

Webinar recording



What are the impacts of using AI transcription tools in social care?

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Transcript

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Kathleen Doyle

Good morning, everyone. I'm Kathleen Doyle. I'm the Head of Strategy here at CELCIS, and I'm really delighted to welcome you to today's webinar. This is the third in the current series of our Emerging Insights webinars on AI and children's social care. And we really, really appreciate

you taking the time out of your day to step into this learning space with us. You might be a little bit new here, or maybe you've been with us before in our webinars, but in previous Emerging Insights series, we've explored issues in child protection, and we also had a series sharing key learning from the findings of our [Children's Services Reform Research](#) study. If you want any of those resources, you can get them on our website. But in this series, we're exploring what AI means for children's social care. So, what does it mean in terms of how services and practices respond to the care and protection needs of children, and also what might it mean that we need to learn about in terms of the impact AI is having in the lives of children, young people and their families.

We kicked off this series in January with the first webinar helping to really set the scene of [what AI might mean for children's social care](#). And earlier this week, we looked at how AI is already being used in decision making and responding to the care and protection needs of children, but today, our theme and the question that we're posing here is, what are the impacts of using AI transcription tools in social care? So we're going to explore the experience of using AI tools and note taking and transcribing meetings and summarizing actions for practice, and the wider impacts that this might have on care, we'll hear about the application of these tools from a social work and social care practice perspective, and we'll also hear fresh insights from research about public perspectives and attitudes. And I'm also really delighted to announce that hot off the press today, published today, you'll hear insights from the [Transcribing Trust Projects](#), latest research from social workers and local authorities about how and when to use these tools. So we're joined today by three great contributors. Let me just read through who we've got here today. So we are here with [Stephen Morgan](#). Stephen is Service Director at [social work services in Dumfries and Galloway Council](#), and Stephen is going to share frontline experiences of using AI transcription tools in practice. We're also joined with [Oliver Bruff](#) from [Ada Lovelace Institute](#). Oliver will be sharing insights from the Transcribing Trust Project with social workers, and we're also joined by [Dr Jed Meers](#). Jed is from the [Administrative Fairness Lab at the University of York](#), and Jed will tell us about public attitudes to using note taking technologies. Okay, so that's enough from me. Without further ado, I'm going to invite our first speaker up to talk. So, Stephen, I invite you to speak.

Stephen Morgan

Thank you, Kathleen, and good morning, everybody. It's fantastic to be here, and it's fantastic to see so many people for this really important topic. I'm Stephen Morgan. I'm Service Director for Social Work in Dumfries and Galloway, and also the Chief Social Work officer. I've got a particular interest today because I also chair the [Children Family Standing Committee for Social Work Scotland](#) and the digital subgroup. So, I'm here to try and give you a little bit of a flavour around what transcription means for us in Dumfries and Galloway. But before I do that, I want to talk about why we looked at the use of an AI transcriptions to our journey so far, how we use the tool, some of the benefits that we have, and any considerations and barriers that that people may need. I think it's important to set out the why. First, because, having read the [Setting the Bar and Taking the Wheel](#) reports that were published a couple of years ago, it's quite clear that the bureaucratic and administrative burden is a big put-off for people in social work. We were told that many graduates don't even enter the profession, and of those who do, quite a lot leave. And one of the main reasons cited is the administrative and bureaucratic burden. We were particularly challenged in Dumfries - we still are actually - particularly challenged in Dumfries and Galloway about recruitment, retention of social workers. We did a piece of work on the back of setting the bar and taking the wheel to look at what do our frontline Children and Family social work staff actually spend their time doing. And we found that on average, our staff were spending nine hours a week more than they get paid to make sure that our vulnerable children and their families, have their needs met. Over a day of that working week was traveling because of the huge geographic nature of Dumfries and Galloway, which is 6,500 square kilometres, and a third of that time was spent doing admin tasks. Now, some of those tasks were absolutely vital but some of them were tasks that could be done by others, and it was the 'by others' that we originally considered here in Dumfries and Galloway. We looked at recruiting more admin workers to do some of those admin tasks, and we'd be more efficient as a service. But unfortunately, we didn't have budget for that, and we had to look at potentially reducing the number of frontline staff in order to create efficiencies by employing admin staff. But that just didn't sit right with me as a Chief Social Work officer, and it would have also taken quite a lot of structural change, and it would have taken us a fair bit of time to get to the point where we would achieve those efficiencies and benefits. In that time, there was a risk that we

could have put more pressure on staff and had more people leaving the profession. So, I was lucky enough that about two years ago, in the middle of all of these considerations and all of the work that was going on in the background, I saw a demo of an AI transcription tool called [Magic Notes](#), and it blew me away. The simplicity of the tool, what it could do. And I just thought to myself, we need to look into this and see what we can do. I had a detailed demo, and the tool itself is fairly simple. It records a conversation or a meeting, and it transcribes that, and it does it effectively, accurately and efficiently. So, I invited my Head of ICT and my Head of Procurement to receive the same demo, and they equally were impressed by what this tool could do. If I'm being honest, my Head of IT was a little less enthusiastic, because he was used to some of the more traditional tools that were on the market, particularly Microsoft Copilot. But he was absolutely keen that we do something in that AI field around transcription for social work. So, we started a pilot in our adult support and protection team. I deliberately chose that team because of the statutory nature of the work, the complexities involved in that, but also because we had significant vacancies in the team, and I wanted to have impact immediately. In that pilot period, staff reported and data showed us that we were saving up to nine hours a week on average on admin duties by usage of the tool. Staff reported increased sense of well-being, and they felt that they were getting on top of their case recordings for the first time in a long time. So, we then decided to roll out the use of Magic Notes across the whole of Social Work, and we're now around about nine to 10 months into our journey. So that's a little bit of the background. And the reason I mentioned that is this is purely for us, a tool that we use to reduce the administrative burden on our social work staff, or at least that was the primary reason why we looked at this. What we've subsequently found is that using a transcription tool not only reduces the time for social workers and other staff to record meetings, you know, supervision, etc, but people have reported to us that they feel more present in the conversations that they're having with people.

So, for example, if we look at a supervision session, the senior social worker and the social worker spend 60 minutes together, and they have a 60 minute conversation, Magic Notes records that, comes out with actions, and everybody's happy. Previously, where the supervisor and the supervisee were recording that manually, they would stop each other part way through the flow, if something important or an agreed action was to be taken, they would pause. They would lose the flow. And some people

said that between 30 and 40% of the time in some complex meetings would be lost because of recording things manually. We're now getting the full benefit of the time that we spend with people. So not only are our staff and our children families seeing the benefits of better recording and of case records, but they're spending more time building relationships and finding out what people's outcomes are, and that's been one of the big benefits for us. The way that we use the tool in Children and Families Social Work is for any face to face or virtual meeting. So, whether that's a team meeting, whether that's a one to one, whether that's a conversation with a child about how they're getting on at school, whatever that happens to be, we use Magic Notes, and it transcribes the conversation. It gives us accurate records, and like I said, it gives staff more time to spend having, you know that face to face and really good conversations with people. We use it for initial referral discussions, child planning meetings. We had sign up from our Chief Officer Group, so our multi-agency partnership are happy with the usage of the tool, and that was important because there was quite a bit of scepticism from other partners who didn't have the same level of knowledge as we do. So, we use it quite widely. I've already mentioned the benefits of time. We also have seen more detailed and accurate case recordings.

Remember, the record of somebody's life is just that. It's a record of their life - not just a social work record. And when adults come back and ask to see their files, we truly believe that what they see, since we implemented the use of Magic Notes is a more detailed transcript of their experience in early years, and that's really, really critical. An important point here, though, is that we're absolutely clear that the human being is in control of the information. Every single note must be edited, and the social worker or other member staff must own that, and then they will copy that into, we use mosaic locally, but into the Social Work system, and they own that, and that's in line with the SSSC code of conduct, where you've got to have accurate and transparent records. And we're seeing significant improvements there. I mentioned the saving of time, and this is an important point for me. I was quite clear on day one that this was not a cost saving exercise. I know that some other areas have seen that freeing up of time as an opportunity to give social workers more cases, but we've acknowledged that our social workers are already too busy, and this is about better quality relationships and better quality social work. So in terms of other benefits, that sense of well-being, staff have reported consistently that they feel better. They're enjoying work. There's less

stress, less anxiety. What we are going to do nine months into our full usage of this tool, just now, once we've got 12 months, then we're going to repeat the exercise that I referenced at the start of this talk, to see how much time staff do completing various tasks and functions, to see if we've got that evidential change in relation to the amount of time people spend doing those business tasks, etc. And hopefully, what we will see is more time spent with children and their families. So, some of the barriers or/and considerations that that we've had to be aware of locally is, some initial scepticism, myself included, if I'm being honest, I was one of those social workers who thought, we can't use artificial intelligence in social work. This is human based. It's relational. However, we're using the tool as that. It's a tool, and I somewhat clumsily refer to it as a Dictaphone and a typist. So, I was quite fortunate in the olden days when I had a Dictaphone and I could hand that over to one of our Business Support Team, one of our admin team, and they would type up notes for me, or I would do it myself. As things progressed in my career, it was myself, as opposed to anybody else, doing that. But that's what a transcription tool is. It's a Dictaphone, with a typewriter built into one in its crudest of terms.

So in that respect, we are not using data differently to how we used to use it. We're not gathering different types of data. We're not asking the tool to analyse that data, to group that data, it's purely a tool to use to transcript our conversations with people. So that's really important, because we have to complete a data protection impact assessment for these tools, and you have to be clear, why do you use the data? Are you gathering new data, using it differently? And the answers to all of those questions are no, we're using the same data. We're just gathering it using an additional tool, and we're using it for the same outcomes. What's key to that, though, is staff understanding and public understanding. So, we had a lot of staff training, and we have a lot of developments around fair and ethical usage, and we have tools and information leaflets for the public, for children, the families, and for our staff. Another barrier for us has been around confidence. We trained and I mandated training. We trained 1100 staff across social work, but I didn't mandate the usage, and we currently have 300 regular users of the tool. Now, the reason I didn't mandate the usage is that the scepticism I mentioned earlier, it's a new skill for some people and I want folk to be confident in the use of the tool, see peers using it, and develop their skills that way. So, we'll monitor that regularly. The next key thing that I wanted to highlight this morning is

quality assurance. Is absolutely essential, an extra layer of quality assurance, particularly from first line managers, to ensure that the records that our staff are keeping are individualized, personal to the child of the family, and they don't look as though they've been developed by artificial Intelligence, and that's something that we built into our processes. From a child and family perspective, our children and families who we speak to tell us that they are really encouraged by the use of the tool. They trust the fact that it is an accurate recording, because they see that it's there. And we've had very few people expressing serious concern. So that's a quick kind of tour of the why, the how, some of the barriers. I'm mindful of my time, and I'm certainly I'll have lots of questions, and I'll happily answer those later or offline as well. So, Kathleen, hopefully that's not been over my 15 minutes. I could speak about this all day, but I shan't. So, thank you all very much.

Kathleen Doyle

Perfect timing. Thank you for such useful insights in terms of the lived reality of what's happening for you and for social workers in Dumfries and Galloway and how that's been experienced for them and for children and families. Okay, I'm going to move us on now to invite Oliver to speak about your project now.

Oliver Bruff

Thank you. Hi everyone. My name is Oliver. I'm a researcher in the Social and Economic Policy Team at the Ada Lovelace Institute. A bit of background on what Ada is; we're an independent research institute with a mission to make data and AI work for people and society. What that actually means is we conduct research to build the evidence base on the impacts of AI tools on society. My team focus on public services, and we have a particular interest in convening diverse voices, particularly from the most impacted communities, and understanding their experience of digital tools. And our work in this space has covered everything from looking at local authorities' procurement strategies to help local government buy AI that works in the public interest, and then also qualitative ethnographic work with social workers to understand their experience of using a critical analytics tool and children's social care as well.

In this particular project, we focus on AI transcription tools. I'm sure people are very familiar with what those are, but our understanding and use of this term refers to transcription, refers to AI tools that allow

frontline workers to automatically generate official documents based on a recorded conversation. What makes these tools different from previous generations of transcription technologies is, obviously, their use of AI foundation models. So similar kind of models trained on massive amounts of data to the kinds of models that power tools like ChatGPT, and that's led to a really big increase in the accuracy of transcription technologies in recent years, depending on how you measure accuracy. And as a result of that, a big interest from public sector bodies, where faithfulness of official records to people's social experiences is really important. So these tools have become a lot more relevant to both central government's and local governments' digital technology adoption. They feature very strongly in the central government's public facing plans for AI adoption, such as the [AI opportunities action plan](#) and the [NHS 10-year plan for England](#) as well. We focussed specifically on social care in this project, because it's obviously an area where these tools are being very rapidly adopted. Obviously, Magic Notes are very prominent in this space, But also Microsoft Copilot and some of the more incumbent software providers for social care as well are developing their own tools. We conducted a total of 39 interviews, mostly with social workers who have experience using these tools across adult and children's social care in England and Scotland. We also interviewed senior managers at local authorities responsible for the procurement and evaluation of AI tools and other digital tools in social care, as well as experts in the development and evaluation of transcription tools from industry and academia as well. I'm going to run through the findings from that project and try and find the most relevant anecdotes that children's social care from that work, and then discuss the open-ended questions that this evidence creates, essentially, for the social care sector and also the central government and its wider rollout of AI technologies across public services. There is definitely massive overlap with what Stephen's just mentioned. And I'm really keen to faithfully share research participants experience of the benefits of these tools, obviously social workers. The social workers that we interviewed were very frustrated with the administrative document production burden that they had in their work, and these tools were really important to helping them reduce that burden and improve their own experience of care work. We heard examples from social workers who said they were able to reduce the amount of time that they spend producing documents by 50% potentially leading to them saving several hours of work during a week, all the way down to social workers saying, well, it saves me two or three minutes here or there. So, a really broad

range of experiences time savings, but with a general consensus that, yes, these tools do save time for most of the people that we interviewed. The downstream impacts of saving time producing care records was really quite profound for a lot of the social workers that we interviewed. So particularly benefits and work life balance were really prominent. We heard examples from people that were quite moving. You know, they were able to work what's essentially a nine to five job for the first time in years, spending more time with their family, having quite significant well-being improvements, particularly also this is beneficial for neurodivergent people as well, who might struggle accessing social work with the kind of very intense workload that the sector faces currently.

Also, more qualitative benefits as well stemming from that. So, the ability to spend less time producing documents actually improves the quality of communication that people have with the children that they cared for. One social worker gave an example of how, because she was spending less time writing records of people. She was actually able to spend that time communicating with children in different ways, potentially through WhatsApp or different mediums. And she said this helped to find what she referred to as holistic care for children, more of essentially asking children 'How was your day at school?' and doing more than just the bare essential communication that she had to do to meet her statutory requirements. Also, similarly to what Stephen said, a strong narrative came through from our interview is around people feeling more present in meetings because of their use of their transcription tools, not having to take notes, not having to look at laptops helped people be present, not only in internal meetings with other social workers, but also meetings with children and families as well, and that led to better quality of communication. And people were really keen to emphasise that in our interviews. But I do also think it's important to say not everything was working perfectly for the people that we spoke to.

The use of AI foundation models in these tools obviously creates risks of quite well-known AI inaccuracies, so things like bias and hallucination - quite well known through people's use of publicly available AI tools like ChatGPT, we heard anecdotes of this occurring in social workers care records as well. And people were quite concerned to relay their concern about this, even the people who experienced the strongest benefits of these tools and were really enthusiastic about the adoption of AI in social care more broadly, emphasised that they had experience of these AI generated errors. So, things like fabricated text occurring in official care

records was something that was raised several times. Sometimes these fabrications were quite serious. We had one instance where a social worker referenced the fact that their AI generated records included an anecdote about someone experiencing symptoms of suicidal ideation, but that wasn't actually discussed in the conversation that the record was based off of. Luckily, this person was able to check their record and correct it and remove that anecdote from the official record before it went on to local authority system. But we also heard other examples of people's names being inaccurately spelt, or just the wrong people's names appearing in care records. Other examples included irrelevant information getting in the way of very important discussions around people's care needs. So, for example, a document referencing the weather outside, or someone's pets, when really what they wanted that document to discuss was the fact that someone's parents were having really intense arguments at home, and it was distressing for the child. Another kind of potential AI harm that occurs in care records currently is the fact that AI tools that have obviously trained in vast amounts of text data, reproduce the language that's used in the data that they're trained on. And in the case of social care, this doesn't necessarily reflect best practice for person-centred language that some social workers expected in care records. So, using potentially dehumanising language to discuss children or refer to children in documents did occur. One social worker expressed quite strong frustration with that, describing the way that her AI tool referred to children in her care as horrific, and said that she spent a lot of time going through correcting that to make sure that kind of the language used in her care records, even though they were generated with AI, reflected best practice.

And then finally, as well, another example that's relevant to mention here, is that some social workers said that they were a little bit uncomfortable with the grey area around meaningful consent of being recorded for children. They raised examples of children being uncomfortable having a recording device, particularly an AI recording device, in the room when they have negative experiences of being recorded in police interviews, for example. And there's a grey area on managing that tension and how the presence of a device and something listening changed the atmosphere of the conversation in a way that wasn't best for the child as well. What complicates this at the minute is that there's very little guidance and support for social workers at an institutional level to navigate these really tricky questions. Yes, there are lots of benefits, and social workers really

are aware of this and want to make that happen for their work. But there are these trade-offs as well that are currently having to balance. When we spoke to local authorities that were implementing these tools, it became really clear that social workers were responsible for checking and correcting generated documentation. And this is also reflected in our interviews with industry as well. This 'human in the loop' principle, which is a bit of an industry term to refer to social workers acting as that human judgment where they're the professional, the expert that reviews the document and corrects it. That principle is ubiquitous in our industry interviews and social workers accept this additional responsibility to check and correct their records, very much in keeping with their professional ethics of accountability as social workers. But it does create extra work, and also, there's very little consensus as to what a meaningful human in the loop means. What should this process of checking and correcting records look like for the individual social worker level? We heard some social workers say that they spend so long checking and correcting AI generated documents they don't actually experience any time saving as a result of their use of these tools, because they're going through line by line, making sure everything accurately reflects their experience talking to a child. Other social workers said that it's just a two-minute process of quickly reading through, making sure there are no glaring errors, and then pasting it onto the local authority system. And then within that spectrum, there's lots of variation across the interview panel that we had. What this means is, essentially, there are AI generated errors occurring in care records, at the minute. No one said that this was occurring in their own work because they felt confident that they were able to kind of correct and capture these errors. But people did express concern that they were seeing these potential AI errors occurring in their colleagues' work. We're quite concerned about that, largely that's stemming from this inconsistent lack of oversight.

Currently, it's quite difficult to say exactly how frequently these errors are occurring across the care system, and that's because the evaluation of these technologies is very much focused on the individual local authority level and tends to focus on efficiency savings as opposed to other metrics of success, such as the quality of the care records. Again, just to caveat that, that very much depends on the resourcing of the individual local authority, particularly their digital teams. We had examples of some local authorities that conducted really in-depth evaluations across different metrics involving care experienced people, or people who grow and care

in kind of those evaluations to discuss how they felt about the presence of these tools. But a lot of local authorities that are a lot more resource constrained weren't necessarily able to conduct those evaluations, even though they wanted to. Also the fact that these tools were often procured as a way of meeting the systemic challenges in social care, particularly around resource scarcity, means that the incentivisation to do evaluation is very much around demonstrating that as a tangible efficiency saving from social workers use these tools, which is, again, very understandable. But it does mean there's not necessarily evidence being generated around the impact of these tools on care outcomes for people. What's the impact of these tools on a systemic level? What does it mean for suddenly all the social workers in the care system to go from spending so much time writing records to actually being arbiters and checking AI generated records as well? That's a very big change to the structural care work. There isn't an understanding about that. What this lack of evidence means for the end user level, for social workers, is that there's a lack of standardized guidance or support from central government or local authorities about how they should use these tools, and standards and guidance differ across local authorities as well.

So, the local authorities that we spoke to actually banned the use of AI transcription tools in statutory instances, where there's other local authorities, obviously quite keen to use these tools where they could because of the significant benefits that they bring to people's care work. Another tension brought about for social workers is that different agencies involved in providing social care have different regulations and guidance about the use of AI transcription tools. Some police forces have banned the use of AI transcription tools in meetings with the police, social workers and children, because they were concerned about the accuracy of these tools. Also in healthcare settings as well, AI transcription tools are regulated as a clinical device, so it's subject to MHRA (The Medicines and Healthcare products Regulatory Agency) regulations, and there's specific guidance on which tools people can use, which creates an additional tension with social workers who aren't necessarily using tools that are prescribed for clinical settings as well, and ultimately, it's down to individual social workers to navigate this quite confusing landscape.

What these findings mean ultimately, for the children's social care sector as a whole is that there are a lot of unanswered questions, and we make a call for more evidence to help us pull apart these questions and help social workers use these tools more effectively in their work, particularly

as there's evidence from our work that care records are containing AI related errors. But we don't necessarily understand what this means when care records are used in a decision-making context. If AI generated errors are occurring in documents that are then used in court to make decisions about people's lives, how much weight should be put on those records versus manually produced records as well. At the system level as well, very keen to make sure that the integrity of care records as a piece of evidence is very much maintained, and that these records potentially be making sure that the use of AI is more easily identifiable for decision makers as well. Also if an incorrect decision about someone's care is made because of an AI generated error, it's currently unclear where would accountability lie for that? Should that sit with the social worker? Should that be more distributed across the system? All the way, potentially, down to the companies that make these large foundation models that are using these tools? Should social workers bear responsibility for decisions that are actually being made in Silicon Valley, where these technologies are developed? And then also, where are the use of transcription tools most appropriate? Are there potentially different impacts on different populations who have these tools used on them? So there's evidence from academia that these tools perform differently depending on how people speak. So people with different accents, potentially people who for whom English isn't their first language, people with speech impediments these tools can perform worse than someone potentially speaking standard English. Also, are there people with specific care needs who would struggle with these tools at present?

So, we already discussed people with negative experience the police. But also in Adult Social Care we heard concern about social workers using these tools and conversations with people that have got paranoia or schizophrenia as well. They're very keen to emphasise that they wouldn't use AI transcription tools in those instances, because it would be distressing for the person that they're caring for. So those questions about how do these tools interact with existing inequalities in the care system as well. To make a step towards answering those open questions at the end of the report, we make recommendations to central government about how they can support local authorities to adopt and procure these technologies more effectively. So first off, we say, in the short term, central government should extend its existing pilots of AI transcription tools, so this could look like, for example, the Department for Science, Innovation and Technology (DSIT) piloted it's minute transcription tool,

which is an inhouse built tool developed by government that effectively works as an AI transcription tool for different public sector contexts. But they've trialled it in social care with the Local Government Association. Extending that pilot to other local authorities across a broader range of metrics could be really helpful to understand what's the impact of these tools in different places in the UK and get more generalisable evidence. We also suggest that in the long term, central government helps set up a What Works Centre for Public sector AI. So, for those who don't know What Works Centre is essentially a body that generates and disseminates evidence about the impact of different evaluation, different interventions, in the public sector. Having one specifically set up for public sector AI would help us better coordinate and understand evaluations of different AI technologies across different contexts in the public sector. And then we say as well, that one way local authorities could better improve the transparency around the use of AI transcription tools would be to register their use of these technologies, with the algorithmic transparency recording standard. This is a central government initiative that archives a lot of use cases of algorithms in the public sector. And it's publicly available for people to go to see and having the use of AI transcription tools in that in that record would potentially make it easier for decision makers, but also the general public, to understand where there's a chance that AI transcription tools are being used to generate care records.

And then finally, we recommend that social care regulators and local authorities work together to produce more standardised guidance on the use of their transcription tools and statutory processes, really to help individual social workers kind of tease out these questions and trade-offs that we've been just been talking about. I will leave it there.

Kathleen Doyle

Thank you so much, Oliver. That was really comprehensive, and I'm just having a sense of some of the benefits, but the variation of experience and the variation of use across that kind of system. So I'm sure we'll get into some of that later as well. Thank you.

Okay, so I'm going to move us on now to our next contributor. If I can ask Jed to come in.

Jed Meers

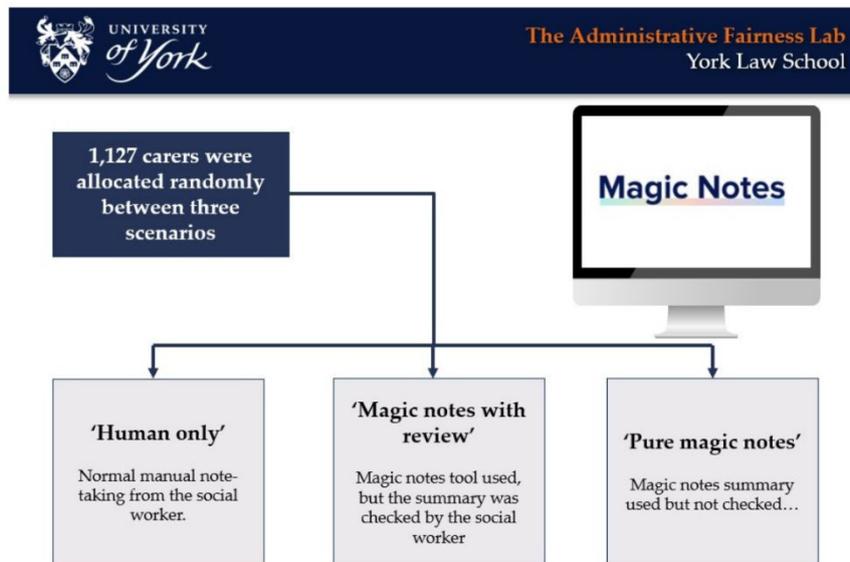
Thank you very much. And hopefully, I think what we've got to say follows on quite nicely from what Stephen and Oliver have already been

talking about. Because I'm particularly interested here on sort of public attitudes of the use of these tools in the social work context.

The slide features a dark blue header with the University of York crest and logo on the left, and the text 'The Administrative Fairness Lab' and 'York Law School' on the right. Below the header, the text 'What I'll cover:' is underlined. The main content area includes a computer monitor displaying the lab's website, which shows a modern building and navigation links. To the right of the monitor are two numbered sections: '01 Results from an experiment' and '02 Some brief reflections'. Below these are two dark boxes containing the text 'Survey results with 1,100+ carers' and 'And thoughts on future work in this space'. At the bottom left, there is a dark blue bar with the website URL 'www.AdministrativeFairnessLab.com' and an email icon with the address 'jed.meers@york.ac.uk'.

I'm a researcher based in the Administrative Fairness Lab at the University of York. We're split across the University of York and King's College London, and we do a lot of work on public attitudes to all sorts of different use of tools in various systems, particularly in the Social Security system. But we've been doing some work recently, particularly on public attitudes and the attitudes of people with experience of the social care system, of the use of this Magic Notes style tool. And Magic Notes is a particular example of the format of tool that we use, because we know there's all sorts of different variations and different kinds of these technologies. I'll talk a bit about the sort of survey experiment we did on this front. I'll give you the three headlines now, which follows on quite nicely from what Stephen and Oliver were saying. The first is, the use of a tool like this does matter for people's perceptions of their overall impression of their engagement with, in this case, social care service. But it doesn't just impact on their specific interaction and specific use of the tool in, for instance, a conversation or a needs assessment. It can affect their whole attitude of their engagement with that local authority more generally. The second key thing to flag is people really, really don't like it when there's no human in the loop, as Oliver was characterising it - when there's not anyone checking the outputs of these tools. And that is really determinative of public attitude, of the fairness of the use of these systems. And the third thing to say is, generally speaking, when the tools

are used well, there is across a majority of people, if not all people, support for the use of this kind of technology. And people do recognize the kind of pressures facing this system and support the use of the technology, providing there are certain constraints and processes in place. So, I'll go through the results of that experiment briefly, and then just offer a few reflections off the back of those three key points.



So, what did we do? Well, we did a survey experiment with a bunch of carers. These are all English carers, and this was through a panel company called [Prolific](#). And our experiment was effectively randomly assigning them all between a few different scenarios that we'd generated of a social care needs assessment process. And there were a few things all happening within that process. So, at the start there was quite a bit more information they were given than just the use of the tool, but we randomly varied them between a situation where there was a manual note taking process from the social worker within the scenario, when there was a use of a Magic Notes style tool, so that sort of AI transcription tool within the scenario, but there was a reference to the summary being checked by a social worker afterwards. And then a third scenario where we allocated them to the same sort of Magic Notes scenario, but there wasn't any reference to that summary being checked.

And what we were interested in was whether varying that one element of this broader scenario impacts on the participants attitudes across a whole range of different factors that we're interested in, in the Administrative Fairness Lab, and touch a bit on what's already been said, so whether

they felt like the person going through this process were able to express themselves, whether they've received enough information for a fair decision, whether they were treated as a person, and also picking up a bit on what Stephen was saying earlier, as well, whether that process they felt was transparent, whether it was impartial, whether it only collected the minimum necessary information.



What we found, and we weren't really sure what we would find from this process, is that that treatment, whether they were assigned to those three scenarios, really made a difference to overall attitudes. I've just put up here sort of a net agreement score across all the different factors that we've explored. But I'll tease out a few bits of this. Firstly, that sea of red down the side is that scenario where there was no human in the loop, so when there wasn't a reference within the scenario to the output of that tool being checked by a human before it was then used in subsequent decision making, we saw a massive drop off in attitudes across pretty much all of the factors we were looking at. And all of these differences were statistically significant when we explored those statistics in a bit more detail in the one I put up on the screen. So, people really don't like it when there's no human in the loop when there's no one manually checking the outputs of these tools. And that should be made clear to people at the point at which the tools are being used. However, people were quite happy with the use of this kind of tool when there was a human in the loop, and in fact, in some of our scores, and again, these were statistically significant differences as well, on factors like 'did they

feel like in the scenario they would provide enough information for a fair decision' and whether they felt like they were transparent or not, we actually saw increases in the scores for when the use of the Magic Notes tool was used versus when it was a human manual note taking scenario. We did see some drop offs in other areas as well. So one was about privacy and confidentiality, and another was whether they were treated as a person, not just a case. Obviously, we can only provide so much information in the scenario we're giving, so that might have coloured some of those movements as well, but it's not a straightforward, simple picture. But nevertheless, there's broadly speaking, broad support for a 'human in the loop', type deployment of the tool within our sample.

When we did this survey and we did the experiment at the end of it, we then told them what we were doing, told all of our participants and actually linked them through to the Magic Notes site, and gave them a bit of information about Magic Notes more generally, and just asked for some open text comments. And people had a lot of views, so we had tens of thousands of words of comments from across the sample. And one thing that really stood out to us was you can't treat everybody the same, and people will have different attitudes and different views of these tools. We found a typology, for want of a better phrase, of different attitudes that crops up within our sample. There were some people who were quite keen on the use of these tools generally, and were quite keen on the adoption of AI, particularly for driving efficiencies and all the rest of it as well. The majority of people, when they were offering their views within the qualitative sample, within those open text comments, once we'd explained what we were doing, were kind of cautious adopters. So they were happy, in principle, for these tools being used, but they wanted particular reassurances about how the tools were being used. And those related to a couple of things in particular - the human in a loop issue, the tools being checked and having adequate information and an opportunity to consent to the use of that tool clearly before doing so. The third group were kind of your pragmatists, so they didn't necessarily like the idea of the use of these tools, but they recognise that there are huge pressures on public services and efficiencies have to be driven somewhere, and all the rest of it as well. And they sort of saw it as kind of a necessary evil, for want of a better phrase. And the final group, which we find were particularly clustered around some of the older people within the sample, were very resistant to the use of any AI based technology at all, but particularly resistant in the context of social care. So we had quite a few

comments of people saying things like, I don't mind the use of AI tools in some of the contexts, but not in this particular context, which the scenario we use was a needs assessment process that wasn't the majority of the sample, but there were some people with relatively hard line attitudes as a minority within the sample.

So I think what we took from some of that public attitudinal work is a few key things, I suppose. The first is the use of these tools and how they're communicated to individuals does matter. But it matters not only about their opinion on the view of that individual tool, but can colour their view of the entire interaction with the authority. So, it's important that how they're explained and used and adopted is something that gives them enough information to take a decision about their consent to it, but also it is something that they feel is understandable and is fair. The second thing is that attitudes appear to be contingent. There are these tools now being used across a range of different public services. To a greater or lesser extent, people referred quite consistently in our qualitative comments to the context of social care as being something particularly special and something that relies on that human interaction. I think Stephen and Oliver were both talking about the idea that these tools can sometimes make that human interaction even better, because it frees up time when you're not taking notes. But I think that's a really important thing that came through the qualitative comments. And the third thing is, I think how public services of all kinds explain, prompt, prime - talking to people about these tools will make a big difference on human attitudes to their use and people's experiences as they go through those processes. I think Stephen was talking earlier about this sort of referring to this a little bit like a Dictaphone or a typist. I think that's a really nice, neat way of explaining it, providing that is how the tool is being used in that context, and it's not going beyond that. I think when it starts to go beyond some of that sort of transcription, sort of Dictaphone style functionality, that's a little bit more complicated to explain to individuals, and I think that's something where some further work needs to take place. So that's a flavour of what we've done the survey results we had on public attitudes. We're doing some more work in this space, and we're going to be doing an experiment that explores what seems to matter for people's consent to the use of these tools as well, and exactly that prompt and prime and question, what people want to know before they consent to their use that I've just been talking about. We're also running an event in York if people are interested. It's a face to face to face only event, but we've got a little

bit of a budget for travel, and Oliver's kindly speaking, at this event as well, we've got a few tickets remaining, and this is a, this is sort of a day workshop all about the use of digital scribes and this issue of trust in particular, and this issue of consent with English local authorities. So if people are interested, pop me a message, and we'll be hopefully able to sort out a ticket for that for you there, and our research, a broader set out of this experiment and some other work we're doing are available on the Administrative Fairness Lab website as well. And I think that's everything from me.

Kathleen Doyle

Thank you so much, Jed, really fascinating stuff as well, in terms of public perspective and attitudes that we can that we can get into. I think we're going to come together now and start a bit of a discussion, and think about some of the questions that we've been hearing from the floor as well. And perhaps we might start where you left off, Jed, in terms of that sense of consent that is certainly coming up, I think, for a lot of people. And I was wondering just broadly, I suppose, for all of you to think about that sense, I would doubt very much we've got strong evidence in terms of the ways in which families and communities are experiencing these tools yet but wonder if you can give us a sense of that. And also then, in terms of that sense of consent, what does that look like? What is the experience for you? Stephen, in terms of Dumfries and Galloway, what does that look like? And what are we hearing from, from the research, in terms of the ways in which that's sought, and how that's experienced. Stephen.

Stephen Morgan

Yeah, so consent is critical, and we've been surprised at how little kickback we've had from citizens. And I think that's down to the skill of the staff in terms of explaining what the tool is and how they're going to use it, giving people that option of using it or not, and also saying to somebody, part way through a conversation, if you're if you're not happy about this, we can, we can turn it off. It's a telephone that we use when we're in somebody's house, like an iPhone. We've had generally a really positive response from people. There were some examples where people haven't been happy to use the tool and we just use pen and paper as always. But we also have had, historically, people being unhappy with the use of Dictaphones and questioning the accuracy of the record you were keeping, and the like. So, the issue of consent and accuracy of the

recording is something that's across all different tools and formats. But we've been pleasantly surprised at the lack of opposition to using the transcription tool.

Kathleen Doyle

And if you don't mind me following up, Stephen, is that from children or families perspective, from staff's perspective, from the public as well?

Stephen Morgan

So, that was purely from a children and families perspective. Where we've had people say no, it's been it's been parents or carers, as opposed to children. Children, quite possibly, because of power imbalances, are more likely to conform. So, we've got to be aware of the ethics and the values around that. Some staff from other agencies were initially, 'oh no, we don't want to use that' but that wasn't because of them individually. So, Police Scotland as an example, 'oh we're not sure, we would need to speak to Police Scotland', you know, NHS staff, 'Oh, we better check with governance to see if it's okay to use that'. That's why I referenced in my input, I sought permission from our Chief Officer Group so we had that senior leadership, that executive leadership, signing off on the usage of the transcription tool, so that staff would have the confidence to do so. An important distinction though, I think to make here, is when we are using the tools in an office space, so if we're bringing public into it, like a child's planning meeting, for example, we inform people that we're using the tool because it's for public task, and we can legally do that, and that's in the same way as, up until the usage of Magic Notes locally, our business support staff will be using a Dictaphone, and we would inform people we were using that. And we then explain what happens to that recording.

So, it does take a verbatim recording, and it stores that in the background, and then it transcribes that against one of our set templates and that's what we explained to people. Once we've done the minute of that meeting, or the output, whatever the output happens to be, we can then instruct Beam, who operate Magic Notes, to delete the record immediately. Or we've got a standard 90-day deletion, which gives staff enough time to go in and work with that recording. But you can set how long you want the organization to hold on to that information before it's deleted from their servers.

Kathleen Doyle

Great. Thank you, Stephen. Oliver, can I come to you next?

Oliver Bruff

Yeah, I think what Stephen said was really reflected in our research panel as well. We found social workers raised very little kickback from children and families when they use these tools. They said that generally, conversations went quite well, that they were able to establish consent for the use of an AI transcription tool in a meeting with a child or family. There are a couple of caveats. They come mainly from social workers that worked in adult social care. But they are relevant learnings, I think, for children's social care as well. The first one is that these conversations around consent often felt a little bit redundant or not helpful in crisis situations. So, trying to have that conversation when something really needs to be sorted out very quickly and tensions are quite high, it's very difficult to have a meaningful conversation about consent for recording in that. And then also potentially people who might have difficulty understanding what an AI transcription tool is and what that means, potentially - you know, people who have got cognitive difficulties and anything like that as well. There's very much a grey area around kind of like meaningful consent in that context as well. But generally, people are receptive and understanding to the use of these tools.

Kathleen Doyle

Thanks, Oliver. Jed, would you like to add anything?

Jed Meers

I think just two brief points on that. I think the first is that people bring very different perceptions of the use of these tools related to their prior engagement with this kind of technology. We're doing some work at the moment looking at the use of tools by the public, like ChatGPT to engage public services. So a lot of people are very familiar with the use of these tools and bring that baggage. For others, and I'm coming back to that kind of resisting group, AI is a terrifying word for them. And how it's explained and how it's communicated can make a bit of a difference to their comfort in the use of that tool, even if they say they consent to it within that particular process. So, I think that's worth bearing in mind. The second thing, I think, which touches a bit on some of the question in the chat, and what Stephen and Oliver have already been saying is

there's that bit of a Venn diagram area between transcription and then a narrative and depending on how the tools are being used. And obviously there are really different kinds of functionality. And even within the Magic Notes tools, as I understand it, though Stephen and Oliver will know far more than me on this. There are different ways of using that tool where it's more within one side of the spectrum than the other. It is important that's communicated to individuals and our impression from the work we've done already, and we're doing more work on prompt and priming, is that explaining that in a really accessible, clear way - it isn't always easy, and it's thinking about tailoring that for what is the best way of explaining it to those individuals.

Kathleen Doyle

Thanks very much, Jed. Okay, so you touched on this, Stephen, just in terms of a question you might want to answer. But there was lots of energy around the practicalities of this, the devices that are used, whether or not it's verbatim, and how that data works, and we talked a little bit about data retention as well. I suppose this is a bit of a perennial issue in terms of data generally, but I just wonder, if you want to speak to that, to that issue, and how you safeguard that, what kind of measures you might put in place, and Oliver and Jed too, what you've seen in the broader sense of that as well, please.

Stephen Morgan

So, this is the main issue for me, the tool that we, forget Magic Notes but the actual tool that we use to record things is, I use an iPhone. If I'm out and about, I set it down on a table, it records remarkably well. Some people have tried attaching microphones, and that actually dilutes the quality for some reason. And so, in terms of how we use it, I use a phone. If I was using it, I would have it linked into my computer, and I would be recording it that way on an online meeting. So, in terms of how we use it, that's how we do it. Originally, we had to have an internet signal, because it was a live service via the web, but now you can do a voice recording and upload that later, which is a great development. But the actual data itself, and this comes down to your own organisation's data protection impact assessment and how you use data. And what I'm about to say does not interfere with our current standards against the retention and the deletion of Social Work and other local government records. What it does do, though, is it establishes a relationship between yourself and the provider of your tool. So, in this instance, that's between Dumfries and

Galloway Council and Beam and we say to them that we want them to automatically delete the transcripts that are produced by any member of staff after a maximum of 90 days. We can request deletion earlier than that. What Magic Notes does is it then produces a note against a series of templates, and you select which template you want, and then this picks up on things that Oliver and Jed both mentioned, around the accuracy of the information, the confidence that it's using the right type of language and tone. If you select the wrong template, or if you do what I do, I often default to like general meeting. The general meeting one is much more conversational. It'll include what the weather was like, and if Liverpool won at the weekend and things like that. Whereas, if I put that against a formal supervision record and I'm having a conversation with Gordon, the same person, as he's interested in football - he's not really, he is interested in rugby - it will take out those informal pieces and it will just stick to what the formal information is. What's critically important, though, is Magic Notes does not input any information onto our social work system, and it cannot. If it did develop that functionality, I would refuse to use it, because the human being has to be in the loop. The human being, the social worker, member of staff, whoever has to take responsibility for that record. This is a social work function, and we have to be confident in that. So, there was a question, either in the chat or the Q&A around, if these tools get more accurate, and I'm paraphrasing, will we become complacent? The answer to that is, we can't become complacent, and we shouldn't, and that's where the systems that we work in have to protect the human beings. So, the individual social workers in that the quality assurance is so good that we are not allowing people to become complacent and not checking records. Because, if your name's Neve, there's at least four different spellings of Neve, and that's Neve, and that's before you start getting them wrong. Getting somebody's name wrong on a formal record is a cardinal sin. So, you've got to have that human in the loop at all times. So that's covered a whole range of things in terms of the data, the accuracy, the recording, the retention and the usage Kathleen. So hopefully that answered the kind of the questions on the topic that you put to me there.

Kathleen Doyle

It did, thank you, Stephen. Oliver, what about from your experience of research? Because it was such variation, I think, across how tools were used, when they were used, and what tools were used as well.

Oliver Bruff

Yeah, definitely a lot to pick up on there, I think, on quality of recording, and the kind of device used, just to say, these tools are really flexible, and social workers can kind of use them in a lot of different ways to meet their own needs. And that basically meant that social workers using their own mobile phones to kind of use these tools in a variety of different environments. And the kind of environment that you use these tools, it impacts the recording. So, a large family where lots of people are shouting over to for example, impacts the recording. Adult Social Care, recording in a hospital generally leads to a poor-quality output. We also found quite a lot of evidence of social workers using these tools as recording devices in their own cars as well. So, if someone wasn't comfortable with being recorded face to face, they would use a transcription tool as they're driving to and from a visit to speak their notes into the tool, which kind of changes essentially what these tools are doing in that context. So hopefully that provides a little bit of colour and kind of different ways these devices can be used. On data protection, I think social workers were really concerned about this. It's the number one thing that they raised as a risk to people that they were caring for. But they largely saw it as handled further up the value chain by their local authority, by the tool developer as well. So they didn't necessarily understand how data protection worked for their particular tool, but understood that it was being handled by someone else in their team, and they felt quite confident that this isn't actually my responsibility, it's checking the output and the data protection comes, you know, higher up, and I'm trusting that that happens.

Also, a couple of references to that data protection using their transcription tool, was better than what happened before, better than keeping paper notes that get lost or put on a draw which isn't necessarily very secure. And on tool design as well, definitely varies across local authorities. Some local authorities are actually developing their own transcription tools if they don't have resources to go out and procure one externally.

Also, some local authorities are adapting existing off the shelf transcription tools to meet their own processes. So differing opinions and whether or not it's beneficial to have that tool automatically feed into a local authority system or not, we have heard of some local authorities thinking about developing kind of robotic process automation

mechanisms, so that's a way of automating the process of taking something from an AI transcription tool, putting it into a big CLM system and the local authority system as well. But then also, within the interviews, people very keen like Stephen emphasises that actually keeping those two processes separate creates a space for human in the loop to work effectively as well. So differing kind of opinions on that across the care sector.

Kathleen Doyle

Thank you very much. Oliver, it's really helpful. Jed, can I come to you next?

Jed Meers

Yeah, so just a brief point off the back of that, which is more focused, I suppose, on some of the work we've done on Job Centre interactions, is that handwritten notes are device dependent too. You know whether you're using manual pen and paper or you're typing stuff into a laptop, that can change the quality and nature of an interaction. So, there's always going to be a device of some description, even if it's a pen and a pad of paper, that will also impact on the quality of perception of an overall interaction. So, we did look a little bit at this within our survey, because we had to explain a bit about the use of the device, but it's not something I've got any anything more to say on that in the social care context.

Kathleen Doyle

Thanks, Jed that's really helpful. I suppose that leads me to one of the next questions, what we're going to think about in terms of quality of practice, quality of care and that everyone, both Stephen and Oliver specifically, you talked about some of the benefits around presence, around communication, in terms of that interaction. And I'm wondering whether you can just speak a little bit more about what you have seen in terms of that quality, and also maybe speak a little bit about the potential around, and I think, Stephen you spoke to this too, around the detailed records of care is someone's life, someone's experience, so that potential to improve quality of content or stigma and the language and terms that we use as well. Stephen, do you want to jump in?

Stephen Morgan

Yeah, so in relation to a social work record detailing somebody's life experience. If I went and looked back at my first ever case recordings

when I was a newly qualified social worker, I think initially they would have been really, really detailed. I would have spent an awful lot of time looking at those. As I became more experienced, and ironically, had less time and as the world's evolved over the past decades, my notes would have become more abbreviated, and less detailed and less telling in relation to somebody's life. And I think social workers today are under more pressure in terms of time and complexity of people's lives, and there's at least 46 different pieces of legislation for children's social work alone in Scotland. When I practiced initially, there was two. So, the complexity of what people work to is difficult. So social workers to really have a detailed case recording for each visit they have with a child has been tremendously difficult. Transcription tools can really help with that. But what's important, though, is the human in the loop, and it's to make sure that you check that. And initially you might have to effectively rewrite some of those records in their entirety, so the tone matches your own style. And if you rewrite that within the artificial intelligence tool itself, it will adapt to your own style. And so, I see Thomas in the chat says, can we trust that recordings are not being used to train the AI tools? Well, the short answer is probably no. But equally, if that training is appropriate, and it adapts to your style, as opposed to its training itself to take over, then that could be an appropriate thing. So, in relation to that accurate record of somebody's life, there's a real benefit, but you have to be really careful, and sometimes you might spend just as much time as you would have done doing that comprehensive recording yourself. And that to me is okay. What is really good about the usage of the transcription tools is I can ask the tool and say, 'can you pull out specifically what Jed and Oliver told me about X today', and it will give me their words specifically from the transcript. If you're taking notes in a meeting you're not going to be able to do that unless you're a shorthand specialist. Not many of us are. You're not going to be able to do that. So, you can really have that child's or that individual's voice at the heart of the record as well. So, there are, there are many benefits, and I'm just looking at the four different stages of compliance, if you like. And I'm clearly edging towards the pure enthusiast right now, Jed, but there are so many potential benefits. So that's an issue around the recording of people's lives and what that can be like.

Kathleen Doyle

I think also I was speaking more broadly to the language and terminology and the sense of stigma and whether the potential for that as we know

that this is a skill, isn't it, in terms of writing. So what its potential is, but with the safeguards of accuracy, I assume as well.

Stephen Morgan

Okay, so on that point, then what's really, really important when you're setting up your templates that the tool populates is, if it's a case note, template, for example, what we did is we gave, BEAM the organisation, 10 or 20 examples of a really good case recording anonymised, and it uses our own best practice to build the algorithms as to what it takes from that transcript to then transcribe into the record. So, if you give a good selection of real, high quality case notes, case recordings in that context, it will give you a better outcome. If you just say, oh just give us a general case note, you're more likely to get AI generated, stigmatised approaches. So, this is back to the human being, not just being in control at the end of the process, but also in the planning and the beginning of the process as well. So that's really, really critical, and I mentioned earlier around selecting the correct template. Magic Notes itself really does utilise your own templates and your own practice against their algorithms to get the best possible recording, so that's critical in that respect. So, if you put the time in at the start, you're more likely to get a less stigmatised AI type generated output from the from the meeting.

Kathleen Doyle

Thank you, Stephen. Oliver, if I can come to you next please.

Oliver Bruff

Yeah, big plus one to what Stephen said. Essentially, I think the question about stigma appearing in social care records, or not best language that is the best practice appearing, is partly a result of the fact that, at least from my understanding, obviously I am not social care specialist, I'm a social researcher, but these kind of discussions about what best practices for social care recording are still ongoing. There is still very much almost campaigning going across in the social care sector to establish kind of person-centred language in care recording for children. And so potentially, part of the reason why these tensions are appearing in the interviews that we have is that those conversations were happening within local authorities as well, and like Stephen was saying, including social workers in the design and development of these tools, potentially also in the design of templates, as well is part of the way of ensuring that social workers are onboard with the fact that these tools are reproducing what they see as best practice. On more broadly about the quality of

interactions as well, and the quality-of-care recording, more generally. I think that obviously that came through in our interviews, but it really depended on the structures and incentives within the local authority as to how these tools were being adopted. So yes, these tools do create more meaningful interactions between social workers and people they care for. They can capture more information than would otherwise be captured, which creates more evidence and understanding of a person's situation. But getting that right, making sure that that accuracy is there, is checked properly, making sure it's in the language that if the person who it pertains to wants it to be, you know how it wants, how they want it to be written, that takes work. And there's a trade-off between doing that work and having the kinds of efficiency savings that we mentioned as well. We spoke to social workers who are working in local authorities who explicitly adopted AI transcription tools with the aim of reducing social care backlogs. And the social workers in that local authority were quite disappointed in the sense that they were seeing lots more people working through many more cases, but it essentially meant that they were still working really long hours, still spending the same amount of time having poor quality interactions with those people. Similarly, we spoke to another local authority who procured AI transcription tool specifically to improve social workers work life balance. And these social workers were really enthusiastic about spending more time with their children, their own children, and with their families, and logging off at 5pm but necessarily weren't reflecting these more kind of in depth, qualitative improvements that what the social workers did as well. So, I think what our research really shows is that there are trade-offs across the benefits that these tools can bring. They're so varied, they're so flexible, and there isn't necessarily a uniform theory of change as to how these tools are going to change social work, and yeah, that's reflected essentially across the care sector in England and Scotland.

Kathleen Doyle

Thank you, Oliver. Jed, can I come to you next?

Jed Meers

Yeah, I didn't speak about some of the work we've done in this area, which is interviewing people who've been through care and needs assessment processes in England, some of which had used these tools, but most hadn't, which is why we haven't done a separate write up looking at the use of it. I think, just to build a bit on what Stephen and

Oliver was saying. What we found from that is we did a procedural fairness analysis of it, and what we found is people really had great impressions of sort of the person-centred care they were receiving, particularly their interactions with staff. But people were calling this, like person-centred process, right? They want a transparent process as well. They want assistance and availability of staff. They want responsibility taken at the staff end, and some of those features weren't being prioritised in the systems they were engaging with, in our case, care at 24 hour setting, quite the same way. So, I think design delivery of these tools really matters. And the kind of design issues that Stephen and Oliver were talking about, the things that matter as much to people as that, but of the quality of their interaction with individual staff members, which our interviewees were saying was generally the best bit of their experience.

Kathleen Doyle

Thank you, Jed. I'm wondering if we can pick up on some of what you've been talking around the structures that are in place, or the strategies in place as well. So I'm wondering, are these tools being designed, developed in the context of a wider strategy within the local authorities that you spoke to, or within your local authority? When Stephen, you talked about getting multi-agency partners on board? Oliver I'm wondering what that spread looked like in terms of your research as well, in terms of it feels that there are off the shelf options, there are individuals taking initiative, and then there are things that are being piloted. So just get getting a sense of the strategic or structural approach that's supporting that would be really helpful.

Oliver Bruff

Obviously, people strategies differed quite widely. I think there was a universal sense that social care is the sector that is struggling with resource issues, and the universal drive to adopt these technologies was a lack of resources in the care sector. But end outcome that people wanted to see differed within local authorities and across local authorities as well. So, whether or not that was about solving the recruitment crisis in social care by improving social workers experience of care work with a better work life balance, or whether that was creating better outcomes for people who are drawing care by reducing backlogs, or improving the quality-of-care records, differed quite a lot. Often, I think people were procuring these technologies with the sense that there's a need for them.

There's a need to reduce social care backlogs, but these having a cluster of benefits that they were expecting from these tools rather than kind of one theory of change for a specific outcome. So at the same time as expecting efficiency savings and improved quality interactions and improving work life balance for social workers, weren't necessarily tackling some of the trade-offs that would come between those benefits as well. So potentially attention there as to what wins out in those different benefits.

Also, I think a local authority can have a strategy for AI transcription tools, but social workers have a lot of agency in how they use these tools that can influence whether or not that actually is realized. So it's really important to have social workers on board in that journey of setting the strategy. Some local authorities do this. I'm really keen to emphasise this in our interviews, others maybe haven't been able to do that because of particularly intense resource constraints. We did hear maybe more junior managers within local authorities having separate outcomes for their teams as well, in mind. So setting benchmarks, the amount of people that they would expect social workers to see now that they have an AI transcription tool, potentially setting a threshold, saying you need to see x many people per week now that we have this technology, taking quite a hard-line approach there. And also just to say, what we refer to, I think a shadow adoption of transcription tools - social workers picking up tools that are necessarily part of a dedicated pilot or procurement program. Maybe, if the local authority has an authority wide copilot license, and using it by themselves as well, and having their own aims when they use these technologies. So, a very varied picture.

Kathleen Doyle

Thank you, Oliver. Stephen, can I come to you next?

Stephen Morgan

Yeah, thanks, Kathleen. Oliver referenced this, the need for something to be done for the Social Work workforce was my primary concern, as opposed to what the strategic direction of Dumfries and Galloway Council is. Thankfully, Dumfries and Galloway Council's strategic direction is exactly the same as mine. I just jumped the gun slightly, and I said in my introduction, the why was important. You know, we struggle to recruit and retain staff, the demands on the service, etc. So, I see this as an opportunity to ease some of the burden for staff then hopefully improve people's experiences and outcomes from a from a citizen perspective.

Interestingly, the timing of me authorizing the initial pilot in Scotland, and it was the first one in Scotland, there was quite a lot of talk in COSLA's Digital Office. Quite a lot of talk in COSLA, and some kickback. I had several conversations with people I never thought I would have conversations with - chief executives of other local authority areas, etc - about what we're doing. And again, are we jumping the gun? But again, just had honest conversations with people about this is what my staff need right now, and therefore we're going to use it, but I worked extremely closely with information governance in Dumfries and Galloway procurement, etc, to make sure that the people who understand all the technical stuff in the background about safety of data, etc, knew this was the safest it can possibly be. And I was content with that, and we could move forward. In terms of overall strategy. I mean ironically, Kathleen, I'm looking at a document just now called the AI policy framework for health and social care in Scotland, that isn't yet published. It's due to be published on the 16th of March, but I sit on the strategic leadership board for digital data transformation, which is a partnership between the Scottish Government, NHS, SOLACE and COSLA. So, we're only just from Scotland producing that policy framework and publishing it next month. Yet I can't recall how many local authorities are using AI transcription tools in Scotland. But if we look at Magic Notes, Copilot, Microsoft, 365 aligned with copilot, I think there must be at least 25-26 if not more than that. So this is a real issue now, and quite often the overarching policy framework and the strategic thought is influenced by the early adopters. I don't think that's necessarily a bad thing or a negative thing, but it has involved a lot of uncomfortable and constructive conversations with various people up and down the country as well as locally.

Kathleen Doyle

Thank you, Stephen. Jed, I wonder if I can come to you next and maybe even just pose a more a pointed question around expectations of the public and their perception of AI as transcription tools as a strategy, it's just expected that this might be what public services are using now as well.

Jed Meers

I don't have a lot to add to what Stephen and Oliver have already been saying, other than one brief point, which is that within the qualitative portion of our experiment work, and this came up within our interview

work as well, is people do recognise it's a system under pressure, and this is true across other people's engagement with the public services as well. And I think that partly colours people's attitudes of the use of tools which might help to drive efficiencies. So yeah, nothing more to flag other than that.

Kathleen Doyle

Thank you, Jed. We're managing just to get through - there's lots and lots of questions here, and we're starting to come to the end of the webinar. I'm just wondering if I can pose a bit more of an open question to each of you, in terms of, we've got a real range of people on the call today from local authorities, child protection committees, third sector and different roles and different levels as well, some of which might be embarking on this already, some of which are about to start. And I wonder if you could just maybe start to think about for a couple of minutes about what would your key takeaways that you would want them to take away as they think about this. It's a really complex area, there are no simple answers. So, what is it that they need to be thinking about?

Stephen Morgan

It is a big question, and I think what we shouldn't do is make that question complicated, and that's my answer. Don't make your use of AI, and we're speaking specifically around transcription today, complicated. Don't jump on a bandwagon because you think there's a bandwagon there that has to be jumped upon. Carefully consider what the tool is you're looking at, and how you're going to use it in your current day to day practice. Because this is not about replacing what you currently do, but it will be about doing something different, and that might be slightly different, or it might be significantly different. But what you've got to think about is the data that you're gathering, the data that you're processing, and how does the tool help you do that more efficiently? And if you can't find an answer to those questions, don't use it. But I think you will find an answer to those questions. So it's really think about, what is it you're gathering, what is it you're processing, what does that look like, and how can the tool help and keep it as simple as that, and if you think of it in in simplistic terms like that, that will really help you in terms of your information governance as well.

Kathleen Doyle

Thanks very much, Stephen. And I'm remembering now some advice we got from the first webinar that we did around AI and you did this really

well at the beginning, too. What is the need? What is the problem? And allow the AI tool to meet that, it's not let's follow the AI. The AI needs to meet where we're at. So that's really helpful advice. Thank you. Jed, can I come to you?

Jed Meers

Yeah, so I guess two thoughts. One would be, how you explain the use of these tools is really important, and can colour not just that individual's interaction in the moment or even their consent to the use of their tool, but their broader perception, their engagement with that authority. So that's something to think really carefully about. And the second point, which follows from that, is people aren't all the same. You're saying this to loads of social workers who know this already, but people have different views and attitudes, but they also have different views and attitudes of the use of this kind of tool as well, and experience and engagement with it. And that might mean how you explain it to people will vary depending on who that individual person is. So, I think just to say people do care about the use of these tools. It does change their perception of that process when they're engaging with the authority. So that point of explaining it to them accurately in a way that's tailored to them really matters.

Kathleen Doyle

Thank you so much, Jed. Oliver?

Oliver Bruff

I think I'll broaden it out slightly, because this evidence that our project generates is part of a broader picture of AI adoption in the public sector more generally, and that is being pushed quite strongly by central government, and I think trickling down to people on the ground and local authorities as well. And our evidence points to the need to understand AI through a - what we refer to as socio technical lens. So, understanding AI and how it is both shaped by the social processes among the people that adopt these tools, and then also how it influences those processes as well. So, understanding that these tools change interactions with social workers and the children that they care for, they also change, how social workers acquire and create information about people, and the downstream implications of that throughout very complex systems, like the social care system, the justice system as well. Those are going to be nuanced and complex. And ultimately, it isn't a case of AI being a plug and play

efficiency improvement technology. It very much has to be well thought out and understood as to how these fit within a specific system.

Kathleen Doyle

Thank you, Oliver. Just in these last couple of minutes, can I wrap up and say thank you very much to you Stephen Jed, and to Oliver, for your perspectives, for your insights and for your time today.

It has been very thought provoking and stimulating, I think, with lots of questions. And I'm sure there'll be lots of things to follow up on as well. So a big thank you, and also a big thank you to the people there listening. We hope we got through some of your questions. I'm sure not all there's, there's so much here. But before I go, Can I also share a reminder with you that we've got our fourth webinar on the 18th of March at 10:30 and that's going to focus on the ethics of AI use as well. So, you won't want to miss that based on the conversations we've had today as well. So, thank you very much, and I hope you all have a very good day.