Teams Interrupted: Social Work Teams as Communities of Practice and Coping during COVID-19

Laura L. Cook and
https://orcid.org/0000-0002-9882-2365
Sara Carder
https://orcid.org/0000-0002-0812-840X

Abstract

If COVID has taught us anything … the biggest thing is how important that connection with each other is. (Social Work Team Manager)

This chapter considers the functioning of social work teams during the COVID-19 pandemic. Existing research suggests that the team plays an important role in child and family social work. Informal conversations in the office act as a source of knowledge, supporting decision-making, and practice. Supportive relationships with colleagues also help social workers to manage the emotional challenges of child welfare. However, during the pandemic mandatory home-working, coupled with increasingly hybrid working practices, presented both challenges and opportunities for social workers' connection with colleagues. Drawing on two research studies carried out by the authors, this chapter examines the impact of the pandemic on child and family social work teams in England. We introduce two concepts: Wenger's (1998) Communities of Practice and Korczynski's (2003) Communities of Coping as a theoretical framework for conceptualising the functioning of social work teams. We consider the legacy of COVID-19 for social work teams, offering recommendations for supporting effective teamwork in the increasingly hybrid, post-pandemic world.

The social work team as a Community of Practice

Etienne Wenger's (1998) concept of Communities of Practice (CoP) emphasises the role of social interaction in the construction and transmission of knowledge. For Wenger (1998, 73) a CoP consists of three defining characteristics: domain, community, and practice. Practice development occurs in a social context as group members are drawn together by a joint enterprise or activity known as a 'domain', and through mutual engagement over time form a 'community' in which a shared repertoire or 'practice' is created (Wenger 1998, 73). Wenger observed one such CoP forming among nurses, where lunchtime discussions in the cafeteria served as 'one of their main sources of knowledge' about how to care for patients. These informal discussions conveyed the tacit, shared repertoire of their highly specialist practice. Hearing and watching experienced workers share anecdotes and ways around recurrent problems enabled less experienced members to master the skills of the trade from core members.

There are distinct parallels between CoP and the functioning of social work teams, which have been recognised as a key space for decision-making and practice expertise in child welfare social work (Helm and Roesch-Marsh 2017; Helm 2016; Saltiel 2016). Like Wenger's nurses, practice

within social work teams consists of highly specialised, often localised expertise with 'privileged knowledge' of the needs of families in the neighbourhoods and communities they serve (Jeyasingham 2018, 87). Conversations and 'backstage case talk' in the office helps workers to 'frame' complex information (Helm 2016, 26), assess risk (Saltiel 2016) and make sense of complex or 'borderline' cases in child welfare (Cook and Gregory 2020; Doherty 2017). For this reason, the team has been identified as an essential part of the 'ecology of judgement' in social work (Helm and Roesch-Marsh 2017). Crucially, research has also shown that like Wenger's nurses at lunch, social work teams develop specific artefacts, such as practice-based stories to codify and transmit 'practice wisdom' among social workers, such as how to recognise subtle signs that a child may be at risk, or how to raise a sensitive topic with a family (Cook 2020).

Central to the concept of CoP is a model of social learning (Lave and Wenger 1991). Through social interaction with members of the CoP, learners master the skills of the trade from core members—a process which Jean Lave and Etienne Wenger (1991, 29) terms 'legitimate peripheral participation'. Similarly, the social work team provides key learning opportunities for less experienced members, such as social work students, newly qualified social workers (NQSWs) and new team members. Vicarious learning has been identified as a core component of social work education, where 'learning on the job' and exposure to the 'practice wisdom' of experienced team colleagues is key to professional development (Scourfield and Pithouse 2006, 331). Shadowing experienced workers, co-working cases, or simply listening to experienced workers talk about their work provides opportunities for legitimate peripheral participation (Lave and Wenger 1991). In this way, social work teams can provide a CoP for social workers, supporting professional socialisation and the development of practice.

The social work team as a Community of Coping

Alongside knowledge and practice, social work involves an additional component - emotional labour (Winter et al. 2019). We therefore introduce a second, related concept to our framework for understanding social work teams; Korczynski's (2003) Communities of Coping.

In his ethnographic study of call centres in Australia and America, Korczynski (2003, 58) observed that support from team colleagues allowed workers to 'survive the systematic tensions of their working days'. He noted that responding to customers, particularly those who were hostile, involved emotional labour, a concept originating from Hochschild's (1983) seminal study of airline attendants. Hochschild observed that airline attendants managed their display of emotions to fit with the 'feeling rules' of the workplace, such as feigning a smile when dealing with a difficult customer. Similarly, Korczynski's call centre workers engaged in emotional labour as they made the adjustment needed to respond with polite enthusiasm to irate customers. Although Hochschild's work briefly touched on what she termed 'collective emotional labour' the focus was largely on individual workers. Korczynski therefore extended Hochschild's concept to emphasise the collective aspect of the emotional labour of front-line service work.

For Korczynski's call centre workers, emotions engendered by customers could 'rebound round the whole team' (Korczynski 2003, 66). In response to this, workers both received and provided support to each other, forming Communities of Coping (ComC). These ComCs were informal, spontaneous, and outside of management control, where workers drew on humour, camaraderie,

venting, and reassurance to manage the emotional demands of their work. In her study of Danish family law case workers, Stroebaek (2013, 381) noted that ComC were 'created through coffee break encounters', in the 'backstage' areas of the workplace including kitchens and smoking areas, away from the gaze of clients and managers. Whilst Korczynski (2003, 68) argued that ComC play a vital role in managing the emotional demands of the work, he also identified ComC could become 'communities of antipathy' where cynicism and derogatory language could be used to cope with emotionally painful encounters with customers.

There are distinct parallels between ComC and the functioning of social work teams. Emotional labour has increasingly been recognised as part of social work practice. The intrusive nature of their work with families means that social workers often experience hostility and anger in their day-to-day work, requiring a professional, tempered response. As Winter et al. (2019, 230) observe, social work teams are: '[--] essentially spaces in which social workers can share with peers aspects of emotional labour and its impact'.

Existing research suggests that the team provides a 'secure base' for social workers (Biggart et al. 2017; Winter et al. 2019), helping them to process and manage these emotional demands. The shared office and backstage areas such as kitchens and cigarette breaks, can provide the conditions for empathic ComC for social workers. However, like Korzsynski's call centre workers, social work teams can also adopt collective cynicism and antipathy. For instance, teams may use gallows humour (Sullivan 2000) or cynical talk about families (Cook 2020) as a way of coping. We now outline our research on social work teams, using the concepts of CoPs and ComC to consider how teams functioned during the COVID-19 pandemic.

The research

On Monday 23 March 2020, the English government announced a period of lockdown in response to COVID-19. Excepting essential statutory child protection duties, social workers in England were directed to work from home. While the use of digital technology and agile working is not entirely new to social work teams, the pandemic rapidly accelerated the hybrid model of virtual and face-to-face practice. Below we outline two research studies undertaken in England, which taken together provide a detailed qualitative picture of social work teams during the first year of the pandemic.

Study 1 was undertaken between March–June 2020 and was part of a wider study on the retention of experienced social workers in child protection social work. The research was granted ethical approval from the University of East Anglia (UEA) Research Ethics Committee, the Association of Directors of Children's Services and, where required, from research governance panels of participating local authorities. At the start of the pandemic, the author was carrying out interviews with social workers from several local authorities in England focusing on their career histories. However, as the pandemic hit, social workers experienced rapid changes to their working conditions and found themselves isolated from their team colleagues. They naturally began to talk about these experiences with the researchers. An amendment was approved by the Ethics Committee to gather additional data on social workers' experiences during the first wave of the pandemic. Social workers were therefore interviewed about their experiences of practice in the context of COVID-19 and the findings from this data are reported in this chapter. Semi-structured

telephone interviews were conducted with 31 child and family social workers from nine local authorities across England. To capture a range of experiences, the sample included social workers across a range of roles and levels of seniority. The sample included: two service managers, team managers, ten senior social workers and nine social workers. The interviews were recorded, transcribed and analysed using Virginia Braun and Victoria Clarke's (2006) six-stage model of thematic analysis. A recurrent theme was the impact of remote, virtual working on their access to team support. Social workers' perspectives on practice with vulnerable children and families are considered elsewhere (Cook and Zschomler 2020). The findings reported here focus on their views of team support.

Study 2 was undertaken between September 2020—March 2021, when hybrid working was more established. This study was granted ethical approval by the UEA research committee and from the two participating local authorities. This ethnographic study was focused on how teams support social workers to manage the emotional demands of practice. It used hybrid ethnographic methods to capture the experiences of two child protection teams. At the start of the pandemic, the research was already underway in the two local authority sites. This meant that the researcher was well-positioned to observe how the two teams adapted as the pandemic unfolded. The findings reported here draw on 30 hours of observations which included the social work office and formal and informal virtual spaces created by the team using Microsoft Teams. In addition, 21 semi-structured individual interviews were undertaken with team members, from manager to student social worker followed by a group team interview. The combination of ethnographic observation and interviews enabled the researcher to identify how teamwork changed during the pandemic as well as how individual team members experienced these changes. Observations and interviews were recorded, transcribed and analysed using Lyn Brown and Carol Gilligan's (1992) analytical framework the 'Listening Guide'.

A thematic synthesis of data was undertaken from each of the studies, focusing on social workers' perspectives on team support during COVID-19. These themes fell into two categories—firstly, themes around knowledge, decision-making, and practice, and secondly, emotional wellbeing, support and belonging. This fitted with the concepts of Communities of Practice and Communities of Coping respectively which we subsequently used as a framework to conceptualise the findings. These concepts were chosen based on 'best fit' with the data from the two studies. While relevance of Communities of Practice for social work has received some prior attention (Cook-Craig and Sabah, 2009; Moore, 2008) the application of Communities of Coping to social work teams is novel.

Findings

The team as a Community of Practice (CoP) during COVID-19

Pre-pandemic, the social work team could provide a CoP for social workers, where interactions between team members facilitated learning, decision-making, and the development of practice. However, as COVID-19 unfolded, new working arrangements limited the availability of team members. Pre-pandemic, the office was an important space for reflection, *ad hoc* discussions and the exchange of practice wisdom. As one social worker stated:

> *Before you could quite easily just turn around and... there's someone the other side... you can have that conversation with.* (Social Worker, Study 2)

However, during the pandemic some social workers began to work from home exclusively, while others accessed the office with new social distancing restrictions. This affected interactions with colleagues, which in turn impacted practice. As one worker stated:

> *If you don't have that face-to-face contact with people, you lose those relationships* [--] *you lose that confidence* [--] *picking up the phone to a worker and explaining the situation is very different to going back to the office and seeing a social worker [so] you can talk about something* [--] *it comes naturally, whereas having to pick up the phone* [--] *you think twice about who you're going to phone... you lose the momentum of what's going on.* (Social Worker, Study 1)

Loss of professional confidence was a common theme among social workers, whose spontaneous interactions with colleagues were limited by the pandemic. Previously, the team was an important part of the 'ecology of judgement' (Helm and Roesch-Marsh 2017) providing a space to resolve and unpick 'borderline' or complex cases (Doherty 2017). However, as these ad hoc discussions were now limited, social workers reported an impact on their capacity to make effective decisions, particularly regarding risk. For instance, one social worker noted that all her assessments were 'coming out positive' which was highly unusual. With fewer opportunities to revise their judgement with colleagues, some social workers were concerned that decisions they had made during COVID-19 were less robust.

In response to these challenges, social work teams began to construct new, online spaces for ad hoc discussion. These spaces functioned as virtual CoP. Team members could 'drop in' with no fixed agenda to exchange practice knowledge or reflect on their work which partially mitigated the need to 'second-guess' the decision to seek advice. However, whilst useful, increased virtual working represented an additional cognitive burden for some workers, who experienced Zoom fatigue and information overload as a result.

An unexpected and positive outcome of increased virtual working was that it prompted an extension of the CoP beyond the confines of the team. Team boundaries became more porous with greater inclusion of other professionals:

> *The social work has been much more interactive... I think there's been a lot more communication amongst professionals* [--] *I don't know whether they find* [--] *attending meetings easier via having video* [--] *rather than directly* [--]. (Social Worker, Study 1)

This was a point made by many social workers—the increased uptake of online communication meant that professionals from other disciplines (e.g. health, criminal justice, education) were more likely to attend virtual meetings. This in turn increased opportunities for interprofessional learning. However, where social interaction was limited, practice development could be stymied. Since social-distancing limited interactions between team members, social workers experienced a sense of professional inertia:

h

> *I definitely feel quite isolated* [--] *there is a loss of shared knowledge and information* [--] *it feels like a real loss of knowledge* [--] *because there are some really interesting conversations that we have with each other and other cases that you get to hear about that you learn from. I've probably felt a bit stagnant in that sense.* (Practice Manager, Study 2)

While the issue of professional inertia was an issue for experienced professionals, it was felt most acutely by newly-qualified social workers (NQSWs). Prior to the pandemic, simply being in the office could provide important vicarious learning opportunities for NQSWs, such as shadowing a colleague on a home visit, or hearing an experienced worker make a difficult phone call. However, as the pandemic unfolded, increasingly hybrid working led to fewer opportunities for 'legitimate peripheral participation' (Lave and Wenger 1991):

> [--] *it is difficult... you've got to maintain the distance* [--] *normally* [--] *you would be close to each other, it's a lot easier to learn whereas now, everything is done distantly* [--] *it makes it a lot harder, and it takes longer to get on those levels* [--] *it does affect how you can work.* (Social Work Student, Study 2)

Social workers expressed concern that opportunities for 'learning on the job' (Scourfield and Pithouse 2006) could not be replicated when working remotely. This affected the process of professional socialisation among newer workers, many of whom reported reduced confidence in their practice. Some NQSWs even began to question their 'fit' as social worker:

> *I find it really hard not knowing what I'm doing* [--] *because of how we're learning at the moment. For example, someone will say 'can you put a referral into this thing'. I don't know how to do that* [--] *then they have to try and explain that whilst not being near you or doing it online* [--] *it makes things so difficult* [--] *It just makes me feel a bit like, oh, maybe I'm not doing the right job* [--]. (Student Social Worker, Study 2*)*

This point was also echoed by more experienced social workers, who expressed concern that in the context of remote working, struggling NQSWs could become invisible:

> *The only thing you've got to be careful of* [--] *certainly for younger social workers* [--] *it only takes two or three cases to go over a cliff* [--] *without the right support people just become isolated and the work drops off* [--] *I have seen that, some people don't talk about it, and it's only by observing people perhaps in an office situation that you can realise that they're getting into difficulties* [--]. (Social Worker, Study 1)

COVID-19 brought unexpected challenges as well as benefits to the functioning of the team as a CoP, this was also evident when considering the team as a source of emotional support, explored next.

The team as a Community of Coping during the pandemic

Prior to the pandemic, the social work team could function as a ComC for social workers (Korczynski 2003). The 'backstage' areas of the team environment served as important spaces for collective emotional labour where camaraderie, venting, and humour could be spontaneously shared. However, the pandemic created an initial sense of isolation from colleagues:

> *I think it's very intense working from home, I think what you find is, you are the only one in front of that screen; you are not part of a team. (*Social worker, Study 1)

Paradoxically, the loss of connection from colleagues through home working also brought with it an increased sense of boundary invasion which added to the emotional burden social workers experienced. Child and family social workers often need to consider emotive and distressing issues, such as child abuse and neglect. Working online at home meant that these issues invaded social worker's private space. For instance, one social worker spoke vividly of:

> [--] *the darkness that social work can bring in to your own home.* (Social Worker, Study 1)

Typically, increased homeworking was coupled with fewer opportunities to access the office. There were also restrictions on seating, desks, access to kitchens and informal meeting spaces. These new physical boundaries created a different 'feel' to the workplace, as this ethnographic observation highlights:

> *Large perspex screens were positioned at the end of each set of desks [--]Some chairs were wrapped in red and white tape* [--] *'Not to be used' makeshift laminated signs were hung from a nearby coat rack* [--] *The Team Manager tells me that only 8 members of the team are allowed into the building at any one time, the reason being 'COVID stuff'.* (Observation one, Study 2)

These physical barriers created psychological barriers, leading to a sense of disconnection from colleagues:

> *I feel like I'm in a movie [--] the atmosphere in the office is definitely different. Before COVID the office used to have a real buzz* [--] *it is definitely affecting everyone's mental health* [--] *I was never an extrovert, but I definitely think I have become more of an introvert* [--] *it's difficult to interact when you come into the office* [--] *having to adapt* [--] *it's weird* [--] *these screens definitely don't help* [--] *I feel cut off.* (Social Worker, Study 2)

However, this sense of isolation spurred an immediate flurry of activity among teams to recreate their ComC online. While some teams did have informal online spaces pre-pandemic, during COVID-19 these became more significant. WhatsApp groups for informal chat, online breakfasts, quizzes and virtual 'water cooler' (social worker, study 1) meetings facilitated the sort of backstage talk that previously occurred in kitchens or smoking areas:

> [--] *Every day in the office we would go into the kitchen and get water, so when you're in the kitchen you would meet with other people from the other rooms and have that chat. We've created that in this* [Microsoft] *Teams thing* [--] *so the staff can just dial into this meeting and chat about anything they want, really.* (Social worker, Study 1)

These informal online spaces enabled social workers to vent, share experiences, provide emotional support, and share a sense of solidarity both in relation to the work and the challenges of the pandemic. Post-work drinks at the pub were replaced by online events to de-stress after a difficult day:

> *So, we have a lot of pub nights, obviously, before COVID* [--] *if you've had a bad day or if someone else has had a bad day, it's just quite nice to talk about it with people that* [--] *know what you're going through and what the job is like* [--] *when COVID hit, we were doing house parties and things like that, so staying in contact virtually* [--] . (Social Worker, Study 2)

Korczynski (2003) suggested that ComC were typically outside management control, informally created between workers and sometimes subversive. In this research, however, it was evident that team managers played an active and conscious role in creating and supporting new backstage areas for mutual support, as well as online opportunities to promote team relationships:

> *We're* [--] *doing a Tik Tok talk about bonding, we're going to do our TikTok and then the manager is going to put it together with a little video.* (Social Worker, Study 1)

The increase in virtual spaces for informal discussion and emotional support enabled teams to function as ComC for social workers during the pandemic. However, this also came with challenges. Pre-pandemic, team interactions were largely limited to the physical space of the office. However, as the ComC moved online, contact with colleagues was possible from home, outside of working hours:

> *After office hours they would all be on the WhatsApp group* [--] *it gave me anxiety* [--] *in normal life, pre-COVID* [--] *my office mobile wouldn't be switched on after working hours* [--] *They say* [--] *'make sure you keep in touch with your work colleagues'* [--] *I've found that a little bit too heavy* [--] (Social Worker, Study 1)

For some, the initial shift to virtual team contact meant that rather than acting as a ComC, the team became a source of emotional stress. The worker above was relieved that after the initial flurry of online interaction post-lockdown, the contact began to 'peter out' and become less of a psychological burden. A key aspect of ComC is that they occur spontaneously and in response to the ebb and flow of the emotional demands of the work. This was more difficult online. For instance, one worker observed how:

> [--] *you don't know that you need to talk about things, but somebody just picks it up and goes, 'Are you alright, do you want a coffee?' and it might just be enough to set you off* [--]. (Senior Practitioner, Study 2)

There was also a risk that workers who were struggling could succumb to the temptation to withdraw from online spaces in a way that would be more difficult in person. For team managers, this created a need to be proactive in instigating a 'cameras on' culture for remote working:

> *You can hide a lot behind a screen* [--] *there are times when I go into a call with* [team manager] [--] *and if I haven't got my camera up, we're not starting that conversation until the camera is up. I think that's quite good because if you are having a bad day it's very easy just to think, oh, I can't be bothered, let's just make it quick, but no, she doesn't allow that.* (Social Worker, Study 2)

Despite these challenges, in some cases, the physical disconnection from team members created a desire for greater relational connection. Within some teams, the frequency of interaction increased:

> [--] *I'm seeing my staff more than I would if I was in the office, because they're in their house and I can just phone them up and we can wave at each other* [--] *it's improved* [--] *because I see more of them* [--] *But, yes, I supervise staff that I just never would have seen as much as I have now, because we check in every day* [--]. (Social Worker, Study 1)

As well as increased frequency, the adoption of video-calling meant the nature of these interactions changed. Social workers' homes and families, which had been part of their private life, were now visible to the team:

> *It's hard to remember what it was like before* [COVID-19] [--] *some of the people in the team I don't see outside of work, so getting to see them in their homes* [--] *even just little things, their doorbell might ring* [--] *and then that leads to a different conversation* [--] *you get to know people's families as well, which was something maybe with members of the team I didn't know before* [--] *so I think that's really allowed us to get to know each other more on a personal level.* (Social Worker, Study 2)

Getting to know colleagues on a more personal level strengthened the team as a ComC. On the other hand, the boundary between work and home became blurred. Prior to COVID, the social worker's home was 'backstage'—a place where to which they could retreat, providing respite from the need to perform their professional identity. However, as this virtual observation highlights, workers now had to consider how to stage their home in professional encounters:

> [The social worker] *is sitting in a home space* [--] *the door behind her is open, with a drying rack hanging from it with what looks like a red dressing gown. She appears to notice this by looking at her own space reflected in the computer screen and quickly gets up, pulls the item of clothing off the door and throws it*

> *out of sight. 'I just noticed my dress was hanging up, gotta move that' she says, as she sits back down.* (Observation 3, Study Two)

These staging decisions were not always straightforward—for instance, one worker described how a colleague joined a meeting sipping water from a glass bottle. As it resembled an alcohol bottle, this had attracted criticism from other professionals. Despite these challenges, for some workers the team began to play a new role during the pandemic. Previously the team had functioned as a ComC in relation to the work, however, it also came to function as a ComC in relation to the anxieties and stresses associated with the pandemic. The team therefore began to serve a compensatory function, acting as a substitute family and source of support for workers separated from family and friends. Communal team lunches, often involving cake and other 'treats', now had a sense of emotional significance and occasion:

> [--] *People had got into really bad habits of not having lunch, you know, you're away from your desk a lot of the time* [--] *It's just, sort of, developed much more over COVID, this ordering food in together* [--] *And, I suppose, where people aren't seeing friends and family outside of work* [--] *this time that we spend together in the office has actually become really much more important for people, and lunch is a time to do that.* (Team Manager, Study 2)

As our research has shown, the social work team as both a CoP and a ComC was impacted upon by the pandemic. The capacity of the team to provide both learning and emotional support to its members created both challenges and unexpected benefits which have left a legacy that has in some ways, shaped the future of social work practice.

The future: Social work teams as Communities of Practice and Coping post-pandemic

As with any research, there are some limitations. Firstly, the research was carried out during the early stages of the pandemic and may not therefore reflect current practice. However, there are some distinct benefits to capturing this period of rapid 'forced' innovation. The practices of virtual working adopted at the start of the pandemic are now routine, but as we shall explain below, these would benefit from some critical evaluation. Secondly, the two studies employed different methodologies, which makes comparisons between teams difficult. The disparity in methods reflects the opportunistic nature of the studies—both researchers were already engaged in data collection with social work teams during the start of the pandemic, which provided a unique opportunity to capture the impact of covid-19 on social work as it unfolded. While our claims to generalisability to all teams must remain modest, the research provides a unique, in-depth qualitative picture of social workers' perspectives during a period of historic change.

The concepts of CoP (Wenger 1998) and ComC (Korczynski 2003) provide a useful framework for considering the functions of social work teams. This is supported by existing research, which suggests that interactions within social work teams play a vital role in professional practice, learning and coping (Biggart et al. 2017; Helm 2016; Saltiel 2016.) Consistent with this, our findings suggested that as *ad hoc* interactions between team members were limited by the pandemic, professionals reported their confidence, wellbeing and practice to be adversely affected.

However, we also found that social work teams are adaptable and can function as Communities of Practice and Coping in a hybrid climate if adjustments are made.

The findings suggest that the creation of unscheduled, virtual spaces for reflection can afford new opportunities for learning, peer-aided decision-making, and practice development. They can also allow workers to connect with colleagues in a different way, mitigating the isolation of remote working. However, it was clear that such online spaces could only *partially* replicate being with peers in the office. In order to capitalise on the benefits of remote working, while also avoiding the drawbacks (such as Zoom fatigue and blurring of home/work boundaries) local authorities must offer flexibility. There was particular concern among social workers about the speed and permanence of changes to their working conditions. Some social workers reported that their local authorities were seeking to dramatically reduce, or even remove office space given the perceived success of remote working. However, the message was clear: although social work teams can *survive* as communities of practice and coping when working remotely, *thriving* involves a combination of in-person and remote working.

Lave and Wenger's (1991) concept of legitimate peripheral participation suggests that learning takes place through doing, observing, and participation in a CoP at all levels of experience. Our findings suggest that in an increasingly hybrid working climate, special consideration needs to be given to the professional socialisation and development for all social workers, but particularly for newly qualified workers. This could include opportunities for virtual shadowing of experienced workers and ensuring that office time is built into the planning for NQSWs. More broadly, professional development plans for all social workers need to consider the increasingly hybrid context of post-pandemic practice with opportunities for vicarious and in-person learning clearly specified and delineated.

The team became increasingly important as a ComC (Korczynski 2003) during the pandemic as workers turned to colleagues to manage not only the demands of practice (Biggart et al. 2017) but also the personal impact of the pandemic. The extent to which the team could provide support was dependent on the team culture around virtual communication. These unspoken rules were established during the first few weeks of the pandemic and tended to persist. For instance, some teams had a 'cameras on' culture for videocalls, while others adopted an audio-only approach. Not 'seeing' colleagues greatly impacted social workers' ability to pick up on their emotional support needs. Similarly, the patterns and rhythms of online team interactions tended to be established early on. While some social workers described this changing over time, for many these patterns of interaction simply became the new normal. It is therefore important for teams and organisations to conduct a thorough review of hybrid practices adopted at the start of the pandemic. For individual teams, the concepts of Communities of Practice and Coping may provide a framework for reviewing, evaluating and adjusting their teamworking practices in the increasingly hybrid working climate of COVID-19.

References

Biggart, Laura, Emma Ward, Laura Cook, and Gillian Schofield. 2017. "The Team as a Secure Base: Promoting Resilience and Competence in Child and Family Social Work." *Children and Youth Services Review* 83: 119–30. https://doi.org/10.1016/j.childyouth.2017.10.031.

Braun, Virginia, and Victoria Clarke. 2006. "Using Thematic Analysis in Psychology." *Qualitative Research in Psychology* 3 (2): 77–101. https://doi.org/10.1191/1478088706qp063oa.

Brown, Lyn M., and Carol Gilligan. 1992. *Meeting at the Crossroads: Women's Psychology and Girls' Development.* Cambridge: Harvard University Press.

Cook, Laura L. 2020. "Storytelling among Child Welfare Social Workers: Constructing Professional Role and Resilience through Team Talk." *Qualitative Social Work* 19 (5–6): 968–86. https://doi.org/10.1177/1473325019865014.

Cook, Laura, and Mark Gregory. 2020. "Making Sense of Sensemaking: Conceptualising How Child and Family Social Workers Process Assessment Information." *Childcare in Practice* 26 (2): 182–95. https://doi.org/10.1080/13575279.2019.1685458

Cook, Laura, and Danny Zschomler. 2020. "Virtual Home Visits during the COVID-19 Pandemic: Social Workers' Perspectives." *Practice* 32 (5): 401–8. https://doi.org/10.1080/09503153.2020.1836142.

Cook-Craig, Patricia G., and Yekoutiel Sabah. 2009. "The Role of Virtual Communities of Practice in Supporting Collaborative Learning among Social Workers." *The British Journal of Social Work* 39 (4): 725–39. https://doi.org/10.1093/bjsw/bcp048.

Doherty, Paula. 2017. "Child Protection Threshold Talk and Ambivalent Case Formulations in 'Borderline' Care Proceedings Cases." *Qualitative Social Work* 16 (5): 698–716. https://doi.org/10.1177/1473325016640062.

Helm, Duncan. 2016. "Sense-making in a Social Work Office: An Ethnographic Study of Safeguarding Judgements." *Child and Family Social work* 21 (1): 26–35. https://doi.org/10.1111/cfs.12101.

Helm, Duncan, and Autumn Roesch-Marsh. 2017. "The Ecology of Judgement: A Model for Understanding and Improving Social Work Judgments." *The British Journal of Social Work* 47 (5): 1361–76. https://doi.org/10.1093/bjsw/bcw091.

Hochschild, Arlie R. 1983. *The Managed Heart: Commercialization of Human Feeling.* Berkeley: University of California Press.

Jeyasingham, Dharman. 2018. "Place and the Uncanny in Child Protection Social Work: Exploring Findings from an Ethnographic Study." *Qualitative Social Work* 17 (1): 81–95. https://doi.org/10.1177/1473325016657867.

Korczynski, Marek. 2003. “Communities of Coping: Collective Emotional Labour in Service Work.” *Organization* 10 (1): 55–79. https://doi.org/10.1177/1350508403010001479.

Lave, Jean, and Etienne Wenger. 1991. *Situated Learning: Legitimate Peripheral Participation*. Cambridge: Cambridge University Press.

Moore, Brenda. 2008. “Using Technology to Promote Communities of Practice (CoP) in Social Work Education.” *Social Work Education* 27 (6): 592–600. https://doi.org/10.1080/02615470802201580.

Saltiel, David. 2016. “Observing Frontline Decision-making in Child Protection.” *The British Journal of Social Work.* 46 (7): 2104–2119. https://doi.org/10.1093/bjsw/bcv112.

Scourfield, Jonathan, and Andrew Pithouse. 2006. “Lay and Professional Knowledge in Social Work: Reflections from Ethnographic Work on Child Protection.” *European Journal of Social Work* 9 (3): 323–37.

Stroebaek, Pernille S. 2013. “Let’s Have a Cup of Coffee! Coffee and Coping Communities at Work.” *Symbolic Interaction* 36 (4): 381–97. https://doi.org/10.1002/symb.76.

Sullivan, Elizabeth. 2000. “Gallows Humour in Social Work Practice: An Issue for Supervision and Reflexivity.” *Practice: Social Work in Action* 12 (2): 45–54. https://doi.org/10.1080/09503150008415183.

Wenger, Etienne. 1998. *Communities of Practice: Learning, Meaning and Identity*. New York: Cambridge University Press.

Winter, Karen, Fiona Morrison, Viviene Cree, Gillian Ruch, Mark Hadfield, and Sophie Hallett. 2019. “Emotional Labour in Social Workers’ Encounters with Children and Their Families.” *The British Journal of Social Work* 49 (1): 217–33. https://doi.org/10.1093/bjsw/bcy016.