

Scribe and prejudice?

Exploring the use of AI transcription tools in social care

Social and Economic Policy

February 2026

Report

Oliver Bruff, Lara Groves

Ada Lovelace Institute



Contents

3	How to read this paper
5	Executive summary
12	Introduction
18	Methodology
21	The AI technologies in scope
23	Research insights
66	Recommendations
75	Conclusion
76	Acknowledgements
87	About the Ada Lovelace Institute

How to read this paper

If you are a part of a **technical team** responsible for procuring or implementing AI transcription tools in social care, read:

- [‘Insight 2’](#) for an analysis of existing approaches to evaluation
- [‘Recommendations’](#) to see how approaches to the adoption and evaluation of AI transcription tools could be improved.

If you are a **policymaker** and you are interested in different approaches to the adoption of AI transcription tools across local authorities, read:

- [‘Executive summary’](#) for an overview of these technologies, our findings and our recommendations relating to the possible risks and benefits in social care contexts
- [‘Introduction’](#) for a discussion of social care and the incentives that drive social workers and local authorities to adopt AI transcription tools
- [‘Insight 1’](#) for a discussion of local authorities’ different approaches to the implementation of AI transcription tools in social care
- [‘Insight 3’](#) for evidence of the different ways social workers use and benefit from AI transcription tools.

If you are a **policymaker** or **digital services lead at a local authority** interested in safeguards and guidance for the use of AI transcription tools in social care, read:

- [‘Executive summary’](#) for an overview of our findings on how social workers and local authorities are attempting to use AI transcription tools safely
- [‘Insight 4’](#) for an analysis of current safeguards against harm from AI transcription tools and the complexity of ‘human in the loop’ approaches in frontline contexts
- [‘Insight 5’](#) for a discussion of the inconsistent guidance and governance relating to AI transcription tools among different public bodies involved in social care

- [‘Recommendations’](#) to see how to improve existing safeguards, guidance and regulation, and to prevent harms stemming from social workers’ use of AI transcription tools.

If you are a **frontline worker** who is using an AI transcription tool and interested in the broader context in which these tools impact your work, read:

- [‘Introduction’](#) for a discussion of the adoption of AI transcription tools across the public sector and the potential challenges this creates
- [‘Insight 2’](#) for a discussion of how different local authorities implement AI transcription tools in social care contexts
- [‘Insight 4’](#) for an analysis of how different social workers approach the risk of AI-generated inaccuracies occurring in care records
- [‘What is an AI transcription tool?’¹](#), our explainer published alongside this report, for an overview of AI transcription tools and the technologies that power them.

Executive summary

The UK government is making a bet on AI's potential to transform the public sector. This ambition is reflected in the rapid rollout of AI systems in government and frontline delivery contexts, such as healthcare and policing. The stakes for this commitment are high. Previous research by the Ada Lovelace Institute has found that people want AI systems in these critical contexts to be governed to robust standards of safety, accountability and transparency.² Advancing these standards will help demonstrate a commitment to trustworthiness and better enable people and society to leverage the benefits of AI.

A technology of recent interest is AI transcription, which the government is recommending for use in critical frontline sectors with a high degree of information transfer, such as social care and healthcare. In 2025, we conducted qualitative research exploring the dynamics of adoption and the impacts of AI transcription tools in adult and children's social care across 17 local authorities in England and Scotland.

AI transcription tools turn spoken audio into written text to support note-taking and the documentation of conversations, meetings and interviews. They are powered by foundation models, which provide the capability to summarise and transcribe large amounts of audio and text with a higher degree of accuracy than previous generations of transcription technologies.

These tools are being rapidly adopted in frontline public services to automate the production of official documents that historically carry a high administrative burden for workers, such as patient records in healthcare and witness statements in policing. The take-up of AI transcription tools has been particularly significant in social care, where social workers use them to support the recording of interactions with, and decisions about, people who draw on care.

In early 2025, one AI transcription tool was already in active use by 85 local authorities for social care.³ The potential of AI transcription tools to help complete administrative work more efficiently and with fewer resources makes these tools an attractive solution for local authorities struggling with resource challenges and for social workers who face extensive documentation requirements in their work.

To date, there is only emerging evidence on the impact of AI transcription tools in public sector settings, which provides an incomplete picture. The rapid deployment of these technologies in resource-scarce public sector bodies raises questions about the extent to which their use can be effectively monitored and evaluated. At this juncture, coordinated research and policy responses between government, local authorities and researchers will help build public confidence in the use of AI transcription tools and support their safe adoption in frontline contexts.

Though these tools demonstrate promise for supporting workers with administrative tasks,⁴ they introduce risks such as bias and hallucination that are part of all generative AI systems.⁵ These risks have implications for documentation and decision-making generated with the support of AI. At present, social workers are fully accountable for their records and professional judgements regarding an adult, child or family who draw on their care. Any AI-produced inaccuracies that enter these records may have far-reaching impacts, such as a social worker making an incorrect decision about a child's care, which could lead to harm for the child and professional consequences for the social worker.

As a result, it is important to consider whether there is a sufficient 'human in the loop' – the process of a person reviewing and potentially revising material created wholly or in part by AI. More critically, the use of AI transcription tools in frontline public service contexts could place people who rely on these services at risk of AI-related harms, such as discrimination and exacerbating existing inequalities.

The lack of grounded evidence and systematic evaluations on AI transcription tools means that public servants and policymakers do not yet have a robust understanding of how the use of AI transcription tools changes the risk profile that people are exposed to in the social care system.

Our evidence shows that social workers see considerable opportunities for the use of AI transcription tools to positively change their care work and the social care system as a whole. They report readily observable time savings in producing documentation like care records. Our evidence shows these tools can also improve relational aspects of care work and the quality of information recorded by social workers.

However, we also find areas that require careful attention for these technologies to be used effectively and safely in social work (and in other domains). Policymakers and practitioners should take notice that:

1. It is unclear how much oversight is needed to review the outputs of AI transcription tools (the ‘human in the loop’) and to evaluate how well they work. This needs further empirical exploration.
2. AI transcription tools can significantly reduce the time spent on administrative tasks. Any efficiency gains should not compromise high standards of quality and fairness in critical decision-making.
3. Current uses of AI transcription tools risk harmful hallucinations and misrepresentations of people’s experiences to be entered into statutory care records.
4. The use of AI transcription tools challenges existing accountability structures in social care. Social workers are currently responsible for the additional work of ensuring the accuracy and quality of outputs.
5. Safeguards on the use of AI transcription tools in social care are inconsistent across and within local authorities, with no consensus on the contexts where these tools pose unacceptable risks and should not be used.
6. There is very little evidence on how AI transcription tools impact the experiences and outcomes of people who draw on care. Our evidence suggests that these tools can lead to harm in some instances.

Between March and October 2025, we interviewed 39 social workers across 17 local authorities with experience of using AI transcription tools, as well senior staff members involved in procuring and evaluating them. Our interviews revealed how AI transcription tools have impacted social workers’ care work; approaches to monitoring and correcting AI-generated documents; and methods for evaluating the efficacy and impact of AI transcription tools.

This evidence informs our insights, which are relevant for policymakers, social care practitioners and senior managers at public sector bodies who are considering the use of AI transcription tools. The implications of our findings are also relevant for other applications of foundation models and for public sector contexts outside of social care.

Ultimately, the insights demonstrate that the use of AI technologies to create efficiency savings in the delivery of public services requires continuous monitoring and evaluation, alongside context-specific guidelines and safeguards, to protect the workers that use these tools and the people who draw on public services.

Insights

The main body of our report is structured around the following insights:

- **Insight 1: Resource constraints in social care are inspiring widespread piloting, adoption and evaluation of AI transcription tools.** Local authorities are adopting AI transcription tools to alleviate significant resourcing challenges in social care, such as high staff turnover. Such challenges are incentivising local authorities to move quickly, involving light-touch pilots and sometimes pared-down procurement processes, which has implications for evidence gathering and evaluation.
- **Insight 2: Local authorities focus their evaluations on efficiency over the impact on people.** Local authorities across England and Scotland are using AI transcription tools with only emerging evidence of their impact on care outcomes or the social care profession. Given the resource challenges faced by local authorities, additional support from researchers and government is needed to build the evidence base.
- **Insight 3: Almost all social workers report that using AI transcription tools brings meaningful benefits to their work, but they do not experience these benefits uniformly.** Social workers do not always experience the full extent of the benefits of AI transcription tools. For example, while some social workers report efficiency improvements, some find that the additional work required to review AI-generated outputs or processes and workflows specific to their local authority prevents them from saving time with AI transcription tools.
- **Insight 4: Social workers assume full responsibility for AI transcription tools, but perceptions of the tool's reliability, accuracy and 'human in the loop' vary significantly.** The use of AI transcription tools to generate documents creates new mechanisms for people's experiences to be misrepresented in official records. Some social workers observed instances where AI-generated misrepresentations could directly lead to harm. Other social workers were less aware of possible AI risks. This creates inconsistencies in the oversight and evaluation of AI-generated documents.
- **Insight 5: There is no consensus on when it is appropriate to use AI transcription tools in social care.** Local authorities have different red lines about where AI transcription tools create excessive risks, as do other public bodies that support social care. Some have banned the use of the tools in statutory contexts, such as for creating Care Act assessments, while others are happy to proceed. In the absence of consensus, individual social workers are making decisions about when it is safe to use AI transcription tools (particularly

when they are not taking part in an approved pilot of the technology and instead experiment on their own).

Recommendations

Recommendation 1: The UK government should require that local authorities record their use of AI transcription tools through the Algorithmic Transparency Reporting Standard

Those involved in decision-making about a person's care need to understand where AI has been used to generate records, but it is impossible for decision-makers to reliably identify AI-generated evidence. The UK government should mandate local authorities to report their use of AI transcription tools by extending the mandate of the Algorithmic Transparency Recording Standard, along with developing new mechanisms, such as mandatory 'watermarks', to make it clear to decision-makers when individual care records have been produced using AI.

Recommendation 2: The UK government should extend its pilots of AI transcription tools to include various locations and public sector contexts

The UK government should make funding available for additional pilots of AI transcription tools to capitalise on local authorities' rapid adoption of these technologies. In particular, the government could coordinate pilots across multiple sites and encourage diverse methods of evidence gathering, particularly through qualitative methods.

Recommendation 3: The UK government should set up a What Works Centre for AI in Public Services to generate and synthesise learnings from pilots and evaluations

To address the evidence gaps highlighted in this report, the UK government should commit to establishing a What Works Centre for AI in Public Services. Such a centre would support the safe adoption of AI in the public sector by disseminating existing research to local authorities, supporting the generation of new evidence and establishing best practice for the evaluation of AI tools.

Recommendation 4: A coalition of researchers, policymakers, civil society and community groups should collaborate on research on the systemic impacts of AI transcription tools

Further evidence gathering will be critical to monitor long-term, systemic impacts of AI transcription tools in social care and other public services. Broad collaboration across academia, civil society and policy will be required to achieve this ambition and research funders should ring-fence funding to facilitate this collaboration.

Recommendation 5: Social care regulators and local authorities should work with other sectoral bodies to produce guidance for the use of AI transcription tools in statutory processes and formal proceedings, with clear accountability structures

To enable end-to-end accountability, regulators and professional bodies should review and revise rules and guidance on professional ethics for social workers and support social workers to collaborate with legal and advisory bodies around procedures for AI use in formal proceedings. An advisory board comprised of people with lived experience of drawing on care should be established to inform these actions.

Recommendation 6: The UK government should create and disseminate context-specific evidence about the contribution of AI to cost savings and productivity

Our insights demonstrate that the impact of AI transcription tools will vary across contexts and populations. By extension, the UK government should recognise the limits of extrapolating evidence on AI productivity across contexts. Granular evaluations making use of qualitative methodologies will generate more robust evidence and bring metrics beyond cost savings, such as workers' wellbeing, into focus.

Recommendation 7: Local authorities should specify their theory of change when procuring AI transcription tools to ensure a shared understanding among staff and users

Local authorities should adopt clear strategies of communication that designate ethical responsibility and set out a mission statement behind the intent to procure, pilot and adopt AI transcription tools, to facilitate transparency and inspire trustworthiness.

Introduction

Public sector organisations are introducing AI transcription tools in frontline contexts where public servants frequently make critical decisions about people's lives. In many cases, organisations are introducing transcription tools in a context of resource constraints where frontline workers produce significant amounts of administrative documents about people to inform decision-making.

These tools are particularly prevalent in social care, healthcare and the justice system.⁶ Ninety-eight per cent of GPs now have access to an AI transcription tool through the Accurx digital healthcare platform.⁷ Over 100 local authorities are using Magic Notes, an AI transcription tool designed for social care contexts.⁸

Local authorities in the UK are under significant financial pressure and face increasing demands on the social care services that they provide. Social workers often work overtime due to resource constraints and there is a significant backlog of people with care needs who are not supported by the social care sector.⁹

In this context, AI transcription tools – AI-driven tools that can record, transcribe and summarise audio, such as meetings and conversations – are an opportunity to increase the efficiency of social care services by automating the production of official records. Social work is a highly relational profession that requires dynamic care for individuals and families, but social workers spend the majority of their working time on writing and reviewing official records, such as assessments of people's care needs and plans to deliver care to people who require it.¹⁰

The potential for AI transcription tools to support social workers to complete this administrative work at a greater speed means that public sector organisations are considering whether these tools may be a contributing solution to the social care sector's resource constraints.¹¹

As discussed in our explainer on these tools,¹² the latest AI transcription tools use two foundation models to automatically generate transcripts of recorded conversations and summarise these in the different formats necessary for official documents. There is some evidence that these tools can reduce the amount of time that frontline workers spend completing administrative tasks. For example, one study of an AI transcription tool used in hospitals, cited in the UK government's

10 Year Health Plan for England, found that the tool ‘reduced the time spent on paperwork by 51.7% and allowed each doctor to treat 13.4% more patients during a shift.’¹³

Like all AI technologies, AI transcription tools are sociotechnical, meaning that they influence and are influenced by the surrounding social context in which they are used. Our previous research into the use of AI technologies in the public sector shows that these interactions can be significant and influence public acceptability of new technologies.¹⁴

It is therefore important to understand how AI transcription tools interact with the sensitive social systems into which they are integrated. As AI transcription tools are a form of generative AI, they also introduce specific kinds of technical risks to the documentation produced, such as hallucinations.¹⁵

An evidence base is emerging to respond to the rapid adoption of AI transcription tools in social care.^{16 17 18 19} However, some gaps remain.

First, it is currently unclear whether efficiency savings observed in individual studies of these tools are generalisable across different contexts in the public sector, or if efficiencies translate to increased productivity. One evaluation of Microsoft Copilot in the UK government’s Department for Business and Trade found that one of the most common use cases for Copilot was ‘transcribing or summarising a meeting’, which on average returned a time saving of 0.7 hours per task. This result is promising, but the study cautioned that the results do not offer ‘robust evidence to suggest that time savings are leading to improved productivity’.²⁰ The Department for Work and Pensions’ own evaluation of Copilot found that participants were better able to translate time savings to ‘higher value’ tasks such as strategic planning. Further research will support policymakers to make confident conclusions about how potential time savings are used, and to what effect.

Similarly, a pilot of the AI transcription tool ‘ADA’ (Anathem Digital Assistant), for use by police officers to generate witness statements at Hertfordshire Constabulary, found that while time was saved generating documentation, this was offset by the time taken to check the documentation for hallucinations.²¹ The evaluation also suggests that the introduction of AI may require additional oversight at the point where documentation interacts with other agencies, such as the Crown Prosecution Service, to ensure no errors are passed on.

The second challenge is that there is little understanding about the broader implications of these tools on public services and the people who rely on them. AI transcription tools perform differently for people with characteristics that are less represented in the data used to train the underlying foundation models. This includes certain types of slang speech, which may be closely correlated with a particular regional dialect or ethnicity.²² Such differences in performance can reproduce systemic inequalities and biases in the tools' outputs. This means there is potential for AI transcription tools to produce adverse outcomes for people in sensitive frontline contexts.²³ However, there is little evidence on what these adverse outcomes look like.

Our research contributes to efforts to address this evidence gap by studying the use and impact of AI transcription tools in social care. The UK's social care sector has rapidly adopted AI transcription tools and provides a salient case study for policymakers, practitioners and researchers who want to understand the implications for using AI transcription tools in frontline public services.

Introducing our research

In this project, the Ada Lovelace Institute aimed to explore how AI transcription tools are being incorporated into social work in the UK and to develop principles for evaluating these tools more effectively. We interviewed social workers from 17 local authorities in England and Scotland who have experience of using AI transcription tools and who work in different specialisms in both adult and children's social care. We also interviewed senior local authority staff members involved in the procurement and evaluation of AI transcription tools to explore the motivations for adopting AI transcription tools and the methods and metrics used to evaluate them.

By focusing on the implementation of AI transcription tools in a critical frontline profession, we aim to shed light on the emerging impacts of these technologies and to inform policy and practice for AI adoption in the public sector.

Adult and children's social care in the UK

Adult social care and children's social care are two separate systems with distinct characteristics and challenges. Adult social care is focused on supporting adults with their daily living activities, their independence and wellbeing. Children's social care is primarily focused on safeguarding and promoting the welfare of children and their families.

However, in recent years, sector challenges have led to the prioritisation of services that deliver core statutory duties rather than the more discretionary support offered in previous years. This means that interactions between children, families and social services are less likely to include meetings that build relationships or support a child to understand their life story through care, and more likely to focus on delivering legally required outputs such as care reviews. There are common factors in both adult and children's social care that present potential incentives for the wide adoption of AI transcription tools.

First, real-terms cuts to social care expenditure between 2009 and 2015 reduced local authorities' budgets and although real-terms spending has increased in recent years,²⁴ significant backlogs remain, meaning many people are not receiving the care they need.^{25 26 27}

As a result of increasing demand for services and the rising costs of employing social workers, local authorities are also increasingly spending more than their allocated budgets for social care, which is pushing some local authorities towards insolvency.^{28 29 30}

Resource constraints and funding cuts also have a significant impact on social workers themselves. Social workers' salaries are lower than comparable professions and in recent years have grown at a slower rate.³¹ Social workers across adult and children's social care also face poor working conditions and high levels of stress and burnout due to intense workloads and pressures on the social care system.³²

Second, documentation is an integral component of social care but also a time-consuming one. Social workers produce documents to record meetings and set out plans for a person's care, which are then reviewed and discussed with other social workers or public sector agencies. These documentation requirements are so extensive that social workers spend the majority of their time note-taking, writing and reviewing documents.³³

At the same time, drafting documentation is also valuable for social workers to hone their own professional judgement and practice. This documentation is essential as it enables social workers to evidence their decisions and supports people to understand decisions that are made about them and seek redress if things go wrong.³⁴

Additionally, the social care sector struggles with staff shortages and staff retention. The turnover rate for social workers in 2024 was 12.8 per cent for adult social care³⁵ and 13.8 per cent for children's social care.³⁶ The time that social workers spend documenting their interactions and other back-end administrative work, is the most significant factor causing social workers to consider leaving the profession.³⁷

The regulation and regulatory structures in social care may also be a contributing factor to the sector's rapid adoption of AI transcription tools. At present, there is no dedicated regulator of digital tools used in social care settings; all adoption of digital technologies will fall under the Care Quality Commission (England) and Care Inspectorate (Scotland) remits to regulate social care delivery.

This can be compared to the healthcare sector, where the Medicines and Healthcare products Regulatory Agency (MHRA) regulates many digital devices used in healthcare. AI transcription tools (sometimes referred to as 'ambient voice technologies' or 'ambient scribes' in the sector) are currently classified as Class I medical devices by the MHRA.³⁸ The same tool used in social care would receive no such rating.

The above challenges for the sector are resulting in significant operational constraints and underscore some of the incentives for local authorities and social care providers to consider automation or digital technology adoption to ease resources.

Previous adoptions of digital technologies by social workers

Given the pressures on social workers, automating some documentation processes could have a significant impact on the sector, particularly for people who determine access to provision and who draw on care services. However, previous adoptions of digital technologies show that new technologies can create unintended consequences and have broad implications in social care contexts.

Maintaining effective relationships with people is a fundamental aspect of social workers' care work and can lead to improved care outcomes.³⁹ Research shows that the use of digital communication technologies can have varying impacts on these relationships. In some instances, digital communication can be empowering for people accessing social care, by giving them control over how they communicate with social workers.

However, new forms of communication can also alter the power dynamics and boundaries in a relationship, as well as impose time and format constraints on communication. This risks further exacerbating structural inequalities and the disempowerment experienced by many who draw on care.⁴⁰

The implications of using new technologies for care outcomes also depend on how individual social workers use them. Research on the use of algorithmic decision-making tools (ADTs) in children's social care shows that how social workers use the outputs of these tools can be different, according to their own cognitive load, biases and understanding of the technology.⁴¹

Similarly, the successful adoption of new technologies in social care depends on who is involved in the design and implementation. Our research into the use of an ADT in a London local authority found that social workers were unclear about how the technology functioned and the reasons why their local authority was using it, which undermined trust in the tool and made it less useful.⁴²

Moreover, studies of the use of digital technologies in social care show that without meaningful involvement from care practitioners in the design of these systems, such systems can be challenging to use and lead to information being lost or mismanaged.⁴³

Incorporating new technologies into social care systems can have unintended consequences and the above context provides important considerations for the introduction of AI transcription tools into social work. Social workers understand how new technologies change the nature of their care work in different contexts and will be some of the first people to identify any challenges they pose to care outcomes or to social care as a profession. As a result, we designed our research methodology to incorporate and amplify the opinions and experiences of social workers as much as possible.

Methodology

This study had two specific aims: to create evidence about how the use of AI transcription tools changes social workers' care work; and to document approaches to the evaluation of AI transcription tools in social care settings across different local authorities.

Our five research questions:

- How are social workers using AI transcription tools?
- How have social workers adapted their care work to accommodate AI transcription tools?
- Why are local authorities adopting these tools in social care and what are their metrics of success?
- How are local authorities currently evaluating these tools in social work?
- What should the core principles of an evaluation framework for AI transcription tools in social work be?

To answer these questions, we conducted a total of 39 semi-structured interviews from March to October 2025. We interviewed social care professionals who have used AI transcription tools (and are employed by local authorities, not agencies) and senior local authority staff members involved in the procurement and evaluation of AI transcription tools at local authorities, who we refer to as 'managers' in the report. The managers' roles included terms like digital transformation, service delivery and IT management.

We also interviewed one expert in natural language processing (NLP) and experts in the design and evaluation of AI transcription tools employed by AI transcription tool vendors – one employed by Beam and three employed by The Access Group, a software vendor to local authorities' social care teams, who we interviewed collectively.

Beam, The Access Group and another tool vendor, Microsoft, are named throughout the report, but only where it is pertinent to do so. For example, they are

named in the discussion comparing capabilities of general-purpose tools (such as Microsoft's Copilot) and a narrow, domain-specific generative AI tool designed for social work (Beam's Magic Notes). We have also reproduced details about tools and vendors shared with us in interviews that have a basis in fact, but details about personal or organisational experiences or opinions of tools or vendors have been obscured.

We recruited social workers for our interviews through two processes. One, through snowball recruitment via direct engagement with local authorities, and two, through a recruitment agency, to include social workers from a wider range of local authorities.

In total, we interviewed 29 social workers from 14 English local authorities and three Scottish local authorities. Sixteen social workers worked in children's social care and 13 worked in adult social care. The majority of interviewees were employed by local authorities in metropolitan areas, including some London boroughs, with rural local authorities less represented in our study.

We use 'social workers' to describe all the frontline social care professionals who participated in our interviews. However, some interviewees worked in roles under the banner of social care but with a particular specialism. For example, we spoke to one occupational therapist. The social workers we interviewed had a range of experience, from less than five years up to 29 years.

Using transcripts of the interviews, we applied thematic analysis to code the interviews according to common topics and themes. From this analysis, we developed the five insights presented in this report.

Our insights may not be generalisable to all local authorities or reflect the experience of all social workers across the UK. Social care provision and regulation differ significantly between Scotland and England, because each is governed by a different regulator. While our insights were similar across Scottish and English local authorities, it is important to note that our interview sample was skewed towards England. Our interview recruitment rounds did not surface any local authority staff from Wales or Northern Ireland.

We re-emphasise that our research is qualitative and centred on reported attitudes and experiences with AI transcription tools. We did not conduct a formal technical evaluation of any tool or use any experimental methodologies in this study, such as systematically comparing accuracy of AI-produced transcripts.

Finally, we did not speak to people who draw on care or any care-experienced people about their experience of, or attitudes towards, AI transcription tools. Existing research, such as quantitative studies of public attitudes towards AI transcription tools in social care⁴⁴ and deliberative research with care-experienced people,⁴⁵ shows that people are receptive to the idea of AI transcription tools in social care when social workers use them with appropriate oversight and safeguards. Further research with people who access social care that examines the evolving impacts of AI transcription tools, and approaches to their implementation in care settings, remains critical.

The AI technologies in scope

We invited our interviewees to share their experiences with AI transcription tools, a broad group of technologies that have transcription and summarisation capabilities used for tasks such as recording and note-taking in meetings (in frontline and back-end work). These technologies may also be referred to as ‘AI scribes’, ‘ambient scribes’ or ‘ambient voice technologies’.⁴⁶ A detailed explanation of the technical features of AI transcription tools and their risks and benefits can be found in our dedicated explainer on this topic.⁴⁷

It is important to emphasise that AI transcription tools are different from previous generations of transcription technologies. Specifically, AI transcription tools are powered by two types of foundation model. These foundation models are trained on extremely large datasets of recorded speech and written text.

The first type of foundation model, called an automated speech recognition (ASR) model, can create a written transcript of a conversation. The second type of foundation model, a large language model (LLM), is the kind of model that underpins popular AI tools like ChatGPT and can reproduce written text in new formats and structures.

The use of ASR models and LLMs to power AI transcription tools has three advantages over previous generations of transcription tools: they are more accurate, they can create automatic summaries of transcribed text and they include a natural-language interface for users to edit transcripts and summaries.

However, like all systems built from foundation models, there are risks of bias and fabricated text (hallucinations). AI transcription tools may also bring other systemic risks to some contexts, such as contributing to workplace deskilling.⁴⁸

These new features of AI transcription tools have contributed to their rapid adoption across the UK public sector, beyond social care.

In this report, the term ‘AI transcription tools’ refers to AI tools built specifically for the purpose of transcribing and summarising, as well as more general-purpose generative AI systems (such as ChatGPT) that have a broader range of capabilities, which include transcription and summarisation.

The majority of our interviewees either designed or participated in a local authority-led pilot using Beam's Magic Notes. Magic Notes is an AI transcription tool designed specifically for application in social care. As we set out in our 'Methodology' section, some social worker interviewees were recruited directly instead of through their employing local authority.

The majority of these interviewees reported using Microsoft Copilot, which is a generative AI tool designed for general-purpose use, with a broader set of capabilities beyond transcription and summarisation, such as dictation, language translation or image-generation capabilities.

Among the social worker participants, 12 used Magic Notes, 12 used Copilot, two used both Magic Notes and Copilot, one used Copilot and ChatGPT and one used Copilot and a non-AI speech recognition software, Dragon NaturallySpeaking.

It is important to note that even though these tools all enable transcription, and they are likely to be built from the same foundation models, they are not precisely 'like-for-like'. Application-specific tools like Magic Notes have been fine-tuned with specific safety features and language capabilities that make them capable for use in social care. A general-purpose system will be designed to work effectively for the greatest number of people, which may mean they do not respond as well to domain-specific language or tasks.

As we state in our 'Methodology' section, we present analysis or quotes that feature a named tool where it is pertinent to refer to the named tool's outputs or capabilities specifically. Otherwise, we group all tools under 'AI transcription tools'.

As we are led by the material from our interviews, we do not capture or report on the full range of AI transcription tools currently on the market and in active use in social care in the UK. Social workers in local authorities that were not included in our research may use other AI transcription tools. Examples include Minute,⁴⁹ developed by the UK government's Incubator for AI (i.AI).⁵⁰

Research insights

Our interviews with social workers, managers and transcription tool experts reveal a diversity of attitudes to, and experiences with, AI transcription tools. Our insights highlight some of the incentives for adoption, the impacts of these technologies on social workers and the wider implications for policy.

The five insights below detail the key themes from our interviews. They show that AI transcription tools can meaningfully improve social workers' care work, but social workers experience the benefits of these tools unevenly. Managing the risk of inaccuracies in care records also creates additional responsibilities for social workers, which they sometimes struggle to fulfil.

Moreover, local authorities' need for efficiency savings means they conduct evaluations quickly, with a focus on productivity metrics, such that there is little understanding of the downstream implications of AI transcription tools for social workers or people who draw on care.

Insight 1: Resource constraints in social care are inspiring widespread piloting, adoption and evaluation of AI transcription tools

Local authority budget cuts, high staff turnover and other systemic challenges in the social care sector present clear-cut incentives for local authorities to innovate through new technologies. It is unsurprising that our insights very clearly correspond with this picture and below we shed light on the reasons why local authorities across England and Scotland are piloting AI transcription tools.

Most local authorities pilot AI transcription tools to alleviate resource constraints, but some are motivated by their reputation as 'innovators'

We asked digital and delivery leads in local authorities ('managers') with responsibility for piloting AI transcription tools whether they had a theory of change that motivated their actions and decisions. Resoundingly, managers reported that they believe introducing AI into certain processes or teams would alleviate resource constraints, an attractive prospect for social care transformation given the challenges faced by the sector.

One manager explained how ‘everybody is struggling with resource, there’s not enough money... so if we can make the resources more efficient and eliminate some of that work from a person, that resource that we do have can be better utilised to add value to a service’.⁵¹

Other managers said that AI transcription tools ‘could play a huge part in easing the burden’⁵² on the social care sector or that ‘anything that would save practitioners time, but also raise the floor of our social care recording would be something really good’.⁵³

Managers shared how the profession faces such acute challenges that it would be worth trying anything to improve the on-the-ground context for social workers. As outlined by one manager: ‘For like 15 to 20 years now it’s been austerity, and freezing, and [doing] more with less and all that kind of stuff, so there is always a productivity push [...] if there is a potential for a new technology or new way of working or new service to provide us with efficiencies, then we have to explore them’.⁵⁴

One manager felt so enthusiastic about AI that they put forward that one goal should be to eliminate administrative paperwork entirely from a social worker’s remit.⁵⁵

This ambition reflects many of the common complaints described by social workers about the most arduous elements of the profession. One social worker said: ‘I think all of us feel like we do too much paperwork, I can see the value of everything that we record, but there’s a lot of repetition [...] I think AI has got a big part to play in helping us reduce that’.⁵⁶

In this study, our initial pool of interviewees comprised managers and social workers undertaking pilots of AI transcription tools. These pilots were mostly of Beam’s Magic Notes and typically involved ten to thirty social workers using the tool for a period of two to four months, providing a small sample of social workers to observe and gather feedback from before a wider rollout. Small-scale pilots were felt to enable richer data gathering: ‘We did [this scope of the pilot] because it was such a small cohort we could interview each of the people there’.⁵⁷

Some local authorities gathered their own data about the efficacy and impacts from social workers, so they had additional evidence of the implications of AI transcription tools, alongside evaluations conducted by the vendor Beam. For

example, three local authorities gathered opinions via a feedback survey^{58 59 60} and one used qualitative interviews.⁶¹

Some local authorities introduced a second pilot, typically to bring in participants from a new team. Often, piloting began with adult social care before moving to children's social care. One local authority notably included the perspectives of people who draw on care in their pilot:

'We had young people who were part of the process, so their social workers were going out and saying "we're testing this piece of technology, will you help me?" And we're then sitting with them, with the transcript and saying does this reflect our conversation? And that was really important to us because we wanted to even up that equity of the child's record.' – Manager Y

Due to the acute resource challenges in the sector, many of the interviewees said that their local authority was happy to take a bold approach to procuring and piloting transcription tools. Typically, local authorities conduct pilots before moving to the full procurement process. One manager explained why their local authority had adopted an AI transcription tool without fully piloting it beforehand: 'I think [with AI] it's okay to accept there isn't expertise on this yet, that it's all emerging and growing and that we're figuring it out as we go along, and that might feel a little scary and not how we usually work as a public sector organisation.'⁶²

Managers mentioned piloting commitments such as the completion of a data protection impact assessment (DPIA) to fulfil compliance requirements, but other types of AI-specific or equalities impact assessments or research were less reported.

One interviewee said they were using social work as a 'test bed' to see if they could scale the adoption of these tools to other parts of the local authority:

'I think the good thing about it is, once you've implemented it to the scale that we have with social work, the process for that is like, well, where do you want to put it next? Are there any templates that we need to modify, or can we use existing ones? So, the process isn't that long really to do that, and so then it can become part of, you know, that ongoing progress.' – Manager D

However, the relatively larger resourcing and scale of some pilots that managers described reflect the diversity of funding different local authorities can allocate

towards technology pilots. Some interviewees specifically highlighted successful previous pilots and a higher degree of resource that enabled a 'first mover advantage' on piloting AI transcription tools.

These local authorities tended to have teams and roles already in place, such as ethics or evaluation groups, to support the smooth adoption of the technology. For example, two interviewees shared the benefits of dedicated roles and teams:

'So here in [this local authority] we pilot and test a lot, and our mantra is test loads of things, and if they're going to fail, let them fail quickly. And that can be difficult in local authorities, because there's a lot of effort in bringing together testers [and doing] information governance. That's why we're lucky in me having a dedicated role.' – Manager Y

'You know it's not somebody that just does kind of bound paper exercise mapping type stuff. This is a whole team of people that have gone on proper training of techniques, on how to draw out benefits and understand and get under the skin of service delivery.' – Manager C

One manager said that their local authority was planning to pilot multiple AI transcription tools from different vendors over a short period, to test the impacts of each tool and make comparisons based on performance.⁶³

Another interviewee described the pressures on their local authority to take a future-facing approach to digital technology and innovation as 'we're almost preparing for a world we don't know yet'.⁶⁴ This explained their impetus to adopt AI transcription tools quickly and also highlights how innovation and efficiency goals can support each other.

A manager at a different local authority spoke about the high degree of impact the COVID-19 pandemic had on the authority's tendency to adapt and innovate using data and technology in service delivery, as services were forced to shift from in-person to online.⁶⁵ They described a significant culture shift that inspired sustained consideration of where service delivery could be supported with technology, which inspired widespread interest in AI among senior managers.

While our research demonstrates that most local authorities adopt AI transcription tools to ease resourcing challenges, the different capacities and institutional

contexts within local authorities have led to pilots of AI transcription tools varying significantly across England and Scotland.

Some local authorities with well-established and resourced evaluation teams have been able to pilot multiple tools with different teams, before moving to official procurement procedures for formal adoption. Others have piloted a single AI transcription tool and adopted it quickly without significant oversight, after an initial pilot phase, to alleviate systemic challenges in social care as soon as possible.

These different approaches reflect a wider lack of consensus or coordination on AI pilots⁶⁶ and suggest that the understanding of the impacts of AI transcription tools and best practice approaches to governance vary significantly across the social care sector.

Some local authorities have made generative AI available outside of dedicated AI transcription tool pilots

As we outline in our 'Methodology' section, at the outset of this study we recruited social workers from seven local authorities with publicised pilots of AI transcription tools, predominantly of Beam's Magic Notes.

When additional social workers recruited via an agency joined the study, we found that many of them were using general-purpose AI tools like Copilot. These tools were used outside of a dedicated pilot where usage is more actively directed and monitored.

Many local authorities have long-standing licencing arrangements with large technology providers like Microsoft, with Copilot featuring in recent licence packages for organisational function and administrative support. Unlike Beam's Magic Notes, for example, Copilot has capabilities for a range of tasks and is therefore, by default, not trained on additional context-specific data, such as social care terminology, that might make it more effective in social care settings.

These contexts present interesting considerations for social workers' experiences of AI and have implications for monitoring and learning at the level of individual local authorities. One social worker described how the generality of the Copilot tool sometimes impeded their work and created the additional task of reviewing outputs, particularly when summarising transcripts to create Care Act assessments:

‘Copilot for me is very broad, it’s not really streamed for social care. Hence [when using it for] Care Act assessments I have to really check whether it’s giving me the right information. So, what is needed is to get an AI that is suitable for social care that will also fully understand the language.’ – Social worker Y

A similar problem was reported by a manager who found that Copilot’s content filtering meant that sensitive content such as descriptions of abuse, discussed in the context of a meeting with someone who draws on care, was filtered out automatically.

‘Copilot stops, it won’t transcribe [detail about abuse] – rightly so, because Microsoft’s trying to make sure it can’t be used for nefarious means. The problem is that social workers deal with that day in, day out, and because the tool can’t transcribe it, it creates a limitation there.’ – Manager A

Local authorities may be incentivised to opt for the introduction of an AI system with easier integration potential. One manager explained that Copilot’s secure Azure hosting would better integrate with their existing Microsoft products compared to an AI transcription tool hosted by another cloud provider.⁶⁷ Offering employees tools from vendors whose products they already use may inspire confidence of similar successes.

Many social workers using Copilot without specific guidance provided by their local authority felt they did not know who they would turn to if something went wrong. One social worker, who discovered they could access AI transcription tools independently through their local authority’s Copilot subscription, said that management did not communicate this update to staff: ‘We have bi-weekly “keep in touch” meetings with the director of children’s services, where they will come down and speak about things that are going on within the service or new updates. The introduction of Copilot has never come up.’⁶⁸

It is possible that the introduction of more general-purpose AI tools like Copilot might present undue risk to a profession like social work. One manager put forward that very few AI tools offer a strong level of data protection suitable for the ‘vulnerable’ data created and processed by social workers about people who draw on care. They believed that Magic Notes met the bar, but Copilot did not.⁶⁹ Social workers using both Copilot and Magic Notes reported feeling very concerned about data protection with greater use of AI in social work.^{70 71 72}

Local authorities create risk to both social workers and people drawing on care (see the insights below) due to a lack of relevant organisational mechanisms, like training in AI or oversight of documentation, and by not communicating and collaborating with social workers to integrate these where they do exist.

The rush to adopt can create challenges for implementing AI transcription tools according to complex needs, often leaving vendors with a high degree of influence over pilots and evaluations

Even well-resourced local authorities with specially designed pilots for transcription tools have not been immune to challenges in implementation.

One manager felt that frontline workers in their local authority had largely been 'isolated' from developments in the use of new technology at work to date, which they said was likely to create ongoing challenges to rolling out AI in social work.⁷³ They suggested that increasing 'digital literacy' among workers and other members of staff may support smoother adoption.

Local authorities undertaking pilots leveraged a range of approaches to support social workers with the introduction of AI transcription tools, including e-learning modules,⁷⁴ webinars,⁷⁵ practice guides⁷⁶ and hands-on demos of the tool.⁷⁷ We asked social workers whether they felt their local authority had offered sufficient guidance and training to accompany the introduction of AI transcription tools, which prompted a range of perspectives. Some social workers we spoke to said that the training they received was too fast-paced or insufficiently explanatory.^{78 79}

Social workers who started using AI transcription capabilities without specific instruction or guidance from their local authority were more likely to rely on colleagues for support or be self-taught. One social worker explained that they followed their line manager's example when using an AI transcription tool and that if 'managers are using it then it must be okay, there's a way of using it correctly'.⁸⁰

Another explained how information sharing among their colleagues was limited and that some colleagues had more sophisticated awareness of AI transcription tools than others: 'A lot of people have now got the idea that you can use AI to transcribe, but I don't know that everybody's got the idea you can talk to it and improve the quality of [the output]'.⁸¹ To correct this, the social worker said local authorities should think about more robust measures to support the adoption and use of AI transcription tools:

'I feel like we need more policies about it. [...] I do feel like we've gone ahead with [AI rollout] without really knowing [about the system] [...] And that's a problem rather than figuring it out before we let, you know, 1000 social workers go and use it.'⁸²

We also found evidence to show that the degree of relationship between local authorities and AI transcription tool vendors has an important impact on implementation processes. For example, local authorities conducting pilots of Magic Notes reported Beam to be a very active vendor in the piloting and wider implementation process, generally working very closely with social workers and local authorities and conducting demonstrations of the product with relevant teams. One manager said: '[Beam] were there all the time with the team that were testing [Magic Notes]. [...] So they didn't shy away from being in the presence of the people they deployed it to. They wanted to get feedback.'⁸³

Social workers reported that Beam also maintained consistent relationships with them throughout the pilot,⁸⁴ including via a direct chat function through the Magic Notes web interface.⁸⁵ However, social workers reported mixed levels of satisfaction with this degree of engagement, with one social worker explaining that responding to frequent requests for feedback was a significant demand on their time.⁸⁶

Beam reports working with as many as 100 local authorities to introduce the Magic Notes tool.⁸⁷ Many local authorities were particularly attracted to Magic Notes due to Beam offering a free proof of concept for individual authorities to ensure the technology was properly attuned to local challenges.

For example, many of the managers that we spoke to who had been involved in procurement processes for Magic Notes highlighted how Beam worked with their local authorities to design 'templates' for different kinds of social care documentation (the specific requirements of which can vary significantly between different authorities). Local authorities found this customisation useful, because standardised templates often did not integrate well with their processes:

'The out-of-the-box templates needed improvement, so that was one thing that we did look at. You know, specifics to our locality, we're quite a rural county, so we needed to change things to meet the different needs of, you know, travel and transport and things like [...] we just needed to tailor it into what we needed a little bit more and we have done since the pilot.' – Manager Z

Often, local authorities limited their pilots of Magic Notes to use cases where Beam and the local authority had developed an approved template for the relevant documentation. One manager explained how ‘it was a six-week pilot and we ran two different templates, which was the Care Act assessment and the occupational therapy assessment’.⁸⁸ Local authorities that decided to continue with Magic Notes after the pilot then developed more templates with Beam to expand the range of contexts in which social workers could use the tool.

However, one manager cautioned that pilots could exceed their agreed upon boundaries and suggested a risk of ‘scope creep... in that, kind of, sense of [vendors] making new templates for things that we don’t want them to’.⁸⁹

At the same time, managers told us they felt it was worth leveraging vendor resources and expertise on AI transcription tool evaluation approaches. For example, Beam currently conduct an evaluation for each local authority deploying Magic Notes, which was well-received by our interviewees.

However, one manager suggested an additional evaluation led internally would be necessary to capture their local authority’s independent conclusion, to avoid over-reliance on the vendor’s business case. They described their process as involving ‘[our own] quality assurance work on what AI-generated case notes looked like’, which yielded a ‘slightly less positive’ result.⁹⁰

The evidence above is illustrative of how even well-intentioned pilots will need to confront the complications of on-the-ground deployment contexts. It also shows what local authorities looking to procure AI transcription tools or other AI technologies may experience in their relationships with vendors, highlighting the need for robust procurement strategies.⁹¹

As we describe in the ‘Implications for policymakers and practitioners’ section below, it is important for local authorities to conduct their own evidence-gathering processes to support evidence provided by AI vendors. This may be especially important in the context of Magic Notes pilots, if adoption continues to advance significantly, as Beam may find that its existing levels of engagement, research and support to local authorities are less able to scale.

Implications for policymakers and practitioners

These insights highlight some of the potential ongoing implications for AI transcription tool pilots, where pro-social and societal outcomes interface with

goals like efficiency and innovation. As we have shown, many local authorities have grand ambitions for the adoption of AI in social work. However, certain on-the-ground contexts, such as acute resource constraints, are likely to require local authorities to make trade-offs about the speed and scale of their piloting of AI transcription tools.

That said, we find local authorities are generally introducing considered pilots of emerging AI transcription tools, which is a promising indicator of responsible adoption of AI in the public sector. It is evident from our interviews that the ‘test and learn’ approach (that prioritises continuous monitoring and improvement) is best practice for the adoption of AI transcription tools in social work, and many authorities are working in this capacity already.

However, local authorities should be aware of the potential risks surrounding shorter than usual procurement processes, along with the potential influence and impact of vendor relationships (particularly where local authorities invest significantly on procurement contracts).

We also suggest that local authorities act carefully when introducing AI transcription tools for wider implementation and gather evidence from social workers, or other intended users of the tools. This will enable a smoother and more effective integration of AI in social care, as its use will be informed by real-world experiences and expectations.

The automation of documentation processes in social care is likely to result in important material benefits to social workers. We offer partial evidence that AI may contribute to this ambition. However, it remains critical that local authorities keep in mind the systemic impacts of AI in social care and consider other solutions beyond technology adoption to tackling challenges in social work, particularly to ensure that people who draw on care experience improved outcomes. As a manager at one local authority stated:

‘My concern is that adult social care is seen as an adjunct of the NHS and predominantly as a tool to get people out of hospital. That really is such a reductive view of what adult social care does. That worries me, because if that’s the perception, then AI will then be pushed towards just increasing efficiency and less about outcomes of the individual, I’m less concerned about service outcomes. I’m more concerned about personal outcomes for people drawing on care and support.’ – Manager F

Insight 2: Local authorities focus their evaluations on efficiency over the impact on people

Local authorities adopt AI transcription tools as a solution to their significant resource challenges, which has led to a focus on measuring efficiency savings in their evaluations. Unsurprisingly, most evaluations measure the time that social workers spend writing official care records or the total number of visits that they conduct, as ways of measuring efficiency.

Some local authorities also aim to measure the impact of AI transcription tools on the quality of official care records and social workers' wellbeing, by incorporating qualitative metrics through surveys and interviews into their evaluations. However, these metrics are secondary to measures of efficiency savings.

We also found very little evidence gathering on potential systemic impacts of AI transcription tools on the broader profession of social care, despite this being a concern of social workers, or the experiences of people who draw on care.

The local authority managers that we spoke to were concerned about these issues, but the rapid adoption of AI transcription tools and the difficulty of evidencing such trends from within local authorities themselves have prevented them from incorporating such questions into their evaluations.

Most local authorities primarily evaluate efficiency savings from the use of AI transcription tools

As we identified in our explainer on the topic,⁹² evaluating the suitability of AI transcription tools may require multiple metrics to understand its utility in context. We interviewed an expert in natural language processing (NLP) who researches the real-world application of AI transcription tools. They explained that while most evaluations focus on the impact of AI transcription tools on efficiency, a variety of metrics are needed to fully understand the implications of these technologies:

'Medical providers [in the US] are currently running RCTs [randomised controlled trials] of these sorts of tools in hospitals. And the only metric that they've been measuring is efficiency. So how many clients or patients can you see every day – there's no measurement whatsoever that the transcriptions are actually accurate, and whether there is disproportionate harm to the patient in any of these interactions.' – NLP expert 1

Our research demonstrates a similar focus on efficiency in local authorities in the UK, as every manager we spoke to prioritised measuring efficiency in their pilots of AI transcription tools.

As an example of measuring for efficiency, one manager wanted to test whether social workers could use AI to relieve their administrative workloads, so that social workers could move from one home visit per day to two.⁹³ Another chose to measure the 'lead time' needed for writing assessments, to see whether the AI transcription tool reduced the lead time. They also measured the number of completed assessments to measure any potential reduction in waiting lists.⁹⁴

Managers also spoke of the pressures to evidence an ROI (return on investment) or cost saving from the introduction of AI transcription tools, which they aimed to achieve through improvements in efficiency.⁹⁵ Some local authorities used a level of controlled testing to determine where these tools saved time compared to status quo approaches. For example, conducting some tests on a sample of transcripts produced by an AI transcription tool and comparing them to outputs produced by social workers without using the tools.

Local authorities often prioritise evidence about time savings over other measures of the suitability of AI transcription tools. One social worker explained that: 'In terms of the conversations we've had as a team, it's more often been "how are you using it?", "what are you using it for", and "how much time has it saved you?", rather than a quality aspect.'⁹⁶

Current evaluations of AI transcription tools do not adequately confront systemic impacts or workers' experiences in their design

Researchers and policymakers with a stake in the successful adoption of AI in the public sector have been calling for routine evaluations to measure the impact of AI technologies in different contexts.^{97 98} In our research, we find there is strong appetite for internal risk assessment and evaluation of AI transcription tools, but the introduction of evaluations in practice presents a more complicated picture.

Given the varying resources and capacity of the local authorities in our sample, it is unsurprising that we found different degrees of evaluation. For example, one local authority has their own evaluation group for social care tasked with assessing the suitability and impact of AI.⁹⁹ Others rely on mechanisms already in widespread

use for similar projects, like equalities impact assessments or data protection impact assessments.

Generally, local authorities focus on what one manager described as 'straightforward metrics', like whether AI supported 'decreasing workloads'.¹⁰⁰ The same manager described some of the measurement challenges of this approach: 'We have to use loose percentages because it's not something that can be measured from one social worker to the next.'¹⁰¹

We also asked managers at local authorities piloting AI transcription tools whether they adopted any externally published guidance to support their evaluations, such as the UK government's guidance for AI evaluations.¹⁰² Most managers said they had not used these resources.

The government guidance recommends performing experimental tests with established counterfactuals where possible, but we did not find evidence of local authorities performing such evaluations in this study, nor is it likely that local authorities are equipped to conduct these.

One vendor of AI transcription tools said that they conduct customer evaluations with individual local authorities, including working with authorities on their KPIs and measurement goals for the evaluation:

'Going back to theory of change, the time saving is the most straightforward one that's been well documented. That's what the majority of these evaluations look at. However, I think what's trickier but more powerful, more important, more moving more profound, is the impact on [...] the social workers themselves [...] if you did a kind of longitudinal study or something over a much, much longer period of time, you would see that it does affect things like retention, like employer satisfaction, like the ability for a wider range of people to be able to go into social work as a profession now.' – Vendor 2

There are wider systemic implications surrounding the use of AI transcription tools in critical decision-making contexts that evaluation metrics focused on efficiency savings will not capture.

A manager from one local authority described their process of technology procurement as including more 'holistic assessment [...] of dignity, humanity and

autonomy’,¹⁰³ which they felt enabled questions about wellbeing and the future of the profession to be brought into view.

There may be systemic effects on local authorities and the social worker profession if AI use becomes more widespread, particularly if people’s roles are changed significantly by the adoption of AI. Despite some local authorities actively trying to allay fears about job replacement,^{104 105} social workers told us they were worried about the potential for AI transcription tools to change social work as a profession,¹⁰⁶ as described by this interviewee:

‘There is a risk with AI that people lose their professional skills and analysis and assessment. And because when people are really busy we always want to do something that’s quicker or something that’s easier. I think there is a real worry that [AI] will increase this. [...] We shouldn’t be using it for analysis.’ – Social Worker X

Owing to inconsistent guidance within and between local authorities on the appropriate use of AI transcription tools (see Insight 5 below), it is not clear how much local authorities are monitoring and evaluating the impact of AI on the skills and professional judgement of social workers.

The social workers that we spoke to had divergent views on AI’s likely labour impacts, with some believing that AI could support some of the systemic recruitment gaps in the profession,¹⁰⁷ while others believe it could eventually replace some of these jobs.¹⁰⁸ Some believe human workloads will be maintained to provide the ‘human in the loop’ function required by AI.^{109 110}

One social worker managing a team of junior social workers reported that they were likely to introduce targets for case management because of the observed time savings introduced by AI. They said: ‘I’m going to make seeing maybe between 15 and 18 people a month the target and that’s going to be the standard. And then potentially, if that doesn’t happen consistently, I’ll then performance manage people because we have to embrace this technology.’¹¹¹

These gaps in evidence collection have important implications for an ecosystem-level understanding of the adoption of AI transcription tools in social work. Incentive structures and the aims of vendor-led evaluations (see ‘Insight 1’) may not always fully overlap with those of local authorities, social workers and the people they support.

We suggest that independent assessment of the efficacy and performance of AI tools (in addition to, for example, the third-party evaluation conducted on Beam's Magic Notes) will be needed, alongside longitudinal research spearheaded by civil society and academia, with support from local authorities to monitor long-term impacts of AI on, for example, social workers' professional judgements.

Most local authorities do not have a robust theory of change for how to measure the impact of AI transcription tools on people who draw on care

The 'test and learn' imperative among local authorities piloting AI transcription tools has implications for how the impact on people who draw on care is considered. Our research suggests that social workers are thoughtful about introducing AI into meetings with the people they support (see 'Insight 5' below), by asking for consent or only introducing AI in 'lower stakes' contexts, but they do so largely using their own professional judgement about suitability.

One manager said that the ultimate goal for introducing AI would be to 'improve outcomes for people using care' as well as improving the quality of work for social workers,¹¹² a view shared by another manager who said their individual priority was about 'personal outcomes' for people drawing on care.¹¹³

However, overall, we found that most local authorities are not explicitly adopting metrics or success criteria for AI transcription tools that support evidence gathering on impacts on people that access social care. One manager explained that they decided to pilot an AI transcription tool without a clear understanding of the problems it would solve for people involved in the care system: 'I'm always a bit reluctant to sort of apply a solution to a problem you haven't properly identified, but this did seem like quite a good opportunity to just at least look at something, so we agreed to a pilot.'¹¹⁴

It is possible that local authorities make an assumption that efficiency gains or raised quality will naturally result in positive impacts for people who access care, as implied by one manager.¹¹⁵

In this context, one manager said that, once efficiency savings from AI transcription tools had been evidenced, they changed the focus of their pilot to measure the frequency with which social workers used AI transcription tools.¹¹⁶ The manager said that their focus on usage came at the expense of measuring the impact of AI on the quality of care records made by social workers:

‘The pilot itself focused on usage [of the AI transcription tool] and time saving, then the metrics shifted towards usage. So, we’re trying to push [for] more adoption, usage doesn’t really tell us anything, doesn’t tell us about the quality of work, the quantity of work, anything like that. It just tells us people are hitting record more often.’ – Manager Z

Only two local authorities extended their pilots to assess how AI transcription tools impacted the quality of documentation that social workers made about people who draw on care. One manager spoke of a desire to introduce an AI transcription tool in their local authority to ‘raise the floor’¹¹⁷ of official documentation like care assessments, which they said varied in quality.

To measure this, they adopted the same quality assurance approaches used for non-AI generated assessments (including random ‘dip sampling’¹¹⁸ on assessments uploaded to the local authority’s CRM systems). They found the introduction of AI often did not raise the overall quality of the assessment and may have introduced new problems such as unchecked hallucinations appearing in official care records.

Another manager, at a different local authority, implemented a survey for social workers undertaking the pilot which asked them to ‘score the quality of the write-up [documentation] pre- and post-’ pilot. The survey found that before the pilot, social workers’ documentation was ‘very brief, but with [AI transcription tool], it just went so much longer and so much more [detail] was captured’.¹¹⁹

Similar to measurements of efficiency savings, local authorities did not assess how any changes in the quality of documentation engendered by the use of AI transcription tools affected people who draw on care. Only one local authority in our sample coordinated any public engagement or similar exercise to gather attitudes towards AI transcription tools from people who access social care and to use those to inform the shape and direction of the pilot (see ‘Insight 1’).¹²⁰

Overall, these findings show that while efficiency gains are a popular target metric for introducing AI, there is not a clear or consistent articulation of how multiple different goals can be operationalised together, or of how local authorities can capture more granular detail about who benefits from productivity savings, and to what degree, particularly as self-reported evidence about time savings can often be overestimated.¹²¹

Implications for policymakers and practitioners

Our research shows that local authorities have developed approaches to evaluation that best support their aims to improve efficiency within their social care teams and to alleviate the significant resourcing challenges faced by the sector. This is a laudable aim given the circumstances that local authorities face.

However, this means there is little evidence on the broader impacts of AI transcription tools on the social care ecosystem, particularly impacts on the experiences of people who draw on care. The concerns about deskilling which were raised by social workers and the potential for harmful AI-generated inaccuracies and misrepresentation to occur in official care records (see ‘Insight 4’) show that this is an important evidence gap.

However, given the significant resourcing challenges that local authorities aim to alleviate with AI transcription tools, they are unlikely to be able to expand the scope of their evaluations without additional support.

Civil society organisations, particularly those that represent people who draw on care, could contribute impactful evidence on the attitudes towards and experiences of AI transcription tools among different people involved in the care system. Observational studies that can more accurately monitor how much time people save through use of AI in administrative tasks may provide better quality evidence.

The UK central government is in a good position to supplement local authorities’ evaluation efforts. Guidance surrounding metrics of success for AI transcription tools, and the operationalisation of these metrics, could help to standardise evaluation efforts across the local authorities.

Generating robust and generalisable evidence of the systemic impacts of AI transcription tools across the social care sector will likely require dedicated resourcing to specialised evaluations teams. We therefore draw attention to our recommendation that the government create a What Works Centre for AI in Public Services (see the ‘Recommendations’ section of this report).

Insight 3: Almost all social workers report that using AI transcription tools brings meaningful benefits to their work, but they do not experience these benefits uniformly

The majority of social workers we interviewed reported that the use of AI transcription tools brings meaningful benefits to their work. Most of the social workers were enthusiastic about efficiency gains from the reduction in time spent on administrative tasks by using the tools.

Social workers also mentioned other potential benefits of AI transcription tools that go beyond efficiency gains. Some suggested that automating note-taking with AI transcription improves the relational quality of conversations they have with people who draw on care and that AI-generated documentation includes more details about people's lives than the documentation they produce manually.

Social workers use AI transcription tools in diverse ways

Many social workers reported using AI transcription tools in different ways during our interviews. Some only use specific features of these tools, while others use them outside of face-to-face interactions with people who draw on care.

As discussed in the introduction to this report, AI transcription tools have two separate features:

- a transcription feature, which converts an audio recording of a conversation into a written document that details what each speaker said
- a summarisation feature, which produces an overview of the transcript that can be customised and edited to meet the requirements of specific care records, like Care Act assessments, that have strict requirements related to formatting, structure and content.

Most social workers in our sample use AI transcription tools to both transcribe and summarise conversations with the people that they support. Social workers construct these summaries in different formats to meet the documentation needs of individual local authorities and different specialisms within social care.

Social workers that use Beam's Magic Notes tool primarily summarise interactions into documents for which their local authority had co-produced a specified

template with Beam (see 'Insight 1'). Social workers then upload summaries of conversations to their local authority's case management system, where they are stored for future use in decisions about people's care.

Only using the transcription feature of AI transcription tools

Many social workers said they only use the transcription feature – and not the summarisation feature – of AI transcription tools to generate official care records. These social workers shared that they record and transcribe interactions, but continue to create official documents manually, without AI. One social worker said: 'I perhaps feel a little bit weird about AI generating a conclusion to a social work assessment or report.'¹²² The same social worker also described their intended use of an AI transcription tool: '[It's] quite clear-cut [in] that I just wanted it to be a transcriber [...] I wanted to do the job the same way that I have done the job since always.'¹²³

Social workers that do not summarise their transcripts with AI are concerned that the summarisation function of AI transcription tools removes their professional judgement from documentation processes and infringes on their role as a social worker.

One social worker explained how using AI to summarise transcripts would impact the integrity of their work: 'For me people are individuals and [to] churn out a Care Act assessment using AI [...] if that assessment was on me or a member of my family, I would feel that was really lazy and not using the skills of a social worker.'¹²⁴

Only using the summarisation feature of AI transcription tools

Some social workers reported they did not transcribe live conversations using an AI transcription tool because they did not trust the recording to accurately reflect their conversations with people that they support. One social worker explained: 'I just don't think it would suit how I speak with people, it's very much [a] casual conversation that would be dotted around and to upload that, and get that as a transcript, I don't think would be useful to me.'¹²⁵

Other social workers said that they choose not to use the AI transcription function because the act of recording a conversation could be unsuitable for people who have particular health issues or have had negative experiences of being recorded in police interviews (see 'Insight 5').

Instead of recording a conversation, these social workers opt to make notes manually during the conversation, either handwritten or typed. They then use the transcription tool to summarise these notes after the conversation has taken place.

Using AI transcription tools outside of interactions with people who draw on care

To avoid active recording and transcribing, some social workers dictate their observations after a meeting while driving in their car between visits. These social workers then summarise the transcripts of their dictated notes to generate official documents.

One social worker shared how 'In my car on my way home, I will put [AI transcription tool] on, and I will talk to it. And I will say I've just been on a visit to see so-and-so; this is what they told me, they also told me this, I saw this, I saw that.'¹²⁶

Others prefer to only use AI transcription in tools in meetings where people drawing on care are not present. A significant part of many social workers' workloads involved attending, minuting and summarising meetings with other local authority staff, or meetings with different public sector agencies, such as the police or healthcare professionals, to document decisions made about a person's care. One social worker said that the use of the tools in 'professionals' meetings or 'multidisciplinary teams' is where 'it's been more helpful to me in my particular role'.¹²⁷

Some social workers identified the technical limitations of AI for use in some of their usual meetings with care recipients. For example, some AI transcription tools can only record online meetings, which makes them redundant for face-to-face meetings in people's homes or in hospitals.¹²⁸

Other AI transcription tools cannot be used without a stable internet connection, preventing use in places that do not have broadband access. In the above cases, social workers only use AI to transcribe conversations with other professionals, continuing to make notes manually during conversations with people who they support.¹²⁹

The above evidence underlines the need for local authorities to be prepared for social workers to use AI transcription tools in diverse ways and to anticipate the

possibility of social workers developing new uses of transcription tools that meet their own needs.

More efficient documentation brings potential benefits for social workers, but not all social workers experience efficiency savings

Social workers often have demanding workloads that require them to work additional hours. Almost all the social workers that we interviewed emphasised the support that AI transcription tools provide in reducing the amount of time they spend 'writing-up'¹³⁰ documents.

Social workers who reported only using the transcription^{131 132} or summarisation¹³³ functions of their AI transcription tools also reported time savings, in addition to those using both of the tools' capabilities.

Reducing the time required to produce documentation has a profound impact on some social workers' work lives. One social worker said that 'it just changed everything for me' and described their AI transcription tool as 'a proper game-changer'.¹³⁴ Another social worker said that: 'Now we use AI, I can't imagine doing my job without it.'¹³⁵

Social workers frequently gave estimates of the amount of time saved by their use of AI transcription tools. Some interviewees stated that the tools reduce their workload by 'a few hours'.¹³⁶ Others reported more significant changes to their working lives, with the tools reducing their workloads by 'half'.^{137 138}

However, each person benefited from the time that they saved with AI transcription tools differently, according to their individual preferences and the specific circumstances within their local authority.

Below, we describe the different ways that social workers benefit from the time saved by AI transcription tools.

Improved work-life balance

Social workers emphasised their long hours to accommodate strenuous workloads and highlighted the potential for AI transcription tools to improve their 'work-life balance'¹³⁹ and work a 'nine-to-five'¹⁴⁰ job.

This could allow social workers more time for their personal lives. As one social worker explained: 'I've got two young children, so it's made significant difference to me. Like, I'm not turning my laptop on at the weekend. I'm not turning my laptop on late at night [...] I would often find myself working till early hours in the morning.'¹⁴¹

Enhanced relationship-based practice

Some social workers reported using AI transcription tools to 'spend more time'¹⁴² with people who draw on care and 'build better relationships'.¹⁴³ These social workers felt that, before the use of AI transcription tools, their intense workloads were preventing them from being able to 'give time and attention to people'¹⁴⁴ and 'getting to know what works for them'.¹⁴⁵

Maintaining effective relationships with people who draw on care is an essential component of social work and is referred to as 'relationship-based practice'.¹⁴⁶ The British Association of Social Workers advises that any time saved from using AI tools 'should be reinvested in relationship-based practice'.¹⁴⁷

This was the explicit interest of one social worker: 'I'm particularly interested in the use of generative artificial intelligence and thinking about ways that we can use it mainly because I really believe that relationship-based practice is so important.'¹⁴⁸

Another social worker described how reducing their workload with AI transcription tools strengthens their relationships and communication with children they support. They explained that before AI transcription they could only contact children about essential care needs.

After using an AI transcription tool, they have more time to allocate to 'more meaningful conversations' that go beyond children's basic needs to support them in different aspects of their lives and provide 'holistic care'.¹⁴⁹ Another social worker explained that their AI transcription tool enabled them to 'spend more time with the child, which is what we've struggled to do with social workers for a long time'.¹⁵⁰

Improved job satisfaction

Many social workers stated that they were deeply dissatisfied with the heavy administrative workload of their roles. They felt that spending so much time producing documentation prevents them from spending time with people who draw on care, which is what they are 'paid to do'¹⁵¹ and what they are 'meant to be doing'.¹⁵²

One social worker said: '90 per cent of the time is writing and 10 per cent of your time is doing what you're passionate about, so it's sort of like it's weighing you down because you don't get the joy in your job as much as you would want to.'¹⁵³

Some interviewees also mentioned how AI transcription tools enable more time for other tasks that they find rewarding, such as preparing documents for court.¹⁵⁴

Improved accessibility for neurodivergent and disabled social workers

We interviewed two social workers who requested a licence to use AI transcription tools from their local authority, to support them with their access needs.

One social worker with ADHD explained that, before the use of an AI transcription tool, they struggled with extensive documentation workloads compared to their neurotypical colleagues. They also reported feeling unable to approach colleagues for support due to 'stigma'.

They were granted a licence by their local authority and found the features of the AI transcription tool reduced their overall workload, which they described as 'a matter of survival'.¹⁵⁵

Another social worker who had some experience of using AI transcription tools was, at the time of our interview, enrolled on a training course for a specialist transcription tool to support them with their access needs. They anticipated this new tool would support them to write documentation, which had previously been challenging for them, as they have difficulties with memory loss and physical health conditions.

They explained that the tool could potentially make social work easier for them and their colleagues: 'I can't wait to have this dictaphone [transcription] tool because I have health conditions, there's quite a few people in my work [with] health conditions'.¹⁵⁶

Reduced backlogs

Some social workers reported that the principal benefit of AI transcription tools was to 'reduce waiting lists'¹⁵⁷ for people who draw on care. Interviewees frequently discussed how systemic challenges in social care, such as staffing shortages, mean that people with care needs often do not have access to a social worker and are assigned to long waiting lists.

In this context, AI transcription tools allow some of the social workers to see more people with care needs in a given amount of time: 'Before [using an AI transcription tool], say they saw six people a month, they'll now see 25 plus people a month. The difference is unbelievable.'¹⁵⁸

Moreover, some social workers reported that backlogs in the social care sector mean that there are always urgent cases to attend to, but time saved with AI transcription tools helps to allocate resources to people who need care that are not necessarily the most vulnerable.

As one social worker described: 'You're prioritising tasks, you know, there's urgent things that need your response, but then there's people that might ring you with something a lot less urgent, but you know that they deserve a call back as well, and I think the time saved will help us with those.'¹⁵⁹

Despite these different possible benefits, some social workers also described ways they might be prevented from accessing efficiency savings through their use of AI transcription tools. Factors specific to individual local authorities, such as documentation processes or management decisions, often determine how social workers use and benefit from AI transcription tools.

For example, some social workers said they do not experience time savings from their use of AI transcription tools because the documentation processes within their local authorities make integrating the tools too complicated. The format of official care records, such as care plans and assessments, differs across local authorities and social workers reported that using AI transcription tools for complex documentation does not create efficiency savings.

One social worker explained that they, and their colleagues, struggle to use an AI transcription tool for their authority's care planning forms, which they find to be too complex for AI to be effective.¹⁶⁰ Another social worker agreed, sharing how their authority's care assessments are too complex to easily copy the output of an AI transcription tool into a case management system, which limits a significant amount of time savings from using AI: 'Our [care] assessment isn't in such a way that you can copy and paste at all, there's a lot of dropdown boxes and things [...] it is a bit time saving but I wouldn't say it's cut down half the time.'¹⁶¹

One social worker explained they are unable to save time through using an AI transcription tool because their managers expect the level of detail included in documentation to increase significantly following the rollout of the tool. This means

that the social worker and their colleagues spend more time correcting and improving AI-generated documentation than they save by transcribing conversations.

The social worker explained: 'We're doing things because we can now, which we wouldn't have wasted time doing before. I've definitely noticed that my assessments are longer since using AI, not shorter.'¹⁶²

Some social workers felt that they did not receive enough training from their local authority to fully leverage the benefits of AI transcription tools. One social worker said: 'I think the training was an hour, if that, so I wouldn't feel that I know the ins and outs of [AI transcription] [...] and I feel also from just reading like some of the emails that we get each week, it just sometimes gets a bit confusing.'¹⁶³

Two social workers also said that their understanding of how they could use AI transcription tools is limited because their intense workloads prevent them from being able to practice using the tools in their work. They explained how 'we are much faster paced and don't have as much time, so I've not been able to play about with it as much'¹⁶⁴ and 'it's all about feeling your own way about, I think, and what I think is a lot of social workers, like anybody, not just social workers, they don't have the time to be doing that.'¹⁶⁵

Similarly, many social workers felt that they have been unable to improve their work-life balance with AI transcription tools because their local authority's priority is to reduce backlogs by automating documentation processes.

The social workers explained that the demands on their time are so significant that any time saved through AI transcription was reallocated to work that would otherwise be delayed, meaning that their overall workloads remain the same:

'I would say my turnover is a lot higher. I wouldn't say that I leave on time, you know, dead on five [o'clock] or it's [AI transcription] helped in terms of me leaving on time. You know, the work is always still going to be there and the quicker you get through the work, the more work that you're allocated anyway.' – Social worker J

Any potential work-life balance improvements following the introduction of AI are dependent on local authority processes and the ability for social workers to advocate for themselves at work.

One local authority piloted an AI transcription tool with the explicit aim of improving social workers' work-life balance. The senior manager at the authority said social workers are already 'working above and beyond their contracted hours' and that AI transcription tools should be used 'to get them [social workers] back to a reasonable work-life balance [...] not just replace that time with more assessments'.¹⁶⁶

One social worker also explained that their local authority has adopted a policy of limiting the number of cases allocated to social workers, a result of their own self-advocacy, which led them to improve their work-life balance with AI transcription: '[In the past] I would make myself anxious and have such a high caseload and always be panicking. But about two years ago, I advocated for myself to ensure that I had a balance, so that meant that the case allocations that I was getting were at a [cap]. They've now capped it for all social workers in my borough.'¹⁶⁷

The mixed picture of realised benefits from AI transcription tools, particularly efficiency gains, suggests that the experiences of social workers who adopt the tools as part of the UK government's broader plan for AI adoption will vary significantly. As a result, it is unlikely that any productivity benefits of AI transcription tools will be experienced equally across the diverse public sector contexts where they are used.¹⁶⁸

Social workers report that AI transcription tools improve the quality of their work, as well as efficiency

Recording all the information relevant for a person's care can be challenging for social workers who make notes manually from a conversation. Our interviewees often felt that they are unable to 'capture'¹⁶⁹ all the details of a person's situation through note-taking, because they are unable to write quickly enough or a large amount of information is required for the relevant care records.

Many interviewees described how recording and transcribing a conversation with AI transcription tools creates more detailed documentation than manual note-taking, with the full meeting 'captured in full detail'.¹⁷⁰ AI transcription tools help social workers to record a person's 'situation to its fullest', 'far more in-depth'¹⁷¹ and 'with more accuracy'.¹⁷²

One social worker described this as a 'weight off my shoulders'.¹⁷³ Another interviewee felt that this allows them to record information that they might forget otherwise:

'Even if it's a little bit inaccurate, it's mentioning stuff that you might have humanly forgot. Like, even when I'm note-taking, I sometimes forget stuff.'¹⁷⁴

Prior to AI transcription tools, social workers felt 'anxiety about the unreliability'¹⁷⁵ of the documentation they produced, but recording a conversation reduces the pressure that social workers feel to capture conversations themselves.

Several social workers highlighted that prior to AI use, their interactions with people could be hindered by manual note-taking. They said focusing on conversations, recording information and exercising professional judgement simultaneously was challenging. In one interviewee's words, the burden of making notes during a meeting feels like 'doing four things at once'.¹⁷⁶

Similarly, the use of a laptop or notepad to make notes can also act as a 'barrier'¹⁷⁷ to building relationships because it prevents a 'free-flowing conversation'¹⁷⁸ or makes people who draw on care feel as if they are being assessed. In the words of one social worker: 'When you're sort of taking notes down at the same time as trying to have a conversation, it feels [like] it's not helpful in terms of trying to build a rapport with someone.'¹⁷⁹

Social workers who raised these concerns explained how recording and transcribing an interaction using an AI transcription tool allows them to be more 'present'¹⁸⁰ in conversations because they are not 'burdened down'¹⁸¹ by the need to make written notes while discussing sensitive topics.

As a result, social workers feel they can build better relationships because their conversations become more 'fluid' and 'natural' when they are able to work 'without the distraction of note-taking'.¹⁸²

Additionally, automated transcription creates capacity to notice details about people's lives that social workers feel they might miss when they take notes manually, such as detail about people's living conditions, body language or relationships with family members.

Automating note-taking with the transcription function of AI transcription tools helps social workers focus on this additional, often un-spoken, information. One interviewee described this as being able to 'observe and engage in the moment'.¹⁸³

Another explained how this benefits people who draw on their care: 'I think that they're probably going to have a better version of me if I'm not as weighed down by administrative tasks. I can probably [be] much more available if I know that I just need to be the speaker and the listener and I can actually engage with you.'¹⁸⁴

A different social worker described how they are able to pay more attention to people's body language and relationships with their family: 'It would be a lot easier because my eyes won't be on this piece of paper and I'll be able to focus on you – looking at body language, looking at, you know, the dynamics if there's other people in the room.'¹⁸⁵

Implications for policymakers and practitioners

The evidence above shows that social workers can use AI transcription tools in a variety of ways to improve their work. However, social workers experience different benefits from the tools according to their individual needs and the context of their local authority.

As a result, public sector bodies should be prepared to find new uses of, and benefits from, AI transcription tools that they might not expect and conduct iterative post-deployment evaluations to capture this.

Most local authorities are adopting AI transcription tools to achieve efficiency savings (see 'Insight 1'). Other than our interviews, there is little evidence about the dynamics and trade-offs created by the benefits described above, both within and across UK local authorities currently using AI transcription tools.

The process of determining the success criteria for AI transcription tools should also include the perspectives of social workers and people who draw on care. Without this, the deployment of new technologies can place affected people in the position of experimental subjects, who are subject to a technology where the benefits and risks are still emerging, and without much opportunity to input on what the technology is supposed to achieve in their own work.¹⁸⁶

Insight 4: Social workers assume full responsibility for AI transcription tools, but perceptions of the tool's reliability, accuracy and 'human in the loop' vary significantly

Due to the risk of random hallucinations or inaccuracies, using AI for documentation in social care introduces an element of unpredictability, which

could lead to harmful misrepresentations of people's experiences to be entered into care records.¹⁸⁷

Nevertheless, social workers assume responsibility for mitigating this unpredictability and ensuring that any harmful inaccuracies or misrepresentations of people's experiences do not enter official records. Our interviewees explained that accountability for AI-generated documents is a key part of their ethical obligations as social workers.¹⁸⁸

Our interviews reveal that approaches to risk management vary, and hallucinations are frequent.

What is 'human in the loop'?

We use the phrase 'human in the loop' to refer to the process of a social worker's review – and potential modification of – the outputs of AI transcription tools.¹⁸⁹ It is a salient concept in policy-related discourse. For example, official government guidance, such as the AI Playbook for the UK Government, recommends that public bodies have 'human-in-the-loop processes in place to validate output in situations with high impact or risk'.¹⁹⁰

Many of the managers and experts in the design of AI transcription tools we interviewed invoked the concept of human in the loop when discussing how social workers might maintain accountability and professional judgement in their use of AI transcription tools.¹⁹¹

AI transcription tools challenge the principles of autonomy and professional judgement that are central to social work

The social workers we spoke to describe a commitment to 'the idea of the social worker as an autonomous professional who has a code of ethics, who will be standing up in court, who will be completing mental capacity assessments which might be challenged by a judge'.¹⁹²

Some social workers discussed their concerns about reduced control over documentation when using AI transcription tools. In a discussion about using the summarisation functions of AI transcription tools to complete assessments of people's care needs, one social worker said that AI transcription had 'crossed the

line, I suppose, between it being your assessment and being, you know, AI's assessment'.¹⁹³

Another social worker described the need to find 'the balance of using technology' while also 'maintaining our kind of autonomy and [...] our accountability as professionals'.¹⁹⁴

Social workers explained that they ensure the outputs of their AI transcription tools reflect their professional judgement by reading through¹⁹⁵ and reviewing¹⁹⁶ the transcripts and summarised documents. One social worker described how they encouraged colleagues to 'read your work so that you can be fully accountable for it'.¹⁹⁷

Social workers also considered whether using the outputs of transcription tools without adequate human oversight reduces the amount of 'professional analysis'¹⁹⁸ they can exercise in their work. Other social workers described the use of AI transcription tools without adequate oversight as lacking 'critical thinking'¹⁹⁹ or a 'human element'.²⁰⁰

Local authorities have also designed the rollout of AI transcription tools so that social workers are responsible for AI-generated documentation. One senior manager involved in the procurement of AI transcription tools explained that: 'Anything you've submitted to your line of business [case management] system is audited against your name [...] whatever you enter is your work'.²⁰¹

Another manager at a local authority said social workers should review the outputs of AI transcription tools to the extent that 'you could stand up in court and read this out and feel okay about it'.²⁰² This manager explained how they 'made sure that people felt accountable for what they were writing up'²⁰³ when using AI transcription tools.

The vendors we spoke to shared how the tools are designed to ensure social workers are fully accountable for their outputs:

'When it comes to human in the loop [...] we design the product so that experts, or domain experts, are kind of accountable and responsible for all of the key points.' – Vendor 2

Another explained they designed their tool so that social workers have to 'sign off' on a transcript:

'We don't allow the workflow to continue until it's been through a review by the social worker, right, so we see it very much as a tool to empower the social worker [...] until they've reviewed it and approved it, nothing happens with it.' – Vendor 1

As the design and implementation of AI transcription tools assumes social workers' accountability from the start, social workers are often not supported by any additional quality assurance mechanisms within their local authority.^{204 205}

In this context, the management of technical risks associated with AI transcription tools rests on individuals, who have received varying standards of training. Solely relying on a social worker's ability to spot inaccuracies, omissions and hallucinations may not be sufficient to create faithful records with the support of AI.

Our evidence shows that social workers' approaches to identifying issues in AI-generated care records vary and some potentially harmful misrepresentations of people's experiences are occurring in official care records.

Social workers have different understandings of the risks AI transcription tools introduce into documentation

Unpredictability in the outputs of AI transcription tools can lead to harmful inaccuracies being incorporated into official documents.²⁰⁶ Research has shown that AI transcription tools can generate text that promotes harmful perceptions and stereotypes of people in a recorded conversation, which often have no relation to the original recording.²⁰⁷

The foundation models that power the summarising feature in AI transcription tools can also produce biased outputs that would be harmful in social care contexts. For example, one study of the use of foundation models to summarise long-term care records from an English local authority found that some models consistently downplay women's health issues and needs compared to those of men, with summaries about men much more likely to contain descriptors like 'disabled' and 'complex'.²⁰⁸

Some social workers described cases where AI-generated documents included hallucinations that would have significant implications for the people they support.

For example, one social worker recounted an instance where, when using an AI transcription tool to create a summary, the tool had incorrectly 'indicated that there was suicidal ideation', but 'at no point did the client actually, you know, talk about suicidal ideation or planning, or anything'.

The social worker emphasised that without appropriate oversight, this error could impact the person's care significantly: 'If I hadn't checked that and it had gone into the case note [...] that could have had implications further on down the road'.²⁰⁹

The above case is a stark example of an AI hallucination. Social workers shared more trivial instances of hallucinations. For example, some social workers described inaccuracies appearing in AI-generated transcripts, such as foul language or other irrelevant words and phrases. One social worker said:

'I do think that AI doesn't pick things up accurately at times so, you know, the [AI-produced] sentence might be talking about, I don't know, fish fingers or flies or trees, and you might be talking about fighting at home, you know, like mum and dad were fighting.' – Social worker T

Social workers also stated that people's names are frequently misspelt in AI-generated transcriptions. Others raised concerns about inaccuracies in transcriptions of conversations with people with regional accents.

One interviewee described how their AI-generated transcriptions often included 'gibberish',²¹⁰ with another retorting: 'It's become a bit of a joke in the office, what are you going to be called on [AI transcription tool] today?'.²¹¹

Another told us:

'Any transcription that I've looked at from one of these meetings, I am in absolute tears with laughter half the time because I don't even have one clue as [to] some of the [...] what they're saying. It is so badly transcribed, I find, and I think, again, I think it's to do with the language and understanding of the dialect.' – Social worker K

As well as highlighting inaccuracies in AI-generated transcripts, some social workers also shared concerns about the language used in documents produced by the summarisation function of AI transcription tools. In social care documentation, it is important to use language that centres the perspectives of people who draw on care and to avoid complex, technical terms.²¹²

However, multiple social workers that we spoke to described ways the 'grammar or the structure'²¹³ of AI-generated documentation differs from manually written documents. This leads to official records produced by the tools being 'very academic and very formal'²¹⁴ and 'not as person-centred'.²¹⁵

This poses a risk for both social workers and people who draw on care because documentation has to be 'readable and relatable' for the person that it relates to in case they 'make a subject access request in the future'.²¹⁶ One social worker described the use of AI-generated academic language in a child's case records as 'horrific' and that social workers have 'gone back a step'²¹⁷ in efforts to use person-centred language in their records.

Some of the more subtle changes in the way documentation is presented, including omissions in the transcripts, are likely to be much harder for social workers to identify at the point of use.²¹⁸ Identifying such changes may require additional oversight or research, either by other members of staff or third-party researchers, such as comparisons between a large number of transcripts and the counterfactual (documentation produced by a social worker without the use of AI).

Many social workers said they were concerned about risks from AI transcription tools and emphasised the need to check the outputs of these tools thoroughly. As one social worker explained: 'We need to be really mindful of the risks within it, and make sure that we try and mitigate them as best we can, and that relies on people still putting that effort in and not [...] becoming too lazy.'²¹⁹ Another social worker said that their AI transcription tool was so risky that it was 'not quite ready for purpose' and that they need 'a backup plan'²²⁰.

However, a minority of the social workers we spoke to stated that the risks of using an AI transcription tool are minimal and that 'it doesn't feel like there's anything to lose at the minute from using it'.²²¹ When asked about the risks of using the tools in their work, one social worker said the only perceivable risk was that their local authority's IT system failed, meaning that social workers would be unable to use the transcription tool and 'get nothing done'²²² as a result.

Senior managers involved in the evaluation and procurement of AI transcription tools within local authorities also shared significantly different views on the risks that the tools create. Some managers described 'loads and loads of risks',²²³ due to inaccuracy and bias from the use of foundation models.

Other managers suggested that the risks are less significant than those of other applications of AI technologies. For example, a manager described one transcription tool as ‘light-touch generative AI’, because in their mind it introduces fewer risks than ‘fully generative AI’, (such as a general-purpose AI technology, like ChatGPT).

They suggested a narrower AI transcription tool would be one ‘remoulding your words and putting them into set headings [templates], it shouldn’t be inventing [words]’.²²⁴ Another senior staff member said they felt the only risk from using an AI transcription tool is that social workers ‘forget to switch it on when they’re in a meeting and then they come out and they’ve not actually recorded anything’.²²⁵

These differences in the perception of risks suggest that training and education in relation to the use of AI transcription tools is not standardised across local authorities or that some social workers and managers are able to access training more easily than others.

Some social workers also use the tools outside of official pilots and rely on colleagues or their own learning to understand how to use them (see ‘Insight 1’). Local authorities could adopt AI transcription tools more safely if staff have resources to educate social workers on relevant risks and mechanisms so they can effectively mitigate these risks.

In our interviews, some social workers provided examples of errors or inaccuracies from AI-generated documents entering the official records of people who draw on care. One social worker said that care records can sometimes include irrelevant information that distracts from a child’s care needs as a result of social workers’ use of AI transcription tools:

‘We’ve seen already examples where someone has had that conversation, not really proofread it properly, it’s on the child’s file and we’ve got either wrong names in there or we’ve got someone talking about their cat ... [which is] not really relevant for that child’s file or anything to do with the conversation that was happening.’ –
Social worker X

Another social worker said that the quality of some of their colleagues’ care records is lower because of their use of AI transcription tools: ‘Sometimes when I’ve read things or I read a care plan, and they have maybe cut and paste something from [AI transcription tool] and it just ... I can tell by the reading, a bit, because it sometimes reads horrifically.’²²⁶

These examples suggest that the oversight of AI transcription tools is inconsistent across the social care sector and errors are occurring official documentation processes, with potentially profound consequences.

Approaches to reviewing the outputs of AI transcription tools vary significantly and inaccuracies are likely to occur in official care records

All of the social workers we interviewed said that reviewing the outputs of AI transcription tools is a crucial part of their use of these tools. However, they reported varying amounts of time needed for this review process. Some social workers said they spend 'an hour to fully go through a transcript and read through it properly and pull out all of the information',²²⁷ while others said that their review process took them 'five minutes to literally just quickly screen it [...] and then cut and paste it onto the system',²²⁸ 'two minutes',²²⁹ or 'ten to fifteen minutes'.²³⁰ This raises questions about the effectiveness of only relying on social workers to act as the human in the loop to identify and correct issues in AI-generated care records.

There are currently no accepted standards in social care for how long social workers should spend reviewing, particularly as different AI transcription tools may require more or less time depending on their accuracy. Social workers told us it was difficult for them to establish a team-wide standard for the optimal amount of time needed to review transcripts or summarised documents.

One social worker explained that 'a lot of people are [too] lazy to have to go through the [output of the AI transcription tool], but you actually need to read it because you need to own it, and I think a lot of people just take it and [do] not read'.²³¹ Another social worker suggested that their colleagues are too busy to spend time thoroughly review AI-generated documentation: 'We do need to be checking it properly and I also know that when people are busy, that's one of the things that's likely to fall off the wayside'.²³²

Another way social workers' oversight of summarised documents vary is their use of prompts to make significant changes. As discussed in our explainer, the use of a large language model (LLM) to power the summarisation function of AI transcription tools also provides an interface for users to prompt the tool and alter the final outputs.²³³

Social workers said they prompt AI transcription tools to correct repeated mistakes in a long document or make changes to the way information is presented.

One social worker listed the ways they prompt the tool: 'I can say actually, can you take out any repetition? Can you tell me a bit more about this? Can you take out the direct quotes?'²³⁴

Another social worker reported prompting the tool to reformat official documentation so that their AI-generated care documents are more 'person-centred'. This social worker explained that their AI transcription tool 'put in all these words that have not been said'.

By prompting the AI transcription tool to make [the summarised document] 'more as the conversation went',²³⁵ they can ensure they accurately reflect the experiences of people who draw on their care.

Some social workers did not mention using prompts while reviewing. Two reasons for this could be that social workers are either unaware of prompting as an approach or are uncomfortable using prompts without further training.

One interviewee said that it has taken time for social workers to feel comfortable using prompts in their work: 'The thing is about practising your prompts [...] getting your prompts right and I think initially it's taking a bit more time to do it.'²³⁶ Another social worker said that while other members of their team felt able to prompt the AI tool, they do not feel comfortable doing so without further training.²³⁷

The evidence above shows that there is no shared understanding of the amount of effort required for social workers to act as an effective human in the loop, or the methods they should use to perform this function. As a result, social workers have to make their own judgements on the appropriate oversight of AI transcription tools for their practice, in response to gaps in training and guidance.

Implications for policymakers and practitioners

More evidence is needed on the impact of AI transcription tools on the validity and consistency of social care records so that local authorities can support social workers to use these tools safely. Currently, social workers are balancing complex and unclear risks with limited guidance in order to use these tools in their work.

Social workers assume this responsibility as part of their commitment to accountability (an ethical principle of social work) and as an aspect of their professional judgement. The role of social workers as 'the final piece of the equation'²³⁸ is further reinforced by how vendors and local authorities position

social workers as a human in the loop during their design and implementation of these tools.

However, a recent survey of social workers found that only 57 per cent of respondents feel confident using AI lawfully, ethically and responsibly, in accordance with Social Work England's professional standards.²³⁹

We find the training and support that social workers receive varies significantly. As a result, their understanding of the risks of AI transcription tools, and the amount of oversight required to mitigate these risks also varies. The social workers we interviewed reported how inaccuracies are occurring in care records produced with AI transcription tools, in part due to inconsistent oversight.

It matters that social workers are attuned to the risks of AI hallucinations, as any errors inserted into official documentation may create significant challenges to rectify later. The amount of time and care required for oversight will also depend on context; for example, a higher degree of oversight will be required for AI-generated material concerning safeguarding contexts than for an internal team meeting.

Some of our interviewees suggested that social workers' oversight of AI transcription tool outputs worsen when they are under pressure at work. This points to a risk that the introduction of AI could help social workers produce work at a faster rate, but of lower quality. Additional support for social workers and a redistribution of accountability for errors will support the safe adoption of AI transcription tools.

Evidence shows there are potentially far-reaching impacts of inaccurate or biased outputs from AI transcription tools in consequential decision-making contexts.²⁴⁰ Inaccuracies in care records could impact decisions made about people's care in statutory contexts, leading to incorrect decisions being made. However, the prevalence and saliency of AI-generated inaccuracies in social care documentation is currently unclear.

Inaccurate records could also directly impact the experience of people who draw on care, as records of interactions with social workers can help people to understand significant events in their lives and seek redress when things go wrong.²⁴¹

Moreover, social workers could face professional or legal repercussions for inaccuracies that stem from the transcription and summarisation functions of AI transcription tools.²⁴²

More evidence on the impact of AI transcription tools on the creation of documentation in different contexts, along with guidance from government and regulatory bodies, will support social workers to make decisions about their use of AI transcription tools.

Insight 5: There is no consensus on when it is appropriate to use AI transcription tools in social care

As AI transcription tools are introduced across the social care system, the implications of their use will vary in ways that are currently challenging to understand, due to the lack of systematic evaluation of the impact on people who draw on care (see 'Insight 1'). This has implications for how social workers and the people they support experience the use of AI transcription tools as well as the aggregate impact of these tools.

Local authorities and individual social workers have differing attitudes to, and perceptions of, the risks associated with the use of AI transcription tools in social care (see 'Insight 4'). At the time of writing, regulatory bodies in the healthcare sector have published specified requirements that AI transcription tools need to meet for practitioners to use them in clinical settings²⁴³ and developed a national registry of self-certified suppliers of AI transcription tools for healthcare.²⁴⁴

NHS England has said that 'the use of non-compliant solutions [AI transcription tools] poses a risk to clinical safety and security'.²⁴⁵ Similar regulation does not exist for the use of AI transcription tools in social care. This creates a confusing situation where standards and oversight relating to the use of AI transcription tools by social workers vary significantly across, and within, local authorities.

Some local authorities have banned the use of AI transcription tools in contexts where they think the tools pose excessive risks, as have some police services that support social care processes. However, many local authorities have no restrictions on the use of AI transcription tools and delegate decisions to individual social workers.

Standards and guidance from central government could help local authorities to adopt AI transcription tools more uniformly, with adequate measures in place for

contexts where these tools create unacceptable risks. Similarly, additional support and training relating to the risks of AI transcription tools could help social workers to make more informed decisions about their use.

Local authorities and other organisations involved in social care are still learning when and where AI transcription tools are inappropriate

Our interviewees explained that the risks associated with AI transcription tools (see 'Insight 3') changed according to the context in which they were used.

However, interviewees' perceptions of risk, and their approaches to mitigating risk, vary significantly.

Managers at different local authorities described their approaches to mitigating the risks of AI transcription tools. One manager explained that their local authority prohibited the use of AI transcription tools for generating statutory documentation, such as care assessments in adult social care, in the second phase of their pilot.

Instead, social workers were only able to use AI transcription tools for creating documents supporting voluntary processes. The manager and their local authority made this decision because of concerns around the accuracy of AI-generated documentation, and how this might differ across social groups, identified in the first phase of their pilot.

They explained that the authority did not 'understand its [AI transcription tool's] accuracy well enough [...] we want to kind of think about, you know, what biases are there in these large language models, do they work effectively for everyone that we work with, whether they have a learning disability, lack mental capacity or, you know, speak English as a second language?'²⁴⁶

They then said that uncertainties about accuracy could lead to decisions about people's care being influenced in unpredictable ways: 'If you're using [AI-generated documentation] for statutory assessments, you are essentially influencing that process where you're making a statutory decision about someone without fully understanding the implications of them.'²⁴⁷

However, not all local authorities shared these concerns about the downstream impacts of inaccurate AI-generated documentation on care decisions. One manager at a different local authority said that there were no contexts in social care where it would be inappropriate to use an AI transcription tool: 'Given the

robustness of the data management around it and the quality of the recordings, I would think for me personally, I think if people have consented, then I can't think when it wouldn't be appropriate to use it.'²⁴⁸

Other managers said that social workers themselves were best placed to make decisions about where the use of AI transcription tools is appropriate or not. One manager explained that 'culturally these tools are new, there's a very limited understanding of how we manage them'.²⁴⁹

To navigate this uncertainty, the manager delegated decisions about where and when to use AI transcription tools to different social care teams: 'What I have tried to do is get the tool in the state where it's very adoptable and then hand it over to teams and managers to say what's your improvement plan, how do you embed it into your processes?'²⁵⁰

Uncertainty around where and when social workers should use AI transcription tools can also create issues in multi-agency contexts, which are subject to different policies and regulation. For example, multiple social workers described instances where they are unable to use AI transcription tools to transcribe meetings with specific police services that prohibit their use.

One social worker said that for 'child protection [CP] plans and as part of the CP conferences, the police have to be there and someone from health – at the moment there's a pause on [AI transcription] being used because the police are basically saying they're not consenting'.²⁵¹

Another described the picture as more varied: 'Some police forces won't let me use Copilot, so depending like where they are, some say no, others just are fine with it'.²⁵²

Inconsistencies in guidelines around the use of AI transcription tools mean that social workers are creating AI-generated documentation for different purposes across and within local authorities.

As a result, it is possible that statutory documents that inform decisions about people's care and may later be used in court proceedings could contain the kinds of inaccuracies discussed in 'Insight 3'. This may introduce a critical risk to processes where the veracity of written records is key to making accurate and informed decisions to support people who draw on care.

It is likely that human error or omission can also contribute to these inaccuracies, so there is potential for wide variation in the quality of documents informing statutory decisions. There are many open value-laden questions about the acceptability of error in human-generated information versus AI-generated information, as well as practical questions about how to scale comparison of AI-generated information to the baseline of human transcription.

All these factors may entrench inequalities in care services and contribute to potential procedural injustice.

Social workers make decisions independently about where the use of AI transcription tools is inappropriate

In the absence of consensus about where social workers should or should not use AI transcription tools, social workers described navigating complex decisions to manage risks when using these tools in interactions with people, especially in contexts where the technical risks are exacerbated.

For example, some social workers stated that the transcription function of their AI transcription tools had in the past performed poorly on audio recorded in environments with multiple people speaking at the same time, meaning the AI transcription tool did not transcribe information accurately and instead incorrectly attributed sentences to different speakers.

One social worker explained that ‘it’s very difficult when you’ve got [...] four family members talking at the same time and shouting over each other, so I think it’s just about you judging when you think it’s appropriate to use and when you think it would work’.²⁵³

Another social worker described how they avoid using AI transcription tools in hospital wards, over concerns that the tool could transcribe other people’s conversations and include them in the final transcript:

‘I think about the context of when to introduce it and how to introduce it, and I think of where I was going to actually place myself [...] I would be very, very careful about trying to do that in a side room and not on the [hospital] ward, so it didn’t pick up any other information.’ – Social worker E

Social workers also said they determine whether transcribing conversations with AI transcription tools is appropriate according to the contexts and needs of the

different people who draw on their care.

One social worker who supports people with mental health conditions described their decision not to record conversations with people with particular complex needs: 'If they suffer from paranoid schizophrenia or anything like that, that could be very threatening for them, so I certainly wouldn't be bringing that [AI transcription tool] out in those cases.'²⁵⁴

We also heard multiple accounts of people who had past experiences of police interviews that made them uncomfortable with the recording process. One social worker explained: 'Some of them [children] felt like it was then a police interview, for some of our young people that have come into contact with the police, and that's obviously not been a positive experience for them. We're then coming and saying we're going to record this conversation, that, I think, feels quite intimidating to them.'²⁵⁵

Implications for policymakers and practitioners

Our evidence shows that using AI transcription tools safely requires people at varying levels of seniority to make decisions about where these tools might create an unacceptable risk of harm. The factors determining these decisions include the saliency of risks in different parts of the social care system, the technical efficacy of AI transcription tools in different environments and the needs of people who draw on care.

In multiple local authorities, social workers are currently responsible for making a judgement about when and where AI transcription tools pose excessive risks, and for who. This could impede social workers from fully benefiting from these tools or expose the already vulnerable to harm.

Guidance from central and local government, which is drawn from evidence, on where the risks of AI transcription tools make them inappropriate in specific contexts could help to create more consistent experiences across the social care sector. It could also reduce the responsibility placed on social workers to navigate the complex questions surrounding the use of this technology.

Recommendations

Our conversations with social workers and managers at local authorities using AI transcription tools underscored the varying ways that the use of these tools can impact social care. Social workers were keen to emphasise the benefits that the tools brought to their work, particularly the time saved writing care records.

At the same time, the evidence presented in our five insights shows that there are significant differences in how AI transcription tools are used and monitored across and within various local authorities. This could exacerbate existing inequalities and other harms in care delivery.

In this section, we provide recommendations based on our insights. We recognise that these insights will not reflect the realities of AI-assisted social care for all social workers at all local authorities in the UK and further research is needed to explore these dimensions. However, our insights show that there is a clear need for standardised oversight and guidance on the use of AI transcription tools in social care.

The UK government, civil society and regulators operating in the social care sector have an opportunity to support local authorities with the necessary infrastructure and resources to safely adopt AI transcription tools and navigate the complex sociotechnical questions that arise from the use of these technologies. Consistent and coordinated evaluations of AI transcription tools across different social care contexts are the first step.

Recommendation 1: The UK government should require that local authorities record their use of AI transcription tools through the Algorithmic Transparency Reporting Standard

The UK government should mandate that local authorities record and publish where AI transcription tools are used in social care. This should include information on the local authorities that use AI transcription tools, the kinds of tools they use and the kinds of AI-generated documentation created.

We recommend the government extends the Algorithmic Transparency Recording Standard (ATRS),²⁵⁶ the mandatory record for central government departments to record their use of AI technologies, to local authorities. Recording AI technologies with the ATRS is currently only voluntary for local government.

The government is currently reviewing the impact of the ATRS. The insights surfaced in this report suggest that the ATRS should be extended to local government because their adoption of AI transcription tools meaningfully impacts accountability and changes the way social workers make decisions about people who draw on care. Previous research from the Ada Lovelace Institute underscores the strong relationship between transparency and trustworthiness.²⁵⁷

It is important that the government also acts in the short term to improve transparency around current uses of AI transcription tools in social care, given that implementing changes to the ATRS will likely take time. For example, the government should mandate for AI-generated care records to be clearly identifiable with a 'watermark' signifying that the document was produced using AI, to distinguish them from records that social workers have written manually.

This would support people involved in decisions about people's care, such as judges, to identify when statutory care documents have been generated in-part or wholly by AI, making it easier to apply the appropriate level of scrutiny to AI-generated records and potentially reducing the impact of inaccuracies on care outcomes. It would also support people who draw on care to seek redress when incorrect decisions are made based on inaccurate records.

Recommendation 2: The UK government should extend its pilots of AI transcription tools to include various locations and public sector contexts

Our evidence points to the relative success of the fast-paced adoption of AI transcription tools in social care. Local authorities have worked quickly to 'test and learn' the suitability of AI transcription tools. It is likely that AI transcription tools can be considered a success story for the AI Exemplars programme in the government's wider ambition for AI rollout.²⁵⁸

If the UK government wishes to capitalise on this success, it should make funding available to support local authorities to introduce AI transcription tools via pilots in other frontline service delivery contexts.

The government should also continue to coordinate emerging research and development around AI transcription tools and disseminate this towards local authorities. Existing projects exploring the piloting and evaluation of AI transcription tools offer a good foundation for this work. For example, the Local Government Association (LGA) conducted a pilot and evaluation of the Incubator for AI's (i.AI) Minute transcription tool co-produced with 22 local authorities, which may provide a methodological blueprint for further evaluation at scale.²⁵⁹

The LGA and i.AI are well placed to extend this capacity and conduct further evaluations to gather new evidence about Minute's impacts, or a pilot of another AI transcription tool, such as Magic Notes. Such evidence gathering will support local authorities to make decisions about their use of AI transcription tools in the short term, while the government scopes potential models for a What Works Centre for AI in Public Services as a long-term solution to current evidence gaps (see 'Recommendation 3').

Local authorities should include evaluation metrics in their full procurement processes when procuring AI transcription tools and require evaluation evidence from multiple teams (for example, separate evaluations from both the LGA and i.AI) to enable robust evidence gathering and informed decision-making.

We recommend that all future pilots of AI transcription tools adopt qualitative evidence gathering. This can follow some of the mechanisms used by local authorities in our study and include focus groups and qualitative interviews iteratively across the pilot time span.

It is also critical that impacted people and communities can meaningfully participate in evaluations of AI transcription tools in other contexts. For example, for a justice application, this would include both legal officials and people with experience of the justice system.

Recommendation 3: The UK government should set up a What Works Centre for AI in Public Services to generate and synthesise learnings from pilots and evaluations

Our evidence on the use and adoption of AI transcription tools in social care surfaces a similar lack of knowledge-sharing as previous adoptions of AI systems in the public sector.²⁶⁰ We therefore reiterate our call for the government to set up a What Works Centre for AI in Public Services.²⁶¹ What Works Centres are an important interface between research and policymaking, bringing together

evaluation professionals to explore decisions for people and society.²⁶² Existing What Works Centres have various responsibilities and mandates within their respective sectors. Some have regulatory functions through the publication of guidelines and standards. Some centres generate their own evidence and some focus on evidence synthesis and dissemination.

Following existing models and using transcription tools as an initial focus, a potential What Works Centre for AI in Public Services could support the safe adoption of AI transcription tools in social care through three functions.

First, the collation and dissemination of evidence from AI transcription tool pilots in the social care sector to create consensus on the capabilities and risks of these tools across local authorities.

Second, offering dedicated resources for longitudinal studies of systemic impacts of AI transcription tools to fill an important evidence gap that local authorities are currently struggling to address. An institution with the capacity to conduct longitudinal research, and with a degree of distance from the application context, will better enable evidence gathering of any distributional impacts of AI tools, for example at the level of industry or demography.

Finally, the What Works Centre for AI in Public Services should act as an authority to determine best practice in the evaluation of AI transcription tools, helping local authorities to navigate the complicated landscape of existing approaches to evaluation.

As a first step, the government should scope the most appropriate model for a What Works Centre for AI in Public Services and determine its function in relation to incumbent regulators and research institutions, as well as centres like the proposed Centre for AI Measurement.²⁶³ This scoping work should be conducted alongside the short-term aim of expanding pilots of AI in public services through existing mechanisms (see 'Recommendation 2').

Recommendation 4: A coalition of researchers, policymakers, civil society and community groups should collaborate on research on the systemic impacts of AI transcription tools

The adoption of AI transcription tools in social care will have systemic impacts for social workers (as frontline users of the technology) and for people who draw on care, in ways that are currently underexplored. Further evidence gathering will be vital to monitor these effects and to support policymakers to make more informed decisions about the introduction of AI transcription tools in other domains.

Academia and civil society should explore studies of the impacts of AI transcription tools in the social care sector, which could also supplement the evidence provided by short-term pilots. These studies could examine the consequences of AI transcription tools for social workers' workflows and professional development, or examine whether care outcomes have been impacted by inaccuracies created in care records.

Longitudinal research that monitors AI transcription tool performance over time is also likely to be critical, as well as economic analysis exploring the future of work in social care and the impact of AI adoption on skills, development and vacancies.

This research should also meaningfully involve social workers, their union representatives and people who draw on care. This could include running public participation and deliberation projects. Ada's research on biometric data provides a potential model for this.²⁶⁴ The Citizens' Biometrics Council took evidence from experts with different perspectives on biometrics and used that evidence as the basis for deliberation by members of the public. The council then developed recommendations which reflected their tolerance and red lines. Members of the council have since been reconvened to support the Information Commissioner's Office (ICO) with its guidance.

Research funders should ring-fence funding opportunities for researchers exploring the systemic impacts of AI transcription tools in social care and other critical frontline contexts, to support the ongoing delivery of this focus.

Recommendation 5: Social care regulators and local authorities should work with other sectoral bodies to produce guidance for the use of AI transcription tools in

statutory processes and formal proceedings, with clear accountability structures

Our research clearly highlights the potential dangers of AI-generated inaccuracies being inserted into statutory documentation about people's care, which could then be used in court proceedings. Getting safeguards and accountability right is essential for the use of AI transcription tools to be seen as legitimate by the public.^{265 266} We support Research in Practice's recommendations to Social Work England to clarify the duties of social workers and clarify who is responsible for monitoring ethical and legal conduct when using AI.²⁶⁷

Relying on the status quo practice of social workers assuming responsibility to identify issues or inconsistencies may prove insufficient, particularly if the degree of information produced as part of assessments increases because of AI transcription tools. This means social workers need to be supported with training and other guidance to review material produced by the tools before it is used in formal proceedings.

It is likely a body with appropriate convening capacity could support the creation and dissemination of such guidance, such as the LGA. Local authorities should facilitate access to training on generative AI tools (including transcription tools) for employees, regardless of their participation in an active pilot or other directive. This would ensure that employees who might want to experiment with AI tools in their work and develop skills have clear policies and instructions that provide appropriate guardrails – for example, on potential incidence rates for hallucinations and how to address them.

However, local authorities should be clear-eyed about the limits of more effective 'human in the loop' and other proposals targeted at individual practice, where it is likely additional internal and independent quality assurance will be required to ease the accountability burden on social workers.

In formal proceedings, it is critical there is end-to-end accountability structures that support actors working in decision-making contexts, such as judges in the family courts. We recommend there is a review and resulting guidance for professionals such as magistrates and judges, and for mediating bodies such as the Children and Family Court Advisory and Support Service (CAFCASS), on procedures to identify and query any material produced by AI that is suspected to be unreliable.

We also recommend that Social Work England and the Scottish Social Services Council (SSSC) should support social workers to navigate this new environment. They can do this by conducting an analysis of the risks that are not covered in existing guidance, particularly as they pertain to accountability and professional judgement, and by creating additional safeguards and accountability measures to fill these gaps. This could also include updating their professional standards to help social workers maintain discretion and integrity when using AI in their work.

To leverage the expertise of people with lived experience of social care and to ensure their perspectives are included in policies and guidance, an advisory board that influences policy decisions on AI in social care should be established. This could take a similar approach to the Family Justice Young People's Board,²⁶⁸ a board of children and young people with lived experience of the family justice system that supports national and local government bodies to make decisions about the family justice system in England and Wales.

Recommendation 6: The UK government should create and disseminate context-specific evidence about the contribution of AI to cost savings and productivity

Our research points to the need for grounded, context-specific evidence to be generated about the impacts of AI. Our interviews with social workers highlight the nuanced ways the implementation of AI tools can change frontline public services and how context-specific factors, such as pre-existing work processes, can influence how workers use AI tools.

The UK government's current plans for the adoption of AI tools in frontline services often extrapolate the findings from one pilot across multiple contexts, particularly in relation to expected efficiency savings. For example, the government's 10 Year Health Plan for England uses the findings from a London pilot of AI transcription tools to estimate the impact of these tools on emergency departments across England.²⁶⁹

The government's estimates of potential cost savings stemming from the use of AI tools to automate public service delivery similarly extrapolates estimated efficiency savings from the use of AI in the civil service to the whole of the UK public sector.²⁷⁰

Recognising the heterogeneity in the branches of the public sector that are currently experimenting with AI tools, the UK government should generate or

commission more evidence on the impact of AI tools in public services in a way that accounts for the different contexts, workforces and services that constitute the UK public sector.

Forthcoming research by the Ada Lovelace Institute will further explore and disambiguate claims around the causality between efficiency savings and productivity gains.

In the meantime, the government should advance a more robust evidence base for productivity savings stemming from the use of AI tools, consisting of granular, rigorous mixed-method and multi-team evaluations of AI technologies in different contexts.

Elements of the evaluation of an LLM tool designed to classify themes from free-text public consultation responses, conducted by the Department for Transport in partnership with the Alan Turing Institute, could be instructive.²⁷¹ This evaluation made use of experimental methodologies, including an empirical exploration on the appropriate degree of ‘human in the loop’ for the context. It involved a ‘blind’ technical evaluation of independent LLM performance and a non-blind live pilot evaluating how well the LLM performed with human testers.

This two-step process provides opportunities for organisations to uncover how well the AI system performs (particularly compared to performance claims from developers or other researchers) and how well the system works in the intended context, according to human preferences and needs.

Any evaluation design should be supported with qualitative methodologies that involve impacted communities to better understand whether AI interventions are evidencing metrics like quality and wellbeing, in addition to cost savings.

Recommendation 7: Local authorities should specify their theory of change when procuring AI transcription tools to ensure shared understanding among staff and users

Most of the social workers and managers we interviewed identified that their employing local authority had piloted or made available transcription tools to ease resource constraints in social care. However, the wide range of uses of the technology, and the differing awareness of appropriate policies and safeguards,

means that social workers' use of AI transcription tools can lead to unexpected benefits and risks.

Local authorities should ensure they adopt clear strategies of communication about their theory of change for the introduction of AI transcription tools. This might be created, recorded and disseminated in a mechanism such as an impact assessment, which can complement other existing obligations like data protection and equalities duties.

This will signify to both frontline users of the AI tools and the wider staff body that leadership have designated themselves as the owners of ethical responsibility and will adopt a spirit of openness, transparency and communication for trustworthiness and buy-in. An impact assessment could also be made public to inform understanding and awareness for local authority residents and other people likely to be affected by the rollout of AI transcription tools.

Conclusion

Our research reveals that AI transcription tools show considerable potential for social workers and the social care sector. The sector is currently facing significant challenges which require multiple solutions. We find evidence that AI transcription tools create time savings for social workers, which may go some way in making a resource-scarce sector more efficient.

At the same time, it is clear there is a great risk of inaccurate AI-generated information finding its way into official care records, which may entrench inequalities for people who draw on care. The introduction of AI also alters the way accountability is structured between social workers, care recipients and the state. To this end, we also urge social care regulators to review existing statutory processes and formal proceedings in the advent of AI.

At this juncture, it is vital that central government, regulators, civil society and affected communities collaborate actively with local authorities to incentivise meaningful evaluations of AI transcription tools in social care and other public sector bodies. These evaluations will inform the guidelines and standards necessary for the safe adoption of AI transcription tools, particularly in public sector contexts where frontline workers are using these technologies to support critical decision-making.

Evaluations should bring the goal of public benefit firmly into view, so that decision-makers can demonstrate trustworthiness and confront the question of whether the introduction AI is in the public interest. Our vision for the long term is that a robust ecosystem of assessment, oversight and piloting will help ensure that AI transcription tools deliver on their promises for people and society.

Acknowledgements

This report was lead-authored by Oliver Bruff and Lara Groves, with substantive contributions from Catherine Gregory, Imogen Parker and Mavis Machirori.

We would like to thank our interview participants for their time and contributions to this study.

This research benefits from the expertise, research and contributions from the Nuffield Family Justice Observatory. Thank you to Lisa Harker, Ellie Ott, Jude Eyre, Molly Corlett, Leona Everitt and Caitlin Shaughnessy.

We would also like to thank Beverley Barnett-Jones, Dr Sam Rickman, Professor Rob Procter for their thoughtful feedback on a draft of this report.

Endnotes

1. Oliver Bruff and others 'What Is an AI Transcription Tool?' (Ada Lovelace Institute, February 2026) <<https://www.adalovelaceinstitute.org/resource/what-is-an-ai-transcription-tool/>> accessed 10 February 2026. ↑
2. 'Great (Public) Expectations' (Ada Lovelace Institute, December 2025) <<https://www.adalovelaceinstitute.org/policy-briefing/great-expectations/>> accessed 14 January 2026. ↑
3. Anastasia Koutsounia, 'AI Tool Improves Direct Work in Adult Social Care despite Accuracy Concerns, Practitioners Report' (*Community Care*, 10 February 2025) <<https://www.communitycare.co.uk/content/news/ai-tool-improves-direct-work-in-adult-social-care-despite-accuracy-concerns-practitioners-report>> accessed 14 January 2026. ↑
4. 'AI Exemplars Programme' (GOV.UK) <<https://www.gov.uk/guidance/ai-exemplars-programme>> accessed 29 September 2025. ↑
5. Oliver Bruff and others 'What Is an AI Transcription Tool?' (Ada Lovelace Institute, February 2026) <<https://www.adalovelaceinstitute.org/resource/what-is-an-ai-transcription-tool/>> accessed 10 February 2026. ↑
6. Oliver Bruff and others 'What Is an AI Transcription Tool?' (Ada Lovelace Institute, February 2026) <<https://www.adalovelaceinstitute.org/resource/what-is-an-ai-transcription-tool/>> accessed 10 February 2026. ↑
7. Jordan Sollof, 'Accurx and Tandem Health Roll out AI Scribing Tool across the NHS' (Digital Health, 29 April 2025) <<https://www.digitalhealth.net/2025/04/accurx-and-tandem-health-partner-to-roll-out-ai-scribing-in-the-nhs/>> accessed 28 August 2025. ↑
8. 'Magic Notes' (Beam) <<https://magicnotes.ai/>> accessed 28 August 2025. ↱
9. Carl Baker, David Foster and Tom Powell, 'Capacity Pressures in Health and Social Care in England' <<https://commonslibrary.parliament.uk/capacity-pressures-in-health-and-social-care-in-england/>> accessed 12 January 2026. ↑
10. BASW, '80-20 Campaign: How much 'direct' time do social workers spend with children and families?' <<https://basw.co.uk/sites/default/files/2023-08/FINAL%2080-20%20report.pdf>> accessed 28 August 2025. ↑
11. 'AI Exemplars Programme' (GOV.UK) <<https://www.gov.uk/guidance/ai-exemplars-programme>> accessed 29 October 2025. ↑
12. Oliver Bruff and others 'What Is an AI Transcription Tool?' (Ada Lovelace Institute, February 2026) <<https://www.adalovelaceinstitute.org/resource/what-is-an-ai-transcription-tool/>> accessed 10 February 2026. ↑
13. 'Fit for the Future: The 10 Year Health Plan for England' (GOV.UK) <<https://assets.publishing.service.gov.uk/media/6888a0b1a11f859994409147/fit-for-the-future-10-year-health-plan-for-england.pdf>> accessed 17 September 2025. ↑
14. Imogen Parker and others, 'Learn fast and build things' (Ada Lovelace Institute, March 2025) <<https://www.adalovelaceinstitute.org/policy-briefing/public-sector-ai/#contextualise-ai-4>> accessed 20 August 2025. ↑
15. Adam Tauman Kalai and others, 'Why Language Models Hallucinate' (Open AI, 2025) <<https://cdn.openai.com/pdf/d04913be-3f6f-4d2b-b283-ff432ef4aaa5/why-language-models-hallucinate.pdf>> accessed 22 January 2026. ↑
16. Anastasia Koutsounia, 'AI Tool Improves Direct Work in Adult Social Care despite Accuracy Concerns, Practitioners Report' (*Community Care*, 10 February 2025) <<https://www.communitycare.co.uk/content/news/ai-tool-improves-direct-work-in-adult-social-care-despite-accuracy-concerns-practitioners-report>> accessed 22 January 2026. ↑

17. 'How Does the Public Feel about Social Workers Using AI?' (Nesta) <<https://www.nesta.org.uk/report/ai-sral-magicnotes/>> accessed 28 January 2026. ↑
18. 'Understanding the Impact of Magic Notes through Validating Evaluation Findings' (*Unity Insights*) <<https://unityinsights.co.uk/our-insights/understanding-the-impact-of-magic-notes-through-validating-evaluation-findings/>> accessed 28 January 2026. ↑
19. Jed Meers and others, 'What Do the Public Think about AI Note-Taking Tools in Social Care?' [2025] European Social Work Research <<https://bristoluniversitypressdigital.com/view/journals/eswr/eswr-overview.xml>> accessed 28 January 2026. ↑
20. The Evaluation of the M365 Copilot Pilot in the Department for Business and Trade' (GOV.UK, August 2025) <<https://assets.publishing.service.gov.uk/media/68adbe409e1ceb2d2c96a19d/dbt-microsoft-365-copilot-evaluation.pdf>> accessed 21 October 2025. ↑
21. Dr Paul Walley and Dr Helen Glasspoole-Bird, 'An Evaluation of the Pilot Application of Artificial Intelligence to Witness Statement and Report Generation at Hertfordshire Constabulary' (2025) <<https://university.open.ac.uk/centres/policing/research/digitally-enabled-policing/345-herts-ai-test-and-learn>> accessed 3 September 2025. ↑
22. Cite transcription tools explainer ↑
23. Oliver Bruff and others 'What Is an AI Transcription Tool?' (Ada Lovelace Institute, February 2026) <<https://www.adalovelaceinstitute.org/resource/what-is-an-ai-transcription-tool/>> accessed 10 February 2026. ↑
24. 'Adult social care finance report, England: 2024 to 2025' (GOV.UK) <<https://www.gov.uk/government/statistics/adult-social-care-finance-report-england-2024-to-2025>> accessed 4 February 2026. ↑
25. Stuart Hoddinott and others, 'Performance Tracker 2025: Children's social care' (Institute for Government, 2025) <<https://www.instituteforgovernment.org.uk/publication/performance-tracker-2025/local-services/children-social-care>> accessed 22 October 2025. ↑
26. Abby Jitendra, 'Who will care? How can we meet the scale of the care challenge?' (IPPR) <<https://www.ippr.org/articles/who-will-care>> accessed 22 October 2025. ↑
27. The King's Fund, 'Key facts and figures about adult social care' <<https://www.kingsfund.org.uk/insight-and-analysis/data-and-charts/key-facts-figures-adult-social-care>> accessed 1 September 2025. ↑
28. '2024 Autumn Survey' (ADASS, November 2024) <<https://www.adass.org.uk/documents/adass-autumn-survey-2024/>> accessed 10 September 2025. ↑
29. Stuart Hoddinott and others, 'Performance Tracker 2025: Children's social care' (Institute for Government, 2025) <<https://www.instituteforgovernment.org.uk/publication/performance-tracker-2025/local-services/children-social-care>> accessed 22 October 2025. ↑
30. The King's Fund, 'Key facts and figures about adult social care' <<https://www.kingsfund.org.uk/insight-and-analysis/data-and-charts/key-facts-figures-adult-social-care>> accessed 1 September 2025. ↑
31. 'Social Care 360: workforce and carers' (The King's Fund, 2025) <<https://www.kingsfund.org.uk/insight-and-analysis/long-reads/social-care-360-workforce-carers>> accessed 22 October 2025. ↑
32. Paula McFadden and others, 'Main Findings for the Occupation of Social Work, Results from the UK and Northern Ireland Health and Social Care Workforce Study' (Ulster University Press, 2023) <https://kclpure.kcl.ac.uk/ws/portalfiles/portal/20252121/McFadden_et_al_2023_Occupation_of_Social_Work.pdf> accessed 23 October 2025. ↑
33. '80-20 Campaign: How much 'direct' time do social workers spend with children and families?' (BASW) <<https://basw.co.uk/sites/default/files/2023-08/FINAL%2080-20%20report.pdf>> accessed 21 October 2025. ↑
34. Rebecca O'Keefe, 'Case Recording in Child Protection: An Exploration of the Evidence Base and Good Practice' (2024) 33 Child Abuse Review e2894 <<https://onlinelibrary.wiley.com/doi/abs/10.1002/car.2894>> accessed 3 September 2025. ↑
35. 'Headline social worker information' (Skills for Care) <<https://www.skillsforcare.org.uk/Adult-Social-Care-Workforce-Data/workforceintelligence/resources/Reports/Regulated-professions/Headline-social->

- worker-information-February-2025.pdf> accessed 22 January 2026. ↑
36. 'Children's social work workforce' (GOV.UK) <<https://explore-education-statistics.service.gov.uk/find-statistics/children-s-social-work-workforce/2024>> accessed 22 January 2026. ↑
 37. Liz O'Rourke, *Recording in Social Work* (Policy Press, 2010). ↑
 38. Karla Richards, 'Ambient Voice Technology: transitioning to early enthusiasm to business-as-usual benefits' (Health Innovation Network) <<https://healthinnovationnetwork.com/insight/ambient-voice-technology-transitioning-from-early-enthusiasm-to-business-as-usual-benefits/>> accessed 22 January 2026. ↑
 39. 'Top Tips for Relationship Based Social Work in the Context of Digital Transformation' (BASW, November 2024) <<https://basw.co.uk/sites/default/files/2024-12/181362%20Top%20Tips%20for%20Relationship%20Based%20Social%20Work%20in%20the%20Context%20of%20Digital%20Transformation%202.pdf>> accessed 18 September 2025. ↑
 40. Kettil Nordesjö and others, 'The social worker-client relationship in the digital era: a configurative literature review' (2022) *European Journal of Social Work*. ↑
 41. Thea Snow, 'From satisficing to artificing: The evolution of administrative decision-making in the age of the algorithm' (Data and Policy, 2024) <<https://www.cambridge.org/core/journals/data-and-policy/article/from-satisficing-to-artificing-the-evolution-of-administrative-decisionmaking-in-the-age-of-the-algorithm/8962400DADAC3C740AC023A20B38E285>> accessed 26 January 2026. ↑
 42. Laura Carter and others, 'Critical Analytics' (Ada Lovelace Institute, 2024) <<https://www.adalovelaceinstitute.org/report/local-authority-data-analytics/>> accessed 17 July 2025. ↑
 43. Josh Behan-Devlin, 'Digital Technology in Children's Safeguarding Social Work Practice in the 21st Century: A Scoping Review' (2024) 54 *The British Journal of Social Work* 2957. ↑
 44. Jed Meers and others, 'What do public think about AI note-taking tools in social care?' (European Social Work Research, 2025) <<https://pureportal.strath.ac.uk/en/publications/what-do-the-public-think-about-ai-note-taking-tools-in-social-car/>> accessed 10 August 2025. ↑
 45. Aleks Berditchevskaia and others, 'How does the public feel about social workers using AI?' (Nesta, 2025) <<https://www.nesta.org.uk/report/ai-sral-magicnotes/>> accessed 19 September 2025. ↑
 46. 'Guidance on the Use of AI-Enabled Ambient Scribing Products in Health and Care Settings' (NHS England, April 2025) <<https://www.england.nhs.uk/long-read/guidance-on-the-use-of-ai-enabled-ambient-scribing-products-in-health-and-care-settings/>> accessed 28 April 2025. ↑
 47. Oliver Bruff and others 'What Is an AI Transcription Tool?' (Ada Lovelace Institute, February 2026) <<https://www.adalovelaceinstitute.org/resource/what-is-an-ai-transcription-tool/>> accessed 10 February 2026. ↑
 48. Oliver Bruff and others 'What Is an AI Transcription Tool?' (Ada Lovelace Institute, February 2026) <<https://www.adalovelaceinstitute.org/resource/what-is-an-ai-transcription-tool/>> accessed 10 February 2026. ↑
 49. 'Minute' (i.AI) <<https://ai.gov.uk/projects/minute/>> accessed 22 January 2026. ↑
 50. 'Access NotesCentre' (The Access Group) <<https://www.theaccessgroup.com/en-gb/products/access-notes-centre/>> accessed 22 January 2026. ↑
 51. Manager A ↑
 52. Manager D ↑
 53. Manager F ↑
 54. Manager C ↑
 55. Manager A ↑
 56. Social worker H ↑
 57. Manager Z ↑
 58. Manager B ↑
 59. Manager C ↑
 60. Manager Y ↑

61. Manager Z [↑]
62. Manager C [↑]
63. Manager F [↑]
64. Manager Y [↑]
65. Manager Y [↑]
66. Mavis Machirori, 'Spending wisely' (Ada Lovelace Institute, 2024)
<https://www.adalovelaceinstitute.org/report/spending-wisely-procurement/> accessed 10 August 2025.
[↑]
67. Manager A [↑]
68. Social worker T [↑]
69. Manager Z [↑]
70. Social Worker Y1 [↑]
71. Social Worker V [↑]
72. Social Worker X [↑]
73. Manager Z [↑]
74. Manager D [↑]
75. Social worker H [↑]
76. Manager F [↑]
77. Social Worker O [↑]
78. Social Worker Z [↑]
79. Social worker V [↑]
80. Social worker H [↑]
81. Social worker Q [↑]
82. Social Worker Q [↑]
83. Manager D [↑]
84. Social worker O [↑]
85. Social worker X [↑]
86. Social worker E [↯]
87. 'Magic Notes' (MagicNotes.ai) <https://magicnotes.ai/en-GB/> accessed 22 January 2026. [↯]
88. Manager Z [↑]
89. Manager F [↑]
90. Manager F [↑]
91. Mavis Machirori, 'Spending wisely' (Ada Lovelace Institute, 2024)
<https://www.adalovelaceinstitute.org/report/spending-wisely-procurement/> accessed 10 August 2025.
[↑]
92. Oliver Bruff and others 'What Is an AI Transcription Tool?' (Ada Lovelace Institute, February 2026) <https://www.adalovelaceinstitute.org/resource/what-is-an-ai-transcription-tool/> accessed 10 February 2026. [↑]
93. Manager D [↑]
94. Manager Z [↑]
95. Manager Y [↑]
96. Social worker X [↑]
97. Oliver Hauser and others, 'Why evaluating the impact of AI needs to start now' (Nature, 2025)
<https://pubmed.ncbi.nlm.nih.gov/40691729/> accessed 9 October 2025. [↑]

98. 'New Guidance for Evaluating the Impact of AI tools' (GOV.UK, January 2025)
<<https://www.gov.uk/government/news/new-guidance-for-evaluating-the-impact-of-ai-tools>> accessed 26 January 2026. ↑
99. Manager D ↑
100. Manager B ↑
101. Manager B ↑
102. 'New Guidance for Evaluating the Impact of AI tools' (GOV.UK, January 2025)
<<https://www.gov.uk/government/news/new-guidance-for-evaluating-the-impact-of-ai-tools>> accessed 26 January 2026. ↑
103. Manager C ↑
104. Manager X ↑
105. Manager Z ↑
106. Social Worker X, Social Worker I, Social Worker V ↑
107. Social Worker Y1 ↑
108. Social Worker K ↑
109. Social Worker S ↑
110. Social Worker O ↑
111. Social Worker F ↑
112. Manager D ↑
113. Manager F ↑
114. Manager F ↑
115. Manager Z ↑
116. Manager Z ↑
117. Manager F ↑
118. Manager F ↑
119. Manager C ↑
120. Manager Y ↗
121. Yoana Ahmetoglu, Duncan P Brumby and Anna L Cox, 'Time Estimation Bias in Knowledge Work: Tasks With Fewer Time Constraints Are More Error-Prone' *Extended Abstracts of the 2020 CHI Conference on Human Factors in Computing Systems* (ACM 2020) <<https://dl.acm.org/doi/10.1145/3334480.3382917>> accessed 27 January 2026. ↑
122. Social worker A ↗
123. Social worker A ↗
124. Social worker V ↑
125. Social worker H ↑
126. Social worker U ↑
127. Social worker A1 ↗
128. Social worker A1 ↑
129. Social worker B ↑
130. Social worker G ↑
131. Social worker A ↑
132. Social worker V ↑
133. Social worker H ↑
134. Social worker G ↑

135. Social worker F ↑
136. Social worker J ↑
137. Social worker Y1 ↑
138. social worker Y ↑
139. Social worker C ↑
140. Socia worker Y1 ↑
141. Social worker B ↑
142. Social worker L ↑
143. Social worker D ↑
144. Social worker Q ↑
145. Social worker K ↑
146. 'Top Tips for Relationship Based Social Work in the Context of Digital Transformation' (BASW, November 2024) < <https://basw.co.uk/sites/default/files/2024-12/181362%20Top%20Tips%20for%20Relationship%20Based%20Social%20Work%20in%20the%20Context%20of%20Digital%20Transformation%202.pdf> > accessed 18 September 2025. ↑
147. 'Statement on Social Work and Generative AI' (BASW, March 2025) <<https://basw.co.uk/policy-and-practice/resources/basw-statement-social-work-and-generative-artificial-intelligence>> accessed 19 August 2025. ↑
148. Social worker E ↑
149. Social worker S ↑
150. Social worker B ↑
151. Social worker W ↑
152. Social worker N ↑
153. Social worker Y ↑
154. Social worker C ↑
155. Social worker Y ↑
156. Social worker K ↑
157. Social worker F ↯
158. Social worker F ↯
159. Social worker H ↑
160. Social worker X ↑
161. Social worker B1 ↑
162. Social worker R ↯
163. Social worker N ↯
164. Social Worker B1 ↯
165. Social Worker K ↑
166. Manager C ↑
167. Social worker S ↑
168. Oliver Bruff and others 'What Is an AI Transcription Tool?' (Ada Lovelace Institute, February 2026) <<https://www.adalovelaceinstitute.org/resource/what-is-an-ai-transcription-tool/>> accessed 10 February 2026. ↑
169. Social worker U ↑
170. Social worker X ↑
171. Social worker W ↑

172. Social worker U ↑
173. Social worker G ↑
174. Social worker S ↑
175. Social worker E ↑
176. Social worker O ↑
177. Social worker I ↑
178. Social worker U ↑
179. Social Worker J ↑
180. Social worker Q ↑
181. Social worker J ↑
182. Social worker E ↑
183. Social worker E ↑
184. Social worker A ↑
185. Social worker D ↑
186. Laura Carter and others, 'Critical Analytics' (Ada Lovelace Institute, 2024)
<<https://www.adalovelaceinstitute.org/report/local-authority-data-analytics/>> accessed 10 August 2025.
↑
187. Oliver Bruff and others 'What Is an AI Transcription Tool?' (Ada Lovelace Institute, February 2026) <<https://www.adalovelaceinstitute.org/resource/what-is-an-ai-transcription-tool/>> accessed 10 February 2026. ↑
188. 'Professional standards' (Social Work England)
<<https://www.socialworkengland.org.uk/standards/professional-standards/>> accessed 26 January 2026.
↑
189. Austin Clyde, 'Human-in-the-Loop Systems are No Panacea for AI Accountability' (Tech Policy Press, December 2021) <<https://www.techpolicy.press/human-in-the-loop-systems-are-no-panacea-for-ai-accountability/>> accessed 13 October 2025. ↑
190. 'Artificial Intelligence Playbook for the UK Government' (GOV.UK, February 2025)
<https://assets.publishing.service.gov.uk/media/67aca2f7e400ae62338324bd/AI_Playbook_for_the_UK_Government__12_02_.pdf> accessed 21 August 2025. ↑
191. Vendor 1, Manager C, Manager Y, Manager Z, Vendor 2 ↑
192. Social worker E ↑
193. Social worker Z ↗
194. Social worker I ↗
195. Social worker J ↑
196. Social worker Y ↑
197. Social worker O ↑
198. Social worker X ↗
199. Social worker A1 ↑
200. Social worker H ↑
201. Manager Z ↑
202. Manager C ↑
203. Manager C ↑
204. Social Worker F ↑
205. Social Worker W ↑

206. Oliver Bruff and others 'What Is an AI Transcription Tool?' (Ada Lovelace Institute, February 2026) <<https://www.adalovelaceinstitute.org/resource/what-is-an-ai-transcription-tool/>> accessed 10 February 2026. ↑
207. Allison Koenecke and others, 'Careless Whisper: Speech-to-Text Hallucination Harms', *The 2024 ACM Conference on Fairness, Accountability, and Transparency (2024)* <<http://arxiv.org/abs/2402.08021>> accessed 24 April 2025. ↑
208. Sam Rickman, 'Evaluating Gender Bias in Large Language Models in Long-Term Care' (2025) 25 *BMC Medical Informatics and Decision Making* 274 <<https://doi.org/10.1186/s12911-025-03118-0>> accessed 21 August 2025. ↑
209. Social worker E ↑
210. Social Worker P ↑
211. Social Worker W ↑
212. Rebecca O'Keefe, 'Case Recording in Child Protection: An Exploration of the Evidence Base and Good Practice' (2024) 33 *Child Abuse Review* e2894 <<https://onlinelibrary.wiley.com/doi/abs/10.1002/car.2894>> accessed 3 September 2025. ↑
213. Social worker A1 ↑
214. Social worker K ↑
215. Social worker B1 ↑
216. Social worker K ↑
217. Social worker W ↑
218. Sam Rickman, 'Evaluating Gender Bias in Large Language Models in Long-Term Care' (2025) 25 *BMC Medical Informatics and Decision Making* 274 <<https://doi.org/10.1186/s12911-025-03118-0>> accessed 21 August 2025. ↑
219. Social worker X ↑
220. Social Worker A ↑
221. Social worker I ↑
222. Social worker Y1 ↯
223. Manager Y ↑
224. Manager B ↑
225. Manager D ↑
226. Social worker W ↑
227. Social worker C ↯
228. Social worker F ↯
229. Social Worker B ↑
230. Social Worker J ↑
231. Social worker O ↑
232. Social worker X ↯
233. Oliver Bruff and others 'What Is an AI Transcription Tool?' (Ada Lovelace Institute, February 2026) <<https://www.adalovelaceinstitute.org/resource/what-is-an-ai-transcription-tool/>> accessed 10 February 2026. ↑
234. Social worker G ↑
235. Social worker B1 ↑
236. Social worker I ↑
237. Social worker N ↑
238. Social worker Z ↑

239. Sarah Rothera and Mairi-Anne Macdonald, 'Understanding the Emerging Use of Artificial Intelligence (AI) in Social Work Education and Practice in England' (Research in Practice, December 2025) <<https://www.researchinpractice.org.uk/all/publications/2026/january/understanding-the-emerging-use-of-artificial-intelligence-in-social-work-education-and-practice-in-england-research-report-2026/>> accessed 22 January 2026. ↑
240. Sam Rickman, 'Evaluating Gender Bias in Large Language Models in Long-Term Care' (2025) 25 BMC Medical Informatics and Decision Making 274 <<https://doi.org/10.1186/s12911-025-03118-0>> accessed 21 August 2025. ↑
241. Victoria Hoyle and others, 'Child Social-Care Recording and the Information Rights of Care-Experienced People: A Recordkeeping Perspective' (2019) The British Journal of Social Work <<https://doi.org/10.1093/bjsw/bcy115>> accessed 21 August 2025. ↑
242. Paul Michael Garrett, "'Magic Moments': AI and the "disappearance" of social work ethics?' (2026) The British Journal of Social Work <<https://doi.org/10.1093/bjsw/bcaf230>> accessed 4 December 2025. ↑
243. 'Guidance on the use of AI-enabled ambient scribing products in health and care settings' (NHS England, 2025) <<https://www.england.nhs.uk/long-read/guidance-on-the-use-of-ai-enabled-ambient-scribing-products-in-health-and-care-settings/>> accessed 20 October 2025. ↑
244. 'Ambient Voice Technology Self-Certified Supplier Registry' (NHS England 2026) <<https://transform.england.nhs.uk/digitise-connect-transform/digitising-the-frontline/ambient-voice-technology-self-certified-supplier-registry/>> accessed 29 January 2026. ↑
245. 'Priority Notification: Ensuring Safe and Assured Adoption of AI Scribe Technology' (NHS England, 2025) <<https://ig.n3i.co.uk/wp-content/uploads/2025/06/Final-System-Comms-09062025-2-1.pdf>> accessed 1 September 2025. ↑
246. Manager F ↑
247. Manager F ↑
248. Manager C ↑
249. Manager Z ↑
250. Manager Z ↑
251. Social Worker G ↑
252. Social Worker Q ↑
253. Social worker C ↑
254. Social worker K ↗
255. Social worker X ↑
256. 'Algorithmic Transparency Recording Standard Hub' (GOV.UK) <<https://www.gov.uk/government/collections/algorithmic-transparency-recording-standard-hub>> accessed 26 January 2026. ↗
257. Imogen Parker and others, 'Learn fast and build things' (Ada Lovelace Institute, March 2025) <<https://www.adalovelaceinstitute.org/policy-briefing/public-sector-ai/#contextualise-ai-4>> accessed 20 August 2025. ↗
258. 'AI Exemplars Programme' (GOV.UK) <<https://www.gov.uk/guidance/ai-exemplars-programme>> accessed 29 September 2025. ↗
259. 'Community led innovation in local government: Insights from the Minute pilot' (LGA, November 2025) <<https://www.local.gov.uk/publications/community-led-innovation-local-government-insights-minute-pilot>> accessed 26 January 2026. ↑
260. Imogen Parker and others, 'Learn fast and build things' (Ada Lovelace Institute, 2025) <<https://www.adalovelaceinstitute.org/policy-briefing/public-sector-ai/>> accessed 26 January 2026. ↑
261. Imogen Parker and others, 'Licence to build' (Ada Lovelace Institute, 2025) <<https://www.adalovelaceinstitute.org/policy-briefing/licence-to-build/>> accessed 26 January 2026. ↑

262. 'What Works Network' (GOV.UK) <<https://www.gov.uk/guidance/what-works-network>> accessed 26 January 2026. ↑
263. 'NPL to Establish New Centre for AI Measurement' (NPL) <<https://www.npl.co.uk/news/npl-to-establish-new-centre-for-ai-measurement>> accessed 2 February 2026. ↑
264. Aidan Peppin, 'The Citizens' Biometrics Council' (Ada Lovelace Institute, 2021) <<https://www.adalovelaceinstitute.org/report/citizens-biometrics-council/>> accessed 26 January 2026. |↑
265. Jed Meers and others, 'What do public think about AI note-taking tools in social care?' (European Social Work Research, 2025) <<https://pureportal.strath.ac.uk/en/publications/what-do-the-public-think-about-ai-note-taking-tools-in-social-car/>> accessed 15 November 2025. ↑
266. Aleks Berditchevskaia and others, 'How does the public feel about social workers using AI?' (Nesta, 2025) <<https://www.nesta.org.uk/report/ai-sral-magicnotes/>> accessed 15 November 2025. |↑
267. Sarah Rothera and Mairi-Anne Macdonald, 'Understanding the Emerging Use of Artificial Intelligence (AI) in Social Work Education and Practice in England' (Research in Practice, December 2025) <<https://www.researchinpractice.org.uk/all/publications/2026/january/understanding-the-emerging-use-of-artificial-intelligence-in-social-work-education-and-practice-in-england-research-report-2026/>> accessed 22 January 2026. ↑
268. 'Family Justice Young People's Board' (Cafcass) <<https://www.cafcass.gov.uk/children-and-young-people/family-justice-young-peoples-board>> accessed 26 January 2026. ↑
269. 'Fit for the Future: The 10 Year Health Plan for England' (GOV.UK) <<https://assets.publishing.service.gov.uk/media/6888a0b1a1f859994409147/fit-for-the-future-10-year-health-plan-for-england.pdf>> accessed 10 August 2025. ↑
270. 'Letter from Feryal Clark MP to Chi Onwurah MP' (Department for Science, Innovation and Technology, 3 March 2025) <<https://committees.parliament.uk/publications/47602/documents/248450/default/>> accessed 20 April 2025. ↑
271. 'AI Consultation Analysis Tool evaluation' (GOV.UK, December 2025) <<https://www.gov.uk/government/publications/ai-consultation-analysis-tool-evaluation>> accessed 26 January 2026. ↑

About the Ada Lovelace Institute

The Ada Lovelace Institute was established by the Nuffield Foundation in early 2018, in collaboration with The Alan Turing Institute, the Royal Society, the British Academy, the Royal Statistical Society, the Wellcome Trust, Luminate, techUK and the Nuffield Council on Bioethics.

The mission of the Ada Lovelace Institute is to ensure that data and AI work for people and society. We believe that a world where data and AI work for people and society is a world in which the opportunities, benefits and privileges generated by data and AI are justly and equitably distributed and experienced.

We recognise the power asymmetries that exist in ethical and legal debates around the development of data-driven technologies, and will represent people in those conversations. We focus not on the types of technologies we want to build, but on the types of societies we want to build. Through research, policy and practice, we aim to ensure that the transformative power of data and AI is used and harnessed in ways that maximise social wellbeing and put technology at the service of humanity.

We are funded by the Nuffield Foundation, an independent charitable trust with a mission to advance social well-being. The Foundation funds research that informs social policy, primarily in education, welfare and justice. In addition to the Ada Lovelace Institute, the Foundation is also the founder and co-funder of the Nuffield Council on Bioethics and the Nuffield Family Justice Observatory.

Find out more

Website: adalovelaceinstitute.org

Bluesky: [@adalovelaceinst.bsky.social](https://bsky.app/profile/adalovelaceinst.bsky.social)

LinkedIn: [Ada Lovelace Institute](https://www.linkedin.com/company/adalovelaceinstitute)

Email: hello@adalovelaceinstitute.org

[Sign up for our fortnightly newsletter](#)

