well established within the qualitative research paradigm. It is defined by Yin (1984) as:

‘an empirical inquiry that investigates a contemporary phenomenon within its real-life context; when the boundaries between phenomenon and context are not clearly evident; and in which multiple sources of evidence are used’ (pg. 23).

The particular ‘sources of evidence’ in this study are ‘Conversational Interviews’ which are an adaptation of Semi-structured Interviews (Cohen et al, 2007; Denscombe, 2007 and others); Guided Journaling (Bolton, 2001; Ruth – Sahd, 2003) through a Moodle Diary platform, and Document Analysis (Abrahamson, 1993). Each element of this ‘bespoke’ data collection model is based on established qualitative research methods of sourcing evidence. The relative strengths and weaknesses of each will be addressed in detail in Chapter 4.

‘Collective Case Study involves more than one case, which may or may not be physically co-located with other cases’ (Goddard, 2010: 164). Located within the phenomenological approach, this method first emerged in the 1960s and 1970s. According to Goddard (2010), it is a way to gather qualitative data that goes beyond a single case study. Sometimes referred to as ‘multiple case study’, the method ‘involves one issue selected, but the inquirer selects multiple case studies to illustrate the issue’ (Creswell, 2007: 74). This method is appropriate because of a focus on ‘the ‘little things’ of everyday life, the mundane and the quotidian as conduits to the big issues of academic and policy concern’ (Hargreaves, 2012: 321). However, there is a risk that ‘a multiple case study risks reducing complex cases to a few comparable variables, resulting in the loss of the idiosyncrasies of individual cases’ (Stoecker, 1991 in Lauckner et al, 2012). It is important, therefore, to treat each case as an individual whole by employing ‘replication logic’ (Yin, 2003) to participant selection.

1.6.3 Identifying the Cases

This research is based on the experiences of nine Social Care Workers, identified according to the criteria set out in Fig 1.2 below. These case participants do not represent a formal ‘sample’ representative of the population of Social Care Workers generally (Yin, 2004). The approach to participant identification is purposive in nature.
In qualitative research this is where ‘the researcher actively selects the most productive sample to answer the research question’ (Marshall, 1996: 523). This approach is favoured in order to ensure a depth of analysis. What is sought is ‘analytical’ rather than ‘statistical’ generalization (Yin, 2004).

**Fig 1.2: Proposed Sampling Profile**

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Education and Training</th>
<th>Job Title/Role</th>
<th>Professional Support</th>
<th>Work Context</th>
<th>NTP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description</td>
<td>Must hold a B.A. in Applied Social Studies in Social Care or equivalent.</td>
<td>Must be employed specifically in a Social Care Worker role, with this role reflected either directly or indirectly in the job title.</td>
<td>Must have Professional Supervision.</td>
<td>Must work in an agency that provides direct Social Care.</td>
<td>Must have qualified within the last 3 years.</td>
</tr>
<tr>
<td>Additional criteria</td>
<td>Sample must include graduates from at least 5 different colleges* with no more than 2 from any one college.</td>
<td>This may be reflected either in the job title or the contract of employment.</td>
<td>Either provided by or officially recognised by the employer.</td>
<td>A range of social care settings is required: e.g. Residential Child Care, Disability, Elder Care, Educational and Community settings, Homelessness etc.</td>
<td>With either level 7 or 8 qualification.</td>
</tr>
<tr>
<td>Rationale</td>
<td>To enhance the validity of the data through avoiding education and training bias.</td>
<td>To enhance the prospect of convergence regarding professional role and expectation, thus promoting ‘replication logic’ (Creswell, 2006).</td>
<td>Identified as a core element of professional work (CORU) and increases the reflective capacity of participant in professional context.</td>
<td>In line with the generic nature of the profession; exclude cases located in contexts that operate from models other than a Social Model</td>
<td>Recognises the emergence of greater conformity of Education and Training with and publication of Social Care Awards Standards (2010).</td>
</tr>
</tbody>
</table>

* College Programme Directors approached to identify Social Care agencies used as Professional Practice locations by Social Care students.

**1.6.4 Analytical Strategy**

A two-stage approach to data analysis (Stake, 2006, Creswell, 2007) is employed, where stage one involves analysis of identified themes and patterns within the
individual cases, followed by stage two in which patterns and themes are analysed on a cross-case basis. NVivo™ is a Computer Assisted Qualitative Data Analysis Software tool. It is utilized in this research to help ensure proper management of what was anticipated to be complex data. It also promotes consistency in coding, efficiency in identifying patterns and ultimately accuracy in extracting themes that emerge from the data. It therefore enhances the connection between the sources of evidence and the presentation and analysis of themes. This Multiple Case Study is qualitative in nature and conducting this type of research places particular demands on the researcher (Bell, 1990; Denzin & Lincoln, 2005). These are summarized in Fig 3 below.

**Fig 1.3: ‘The Three S’s’ (based on Hoepfl, 1997):**

<table>
<thead>
<tr>
<th>Demand on Researcher</th>
<th>Research Principle</th>
<th>Researcher Action</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Stance -</strong></td>
<td>The researcher must be able to consider the data in the wider context of literature and experience before, during and after the data is gathered</td>
<td>Consider ‘Researcher Role’ (Fink, 2000), and the relationship between the researcher and participants. Conduct an in depth thematic Literature Review that provides a wider context for research decision-making and analysis.</td>
</tr>
<tr>
<td><strong>Skill -</strong></td>
<td>The researcher must regard him/herself as a research instrument.</td>
<td>Through reflexivity (Blaxer et al, 2001) develop and maintain a high level of awareness of how their research interactions impacts on the research process as a whole. Consider the use of ‘Critical Research Friend’ (Flinders and Mills, 2006).</td>
</tr>
<tr>
<td><strong>Strategy -</strong></td>
<td>The researcher needs to be able to make informed research decisions about how to gather, present and interpret the data – these decisions often emerge through the qualitative research process.</td>
<td>Ensure congruence between subject, method and analysis (See above). Conduct a Pilot Study. Develop a stage approach to analysis (Cresswell, 2005) to include Analytical Strategy (Braun and Clarke, 2006), a Project Journal that sets clear, dated targets and the use of NVivo™ data management software to facilitate thematic analysis.</td>
</tr>
</tbody>
</table>
The researcher, as ‘author’ (Hughes, 2013), needs to recognize that they are a powerbroker in the research process. As Richardson (1992: 131) succinctly puts it, ‘No matter how we stage the text, we - the authors - are doing the staging’. It is essential therefore that there is a high level of commitment to reflexivity on the part of the researcher. Extracts from my own Research Journal are included throughout the thesis, reflecting significant thoughts, questions, observations or experiences occurring at a particular stage of the research.

1.7 Reliability, Validity and/or Goodness

The appropriateness of traditional positivist criteria to assess the validity and reliability of research has been challenged in the context of qualitative research (Lincoln and Guba, 2000). This study is aligned with Janesick’s (2003) position of replacing Validity, Generalizability and Reliability with ‘Qualitative Referents’. The concept of ‘goodness’ contains such referents. It is seen as a means of locating ‘situatedness’, ‘trustworthiness’ and ‘authenticity’ (Smith, 1993; Denzin and Lincoln, 2000). Tobin and Begley (2007) argue that, for the qualitative researcher, concepts of validity and reliability cannot be simply dealt with in a methodology chapter. The ‘search for goodness’ (pg. 391) involves dynamic processes (see Fig 1.4, below) that inform research decision-making as the research unfolds through each stage: Foundation, Approach, Collection of data, Representation of voice, Analysis, Conclusions and Recommendations.

Fig 1.4 How goodness is shown (Arminio and Hultgren, 2002)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Foundation</td>
<td>this provides the philosophical stance and gives context to and informs the study</td>
</tr>
<tr>
<td>Approach</td>
<td>specific grounding of the study’s logic and criteria</td>
</tr>
<tr>
<td>Collection</td>
<td>explicitness about data collection and management</td>
</tr>
<tr>
<td>Representation</td>
<td>researchers reflect on their relationship with participants and the phenomena under exploration</td>
</tr>
<tr>
<td>The art</td>
<td>the process of presenting new insights through the data and chosen methodology</td>
</tr>
<tr>
<td>Implication</td>
<td>recommendations.</td>
</tr>
</tbody>
</table>
A third column is added to the above diagram in Chapter 4 that includes specific actions that demonstrate how goodness is shown in this research. It is important to point out from the beginning; however that quality and validity in this qualitative research endeavor permeate research decision-making from the outset. Yardley’s (2000) four principles of validity-testing in qualitative research provide the reader of this research with a useful assessment tool. ‘Sensitivity to context’, ‘commitment and rigour’, ‘transparency and coherence’, and ‘impact and importance’ each demand that I, as researcher, am proactive in explaining my research decisions. The use of Reflexive Notes and their inclusion in the thesis is an example, not simply explaining the decision-making process, but also allowing the reader to view factors that impact on those decisions. In particular, the use of Nvivo analytical software increases the level of transparency concerning how the qualitative data is managed and preserves the chain of evidence between primary data, findings and conclusions.

1.8 Ethical considerations

‘Qualitative researchers are guests in the private spaces of the world. Their manners should be good and their code of ethics strict’ (Denzin and Lincoln, 2003: 154). The Social Care Workers at the centre of this research endeavor are involved with, and immersed in, the daily lived experience of vulnerable children and adults (CORU, 2013; Share and Lalor, 2013 and others). In seeking to gain a deeper understanding of their professional practice, it is essential that careful consideration be given to how the data is collected, stored, interpreted and reported. The main ethical issues to be considered in this study are based on four broad ethical principles (De Vaus, 2001): voluntary participation, informed consent, no harm to participants and anonymity/confidentiality. It is important that each principle informs research decision-making throughout this research process. Throughout this study, research decision-making is seen as extending beyond the immediate research participants (the Social Care Workers) to include responsibilities towards those with whom they work.

1.9 Outline of the Thesis

This thesis consists of eight chapters that, when taken together, reflect an overall congruence of topic, context, method and analysis. Immediately following this introductory chapter, Chapter 2 offers an in-depth review of literature that serves to
provide a contextual foundation on which to build the research. It contains three
distinct but related sections. The first section examines the conceptualisations of what
it is to be a professional. It then focuses on Professional Identity Formation from a
range of theoretical perspectives. The second section focuses on the elusive concept
and complex practice of ‘caring’, both within and outside a professional context. The
historical development and policy context of Social Care work is traced and critiqued.
The third and final section of the Literature Review turns its attention to the
construction of a theoretical framework to underpin the research. Social
Constructionism is critiqued and a refined version, Contextual Constructionism is
examined in depth. Rhetorical Genre Theory and Enactment Theory are proposed as
the twin theoretical approaches that underpin this research.

Chapter 3 links the topic, theoretical framework and methodological approach. The
phronetic approach is applied to this project and its application is explained here. The
propositions that act as reference points for the data-gathering and analysis phases to
come are also identified in this chapter.

Transparency, is defined by (Filck, 2007) as ‘The degree of how far a reader of a
research study is enabled to understand how the research went on in concrete terms’
(pg. 143). Chapter 4 explains, examines and critiques the research process, with
particular reference to evidence gathering. As with all the phases of this research
process, methodological considerations cannot be viewed in isolation from design and
analytical issues.

The following three chapters are concerned with analysis. Chapter 5 introduces the
analytical approach and illustrates how the complex research evidence is managed in
this project. The use of Nvivo, a computer assisted qualitative data analysis software
(CAQDAS) tool is first critiqued and then explained in the context of this research.
Illustration of its use facilitates a brief profile of the participants at the heart of the
multiple case study. Chapter 6 presents each case singularly. The represented ‘voice’ of
the worker is prominent here as it ensures that the constructionist theoretical base is
present as a guiding force. Emerging themes are identified at the end of each case
presentation and feed forward into the cross-case analysis in Chapter 7. Considerable
detail is given in that chapter to the coding process in an effort to maintain a strong
link between the primary evidence collected and the meanings attached to that evidence through the analytic process.

Chapter 8 concludes the thesis by drawing out ‘meaningful points’ from the analysis. These points facilitate two-directional discussion. Meaning is derived by establishing a link back to the data as research evidence; it also looks onward from the research to examine possible implications for practice. Finally, a prototype model of a reflexive tool for use by Social Care Workers to examine their own PIF is offered. The ‘Professional Identity Mixing Board’ reflects the findings of this research project and acts as a creative method of completing the phronetic social research process by re-connecting with ‘the real world’.
Chapter 2 Literature Review

2.1 Introduction

The idea for this research did not arise in a vacuum; it is based on my own direct experience of Social Care work, my involvement in Social Care education and training and my participation in the processes that are edging Social Care towards becoming a fully recognised and regulated profession. The advantage of being so closely engaged with the issues that surround the research topic is the ‘working knowledge’ that I bring to the research, based on familiarity with the policy movements, the historical development, the current issues of concern to workers themselves and in the education and training of Social Care Workers. This advantage needs to be handled with care in the research context. Researcher reflexivity is often discussed in ‘Methodology’ chapters; however it is by engaging at a deep level with the relevant literature that a solid foundation for researcher reflexivity is built. The aim of this review of literature is:

- to enable research objectivity through conceptual clarity,
- to provide historical context that allows the research to be located within a policy and practice environment,
- to identify, explain and provide a rationale for the use of a theoretical framework for in-depth critical examination of the research question,
- by acknowledging and critiquing the work of others, to enter a dynamic relationship with literature in order to inform research decision-making.

The complex nature of the topic under investigation, PIF of Social Care Workers, demands a wide review of literature from the fields of psychology, social science, philosophy, education, and professional studies. In many cases literature reviewed is located within a sub-field of these established areas of research and study. It is hoped that by allowing the literature from a range of discipline areas to entre dialogue with one another that a basis for analysis is provided in order that deeper understanding of how Professional Identity Formation occurs for Social Care Workers. Such depth of understanding is aimed at contributing to a stronger knowledge base for this emerging
profession. The format of this review of literature is simple. The chapter is divided into three main parts.

**Part 1** examines the concepts surrounding debates about what it is to be a professional. It then focuses Professional Identity Formation from a range of theoretical vantage-points. This research identifies ‘New-to-Practice’ as one of the sample criteria used to identify case participants. A short discussion of ‘New-to-Practice’ and associated theories is included for conceptual clarity.

**Part 2** examines the elusive concept and complex practice of caring, both within and outside a professional context. The historical development and policy context of Social Care work, is traced and critiqued. Particular attention is paid to the contemporary ideological dominance of neo-liberalism and its impact on the emerging profession. Some models of practice are examined to provide possible alternative conceptualisations of Social Care Work as it seeks its own professional identity within the neo-liberal hegemony.

**Part 3** turns attention to the construction of a theoretical framework to underpin the research. It engages with questions of epistemology and refines a research positioning that seeks to match the nature of the research topic. Social Constructionism is critiqued and a refined version, Contextual Constructionism examined in depth. The theoretical framework for this research is rooted in this epistemological position. Rhetorical Genre Theory and Enactment Theory are proposed as the twin theoretical approaches that underpin this research.

### 2.2 Profession-al-alisation-alism-ality: an evolving concept.

Writing in 1988, Andrew Abbot describes the tasks of a profession as ‘human problems amenable to expert service’ (Pg. 318). This view leads him to cautiously offer a definition of ‘professions’ as ‘somewhat exclusive groups of individuals applying somewhat abstract knowledge to particular cases” (ibid). However loose the definition may be, it could prove the most useful in drawing together the related concepts of ‘profession’, ‘professional’, ‘professionalization’, ‘professionalism’ and
The emergence and evolution of these concepts reflect wider societal and cultural shifts. This short review of the literature traces the conceptual evolution from the earlier descriptive focus on what constitutes a profession and by extension a professional, through later concerns about structural protection of titles through professionalization processes, to contemporary approaches that place more emphasis on the ‘discourse of professionalism’ (Evetts, 2005) and the internalised construct of professional self-worth, namely ‘professionality’ (Galvin 1996).

Discourse on commitment and duty to specific occupations is seen as a core component of an organised and just society in Plato’s ‘Republic’ (c.f. Kamtekar, 2002). The Greek philosophers applied a logical equation that linked the identification of valuable work, education and contribution to the common good. These elements have remained ever present in intellectual deliberations on professional work. Beaton (2010), in his discussion on the continued relevance of professionalism, also identifies the Greek philosophers’ interest in the topic. He refers to Plato’s contention that professionals must not only possess practical skills (Technē) but also a moral excellence (Arete). Further Greek concepts Nous, Episteme, Phroenesis, refer to the skills, knowledge and abilities necessary to fulfil specified tasks and have informed discussions about the nature of particular professions such as Medicine (Hofmann, 2002), Teaching (Eraut, 1997; Biesta, 2005), Healthcare (Frank, 2012). The common theme in these works is the application of learning and knowledge towards deliberative professional judgement and action. This renewed interest in examining philosophical concepts of knowledge when discussing professional work has moved a focus away from a more rigid ‘trait’ approach to defining what constitutes a profession. Before examining the implications of this shift, it is useful to summarise the common characteristics, found in the literature, that are required to be present for a profession to exist.

2.2.1 Normative definitions of ‘profession’

Early (modern) writers such as Thomas (1903) were not wholly convinced that the development of professionalism was any more than a phase in a societal division of labour, in which professionals emerged through the patronage of church and state
institutions. With a hint of cynicism he expresses the view that ‘With the division of labor ... particularly of ‘hard labor,’ there are always at hand a large number of men to do the less irksome work (Thomas, 1903: 256). This view could sit comfortably (perhaps without the gender bias) within contemporary discourse on the proliferation of professions. For example, in discussing the emergence of new professions, Hanlon (1988) notes that the ‘static, normative conceptions of ‘profession’ as a destination in a stable social structure have been supplanted by a dynamic, contingent view of professionalism’ (pg. 42).

So what are those ‘normative conceptions’ of a profession? There is considerable agreement on the essence of what constitutes a profession. For example Flexner (1915) said of professions that

‘involve personally responsible intellectual activity; they derive their material immediately from learning and science; they possess an organized and educationally communicable technique; they have evolved into definite status, social and professional; and they tend to become, more and more clearly, organs for the achievement of large social ends.’ (Flexner, 1915: 576)

In a similar vein, Brandeis (1914) describes a profession as ‘an occupation for which the necessary preliminary training is intellectual in character, involving knowledge and to some extent learning, as distinct from mere skill...; is pursued largely for others and not merely for oneself...; and in which the amount of financial returns is not the accepted measure of success...’ (pg. 2). Asheim (1978) notes that the characteristics identified in these early definitions appear in discourse about the professions to this day. This is borne out in the work of Stratton and Mitstifer (2012) who identify core characteristics of a profession as

(i) abstract knowledge used skilfully and adaptably in the area of service
(ii) autonomy in decision-making action relative to service
(iii) value orientation to service for the welfare of society.

Perhaps the most comprehensive list of characteristics of a profession is provided by Cheetham and Chivers (2005)
Fig 2.1 Characteristics of a profession

<table>
<thead>
<tr>
<th>Cheetham and Chivers (2005) characteristics</th>
<th>Common themes with earlier definitions</th>
</tr>
</thead>
<tbody>
<tr>
<td>is learned—i.e., requires prolonged and specialised training and education</td>
<td>Based on knowledge, applied to the service of others</td>
</tr>
<tr>
<td>is client-focused</td>
<td></td>
</tr>
<tr>
<td>has collective influence within society</td>
<td></td>
</tr>
<tr>
<td>confers status within society</td>
<td></td>
</tr>
<tr>
<td>organises itself into some sort of professional body</td>
<td>Are recognised internally and externally</td>
</tr>
<tr>
<td>is collegial</td>
<td></td>
</tr>
<tr>
<td>is informed by an ethical code of some kind</td>
<td>Operates from an identified value base</td>
</tr>
<tr>
<td>is non-commercial</td>
<td></td>
</tr>
<tr>
<td>is altruistic (orientated towards service rather than profit</td>
<td></td>
</tr>
<tr>
<td>is self-regulatory</td>
<td></td>
</tr>
<tr>
<td>offers autonomy within the job role</td>
<td>Has the ‘right’ to make professional judgements and decisions.</td>
</tr>
</tbody>
</table>

2.2.2 ‘Profession’ is what you do.

These core elements remain present in current literature on professions and it is evident in the development and expression of professional recognition, registration and regulation; examples in the Republic of Ireland include CORU, the Health and Social Care Professionals Council, the Teaching Council of Ireland, the Medical Council etc. These bodies act as gatekeepers of entry into the professions, and in common with international practice, set expected standards for professional practice. This pathway to official recognition with a statutory base brings increased societal recognition and career structure. On the one hand, regulation of professions (the professionalization of Social Care Work will be discussed in detail later) reinforces the normative conceptualisation of a profession; however it also introduces critical questions about what professions do: the work, the context and the function of an occupation. Evetts (2005) proposes that this concept, professionalism, is the proper focus of discussion. In reaching this conclusion – or starting point- Evetts provides a useful summary of the concept. Speaking in 2012, she describes the concept of profession as a distinct and generic category of occupational work, and
professionalization as the process to pursue, develop and maintain the closure of the occupational group (pg. 4). She views ‘professionalism as a socially constructed concept and as such does not lend itself to normative definition. As she puts it, ‘of more interest and relevance in current work and employment contexts, is the increased use of the discourse of professionalism in a wide range of occupations and organizational work places (Evetts, 2005:3). Such discourse treats professionalism as an occupational value that exists within changing organisational contexts. So for Evetts, professionalism must be examined in a manner that takes account of the consequences of those changes, consequences that ‘include changes in the work itself, in practitioner—employer and practitioner—client relations, and in the control of work priorities and processes (Evetts, 2011: 406). This conceptualisation of professionalism is most useful in self-analysis of existing professions; it does not however account for the contradictory contemporary phenomena of the proliferation of professions (Sack, 2012; Kliener, 2006) and the de-professionalization (Dominelli, 1996) of professional activity.

While Sack (2012) notes the continued proliferation of professional organisations in contemporary society, Kliener, (2006) suggests that the reason for this phenomenon has ‘shifted away from protecting consumers and toward limiting the supply of workers in various professions’ (in Kreuger, 2006:1). This view would suggest external pressure, a deliberate policy-driven force being exerted on occupations as a controlling force. However Ingersoll (1997) identifies strong internal motivations within occupations that drive them towards achieving professional status – among these are

‘Credential and licensing levels; Professional development support, opportunities and participation; Specialization; Authority over decision making; Compensation levels and Prestige and occupational social standing’ (Ingersoll and Merill, 2011:186).

Both arguments have merit and are supported by researched evidence, but perhaps more important than their individual veracity is that they point towards a socially constructed conceptualisation of professionalism. The extent to which individual professional ‘actors’ actively participate in defining and maintaining their professionalism and professional role is at the core of this research project.
2.2.3 Ideological influences on professionalism

Rather than seeing proliferation of professions and de-professionalization as contradictory forces pulling against each other, some authors (Ball, 2011; Sachs, 2001, and others) locate both within a wider discourse on the marketisation of professional services on a global scale. Firstly, Stephen Ball’s assessment of how the teaching profession has been impacted by government policy in the UK is neatly summed up by Mertkan (2011), as the relentless push towards marketization, managerialism and performativity. Elsewhere Ball points out that ‘the corollary of policies of decentralization has been performativity with elements of accountability and standardization’ (Ball 2011:156). Here, performativity is seen as giving expression to a policy of bureaucratic regulation of professional life around imposed targets, outcomes and sanctions, Ecclestone (2004). Professionalism is therefore seen being remoulded in the image and likeness of the market forces that create and control the environment in which it exists. Furthermore, any assessment of professionalism needs to take account of the contextual influences of professional activity. For Ball, professional work can be best understood within a wider context of policy analysis. Martimianakis et al. 2009 in Goldie (2013) make the point that ‘the focus on normative definitions of professionalism misses the influence of context, institutions and socioeconomic and political concerns and leads to an overemphasis on codes of behaviour’ (Goldie 2013: e952). An extremely pessimistic conclusion to the impact of performativity on professions is offered by Ecclestone, who detects the emergence of a therapeutic culture (in Martin 2008) whereby professionals are demoralised to the extent that they see their role as merely providing comfort and shield to marginalised individuals without challenging the structures that cause such marginalisation.

Beaton (2010) considers the proliferation of professions and its effect on professionalism. He locates this proliferation within the context of contemporary society with an upsurge of technical knowledge, the increased availability of and access to that knowledge, the specialisation of professional activities, and the democratisation of society. He points to the inclusion of neo-professions (such as IT professionals) and tradespeople (such as electricians) in the ranks of recognised professions. This expansion of professional bodies’ raises questions for Beaton about
an elitism that was associated with certain professions in the past and about the relationship between the knowledge, and by extension the power-holders and their clients. Whilst not providing a definitive answer to these questions raised, one thing is certain for Beaton, the 21st Century will see the continued proliferation of professions.

‘In a world where knowledge is exploding boundaries every few years rather than every few centuries, where knowledge is increasingly accessible to larger numbers of people, where things are so complex as to require specialised expertise to keep a home running safely, there will be more and more occupations entering the ranks of the professions’ (Beaton 2010:11).

Where Beaton establishes the fact of proliferation, Fournier (1999) offers an explanation. By drawing on the Foucauldian concept of ‘governmentality’, especially as applied to neo-liberal democracies, she argues that professionalization can be seen as a mechanism of control from a distance. By controlling the parameters of what is ‘thinkable’ or ‘do-able’ in ever-increasing domains of service provision, the autonomy of the regulated professional operates within a governed framework. Depending on one’s ideological outlook this scenario could be seen as either ‘win-win’ or ‘lose-lose’ situation: the former where the state remains in ultimate control while at the same time avoiding a hands on domination of individuals; the latter by emphasising the puppeteer role of government and the ultimate control of professional activity. Fournier (2000) expresses the more negative reading of governmentality, claiming that ‘the logic of the market threatens to ‘unmake’ the professions by dismantling the field of professional knowledge, the boundary between professionals and lay persons, and boundaries between the professions and the market’ (pg. 84). The relationship between neo-liberalism, the market and professional Social Care will be explored in more detail in a later section of this review. For now it is useful to note Fournier’s (1999) mapping of these connections.
Fournier points out that the connecting lines in the diagram are not indicative of a causal relationship and that the ‘dotted lines’ represent the notion that there is only partial connection between ‘Professional Competence’ and ‘Knowledge’ or between ‘Professional Competence’ and ‘Control over practice’. This leads to the conclusion that professional competence is primarily translated through personal conduct of the practitioner. Evetts (2009 makes a similar point stating that ‘The effects [of neo-liberal ideologies] are not the occupational control of the work by the worker/practitioners but rather control by the organizational managers and supervisors’ (Pg. 23).

So by tracing the development of the concepts of profession and professionalism, it becomes clear that both concepts are redefined within the prevailing cultural, technological, social and political trends. Founier in Malin (2000) argues that current trends in these areas combine in a ‘perfect storm’ of influence that are threatening the foundations and legitimacy of professions. Or to put it another way, normative conceptions of ‘profession’ as a destination in a stable social structure have been supplanted by a dynamic, contingent view of professionalism (Hanlon 1988).
2.2.4 Hybridized professionalism

The concept of ‘Hybridized professionalism’ is introduced by Noordegraaf (2007) in response to attacks on the legitimacy of professionalism. It opens up new possibilities for professional activity in both classic and contemporary occupational domains. This is done through re-imagining professional control where part of the professional role is to give contextual meaning to their work. This is illustrated here by use of an inverted continuum (see Fig 2.3 below). The professional operating closer to the point of equilibrium at the centre is likely to engage in more meaningful action.

On the left side of the continuum is ‘pure professionalism’ defined by Noordegraaf (2007) as being ‘about content or substance (knowledge, skills, experiences, ethics, and acts)’... it is about institutional control and discipline (associations, jurisdictions, knowledge transfer, codes of conduct, and supervision) used to shield occupational practices’ (Noordegraaf 2007: 768). It is primarily concerned with occupational control, a type of control that is increasingly difficult to hold onto for established professions or to define for emergent professions. At the opposite end of the spectrum is what Noordegraaf calls ‘situated professionalism’. This is where professionals ‘act as professionals but are embedded within organizational systems’ (ibid: 773). Professional activity and decision-making autonomy is limited by ‘considerations that focus on costs, efficiency, value for money, consumers’ demands, and so forth’ (ibid: 772). Professionalism is therefore defined by its organisational context, and in turn by the socio-political context within which the organisation is located.

At the centre of the continuum is ‘hybridized professionalism’ seen by Noordegraaff as not abandoning, but drawing on the occupational control of pure professionalism and the organisational control of situated professionalism. Through ‘reflexive control’ professionals actively seek ‘to establish meaningful connections between clients, work, and organized action’ (ibid: 780).
The same author goes on to identify means by which professionals can begin to claim control of meanings. The active participation in giving meaning to policy, practice, activity and outcomes have parallels to the approach to policy analysis through Enactment Theory espoused by Ball (2012) that views professionals (teachers) as actors in a policy enactment process rather than passive receivers of policy in its implementation. (This is a theme that will receive detailed attention when discussing policy later). Control of meaning is achieved according to Noordegraaf through the application of three key ingredients:

1. Linkages between work and organized action.
2. Mechanisms for legitimating work.
3. Searches for occupational identities.

(Noordegraaf, 2007: 779)

The combination of these ingredients leads to a ‘mixing-up’ of control. The term as used by Noordegraaf may connote increased confusion or lack of clarity regarding professionalism. Indeed he makes the point that ‘the fact that identities are hard to find explains the rather easy longing for business-like, measurable performance in newly developing professions in public domains’ (ibid: 280). However, a more positive view of the capacity of ‘Hybridised Professionalism’ to redefine and enhance professional endeavour is to see it as advancing ‘professionality’. This term is defined as ‘an ideologically-, attitudinally-, intellectually-, and epistemologically-based stance on the part of an individual, in relation to the practice of the profession to which s/he
belongs, and which influences her/his professional practice’ (Evans, 2002b, pp. 6-7). In its simplest form professionality is seen as a sense of ‘professional self-worth’ (Hoyle, 1975). The same author identifies two forms of professionality – restricted and extended (ibid: 318) with Evans locating these conceptualisations along a continuum ranging from professionals who are guided by a narrow, practical-based vision of their role (restricted) to those who are guided in their action by a broader theoretically and intellectually based vision (extended). Evans uses the term ‘professionality orientation’ to refer to individuals’ location on the ‘extended-restricted’ continuum (Evans, 2008:9). Evans locates professionality as an integral part of professionalism and so differs in emphasis from Noordegraaf’s hybridised professionalism. However, they both offer a stable conceptual platform on which contemporary professions, whether they are established or emergent, can base both their normative and functional boundaries.

2.2.5 Post-professionalism

The sociology of professions offers an alternative theoretical framework for the analysis of individual professions and the concepts of professionalism and professionalisation. Burns (2007) argues that post professionalism addresses the limitations of the dominant sociological approaches to understanding professions, both discussed above – the trait approach (Brandeis, 1914; Flexner, 1915; Cheetham and Chivers, 2005; Stratton and Mitstifer, 2012) and the power approach (Fournier, 1999; and to a lesser extent Noordegraaf, 2007). Despite its shortcomings, Burns notes the persistence of the trait approach as the ‘de facto model for professionals themselves’(pg. 70) and, of most relevance for this research of the emerging profession of Social Care, he describes it as ‘self-consciously used as a template by professionalising groups’ (ibid.). The same author goes on to provide a comprehensive argument to support his assertion that it is time for a new look at what professionalism is and how it is constructed. His main thesis concerns what has happened to existing professions – ‘commodification of expertise’; ‘the emergence of new professional claimant groups’; ‘expected attribution of professional qualities to new functions and roles’; ‘explicit commercialising dimensions of professional practice’; ‘shifting boundaries between professional and non-professional occupations’; ‘the multiple
professionalities within which modern people exist’; ‘new forms of lay informational resources’; ‘the feminisation of the professions’; ‘new technologies that alter the relativities of occupational power and skill within existing groups, and between groups’; ‘managerialism - compliance regimes quickly stultify productive professional performance’ (Burns, 2007: 73 – 76).

Burns does not view the ‘post’ in post-professionalism as a phase that comes after, and abandons an earlier one that focused on trait or power. Rather it is viewed as an approach that acknowledges those approaches but, in addition ‘investigates discourses, structures, as well as contexts and cultural milieux beyond the certainties of professions and professional goodness and competence’ (ibid: 94). An individual profession tends to focus on the impacting factors that bring about changes in relation to its practice, perception, identity, recognition and conceptualisation, indeed that are the focus of this research. Burns advocates that such studies are best accommodated within the post-professionalism perspective. He points to an example of how this perspective can assist analysis of professionalism that would otherwise be missed, namely Barton’s (2003) analysis of nineteenth century scientists. That study focused on the use of language as a distinguishing feature of professionalism in the context of the mid-Victorian scientific community who were at odds about who could speak with authority in their field. Of interest to the current study, Burns points out that ‘This focus on language and identity is characteristic of a post-professional approach influenced by post-structural and other recent perspectives’ (Burns, 2007: 88). Thus, positioning this research as a post-professional approach opens possibilities for discourse and analysis not catered for in traditional approaches.

2.3 Professional Identity Formation (PIF)

Professional Identity Formation may, according to Baxter (2011), be best understood by taking note of research on identity formation. She makes the point that ‘Studies exploring professional identities have drawn much from explorations of how individuals create personal identities under the most testing of circumstances: …the homeless… holocaust survivors… migrant communities’ (ibid: 37). This review of literature on Professional Identity and its formation will first give attention to personal identity formation and the concept of ‘self’.
Professional identity is not a stable entity according to Clarke et al (2013), but complex, personal, and shaped by contextual factors. Baxter (2011) agrees and cites discourses from the fields of psychology (Bandura, 1977; Erikson, 1975; Piaget, 1953), social policy (Ball, 1998 and Gewirtz et al 2008), philosophy ((M Foucault, 1980; Lyotard, 1984) as well as particular ideological perspectives including feminist (Davies & Thomas, 2001, 2003) and socio-political perspectives (Davies & Thomas, 2001, 2003; Öhlén & Segesten, 1998). All contribute to understanding identity formation and can offer useful insights into the contributing factors of professional identity formation. Before examining these strands in more detail, it is useful to note the ‘destination’ of Baxter’s conceptualization of PIF. She argues that professional identity needs to be conceptualized as being subjective in nature, linked to the evolving personal identity of the individual. This view is in line with that of Sachs (2001) who draws attention to the contextualized nature of professional identity. She quotes Kondo (1990) to emphasize this point: ‘In times of rapid change identity cannot be seen to be a fixed ‘thing’, it is negotiated, open, shifting, ambiguous, the result of culturally available meanings and the open-ended power-laden enactment of those meanings in everyday situations (Kondo, 1990 in Sachs, 2001: 154).

The evolutionary aspect of PIF is seen by Sachs as being reflected in Wenger’s (1998) five dimensions of identity: identity as negotiated experience, as community membership, as a learning trajectory, as a nexus of multi-membership and as a relation between the local and the global. These dimensions provide a broad framework within which to explore professional identity formation and guide us towards a constructivist stance because it recognizes the individual’s experience of the world as the starting point. They may also be seen as a useful ‘bridge’ between the personal and professional aspects of identity formation. Before crossing that bridge it is useful to spend some time on the ‘personal’ side of the bridge and to examine what could be considered the theoretical foundations on which Wenger and Lave’s (1991) Communities of Practice was built, namely Social Identity Theory (Tajfel, 1978, Hogg 2004).
2.3.1 Social Identity Theory – towards a theory of the ‘self’

Social Identity has been described as ‘a social psychological analysis of the role of self-conception in group membership, group processes and intergroup relations’ Hogg in Burke, (2006: 111). More simply put it presents an individual’s sense of who they are based on the group to which they belong. Rubin and Hewstone (2004) identify three central components of the theory first developed in the UK by Henri Tajfel (Tajfel, 1978; Tajfel and Turner 1979): the social-psychological component, the system component, and the societal component.

The ‘social-psychological component’ refers to the cognitive processes whereby the individual forms a self-conception based on shared identity with a group. The self-categorised ‘in-group’ consists of three or more people (Hogg, 2004) and employs various behaviour management strategies in order to promote in-group cohesion and to differentiate it from other groups – ‘outgroups’. Social Competition refers to the behaviour management system that defines intergroup relations. The ‘system component’ sets out the conditions under which social competition will or will not occur, (Rubin and Hewstone, 2004) such as the strength of a group’s boundary and its relative place within a broader system of groups in society. The societal component refers to the ‘social reality’ or wider societal context(s) within which intergroup relations and, by extension individual behaviour occurs. Social reality is made up of specific historical, cultural, economic and political influencing factors, and these both ‘contain and define’ (ibid. pg. 825) the groups and their relative status to other groups. When taken together, the three components of the theory may be viewed as co-dependent, each identifiable but existentially dependent on the others. But the core strength of the theory is expressed succinctly by Reicher et al, (2010) thus: ‘Social identity is therefore something that links us to the social world. It provides the pivot between the individual and society’, (in Wetherell and Mohanty, 2010: 45). This approach locates the ‘self’ within a social context and, in turn, raises the possibility of the ‘personal self’ (resulting from the individual defining themselves as distinct from other individuals) and the ‘collective self’ (resulting from defining oneself as being part of one group as distinct from another). The theory is concerned with the conditions
that are required, at individual, group of wider societal levels, for specific groupehaviours to occur.

A parallel approach is proposed by Identity Theory (Hogg and Adams, 1988; Stryker,
1980) where ‘the core of an identity is the categorization of the self as an occupant of
a role, and the incorporation, into the self, of the meanings and expectations
associated with that role and its performance’ (Stets and Burke, 2005: 225). Here
again, it is the social rather than the individual that is the reference point for behaviour
– the ‘self’ is to be found in relation to others. While both theories share a common
belief in the group as the primary former of identity, it is ones role (what one does
beyond merely being in a group) that is the basis for identity. Stets and Burke (2005)
argue that a more complete ‘theory of the self’ demands a merger of the two theories.
This would ‘yield a stronger social psychology that can attend to macro-, meso-, and
micro-level social processes’ (ibid. pg. 234), and thus provide a framework of analysis
of how group, role and personal identities overlap or even compete to give meaning to
human behaviour. It seems clear from a Social Identity theoretical perspective, that
the concepts of ‘professional self’ and ‘personal self’ cannot be wholly understood in
isolation from each other, and that both are defined and sustained in contexts other
than the individual.

Willetts and Clarke (2014) describe Social Identity Theory as having particular
significance in the context of understanding nursing professional identity. They point
to the relevant concepts of

   (i) ‘group belongingness as a consequence of the interpersonal–intergroup
continuum,
   (ii) group identity salience,
   (iii) the complexities of individuals and their multiple social identities,
   (iv) the situational relevance and subjectivity of these identities’ (ibid, pg. 5).

These researchers argue that the usefulness of S.I.T. is that it provides a framework in
which an accurate description of nursing work and its context can be held. This greater
clarity can then ‘give voice to the diversity of identities within nursing’ (ibid. pg. 4). The
diversity of identities is generated by the complexity of factors that impact on the daily
work tasks and professional contexts of nursing. Willets and Clarke set about their
laudable research objective, constructing nursing professional identity, by shifting focus from normative definitions and credentialing issues, towards prioritizing the ‘daily activities of nursing’ (ibid.). Their hope that by applying S.I.T to nursing contexts in order to provide descriptive clarity may be misplaced however. The strength of the theory is its comprehensiveness, its inclusiveness of context, of diverse and complex relationships at macro, meso and micro levels, and it’s bridge-building between the personal and the social, the individual and the group. This comprehensiveness is also its limitation. By its inclusivity, S.I.T. tends to be descriptive rather than analytical. Brauer (2005) acknowledges that Social Identity as a concept has been invented and reinvented in different theoretical frameworks and disciplines. She goes on to say that ‘As a consequence the term has acquired multiple different meanings in different disciplinary contexts’ (Pg. 480).

Social Identity Theory does offer a useful descriptive framework of what happens in the process of identity formation that can be applied to professional contexts. This allows researchers to identify, categorise and explore individual/group behaviour, however by concentrating on subjective experience, any conclusions about the professional identity that is formed is in danger of being so complex as to render it meaningless. In short, it may provide an overall theory of the ‘self’ without being able to distinguish a theory of the ‘professional self’.

2.3.2 Communities of practice and Professional Identity

The professional world is characterized by both prescribed and expected behaviours, relationships and boundaries. The traditional, normative features of professions, a body of knowledge, a code of conduct, professional autonomy and representation (Parsons, 1954; Abbott, 1988; Freidson, 2001 and others), reinforce these behaviours, relationships and boundaries. However, this structuralist view (Baxter, 2011) makes assumptions about the stability of the social, political and cultural contexts in which professions are located. Concepts of ‘pure and hybrid professional’ (Noordegraaf, 2007), ‘para professional’ (Baxter, 2011) ‘reprofessionalisation’ (Hafferty & Light 1995 cited in Baxter & Brumfitt, 2008) and ‘professional pluralism’ (Schon, 1983) reflect a shift towards a post-structuralist/post-modernist approach to understanding what professionalism means in contemporary contexts. This approach identifies threats to
the power and identity of professionals. It also demands greater internal action on the part of separate professional groups in the construction of their own professional identity.

As suggested by Sachs (2010), Wenger’s (1998) five dimensions of identity ‘are useful when thinking about professional identity’ (Sachs, 2010: 154). For Wenger (1998), identities, whether professional or personal, are constructed in the social context of a Community of Practice, which he saw as ‘important places of negotiation, learning, meaning, and identity’. The CoP is seen as a social learning system. Through participation and reification (the production of physical and conceptual artefacts) individuals produce social learning. Wenger (2012) explains that the emphasis on ‘social learning’ does not displace the person, in fact the person’s identity given its meaning through social participation. Fig 2.4 below traces the social process of identity formation.

Lave and Wenger (1991) defined a Community of Practice in more detail as ‘a system of relationships between people, activities, and the world; developing with time, and in relation to other tangential and overlapping communities of practice’ (pg. 98). It stands to reason that when ‘practice’ is associated with professional activity; it gives a specific meaning to a professional workplace ‘Community of Practice’.

However the definition of ‘Community of Practice’ offered by Lave and Wenger (see Fig 2.4 below) is noted as being very broad in comparison to their practical examples offered by way of illustration of how they exist in reality (Hodkinson and Hodkinson, 2004). Lave and Wenger are primarily concerned with learning in practice, (Seaman, 2008) rather than directly with identity formation. It has been noted (Seaman, 2008; Wenger, 1998, 2012) that an individual may belong to more than one CoP at the same time and it is this feature that limits its usefulness as an analytical tool for understanding Professional Identity Formation. (This is not seen as a weakness, as it is learning and development and not analysis that are the primary purpose of CoP’s.)
Fig 2.4: An application of Wenger’s (1998) five dimensions of identity*

<table>
<thead>
<tr>
<th>The Identity dimension…</th>
<th>… defines who I am…</th>
<th>…so that…</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identity as negotiated experiences</td>
<td>through participation as well as the way we and others reify ourselves</td>
<td>I can identify with a group (A Community of Practice – mutual engagement, joint enterprise and a shared repertoire.)</td>
</tr>
<tr>
<td>Identity as community membership</td>
<td>by the familiar and the unfamiliar</td>
<td>I can identify with a particular group (profession) as distinct from another.</td>
</tr>
<tr>
<td>Identity as learning trajectory</td>
<td>by where we have been and where we are going</td>
<td>I can identify and carry out recognized group roles and functions of that group/profession.</td>
</tr>
<tr>
<td>Identity as nexus of multi membership</td>
<td>by the ways we reconcile our various forms of identity into one identity</td>
<td>I can recognise my professional identity within my overall identity</td>
</tr>
<tr>
<td>Identity as a relation between the local and the global,</td>
<td>by negotiating local ways of belonging to broader constellations and manifesting broader styles and discourses,</td>
<td>I can identify what I have in common with broader under-standings of what my profession means.</td>
</tr>
</tbody>
</table>

*drawing on Sachs (1999)

However, a concern that goes to the heart of the concept of CoP is raised by Owen-Pugh (2002) when he observes that ‘It may be, however, that the pressurised setting of the modern workplace is not the most suitable environment for this approach to learning’ (Pg. 5). That ‘pressurised setting’ is also the location of professional identity formation, its analysis must consider the balance of Lave and Wenger’s ‘reconstructive and participatory approach’ (Hodkinson and Hodkinson, 2004) and externally and objectively recognized professional knowledge, skills and abilities.

### 2.3.3 Professional Identity Formation – an ontological approach

The simplest conceptualisation of PIF may be to see it as the formation of a professional identity. However two basic assumptions arise with this approach and both need to be interrogated. First is the assumption that an ‘agreed’ professional identity exists for a given profession that is stable and static; secondly, there is an
assumption that personal identity can be separated from, or co-located with professional identity.

Clouder et al, (2012) attempt to address both of these assumptions in their exploration of how inter-professional relations can promote an individual’s professional identity. They cite Jenkins (1996) view that ‘identity is a “synthesis” of (internal) self-definition and the (external) definitions of oneself offered by others’ (Clouder et al 2012: 459). In acknowledging this contribution to understanding the process of PIF, it is important to note that its application in the current context of an emerging profession is, by definition, limited. A greater degree of normative professional recognition would be required for analysis Social care PIF to be based on inter-professional work.

Clouder goes on to emphasise the importance of inter-professional work as a core component of professional identity formation, citing Lawler (2008) who describes PIF as a dynamic and fluid process of co-construction in a variety of social settings (in Clouder pg. 459). She introduces the concepts of ‘perforate boundaries’ and ‘possible selves’ (ibid) concluding that multiple selves can exist simultaneously. It is through a process of growing personal awareness in the multi-disciplinary professional context that an ‘inner cast of characters’ are formed that allow us to actively experiment with and ultimately create our professional identity. This approach is similar to that of Ibarra (1999) who proposes that ‘people construct their professional identity by first experimenting with trial identities, or “provisional selves,” before fully developing their professional identities’ (in Dobrow and Higgins, 2005: 569). A criticism of this emphasis on the subjective internalisation of experience as being the guiding force of PIF is addressed by Ohlen and Segesten (1998) who allow for a (nurses) professional identity that can be reflected in the nurse’s professional self-concept, but which is also based on the general public opinion of nurses. It is also worth noting that the employment context in which both the self and public concepts emerge are neither static or stable and hence ‘individuals are likely to build their careers in multiple organizations, occupations and industries’ … and so according to Higgins & Kram (2001) ‘cannot rely upon one single mentor, but rather must consider a network of “developers”’. 
Schien (1978) provides a certain ‘ballast’ of pre-existing principles in these choppy waters of a socially constructed professional identity sea. He sees professional identity as being formed on the principles, intentions, characteristics and experiences by which an individual defines him or herself in a professional role. Thus, he allows for both objective and subjective elements in PIF. The sources of the objective principles, professional intentions and characteristics might include recognised education and training programmes, (Social Care Awards Standards published by HETAC 2010 is an example); Professional Codes of Ethics (c.f. CORU, The Health and Social Care Professionals Council 2013 for a generic code for Health and Social Care Professions); Registration and Regulation, (CORU 2013; Teaching Council of Ireland, Health and Care Professions Council in England, The Scottish Social Services Council, Nursing and Midwifery Board Australia etc.). These constitute the visible curriculum that officially sets the agenda for how professional identity is defined for specific professions. However others point to an unofficial hidden curriculum of ‘professional socialisation’ (Haas and Shaffir, 1982; Weidman et al 2001; Becker et al, 1961). These authors give particular attention to the direct influence of those encountered in the immediate professional surroundings - “a process by which persons acquire the knowledge, skills and disposition that makes them more or less effective members (of a profession) … and a subconscious process whereby persons internalize behavioural norms and standards and form a sense of identify and commitment to a professional field” (Weidman et al 2001: 6). Professional socialization is seen as beginning prior to practice, in the education and training processes, and here too the ‘hidden curriculum’ is present. As Hafferty (1998) puts it, “a great deal of what is taught – and most of what is learned – in medical school takes place not within formal course offerings but within medicine’s ‘hidden curriculum’” (pg. 403)

For others (Apple, 1982; Lynch 1989) there are ideological forces at work in setting the ‘hidden curriculum’. Although their analysis is focused on the field of education, it needs to be acknowledged as valid when applied to the formal and informal ‘learning’ of how to be a professional. Indeed when viewed through a lens that recognises the pervasive force of a neo-liberal ideological hegemony, the five dimensions of professional socialization (commitment to the profession, loyalty to colleagues,
detachment and routinization toward work, knowledge and skills for competent judgements, and an external pretence of competence) identified by Haas and Shaffir (1977 & 1987) appear to merely scratch the surface of how professional identity is formed. The impact of political ideology on PIF of Social Care professionals is a theme will receive further attention later in this review of literature.

2.3.4 Developmental Networks and PIF

If professional socialisation is viewed as the actions and interactions in the workplace that promote the sense of professional self of the individual, then ‘Developmental Networks’ (Higgins and Kram, 2001) may be seen as the means by which people can establish their professional identity. The developmental network perspective suggests that ‘individuals gather both professional and psychosocial support from a number of people who may be connected to one another’. Before considering the approach further, it is worth noting that the implied assumption of a positive influence of professional identity is not universally shared. At a major conference on medical education in the U.S. in 2011 a core theme for the 4,000 delegates was the implications of PIF on Medical School education. The rationale of the theme was explained:

‘a student who starts out as an altruist, helper and authority figure, provided they have a good medical school experience will become a patient centered, helping and team leading physician with positive professional identity. A student who starts out as an altruist, helper and authority figure, provided they do not have a good medical school experience will become a doctor centered, reluctant helper and arrogant leader with negative professional identity’ (AAMC 2011)

In other words the development networks encountered by the student in medical school may have either a positive or negative effect on the individual student’s professional identity formation.

While Higgins and Kram (2001) or Dubrow and Higgins (2005) do not attempt to assess the ‘quality’ of the impact of development networks on PIF, (perhaps that could only be addressed by profession specific research), they do explain how the process of PIF occurs through development networks. Dubrow and Higgins (2005) propose that
development networks can be characterised in terms of range and density. Network
diversity is generally conceptualized either as: network range, the number of social
systems from which the network members come; or network density, the extent to
which the members of the network know and/or are connected to one another. Their
research showed that the lower the density – i.e. the less the members were
connected to, or knew one another the greater clarity the individual had of their own
professional identity.

They point to other research (Higgins, 2001; Higgins and Kram, 2001) that suggests
that clarity of professional identity also increases with a high range development
network (i.e. where members of the network are drawn from a number of sources –
e.g.: education, work, community etc.). This approach points towards the unlikely
possibility of an increased clarity about their professional identity amongst Social Care
Workers due to employment patterns that are characterised by high worker turnover
(Redmond et al, 2014) temporary, short-term contracts and agency work (Pillinger,
2011) that disperses their professional activity across a range or professional settings.

More generally their findings add credence to the view that ‘Existing professions
remake themselves; new groups also stake out territory and construct new
boundaries’ (Langley, 2010: 2). The same author recognises the ever-changing context
in which existing professions evolve and new professions emerge and points to
Baumann’s (2000) concept of ‘liquid modernity’ as an apt descriptor of this context.
Against that backdrop Langley (2010) argues that the (socially constructed) identities
of workers can be described as professionalism. This places much greater emphasis to
develop a capacity for ‘reflective practice’ (Schon, 1985) amongst professionals rather
than to rely on a ‘technical rational’ (ibid) approach in the establishment of their
professional identity. If PIF is an ongoing project and an intrinsic element of defining
what professionalism is, then it is vital to understand it occurs within specific
professions each with its own ‘regime of truth’ (Foucault, 1998). The concepts of
‘communities of practice’ and ‘development networks’ may be useful in bringing some
kind of order to a postmodern cacophony of competing influences on PIF and on how
professions emerge and evolve. A strong and shared sense of who one is as a
professional may provide a basis for a professional identity – defined as “the relatively
stable and enduring constellation of attributes, beliefs, values, motives, and experiences in terms of which people define themselves in a professional role” (Ibarra, 1999, pp. 764-765 in Dobrow and Higgins, 2005: 569). A subjective view of one’s professional role, task and purpose is not adequate; Haas and Shaffir (1982) point out that professional status has to be earned. The literature reviewed here suggests that once earned, professional status relies on a legitimacy that is earned not just from within, but from whatever audience, clients, ‘public’ or the state (ibid) that is crucial to that status. That practical implication of conceptualising PIF as a dynamic element in the establishment and maintenance of the professional status of any given profession is expressed clearly by Langley (2010) who recognises that, while power might be everywhere (Foucault, 1998) some powers have greater influence than others:

‘In revitalising a professional ethic of service against the ‘lurch to an ethic of performance’ we might rediscover the wisdom lost in the ‘knowledge’ of practical skills training, as emerging professionals transform their career structures and reconstruct their professional identities’ (Langley 2010: 2).

Professional identity, Professional Identity Formation and PIF of a particular profession are separate, but linked concepts. Together they are crucial to the establishment and development of professionals and professions.

2.3.5 New-to-Practice

Having considered the evolving conceptualization of professionalism, the focus here is on the initial period post qualification as the new-to-practice professional begins to find their feet in the professional world of work. This review of literature will examine a number of established models that provide a framework to track the movement from novice to expert (Benner, 1984; Dreyfuss and Dreyfuss, 1984; Rauner, 2007). Benner (1984), for example describes five levels of nursing experience as Novice, Advanced beginner, Competent, Proficient and Expert. These linear progression models assume that ‘expertise’ is: (a) definable; (b) the proper goal; and (c) reliant on practice as experienced. Dreyfuss and Dreyfuss (1984) go to some lengths to describe the traits of the ‘novice’, but their emphasis is on skill acquisitions that can be identified and measured in isolation. A more fluid progression is described by Rauner
Rauner’s core interest is the development of professional knowledge and he sees this as inseparable from the development of vocational skill expertise. Interestingly, he links the development of occupational competence with identity, and draws on Lave and Wenger’s (1991) concept of ‘community of practice’ as being central to the possibility of this development taking place. Rauner goes on to note a significant refinement on earlier ‘novice to expert’ development models by quoting Blankertz (1983) who says of the developing worker that ‘he must anticipate his specific occupational role and identity with it – otherwise no competence development would be feasible’ (pg.139 in Rauner 2007: 55). This is an acknowledgment of the impact of contextual factors within the occupational setting on the development of competence and identity of the individual worker. It would be a mistake therefore to assume that the ‘new-to-practice’ experience of professionals even within a single occupational field would be the same. However Rauner’s contribution points to the possibility of
discovering how ‘new-to-practice’ professionals learn and develop both competence and identity.

These models do not agree on specific time periods for the movement through the stages, however, their discussions do imply a period of years ranging from five to ten. Studies that focus on the transition from student to worker tend to identify a much shorter period of adjustment to professional work, with Draper et al (2010) exploring the first 3 – 6 months of qualified practice. Donnellan and Jack (2010) point to ‘a growing literature examining the impact of different models of nurse education on subsequent career development (e.g. Bartlett et al., 2000; Ross and Clifford, 2002; Maben et al., 2006; Mooney, 2007), and evaluations of the induction experiences of newly qualified teachers (Tickle, 1994; Parkinson and Pritchard, 2005)’ (pg.307) with the latter focusing on the first year of teaching.

The transition from higher education to work-life in other professional areas has been the subject of several studies over recent decades (e.g., Dahlgren, et al, 2006; Axelsson, 2008; Johansson et al, 2008; Johnston, 2003; Nilsson, 2007; Teichler, 1998). Other studies have focused on the progression from novice to expert, (Doel 2010; Clouder et al, 2011; S.S.S.C. 2008; Benner 1982). The focus of this research shares with these authors recognition of the professional state ‘new-to-practice’. However, rather than examining the process of advancing from novice to expert it seeks to take an in-depth look at the factors that influence how new practitioners establish professional identity during their early years of practice. The distinction made here is an important one because it is only through establishing a professional identity that one can begin to set a direction towards professional expertise. It is difficult to separate a view of newly qualified professionals as in a ‘state of new-to-practice’ from being on a ‘stage of professional evolution’. For example a 2011 study of Nursing graduates in the Republic of Ireland stated that ‘Although newly qualified nurses/midwives cannot be expected to function at the level of an experienced nurse/midwife, there is an expectation from both employers and new graduates that they need to be ‘practice ready’ to meet the requirements of the current healthcare setting’ (HSE 2011:8). The statement raises a number of questions: firstly, what is the difference between ‘practice ready’ and ‘experienced functioning’?; secondly, assuming that the inclusion of the word ‘current’
implies that changes occur in healthcare settings, how has the meaning of ‘practice ready’ changed over time?; and thirdly, by when and how is the newly qualified worker expected to transition to ‘experienced professional? Perhaps there is a question that underlies all these questions, namely, how does the newly qualified professional establish their own professional identity – now? An in-depth study of the role of the nurse professional (Allen 2001) identified fundamental changes in that profession. The changes were categorised under two broad headings - the place nursing occupies within the overall societal division of labour and the routine fluctuations of work boundaries experienced in the daily work setting - and were related to the occupational status of nursing in wider society. It could be argued therefore that being ‘practice ready’ now has a substantially different meaning for the new to practice nurse than it may have had for their more experienced colleagues and by extension the establishment of professional identity is impacted by a changed set of factors.

A useful transition model that recognizes both the state and position of ‘new-to-practice’ is provided by the Scottish Social Services Council (2008). Their model is based on seeing professional development as part of a ‘Continuous Learning Framework’ (SSSC, 2008:5). In it they describe four stages of professional progression: Engaged, Established, Accomplished and Exemplary, and describe the progression as cumulative (ibid, 19). This model is not aimed at a single profession as it acknowledges that ‘job roles across the social service sector are diverse (ibid: 19). However it is worth noting that the initial stage (most closely related to ‘new-to-practice), is entitled ‘Engaged’, a stage at which the worker is expected to:

(i) Demonstrate and awareness and understanding of capabilities and a commitment to developing it.
(ii) Demonstrate a capacity to continually improve.
(iii) Take responsibility for their own learning and be able to reflect on practice
(iv) Seek advice and support as required.

One attempt to theorize the experience of ‘new-to-practice’ is provided by Duchscher (2008) who developed a grounded theory that she named ‘The Stages of Transition
Theory’. The theory (graphically illustrated in Fig. 2.6 below) is based on researching the lived experience of newly graduated nurses.

Figure 2.6: ‘The Stages of Transition Theory’ Duchscher (2007)

Its author recognizes the challenges faced by new graduates ‘within social, economic, political, developmental, cultural, physical, professional and institutional (workplace and education) contexts’ (ibid, 2013). The focus is clearly on a transition process, implying that there is both a starting point and destination. The starting point is entry into the workplace, sometimes characterized, according to Duchscher, by Transition Shock, a state in which the newly qualified nurse experiences loss, disorientation, confusion and doubt. As the stages of transition proceed, through the first year of work, adjustment to the professional world takes place. The theory suggests ‘that allowing graduates time to adjust to what “is” within a context of support that allows them to develop their thinking and practice expertise will assist them to move through the stages of professional role transition’ (Duchscher, 2008: 449). The use of the term
‘what “is” suggests that there is a stable professional environment that, once ‘transitioned to’ is a predefined destination, a solid base for professional practice thereafter. So while the Stages of Transition Theory may provide a useful and articulate rationale for supporting new-to-practice nurse graduates, it fails to take account of the possibility that part of their dissonance may be connected to an inability to define their own professional identity, or to recognise the forces that control that identity.

2.3.6 Constructive Developmental Theory

The Duchscher approach is grounded in the lived experience of newly qualified nurses. By contrast the Constructive Developmental Theory proposed by Harvard professor Robert Kegan, is conceptually based. Kegan (1994) describes the theory as ‘a model of adult development based on the idea that human beings naturally progress over a lifetime through as many as five distinct stages’ (cited in Turknett and Turknett 2005:1). The theory has much in common with the classic stage theorists such as Piaget, Kohlberg, and Erickson, although because it focuses attention on adult development, it is more often located in Adult Learning literature. Whilst it shares some of the criticisms levied at other stage theorists, (e.g.: the exclusion of how culture, class, intelligence impacts on movement from one stage to the next), the theory is useful in that it provides a wider context in which to locate, and understand the state of ‘new-to-practice’ professional.

Kegan refers to his stages as ‘orders of the mind’ (in Brooks and Adams 2011) or as ‘balances’ (Kegan 1985). These stages and their characteristics are summarized in Fig. 2.7 below. The stages are not viewed as stepping stones but rather as part of a ‘Holarchy’ (Koestler, 1967) in which each new stage continues to contain the elements of the previous stage. Kegan contends that each stage (holon) has an associated subject/object relationship. ‘Subject’ refers to the elements of our experience that we are not in control of, and maybe not even aware of their impact on us; while ‘object’ refers to the elements of our experience that we are aware of and have control over. As adults, according to Kegan, we continue to develop more complex mental abilities, moving from one stage to the next by taking what we were once subject to and making it object (Pruryn, 2010). For the purposes of our present discussion it is notable that
for Kegan, identity emerges as ‘subject’ in stage four and as ‘object’ at stage five. This is where the ‘self-authored mind’ develops from being subject to its own identity to in a sense, being in control of it.

Fig. 2.7: Summary of Kegan’s Constructive Developmental Theory

<table>
<thead>
<tr>
<th>Stage and % of adult population 19-55 yrs.</th>
<th>‘Order of the mind’</th>
<th>‘Balances’</th>
<th>Characteristics of meaning-making</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (Child only)</td>
<td>Impulsive mind</td>
<td>The impulsive balance</td>
<td>The view of a small child that cannot distinguish the ‘self’ from the world around it.</td>
</tr>
<tr>
<td>2 13 – 36%</td>
<td>Instrumental mind</td>
<td>The imperial balance</td>
<td>Sense of ‘self’ but dominated by self-interest. A transactional approach that gives in order to receive.</td>
</tr>
<tr>
<td>3 43 – 46%</td>
<td>Socialised mind</td>
<td>The interpersonal balance</td>
<td>Can be self-reflective and empathetic and have a capacity to think in the abstract, but can be paralyzed by conflicting ideologies, institutions of people.</td>
</tr>
<tr>
<td>4 18 – 34%</td>
<td>Self-authoring mind</td>
<td>The institutional balance</td>
<td>Self-guided, self-motivated, self-evaluative, self-correcting (Berger, 2007). Critically aware of their surroundings; ability to be ideologically objective, emerging sense of identity.</td>
</tr>
<tr>
<td>5 3 – 6%</td>
<td>Self-transforming mind</td>
<td>The inter-individual balance</td>
<td>A level of self-awareness that allows deeper value-based connections to exist between ideological perspectives that conflict at surface level.</td>
</tr>
</tbody>
</table>

By combining both conceptualizations associated with each stage, the transformative nature of movement through the stages is captured. Kegan makes the point that people spend most of their lives in transition spaces between the stages in a continuous developmental process. His research claims to demonstrate that only a few people operate at a stage 5 level (3 – 6% of adults aged nineteen to fifty five according to Berger 2007), with most people located between stages 2 to 4 for most of their lives.
The theory raises two questions about how the Stages of Transition model (Duchscher, 2007) is generalizable across graduate nurses who may be at different stages of Constructive Development (Kegan, 1985). Firstly, as both nurse graduate age and ‘order of the mind’ age are variable, it would be difficult to measure the impact of one on the other, or indeed to identify a causal relationship either way? Secondly, if only a few people ever reach Kegan’s ‘stage five’, is it reasonable to expect a professional self-identity to emerge for the majority of the population who have not reached that level of mental complexity? Adams and Brooks (2011) discuss the implications of Kegan’s theoretical approach for the support of professional teachers. They propose that the reality of ‘moving from one level of subjectivity to another is painful, chaotic, and often associated with a crisis event in the person’s life’ (ibid. pg. 13). The comfort and security of what was once held as a belief or conviction by the individual is left behind in a transition as new understandings emerge from a new level of meaning-making. This process can be both liberating and frightening at the same time and may be a source of other feelings such as guilt (for abandoning previous convictions), grief (at the loss of security), and disorientation (when faced with new ways of thinking).

The same authors go on to refer to the central claim of Kegan’s book *Over our Heads* (1994) as ‘the impossibility of requiring adults to work, think, and perform from a fourth order ability level if they have only achieved third order development’ (ibid. pg. 14). They conclude that this has profound implications for both the education and training, and for the continuing professional development of teachers. ‘In light of this theory, it is therefore a bit unrealistic to expect a 20-year old to bring a critical perspective to the institutions that are still shaping her (ibid. pg.14).

That conclusion applies equally to ‘new-to-practice’ professional Social Care Workers. In fact it impacts on the conceptualisation of ‘new-to-practice’ itself. No longer can it be considered simply as an early stage of professional life, but as a more complex psychological interaction between the professional and the personal. Perhaps most of all, it provides a broader base from which to consider and understand the experiences of newly qualified professionals.
2.4 Social Care as a profession: Irish and international contexts.

The Social Care profession is described by the Irish Association of Social Care Educators (IASCE) as one that is ‘committed to the planning and delivery of quality care and other support services for individuals and groups with identified needs’ (Share and Lalor 2009: 9). It is useful to note that the professional titles used when referring to this kind of professional activity across mainland Europe, ‘Social Pedagogue’ (Hämäläinen, 2003, 2012), (Kronen, 1980), (Lorenz, 2006), (Cameron and Moss 2011) and ‘Social Educateur’ (Muriel, 1973; Kronbeck and Rosendal, 2011) reflect a similar continuous, supportive professional relationship between worker and service user, and are engaged in similar trajectories towards professional recognition.

2.4.1 The emergence of a profession

The Health and Social Care Professionals Act was passed in the Republic of Ireland in 2005, with ‘Social Care Worker’ listed amongst twelve Health and Social Care professions under its Council’s (CORU) regulatory remit. The Joint Committee on Social Care Professionals sought to bring clarity to what was meant by Social Care. The committee’s aim was to assist government and employers in the sector to recognise Social Care practice and practitioners in the professional work context. They defined social care as:

‘the professional provision of care, protection, support, welfare and advocacy for vulnerable or dependent clients, individually or in groups. This is achieved through the planning and evaluation of individualised and group programmes of care, which are based on needs, identified where possible in consultation with the client and delivered through day to day shared life experiences. All interventions are based on established best practice and in-depth knowledge of lifespan development’ (JCSCP in Lalor and Share 2009:8).

The element within this definition that distinguishes Social Care as a profession, separate from other social or ‘helping professions’ (Hawkins and Shohet, 2007; Glicken, 2005 and others), is its delivery through ‘day to day shared life experiences’. This section draws on Irish and international literature to examine Social Care as an emerging profession, firstly in the broader sense of ‘professionalising’ care through a
‘process of legitimation’ (Cant and Sharma, 1995) and secondly, by tracing the process of establishing professional Social Care as a distinct registered and regulated profession. Welsh et al (2004) point out that studies of the professionalization process tend to focus on two aspects, ‘1) the establishment of ‘professional dominance’ whereby the state grants a ‘quasi-monopoly’ to the occupation, often through granting statutory regulation, and 2) the securing of ‘consulting status’ whereby the groups work to gain the support of and use of their services by the public’ (pg. 217). Their focus was the path towards professional status for Complementary Medical Practitioners within the wider established multidisciplinary professional health field, and their approach, provides a useful framework for examining the parallel journey of Social Care Workers within the wider ‘Allied Health and Social Care’ (Govt. of Ireland, 2005; HSE, 2009) professional field.

Before examining the route towards the professionalization of Social Care in Ireland, the concept of ‘caring’ is explored from cultural, sociological and political perspectives. This approach provides a base from which to consider the implications of professionalizing ‘caring’, which in turn identifies some of the challenges for a profession that contains within it a caring relationship as a central tenet.

2.4.2 The concept of ‘Caring’

Writing in 1995, Fahey identifies a challenge for Social Care activity being recognized as a professional endeavour by pointing out that ‘the bulk of social care is provided in the informal economy by family members, it is not subject to the usual economic or administrative measurement and is difficult to incorporate in policy analysis’ (pg. 63). That view raises a question about the difference if any (other than payment) between caring provided by professionals and that provided by family members or other non-professional providers. Indeed Sapountzi-Krepia et al (2013) reinforce the commonalities between the two by describing ‘caring’ as a universal phenomenon, ‘rooted in the primitive societies where women cared for children and other dependent members of the family’ (pg. 393). The same authors go on to say that despite the universality of the concept, there is little evidence of a universally accepted definition of what caring is. Swanson (1991) provides a useful definition that views ‘caring’ as a “nurturing way of relating to a valued other toward whom one feels a
personal sense of commitment and responsibility” (pp. 165). Kyle (1995) cites Leininger’s anthropological observation that ‘human caring is a universal phenomenon, but the expressions, processes and patterns of caring vary among cultures’ (in Kyle, 1995: 307); while Griffin (1983) views the concept of caring as fundamental to our understanding of the human condition. The implication of both of these perspectives is that when one begins to consider locating care within a professional context, there is a strong requirement for ‘cultural competence’ (Du Bois and Miley 2008).

Pinquart and Sörensen (2005 cited in Bryant and Lim, 2013) argue that western culture ‘places higher emphasis on individualism, whereas the eastern approach to care-giving emphasizes collectivism or placing family welfare ahead of one’s personal interest’ (pg. 1402). The concept of caring based on ‘filial piety’ - the traditional cultural obligation towards elderly parents (Bryand and Lim, 2013) is a clear example of why a universal definition of ‘caring’ is so elusive. These authors go on to identify that under Confucianism, providing for the material needs is not enough; there is also a requirement for respect and courtesy. The family, as the basic unit in society is the site where care is provided and where values on which that care is based are fostered and transmitted. The concept of ‘ren’ draws together the values and practice of caring in Chinese culture. That is not to say that ‘caring’ in western culture lacks a value base. Caring, according to McCann (1997) is a profound human quality that ‘depends on the motivation that lies behind an individual’s thoughts, attitudes, or acts of caring’ (pg. 7). The same author also gives attention to the ‘individualistic age’ that provides a cultural context in western developed economies and without politicizing care points out that ‘caring can be an antidote to this existing philosophy which underlies the lifestyle of many’ (pg. 8). Like McCann, Lynch and McLaughlin (1995) make a distinction between ‘caring about and ‘caring for’. The latter ‘can be commodified and that this is in fact a booming industry’ (Kennedy, 2004: 83). This perspective edges us closer to caring as Social Capital and Social Cohesion (Bourdieu, 1986; Putman, 2000 and others) and as later refined by Lynch (2007) who distinguishes between caring as ‘nurture capital’ and ‘emotional capital’. This is a theme that will be returned to when examining Social Care in political ideological and policy contexts.
‘The concept of caring ... has both an activities and an attitudes aspect’ (Griffin 1983: 289). In a literary meta-analysis of how ‘caring’ is conceptualized, Swanson (1999) develops her ‘middle-range theory of caring’. She goes on to explain that caring ‘is comprised of five caring processes each with multiple subcategories. The caring processes are maintaining belief, knowing, being with, doing for, and enabling’ (Swanson, 1993). She argues that ‘When referring to the concept of caring, there is a need to be clear about whether the discourse is about the capacity for caring, the concerns and commitments that underlie caring, conditions that inhibit or enhance caring, caring actions or the consequences of caring’ (Swanson, 1999: 56). This is in line with McCann’s conceptualization of caring. After making a simple statement ‘Caring is a difficult word to define’ she identifies its essential qualities with a series of short statements:

- **The foundation of care is respect.**
- **There is a gift quality to caring.**
- **Caring calls for sensitivity.**
- **Sensitivity needs to be coupled with understanding.**
- **Caring necessitates a healthy blend of head and heart which results in insight.**
- **Caring requires creativity.**
- **Another quality necessary for caring [is] courage.**
- **Caring embodies an important healing dimension.**
- **Caring has an enabling and facilitative dimension.**
- **Caring is about liberation.**

(McCann 1995: 12 – 19)

This collective locates caring as a deeply human and personal activity. According to Rundkvist et al (2011) the word ‘caring’ evolves from the Latin concept of Caritas, which involves an offer of altruistic love by one person to another. The same authors identify close connections between caritas and basic spiritual values and in particular, Christian values of ‘motherliness, charity and regular communion with God’ (pg. 38). Their motivation here is not evangelical, but rather to suggest that the full meaning of caring is to be found in the inner belief system and moral outlook of the individual caring person. Watson’s (1985) ‘Theory of Caring’ also emphasizes the personal dimension of caring and sees the caring relationship as part of what it is to be human. A concept so closely aligned with the human condition challenges theorists and philosophers who seek a tangible definition. Riose and Phillips (2010) identify several
theorists/philosophers (Gendron, 1994; Brink, 1993; Watson, 1981, Peplau, 1988) who draw analogous comparisons between caring and art. Their common aim is to try to capture ontology of caring as art that consists of both process and product. The ‘art of caring’ is seen as accommodating both emotion and action. It is useful to note Schon’s (1987) notion of ‘artistry’ as a form of professional expertise based on skilled practice and deliberate reflection, as one that unites product and process, emotion and action in the professional context.

In reviewing the literature on the concept of ‘caring’, considerable attention is given to its place within a wider professional role – Nursing and Health Care professions, Counselling, Teaching, Social Work. To extend Rolfe’s (2009) suggestion that ‘there is a need to continue to use the term caring … keeping alive the several different and contradictory meanings that it simultaneously signifies’ (in Rose and Phillips, 2010: 49), one could argue that all human service professions require the suffix ‘care’ attached in order to reflect their true vocational nature. The next section of this review briefly examines ‘professional care’ before focusing on one of the few professions that contains the word ‘care’ in its title – Social Care.

2.4.3 Professional care valued?

As can be seen in the literature reviewed above, ‘care’ and ‘caring’ are contested concepts. As Lyon (2006) points out, at its broadest level caring is about looking after those who cannot look after themselves. The same author draws on literature for its distinguishing characteristics – a labour of love (Graham, 2001), a duty/obligation (Quershi, 1996), moral orientation (Joan 1993). A question arises about the extent to which these characteristics transcend both personal and professional caring. O’Toole (2009) grapples with this question and identifies two difficulties. Firstly she draws on Fink’s (2004) view that there are inconsistencies in how the term is understood ‘with variables including who undertakes the care, and who receives it’ as well as their relationship; secondly, she notes that further distinctions emerge between paid and unpaid care, formal and informal care and between public and private care provision. It could be argued that where these variables and distinctions exist, they assist in clarifying the type of caring being undertaken/received; however they avoid a more basic question – what is professional caring?
Daly and Lewis (2000) trace the evolution of care as a concept from its initial domestic location, as unpaid personal services usually provided by women within a social structure that recognised and reinforces gender and social roles. They identify the strong gendered characteristic of care provision as it moves into the public (and paid) sphere. The gendered nature of care work ‘is largely a result of constructions of femininity that see caring as an innate female quality’ (O'Toole, 2009: 143).

However this does not mean that there was a simple replacement of unpaid, domestic, family orientated care with paid professional care work. Quinn in Fanning and Rush (2006) recognises the complex relationship that exists between paid and unpaid care-giving and care-receiving. She notes that most people find themselves being cared for and caring for family members in the course of their lives and quotes Bythewaty and Johnson’s (1998) observation that care ‘research and practice might be more effective if it were based on the assumption that all people are involved in a multiplicity of activities relating to care’ (in Fanning and Rush, 2006: 180). Indeed, familial background and life experience that are personally challenging have been identified as impacting on social work career choice Russell et al., 1993; Rompf and Royse, 1994).

Daly and Lewis (2000) note that ‘Across nations and over time within them, care giving has shifted between the realms of paid and unpaid work, a movement that has never been solidly in one direction’ (pg. 284). This view is confirmed by Rose and Phillips (2010) who recognise the role of carers as ‘people who provide unpaid care to a relative, friend or neighbour who is in need of support...who supplement the professional care services’ (Pg. 48). The extent to which unpaid care replaces paid for care and the extent to which paid for professional care is replaced by paid for (cheaper) non-professional care are ideologically and economically-based considerations that will be examined in a later section.

A feature of all care paid or unpaid, professional or lay, is that it contributes to what Bourdieu (1986) called ‘Social Capital’. This refers to the social networks and norms of reciprocity (Putman, 2004) that enable individuals to contribute to and receive from wider society. ‘The volume of the social capital possessed by a given agent ... depends on the size of the network of connections he can effectively mobilize and on the volume of the capital (economic, cultural or symbolic) possessed in his own right by
each of those to whom he is connected’ (Bourdieu, 1986: 247). In the context of ‘the influence of the global wave of marketisation in recent years’ (Meagher and Szebehely, 2013: 1) and of ‘commodification of care practices’ (Hochschild, 1983; Fischer, 2009; Simmonds 2010), the connection between the value of care as both social and economic capital is more difficult to untangle. It could be argued therefore, that the value of professional care to society, mediated through state agency transactions, leaves those furthest from the ‘centre’ even more vulnerable because of their inability, and the inability of those who professionally provide their care, to effectively mobilize a network of connections. This is evidenced by the disproportionate reduction in state investment in community support networks (see Harvey, 2012 and 2013), described by O’Doherty (2006) as ‘the most familiar and ubiquitous forms of social capital – networks, norms and trust’ (pg. 36).

2.4.4 Professional Care values

In her discussion on caring professions, McCann (1997) does not take for granted that ‘care’ is always present. The reason for her doubt is based on an emphasis within professional training on academic excellence. While she is not dismissing the role of, or need for, knowledge in professional care practice, her critique points to a more fundamental question: Are ‘professional’ and ‘care’ mutually exclusive, or at least contradictory terms? Basset (2004) in discussing care in the professional nursing context suggests that the relatively modern concepts of ‘professionalism’ and ‘career’ are not really compatible with that of vocation or calling. The same author provides a useful review of research on caring as a core element of nursing practice. In doing so, she reproduces Swansons (1991), somewhat rhetorical questions about caring:

1. Is caring a process observable only in the context of two people relating?
2. Is it embedded in the behaviour of a caregiver?
3. Or is it a perception identifiable only through the eyes of a caregiver?
4. Can caring be taught?
5. Is it a moral ideal?
6. Or is it a way of being in the world?
A number of these questions have already been considered in our present discussion relating to the overall concept of caring, but, when applied in the professional care context, they take on a more holistic nature. In other words, the answer to one question requires another to be asked (and answered). Leininger, in Bassett (2004), attempts to distinguish between ‘Generic care’ and ‘Professional caring’. The former she defines as ‘those assisting, supportive, or facilitative acts toward or for another individual or group with evident or anticipated needs to ameliorate or improve a human condition or life way’; the latter as ‘those cognitively learned humanistic and scientific modes of helping or enabling an individual, family, or community to receive personalised services’ (Pg. 14)

Whilst many of the leading writers on Nurse Care reviewed by Bassett, (Swansons, 1991; Morse 1991; Leininger, 1977; Castledine, 1998) share a view that nursing and care are synonymous, there often appears in the literature a nuance that caring appears as being extrinsic to the work of the individual nurse. For example caring is seen as something ‘that will stimulate you to carry on your work’ (Bassett, 2004: 15); ‘Caring is something special; it is a process, a way of relating to someone’ (Castledine, 1998 in Bassett, 2004: 15); caring is a complex phenomenon involving more than a set of caring behaviours (Kyle in ibid). A similar ambivalence about the place of care within professional activity is expressed by Braye and Preston-Shoot in Trevithick (2000) who ask: ‘Does helping others imply that as practitioners we are stuck in ‘compulsive caregiving’ (Pg. 3). Furthermore, ‘Providing care’ is just one in a list of fifty generalist practice and interventional skills of Social Work provided by the same author. Teven and McCroskey (1997) discuss caring in teaching and conclude that it is probably best that teachers ‘care’ but that what is most important is that this care is ‘percieved’ by the students. ‘If a teacher cares deeply, but does not communicate that care, they might as well not care at all’ (ibid pg. 167).

It appears that care and caring are as resistant to definition in the professional context as they are in general. However three linked themes emerge: firstly, caregiving/caring appears in the relationship between the giver and receiver of care; secondly, care becomes visible through value-led behaviours; thirdly, the professional caregiver needs to be conscious of the impact of their caregiving on others and on themselves.
Caring behaviours in nursing, such as giving comfort, empathy, compassion, and sharing are identified by Leininger (1981); the concept of ‘perceived care’ identified by McCroskey (1997) draws the caring behaviours and values to a central place in the professional/’client’ relationship; the ethical and moral value of caring for students is emphasised by Noddings (1998); and team based care is seen to require five core values – honesty, discipline, creativity, humility and curiosity by Mitchell et al (2012), again drawing together values, behaviours and interpersonal engagement. The sum of these elements points to the vocational aspect of professions that care. However there is disagreement in the literature around the impact of engaging in caring on the individual professional. Sutton and Wheatley (2003), in reviewing studies on caring and teaching, point out that teachers who care more may be more prone to feeling emotional exhaustion and that this is connected both to their efficacy as teachers and to their motivation to continue in the profession. Contrary evidence is provided by Rundqvist et al (2011) who conclude from their investigation into the place of caring in the nursing profession that where there is a lack of opportunity for professional nurses to connect with their deeper humanity (their caring selves), then there is a risk of them leaving the profession because their vision of nurse care is curtailed. Perhaps what unites these divergent views is a question about the (monitory) value placed on (ethical and moral) values in caring professions. A searing answer is presented as follows: ‘Empathy is often described as central in professions with lower salaries (e.g. nursing, primary care or child care), as if there were an inverse relationship between intensity of caring and financial reward’ (Eisler, 2007 in Brezis 2009). In tracing the development of Social Care towards professional status, the next section remains cognizant of how ‘care’, as value-based behaviour, as relationship and as process, has made the ontological transition from generic to professional context.

2.4.5 The historical development of Social Care in Ireland

Providing a useful summary of the history of Social Care in the Republic of Ireland, Share (2009) begins with the statement ‘In order to understand what social care is, it is important to understand where it has come from’ (pg. 12). This section confines itself to telling the story of the development of the profession as a distinct area of professional activity, but in doing so, it recognizes the broader historical, social and
political influences that provide a context for who cares for whom... and how. Those influences, named by O’Sullivan (2009) in relation to Child Care policy and provision in Ireland, are equally applicable to Social Care in general. They are:

(i) The changing role and status of religious Congregations,
(ii) Changing perceptions of the status and rights of children,
(iii) The changing structure of the family,
(iv) The economic environment and the level of funding available for child welfare,
(v) The political will for prioritising child welfare,
(vi) Shifting forms of governance at national and local level.

(Based on O’Sullivan, 2009)

The impact of such broader influences on the provision of care also impact on how those involved in that provision are viewed (and perhaps view themselves). For example, a concept of professionalization that relates to the ways by which community development, and related practices, is seen by Meade (2012) as having ‘been imbued with the politics of expert knowledge, how they are situated within a distinct and highly specialised “social sphere”, and how they appeal to consciously “rational” forms of intervention’ (Pg. 890). The evolving conceptualizations of ‘profession’ and ‘professional’ and of ‘care’ have been examined earlier; the next section will deal with the policy context into which the social care profession is born and takes its first breaths. Any response to O’Sullivan’s (2006) rallying cry that ‘we are now at the stage in our understanding of the social sphere to move out of the historical straitjacket that shaped the social policy/care/work in Ireland’ (pg. xiv), should also heed Meade’s (2012) warning regarding Community Development Work, that ‘further professionalisation is a risky strategy, not least because the neoliberal dogmas of managerialism and market relevance actively undermine professional authority and independence’ (Pg. 906).

The ‘story’ of the development towards professionalization of Social Care in the Republic of Ireland is generally acknowledged as having its roots in Child Care (Share, 2009; Howard, 2013; Courtney, 2012; McSweeney, 2011). Those authors and others
note that beginning in the 1970’s there was a convergence of state interest in deficiencies in that area of care provision. The fact that child care and social care was historically provided by the Catholic and other churches is noted by Fanning and Rush (2006) and more vividly apparent through Howard’s (2013) description of early meetings of the Irish Association of Social Care Workers (then known as the Association of Workers with Children in Care) in the 1970’s: ‘...a sea of black...nearly all its members were religious priests, brothers or nuns...a meeting in 1976 there were forty-three religious named – and three others’ (pg. 12). That description is presented as factual rather than judgemental, but gives credence to Share’s (2009) contention that ‘any attempt to sketch out a history of social care practice in Ireland inevitably results in a strong emphasis on this institutional context’ (pg. 12).

Fig 2.8 below identifies key events and development points on the journey towards statutory recognition of Social Care as a profession in the Republic of Ireland. The table draws together the key developments identified in the various historical accounts of the development of Social Care in Ireland (Share, 2005, 2009, 2013; Howard, 2011, 2013; O’Doherty, 2006; Fanning and Rush 2006; Quinn and Redmond 2006). The table is illustrative rather than exhaustive. For example, there are a number of sectors other than disability and Child Care in which Social Care Workers practice.

‘Social Care Practitioners may work, for example with children and adolescents in residential care; people with learning or physical disabilities; people who are homeless; people with alcohol/drug dependency; families in community; older people; recent immigrants to Ireland and others’ (CORU, 2013).

Policy developments and shifts within the Irish mixed economy of welfare, and in the politics of care, demographic change, care provision, responsibility to care and economics (Fanning and Rush, 2006), combine to impact on how professional activity is defined and practiced.
### Fig. 2.8 Development of Social Care as a profession in a policy context

<table>
<thead>
<tr>
<th>Year</th>
<th>Report/Policy Development</th>
<th>Year</th>
<th>Development of Social Care profession</th>
</tr>
</thead>
<tbody>
<tr>
<td>1967 – 1970</td>
<td>The Kennedy Report (Committee on Reformatory and Industrial Schools)</td>
<td>1971</td>
<td>Kilkenny School of Social Education founded</td>
</tr>
<tr>
<td>1970</td>
<td>The Health Act</td>
<td>1972</td>
<td>CARE (Campaign for deprived children) founded,</td>
</tr>
<tr>
<td>1975</td>
<td>Interim Report of the Committee on Mentally Ill and Maladjusted Persons – (Henchy Committee Report)</td>
<td>1978</td>
<td>Athlone Papers, following a seminar on residential care</td>
</tr>
<tr>
<td>1980</td>
<td>Task Force on Child Care Services</td>
<td>1981</td>
<td>UN International Year of the Disabled</td>
</tr>
<tr>
<td>1982</td>
<td>Irish Association of Care Workers founded</td>
<td>1984</td>
<td>Green Paper on Services for Disabled People</td>
</tr>
<tr>
<td>1988</td>
<td>Irish Association of Social Care Workers Code of Ethics published.</td>
<td>1991</td>
<td>Child Care Act</td>
</tr>
<tr>
<td>1991</td>
<td>Open Training College Social Care (Disabilities) course established</td>
<td>1992</td>
<td>The Madonna House Inquiry was set up</td>
</tr>
<tr>
<td>1993</td>
<td>Report on Caring and Social Studies (NCEA)</td>
<td>1993</td>
<td>The Kilkenny Incest Report</td>
</tr>
<tr>
<td>1996</td>
<td>Irish Association of Social Care Educators founded</td>
<td>1996</td>
<td>Kelly Fitzgerald Report</td>
</tr>
<tr>
<td>1997</td>
<td>Labour Court recommended that the salary scale for social care workers should be significantly increased.</td>
<td>1996</td>
<td>Standards in Residential Centres and Guide to Good Practice</td>
</tr>
<tr>
<td>1997</td>
<td>Report of the Commission on the Status of People with Disabilities</td>
<td>1997</td>
<td>Links with Irish Social Care Educators and FESET, the European Association of Training Centres for Socio-Educational Care Work</td>
</tr>
<tr>
<td>1998</td>
<td>Building a future together - report of the Establishment Committee</td>
<td>1998</td>
<td>Irish Association of Social Care Educators founded</td>
</tr>
<tr>
<td>1998</td>
<td>West of Ireland Farmer case (McColgan Report)</td>
<td>1999</td>
<td>Irish Social Services Inspectorate</td>
</tr>
<tr>
<td>2000</td>
<td>National Disability Authority established</td>
<td>2000</td>
<td>NCEA Working Group on Social Care</td>
</tr>
<tr>
<td>2004</td>
<td>National Disability Strategy</td>
<td>2002</td>
<td>Nationwide provision of Social Care programmes (16 third level colleges/institutes)</td>
</tr>
<tr>
<td>2005</td>
<td>Disability Act</td>
<td>2005</td>
<td>Health &amp; Social Care Professionals Act</td>
</tr>
<tr>
<td>2007</td>
<td>Health Act</td>
<td>2007</td>
<td>CORU (Health and Social Care Professionals Council) established</td>
</tr>
<tr>
<td>2009</td>
<td>The Charities Act</td>
<td>2010</td>
<td>HETAC Awards Standards for Social Care Work pu</td>
</tr>
</tbody>
</table>
When the ‘timeline’ is set out in parallel with evolving policy developments in the provision of the two specific sectors focused on here (care for children and for people with disabilities), it is interesting to note (a) the impetus for the establishment of a distinct and recognised professional practice, (b) the nature of that practice is strongly influenced by wider policy activity, and (c) the contrasting policy events between the sectors – reactive and corrective in relation to Child Care versus proactive and developmental in the area of disabilities.

2.4.6 What’s in a name?

Garfat and McElwee (2003) explored ‘title designations’ used in the broad Social Care field and found that ‘a number of government and voluntary agencies continue to fail to differentiate between those who work with what we have termed ‘vulnerable populations’ as Social Care Practitioners and those who work with 'normal/adjusted children' in a day care setting as Child Care Workers’ (pg. 9). Furthermore, while there is greater ‘brand recognition’ in the field and amongst the general public, there are still a wide variety of job titles in existence that identify Social Care as the core professional competency required: Care Worker, Support Worker, Rehabilitation Assistant, Home Support Worker, Community Child Care Worker, Community Care Support Worker, Health Care Assistant all advertised under ‘Social Care’ on Irishjobs.ie (May 2014) while a major recruiting company in the Health and Social Care field include Homeless Support Worker, Outreach/ Family Support Workers, Access Workers and Refuge Workers, as Social Care job opportunities (May 2014). It is anticipated that registration and regulation will bring clarity and coherence in relation to the title of Social Care as a profession in Ireland; however, the use of the term ‘Social Care Practitioner’ under the heading ‘Social Care Worker’ by CORU in its brief description of the profession (CORU, 2013) suggests that further work is needed in this area.

2.4.7 An elusive profession

The move to statutory registration of Social Care Workers may also have the effect of bringing greater clarity to the number of Social Care professionals than is currently the case in Ireland. Various estimates exist, with attempts to provide statistical data often prefixed with the qualification that definitive numbers are difficult to ascertain. The
most recent data on Social Care numbers is contained in Survey of the Research Activity, Skills and Training Needs of Health and Social Care Professionals (HSCPs) In Ireland (McHugh and Byrne, 2014). Their sample comprised of 1,325 individuals representing 8.4% of the 15,844 HSCPs working ‘in our health service’ (pg. viii). They identify a broad spectrum of professionals that includes Social Care Workers. Their list extends to twenty-five professions in total, which is more than double the number included under the auspices of CORU, the statutory health regulator in Ireland. The number of Social Care Workers is put at 3,075, a number drawn from the Health Service Personnel Census Report (HSE, 2013). There are two main limitations with regard to the accuracy of this number. Firstly the grade category descriptions (Fig 2.9), two of which relate to professional Social Care Work, are not reflected in the Social Care Worker number.

**Fig. 2.9 Professional Category Descriptions**

<table>
<thead>
<tr>
<th>Health and Social Care Professionals</th>
<th>Other Patient and Client Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Health and Social Care Professional grade category should be defined as Health and Social Care Professional personnel together with Health and Social Care Professional managerial grades where a recognized Health and Social Care Professional qualification is a prerequisite for the performance of the duties involved or is required for appointment</td>
<td></td>
</tr>
<tr>
<td>Personnel who provide direct client care and assist Medical, Nursing and Health Care Professionals to perform their clinical duties. Staff who provide a management or supervisory role for such personnel. A qualification may or may not be a requirement depending on the grade.</td>
<td></td>
</tr>
</tbody>
</table>

Secondly, the study identifies its sample of Health and Social Care personnel through

*‘an email ... sent to Health Service Executive (HSE) Internal Communications who forwarded ... onto all HSE staff. The email was also sent onto the chairs of HSCP professional bodies and Managers Group for distribution, as well as a range of HSE-funded organisations’ (McHugh & Byrne, 2014: vii).*

This limits the contact with Social Care Workers to those directly employed by the HSE, plus HSE funded organisations and those who responded to professional bodies and Managers Groups invitation to participate. The latter three groups yielded 38 voluntary agencies, 10 of which were hospitals and the remainder distributed amongst
17 separate voluntary agencies. When set against the scale (HIQA, 2013) of designated Residential Centres falling under the monitoring remit of the Health Information and Quality Authority, (565 for Older People, 88 providers and an estimated 1250 designated centres for Adults and Children with disabilities, and 38 Children’s Residential Centres), it becomes clear that the Social Care Worker population of 3,075 is a gross underestimation. It may be noted that while the Health Service Personnel Census Report (HSE, 2013) calculated that there were 2,310 Social Workers, the Minister for Health, in response to a Dail question in May 2014 reported that 3,156 Social Workers had registered with CORU with a further 388 applicants being processed.

According to Lalor (2009), the Trade Union, IMPACT ‘guesstimates a total of 3000-5000 members who work as Social Care Workers’ (pg. 1)... and ‘the Health and Social Care Professional Council guesstimates that some 8000 people will be eligible to register with the statutory Social Care Workers Registration Board when it is established’ (ibid). According to Lalor (2009), in an audit of social care student numbers undertaken between January and March 2009 reveals that “16 providers presently have a total of 4198 registered students. Of these, 1303 will graduate with Level 7 or Level 8 professional social care qualifications in June 2009” (pg. 2). He points to the dramatic increase in the numbers of graduates compared to approximately 500 graduates in 2002.

Appendix 3 of the HSE (2009) report The Education and Development of Health and Social Care Professionals in the Health Services sets out the current courses available for the education of individuals to enter the 12 Health and Social Care Professions in Ireland. It identifies 23 degree programmes offered across 13 third level institutions aimed at a Social Care qualification. It includes the table (Fig 2.10, below) indicating the annual intake of students for each of the professions. Lalor (2009), in an audit of social care student numbers undertaken between January and March 2009 reveals that “16 providers presently have a total of 4198 registered students. Of these, 1303 will graduate with Level 7 or Level 8 professional social care qualifications in June 2009” (pg. 2). He points to the dramatic increase in the numbers of graduates compared to approximately 500 graduates in 2002.
**Fig 2.10: Number of student places annually per profession (source HSE 2009)**

<table>
<thead>
<tr>
<th>Profession</th>
<th>No. of student places annually</th>
<th>Clinical Placement component to programme</th>
<th>Student places expressed as a % of WTE* per profession</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Biochemistry</td>
<td></td>
<td>Not at undergraduate level</td>
<td>N/A</td>
</tr>
<tr>
<td>Dietitian</td>
<td>21</td>
<td>Yes</td>
<td>5.26</td>
</tr>
<tr>
<td>Medical Scientist</td>
<td>97</td>
<td>Yes</td>
<td>5.12</td>
</tr>
<tr>
<td>Occupational Therapist</td>
<td>120</td>
<td>Yes</td>
<td>11.49</td>
</tr>
<tr>
<td>Orthoptist</td>
<td>No courses in Ireland</td>
<td>Yes</td>
<td>N/A</td>
</tr>
<tr>
<td>Physiotherapist</td>
<td>152</td>
<td>Yes</td>
<td>10.63</td>
</tr>
<tr>
<td>Podiatrist</td>
<td>25</td>
<td>Yes</td>
<td>78.12</td>
</tr>
<tr>
<td>Psychologist</td>
<td>34</td>
<td>(Clinical Psychology)</td>
<td>4.8</td>
</tr>
<tr>
<td>Radiographer</td>
<td>40</td>
<td>Yes</td>
<td>4.8</td>
</tr>
<tr>
<td>Radiation Therapist</td>
<td>30</td>
<td>Yes</td>
<td>4.09</td>
</tr>
<tr>
<td>Social Care Worker</td>
<td>1000 approx.</td>
<td>Yes</td>
<td>29.36</td>
</tr>
<tr>
<td>Social Worker</td>
<td>200</td>
<td>Yes</td>
<td>9.03</td>
</tr>
<tr>
<td>Speech and Language Therapist</td>
<td>105</td>
<td>Yes</td>
<td>14.28</td>
</tr>
</tbody>
</table>

(*WTE = whole time equivalent)

The most notable statistic here is the number of Social Care graduates per year. A quick calculation suggests that the entire professional workforce could be replaced by new graduates within a 3-6 year period. A closer examination of the figures provided in the HSE report shows that the average ratio of graduates to professional personnel (excluding Podiatrist) is 9.4%. The figure of 29.36% for Social Care represents a strong deviation from this mean. If the guesstimate of CORU in relation to the Social Care professional population (8,000 personnel) were to be accepted then the student/professional ratio 12.5% would be within the deviation range for all professions.

The same table (above) records that clinical placement is a requirement of all the training and education programmes. The ‘Awards Standards for Social Care’ (QQI, 2010) require that ‘The expected cumulative volume of all assessed (social care work) practice placement opportunities in, for example, a typical Bachelor Degree Programme (NFQ Level 7) in Professional Social care is normally 800 hours or more’
Although Gilmore (2012) acknowledges a shortage in relevant Social Care placements offering appropriate student supervision, there is nothing in the literature of monitoring documentation to suggest that social care students are not completing their programmes because they cannot secure clinical placement. Using Lalor’s 2009 figures (an updated audit for 2010/11 was compiled by Courtney (2012) and revealed an increase in the overall figure to 4631), it is possible to estimate, given that all colleges require two or more placements (Courtney, 2012), that over 2,000 clinical placements are completed in an academic year. Whilst much is written about the importance of clinical placements in Social Care training (Gilmore, 2012; Doyle and Lalor, 2013 and others); and significant efforts have been made to articulate the essential components of practice placements (IASCE, 2009 & 2011; QQI, 2010), there is little research on the quality of the placement as a learning and professional development experience. The numbers alone indicate that there is a significant challenge within the emerging profession to ensure conformity and consistency in the education and training of Social Care Workers. Lalor (2009) expressed a concern about the oversupply of graduates in the Social care sector. However in the wider European context Howat et al (2011) state that ‘in the context of health and social care, significant growth is projected up to 2020 and it is also a sector expected to experience significant replacement demand due to an ageing workforce’ (pg. 85).

**2.4.8 The international perspective**

Social Care is the only one of the Health and Social Care professions that fall under the auspices of CORU not to have a ‘Competent Authority’ under Directive 2005/36/EC, a directive that facilitates and monitors the mobility of professions between EU countries. A search of that directive’s database of regulated professions reveals that Social Pedagogue, Social Worker and Child Care Worker/Educateur are named.

Social Care has emerged as a separate profession, distinct from Social Work in the Irish context. Lalor and Share (2009) acknowledge that Social Care and Social Work have ‘considerable areas of commonality’ (p. 10) and in the UK ‘the two professions overlap to a much greater degree’ (ibid) than in Ireland. They go on to explain that in the Irish context, ‘a major difference between social care practice and social work lies in the work orientation’ (ibid p.11). They distinguish between the role of the
Social Care worker as being focused on a direct person to person engagement in a day to day living space, while the Social Worker focuses on case-management, assessment, referral and review. In Australia there is no distinction made between Social Work and Social Care as is seen in this description of ‘typical Social Work services by the Australian Medicare Local Alliance (AML Alliance):

- ‘Personal and family counselling or therapies and group work
- Service information and facilitated referral or linking to relevant services
- Service coordination or care management
- Advocacy with individuals, families and particularly people experiencing social disadvantage’ (AML Alliance, 2013: 28).

In a paper that examines the economic factors associated with the professionalization of what he terms ‘Child and Youth Care’, Grupper (2003) notes an international trend towards professional status where ‘European countries are taking the lead, considerable progress has also been made in Canada, USA, Australia, England, Ireland, Scotland, Israel, South Africa and a few other places’ (pg. 271). He identifies the proliferation of both generic and specific education and training courses across 15 European countries, ‘the graduates being a large number of qualified social educators developed a unique professional identity. These people implemented their professional know-how in a large variety of services in community-based programs and in residential homes’ (pg. 272).

Numerous authors (Lalor and Share, 2009, 2013; O’ Connor, 2006; Keogh, 2007; Smith, 2009) discuss Social Care within a wider European context. The term is used interchangeably with those of ‘Social Pedagogue’ and ‘Social Educateur’. The definition below illustrates the close linkage with the emerging Social Care profession in Ireland:

“Social Pedagogues aim to develop the personality and the social maturation of individuals in difficulty: they do so via activities or situations which they share with these persons, either within an institution or an agency, or within the framework of their daily lives, by interacting with the persons concerned
as well as their milieu” (Wery and Jezierski 1989: 10) (Translation: Kornbeck and Radermaecker).

The same elements (empowerment of vulnerable people, shared life space, and awareness of structural context) appear in this definition as they did in the definition of Social Care Worker offered by the Irish Joint Committee on Social Care Professionals included earlier in this chapter. The term ‘pedagogy’ itself needs to be approached with caution as it has different meanings in different contexts (and countries). Cameron and Petries (2011) note that for English speakers, pedagogy relates to formal education at all levels. They go on to explain that Social Pedagogy as used in many continental European countries ‘has a different meaning, with three distinct but related areas: policy, practice and theory’ (pg. 5). The first definition of social pedagogy according to Hallstedt and Högström (2005) was based on Natorp’s (1904) philosophical view of man and society that was meant to permeate the educational system. So, in common with Social Care in Ireland, its roots were located in the realm of the care and education of children. Again, similar to the evolution of Irish Social Care, Social Pedagogy has developed a broader remit. The same authors borrow Eriksson and Markström’s (2000) characterisation of contemporary Social Pedagogy as being upheld by three pillars:

1. the continental version... aiming at fostering and upbringing of children and youth
2. influenced by community work, social mobilisation, empowerment of groups
3. and lastly the American version of social work, the case-work method, built upon a medical diagnosis-treatment evaluation model.

In their transnational study of the broad professional area of social care and education work, Hallstedt and Högström (2005) describe social pedagogical activities that ‘are based on help and assistance to people in need. The activities are emancipating, aiming at mobilisation of human resources’ (pg.13-14). The same authors attempt to construct a framework that captures the essential elements of professional Social Pedagogy/Social Education/Social Care. They identify the following as a means towards producing a definition:
• close work with people in difficult situations;
• the relation between clients and social educational workers is the key factor to the understanding of the outcome of the work;
• the success of the process is also a function of linguistic skills, logical thinking and other competences of the social educational work;
• has to have a distinct goal and methods attached to it;
• can promote social integration through supporting the clients to developing a competence to forming their own lives.

Their emphasis on the relationship between the professional worker and the receiver of care is implied in the previous definitions (Wery and Jezierski, 1989 and JCSCP, 2005), but here are central to all professional activity. Camron and Petrie (2011) identify how that relationship is defined and maintained by ‘sharing the living space’ (Pg. 6). By sharing the living space, Social Pedagogues try to remove a ‘them and us’ distance between worker and child or adult receiver of care. The emphasis is on dialogue, inclusivity, empowerment and creativity. The concept of ‘the Common Third’ is described by the same authors as referring to ‘a mutual focus and the medium in which relationships are formed…. Creative activities… everyday tasks and sometimes just playing and having fun together’ (ibid). Attempts to capture the essence of Social Pedagogy present a challenge to its recognition as a profession. Rosendal Jensen, (2013) suggest that ‘many things in social pedagogical work are explained with airy terms such as ‘relationship’, ‘person’, ‘moment’, etc.’ and that what may be called ‘professional degeneration’ can occur ‘if one gives up trying to find explanations as to what it is exactly that works for whom, where and how’ (ibid: 6). It is worth noting here the appropriateness of a post-professional approach (Burns, 2007; Barton, 2003) in analysing this profession, one that reflects a wider sociological phenomenon and ‘removes the restrictive vision that traditional trait sociology of professions absorbed from functionalist theorising’ (Burns, 2007: 70).

It is difficult to examine the traits and evolution of a profession in isolation from its policy context. Daly and Lewis (2000) locate the profession in the wider socio-political context, at ‘the intersection of public and private (in the sense of both state/family and state/market provision); formal and informal; paid and unpaid...’ (pg. 281). By locating the profession in this wider policy context the next section explores questions about
the influence of marketization (Ball 1994; Dillon and Maguire, 2001; Brennan et al 2012) and a neo-liberalist policy hegemony (Gandin and Apple 2012; Angus 2012) on the definition and understanding of what Social Care Work currently is and is expected to be in the future.

2.5 The Professional Project and the Public Policy context

‘With no consensus on what the term Allied Health encompasses, key decision-makers ... are often unaware of the impact of their decisions on Allied Health, or the role of Allied Health in healthcare planning’ (AML, 2013: ii). This view ignores the deliberate, rational, ideologically-based policy choices made by governments and statutory bodies within a globalised context dominated by neo-liberal hegemony. For the purposes of this research, a position is taken that the development and definition of Social Care Work in Ireland is influenced by wider policy factors, established on a global stage, but enacted at national and ultimately local level. The ‘kind of’ profession that is established may have less to do with evidence-based best practice or a deepening understanding of the needs of vulnerable adult and child service-users, than with a national interpretation of a neo-liberal, managerialist, global ideological climate. Just as global climate change can impact differently on local contexts, the global ideological climate can be experienced differently at local level. This analogy can be continued to characterize a paralysis or helplessness that can occur at local level in the face of a seemingly all-encompassing global force. For example, while there is ‘optimism and broad acceptance of the overall philosophy of Evidence-based Practice’ (Swinkels et al, 2002: 335), a different picture emerges when McDonald (2003) locates ‘evidence-based practice’ within the ‘broader developments in Social Work, all of which are attempting to respond to contemporary conditions’ (pg. 125).

2.5.1 Policy and Power

One of the challenges in discussing Public Policy is defining its parameters – where to begin and where to end. Dye’s (1972) definition: ‘Whatever governments choose to do or not to do...’ (pg. 18), at first sight seems not to offer much help. However on further consideration it reveals that, firstly, Public Policy concerns the activity of government
and therefore who governs; secondly, it points towards issues of political ideology and value systems by stating that governments choose what policies to pursue (albeit in the current economic climate, questions have been raised about both government sovereignty and legitimacy); and thirdly, the ‘to do or not to do’ element of the definition raises core issues in relation to public policy, namely, timing, reactiveness (policy developed in reaction to an event or situation) or pro-activeness (policy developed in anticipation of an event or situation). Brooks (1989) captures this notion of what public policy is by stating that ‘Public policy is the broad framework of ideas and values within which decisions are taken and action, or inaction, is pursued by governments in relation to some issue or problem...’ (Brooks, 1989: 16). His emphasis on ‘ideas and values’ raises questions about their source, which in turn prompts consideration of power and control (Foucault) and cultural capital (Bourdieu). The latter concept is explored with reference to the Irish policy context by Fanning (2004) who argues that liberalism and Catholicism have ‘long been ideological bedfellows within the processes of modernization, nation-building and social reproduction that have moulded Irish social policy and social citizenship’ (Fanning in Fanning et al 2004:6). He goes on to point out that ‘it is the former, in the guise of neo-liberalism that now appear to be hogging the bedclothes’ (ibid: pg.6). It is hardly surprising then that current policy directions in Ireland are exposed to the white heat of global neo-liberalist dominance.

The pervasiveness of the dominant hegemony has been forcibly expressed by Apple as ‘the conservative restoration’ (Apple, 2006), and although his discussion is primarily focused on education and schooling, it is applicable to a broader view of what education includes. For the purpose of this discussion Social Care in the Irish context can be aligned with ‘Social Education’ and ‘Social Pedagogy’ from the mainland European context as discussed earlier. Apple traces the powerful alliance, achieved through compromise, of neo-liberals, neo-conservatives, authoritarian populist religious conservatives and the managerial middle class. His introduction of each element of this ‘hegemonic bloc’ (Apple, 2001: iii) is worth noting. Firstly, neoliberals are described in simple terms as seeing private as good and public as bad. They see education as existing within and serving a globalised marketplace. The second group,
the neo-conservatives, has a cultural rather than economic agenda. They are ‘deeply committed to establishing tighter mechanisms of control over knowledge, morals, and values through national or state curricula and national or state mandated (and very reductive) testing’ (ibid: iv). That control emphasizes a view of what is considered (by those in control) as being proper curriculum content. The Authoritarian Populist Religious Conservatives are the third group in the alliance. They are described by Apple as emphasizing a ‘return to God and Godliness’. Their aim is to exclude socially liberal ideas from the curriculum. The final group is the Middle Class Managerialists who bring their technical expertise to the educational table. They are more concerned with achieving professional status through the employment of their technical abilities of testing, management and auditing, than they are with what they are testing, managing or auditing. Treanor (2005) argues that ‘Neoliberalism is not simply an economic structure, it is a philosophy’ that not only promotes the free market, but sees the market as the context within which society exists rather than the other way around.

Apple described the ‘brilliance’ of the right as being its ability to change the meanings of key terms; the term remains the same but the meaning is fundamentally different. This raises a fundamental question about Social Care, namely: when immersed in the dye of neoliberalism does it emerge simply with a colour change or is its very nature as a profession altered? Hill (2012) is in no doubt. He describes ‘Immiseration Capitalism’ that causes social dislocation and ultimately social collapse and misery. He identifies an unambiguous response – anger against the misery caused must be followed by analysis, not just any analysis, but Marxist class based analysis. This in turn needs to be followed by activism. Such strategic activism is aimed at ‘reconstruction of the social apparatuses of the state, such as education, within the context of and as part of the wider revolutionary socialist and democratic reconstruction of the economy, society and polity’ (Hill 2012: 36). When applied to the emerging profession of Social Care in the Irish context it could be argued that without an existing professional reference point, as would be the case for established professions with a long historical legacy, that it is particularly vulnerable to becoming a ‘pet’ professional project of the state who define it from within the restrictions of their own ideological strait-jacket. A number of authors have attempted to formulate approaches that might begin to
challenge, (or at least provide shelter from) the scorching effects of neoliberalism and new managerialism.

2.5.2 Ideology and the definition of a profession

Tranter (2005) provides a useful summary of how the dominant hegemony impacts on the lived practice and professional identity of further education teachers and then, drawing on the findings of an ESRC (2005) funded study - Changing Teaching and Managerial Cultures in FE (cf. Gleeson, 2005), he goes on to identify possible forces of resistance to this dominant ideological hegemony. In examining these, it is not difficult to draw parallels with similar trends in the Social Care sector: firstly, its over-prescriptive nature introduces new forms of control over teachers, seen elsewhere as a trend towards ‘proceduralisation and commodification of the social work labour process’ Harris (1998 in Kirkpatrick, 2006); secondly, the re-definition of quality from one based on process to outcome. This is evidenced in the Social Care sector in this quote from a HSE/Comptroller and Auditor General 2005 Report on the ‘Provision of Disability Services by Non-profit Organisations’ where it is recommended that ‘Business and work plans which will respond to the identified need in specific and measurable terms, in the context of stated policy and resource availability – requiring a strategic and operational management capacity’ (pg. 34); thirdly, increased monitoring and surveillance of teachers through internal and external control mechanisms: Kirkpatrick (2005) associates new-managerialism with ‘controlling the front-line’ where professionals’ decision-making is more constrained and controlled; and fourthly, the reconstruction of student as customer; and McLaughlin (2008) when discussing labels used in social care provision, notes that “Customers”... ‘signified a marketization of social care wherein welfare was a commodity for the customer’ (pg. 1104). It appears from this line of argument that a profession, and in this case Social Care, is not solely responsible for the construction of its own identity. The ‘professionalization project’, that is, ‘the complex process by which those in the occupation of social care practice, or other interested stakeholders, have sought its recognition as a profession’ (Share in Share and Lalor, 2009: 58) suggests a common goal amongst those involved. However, as Share goes on to point out, ‘the social professions in general are very much determined by the activities and structures of the contemporary welfare state’ (ibid: 1104).
It may therefore be argued that, irrespective of the internal self-identity of Social Care Practitioners, it is likely that those in positions of power set the agenda for what those practitioners do within their professional role and how they do it. This tension is captured by Randle and Brady (1997 in Tranter 2005) who argue that ‘although teaching in FE is being deskilled and de-professionalised, teachers retain a commitment to ‘public service’ values of altruism and teacher autonomy that are fundamentally opposed to managerialism’ (pg. 1). Thus the question seems to be about the extent to which Social Care Workers are equipped to engage in professional self-determination that is not based solely on carrying out activities as directed by those in positions of power.

This review of literature now considers two theoretical lenses and two practice approaches that offer perspectives on how the Social Care practitioner can move towards being accepted as ‘an independent, autonomous professional’ (Lalor and Share, 2009: 20). However it should be noted that all share a holism that demands both action from theory and analysis from practice.

2.5.3 Reflexive Social Care and ‘Policy Practice’

Social Care professionals work in ‘The swampy lowlands, where situations are confusing messes incapable of technical solution and usually involve problems of greatest human concern’ (Schön 1983, pg. 42). Schön was not just referring to social care or social work practice when he identified this complex terrain; it is, as he sees it, the nature of all professional practice that uncertainty abounds and the definitive answers to questions that arise in practice are best responded to through the accumulated experience of the practitioner who has reflected on previous practice encounters. In other words, science without experience is inadequate. He advocated the use of critical reflection to bridge the theory-practice gap and saw critical reflection as the producer of evidence equal in value to that produced by scientific experiment and research. Bolton (2001) summarised the reflective practice approach of Schön as being ‘about a willingness to subject every action and thought both to reflection in action and self-respectful effective reflection upon action’ (pg. 15). The same author emphasises the latter in her book entitled ‘Reflective Practice: writing and professional development’ and describes this as ‘a considering of events afterwards so
that practice can effectively be enhanced’ (ibid). In a chapter entitled ‘Social-care Practice: Bringing Structure and Ideology in from the Cold’, O’Connor (2006) argues that although policy and practice are both taught to social care students, ‘the approach in most cases has been to treat them as almost mutually exclusive’ (in O’Connor and Murphy, 2006:85). He develops his argument by pointing to a professional emphasis on the individual and their dependant relationship with the Social Care Worker. If one combines the focus on practice events espoused by Bolton’s view of Reflective Practice with O’Connor’s belief that there is a strong emphasis in individualised therapeutic relationships within the Social Care professional field, then there is little space for consideration of structural factors and how they impact on both the presenting need and the professional response to that need. The ‘learning from practice’ approach that is supported and enabled by ‘Reflective Practice’ is dependent on what one sees as legitimate practice activity in the first place.

2.5.4 Social Work and Social Care – separate identities?

Whilst O’Connor makes a strong case for ‘Policy Practice’ (Janson, 2005) or a ‘Person in environment perspective’ (Kondrat, 2008 and others) similar to the Frierean ‘radical action’ approach articulated in ‘Pedagogy of the Oppressed’ (1970), Share and Lalor draw on the work of Anglin (2001) to illustrate a difference in professional orientation between Social Work and Social Care in the Irish context. These differences are set out in Fig 2.11 below and reflect a particularly Irish distinction. They could be summarised as Social Work being concerned with the individual in the context of their environment while Social Care Work is engaged with the immediate presenting needs of the individual.

**Fig 2.11 Social Care v Social Work**

<table>
<thead>
<tr>
<th>Social Work focuses on</th>
<th>Social Care focuses on</th>
</tr>
</thead>
<tbody>
<tr>
<td>the social and community networks</td>
<td>individual and interpersonal dynamics</td>
</tr>
<tr>
<td>social problems</td>
<td>human development</td>
</tr>
<tr>
<td>organisations and policies</td>
<td>people and relationships</td>
</tr>
<tr>
<td>knowing about children and families</td>
<td>living and working with them</td>
</tr>
<tr>
<td>a wide variety of societal groups/issue</td>
<td>the needs of children and youth</td>
</tr>
<tr>
<td>problem solving</td>
<td>the helping and growth process</td>
</tr>
<tr>
<td>gaining power and societal influence</td>
<td>gaining self-awareness and personal growth.</td>
</tr>
</tbody>
</table>
There is little evidence as to the extent that these inclinations provide a clear line of demarcation between the professions. Anglin himself admits to them being based on impressions rather than realities. Furthermore a study of Social Work in Israel (Weiss-Gal, 2008) reveals that ‘Although the person-in-environment approach is reflected in the respondents' views of the goals and the fitting activities of the profession, it is hardly evident in their day-to-day work’ (ibid. pg. 72). Questions about the congruence between espoused professional values, ideologies and activities are at the very heart of this current research project.

In truth, the bridge between structural and therapeutic approaches allows for two-way traffic. Clarke (2012) sets out pointers towards the ‘concientisation’ (Friere, 1970) of Social Care education and practice. This approach demands a shift in emphasis from an ‘individual/therapeutic’ approach, to a ‘social/emancipatory’ one. Due to the generic and holistic nature of Social Care (IASCE in Share and Lalor, 2009), it is more appropriate to view these professional orientations as points on a continuum rather than as oppositional or mutually exclusive. Clarke’s pointers are inclusive in nature, taking account of the individual, and context as the determinants of a therapeutic response:

- Determining the effect of social policy, through analysis, assessment, and implementation;
- Linking direct services to social reform efforts through both systems theory and person-in-environment approaches;
- Understanding how organizational policies set the scope and limits of practice;
- Participating directly in the policymaking process at all levels through action steps;
- Increasing social and economic justice in resource distribution in the social environment. (Clarke 2012: 16)

From the point of view of professional identity, there is a repositioning of Social Care from a reflective to a reflexive profession. Ixer (2010) defines reflexivity as ‘a form of turning back on oneself to see what is within but also outwardly facing as a form of
social interaction’ (pg. 84). Etherington (2004) points out that critical reflexivity involves awareness of how our thoughts and feelings, our culture and environment as well as our social and personal history inform our dialogue with others in our professional lives. In other words, reflexivity is not just about the ‘what’ of our professional activity, but also takes account of ‘the who?’, ‘the when?’, ‘the where?’ and ‘the why?’ Furthermore, these elements of reflexivity are interrelated and interactive. They do not operate in a linear fashion and are not isolated or insulated from one another. Reflexivity, therefore, does not yield a finite story; it is an evolving ‘living’ and dynamic revelation that can present insights to assist in professional development.

Claims that Social Care, as a caring profession, should possess a reflexive element have not gone uncontested. Porter (2007) summarises the debate as it arose concerning whether sociology was an appropriate subject for nursing students’ education and training or more broadly put, whether sociology is a core part of nursing knowledge. He explains that the debate revolves around how nursing should be conceptualized: as ‘a practical occupation, requiring only straightforward, practical knowledge’ … or as involving ‘social interaction, requiring reflexive knowledge about the nature of interaction’ (pg. 28). Other questions were raised about the capacity of nurses to discern which elements of sociological theory could be relied upon as providing sound guidance for professional decisions. Similar questions apply to the Social Care profession as a whole but also to the individual Social Care professional in the context of their daily work.

2.5.5 Phronetic Social Science – re-locating Social Care

The Competency-based approach pressurises the education and training institutions to organise their professional programmes, both in terms of content and assessment along ‘technical rational’ (Schon 1983) grounds with an emphasis on training rather than on education. Here it is worth noting that, as we have seen earlier, normative definitions of professionalism (Brandeis, 1914; Stratton and Mitstifer, 2012) place ‘education and training’ as an essential element of attaining professional status. Although contemporary approaches to understanding professionalism are more dynamic and contingent (Hanlon, 1988), recent developments towards statutory
registration and regulation of Social Care and other allied health professions have brought renewed focus on education and training admission requirements. The Awards Standards for Social Care (HETAC, 2010) provide a basis for what education and training courses should contain. They are expressed as ‘knowledge, skills and competencies’ where competency is further subdivided into sub-strands that address context, role, learning to learn and insight (pgs. 5 – 7). Whilst there is a clearly expressed intent as to what should be contained in each of these sub strands, no attention is given as to how this learning should take place (or to how such learning should be measured as having occurred). This deficit is not unique to these Award Standards. Flyvbjerg (2004) discusses Phronesis, an Aristotelian concept that refers to an intellectual virtue or type of knowledge that sits alongside technical skill (techne) and scientific knowledge (episteme). He notes that

‘Whereas episteme is found in the modern words ‘epistemology’ and ‘epistemic’, and techne in ‘technology’ and ‘technical’, it is indicative of the degree to which scientific and instrumental rationality dominate modern thinking and language that there is no modern word that similarly incorporates the classical word ..., phronesis, which Aristotle ..., saw as a necessary condition of successful social organization, and as its most important prerequisite’ (ibid: 285).

Phronesis is seen as ‘practical wisdom’ and provides a conceptual blueprint for an approach to teaching and learning that is particularly suitable for professional development. Applied to Social Care education and training it could provide a useful bridge between the content of training programmes and how that content is engaged with by its teachers and learners. The phronetic starting point is to ask a set of questions:

1. ‘Where are we going?’
2. Who gains and who loses, and by which mechanisms of power?
3. Is this development desirable?
4. What, if anything, should we do about it?’ (ibid: 290)

It is clear that ‘context’ is central to this approach in a similar way to how Ball’s Enactment Theory emphasises the real world impact on understanding policy. What
both approaches share is the strong emphasis on the locale as the generation point for knowledge and insight. And while neither applies their approach specifically to Social Care as a profession, both offer a useful framework in which to locate a profession that emphasises engagement with practical action and decision-making in ‘day to day shared life experiences’ (JCSCP in Lalor and Share 2013). All the definitions of Social Care Work looked at earlier in this review make reference to three influencing factors: the immediate environment, the policy context, and the theoretical base. The professional worker needs to be aware of these influences as they engage with the practical action and decision-making. The term ‘with practical action and decision-making’ rather than ‘in practical action and decision-making’ reflects an empowerment approach that supports the client’s independent living. In order to create and maintain this kind of therapeutic space, the worker needs to possess knowledge and skill, but most of all a practical wisdom (phronesis) that both guides practice and enables professional reflexivity.

According to Hanlon (2009), ‘Social care education and practice must appreciate both the individual existential experience of care as well as the structural and institutional nature of oppression’ (pg. 13/14). However, its education and training settings are not immune to the neo-liberal ideological hegemony. Jones and Moore (1995) argue that ‘The competency model has been constructed not because it is good to think with but because it is good to use within the very particular policy context in which it has been active over recent years’ (pg. 84). Their argument continues in Issit (1999) that such an approach to education and training is aimed at producing a functional professional with a predictable and controllable set of competencies, who will be less likely (and less capable) of questioning the structures and promoters of the controlling ideology that ‘extols the virtues of the market’ (Issit, 1999: 9). The rhetoric of the Social Care Awards Standards (2010) would appear to contradict this view of the education and training institutions that adhere to them. However those institutions themselves operate in a context that promotes performativity and are held within a framework of quality assurance that is output driven and business orientated. Hoffman (2004) also explores the relationship between a dominant ideology and social relations as reproducing and re-enforcing existing inequalities and power relations in society that
favour ‘the haves over the have-nots, men over women, the conventional over the dissenting, the dominant over the subordinate’ (Hoffmann 2004 in Macris 2011: 21).

Any attempt to understand identity formation of new professionals, and particularly those who are part of an emerging profession must take account of the complex interplay between policy and practice, between education and competency, and between role and identity.

2.6 Theoretical Framework

So far this Literature Review has sought to critically examine the theoretical base that underpins the key concepts of the research topic, namely, Professional Identity Formation (PIF), Social Care Work and New-to-Practice. In doing so, the discussion provides a conceptual framework that allows for deeper analysis of the data. In discussing entrepreneurship research, Lindgren and Packendorff (2009) make the argument that ‘Concepts, methodologies and outcomes of … research are linked to hidden and taken-for-granted views of reality, knowledge and ideology’ (pg. 25).

Underpinning this research is a wider theoretical scaffold that holds together and informs a research positioning, a methodological approach and an analytical framework. This section focuses on how two theories, Rhetorical Genre Theory and Enactment Theory, can work in tandem to provide a robust theoretical scaffold within which data can be gathered and examined towards gaining deeper insight into how workplace discursive activities impact on the professional identity formation of newly qualified Social Care Workers.

Fig 2.12 below illustrates the theoretical framework that informs this research. Social constructionism (Berger and Luckmann 1991) is discussed by Burningham and Cooper (1999) in terms of being either ‘contextual’ or ‘strict’. They see the former as recognising objective reality and its influence, while the latter maintains a relativist position. The specific theoretical lenses proposed for this research, Rhetorical Genre Theory (Miller, 1984) and Enactment Theory (Weick 1979; Ball, 2001) are both compatible with Contextual Constructionism (Burningham and Cooper, 1999). They share a common concern to include the experience, action and engagement of the
individual with their (in this case ‘professional’) environment, whilst facilitating consideration of external influences on that environment.

Before examining RGT and Enactment Theory in more detail, Social Constructionism is discussed as a paradigm and epistemology whilst taking account of the fact that constructionism itself is a contested term that ‘has been defined and applied in a variety of ways’ (Cohen et al 2004: 409). Contextual constructionism is one of those ways and the next section will locate it in the broader Social Constructionist approach.

**Fig 2.12. Theoretical framework for analysis of Case Study data**

<table>
<thead>
<tr>
<th>Theoretical underpinning:</th>
<th>Contextual Constructionism <em>(Burningham and Cooper, 1999)</em></th>
</tr>
</thead>
<tbody>
<tr>
<td>Theoretical framework</td>
<td>Rhetorical Genre Theory <em>(Miller 1984; Pare 2000)</em></td>
</tr>
<tr>
<td></td>
<td>Enactment Theory <em>(Weick 1979; Ball 2001)</em></td>
</tr>
<tr>
<td>Focus of analysis</td>
<td>Lens with which to examine deliberative professional communication in written texts and formal spoken communication.</td>
</tr>
<tr>
<td></td>
<td>Lens to examine how policy (meta-genre) is experienced through professional activity</td>
</tr>
<tr>
<td>Associated Professional Activity</td>
<td>Team meetings, form-filling, report-writing, planning and review, multi-disciplinary interaction</td>
</tr>
<tr>
<td></td>
<td>Engagement with management and organizational structure, terms of employment, task and goal setting and completion, implementation of internal and external policy.</td>
</tr>
<tr>
<td>Associated data sources</td>
<td>Forms-in-use, Guidelines, Record logs, Day-books, Critical Incident Documents etc. Handovers, supervision, Team Meetings, Multidisciplinary meetings.</td>
</tr>
<tr>
<td></td>
<td>Organisational guidelines, Professional Guidelines and Codes of Practice, Policy Documents, Circulars, employment contracts, Job descriptions etc.</td>
</tr>
</tbody>
</table>
2.6.1 Social Constructionism

The research area-of-interest of this project, Professional Identity Formation, qualified by time (newly qualified), and acknowledging context (Social Care Practice), indicates an epistemological position that recognizes the validity of ‘the human enterprise of producing a world...as a social process...’ (Berger and Pullberg in Engler, 2004: 293). It is not surprising therefore, that Social Constructionism provides a theoretical underpinning for the research. The central elements of Social Constructionism as identified by Engler (2004) are implied in both the ‘what’ and the ‘how’ of this research: its ‘emphasis on context-bound aspects of objects and ideas; its ... emphasis on the historically developed and culture-specific nature of the objects of study, ... and the central importance on the role of discourse in constituting these objects as historically and culturally contingent’ (pg. 294).

Although Burr (2003) locates Social Constructionism firmly within the discipline of psychology, she acknowledges that ‘many of its basic assumptions are actually fundamental to ... sociology’ (pg. 2). According to Plummer (2010), depending on the way we think of ‘the social’, there is a theoretical direction to guide our thinking. For example if ‘the social’ is thought of as language and discourse as the makers of meanings, the associated theories are likely to be ‘Hermeneutic sociology, symbolic interaction, interpretative sociology, discourse theory, phenomenological sociology, social constructionism, narrative sociology dialogic theory’ (pg. 30). The same author goes on to point out that these (and other) theories are not mutually exclusive, nor are their metaphors singularly held. For example, if the metaphor of structure or organism is most associated with functionalism, that is not to say that social constructionism and in particular Contextual Constructionism ignores the wider structural context in which the study of a particular phenomenon takes place. Indeed it is from neither sociology nor psychology that perhaps the most vivid metaphor for social meaning-making comes. The anthropologist, Clifford Geertz is cited by Cohen et al (2004) as describing the frameworks of knowledge that give meaning to things, objects and people as ‘webs of significance’ (pg. 411). Cohen et al go on to explain the metaphor as illustrating ‘the construction of meaning as an active, creative process [where] the intricate ways in
which meaning systems intersect, and the idea that once spun, these webs are incredibly strong, trapping and suspending people in their overlapping strands’ (ibid).

At a philosophical level social constructionism is sometimes understood as being relativist, anti-essentialist and anti-realist. What social constructionists try to do, according to Giddens (2009), is to focus on the processes by which social reality is constructed rather than that reality itself. If one accepts that this is a valid position in itself rather than seeing it as one that is merely oppositional or incomplete, then the next question concerns agency – the extent to which the individual is controlled by or controls the environment. The two positions are set out as follows: firstly Markham (2003) emphasises individual and group agency as the starting point of understanding reality as being socially constructed through ‘a process whereby individuals, dyads, and groups use metaphors, which over time build frames through which we see and understand the world’ (Pg.2); secondly the controlling influence of the environment on individual understanding of reality is expressed by Berger and Luckmann (1966) who see (social) institutions as being the dominant element in what they term ‘the dialectic of society’ (pg. 78) because they ‘have coercive power over [individuals], both in themselves, by the sheer force of their facticity, and through the control mechanisms that are usually attached to the most important of them’ (ibid).

Giddens (2009) offers an overview of social constructionism that takes account of both of these subdivisions. In describing social constructionism as a distinct theoretical approach within sociological thinking he goes on to sum up the approach thus:

‘Rather than assuming that social reality objectively exists, social constructivists work to document and analyse the processes through which social reality is constructed, such that the construction then serves to confirm its own status as social reality’ (pg. 275).

This position raises the most often cited criticism of social constructionism – the relationship between subjectivity and truth, between what is real and what is relative. The ‘realism/relativism’ debate (Edwards et al, 1995) is summarized by Cromby and Nightingale (1999). Realism, they say is ‘the doctrine that an external world exists independently of our representations of it’ (pg.7), and includes ‘perceptions, thought, language, beliefs and desires as well as artefacts such as pictures and maps’ (ibid).
Relativism is seen as ‘an understanding of the way that knowledge is both part and product of social action’ (ibid). The latter, it is argued can bring us closer to the truth of things as it is a position that accesses the world in a way that is impossible to realism. The counter argument is that the relativism of social constructionism cannot lead to an ontological truth because it is always contingent and subjective, or at best, finds it difficult to distinguish when it is dealing with subjective or objective reality. In considering this criticism of the approach, it is important to remember that social constructionism is not a single theory but a broad school of thought unified by its interest in the individual as an active participant in creating the social world, but divergent when it comes to deciding how much attention is paid to structural forces in creating that reality. The social constructionist seeks an understanding of social reality from within. Truths are not absolute and the pursuit of absolute and objective truths is seen as a futile exercise because they do not and cannot exist.

2.6.2 Doing violence to reality

The ‘Umwelt’ (von Uexkull, 1937), ‘is the world in which an organism lives, as constructed by its sensory and perceptual capabilities’ (in Lock and Strong, 2010: 136); it is a useful concept towards providing a ‘realist ontology for social constructionism’ (Cromby and Nightingale, 1999: 7). The use of the word ‘organism’ above reveals a biological starting point, and indeed that is where the concept originated. The umwelt or ‘lived in’ world of whatever animal/organism is created by that animal living in its world. So two species of animal could share the same space on earth but have different and separate umwelten. For psychologists, this concept raises in-depth and complex debate when applied to humans, leading to deep discourse and linguistic analysis (for e.g. Harre, 1995, Shotter, 1993). The constructionist beginning point of such analysis is identified by Harre (in Rothbert, 2004) when he states ‘By making the behaviour of ourselves and others determinate, we jointly create a social living space, an ‘umwelt’ peculiar to our local culture’ (pg. 242). For the purposes of this study, the concept provides a useful guide toward validating claims about the pursuit of understanding. Burghardt (1999) acknowledges that he has published ‘at least twice before’ the quotation below to illustrate von Uexkull’s holism:
‘The truth lies directly before us in the reality surrounding us. However, we cannot use it as is. An unbroken description of reality would be simultaneously the truest and most useless thing in the world, and it would certainly not be science. If we want to make reality and therefore truth useful to science, we must do violence to reality. We must introduce the distinction, which does not exist in nature, between essential and inessential. In nature everything is equally essential. By seeking out the relationships that seem essential to us, we order the material in a surveyable way at the same time. Then we are doing science.’ (von Uexküll, 1909/1985, p. 227)

This approach brings us close to Schryer’s (1993) description of genres, as ‘stabilized-for-now or stabilized-enough sites of social and ideological action’ (in Pare, 2014) which are discussed in the next section. But before discussing Genre Theory, and Rhetorical Genre Theory in particular, it is necessary to identify the frame within Social Constructionism in which it sits most comfortably, namely ‘Contextual Constructionism’ (Burningham and Cooper, 1999). These authors, as mentioned earlier see social constructionists falling into two camps – those promoting strict constructionism and the contextual constructionists. (A more in-depth description of the complex strands found within constructionism is provided by Phillips’ (1995) essay with the self-explanatory sub title: ‘The many faces of constructionism’). Best and Sevier (1995) share the simpler template that distinguishes strict from contextual constructionists. The ‘strict constructionists’ are described as those who take a more fundamentalist stance, with their ire directed towards the many constructionists who, in their view, ‘have based their analyses on hidden, objectivist assumptions, and argue that actual social conditions are not as significant as the claims made about them’ (pg. 337). It is difficult to assess if they are more critical of the use of broader contextual conditions per se, or of proceeding with analysis without acknowledging their presence. ‘Contextual Constructionists’ on the other hand are not involved in this ‘hair-splitting’. According to Best and Seiver they ‘assert that understanding social problems often demands recognition of the precise social context, and such recognition often requires making various (possibly objectivist) assumptions about the social context of claims making’ (ibid). Again for critics of social constructionism, such a position is not satisfactory as it fudges the distinction between what is objectively ‘real’ and what is subjectively ‘constructed’, whether this relates to things, thoughts or theories.
2.6.3 Social Constructionism and PIF

Although their discussion of social constructionism concerns its use in empirical studies relating to environmental issues, Burningham and Cooper’s (1999) work can usefully be applied to the current study of Professional Identity Formation. They deliberately set out to challenge the realist critique of social constructionism and to ‘emphasise the appeal and utility of social constructionist approaches’ (pg. 297). In doing so they provide us with a useful ‘holding position’ that in turn provides a rationale for the theoretical framework for this study. That ‘holding position’ is based on their argument (in the context of studying environmental issues) that the social constructionist approach does not amount to a denial of the existence of environmental problems. They present their argument by firstly pointing to the fact that the majority of empirical studies in that area are of the mild/contextual variety that is very different from the strict/radical constructionist position targeted by the realist critics; and secondly pointing to the misconstruing of strict constructionism by those same critics. Rather than reproducing their detailed arguments here, it is their conclusions regarding the potential of the social constructionist approach that are most useful. These conclusions are threefold:

1. The emphasis of the mild/contextual constructionist studies is on ‘the social processes that are involved in the development of scientific institutions, epistemologies and knowledges’ (ibid: 303). This is not to deny (or confirm) the existence of an objective reality, it simply means that the constructionist approach provides a deeper understanding of social reality as socially constructed. Its focus on meaningfulness rather than reification.

2. The nature of what is being studied and by whom, may guide the approach. They draw on the work of Ibarra and Kitsuse (1993) who describe social problems as ‘constituted by claims making activity’ (in Burningham and Cooper, 1999: 304). Their point here is that the sociologist is less concerned with proving whether a social condition exists or not; their job is to ‘attempt to account for the emergence, organization and maintenance of claims-making activity’ (ibid). It would be difficult to maintain that argument regarding the ontological existence of objects rather than conditions, problems or
institutions. It is worth noting here that radical constructionists do argue that objects or material things do not precede (constructed) representations; that it is representations that give rise to objects. In discussing Enactment Theory below such a position is included as metaphor rather than as philosophical standpoint, referring to aboriginal ‘songlines’ bringing the physical world into existence.

3. A healthy scepticism about ontological claims does not constitute a denial of its existence. This, it is argued, is a useful critical starting position and one that is natural to strict constructionists. Rather than disputing the existence of a ‘social problem’, for example, as being based on objective criteria or subjective meaning-making, the focus is better placed on the ‘practical and political implications of taking this kind of position’ (ibid: 309). The distinction between considering poverty as an absolute or relative concept illustrates the usefulness of having alternate philosophical standpoints in gaining a deeper understanding of how to respond to poverty, an aim with greater merit than ‘winning’ the theoretical argument as to which position is the correct one.

Each of these three conclusions is less than definitive; they equivocate on any grand pronouncement regarding social constructionism because of its multiple sub-strands; and they promote its ‘mildest’ form as its strongest trait. It is hardly surprising then that in adopting a contextual constructionist position for the current research project that this section ends with a plea for a philosophical détente between realists and relativists, between objectivists and subjectivists, between scientists and sociologists. It echoes Collins (1996) argument that a ‘concentration on attacking the perspective rather than considering its actual use ... leads to a failure to appreciate the merits of the approach and results only in fruitless and frustrating debate’ (in Burningham and Cooper, 1999: 302-3). The contextual constructionist approach allows for the building of a pragmatic theoretical framework based on two separate but compatible theories, Rhetorical Genre Theory (Miller, 1984; Pare, 2000) and Enactment Theory (Weick, 1979; Ball, 2001). Both emphasize the agency of the individual human actor but acknowledge the contextual forces that surround activity and meaning-making relating to the phenomenon of Professional Identity Formation.
2.6.4 Genre and Enactment – refining the Theoretical Framework

Rhetorical Genre Theory (Miller, 1984) sees genre as social action, thus moving beyond traditional genre theory that concentrated on text content. Text, as understood by RGT may be seen as more than the written word and may include ‘recurrent use of conventionalized forms and communicative practices that individuals develop relationships, establish communities, and get things done’ (Johns et al 2006: 273). It is, therefore, seen as an appropriate theoretical framework with which to gain an understanding of professional identity formation of Social Care Workers. The data gathered and analysed includes written and spoken texts generated through the deliberative communicative actions undertaken as part of daily professional activity.

Enactment Theory is concerned with trying to understand the relationships between policy making and what happens in practice, how social actors, in this case Social Care Workers, enact policies in the workplace (Ball, 2006 and Maguire, 2011). This will facilitate analysis of the relationship between meta and micro-genres. Both theoretical approaches engage with individual agency and contextual influences, and therefore sit comfortably within contextual constructionism, the ‘mild’ manifestation of Social Constructionism. They are both concerned with people as active players in the sense that they interpret and construct reality, individually and collectively, within institutionalized cultural norms (Lindgren and Packendorff, 2014). Therefore from a social constructionist perspective, PIF of Social Care Workers may be studied through ‘articulating and understanding how individuals and collectives – subjectively and inter-subjectively – construct’ their professional identity formation as unfolding processes.

As Social Constructionism challenges ‘notions of reality as objective, fixed and, with the right instruments, knowable’ (Burr in Cohen et al, 2004: 409), it sets itself a basic challenge, concerning its contribution to understanding and knowledge, when this position implies that the researchers and participants ‘versions of reality’ (Cohen, 2004: 410) echo, compete and collide with others. The constructionist argument is that by examining these versions of reality deeper understanding of phenomena and social reality is gained. In this examination of PIF there are countless starting points, (gender, values, linguistics, transition, care) all of which can draw on particular theory bases to...
provide a framework for what is looked at, looked for and looked through. This study has chosen as its starting point workplace discursive practices, with RGT and Enactment Theory as a ‘cloche-like’ frame that provides a protective space in which the processes of PIF can be carefully examined.

2.6.5 What is RGT?

Traditional genre theorists viewed genres as ‘static categories of discourse that share certain objective conventional features’ (Carpenter, 2011: 1). Although there are various etymologies of the word ‘genre’ offered, the dominant view is its French origins as a word for ‘class’ or ‘kind’. Genre may include both speech events and written text types and therefore can be seen as the classification of types of generic forms of spoken or written discourse. Chandlier (2014) points out that the term is ‘widely used’ in rhetoric, literary theory, media theory, and more recently linguistics, to refer to a distinctive type of text. Bawarshi and Reiff (2010) trace the development of Genre Theory through its many strands and Fig. 2.13 below provides a graphic summary of these strands. It also serves to locate RGT within the wider Genre Theoretical context. In the broadest sense, genres are systems of classification or grouping and are ‘defined by their conventions or repeated, expected, to-a-degree-predictable qualities’ (Newcombe, 2004: 423). But depending on which strand of Genre Theory one follows, the classification itself, who does the classifying, the context, process or purpose of the classification, the structure within which it occurs and/or is recognised or the wider forces that influence the classification can be seen as the appropriate starting point or goal.

There are three recognisable sub categories within genre Theory. These are, the literary traditions with a strong focus on text and style; the linguistic traditions interested in text beyond formal literary formats and seeking to understand text as ‘communicative acts’ (Swales, 1990) within the context of system and with specific purposes; and Sociological traditions that see genres as social action (Miller, 1984), moving the study of genre beyond the exploration of its textual features on to the
analysis of the social contexts that give rise to and shape genres’ (Artemeva and Freedman, 2008: 15).

Fig. 2.13 Genre theory – main strands, based on Bawarshi and Reiff (2010)

<table>
<thead>
<tr>
<th>Literary Theory</th>
<th>Linguistics</th>
<th>Sociological Theory</th>
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<tbody>
<tr>
<td>Structuralist (or literary-historical) approaches: Genres as organizing and shaping literary texts and activities within a literary reality.</td>
<td>Systemic Functional Linguistics: Genre as focus to help students “learn to exercise the appropriate linguistic choices relevant to the needs, functions or meanings at any time”</td>
<td>English for Specific Purposes: Genres as forms of communicative action (Swales) Focuses on studying and teaching specialized varieties of English, most often to non-native speakers of English</td>
</tr>
<tr>
<td>Neoclassical approaches: uses taxonomies to categorise literary texts and to seek to organize relations between them.</td>
<td>Corpus linguistics: using large scale electronic text databases - researchers conduct systematic searches for linguistic features, patterns, and variations in spoken and written texts.</td>
<td>English for Academic Purposes (EAP), English for Occupational Purposes (EOP): Academic English v Applied English English for Medical Purposes (EMP)</td>
</tr>
<tr>
<td>Romantic and post-Romantic approaches: Genres are continuously reconstituted through textual performances.</td>
<td>Discourse community, Communicative Purpose, and Genre—(Swales)</td>
<td>Genres enable their users to perform social actions and relations, enact social roles, and frame social realities.</td>
</tr>
<tr>
<td>Reader Response approaches: Genre as a performance of a reader, texts classified by their similarity of explanation.</td>
<td></td>
<td>Genres help reproduce social practices and realities.</td>
</tr>
<tr>
<td>Cultural Studies approaches: Genres used to examine dynamic relations between literary texts and historically situated social practices and structures.</td>
<td></td>
<td>Genres as sociological concepts mediating textual and social ways of knowing, being, and interacting in particular contexts.</td>
</tr>
<tr>
<td>Brazilian tradition: Syntheses – aims to provide analytical and theoretical tools by which to understand how genres function linguistically, rhetorically, and sociologically.</td>
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It is within the latter tradition that RGT is located with a starting point that is seen as providing ‘a useful theoretical framework to research into changes in genre creation, development, learning, and use’ (ibid). It should be noted that whilst the traditions are distinct and have developed within different research and academic disciplines, and often within different cultural contexts, they do share a theoretical space that provides ‘analytical and theoretical tools by which to understand how genres function linguistically, rhetorically, and sociologically’ (ibid: 75). The same authors offer the example of ‘socio-discursive interactionism’ in Brazilian genre studies as ‘a theory of human action based in social and discursive contexts and grounded in genre’ (ibid).

Genres, thought of as prototypical models for communication, are easier to recognize than to describe. For example the jargon associated with sports commentary can be familiar to sports fans:

‘England are given a chance to get back in the contest when Uate can’t take in Sinfield’s spiralling kick. Reed gobbles up the loose ball and tries to pass it on to Ellis, who can’t hang on’ (Sky Sports Rugby League Commentary, 2011).

It may also be recognized as a genre because it meets Swales criteria of being a class of communicative events where the members share some set of communicative purposes. The emphasis of this approach is on the ‘linguistic form’ and on the ‘shared purpose’, with the purpose common to both the commentator and the listener. It could be argued that Swales’ approach offers too narrow a base to be regarded as a framework of analysis. However this version of genre analysis does allow for the study of communicative purpose as a means towards understanding how a community carries out its work. The emphasis is still on text, with genres defined as ‘regular groupings of text types characterized by regularities in textual, that is, thematic, stylistic, and compositional, features’ (Aretmeva 2004: 10), but there is a shift away from literary form towards an interest in shared purpose. That bridge between ‘the linguistic’ and ‘the social’ is further strengthened by the English as Special Purpose approach. Developed in the 1960’s, this approach to teaching English (usually as a foreign language) recognised that there are particular styles, formats, phrases and terms associated with different professional contexts. ‘English for specific purposes is a
term that refers to teaching or studying English for a particular career (like law, medicine) or for business in general’ (International Teacher Training Organization, 2005 in Bracaj, 2014: 41).

This approach acknowledges the purpose of discourse in the professional context and thus begins to look beyond the text itself. Its focus remains on the development of English language teaching, but it highlights the fact that language can be occupation specific. It has led to an offshoot within the ESP approach, namely EOP – English of Occupational Purposes. The approach may be criticised for its ‘anglo-centric’ view of the world, but it has led to a more refined interest in how language is used in the professional context, and, by extension, how students, trainees and novices gain professional identity through language. It is perhaps ironic that an approach whose primary aim was to inform and enhance language teaching led some researchers (Dias, Freedman, Medway, & Paré, 1999) to theorise that ‘genre knowledge’, the patterns and conventions relating to professional use of language in the workplace contexts, is ‘tacit and only acquired unconsciously as part of some purposeful communicative activity in the context where the genre is used…’ and that… ‘Students “pick it up” without being explicitly taught a genre’ (Russell et al, 2009: 409). With this view the bridge between the ESP approach to genre and that of RGT has been all but crossed.

One of the main criticisms of Genre Theory concerns its descriptive nature. By definition its emphasis is on classification of texts according to their description. This limits its capacity to be used as a theoretical tool, although it can bring clarity to analysis by providing a framework based on systematic classification. It is less concerned with the influencing powers that shape text, discourse and by extension genres; likewise it does not focus on the processes by which genres may influence behaviour. RGT is an approach to genre that moves the study of genre beyond description, exploration and classification of textual features. It also goes further than acknowledging that different genres exist across professional settings as with ESP and EOP. Aretmeva (2004) succinctly sets out where RGT moves to beyond a focus on textual features ‘to the analysis of the social contexts that give rise to and shape genres’ (Freedman & Medway, 1994a, 1994b; Miller, 1984/1994a) and thus, lends itself as a useful theoretical framework to research into changes in genre creation,
development, learning, and use.’ (Aretmeva 2004: 10). This shift can be most clearly linked to Miller’s (1984) ‘fundamental insight that genres are forms of social action and not simply classification systems or static textual forms’ (Schryer and Spoel, 2005: 253). Carolyn Miler’s paper ‘Genre as Social Action’ (1984) has been defined as ‘a watershed article’ by Carpenter (2011) and as ‘a seminal article by Pare (2013). It is regarded as such because it marks a shift in how genres are thought about. Miller argues that ‘a rhetorically sound definition of genre must be centred not on the substance or form of discourse but on the action it is used to accomplish’ (Miller, 1984: 151). Her primary concern is to make rhetorical genre a ‘stable classifying concept’ (ibid) and to ensure that the concept is rhetorically sound. Her approach is to give meaning to classification of discourses by giving attention to ‘the connection between genre and the recurrent situation’ (ibid). Other theorists follow this lead with Bazerman (1997) providing the clearest expression of the paradigm shift by stating ‘Genres are not just forms. Genres are forms of life, ways of being. They are frames for social action’ (Bazerman, 1997, in Pare, 2013: 84). Elsewhere the same author posits that ‘the starting point of genre is the perceived recurrence of social actions within perceived recurrent social arrangements’ (Bazerman, 2009). The recurrent social situation can be defined broadly, similar to Bourdieu’s notion of ‘habitus’, or more specifically, as with Wenger’s (1998) concept of ‘community of practice’. This relationship between genre (as text with purpose) and the context in which the discursive acts occur and are repeated is both dynamic and productive. Genres are seen as the facilitator of social action and the result of that social action. As Carpenter (2011) puts it ‘Genres both reproduce and enact our realities, shaping us even as we shape them’ (Pg. 3).

2.6.6 RGT and Professional Identity Formation

The aspect of our ‘reality’ that is the focus of this research is professional life. In order to investigate how an individual develops a professional identity, a theoretical framework that acknowledges the constructive involvement of the individual within a defined context is required. RGT can provide that framework in allowing ‘us to study the social and the rhetorical as they work on one another, reinforcing and reproducing one another and the social activities, roles, and the relations that take place within
them’ (Bawarshi, 2000: 357). The same author identifies that ‘a rich body of research examines how novices learn new genres in the workplace and use those genres to carry out the social goals of the organization’ (Bawarshi, 2010: 132). Some examples of such research are listed below:

- Medical apprenticeship and explicit/tacit debates in genre instruction. (Lingard and Haber cited in Bawarshi, 2010),
- Participatory action research of 25 interns in a professional writing program. (Smart and Brown cited in Bawarshi, 2010),
- Education of medical students (Lingard et al 2003 cited in Bawarshi, 2010),
- Recently regulated midwifery in Canada, (Spoel 2004 cited in Pare, 2014),
- Forming professional identities on the health care team (Lindgard et al, 2002).

By accepting genres as forms of social action it is necessary to accept that they are a powerful shaper of organizational structure. Orlikowski and Yates (1994) describe genres as providing ‘an institutionalized template for social action’ (pg. 542). That template in shaping the ongoing discursive practices of community members ‘reinforces that genre as a distinctive and useful organizing structure for the community’ (ibid). These authors clarify that ‘community’ here may refer to groups, organisations or occupations. The current research has a special interest in the ‘occupation’ of Social Care. The term ‘occupation’ is particularly applicable to Social Care because, as discussed earlier in this review, it cannot claim itself to be an established profession. It is worth noting Eva-Maria Graf’s current research in Germany representing a new thread of workplace research that considers the language of Executive Coaching, also an emerging profession. That work concentrates on conversation analysis (Sacks, 1970 and Levinson, 1983) to explore how workplace discourse both forms the profession and informs the professional identity of the worker. This is in line with the view that ‘Genres privilege specific organizational structure, arguments, evidence, and conventions that, when critically examined, will point to what knowledge is valued, silenced, or ignored’. (Kedrowicz & Taylor, 2014: 2014: 2014: 2014: 2014:
It is the position of the current research that genre, whether generated internally or imposed from external sources, impacts on what discursive practices are repeated, become established as genres, and in turn, reinforce a professional identity. That is why, in order to allow for a deeper analysis of the connection between workplace discursive practice and professional identity formation, it is considered necessary to draw on Enactment Theory ((Weick, 1979; Ball, 2001) to support the analytical frame.

Artemeva (2004) suggests that ‘even though analyses of individual genres provide us with information necessary for the unpacking of community norms, practices, and ideologies, it is impossible to unpack complex communicative phenomena without studying interactions among genres’ (p. 14). An acknowledgement that genres operate at different levels within ‘systems of genre’, described by Bazerman (1994) as ‘interrelated genres that interact with each other in specific settings’ (p. 97), suggests the possibility of hierarchies of genres. This raises an important question about genre and PIF, namely, which discursive practices in the workplace emerge as the dominant shapers of the workers professional identity?

Kierstead and Abner’s (2012) view is that by analysing discourses it is possible to explore the connections between saying, doing and being. Where the latter is seen as connecting ‘the sense of professional identity that develops as a result of the saying and doing’ (pg. 338). Although RGT insists on the inclusion of context to such analysis, the basic premise here is a useful one; professional identity is not learned in the abstract, or merely experienced through professional actions, it is the realisation and perhaps internalisation of both. Whilst linguistic analysts focus on that process for the individual and usually within an established profession, the current research adopts a social scientific position that seeks to examine PIF within a profession that itself is at an emergent stage. To do so effectively there is a greater requirement to understand context. RGT supports this research stance especially given the focus on workplace discursive practices rather than a holistic approach that would include all professional activity, relationships and engagements. But in order to understand PIF of Social Care Workers, the question of agency needs to be included. Enactment Theory can provide a focusing lens for this level of analysis.
2.6.7 *Enactment Theory*

Enactment Theory is concerned with trying to understand the relationships between policy making and what happens in practice; how social actors, in this case Social Care Workers enact policies in the workplace (Ball, 2006 and Maguire, 2011). By placing Enactment Theory alongside RGT in the overall theoretical framework, deeper analysis of the relationship between meta and micro-genres associated with Social Care Work is facilitated.

As can be seen from the literature above, there is a strong connection between policy and practice. The professional identity and the conceptualization of a profession either increases or decreases the professional’s concern with policy issues. This section examines the role of policy in the formation and definition of professions. The policy journey towards professionalization of Social Care is mapped by drawing on the work of Stephen J Ball and Megan Maguire whose analytical awareness of how public policy works (rather than how it is meant to work) in the area of education policy provides a useful perspective. Their approaches assume that there is a symbiotic relationship between policy and professional practice; and that professional practice is both influenced by, and influences public policy. It distinguishes between policy implementation and policy enactment – the former analysing policy as a linear target/outcome/achievement process (Walshaw and Anthony, 2007) and the latter taking account of the complexity of human sense-making (Spillane et al, 2002). Ball (1994) describes 'Policy Enactment' as that which ‘engages with the complexity, sophistication and instability of practice and recognises that policies can be open to ‘erosion and undercutting, the embodied agency of those people who are its object’ (Pg. 10-11).

2.6.7.1 *Enactment and ‘sense-making’*

Ball’s approach to policy analysis draws on Weick’s notion of enactment (Weick, 1979) and sense-making (Weick, 1995). These concepts applied to organizational behaviour are seen as going beyond deployment or implementation or organizational structures and relationships to how people make sense of things in the organization. In an interview reproduced in ‘Education and Society, 2009’, Professor Ball explained the use of the term "enactment" in the policy analysis context: ‘Traditionally the word has
been used in a legal context to describe the process of a law coming into force. Yet it can also be used in a theatrical sense to refer to the playing of a role or scene. Here it means putting into practice, but in a way in which the actors involved (e.g. teachers) have some control over shaping the process and are not just implementers’ (Mainardes and Marcondes, 2009:315).

2.6.7.2 The micro and the macro

In discussing how education policy impacts on the professional lives of teachers, Ball (1998) identifies a ‘market episteme – a non-unified, multiple and complex field of play which realizes a dispersion of relationships, subjectivities, values, objects, operations and concepts’ (pg. 126). However he is careful to avoid what Apple (2002) cautioned against, namely, a postmodern obsession with ‘meaning’ whilst ‘ignoring any determinacy or any structural relationships among practices’ (Apple and Whitty in Hill, 2002:84). Two of the most significant distinguishing features that have come to dominate how policy is experienced at a local level are managerialism and performativity. With the state as regulator rather than provider, the role of the manager in the public sector organisation takes on a new meaning, playing ‘a key role in the wearing-away of professional-ethical regimes in schools and their replacement by entrepreneurial competitive regimes’ (Ball, 2001: xxxiv). While Ball’s illustration is confined to the teaching profession, a similar impact is felt across the Allied Health and Social Care Professions. With regards to the professions of Social Work and Social Care, various reports into the sometimes inadequate professional response to cases of abuse have seen a raft of recommendations concerning accountability and organizational structure. These may obscure an underlying trend towards the managerialist corporate culture. The language of ‘excellence’, ‘consumer choice’, ‘quality assurance’, ‘performance indicators’ and so forth, are now commonplace in Social Work and Social Care. An example from the Irish context is seen in this introduction to a Health Information and Quality Authority (2013) document which states that ‘The purpose of this document is to provide guidance for the development of KPIs and associated minimum data sets (MDSs) to monitor healthcare quality. Minimum data sets refer to the minimum amount of information required for the purpose of monitoring quality and safety through KPIs’ (Pg. 2). The practice of Social
Care work is thus re-contextualised and it is required to provide care that is measurable and monitored in a particular fashion. Maguire (2011) illustrates how the re-contextualisation of education as servant of market need impacts on the training of teachers, on the measurement and assessment of what makes a ‘good’ teacher and ultimately defines the profession itself:

‘The cost of being made up as a new global teacher, and being performance-managed through more and more prescribed targets and measures of accountability may result in high levels of teacher turnover as well as the ‘existential redundancy’ (Rutherford 2008: 16) of the professional, ethical and decision-making teacher’ (Maguire, 2011:33).

This re-contextualising of education as a supplier of economic functionaries has changed the nature of teacher training policy and, by extension, the nature of teaching as a profession. Maguire cites Ball’s assertion that ‘Education policy is increasingly subordinated to and articulated in terms of economic policy and the necessities of international competition’ (Ball 2008: 53).

Maguire (2011) offers some explanation as to the absence of a coherent radicalism of dissent from within the profession – lack of job security, transfer of funds, scarcity of resources to support pedagogical studies. It is interesting to note that not only has the profession been re-contextualised, so too has the policy debate – from pedagogical concerns to economic ones.

This provides a bridging point from the established profession of teaching to the emerging one of Social Care. At its time of ‘formation’ and definition, similar influences abound. The same economic and policy climate exists across the social professions. For example Share (2005) notes the increasing influence of managerialist discourses of performativity and accountability and suggests how these may have implications for the social professions. Elsewhere Banks (2003) asks what the development of external regulation and audit means for the autonomy, discretion and creativity of practitioners? Share (2005) also points out that the definition of the field Social Care remains open and its practice somewhat elusive and contested (ibid.). In the broader European context the development of professional care in either residential or community settings is often referred to as Social Pedagogy or Social Educator.
'Social pedagogy exists “out there” in an unmediated guise. Social educational workers interact in typical social pedagogical situations with clients in institutions and in open encounters, in teams or in one to one encounters in more temporary situations. Actions come from spontaneous decisions as well as from carefully designed plans’ (Hallstedt & Högström 2005:16).

2.6.7.3 The re-contextualisation of care

How public policy engages with care provision for vulnerable adults and children provides a context for how professional care is provided and evolves. The re-contextualisation of care provision generally may be a defining factor in how Social Care emerges as a profession. We see therefore, a specific policy, the professionalisation of Social Care, occurring in the context of a wider public policy shift, namely, the re-contextualisation of care provision in society. In making the distinction between professionalisation and professionalism, O’Connor (2006) attributes the particular vulnerability of Social Care and indeed Social Work to external influences that both define and control these professions. As discussed in the last section, O’Connor’s contention is that this vulnerability is caused by ambivalence towards the integration of theoretical perspectives as a support to professional insight. His argument suggests that although sociological and psychological theory is used to assess client behaviours and point towards therapeutic interventions, ‘the social and political factors that contributed to this position may then be discarded, and any form of ‘radical’ advocacy attempting to influence a solution to particular structural problems may be jettisoned’ (O’ Connor, 2006: 92). The role of the Social Care Worker is portrayed here as being located at the meeting point of policy and practice. O’Connor challenges the emerging profession, and professionals in this field, to become more than mere instruments of external policy forces and to assume the mantle of policy shapers. A similar theme occupies a central place in a recent qualitative study of secondary schools in England. The title of the research (by Steven Ball, Megan Maguire and Annette Braun) reflects its focus: ‘How schools do policy - Policy Enactments in the Secondary School: Theory and Practice’. The authors view teachers (as well as other actors in schools) as ‘interpreters and translators, as well as subjects, of policy and subject to related issues of power in this process, both those embedded in particular policies as well as in decision-making round the selection of
and prioritising of policies’ (Ball, Maguire and Braun, 2010). Their approach is ‘not to ‘blame’ the teacher for a failure of political insight’ (ibid pg.146) or, by implication, a lack of challenge to the dominant policy dictates that influence how they do their job. Indeed, they offer an explanation as to why this does not happen, stating that with ‘pressure to perform, in response to constant change, there is little space or opportunity to think differently or against...’ (ibid, pg. 139). At this point one could enter the world of cross-professional comparison in order to assess the applicability of research in one area (in this case Teaching) to the other (in this case Social Care).

This ‘battle’ for dominance could be characterised as one between performativity (Ball, 1998, 2000, 2003, Lyotard 1979 and others) and professionality (Hoyle, 1975, Hoyle and Wallace 2003, Evans 2008). Such a head-on battle would, in the current climate of fiscal uncertainty, have only one winner: performativity delivering a ‘right hook’ of managerialism followed by a ‘knock-out blow’ of central control. More important is the recent work by Ball, Maguire and Braun (2012) that has focused on Enactment Theory as promoting a new resilience in front-line service providers.

‘The shift towards theories of enactment not only poses challenges to linear conceptualizations of policy design, implementation and evaluation, but also questions the instrumentalist view of actors, recognizing the role of agency, interpretation, sense-making, translation, embodiment and meaning throughout the policy process’ (Riveros, 2011).

2.6.7.4 Social Care as a Pro-active Profession

So where traditional linear approaches to critiquing policy reduced the role of practitioners to receivers of policy or at best implementers of policy, Enactment Theory raises their role to that of active participant. Where performativity aims to ‘encapsulate or represent the worth, quality or value of an individual or organization within a field of judgement’ (Ball, 2003:216) usually external to the organisation, Enactment Theory engages with the complexity of how that policy emerges and impacts at ground level. That demands of the practitioner a level of motivation and sense of professional self-worth (Galvin, 1996).

Enactment Theory promotes ‘creative processes of interpretation and translation... the re-contextualisation through reading, writing and talking of the abstractions of policy
ideas into contextualised practices’ (Braun, Maguire & Ball. 2011, p. 586). For that level of agency to occur in either the Teaching or Social Care Profession, both need to give attention to how they view themselves as professions in order to claim a legitimate right to define their professions. That stance is well summed up by Evans (2002) as ‘an ideologically-, attitudinally-, intellectually-, and epistemologically-based stance on the part of an individual, in relation to the practice of the profession to which s/he belongs, and which influences her/his professional practice’ (pg:7).

Spillane, Reiser and Reimer (2002) also take the view that, ‘at street level’ professionals are active participants in the policy-making process. They refer to the practitioners as ‘implementing agents’ who do not simply follow orders but are caught up in the ongoing construction of policy which the authors see as being ‘a function of the interaction of (a) the policy signal; (b) the implementing agents' knowledge, beliefs, and experience; and (c) the circumstances in which the local actor attempts to make sense of policy’ (pg. 420). This cognitive model argues that policy implementation (or as Ball would put it, policy enactment) is a process of ‘sense-making’ that involves a mixture of adopting or adapting the policy into local practice. The immediate environment, social norms and organisational structures, existing reservoirs of individual and collective knowledge, social interactions and personal emotional responses are identified by Spillane et al (2002) as elements of this sense-making. Such a view can be located within Foucauldian micro-politics. Walshaw (2004) engages Foucault’s concepts of ‘normalisation’ and ‘surveillance’ to examine how the relationship between everyday practice and its policy/political context impact on the professional identity of in-service teachers. She states:

‘It is through an examination of those processes that we begin to see the political and strategic nature of modes of operating, knowledge, and positionings that are ordinarily considered to be either relatively independent of power, or linked only in a vague or inadequate way to organizational or institutional power’ (pg. 68).

There is a danger with this approach that a post-modern egalitarianism, giving each element an equal say in how practice, and by definition professional roles and identity evolves, would lose sight of the unequal power relation between the individual professional and the policymakers. Ball’s recent book entitled ‘Global Education Inc.:
New policy networks and the neoliberal imaginary’ is described as being ‘not a critique or an abstract discussion on neoliberalism, but a reflection about how it is promoted and how it works in educative contexts’ (Adriana, 2012: 208). His ‘bottom-up’ approach to policy analysis includes those involved throughout the policy process; in doing so he bestows on the practitioner both a right and responsibility to be an active and conscious participant in how policy affects real life situations. It is that consciousness that in turn demands a wider set of competencies than those involved in the delivery of physical and social assistance.

2.6.8 Conclusion

This review of literature draws together three distinct, but connected areas. Firstly, the concept and nature of ‘professional’ can be seen as dynamic rather than static. Secondly, the evolving definition of Social Care as a profession is understood in the context of traditional conceptualisations of ‘care’, of ideological influences, and of an historical journey unique to Ireland but with parallels in other jurisdictions. Thirdly, a theoretical framework based on Social Constructionism is identified as one to ‘hold open’ a research space that can deepen our understanding of Professional Identity Formation by examining workplace discursive practices.
Chapter 3
From Epistemology to Methodology: establishing congruence

This research brings focus onto an ill-defined, generalist profession as it emerges into a policy context ambivalent with regards to its existence and a practice context unclear and inconsistent as to its role. At the same time, the education and training towards that profession has developed a degree of clarity (Social Care Awards Standards, 2010) and monitoring (Criteria and Standards of Proficiency for Education and Training, Coru, 2013). The emerging profession is moving ever-closer to formal Registration and Regulation with the establishment of a Registration Board (expected, 2015) and its professional representative bodies, IASCE, IASCW and RMA, educators, workers and managers respectively, have taken significant steps towards amalgamation under the umbrella ‘Social Care Ireland’ banner. According to Selltiz (1976), research can be categorized based on its primary emphasis; it is hardly surprising, therefore, that research in this area is likely to fall under the ‘exploratory’ categorisation. The specific implications for research methodological decision-making are discussed in the next chapter; however, it is important at this stage to restate the focus of the study following the review of literature. This research is based on a Collective-Case-Study approach (Stake, 1995), where ‘the case’ as defined by Miles and Huberman (1994) is, ‘a phenomenon of some sort occurring in a bounded context. The case is, in effect, your unit of analysis’ (p. 25). We must be clear, therefore, on what the unit of analysis is and how it is treated within this research project.

It is the function of this chapter to (i) identify the propositions about the cases under investigation that have crystallised through the review of literature and that inform the research ‘base-camp’; and (ii) to consider the approach to knowledge-generation about a subjectively experienced phenomenon, within contested conceptual frames and based on a theoretical framework that endows individual interpretations of reality. It presents a rationale and model in support of this research strategy that is
based on the philosophical concept of Phronesis and its application through a research approach espoused as ‘Real Social Science’ (Flyvbjerg, Landman and Schram, 2013).

3.1 The Cases

The approach to sampling within a qualitative approach is that of purposive sampling. ‘The researcher actively selects the most productive sample to answer the research question’ (Marshall 1996: 523). A ‘non-probability’ sample is used in order to ensure a depth of analysis. Fig 3.1, below, sets out the sample profile where each case is required to meet all the characteristics. The rationale for these characteristics is based on a mixture of research best practice regarding bias, and on evidence from recently published literature and research relating to the Social Care Workforce.

**Fig 3.1 Sample Profile**

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Education and Training</th>
<th>Job Title/Role</th>
<th>Professional Support</th>
<th>Work context</th>
<th>NTP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description</td>
<td>Must hold a B.A. in Applied Social Studies in Social Care or equivalent.</td>
<td>Be employed specifically in a Social Care Work role, with this role reflected either directly or indirectly in the job title.</td>
<td>Must have Professional Supervision.</td>
<td>Must work in an agency that provides direct Social Care.</td>
<td>Must have qualified within the last 3 years.</td>
</tr>
<tr>
<td>Additional criteria</td>
<td>Sample must include graduates from at least 5 different colleges with no more than 2 from any one college.</td>
<td>This may be reflected either in the job title or the contract of employment.</td>
<td>Either provided by or officially recognised by the employer.</td>
<td>A range of social care settings (S.U. groups) is required: e.g. RCC, Disability, Elder Care, Community settings, Homelessness, etc.</td>
<td>With either level 7 or 8 qualification.</td>
</tr>
<tr>
<td>Rationale</td>
<td>To enhance the validity of the data through avoiding education and training bias.</td>
<td>To enhance the prospect of convergence regarding professional role and expectation, thus promoting ‘replication logic’ (Creswell, 2006).</td>
<td>Identified as a core element of professional work (CORU) and increases the reflective capacity of the participant in the professional context.</td>
<td>In line with the generic nature of the profession and to exclude cases located in contexts that operate from alternative to a Social Model (eg: Medical, Education).</td>
<td>Recognises the emergence of greater conformity of Education and Training with the drafting and publication of Social Care Awards Standards (2010).</td>
</tr>
</tbody>
</table>
Having considered the population as a whole, i.e. New-to-practice Social Care Workers, the accuracy required to generate any form of probability sample was rendered impossible because of the lack of clear data as to the number of Social Care Workers that exist. Even the number of graduates from specific Social Care degree programmes who progress to work in the area is not available. The fact that Social Care is only now emerging as a regulated profession, with the register not open to date, means that there is vagueness around both the term Social Care Worker and around the professional status of Social Care graduates. Attempts to bring definitional clarity to the population would in this case not ease the task of identifying the sample for two reasons: firstly, there is not necessarily a direct connection between the award achieved and the employment conditions of graduates, and secondly, although there is some data on the numbers of graduates of Social Care programmes (Courtney, 2009; Lalor, 2011), the available ‘First Destination’ data from the HEA merges Social Care with other Health and Social professions. Taken together these sampling criteria help to determine and form a boundary around what constitutes a case. But it is important to note that ‘the case’ under investigation in this research is not simply the individual worker.

3.2 Research Propositions

Re-visiting Miles and Huberman (1994) definition of a case as, ‘a phenomenon of some sort occurring in a bounded context’, the unit of investigation here is the phenomenon of the Professional Identity Formation of the individual worker. Baxter and Jack (2008) propose that once the case is determined and bound, it is worth considering ‘additional components required for designing and implementing a rigorous case study’ (pg. 550). Amongst those considerations are ‘propositions’ which they say may or may not be present. Kasinath (2013) sees ‘propositions’ as statements about ‘why you think you might observe a specific behaviour or relationship’ (pg. 50). Where present and identified they are helpful in keeping the research within feasible limits – in other words it is less likely to wander down dead ends or to engage with broad and/or irrelevant issues. Propositions therefore keep the research within its conceptual limits. They arise from the three main sources identified by Baxter and Jack.
(2008), (i) personal/professional experience, (ii) the literature, theories, and/or (iii) generalizations based on empirical data.

Fig 3.2 below identifies the main propositions that inform the research design. It is important to note that, in keeping with the overall research strategy, this project has an open relationship with propositions, in that it is both informed by propositions, and, through the data gathered and analysed, may lead to the generation of further propositions. The table identifies their source and points to where they are discussed in the dissertation.

**Fig. 3.2 Propositions and their sources**

<table>
<thead>
<tr>
<th>Proposition</th>
<th>Source</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>That Social Care Work as a distinct profession is not clearly defined and, therefore, exists in an unclear practice and policy context.</td>
<td>(Courtney, 2012; Share and Lalor, 2013; Howard, 2013).</td>
<td>Introduction and Literature Review</td>
</tr>
<tr>
<td>That Social Care Workers are employed across a range of sectors in a variety of roles.</td>
<td>HEA, HETAC/QQI Awards Standards, Individual Institutions Placement Offices, IASCE (ongoing).</td>
<td>Literature Review Part 1</td>
</tr>
<tr>
<td>Social Care is an emerging profession.</td>
<td>CORU, HETAC, SCI, Share and Lalor.</td>
<td>Literature Review Part 1</td>
</tr>
<tr>
<td>Professional Identity is impacted by professional activities including discursive practices.</td>
<td>Professionality (Hoyle, 2002; Galvin, 1996; Evans, 2008).</td>
<td>Literature Review Part 2</td>
</tr>
<tr>
<td>Professionals are formed by, and inform the language of their profession.</td>
<td>Genre as Social Action (Miller, 1984) Enactment Theory (Ball, 2009)</td>
<td>Literature Review Part 2</td>
</tr>
<tr>
<td>Professional Identity Formation (PIF) is experienced subjectively but informs how a profession develops.</td>
<td>(Clarke et al, 2013; Baxter, 2011) and others.</td>
<td>Literature Review Part 1</td>
</tr>
<tr>
<td>Knowledge exists in ‘stabilised-for-now’ concepts based on how individuals engage with the world around them.</td>
<td>(Schryer, 1993; Carpenter, 2011)</td>
<td>Literature Review Part 2; Research Methodology</td>
</tr>
</tbody>
</table>
It is worth noting that while ‘new-to-practice’ features as a defining element of the cases, it does not feature as a specific proposition. Its function is to limit the research population to those who have gained their Social Care degree post the establishment of the Award Standards for Social Care adopted by HETAC in 2010 and in draft form in the preceding two years. This was to ensure a level of commonality in the Education and Training experience across the participants in this Collective Case Study. The concept of ‘new-to-practice is discussed in the Literature Review and did point to the possibility of it being regarded as a distinct phase within the wider Professional Identity/Professional Development project, (Blankertz, 1983; Rauner, 2007; Donnellan and Jack, 2010 and others) there was a degree of variation as to the length of time of this phase and its specific impacts on professional identity formation beyond the individual worker. Therefore it was not considered as a useful proposition for the current study, as its complexity would warrant separate investigation.

3.3 Unit of analysis

So for this study the participants at the heart of the data collection are confined to new-to-practice Social Care Workers; the ‘unit or analysis’ is the experience of those workers Professional Identity Formation. Furthermore this study focuses on the specific role played by discursive practices, i.e. the written and oral inter-professional communications engaged in, and encountered by, the worker in their professional identity formation. There is evidence in the literature to suggest a link between such discursive practices and PIF. For example, Pare (2001) researched the ways in which genres of professional discursive practices of Social Workers locate the individual worker within the power relations of institutional activities. Schryer and Spoel (2005) point out that such an approach ‘invites researcher to trace the interactions between larger institutional forces and the specific acts of communication performed by health professionals’ (pg. 256). This researcher has accepted that invitation but with particular reference to Social Care professionals. The same authors identify research within health care environments that explore the connections between workplace discursive practices and Professional Identity Formation. Of particular interest is Spoel and James’ (2003) research into Midwifery and its professional identity construction as an emerging profession within the broader context of established health-care fields.
and genres. The journey towards professional recognition, regulation and registration of Midwifery in Canada in the 1990’s has many parallels with that of Social Care in Ireland currently. As their research progressed, they distinguished between genres that are regulated and those that are regularized; the former created and imposed from outside through policy documents for example, and the latter internally created through the repeated discursive practices of the individual workers themselves. Their approach has informed how this research seeks to provide ‘a unique avenue for understanding [Social Care’s] complex and uneasy trajectory of professionalization within the dominant [Health and Social Care] system’ ((Schryer and Spoel, 2005: 270).

Although they do not reference it, their research bears many of the traits of Phronetic Research espoused by Flyvbjerg, Landman and Schram (2012) as ‘an idea whose time has come’.

**Diary entry (December 16th 2014):** At time of writing, the now week long coverage in all media of the abusive care of people with intellectual disabilities in a care home in the west of Ireland has penetrated my focus on ‘getting this chapter written’ and forced me to revisit my motivation to research this topic. One image from the RTE documentary about the care home sticks with me – that of an older woman with an intellectual disability being dragged across the floor by a staff member and in the background another staff member sat by a table writing, oblivious to this horrific treatment of one human being by another. What was this worker writing? Was she preparing documents for quality assurance? Was she completing professional records that would find their way into a system that would allow such practice to take hold and fester, shielded from outside monitoring? How did both acts, the physical mistreatment and the ‘record-keeping’ feed into the professional identity of the workers? How could professional care work become so far removed from human caring?

Implicit in my research question is the possibility that workplace writing and talking contains the possibility for both positive and negative influence on the professional identity of the individual worker and on the profession itself. It would be easy for me to become cynical about the purpose and function of written discursive practices in the social care workplace.
on viewing this expose, I need to remain open to the possibility too that record-keeping can have an important place, integral to good professional Social Care. I hope that my research can contribute towards a recognition of what ‘good social care’ is, a recognition by a system that fosters and supports it, by professionals who are proud of it and ultimately by the vulnerable adults and children who rely on it and who experience and feel it.

3.4 Linking propositions to data

Case Study Research design demands that there is a logic that links the data to the propositions (Yin, 1989 and 1994). In other words the propositions provide guidance for what data is being sought, how it is being sought and from whom. Phronetic Social Science (Flyvbjerg, 2001; Flyvbjerg, Landman & Schram, 2012) favours a pragmatic approach to social research and in particular those research methods that engage with the social world in a contextually sensitive and flexible manner. Schram (2012) argues that in phronetic social science, case study research moves from the margins as ‘an acceptable alternative’ to more established research approaches, to occupy a central position. This is because it is best placed to answer the four key phronetic questions originally proposed by Flyvbjerg in his book ‘Making Social Science Matter’:

(1) Where are we going?
(2) Who gains and who loses, and by which mechanisms of power?
(3) Is this development desirable?
(4) What, if anything, should we do about it?

(Flyvbjerg, 1998; 2006)

This approach to research is based on the Aristotelian concept of ‘Phronesis’, the ‘intellectual virtue used to deliberate about which social actions are good or bad for humans’ (Flyvbjerg, 2005: 39). It is considered alongside two other forms of knowledge conceptualized by Aristotle: ‘Episteme’, scientific knowledge that is universal and based on rational analysis; and ‘Techne’, seen as know-how or technical knowledge. Aristotle identified ‘Phronesis’ as an intellectual virtue that went beyond the other two because it involved judgment in action. Flyvbjerg summarises the concept well as ‘Deliberation about values with reference to praxis...Oriented toward action. Based on practical value-rationality’ (Flyvbjerg, 2004: 287). It is a form of practical wisdom
(Kinsella and Pitman, 2012) that provides a value reference point for professional practice. It also provides a useful re-orientation of social science research (Macklin and Whiteford, 2012; Flyvbjerg 2012).

By adopting a phronetic approach, this research uses the four question framework, above, to ensure that there is a praxis focus throughout the research. This approach permeates the entire research process and demands congruence between subject, method, analysis and purpose of the research inquiry. Fig 3.3 below illustrates the knowledge type and research implication for each of the three Aristotelian intellectual virtues. Macklin and Whiteford (2012) argue that scientific reason is not an appropriate test for interpretively oriented qualitative research. That view is reflected in the congruence that exists between the subject, method and analysis of this research. The methodological decisions are discussed in detail in the next chapter, but they are informed by a stance that not only fits with the theoretical underpinning of contextual constructionism, but also with the refinement of the research topic itself, so that its focus is on the concrete practice experience of Social Care Professionals within the immediate context of their workplace, the broader context of inter-professional work, and the wider policy and legislative environment that governs practice.

**Fig 3.3: Intellectual virtues and Social Science research**

| Episteme                          | Scientific knowledge. |
|                                  | Research that is concerned with uncovering universal truths and laws about Social Care discursive practice and PIF. |
| Techne                           | Know-how, skill-based. |
|                                  | Research using instrumental rationality to discover better skills - what works best. |
| Phronesis                        | Ethical and value based knowledge. |
|                                  | Research that is concerned with deliberation about (including questioning of) values and interests in Social Care. |
3.5 Relatability and the Research Question

One of the concerns about qualitative research, and case study research in particular, is just how particular is the case, or set of cases under investigation. This is usually addressed in the relatability, rather than the generalizability of the findings. It is also worth considering the relatability of the research question itself. In this research project, the focus of the question is on the PIF of a particular emerging profession (Social Care). The literature review revealed that there have been studies conducted about PIF relating to other professions such as Nursing (Willets and Clarke, 2012), Teaching (Williams, 2009), Doctors (Lingard et al, 2003), some of which have focused on the role of discursive practices in that process. The fact that there is a gap in the literature relating to exploring the relationship between discursive practices and their role in the PIF of Social Care Workers adds to the potential academic worth of this research. But beyond the commonalities and gaps that exist amongst these research projects that focus on professional identity is a deeper questioning that comes to light by using the phronetic approach. This questioning concerns the ways that professionals are prepared to practice ‘not only their technical competence, but also their commitment to their field’s public purposes and ethical standards’ (Colby and Sullivan, 2008). The same authors set out a threefold apprenticeship metaphor to examine the role of education and training in the development of new professionals across disciplines and fields of professional practice.

‘The three apprenticeships are:

(1) Intellectual training to learn the academic knowledge base and the capacity to think in ways that are important to the profession;

(2) A skill-based apprenticeship of practice: the craft know-how that marks expert practitioners of the domain; and

(3) An apprenticeship to the ethical standards, social roles, and responsibilities of the profession, grounded in the profession’s fundamental purposes.’

(Colby and Sullivan, 2008: 409)

Although they make no reference to Aristotle’s intellectual virtues, there is a clear correlation between Episteme, Techne and Phronesis and the first, second and third apprenticeships respectively. It is the third apprenticeship that draws together and
grounds the other two with a deeper expertise and ethical commitment. They draw attention to the marginalised position of the third apprenticeship within academia, where it often struggles for recognition and attention on professional education and training programmes. They suggest that this happens for a number of reasons: firstly, while the role of education and training in fostering the first two apprenticeships is clearly stated within educational institutions, the apprenticeship of ‘purpose and identity’ is far more ambiguous; secondly, and following on from the first reason, there is a challenge ‘to find ways of representing the importance of ethics, professional identity development and commitment to purpose’ (ibid, 419); thirdly, institutions are unsure if it is either legitimate or feasible for them to try to shape the character of their students, especially given the lack of clarity offered by the profession to define specific desirable characteristics; and fourthly, the contradiction between the value system of the academy, which includes scepticism, intellectual rigor, and objectivity, with those of professions based on subjective engagement.

3.6 ‘Good’ Social Care Work

This research carries with it the proposition that Social Care exists as an emerging profession. As such, the uncertainty about its official status in terms of regulation and registration will be resolved through the established mechanisms of the statutory agency, CORU as Regulatory Council. The longer term ‘professional project’ through which Social Care establishes the kind of profession it is to become will also emerge over time. This research examines the lived professional experience of individual Social Care Workers and, in doing so, may reveal the extent to which the professional, her/himself, is a passive or active actor in that professional project. If Social Care is to achieve what Gardner et al (2001) described as ‘authentic alignment’ – where the values, culture, ethical standards and expectation of professionals are in synch with those of its key stakeholders – then Social Care Professionals need to be active participants in understanding and defining their professional role and the contexts in which it is practiced. By examining the role and context as experienced by professionals, this research hopes to contribute to a clearer understanding of ‘Good [Social Care] Work’ Gardner et al (2001).
Chapter 4
From Methodology to Engagement

4.1 Introduction

The previous chapter set out the main influencing factors on methodological decision-making. That discussion reached back towards the theoretical underpinning of Social Constructionism and sought to give expression to that epistemological approach by aligning it with the Aristotelian concept of Phronesis. A key theme that permeated this discussion was ‘congruence’, an approach that emphasises a clear alignment between topic, approach, design, method, analysis and dissemination. That approach presents a practical literary challenge in how best to separate this thesis into distinct chapters. To borrow architectural design parlance, what is sought is the flow of open-plan rather than the distinct spaces of conventional build. To continue the metaphor: it is necessary to be able to explain and justify design choices (whether in building or research) and to set these out for the objective reader. This chapter aims to do just that, to explain, and to justify research decisions made in relation to this project against the underlying concepts and positions discussed in previous chapters. The title of the chapter ‘From Methodology to Engagement’ expresses the ongoing commitment throughout the project to capture real, lived experience and allow it to inform a broader and deeper understanding of the professional identity formation of Social Care Workers.

The purpose of this chapter is to describe, explain and provide justification for the research decisions taken as the project develops or along what McDonagh et al (2012) call ‘the research journey’. That metaphor, and indeed that purpose, might give the (false) impression that research is a neat, linear process. The same authors point out that ‘Frequently research can be a messy non-linear process’ (ibid: 50). They go on to quote Mellor (2001) who talks about the ‘struggle’ that was at the heart of his practice and research and how ‘the struggle became the methodology itself’ (ibid). In acknowledging that such a description is valid, especially when one is attempting to
research one’s own professional environment/practice, my task as researcher in this project is to create a space in which certain strands of a complex process of practice and experience can be examined and understood in a context beyond where that practice took place or that experience happened. So without attempting to put order on the ‘messiness’ of the professional Social Care world, this chapter does attempt to put some order on how the various and interconnected research decisions relate to one-another. To that end the chapter begins with a broad description and critique of qualitative research, whilst at the same time arguing in favour of its suitability in this project. It is difficult to separate that discussion from considerations of who and how to sample, which, in turn demands that attention be given to research ethics. The data gathering tools, ‘Conversational Interviewing’, ‘e-Journaling’ and ‘Policy Assemblaging’/Content analysis (Ball, 1994) are innovative adaptations of established research practices, tailor-made to give breadth and depth to the Collective Case-study approach (Yin, 2003; Stake, 1995). As mentioned above, ‘congruence’ between all aspects and stages of the research is the hallmark of the phronetic approach that informs this project. Therefore any discussion on method cannot be divorced from the information management and analytical strategy engaged to make sense of the data gathered. The chapter concludes with reference to my own ‘researcher role’ (Fink, 2000 and others), because the greatest strength and potential weakness of qualitative research lies in the self-awareness of the researcher.

4.2 Choosing a Qualitative Research approach
Considerable space has been given to the epistemological considerations about what counts as knowledge or knowledge sources within this study. It has been argued that, in order to best answer the research question, the inhibited voice of the individual newly qualified Social Care Worker needs to be given a platform. This equates to deVaus’ (2009) notion of the function of research design. He states clearly that ‘The function of a research design is to ensure that the evidence obtained enables us to answer the initial question as unambiguously as possible’ (pg. 9). It does not automatically follow that a particular ‘type’ of knowledge is to be found by exclusively using a particular data gathering method. It is through consideration of the type of
evidence to be gathered, from whom, and in what context all contribute to deciding on the most appropriate strategy and tools for gathering that evidence. The importance of this distinction between Research Design and Research Method is highlighted by Yin (1989 in deVaus, 2009) when he says that the former deals with a logical problem and the latter a logistical problem. Both need to be assessed on their own merits. The preceding two chapters discussed the logic applied to researching the topic under investigation; we now move towards the decisions that flow from that discussion, towards the logistics of gathering the evidence. As mentioned above, the research process is not a simple linear one, and, on a practical level, can be messy and somewhat of a struggle. Nevertheless, it is the task of the researcher to be able to, if not remain aloof from the process, at least be able to emerge from it to gather his/her bearings. The connection between logic and logistics – between topic and method, is set out graphically in Fig 4.1 below.

**Fig 4.1: Research ‘spine’**

Between Research Design and Research Method, we find Research Strategy, which is described by Ragin (1994 and 2010) as structuring how social researchers collect data.
and make sense of what they collect. While acknowledging that ‘there are many different strategies of social research’ (Pg. 48), the same author summarises three broad approaches, namely:

- ‘the use of qualitative methods to study commonalities
- the use of comparative methods to study diversity
- the use of quantitative methods to study the relationship among variables’

(ibid.).

Both the broadness and the distinctness of this categorisation may be misleading if taken as anything more than illustrative. However for illustrative purposes they provide a useful starting point for moving from design to method. Ragin goes on to provide a graphic ‘ready-reckoner’ to assist in the research decision-making (see Fig 4.2 below)

**Fig 4.2 Research strategies (based on Ragin, 1994)**

![Diagram of research strategies](image-url)
The strategy employed in this research project was dictated by both the definition of the sample (logistical issue) and the nature of the topic and research questions (logical issues). This reiterates McDonagh et al’s (2012) reference to the non-linear nature of the research process. Fig 4.2 therefore is as much an explanation of what the research strategy of this project is, as it is a justification of it.

4.2.1 Collective Case Study v Small-scale phenomenological research

As a Collective Case study with a small number of cases, but with a large number of aspects relating to each case, this project is undoubtedly qualitative in nature. Yin (1993) points out that just because a case study approach is taken, it does not necessarily follow that qualitative data gathering methods are used. However in this research project that seeks to examine the experiences of Social Care Workers within their work setting, qualitative methods are used because they provide the best opportunity to generate the type of evidence necessary to examine the research question in depth. What distinguishes this Collective Case Study from a Small-scale Phenomenological Study is that before examining the commonalities that may (or may not) exist across cases, each case is presented in its own right. This adds to the coding and analytical aspects (discussed under ‘Analysis’) and is necessary because of the generic and emergent nature of the professional roles of the subjects - the new to practice professionals themselves. By focusing on ‘discursive practices’, again, it is the workers’ experience that is sought as being a source of rich data in the first instance; what emerges as thematically common beyond the individual experience may add to that richness. It is important to bear in mind the aims of the qualitative approach, outlined by Marshall (1996) as being where improved understanding of complex human issues is more important than generalizability of results.

4.2.2 Characteristics of Qualitative Research

Before critiquing the specific methods themselves, it is worth looking at the main characteristics of qualitative research and the questions it raises for the research enterprise as a whole. According to Kasinath (2013) ‘qualitative researchers study things in their natural settings, attempting to make sense of, or interpret, phenomena
in terms of the meanings people bring to them’ (Pg. 47). In a similar vein, Hull (1997) identifies the core purpose of qualitative research as being ‘to reveal both the processes by which people construct meaning about their worlds and to report what those meanings are’ (p. 14). A third view is proposed by Carspecken (1996) who emphasises the opportunity for change offered by ‘critical qualitative research’ which he sees as fostering ‘participants’ greater understanding of their world and the possibility of change for the better’ (in Stewart and Usher, 2007: 996). These three views focus on a key characteristic of qualitative research, namely the role of the research participant. There is a movement from Kasinath’s approach, where the participant is the source of the data for the researcher to interpret, through Hull’s view of the participant providing ‘meaning-laden’ data for the researcher to analyse, and on to Carspecken’s promotion of the participant towards being an agent of change through their participation in the research process.

**Reflective note:**

Apart from the common ethical issues of informed consent, confidentiality and no-harm, little attention is given in the research literature to the role of the participant within the research process. From the outset, I was very conscious of the fact that the participants in this process were likely to have responded positively to the invitation to participate because they were interested in the topic not merely as a curiosity, but as having the potential to change the professional world that they inhabit. This raises an important question for me as a researcher: how do I remain detached as a researcher and not be seen as an ‘agent provocateur’ or advocate for change? Being conscious of the potential roles of both the researcher and researched helped in the filtering process of deciding on the most appropriate methodological approaches. In particular, the collective case study as a research strategy allowed both me and the individual research participant to view their contribution primarily as an individual story, unique to them, and after that to contribute to a broader thematically-based collective understanding. I need to continue to give a prominent place to my awareness of the researcher/participant relationship beyond the data-gathering stage and through the reporting, analysing and presenting of findings phases.
The Education Resources Information Centre (ERIC) provides a useful summary of key characteristics of Qualitative Research. Drawing on a wide range of authors on the subject they include the following six:

1. Qualitative inquiry occurs in natural settings,
2. Qualitative inquiry has an interpretive character,
3. Reporting is detailed - what is termed ‘thick description’,
4. Researchers are themselves the instrument for both data collection and analysis,
5. The process is inductive,
6. The process is flexible.

Taken together, they combine to make a persuasive argument in favour of the qualitative approach. To gather data from within its natural habitat adds to its authenticity; to record and report that data in-depth and detail, and from a number of different angles, ensures that it is more likely to holistically reflect reality; allowing that data to guide the formation or adjustment of theory creates a respectful relationship between academia and the ‘real world’; the close involvement of the researcher in the process, promotes commitment to the research process and care for the participants; the inductive nature of the enterprise preserves the space that allows the lived experience of the case/phenomenon to exist on its own terms and to contribute to a broader or deeper understanding of the research question; and its flexibility enables a wider variety of topics to be examined in a wider variety of ways. These are strong arguments in favour of a qualitative approach being taken for this project. That being so, it is important to critically assess not just the suitability of method to topic and context, but to also consider the potential weak points of the method itself. Miles & Huberman (1994) for example, warn that, whilst

‘qualitative data may be “sexy”, and data analysis techniques and procedures have come a long way over the past ten years, that many of the pervasive issues ... have not gone away: e.g. data overload, labour intensiveness, researcher bias, the problems of ensuring generizability’ (in Dainty, 1997: 485).

The actions taken to address these concerns regarding the current research are dealt with under the heading ‘Reliability and Validity and the concept of ‘goodness’” below.
Those who present the advantages of qualitative over quantitative research often emphasise the ability of qualitative research to go beyond merely collecting facts, to ‘provide the actual scientific explanations of facts’ (Oevermann in Flick, 2006: 25). The counter argument points to the objectivity, rationality and representativeness as features that retain the dominance of quantitative research as the scientific approach. Some writers on research promote a ‘détente’ position, arguing that topic and context are the deciding factors regarding the supremacy of one approach over the other. Cicourel (1964 and 1981) and Denzin (1970) for example, are among those who point out that quantitative research ‘may simply be inappropriate to some of the tasks of social science’ (in Silverman, 2011: 16). They go on to explain that ‘while quantification may sometimes be useful, it can both conceal as well as reveal basic social processes’ (ibid).

4.2.3 Research stance

However, to rely solely on context and topic to guide this aspect of research decision-making would be to ignore more fundamental research debates about the nature of knowledge and the nature of social phenomena. Depending on the starting philosophical standpoint, research decision-making will progress on broadly differing paths. The positivist/objectivist orientation leads to hypothesis-testing through quantitative data collection methods, whilst the interpretivist/constructivist orientation leads to qualitative methodologies that allow meaning and feelings to be included as valid data.

Whilst it may be possible to separate and critically examine the strands of influence that guide my research decision-making for this project (the nature of the topic, the context of the evidence, my own epistemological position, pragmatic considerations, the availability of subjects, my relationship with the topic and so on), it is more difficult and perhaps less necessary to identify a hierarchy of influence assigning to each its level power within the decision to proceed along qualitative lines. In considering these strands of influence, I become conscious of my overall research stance, best expressed by Riessman (1994), a stance based on ‘Scepticism about universalising generalisations; respect for particularity and context; appreciation of reflexivity and standpoint; and the need for empirical evidence’ (Riessman, 1994: xii).
4.3 Collective Case Study: rigour by design
‘Qualitative case study methodology provides tools for researchers to study complex phenomena within their contexts’ (Baxter and Jack, 2008: 544). Professional Identity Formation is a multifaceted process uniquely experienced by the individual worker. As noted in the Literature Review, it is, according to Clarke et al (2013) ‘complex, personal, and shaped by contextual factors’ (pg. 8). Although this research project does not set out to capture and analyse the PIF process as a whole, it does seek to understand how it is impacted by an aspect of professional activity, namely discursive practices. The theoretical lenses of Rhetorical Genre Theory and Enactment Theory provide a focusing framework but do not reduce the complexity of the researched phenomenon under investigation. That complexity demands an approach to data collection that is able to generate richness of data and ensure a high standard of rigour, where ‘rigorous research’ is defined as ‘research that applies the appropriate tools to meet the stated objectives of the investigation’ Ryan (2005: 5). Denzin (1978) pushes home this point by defining rigour as the goal of making “data and explanatory schemes as public and replicable as possible” (p. 7).

Fig. 4.3 Summary of data-collection tools

The previous chapter located the Collective Case Study approach within the context of the target population, taking account of the particular characteristics of that
population as an emerging professional group (see Fig 3.1: Sample Profile). Here we critically examine the approach itself. De Vaus (2009) states that ‘the case study has been the ugly duckling of research design’ (pg. 219), while Schram (2012) is more direct in his claim that case studies are no longer a marginal form of social science research. Either way, as the central methodological base of this research project, it is worth examining its strengths and limitations.

4.3.1 Yin’s summary points towards research rigour

One of the strongest proponents of Case Study research is Robert Yin. His approach is to meet questions about the validity and reliability of the methodology head-on. Writing in 2004, Yin adopts a perspective on ‘Case Study Methods’ that sees them ‘emulating the principles of scientific research’ (pg. 24). He provides eight key summary points that he describes as basic considerations. The first two are concerned with the broad strengths of case study, being able to achieve in-depth examination in natural habitats, as well as its particular suitability to addressing descriptive or explanatory questions. We have already established the suitability of the methodology for this project, through its focus on the lived professional experience of those involved in an emerging profession. Yin’s final two summary points relate to managing, analysing and presenting findings, topics that will be given attention in the next chapter. Here, however, it is the four summary points that deal with best research practice in carrying out case study research that provide a useful vehicle for the critical examination of the methodology in relation to the current research project. Each of Yin’s four points is presented (in italics) and then discussed from a praxis perspective.

Yin: Point 1: A key demand of the case study method is the investigator’s skill and expertise at pursuing an entire (and sometimes subtle) line of inquiry at the same time as (and not after) data are being collected’ (Yin, 2004: 4). The image of the ‘Plate Spinning’ circus act comes to mind here. In trying to build towards a deeper understanding of PIF in this project, it is important to remember the theoretical lenses that are being used. Although Rhetorical Genre Theory and Enactment Theory are compatible, the data most relevant to each may arise through any of the three data collection channels in place. This makes it necessary to establish a method of data organisation and management capable of handling this complexity. A ‘Computer
Assisted Qualitative Data Analysis Software’ (Fielding and Lee, 1991) provides a holding platform that lessens the need for me as a researcher to keep running from plate to plate in order to keep it spinning.

The particular CAQDAS in use is NVivo 10 whose merits, limitations and application are critiqued in the next chapter. However for the purpose of addressing Yin’s point, it is important to point out that questions about ‘what to collect’ and ‘how to collect’ are interwoven. Yin raises an important question about the researcher’s skill and expertise. In this case, in addition to the support offered by a structured PhD format, I undertook specialised training in Nvivo use. It was only when its usefulness to the research effort was clearly established and my own competence had risen to adequate levels, that the research decision to employ it was made.

**Yin, Point 2:** ‘A good case study design, at a minimum, involves: defining your case, justifying your choice of a single- or multiple-case study, and deliberately adopting or minimizing theoretical perspectives’ (Yin, 2004: 6). As a multiple-case study, this research can claim advantage over single case study research as, according to DeVaus (2009), ‘multiple case designs will normally be more powerful and convincing and provide more insights than single case designs’ (pg. 227). The subject of investigation here is not a clearly boundaried one. It is subjectively experienced by each individual, and therefore, would multiple-case study not simply continue to generate an endless array of insights, to the detriment of theoretical clarity? There is a judgement call to be made here on the part of the researcher. Some guidance is offered by the concepts of ‘Theoretical Sampling’ (Flick, 2006) and ‘Replication Logic’ (Yin, 2003). The idea here is
that cases are not chosen on the basis of statistical representativeness of a population, but on the basis of their ‘expected level of new insights...’ (Flick, 2006: 118). This implies that there is a point at which sampling stops, but that this point is not decided in advance, but during the research process. That point is referred to as Theoretical Saturation’ by Glasser and Strauss (1967, in Flick, 2006: 119). More straightforward guidance is offered by Marshall (1996) who suggests that ‘the number of required subjects usually becomes obvious as the study progresses, as new categories, themes or explanations stop emerging from the data (data saturation)’ (pg.522). The sample for this study are selected on the basis of theoretical sampling with a matrix of ‘selection criteria’ designed to both preserve the sampling model that enables replication (both literal and theoretical) and avoids a researcher bias associated with convenience sampling.

Yin, Point 3: ‘The case selection or screening goal is to avoid the scenario whereby, after having started the actual case study, the selected case turns out not to be viable or to represent an instance of something other than what you had intended to study’ (Yin, 2004: 8). The term that Yin uses to describe the selection of multiple cases most pertinent to this research project is ‘confirmatory cases’. Here, cases are selected on the basis that they will provide data that replicate the same phenomenon. That is not to say that it is expected that each case will experience the phenomenon in exactly the same way. In presenting his ‘summary points’, Yin may be seen as trying to satisfy a set of evaluative criteria matching those of quantitative research and/or positivist designs. That would be a mistake because, doing so would devalue the essence of the qualitative, constructivist and interpretative paradigm, central to this case study research. So for this study, cases may be selected with the confident prediction that they will have experienced the same phenomenon (PIF), but what is less predictable, and necessarily so, if we follow a constructivist approach, is the nature of how their PIF is impacted by discursive practices. The latter is a complexity that, for Peshkin (1993), is worth dwelling on. Borrowing an analogy of ‘an infinite path’ from Vidich and Bessman (1968), Peshkin concludes that

‘The travels we take down the “infinite path” can only be facilitated by a type of research that gets to the bottom of things, that dwell on complexity, and
that brings us very close to the phenomenon we seek to illuminate’ (Peshkin, 2003: 28).

Yin, Point 4: ‘In collecting case study data, the main idea is to “triangulate” or establish converging lines of evidence to make your findings as robust as possible’ (Yin, 2004: 9).

Triangulation in research is understood as the use of different data sources and/or method of data collection to increase the validity of a study. Patton (1987) and Denzin (1978) identify four types of triangulation:

- Methods triangulation – validation through use of different data collection methods, [Interview, Journal, Policy Documents].
- Triangulation of sources – to gain different perspectives on the same phenomenon, [Multiple cases].
- Analyst triangulation – using different analysts to review the collected data and offer a range of possible interpretations.
- Theory/perspective triangulation – where more than one theoretical perspective is used to examine and consider the data. [RGT and Enactment Theory].

Apart from ‘Analyst Triangulation’, all these triangulation types are employed in this research project, indicated in italics. There is a sense here too, that Yin’s attempt to ‘translate’ the language of dominant research design to qualitative approaches misses the extent of the fundamental shift in research perspective. This shift is better expressed by Richardson (2003) who says simply ‘...we do not triangulate; we crystallize’ (Pg. 517). The image conveyed here is that validity is not a fixed point, but an ever deepening understanding achieved by considering multiple reference points (like light reflecting and refracting through a crystal). One does not need to embrace this post-modernist perspective in its entirety in order to appreciate the underlying point, namely that the purpose of giving increased attention to triangulation in qualitative research is to ensure that the resulting account ‘is rich, robust, comprehensive and well-developed’ (Pandey and Patnaik, 2014: 5747). Where confidence in the ‘truth’ of the findings is sought, Lincoln and Guba (1985) use the term ‘credibility’ and see it as being similar to ‘internal validity’ in positivist research.
By giving attention to each of Yin’s summary points the reliability and validity of this collective case study is strengthened. Together they enhance what Lincoln and Guba (1985) call the ‘trustworthiness’ of the research. Trustworthiness in research is achieved in a similar way to how it is achieved in life in general: through honesty, transparency, consistency and clarity of communications. The researcher must go beyond justifying the research decisions; the research process must be made transparent. The criteria for selecting the purposeful sample for this project have already been presented; now the process of identifying participants is set out.

Reflective note:

As a member of IASCE (The Irish Association of Social Care Educators) for a number of years, I was in a position to informally approach a number of educators from different colleges. This gave me a clear picture of the administrative structures and processes that I was likely to encounter in gaining access to the target population. Two points emerged from my initial enquiries: firstly, most colleges were very positive regarding any research as to how their Social Care graduates were doing because there was little or no graduate survey information available, and secondly, the procedures regarding making contact with the target population was not consistent across colleges. It was tempting to follow the path of least resistance, i.e.: to approach only the colleges who seemed to have least administrative obstacles; or even those colleges with which I had strongest personal and professional connections. However, in order to ensure that I maintained a level of objectivity within the research generally, I decided to start as I meant to continue and to systematically approach all the colleges that offered Social Care courses in the same way. The emphasis was to be on researcher objectivity rather than on either convenience on the one hand or on representativeness on the other.
4.4 Recruiting case participants

The process of recruiting participants began with a formal letter (See Appendix 1) to the relevant department leader in third level institutions who offered degree programmes in Applied Social Studies in Social Care. The letter requested a random list of Social Care Agencies in which Social Care students secured placements. The logic behind this approach was that (a) I was not looking for student names directly and thus avoided data protection issues, and (b) because it is a requirement that Social Care Students on placement be supervised by a qualified Social Care Worker, this would mean that such a list would contain agencies that recognised and employed Social Care professionals. By generating such a list, built from a range of colleges, I could then create a master list that would likely be a source of potential research participants meeting my sample criteria. Responses came in one of three forms: (a) an instruction to approach the college Placement Co-ordinator directly for the information; (b) a list was provided directly by the college Department leader; (c) the citing of administrative complications or college policy as blocks to providing such information.

Despite the latter of these responses, a formidable list of Social Care agencies consisting of varied social care sectors and a wide geographical spread was formed. The next task was to ‘cold call’ the agencies, speak to a manager and ask if a member of staff matching the ‘new to practice’ criterion could be approached. The main limiting criterion was that many agencies had not recruited any staff in the last five years. However an initial list of six potential participants matching my sample criteria was established. Informal contact was made and on confirming openness in principle to participate, a formal invitation letter was sent (See Appendix 2) to the individual worker. In line with the approaches to theoretical and data saturation (Glasser and Strauss, 1967; Flick, 2006 and Marshall, 1996), an exact number of samples could not be decided in advance. Saturation points would not emerge until some data had been gathered and initial analysis begun. Onwuegbuzie and Collins (2007) are amongst few writers that offer guidance on sample size in qualitative research.

‘In general, sample sizes in qualitative research should not be so small as to make it difficult to achieve data saturation, theoretical saturation, or informational redundancy. At the same time, the sample should not be so large that it is difficult to undertake a deep, case-oriented analysis’ (Pg. 287).
They go on to compile a table of sample size recommendations related to particular methods based on the work of writers on qualitative research. Referring to ‘Case Study’, a minimum of 3-5 cases is recommended. They do not identify a maximum. However, mindful of the potential of the data collection methods included in this study to generate a substantial volume of data, an upper limit of 11-12 cases was targeted. Stake (in Kasinath, 2013) warns the researcher against losing that which is unique about the individual case in an effort to find similarities with other cases. It was important, therefore, to work towards achieving a sample size that would enable a depth of analysis at individual and cross case level that would reveal a new understanding of the research topic.

4.5 Data-gathering: ‘noticing’ and ‘rich points’

Marshall (1996) draws attention to the fact that qualitative research demands a research design that is flexible and has ‘an iterative, cyclical approach to sampling, data collection, analysis and interpretation’ (Pg. 523). Transparency is more important than matching what he refers to as the ‘stepwise design of quantitative studies’ (ibid). Where research decisions are transparent, the credibility of the findings is enhanced. Part of that transparency is the careful consideration of the relative strengths and weaknesses of the data gathering tools. Taken together, the data-gathering tools, namely, Conversational Interviewing, e-Journaling and Content Analysis, combine to provide a holistic picture of how the Social Care Worker participants have experienced Professional Identity Formation in the context of their daily work. The methods were chosen because of their individual attributes in gathering specific kinds of data – data that would assist in answering the research question.

4.5.1 Conversational interviewing:

‘Asking questions and getting answers is a much harder task than it may seem at first’ (Fontana and Frey, 2003: 61). This note of caution is particularly relevant when considering how best to gather data in the research context. In qualitative research in particular, where there are likely to be smaller numbers of interviewees, who is asked is of vital importance. The purposeful selection of the sample has already been discussed. As important as the ‘who’, however, is the ‘what’ and the ‘how’ of data
gathering through interviewing. In the context of this Collective Case Study the interviews form part of a set of data generating tools that are aimed at capturing an experience that continues to be part of the professional life of the participants. It is seen as important, therefore, that the interviewees, who are also asked to provide the other types of data, need to see themselves as active participants in the research process.

Fernqvist (2010) adopts what is termed ‘The Active Interview’ approach from Holstein and Gubrium’s (1995) model. In their seminal work, ‘The Active Interview’ they see that this approach ‘takes a constructionist perspective on the interviewing process and interview products’ (pg. 85). Fernqvist logically asks that, in the case of qualitative research, can interviewing be anything but active? She goes on to point out that ‘interviewing is to a varying extent perceived as an interpretive and reflexive process’ (ibid). As such, Fontana and Frey (2003) identify a movement from a traditional approach to interviewing, where the interviewee was a passive source of information that would emerge through the questioning of the interviewer, to viewing the ‘interview as negotiated text’ (pg.90). At either end of the scale, the interview is a social engagement. It is important to be aware of the relationship and possible power dynamic that exists between the interviewer and respondent. Just because we declare the interview to be ‘negotiated’, it does not necessarily follow that the power balance has shifted – after all it is the researcher who has control of the ‘negotiations’.

4.5.1.1 The Interview Guide
The interview strategy used in this project is described as ‘Conversational Interviewing’ (Roulston, 2008; Conrad and Schober, 2000; Suchman and Jordan, 1990). As an interview method, there is an emphasis placed on three features of regular conversations, namely sociability, reciprocity, and symmetry in turn taking (Roulston, 2008). Although conversational interviewing is often contrasted with structured interviewing, that is not to say that it is an unstructured process. Indeed, in the same way as the actions of a football team may appear as ‘flowing’, this fluidity is achieved as a result of careful attention to an underlying structure. Kitchin and Tate (2000) hold the structured/unstructured distinction through to within the conversational interview technique itself. They contrast the ‘Interview guide approach’ where topics are
specified in advance but the interview is more flexible and conversational, with the ‘Informal conversational interview’ which lacks formal structure and has no predetermined questions or topics. It is the former that is applied in this research. The Interview Guide approach allows engagement with the respondent in a way that allows them to ‘feel free to participate in extended discussions of research topics in a less hierarchical environment’ (Roulston in Given, 2008: 127). The interviewer-respondent rapport is important in two distinct ways. Firstly, it is important that the respondent is confident enough to become an active collaborator of knowledge-making and not see themselves merely as giving ‘right’ or ‘wrong’ answers; secondly, there must be a consistency of meaning shared by interviewer and respondent and across cases.

4.5.1.2 Advantages and limitations of Conversational Interviewing

This research project is concerned with the experiences of newly qualified professionals in a profession that is itself at an emergent stage. For this reason it is anticipated that answers may not be clear of straightforward. The respondent must be free enough to ‘struggle to find the right words’ and not feel judged because of this. The conversational style sets a tone for the interview. It also fits with the professional experience of this researcher, whose work includes visiting students on practice placement to conduct ‘Tripartite Assessment Meetings’. Here students report on their work in the presence of their Placement Supervisor and College Tutor. That experience leads to a confidence that a conversational style allows for a re-balancing of the power relationships that are part of that assessment process. Helping a nervous student relax allows them to think and communicate more freely and to more accurately articulate their placement learning experience and professional development. One of the challenges for me as interviewer is to ‘keep track’ within the interview. Each interview needs to be allowed to flow as a conversation, but also needs to contain enough structure to ensure that there is a common range of areas discussed across the cases. This balance is achieved by use of an innovative ‘Interview Guide’ (See Appendix 3). This guide is designed to be used as a collaborative tool by both interviewee and respondent. Visible to both, it enables the conversational interview to progress in a non-linear fashion and for the respondent to share in guiding its direction and to make
connections between questions in ways that would not be possible in a conventional ‘semi-structured’ interview schedule held in the hands of the interviewer. Therefore, it is hoped, that by drawing on this prior interviewing experience and by using this innovative interviewing tool, respondents within this research will actively and confidently participate in data generation. As the sole interviewer, there is not the same concern for unanimity of approach as there would be where there is more than one interviewer involved as cited in Flick’s (2009) discussion of ‘Procedural Reliability’.

The approach outlined above is in line with what Thomas (2012) describes as a ‘discursively informed phronetic approach’ (pg. 10). In order to achieve a ‘mutually constructed account’ the researcher must become skilled in managing the micro-power relations that exist in the interview context. This involves moving beyond a focus on the researcher’s power over participants to locating the object of investigation, and the investigation itself, in a wider context of social, cultural and political debate. The conversational interview allows this shared space to be created. The ‘conversation’ element is more than simply ‘designed to assure that all respondents understand questions as intended in a standardised way’ (Suchman and Jordan, 1990). Elsewhere the same authors use the phrase ‘stability of meaning’ and argue that this is best facilitated in the conversational approach. In survey interviewing this is key to the validity of the data and, by extension, similar care should be given to multi-case studies. In the former that clarification is provided by the interviewer, often in response to the respondent’s query; in the latter the shared understanding is achieved collaboratively and goes beyond question clarification. In short, the purpose of the conversational interview approach in survey research is to establish a shared meaning of the questions being asked, whereas in the qualitative collective case study there is an emphasis on establishing shared meanings about the topic.

4.5.1.3 Reflexivity and The Researcher

An important question emerges in relation to conversational interviewing, irrespective of the primary purpose of the approach. The question concerns the degree of influence of the interviewer on the data-gathering proceedings. The answer usually centres on ‘Reflexivity’ – ‘an attitude of attending systematically to the context of knowledge construction, especially to the effect of the researcher, at every step of the
research process’ (Cohen and Crabtree 2006). In this research, reflexivity is achieved through the use of a research diary, extracts of which appear throughout the project. Because of the nature of the project, one of the main features of the Research Diary is its ability to maintain a high level of ‘researcher self-awareness’. This is important because of the linkages between conceptual underpinnings, theoretical framework, methodological design and analytical approach. A strength of the research is the congruence between ontology, epistemology and method. However, if the researcher is not aware of their potential to influence the research process, it is difficult for the reader to assess the value of the findings.

Reflective note:

The location of interviews was an interesting and time consuming aspect of the research process that I hadn’t reckoned on being a challenge prior to beginning the interview stage. Each interview was arranged individually and the range of settings both within and outside of the workplace was wide. I became adept at bargaining with hotels for the free use of meeting rooms or vacant dining rooms. What each location had in common however was that it provided a comfortable, undisturbed ‘casual’ space that facilitated the interview dialogue and recording. Significant behind-the-scenes work was put in to ensure that the interviewee would feel relaxed and confident. This involved also consulting with each participant regarding options either in or outside of their workplace. This informal engagement with the participant helped establish a rapport that promoted collaboration in the overall research endeavour.

Koch and Harrington, (1998) suggest that reflexive research is characterized by ongoing self-critique and self-appraisal. They go on to make the point that the ‘research product’ or the data to be given meaning through analysis can be given shape by the politics of location and positioning. This project focuses on the lived
professional experience of Social Care Workers. A proposition of the research suggests that such experience itself takes place within, and is shaped by the politics of location and positioning. It is important not to lose sight of the micro-political relationships that are part of the data-generating phase of this research project. This involves acknowledging, as Denzin and Lincoln (2003) do, that in qualitative research 'objective reality can never be captured' (pg. 8). But that is not a statement of desperation, rather it is one of explanation of what is sought and valued in qualitative research, namely breadth, complexity, richness, and depth. This is more than a simple matter of triangulation; in this project there is a strong connection between the three data generation tools. The interview is not simply an information gathering exercise; it also enables the respondent to (a) begin the process of identifying the discursive activities that will feature as a central part of their E-journaling, and (b) to name the Policy Literature that inform analysis of practice activity within a wider policy context.

4.5.2 E-journals

In order to gather examples of written and spoken texts generated through the deliberative communicative actions undertaken as part of daily professional activity, a number of options were considered. It was possible to predict the kinds of data that could be expected to be included: Forms-in-use, Agency Guidelines, Record logs, Daybooks, Critical Incident Documents etc. together with spoken 'texts' through Handovers, Supervision, Team Meetings, Multidisciplinary Meetings etc. Some of these could be identified in the interview, as could the contextual and policy documents for documentary analysis (Organisational/ Professional Guidelines and Codes of Practice, Policy Documents, Circulars, Employment Contracts, Job Descriptions etc.). Fig. 4.4 below would act as a prompt to assist respondents in identifying the range of discursive activities. It should be noted that the artifacts gathered as data are documents in the public domain and templates of recording instruments. Evidence for analysis does not extend to the content of records relating to individual service users.

The interview was designed to act as a springboard for the journaling exercise. Participants had already agreed to keep a journal over a one month period. That period of time was chosen because it was estimated that even where shift-work was involved, at least one full shift cycle would have occurred within a month. Journaling
was favoured over observation as a method of data collection here because of the nature of the work settings. Social Care Workers ‘typically work in a more immediate way with service users, sharing their daily living environment and interacting across a range of care, domestic, education and semi-therapeutic settings’ (Lalor and Share, 2009:8). Observation was viewed as being potentially disruptive and over intrusive; journaling, however, could take place without impacting on the working environment.

**Fig 4.4: Levels of Workplace Discursive Activities**

| Level 1: Professional verbal and written activity – the daily communicative activities between staff; the written recording and reporting of work; verbal and written engagement with service users. |
| Level 2: Agency Policies and Procedures – the written guidelines, protocols and directions that monitor and regulate the work; documentation that informs the work and expresses the approach to the work of the agency. |
| Level 3: Inter-agency work – professional communications with other agencies/professionals/key stakeholders; presentation of agency’s work to the outside world. |
| Level 4: Statutory policies and legislation – legislation and national guidelines that directly inform the work of the agency; national policies, regulations and practice guidelines that provide a structural framework for the work. |

The journal-keeper, in recording instances of professional communication, is also asked to reflect on these instances and to locate them within their overall professional role. Again several options as to how best to conduct this aspect of data gathering were considered. On consultation with the research participants themselves, the
electronic option came to the fore as the most convenient. As recent graduates, all were familiar with Moodle software as a learning platform in the third level institutions that they had attended. That software includes a facility for journal building, and having examined its security and confidentiality issues (see ‘Ethical Considerations’ below), it was decided to create an electronic journal template (see Appendix 4) for each participant. This would allow journal entries to be monitored by myself and to be added to by the participants as convenient.

4.5.2.1 Logs, diaries or journals?

Some researchers (Burgess 1994) draw attention to the distinction between logs, diaries and journals, with the distinction based on style. This ranges from the largely unstructured, reflective nature of diaries, to the aide-memoire function of logs and the more structured and objective style found in journal keeping. However, such a distinction is somewhat arbitrary as there are as many overlapping aspects as distinguishing features between them. More important than clear categorization, is ensuring that the method is fit for purpose. In the case of this research, method fits with context and purpose. Burgess’ (1994) guidance is heeded when he notes that (a) ‘it is important to give guidance on the topic areas that need to be covered’ (pg. 309) and (b) it should be considered as ‘one method of obtaining data and therefore needs to be linked carefully to other research activities’ (ibid). The former is addressed by creating an overall template with headings and expandable text boxes; the latter by linking it back to the interview and forwards to the content analysis aspects of the research process. Research participants were also invited to remain available for a post-journaling interview (Zimmerman and Wieder, 1977).

Symon (2004) identifies several ways in which diaries have been used in qualitative research. She offers a useful guiding example (Plowman, 2002) where diaries were used to investigate the role of the organizational change agent. In this example, respondents made weekly entries ‘based on a series of four very open ‘guiding questions’… which allowed her to explore more of the informal practices of change and encouraged the respondents in some self-reflection on their role’ (pg. 99). This is similar to what Jacelon and Imperio (2009) refer to as ‘solicited diary’. ‘The format of maintaining a solicited diary encourages the participant to focus on daily activities and
reflections that he or she values’ (pg. 991). The diary/journal is written by the respondent in their own time and place, but ‘with the researcher in mind’ (ibid). The advantage of this method of data collection over interviewing is that it allows the respondent the time and space to improve recall and to prioritise what they regard as most significant. It also allows ‘the immediacy of the experience to be captured... and also provides accounts of phenomena over time’ (Symon, 2004: 98). However, Jacelon and Imperio (2009) point out that the method ‘might lack the nuances present in verbal communication’ (pg., 991). That criticism is addressed in this project by aligning the journal-keeping with pre- and potentially post-interviewing that is likely to pick up such nuances.

4.5.2.2 Testing the method

It is worth noting that the e-journal method was trialled in order to ensure ease of use for the ‘end user’. The design of the page was altered to include a ‘closed question’ allowing respondents to indicate the type of ‘discursive activity’ to be discussed in the journal entry. By including this facility, respondents were reminded of the range of activities that could be included. Another alteration following the pilot was to add a facility that allowed the respondent to upload blank ‘pdf’ files of documents or forms in use in their workplace. This made it easier to concentrate on the journal entry as a detailed description of the artefact referred to was not now required, [see Appendix 4: Moodle Template including Journal Headings].

Overall, despite the limitations (usually associated with qualitative and constructivist approaches per se, rather than concerning the diary/journaling method in particular) this method was deemed appropriate in adding richness to the data. The potential of the methods used in this research reflects the assessment of Elliot (1997) who used researcher led diaries in a qualitative study of health experiences. She highlighted:

- the potential of the 'diary-interview' method to accommodate different response modes;
- the extent to which the method captured diarists' own priorities;
- the importance of the research process in illuminating the contexts;
- the role of diaries as both a record of and reflection, and their value as a means of understanding what is 'taken for granted'.
I can add to that:

- the potential of the diary to point to other important sources of data.

### 4.5.3 Policy Documents

Content analysis is described by Flick (2009) as a classical procedure for analysing textual material. That definition concurs with that of Cole (1988) who describes it as ‘a method of analysing written, verbal or visual communication messages’ (in Elo and Kyngas, 2007: 107). Both definitions are too general to be useful in explaining the method’s use in a given research situation – including this one. Krippendorff (1980) however, provides a useful set of questions that he says must be addressed in every content analysis. By addressing those questions here, (see Fig 4.5 below) we get a clearer picture of how content analysis features in this research.

**Fig. 4.5: Krippendorff, K. (1980) six questions applied to this research**

<table>
<thead>
<tr>
<th>Question</th>
<th>Application in this study</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Which data are analysed?</td>
<td>Internal and external Policy Documents connected to the work of the individual Social Care Worker.</td>
</tr>
<tr>
<td>2) How are they defined?</td>
<td>By the research participant at interview or in e-journal.</td>
</tr>
<tr>
<td>3) What is the population from which they are drawn?</td>
<td>A complete population is difficult to identify in numeric terms, as it potentially includes a vast array of legislative and policy initiatives related to the Social Care sector. (Representativeness is not the aim, as what is being sought is the constructivist perspective of the individual worker).</td>
</tr>
</tbody>
</table>
| 4) What is the context relative to which the data are analysed? | (a) The individual case.  
(b) The collective case study. |
| 5) What are the boundaries of the analysis? | References that focus on the Social Care profession. |
| 6) What is the target of the inferences? | To corroborate the data gathered through other methods: interviews and journals. |
It has been stressed previously, and it is worth doing so again here, that the data collection methods used, combine towards a single effort to generate data that will deepen our understanding of the phenomenon under investigation. They are part of the collective case study and as such are aimed at providing ‘thick description’ (Geertz, 1973). Furthermore, because the documents to be analysed are identified by the Social Care participants in this research, there is less likelihood of the uniqueness and complexity of each case being trivialized (Onwuegbuzie and Leech, 2007) in the context of cross case comparisons.

4.5.3.1 Counting in content

The core purpose of the documentary content analysis in this project is to allow inferences to be made which can then be corroborated using other methods of data collection (Stemler, 2001). Examining the texts of policy documents associated with the professional work of the research participants involves ‘counting’. It may be surprising to see an activity more closely associated with positivist research appear in this qualitative study, however, as Robson (1993) points out, this type of quantitative content analysis came to prominence in the social sciences at the start of the twentieth century in analysing newspaper content and subsequently radio and television content. He goes on to identify similar studies that attempted to assess bias in school textbooks. As in the present study, this type of content analysis is a secondary or supplementary method in a multi-method study.

The application of content analysis in this study is informed by the research question (Flick, 2009) in that what is being sought is an understanding of the relationship between discursive practices and Professional Identity Formation. By examining relevant documents, and in particular policy documents that inform practice, a method of Content Analysis based on ‘word-frequency counting’ (Stemler, 2001) is employed. This involves the use of computer search facilities to identify the frequency of specific words, phrases and in particular, professional titles.

Whilst this approach addresses many of the concerns regarding reliability (it is systematic, replicable and transparent), it is important to see it more as an element of triangulation rather than as a stand-alone source of evidence on which to base
findings. The warning that ‘excessive interpretation on the part of the researcher poses a threat to successful content analysis’ (Elo and Kyngas, 2007: 114) is particularly apt for word-frequency counting.

4.6 ‘Me, my research and I’: the Researcher’s role

The final point of the previous section, in pointing towards a possible ‘excessive interpretation on the part of the researcher’ could apply to any aspect of qualitative research. After all, it is the researcher who frames the topic, who chooses the lens, who recruits the ‘sample’, who decides on the methods, who gathers the data, who sets the analytical framework and who gives meaning to the evidence. In short, the researcher permeates the entire research endeavour. Even if the meanings given or claims made as a result of the research effort are not ‘perfectly precise or complete’ (Ragin and Driscoll, 1994: 164), nor aimed at being definitive, qualitative research does seek to contribute to a communal understanding of certain phenomena. The social constructivist epistemological position that informs this research argues for the world view of the research participants to be treated as valuable and valid evidence. In adopting such a position the researcher too must acknowledge his/her own presence within the research project, rather than being objectively located outside. Indeed, being close to the action is where the qualitative researcher wants to be in carrying out the research. The qualitative researcher wants to ‘give meaning from within’. However, if they are to make a ‘contribution to common knowledge...that is continuously revised and updated by the social scientific community’ (ibid), then the researcher and his/her research decisions must become more visible throughout the research project.

4.6.1 Researcher as interpreter of ‘voice’.

Walshaw (2010) examines the role of the researcher in research and draws attention to the fact that

‘scholars within mathematics education have suggested that it is not enough to recognise the connection between the researcher and the questions, methods, and conclusions of any research, but that such a relationship should be avowed and should be made transparent’ (pg. 587-8).
She goes on to carry out a comprehensive self-examination of her role in a study that she carried out in the field of education. This examination must include ‘emotions and unconscious interference’ of the researcher. She concludes that reflexivity, as commonly understood, is inadequately treated by ‘writing in’ the researcher by including journal extracts and reflections in the final report (which is the position of this research). Her ‘solution’ is ‘to begin with tools taken from psychoanalysis and to acknowledge the intrusion of the self in every aspect of our research endeavours’ (pg. 592). To do so could potentially ‘miss the wood for the trees’. By giving so much attention to the detail of the researcher’s involvement with the research process could mean that the reader might not get within earshot of the voice of the participants who have provided the evidence in the first place. Neither does it credit the reader and/or ‘the social scientific community’ with the capacity to recognise how the researcher role has impacted on the research claims.

A more balanced view is presented by Cohen and Crabtree (2006) who stated that ‘Understanding something about the position, perspective, beliefs and values of the researcher is an issue in all research, but particularly in qualitative research where the researcher is often constructed as the ‘human research instrument.’ I would argue that this level of transparency is achieved through a mixture of

- clear explanations and justifications of research decisions throughout the research process;
- a thorough examination of literature that draws from a diversity of viewpoints relating to the research topic;
- clear signposting of researcher engagement with the data gathering, data presentation and analysis through the inclusion of reflective accounts.

Qualitative research is by nature an inductive process that involves emergent themes or, as Bogdan and Bilkin (1998) put it, ‘You are not putting together a puzzle whose picture you already know. You are constructing a picture that takes shape as you collect and examine the parts’ (pg. 6-7). To engage in this kind of research complexity there is a ‘dependency on the sensibilities and good judgment of the qualitative researcher’ (Eisener, 1998: 170).
4.6.2 Researcher as ‘Bricoleur’

Before leaving the discussion on the role of the researcher and entrusting my own transparency to the overall body of the text, it may be useful to briefly describe how I view myself as researcher. The notions of ‘insider researcher’, ‘participant observer’ or ‘researcher as instrument’ (Barrett, 2007), advocate, negotiator or collaborator did not fit with how I saw myself engaging with the research process. At an early stage of reviewing the literature, the term ‘bricolage’ was used by Stephen Ball to describe the complexity of how policy meets reality and is enacted at local level: ‘educational policy actually lives as an ongoing bricolage of endless enunciations, negotiations, resistances and reconfigurations across multiple nodes of actors and their interests’ (Ball, 1994 in Fennwick and Edwards, 2011: 217). The concept of bricolage itself was developed by the French social-anthropologist, Levi Strauss, who used the term to describe the assemblage of ‘materials at hand’ to complete a task. A ‘bricoleur’ is one who makes do with this range of tools and materials in a pragmatic approach to completing the task. This conceptual trail led me to the parallel concept of ‘researcher as bricoleur’ (Denzin and Lincoln, 2003). Just like the Straussian bricoleur, the researcher as ‘bricoleur’ ‘is adept at performing a large number of diverse tasks, ranging from interviewing to intensive self-reflection and introspection’ (pg. 9). When the ‘bricoleur’ concept is applied to the various aspects of the research process, the researcher is seen as one who carries with them a range of methodological tools with an openness to use them in flexible ways; who hosts a variety of theoretical perspectives that are allowed to act as a filtering mechanism in ongoing consideration of both the data gathering and data gathered; and who creates ‘a reflexive collage or montage’ (Denzin and Lincoln, 2003: 9) or interpretive quilt. There is an appropriate reflection here of the professional world being examined in this research project. Seeing myself as a bricoleur allows me to ‘hold the space open’ for thicker description and deeper understanding of a professional world that itself ‘holds a therapeutic space open’ in which clearer understanding and personal progress can be facilitated for vulnerable service users. Although the concept of ‘researcher-as-bricoleur’ sits comfortably with me in describing my research role, the challenge remains that ‘this role complexity [is]… related to … the techniques for data collection, the character of data as well
as the way data is processed and presented (Fink 2000: 36). The crucial role of the researcher needs to be central to the consideration of research ethics at all stages of the research process.

4.7 Research Ethics

Research ethics need to be examined in situ, that is, in the context of the particular research enterprise. The discussion of methodological approach and examination of research methods that have been the focus of this chapter thus far mean that it is now possible to consider the ethical challenges that arise for this research project. To do so, it is not intended to ‘re-invent the wheel’; there are three interwoven sources that inform the discussion: Application for ethical approval, Literature on Research Ethics and Research Codes of Ethics.

4.7.1 Ethical Challenges

‘Qualitative researchers are guests in the private spaces of the world. Their manners should be good, and their code of ethics strict’ (Denzin and Lincoln, 2003: 154). The Social Care Workers at the centre of this research endeavour are involved with, and immersed in, the daily lived experience of vulnerable children and adults (CORU, 2013; Share and Lalor, 2013 and others). In seeking to gain a deeper understanding of their professional practice it is essential that careful consideration be given to how the data is collected, stored, interpreted and reported. The main ethical issues to be considered in this study are based on four broad ethical principles (De Vaus, 2001): (i) voluntary participation, (ii) informed consent, (iii) no harm to participants, (iv) anonymity and confidentiality. These principles are recast as ‘Ethical Challenges’ by Houghton et al (2010) who provide a structure for the examination of how ethical considerations are responded to in this project (See Fig. 4.6 below).

It is important that each principle informs research decision-making throughout this research process. In the case of this research too, the principles and decision-making stretches beyond the immediate research participants (the Social Care Workers) to include responsibilities towards those they work with. Although no material relating to individual Service Users is sought, it is reasonable to assume that examples from work will be referred to by respondents. In seeking ethical approval (Appendix 6) both from
the university’s Research Ethics Committee and individual agencies where appropriate, this is a feature of the research that needs to be made explicit.

**Fig. 4.6 Ethical Challenges**

<table>
<thead>
<tr>
<th>Ethical Challenge*</th>
<th>Possible Issue</th>
<th>Proposed Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Informed consent procedures</td>
<td>Respondents may feel pressurised into taking part.</td>
<td>Long lead-in time in which the contact and research purpose is explained; the ‘tasks’ of the respondent are identified (see Appendix 2); the option of non-participation is offered and the encouragement to discuss participation with line management is proposed.</td>
</tr>
<tr>
<td>The researcher-participant relationship</td>
<td>The power dynamic in which the newly qualified worker feels vulnerable, or ‘seeks to impress’.</td>
<td>The data collection methods attempt to redress this imbalance by empowering the respondent to lead the ‘conversation’ within the interview process similar to Ball’s (1991) approach where he ‘minimised topic questions and maximised cue questions (Pg. 179). Respondents are similarly empowered as data-generators in the diary phase.</td>
</tr>
<tr>
<td>Risk-benefit ratio</td>
<td>Exposure of respondent.</td>
<td>The possible mis-interpretation of the purpose of the research by management of the respondents work organisation as ‘investigative journalism’ needed to be considered. This was overcome in most cases where initial contact with respondent was made through official organisational channels. In all cases where this was not the case, respondents informed their line-manager of their participation with the explanatory letter of introduction. Where, in one case, the manager felt the research should not happen (for organisational and scheduling reasons) the respondent was thanked for their offer to participate but the research was not pursued at that site.</td>
</tr>
<tr>
<td>Confidentiality</td>
<td>Protecting identity of Service-Users, Workers and individual stakeholders.</td>
<td>Establish protocols about the gathering, use, and management of data within the design of the study. Seeking and obtaining Ethical Approval from the host University was useful here as it sought specific information on each of these aspects. Any inadvertent mention of identifying information to be removed at transcription phase.</td>
</tr>
<tr>
<td>The role of the researcher</td>
<td>Managing expectations.</td>
<td>The purpose of the research needs to be clearly explained. Part of that explanation, at initial request stage and again at interview stage, is to ensure that the respondent is clear that the research is not ‘Action Research’. The benefits come from an enhanced understanding of the profession rather than any short-term organisational or policy change.</td>
</tr>
</tbody>
</table>

(*based on Houghton et al 2010)
4.7.2 Researcher Responsibilities

The actions outlined in the table above do not pretend to be exhaustive. In this multi-case study, each situation, location, work context, culture and structure is different. The respondents themselves cannot be expected to be entirely homogenous, not withstanding the selection criteria. What can and should be expected is that the researcher takes responsibility for ensuring that the research process is value-based as much as it is rule-based. Attention to the practical details of where the interviews would take place; ‘checking-in’ with the participants throughout the process and valuing their contribution; explaining the technical aspects of recording and journaling; having confidence in the technology used; and leaving open the channel of communication post interviewing, all contribute to the integrity of the research. Just why the ‘human side’ of qualitative research cannot be ignored is well expressed by Dickson-Swift et al (2007)

“It is so much more than just signing a form to say that they are willing to offer you information, they are actually allowing you into their lives, they are telling you personal information that might be quite hard, so you need to demonstrate a certain degree of discretion, of respect, of appreciation for what they are doing, because the reality is that it is more than just words, it’s more than just what you are going to analyse, it’s their life, their experience and you need to make sure that you are aware of that.” (pg. 330).

4.8 A note on Reliability and Validity and the concept of ‘goodness’

It is no less important to establish rigour in qualitative research than it is in quantitative research. Mechanisms for establishing rigour in quantitative research have been applied to qualitative research, and are often held as the standard criteria in assessing the worth of naturalistic inquiry. These standards centre around ‘the methodological trinity of reliability, validity and generalization’ (Tobin and Begley, 2004: 338). This section takes on board the view that these criteria may not be best suited to establishing rigour in naturalistic inquiry, and, in doing so, emphasises the complementary criteria of ‘goodness’ and ‘trustworthiness’.

Construct validity – the extent to which a measuring instrument measures what it is intended to measure (de Groot in van Aken et al, 2012) has limited relevance when applied to qualitative research where the research instrument is the researcher
him/herself. However it does draw attention to the requirement of the researcher to
be reflexive and to consider their possible impact on the research process at all stages.
This point is developed further when considering *internal validity* which concerns itself
with how conclusions are drawn about causal relationships. The absolutism associated
with clinical, scientific, positivist research is not achievable in naturalistic inquiry
because, by definition, it engages with data that offers a range of perspectives and
many possible alternative explanations of causal relationships. However, internal
validity can remind the qualitative researcher of the necessity to be transparent in
their analysis and to build-in multiple perspectives in order to strengthen any claims
that are being made. Finally *external validity* refers to the generalizability of inquiry
(Tobin and Begley, 2004). This is often considered as a limitation of case study research
(Yin, 1984), however, that is only so if generalizability was an aim in the first place.
How the research findings relate to other people, situations and organisations is as
much a matter for the reader as it is for the researcher. External validity does force the
qualitative researcher to have regard for ‘aims and claims’ – in other words, the
purpose of the research must be clear from the outset and the findings are offered as a
contribution to understanding rather than as a new dogmatic truth. Every effort must
be made by the researcher to provide the reader with the information necessary to
judge the worth of the research.

4.8.1 Establishing rigour in Qualitative Research

Those who call for either a translation or abandoning of these criteria favour an
approach to rigour-testing based on emerging criteria such as credibility,
transferability, dependability and confirmability (Lincoln & Guba, 1985). The
emergence of innovative criteria was largely in response to a perceived threat to the
nature of naturalistic inquiry rather than a concern that traditional criteria could not
establish rigour. For example, Janesick (1994, cited in Whitemore et al, 2001) defined
the term ‘methodolating’ as ‘a slavish attachment and devotion to method’ (p.526).
Her concern was that this led to an overemphasis on methods to the exclusion of the
creativity of research. Validity and reliability confined rigour-testing to methodological
decision-making, and this would be wholly inadequate if applied to qualitative
research. To abandon efforts to establish rigour would be to open qualitative research
findings to rely on the intuition, reflection and bias of the researcher. Pereira (2012) calls for ‘integrative validity that addresses experiential and methodological concerns’, an approach that places a responsibility on the researcher to ensure that the reader is fully informed about the process of research and analysis.

The polarised views regarding how best to establish rigour in qualitative research, in fact arrive at a similar conclusion, namely that the reader needs to trust the researcher. The corollary of this is that the researcher needs to be trustworthy and to gain the trust of the reader. The language adopted by this research is that of ‘goodness’, a qualitative referent that is ‘a means of locating situatedness, trustworthiness and authenticity’ (Smith, 1993; Denzin and Lincoln, 2000). Throughout this research (see Fig 4.7), there are parallel ‘searches’ at play: one for the real-life perspective of Social Care Workers, and the other a search for ‘Goodness’ that ‘should permeate a study from beginning to end’ (Tobin and Begley 2004). The former will be of most value in contributing to our understanding of PIF if the latter is maintained.

**Fig. 4.7 How goodness is shown (Arminio and Hultgren 2002)**

<table>
<thead>
<tr>
<th>What?</th>
<th>How?</th>
<th>In this study...</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foundation (epistemology and theory)</td>
<td>This provides the philosophical stance and gives context to and informs the study</td>
<td>A Literature Review that explores the theoretical framework and conceptual underpinnings.</td>
</tr>
<tr>
<td>Approach (methodology)</td>
<td>Specific grounding of the study’s logic and criteria</td>
<td>Chapter 3 that outlines congruence between theory and method.</td>
</tr>
<tr>
<td>Collection of data (method) –</td>
<td>Explicitness about data collection and management</td>
<td>Careful matching methods with task and the nature of the study - transparency</td>
</tr>
<tr>
<td>Representation of voice (researcher &amp; participant as multicultural subjects)</td>
<td>Researchers reflect on their relationship with participants and the phenomena under exploration</td>
<td>Inclusion of Reflective notes and through empowering the participants; transparency in how voices are represented.</td>
</tr>
<tr>
<td>The art of meaning making (interpretation and presentation)</td>
<td>The process of presenting new insights through the data and chosen methodology</td>
<td>Data analyzed thematically using NVivo software allowing clear sight of coding process.</td>
</tr>
<tr>
<td>Implication for professional practice</td>
<td>Recommendations.</td>
<td>Phronetic approach that preserves link between raw data and conclusions.</td>
</tr>
</tbody>
</table>
4.8.2 Researcher as Author

Qualitative research in general, and case study work in particular, place certain demands on the researcher (Bell 1990; Denzin & Lincoln, 2005). Perhaps most of all, as researcher, as ‘author’ (Hughes, 2013), I need to recognize that I am a power-broker in the research process. As Richardson (1992: 131) succinctly puts it, ‘No matter how we stage the text, we - the authors - are doing the staging’. It is essential therefore, that there is a high level of commitment to reflexivity on the part of the researcher. A ‘triangulation state of mind’ and search for ‘Goodness’ (Tobin and Begley 2004) permeate this study from beginning to end. For me as a qualitative researcher, concepts of validity and reliability cannot be simply dealt with in a methodology chapter. They are dynamic processes that inform research decision-making as the research unfolds through each stage: Foundation, Approach, Collection of data, Representation of voice, Analysis, Conclusions and Recommendations.
Chapter 5
Presentation & Management of data

5.1 Introduction: From ‘What data?’ to ‘What data!’

The strength and challenge of qualitative Case Study research is its capacity to generate large volumes of ‘unpredictable data’, i.e. data that is not pre-coded and is generated by a response to questions that allows for a range of interpretations of the questions themselves. The volume of data generated in multi-case study research has the possibility of being multiplied by the number of cases under investigation. There is a danger that the researcher might become submerged in the data, unable to find its meaning. Yin (2009) recommends that there should be ‘a general analytic strategy’ in place. Elsewhere, Yin (2014) warns that researchers who engage in case study research without having a plan regarding how they are going to analyse the data can easily become stalled at the analysis stage. They simply don’t know what to do with the evidence. This view is similarly expressed by Attride-Stirling (2001) who, whilst welcoming the greater recognition and status of qualitative research within the social sciences, warns that due to a lack of guidance on how to analyse textual material, researchers may be ‘left stranded when it comes to analysis’ (pg. 386). The approach taken by this research project is to respond to Attride-Stirling’s call ‘for greater disclosure in qualitative research’ (ibid.) so that ‘as this tradition gains prevalence, we ... ensure that it does so as a learned and robust methodology’ (ibid). More than that, methodological and analytic transparency does not just serve as instructive to future researchers, it is an inherent part of the qualitative research process itself.
This study, as can be seen in the discussions in the previous two chapters, views the research process as a dynamic, creative exercise in which evidence is collected with an analytical purpose in mind. That purpose is informed by both the research questions
and the named propositions. However, the task of giving meaning to the data gathered through careful, planned and systematic analysis is still a daunting one; this is especially true when the data comes in ‘open format’. The first part of this chapter describes how the move was made from wondering what data would emerge from the research, to using that data to reveal new insights about the research question. Yin (2009 and 2014) identifies four analytic strategies:

(i) relying on theoretical propositions,
(ii) developing case description,
(iii) using both qualitative and quantitative data,
(iv) examining rival explanations.

This study’s analytic strategy is based on a combination of Yin’s points (i) and (ii) above. As this chapter unfolds, the relationship between the research questions, the individual and collective case evidence and these analytical strategies is explained. Fig. 5.1 (above) is an ‘Analytical Map’ that graphically illustrates these relationships. An important aspect of the analytical strategy is that the role of the researcher is to orchestrate the research process in such a way that the data/evidence is created, organised, managed, manipulated (Yin, 2014), examined, presented and ultimately, given meaning with a respect and objectivity that is continuously informed by both an academic curiosity and a research positioning based on an extensive reading of relevant literature. In other words, the exclamation mark of ‘what data!’ communicates an excitement about the possibilities of new knowledge emerging from this research process.

**Reflective note:**

I have just returned home having attended the Social Care Ireland conference, ‘Building Relationships, Breaking Barriers’. One speaker, Pamela Trevethick (quoted earlier in this work) reminded me of the reason I chose to research Professional Identity Formation in the first place. Her ‘lexicon of 80 skills’ provided food for thought about the nature of professionalism in Social Care Work. In the Q and A session that followed her talk, I asked the following question: ‘Taken together, these skills amount to a way of being, based on common decency in human interactions, and so struggle for recognition in conventional notions of professional identity – what are your views on how to define Social Care as a
profession that can be recognised as distinct and on an equal footing with the established ‘traditionally defined’ professions? Her reply was clear. Acknowledging the validity of the question she stated that what Social Care needed to do was to claim as their area of professional expertise, ‘the relationship’. From there, the professional skillset could be established on a strong theory base and understood in the immediate contexts of both the everyday work situation and in the wider policy context.

For her, the wider policy context is dominated by a managerialism that makes it very difficult to gain recognition for professional work that is not neatly recorded and measured and compartmentalised. She made it clear that Social Care Workers needed to be able to explain their work, and to stand over their professional actions and decisions. In order to do this, two languages were required: one that facilitated engagement and relationship-building with those being helped; another for multidisciplinary, policy-maker and funder audiences that revealed the purposive professional action contained in the seemingly ordinary daily activities and engagements of Social Care work. In a follow-up Workshop, Trevethick explained that what distinguished professional from other types of activities was ‘purpose’ and that purpose needed to be explainable and explained.

These discussions re-energised my thinking around the data gathered for this research. What is emerging is strong evidence of purposeful action on the part of Social Care Workers who do understand what they are doing and why. However much of what they do is not ‘counted’ as professional because it tends only to be recognised internally by the working-team in verbal discursive activities such as ‘The Handover’. The real ‘currency’ of professional work is contained in the written work most often based on assessment, monitoring and reporting risk and incidents. Whether a professional identity is formed by the internal actions of workers or by the requirements of a system remains unanswered by either myself or Trevethick, but I am more convinced now of the importance of capturing the professional lived experience of Social Care Workers in seeking that answer.

5.2 A Helping Hand – CAQDAS.

The ‘Computer-assisted qualitative data analysis software’ tool used in this project was QSR NVivo 10. The decision to use CAQDAS was made within the overall methodological decision-making process. Having been introduced to NVivo during the ‘structured’ element of the PhD programme, I was aware of its capacity, however, it is not until one has a clearer picture of how the data is to be generated that an informed decision about its usefulness can be made. ‘NVivo doesn’t favour a particular methodology – it’s designed to facilitate common qualitative techniques for organising, analysing and sharing data’ (QSR, 2013: 5). The key word here is ‘facilitate’.
NVivo, or any similar software packages such as ATLAS™ of NUDIST™, do not ‘do’ the analysis – that is up to the researcher. It is a tool that assists the analytical process by organising, managing and holding data. As the NVivo guidebook puts it: ‘Remember that NVivo can help you manage, explore and find patterns in your data but it cannot replace your analytical expertise’ (QSR, 2013: 6).

Having had previous experience of qualitative research, I was conscious of what Miles and Huberman call ‘data overload’. Whilst various coloured highlighter markers and endless sticky notes and hand-written memos, together with shifting piles of paper can bring the researcher ‘closer to the data’, there is a danger of what could be described as ‘analytical suffocation’, where the researcher becomes submerged in the data to the extent that any interpretation is welcomed like a gasp of air that ensures survival!

This current research project anticipated a significant volume of textual data in various forms and from a variety of sources. It shared with Kohn (1997) ‘typical concerns with conducting case studies… the intensity of the data collection process and the overload of information obtained’ (pg. 5). The same author goes on to say that ‘while multiple cases help improve external validity, they also exacerbate problems of data overload’ (ibid: 6). Therefore the broad decision to use NVivo to assist with the organisation and management of the data was an easy one. However, as with each research decision in this project, careful consideration was given to critically examining the method being employed. The pros and cons of CAQDAS are closely examined by Chi-Jung and Shulman (2008). They draw upon the experience of established qualitative researchers (Richards & Richards, 1987; St John & Johnson, 2000; Bassett 2004) and commentators (Lee & Fielding, 1991; Kelle, 2004) to summarise the impact of using computer based tools to assist in the analysis of qualitative research. Their findings are, in turn summarised here in Fig 5.2 below. Being aware of the power of computer-based tools to potentially enhance or inhibit the analytical process ensured that my decision to use NVivo in this project was an informed one. Apart from merely balancing the pros and cons of CAQDAS, the qualitative researcher also needs to consider the underlying questions about the impact such tools may have on how qualitative research develops. For example, Richards and Richards (1991) expressed concerns that qualitative researchers might be led by the functionality of CAQDAS programs rather than by research needs. However, such broad concerns are beyond the scope of this (or any
other single) project. Fig. 5.2 includes how both the pros and cons of CAQDAS related to and was experienced by this project.

**Fig. 5.2: Pros and cons of CAQDAS related to this project**

<table>
<thead>
<tr>
<th>+/-</th>
<th>CAQDAS Issue</th>
<th>Related to this project</th>
</tr>
</thead>
<tbody>
<tr>
<td>+</td>
<td>The ease and efficiency of the computerised ‘code-and-retrieve’ technique enables researchers to tackle much larger quantities of data</td>
<td>Not only in practice, but in planning the methodology, this removed the fear of data overload</td>
</tr>
<tr>
<td>+</td>
<td>Provides the researcher with a straightforward data reduction method to cope with data overload.</td>
<td>The NVivo software proved easy to engage with and encouraged broad and comprehensive initial coding.</td>
</tr>
<tr>
<td>+</td>
<td>The analytical process significantly less cumbersome and tedious because there is less handling of paper</td>
<td>In comparison to previous experience of using a paper-based system of data organisation, NVivo enabled me to be more organised and in control of the analytical process.</td>
</tr>
<tr>
<td>+</td>
<td>There is greater flexibility in the coding process with coding schemes able to be easily and quickly altered.</td>
<td>After initial reticence about moving from paper-based memo keeping to using the ‘memo’ facility in NVivo, it became an integral part of the analysis process.</td>
</tr>
<tr>
<td>+</td>
<td>The raw data remains close by, immediately available.</td>
<td>This is perhaps its greatest strength – the data becomes and remains dynamic. As researcher/analyst I was enabled and encouraged to revisit the raw data and to reconsider analytical conclusions.</td>
</tr>
<tr>
<td>+</td>
<td>The transparency of qualitative research is enhanced.</td>
<td>The analysis processes are made more explicit and easier to report. Screen-shots allow an audit trail to be available for scrutiny by the external reader.</td>
</tr>
<tr>
<td>-</td>
<td>The fear of the computer ‘taking over’ the analysis</td>
<td>Prior to fully committing to NVivo assistance, a number of trials were conducted with similar data sets. This was essential for me as a researcher to feel confident and in control of the tool.</td>
</tr>
<tr>
<td>-</td>
<td>The danger that the use of computers could alienate the researcher from their data; the analyst starts to work exclusively on his or her codes and forgets about the raw data</td>
<td>The experience of this researcher is the direct opposite – having the raw data available and as accessible as coded data ensured that the raw data remained as primary evidence. This factor respected the theoretical underpinning or contextual constructivism that guided the project.</td>
</tr>
<tr>
<td>-</td>
<td>Mastering CAQDAS itself can be a distraction.</td>
<td>Having a strong support system is essential. This was provided in two forms in this project with NVivo technical support/tutoring offering ongoing assistance and a Research Supervisor who understood the role of CAQDAS.</td>
</tr>
</tbody>
</table>

**5.3 A profile of the participants**

The recruitment process of this research is outlined in Chapter 3 and subsequently, the broad sample profile that established the case selection is presented in Fig 4.1 in
Chapter 4. The process that yielded the final 9 cases of this collective case study can be summarised as four steps:

STEP 1: Letters were sent to course leaders in 9 colleges that deliver degree programmes in Applied Social Studies (Social Care). This letter requested sample listings of Social Care organisations used as placement settings for Social Care students. Of the 7 colleges to respond, 5 provided a sample list of 15 to 20 placement locations with contact details; 2 colleges offered to make contact with organisations directly in order to identify newly qualified graduate employees. (The latter yielded 3 participants.) The overall aim here was to generate purposeful sample; the rationale being, that if the agency offered professional placements to Social Care students then they were more likely to employ Social Care graduates.

STEP 2: The five sample lists, consisting of approximately 100 Social Care agencies were examined alongside the sampling criteria (Fig 4.1). An initial phone-call or e-mail was sent to the agency manager, briefly explaining the research and asking if there was a newly qualified Social Care Worker on staff. If so, then that particular staff member was contacted through the agency. The reality was that a significant majority of agencies contacted had not recruited in the last five years. Many reported that the recession brought with it cutbacks and a recruitment moratorium. Nevertheless, a possible sample group began to emerge. Where a sector or college began to dominate, the cold-calling of agencies adjusted. This was done to ensure that the spread reflected the sampling criteria rather than to achieve any form of quota sampling representativeness.

STEP 3: The Social Care Workers spoken to after STEP 2 were very positive about both the idea of the research, and taking part. They seemed pleased to be noticed and recognised as potentially having a professional identity on the one hand, whilst being frustrated with a lack of recognition of their professional status in the wider health and social care field on the other hand. Once provisional agreement to participate was established, the worker was posted the formal Letter of Request (see Appendix 2). Even though the research was not directly about the agency in which they worked, each worker was advised to discuss their participation with their line manager. One potential participant withdrew at this stage because their agency’s manager felt that
there had been significant staff and client turnover in the immediate past and the focus of the worker was best placed on the day to day work within the agency.

STEP 4: Each potential participant was sent a pack consisting of a cover letter of introduction, ‘Recruitment Letter (b)’ including Research Ethics Approval number, Consent for Participation in Case Study Research Letter for signature, and ‘Moodle template including Journal Headings’ (see Appendix 4). After a two week period in which the worker could consult and consider their participation in the research, a follow up phone-call was made. This yielded a total of 11 Social Care Workers who indicated a willingness to participate in the project. That number exceeded the original minimum target sample size, however it was decided to proceed with the 11 participants to allow for some fall-off later. It was now possible to arrange interviews and set up Moodle accounts for the research participants. Fig. 5.3 summarises the Case participant profile.

**Fig. 5.3: Case participant profile**

<table>
<thead>
<tr>
<th>Participant*</th>
<th>Qualification(s)</th>
<th>Job Title</th>
<th>Social Care sector</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lauren</td>
<td>B.A. (Hons) Applied Social Studies in Social Care</td>
<td>Service Support Officer</td>
<td>Physical Disability – Day Services</td>
</tr>
<tr>
<td>Kellie</td>
<td>B.A. (Hons) Applied Social Studies in Social Care</td>
<td>Residential Child Care Worker</td>
<td>Residential Child Care</td>
</tr>
<tr>
<td>Eileen</td>
<td>B.A. (Hons) Applied Social Studies in Social Care</td>
<td>Social Care Worker</td>
<td>Residential Child Care</td>
</tr>
<tr>
<td>Amanda</td>
<td>B.A. (Hons) Applied Social Studies in Social Care + M.A.</td>
<td>Social Care Manager</td>
<td>Residential Child Care</td>
</tr>
<tr>
<td>Mary**</td>
<td>B.A. Applied Social Studies in Social Care</td>
<td>Family Support Worker</td>
<td>Child and Family Services</td>
</tr>
<tr>
<td>Colleen**</td>
<td>B.A. (Hons) Applied Social Studies in Social Care</td>
<td>Residential Child Care Worker</td>
<td>Residential Child Care</td>
</tr>
<tr>
<td>Esther</td>
<td>B.A. (Hons) Applied Social Studies in Social Care</td>
<td>Project Worker</td>
<td>Child and Family Services</td>
</tr>
<tr>
<td>Shona</td>
<td>B.A. (Hons) Applied Social Studies in Social Care</td>
<td>Residential Hostel Worker</td>
<td>Homelessness</td>
</tr>
</tbody>
</table>

*To protect their privacy, participants’ names were replaced by pseudonyms.

**These two participants withdrew after the interview stage
Of the eleven participants interviewed, all had achieved degree level academic awards in Applied Social Studies; the majority at level 8 on the National Framework of Qualifications, with one each at level 7 and level 9 on the framework. The participants achieved their awards from five different third level colleges within the past five years. When it came to work settings, six sectors are represented satisfying the sampling criteria that required recognition of Social Care as a generic profession rather than concentrating the research on any particular sector within the field of Social Care. It should be noted that the division of participants across the Social Care field is not aimed at proportional representation of those sectors.

The ‘Job Titles’ recorded above were compiled from answers given to the direct question: ‘What is your current job title?’ The wide range of job titles here – it could hardly be wider – is reflective of the discussion about ‘brand recognition’ in the review of literature in Chapter Two. There it was noted that there is a wide variety of ‘title designations’ in the Social Care field (Garfat and McElwee, 2009) and that the situation is not seen to have changed since (Irish Jobs. i.e., 2014). This is a point for deeper analysis later as the discourse around ‘Social Care Worker’ is located within the policy context. Also of note is the inconsistency in relation to level of work and level of qualification. For example there is not a consistent requirement to have a higher level qualification and holding a position of leadership, nor is there an automatic guarantee of professional recognition even on gaining a degree level qualification (as is the case with Holly above).

A demographic of the sample worth noting is gender. As can be seen in the sample make-up, only one of the eleven cases is male. Gender was not included in the sampling criteria and so the ratio of one male to ten female is not intended to be representative of a gender bias that exists in Social Care work; neither does it feature in the propositions that guide this research, and so is not part of the analytical strategy that follows. The focus of the research is professional identity formation and workplace discursive practices irrespective of gender and although there are studies (McGowen, Ramsey and Hart, 1990) that focus on gender impacts on PIF it is beyond the scope of this research to do so.
5.4 Data sources – an overview

The data was generated from three sources. These are summarised in Fig 5.4 below. As can be seen in the table above, two participants who completed interviews subsequently withdrew from the research. One cited changing workloads within the organisation in which she worked; the other withdrew because of illness. As these withdrawals occurred early in the research, a decision as to whether new participants would be sought was deferred until data began to accumulate and examined. The guiding principle that informed the decision not to seek further participants drew on Onwuegbuzie’s (2007) view that ‘a study should yield data that have a realistic chance of reaching data saturation, theoretical saturation, or informational redundancy’ (Pg. 305). It should be noted that, once withdrawn, the case was no longer treated as part of the collective case study for analytical purposes.

Fig. 5.4: Summary of Data sources.

<table>
<thead>
<tr>
<th>Participant</th>
<th>Interview: length in transcribed words</th>
<th>Journal Entries on Moodle</th>
<th>Related Policy Documents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lauren</td>
<td>7,892</td>
<td>43</td>
<td>7</td>
</tr>
<tr>
<td>Holly</td>
<td>5,349</td>
<td>22</td>
<td>5</td>
</tr>
<tr>
<td>Fergus</td>
<td>4,476</td>
<td>38</td>
<td>3</td>
</tr>
<tr>
<td>Kellie</td>
<td>6,268</td>
<td>16</td>
<td>8</td>
</tr>
<tr>
<td>Eileen</td>
<td>5,601</td>
<td>40</td>
<td>5</td>
</tr>
<tr>
<td>Amanda</td>
<td>6,245</td>
<td>42</td>
<td>4</td>
</tr>
<tr>
<td>Mary</td>
<td>4,651</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Colleen</td>
<td>5,919</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Esther</td>
<td>4,634</td>
<td>8</td>
<td>3</td>
</tr>
<tr>
<td>Shona</td>
<td>4,937</td>
<td>12</td>
<td>7</td>
</tr>
<tr>
<td>Mona</td>
<td>6,942</td>
<td>32</td>
<td>5</td>
</tr>
</tbody>
</table>

5.4.1 Conducting the Conversational Interviews

The interviews were arranged individually in advance. Each participant was given the option of the interview taking place either at their place of work or at another location.
Every effort was made to ensure that the interviews were conducted in a space that was private, and free from interruption. Locations varied from hotels to social care agencies to colleges. Each one was recorded (with the permission of the interviewee) on a digital voice recorder, Olympus VN-711PC. This equipment allowed for the set-up of individual folders for each interview. Its small size and keen pick-up was unobtrusive as the interview progressed and a ‘one-touch’ pause/restart feature allowed discreet pause for thought on the part of the interviewee, again facilitating a relaxed atmosphere.

The interview schedule (see Appendix 3) was a bespoke design for this research project. It was designed to facilitate a flowing, conversational interview. Visible to both interviewer and interviewee throughout the interview, it allowed the participant to share in guiding the flow of the conversation without losing an overall sense of direction. Its purpose was twofold, firstly, to engage the interviewee in a manner that promoted their confidence in sharing information, reflecting on their professional experience and expressing their views; secondly, it was designed to reflect and respect the contextual constructivist positioning of the research, in which the participant was at the centre of the data generation. The research instrument in use worked well on both counts. The newly qualified Social Care Workers who were interviewed appeared to relax as soon as the interview started – even though some had expressed anxiousness beforehand about not having much to offer.

As an interviewer, I found the graphic of the schedule layout very useful and user-friendly. There was a real sense of sharing the interview space in a way that enhanced the thoughtful quality of the responses. This was evidenced in the early stage of the conversational interview dealing with motivation to become a Social Care Worker: two of the respondents emphasised a career plan; for the remainder the motivation was more personal, with a desire to help people the strong motivating factor. The desire to help others was rooted in personal experience which the respondents shared openly, for example, Fergus stated: “I suppose I’ve been brought up with strong principles about care and having care for people, and right and wrong. I also have a brother who lives with Down syndrome so I have a very strong personal connection to disability in particular”; while Lauren linked her motivation to become a Social Care Worker to “a few health scares in the family”; and again Eileen’s personal motivation was revealed
when she explained: “I always wanted to help people. I think with Social Care it allows you to be yourself.” These comments are included here to illustrate the tone of the interviews rather than as findings per se. The intentional style was conversational; the tone semi-formal and relaxed with an achieved outcome of personal engagement on the part of the respondent.

Once completed, the audio files were stored securely, with each file having an encrypted code. A research decision was made to transcribe the interview content manually. This proved time consuming, however, it addressed one concern raised about the use of CAQDAS, namely that it distances the researcher from the data. Typing the data ‘forced’ me as researcher to become more familiar with both the individual and collective voices. It also provided an opportunity to begin to identify nodes for initial coding once the transcribed interviews were transferred to NVivo. Again, in line with the approved ethical schedule, all transcribed data was stored in protected files whether they were soft or hard copy.

5.4.2 Moodle Diaries

At the end of each interview, the research participant was introduced to their role in the ‘Journal keeping’ element of the research. Each participant was provided with a unique password to gain entry onto a Moodle diary page (See Appendix 4). There was an option for participants to complete their journal entries with pen and paper, however all chose the Moodle option. The fact that all the participants had recently graduated meant that they were familiar with educational software, such as Moodle or Blackboard, used in third level institutions. None however had used this software for journal-keeping, even though this is a main feature of such programmes. For the purposes of this research, participants were familiar and comfortable with accessing information on Moodle. They were also familiar with the concept and practice of journal keeping from their training. This research task therefore drew two familiar practices together. A ‘trial run’ was performed with each participant, and each was encouraged to complete at least one entry soon after our meeting in order to ensure that access was in place and that participants had confidence in its use. Apart from a few minor technical glitches concerning password matches, the Moodle journaling
proved accessible and useful. The fact that the structure of each journal was identical enhanced the reliability of the tool.

5.4.3 Ensuring confidentiality

The confidentiality of information gained in the research process is very important, even when the subject matter may not appear to be highly sensitive. The direction of The British Sociological Association that ‘Guarantees of confidentiality and anonymity given to research participants must be honoured, unless there are clear and overriding reasons to do otherwise’ (in May, 1997: 55) were followed through the journaling phase of this project. Moodle settings allowed me, as host, to have access to each participant’s file without those files being open to other participants. An indirect ‘finding’ of this research is that the Social Care Workers who participated in on-line journal-keeping did so with ease and confidence. The Moodle privacy-setting could be removed outside the research context should a group of professionals wish to develop a professional support group along the lines of a ‘community of practice’ (Lave and Wenger, 1991). As can be seen in Fig 5.4 above, the level of input varied considerably amongst participants. The lower input figures (≤20) were followed up on. The reasons given were practical rather than principled. The most prominent reason, perhaps ironically, was finding the time within an already heavily loaded work schedule, with the increased workload being identified as administrative in nature.

5.4.4 Beginning the coding process

On reviewing the pattern of entries, I observed that there was an initial surge of activity, followed by a lapse and then, as the specified time period was drawing to a close, another surge. A research learning point for me was that a built-in support/check-in call on a weekly basis may have ensured a more even spread of entries. For the purposes of this research project, the content (data) of the diaries was considered and coded alongside the interview data on a case by case basis. This is graphically illustrated in Fig. 5.5 below. It is important to note that while the graphic simply records whether the references coded come from one or two sources, without identifying which source, there is a search facility on the programme that quickly and easily re-connects the individual reference with its source. This is important because
analysis involves moving around data both within and outside cases and codes, and, just like a similar process involving highlighting, sticky notes and ‘cut-outs’ in a paper-based system, it is vital that the link between the data and its source is not lost or broken.

Fig. 5.5 Example of ‘Initial coding’

<table>
<thead>
<tr>
<th>Name</th>
<th>Sources</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Career development plan</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>Contractual Arrangement</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Discursive activities verbal</td>
<td>2</td>
<td>33</td>
</tr>
<tr>
<td>Discursive activities written</td>
<td>2</td>
<td>59</td>
</tr>
<tr>
<td>Education and training in use</td>
<td>1</td>
<td>7</td>
</tr>
<tr>
<td>External links with other professionals</td>
<td>2</td>
<td>14</td>
</tr>
<tr>
<td>Gaps in training</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>Job Title</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Managing the work</td>
<td>2</td>
<td>8</td>
</tr>
<tr>
<td>Model of care</td>
<td>2</td>
<td>10</td>
</tr>
<tr>
<td>Monitoring practice</td>
<td>2</td>
<td>14</td>
</tr>
<tr>
<td>Motivation</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Policy Influences</td>
<td>2</td>
<td>20</td>
</tr>
<tr>
<td>Qualifications for work</td>
<td>2</td>
<td>8</td>
</tr>
<tr>
<td>Role in team</td>
<td>2</td>
<td>17</td>
</tr>
<tr>
<td>SC as a profession</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>Services provided</td>
<td>2</td>
<td>8</td>
</tr>
<tr>
<td>Understanding of Social Care</td>
<td>2</td>
<td>11</td>
</tr>
<tr>
<td>Vision, mission, values</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>What is ‘a Profession’</td>
<td>1</td>
<td>4</td>
</tr>
</tbody>
</table>

5.4.5 Policy Documents

The coding process will be returned to in due course, but, before doing so, the final source of data is presented in overview form. From an early stage in the research, a distinction was made between Social Constructionism and Contextual Constructivism (Burningham and Cooper, 1999). The latter acknowledges the role of context in the construction of the individual world view. The theoretical lenses of Rhetorical Genre Theory (Miller, 1984) and Enactment Theory (Weick, 1979; Ball, 2001) were identified as providing a framework in which the data could be considered both at an individual case and a collective case point of view. In order to build a more complete case as a unit of analysis, a third data source was identified, namely ‘Documents’. This refers to internal and external policy documents that have a direct impact on the work context.
of the individual cases. The selection of documents was identified from two sources: those directly named by the research participants in their interview or diary, and through a desk review of the workers agency website. As can be seen in Fig 5.6 below, the number of policy documents identified ranged from 3 to 8. They are included as written discursive elements that provide further insight into the context in which PIF takes place. For example, they provide evidence of how Social Care professional work and workers are recognized in the policy documents that are connected to the workplace. Their function, therefore, is relational rather than representative. Fig 5.6 provides a summary of the documents reviewed.

**Fig 5.6 Policy Documents**

<table>
<thead>
<tr>
<th>Document Type</th>
<th>Number</th>
<th>Sample</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>(ii) Child Care Act, 1991</td>
</tr>
<tr>
<td>Practice Guidelines</td>
<td>6</td>
<td>(i) Guidelines on Recording in Children’s Residential Care (CAAB, 2009)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(ii) Child and Vulnerable Adult Protection Policy (EIL, 2012)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(ii) National Standards for Residential Services for Children and Adults with Disabilities (HIQA, 2013)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(ii) Towards A Shared Purpose (Tusla, 2014)</td>
</tr>
<tr>
<td>Agency Specific</td>
<td>3</td>
<td>(i) Policy Statement: Customer Care Policy</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(ii) Annual-Report-2013-FINAL</td>
</tr>
</tbody>
</table>

These documents are analysed alongside the other two data sources on a case by case basis and then on a cross-case basis, however their coding is kept separate from the initial coding of the interviews and diaries as their content was not generated by the research participants themselves.

As can be seen from the table above, the documents cited may have a national or local emphasis; often they have both. Together with the individual agency websites they provide a useful backdrop for the analysis of the interviews and diaries, but they also call for analysis themselves. For example, what level of recognition of Social Care as a
profession is evident in these documents? What specific impact do they have on the role and professional identity of Social Care Workers? Looking through an Enactment Theory lens, how do they find expression in day to day professional Social Care Work? In order to carry out this analysis, all the documents were uploaded in ‘pdf’ form to NVivo. Its search and query facility allows specific terms, words or phrases to be isolated and examined for pattern-building. Whilst causal relationships, in a quantitative analytical sense cannot be established, pattern-building and links to qualitative evidence can lead to deeper understanding of how PIF occurs on an individual and collective case basis.

5.5 Getting amongst the data – towards initial coding

‘If you imagine your analysis is a brick-built, tile-roofed house, your themes are the walls and roof; your codes the individual bricks and tiles’ (Braun and Clarke, 2013: 207)

5.5.1 Representing and interpreting the ‘voice’

Following repeated reading of the interview transcripts and diaries, initial coding began. These are the first two phases in Braun and Clarke’s (2006) ‘six-phase guide to doing thematic analysis’ (pg. 5). The same authors attempt to claim a specific territory for ‘thematic analysis’ distinct from other forms of analysis that can, at the same time ‘be applied across a range of theoretical and epistemological approaches’ (pg. 5). They would probably locate this research in the neighbouring territory of ‘Interpretative Phenomenological Analysis (IPA). There is considerable overlap between approaches to analysis in qualitative research, however IPA does most closely reflect the specific ‘phenomenological requirement to understand and ‘give voice’ to the concerns of participants; and the interpretative requirement to contextualize and ‘make sense’ of these claims and concerns’ (Larkin et al, 2006: 102). By keeping this balance under the broader approach of thematic analysis, this research addresses a concern raised about IPA, namely that it has been used as a ‘simply descriptive’ method (Larkin et al, 2006 in Braun and Clarke 2013:183). It has been a consistent approach of this research to share the discovery of understanding about Professional Identity Formation between the participants and the researcher. The ‘person in context’ (Braun and Clarke, 2013: 183), the newly qualified Social Care Workers, through their responses to interview
questions and diary entries are already providing an interpretation of their experience and environment. Further contextualising and interpretation is provided in the shared identification (with researcher) of policy documents associated with their workplace. Beyond this, the researcher’s task is to make sense of this data to the outside world, to the reader who has not shared in the experience, the interpretation or the contextualising of the phenomenon being researched. The approach to analysis here therefore is one that ‘gives experience primacy (Holloway & Todres, 2003), and is about understanding people’s everyday experience of reality ... so as to gain an understanding of the phenomenon in question (McLeod, 2001)’ in (Braun and Clarke 2006: 8). The point at which coding ends and analysis begins is not clear-cut. In presenting the ‘complete coding’ (ibid: 206) process here we are really beginning the analysis. Complete coding involves the researcher identifying any and every item of data that is relevant to answering the research question. This initial phase is done on a case by case basis in the first instance. One of the advantages of CAQDAS is the ability to complete this process efficiently and accurately.

5.5.2 Developing a coding system

The illustration, Fig 5.7 below, gives an insight into how initial coding was developed in this project. The quotes are included here for illustrative purposes and are not intended to be representative. This coding exercise was repeated for each case individually. The aggregation of codes that are themselves based on direct quotes from the participants led to a tentative profiling of individual cases. This is presented and discussed early in the next chapter. Smith (2010) refers to levels of interpretation that are always rooted in ‘the meeting of researcher and text’ (pg. 36). However, these ‘meetings’ are not casual or chance encounters. They are orchestrated by the researcher who bears the responsibility of sense-making within the research project. By gathering the data for this research, participants report on their own experiences — and give them meaning. This, Smith refers to as ‘first-order meaning-making’. How the researcher gives this data meaning is through their own ‘experientially-informed lens’, described by Smith as ‘second-order sense-making’ (ibid). The coding process
illustrated below is an example of how this ‘double-hermeneutic’ acts as a bridge between lived experience and understanding.

**Fig 5.7 Initial coding – screenshot from Nvivo**

<table>
<thead>
<tr>
<th>Initial Codes</th>
<th>Themed codes</th>
<th>Sample quotes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Career development plan</td>
<td>SoCIF through titles and job descriptions</td>
<td>‘To use a therapeutic approach I really think you need an education to do that, and that’s where your degree comes in.’ Amanda</td>
</tr>
<tr>
<td>Contractual Holdings</td>
<td></td>
<td>‘...a unit manager over the whole unit... supervisor but we call them child care leaders...then we have child care workers. There would be a hierarchy in it.’ Kellie</td>
</tr>
<tr>
<td>Arrangement</td>
<td>Policy Influences</td>
<td>‘A lot of debriefing occurring with staff members in relation to the new changes that will be happening due to the tendering’ Eileen</td>
</tr>
<tr>
<td>Job Title</td>
<td>Monitoring practice</td>
<td>‘My role, as social care worker, required me to update the care team with relevant information in regard to care plan goals.’ Holly</td>
</tr>
<tr>
<td>Qualifications for work</td>
<td>External links with other professionals</td>
<td>‘My role provided an everyday perspective’ Kelly</td>
</tr>
<tr>
<td>Role in team</td>
<td>SoCPIF through reflecting on work</td>
<td>‘...a structured format that is familiar to staff in the centre and easy to read.’ Mona</td>
</tr>
<tr>
<td></td>
<td>Discursive activities verbal</td>
<td>‘A diary is written and signed informing staff of daily activities.’ Holly</td>
</tr>
<tr>
<td>Policy Influences</td>
<td>Discursive activities written</td>
<td>‘This would allow for information to be written once, as the diary system meant staff had to write twice and therefore time was an issue when trying to get everything done.’ Mona</td>
</tr>
<tr>
<td>Monitoring practice</td>
<td>Discursive activities written</td>
<td>‘It was difficult to ensure all staff knew what is and isn’t relevant, particularly if locum staff are handing over... as part of our roles we agreed to develop an alternative communication method.’ Mona</td>
</tr>
<tr>
<td>External links with other professionals</td>
<td>Discursive activities written</td>
<td>‘When writing these handovers I try keep them short and concise.’ Shona</td>
</tr>
<tr>
<td>Understanding of Social Care</td>
<td>Discursive activities written</td>
<td>‘It’s amazing that once some other piece of paperwork needs to be completed how it throws my routine out the window’ Amanda</td>
</tr>
<tr>
<td>SC as a profession</td>
<td>Discursive activities written</td>
<td>‘So for me support means doing with rather than doing for.’ Esther</td>
</tr>
<tr>
<td>What is ‘a Profession’</td>
<td>Discursive activities written</td>
<td></td>
</tr>
<tr>
<td>Motivation</td>
<td>Discursive activities written</td>
<td></td>
</tr>
<tr>
<td>Gaps in training</td>
<td>Discursive activities written</td>
<td></td>
</tr>
<tr>
<td>Education and training in use</td>
<td>Discursive activities written</td>
<td></td>
</tr>
<tr>
<td>Managing the work</td>
<td>SoCPIF through practice</td>
<td>‘It’s amazing that once some other piece of paperwork needs to be completed how it throws my routine out the window’ Amanda</td>
</tr>
<tr>
<td>Model of care</td>
<td><strong>SoCPIF through practice</strong></td>
<td>‘So for me support means doing with rather than doing for.’ Esther</td>
</tr>
<tr>
<td>Services provided</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vision, mission, values</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
This chapter has introduced the participants at the heart of this multi-case study. A brief profile summarises how they comply with the sampling criteria, but more importantly how their perspective is held at the centre of the research process, from data gathering, management and analysis. How the data was gathered, how much data was gathered and how it was stored and managed is set in the context of an approach to qualitative research that seeks to respect the sense-making of the participant with the interpretative meaning-making of the researcher. I have argued that the use of CAQDAS facilitates the handling of complex qualitative data through systematic coding that allows the researcher to get amongst the data without getting lost in the data. The next chapter focuses on what the data means; it takes an approach to analysis that promotes what Tobin and Begley (2002) term ‘a more inclusive view of (the participants’) world’ (pg. 7) that ultimately leads to a deeper understanding of Professional Identity Formation of New-to-Practice Social Care Workers.
Chapter 6
Analysis

‘Where is the wisdom that we have lost in knowledge? Where is the knowledge that we have lost in information?’ T.S. Eliot, The Rock (1934)

6.1 The search for meaning
Analysis in qualitative research is about the meaning of data. It is the role of the researcher to expose that meaning. This chapter gives meaning to the data gathered, or, more accurately, gives new meaning to the data gathered by locating it in a context that is informed by other data, by literature and by a particular approach to research.

The previous chapter introduced the data gathered in the context of a systematic research plan. It explained how that data was gathered, from whom and how it was managed in its ‘raw’ state. Bellinger et al (2004) paraphrased the view of organisational theorist R.L. Ackoff as follows: ‘Data is raw. It simply exists and has no significance beyond its existence (in and of itself). It can exist in any form, usable or not. It does not have meaning of itself’ (pg. 1). Although not strictly speaking about formal research, Ackoff offers a timely reminder that gathering data and managing information is closer to the beginning than the end of a process towards deeper understanding and wisdom. In fact, his work and its further refinement by Bellinger et al, place ‘understanding’ in a facilitating and catalysing role, with wisdom being the ultimate goal. This perspective is graphically illustrated in Fig 6.1 below. Earlier, in Chapter three, the concept of ‘phronesis’ was identified as an influencing concept on this research. Phronesis is defined by Flyvbjerg (2001 & 2013) and others as a form of practical wisdom, with the same author calling for a reconceptualising of social science that would take account of phronesis, rather than ‘scientific understanding’ as the proper goal of research. Macklin and Whiteford (2012) state more specifically what this means for qualitative research ‘arguing that scientific reason is not an appropriate test for interpretively oriented qualitative research’ (in Kinsella and Pittman, 2012: 6) and that ‘while scientific reasoning appropriately underpins quantitative research, a different form of rationality—practical rationality—is required to undertake and judge
the practice of qualitative research’ (ibid). That is why Bellinger et al’s (2004) work is instructive for this research and in particular its approach to analysis.

**Fig 6.1 Transitions from data to wisdom (Bellinger et al, 2004)**

![Diagram of transitions from data to wisdom](image)

### 6.2 Establishing patterns towards meaning

The phenomenon under investigation here, (i.e. PIF) is experienced by the new-to-practice Social Care Workers at the heart of this multi-case study. The ‘unit of analysis’ is their experience in context. The analysis therefore, must seek to include ‘who, what, where and when questions’ (Ackoff in Rowley, 2006: 167), but it is the task of the researcher to establish patterns both within and between cases, in order to move this collected data from ‘information’ to new ‘knowledge’. This increased depth of understanding, however, is not the end; by examining these patterns using theoretical lenses (in this case, Rhetorical Genre Theory and Enactment Theory) there is the possibility of reaching new levels of wisdom. Within professional practice, this wisdom would appear as ethically informed judgement applied to daily practice; in the context of this qualitative research, it appears as ‘accumulated knowledge, which allows you to understand how to apply concepts from one domain to new situations or problems’ (Jessup and Valacich 2003 in Rowley, 2007: 174). Therefore, the analysis is not primarily aimed at developing new theory but towards contributing to ‘society’s practical rationality in elucidating where we are, where we want to go, and what is desirable according to diverse sets of values and interests’ Flyvbjerg 2001: 167). This differs from ‘action research’ in that the conclusions derived from analysing the data
are not applied to the specific context of the research, but contribute to understanding the wider practice context; it differs from traditional ‘scientific research, in that conclusions derived from analysing the findings are not claimed as generalizable. The approach to analysis, therefore, places emphasis on what was said by whom and in what immediate and wider context.

6.3 Analytic Strategy

It is worth stating the obvious here that the ultimate aim of the research is to answer the research question. The question posed at the outset concerned the influencing factors on PIF of Newly-qualified Social Care Workers. A strength of this qualitative research is its ability ‘to illuminate the particulars of human experience in the context of a common phenomenon’ (Ayers et al., 2003: 871). The general context of the phenomenon in question, namely Professional Identity Formation, is common to all participants’ accounts. But each individual account of PIF occurs in a context of its own. The same authors point out that the qualitative researcher must develop an interpretation of the data that reflects each individual’s experience and applies equally well across all of the accounts that constitute the data set. The propositions identified in Chapter 3 earlier are reproduced here with the intention that they help shape the double stage analysis:

1. Social Care Work as a distinct profession is not clearly defined, and therefore exists in an unclear practice and policy context.
2. Social Care Workers are employed across a range of sectors in a variety of roles.
3. Social Care is an emerging profession.
4. Professional Identity is impacted by professional activities including discursive practices.
5. Professionals are formed by, and inform the language of their profession.
6. Professional Identity Formation (PIF) is experienced subjectively but informs how a profession develops.
7. Knowledge exists in ‘stabilised-for-now’ concepts based on how individuals engage with the world around them.

It is not the function of this research and analysis to prove or disprove an individual proposition, however, neither should they be ignored. In this research they informed who was asked what, and how. Taken together, they help link the aims and rationale of the study, the literature reviewed and the methodological decisions; through the analysis of the data, they act as clear reference points for consideration as deeper
understanding of the research topic is sought; and they help create a balance between a deductive ‘a priori template of codes’ (Crabtree and Miller, 1999) and inductive coding that allows themes to emerge from the data.

There are two main stages in the analytical strategy adopted here. They follow what Creswell (1998) described as ‘a typical format’ (pg. 63) where a ‘within-case analysis’ is followed by a thematic analysis across the cases, which he called ‘cross-case analysis’. Both the shape of the initial case descriptions and the emergent themes of the cross-case analysis are informed by the propositions above.

6.3.1 An initial look at data

Throughout the research process and based on an epistemological position that locates knowledge creation in the midst of subjective experience, there has been a constant methodological effort to ensure that the ‘voice’ of the research participants occupies a central position. So before either the within-case or cross-case analysis begins, an overview of what was said by the Newly Qualified Social Care Workers is presented in Fig 6.2 and 6.2(a) below. Firstly, a single participant is shown followed by a collective graphic. What is illustrated here is the volume of content relating to aspects of PIF referred to by participants in their interview and as recorded in their diaries. The volume of content is based on the number of specific references coded in NVivo as per Phase 1 of coding ‘Generating Initial Codes’ and then organised under PIF headings at coding Phase 2, ‘Developing Categories’.

Fig 6.2 Quantum of references: Individual participant.
In the example above there is a relatively even spread across the categories, with a slight emphasis on references to written discursive practices. It would be unreliable to draw definitive interpretations from the individual case profile presented in this format. Moreover, when all the ‘cases’ are presented in this format as a collective graphic, one cannot help but notice the diversity amongst the patterns.

Fig 6.2(a) Quantum of references: Collective of participants.
The process used in gathering the data was similar across all cases. One of the features of the data collection process was the extent to which it allowed the individual participant to guide what data was generated. For example, in the conversational interview (see Appendix 3), an interview guide was used in a way that allowed the questioning and answering to flow in a variety of directions. This meant that all interview questions were addressed in each case, but there was variation in the time spent on each area and in the sequencing of the questions.

Similarly, in the diaries, each participant was provided with a broad template on Moodle (see Appendix 4). The participant was free within this template to choose the kind of entries that reflected their experience in the workplace. In other words, they were not forced to spread their entries across a variety of discursive activities, nor were they required to include examples of a pre-determined range of activities.

**6.3.2 Living with the data**

When transcribing, and later on coding the data at the initial phase, a Research Memo (Maxwell, 2013) noted that participants responded to the requests for data in significantly different ways. As a researcher, I was concerned that the amount of ‘freedom’ allowed to participants in the generation of data might have undermined the reliability of the study. As the coding continued through the cases, it became clearer that participants were creating data that reflected their individual experiences and the contexts within which they worked. These were their personal accounts of their working life rather than a reflection on Social Care Work in general.

‘My title now is Service Support Officer, which I wasn’t sure about when I got it first because it didn’t have Social Care anywhere in the title. So I would have looked through the job description before I made my decision on whether to take the job or not.’

(Lauren)

‘...being professional on your own on a day to day basis and acting to the best of your ability as a SC worker.’

(Colleen)
‘...you just have more than ‘Aren’t you great for doing the job you do’. It is an important job that we do and to have that professional standing will make it more respected’ (Mary).

‘Well not 9 to 5 anyway! I suppose that following the policies and procedures, that stands out a lot in relation to social care. I think it’s probably one of the most important things. Following the guidelines of what you are trying to do and in my line of work’ (Esther)

The quotes above are taken from the segment of the interviews that dealt with defining ‘professionalism’. Even when participants were asked to consider what professionalism meant in general, most quickly moved towards basing it on their immediate experience. The personal perspective of the individual participant was further accentuated in the diary accounts. This is not surprising for two reasons: firstly they were completed by the individual, alone, on computer or laptop and secondly, the diary template was structured in a way that encouraged reflection on practice experience.

Moodle Diary Extract 1

‘Description of activity: Taking minutes of staff meeting, typing up same and ensuring they are signed off by the manager before they are available to the read

Reflection on activity: A lot of my colleagues don't like taking minutes, I don't mind it but I think it's because I am very good at taking minutes. It can be difficult to take minutes if people talk over each other and our staff meetings tend to be long so the hand hurts after a while.

Professional Role: A good minute taker needs to have great listening skills, write fast or able to use short hand, confident to ask people to repeat themselves to seek clarification; is able to recognise what to minute and what is not i.e., is someone story telling; good computer skills to type up the minutes after the meeting has ended.’ (Kellie)

Moodle Diary Extract 2

‘Description of activity: This entry is based on the discussion between myself and a staff member. We were speaking of the interventions provided by the service. It occurred during a quiet period at the service. Both of us had somewhat differing approaches as
to the nature of the service provided by the organisation and this could be seen in the language used during the conversation.

Reflection on activity: I felt that the language used by the other staff member reflected a position held by them that the service was one which was based on informal processes and that interventions would be loosely provided by the service. My own position is one of relative formality and I would feel that a service should have a certain level of professionalism while taking into account the individuality of service users and their needs.’ (Fergus)

The extracts above were typical of the approach taken by participants. They show a capacity on the part of participants to reflect on particular aspects of their professional experiences and to locate that experience in a wider context. The significance here is that it illustrated a willingness and capacity to capture the individual professional experience. The experiences that the Social Care Workers chose to include reflected the professional discursive activities that occurred within the timeframe of the diary-keeping exercise.

Taken together, therefore, the engagement of the participants in ‘generating’ the data can be viewed as reflecting their professional experience with particular reference to discursive activities. It cannot be claimed at this level of analysis that what is included necessarily reflects issues of most concern or significance. However, during Coding Phase 1 (Generating Initial Codes), the CAQDAS in use (Nvivo) enabled the compilation of an overall ‘view’ of what was being said and written by the Newly Qualified Social Care Workers. Whilst one must bear in mind the role (Tobin and Begley, 2004; Fernqvist, 2010) and power (Braun and Clarke, 2013) of the researcher to frame, guide and influence the generation of data, it is important to recognise the response of the participants to the freedom given to them in the generation of data here. A tentative finding, therefore, is the creation of the comparative ‘mapping’ (see Fig. 6.2a above) of research participant’s coded responses. We can see that similarities are present in that all participants generated data that was coded in each of the ‘Developing Categories’, however there was significant differences in the volume of coded material generated under the respective categories across the case participants. In order not to stretch the validity of this tentative finding, it is important to confine comment and comparison to the relative volume of coded material within each case. This is because any claims based on comparison of the actual volume of an individual category across cases.
would necessitate an examination of the quality of the original coded data, repetition, and style of writing/talking of the individual etc. So what is examined here is the overall pattern of coded data that emerged. For example, what is of interest here is not how much Amanda had to say about ‘SocPIF through external policy and perceptions’ in comparison to the other participants; rather it is the pattern that exists across all six categories in Amanda’s profile as compared to the patterns of the other participants.

6.3.3 Establishing the limits of analysis

Again it is important to stress what is NOT being claimed here. One of the main aims of this research is to examine the professional identity of newly qualified Social Care Workers. This ‘pattern comparison’ does not claim to have ‘discovered’ what that professional identity is or should be. At first sight it raises more questions than it answers. For example: ‘is there a connection between the sector (Disability, Residential Child Care, Homelessness etc.) and the pattern of responses illustrated in Fig 6.2(a)?’; is there a causal relationship between education and training and the capacity of the individual worker to reflect on their professional practice?; which factor plays the strongest role in PIF? These, and other questions are beyond the scope of this level of analysis. They will be dealt with as the within case and cross case analysis progresses. The coding graphic does have a useful research function in that it points towards the possibility of creating a holistic professional profile, rooted in the experience of the individual professional and specific to Social Care. The emergence of such a model is significant as it could provide the newly qualified Social Care Worker with a useful self-assessment tool to help articulate their professional identity. This would be particularly useful given the generic nature of the Social Care profession (Lalor and Share, 2013) and the variety of sectoral and organisational contexts (CORU, 2015). In which practice is located.

Reflective note:

As this phase of analysis progressed, the image of ‘Graphic Equaliser’ came to mind. This is the notion that there are several variables, ever-present but to varying
degrees, that impact on the PIF of the worker, and ultimately on their professional practice. I conducted a broad sweep of literature on professional identity, scanning for similar images and found one – the ‘mixing board metaphor’ (Fitzgerald and VanderLans, 2010: 133). They use the more complex image to convey the interplay between an array of inputs into the graphic design process. Although the context is different and the image used is not an exact match, the metaphor is used in a similar way to what is emerging in my research. It may prove possible to move from metaphor to model if my analysis succeeds in identifying the end points of each variable relevant to PIF of Social Care Workers.

6.4 Within Case Analysis

At this stage of analysis in multi-case studies, it is common that cases are presented individually in a structured format, in what Yin (2003) terms a ‘descriptive framework’. As the ‘unit of analysis’ is the PIF of the newly qualified workers, the descriptive framework extends beyond a demographic or professional profile of the case participants. It presents the data from the multiple sources: the conversational interviews, the diaries, the published documents in the public domain (organisation websites), and artefacts such as internal documents in use. Also included are researchers memos noted throughout the research process. All data generated has been stored in Nvivo, allowing for ease of access and greater manageability. A semi-diagrammatic format is used in the presentation of the data for clarity and consistency. This assists in identifying emergent themes for the cross-case analysis to follow. The format for presenting each case individually is based on the headings identified through phase two of the coding (Developing Categories). These are:

1. Social Care Professional Identity Formation through external policy and perceptions,
2. Social Care Professional Identity Formation through titles and job description,
3. Social Care Professional Identity Formation through reflecting on work,
4. Social Care Professional Identity Formation through practice,
5. Social Care Professional Identity Formation through verbal and written discursive activities,
6.4.1 Lauren – ‘The computer is my new best friend’

The interview with Lauren took place in her place of work, a purpose-built day service building on the outskirts of a large midland town. The setting in general was bright and modern, as was the large ‘boardroom’ in which the interview took place. Lauren appeared relaxed and confident in her professional setting. She explained that her motivation to work in the social care field was personally driven, largely influenced by family experiences and voluntary youth work through her school years. Her experience of medical professionals led her to seek out a profession that was more person-based:

‘I suppose when you’re in a facility and it’s very medical orientated and they’re not focused on the person, it kinda gives you a different perspective, so I started looking into courses locally then, and I was looking at social care’ (Lauren, Interview).
It was that emphasis on personal contact that for Lauren defines the Social Care profession:

‘Rather than [being] behind ten other professionals and you were going to be the last person they see, well that was my hope I suppose more than anything, to be kinda ‘hands on’ (Lauren, Interview).

Her college degree is seen by Lauren as enabling her to work closely, directly and personally with people, with an emphasis placed on understanding the professional relationships and boundaries. Her studies also introduced her to the ‘social model of care’ and to both techniques and theories of helping people. Although Lauren did not give specific examples of either, she did describe the core professional task as being where ‘you can work towards common goals with people and support them to make the most of things for themselves’ (Lauren, Interview).

Lauren reflected on her own perception of what Social Care professional work is and how that perception is not always shared by other professionals. In spite of expressing a strong sense of ‘professional self’ (Stets and Burke, 2005), there is an undercurrent in this part of the interview that her professional identity is challenged within the context of her own professional work experiences. Referring to other professionals in the broad Health and Social Care field, Lauren stated that ‘They don’t see you as professional, they see you as ‘a carer’, that you are just there to do what they tell you to do rather than to actually initiate a plan or support for people’ (Lauren, Interview).

Elsewhere in the interview Lauren returns to this theme, this time recalling how her employment contract and job title did not support her professional sense of identity as she left college and entered the labour market: ‘I worked where they didn’t want to give you even a job title of Social Care Leader, or Social Care Worker. It was a kind of refusal to give you that kind of recognition, that you were professional. It was Care Assistant, or Personal Assistant, or things like that...’(Lauren, Interview).

Although she acknowledges a growing use and recognition of job titles such as ‘Social Care Worker’ and ‘Social Care Leader’, Lauren’s current job title is ‘Service Support Officer’. There is a hint of irony in her voice as she explains that a third level qualification, specifically in Social Care, was a prerequisite for the job. The importance
of language-use and terminology is evident as Lauren discusses her initial reticence when offered the position. While the job description reflected her own understanding of professional social care work, she felt that the job title did not underpin this understanding: ‘I didn’t want to be ... I suppose ‘officer’ would lead you to believe you would be office-based, you’re doing a lot of the planning and things like that, which I do, but you are very practically based as well...’ (Lauren, Interview).

Lauren goes on to discuss how people who use the service distinguish between the ‘professional’ staff and the ‘non-qualified and volunteer’ staff: ‘They see that if you have a title ‘officer’, if you work from the office, or if you have a desk, then you are a professional in the centre.’ (Lauren, Interview). There is a strong sense thus far, in terms of job titles and role recognition, that Lauren’s sense of her professional self is strong but that her professional identity is formed subjectively rather than objectively.

6.4.1.2 The Internal Context and Professional Role:

As a full-time employee, Lauren is part of what she calls the ‘core staff team of five’, of which only two workers, herself and the manager have Social Care qualifications. In addition to the core staff ‘There is a CE team of fifteen staff all on a 19½ hour week, and they are here to be upskilled and trained to the profession.’ (Lauren, Interview). A significant part of Lauren’s role is ‘mentoring staff and volunteers from a social care perspective because they would not have the training to work with the ethos of the organisation.’ (Lauren, Interview). That aspect of her role features again in Lauren’s diary entries: ‘It is a task that I am unable to mentor other staff members to undertake, as it falls specifically into the remit of the trained professional.’ (Lauren, Diary), and again, ‘It lends itself well to be filled out by other members of the staff team once they have been mentored.’ (Lauren, Diary). It would appear from these descriptions that there is a clear management and leadership aspect to Lauren’s professional role. This view is further re-enforced by Lauren’s references in both interview and diary to her administrative duties: rostering, activities planning, risk assessing, maintenance, financial accountability and record-keeping. Whilst Lauren describes how these tasks are sometimes shared with unqualified staff, it is her professional responsibility to ensure that these administrative tasks are completed to a professional standard. She
sums up this position as follows: ‘You have a specific title or role, you are a little higher up...’ (Lauren, Interview).

The ethos of the organisation is expressed in its vision and mission statements. It is based on promoting equality for people with disabilities, both within the organisation and in society at large. Their official literature uses terms such as ‘members’ and ‘customers’ when referring to those who use the service. Membership extends to those who use the service and to volunteers, Community Employment (CE) staff and to core staff. ‘Customer’ refers exclusively to people who are in receipt of services from the organisation: ‘committed to delivering a person centred quality customer service to you our customers’ (Lauren, Documents). So while some documentation emphasises an equality of membership, there are also organisational documents that suggest a clear demarcation between those who provide and those who receive services.

In her diary entries and in her interview, Lauren consistently defines her professional role as being ‘practical’, ‘flexible’, ‘on the ground’, ‘on the floor’ and ‘front-line’. Even though her role includes significant administrative elements, she is not comfortable to be ‘office-based’. She describes how she tends to ‘operate from the reception in the centre so I don’t have an office as such, it has blurred things for the members a little bit because that’s what they are used to...’ (Lauren, Interview). However, this seems to challenge established practice within the organisation. Again, we can see here evidence that professional identity is based on internal conviction about what Social Care professional practice involves, rather than external definition or established practice.

6.4.1.3 External Policy context:

The agency in which Lauren works is a local branch of a national organisation that works with people with physical disabilities. Its reference points for internal policies that guide Lauren’s practice are national policies, strategies and legislation. These are in the public domain on the organisation’s website. Some are specifically mentioned by Lauren in her interview and diary entries; these include Capacity legislation, The Disability Act, Customer Service Charter, The Charities Act, ‘New Directions’; others are alluded to where Lauren refers to ‘A lot of the internal policies are guided by the
external policies that are government led’ (Lauren, Interview). These include HIQA inspection, monitoring of care, Health and Safety. The table (Fig 6.3) below summarises how Lauren identified the impact of the various policies and legislation on her day to day work. The list is not exhaustive, but it does give an indication of the relationship that exists between policy and practice. With regards to PIF, the impact appears as directive rather than definitional, where professional actions are moulded without necessarily redefining the professional role.

**Fig 6.3 Policy and practice as experienced by Lauren**

<table>
<thead>
<tr>
<th>Policy Document</th>
<th>Impact on work</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capacity legislation</td>
<td>Non-specific – memo from head office</td>
</tr>
</tbody>
</table>
| The Disability Act | Non-specific – memo from head office  
“If there was something implemented and it wasn’t working we would feed back to line manager and they would feedback up along the line so it would always be kind of dealt with’ (Lauren, Interview).” |
| Customer Service Charter | Complaints – open access and advocacy for service users regarding any aspect of non-satisfaction with services provided. |
| Charities Act | Fundraising – seen as impacting on the capacity of the organisation to raise funds for its work. |
| ‘New Directions’ | ‘...the more you read into it, it is clearer that it is more the social rather than the medical model.’ (Lauren, Interview)  
‘a programme that’s based on the 12 pillars’ (Lauren, diary)  
The 12 pillars refer to a spectrum of support aimed at empowering individual service users. |
| HIQA | Lauren emphasised the inspection role of HIQA as having an impact on practice.  
‘Whether you are on a CE team or are a professionally-qualified worker you are bound by the policies which is a good thing. They protect the service users from anything that shouldn’t happen.’ (Lauren, Interview) |
| Health and Safety | Lauren felt that this aspect of work was as much to do with cost as quality of work, with the most direct impact being inspection of work and workplace. |
| HSE | Lauren identified a strong dependency relationship between the organisation and the HSE in relation to funding and training, again with reference to compliance and inspection. |
6.4.1.4 Written discursive practices:

Lauren had a 'pained expression' on her face as she stated: 'The computer has become my new best friend!' (Lauren, Interview). It indicated the extent to which 'paperwork' is a feature of her daily work. As a member of the core staff team, Lauren has a responsibility for her own record-keeping and for that of unqualified staff and volunteers: 'My role would be to sit down with people and go through the templates with them' (Lauren, Interview).

The templates referred to in her interview and discussed in more detail in her diary may be categorised into two distinct groups, those concerning the monitoring and reporting of practice and those proactively planning practice. Both were viewed by Lauren as having a 'practical' orientation. The rostering of staff fell under her responsibility, and is completed in response to meeting ‘client-led’ needs. A ‘Community Links Form’ was a purpose built template (designed by Lauren) and acts as a reference point for the activities engaged in on a daily basis. Lauren described the template as using simple language and as being designed for ease of use. Other template forms flow from this core document – Health and Safety Form, Fire Safety Records, Risk Assessment Forms and Petty Cash Forms all exist as separate templates to be completed for each activity. A Communication Diary acts as a conduit of information between all staff and volunteers, including the bus driver, so, as an activity unfolds, so too does the requirement to document.

As her diary entries accumulated, Lauren reflected on the lack of space within the templates for opinion. In her view there was a very high level of recording that concentrated on factual data only. This view fits with the nature of the documents in use that she referred to in her diary and interview. Lauren refers to the gap in template design as being about the ‘why’ of the work: ‘It makes a big difference to how somebody delivers a programme when they know the reason why’ (Lauren, Interview). She goes on to reveal a proactive professional stance regarding the place of written work in her Social Care work. Firstly, she acknowledges the importance of recordkeeping and accountability as a core element of providing professional social care services. This element of the work she feels should be facilitated by documents that are easy to understand and to use, and backed up by training and mentoring of
staff. Secondly, there is evidence of an organisational awareness of the need to review the written aspect of the work: ‘I was involved with a working group to evaluate the primary documentation used within our service when somebody applies to be a member, (Lauren, Interview).

6.4.1.5 Verbal discursive practices:

It is evident from both the interview and diary that it is through verbal discursive practices that professional opinion is expressed, shared and acted upon. These discursive activities fall into three categories at Lauren’s place of work: (i) ‘handovers and communication links, (ii) formal meetings and (iii) informal meetings. All three take place in the context of a work environment that Lauren describes as follows: ‘It’s quite an open team so you can bounce stuff off each other’ (Lauren, interview).

Fig. 6.4 Summary of verbal discursive practices (Lauren)

The graphic summary above gives an indication of the range of opportunities for professional discussion as experienced by Lauren. There is some evidence that verbal
discursive practices are linked with written records, for example: ‘...sharing of professional opinions and implementation of support plans...’ (Lauren, Interview) and ‘...incident was verbally reported to myself and I then completed the report’ (Lauren, Diary). These examples show that the verbal discursive element may either precede or follow the written action.

6.4.1.6 Emerging themes:

1. Limited space for professional opinion within written document templates.

2. ‘The computer is my new best friend’ – the high level of administrative activity.

3. The (lack of) recognition of Social Care in the terminology of policy documents.

4. The inconsistency in terminology regarding professional role and status within agency.

5. The internal versus external drivers of professional identity formation.
6.4.2 Kellie: ‘We are supposed to be with the young people but there’s a lot of back of house stuff...’

<table>
<thead>
<tr>
<th>External Policy Context:</th>
<th>Written Discursive Practices:</th>
</tr>
</thead>
<tbody>
<tr>
<td>A statutory sector agency</td>
<td>It’s very paperwork orientated</td>
</tr>
<tr>
<td>The gardai must be informed</td>
<td>A care plan</td>
</tr>
<tr>
<td>The resident’s Social Worker, the Monitoring Officer and the Child Care Manager is informed</td>
<td>The absent management plan</td>
</tr>
<tr>
<td>The HSE, now TUSLA, got the house</td>
<td>Significant Event Notification</td>
</tr>
<tr>
<td>We are TUSLA, we can’t invite people in</td>
<td>Daily Active File</td>
</tr>
<tr>
<td>The National Standards</td>
<td>A keyworking policy</td>
</tr>
<tr>
<td>Children’s First</td>
<td>Taken minutes of staff meeting</td>
</tr>
<tr>
<td>HIQA</td>
<td>Standard report form (S.R.F)</td>
</tr>
<tr>
<td></td>
<td>Getting more transparent</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Internal context and Professional Role</th>
<th>Verbal Discursive Practices:</th>
</tr>
</thead>
<tbody>
<tr>
<td>To keep the young person safe</td>
<td>Incident reviews</td>
</tr>
<tr>
<td>A child centred approach</td>
<td>Handover meetings</td>
</tr>
<tr>
<td>To highlight their unsafe behaviour</td>
<td>Staff meetings tend to be long</td>
</tr>
<tr>
<td>Help them access drug rehab. services</td>
<td>I could express my concerns</td>
</tr>
<tr>
<td>Referrals made for drama therapy</td>
<td>Professionals meeting</td>
</tr>
<tr>
<td>Whatever they are interested in</td>
<td>Supervision every 6 - 8 weeks</td>
</tr>
<tr>
<td>The positive behaviour programme</td>
<td>Placement Meetings</td>
</tr>
<tr>
<td>Providing care and support in a therapeutic kind of way</td>
<td>The Monitoring Officer rings for additional information</td>
</tr>
</tbody>
</table>

**6.4.2.1 The Worker:**

Kellie works as a Residential Child Care Worker in a state run ‘unit’ for young people. She is clear that her current job title fits in under an ‘umbrella term of Social Care Worker and you have to have a degree to get a job’ (Kellie, Interview). It is also clear from Kellie’s energetic tone that she is enthusiastic and protective of her professional status. She states emphatically that ‘no Tom, Dick or Harry can come off the street and come in - you have to have the social care degree’ (Kelly, Interview) and goes on to recall how ‘people who were terrific at the job but they didn’t have the degree and they had to go back and do it in their 50’s’ (Kellie, Interview). Although she acknowledges the innate skills and abilities of colleagues (and herself) who worked at the unit prior to gaining a degree, she agrees with the more recent requirement of a Social Care
degree for Residential Child Care work. Furthermore, Kellie questions the inclusion of ‘or equivalent’ added to the basic requirement in job advertisements. She notes ‘like doctors, you had to have a medical degree but then it’s a medical degree, teachers you have to have the H.dip – why would it be equivalent?’ (Kellie, Interview). Here, Kellie is recognising the differing levels of clarity about what is regarded as ‘professionally qualified’ amongst professions.

When Kellie recounts her career pathway towards Social Care, she reiterates that her professional status is based on her degree: ‘first and foremost it’s the qualification’ (Kellie, Interview). She explains how she was ‘drawn’ to Social Care because of a personal desire to be able to help people. This vagueness regarding her choice of career extended to her understanding of Social Care as a profession. She discusses in her interview how her initial concept of professionalism was based around the work of professions rather than on an abstract concept or set of objective criteria. Her studies, however, have clarified her understanding of Social Care as a profession, both in terms of what it is (objective criteria) and what it does (professional activity). As a profession, ‘regulation’, ‘standards’ and ‘professional responsibility’ feature strongly in Kellies objective criteria for Social Care as it professionalises. She notes the emergence of Social Care as an umbrella term and the degree level qualification as being important elements. In terms of ‘professional activity’, Kellie refers specifically to her own area of experience within Social Care; she identifies the core of her professional work as being ‘able to work with young people, therapeutically, openly, supportively’ (Kellie, Interview). An equally important defining characteristic of Social Care Work is where that professional activity happens. In Kellie’s diary and interview the ‘location’ of the work features consistently, as she uses phrases such as ‘on the ground’, ‘on the floor’ ‘stay on the ground with the young people’ ‘they are the professionals who spend most time with the residents’ (Kellie, Diary and Interview). In Kellie’s opinion, it is this ‘professional-closeness’ to the young people, that gives Social Care Workers a unique professional perspective. That professional perspective is informed by learned knowledge and skills training, and as Kellie discusses the contribution of her degree studies, she emphasises how it gives a broader context that enables her to consider professional action against a wider backdrop. As she considers her professional role in
general terms, she sums up the relationship between theory and practice with the phrase ‘to know where we’re going you have to know where we have been’ (Kellie, Interview).

6.4.2.2 Internal context and professional role:
Kellie describes her workplace as ‘a mainstream residential unit for 12-18 year olds – a mixed unit’ (Kellie, Interview). The young residents are placed at the unit through statutory or voluntary care orders and Kellie notes that there is a ‘different dynamic’ between staff and young person depending on how they arrive at the home:

‘The person who signs the young person in works a lot more with us, there’s a lot more cooperation and stuff, whereas when it’s a care order and they are removed from the family home for whatever reason’ (Kellie, Interview).

Although Kellie identifies that ‘there would be a care plan given by the Social Worker and we would work with that Care Plan’ (Kellie, Interview), it appears that, for her, what defines the work is the dynamics of the relationship between staff and the young person. Ultimately, Kellie sees her role within the context of an organisation where ‘The service we offer is to keep the young person safe’ (Kellie, Interview). There is a sense of compassion rather than pity or sympathy in Kellie’s tone as she explains that residential care is a final option after ‘services to the family, parenting courses, foster families, so when they get to us, it’s usually the worst case scenario’ (Kellie, Interview). The therapeutic, open and supportive work mentioned earlier is ‘always child centred’ according to Kellie, and is held within strong professional responsibility and accountability frameworks. The written and verbal discursive practices that support this work are discussed below, but here it is worth noting Kellie’s description of the internal organisational structure within which she carries out her role.

The unit operates on a 24 hour shift basis, with a staff team of Residential Child Care Workers responsible for the young people in their care for the duration of the shift. Kellie points to the simple hierarchical structure outlined above but notes that despite the different roles and positions within the hierarchy, ‘everybody in the place I’m working has a degree’ (Kellie, Interview).
Despite this hierarchy, or perhaps because of it, there is a strong emphasis on professional communication and teamwork. For Kellie the requirement for minimum professional qualification heightens her expectation of professional responsibility and ability across the team. She acknowledges her own professional development journey ‘on the job’ but states adamantly regarding qualified Social Care graduates, that ‘there are things you would consider that they would be able to do having done a degree, but they can’t do it. So there have to be certain standards (Kellie, Interview). Kellie does not make a direct connection between professional inadequacies and recognition of Social Care as a profession of equal status amongst other professions, however we see in the next section how she recognises an external hierarchy in the multidisciplinary context.

**6.4.2.3 External Policy context:**

The work with a particular young person at the Residential Centre responds to the Care Plan; as Kellie puts it, ‘Whatever would be in the care plan, we would adhere to that’ (Kellie, interview). The Care Plan is built around the young persons identified needs and is introduced to the young person by their Social Worker on their arrival at the unit. Kellie’s description follows closely the procedures set out in the ‘National Standards for Children’s Residential Centres’ which states: ‘The term ‘Care Plan’ refers to the written care plan developed by the social worker, in consultation with others, and in compliance with Article 23 of the Child Care Regulations 1995’ (Kellie,
Documents: Dept. of Health and Children, 2013). This policy document, together with ‘Children First’ (Government of Ireland, 1999), provides the wider governance structure for her work.

It is clear from Kellie’s description of her work that the two documents have a direct bearing on her daily activities. It is a policy requirement that there is regular and ongoing contact between all professional staff involved in the care of the young people. Although the ‘National Standards’ document sets out specific responsibilities and accountability trails for professionals, it does not base these on a hierarchical structure. Kellie, however, identifies a ‘professional pecking order’ and says, ‘It feels like we’re at the bottom of the pecking order, so to speak, sometimes’ (Kellie, Interview). She makes this comment as she is discussing professional decision-making around day to day care provision. Kellie feels that there is a high level of ‘checking-in’ before actions can be taken. Whilst appreciating the importance of adhering to the Care and Placement Plans she states:

‘We do have to get permission to do a lot of things and that kind of delays some things. We have to get permission from social workers, and parents also and rightly so. We can’t do a lot on our own without getting permission’ (Kellie, Interview).

She sees this as having an impact on her daily work as a Social Care professional and expresses this frustration as follows: ‘So on the ground if it happens that I think something is not working, I can’t deviate from it, I have to do it’ (Kellie, interview). Kellie goes on to cite two examples of how she feels restricted in her professional practice and then summarises how this impacts on her as a professional: ‘So it’s difficult there, like we have to do what we are told; sometimes it can feel that way. But we’re professionals too’ (Kellie, interview).

On a more positive note, Kellie describes how, within the unit, policy directives are introduced, not as dictates from above, but supported by training and discussion. She also identifies an instance of how she was able to influence internal ‘unit policy’ by designing a new approach to ‘key-working’. The ‘Key-worker’ role is identified by the ‘National Standards’ as a professional with special responsibilities within the staff team for aspects of the child’s care. Kellie describes how she and a colleague presented a
new key-working policy to their manager who ‘read it, liked it and put it out to the staff and now it’s the unit policy’ and she states with obvious pride: ‘So there is that avenue for creating policy at a local level’ (Kellie, interview).

6.4.2.4 Written and verbal discursive practices:

As mentioned in the previous section, Kellie sees her work as operating in a policy context that is strongly directive. The specific requirements that national policy places on her work is seen clearly in this example from the National Standards document:

‘Staff meetings, hand-over meetings and other forums take place regularly to facilitate good communication, co-operation and consistency between staff in implementing care plans, providing consistency of care and maintaining safety’ (Kellie, Documents - (Dept. of Health & Children, 2005: 8).

Kellie views these specific requirements as matching her own professional ethos in promoting a team approach.

In her diary, Kellie stresses the role of ‘Handover Meetings’ as being ‘very important and give the next staff team information that can help shape their shift’ (Kellie, Diary). She also identifies the professional skill associated with this aspect of her work. She recalls how, as a newly qualified staff member, she needed guidance and mentoring from experienced staff as she struggled to present information in a clear and concise manner. She sets out the importance of acquiring the professional skills as she states that

‘It is important to be able to perform the handovers with speed and accuracy. A common mistake while giving handovers is story telling which may cause other information being lost and the handover taking too long’ (Kellie, Diary).

Internally, staff meetings occur every two weeks and provide an opportunity for staff to discuss how aspects of their work are progressing, what changes are recommended, and issues or concerns about a young person’s overall placement. The tone of the meetings is business-like with a practical focus. ‘At the meetings we would discuss: ‘I would like to do this or that’ and we’d decide ‘Let’s try it for the next two weeks’, and we come back in the two weeks and assess if it is working’ (Kellie, Interview). This part of the interview discussed the basis on which such professional decisions were made. Kellie was clear that the basis for decisions was experiential rather than theoretical: ‘so
you kinda give your experience with someone’ (Kellie, Interview). She continues this emphasis on experiential based professional decision-making in the following segment: ‘So it would be just our experience out there and we would assess it... So you could say it’s like trial and error... or else it could be something that comes from higher up who voice a concern and the chances of that changing are very slim’ (Kellie, Interview). The ‘professional commitment’ to non-theoretical discussions at internal staff meetings extends to the multi-disciplinary context.

Kellie says that she is confident as a professional at multi-disciplinary meetings despite there being a level of formality associated with them. She states that she is never intimidated by these meetings and feels that she has a professional contribution to make: ‘I feel that when you get to these meetings that there are the buzz words, but I think that if you have something to say you have a right to say it at the meeting’ (Kellie, Interview). The strength of her position at multidisciplinary meetings is based on her direct and ongoing engagement with the young people in care. She describes how this perspective was acknowledged by another professional at a recent ‘Review Meeting’:

‘There was a psychologist there, there was a Residential Manager, there was a Social Worker, and the Senior Social Worker was there, and they were talking and talking and I said, ‘Can I say something here as the only person in this room who actually works with this young person, on the floor?’ And the Psychologist said ‘She’s right, all of us read logs and read reports but she is the only one.’ And so I said my few bits’ (Kellie, Interview).

Kellie’s verbal discursive practice favours a practical, non-theoretical style, but that is not to say that she discards a theory base. But even her description of the use of theory in practice adopts an ‘everyday’ discursive style: ‘... if you have something to say you say it. If you need to, use big words but it’s not a requirement’ (Kellie, Interview).

Written work occupies an increasing space in Kellie’s working life. In her interview, she describes her work now as ‘very paperwork orientated’ and bemoans the fact that up to one third of her nine-hour shift is devoted to ‘typing and writing his report or her report – sending emails, making the phone calls’ (Kellie, Interview). However, Kellie views this aspect of the work as an integral part of her professional role. She sees ‘paperwork’ as increasing transparency in the work, which, in turn, raises the level of professional responsibility. In her diary, she provides the example of a ‘Missing in care
Form’. Filling out this form follows phone contact with the Gardaí in a case where a young person has not returned to the unit at a specified time. Kellie notes that the ‘Child Care Worker has the sole responsibility to inform the Gardaí of the resident missing from care and their return and to fill out the form’ (Kellie, Diary). She describes how its purpose is to support the verbal communication that has already taken place with more detailed information provided to the Gardaí. It is held within the young person’s overall ‘Absent Management Plan’, in place as part of unit policy.

Within the residential unit, Kellie notes the importance of written communication-sharing between staff. She cites the example of ‘minute-taking’ at staff meetings. The written records of these meetings and the decisions taken there provide a solid base on which ongoing work is built and acts as a reference point in the ongoing monitoring of work strategies. She notes in her interview: ‘I think that’s very important, we write stuff there and then... some of the forms are to let outside people know that you are doing it’ (Kellie, Interview). Here Kellie is referring to the external monitoring of the work, on an ongoing basis by the Monitoring Officer and Social Workers and, periodically, by HIQA inspectors.

Kellie identifies two key issues relating to written discursive practices, namely the skills associated with ‘professional writing’ and the restrictive nature of the templates used in her work context. Reflecting on her own professional development, Kellie recalls in her interview how she has honed her writing skills (in a similar way to her verbal reporting skills) towards being accurate and concise. She notes the importance of professional writing skill development within Social Care training and education and recalls her own training which included ‘a module on communication and that was beneficial when I see how much paper work we do now’ (Kellie, Interview)’. She expresses her strong belief that every graduate of professional Social Care training programmes should be competent in written communication and computer skills. She further notes that when this is not the case the worker ‘who is in more tune and they end up doing other people’s work...’, and note from her own experience that ‘I might spend more time at the office than others because they couldn’t put on the computer’ (Kellie, Interview).
Finally, Kellie is aware of the negative impact of completing written records on forms that she describes as ‘not fit for purpose’. The example she gives is the ‘Significant Event Form’ in which reports of both positive and negative events are recorded and sent to the Monitoring Officer on a daily basis. Whilst noting the importance of transparency, Kellie says that there is little space on this form (and others) to include positive or proactive involvement of the worker. She notes the duplication and sense of ‘tick-boxing’ associated with the completion of this form and states that ‘it doesn’t allow you to expand on the good work that you have done. It just says ‘Did you do this correctly?’ … ‘I think I did, like you tell me if I did it correctly!’ (Kellie, Interview).

6.4.2.5 Emerging themes:

1. Degree as defining professional status
2. Language terms in use ‘unit’ ‘residents’
3. ‘On the floor’ professional perspective
4. Restrictive nature of workplace templates in use.
5. Restrictions on professional decision-making by policy vice.
6.4.3 Mona: ‘Did they have a bowel movement today, or eat well? – I’d like to think that if someone wrote about my life for a week it would be more interesting that that!’

6.4.3.1 The Worker:
Mona says that she ‘fell into’ Social Care as a result of growing up in an environment in which her mother and grandmother were carers. Her initial experience of providing care for others was in England. There she was being paid for a job that she loved doing. She speaks warmly about the organisational ethos and clarity of purpose as she began her social care career working with people who were deaf and blind. At the time, however, she did not view her work as being at an early stage in a professional career. She explains, ‘I enjoyed it too much to see it as a professional, it was just too much fun for me’ (Mona, Interview). Mona goes on to describe how, as she gained more experience, ‘her role changed and became more professional’ (Mona, Interview). This
begged the question, ‘What does ‘professional’ mean?’ In response, Mona moves beyond her initial perception (‘there are always ideas in your head about suits and briefcases’) and identifies key elements of professionalism. For her being professional is:

- ‘...about having a good understanding of your job and why you want to do it and with who you do it
- ...more than just a wage packet at the end of the week
- ...more than just going in and doing your job and going home
- ...about having the degree, about having the qualification now that says that you have the training to do this job
- ...being registered professionals and that will bring more recognition’

(Mona, Interview).

These characteristics closely match those of the normative definitions of professionalism (e.g.: Cheetham and Chivers, 2005). As she considers her current role, Mona also includes elements of the dynamic and contingent views of professionalism (Evetts, 2005). These include the recognition of the profession by other professions and the public, the internal sense of professionalism that she holds, and professional decision-making. She sums up the totality of how she feels Social Care is evolving as a profession as follows: ‘You just have more than ‘Aren’t you great for doing the job you do’. It is an important job that we do, and to have that professional standing will make it more respected’ (Mona, Interview).

The sense of her own professionalism appears to be rooted deeply in Mona’s practical experience of caring for others. In other words ‘caring’ came first, and ‘professional care’ developed from this. Her training and education, too, was located within the context of practice, rather than prior to practice. ‘I had been doing the job hands on for so long and it was an applied degree meant that I was doing a lot of the stuff for years and then it became part of the degree’ (Mona, Interview). Mona admits that she ‘had always rejected the academic side of things’ but subsequently enjoyed her studies and values what they add to her professional understanding and ability. Two benefits of her studies stand out for Mona: firstly, it gives her an understanding of the wider context of care provision, both with regard to the historical development of care, and
advancements in understanding how care is delivered and monitored; secondly, it provides practical knowledge, useful in developing skills in the workplace. There is a strong link between professional recognition and attaining degree level qualifications evident in how Mona discusses how her own education and training has impacted on her professional role. ‘Being able to share knowledge and apply it especially with care assistants who haven’t had the opportunity yet to do the degree’ (Mona, Interview) is more than interpersonal generosity for Mona. It is a commitment to achieving a consistency in high standards of care. Her studies are integrated into her work life ... ‘I have been able to bring in my books and notes and share them...; at a meeting I sometimes think of something from the degree that can be used’ (Mona, Interview).

Mona’s path to her current role, ‘Social Care Leader’ has involved an ongoing mix of experience and training/education. She values both, and sees them as complementary elements in professional development, but as she considers her role within the organisation, questions about professional training and job titles, professional recognition and roles, come to the fore.

6.4.3.2 The Internal context and professional role:
The organisation in which Mona works is 50 years old and operates in the voluntary sector, having been setup by ‘a lady who saw a local need... families who had children who had Downs Syndrome and the lack of services for them (Mona, interview). The service has grown over the years, and now offers day and residential services for people with intellectual disabilities and their families. Mona explains that the organisation was initially developed around a nurse-based medical model, but more recently ‘The overall model of care is the social model’ (Mona, Interview). Central to this model is placing an emphasis on community engagement, and Mona sees her role as being close to the organisation’s core objective of supporting people towards independence.

As Social Care Leader, Mona leads a team within a residential campus located close to the centre of the town. The residential services work closely with the day services and for the eight service users in her care, the organisation is both their home and base for daily activities. Although Mona initially speaks in general terms about the professional
work done within the Social Model adopted by the organisation, she does emphasise that ‘there is a vast amount of knowledge that you have to have to support eight very different people, especially with rapidly changing needs in the client group’ (Mona, Interview). She sums up the core objective of her role as ‘trying to really balance the health needs of the individual with the social needs’ (Mona, Interview). The specifics of achieving this objective is providing leadership and organisation ‘to make sure that the staff and the team know how to support them in the best way that they can’ (Mona, Interview).

Mona describes how the people in her care require varying levels of support. This has a direct bearing on who provides the care. She identifies the make-up of the staff team as Nurses, Social Care Workers and Care Assistants. Depending on the needs profile of the clients in a particular house, the ratio of Social Care Workers to Care Assistants varies. ‘We would usually have three people on a shift – a nurse and two care staff, we will call them, but they could be a care assistant and a social care worker’ (Mona, Interview). Whilst there is a consistency in the presence of a nurse in the team, there is variation in who makes up the remainder of the shift team, ‘depending on the needs of the individuals who are living in the houses’ (Mona, Interview). As shifts are organised across several houses within the organisation’s residential service, Mona identifies a situation that arises where a member of staff ‘can be a Social Care Worker in one house and a Care Assistant in another’ (Mona, Interview). For Mona, this raises issues about the relative professional status of Social Care Workers and Nurses and she comments that ‘now in our organisation a nurse is a nurse; they are employed as a nurse and they work as a nurse, but the social care worker role is a mixture of the two (Care Assistant and SCW). Furthermore, Mona notes in her diary that ‘although we are all qualified social care workers, hands on staff are employed as ‘care assistant’” (Mona, Diary) and she goes on to note that she is the only worker in the organisation with the word ‘Social’ in her job title. One may conclude from this that while there are a number of qualified Social Care Workers employed in the organisation, albeit on a temporary, part-time basis, and their qualifications are recognised in terms of the work they are allocated, their professional job title is not used, and they share a common title, ‘Care Assistant’ with unqualified employees.
Mona says in her interview that she has ‘come to understand the role and its complexities and the politics that can be involved as well’ (Mona, Interview). In her interview, she spoke of the complexities of the employment conditions without the tone of someone on a crusade, however, later in her diary she recorded the essence of a conversation with a colleague as follows:

“We reflected that the nurses we work with would not ever be considered for the role of care assistant, and despite training for the same length of time social care workers do not seem to be held in the same esteem’ (Mona, Diary).

A closer look at both the external policy context and the verbal and written discursive activities that are part of her work, reveals how Mona experiences the impact of ambivalent employer attitudes towards the professional status of its employees.

6.4.3.3 External Policy context

Both in her interview and diary, Mona makes a strong link between professionalism within her organisation and the introduction and increased influence of HIQA, the Health Information and Quality Authority. ‘Since the residential services began to proactively prepare for HIQA inspections, professionalism and relationships have improved between the team (Mona, Diary). She notes how this influence is even more visible given that ‘the day service element of the organisation... does not come under the HIQA regulations’ (Mona, Diary). Mona describes how HIQA regulations define and give shape to her work. HIQA stressed a partnership approach, and, introducing their role within the new policy framework in 2013, acknowledged that ‘the sector is new to regulation and the aim will be to promote improvement and therefore there has been ongoing engagement with providers of residential services and with advocacy groups’ (HIQA, 2013 – Mona, Documents). The new organisation published ‘National Standards for Residential Services for Adults with Disabilities’ (HIQA, 2013) and it is against these standards that Mona’s organisation is inspected.

Although Mona recognises improvements within her service since the HIQA regulations have become active, she also notes that this new policy brings with it challenges and stresses. The challenges she associates with the fact that the day services with which she works closely do not come under the HIQA policy. She records in her diary that there is a discrepancy in progress regarding written communication
work, between residential and day service staff. She notes that ‘our progress has been hampered by the day service element of the organisation; as they do not come under the HIQA regulations they do not seem to have any understanding of what will be required to become fully compliant’ (Mona, Diary). The stresses, for Mona, are associated with the preparation for HIQA inspections. As Social Care Leader, Mona has responsibility for the staff team and their compliance with HIQA standards. She notes two contributory factors that add to the overall stress within the organisation: firstly, low morale due to cutbacks that have led to increased workloads, harder physical work and staff reductions; secondly, she identifies in her interview how when a HIQA inspection is imminent, there are ‘staff fearful of being asked about a policy that they didn’t know’ (Mona, Interview).

Mona identifies a clear Social Care career path. This is based on her experience within her organisation and a specific interest in how services can best respond to the emerging needs of older people with intellectual disabilities. Her career path towards specialisation in the area of dementia, and how it impacts on people with intellectual disability, has brought her into contact with researchers and policy analysts at TILDA based in Trinity College Dublin. Her simple summation of the need for policy to develop in this area is that ‘people are living longer and we need to know more about it’, (Mona, Interview). Her view is rooted in her practical experience, and in a professional ethos that is ‘person-centred’ and promotes community inclusion. It is perhaps ironic that the external organisation she identifies as creating challenges and stresses for her profession, HIQA, express a very similar view of emerging policy issues:

‘The transition to community living for all and the introduction of supports to exercise legal capacity will take time. These Standards address residential services for people with disabilities but are flexible in that they support the transition process to different settings where people may live. Since the policy landscape in Ireland is likely to change significantly in the coming years these Standards will be kept under review’. (National Standards, 2013)

The ability to critique her practice and that of the organisation as a whole appears as an integral part of how Mona sees her professional role. It includes the impact of policy on practice, whether that be funding cuts, the ‘huge increase in organisational policies’ (Mona, Interview), and empathising with stressed staff. As she identifies and
reflects on verbal and written discursive practices within her work, she continues to show an ability to step out of what she calls her ‘hands-on’ role and view its evolution objectively.

6.4.3.4 Written and verbal discursive practices:

‘You hear a lot of people say that it’s all paperwork and only ticking boxes, but these are what are creating a foundation for our work practices’ (Mona, Interview). This quotation from the section of the interview that discussed the written discursive practices of Mona’s work captures how she views this element of her work. The first part of the quotation indicates that there is not unity amongst the staff team in the value they place on recordkeeping and written communication at work. This was noted earlier and Mona recognises the need for ‘the development of a communication system between residential and day services’ (Mona, Diary). The second part of the quotation employs the present tense (‘are creating a foundation’) and this points towards Mona’s belief that the written elements of the work have a formative role in how the professional work evolves.

The formative role of written discursive practices is, for Mona, both proactive and reactive. It is proactive in that it has the potential to reshape and improve practice as in the case of the development of a new ‘24hr Communication Sheet’ (Mona, Diary). She describes how, after a trial period, this new document led to greater consistency in recording practice amongst staff; it also resulted in ‘Overall a more holistic view of an individual’s day could be captured and utilised to their benefit’ (Mona, Diary). The use of written discursive practices are also seen by Mona as being reactive in the sense that they are used in response to a potential HIQA question ‘Where is your proof’ (Mona, Interview). Here Mona identifies how recording professional practices and actions may be viewed in a defensive manner where work practices or their outcomes come under scrutiny. Mona challenges this view amongst some staff by pointing out that recording practice is ‘getting people to be able to provide evidence, show off your good work’ (Mona, Interview). While attitudes towards written discursive practices may differ amongst staff, Mona is clear that a policy shift towards closer monitoring of care provision has resulted in increased levels of written work for all staff. She also
notes that ‘there are some people who may be reluctant to record some things because they are there in black and white’ (Mona, Interview).

Mona’s views on written discursive practices are influenced by her leadership role in the organisation. In her diary, she recalls how often her role is to act as a bridge between policy on route from management to locum staff, and between staff views ‘highlighting the challenges we face internally’ (Mona, Diary) and organisational management. Mona is sensitive to how communication processes and organisational policy, be they written or verbal, impact the ‘hands on’ staff who work towards achieving the organisations’ goals, i.e. supporting and empowering individuals with intellectual disabilities. In her ‘Moodle Diary’ she includes an informal discussion with professionally qualified Social Care staff colleagues where the use of job descriptions and titles are discussed. Staff note that agency policy regarding how professional are recognised through employment contracts distinguishes between nurse professional and Social Care professionals: ‘The nurses we work with would not ever be considered for the role of Care Assistant, and despite training for the same length of time Social Care Workers do’ (Mona, diary). The discussion reveals that Mona’s Social Care Worker colleagues, themselves, struggle to find a professional foothold in their place of work. One worker contributes to the discussion by saying that she ‘calls herself a Social Care Worker when asked what she does, as she feels less professional if she says ‘Care Assistant’, however a lot of people think she is a Social Worker when she says this’ (Mona, Diary).

Effective communication and information sharing are constant themes. This is hardly surprising in a work context where there is no clearly defined professional distinction between Social Care Worker and Care Assistant. The result – a Social Care Leader reflecting with an air of resignation that ‘We discuss roles a lot at team meetings and try to give a clear directive of what people have to do and try to share ownership of this’ (Mona, Interview).
6.4.3.5 Emerging themes:

1. Self-contained sense of professionalism
2. Doing with, rather than doing for
3. Social Care Worker as Social Care Leader
4. Status of profession relative to nursing
5. Impact of funding on employment status of SCW’s
6. Paperwork – integral to (good) practice
6.4.4 Fergus: ‘A builder knows that walls need to be built’

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<thead>
<tr>
<th>External Policy Context:</th>
<th>Written Discursive Practices:</th>
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<tr>
<td>IASCW ethical guidelines</td>
<td>Internally record keeping is on-going</td>
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<td>Uncertainty as to what the guiding policies were</td>
<td>Progress Sheets are completed weekly</td>
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<td>Funding is one that seems to be a really big issue</td>
<td>A Day Activity Sheet</td>
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<tr>
<td>The New Directions policy</td>
<td>The Person-centred Plan</td>
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<tr>
<td>November legislation for residential placements</td>
<td>Communication Books</td>
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| Fergus | Person-centred planning  
| Co-ordinator | Day Centre for adults with Intellectual Disability  
| Level 7 degree in Social Care required. |

<table>
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<tr>
<th>Internal context &amp; Professional Role:</th>
<th>Verbal Discursive Practices:</th>
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<tbody>
<tr>
<td>Influence person-centredness and person centred planning</td>
<td>Individualised planning</td>
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<tr>
<td>Ensure that records are accurate and clear</td>
<td>Conversation amongst two social care practitioners re best intervention.</td>
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<tr>
<td>Link between the service and the community</td>
<td>Discussion between two social care practitioners</td>
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<tr>
<td>Providing different levels of intervention</td>
<td>Staff meeting</td>
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<tr>
<td>Provide day activation</td>
<td>Board of management meeting</td>
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6.4.4.1 The Worker:

At the beginning of the interview, Fergus appeared somewhat nervous. As I listened to and transcribed the interview, that nervousness was also evident. It surprised me as I knew Fergus as a past graduate of the college where I work and the interview took place there. As the interview progressed, and later, on receiving the diary entries, I saw his initial nervousness in a new light, not borne out of fear but out of a sincere passion for his chosen profession. His initial motivation towards Social Care work is personal. Along with his value-based upbringing, Fergus talked about his ‘own personal background of having a brother with disability’ (Fergus, Interview) as being an initial motivating factor. It also acts as a continuing force that informs his practice: ‘I always say if my brother was involved in this agency would I be happy, if he was this particular individual would I be happy that we are doing this for him or not doing this for him’ (Fergus, Interview).
His overall understanding of Social Care is based on an integration of his values, his personal life experience and his education and training.

‘I recognise that within society there is unfairness, if you like, and that is sometimes within the capitalist system... social care fits into that picture... Professional for me is being guided by policies which reflect the right thing to do in the context of society’ (Fergus, Interview).

Fergus is at ease in reflecting on his work and his profession and connects the immediate and personal with the wider context throughout his interview and diary. For example he links the necessity for degree level qualifications with an ability to empower the individual and to understand and challenge the power structure in society in general.

Reflective practice is integral to his professional role and Fergus uses the diary in particular to critique his own work and that of his employing agency. Entries such as the one below are reflective in nature and raise questions about how PIF happens and its importance in service delivery.

‘It could be argued that the reason for this is inconsistency in language and discourse, which raises ethical issues concerning power, maybe based on varying knowledge of ethical guidelines and guiding policy within the service’ (Fergus, Diary).

This comment points to the dynamic, contingent view of professionalism put forward by Hanlon (1988) and supports an argument for an understanding of PIF that does not rely on normative definitions of a profession based on traits, education or status. Here, and elsewhere, Fergus is concerned with power, both within the organization and of the organization in the wider policy context. His critical professional stance mirrors closely that of Noordegraaf’s (2007) conceptualization of professionalism as ‘hybridized’. She focuses on ‘control of meaning’ rather than ‘power’, but Fergus’ reflection on his experience in the workplace illustrates the elements that Noordegraaf identifies as necessary to establish ‘control of meaning’: (i) Linkages between work and organized action, (ii) Mechanisms for legitimating work and (iii) Searches for occupational identities.
6.4.4.2 The Internal context and professional role:
Fergus works in a small scale, locally based, voluntary organisation. He describes it as having six paid employees, two of whom have degree level qualifications, two with no qualifications and two with FETAC level training. He states that ‘there is confusion, particularly for those who are not trained to a higher level. They’re not sure if they’re doing as much as they can for a person and that affects anxiety levels within staff…” (Fergus, interview). Uncertainty, confusion and lack of clarity regarding role and responsibilities within the organisation are themes that run through Fergus’ diary and interview. In reviewing the data generated by Fergus, three reasons for this uncertainty/professional ambivalence emerge:

1. Internal and external policy.
2. Variation of qualification levels amongst the staff team.
3. The complex nature of the work itself.

When Fergus points out that the ‘historical context of Social Care it is not as strong as it should be’ (Fergus, Diary,) he is referring to named guiding principles and policy guidelines that are present in other professional areas. The lack of policy certainty externally is matched by ‘a sense of powerlessness amongst the staff’ (Fergus, Diary) and a lack of enforcement of policies that do exist.

It emerged in the interview that a core part of Fergus’ role is to support the development of professional practices within the organisation. In ‘trying to restructure...kind of, the staff team, in such a way as to give responsibilities to each staff member for different areas of the service’ (Fergus, Interview), Fergus encountered a degree of variation of knowledge and a level of resistance to challenging the status quo. He states that there was ‘uncertainty as to what is expected of them’ and that there was ‘varying knowledge of ethical guidelines and guiding policy within the service’ (Fergus, Interview). And while it could be interpreted that the cause of this uncertainty was organisationally-based rather that individual worker-based, Fergus reflects in his diary that ‘My theoretical base on such an occurrence which I have gained through my education varied somewhat to the reasoning of one staff member’ (Fergus, Diary).
The policy and organisational context of Fergus’ professional work may not provide a solid professional platform, but even if it did, Fergus also point to the ‘ambivalent nature of the work’ where ‘there is uncertainty about the correct approach to take to the work and what outcomes will be worthwhile’ (Fergus, Diary). He notes that this complexity may create a situation where ‘Social Care Practitioners may place a greater emphasis on the work that can be seen i.e. grooming, hygiene etc.’ (Fergus, Diary).

6.4.4.3 External Policy context:

The organisation in which Fergus works does not have a website, but a brief description is provided by a published document that reviewed services countywide: ‘Directed by local parents of adults with special needs, the Centre is a day facility offering training opportunities’ (Fergus, Documents). This indicates that the workplace itself had its roots in volunteerism and is developing towards a professional based model over time. It retains its original ethos as a ‘parent-led service’ but is now recognised by the state: ‘Facility is partially financed by the HSE and administered by a BOM elected annually from parents’ (Fergus, Documents). Fergus commented on the impact on his professional role of the structural and funding contexts described above. At one meeting he described how ‘those present were people who did not have a grounding in the field of social care as they consisted of professionals from other fields and a number of parents of those who use the service’ (Fergus, Diary). The challenge for Fergus was to find where he fits into this picture. He went on to reflect on the different language used, the varying expectations and levels of understanding of the work and of his professional role. The diary entries that focused on his role within a varied working team reflected a hint of frustration that I had noted at the time of interview when Fergus discussed his attempts to bring a professional perspective into the work setting: ‘there is uncertainty as to what is taken as truth, what actions are legitimate and who is in a position to know what the truth is’ (Fergus, interview).

It is difficult to establish causal relationships here, i.e. if structure inhibits professional action/perspective, or if funding impacts on the ability or willingness of a volunteer management structure to engage professional staff. Fergus recognises the impact of precarious funding policy on professional practice both in terms of the overall staffing structure in the organisation, and in terms of achieving and maintaining professional
social care standards. He notes the contrast between how external monitoring is in place for residential services for people with disabilities and the absence of such monitoring being supported by a legislative and policy basis in day services such as his own workplace. He also reflects on the challenge and fear that exists in a small organisation in the face of having to meet higher levels of standards in a very uncertain and constrained funding context. Fergus referred to the ‘New Directions’ policy, published by the HSE in 2012. That document ‘introduces’ itself as ‘a new approach to adult day services (that) charts new territory...’ (HSE, 2012: 7). While welcoming the clarity that is heralded by this policy, Fergus is aware of how it may impact on the Social Care agency in which he works. Two of his insights sum up his ‘view from the ground’: ‘funding is one that seems to be a really big issue at the moment and trying to work within those constraints’ and later in the interview he identifies within the organisation as a whole, ‘a fear to be able to facilitate all the recommendations within that document is going to be extremely expensive’ (Fergus, interview), the recommendations being those set out in the ‘New Directions’ policy document.

6.4.4.4 Written and Verbal discursive practices:

In reporting this case the written and verbal discursive activities are discussed together. This is because the participant, Fergus discussed, recorded and reflected on them together. Their impact on his professional role and practice are also strongly intertwined. In his interview and subsequently in his diary, there is a strong emphasis on verbal discursive practices. That reflects his work context rather than his professional stance. When Fergus commented, ‘My role would be better supported by written policy and guidelines’ (Fergus, diary), he implies a lack of written policies present within the agency.

In his day to day work, Fergus describes the various recording practices present. These focus on planning and recording activities. These include the ‘Day Activities sheet’ and ‘Weekly Progress sheet’. In both cases Fergus notes that ‘The language used is generally very straightforward and to the point’ (Fergus, Diary). There is little scope for anything other than factual, descriptive notes. A written ‘Person-centred Plan’ ‘guides the broader picture, if you like, and on which most of the daily activities are based’ (Fergus, Diary). This document has only recently been introduced into the agency.
according to Fergus. A ‘Communications Book’ is also mentioned as a means of conveying information between the centre and home regarding the individual service user. There is a significant level of written work that accompanies practice in the agency but Fergus notes a lack of consistency amongst staff in record-keeping style and skill. He identifies understanding and practice of record-keeping as an important part of his own training, but that he is working in an environment where the team have not had that training and where there is a lack of external scrutiny of recording standards. This means that, not only is there inconsistency, but that records themselves are ‘really just a list of what the person has carried out during the week’ (Fergus, Interview), rather than a means to professionally assess progress.

In his diary, Fergus recorded and reflected on a number of verbal discursive practices – formal and informal meetings, discussions and conversations with colleagues and communications in the course of his work. There is a consistent theme that runs through his reflections irrespective of which verbal discursive practice is focused on, namely, a disconnect between his language and terminology and that of those with whom he was professionally engaged. For example, his reporting on the progress of ‘person-centred planning’ at the agency was met with a formality that gave him ‘an overarching sense of bureaucracy’ (Fergus, Diary). He considers that this may be due to a lack of common understanding of the work as those present did not share a common professional background with him. Also, in his discussions with colleagues and in his observation of discussions about specific work interventions, Fergus notes disparities in approach and language. In some cases he identifies the disparity as having its roots in varying levels of training, in other cases about the complexity of the work and the particular perspective of the worker in-situ, however an ever-present factor is that these discussions almost always ‘raised issues of power between all stakeholders in the organisation including service users, staff, management, families and governing policies regarding such issues’ (Fergus, Diary). He noted that when a decision regarding practice needed to be made ‘it appeared to me that the individual who was in a higher position of power ‘won out’’ (Fergus, Diary).
6.4.4.5 Emerging Themes:

1. Power relationships in the work context
2. Language and terminology in the workplace
3. Limited scope of written discursive practices
4. Internal v external sense of professional self
5. What is ‘counted’ as professional work
6.4.5 Shona: ‘How many of us can say that a professional person has documented 3-9 months of our lives?’

**External Policy Context:**
- HIQA will be coming on line soon
- No increase in rent caps
- Ending homelessness by 2016
- Freedom of Information Act
- Get approval from the city council
- We have a multidisciplinary team
- We have the new national standards
- Funding determines how we work with people

**Written Discursive Practices:**
- Daily records on everyone
- You are writing three times a day
- Written handovers with our day centre
- Day books
- Write-ups of incidents
- Trust is not always established
- Room checks
- Weekly Register
- Referrals to other agencies

**Internal context and Professional Role:**
- Supporting individuals to address underlying issues
- Identify and secure move on housing
- An agreed Care Plan
- Provide basic needs
- Dealing with people who are in crisis
- Key working
- Addiction support
- A very strong social care approach

**Verbal Discursive Practices:**
- Through supervision you are accountable
- Monthly meetings with City Council
- MDT meetings
- Information exchanged with other agencies
- We (professionals) are very much dependent on each other
- Handover from one shift to the next is verbally handed over and noted

**Shona**
- Residential Hostel Worker
- Homeless Hostel
- Qual.: Social Care or equivalent required

6.4.5.1 The Worker:
The interview with Shona was arranged in a hotel close to the hostel where she works. There was a certain irony that the spacious and plush surroundings of the interview location was chosen because, as Shona explained, there was a lack of space in the hostel itself. Shona spoke quickly and precisely about her current professional role as Residential Hostel Worker and the path that took her there. She explained that she always knew she wanted to work with people and that she ‘had an interest in people’s behaviours and why people do what they do’ (Shona, Interview). Her initial interest in psychology veered towards the more practical focus of Social Care. She wanted to retain her interest in people’s behaviour but as she puts it ‘I knew it had to be in a helping way’ (Shona, Interview).
For Shona Social Care was a professional career choice from amongst a range of professions. As her education and training progressed she was struck by what she terms ‘the broadness of social care’ (Shona, Interview). By ‘broadness’, she is referring to the range of settings in which Social Care Workers are employed. She noted that there was not an even spread of attention given to the sectors in her degree course, with an emphasis on residential child care and youth work. Her current area of work, homelessness, did not feature strongly: ‘... a tiny paragraph in all my notes, on homelessness. And housing legislation in Ireland, that was the extent of what we learned about working with people who are homeless’ (Shona, Interview). However she did develop a strong sense of what it means to be ‘professional’ through her education and training. Whilst she feels that not all of the programme content was immediately relevant to her work, she acknowledges that ‘as I am progressing in my profession that I am really starting to draw on’ (Shona, Interview).

Her sense of professionalism is clearly focused on accountability and knowledge. She says of accountability ‘When you are professional you are accountable for your approach, your actions, for what you do, your written words (Shona, interview). This, in turn, leads to professional acknowledgement and respect. The clarity regarding her own professional status is not always matched by Shona’s professional peers. She reflects on her engagement with other professionals whom she meets in the course of her work:

‘Some professions don’t treat it the same as other professions and I think it can be difficult in dealing with other agencies, as I don’t think you get the respect or you are seen to have as much knowledge about a subject or the people you are working with as you probably do’ (Shona, interview).

She speculates that this may be ‘because of your title or because of the background education you may have had’ (Shona, Interview). The relationship between job title, education and employment was explored in the interview and Shona described how there has only recently been a more specific requirement for Social Care degree level qualifications for her job. She describes how her team of eight Residential Hostel Workers come from a variety of backgrounds, experience and education levels and points to a simple fact that ‘we are all on the same terms, and carry out the same work’ (Shona, interview). For Shona, therefore, there is a link between the
ambivalence surrounding the qualification requirement for her position and the ambivalence regarding professional recognition and respect in the multidisciplinary context. A further contributory factor is suggested by Shona regarding the specific nature of her job title – ‘Residential Hostel Worker’ as opposed to ‘Social Care Worker’ employed in a hostel.

6.4.5.2 The Internal context and professional role:
The word ‘practical’ featured strongly whenever Shona spoke about her professional role. In providing short-term accommodation for homeless men, the organisation in which Shona works states its aim as being ‘to provide a quality service that endeavours to meet the individual needs of its clients’ (Shona, Documents – agency website). The clients’ presenting needs have a practical focus, according to Shona, such as a request a bed for the night or blankets if they are sleeping rough. Shona sees her work as more than simply responding to these immediate needs. She describes the task of establishing trust during the initial assessment that gathers information from the homeless person. She explains how underlying issues are usually present behind homelessness. For Shona and the team she works with she says ‘clients are at the forefront and the focus of all the work’ (Shona, Interview). She goes on to use a phrase reminiscent of Schon’s (1983, 1987) depiction of ‘professional artistry’ when she says that ‘we flow, depending on the needs of the residents at the moment...’ (Shona, Interview). For Shona, like Schon, the ‘flow’ of the work is dependent on complexities of the environment and the interactions with that environment and the people in it.

Working in this context, Shona identifies a tension between the ‘responsive’ and ‘managed’ aspects of her role. Her day to day practice is sandwiched between top-down guidance (‘we take direction from my team leaders and managers, and then from the CEO of the organisation’) and bottom-up definition (‘we very much respond and change and adapt to the needs of the client’ Shona, Interview). The day to day work is structured around a key-working system, where each staff member is allocated three/four clients that are the focus of their work. Shona describes the practical focus of the work as being centred on accommodation provision, physical and mental health, referral to specialised services such as counselling and addiction centres, and financial management regarding tenancy support and rent arrears. ‘We work on the ground’,
Shona says in her interview and for her, what makes the work meaningful is that it provides practical supports for the people who use the service. She emphasises the ‘we’ as she discusses her role. The importance of ‘peer support’ (Shona, interview) and an emphasis on supportive professional supervision are seen by Shona as being essential components in enabling her to complete her professional role.

6.5.5.3 External Policy context:
Both her initial training and in-service courses have given Shona the ability to understand her professional role in a wider context. Her description can be mapped as Fig. 6.6 below.

The diagram is presented as a series of holms rather than as a conventional hierarchy, as this better reflects how Shona views the wider context of her work. For her, each stakeholder shares a common goal expressed in her own organisation’s vision, namely ‘improving the quality of life in a home of your own for people affected by homelessness’ (Shona, Documents - agency website). She moves seamlessly from discussing the value of supervision in critiquing her work to herself critiquing the
response of national government to increased demands on homeless services: ‘no increase in rent caps, well certainly not in line with market value at the moment, is putting a real block on the work we are doing (Shona, interview).

Occupying a professional position so close to the daily lived experience of her clients gives Shona a sense of responsibility to advocate on their behalf at a policy level. The advocacy aspect of her role happens in three ways: firstly, through her engagement with other professionals and the local authority. In the course of her work Shona is required to report admissions, progress and referrals by daily e-mail to the city council in order that housing provision is conducted in a co-ordinated way. It is also a requirement that each client of the hostel register with the City Council before they can avail of hostel services. As Shona summarises: ‘...city council are very much on board with that person’s plan. So back to those strong links again, we very much need each other’ (Shona, interview). Secondly, Shona sees her role as ‘information provider’. In her Moodle diary, Shona included a sample ‘Handover Form’ completed as part of the daily recording of admissions and referrals at the hostel. She records in her diary that she is ‘always conscious when completing these handovers that the powers that be in local authority will read them and make an instant assessment of someone’ (Shona, diary). She goes on to explain that she avoids entering information that may block assistance at a later stage. In a similar way, Shona is conscious that information gathered in the ‘Initial Assessment Form’ is used by the Local Authority to plan their services. The information informs their service delivery and also their ongoing housing strategy, which, in turn feeds into national strategy. Thirdly, through her interagency work, Shona sees her role as ‘knowledge provider’. Despite her earlier view that in an inter-professional context there is some ambivalence regarding her professional status, Shona expresses a confidence in how her role is viewed within the multidisciplinary team: ‘we have this relationship, they see the work we do with the lads day in day out’ (Shona, interview). The close, ongoing working relationship between her and the clients means that Shona brings a unique professional perspective to the multi-disciplinary team meetings, and it is that perspective that is valued and respected by her professional colleagues.
The strong link between policy, funding and practice was identified by Shona. ‘Funding absolutely determines how we work with people and the resources that are available to us at the time’ (Shona, Interview). The impact of reduced funding from the state through the local authority, and from the public through fundraising and donations, has resource implications. At the same time Shona points out that the constrained economic climate results in ‘times where we are severely under pressure with huge amounts of homeless people presenting’ (Shona, Interview). There are also negative impacts caused indirectly by government policy decisions as Shona expresses the view that ‘no increase in rent caps, well certainly not in line with market value at the moment, is putting a real block on the work we are doing’ (Shona, Interview).

A recent shift in government policy in tackling homelessness is critiqued by Shona in her interview. A new ‘housing led’ approach means a changed emphasis in how services who work with people who are homeless are funded. This, says Shona, means that there ‘will be a massive shift in the way we work and we are only just starting to look at that at the moment’ (Shona, Interview). Because she is part of a policy working group in her region, Shona is acutely aware of the impact of policy. For her the connection between policy and practice is ‘how it falls on the ground’ (Shona, Interview). She expresses her frustration both at a lack of policy knowledge amongst some co-workers and at a lack of practice awareness amongst policy makers who fail to understand the ‘fruitlessness’ of policy decisions without adequate resources.

6.4.5.4 Written and verbal discursive practices:

Two strong underlying themes are consistently present as Shona discusses and reflects on her professional discursive practices; these are trust and power. Both show her professional commitment to the model of care that she works from within the agency. She describes this model as not being from ‘a medical approach, or from an educational approach. It is very client orientated which is very strong in the social care approach’ (Shona, Interview).

There is a notable contrast in both the form and function of the templates used within her organisation. We saw earlier Shona’s awareness of how information recorded in the ‘Initial Assessment Form’ and ‘Nightly Handover sheet’ is used internally and
externally. This led her to consider what information she included and how it influenced her recording style: ‘I try keep them short and concise; always factual and to the point’ (Shona, Diary), and she adds ‘Where possible I try not mention a person’s behaviour or if intoxicated unless it has direct relevance i.e. if there is a risk’ (Shona, Diary). This awareness of her professional gatekeeping role brings the power issue into focus for Shona, and she sees the importance of not holding that power exclusively in the professional/client relationship. Reflecting on her professional role in relation to the completion of the ‘Initial Assessment Form’ she comments ‘I see my role here to be honest with the person about our confidentiality policy and the purpose of carrying out the assessment’ (Shona, Diary).

Her ability to empathise with the client is evident as she discusses her written discursive practices. She notes that even the gathering of basic factual information requires an element of trust as asking questions ‘can sometimes make the person feel uncomfortable and uneasy’ (Shona, Diary), especially when a trusting relationship has not yet been established.

There is a practical focus to the ‘Care Plan’ template that Shona included in her diary. It guides the short term goals of her work.

**Fig 6.7 Shona’s ‘Care Plan’ template headings**

<table>
<thead>
<tr>
<th>Date</th>
<th>Support Area</th>
<th>Action to be taken</th>
<th>Person responsible (and organisation)</th>
<th>Completion date</th>
<th>Outcomes, Blocks or Barriers</th>
</tr>
</thead>
</table>

As can be seen from the headings in Fig 6.7 above there is a strong task focus with clear emphasis on goal completion and responsibilities. The practical focus facilitates discussion regarding work progress within the organisation, where Shona points to the managerial function of supervision where ‘with my supervisor, we look at the clients that I am working with at the moment, what is going on for them, is there anything else that we can do for them’ (Shona, Interview). It also serves as a basis for discussion with the multidisciplinary team and other professionals where Shona, again, notes the practical task-orientated approach ‘where the client comes up as well discussing their
case, their housing options, what supports we have put in place and ones that we might put in place’ (Shona, Interview).

The structured style of the templates discussed to date is in marked contrast to the ‘open format’ of the Handover Sheets and Daily Records. These are completed by all staff and largely facilitate the smooth co-ordination of work between shifts of day and residential workers. Shona records in her diary that ‘Along with our written daily records we do a handover from on shift to the next so verbally they are handed over and noted’ (Shona, Diary). Not only is the format open, Shona also notes that

‘As there are no prompts or guidelines to information required, it is up to the individual staff member to record as they see appropriate. This naturally varies between staff as what one staff sees as relevant information to record another may not’ (Shona, diary).

This in turn leads Shona to believe that staff, including herself, can become complacent in filling out these forms. In her interview, Shona described how the daily record sheets were completed three times a day for each of the twenty-six residents, so it is not surprising that she commented that ‘There is a lot of writing that we seem to do’ (Shona, Interview). It appears as if the Daily Record Sheets act as an ongoing written commentary on happenings in the hostel as, according to Shona, they are ‘just about the day and if anything happened, did they attend GP, general mood, if a mood started to decline or if mental health started to decline…’ (Shona, Interview). And while she says that ‘opinions are not generally encouraged’ (Shona, Interview), professional judgements are based on the recorded observations of staff. Ultimately they are, together with the verbal handovers the base from which the professional team begin and end their working shift. The ambivalence noted earlier regarding professional role is reflected again here in Shona’s description and reservations about her written discursive practices. Her focus returns to the client as she concludes her reflection in her diary by stating ‘We bring people into our service and automatically expect them to be comfortable with recording a great proportion of their time with us’ (Shona, Diary).
6.4.5.5 Emerging themes

1. Variation of qualifications for same job title.
3. Work described as practical, on the ground.
4. Client led, client-defined nature of the work.
5. Unique on the ground perspective valued externally.
6. Policy consciousness and advocacy.
7. The impact of funding.
6.4.6 Eileen: ‘Here’s a new form that you have to fill out on top of everything else you are already doing’

**External Policy Context:**
- A tender from the HSE
- HIQA who can arrive in at any time
- The cloud storage system (PIMS)
- Reviewed at regional management level
- Audit from our regional manager
- Legislation
- Full time care order/voluntary care orders
- Multi-Disciplinary team
- ‘Children First’

**Written Discursive Practices:**
- The care plan
- A daily log/Handover Book
- A placement plan
- Individual crisis management plan
- Critical Incident Report
- Risk assessments
- Visit report
- A daily/weekly planner
- The weekly report
- The monthly packs

**Internal context and Professional Role:**
- 4 S.C. Workers and a Child Care Leader - 3:1 staff/child ratio
- Use a therapeutic approach
- Key working sessions
- Two staff on the floor
- Behaviour tracking and direct observation
- Building relationships
- Support and teach
- Continuous Professional Development

**Verbal Discursive Practices:**
- Child Care Review meeting
- Provided an everyday perspective
- Handover is essential
- Supervision
- A team meeting
- Every day we discuss the daily plan
- Formal meetings with an informal tone

**Eileen Social Care Worker Residential Child Care Relevant degree + experience**

6.4.6.1 The Worker:
Eileen’s experience of a community project in secondary school was what convinced her to build a career based on ‘working with people, as opposed to working with numbers’ (Eileen, interview). She describes in her interview how she initially viewed social care as primarily being about helping and supporting people who need it. Those essential elements are expressed as ‘therapeutic interventions’ in the professional context, and based on professional judgement and skills that are developed within formal training. Her comment regarding her professional role being more than ‘just using your personality to make judgement calls at work’ (Eileen, interview), holds Eileen’s conviction that both one’s personality and one’s training need to be engaged in professional activity. This is a theme that remains throughout her interview conversation and is reflective of Ward (2002) who expressed a similar professional
symbiosis between personal attributes and theoretical knowledge in the theme and title of his book ‘Intuition is not Enough’.

The focus of ‘therapeutic intervention’ is identified by Eileen as being practical. She illustrates this with an example:

‘You can cook someone a dinner, but then you can teach them how to cook it themselves. In the first instance you are just giving them what they need but then you are teaching them a lesson that you are helping them through life – that’s a very simple one. So yeah, that’s my definition – we support and teach’ (Eileen, Interview).

There is more to Social Care work than cookery lessons and Eileen explains that ‘to use a therapeutic approach I really think you need an education to do that, and that’s where your degree comes in’ (Eileen, Interview). For Eileen, training provides a depth of understanding. She sees Attachment Theory as providing insight into the challenging behaviours, actions and reactions of the young people with whom she works.

While the tasks of everyday professional practice are defined by the needs of the young people in care, and the professional responses are informed by knowledge and application of theory, a key distinguishing feature of ‘professional’ work for Eileen is policy and procedure. Being professional is ‘about being sure of policies and procedures, and being you know in line with policies and procedures all the time. A lot of it for me is about the paperwork too to ensure that you are logging everything and, yeah, basically paperwork’ (Eileen, interview). This is an intrinsic part of the work, and while Eileen acknowledges that there are ‘a lot of forms and stuff that wouldn’t go on in a normal home’ (Eileen, interview), the policies and associated recording procedures are very close to the professional action and, therefore, to how she defines her professional role.

As Eileen completed her Moodle diary, she reflected on her professional role in relation to the discursive activities that she recorded. It is clear from the phrases below (see Fig 6.8), that her understanding of who she is as a Social Care professional is strongly influenced by what she does in daily practice. But, more than ‘doing’ practice, it is what she terms ‘contractual obligations’ (Eileen, diary), that require her to
describe, report and assess her practice, that are the defining elements of her professional identity.

**Fig 6.8: The role of discursive practices in Eileen’s PIF**

6.4.6.2 The Internal context and professional role:
Eileen is part of a team of five Social Care professionals working in the Residential Child Care centre. She describes this as ‘not quite a full team, if there was one more of us then that would be a full team, because it’s three people on a team to one child’ (Eileen, interview). The team members are required to have, or to be pursuing, degree level qualifications in Social Care. Eileen notes the advantages of having gender balance on the team and expresses the view that ‘The kids seem to respond better to men’ (Eileen, interview) although she does not offer specific evidence to support this view.
Throughout her diary and interview, Eileen returns to ‘the therapeutic model’ as being at the centre of her work. The therapeutic work is carried out informally at the centre: ‘on a daily basis the way it is in my work we have two kids who are both one to one, so there are two staff on the floor everyday’ (Eileen, interview). The essence of the therapeutic model is illustrated by Eileen in the following account:

‘Yeah therapeutic model means to me, number one, building relationships with the young people. The young people need to know you are there for them, no matter what. Even if they beat the crap out of you, you are going to be there tomorrow, you are always going to be there, you can forgive them and move on. But I also think it’s therapeutic to help them to feel empathy for you, if they have done something. I know this is all taking a very negative tone, but I know that our model of care really shines through when we are in crisis. I know on a daily basis we support and teach through educational programmes and all stuff like that, but that’s more practical, whereas the model is down to therapy, dealing with the actual feelings of the person happens when they are in crisis. So we’re back again to supporting and teaching, that’s what I see therapy as’ (Eileen, Interview).

This account is worth including in full as it illustrates how Eileen sees her professional role as being rooted in the relationships that she has built with the young people in her care. This therapeutic work is, for Eileen based on professional judgement and possible only with the support of a close professional team and supervision. Professional judgement is based on the worker having a clear understanding of their role and the elements of therapeutic work. In her diary, Eileen offers examples of how the interactive, relationship-based work is recorded and reported both internally within the team, and externally to Monitors, managers and linked professionals. Phrases such as ‘a person-centred approach to care planning...; re-enforce positive behaviour...; ensure consistency is maintained throughout the day...; help them to regulate their emotions...’ (Eileen Diary), are used to identify the building blocks of the therapeutic model of care. The ‘fluidity’ of the daily work is held by a professional team, who, according to Eileen, are required to ‘communicate informative descriptions of how the people in our care are progressing through their placement from day to day’ (Eileen, diary). These professional requirements, in turn, are located within a policy and procedural framework that ‘affect everything, mostly which is on the floor...’ (Eileen, Interview).
6.4.6.3 External Policy context:
For Eileen, being professional is ‘About being sure of policies and procedures, and being you know in line with policies and procedures all the time’ (Eileen, Interview). There is a marked contrast in how she discusses the place of ‘policy and procedures’ in her interview and diary. In her interview, Eileen emphasises the burden of ‘paperwork’ (although much of the ‘paperwork’ is now entered directly onto the computerised system – PIMS, the Placement Information Management System): ‘we have a ‘cloud’ system in our job called ‘pims’... and on there we log into our house as ourselves and we fill out daily logs, we fill out incident reports, everything goes on there’ (Eileen, Interview). Eileen goes on to explain that this information is uploaded onto a ‘cloud storage system’ that is accessible by Social Workers, Monitoring Officers, Regional Managers, Local Managers. She summarises that ‘everyone who has got anything to do with that child can see our work’ (Eileen, Interview). Although clear, systematic and accessible recordkeeping is a key feature in residential child care policy, (see, the Child Care Act, 1991, the Child Care (Placement Of Children In Residential Care) Regulations, 1995, Child Care (Standards in Children’s Residential Centres) Regulations 1996, the Guide to Good Practice in Children’s Residential Centres, the Social Services Inspectorate (now HIQA), the National Standards for Children’s Residential Centres, 2001), there is no clear direction on the specific record keeping system to be used. As a professional using a computerised system of recordkeeping, Eileen is unclear as to its title: ‘I’m still not sure what that stands for ‘personal something account ...’ (Eileen, Interview). Like the policy emphasis, the professional’s emphasis is on purpose rather than method. Another common factor shared by policy and practice is the increased amount of administrative work associated with residential child care practice. A useful example of how national policy is translated into agency practice is provided in ‘Policies and Procedures for Children's Residential Centres, HSE Dublin North East’ (2009) who itemise a comprehensive list of records in use in the practice setting. They describe their policy and procedures as a step in an evolving process towards standardisation in residential child care practice. The experience for Eileen, working as a professional in a residential child care setting, is one of an increased workload. She says in relation to policy direction from TUSLA: ‘The way a policy would come to us is -
‘Here’s a new form that you have to fill out on top of everything else you are already doing’ (Eileen, Interview).

There is a close relationship between ‘policy’ and ‘paperwork’ for Eileen. In her diary however, she takes a more reflective tone as she locates her administrative duties firmly within the context of communication and professional accountability. She focuses on the purpose of workplace procedures and identifies the importance of connecting with ‘other professionals outside of the organisation, but involved in the care planning process’ (Eileen, Diary). The care plan is further broken down into three sectors ‘health, education and relationships’ (Eileen, Diary). The ongoing ‘commentary’ on the daily events of young people in Residential Care is understood by Eileen to have ‘come directly from the government who say that we need to be doing weekly reports for social workers so social workers can have more of an idea of what the kids are like’ (Eileen, Diary). This is in line with statutory guidelines expressed in ‘The National Standards for Children’s Residential Centres, 2001’. These guidelines state ‘that every young person in care should have a permanent, private and secure record of his/her history and progress that contains all documentation and is maintained by the supervising social worker’ (pg. 20) (Eileen, Documents). Eileen’s professional understanding of these guidelines goes beyond seeing the Social Worker as the professional with legal responsibility for the secure maintenance of young people’s records. Her focus is practical and so demands greater connection between professional colleagues. She places her own professional responsibility in the context of multidisciplinary teamwork by acknowledging differing roles, workloads and responsibilities when she states that

‘in fairness to Social Workers they can’t have engagement with the children in their case-load because the children in their case load are a ridiculous number. So they need some kind of guide into how the kid is getting on and I don’t think a monthly report is sufficient to say how a child is getting on’ (Eileen, interview).

The next section looks at how Eileen views the reciprocal relationship between professionals involved in the provision of care for young people.

6.4.6.4 Written and verbal discursive practices:
In reviewing Eileen’s diary, completed over a monthly cycle of her work, it is possible to see a clear pattern to the written discursive practices that are an integral part of her
working routine. The ‘Individual Care Management Plan’ is the source and the summit of this written work: the shorter the timeframe (i.e. daily), the closer to the daily living activities and professional actions. The emphasis of such written discursive activities as diary, logbooks and handover books is on communication between the internal team. Eileen describes these as having a dual purpose, firstly they ‘give a description of a client’s day’ and secondly they ‘provide all the information needed to effectively develop care plans which will respond to the client’s needs and wants, in line with their skills and capacities’ (Eileen, diary). Those with a longer cyclical timeframe have a stronger link with other professionals involved in care provision but have the same strong connection to the individual child’s care plan. At a practical level a ‘Weekly Planner’ sets out the activities and appointments of the child and serves to co-ordinate and inform the internal team; it is mirrored by a ‘Weekly Report’ that includes ‘a synopsis of how the child has got on, in the weekly report how the child has got on in the last week’ (Eileen, Diary). In turn there are, what Eileen termed, ‘Monthly packs’ that contain ‘a placement plan... which is completed by a client’s key worker each month’ (Eileen, Interview). As mentioned earlier the records kept on a daily, weekly and monthly basis are visible to key professional personnel external to the organisation, such as the Monitoring Officer and the Social Worker.

Eileen reports that, on average, she spends ‘4 to 5 hours a day. That would be the bare minimum, that would be doing well in a 24 hour shift’ (Eileen, Interview), on ‘paperwork’. She notes that this work is completed between the hours of 11.00 p.m. and 2.30 a.m. as part of a 24 hour shift. Both the length of time spent and the timing of this aspect of the work suggest that this paperwork is more than simply setting a schedule of activities and appointments or recording factual data. By taking an overview of the written discursive activities recorded by Eileen in her Moodle diary, it becomes clear that along with the broader communication and planning functions, written records are also kept with regard to specific activities and actions of the young people. Risk Assessments ‘are carried out in preparation for the completion of a new activity with the client’ (Eileen, Diary) and a Critical Incident Report ‘is written by the Social Care Worker that has been directly involved in the incident’ (Eileen, Diary). There is also a pattern of written follow up to verbal discursive practices as in the case of
‘Visit Forms’ ‘written by the social care worker who attended the visit with the client’, (Eileen, Diary).

When asked if there is room for professional opinion to be included in her written and verbal discursive practices, Eileen comments on her professional responsibility to include her judgement regarding the aspect of care being focused on. Team meetings and multi-disciplinary meetings require her to ‘discuss any issues arising within the centre. It is also an opportunity to share any relevant information in relation to care plan goals’ (Eileen, Interview). Her written work is ‘always be completed very formally using correct language and therapeutic language’ (Eileen, Diary) conscious of wider professional readership. The language of verbal discursive practices is also conscious of audience, and for Eileen it is the young people who set the tone as she comments ‘formal meetings with an informal tone because we are working with young people so it always has to be informal because they just don’t respond to big words of structured meetings’ (Eileen, Interview).

Despite Eileen’s awareness of her professional role and responsibility, her commitment to high standards of care through adherence and understanding of established policies and procedures and her engagement with fellow Social Care and other professionals, there is a note of professional self-doubt recorded in a section of the interview that discussed the status of her profession in a multidisciplinary context. She recalls two instances where her professional confidence was eroded. Her reflection that ‘I don’t think we are viewed as professional but as more of a big sister kind of a thing, is what I feel anyway’ (Eileen, Interview) came as she recounted an experience with An Garda Síochána who did not seem aware of her professional role in relation to the young people in her company. This Eileen put down to the close age difference between herself and the young people in her care, and to the dilapidated look of the ‘company car’. On a more positive note Eileen notes that in her experience of multidisciplinary meetings ‘I don’t think it is expected too much of a social care worker to have a huge input into these meetings, but I think it is changing too’ (Eileen, Interview) . This change, Eileen believes, is down to the shared information systems where professionals from other disciplines ‘are seeing the level of work that we are doing;
they are reading it like a book and I think our credibility is growing strong (Eileen, Interview).

6.4.6.5 Emerging themes:

1. Social Care as support and teaching.
2. Objective ‘commentary’ on daily activities – daily, weekly, monthly.
3. Consciousness of language and style of communication
4. ‘On the floor’ perspective within multidisciplinary context
5. Close relationship between policy, procedure and paperwork
6. Time spent on written work.
6.4.7 Amanda: ‘It’s not just me monitoring everything; someone is also monitoring me monitoring everybody else...’

<table>
<thead>
<tr>
<th>External Policy Context:</th>
<th>Written Discursive Practices*:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Review of inhouse safeguarding policy</td>
<td>Report written and sent to monitor</td>
</tr>
<tr>
<td>Private company/tendering coming into effect</td>
<td>New Children and Family document</td>
</tr>
<tr>
<td>Placement Protection Meeting</td>
<td>Weekly service report</td>
</tr>
<tr>
<td>A lot of inter-agency work</td>
<td>Review forms completed</td>
</tr>
<tr>
<td>Legislation and Children First</td>
<td>Emails daily</td>
</tr>
<tr>
<td>Child ‘missing in care’ protocol</td>
<td>Health and Safety Audit</td>
</tr>
<tr>
<td>Staffing ratio</td>
<td>Daily logs, shift evaluations</td>
</tr>
<tr>
<td>Monitoring Officer</td>
<td>Monthly reports to Social Workers</td>
</tr>
<tr>
<td>The aftercare service</td>
<td>Inspection response sent to inspectors</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Internal context and Professional Role:</th>
<th>Verbal Discursive Practices**:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Responsible for the staff team and supervision</td>
<td>A care plan review</td>
</tr>
<tr>
<td>Responsible for the young people</td>
<td>Review of inhouse safeguarding policy</td>
</tr>
<tr>
<td>Make sure that things are monitored</td>
<td>A lot of debriefing of staff members</td>
</tr>
<tr>
<td>Model of care based on STEM Training and TCI</td>
<td>Placement Protection Meeting</td>
</tr>
<tr>
<td>I tend to do the generic assessments</td>
<td>Supervision every four to six week</td>
</tr>
<tr>
<td>Ensure we are very consistent.</td>
<td>Team meeting every 2 weeks</td>
</tr>
</tbody>
</table>

Amanda
Social Care Manager
Residential Child Care
Qual.: Social Care degree required.

*&**: A representative summary of a considerably larger array of written and verbal discursive practices is included here, with a more comprehensive list included below.

6.4.7.1 The Worker:

‘It’s about care’ (Amanda, Interview), was a phrase used by Amanda on a number of occasions throughout the interview. It was as if she was reminding herself about what lay at the core of her work. The interview took place in a hotel rather than in Amanda’s place of work because it is the primary place of residence for four young people in care. Amanda was clear that the needs of the children in care were the priority. The decision about where the interview would take place seemed to be based on a natural orientation towards care and protection rather than on ‘agency policy or protocol’. Describing herself as someone who ‘always worked in the caring services, not necessarily social care’ (Amanda, Interview), that ‘natural orientation’ is seen in the context of a worker for whom professionalism is part of who they are as a person. In
order to work professionally, Amanda identifies three core elements: ‘Knowing where your boundaries are... knowing how to relate to people... and having a good work ethic...’ (Amanda, Interview). Her work as a Special Needs Assistant gave her a clear insight into the social care field. Amanda’s motivation to take on study to degree level was to be able to work as a professional Social Care Worker. Although gaining new knowledge about how to work in social care was not her primary concern, Amanda relates theorists such as Maslow, Fahlberg and Bowlby directly to her work. (Although she seems to compartmentalise them separately from day to day activities as she quips: ‘you wouldn’t be throwing Fahlberg around’ (Amanda, Interview).)

When Amanda considers her professional training and education, it is from a perspective of one for whom caring for others is a continuum from personal care, through unqualified care provision to professional Social Care Work and the management of that care. The relative value of an individual aspect of care is assessed in terms of its usefulness in enhancing the care of others. She dismisses one module, ‘the management classes that we would have done in the honours degree was of absolutely no use to me whatsoever’, but on the other hand, draws heavily on another ‘Attachment stuff then I use quite a lot ...’ (Amanda, Interview). The ‘practical and specific’ nature of in-service training is viewed in a positive light, with the initial training or her primary degree seen as a generic base that ‘every now and then you would pull from’ (Amanda, Interview).

There is a casual style to the way in which Amanda discusses her work. Her agency’s Mission Statement sets out its work in the following terms:

‘... committed to providing a quality driven therapeutic residential and outreach service to vulnerable Young People and their families. We will achieve this by listening actively to Young People and families, comprehensive multi-disciplinary assessment, treatment and team guidance, embracing the concepts of trust, respect, understanding and empowerment, devising effective individualised therapeutic interventions which focus on strengths, resiliencies, and relationships’ (Amanda, Documents – agency website).

Amanda summarises this Mission Statement as ‘basically to provide a service to the young people we have in a therapeutic way, and to tailor these to the needs of that young person’ (Amanda, Interview). But as we shall see in the next section, that casual style somewhat disguises a focused professional attitude and approach. It may have
more to do with Amanda’s commitment to a professional frame of reference located ‘on the floor’ (Amanda, Interview) with the young people with whom she works.

6.4.7.2 The Internal context and professional role
When discussing her professional role, Amanda locates herself within the overall structure of the organisation as being between upper management and the staff team. Her job title, Social Care Manager, carries with it a level of responsibility beyond the Social Care Worker members of the overall staff team in the Residential Child Care setting. As Amanda puts it: ‘I’m responsible for an awful lot of things’ (Amanda, Interview). The responsibilities emerge through both interview and diary and are mostly related to accountability and monitoring. ‘It’s not just me monitoring everything; someone is also monitoring me monitoring everybody else...’ (Amanda, Interview). In her diary, she reflects that monitoring takes up a lot of her daily routine. This aspect of her work involves either ‘signing off’ on the written work of others or completing reports and forms herself. As she continues to make entries into her Moodle journal Amanda becomes more conscious of how her professional role as Social Care Manager has unfolded: ‘Very busy week but getting on top of things again. It’s amazing that once some other piece of paperwork needs to be completed, how it throws my routine out the window’ (Amanda, Diary). This reflection came after she had listed the various administrative activities that she had completed in the previous week. These are looked at in more detail below.

Amanda explains that she had been initially attracted to the management post because of the more regular hours. On taking up the position she moved from shift-working to 9 to 5 work. However, the regular working hours are not rigid. Amanda describes that her current role is substantially an administrative one, however she is conscious of how moving to this role has impacted on the young people she works with. Her person-centred working ethos is evident as she discusses the transition in her professional role from Social Care Worker (Child Care Leader) to Social Care Manager: ‘Because they were so used to me being on the floor as well it’s good to keep linking in with them so that they don’t have that big differentiation between the manager’ (Amanda, Interview). She goes on to explain that ‘once a week I’d stay late and stay for dinner with them’ (Interview), and that ‘all of them would have my phone number so I
would often get a phone call from them in the evening which is fine as well’ (Amanda, Interview). So even though the nature of her work has changed, Amanda is proactive in trying to ensure that a core direct relationship continues to exist at the centre of her work with the young people in her care.

Amanda outlined how the organisation has an approach based on ‘two main models of care which sort of complement each other which are TCI and then our STEM training’ (Amanda, Interview). This is consistent with the organisations website information, although it does not use the term ‘STEM training’ when it says that the organisation ‘has adopted a positive focused ethos as espoused by Reclaiming Youth International, Circle of Courage, Response Abilities Pathways® (RAP), Therapeutic Crisis Intervention (TCI)’ (Amanda, Documents). Amanda locates this combined model in the theoretical approaches that she learned in college. She explains that the four elements that are the focus of the model (generosity, mastery, sense of belonging and independence) find expression in the daily activities in the centre. She points out that they are ‘very akin to Fahlberg and Mia Keller Pringle’ (Amanda, Interview). It is also integrated into the main tenets of residential child care as set out by TUSLA, the statutory Child and Family Agency in their ‘Statement of Purpose’ who’s ‘Focus 1’ is about ‘Ensuring all professionals are working to a shared vision and philosophy for supporting children’s outcomes and working within the emerging multi agency Service Delivery Model’ (Amanda, Documents: Tusla, 2014, pg. 15).

6.4.7.3 External Policy context
As Social Care Manager, Amanda is acutely aware of the role of legislation and policy guidance related to her workplace. She views her role as ensuring that policy is followed through ‘on the floor’ as she explains in the interview: ‘All our model of care, when we are doing it on the floor, it all boils down to the paper trail behind it all’ (Amanda, Interview). That paper trail, itemised below, is the accountability link between her agency which operates as a private company that provides services for the statutory body with responsibility for providing care for children in ‘alternative care settings’. Although private provision of residential child care is not mentioned in TUSLA’s Statement of Purpose document, the public/private relationship is seen by Amanda as having a direct bearing on her work. This is evident from the Legislation
and download section of the organisations website which contains the following documents:

- **Child Care Act 2001**
- **Children National Guidelines for the Protection**
- **Childrens Act 2001**
- **Health Act 2004**
- **Legislation Handbook for Childcare Providers**
- **National Standards for Children’s Residential Centres 2001**
- **National Standards for Residential Care for Children 2004**
- **National Standards for Residential Care for Young People**
- **Our Children First**
- **Our Duty to Care-The Principles of Good Practice for the Protection of Children & Young People**
- **Parental Involvement**
- **Sharing Good Practice**
- **Trust in Care**
- **UN Convention on the Rights of the Child**
- **Guide to living in Residential Care**

*(Amanda, Documents – agency website)*

A central policy document referred to by Amanda both during the interview and diary is ‘Children First’. This document does identify that children’s services are provided across public, voluntary and private sectors, and states that

‘Whatever the motivation or service provided, there is a moral obligation on any organisation involved with children to provide them with the highest possible standard of care in order to promote their well-being and safeguard them from harm’ (Amanda, Documents – Children First, 1999: 50).

Amanda refers to her obligation to ensure that all legislative and policy requirements, including changes to these, need to be ‘signed off on’. This means that it is her responsibility to ensure that staff are informed of the requirements/changes and receive appropriate training. It also means that she is responsible for creating and maintaining an evidence trail between the daily actions and activities of staff and children at the centre and the wider accountability and monitoring structure in place both within and external to the agency. Although Amanda promotes a team approach, and talks about herself as a member of a team, she also acknowledges ‘I’m responsible for an awful lot of things!’ (Amanda, Interview). She is also ‘answerable to an awful lot of people’ (Amanda, Interview) and Amanda identifies four key points of contact in this
regard – The Director of Services and Operations Manager within her organisation and the Monitoring Officer and Social Workers who are statutory based. In all cases, whilst aware of the administrative workload involved, Amanda welcomes the level of monitoring and acknowledges the professional support from these contact points.

The policy area that has most impact on her work is identified by Amanda as finance and tendering. She is aware of the wider economic environment in which her company operates when she refers to the HSE: ‘They have obviously decreased the prices of the beds, to bulk buy – so that is the process we are in at the moment’ (Amanda, Interview). She goes on to explain the direct impact on her immediate work environment as she identifies ‘staffing ratio’ (i.e.: the number of staff per child) as being directly affected. But Amanda also explains that the tendering process currently being introduced is ‘more than just the provision of the bed space such as the kind of care provided’ (Amanda, Interview). She also identifies a connection between national policy in relation to tendering and the strategic decision-making of the company for which she works. As a company with most of its operation sites in one geographical area, Amanda reckoned that this ‘isn’t very good business for a private company’ (Amanda, Interview). The result was an expansion of the company to become nationally based in order to respond to tenders offered.

6.4.7.4 Written and verbal discursive practices
Looking back on her time as a Social Care Worker ‘on the floor’, Amanda notes one could spend ‘35 – 40% of your day completing paperwork’ (Amanda, Interview). As Social Care Manager, her direct contact with the young people in care is limited to ‘just sporadically throughout the day that people are knocking at the door looking for me’ (Amanda, Interview). When considering the verbal and written discursive practices, it is important to bear in mind Amanda’s managerial role. She describes her managerial and supervisory responsibilities in relation to ‘2 Child Care Leaders, 6 full time staff and a relief panel of 4’ (Amanda, Interview). As a newly qualified graduate, Amanda has only recently taken on this role, having been employed by the same organisation as a Child Care Worker for a number of years as she studied for her degree.

The data in Fig 6.9 below was taken from the Moodle diary that Amanda kept over a one month period. The individual items were extracted and are presented here in a
relational format. In other words there is a connection between the verbal and written discursive practice. This reflects Amanda’s own observation: ‘...so it’s all paper work... in fact all our model of care, when we are doing it on the floor, it all boils down to the paper trail behind it all’ (Amanda, Interview).

Fig. 6.9 Verbal and Written discursive practices (Amanda).

<table>
<thead>
<tr>
<th>Verbal</th>
<th>Written</th>
</tr>
</thead>
<tbody>
<tr>
<td>Management meeting</td>
<td>Weekly service report</td>
</tr>
<tr>
<td></td>
<td>Management meeting minutes</td>
</tr>
<tr>
<td>Care Plan meeting</td>
<td>Minutes taken and review forms completed prior to meeting.</td>
</tr>
<tr>
<td>Meeting with counsellor</td>
<td>Appointments for young people made and Contact Sheets written up.</td>
</tr>
<tr>
<td>Social Care Managers meeting</td>
<td>Monitored and sent all monthly (staff) reports</td>
</tr>
<tr>
<td>HIQA Inspectors meeting</td>
<td>Health and Safety Audit</td>
</tr>
<tr>
<td></td>
<td>Inspection response sent to inspectors</td>
</tr>
<tr>
<td>Staff supervision</td>
<td>Staff audit form for Tulsa</td>
</tr>
<tr>
<td></td>
<td>Rostered hours to accounts department.</td>
</tr>
<tr>
<td>Team meeting</td>
<td>Minutes were taken from this meeting.</td>
</tr>
<tr>
<td>Social Worker meeting</td>
<td>Contact sheet with SW.</td>
</tr>
<tr>
<td>Post crisis supervision</td>
<td>MCIC Form signed off (missing child)</td>
</tr>
<tr>
<td></td>
<td>Post crisis supervision with two staff members</td>
</tr>
<tr>
<td></td>
<td>SEN's (Significant Event Notes) signed off and sent.</td>
</tr>
<tr>
<td>Handover (Daily)</td>
<td>Daily Logs, Shift Evaluations</td>
</tr>
<tr>
<td></td>
<td>Given orally and recorded in on call book.</td>
</tr>
<tr>
<td>Reference verification</td>
<td>Reference Request Form submitted re student placement.</td>
</tr>
<tr>
<td></td>
<td>New Starter Form for a Relief Staff</td>
</tr>
<tr>
<td>Placement Protection meeting</td>
<td>Monthly reports, ICMP, (Individual Crisis Management Plan)</td>
</tr>
<tr>
<td>Phone meeting re new computerised recording system</td>
<td>Emails daily re: centres maintenance, petty cash.</td>
</tr>
<tr>
<td>Multi-disciplinary meeting</td>
<td>Young person's meeting record.</td>
</tr>
<tr>
<td>Placement progression meeting</td>
<td>Amendment to invoice for HSE payment</td>
</tr>
<tr>
<td>Monitoring Officer (weekly)</td>
<td>Monthly Monitoring Report to the M.O.</td>
</tr>
</tbody>
</table>
Amanda refers on several occasions, both in her diary and interview, to the paperwork-load, with increased busyness associated with increase in, duplication of, and changes to administrative tasks associated with practice, rather than to practice itself. Her job title, Social Care Manager, is a relatively new one in Residential Child Care in Ireland. In their 2002 Final Report, the Joint Committee on Social Care Professionals states that it’s raison d’etre was to examine and report on issues affecting one of ten professional groups in the health and social care sector, namely ‘that of child care worker, i.e. the grades previously referred to as Houseparent, Assistant Houseparent and Trainee Houseparent. Throughout this report these grades of staff are referred to as Social Care Professionals’ (JSCP, 2002: 2). Amongst its recommendations was the establishment of a staffing structure based around the ‘Social Care’ core title to replace one based around ‘Houseparent’. It can be seen from Amanda’s ‘self-job description’ that ‘Social Care Manager’ more closely reflects her professional activities than would a ‘parenting’ title.

In her interview, Amanda reflects on her professional role in relation to her discursive practices. The forms in use, such as those identified above, are standardised across the organisation. She points out that there is space included in the templates ‘for you to give your opinion as long as you can substantiate that opinion and you are not just throwing it out there’ (Amanda, Interview). Furthermore, she notes that there may be reluctance amongst staff to give their opinion for fear of legal implications. She explains ‘... that’s probably just legislation ... you know people can be very reluctant to give their opinion because it’s like their opinion, and who are they to say he’s having a bad day, so they are very unwilling, some of them to commit on paper’ (Amanda, Interview).

It was during the part of the interview that discussed the style rather than the content of the discursive practices that Amanda became most animated. ‘I would speak to you as I would speak to the Monitoring Officer as I would speak to the young people in the house’ (Amanda, interview). Amanda links this professional trait to her attaining a leadership role in the centre, but her conviction to ‘plain speaking’ is more fundamental: ‘Because I think it is one of the most important things when you go into a residential centre that you just be yourself’ (Amanda, Interview). Her desire to maintain
a meaningful relationship with the young people in care serves as the professional lens through which Amanda views the ever growing administrative aspect of her work. Her professional challenge to maintain regular contact with the young people is a regular theme in her reflections on her professional role that appear in her diary. ‘Paperwork seems to be never-ending this week’, Amanda notes. Elsewhere she acknowledges the role of that paperwork: ‘It can sometimes be hard to get this report completed but it does serve as a good way for the centre and myself to be accountable for what happens within the centre’ (Amanda, Diary). But it is in her reflections after her busiest days that the core of her professional identity is revealed. Having listed her administrative tasks completed, she notes in her diary ‘Barely got to see any of the young people in the centre today’ and again, ‘I could really do with being in the centre at the moment’ (Amanda, Diary).

6.4.7.5 Emerging themes

1. Relationship between verbal and written discursive practices.
2. Language of ‘the floor’ – plain speaking as a professional trait.
3. Emphasis on monitoring and accountability functions of discursive practices.
4. Sacrificing contact time for administrative busyness.
5. Funding through tendering – impact on role.
6.4.8 Esther: ‘It isn’t just practical...Social Care... it’s just tough...’

External Policy Context:
- Within the community we are very well accepted
- We are a charity
- Funding from a lot of different places
- A cut in hours due to funding
- A council within our region
- Director of Children’s services involved in government departments and policy makers

Written Discursive Practices:
- Everything we do involves case notes
- Work Record Sheet
- Record keeping and file keeping... is massive
- Consent Form
- Review Meeting & Assessment Forms
- Forms for supervision
- Conference Reports/Referrals

Internal context & Professional Role:
- Family Support Work
- Work with cases that are level 3 or above
- Through the Hardicker Model of need
- Help them to help themselves
- Child-centred
- Work with children and their feelings
- Individual work and parent and child sessions

Verbal Discursive Practices:
- Review Meeting with Service User
- Telephone Call sharing information
- Regional Days and Management Meetings
- Team Meetings and Supervision
- Case Conferences and Professionals Meetings
- Forums

Esther
Project Worker
Child and Family Centre
Qual.: Level 7 Degree in Social Care required

6.4.8.1 The Worker:
Esther uses the words ‘Charity’ and ‘Company’ when referring to the community-based Family Support Agency in which she works. As I approached the agency to conduct the interview, neither word would have come to mind. Located in the heart of a large housing estate where ‘boarded-up’ houses were a regular feature, a number of bareback young horsemen galloped around the green areas and across the road. Worried about the security of my car I was relieved when Esther reassured me that ‘Within the community we are very well accepted’ (Esther, Interview).

Having always wanted to work with children, Esther knew that she did not want to be a teacher on the one hand, and that as a ‘softie’ (her own term), she was not attracted to a Social Work role. Esther places a lot of emphasis on the ‘self’ in her professional identity. Reflecting on her education and training she states: ‘the most that I took from college would be my personal development’ (Esther, Interview). Elsewhere in the interview, she identifies the importance of ‘mindfulness, and reflection and taking time...’
out to mind yourself’ (Esther, Interview). She described herself as being ‘artsy’ and how Social Care enabled her to incorporate this into her work. ‘Social Care, it allows you to be yourself’ (Esther, Interview). That ‘personal’ motivating factor is located in a strong sense of purpose (to help and to support others) and in an awareness of professional responsibility (‘doing your job to a high standard and getting paid to do that’ (Esther, Interview).

In discussing the concept of ‘professional’, Esther has a clear image of structure, purpose and order; being trained specifically for the work and carrying out that work within a ‘9-5’ structure. When asked to consider Social Care as a profession, Esther immediately pointed to contrasts with the conventional concept of a professional that she had just outlined. ‘Well not 9 to 5 anyway!’ (Esther, Interview). There were other contrasts too: Social Care is not office bound, it is ‘out and about’. The task of the profession also demands flexibility, as Esther notes: ‘you need to be non-judgemental and you move from your expectations to meet those of the parents and the families you work with…’ (Esther, Interview).

The flexible and fluid nature of her work is described by Esther as being held within a strong adherence to professional guidelines. This involves sticking to ‘certain ethics, morals and values’ (Esther, Interview), but also following the policies and procedures specific to the agency. Ultimately Esther sees Social Care professional work as follows:

‘It’s supporting people, it’s helping people achieve goals; it’s flexibility; it’s motivation; it’s protective and crisis management at the same time. ... Social Care... it’s just tough... I just think supporting those and motivating others to meet their goals’ (Esther, interview).

6.4.8.2 The Internal context and professional role

In contrast to the immediate external environment, Esther outlined a strong sense of professional ‘order’ within the agency. Her job title is ‘Project Worker’ and she explained that she is part of a team of six, that, as well as Project Workers, also contains a Family Support Worker, a Project Co-ordinator and a Project Leader. The team is hierarchical in terms of role responsibility. Esther sees possibilities for career progression within the organisation: ‘I started in family support, and I moved up to Project Worker, someday I would like to be Project Leader’ (Esther, Interview). Role
responsibility is based on responding to the defined and assessed needs of the families and individuals that attend the service. Esther is confident in her explanation of how work is allocated – ‘we work through the Hardiker model of need... Family Support Work with level 2 or below so it would be... group work or work with families who need a basic level of support... at 3 and above is crisis and higher need’ (Esther, Interview). According to TUSLA, the Child and Family Support Agency in the Republic of Ireland, ‘The Hardiker Model is an internationally recognised model for understanding the needs of children within a population’ (DCYA, 2012: xii). The model has been adopted and adapted for use by the agency in which Esther works. As Project Worker, Esther identifies her own work as being based at level 3 of the model, outlined below.

**Fig 6.10 Summary of Agency adaption of the Hardiker Model (Esther)**

<table>
<thead>
<tr>
<th>Level of Need</th>
<th>Family Support Orientation</th>
</tr>
</thead>
</table>
| Level 1       | • Recognising role and advocating Sole focus on organisation of statutory All Children and strong policies and services to responsibilities in relation to the protection Young People support all families of children  
• High quality universal services in place across health, education, housing and leisure |
| Level 2       | Stronger emphasis on:  
• Provision of community based, identification of need Vulnerable preventive and supportive services (voluntary and statutory)  
• Valuing support/ prevention equally to risk |
| Level 3       | • Managing risk in the community  
• Statutory reporting requirements the Community  
• Meeting the wider set of Family Support needs of children  
• Utilising available resources in the community |
| Level 4       | Stronger emphasis on:  
• Maintaining links with family members and community  
• Early returning home  
• Shared care option |

The focus of Esther’s work is dependent on the presenting needs of children and families. As she discusses her work there is a strong level of consistency between the language that she uses and that of the organisation through its website. ‘We work to improve children’s lives and our approach is driven by children’s needs’ (Esther documents: agency website). Esther uses the phrase ‘It isn’t just practical’ in the conversational interview where the discussion focuses on the nature of her work. Here
she conveys that whilst there is a practical aspect of the work in supporting families with day to day challenges, there is another aspect that focuses on strengthening people’s capacity to cope with challenges themselves. Esther gives some examples: ‘we work with children and their feelings... We do a lot of life story work with children... We do group work as well, it’s called ‘friendship group’... we do parent and child sessions, to help parent and child work well together and to talk about their feelings to each other’ (Esther, Interview).

6.4.8.3 External Policy context

The ‘we’ that is consistent in her description of her work refers to both the internal agency team and the multi-disciplinary team with whom Esther works closely. An entry in her Moodle Diary gives Esther the opportunity to illustrate her work as part of a professional multi-disciplinary team. ‘This activity is core to my role as a worker - linking with other professionals to help a family/child develop skills to meet their needs (Esther, Diary). The activity that she is referring to is a communication with another agency who request background information and a progress report on work done with a service user. Esther recalls how her response is informed by her commitment to core professional values that place the service user at the heart of the service and by agency policy and procedures that flow from these values. She reflects on her response to the request – having logged the call she recalls that ‘I had to question if consent was given by the Service-User for staff to share this information with other professionals’ (Esther, Diary). The emphasis for Esther is on her professional approach. Each and every professional action gives precedence to the needs and rights of the service user. In the next section, an example of an agency Review Form will be examined in detail, but it may be noted here that this form is consistent in giving precedence to the needs and voice of the Service-User. This point is further illustrated by the following extract from the Review Form that asks ‘Child/young person and family were shown all reports in advance of review meeting (please tick) □ Yes □ No’ (Esther, Diary).

Funding was seen by Esther as having a significant direct impact on her work as she recounted that staffing hours, including her own, had been cut as a direct consequence of funding cuts. She also described how fundraising is an essential part of the work of
the agency but is never guaranteed. Pointing out that the agency receives funding from many different sources, Esther states that ‘Since the recession hit a lot of our funders were unable to keep funding us as much and we didn’t get as many donations from individuals and that’s why a lot of things have been cut’ (Esther, Interview).

In the interview, Esther discussed how workers were kept informed about policy changes that might impact on the work. ‘We are always notified, we would be sent the whole document by e-mail, and we focus the team meeting around that, and then training’ (Esther, Interview). She experienced policy changes as incremental and progressive rather than disruptive and disconnected from her practice. She also spoke positively about how what she termed ‘ground-workers’ views and opinions were systematically communicated through the agency to head office through to regional and council level. There appeared to be strong confidence that the organisation’s CEO could use this information to inform policymaking. Ever-present in her professional approach is including the voice of service users, and policymaking is no exception: ‘We also have network strategy meetings, review meetings that would have the family and again the different agencies’ (Esther, Interview).

6.4.8.4 Written and Verbal discursive practices

Esther chose to include in her diary a template of the agency’s ‘Review Meeting Form’. The form draws together various verbal and written discursive practices that recur on a regular basis (4-6 week cycle). The form acts as a basis for discussion at the review meetings. ‘Meeting and contents of the meeting are based on observations from staff during home visits/interactions, Services-Users own opinions, other professionals insights and observations’ (Esther, Diary). The layout of the form is formal, with headings and boxes to record specific information. However, there appears to be significant space in the overall design for professional judgement and opinion. The following extract from Esther’s diary illustrates how the form reflects the depth of professional engagement and moves beyond recording of factual data and events:

‘The contents are informed by professional judgement (Staff’s observation and professional skill) Theory also comes into the contents of this for, i.e. assessment frameworks are used to plan further interventions for the family if necessary. We use the Review Meeting Form at all times when conducting this meeting. The Form is prepared before the meeting and often shared with the
family before the meeting to ensure that all information is correct. It also allows the service user to add any opinion to the form. This is consistent with all agency workers as we have all been sent to the same training: ‘Common Language Training’ (Esther, Diary).

Reflecting on her professional role in relation to this ‘written discursive practice’ Esther states in her diary that it enhances her professional role. In her interview, Esther refers to the way in which her education and training may (or may not) inform such professional judgement. She is ambivalent about the value of formal sociological knowledge ‘when you come to an area like this one you get to know it anyway those socioeconomic ways of it as well. Like the poverty and unemployment and how it affects the community’ (Esther, Interview). It appears that her professional focus is on the impact of poverty and unemployment on the lived experiences of the families and children who use the service rather than on the structural causes of these socioeconomic issues. Her professional focus is practical action rather than on analysis.

This professional focus is further evidenced as Esther identifies other verbal discursive practices – ‘we also have practical sessions where we talk about pieces of work and resources that we have used within the team’ (Esther, Diary). Team Meetings and Supervision also provide opportunities to support the work that in turn ‘helps the families to help themselves’ (Esther, Interview). The core values of the organisation are reflected in how Esther discusses and reflects on her professional practise.

Our core values
  ➢ We’re for children
  ➢ We don’t give up
  ➢ We don’t stand still
  ➢ We value and respect each other
  ➢ We are efficient and transparent in our work
  ➢ We are good partners

(Esther, Documents – agency website).

It is hardly surprising therefore that Esther sees her professional career developing within the organisation rather than beyond it. Having considered Social Work as a career progression possibility, Esther concludes: ‘I would prefer to stay in an agency like this one and maybe move up’ (Esther, Interview).
6.4.8.5 Emerging themes:

1. Client/Service-user at the centre of professional activity.
2. Agency Form template ‘enhancing’ professional role.
3. Impact of funding
4. Clear employment and professional structure but no mention of ‘Social Care Worker’
5. Policy influenced by ‘ground workers’
### 6.4.9 Holly: ‘It’s all a paper trail now…’

#### External Policy Context:
- Relief and minimum wage staff... it’s all budgeting.
- HSE - a set budget and that’s it
- HIQA - Health and Safety
- Any fundraising we do then is spent on transport, and items for the individuals
- Head Office
- Model of service is based on Personal Outcome Measures
- International Best practice

#### Written Discursive Practices:
- Policies: somebody counted them last week and said there were 116!
- Incident Report Form/ Individual’s Care-notes
- A diary is written and signed informing staff of daily activities.
- Inputted into a STARS computer programme

#### Internal context and Professional Role:
- Act responsibly and drive out efficiency
- Acting as a role model for other staff
- I am keyworker to an individual
- Offers programmes e.g. games, lunch, music and dance, literacy & life skills
- Promote integration - very much into integration and participation
- It’s a social model definitely

#### Verbal Discursive Practices:
- The multi ‘d’ team: dentist, optician, the chiropodist, the physiotherapist, the doctor, SLT, the psychologist, the psychiatrist, the behaviour analyst
- Hand-over in the evening
- Needs be accurate and to the point
- Team meetings and monthly staff meetings
- House meeting once a month

### 6.4.9.1 The Worker

Holly has considerable experience in the ‘caring field’, having worked in Childcare for a number of years and then ‘starting off years ago as relief worker, as a care assistant actually. I had the qualifications for that, I had my FETAC levels 5 and 6’ (Holly, Interview). Having become redundant from her childcare work, Holly began working in the Community Residential Centre on a temporary basis. This later extended and evolved into a full-time position. She is open about her route into Social Care Work: ‘To be honest I didn’t think about social care, or having the title Social Care Worker at the time, I was only glad to get the employment, but now that I do have it I want to be recognised as having it (Holly, Interview). The last part of her comment above reveals an underlying issue that continues regarding her status as a professional. As her work became more secure in the organisation, Holly pursued a degree level qualification in Social Care. However, having achieved the award, her job title has remained
unchanged. There is a distinction made between ‘Social Care Worker – qualified’ and ‘Social Care Worker – unqualified’. Holly is in ongoing negotiations with her employer to have her status adjusted to reflect her level of qualification. She also recognises a wider issue for qualified Social Care graduates: ‘there is a lot of staff in the organisation here with us now with masters and they are only on relief and minimum wage. That’s the way it is I think in a lot of organisations... it’s all budgeting really I suppose’ (Holly, Interview). The lack of recognition of professional status reflected in the employment status of Holly and other employees in the organisation is in sharp contrast to the professionalism and professional responsibility set out in the job descriptions (Holly, documents – agency web page) and the policy documentation that guides and informs the work. The job description for ‘Care Assistant’ contains three specific conditions and thirty one ‘Main duties and functions’. These duties and functions relate to many aspects associated with the established definitions of professional Social Care (c.f. Lalor and Share, 2013), yet there are no specific qualifications required for this job: ‘Candidates must have a good general education. A recognised qualification in the field of intellectual disability is an advantage’ (Holly, documents). The ‘Care Assistant’ would work as ‘part of a team’; Holly describes her team as comprising of ‘one nurse, a social care worker (myself), a care assistant and support staff in the kitchen’ (Holly, interview). This team is accountable to a Unit Manager and works within the guidelines contained in a comprehensive suite of workplace policies (see ‘Written discursive practices’ below).

6.4.9.2 The Internal Context and Professional Role

Holly’s ‘professionality’ or ‘sense of professional self-worth’ (Galvin, 1996) is seen in how she values the role of her own education and training in relation to her work. Her professional focus is consistently orientated towards serving the needs of the individual she is working with. It is summarised as follows ‘Being a qualified Social Care Worker makes you more responsible for the wellbeing of the individuals we support’ (Holly, Diary). Reflecting on her role within the team, Holly sees herself as carrying twin responsibilities in the workplace: ‘As a Social Care Worker it is expected of me to take a leading role, act responsibly and drive out efficiency’ (Holly, Diary); and also, ‘taking responsibility and acting as a role model for other staff’ (Holly, Diary). It appears that
Holly is conscious of her professional role and responsibility within a team in which there are varying degrees of professional qualification. She makes a strong connection between ‘being professional’ and her ability to discuss and record her work in a systematic way. Her emphasis is on advocacy and empowerment and Holly explains in the interview how her degree course gave her a deeper understanding of the needs of the individuals with whom she works and the confidence to articulate those needs in the workplace. Her professional role, therefore, is focused on organising and monitoring ‘ordinary life events’ for the service users. By understanding the importance of these events and social interactions in the context of the individuals overall needs, Holly views her professional role as dealing with practical issues (she details ‘transport issues’ as a key and ongoing challenge) to enable people with intellectual disabilities to participate socially in meaningful ways: ‘There are different Positive Behaviour Support plans for each individual and it is vital that each plan is followed to ensure positive outcomes’ (Holly, Diary).

6.4.9.3 External Policy context
There is a formal structure within which Holly practices. The individual Community Residential setting is one of a number of similar houses that are a ‘sub-division’ of a nationwide service delivered under five headings: Support Services, Day Services, Residential Services, Integrated Services and Children’s Services (Holly, documents). Holly is based in a Residential Service which draws significantly from the organisations Support Services in the form of engaging with a multidisciplinary team. Holly identifies the professional membership of that team in her interview as including the Dentist, Optician, Chiropodist, Physiotherapist, Doctor, Speech and Language Therapist, Psychologist, Psychiatrist, and Behaviour Analyst. Holly explains that each individual’s case is reviewed on a monthly basis by the multi-disciplinary team. The agency is usually represented at these meetings by the manager, however, Holly points out that ‘I have been to a good few multi-disciplinary meetings and because you are with the individual on a daily basis, they know you know the individual best’ (Holly, Interview). Her most significant professional engagement is with the nurse member of her immediate team. There is also regular interaction with individuals from what Holly terms, the ‘Multi-d team’. Holly expresses her professional confidence within this
wider professional context as follows: ‘a lot of the time we know or we have a good idea of what triggers the behaviour and so the team do listen without a doubt’ (Holly, Interview).

The overarching approach to care is ‘definitely a Social Model’ (Holly, Interview). This is in line with the agency’s self-description as providing services that ‘are designed around the individual and are measured using an accredited quality system. Personal Outcome Measures (Council on Quality and Leadership) focus on the items and issues that matter most to individuals in their lives’ (Holly, Documents – agency website). The approach finds particular expression in the Residential Services through the provision of houses in ordinary neighbourhoods that are ‘designed to meet the needs and wishes of the people living there in line with the National Quality Standards (HIQA, 2013) (ibid). The wider organisation’s policy of providing person-centred, effective, and safe services for individuals finds practical expression in how Holly sees her professional role. She recognises the importance of individuals making informed decisions about their daily life choices: ‘It’s more the person, asking the person what they would like, asking their opinion and I think they are more informed now as well’ (Holly, Interview).

However, in the following extract from her interview Holly is conscious that there is a distinction between her professional awareness and that of unqualified members of the team:

‘I know people working with me now would not be aware of the model of care we carry out. They don’t understand it and how important it is to get the individuals the support to get out into the community and to be involved in their daily activities rather than just sitting there and doing nothing. So it’s so important to have a plan in place and to have a positive approach and that is activities, getting out, going for a drive...’ (Holly, Interview).

The distinction made here by Holly focuses on placing the practical activities in a wider context of care. For unqualified staff, the primary concern is with ‘doing’; for herself, as a qualified Social Care Worker, Holly’s focus is on implementing a Care Plan through supporting daily living activities. There is still a ‘practical’ focus, but also recognition of a professionally-structured approach that sits within an organisational policy-framework. In the interview, there was a tone of exasperation as she commented on the amount of policies that directly relate to her practice: ‘somebody counted them
last week and said there were 116!’ (Holly, Interview). However, she adds quickly that ‘to me the most important one is the policies and procedures for the protection of vulnerable adults’ (Holly, Interview). The ways in which policy meets practice in Holly’s professional practice experience is discussed in the next section.

6.4.9.4 Written and verbal discursive practices
The policies that inform Holly’s practice are comprehensive and relate to all aspects of the work. She notes: ‘We have a big folder and all those would be in there and we would be very much aware’ (Holly, interview). This section of the conversational interview led to a discussion on how staff engaged with policies. Holly commented on how staff were kept informed regularly on policy changes. This happened through e-mail received by the local manager who then informed staff. When asked about the source of policy or policy changes, Holly said she thought they came from the HSE, with the organisation adapting it to suit its particular circumstances. Holly did not see that her immediate agency had a role in policy design, there was she stated ‘no room for discussion, this is the change and that’s it, whether it makes sense or not’ (Holly, Interview). However, as the conversation progressed to explore how individual policies found expression in practice, Holly did identify that there were opportunities for staff to give feedback on how policy impacted on practice. Holly explained the complexity of frontline staff trying to support an individual in making choices. The policy guidance indicated that the individual resident should be given the freedom to choose the décor and furnishings for their living space. This presented the Social Care Worker with a challenge when items of furniture chosen by the individual would not physically fit the space it was intended for. As a worker, Holly had the opportunity to give feedback on the need to consider how best to promote individual choice and preserve rational decision-making. In other words it was not a matter of blind adherence to the letter of the policy ‘law’, but rather, a course of negotiation, adaptation and empowerment that would adhere to the spirit of policy intent. The feedback took the form of informal discussion with the manager in the immediate work context. It did not involve ‘head office’ which was the ultimate source of the policy in the first instance.

The relationship between verbal and written discursive practices emerged as a definite pattern as the diary entries and interview were examined. Verbal discursive practices
were engaged with positively; they were communicative in nature and they allowed space for professional judgement and opinion to be expressed. It was through verbal discursive practices that decisions were made based on inputs from staff, management and other professionals: ‘Post discussion, it was agreed that ‘M.’ should be introduced to an exercise bike twice weekly’ (Holly, Diary), or likewise ‘a meeting to discuss transport issues with the manager which had a positive result’ (Holly, Diary). The professional skills associated with this aspect of the work were identified by the participant as being able to express oneself clearly and accurately, being able to facilitate and being able to proactively advocate. There was a strong emphasis on teamwork evident in how verbal discursive activities were conducted.

In contrast, written discursive activities were seen as a burden, as limiting communication to requests or factual information, and as not allowing space for professional judgement or opinion. Their primary focus was seen as one of monitoring and regulation of practice. Holly summarised this aspect of the work as follows: ‘Everything is documented and we have a computer programme now that we input everything. And we document everything in personal folders and in a diary’ (Holly, Interview). In the course of the interview, Holly commented on the amount of duplication of recording that took place in the course of practice. When asked about the overall time spent on written recording, Holly stated ‘Yeah, it’s crazy! It’s ridiculous, I have to say, time that could be spent with service users. We have a major problem with it. I know you have to have evidence, I know you need to document everything but it takes so long, it takes ages. In the week, in the day even, how long would be spending trying to input data and stuff?’ (Holly, Interview).

There is an acknowledgement here as to the necessity of written records relating to practice. However, two concerns are raised, firstly the time spent and duplication of record keeping, and secondly, the limited ‘space’ for professional judgement or opinion in recording practice.
6.4.9.5 *Emerging themes:*

1. Professional responsibility within a mixed team.
2. Association between professional identity and training and qualification.
3. Inconsistency in external professional recognition by agency.
4. Vagueness re what constitutes professional activity in contrast to requirements for efficiency and accountability.
5. Time taken in written record keeping.
Chapter 7
Cross-Case Analysis: ‘voices’ in context

7.1 Professionals in search of a profession

Professional Identity Formation implies the existence of a professional identity, however, Social Care is an emerging profession (Coru, 2015), generic in nature (Lalor and Share, 2009, 2013), and based on the contested concept of ‘care’ (Lyon, 2006; Graham, 2001 and others). There have been significant steps towards the professionalization of Social Care Work in the Republic of Ireland through the establishment of a distinct regulatory board within the Health and Social Care Council, and the publication of education and training Social Care Awards Standards by HETAC in 2010 and subsequently Q.Q.I. (Quality and Qualifications, Ireland) in 2014. These developments are based on previous work stretching back over three decades by representative bodies such as IASCW, IASCE and RMA who articulated the perspective of workers, educators and managers respectively. The literature review traced the historical development of Social Care towards professional recognition and regulation culminating in the establishment of the Social Care Registration Board in 2015 and the amalgamation of the three representative bodies mentioned above under the SCI (Social Care Ireland) banner also in 2015. However, these two events, though significant, should be viewed as a step towards, rather than a destination of, professional recognition. Graduates of Social Care programmes enter a field that is

(a) ill-defined in employment terms, evidenced by the vast array of job titles in use (Irish Jobs.ie, 2014) and the variation in estimates of those professionally engaged in Social Care Work (HSE, 2009; IMPACT, 2009; HIQA, 2013),
(b) vulnerable to a neo liberal ideological policy dominance that ‘actively undermines professional authority and independence’ (Meade, 2012: 906),
(c) reflective of a fundamental ambivalence towards the location of ‘care’ as a professional endeavour (Trevithick, 2012a).

It is against this backdrop that the topic for this research was first mooted and then refined. The core aim of the research, to gain a deeper understanding of ‘Professional
Identity Formation’ (PIF) of Social Care Workers, is an attempt to address a gap in knowledge at a conceptual level and an ambivalence at a professional and policy level regarding the nature of Social Care Work. Greater clarity in these areas can serve to support both training and practice of Social Care Workers.

7.2 Stages of the coding process

The coding process, described in Fig 7.1, below, is informed by the twin theoretical frames, Rhetorical Genre Theory and Enactment Theory. They also reflect an epistemological position that views knowledge-creation from a constructionist perspective. By adapting Lindgren and Packendorff’s (2014) application of this perspective, I arrived at my research belief that PIF of Social Care Workers may be studied through ‘articulating and understanding how individuals and collectives – subjectively and inter-subjectively – construct’ (Pg. 31) their professional identity formation as unfolding processes. The direct data gathering instruments therefore maximized participant-led data generation. As seen in the case presentations in the previous chapter, it is the participants at the center of the multi-case study who generated the data from which the following emerging themes were identified:

1. Policy, power and ‘situated’ professional identity.
2. Worker Activity in context - professional identity as a socially constructed concept.
3. Workers Self Awareness - professional identity as an internalised construct.

Before progressing to the cross-case analysis discussed under these themes, it is important to trace their origin. The themes emerged through an analytical process of coding the data from the Conversational Interviews, Moodle Diaries and Policy Documents.. The stages of coding are set out as a linear progression in Fig 7.1 below. However, the analytical process could be more accurately described as a looping progression. Open coding at Stage 1 for example was revisited on a number of occasions, as patterns were noticed and noted as coding of a new case proceeded. The data from the previous case would then be reviewed in light of the new ‘coding-node’ being established. The first three stages of coding were completed on a case by case basis. The research aim at that point was to maintain the direct connection between the primary data and the emerging themes. As seen in the previous chapter, minimum
analytical comment was included at this stage in order to allow the ‘voice’ of the individual Social Care Worker to be heard. The emerging themes at coding Stage 3 can be viewed as a bridge between the ‘in-case’ and the ‘cross-case’ analysis.

Fig. 7.1 The Coding Process
This analytical approach is consistent with that of Interpretative Phenomenological Analysis (IPA) outlined by Larkin (2006) where ‘verbatim accounts are generally captured via semi-structured interviews, focus groups, or diaries, and the analysis then proceeds such that patterns of meaning are developed, and then reported in a thematic form’ (Pg. 103). The same author describes the aim of IPA as interpreting qualitative data, ‘to develop an organized, detailed, plausible and transparent account’ of its meaning (Larkin and Thompson, 2012: 104). The balance required to achieve this aim in the research required careful attention to method, record and interpretation. The latter was informed by an ‘objective’ voice of theory heard in the literature.

Fig 7.2 Working with Qualitative data in Nvivo™

At a practical level, the analytical process of moving from raw data to themed analysis involves the management of a large volume of words. The strength of the Nvivo software is that it facilitates the ‘looping’ process to occur without the researcher becoming mired in data. By coding items and bundles of data at a particular node, patterns and relationships begin to become visible. Nodes can be re-titled in order to
better reflect their content; they can be moved easily within the overall coding frame and thus take on new significance when viewed alongside other coded data. A key point to note when viewing Fig 7.2 above, is that the hierarchy emerges from a ‘bottom-up’ rather than from a ‘top-down’ analytical process. It was only after four phases of coding, organising, and recoding that the final themes emerged.

Having been so close to the data for a sustained period of coding, I paused the active analysis, confident that the coding sheet was organised such that the data could now be analysed at a deeper level. At this stage a re-reading of the literature review was undertaken, with particular reference to the theoretical framework. This allowed me to reconsider the coded data, and to express the key themes as headings under which deeper analytical discussion could progress.

7.2.1 From voices to themes

Fig. 7.3, below, graphically illustrates the strong connection between the represented voices of the participants and the emerging themes. The diagram illustrates the dynamic relationship between method and data, discussed in Ch. 3, that preserve a ‘triangulation state of mind’ (Tobin and Begley, 2004). This ‘Butterfly diagram’ graphically expresses the interconnectedness and balance involved in the research.

Fig 7.3 Cross-case analysis in wider research context
The congruence discussed in Chapter 3 earlier, takes precedence over a linear sequencing of literature, method and analysis. The points on the left wing of the diagram both inform and give meaning to the points on the diagram’s right wing. For example, RGT, with its epistemological position that sees genre as social action prompts a methodology that is aimed at being ‘close to the action’; it also locates the data that is generated in a context that includes the immediate interactions and the forces that create the context in which that action takes place. This research analysis is informed by Pare’s (2014) view that ‘By seeing texts as manifestations of larger social forces, RGT gives us a wide and encompassing view...’ (pg. 92). The broader definition of ‘text’ as including written and verbal discursive practices discussed in Chapter 3, is worth restating here. The methods of data collection, Conversational Interviewing and Moodle Diary-keeping, create a situation in which the Social Care Workers engage with the textual features of their workplace. In this sense, the data itself becomes ‘text’ to be analysed. So it is the continual involvement and influence of the elements identified at the edges of the ‘wings’ that create co-ordinated research movements around the central topic under investigation, namely, Professional Identity Formation. This chapter now turns its attention to the three themes that have emerged from those ‘research movements’.

7.2.2 Propositions re-visited
This research identifies several propositions to guide the study. Baxter and Jack (2008) note that ‘these propositions later guide the data collection and discussion’ (Pg. 552). That applies to this collective case study too. The propositions’ roots in the literature reviewed were set out in Chapter 3 (Fig. 3.2). They assisted conceptual clarity and set the parameters of investigation. This proved to be an important function, as it helped shape the design of the ‘Conversational Interview’ template and Moodle Diary headings. As we now progress to discussion of the findings it is useful to note the connections between the original propositions and the themes that emerged from the data. As Baxter and Jack (2008) refer to Stake’s (1995) preference for the use of the term ‘issues’ in research rather than the term ‘propositions’. Stake emphasises that ‘issues are not simple and clean, but intricately wired to political, social, historical, and
especially personal contexts’ (1995: 17). Fig 7.4, below illustrates how the ‘intricacy’ mentioned by Stake is reflected across thematic boundaries.

**Fig. 7.4: Propositions and Themes**

<table>
<thead>
<tr>
<th>Proposition</th>
<th>Emerging Theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>That Social Care Work as a distinct profession is not clearly defined and therefore exists in an unclear practice and policy context.</td>
<td>Theme 1</td>
</tr>
<tr>
<td>That Social Care Workers are employed across a range of sectors in a variety of roles.</td>
<td>Theme 1</td>
</tr>
<tr>
<td>Social Care is an emerging profession.</td>
<td>Theme 1,2</td>
</tr>
<tr>
<td>Professional Identity is impacted by professional activities including discursive practices.</td>
<td>Theme 2</td>
</tr>
<tr>
<td>Professionals are formed by, and inform, the language of their profession.</td>
<td>Theme 1,2</td>
</tr>
<tr>
<td>Professional Identity Formation (PIF) is experienced subjectively but informs how a profession develops.</td>
<td>Theme 2,3</td>
</tr>
<tr>
<td>Knowledge exists in ‘stabilised-for-now’ concepts based on how individuals engage with the world around them.</td>
<td>Themes 1,2,3</td>
</tr>
</tbody>
</table>

**7.3 Theme 1: Policy, power and ‘situated’ professional identity.**

The relationship between policy and practice is seen as key to developing an understanding of PIF. For the purpose of this discussion, ‘policy’ is understood as written statutory policy that applies to or impacts on the professional setting and/or the professional at work. It includes by extension, policies, internal to the agency, that emanate from Statutory Regulation, Legislation and Public Policy. The position taken in this research is that policy must be critically examined in the context of where its impacts are acted out. This position is based on Enactment Theory (Ball, 2006, 2009), an approach to policy analysis that engages with the complexity of how that policy emerges and impacts at ground level. Enactment Theory is concerned with trying to understand the relationships between policy making and what happens in practice, how social actors, in this case Social Care Workers enact policies in the workplace (Ball, 2006 and Maguire 2011). The approach promotes (and perhaps assumes) a proactive role for practitioners in shaping how policy works at ‘ground level’. This approach raises interest in what happens to policy in the professional Social Care workplace. This
‘interest’ cannot assume that just because a practitioner has freedom to interpret, manipulate, accommodate and ultimately enact policy in their particular practice setting, that they do so with a ‘professional consciousness’ of a power vested in their professional role. Nor can it assume that the professional sees it as part of their role to inform the structural framework that is the source of the policy in the first place. The discussion here accepts the proposition of Enactment Theorists that professionals are seen as social actors and not passive receivers in the ‘policy-meets-practice’ engagements. However, the basis of this research is on the lived professional experience of ‘new-to-practice Social Care Workers’, and, as the impact of policy on their PIF is discussed, the focus is placed on how conscious or otherwise the worker is of their potential role within the Enactment framework as espoused by Braun, Maguire & Ball (2011). In other words, one can ask if there evidence in the data of what Friere (1979) coined as ‘conscientization’ - ‘The process of developing a critical awareness of one’s social reality through reflection and action’ (Friere, 1988 in Rugut and Osman, 2013: 27). In simpler terms, are the newly qualified Social Care Workers conscious of their place in the wider policy context?

As seen in Fig. 5.6 in Chapter 5, each participant identified policy documents relevant to their work. These policy texts are understood by Rhetorical Genre Theory as more than the written word and may include ‘recurrent use of conventionalized forms and communicative practices that individuals develop relationships, establish communities, and get things done’ (Johns et al 2006: 273). This approach prompted the research to include a broad sample of ‘texts’ from the participants work settings, and to examine these texts as ‘social action’ (Miller, 1884). From this perspective, the policy documents, taken together at a cross-case level, represent a genre, where genre is understood not simply as linguistic form but as dynamic with the ability to ‘both reproduce and enact our realities, shaping us even as we shape them’ (Carpenter, 2011: 3).

Under this theme, therefore, the analysis is informed by a twin theoretical frame that views both context and worker as shaper and shaped. The extent to which the worker is conscious of this dynamic gives an insight as to how their professional identity is formed. The data is examined under four headings:
It is important to note that it was through the coding process that these headings emerged (See Appendix 5), as the codes themselves represent individual ‘units of meaning’ arising from what the participants said, referred to and wrote.

### 7.3.1 Engagement of Social Care Profession with Policy

The emphasis in this category was on how participants, as professionals, related to the policy arena, where policy was understood to include both agency policy and broader Social Policy. There was full consistency amongst participants in recognising that agency policy emanated from an external source. It is worth noting that in one case, the participant cited a lack of knowledge, awareness and engagement with external policies at agency level. This led to an internal working environment in which ‘policy and procedure does not guide one or the other approach or offer definite guidance to staff’ (Fergus, Diary: Ref 3). However, this participant saw it as part of their professional role to bridge the policy gap, and expressed in their diary: ‘I also felt that I should inform management of the need to develop policy around this issue’ (Fergus, Diary: Ref 2). In fact, it was this case more than any other that policy, and how it impacted on practice was discussed most. The newly qualified professional can be seen as taking on a ‘policy educator’ role within the agency.

All the other newly qualified Social Care Workers were employed in agencies in which internal policy was strongly established and seen as being reflective of a national policy framework. The reference point at a national level varied according to the social care sector in which the participant worked. There was strong consistency in the policies identified by participants who worked in the same sector. Our focus here is on how the workers engaged with policy.
Fig 7.6: Engagement with Policy

At a cross-case level, in addition to ‘policy educator’, three distinct types of engagement were identified: Policy Follower, Policy Enactor, Policy Proposer. The diagram (Fig 7.6, above) above places each of these engagement types on a set of axis that combine professional stance (vertical) ranging from passive to proactive, and a professional position (horizontal), ranging from individual to team.

Taking each in turn, the ‘Policy Educator’ role sees the Social Care worker carrying individual responsibility to raise awareness of relevant policy in the agency. This arose in situations where the worker was employed in a mixed team that included non-qualified workers, workers with limited training and volunteers. For example, one worker described their role in the following terms: ‘I work with four specific groups within the centre as a programme leader or programme organiser type role (Lauren, Interview: Ref 2); another worker, Mona, described part of her role in a staff team of
SCW’s and unqualified Care Assistants as being ‘to make sure that the staff and the team know how to support them in the best way...’ (Mona, Interview: Ref 3).

The ‘Policy Follower’ was the engagement type supported by the largest number of coded references in this category. When viewed from this perspective policy was seen as directive, fixed and unifying. Its aim was to promote consistency amongst staff in the provision of care. The staff role was to familiarise themselves with the particular policy and to comply with its direction. Its ‘location’ on the graph in Fig 7.6 above, reflects the professional reality of participants who viewed policies as ‘applying across the board’ and that the overall aim of ‘consistency of approach’ (Karen, diary: Ref. 1). A striking feature present across the coded references in this category is that policy was regarded as being collectively rather than individually engaged with. Phrases such as ‘definite guidance to staff’ (Fergus, Diary: Ref.3), ‘to ensure every Professional is working to achieve the same short and long term goals’ (Eileen, Diary: Ref.1), ‘put it out to the staff and now it’s the unit policy’ (Kellie, Interview: Ref.3) all suggest that the participants viewed policy as applying collectively. For Wenger (1998), identities, whether professional or personal, are constructed in the social context of a Community of Practice, which he saw as ‘important places of negotiation, learning, meaning, and identity’. The individual person’s identity is given its meaning through social participation. Applied to the professional context, the Community of Practice offers a context for professional social participation in which the individual workers identity can find meaning. Although not containing all of Wenger’s (1998) five dimensions of identity, the evidence of this research is that the participants displayed a sense of the social in their professional engagements with policy. Clouder (2012) emphasises the importance of inter-professional work as a core component of professional identity formation, and the preference amongst participants to view policy as applying collectively suggests that policy may be an important facilitator of PIF especially when viewed as ‘common-ground’ within and between professions that work together.

The Social Care Worker as ‘Policy Enactor’ became visible as the participants reflected on their role in shaping existing policy. There was a strong emphasis across all cases of the direct and practical focus of the work. This focus often took precedence over strict
deference or adherence to policy. For example Mona identifies a ‘policy-filtering’ process in which the various levels through the staffing structures in the organisation act as filters: ‘[policy] filters down through a piece of work that we do at an area meeting and then it filters down to a team meeting’ (Mona, Interview: Ref 2). Fergus sees it as part of his role to ‘translate policy into practice’ (Fergus, Interview: Ref. 1);

The following quote from Shona reveals a willingness/duty on her part to comply with the ‘letter of the policy’ in order to achieve an outcome for a client not intended by that same policy: ‘because of the way legislation is in Ireland, if you are not from here you need to return to the area that you are originally from. But you can self-refer through the local council and then we can work with you’ (Shona, Diary: Ref. 1).

Looking at this data through an Enactment Theory lens, we can support its contention that in order to understand policy fully, one must follow it through the processes that occur throughout its enactment in practice. The Social Care Worker, as evidenced above, is indeed proactive in this enactment process. Theorists such as Ball and Maguire see the potential for professional emancipation, ‘where ‘enactment’ refers to an understanding that policies are interpreted and ‘translated’ by diverse policy actors’ (Maguire and Ball, 2010: 547) with the worker actively involved in shaping policy in practice. The evidence here, however, places the role of the professional closer to Weick’s conceptualisation of enactment (Weick, 1979) and sense-making (Weick, 1995), concepts, that go beyond deployment or implementation. While the research does produce evidence of workers interpreting and translating policy, it cannot be said that this is more than a ‘side effect’ of their primary professional focus on meeting the immediate needs of the people with whom they work.

‘Policy Proposer’ did not emerge as a consistent theme across all cases, however it is worth noting its presence. When it did occur it was deliberate, focused and collaborative in nature. The ‘social care perspective’, as it fed into structural contexts, will be discussed later. Here the focus is on instances where the worker acted within the organization with the conscious effort to influence or change agency policy. The clearest example was provided by Kellie as she explained in her interview ‘Myself and another worker came up with a key-working policy, she (manager) read it, liked it and put it out to the staff and now it’s the unit policy. So there is that avenue for creating
policy at a local level’ (Kellie, Interview: Ref. 1). Beyond the words here was the professional pride she took in citing this example. Earlier in her interview Kellie had been forthright about the need for qualified Social Care Workers to take on professional responsibility in all aspects of their work – direct care, multi-disciplinary work as well as record keeping and accountability. Contributing to agency policy seen in this context is very much part of the workers professional identity. Receiving affirmation through managerial acceptance and implementation of her proposal contributed significantly to her professional identity formation.

7.3.2 Impact of Funding

All participants cited funding as having a significant and often detrimental impact on their work; a view best summed up by Shona: ‘Funding absolutely determines how we work with people and the resources that are available to us at the time’ (Shona, Interview: Ref. 1). This section presents a collective view of how the case participants understood the impact of funding, with particular reference to analysing its impact on their professional identity.

In her article ‘Assessing the Policy Environment’ Malone (2006) presents a challenge to the nursing profession and nurse educators when she points out that nurses cannot be expected to become policy experts, however, ‘all nurses can assess, identify, and articulate for (or on behalf of) patients some of these broader factors; provide information to patients on options for impacting policy; and work to effect policy change through professional and advocacy organizations’ (Pg. 136). She argues, simply and strongly, that an ability to assess the policy environment needs to be seen as an integral part of the nurse’s professional role. She goes on to say that an absence of broader policy awareness leads to an overly localised perspective on the part of the individual nurse. With minimal language adjustment, Malone’s professional focus could shift to Social Care. However, where she contends that ‘bedside nurses do not recognize the policy dimensions of clinical practice issues’ (ibid), the Social Care Workers who were at the centre of this collective case study exhibited a keen awareness of the impact of wider fiscal and economic policy on their practice environment. This is summarised in the table at Fig. 7.7 below. Here we examine their reflective capacity to locate their professional role in this wider policy context. Drawing
on the theoretical underpinnings of Enactment Theory and RGT, the self/professional awareness of the worker within a broader framework again becomes the locus of interest.

**Fig. 7.7: Impact of funding on practice setting**

<table>
<thead>
<tr>
<th>Case</th>
<th>Impact of funding</th>
<th>Professional response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shona</td>
<td>‘No increase in rent caps, well certainly not in line with market value at the moment, is putting a real block on the work we are doing.’</td>
<td>‘I am currently sitting on our working group at the moment in making these decisions and looking at how we are going to bring this about in the organisation…’</td>
</tr>
<tr>
<td>Holly</td>
<td>‘There are a lot of staff in the organisation here with us now with masters and they are only on relief and minimum wage. That’s the way it is I think in a lot of organisations… it’s all budgeting really I suppose.’</td>
<td>‘Social Care Worker – unqualified’, is my contract, but hopefully that’s going to change very soon because I’m in talks at the moment’.</td>
</tr>
<tr>
<td>Fergus</td>
<td>‘…funding is one that seems to be a really big issue at the moment and trying to work within those constraints.’</td>
<td>‘a fear to be able to facilitate all the recommendations within that document is going to extremely expensive’.</td>
</tr>
<tr>
<td>Esther</td>
<td>‘Since the recession hit a lot of our funders were unable to keep funding us as much and we didn’t get as many donations from individuals and that’s why a lot of things have been cut.’</td>
<td>‘We did take precautions in that we did have some redundancies, a cut back in hours and a cut back in programme costs and things like that and I think we have made up the deficit’.</td>
</tr>
<tr>
<td>Amanda</td>
<td>‘…the tendering process currently being introduced is ‘more than just the provision of the bed space such as the kind of care provided.’</td>
<td>‘… the tendering process is very much about how we’d work, our model of care, our staff, all our qualifications, all of that goes into it. So I think you are sort of hand-picked on that basis…We are just waiting on that to kick in now’.</td>
</tr>
<tr>
<td>Kellie</td>
<td>‘…we have looked for drama therapy, there have been referrals made, but it took so long that the young person had moved on by the time we got the funding.’</td>
<td>‘Ideally I would like to do what I am doing, like 3 days residential child care and then do drama therapy within the service on the other two days – offer that to the service’.</td>
</tr>
<tr>
<td>Eileen</td>
<td>‘…a tender from the HSE and they kinda changed the structure of the company in that people got different roles.’</td>
<td>‘now people have to be working towards qualifications which I think is really a good thing because then we can all, like I said earlier teach young people’.</td>
</tr>
<tr>
<td>Lauren</td>
<td>‘We have a small core team of 5 but 15 CE workers. So we have a very small core funding for staff and rely quite a lot on the FAS system’.</td>
<td>‘Well the CE money needs to be spent on upskilling staff so you need to be able to document when training took place. It’s a very strong paper exercise done for that specifically’.</td>
</tr>
<tr>
<td>Mona</td>
<td>‘Recruitment and permanent contracts are affected. You can see that when even with temporary positions or maternity covers, there are so many people applying. So there are a lot of locum staff’.</td>
<td>‘Where you have constant worries about budgets and reduction of staff in certain areas, it does have a big effect on morale… But I think it is too easy to blame lack of funding for not doing something. There is usually a way around things’.</td>
</tr>
</tbody>
</table>
Although the issues and responses cited in Fig 7.7 above vary considerably, there is a strong level of professional awareness, critique and professional proactive response across all examples. One could argue that the responses are largely focused on change and adjustment at the immediate or the ‘local’ (Malone, 2010) rather than the structural level, however the prevailing stance is one of activity rather than passive acceptance. This suggests a professional identity aligned to the phronetic approach articulated by Flyvbjerg (2004). He proposes a set of questions that act as a starting point for response:

‘(1) Where are we going?
(2) Who gains and who loses, and by which mechanisms of power?
(3) Is this development desirable?
(4) What, if anything, should we do about it?’ (pg. 290).

This research suggests that the Social Care Workers who took part have found themselves in challenging work contexts, that they are aware of and are able to articulate what these challenges are, and that their professional focus is towards practical response. Whereas Malone’s (2010) implication was that the professional role of nurses should include an ability to contribute to structural change, Flyvbjerg’s (2004) fourth phronetically based question leaves the professional decision-making in the hands of the worker themselves. Mona’s response ‘There is usually a way around things’, is one that recognises the impact of funding cuts but does not allow these structural policy shifts to paralyse her professional work.

A more direct impact of funding on the professional identity of Social Care Workers is seen in its effect on the constitution of work teams and contracts. Holly, Fergus, Esther, Amanda, Kellie, Eileen, Lauren and Mona all identify the impact of funding on who does what in the Social Care organisation. While Lauren ‘manages’ teams of unqualified volunteers to do the work she is qualified to do, Mona expands on how staff are employed in an era of fiscal constraint. She describes how agency relief-staff are assigned their responsibilities and contrasts professional status of nursing with that of Social Care:
'Now in our organisation a nurse is a nurse; they are employed as a nurse and they work as a nurse, but the social care worker role is a mixture of the two (Care Assistant and SCW). It’s weird because they can be a SCW in one house and a Care Assistant in another, its blurred, so I don’t know what will happen, but it will be interesting’ (Mona, Interview).

To ascertain the extent of this practice across the Social Care field would necessitate a quantitative investigation, and that is beyond the scope of this research. What is exposed here is the blurring of a professional boundary, not between one profession and another, but between qualification and non-qualification. As seen in the literature review earlier, Welsh et al (2004) point out that studies of the professionalization process tend to focus on two aspects, ‘1) the establishment of ‘professional dominance’ whereby the state grants a ‘quasi-monopoly’ to the occupation, often through granting statutory regulation, and 2) the securing of ‘consulting status’ whereby the groups work to gain the support of and use of their services by the public’ (pg. 217). The organizational practice described by Mona emphasizes the importance of the first and the absence of the second. Her employment context contrasts sharply with that of Lauren who, because of her qualification in Social Care occupies a leadership position in her organization that ‘rely quite a lot on the FAS system’ (Lauren, Interview). However neither position provides a stable base on which the emerging profession (or the emerging professionals) might achieve what Kegan’s (1985) Constructive Developmental Theory would term a ‘Self-authoring mind’, or applied to a professional context, a self-guided, self-motivated, self-evaluative, self-correcting (Berger, 2007) professional who is critically aware of their surroundings and possesses an ability to be ideologically objective through an emerging sense of identity.

7.3.3 Monitoring and Accountability

As discussed in the Literature Review, a position is taken in this research that the development and definition of Social Care Work in Ireland is influenced by wider policy factors, established on a global stage, but enacted at national and ultimately local levels. The data generated through the interviews and diaries in this research revealed a convergence around the role of monitoring and accountability in Social Care practice. With the exception of Case 4, Fergus, the PIF context of all the cases immersed in the
language and culture of monitoring and accountability. The ‘Within case analysis’ provided evidence of Fergus responsibility for the introduction of many aspects of a ‘professional approach’ to the organization. His efforts were sometimes met with resistance within the culture of the organization. The remaining cases exhibited a collective organizational culture that shared a common language closely associated with quality management approaches, managerialism (Mertkan, 2011), and performativity (Ball, 2011).

In the interview, the Social Care Workers were asked about the evaluation and monitoring of their work. The words and phrases that appeared in their responses included ‘evidence’, ‘feedback’, ‘outcomes’, ‘tendering’, ‘procedures’, ‘monitored’, ‘child monitoring tool’, ‘computer programme’, ‘inspection’, ‘efficiency’. Similar words and phrases featured in their diaries. While it was not possible to isolate a reliable word frequency count on such words and phrases, the thematic coding under ‘Monitoring and accountability’ pointed towards the existence of a practice genre similar to that described by Schryer’s (1993) as ‘stabilized-for-now or stabilized-enough sites of social and ideological action’ (in Pare, 2014). Influenced by RGT, this analysis moves beyond a focus on textual features ‘to the analysis of the social contexts that give rise to and shape genres’ Aretmeva (2004: 10).

Holly’s statement, ‘As a Social Care Worker it is expected of me to take a leading role, act responsibly and drive out efficiency’, links her professional role with an ideological exhortation associated with neoliberalism. Closer examination of the ‘units of meaning’ coded in this category revealed that two main driving forces lay behind the monitoring of workers performance. The first was ‘value for money’ and the second, ‘professional accountability’. With reference to ‘value for money’, Lauren included in her diary a reflection on a regular written discursive activity relating to the use of funds. She reflected on her professional role that ‘This is an important part of the finance policy and demonstrates accountability’. Elsewhere in her diary she is also conscious of her professional responsibility in a broader sense when she comments ‘if it was specifically government funded they have their feedback forms’. What is significant here is the integration of financial accountability into the direct day to day role of the Social Care Worker. Taken in isolation, this may be no more than a hint of
marketization or merely a prudent organisational response to the current constrained fiscal environment. However, when examined alongside the references to practice-accountability, a stronger ideologically-based trait become evident.

The recording of every aspect of practice, with ‘a policy for everything’ (Lauren, Interview), is a strong feature across cases. The records have a dominant function towards accountability. A common feature was the requirement to present these records on a regular basis to a designated supervisor, external to the agency (Monitoring Officer, Social Worker, Housing Officer, depending on the Social Care sector). The use of computer-based recording systems was commonplace and although representing the view from a Residential Child Care setting, Eileen’s description reflects a broader trend:

> ‘these get uploaded into PIMS, the cloud, social workers can take them and monitoring officers can take them, regional managers, local managers can take them, everyone who has got anything to do with the child...’ (Eileen, Interview)

In addition to the ongoing recording of practice actions, incidents and communications, there was the external inspection featured regularly in the case recordings. It should be noted that there were both positive and negative attitudes expressed towards inspections. The view was expressed that such inspections were necessary to give assurances about the quality of care and that they gave staff the opportunity to show the good work that was being done. On the other hand the ‘inspection as threat’ also featured with ‘staff fearful of being asked about a policy that they didn’t know’ (Mona, Interview). Whether positive or negative, the core fact remains, namely the central place of detailed monitoring and assessment of the professional’s work. This is in line with Ball’s (2001) concept of performativity, seen as giving expression to a policy of bureaucratic regulation of professional life around imposed targets, outcomes and sanctions, (Ecclestone, 2004). In working towards a deeper understanding of the PIF of the Social Care Workers in this research, it is important to bear in mind the view of Martimianakis et al (2009) who make the point that ‘the focus on normative definitions of professionalism misses the influence of context, institutions and socioeconomic and political concerns and leads to an overemphasis on codes of behaviour’ (in Goldie 2013: 952). There is strong evidence in
this cross case analysis that monitoring and accountability is seen by the participants as an integral part of the professional Social Care role. The fact that their comments and reflections on this aspect of their role are more descriptive than critical may indicate that they have not located this aspect of their practice and their broader PIF as being firmly rooted in a neoliberalist policy hegemony (Gandin and Apple 2012; Angus 2012).

7.3.4 Social Care recognition in policy documents

Taken as a collective, the policy documents analysed are seen here as a reference point for the Social Care Workers. As explained in Chapter 5, the documents included for analysis are those referred to by the case participants. Thus they cannot be viewed as representative of the Social Care field as a whole; however, they can serve to provide a flavour of how the emerging profession is recognised in the policy arena that is directly linked to practice. We have already seen that the newly qualified Social Care Workers are aware of the impact of policy, mainly as a director and monitor of practice. The focus here is to examine the visibility of the profession in the policy arena.

The Joint Committee on the Social Care Profession (2002) described Social Care Work as an emerging profession with a diversity of titles and settings. In the Literature Review, the development of Social Care as a distinct profession was traced, and in doing so a parallel trajectory towards professional recognition with that across mainland Europe was identified. Share and Lalor (2009) set out the particular professional distinction made in The Republic of Ireland between Social Care and Social Work. Furthermore, Howard (2013) traces the source of the professionalization journey for Social Care back over forty years. The inclusion of Social Care Worker in a list of twelve professions to be regulated under CORU, Ireland’s multi-profession health regulator, set up under the Health and Social Care Professionals Act 2005, marked a watershed moment in that long journey. This, together with the existence a de facto Social Care qualification standard (B.A. in Applied Social Studies) for more than twelve years, raises the question about the extent of ‘brand recognition’ of Social Care within the policy documents ‘in use’ as identified by the research participants in this study.
A total of 28 documents were included in this section of analysis, the ‘analytical set’ resulting from the exclusion of duplicate documents (i.e.: documents identified by more than one participant). The results of running word and phrase queries across these documents are presented in the table below at Fig. 7.8. The conclusions drawn are particular to seeking an understanding of how Social Care Workers within this study could experience recognition of their profession in the policy arena. It should be noted that participants were not asked to identify documents with this specific research purpose in mind. It should also be noted that when running queries for professional titles used, both the singular and plural forms were used in order to get a complete reading. The table at Fig. 7.8 below arranges the data in descending order per number of references.

Fig. 7.8: ‘Visibility’ of Social Care profession in Policy Documents.

<table>
<thead>
<tr>
<th>Frequency of Word or Phrase in Policy Document</th>
<th>No. of Documents</th>
<th>No. of References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff</td>
<td>27</td>
<td>734</td>
</tr>
<tr>
<td>Social Worker/s</td>
<td>8</td>
<td>145</td>
</tr>
<tr>
<td>Garda/i</td>
<td>18</td>
<td>145</td>
</tr>
<tr>
<td>Social Care</td>
<td>17</td>
<td>119</td>
</tr>
<tr>
<td>Nurse/s</td>
<td>10</td>
<td>83</td>
</tr>
<tr>
<td>Health and Social Care</td>
<td>10</td>
<td>68</td>
</tr>
<tr>
<td>Psychologist/s</td>
<td>4</td>
<td>14</td>
</tr>
<tr>
<td>Care Worker/s</td>
<td>8</td>
<td>12</td>
</tr>
<tr>
<td>Social Care Worker/s</td>
<td>5</td>
<td>9</td>
</tr>
<tr>
<td>Care Assistant/s</td>
<td>2</td>
<td>4</td>
</tr>
</tbody>
</table>

The first ‘query run’ however was to test the presence of ‘Social Care’ in these policy documents. Simply running a query to count the instances of the term yielded a result of 119, across 17 out of the 28 documents surveyed. The figure 119 is meaningless other than to conclude that there is some recognition of the field in policy documents. The fact that it is mentioned in only 17 of the 28 documents is somewhat surprising, given that these are policy documents that are in current use in Social Care settings. A review of the references identified in ‘Query 1’ prompted a second query due to the number of instances where ‘Social Care’ appeared as part of the larger phrase ‘Health and Social Care’. Query 2 sought instances of the latter phrase and yielded a result of 68 references across 10 documents. This result is interesting in that it reveals a
branding issue with the emerging profession. This phrase refers to a very broad sector in the policy arena as evidenced in a recent HSE publication entitled ‘National Guidelines on Accessible Health and Social Care Services’ (2014). Its generic nature is revealed in the following extract:

‘In the course of their lives, some people will have regular interaction with the health and social care services. They may have a disability or a prolonged illness, or because of a pre-existing condition may be more vulnerable to other illnesses. Many people who have continuous contact with services do not consider themselves ill’ (HSE, 2014: 4).

The same document goes on to explain who Health and Social Care professionals might be, but does not include ‘Social Care Worker’.

‘Health and social care professional is generally used as an umbrella term to cover all the various health and social care staff who have a designated responsibility and authority to obtain consent from service users prior to an intervention. These include doctors, dentists, psychologists, nurses, allied health professionals, social workers’ (ibid).

The focus of the queries then turned to recognition of the professional title ‘Social Care Worker’ in the documents surveyed. The reading of 9 references across just 5 policy documents indicates a low recognition. It was therefore, decided to examine the documents in relation to their relevance to workers in general. Query 4, ‘staff’ yielded a strong presence, 734 mentions across all but one of the documents, suggesting that they were of relevance to professional workers in the sector. A review of the references relating to ‘staff’ prompted further queries (5 – 10) to establish the presence of other specific professions in the documents. Here we see a much stronger presence of Nurse, Garda and Social Worker (83, 145, and 145 respectively), with Social Care much closer to the lower reading associated with non-professional roles such as Care Worker and Care Assistant.

The results of this word/phrase frequency analysis cannot be regarded as conclusive evidence of a lack of recognition of Social Care as a professional area of work. That would require a much more expansive application of the query-based technique, with careful attention to the nature of the policy documents and the relative sectoral biases that might occur. However, the purpose of including the exercise here is to contribute to our understanding of how the Social Care Workers of this study experience their PIF.
The results support the conceptualisation of Social Care as a generic term, and as discussed in detail in the literature review, includes in its title ‘care’, which along with ‘caring’ are as resistant to definition in the professional context as they are in general (Swansons, 1991; Bassett, 2004; Trevithick, 2012).

7.4 Theme 2: Worker Activity in context - professional identity as a socially constructed concept.

This section of the analysis focuses on the Social Care Worker in action. From a Social Constructionist perspective, PIF of Social Care Workers may be studied through ‘articulating and understanding how individuals and collectives – subjectively and inter-subjectively – construct’ (Lindgren and Packendorff, 2014: 41) their professional identity as unfolding processes. Within this broad perspective the literature review identified Contextual Constructionism (Burningham and Cooper, 1999) and then RGT (Miller 1984; Pare 2000) as a more refined theoretically informed instrument for the examination of PIF. The dynamic interplay between ‘saying, doing and being’ (Kierstead and Abner, 2012: 338) is explored by examining workplace discursive practices. This is particularly significant as this study is seeking to understand PIF in the context of an emerging rather than an established profession. Social Care does not have the professional referents of established professions. So while the newly qualified graduates at the centre of this study may have an understanding of what ‘professional’ and ‘Social Care Worker’ mean in the abstract, their own PIF as Social Care Workers is more likely to come from ‘saying and doing’ in the workplace because professional Social Care Worker role models do not exist. In this sense, the professional identity of Social Care Workers can legitimately claim to be socially constructed; furthermore, that professional identity is what provides the defining characteristics of Social Care work itself.

This analysis of ‘worker discursive activity in context’ focuses on three interconnected elements (indicated in italics in the table below). The qualitative data generated the codes set out in Fig 7.9.
Worker Activity in context - professional identity as a socially constructed concept

<table>
<thead>
<tr>
<th>Sub categories</th>
<th>Source</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>'Admin.' load - shaping the professional role</td>
<td>18</td>
<td>44</td>
</tr>
<tr>
<td>Sacrificing contact time for administrative busyness</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Time spent on written work</td>
<td>6</td>
<td>10</td>
</tr>
<tr>
<td>Written work defines role</td>
<td>13</td>
<td>28</td>
</tr>
<tr>
<td>Worker 'professional recognition' in the workplace</td>
<td>23</td>
<td>89</td>
</tr>
<tr>
<td>Job titles</td>
<td>16</td>
<td>23</td>
</tr>
<tr>
<td>Power of professional</td>
<td>7</td>
<td>12</td>
</tr>
<tr>
<td>What is ‘counted’ as professional work- practical</td>
<td>12</td>
<td>24</td>
</tr>
<tr>
<td>Working in a mixed team</td>
<td>12</td>
<td>30</td>
</tr>
<tr>
<td>Professional purpose - writing and talking about work</td>
<td>23</td>
<td>56</td>
</tr>
<tr>
<td>Written and verbal linked</td>
<td>12</td>
<td>21</td>
</tr>
<tr>
<td>Objective ‘commentary’ on activities – daily, weekly, monthly.</td>
<td>7</td>
<td>7</td>
</tr>
<tr>
<td>Language and terminology in the workplace</td>
<td>12</td>
<td>28</td>
</tr>
</tbody>
</table>

7.4.1 Administrative Load – shaping the professional role

Fahey (1995) identified a challenge in the recognition of Social Care activity as a professional endeavour by pointing out that ‘the bulk of Social Care is provided in the informal economy by family members, it is not subject to the usual economic or administrative measurement and is difficult to incorporate in policy analysis’ (pg. 63). The state appointment of the Social Care Registration Board within the regulatory structure of CORU in 2015 is evidence of an evolving recognition of professional Social Care. However, the questions raised by Pike and Mongan (2014) highlight the challenges involved in identifying the extent of that emerging profession as they ask ‘where is the boundary between social care and health care, and how broad and/or ambitious is the scope of social care?’ (pg. 17). The focus of this study is not on these external shapers of the profession but on how it is shaped from within through the workplace experiences of Social Care Workers themselves. Indeed in the absence of a ‘comprehensive and succinct definition of social care’ (ibid.), close scrutiny of the internal shapers at a micro level becomes more important in how we (and Social Care Workers themselves) come to understand the profession.
The Social Care Workers who participated in this research would find it difficult to recognise Fahey’s description of their work as ‘not subject to the usual economic or administrative measurement’. While the participants used summary phrases such as ‘it’s all paperwork’ (Amanda); paperwork is big’ (Esther); ‘it’s all a paper trail now’ (Holly) and ‘There is a lot of writing that we seem to do’ (Shona), in their interviews, the quantum of time spent on this aspect of work was best expressed by Eileen as she outlined how her work shift incorporated its written element:

‘we start our paperwork at 11.00 o clock – we start our shift at 10 o clock. The handover is for 30 minutes, then from 11 o clock at night we are meant to start out paperwork, and if we start at 11 we should be finished at around 2.20 all going well, with no incidents. So that’s 4 to 5 hours a day. That would be the bare minimum, and that would be doing well in a 24 hour shift’ (Eileen, Interview).

There was a sense of acceptance of paperwork as a ‘necessary evil’ amongst the workers. They spoke about how they understood the necessity for good record keeping in order to ensure professional accountability; to track planning and progress of professional work and to assist in clear intra-agency and inter-agency communication. These positive aspects of paperwork were often qualified with more negative comments around duplication, endless form-filling without clear purpose and the tedium of completing written tasks. In tracing the development of Social Care towards professional recognition, the review of literature cited the contributory factor of various investigations into institutional abuse. Writing from a Social Care perspective, Howard (2012) has little doubt that a report emanating from one of these investigations, The Ryan Report (2009) has resulted in a culture of audited accountability in Social Care work: ‘... because of the requirement for an incident report, social care workers need to justify their actions to cover not only themselves, but the manager and the system itself’ (pg. 41). He goes on to argue that such a culture of ‘cover your back’ at all costs’ (ibid) may impact on the profession where ‘The empathic, caring worker whose modus operandi is spontaneity, humanity and going the extra mile, may well have to compromise on this for the sake of completing paperwork’ (pg. 42). While Howard is suggesting that there is a fundamental shift occurring in the nature of Social Care Work, for the newly qualified Social Care Worker,
Eileen, the paper-trail ‘culture’ is part of what it means to be professional. When asked what the word ‘professional’ conjured up for her, Eileen responded:

‘Ahm, I suppose for me, you know because I’m linking it to my job in my head its I suppose being about consistent in your work. About being sure of policies and procedures, and being you know in line with policies and procedures all the time. A lot of it for me is about the paperwork too to ensure that you are logging everything and, yeah, basically paperwork’. (Eileen, Interview).

The value of ‘paperwork’ was questioned by the workers, most often with regards to its tendency to use time better spent in direct contact with service users. Amanda bemoaned the fact that her administrative duties kept her away from ‘being on the floor’ and in contact with the residents at the care home in which she had a leadership role. Reflecting in her diary, Kellie notes that ‘It is required of the Professional to provide a comprehensive description of all aspects of the client’s day’. Here we see an emphasis on compliance with procedures rather than on the practice value of paperwork. Both of these worker experiences reflect themes identified in a research report conducted in Nursing Home settings in England. The report entitled ‘Is excessive paperwork in care homes undermining care for older people?’ (Warmington, Foreman and Afridi, 2014) echoed Howard’s (2012) view that paperwork has a source in professional insecurity and that it has a negative impact on practice. The report concluded that

‘Instead of being an addition to care quality, paperwork can lead to ‘subtractions’ – that is, taking away from the delivery or management of care. Five of the most significant subtractions are these qualities: leadership, value of care, vocation, co-operation, and professional autonomy’ (pg. 6).

Though conscious of the potentially negative impacts of excessive paperwork on their practice at an individual level, just one of the workers in the current research referred to this consciousness at institutional level. Eileen explained that the organisation in which she works has responded to feedback from its network of community-based agencies regarding the excessive time being devoted to administrative work. She describes how her workplace has ‘a ‘quantum’ now within the agency so I suppose it is being tracked now to see how much of your work paper work is. So while it was a lot more before the quantum came in I suppose about 25%’ (Eileen, Interview). Whether proactively managed or not, the professional identity of Social Care Work is strongly
connected to their administrative workload. The description of Social Care work offered by ‘Grad Ireland’ (2014) is valid:

‘Social care work also involves a huge administrative workload. Report writing, attending meetings and constant communication with other professionals are core responsibilities’ (pg.9).

An analysis of the reality of the role of administrative work in ‘human services’ would be incomplete without reference to what Mertkan (2014) describes as the relentless push towards marketization, managerialism and performativity. The manifestation of this ideological push in the workplace is reflected in ‘performativity with elements of accountability and standardization’ (Ball 2011:156). Here, performativity is seen as giving expression to a policy of bureaucratic regulation of professional life around imposed targets, outcomes and sanctions, (Ecclestone, 2004). Indeed Martimianakis et al. 2009 in Goldie (2013) make the point that ‘the focus on normative definitions of professionalism misses the influence of context, institutions and socioeconomic and political concerns and leads to an overemphasis on codes of behavior’ (Goldie 2013: e952).

7.4.2 Administrative practice – shaping professional identity

Heeding the warning above, it is important to note here the reflections of case participants on the administrative element of their work. Their diaries, in particular gave an insight into how they viewed the function and practice of ‘written discursive practices’. The table at Fig 7.9 below summarises the reflections of the workers with reference to specific written discursive activities that they recorded over the timespan of the research.

Below is a sample of the Written Discursive Practices included by the Social Care Workers in their diaries. The selection is not intended to be quantitatively representative; it is reflective of the considered experiences of the workers. Its significance is heightened when bearing in mind the volume of written discursive practice engaged in by workers noted earlier.
### Fig 7.10 Written Discursive Practice and workers’ PIF

<table>
<thead>
<tr>
<th>Written Activity</th>
<th>Discursive Activity</th>
<th>Reflective Comment</th>
<th>PIF</th>
</tr>
</thead>
<tbody>
<tr>
<td>Missing from Care Form</td>
<td>‘The Child Care Worker must be clear with the information’ ‘…worker has the sole responsibility to inform the gardaí’ (Kellie)</td>
<td>Directive/Compliant</td>
<td></td>
</tr>
<tr>
<td>Standard Report Form (S.R.F)</td>
<td>‘It is the unit staff who report the S.R.Fs as they are the professionals who spend most time with the residents’ (Kellie).</td>
<td>Directive/Participative</td>
<td></td>
</tr>
<tr>
<td>Monthly Monitoring Report</td>
<td>‘I have been the only person to complete this report’ (Amanda)</td>
<td>Directive/Participative</td>
<td></td>
</tr>
<tr>
<td>Communication Record (to send home with service users)</td>
<td>‘As professionals we are all responsible for ensuring a consistency for the people we support’ (Mona)</td>
<td>Professionality</td>
<td></td>
</tr>
<tr>
<td>Daily Logs</td>
<td>It is required of the Professional to provide a comprehensive description of all aspects of the clients day (Eileen)</td>
<td>Directive/Compliant</td>
<td></td>
</tr>
<tr>
<td>Review Meeting form</td>
<td>‘The use of such a form allows me as a worker to track the progress of my work’ (Esther)</td>
<td>Directive/Participative</td>
<td></td>
</tr>
<tr>
<td>Weekly Progress Sheets</td>
<td>‘Based on my education relating to recording I understand the importance of accurate record keeping from a number of viewpoints including ethical and accountability viewpoints’ (Fergus).</td>
<td>Professionality</td>
<td></td>
</tr>
<tr>
<td>Incident Report Form</td>
<td>‘The information passed on needs be accurate and to the point. The Manager receives the Incident Report which she reads signs and forwards to the HSE for inspection’ (Holly).</td>
<td>Directive/Compliant</td>
<td></td>
</tr>
<tr>
<td>Incident Report Form</td>
<td>‘I fill in an incident report form that is signed by my line manager who then forwards the original and copies to HR manager, Health and Safety manager and area manager. The area manager reviews and sends to the regional manager.’ (Lauren)</td>
<td>Directive/Compliant</td>
<td></td>
</tr>
<tr>
<td>Daily Record Sheet</td>
<td>‘How many of us can say that a professional person has documented 3-9 months of our lives?’ (Shona)</td>
<td>Directive/Participative</td>
<td></td>
</tr>
</tbody>
</table>

Holly summed up that volume with the succinct comment regarding the number of policy documents and forms: ‘somebody counted them last week and said there were
one hundred and sixteen’ (Holly, Interview). That comment reflects the findings of Warmington et al, (2014) whose study of paperwork in three nursing homes in England identified 103 separate paperwork activities. While their focus was on the impact of paperwork on the delivery of care and the focus of this research is on Professional Identity Formation of the worker, the studies share a common purpose at a deeper level – improving the quality of the professional care provided to vulnerable people.

Analysis of the qualitative data summarised in Fig 7.10 above attaches a PIF descriptor to each. These are classified under three motivating factors:

- Directive/Compliant: where the engagement of the worker in the activity is largely driven by unquestioned compliance to an agency policy directive.
- Directive/Participative: where the worker follows agency policy, but identifies a professional value to the action.
- Professionality: where the worker is actively engaged in the activity based on a clear sense of ‘professional self-worth’ (Hoyle, 1975, Hoyle & Wallace, 2003, Evans, 2008).

The dominant factor present is ‘directive’, suggesting that this element of professional activity has a source outside the immediate professional environment. An interesting feature to emerge is the ‘Directive/Participative’, as it links the discursive activity with the workers sense of their ‘professional self’ (Ibarra, 1999). The metaphor of ‘the web’ used by Cohen et al (2004) to explain how contextual constructionism views ‘the construction of meaning as an active, creative process [where] the intricate ways in which meaning systems intersect, and the idea that once spun, these webs are incredibly strong, trapping and suspending people in their overlapping strands’ (pg. 411 is helpful). From this standpoint, the discursive activities identified by the participants, and their reflections on these activities, give an insight into how their profession is given meaning, both for the workers themselves and for all stakeholders.

7.4.3 Professional Recognition in the workplace

The ‘web of meaning’, mentioned above, continues to be spun as workers describe their own work. If we acknowledge the role of the organisation’s system in giving meaning to the professionals’ work and ultimately their professional identity, we must
also take account of how they give meaning to their own work. This can become more visible in how the worker describes their work. Fergus gives a broad description: ‘At social care practitioner level, there is an eagerness to help service users’ (Interview). That eagerness to help most commonly take a practical form, irrespective of the social care sector involved. By combining the discussion comments relating to how the workers viewed their own job description, it is clear to see the central place that practical action has within the profession.

The ‘Practical Training’ is emphasised by the workers as being most used in the field; it is the ‘Practical Application’ of theories that is seen as being an important competency; the ‘Practical Needs’ of service users are identified and ‘Practical Supports’ put in place through ‘Practical Sessions’ using ‘Practical Skills’; these lead to ‘Practical Tasks’ being completed at a ‘Practical level’!

This condensed description includes contributions from seven of the participants. The focus of professional Social Care Work is clearly on direct engagement and action. The fact that one worker felt the need to comment that ‘it isn’t just practical’ (Esther, Interview), further illustrates this professional bias. A collective view of the diary content reveals something hidden in the within-case analysis, namely a contrasting emphasis that exists between the written and verbal discursive practices in providing a ‘holding’ frame for practice. Whereas the paperwork emphasised the monitoring and accountability obligations of practice, the verbal discursive practices in the form of staff and team meetings, handovers, supervision meetings and multidisciplinary meetings emphasised the strategizing, planning, reflecting, and professional assessment/judgement aspects of the work. Where the templates and pro forma documents left little room for professional opinion and were usually ‘produced’ for someone else, the meetings tended to provide an opportunity for the professional to express their professional opinion as an active contributor to care delivery.

The role of paperwork here is in line with how it is described in Warmington et al (2014) as being ‘generally driven by the supply side, what the system does, [rather] than the demand side, what the person wants or needs’ (pg. 18). That study concentrated exclusively on written discursive practices, and, in doing so provide a
useful insight into their relative value in care practice. However, in seeking an understanding of PIF it is necessary here to include verbal discursive practices.

With particular reference to professional recognition in multidisciplinary teams, a collective analysis of the data reveals a strong sense of professional role and responsibility amongst the Social Care Workers. Eileen spoke about how ‘The placement plan is shared among the clients multidisciplinary team as a means to ensure every Professional is working to achieve the same short and long term goals’ (Eileen, Interview). Seeing herself as a professional amongst professional colleagues is evident here. In a similar vein Esther describes her participation in interdisciplinary Review Meetings where the ‘contents of the meeting are based on observations from staff during home visits/interactions, Services users own opinions, other professionals insights and observations’ (Esther, Diary). She views her contribution at these meetings as a core aspect of her work. The professional assumption that they have a place at the multidisciplinary table is evident. However, it is not shared by Eileen who describes her experience at the multi-disciplinary meeting in less favourable terms. ‘I don’t think it is expected too much of a social care worker to have a huge input into these meetings, but I think it is changing too’ (Eileen, Interview). She goes on to elaborate:

‘I would be talking to social workers sometimes when the kids go to a meeting and we both need to be there and when the child goes in on their own we would be chatting away, and they would have said to me ‘I’m surprised that you have such an intellectual input into this conversation’ you know?, about the child’s emotional development and that kind of stuff. But I think that it just comes down to the fact that they don’t have time to look at what we’re doing and stereotypically a social care worker is someone who just helps someone out… which is a shame’ (Eileen, Interview).

Kellie is less inclined to leave her professional recognition to the fate of how others might perceive her: ‘I have never felt out of place there. ... I am never intimidated by the room. I think that I am professional enough and articulate, and well able to speak and to add to this. I’m not going to just sit in a corner and only give my opinion if I’m asked for it’ (Kellie, Interview). However, in Lauren’s case, the recognition of the Social Care Worker as a professional is restricted to the point that although she is present, she does not feel part of a multi-disciplinary team: ‘You wouldn’t be asked for a social
care perspective, it’s generally relaying information that needs to be relayed and that’s it; it wouldn’t be a team meeting as such’ (Lauren, Interview).

This lack of consistency in how Social Care Workers are viewed by other professionals in work contexts reflects the inconsistency revealed in the recognition of the profession in the policy documents analysed earlier. Evetts (2005) sees professionalism as a socially constructed concept, and as such, any profession in the contemporary context does not lend itself to normative definition. This raises a question about the relevance of the inconsistencies identified above – is there a degree to which they are now a feature of professionalism and therefore merely an element to be incorporated into a professional identity? For Evetts, professionalism must be examined in a manner that takes account of the consequences of changes in the organizational context; consequences ‘include changes in the work itself, in practitioner—employer and practitioner—client relations, and in the control of work priorities and processes’ (Evetts, 2011: 406). Her conceptual analysis is useful here to the extent that it places emphasis on the socially constructed nature of professionalism. However, it is limited as an analytical device in the examination of Professional Identity Formation because it assumes a level of professional recognition to begin with, without stating what might constitute a ‘critical mass’ of socially constructed elements required for a profession to be recognized as existing in the first place.

Taking Ball’s Enactment Theory approach to policy analysis towards a pessimistic conclusion, Ecclestone (in Martin 2008), detects the emergence of a therapeutic culture, whereby professionals are demoralised to the extent that they see their role as merely providing comfort and shield to marginalised individuals without challenging the structures that cause such marginalisation. If this view is considered in light of the data discussed above, it could be argued that the Social Care Workers experiences of working from an unstable professional base would find it difficult to include in their work the challenging of structures that cause marginalization. For Aretmeva (2004) Rhetorical Genre Theory moves beyond a focus on textual features ‘to the analysis of the social contexts that give rise to and shape genres’. This position places greater emphasis on how the Social Care Workers in this study interact with their ‘social context’ (in this case their multidisciplinary colleagues). Rather than the workers
bringing a pre-defined professional discourse, it is through their professional engagements within the multidisciplinary social context that their professional identity is being established. As Carpenter (2011) puts it ‘Genres both reproduce and enact our realities, shaping us even as we shape them’ (pg. 3). The Social Care Workers in this study reported their experiences in a multidisciplinary context. The professional discourse occurring in that context, when viewed as a collective, cannot be said to clearly promote a dominant view of ‘the Social Care Worker’. In fact, the most striking feature is the lack of consistency across the experiences of participants. It could be argued, therefore, that whilst there may be strong individually socially constructed professional identities influenced by multidisciplinary interactions, there is little to support the notion of a collective ‘stabilised for now’ Social Care professional identity. The next section analyses data relating to how the Social Care Workers view themselves as professionals. Given the ambivalent nature of Social Care recognition at an organisational level, the invisibility of Social Care Work in the policy documents and the inconsistency in the rhetorical discourse at a multidisciplinary level, there is added significance to the analysis of professional identity as an internalised construct.

7.5 Theme 3: Workers Self Awareness - professional identity as an internalised construct.

The analysis so far has concentrated on how context impacts on the PIF of the newly qualified Social Care Workers. Although they are ‘newly qualified’ and perhaps because they are, it is important to give specific attention to their own sense of who they are as professionals because this is what forms the basis for the ‘social action’ and ‘agency’ discussed above through the theoretical lens of Rhetorical Genre Theory and Enactment Theory. The characteristic ‘new-to-practice’ was one of the case selection criteria used in this research. This was in recognition of the emergence of greater conformity of Education and Training with the drafting and publication of Social Care Awards Standards (2010) rather than as an element to be examined in its own right. However, as a common feature across all cases, it is worth noting its presence as a possible impacting factor as we examine PIF as an internalised construct. Duchscher (2008) likens the transition from graduate to worker to a journey that encompasses
ordered processes that included anticipating, learning, performing, concealing, adjusting, questioning, revealing, separating, rediscovering, exploring, and engaging’ (pg.441). She adds that these processes are not linear, prescriptive or even necessarily progressive. It is difficult, therefore, to regard the named processes as more than possible referents in understanding the transition from graduate to worker. The focus of this analysis is on the workers’ self-conceptualisation now, rather than seeking to locate it within a broader transition model. This is intended to provide a balance between internal and external forces in their PIF. The discussion is set out under three headings:

- Understanding the role – objectification
- Experiencing the role – positioning
- Expressing the role - language

By locating these headings within our theoretical framework of RGT and Enactment Theory, their primary purpose is seen as examining what the worker brings to the ‘social action’ of their professional world. The headings provide a structure by which the coded data that reflects the workers sense of their ‘professional-self’ can be analysed.

7.5.1 Understanding the role – objectification

Education and Training is seen as a core characteristic in normative definitions of professionalism (Brandeis, 1914; Asheim, 1978; Cheetham and Chivers, 2005 and others). All participants in this research had achieved a minimum academic award of B.A. in the area of Applied Social Studies. The QQI Social Care Award Standards, in place since 2010, brought greater clarity to the content of Social Care degree programmes. The introduction to those awards notes that ‘it was anticipated at the time of publication that these Awards Standards might be important in terms of social care registration under the new Health and Social Care Professionals Council (CORU)’ (pg. 3). However, although these are important steps in the process towards registration and regulation of professional Social Care Work, their relative impact on PIF of the individual worker must be questioned in light of the inconsistencies and
ambivalence towards the recognition of the worker as professional at a policy and organisational level found in this research.

In reviewing the coded data relating to ‘professional training’, two separate but linked strands emerge. First, the worker’s recognition of their own professional status based on their training and education; second, the application and ‘usefulness’ of the worker’s initial training and education. Examined collectively, this section of data may point towards the existence of an emerging shared professional identity.

Their education and training was a source of professional status for the Social Care Workers in this study. ‘Status’ here is used in the sense of ‘having reached a standard’, of a distinguishing point between them and ‘non-qualified’ colleagues, and of being equipped for a professional role. Mona refers to her studies as having an important role in the objective identification of her professional status: ‘It’s also about having the degree; about having the qualification now that says that you have the training to do this job’ (Mona, Interview). And while Holly was employed in a Social Care setting before completing her degree, she sees her education and training as an objective standard of professionalism that should be recognised: ‘I was only glad to get the qualification, but now that I do have it I want to be recognised as having it (Holly, Interview). Furthermore, Lauren, who works alongside volunteers and un-trained care workers, identifies her training again as a distinguishing feature between professional and non-professional. She considers that ‘from a professional point of view you have done your training, you have techniques to help people, you know the theoretical aspects behind it; you can work towards common goals’ (Lauren Interview). Here she expands on the earlier comments by naming what it is that possessing a prescribed level of training brings to the role, rather than simply focusing on the fact of holding a degree level qualification.

We saw earlier the inconsistency that exists across organisations regarding the recognition of Social Care Work and its qualifications. There was a higher level of consistency amongst the workers understanding of the professional Social Care Worker role. Their sense of their ‘professional self’ was often informed by their education and training. Reflecting on how she engaged in written discursive practices
in her workplace, Holly states that ‘Being a qualified social care worker gives me the confidence to approach work situations in a professional manner’ (Holly, Diary). Fergus is more specific in this regard: ‘I would consider that, based on the theory relating to my professional role such as person centred planning, empowerment etc., I have a framework and a guide to which I can refer to’ (Fergus, Diary). He goes on to add, significantly, that ‘This helps to legitimise my professional role to a degree’ (Fergus, Diary). The significance of the last comment is (a) that he feels his professional role needs legitimisation, and (b), the source of this legitimacy comes from his education and training.

The content of their education and training and its applicability in the workplace featured across cases. Lauren identifies with a professionalism based on a particular skillset when she perhaps inadvertently captures her PIF in a single sentence: ‘It’s very social care ... even the social care skills courses we did during training... you are looking at how to talk to people, eye contact, interpersonal skills – the basic kind of communication are fantastic for my work’ (Lauren, Interview).

The table (Fig 7.11) below summarises the elements of their education and training that participants found most useful in their current professional roles as discussed in their interviews. The function of this summary is not to offer a comparative of the education and training received by participants, but to examine if there is a common emphasis in what they found useful in their current professional role. This, in turn, may offer some insight into the professional identity formation of the worker from their own perspective. In terms of content, two emphases are evident, namely, the ‘practical’ skills-based training, and theory (in particular psychologically-based) that provides insight and understanding of behaviours. There is also some reference to the role of sociologically based elements providing a context for the work.
### Fig. 7.11 Education and training in practice

<table>
<thead>
<tr>
<th>Name</th>
<th>Element of Education and training most useful</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amanda</td>
<td>‘social care skills’</td>
<td>‘because it would be first introduction that you would get into it’. ‘that’s only because he covers so much.’</td>
</tr>
<tr>
<td></td>
<td>‘Maslow is a staple in everything’</td>
<td></td>
</tr>
<tr>
<td>Mona</td>
<td>‘just the hands on training, like ‘people moving and handling’</td>
<td>‘something in use all the time’.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>I had been doing the job hands on for so long and it was an applied degree meant that I was doing a lot of the stuff for years and then it became part of the degree.</td>
</tr>
<tr>
<td>Kellie</td>
<td>‘the first time we did report writing stuff and that was huge for me’</td>
<td>‘as a mature student I was very good at my job but I couldn’t write a report or take minutes for a meeting’</td>
</tr>
<tr>
<td></td>
<td>‘Sociology and also psychology...’</td>
<td>‘the degree makes you look at things in a different way ... you start understanding young people’</td>
</tr>
<tr>
<td>Eileen</td>
<td>‘Psychology’</td>
<td>‘I think the biggest thing in my job right now is the theory of attachment, ... All our kids are affected by it’</td>
</tr>
<tr>
<td></td>
<td>‘the practical things like first aid, ...’</td>
<td>‘are the useful things for me at the moment’</td>
</tr>
<tr>
<td>Holly</td>
<td>‘advocacy and empowerment’</td>
<td>‘that’s where we step in really and its definitely made me speak up at meetings’</td>
</tr>
<tr>
<td>Lauren</td>
<td>‘You can definitely see some of the theories, but the practical side of the training would have benefitted immensely.’</td>
<td>‘you can see where services are trying to move towards social models, service user led, membership led’</td>
</tr>
<tr>
<td>Esther</td>
<td>‘personal development’</td>
<td>‘I would use that the most, reflection on my work, my responses to work, responses to certain interventions or responses to any crisis’</td>
</tr>
<tr>
<td>Fergus</td>
<td>‘Communication is a big thing…’</td>
<td>‘many different levels and on an individual level with staff and service users’</td>
</tr>
<tr>
<td></td>
<td>‘The psychological end of it as well…’</td>
<td>‘trying to figure out where people are at and the best course of action for them’</td>
</tr>
<tr>
<td></td>
<td>‘Creative studies is a big thing too…’</td>
<td>‘the need for more creative programmes’</td>
</tr>
<tr>
<td>Shona</td>
<td>‘Sociology and Psychology helped...’</td>
<td>‘For me going into the area of homelessness I didn’t have that tangible knowledge’</td>
</tr>
<tr>
<td></td>
<td>‘Different approaches like CBT, counselling, effective listening, motivational interviewing...’</td>
<td>‘as I am progressing in my profession that I am really starting to draw on’</td>
</tr>
</tbody>
</table>

It is beyond the scope of this research to draw definitive conclusions here, as a large scale quantitative approach would be required to assess the relative importance/relevance of the distinct elements of Social Care degree programmes. However, by examining the reasons given by the participants in the context of
considering PIF, it is possible to give meaning to their collective responses. In this regard, two ‘meanings’ emerge: firstly, the workers’ professional focus on meeting the needs of the people with whom they work – a person-centred orientation; secondly, an absence of elements associated with structural challenge or transformation – a radical orientation.

The Social Care Awards Standards (QQI, 2010) are prescriptive regarding the content of Social Care degree programmes. They include a comprehensive range of theories drawn from the disciplines of Sociology, Social Policy and Psychology, as well as the progressive development of specifically named skills and competencies. There is a clear intention towards the establishment of a single professional training and education for Social Care. McCann (1997) doubts the presence of ‘care’ in the professional workplace because of an emphasis within professional training on academic excellence. This is contrary to the findings of this research. The strongest features of training identified by the Social Care Workers as being of most use in practice were those most closely associated with the practical provision of care. In fact, when the conversational interviews continues to focus on training and education, the workers, in identifying gaps in training, continues the trend towards practical rather than structural content:

‘...maybe a little bit more about specific disabilities... to give students the history of how certain disabilities have changed...’ (Mona, Interview);

‘I would definitely put in ABA for behavioural analysis, because I think, of course the therapeutic model works very well...I also think that Therapeutic Crisis Intervention should be included...so people have an idea of the realistic work you are going to be doing on the floor’ (Eileen, Interview);

‘...how to interact with people, and take people where they are at, more skills training, I think that would have been more beneficial for me in coming out of college. So I think you have to know the theories but also how to utilise them a little bit more’ (Shona, Interview).

The examples above were typical of what the workers would like to see more of in education and training degree courses. It appears that the balance of ‘professional socialization’, seen by (Hafferty, 1998) as beginning prior to practice in education and training processes, is outweighed here by the post-qualifying experiences of the Social Care Workers in this research. It may well be premature to assess the impact of
education and training on the professional socialization, and ultimately on the PIF of Social Care Workers, given that both are at an emergent stage. The analysis of the data does reveal a leaning towards a professional genre based on direct, practical engagement with vulnerable adults and children.

By locating that professional bias within an ideologically-based critique, it could be argued that the ‘hidden curriculum’ (Apple, 1982 & 1993; McLaren, 1988 and others) of the dominant hegemony of neoliberalism permeates the education and training as well as the practice of Social Care Workers. An emphasis on ‘competency models’ (Jones and Moore, 1995) leads to a particular emphasis within professional education and training. Issit (1999) argues that such an approach to education and training is aimed at producing a functional professional with a predictable and controllable set of competencies, who will be less likely (and less capable) of questioning the structures and promoters of the controlling ideology that ‘extols the virtues of the market’ (pg. 9).

7.5.2 Experience of role – the workers perspective

By continuing to probe how the Social Care Workers viewed themselves as professionals, the extent to which their education and training impacts on their PIF may become clearer. Only then would it be appropriate to assess the ‘hidden (ideological) curriculum’ (Apple, 2012) in action. Pare (2014) suggests that RGT ‘is interested in how humans create, maintain, and participate in repeated discourse practices – from casual conversations to doctoral theses – and in what consequences those generic actions have’ (pg. 84). It is concerned with the social actions that written and spoken discourses perform; with a host of regular patterns surrounding the texts. Amongst these ‘regular patterns’, Pare identifies ‘the regulated roles, relationships, and responsibilities of the texts’ writers and readers’ (ibid). In this research, it is important, therefore, to give attention to the patterns of ‘text’ used by the Social Care Workers to describe their professional role, as this, from an RGT perspective, represents more than a description of role, it is part of the creation of a professional identity.
References were gathered from the interviews and diaries across all cases and coded under discreet headings as follows:

i. ‘On the floor’ professional perspective’ – seen as more than descriptive;
ii. ‘Client-led profession’ – the floor as shared space;
iii. ‘Social Care as Support and Teaching’ – finding a position in the shared space.

Taken together, this area of focus is akin to what Schon (1987) referred to as ‘the swampy lowlands’ aspect of professional practice. There is little evidence of a connection with the high ground where ‘manageable problems lend themselves to solution through the application of research-based theory and technique’ (pg. 1). The sample of coded data below gives an insight to an emerging professional identity that claims as its workplace, closeness to the lived experience of those they work with. Each reveals a definite sense of professional positioning that reaches beyond itself; it is a perspective that needs to be communicated to others. Holly is expressing the value of her professional perspective in the context of planning services; Eileen is reflecting on the insight that her professional perspective gives as she reports, in writing, progress towards achieving care goals; and Kellie asserts the unique perspective that her professional role give to a multidisciplinary team.

‘There are areas where you would love to have an input, like when we are on the ground we see everything.’ (Holly, Interview).

‘My role provided an everyday perspective of how the young person manage their emotions, engage with people and how they have matured and learned new skills in the period of time under discussion’ (Eileen, Diary).

Can I say something here as the only person in this room who actually works with this young person, on the floor?’ (Kellie, Interview).

This collective professional perspective can be seen as ‘social action’ as it creates a way of understanding the professional role, not just for the professional themselves but for other professionals, for management and for the people they work with. This professional genre is further verified in the workers’ accounts of how their work is identified in the first place. We have already seen the impact of managerialism in creating a workplace busyness regarding quality assurance, monitoring and
accountability. Here, worker activity is identified by the workers themselves as being ‘client-led’. For example, Eileen refers to her professional role as ‘responding effectively to the arising daily needs of the people in our care’ (Eileen, Diary). Mona comments on how her working day is dependent on clients’ needs: ‘We structure our own day, we set our appointments with our clients and do what needs to be done with them...’ (Mona, Interview). Shona also shows how the work schedule primarily revolves around clients’ needs as she explains that ‘...on a day to day basis, we organise ourselves by keyworker, we each have between three and four key-work clients and in terms of structuring your day or week I would base mine around that...’ (Shona, Interview). This client-centred approach is strongly evident across all cases, and Shona sums it up succinctly with the statement ‘It is very client-orientated which is very strong in the social care approach’ (interview) thus locating it as a professional trait.

Within the worker/client professional relationship the Social Care Workers nuanced the meaning of ‘client-led’. While the work followed the identified needs (predominantly identified by the client) the worker’s role varied from responsive to directive. At times support of client-action was emphasised, as Lauren explains: ‘I support the member’s choice, what they want to do, and then to support them in carrying out what they want’ (Lauren, Interview). In other instances, a more pedagogical approach is preferred:

‘You can cook someone a dinner, but then you can teach them how to cook it themselves. In the first instance you are just giving them what they need but then you are teaching them a lesson that you are helping them through life – that’s a very simple one. So yeah, that’s my definition – we support and teach’ (Eileen, Interview).

In both case here the common factor is towards empowerment. This, in turn, is seen as central to the professional Social Care role by Fergus who considers that: ‘based on the theory relating to my professional role such as person centred planning, empowerment etc. I have a framework and a guide to which I can refer to’ (Fergus, Diary).

Analysis of how the Social Care Workers discussed their work reveals a distinction between ‘professional work’ and ‘professional role’, with the former focussing on the day to day activities and the latter on a more idealised understanding of their profession. The former is an account of practical action and the latter reflective in
nature. In the busyness of the professional workplace, this distinction could be described as their reading of ‘what is’ and ‘what should be’. The tensions between these two elements as experienced in the workplace can now be summarised as taking place at three levels set out as follows:

**Fig. 7.12: Professional identity tensions**

<table>
<thead>
<tr>
<th>Level</th>
<th>Professional identity tension end points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ideological</td>
<td>Managerialism</td>
</tr>
<tr>
<td></td>
<td>Collegialism</td>
</tr>
<tr>
<td>Identity</td>
<td>Administrative</td>
</tr>
<tr>
<td></td>
<td>Therapeutic</td>
</tr>
<tr>
<td>Interactive</td>
<td>Organisation-centred</td>
</tr>
<tr>
<td></td>
<td>Client-centred</td>
</tr>
</tbody>
</table>

It should be noted that the typology set out in Fig. 7.12 above does not represent a choice in the professional workplace made up of a combination of ‘end-points’. The professional reality for the Social Care Workers in this study lies somewhere in between these end-points at each level. The reality of their PIF is likely to follow patterns of discourse that dominate the working environment. Bourdieu’s (e.g., 1977) accounts of *habitus*, and the focus on ‘situated learning’ (e.g. Lave & Wenger, 1991; Wenger, 1998) both support this view, where it is impossible to separate the professional identity of the individual worker from the influences of the professional world that they inhabit. In other words the worker cannot claim exclusive ‘ownership’ of the professional genres that they help to create. RGT, in seeing genre as social action, places emphasis on socio-cultural analysis. That is a useful reference point as this research follows Pare’s (2014) application of RGT in its ‘attempts to account for the ways that humans are able to organise and act collectively by creating sufficient consensus around the interpretation of and response to situations’. The ‘sufficient consensus’ can be equated to professional identity formation itself because it is the collective interaction of the worker and the work.

**7.5.3 Expressing the role - language**

A further indication of the emergence of such an identity is explored by noting the terms used by the workers when referring to the people with whom they work. The
analytical question posed here is: to what extent is there consensus within the professional context regarding terms used?

Fig. 7.13 Terms used in practice.

<table>
<thead>
<tr>
<th>Case</th>
<th>Primary term in use</th>
<th>Secondary/alternative term in use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lauren</td>
<td>‘Service-user’</td>
<td>‘Member’</td>
</tr>
<tr>
<td>Mona</td>
<td>‘Service-user’</td>
<td>‘people who use the service’</td>
</tr>
<tr>
<td>Fergus</td>
<td>‘Individuals’</td>
<td>‘Service-user’</td>
</tr>
<tr>
<td>Amanda</td>
<td>‘Service-user’</td>
<td>‘Young people’</td>
</tr>
<tr>
<td>Esther</td>
<td>‘The Family/Child’</td>
<td>‘Service-user’</td>
</tr>
<tr>
<td>Holly</td>
<td>‘Service-user’</td>
<td>‘Client’</td>
</tr>
<tr>
<td>Shona</td>
<td>‘Client’</td>
<td>‘People’</td>
</tr>
<tr>
<td>Eileen</td>
<td>‘Client’</td>
<td>‘Teenagers’/’Children’</td>
</tr>
<tr>
<td>Kellie</td>
<td>‘Young person’</td>
<td>‘People’</td>
</tr>
</tbody>
</table>

Fig. 7.13a: Terms used in Interviews/Diaries v Policy documents

<table>
<thead>
<tr>
<th>Term in use</th>
<th>Interviews / Diaries</th>
<th>Policy documents</th>
<th>Interviews / Diaries</th>
<th>Policy documents</th>
</tr>
</thead>
<tbody>
<tr>
<td>‘Client(s)’</td>
<td>7</td>
<td>9</td>
<td>31</td>
<td>64</td>
</tr>
<tr>
<td>‘service user(s)’</td>
<td>12</td>
<td>13</td>
<td>40</td>
<td>263</td>
</tr>
<tr>
<td>‘patient’</td>
<td>0</td>
<td>7</td>
<td>0</td>
<td>170</td>
</tr>
<tr>
<td>Young person</td>
<td>8</td>
<td>10</td>
<td>49</td>
<td>85</td>
</tr>
</tbody>
</table>

The use of Nvivo data analysis software enabled closer examination of terms in use by the Social Care Worker directly and then in the policy documents that they had identified in the course of the research. The results of ‘query searches’ within the data are presented in tabular form in Figs. 7.13 and 7.13(a) above. The first table identifies the term/s used most by the individual worker in their interviews and diaries. The terms were identified through a rereading of the data as a ‘query search’ would not
have been as precise because it could not exclude the phrase used by the interviewer. The second table, produced from Nvivo is based on the totality of data. Its aim is illustrative in the context of qualitative analysis rather than precise ‘scientific’ accuracy. With that in mind, care is taken to confine analytical comment to broad trends rather than specific claims.

It can be seen in Fig. 7.13 that while there are some patterns in term usage, there is no clear consensus across cases. ‘Service-user’ is the most dominant term, but shares usage with the term ‘client’ and with more personalised terms such as children, young people etc. This lack of consensus is reflected in the policy documents analysed. Here again, a similar pattern emerges with ‘service-user’ dominant. Earlier analysis that revealed a Social care professional workplace closely connected to medically based professions, and in particular nursing, prompted the inclusion of ‘patient’ in the query based analysis of the policy documents. Whist not a term in use by the workers in this study, it did feature significantly in the policy documents that they identified. It is worth noting here that a similar variation, but markedly different pattern occurs in the main definitions of Social Care Work in Ireland. The JCSCP (2002) strongly favour ‘client’ in their definition; IASCE provide a broad definition using ‘individual’/’group’ and ‘people’ (explained by Lalor and Share (2009) to mean ‘client or service-user’ (pg.7)); Social Care Ireland (2015) exclusively uses ‘clients’; and HIQA describe Social Care as working with ‘people’. What is noticeable here is the phrase most dominant in practice, ‘service-user’, does not appear in any of the definitions of Social Care.

The significance of this analysis should not be overstated, however, it does point towards a lack of consensus amongst the key stakeholders in discourse concerning the profession and its work. As a generic profession, that includes a broad range of care sectors and contexts, it is hardly surprising that there is a variation in terminology used. From a RGT perspective, it is appropriate to ask if there is ‘sufficient consensus’ (Pare, 2014) to organise and act collectively. This research does not claim to provide an answer to that question, but it does help to refine the question. Namely, to what extent does consensus-building regarding terminology-in-use at local level contribute towards an objectively recognised professional identity? The significance of professional discourse in day to day use had added significance for Spoel and James
(2003) as they examined ‘midwifery’s uneasy trajectory of professionalization within the main health-care system’. Their research focused on the ‘rhetorical-ideological tensions within this policy genre between an alternative, women-centred discourse of health care and a more mainstream, medico-scientific discourse’ (Schryer and Spoel, 2005: 266). Put more simply, the newly established profession of midwifery (in Canada) struggled to have their professional value-base recognised within the wider medical context. This manifested itself in the contrasting terms and discourses of a shared workplace – the maternity hospital.

There are parallels between ‘midwifery’s uneasy trajectory of professionalization’ and Social Care’s tentative steps towards professional recognition. For both professions, there is a professional intent to establish a particular kind of professional relationship through daily discourse: one that emphasised giving birth as a natural experience rather than a medical procedure in the case of midwifery; and one that emphasises a practical, human engagement rather than a clinical assessment in the case of Social Care. RGT allows us to view the micro-genres of the immediate daily interactions of the workplace as important elements in the PIF of both professions because they establish distinct professional perspectives with ‘sufficient consensus’. Furthermore, an understanding of the macro-genres that provide a wider context for professional activity is necessary to identify the relationships that exist, and that are necessary for each profession to progress and remain relevant to those it serves. Both micro and macro-genres together provide enough conceptual stability based on internally generated regulation to enable ongoing responsive and proactive development of Social Care as a profession that is resilient, reflexive and responsive. Similar to the experience of the Canadian midwives, it will be necessary for Social Care Workers to proactively define and articulate their professional space as distinctive and complementary to those of other more established professions.
Chapter 8 Conclusion

8.1 Panning for Gold

There are two features of this research project that have remained constantly present throughout. They are the nebulous nature of the topic under investigation, and the congruence that exists between the elements of the research process. The core aim of the research is to deepen an understanding of the process of PIF in the context of a profession, that is, itself, at an emergent stage, in a socio-political landscape in which the traditional conceptualisations of ‘profession’ and ‘professional’ are challenged. My motivation for embarking on this research journey was a belief that by attempting to understand ‘the known’ (as experienced by Social Care Workers), the profession of Social Care might be better placed to emerge into the ‘unknown’. Having a professional involvement in the education and training of Social Care Workers for over fifteen years has convinced me of the fact that there is a distinct profession of Social Care, and that its emergence and definition as a profession in its own right is as much dependent on how it is experienced by the workers themselves as it is on the imminent arrival of registration and regulation through CORU.

The challenge of this research was to find a methodological approach that would capture the lived professional experience of Social Care Workers in a manner that would allow analysis of the process of their PIF. The level of congruence between aims, conceptualisation, methodology and analysis renders a neat, linear, tidy explanation of the research process futile and of little use to the reader. That does not mean that the research process is unexplainable. (Considerable effort has been made throughout the project to maintain transparency, Hiles in Given (2008); Porter (2007) and others). Before attending to the core aim of this concluding chapter, namely, to provide a summation of the research, a brief analogical description of the research process is offered. It is from the vantage point of having worked through the research process itself and having regard for its wider context within a Structured PhD programme that the analogy of ‘Panning for Gold emerges.
One of the most important steps in gold panning, as with research, is finding a suitable location. The best place to pan for gold is where scientific evidence has proven there to be an abundance of gold. Experienced gold-panners may spend hours in libraries researching geological excavations and projects that have occurred on a river or stream. Finding the research ‘location’ for this project involved more than hopeful enthusiasm regarding the research topic; the literature review surveyed the landscape, and the topographical detail of conceptualisation and historical detail raised the likelihood of nuggets of new knowledge being found.

A fundamental first step in panning for gold is gathering together all of the necessary equipment. The most obvious analogous comparison might be the pan itself, representing the data gathering methods, but, just as panning for gold is futile if reliant on a single tool, so too is research. The equipment necessary for panning includes suitable clothing and footwear that will support immersion in the stream; the theoretical framework in this research was chosen to sustain the research effort. A panning licence and awareness of environmental conservation issues equate to the ethical approval gained for this project.

The analogy continues with the process of panning itself. It is not a clean, ‘scientific’ process. It involves dipping the pan into the chosen stream and lifting a mix of soil and water. In spite of the preparation work and care in choosing the location, there is no guarantee of success. However, there is a sense of anticipation within the data gathering element of the research process that mirrors that of gold-panner’s first dip into the chosen stream. The panning process of skilfully swirling the mix of dirt and water in an effort to allow the heavier gold metal to naturally settle to the bottom reflects both the simplicity and complexity of the research process as it moved from data-gathering, management, coding and analysis. The coding process, for example, was comparable to the swirling process of panning that encourages the dirt and low-density particles wash over the side. A key piece of advice for gold-panners (and for researchers), is to bring along something to store your ‘gold’ in. The panners storage jars are the researchers emerging themes. If they are fit for purpose, they will ensure that nothing of value is lost and, more importantly, enable inspection that
distinguishes ‘fool’s gold’ (iron pyrite) from the real thing. And, at the end of the process, we may be left with a little speck of gold … if it panned out!

8.2 Chapter summary

The purpose of this chapter is to draw out what has been learned about the PIF of Social Care Workers in this research through the examination of workplace discursive practices. The theoretical reference-points of Rhetorical Genre Theory (RGT) and Enactment Theory have contributed to the rationale, and provided a framework for the research. The rationale is based on the fact that they both sit within a Social Constructionist theoretical base; the framework is provided through the establishment of a research position that is inclusive of contextual factors and sees these in a dynamic relationship with direct experience.

Having set out the nature of the research process in the ‘panning for gold’ analogy, this chapter now moves on to summarise the results of that research effort. The process of summarising the results necessarily involves taking a step back from the research activities of data gathering, coding and active analysis, in order to be able to survey the results, identify what is meaningful and set that meaning in context. Discussing their research into nursing leadership, Stewart and Usher (2007) argue that ‘the 21st century requires that we avoid the potential for engaging in philosophical theorizing but, rather, contribute to the real world of organizational life in productive ways’ (pg. 994). Whilst their overall emphasis is close to the research approach taken in this project, one could argue that in order to contribute effectively to the real world, philosophical reasoning is an essential component in understanding the forces that make the ‘real world’ real. This research does share a similar stance regarding the practical orientation of the research effort. Chapter 3, earlier, referenced Phronetic Social Science (Flyvbjerg, 2001; Flyvbjerg, Landman & Schram 2012) as a pragmatic approach to social research. The research presented here has been guided by that approach in how it favours, in particular, those research methods that engage with the social world in a contextually sensitive and flexible manner. The multi-case study approach adopted in this research is well placed to answer the four key ‘phronetic questions’ originally proposed by Flyvbjerg in his book ‘Making Social Science Matter’:
‘Where are we going? 
Who gains and who loses, and by which mechanisms of power? 
Is this development desirable?
What, if anything, should we do about it?’

(Flyvbjerg, 1998; 2006)

The results of this research endeavour find ‘real world’ meaning when they are presented as responding to these pragmatic questions. Stewart and Usher (2007) draw on a similar framing of results as they employ Carspecken’s (1996) ‘pragmatic horizon’ as their reference point. They argue that it allows the professional (in their case, nurse-leaders), to ‘recognize how their role is socially constructed and, as a result, helps them to reconstruct oppressive or ineffective or simply illogical ways of behaving’ (pg 994). The task of this concluding chapter, therefore, is to identify what has been learned through the research and to consider how that learning can contribute to the positive development of Social Care as a profession. The next section deals with what can be claimed in this qualitative research project; this is followed by presenting the key claims about PIF of Social Care Workers. The chapter concludes with discussion of the implications of these claims for the emerging profession and includes a model of ‘Functioning Professional Identity’ based on the overall findings of this research.

8.3 What can (or should) be claimed?

It is difficult to separate arguments about what can be claimed from those about what should be claimed in qualitative social research. In promoting Phronetic Social Science Flyvbjerg (2006) turns ‘what cannot’ be claimed from naturalistic qualitative inquiry into a goal of social science research: ‘We should promote social sciences that are strong where natural science is weak – that is, in reflexive analysis and deliberation about values and interests aimed at praxis...’ (Flyvbjerg, 2006: 38). He provides a useful classifying distinction between two approaches to Social Science research, namely, the ‘Epistemic Model’ and the ‘Phronetic Model’. The former sees the objective of social science research as being the discovery of theories and laws that govern social phenomena. Once discovered they can be employed towards solving social problems. The latter offers an alternative approach based on a belief that the former has not worked and does not work. The ‘Phronetic Model’ aims to build knowledge based on
‘value rationality’ which is arrived at through research that engages public deliberation. He summarises the approach as follows:

‘The phronetic model sees social scientists and social science professionals as analysts who produce food for thought for the ongoing process of public deliberation, participation, and decision making’ (ibid: 39).

In aligning this research with the Phronetic Model, this research views the research sample as both exemplars of, and creators of meaning. A strength of this approach is the research relationship between ‘sample’ and investigator. What distinguishes this research more clearly from the Epistemic Model is the nature of the claims being made at the end of the research process. Peshkin (1993) is impressed with how Vidich and Bensman (1968) characterised the role of the researcher as one whose success rests on his/her advancing of a particular problem along an infinite path. In that sense, there are no claims to be made, or, as these researchers put it, ‘no final accumulation and no final solution’ (ibid in Peshkin, 1993: 28). Fittingly then, the outcomes of this research are not presented as ‘claims’ but as ‘meaningful points’. As Peshkin put it: ‘The travels we take down the ‘infinite path’ can only be facilitated by a type of research that gets to the bottom of things, that dwells on complexity, and that brings us very close to the phenomenon we seek to illuminate’ (pg. 28). The researcher is required ‘to ponder and reflect on the data collected so as to find the meaning within’ (Hunter et al, 2002: 388).

8.3.1 Limitations in meaning-making

The ‘meaningful points’ identified below are based on the discussion of the themes identified in the last chapter that, in turn, emerged from the analysis of the individual cases. Before discussing these ‘meaningful-points’ it is important to acknowledge the limitations of the study. They fall into two categories, namely, those associated with the research design and those specific to how this research project was conducted.

The first category includes limitations relating to multi-case study. The method was critiqued in Chapter 4 and, on balance, was chosen because for the purposes of this research, the advantages outweighed the limitations. The limitation of multi-case study are well aired by Yin (2009), Stake (2005) and others who caution about what can be generalised or transferred from the findings. A related limitation concerns the
precise definition of the ‘unit of analysis’ (deVaus, 2009). Distinguishing a case as ‘event’ from a case as ‘person’ is not an exact science, and sustained efforts to maintain clarity about what is being studied is necessary throughout this type of study.

The second category relates to limitations that are more specific, though not unique, to this study. Firstly, there is a degree of complexity in the theoretical frame that holds the research. Although there was a rationale provided for the use of two complementary theoretical reference points, RGT and Enactment Theory, balancing their respective contribution to design, method and analysis proved challenging for the researcher, and may inhibit clarity for the reader. A second limitation in this category is the unwieldy nature of the data generated through the mix of data gathering tools. Notwithstanding, the rationale for their use, set out in Chapter 4, the Moodle Diaries and Conversational Interviews were significantly dependent on the communication style of the individual participants. In addition, the Policy Documents employed as data were also dependent on the individual participant’s choice to include them. Although these methods promoted the congruence between topic, theoretical underpinnings and methodology, future research may choose to create a data framework that produces a more consistent flow of data across cases and sources. A final limitation worth noting, relates to the analysis and interpretation of the data. A strength of this project is its attempt to deepen our understanding of an emerging professional area of work. However, Social Care is a generic profession, resistant to definition (Trevithick, 2000), emerging at a time when the conceptualisation of what is meant by ‘profession’ is being challenged (Noordegraaf, 2007). Therefore, any attempt to arrive at clear ‘conclusions’ about how Social Care professionals establish their professional identity is likely to be limited by contextual complexity in terms of conceptualization, policy and practice.

8.3.2 Strengths in (research) adversity.

The rationale for this research, stated at the outset, was, and continues to be based on the very complexity outlined in the final limitation above. The ‘moment in time’ as the profession emerges, albeit in challenging ideological and economic environmental conditions, offers an opportunity to engage in that emergence process. By deliberately choosing a topic, PIF, this research offers an opportunity and a model that invites key
stakeholders, and in particular Social Care Workers themselves, to be more than bystanders in the establishment of the profession. The twin theory framework of RGT and Enactment Theory opens possibilities to move more freely between micro and macro perspectives. The worker is viewed as central and proactive, and, cast as such, promotes a level of engagement both in the immediate discourses of professional activity and in the structural discourses within which the profession is located. Both contribute to the PIF of the individual worker and of the Social Care profession in general. Although generalisability of findings is (rightfully) limited, understanding the PIF of the Social Care Workers in this study, at this time, is likely to bring us closer to understanding and defining the profession it self.

8.4 ‘Meaningful points’ about PIF of Social Care Workers.

A deeper understanding of the PIF of the Social care Workers at the centre of this study is expressed here as ‘meaningful points’. This section identifies these points and discusses why they are meaningful. This discussion is two-directional; meaning is derived by establishing a link back to the data as research evidence; it also looks onward from the research to examine possible implications for practice. This connection between research findings and ‘the real world’ is consistent with the Phronetic Social Science approach (Flyvbjerg, 2009) that informs this study, in that it completes the circle between topic choice, research decision-making and consideration of finding.

Fig 8.1 Two directional meaning
Five Meaningful Points are discussed here and these might be seen as conclusions in conventional research terminology. They do not ‘map on exactly to the ... themes presented’ (Braun and Clarke, 2013: 311) in the previous chapter. Like Braun and Clarke, ‘the discussion of these themes gives rise to these overall conclusions...’ (ibid). The points themselves are not strongly bordered; they overlap in places and together constitute a deepening holistic understanding of Social Care Professional Identity Formation.

**Point 1: PIF involves multiple factors mediated through written and verbal workplace discursive practices.**

The previous chapter discussed the theme ‘Policy, Power and ‘situated’ professional identity’. That theme had emerged from analysing the data that centred on how the Social Care Workers who took part in this study reported their experiences of policy in their practice. Enactment Theory (Ball, 2006, 2009) prompted examination of how the workers adapted and adopted policy in their working lives. RGT led the analysis towards consideration of how policy is communicated to the Social Care workplace. Issues of funding, monitoring, accountability, advocacy and professional recognition surfaced as impacting on how Social Care Workers viewed themselves in their professional role. Implied in the theme’s title is that the relationship between Policy and the PIF of individual workers, (and by extension, the profession) is a power relationship. Clegg and Pitsis (2012) provide a useful summation of Foucault’s contention that ‘rather than being a resource that can be exercised... power is inseparable from its effects’ (pg. 73). They consider the implication of this view as guiding the focus of analysis (of power) to

> ‘the play of techniques, the mundane practices that shape everyday life, structuring particular forms of conduct and, more especially, structuring the ways in which people choose to fashion their own sense of self...’ (ibid: 74).

If one replaces ‘everyday life’ with ‘everyday professional life’ and ‘sense of self’ with ‘professional identity’, it becomes clear that if Social Care Workers are to understand their role in the workplace, they must give attention to the relationships that exist between their everyday actions and the power dynamics through which their actions occur. The data gathering methods employed in this research provide a model for developing professional reflexivity (Fook, 2002) beyond this research environment.
Point 2: PIF involves varying degrees of conscious action by the professional Social Care Worker.
A worker typology of Policy Educator, Policy Proposer, Policy Enactor and Policy Follower is graphically represented in Chapter 7, Fig. 7.5: ‘Engagement with Policy’. In it, the ‘worker types’ are positioned between two axis, a vertical one representing a professional stance ranging from ‘Passive’ to ‘Pro-active’, and a horizontal one representing a professional position ranging from ‘Individual’ to ‘Team’. The ‘worker types’ were identified by collating references from the Interviews and Diaries that related to how the Social Care Workers engaged with policy. Such a typology may prove useful in future Professional-Development work as it offers a reflective starting point for the professional worker; it also offers a possible frame for further research into policy/practice relationships. As a ‘Meaningful Point’ here, it provides an overview of the current dispersed nature of PIF of the Social Care Workers in this study. Although it is not possible to present a generalizable conclusion based on the evidence of this study, there is an interesting feature regarding PIF that is visibly highlighted in the diagram (Fig 7.5), namely, the more pro-active the stance, the more individual the position. The corollary of this, that collective engagement with policy tends to be as passive receivers of policy directives, speaks more loudly of how the workers in this study perceived their relationship with policy.

Porter (2007) summarises a debate concerning whether sociology was an appropriate subject for nursing students’ education and training or more broadly put, whether sociology is a core part of nursing knowledge. The question implied in that debate is similarly relevant for Social Care Work, namely, if it is part of the professional role to consider structural issues and their impact the work. The definitions of Social Care Work reviewed in this research (Lalor and Share, 2013; JCSCP, 2002; CORU, 2015) do not offer a definitive answer. The QQI Social Care Awards Standards (2015) donate considerable space to Sociology and Social Policy theory and its application to practice as it defines the education and training curriculum for professional Social Care Work. This research enables us to ask a more specific question about Social Care Work, namely, to what extent do (or should) the Social Care Worker have a professional
Point 3: Social Care PIF patterns are present but vary from worker to worker.

In their review of studies that researched teacher Professional Identity, Beijaard et al (2004), found that Professional Identity Formation manifested as ‘an ongoing process of interpretation and re-interpretation of experiences’ (pg. 122). That implies that it is a dynamic process, one that is neither stable nor fixed. Strong parallels exist between this view and that of Carpenter’s (2011) contention that ‘Genres both reproduce and enact our realities, shaping us even as we shape them’ (pg. 3). Genres as social action enable us to more readily identify ‘stabilised-for-now or stabilized-enough sites of social and ideological action’ (Schryer, 1993 in Pare, 2014: 88). This, in turn, allows us to begin to identify patterns of PIF behaviours shared by professionals because the patterns are not required to match exactly. They appear as ‘tendencies’ rather than rigidly adhered to practices, as ‘perceptions’ rather than fundamentalist beliefs.

The professional self-image of the Social Care Worker as ‘practical, on-the-ground responder to presenting needs’ emerged as a significant element of how the workers in this study viewed themselves in their professional role. This was exemplified by Kellie’s assertive contribution in the multi-disciplinary meeting when she described herself as ‘the only person in the room who actually works with this young person, on the floor’ (Kellie, Interview). The other professionals also worked with the young person, but the ‘on the floor’ aspect of the Social Care Worker gave her a unique professional perspective. The ongoing ‘professional closeness’ of worker and client is identifiable as a ‘stabilized-enough site of social and ideological action’ (Schryer, 1993 in Pare, 2014: 88), in this case professional action. Recognising it as such offers the emerging profession an opportunity to identify for itself a defining professional space. The identification with the ‘practical, on-the-ground/floor’ professional perspective can be usefully viewed as the ‘gentrification of situation’ (Pare, 2014). The implication of this view for Social Care Work is that because it is a socially constructed conceptualisation, it is likely to be identified with by workers across the profession. This is especially important at the emergent stage of such a generic profession because it establishes common ground across sectors that fall under the broad Social Care
umbrella. It can also act as a catalyst for the professionals themselves to play a proactive role in the establishment of the profession.

**Point 4: Social Care has weak ‘brand recognition’ in Policy Documents that are directly related to, and govern its practice.**

A much larger content analysis of policy documents related to Social Care Work would be required to establish relative ‘brand recognition’ amongst professions involved in providing care for vulnerable adults and children in Ireland. The use of computer assisted qualitative data analysis software (CAQDAS) in this research revealed a low level of usage of the terms ‘Social Care’ and ‘Social Care Worker’ relative to other professions working in the field. The most obvious reason for this is the fact that Social Care is not as yet a statutory regulated profession, and therefore policy documents emanating from statutory sources are unlikely to afford it the same status as those professions that are. To rely solely on this explanation serves only to postpone consideration of other factors that contribute to these low levels of brand recognition and to how Social Care is regarded as a profession in the first place.

At time of writing, the Social Care Registration Board has been established (27th March, 2015) under the auspices of CORU (The Health and Social Care Professionals Council). According to the Council’s website, ‘It is expected that the register for Social Care Workers will open in 2017’ (CORU, 2015). This ‘moment in history’ represents an opportune time to undertake a longitudinal study of how the recognition and regard of the Social Care Work profession is reflected in policy documents that govern and guide its practice.

Deeper analysis of the Social Care Workers’ experiences in this study revealed ambivalence towards the profession, reflected in inconsistency of job titles, variability of professional autonomy and responsibility, and a lack of clarity in job descriptions and work contracts. The latter raising the most serious concerns, illustrated by a worker in one instance fighting to have her degree level qualification in Social Care recognised by the employer who facilitated her to complete it, and in another case, by qualified workers being employed as Social Care Workers for part of the working week and as Care Assistants for the remainder. The proliferation of titles, grades, contractual arrangements and job descriptions may need to be considered in the context of a neo-
liberalist hegemony (Apple, 2002) in which market interests take precedence over professional autonomy and where professional practice itself is reduced to a set of traded competencies.

This study also revealed problematic linguistic and definitional issues with the name of the profession and with how it is used. This has knock-on impacts for the PIF of those who regard themselves as Social Care Workers. The difficulties are twofold; firstly the recognition of Social Care as a term and as a profession in its own right appears to be hampered by being subsumed into the broader term ‘Health and Social Care’. For example, of the twelve professions to be regulated under the Health and Social Care Professionals Council, ten are deeply rooted in Health Care and operate strongly from a medical model of care provision. Of the remaining two, Social Care and Social Work, the latter according to Lalor and Share (2013) ‘is the older profession and has a considerably longer education and training history, based on the British model’ (pg. 7). The same writers go on to say that ‘In truth, the two professions are closely related and the distinction made in Ireland is less pronounced in other jurisdictions’ (ibid). Secondly, the inclusion of the word ‘care’ in the title of the profession brings with it the challenges associated both with its definition and its positioning within a professional context as seen in Leininger’s (in Bassett, 2004) attempts to distinguish between ‘Generic care’ and ‘Professional caring’. Taken together, these linguistic and definitional issues mean that the title of the profession ‘Social Care’ presents as problematic in terms of the identity of the profession and its professional workers. Further alignments with Social Pedagogues and Social Educateurs, discussed in Chapter 3, and their representative bodies across Europe may be helpful in claiming and naming a distinct professional space.

**Point 5: The level of written discursive activity appears as a major element of professional Social Care Work.**

In her attempt to distinguish between generic and professional care, Leininger describes the latter as ‘those cognitively learned humanistic and scientific modes of helping or enabling an individual, family, or community to receive personalised services’ (pg. 14). Indeed the function of her attempt to distinguish ‘generic’ and ‘professional’ care in the context of the nursing profession is aimed at developing congruence between the two rather than emphasising their separation. Her
conceptualisation of ‘cultural care’ is one that might serve the emerging profession of Social Care well as professionalisation evolves. The evidence of this research is of a widening gap between ‘generic caring’, seen as ‘culturally derived interpersonal practices...considered essential for the health, growth and survival of humans’ (Reynolds and Leininger, 1993 in de Chesnay, 2005: 82) and ‘professional caring’ in the Social Care context. The reason for this may be due to a shift in emphasis in the practice of professional care giving in the Social Care sector. The administrative workload associated with daily practice was universally seen as burdensome by the Social Care Workers in this study. The workers acknowledged the necessity of good record keeping in order to ensure clear planning, progress, communication and evaluation of their work. Their consistent reporting of complexity, bureaucracy, duplication, and futility as features of the administrative aspects of their professional duties gives further credence to Howard’s (2012) suggestion of a fundamental shift in the nature of Social Care Work where, ‘the empathic, caring worker whose modus operandi is spontaneity, humanity and going the extra mile, may well have to compromise on this for the sake of completing paperwork’ (pg. 42). This shift in emphasis may be viewed objectively as ‘compromise’ by Howard, in the context of tracing the historical development of Social Care Work, however, it manifests as a defining element of professionalism here, within the socially constructed PIF of the individual worker.

The fact and impact of substantial administrative workloads within the overall Social Care Work role invited deeper analysis in this research as to how these administrative workloads inform the professional identity for the worker. Such analysis needs to take account of the wider ideological shift that promotes and demands that administrative duties become central to the professional role. The ideologically-based insights (Apple, 2002; Harris, 1998; Kirkpatrick, 2006 and others) discussed in the Literature Review, find practical expression in the Social Care Workplace as recorded by the participants of this study. The over-prescriptive nature of recordkeeping and administrative duties introduce new forms of control over the worker; the trend towards ‘proceduralisation and commodification of the social work labour process’ (Harris, 1998: 858); and the re-definition of quality from one based on process to outcome (Ecclestone, 2004; Ball,
A passing remark by one of the research participants related to work being done by her employing organisation concerning the ‘quantum’ of administrative work within the overall workload of frontline staff. This may provide a useful starting point towards ensuring that Social Care professionally manages the administrative elements of its tasks, rather than being managed and even defined by them. The strong link between monitoring practice and record keeping identified by the workers in this study points towards the necessity for monitoring bodies to not only ensure that paperwork is completed, but that it is not impinging on the quality of professional care.

8.5 A model for practice: ‘Functioning Professional Identity’.

At the beginning of this chapter Phronetic Social Science was referred to as having informed how this research endeavour was undertaken. The ‘Meaningful Points’ presented above reflect a practical orientation whereby conclusions are seen more as points of departure for further work rather than answers or endings. This is in line with what Thomas (2012) sees as the ongoing connection between research, policy and practice. A research function is to present findings, invite and frame feedback ‘in terms likely to provoke debate and discussion’ (pg. 9). Like Thomas, it is hoped that this research and its findings are an invitation, ‘beginning a wider conversation’ (ibid). Thomas’ reference point for how ‘Real Social Science’ research proceeds is Bent Flyvbjerg who states that, as researchers, ‘we must effectively and dialogically communicate the results of our research to our fellow citizens and carefully listen to their feedback’ (Flyvbjerg, 2006: 42).

Thomas goes on to suggest that dissemination of research in the form of a large research thesis is unlikely to engage the interest of busy professionals even if the subject matter is relevant to them. He explains how he has adopted summary pages containing salient points from research findings and conclusions. That, however, is not the intention here. It is important to keep the broader point in mind, namely that creative ways to engage stakeholders in ongoing debates about praxis are integral to the research process. What follows (Fig 8.2) to conclude this thesis, therefore, is a more creative ‘meaningful point’. The ‘Professional Identity Mixing Board’ prototypes a reflexive tool for the Social Care Worker. The prototype is based more generically on
the evidence, analysis and findings of this study and invites professional Social Care Workers to give it meaning, as only their professional practice experience can. It is aimed at promoting active engagement of the worker in understanding their PIF as an ongoing and integral part of their professional life.

**Fig 8.2 Reflexive tool prototype**

<table>
<thead>
<tr>
<th>Professional Identity Mixing Board - Fine-tuning work</th>
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</thead>
<tbody>
<tr>
<td><strong>External Policy</strong></td>
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<tr>
<td>Enactor</td>
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<tr>
<td>Implementer</td>
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</tbody>
</table>

Any attempt to capture the essence of Professional Identity Formation is challenging, and all the more so when the profession is generic in nature. This research has sought to hold open the research space that allowed examination of the elements that contribute to professional identity and its formation. The research followed a social constructionist route because, like Cohen et al (2012), I ‘agree with Weick (1995) when he suggests that people are part of their own environments, that through their actions they contribute to the creation of the materials that become the constraints and opportunities that they face’ (pg. 409). With that epistemological stance, one has to recognise that the deeper understanding of PIF through workplace discursive practices cannot be definitive. It can, nonetheless, be useful in contributing to clearer thinking about an emerging profession, namely Social Care, as it enters a world where professionalism itself is ideologically constrained and even defined. The reflexive tool presented above is based on the ‘signposts’ that emerged by combining the socially and contextually constructed professional world views of the Social Care Workers at the heart of this multi-case study. There is no fixed combination that guarantees
professional success; the multiple opportunities to adjust, combine, and discern elements of professional life reflect the fluidity of ‘the mix’ that is close to Schon’s (1985) notion of ‘flow’. It invites and, hopefully, can empower Social Care Workers to engage proactively in the definition and development of their profession.

8.6 A Reflexive Comment

This research was conducted in the context of a Structured PhD Programme at U.L.’s Department of Education and Professional Studies. The module content of the early part of the programme was carefully selected in order to broaden and deepen theoretical knowledge and enhance academic skill. The emphasis on group learning afforded me the opportunity (and challenge) to articulate my developing research. Together, content and process helped me to find my ‘voice’ as researcher. My research philosophy is now more confident in its commitment to searching for understanding in places and in ways that allows ‘evidence’ to reveal itself. Once revealed, my research responsibility was to hold that evidence so that its meaning could be explored and coherently expressed.

One of the characteristics of the Social Care Workers in this study, and perhaps of Social Care Work itself, is ‘professional closeness’, the idea that professional practice takes place in a shared space between worker and client; my experience in completing this research project has convinced me that the Qualitative, Phronetic Researcher inhabits a similar shared space with the research participants. It has been a privilege to occupy that space. Both research and professional ‘shared spaces’ are about empowerment. It is my hope that this research contributes towards the empowerment of an emerging Social Care profession in finding and expressing its identity from within.
Bibliography:


Irish Jobs.ie (2014) Social and Not for Profit jobs (on-line) [Available at http://www.irishjobs.ie/Jobs/Social-Not-for-Profit/]


McHugh, P. and Byrne, M. (2014) Survey of the research activity, skills and training needs of Health and Social Care professionals in Ireland, Dublin: Health Service Executive (HSE); [Available at http://hdl.handle.net/10147/202929].


Appendix 1
Recruitment Letter to colleges

Dear ........................................ (Programme Co-ordinator/ Head of Dept. as appropriate)

I am undertaking research as part of my PhD studies at University of Limerick under the supervision of Dr. Barry Coughlan, Assistant Director of Clinical Psychology, Department of Psychology. The research project is entitled ‘The role of Workplace Discursive Practices in the Professional Identity Formation: A collective case study of ‘New-to-Practice’ Social Care Workers’.

I would be grateful for your assistance in the recruitment process of the ‘cases’ according to the criteria set out in Fig 1 below. What I require at this stage is a sample list of 10 Social Care Practice Placement Agencies used by your college. The purpose of this request is merely to enable me to generate a contact list of Social Care Agencies in your geographical region. From this list I will identify and recruit individual cases for my research. The information that you share with me will only be used for this purpose. Please note that you are not required to contact the agencies directly or to ensure that they will provide research candidates that meet the sample requirements.

Fig 1: Sample Profile.

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Education and Training</th>
<th>Job Title/Role</th>
<th>Professional Support</th>
<th>Work context</th>
<th>NTP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description</td>
<td>Must hold a B.A. in Applied Social Studies in Social Care or equivalent.</td>
<td>Must be employed specifically as a Social Care Worker role, with this role reflected either directly or indirectly in the job title.</td>
<td>Must have Professional Supervision.</td>
<td>Must work in an agency that provides direct Social Care.</td>
<td>Must have qualified within the last 3 years.</td>
</tr>
<tr>
<td>Additional criteria</td>
<td>Sample must include graduates from at least 5 different colleges* with no more than 2 from any one college.</td>
<td>This may be reflected either in the job title or the contract of employment.</td>
<td>Either provided by or officially recognised by the employer.</td>
<td>A range of social care settings (S.U. groups) is required: e.g. RCC, Disability, Elder Care, Educational and Community settings, Homelessness etc.</td>
<td>With either level 7 or 8 qualification.</td>
</tr>
</tbody>
</table>
This research study has received Ethics approval from the Education and Health Sciences Research Ethics Committee (2014_02_02_EHS). If you have any concerns about this study and wish to contact someone independent you may contact: Chairman Education and Health Sciences Research Ethics Committee EHS Faculty Office University of Limerick Tel (061) 234101

If you have any questions about any aspect of this request, please do not hesitate to contact me at jmchugh@carlowcollege.ie or by phone at 059 9153200.

Yours sincerely,

_________________________
John McHugh
PhD Candidate,
Dept. of Education and Professional Studies,
University of Limerick,
Limerick
Appendix 2(a)
Recruitment Letter to workers

Dear .................................................. (new-to-practice Social Care Worker)

I am undertaking research as part of my PhD studies at University of Limerick under the supervision of Dr. Barry Coughlan, Assistant Director of Clinical Psychology, Department of Psychology. The research project is entitled ‘The role of Workplace Discursive Practices in the Professional Identity Formation: A collective case study of ‘New-to-Practice’ Social Care Workers’.

The aim of the research is to examine Professional Identity Formation of Social Care Workers through multiple case study research. I am in the process of recruiting 6 – 8 cases that match the criteria set out below. In brief, participants are asked to journal aspects of their professional work and to be interviewed by myself. I am asking that you consider partaking in the research project and would be happy to meet with you or to discuss what is involved in more detail. Your interest and/or participation in the research is treated in a confidential manner throughout and no individual or agency is named identified in the final report.

Sample Criteria

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Education and Training</th>
<th>Job Title/Role</th>
<th>Professional Support</th>
<th>Work context</th>
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<td>With either level 7 or 8 qualification.</td>
</tr>
</tbody>
</table>
This research study has received Ethics approval from the Education and Health Sciences Research Ethics Committee (quote approval number). If you have any concerns about this study and wish to contact someone independent you may contact:
Chairman Education and Health Sciences Research Ethics Committee
EHS Faculty Office
University of Limerick
Tel (061) 234101

If you have any questions about any aspect of the research, or if you are interested in participating, please contact me at jmchugh@carlowcollege.ie or by phone at 059 9153200.

Yours sincerely,

_________________________
John McHugh
PhD Candidate,
Dept. of Education and Professional Studies,
University of Limerick,
Limerick
Appendix 2(b)
Consent for Participation in Case Study Research

Research Project Title: The role of Workplace Discursive Practices in the Professional Identity Formation: A collective case study of ‘New-to-Practice’ Social Care Workers

I volunteer to participate in a research project conducted by Mr. John McHugh PhD student in the Department of Education and Professional Studies at University of Limerick. I understand that the project is designed to gather information about Professional Identity Formation of Social Care Workers and that I will be one of 6 people partaking in this case study research.

1. My participation in this project is voluntary. I understand that I will not be paid for my participation. I may withdraw and discontinue participation at any time without penalty.

2. I understand that as a ‘case’ there will be in depth analysis of my work practices, with particular reference to written and oral communication in the professional context. This will involve my agreeing to keep a Guided Journal for a specified short period. I understand that my journal entries are part of the overall data and that I have the right to abstain from entering information that I do not feel is appropriate.

3. Participation also involves being interviewed by the researcher. Interviews will last approximately 45 minutes – 1 hour. Notes will be written during the interviews. An audio tape of the interview and subsequent dialogue will be made. If I don’t want to be taped, I will not be able to participate in the study. If, I feel uncomfortable in any way during an interview session, I have the right to decline to answer any question or to end the interview.

4. I understand that the researcher will not identify me by name in any reports using information obtained from this research process, and that my confidentiality as a participant in this study will remain secure. Subsequent uses of records and data will be subject to standard data use policies which protect the anonymity of individuals and work agencies.

5. I have been informed of the following:
   ‘This research study has received Ethics approval from the Education and Health Sciences Research Ethics Committee (2014_02_02_EHS ). If you have any concerns about this study and wish to contact someone independent you may contact the Chairman Education and Health Sciences Research Ethics Committee at this address
   EHS Faculty Office
   University of Limerick
   Tel (061) 234101’

6. I have read and understand the explanation provided to me. I have had all my questions answered to my satisfaction, and I voluntarily agree to participate in this study.
7. One copy of this consent form is kept by the Research Investigator, I have also been given a copy of this consent form to keep.

Signature of Research Participant: ……………………………………………………………..
Date:………………………………

Printed Name of Research Participant: …………………………………………………………

Signature of the Research Investigator: …………………………………………………………
Date:………………………………

For further information, please contact: Dr. Barry Coughlan (Principle Researcher) Assistant Director of Clinical Psychology, Department of Psychology, Room E1-031, Faculty of Education & Health Sciences, University of Limerick, Ireland. Email: Barry.Coughlan@ul.ie Tel: 00-353-61-234345
Appendix 3
Interview Guide Part 1

Conversational Interview Guide (a)

- Contractual arrangement e.g., ECL, P/T, Agency, etc.
- Role within team?
- Make up of team?

- Why Social Care?
- Understanding of Social Care?
- Understanding of profession?
- Understanding of SC as profession?

- Why this agency?

- Qualifications:
  - When?
  - Where?
  - What?
  - Required for job?
  - Recognised as qualification?
  - Used to define job?

- Profile of Worker

- Profile of Agency

- Model of care?
- Service user group?
- Supports offered?
- Professional/career development

- Key aspects used?
- Aspects not used?
- Aspects not used but could be?
- Gaps in professional training?
Appendix 3
Interview Guide Part 2
Appendix 4
Moodle template including Journal Headings

Professional Writing and Talking in daily practice

Journal Entry: 10 January 2014

Communication Type:
Description of activity:
Reflection on activity:
Professional Role:
Professional Role Reflection:
Document Template 1:
Document - Policy/Guidelines/Procedures:

You are logged in as John McHugh (Logout)

Moodle Docs for this page
Appendix 5
Coding Headings (Sample code sheet)
Appendix 6
Ethical Approval

Dear Barry

Thank you for your amended Research Ethics application which was recently reviewed by the Education and Health Sciences Research Ethics Committee. The recommendation of the Committee is outlined below:

**Project Title:** 2014_02_02_EHS The role of Workplace Discursive Practices in the Professional Identity

**Formation:** A collective case study of ‘New-to-Practice’ Social Care Workers

**Principal Investigator:** Barry Coughlan

**Other Investigators:** John McHugh

**Recommendation:** Approved until September 2015

Please note that as Principal Investigator of this project you are required to submit a Research Completion Report Form (attached) on completion of this research study.

Yours Sincerely

Anne O’Brien

Anne O’Brien
Administrator, Education & Health Sciences
Research Ethics Committee
OllSCOIL LUIMNIGH / University of Limerick
Guthán / Phone +353 61 234101
Facs / Fax +353 61 202561