

*I care...*



adult social care workforce  
recruitment and retention strategy



# I care...

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This strategy was compiled and written by social care employer representatives working together as the Department of Health's social care Recruitment & Retention working group, chaired by Sheila Scott OBE, Chief Executive of the National Care Association (NCA). We would also like to thank the English Community Care Association (ECCA) and in particular Maria Patterson, External Relations Manager for her contribution.

# foreword



The need for care services is increasing due to demographic pressures and expectations of the type of service provided are changing, as people want more choice and control over the type of service they receive.

The *'Vision for Adult Social Care: Capable Communities and Active Citizens'* set out a new agenda for adult social care in England that seeks to provide a blueprint for meeting the future need and expectations. The new agenda is one that is based on further integration between health and social care, extension of personal budgets and improving access to respite care through direct payments and better community based provision.

We need a workforce that will enable this vision and agenda to become a reality. I have asked Skills for Care therefore to work with employers to produce a strategy that looks at how we can recruit the diverse workforce we need and comes up with ways for us to retain these people in the sector.

Recruitment and retention of quality social care staff is a challenge, particularly in some areas of the country, but we must look to address this challenge in order to meet the demands for excellent, personalised services.

The Government is keen to support growth in the social care industry to meet future demand. This will also have the wider benefit of helping the country grow and recover from recession. It is important for us to identify the sort of things that are preventing growth in order to realise policy objectives and improve productivity and efficiency. The next stage will be to act to remove barriers where possible and to encourage the right atmosphere for growth.

This will mean looking beyond the traditional ways of providing social care; it certainly will involve being innovative as we seek to work in new, creative and more person-centred ways in providing tailored support that meets the needs of individuals.

It is timely therefore that Skills for Care are publishing a Recruitment and Retention Strategy on behalf of employers that seeks to pinpoint the sort of issues hindering the recruitment and retention of high quality staff and offers practical actions that employers in the sector can take to overcome these barriers.

The Strategy looks at issues like how we can attract more people into care, how we can address structural barriers to recruitment, how the sector can develop new career pathways and training and professional development. These are just the type of areas that can make a difference to a sector needing to grow a confident, capable and stable workforce ready to meet the challenges of social care in the future.

A handwritten signature in black ink, appearing to read 'Paul Burstow'.

**Paul Burstow MP**  
Minister of State for Care Services



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# 1. introduction

Care services are changing. Demography, personalisation and funding issues have all come together to transform the social care workforce. Within this transformation there is a need to understand the underlying reasons for change and to respond to them in positive, creative and dynamic ways.

The future will be challenging, but there will be many opportunities to establish a new perspective on care work, to move it from a *Cinderella* profession encumbered with negativity into a career of positive choice that will give people skills, competences and job satisfaction.

This strategy, which is released in conjunction with Skills for Care's *Capable, Confident, Skilled - A workforce development strategy for people working, supporting and caring in adult social care*, will present a route map to the future, identifying how we navigate from where we are to a workforce that will enable the new vision for social care to become a reality.

We want this strategy to be practical and to be a tool that will enable people to understand the issues and to develop their response.

The framework we are setting out will identify the issues, propose the responses and show examples of good practice. In this way, we will move this document from being purely strategic to being a framework for delivery and outcomes.

# 2. context

## 2.1 Demography

The coming years will see a significant change in the way in which the population is structured. There will be a much higher ratio of older people compared with those of working age.

- Between 2005 and 2041 the numbers of people aged 65 or over in England will rise by 83%.
- The numbers of those aged 85 or more will rise faster, by over 220%, from almost 1 million in 2005 to around 3.2 million in 2041. Much of this increase is a result of a projected rise in male life expectancy.
- The numbers of disabled older people will grow by 108% between 2005 and 2041, from around 2.4 million to around 4.95 million.
- The number of older people with moderate or severe disability will increase by 122% from around 950,000 to around 2.1 million.
- The numbers of older people using non-residential formal services will rise by 102%, from 1.5 million to 3.1 million, to keep pace with demographic pressures; and the numbers of older people in care homes (and long-stay hospital care) will rise by 139%, from 345,000 to 825,000.

For the first time in our history the balance of the population will mean that there are more people over 65 than under 16. As life expectancy increases year on year, the numbers of people who will have social care and health support needs will dramatically increase. All this is happening at a time when the availability of people in the traditional workforce will be significantly declining.

As well as the longevity of the population, advances in medical care have meant that people with various conditions who had relatively short lifespans are now living into older age and this is also increasing the need for social care and health services.

- The numbers of learning disabled adults will rise by 20.6% between 2005 and 2041, from around 203,000 in 2005 to around 245,000 in 2041.
- The numbers of physically and sensorily impaired adults will rise by 17.4% between 2005 and 2041, from 2,755,000 to 3,235,000.
- The numbers of learning or physically disabled adults in households receiving informal care will increase by 15.5%, from approximately 960,000 in 2005 to around 1,110,000 in 2041.

- The numbers of assessments of adults (all client groups) will rise by 17.7%, from 585,000 in 2005 to 685,000 in 2041.
- The numbers of people using local authority home care services (all client groups) will rise by 18%, from 75,000 in 2005 to 90,000, in 2041 to keep pace with demographic pressures; and the numbers of people using day care services by 19%, from 95,000 in 2005 to over 110,000 in 2041.
- The number of adults in local authority funded residential care will rise by 21%, from just under 60,000 in 2005 to over 70,000 in 2041.

*Statistics taken from The State of the Adult Social Care Workforce in England, Skills for Care 2010*

*(www.skillsforcare.org.uk, see 'Research')*

## **2.2 Attitudes and expectations**

At the same time that the numbers of those needing care and support is increasing, the expectations that the public have of support services, and particularly public services, are being transformed. No longer do citizens want highly structured services that they are expected to mould their lives into. Rather, the citizen requires a dynamic, fluid and responsive service that not only meets their needs, but also their expectations about active citizenship, engagement and being part of everyday society.

This was clearly illustrated by the movement from paternalism to a system based upon entitlement and citizens' rights.

## 2.3 Funding and resources

Demographic change and rising expectations are taking place at a time when there are significant pressures on resources. Health and social care services account for a major proportion of public expenditure (£122bn) and there is a growing debate within society about intergenerational fairness and cross-subsidy, and an increasing recognition from politicians and citizens that the current system is unsustainable and in many ways no longer fit for purpose.

This challenge, both in terms of the amounts of resources, but also what they're currently delivering, has forced society to engage in a debate about the future of health and social care provision. Within this debate, the workforce, which is the major part of expenditure, is absolutely central to delivering a reconfigured and more efficient service.

There is also a debate which is being ignited within the system about co-payment for social care. It is true to say that the more people pay for a service the more they will both expect and demand, and the more pressure there will be on the service to deliver.

## 2.4 The *Big Society*

All political parties are beginning to talk about societal cohesion and mutuality. The current government has framed this into the concept of the *Big Society*, but it is not just the government that is challenging communities to engage in debate about mutuality and support. It is within this context that social care is navigating the path from a structural and professionally led service into a community-based, user-directed and mutually supportive system.

## 2.5 Commissioning

The current system, which responds to the needs of commissioners rather than citizens and people who use services, is under great pressure. This pressure is not only financial, but it comes from the challenge and expectations that citizens are directing at the system.

There is a feeling that services should be much nearer to the person using them and that within a personalised care agenda there is no role for centralist formulaic commissioning.

Over the coming years, the commissioner may well disappear or transfer into the role of a market and place-shaper, ensuring that services develop in dynamic and diverse ways in order to respond to the diversity of both need and expectation.

Commissioning, which has traditionally put people into categories based on their condition, geographical location or ethnicity, is now having to sweep away preconceived notions and focus on individual needs, aspirations and life courses. This challenges a highly structured, centrally driven and controlled system.

As we move to a personal and locally-based support infrastructure, we will see a transformation not only in the social care system, but also in the workforce that currently forms the architecture and structure of social care.



# 3. recruitment

In order to meet the challenges of the future, we will need to attract a diverse workforce. Traditional patterns of recruitment, structures and working practices will all have to change. The citizen requires bespoke services and the system must deliver flexible responses.

This will lead to an incredibly diverse workforce that may well have portfolio careers that cross the continuum between health, social care, mutuality and support. Within the context of this diverse workforce, there will be a need to ensure consistency in terms of the quality of the workforce, the core values that underpin social care work and the skills and competences that staff will need to acquire.

These skills and competences will not be the old process-driven and service focused offering. The skills required by care workers will move towards enablement, empowerment and facilitation. The role will be about supporting people to be active citizens and to help them lead a life, not just delivering a service.

## 3.1 Selling a career in care

The transformation of care will require a great deal of public awareness and careers in care will have to be presented and marketed in a new, fresh and positive way. There are many key messages that should have a resonance with potential care workers, but there is a mountain to climb to redress the view that people have of care and to reconfigure it from the negative to the positive.

Improvements can be made to selling a career in care by:

- improving public awareness
- better explaining social care
- selling how worthwhile and rewarding a career in social care is
- selling the longevity of a career in care
- promoting the career opportunities available in social care
- affirming the professionalism of careers in social care.

## **Improving public awareness**

Employers should consider in every aspect of the way in which they present their services to a wide and diverse stakeholder group how this will impact on the public perception of care services.

The messages employers give should always be both positive and consistent and in every external interaction employers should be mindful of the impact this will have on the attractiveness of care careers.

The role of the statutory sector is changing and moving from one of service provision and commissioning to a role in shaping place, developing markets and increasing public information and understanding. The adult services directors within each local authority have a responsibility for the entire social care workforce, not just those that they directly employ.

Adult services directors must:

- lead public awareness of care in their localities
- engage with independent sector care providers
- form strategic alliances with schools and education directorates to ensure positive messages about care or disseminate it within schools
- work with careers services and job centres to showcase care careers
- use council communication publications and networks to raise the profile of care careers
- engage with providers delivering on the government's new *Work Programme*.

## **Better explaining social care**

Even within a devolved and localised system, there needs to be key central messages which emanate from government. Ministers have a pivotal role in leadership and the Department of Health should engage in cross-government initiatives to ensure that there are consistent messages emanating from all relevant parts of government about the potential, desirability and societal impact of careers in care.

The Department of Health should:

- move from a direct delivery role within the workforce strategy, but should position itself rather as an agency of facilitation and enablement, encouraging all parts of the system to positively promote care careers
- influence media portrayals of care
- use government information and dissemination channels to promote positive images of care professionals
- give a clear and honest appraisal of the work, including its complexity and highly-personalised nature, in all communications on care
- give clear direction to the architecture of government and non-governmental infrastructure bodies on their presentation of care careers
- co-ordinate all government departments that have a stake in social care, i.e. Department for Work and Pensions, the Cabinet Office, Department for Business, Innovation and Skills, etc.

### **Selling how worthwhile and rewarding a career in social care is**

It is vital that the sector takes every opportunity to showcase the views of people who use services about the impacts and outcomes social care delivers in their lives. This reinforces the value of social care and gives satisfaction to staff.

Employers should consider:

- emphasising job satisfaction and the impact that social care has on people's lives, for example in their recruitment and promotional materials and in the local media
- collating ongoing feedback from people who use services
- including quotes from current staff regarding their motivation to be in social care work in job advertisements and other marketing materials
- using current staff to champion careers in social care, giving presentations at job fairs, etc.
- collating case studies of people who have navigated different pathways in their careers in social care.



## **Care Ambassadors – using current staff to champion careers in social care**

The Care Ambassador schemes were created and developed by Skills for Care\*. These schemes are now nationally recognised for the work they do in raising the profile of careers in social care.

Care Ambassadors are qualified and experienced care workers who promote the image of social care and act as role models to inspire and encourage people of all ages to consider careers in the sector.

The initiative aims to address the poor image of care work which has in the past led to difficulties in recruiting staff. This can only be done by raising the status and image of care work, and demonstrating the career routes and opportunities available.

Initially the Care Ambassador initiative was aimed at schools, students, teachers and parents, but it was soon realised that this should be extended to reach a wider number of people who may be ideally suited to working in the sector, including women returners to work, men, lone parents, migrant workers, retirees, carers, and those who may be looking for a career change.

Projects now target the wider community and recruit Care Ambassadors of all ages and levels of experience, and, in several projects, people who use services are included in Care Ambassador teams to promote the impact of care staff and services on their lives.

Care Ambassadors across the country are involved in programmes of working with schools, colleges, the Society Health & Development Diploma and Apprenticeship partnerships, and a wide range of community groups and organisations such as Jobcentre Plus and Connexions. They offer guidance and advice on career opportunities available, and help to facilitate creative work experience placements in a wide range of care services and settings.

There are currently around 1,300 Care Ambassadors nationally.

\* The Care Ambassador concept was developed by Denise Harrison and was rolled out across England by Skills for Care.

## **Selling the longevity of a career in care**

At a time of economic challenge, the presentation of care as a career for life should be one of the cornerstones of marketing to both the current and the new workforce.

Employers should consider promoting in their recruitment practices:

- the diversity of care roles
- the opportunities for supplementary, ancillary and administrative careers in care
- the potential for candidates to change roles within the sector
- the opportunities for promotion and progression.

### **An example of the opportunities for promotion and progression in ancillary and administrative roles**

Hannah Young began her career in care as a member of the cleaning team at Winchester House, a Barchester Healthcare home near Rochester in Kent.

After attending an open day for staff who were interested to learn about the apprenticeships and NVQs that Barchester delivers internally, Hannah applied for an apprenticeship in Support Services in Healthcare. She had completed all of her required mandatory training and a diagnostic assessment of her literacy and numeracy, so she was accepted onto the programme.

Over the next few weeks Hannah gained in confidence and the general manager of the home suggested she apply for an apprenticeship post as a receptionist. Hannah started her apprenticeship in customer service a couple of weeks later and quickly developed excellent communication skills with visitors, residents, other staff and on the telephone. She worked really hard to get her apprenticeship finished and completed her whole framework in less than four months, which is record time.

Hannah's manager was so impressed with what she had achieved that she was offered an upgraded position with some administration responsibilities. Further to her promotion to this role, Hannah enrolled on an apprenticeship in administration a few months later and achieved this apprenticeship within eleven months.

Hannah has now been promoted to the Home Trainer role in the home and absolutely loves every minute of it.

According to a senior member of staff, “When you see Hannah interact with people she has such an amazing rapport and she sorts out even the most difficult of situations with ease and nothing seems to faze her.”

Hannah’s story offers a good example of the myriad of career and promotion opportunities available in the adult social care sector.

### **Promoting career opportunities and elevating the status of social care work**

Care and support roles should be presented honestly and realistically. However, it is important to ensure that steps are taken to represent the rewards and benefits that working in care can bring. This is a career that can offer flexibility and opportunities to work in new and creative ways. Many existing staff working in the sector will highlight the fact that their job is “is different every day” and this is mostly down to working with unique individuals, establishing and developing relationships and the satisfaction that this can bring.

It is important, too, that people understand the complexity and highly professional nature of care work and the objectives of the strategy should be to move care from the status of a ‘job’ to its rightful place as a respected and valued *career*.

In order to redefine care from a job to a career, all those that have a stake in the sector will need to ensure that the following will happen:

- the social care system needs to debate the issue of funding and remuneration
- employers should try to develop incremental pay scales
- resources should be allocated to continuing professional development
- employers should assess the learning and development needs of care staff
- training providers should develop flexible and cost-effective training models; new technologies such as e-learning should be encouraged
- apprenticeships and graduate schemes should be encouraged and promoted across the sector

- the National Skills Academy for Social Care will continue to engage with providers to promote their quality endorsement framework and continued programmes to develop leaders and managers for the sector
- social care delivery bodies should have a coordinated approach to value skills and competences that equip staff to work in all parts of the continuum of care.

### **Affirming professionalism**

The complexity and nature of social care work is akin to many of the professions allied to medicine. There should be a consistent approach to improving the status of social care work.

Mechanisms to do this could be:

- benchmarking social care work and professions allied to medicine
- showing the potential career pathways across health and social care
- developing the social care bodies and challenging them to redefine the image of social care and the status of the workforce
- embedding the new Health and Social Care (HSC) diplomas and publicising the opportunities that the new qualifications structure offers for the development of specialist expertise in, for example, dementia and learning disabilities services, and incentivising learning and continuing professional development
- developing new roles that fuse the health and social care competences
- developing more social care degree courses
- affirm and develop graduate and apprenticeship programmes.



## **Bridging health and social care in residential care homes**

In partnership with private sector partners, Bath and North East Somerset Council and Bristol and South Gloucestershire Councils have developed a new role which bridges health and social care work – support workers in residential care. The role has been successfully introduced in the councils' residential care homes and in three privately run residential homes in the region.

The support worker role encompasses traditional care roles in terms of providing personal care for older people, but also involves the support workers carrying out a range of nursing tasks, e.g. taking blood and other typically 'district nursing' tasks.

The support workers work in accordance with individual residents' care or service plans to provide personal care and basic nursing care to them, having received instruction and recognised training. Examples of the basic nursing care tasks they carry out include:

- catheter care including stoma and sheath care
- assisting with prostheses (false legs/eyes etc)
- application of simple dressings
- using sterile techniques
- foot and hand care
- basic nursing care during illness and terminal illness
- health promotion.

Increasing the skills of care workers in residential and extra care settings lessens the need for residents to go to hospital or move into nursing care as they become more physically dependent. The overall aim in developing this role was to bridge the gap between health and social care work in non-nursing care settings, and the upskilled care workers play an important role in early identification of and addressing issues such as falling.

The introduction of the role has prevented many people moving to acute care and if they do go to hospital they often get out quicker. The role has also led to far less movement into nursing care and plays an important role in end of life care in residential care homes.

## 3.2 Attracting more people to a career in care

As the adult social care workforce needs to grow, other sectors are contracting, and there are real opportunities for the social care sector to diversify its workforce and attract people with a range of skills that can enhance the sector.

The strategy for attracting more people to a career in care involves:

- attracting people whose careers are in transition
- attracting older workers
- encouraging volunteering
- attracting more men to a career in care.

### Career transitions

As the economy develops and changes, the notion of one role or career for life will not be the experience of most people. The care sector must target individuals who are in transition and present care services as a positive option for the next career of an individual's life course.

Not only should the benefits of the care sector be promoted to people considering transferring from other sectors to care, but the benefits of developing transferable skills within the care sector should also be promoted to potential social care workers. For example, people with a background in care work are likely to have developed valuable skills in areas such as customer service and management – skills that will be valued in other sectors later on.

In order to attract more people to a career in care the following needs to happen:

- with reference to the cross-sector employability skills matrix developed by Asset Skills, Skills for Care should identify the skills and competences that are transferable from different sectors, e.g. retail, hospitality, banking and business sectors
- training and support should be made available for people in career transition
- how care work can enhance and enable individuals' career and skills development should be promoted to job centres and other career services, e.g. Next Step, Prospects, etc.

## **Attracting older workers**

In the past, recruitment into care work has been dominated by a desire to get young people into the workforce. While this is still a primary focus, this approach should be broadened to encourage people of all ages to seek a career in care and support. In the last quarter of a century, work patterns have changed enormously and the notion of people having a career for life has given way to the reality of multiple careers in different sectors across the working life.

The Department for Work and Pensions is encouraging the adult social care sector to promote the improved recruitment and retention of older workers through its 'Extending Working Life' initiative.

The Equalities and Human Rights Act has enshrined age neutrality in legislation and made it illegal for employers to use age as a defining category for employment. It is our hope that this strategy will move the agenda from a focus on legal requirements and sanctions into an era of positivity and age neutrality where an individual's values, skills and competences are what define their employment prospects, rather than arbitrary notions about age.

The new approach to presenting care must first of all challenge the notion that working life may have a defined end. With increasing pressures on pensions there will be many people who have retired from one career, but who might need to supplement their income or feel the need to make a societal contribution and it is these people that we should also attract into care services.

In order to make a career in care attractive to everyone employers should consider:

- where they advertise vacancies
- including older workers in imaging and publications
- championing examples of older people in the workforce.

## Valuing and developing older staff members

Pembroke Hotel for the retired, one of Pembroke Group's residential care homes on Third Avenue in Hove, cares for 18 older people and currently employs 15 staff.

A key philosophy of the Pembroke Group is to recognise and appreciate the contribution older staff members play in developing a well-trained and motivated staff team.

Joan Taylor has been working for the Pembroke for the past 15 years, after she retired from a hospital career. She is now 80 years old. As an important member of the team, Joan is keen to continually develop her skills and is enthusiastic to participate in any training offered to her.

The care home manager, Elaine Darby, says Joan is an inspiration to all staff, particularly those who are less enthusiastic about training. She has supported Joan to take up several training opportunities including NVQs and dementia awareness training.

According to Joan, the home is committed to her ongoing development and is the "best run home in East Sussex because of the opportunities it offers to staff". Joan says she would be happy to live in the care home when she eventually retires.

## Encouraging volunteering

The government intends that the 'big society' approach will increasingly mean that communities will be involved in the delivery of care and support. It is important that people see volunteering not only in terms of its community cohesion role, and philanthropic and altruistic purpose, but also as a potential route to a career in social care.

In order to facilitate this, employers should:

- connect with community resources such as Councils for Voluntary Services to identify and publicise the potential for social care volunteering
- ensure that induction and ongoing learning is compatible with the qualifications framework
- work with volunteers to identify the potential for skills transference and paid work that arise from volunteering opportunities

- enable people who have been out of the workforce for a while to see volunteering as a pathway to a future career
- engage with established youth award schemes, e.g. Duke of Edinburgh's awards, to highlight caring roles and volunteering within their schemes.

## **Taking a strategic approach to volunteering**

The Federation of Jewish Services (FJS) is a social care charity for the Jewish Community of North and South Manchester, improving the lives of over 1,200 people each month through provision of residential, day care and community support services.

The FJS has a volunteer department which consists of a Volunteer Manager who manages two Volunteer Co-ordinators. The Volunteer Co-ordinators work with a young volunteering project and an older people's volunteering project. Their roles include managing a volunteer database, carefully matching service users to volunteers, and liaising with the FJS social work teams.

Employing a paid volunteer department at the FJS ensures that the volunteer services are run strategically and professionally and that they are effectively monitored. Although the organisation invests significant sums of money into the volunteer staff salaries, the FJS has found that having a volunteer department saves the organisation money, and leads to improved services and greater sustainability for the organisation.

The volunteer work at FJS also leads to outcomes for the community as volunteering promotes a sense of community well-being among volunteers themselves and gives people a sense of ownership.

## **Equalities and gender balance**

The care sector is unusual in that its gender balance issues are heavily weighted towards a predominantly female workforce. With the diversity of need and the approach to personalisation, there will be an increasing need for more balance in the workforce and this strategy must give consideration to equalising the proportions of men and women in the workforce.

As well as gender balance, there must be recognition of the needs of minority communities and services should respond to the diversity of need. One of the major issues within the current system is the prevalence of health and social inequalities.

The workforce strategy must be a foundation of addressing these inequalities, both for citizens and staff.

In order to facilitate this, employers should:

- positively promote the role of men in care
- encourage male support and care workers to champion care careers
- engage with traditionally marginalised communities, both from minority ethnic backgrounds and those with common interests and sub-cultures, to be part of the workforce
- target recruitment drives in areas and professions which are male-dominated.

### **An inspiring case study of a male care home receptionist**

Dean Hill, who works at Kerria Court care home on Cregoe Street in Edgbaston as a care home receptionist, was presented with the 'Making Customers Happy' trophy in the Grand Final of the Anchor Smile Awards in 2010.

Dean began working at Kerria Court after recovering from a motorbike accident which made him a wheelchair user. While in hospital, he was shocked at the way older people were treated, and became determined to help change that when he could work again.

The English Community Care Association's Chief Executive Martin Green, who judged the awards, said: "I really engaged with Dean's nomination because it showed the important role of the receptionist as a supporter of the older people in the home as much as any care worker. His natural ability to care is something money can't buy."

Dean acknowledges that the role of a care home receptionist would never have appealed to him before his life circumstances dramatically changed, but he is now a powerful champion for increasing the male workforce in care and a shining example of how men's careers can flourish in our sector.

### 3.3 Ensuring an appropriate workforce

It is important that the workforce is drawn from all sections of the community and that people with appropriate skills, knowledge and competences are drawn into the social care arena. Above all, social care workers should hold the values of social care and there needs to be a movement from solely competence-based recruitment to a values-driven approach.

Employers should:

- include values and vision statements in all recruitment literature
- ask candidates specific questions about values and ask for illustrations of values in action in interviews
- introduce a reflective practice approach to continuing professional development.

#### Interviewing for values

Anchor Trust is a not-for-profit provider of care and housing for older people in England, employing approximately 10,000 staff.

Anchor Trust's interview process identifies a number of key behaviours Anchor expects its staff to demonstrate, including service to customers and colleagues and leadership skills. There is a bank of questions for each behaviour. A scoring system has been devised to ensure responses are graded with consistency and fairness. A set of competence-based questions has been created for each role to test skills and knowledge, using the same scoring system.

The benefit to Anchor of the emphasis on behaviour questions is the acknowledgement that if Anchor has the right people with the right values, attitudes and behaviours, they can be provided with all the training and development they need to succeed. This is particularly useful when interviewing applicants with no relevant experience but who can shine at interview by exhibiting the behaviours Anchor values. Anchor Trust has reduced turnover by 21% after introducing behavioural interviewing.

Although smaller providers may not have an in-house recruitment team, there is always scope to produce a bank of interview questions, reviewed regularly, that ensure that the staff you appoint are the ones you want to represent your home, service or organisation.

### 3.4 Creating a flexible workforce

Providing care and support to citizens is a '24 hour, 365 days a year' activity. This is both a challenge and an opportunity. In order to cover this amount of service and support flexible working patterns will be required. This flexibility can enable people who have other responsibilities, such as children or caring responsibilities, or who are part of the education system, to work hours that are flexible enough to work around their family and other commitments.

In order to facilitate this, employers should:

- examine their staffing needs and refocus their approach to one that works with a multiplicity of staff to deliver outcomes, rather than the traditional notion of full-time workers
- ensure efficient rota and payment systems
- develop job descriptions that are outcome-based, not process focused
- introduce induction and learning programmes that equip staff to cross the continuum of care, from personal assistants to professions allied to medicine.

### 3.5 Personal assistants

Any strategy which is looking to develop a professionalised workforce should understand the place of personal assistants in the continuum of care. As more people who use services receive personal budgets and direct payments, there will be an increasing part of the workforce that is directly employed by the person using the service.

We must all recognise that some of the same professional standards and competences required in registered health and social care services are also required by personal assistants and the system must ensure that career and professional development opportunities are available to all social care workers.

Skills for Care's forthcoming framework for personal assistants will assist in bringing about a more coherent and strategic national approach to managing and professionalising the personal assistant workforce.

In order to achieve a professional personal assistant workforce, the following are required:

- adult services directors should define personal assistants as part of the social care workforce in terms of safeguarding legislation, qualifications and learning
- direct payments and individual budget holders should be given targeted information on their role as employers and the learning needs of personal assistants
- personal assistants must be engaged with the qualifications framework
- personal assistant roles should be seen as one gateway to a career in social care
- sector delivery bodies should develop a joint approach to personal assistants' learning and skills development.



## **A case study of a personal assistant employer – Sharon Terry**

Sharon Terry, who won the ‘Best individual who employs their own staff’ in the 2009 Skills for Care Accolades, is a powerful advocate of a professional and qualified personal assistant workforce.

Not only does Sharon empower her own staff in terms of their qualifications and career development, but she also gives advice to local job centres about promoting the career opportunities that personal assistant roles offer and she works closely with Skills for Care and Business Link in developing career pathways for personal assistants.

Having come from an educational background, Sharon understands the need for the personal assistant role to be recognised and valued as a professional career within the social care sector. She has created and developed a very interesting and educative role for her current assistant through her willingness to be flexible about the hours that her employee works with her, thus allowing her employee the time to work as a personal assistant with other people who are from different backgrounds and have different support needs.

In this way Sharon’s employee has been able to develop a range of skills and experience, and has found it easier to access NVQs. Sharon also ensures that she spends at least one hour every week discussing the networking, training and learning needs of her employee.

Sharon believes that there is an important role for Jobcentre Plus, Business Link and Skills for Care in promoting the career opportunities for personal assistants, particularly if they promote the possibilities for developing a range of skills and experience that arise from working with more than one employer.

Sharon also believes that there is important work to be done in educating personal budget holders on their financial rights because understanding their rights is crucial in assisting people to understand what employment and training packages they can offer personal assistants whom they employ.

### 3.6 Addressing structural barriers to recruitment

In order to implement a strategic approach to career development across health and social care, there are several structural issues that need to be addressed. However, these barriers should not be used as an excuse not to have a strategic approach to workforce development, but they should be recognised as obstacles that should either be removed or circumnavigated.

Addressing the following issues would significantly increase the pace of delivering the workforce strategy.

- Improving the interface with careers advice and employment support services: all careers and employment advisers (including Next Step, Connexions, Jobcentre Plus and Work Programme providers) should develop specialist knowledge of social care professions. They need to be proactively promoting care as a viable profession for people who they work with and if this is not delivered these services should be outsourced to commercial organisations.
- Jobcentre Plus should promote the national sector route-way for adult social care as an integral part of its Service Academy offer. Jobcentre Plus jointly developed the sector route-way with Skills for Care to offer support to unemployed people and give them the skills and confidence to move into entry level roles in the adult social care sector.
- Each large employer should consider a strategic approach to in-house recruitment, retention and professionalisation.
- Small employers should consider joint working with other small employers or external consultants to develop recruitment strategies.
- Employers should work with a range of both private and statutory employment agencies and should develop strong links with specialist agencies.
- In order to improve the status and the attractiveness of social care there needs to be a proper approach to funding and a framework for remuneration.

## **Jobcentre Plus and Skills for Care partnership – route-way to entry to social care**

Skills for Care and Jobcentre Plus have worked together to provide a national sector route-way for adult social care.

The route-way offers support to unemployed people interested in a career in adult social care to give them the skills and confidence required to move into entry level roles in the sector.

It has three key elements:

- the development of local partnerships between social care employers, learning providers and employment support advisers (from Jobcentre Plus or Work Programme providers)
- the route-way toolkit, which is a set of practical resources designed specifically for employment support advisers
- the route-way course, which is a pre-employment training course that lasts at least 60 hours and can be taught flexibly over a three to six week period.

Throughout the 60-hour course, learners develop their communication and employability skills and learn about the values and principles that are central to all types of work in the social care sector.

They also learn about the different types of job opportunities and career development options that are available, hopefully getting a real feel for the social care sector by the time they complete the course.

The learning outcomes for this course have been developed as an accredited award on the Qualification and Credit Framework (QCF). The award consists of five level 1 units and has a credit value of six. Its title is Level 1 Award in Preparing to Work in Adult Social Care.

The sector route-way provides a tried and tested model that can be used as the basis for Service Academy design and for a range of employment support initiatives that could be delivered through the Work Programme.

# 4. retention

In order to develop a care workforce that will be capable and flexible enough to deliver the types of services that will be required to achieve the future vision for adult social care, a strategic approach to workforce planning and development as a whole is required. If employers are clear and confident that they have effective retention strategies in place their recruitment plans will become more informed and this will allow them to plan and anticipate in more detail, and to target and schedule these activities to match their needs. The National Minimum Data Set for Social Care (NMDS-SC) evidence on retention highlights the correlation between high levels of retention and qualification levels held. The Social Care Institute for Excellence (SCIE) has also stated that continuing professional development and in-service training are major factors in staff retention.

Other clear messages which come out of research into retention strategies highlight that retention rates increase when staff feel valued and respected, enabled and supported, and if they are given responsibility, autonomy and appropriate levels of remuneration. All these issues need to be considered with equal priority because it is the combination of a range of factors that lead to job satisfaction and a stable workforce.

## 4.1 Nurturing new recruits

The process of retention begins at the point when people see an advertisement and are attracted to apply for a role. How adverts present social care and the role of the worker are vital in defining the applicant's perceptions.

After their initial application, potential employees need to feel that there are clear, robust and accountable processes around recruitment, appointment, and retention, and that a role within social care will be a fulfilling place to work and deliver remuneration and job satisfaction.

Employers should:

- present posts positively
- encourage applications from a diverse range of individuals
- have clear, robust, accountable and challengeable appointments processes
- supply high quality induction training, including role induction
- give continuous and structured feedback to employees through, for example, six-weekly supervision sessions and yearly performance reviews

- engage in continuing professional development, setting learning targets
- reward achievement
- develop learning sets, mentoring and peer support processes
- offer staff a pathway to professional advancement and career development
- offer apprenticeship and graduate trainee opportunities.

## **Barchester Healthcare Apprenticeship scheme**

Barchester Healthcare cares for over 10,000 people at more than 200 different locations. Barchester's services include registered care and nursing services and independent hospitals through to supported living, outreach, short breaks and domiciliary care and support. It currently employs 16,000 staff.

In order to increase retention levels and to promote the career opportunities in the social care sector, Barchester introduced its apprenticeship programme in 2003. The programme consists of an accredited NVQ programme, key skills and an accredited technical certificate which underpins the knowledge of the role.

The apprenticeship programme means that apprentices can earn while they learn, develop their skills, follow a career and learn at their own pace. Barchester has found that the programme has achieved a measureable return on investment, with a 10 per cent increase in retention rates, based on 1,000 apprenticeships.

According to one apprentice, "As an apprentice at Barchester, you earn while you learn, which means no school, no college, just Barchester!"

## **4.2 Developing new career pathways**

It is important that the primary role of enablement and support is recognised and has a similar status as that of a management role. The sector must work together to construct career pathways that enable people to develop their careers as practitioners as well as managers.

This requires a new approach to the social care workforce and a more flexible and innovative way of working. The paradox is that we need to have a staff complement able both to be flexible and to develop expertise in discrete and bespoke areas.

The strategy for developing new career pathways includes:

- providing alternatives to management roles for people who wish to develop their careers
- developing new specialisms within care roles, e.g. dementia specialist roles
- ensuring that the new Qualifications and Credit Framework captures developing new roles and specialisms and provides units or qualifications to support this learning
- developing the business skills of care staff.

### **Alternatives to management**

There should be clear career pathways which acknowledge people's expertise in empowerment and supporting delivery. This requires:

- the development of a senior practitioner type role
- pay scales that enable experience and outcomes as a practitioner to be recognised
- respect and acknowledgement for the role of personal assistants and other lone workers
- training and support for lone workers
- embracing the diversity of roles and emphasising the importance of all roles, including 'non-care' ones such as chefs and handymen, in supporting and empowering people who use services.

### **Developing specialities**

There is a need for flexible working and for staff to work across the continuum of care, but there also may be efficiencies and outcomes to be delivered by some specialisation. As organisations evaluate how they will deliver their outcomes, they need to think afresh about their current structures and whether or not they are getting the most from the skills of their staff.

In order to address this, employers should:

- dialogue with staff about their skills and preferences
- examine all aspects of their organisational structure and develop appropriate new roles to enable efficiency, delivery and the best use of staff skills and abilities
- consider reviewing caring and administrative roles with a view to either splitting, amalgamating or outsourcing them.

### **Amalgamating support roles for a more natural form of working**

The Belong services in Crewe and Wigan provide services for older people and people with dementia. The Belong support model is based around small households for 10–12 people and these households are centred around some larger communal spaces such as a café and large resource room which is used for performances and large group activities.

The support worker roles at Belong demonstrate a development of the traditional care worker role. With the development of smaller households, the Belong senior management team decided to create support worker roles in order to bring about more of a family atmosphere in the households. Instead of having a traditional task-orientated and differentiated team structure consisting of care staff, domestic staff, activities staff and kitchen staff, it was decided to incorporate all of these functions into the support worker roles.

Not only has this led to a more natural form of working and interaction with residents, but Belong has found that the new roles actually allow for more to be achieved and for scope to employ more support workers.

### **Developing business skills**

The new approach to enablement and facilitation and the diversity of provision requires care managers to have not only caring and support and enablement skills, but also to possess the entrepreneurial skills and business sense in order to allow their businesses to develop and thrive.

Employers should:

- identify the business skills required
- ensure that there are a range of support and development structures available
- acknowledge and remunerate multi-skilled, multi-tasking staff
- attract people from areas such as retail, hotel, banking and business development organisations to transfer into care services.

### 4.3 Developing incentives for retention and career progression

In order to ensure that we retain a high quality workforce there is a need to develop some specific incentives that help people stay in the care sector. These will include:

- a proper remunerations framework
- ongoing additional benefits, e.g. pensions, health cover, life insurance, etc.
- developing awards for high level performance
- incentivising continuing professional development with salary rewards for qualification attainment and service achievement
- promoting awards and forms of recognition that acknowledge the contribution of care staff and validate their successes.

#### **Retaining staff – the importance of feeling important!**

ARC Community Care Ltd (ARCCC) is a domiciliary care service provider with 26 staff. ARCCC has recently found that when staff leave, they struggle to find new recruits to take their place. While older carer workers tend to stay for the longer term, younger employees are more likely to see the role as a stop gap.

In order to maximise retention ARCCC has a policy of making staff feel important, valued and special. They do this using several initiatives including:

- an extra two days holiday after five years of service
- birthday cards, sent to the employee's home address

- boxes of chocolates, e.g. if an employee helps out by working an extra shift
- gift vouchers if the employee is not off sick in a period of six months
- a Christmas present.

Also, if any positive feedback is received from people using the service or their families, this is passed on to employees to reinforce the significance of the work they are doing.

In 2009, several staff were interviewed as part of the application for renewed Investors in People (IIP) accreditation and several of them mentioned these initiatives in a positive light. The IIP report documents how staff see these retention initiatives as good reasons for staying at ARCCC.

#### 4.4 Supporting a community-based approach to care and support

It must be acknowledged that care services and those who use them are part of communities, and developing community approaches and networks should be at the heart of recognition and retention strategies.

Community engagement gives people a clear understanding of the role of care services and enhances and develops the status of the workforce. Through understanding comes acknowledgement and respect and these are two highly motivating factors when it comes to people's decision to enter the social care workforce.

Putting care services at the centres of communities requires people being able to live and work in the same locations. It is important that any workforce strategy acknowledges that, as lower paid workers, care staff sometimes struggle to find accommodation in certain areas. Care staff should therefore be seen as key workers for the purposes of housing allocations, and local authorities should consider their importance within communities when allocating housing points in the current system.

The strategy for supporting a community-based approach to care and support involves:

- enabling community-based approaches to care
- promoting the growth of multi-disciplinary working
- increased working with relatives and friends.



## **Enabling community-based approaches to care**

Enabling community-based approaches to care will require:

- recruitment and retention strategies to focus on matching staff and people who use services, in defined geographical locations
- care workers to be given key worker status within the housing allocation system
- staff to be conversant with the matrix of local facilities and support and to facilitate access for all
- evidence that supporting people to be active citizens in their community and enhancing their community roles improves their well-being. This is to demonstrate to staff the tangible outcomes of their work to give a more satisfying work experience.

### **Swanborough Services – community support workers**

Swanborough Services is a new organisation that has developed alongside Swanborough House, a residential home in Brighton for adults with acquired brain injuries.

Swanborough House's model of care is centred on person-centred support and rehabilitation with a view to re-integrating people into the community. The management of Swanborough House noticed a gap in services for individuals between leaving the home and becoming wholly independent and therefore it was decided to develop Swanborough Services to support people who have just left Swanborough House as they re-integrate in the community.

Swanborough Services has developed a new career profile, the 'community support worker', to support and enable people with acquired brain injuries in the community. The role provides continuity of care for people now living in supported living housing or independent housing.

While the community support workers provide some domiciliary services, the main aim of the role is to support people as they live and take part in activities in the community.

It is a client-led role, with the clients deciding what support needs they have and what the duties of the role will be.

## **Multi-disciplinary working**

Working as part of a multi-disciplinary team exposes care workers to different models of care, enhances their status and leads to retention. In order to achieve this we need the following:

- multi-disciplinary teams which foster professional respect
- a core competences and values training and induction framework which enables cross-sector working and inter-disciplinary understanding
- clear pathways for staff to move between the disciplines.

## **London boroughs of Lambeth, Lewisham and Southwark PCTs' Care Home Support Team – encouraging wider access to primary care**

The 'care homes support team' is a multidisciplinary initiative jointly funded by the three PCTs of Lambeth, Southwark and Lewisham ('LSL'), with input from South London and Maudsley and three acute trusts, to strengthen NHS medical, psychiatric and nursing support for the 40 independent sector care homes with nursing across the LSL area.

The team's aim is to facilitate the improvement of standards in the nursing care of older people through advice, training and systematic review. They work in partnership with the care homes' staff, encouraging and empowering a process of continuing practice development aimed at the highest possible quality of life for the residents.

The core of the team comprises eight older people's specialist nurses (OPSNs), including a team leader and mental health lead nurse. The OPSNs each work with a group of homes, determining and regularly reviewing the NHS funded nursing care needs of each resident. At the same time they screen the residents for cognitive impairment and depression.

Referrals arising from the latter are seen by the team's consultant old age psychiatrist, Dr Amanda Thompsell, supported by the mental health lead nurse, Dave Bell. If appropriate, specialist advice with regard to treatment is then provided to residents' GPs. Advice on all aspects of the mental health of older people is provided to other members of the team and any care home or GP, on request. In conjunction with a pharmacist, medication reviews are prompted and supportive training is offered to care homes' staff.

The service is for residents over 65 in care homes with nursing in Lambeth, Southwark and Lewisham. Referrals are accepted from managers, GPs, mental health services, residents and relatives.

### **Working with relatives and friends**

Part of the role of an enabler and facilitator is supporting people to maintain their networks. This relationship-based care is cited as a motivating factor for staff retention. In order for this to be achieved we require the following:

- mutuality and respect between professionals and family and support networks
- acknowledgement of the key role of the care and support worker
- incentivised payments and recognition for high quality engagement work
- staff training to enable a co-production in care and support by people who use services, relatives, friends and care staff.



## **A West Indian party for a care home resident – a classic story of co-production**

Gilbert was an 88 year old West Indian gentleman who was nearing the end stage of his life due to cancer. He was receiving palliative care in an MHA care home with support from a specialist nurse from the community. After one of her visits, during which the home found out that he may have only a week to live, Gilbert was asked what he would like to do.

He said he would love to have a party and invite all his old friends and colleagues. The care home staff had a week to organise it, involving the residents, family and friends. On the Friday the West Indian staff and guests were “coming out of everywhere” with West Indian food, warmers for the food, and specialist food. The care home staff arranged a reggae band and there were over one hundred people there; friends, family and colleagues.

Gilbert could not believe his eyes that something like this happened in such a short time. He saw friends and family that he had not seen in fifty years. He was dancing and had a really good evening. The manager had to beg the reggae band to leave the home at 11pm that night.

One of the English residents who does not communicate very well normally said he had never seen anything like it and it was the best party he had ever been to. The care home was overwhelmed with the generosity of the West Indian community and how they pulled together to organise such an event at such short notice. Gilbert’s party was on 29 May 2008 and he lived on for another six weeks and died hoping that he was going to have another party in August like he had in May.

## 4.5 Training and professional development

Training and professional development are the cornerstones of quality care and staff progression and development. Any retention strategy must be focused on enabling services and individuals to access training and development funding for the benefit of the service and the staff.

In order for this to be achieved the following is required:

- clear information about training resources, priorities and funding
- development by the National Skills Academy for Social Care of a quality assurance 'kite mark' for training agencies
- an outcomes and appraisals framework for the outcomes of training
- a remuneration system which recognises and rewards expertise and personal development
- commissioners who acknowledge and reward quality services with quality premiums.

### **National Skills Academy for Social Care – endorsement of education and training providers**

The National Skills Academy for Social Care's Endorsement Framework enables education and training providers to demonstrate that they have met the rigorous standards set by the Skills Academy.

As employers face increased financial pressure there is a greater need for assurance on the quality of training purchased. Organisations need to maximise their resources by only commissioning excellent training. Skills Academy endorsement enables employers to distinguish and commission first class provision.

Endorsement for organisations is a two stage process – once organisations receive Recognition they can then apply for the Excellence Award. Learning programmes can be individually endorsed. This is a single stage process leading directly to the Excellence Award.



# 5. conclusion

This strategy provides the foundation to recruiting social care staff from a much wider community. It responds to the challenges of the financial climate and the aspirations for community engagement, citizenship and the 'big society' approach.

It is a strategy which we believe will transfer services from a narrow paternalistic staff-driven 20<sup>th</sup> century service into a user-directed community citizens' rights-based enablement and empowerment service, which will be fit for the challenges and aspirations of 21<sup>st</sup> century citizen-focused services.

I care...



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