

Workforce strategy event

Oonagh Smyth 00:00

Good morning, everyone and welcome. We have 150 people in the room and 1,000 people registered on the live streaming event. So I can feel the energy. So thanks everybody for coming. I am Oonagh Smith, and I am the Chief Executive of Skills for Care, and I am the co-chair of the strategy process. I'll let David introduce himself, and then I'm going to do a bit of an introduction, and then David's going to say a few words as well.

David Pearson 00:29

Okay, good morning, everybody. David Pearson, long term Director of Adult Social Care in Nottinghamshire, former president of ADASS, chaired an ICS and done a variety of other bits of work nationally over the years.

Oonagh Smyth 00:45

Thank you David. So I just wanted to start by saying that this is a really, truly momentous occasion for social care, and we can feel that in the room, I think, just the extent of the energy. It's the first time that we've had a all leavers at all levels workforce strategy involving everybody who can really make a difference in social care, most of the people in this room. And I think we have to take a moment to recognise that we can't waste this opportunity. There's a moment in time for us all, I think, and we've come together because this is really important. Social Care is really important. It's important for the people that we support in every single community, in every single street in the UK. It's important for the people that work in social care. It's also really important for the economy, and that's not always something that we talk about enough. The Secretary of State last week spoke about the DHSC being a growth department, and there's something in that that's completely right for social care. We add £60 billion to the economy in England every single year. We employ 5% of the whole labor market. They're employed in social care. It's such a significant part of our society and our infrastructure, and there are so many opportunities for social care to support with growth, there's opportunities for hundreds of 1,000s of really excellent roles in social care, and for social care to support, to allow the people that we support back to work, to support family carers and to really form its part of our community infrastructure. But we have some way to go. So we don't have enough people in social care today, we know that we have about 130,000 vacancies in social care, and that's despite our international colleagues being recruited from abroad, and that sits at about three times the national average. We also know that, just based on demographics, we're going to need an extra about 540,000 posts by 2040 and that's a real opportunity, I think, for us to make sure that we've got hundreds of 1,000s of people in excellent roles. The actions in this strategy aren't a nice to have. We've got to all do these things. Need is going to grow whether we do something or not, and demand for the workforce will then grow as well. We've led this strategy as Skills for Care, but with so many partners who are so passionate about social care and

really dedicated to this process, and who stand kind of shoulder to shoulder with us, saying, what do we need to do to make change happen in social care? What do we need to do to implement the changes so that we are in a position to meet people's needs in the future? And we've as a sector, there's a real energy, I think, for us all, just to get on with some of that, there's stuff that we can be doing and should be doing now. We have to step up into the leadership roles that we are privileged to be in in social care. And we have to step into those roles. We have to work together across all of the levers in social care, thinking about regulation, funding, commissioning, and what we can do as employers, and we have to collaborate all of the time. This is a complex sector, and the more that we can join together, and the more that we can have these these conversations, the more change we'll see. And we have to be really dogged, I think, in our determination to build the workforce that's going to support us all now and in the future, and support our families and loved ones in the future. And it's going to require an element of stubbornness for us all to keep going, because this strategy sets out a 15 year plan, but we've got to start quite a lot of that now. I'll allow David to do a bit of an introduction, then I'm going to ask Anna onto the stage.

David Pearson 04:58

Thank you very much. And a very warm welcome from me and us, and thanks to all of you for for coming today and those people online who are joining us. When Oonagh approached me about co-chairing the steering group, given the challenges facing the sector and the requirements of those people drawing on care support and people working in it, I could think of no more important activity than having a workforce strategy that can help to ensure that we receive help that we need at a time when we need it, and in a way that helps us to live the best lives we can at whatever stage of life, we are at. Yes, money is important, change, reform and technological innovation are important, but the workforce is a foundation of any effective social care service in this country. So it's been a privilege to co-chair the steering group with Oonagh. Of course, it is also important for the sustainability of adult social care and the health service. And the support of the NHS for this strategy has been very important and welcome. From my experience as a social worker, Director of Adult Social Services and leading significant initiatives such as the implementation of the Care Act and the covid 19 workforce, and as an unpaid carer to members of my family, I have seen and heard about the extraordinary acts of skill, expertise and kindness every day from the social care workforce. Equally, there are many good examples of leaders and organisations who support and enable the workforce. We need to create the conditions where arrangements we put in place support this, enabling the consistency, quality, support and assistance that people need. The strategy is created to make this easier and more achievable everywhere. I believe that this is a well-evidenced strategy with the best information, data and analysis available from a wide range of sources. We have sought advice from just about everybody, and found all manner of experts all too willing to generously give their time and their expertise. We have commissioned expert specialist analysis from a number of think tanks. Given the diversity of social care, with 153 local authorities, 18,000 providers working in 39,000 settings, the powerful thing about this is the wider sector has pulled together to create this. Yes, this is being led by Oonagh and her remarkable team. The fact that we have reached this point is because of Oonagh's leadership and that team, but most significantly, because leaders from many different organisations have resisted the temptation for run for cover in the face of enormous pressures. This is when good things happen. Thank you to the steering group and the many organisations and people who have supported its development.

Oonagh Smyth 08:16

Thank you, David. We are going to be sharing the strategy soon, but I want to start by welcoming Anna to the stage, because we believe the voices of people who draw on care and support should always come first. Whose workforce is it anyway? As you always say, Anna. Dr Anna Severwright is co-convenor of Social Care Futures, which plays a key role in making sure that disabled and older people are able to live the lives that they want. Anna was one of the voices of people who draw on care and support, on the strategy steering group, a really core member, and in the recent King's Honors, was made an OBE for her services to disabled and older people. So let's give Anna a warm welcome.

Anna Severwright 09:10

Thank you, Oonagh, and it's lovely to be here with everyone today. And so I'm here today as somebody who employs personal assistants, which are often a forgotten part of the social care workforce, but they allow me to get on with my life, and indeed to have come here today, and I'm also here as one of the convenors of a movement called Social Care Future. And we co-produced this vision a few years ago, saying that for older and disabled people, this is what we should be supported to be able to have in our lives. But what's really powerful about this vision is that actually applies to everyone. You know, if I asked you what matters in your life, it would probably be these things, but it should also apply for the people that are providing care and support. So I'm here sort of today to just say actually, this is what the people in the workforce should also be experiencing. And I've just got three short thoughts to share with you today around the strategy. I think we need to be thinking really ambitiously about changing how we change the system, because we can't keep doing what we're doing today, and there's lots of talk about prevention and trying to reduce need, and as Oonagh said, you know, we've got an aging population, but actually, we need to be focusing on the things that keep people well in our communities, keep people connected, and we will need different roles for that. We need to be thinking about community connectors, circle coordinators, all sorts of different roles that probably don't even exist yet that will be developed with communities and other things that are going to keep everybody well connected, reduce isolation, because if we don't, we will only just keep plugging a system that really isn't working well. But that also allows us to have different ways of working. We can give care staff more autonomy. We can have care co ops. We can have self managing teams. And I think we really need to, over the next 15 years, be looking at how we can change some of those structures. I think we also need to look wider at who we're recruiting. My best PAs had never worked in care before. In fact, I actively look often for people who haven't worked in care before. I had one lady that had worked in care, she turned up first day. I'll get you your breakfast. I don't eat breakfast. Why are you getting me breakfast? I want somebody that comes with the right attitudes. And I think value based recruitment really is so important. People can be taught how to use a hoist, how to wash someone, but you can't teach that attitude that really good care workforce have. Yes, you need compassion, you need empathy, you need to see the person as a person, and you're there to empower that person and support them to live their life the way they want, not to look after them. And finally, we often hear how care workforce isn't valued. There's lots of different reasons for that, but I think one of the reasons is that as a society, we still have a lot of ableism and ageism. We have really low expectations for what disabled people and older people should have in their lives. So therefore, we don't value social care, and we don't value the people supporting older and disabled people. I think we need to tell a better story about social care. We need to get better as a sector talking about social care that will help with

recruitment, and therefore also with funding, and we can then pay people better. So unless we're saying social care has a really important value to our society, and disabled and older people have and carers, we won't get a change. And finally, I think for me, it's about us all coming together. It's not about people who work in social care, versus people who draw on social care. We all need to be coiled up together. So really glad to be here today. Thank you.

David Pearson 13:19

Thank you very much, Anna and for reminding us what the point of all this is, and also thank you for your leadership with Social Care Futures, which have made a huge contribution to the debate and with colleagues like Clenton and others. So thank you very much, Anna.

Oonagh Smyth 13:38

So David and I are now going to do a completely seamless double act where we talk you through the content of the strategy. We are only going to be able to give a snapshot. This is a really comprehensive piece of work, so I do encourage you all to have a look. So let's start with why we need a workforce strategy, or why we think we need a workforce strategy, although, with 150 people in the room and 1,000 people registered for the live stream, I have this voice in my head saying, you're preaching to the converted, but to kind of go back to that fundamental point that I made, that David made, that Anna made, and hopefully you'll hear it again and again, social care is absolutely fundamental to all of us. And as Anna said, and it was in the previous slide, we we all want to live in a place we call home with the people and things that we love, in communities that look out for each other, doing the things that matter to us and we all want gloriously ordinary lives, whatever that looks like for every individual. And social care, as I said in my introduction, is important for individuals, for the economy, and that's a kind of incredibly important starting point that this is a fundamental part of our of our infrastructure. So the skilled professionals that work in social care are absolutely vital too because we don't have social care without them. We want people to want to come and work in social care, and once they're in social care, we want them to feel valued. We want them to develop, grow and progress in their careers, so that they stay in social care and learn new skills.

David Pearson 15:35

And the people who work in social care, as I alluded to earlier, make the biggest contribution to the quantity and quality of social care. This strategy has the potential to make a very big difference to the experience of social care and those who work in it. A real turning point for social care. The sector faces many challenges, but now we have a strategy that will contribute to tackling them. The strategy brings together the diverse contributions across the sector. It's a complex system with influence spread across several groups. These include national government, local government and integrated care systems. Care providers, the Care Quality Commission and workforce support bodies like Skills for Care. Skills for Care has taken a leadership role in the development of this workforce strategy. But as I suggested before, it's been a real collaborative effort with many organisations and people with a stake in the future of social care. We announced our plans to do this back in October. So in just nine months, a very wide range of people have worked together to develop a comprehensive long term strategy to make sure we have enough of the right people with the right skills to provide the best possible care and support for the people who draw it.

Oonagh Smyth 17:10

Okay, so I'm just going to give some context about the shape of the adult social care workforce and the opportunities and challenges that we have in front of us. We are going to start by sharing some of the headlines from Skills for Care's latest annual Size and structure of the adult social care workforce in England report, quite a mouthful. We have published that report today alongside the strategy, and as most people in this room will know the statistics come from the Adult Social Care Workforce Data Set, which has records on more than 650,000 staff in 20,000 care providing locations. All of these data cover the period between April 23 and March 24 so in that year, the overall workforce grew for the second year running. There were 1.59 million people working in social care, and that's an increase of 4.2% in filled posts, or 70,000 additional filled posts from the year before. The number of vacancies have reduced from 153,000 to 131,000 so that's a significant drop although still a lot of vacancies. The new rate of 8.3% is around three times the national vacancy rate, which sits at about 2.8%. I should say that there are various reasons for vacancies, some because of turnover, some because of growth in the sector. But there's also, we know, persistent vacancies as a result of care providers finding it hard to compete in their local labor markets, in terms of turnover, 26% of staff working for independent providers left their jobs in the course of the year. And while it's really good to see the workforce growing, a lot of this growth was down to international recruitment. So 105,000 people were recruited from overseas in that period, which is 25,000 more than the than the previous year. And it's worth remembering that the rules on care workers bringing dependants with them to the UK changed in the very last month that these statistics cover, and so we're yet to see the impact of that on international recruitment. We should also note that over the last two years, we've seen the number of staff with a British nationality fall by 70% so that gives a bit of a sense of where we were last year, up until up until March. The Workforce Strategy obviously covers the next 15 years, and our latest estimate from our data is that, as well as filling vacancies we have now, we could need an extra 540,000 new posts by 2040 and that's about a 29% increase. Now that's based on the assumption that the workforce grows in proportion to the number of people in the population aged over 65 and if any of that were to change, or we were to change how we delivered social care, of course, that figure would would need to shift. And when we look back over our projection over the last 10 years or so, that's been pretty accurate, other than during covid. So it is a projection, not a prediction, but it has been pretty accurate.

David Pearson 20:54

As well as the capacity challenges that the workforce continues to face, there are three big things driving the need for change. The first is the changing shape of care, changing needs, mean we will increasingly need an integrated workforce with a renewed focus on personalisation, prevention and wellbeing. We'll need new, different roles and skills to meet those changing needs. There is an emphasis across the sector and in the NHS on more care being delivered in the community. There are particular roles we might expect an increase in demand, such as personal assistants and particular geographical areas where the evidence tells us we're going to have greater levels of rising demand, such as coastal and rural areas. There are new innovations such as technology, which also require investment in training. The second driver is the changing shape of work. People have different expectations of work after the covid 19 pandemic. We hear that people want more purpose and flexibility. We need to make the most of the benefits of working in adult social care, so that we make the sector attractive. And the third driver is the changing shape of education. We need to adapt to new trends in education. These include more use of technology and bite sized micro learning, a greater

focus on soft skills like critical thinking, communication and teamwork, and more opportunities for life long learning.

Oonagh Smyth 22:40

So that's why we need a workforce strategy, and in nine months, we've worked with the sector to create one. We started to lay the groundwork in October, November last year, in the initial research and planning phase. As part of that, we worked with the Kings Fund on a piece of research that established what people with a stake in the future of adult social care expect the workforce to look like over the next 15 years. We assembled a steering group consisting of a very wide range of representatives from across the sector, many of whom have come today, along with colleagues from health, from education. And in late November last year, with our steering group in place, we were able to move into the biggest phase of the work so far, which was developing the strategy. And we've had two main work streams, one looking at the case for change, service, assumptions, baselines, and the other looking at data and economics. We created seven expert working groups looking at a number of topics in a bit more depth, to think about the challenges we face, the opportunities and to recommend solutions. Those working groups fell into two kind of categories, one looking at the changing shape of of care, the changing shape of education, and then the other, looking at our supply side, recruitment, retention, workforce. And now we are here with the finalised strategy, and that tiny little box there that says, implement is carrying, doing a lot of heavy lifting, because this is the beginning of the beginning and the beginning of the conversation. We've come a long way from from October, but obviously still a long way to go.

David Pearson 24:38

So these are just some of the many organisations with representatives who have contributed to the development of the strategy, and this is like thanking people after a party you. The danger is I miss some people, so forgive me before I miss off some people. But this has been a huge collaborative effort. We've had input from organisation such as the Care Provider Alliance that represents most employers, from local government and directors of adult social services, people working in care being represented through Unison, as well as professional bodies representing regulated professionals like Social Work England, the Nursing and Midwifery Council, the Royal College of Occupational Therapists, plus the Care Workers Charity. The voice of people who draw on care and support should always be front and centre. So we have worked with organisations who represent them, like Social Care Futures and Think Local Act Personal. The Care Quality Commission has been a participant and supporter in the strategies development and a member of our steering group. They've committed to a number of actions, and we'll talk about some of those later, when we get on to the recommendations and commitments in the strategy. Collaboration with our colleagues in health has been really crucial, as our aim was always for this strategy to sit alongside and complement the NHS long term workforce plan. So we're really pleased to have representatives from NHS England and a number of integrated care boards on our steering group. We've also had input from the education sector through the likes of the Association of Colleges and the Council of Deans of Health. We're so grateful to everyone who's put so much effort into this strategy, which is truly by the sector, for the sector.

Oonagh Smyth 26:37

So sorry. The slides keep popping in and out. There's no surprises. Honestly, we're not trying to do a grand reveal. So now it's time to look at the part of the strategy that you're most interested in, the things

we're recommending and the things that we are committing to. The recommendations and commitments fall into three areas. They are aligned - we tried to align these areas with the NHS long term workforce plan where possible. So they're up on the screen, attract and retain, train and transform. There are more than 70 recommendations and commitments in the strategy, which gives a sense of how holistic it is. And so we're going to share some of the highlights from each of these, and they can only be highlights. But I would encourage you to have a look at the document. It's really important to say that this strategy has never intended to be a shopping list from the sector to government. There are some areas where we can only make progress with input or investment or support from central government, but there's also a really strong commitment from the organisations represented on the steering group, to work together to make change happen, and that's why we have a combination of recommendations and commitments. We completely understand that there is no magic money tree, so we've tried to make recommendations as cost neutral as possible. For example, by ensuring that investment generates savings elsewhere. We have costed and prioritised the big ticket items that would need the most investment as an attempt to add some thinking to a helpful debate. And we are working on the basis that existing government budgets for workforce development would cover the rest. But that makes some assumptions, obviously, and a lot of this was drafted before the recent general election, so those conversations will be really important in terms of next steps.

David Pearson 28:49

So starting with attract and retain, we have to be able to attract and retain in a market where we have already seen 70,000 fewer domestic staff in social care in the last two years. We know from Skills for Care's data that improved pay improves retention, and we know from our sector insight that care providers are struggling to compete in local labor markets. So we are recommending that the government should lead joined up consistent action on pay and terms and conditions over a number of years with local government, employers and unions. This should be aimed at improving base pay terms and conditions and career progressive opportunities. To that end, it was really good to see the commitment to improving care workers pay in the King's speech yesterday.

Oonagh Smyth 29:52

So to support this, we commissioned economic analysts to independently model the various options that we have for pay as well as what the different options would cost and would potentially save. They also estimated the number of people that each option might help us recruit and retain. These options are set out on the slides increasing compliance with the national living wage and paying for travel time, a minimum wage for care workers of the real living wage and one pound and two pound an hour above the national living wage and matching NHS pay bands two and three, including an uplift for staff with more than two years experience. The level of state investment needed for these options ranges from £30 million to £4 billion a year. The modeling has found that all of the options would result in savings elsewhere, and these include savings to the NHS and reduced recruitment costs for providers.

David Pearson 31:05

There are also considerable benefits in terms of the wellbeing of people who draw on care and support, and as a result, there being more people providing care. It is hard to put a price on that, but the modeling has attempted to do that by estimating a cash value for this improved wellbeing. This isn't a saving as such, but it gives a sense of how a number of factors, including the quality of life of those who

are in receipt of services is enhanced as a result of effective social care. The modeling represents a cash value on improved wellbeing, rather than a saving to the service. As you can see here, the modeling estimates the number of people that each option would help us to attract and keep. This ranges from a fairly modest 7,150 extra recruits for enforcing the national living wage to around half a million potential recruits for the most expensive options, including paying care workers at least £2 an hour more than the national living wage.

Oonagh Smyth 32:21

As well as the issue of pay, the strategy recommends other actions around recruitment and retention, and one of these recommendations is a strategic cross government action on a 10 year attraction plan for social care, sponsored by Department for Work and Pensions and The Department of Health and Social Care, but involving a wide range of partners, JobCentre Plus, Department for Leveling Up Housing and Communities, the Department for Education, local government, providers, and we're recommending that this really focuses on new capacity into social care, so a targeted plan to attract younger people, to attract more men who are significantly underrepresented in our in our workforce, and people with new and different skills, technology skills, for example. We need to focus on our younger generation. We have a bulge of 18 year olds that are coming up through the population now that we're not going to see that again this century, and we know that when we speak to younger people, they say, well, I want purpose and I want flexibility and role. Well, we can give you purpose and we can give you flexibility. We're really well placed to attract our younger generations. We know that providers will continue to attract our core demographics, and that's really incredibly important. So sometimes older people, often women, people with a social care qualification, some experience in social care in the past, and there's just not enough of those wonderful people. So we need to keep looking at new demographics as well.

David Pearson 33:53

Of course, there's no point in recruiting more people unless we take the necessary measures to ensure that we retain them for longer. In that sense, we have a leaky bucket. The recommendations include a people promise for social care similar to the one that we have for the NHS. We are also recommending a focus on ethical international recruitment to support the care workers coming from overseas and on whom a sector very much depends at the moment. We work in a caring sector. This is the heart of what we do. We have to make sure that everyone who works in social care feels valued and supported every single day, and that's even more important for our colleagues recruited internationally who might be moving to England with no friends or family. However, we also recognise that we need a plan to reduce reliance on international recruitment by improving domestic recruitment and retention at the same time. We should aspire to have the most inclusive workforce in England, attracting and retaining talent through equal access to career development. Social care is diverse, but it lacks inclusivity, especially in management, where people from minoritised groups are underrepresented and face discrimination and limited development. The Social Care Workforce Race Equality Standards, known as SC-WRES, for short, helps local authorities address race inequality. It does this by collecting data on key indicators and helping them to develop action plans for improvement, promoting race equity, fairness, transparency, morale, care quality and workforce capacity. Its data shows significant racial inequalities. Compared to white staff, staff with a minority ethnic background were half as likely to be appointed from a short list, half as likely to be promoted, one and a half times more likely to be in a disciplinary process

or more likely to experience bullying and abuse. SC-WRES can help to change this. So Skills for Care has committed to fund it for local authorities this financial year, and look at the viability of rolling it out to all employers too. We're recommending that government should mandate and fund the SC-WRES for all local authorities from the next financial year, and that the CQC works towards integrating it into its inspection framework,

Oonagh Smyth 36:47

And we also have commitments from organisations who have supported us to develop the strategy too. The CQC has said that it will encourage recruitment and retention plans in a number of ways, including working with others to set expectations for what good looks like in workforce planning and wellbeing. And they'll also share the recommendations from the workforce strategy with care providers and with registered managers, and continue to use their regulatory powers to take action where a lack of good workforce planning has led to poor outcomes for people.

David Pearson 37:28

We should keep investing consistently in high quality training and clear career pathways to equip social care workers for exceptional care in a changing world. Training and development helps people to do their jobs. It also helps us to keep people, because when we train people, they stay, and the more we train them, the longer they stay. This should include investing in high quality training and development through a three year funding commitment and plan. This should support high quality training across social care, including new skills like digital, data and technology and for changing needs, such as dementia and other mental ill health. Annual funding rounds make it harder for care providers to invest and harder for the learning provider market to respond. But a three year funding commitment would change that. At the same time, we need to make sure that the broader education and skills landscape works for adult social care. Unfortunately, apprenticeships currently don't and there's been a 75% drop in the number of people doing adult social care apprenticeships since 2016. The reasons why apprenticeships aren't currently working for adult social care include low funding, apprenticeships being too similar to the diploma, and employers being concerned about the amount of study time needed and lack of funding for backfill. So we're recommending that the Department of Education should commission overhaul of social care apprenticeships, and we are pleased to see the changes from the King's speech yesterday, which should allow more flexibility for employers.

Oonagh Smyth 39:26

And another recommendation in this section is the development of a national framework for career progression for social workers, occupational therapists and registered nurses working in social care, and that includes opportunities for advanced practice roles and specialisations. These regulated professionals are a small but mighty part of our adult social care workforce, and they are only going to get more important in the future as we have more people who need assessments and support, more clinical needs, more of a focus on prevention, so it's incredibly important to invest in their development and to help them progress.

David Pearson 40:09

Some of you might have heard of the review into leadership across health and social care, the review carried out by Sir Gordon Messenger. This really highlighted the importance of leadership. NHS

England have developed a road map for the implementation of the Messenger review, and the steering group is recommending that DHSC should commission the creation of a leadership development roadmap for social care managers. This would align all the leaves of funding, commissioning and support and outline clear expectations for leaders and managers. We have around 25,000 registered managers, and they're at the heart of social care. We see that in all the evidence, and we see it with our own eyes every day. We recommend in the strategy that we also have a particular focus on new managers with a supported year in employment program, similar to the program we have for new social workers. We should also look at potential requirements for managers to have higher level qualifications. This includes ensuring that registered managers have at least a foundation degree with opportunities to undertake full undergraduate or master's degrees.

Oonagh Smyth 41:32

And then finally, by way of a commitment, Skills for Care has committed to streamline the mandatory training requirements for people working in social care, and the CQC will share appropriate guidance.

David Pearson 41:51

The final area of focus is transformation. We should introduce a legislative basis for a Workforce Strategy. This will be similar to the Health and Care Act requirement on the Secretary of State to publish a report at least every five years describing the system in place for assessing and meeting the workforce needs of the health service in England. We do not see this as a nice to have. It is fundamental. The NHS long term workforce plan makes assumptions about the level of staffing in social care. We cannot just cross our fingers and hope that this happens. We have to plan for it. Importantly, it will also need a central body to oversee implementation, with a legislative mandate to not only develop a unified strategy upon direction by government, but also crucially, drive its implementation across the diverse landscape. This expert body would have the responsibility in social care to implement and further review the adult social care workforce strategy aligned with government priorities. It would be instrumental in bringing focus, expertise, trust, agility, credibility and neutrality. It would ensure that the strategy translates into tangible action, tackling the critical issues facing the social care workforce. Skills for Care currently plays this role with a close strategic relationship with the Department of Health and Social Care. Many actions in this strategy are for Skills for Care given that role. However, this depends on Skills for Care having a role as a system leader for workforce development. This central coordination and leadership is much needed to bring coherence across so many different bodies with an impact on the workforce.

Oonagh Smyth 43:54

And another one of our recommendations in this section is for integrated care systems. We are recommending that integrated care systems develop workforce strategies that really promote one workforce approach, analysing demographics and future needs, analysing local labor markets, aligning terms and conditions where possible, and leading the recruitment of new demographics. We believe that ICSs should take every opportunity to increase the direct contact between our health and social care workforce with joint training, placements, secondments,

David Pearson 44:31

And one commitment in this area focuses on the question of whether the adult social care workforce should be registered, apart from those that are already registered. There was a lot of debate about this as we were developing the strategy, and there are three main views from different steering group members. The first was that registration is key to people recognising the sector and the workforce as the professionals that they are. And that it's important for public safety and the development of people working in social care. The second view is that there's not enough evidence to show the impact of registration on the workforce in other countries, and given the scale of the workforce, the cost benefit argument isn't clear enough yet. And the third view was that registration would undermine steps towards personalisation, and detract from the person centered approach that's essentially in social care. In other words, it will prioritise compliance over individualised support. So we need to do more work. To that end, the Workforce Strategy delivery board, which will replace the steering group, will gather evidence on the impacts and potential models of a registration scheme for the adult social care workforce.

Oonagh Smyth 45:56

So what happens next? So as we mentioned earlier, the launch of the workforce strategy is really just the beginning, and what happens next is really depending on the phasing, on the really harnessing the energy in this room. In social care, we know that there is no one body that owns all of the levers We need to pull to make change happen, coalescing around a shared vision and a strategy then becomes even more important, and we all have a role to play. Government, regulators, providers, people drawing on care and support, and all of us who care about really good quality social care. We have firm commitments from the steering group to evolve into a delivery board, moving from the development of the strategy into implementation. And organisations with system leadership roles and levers to pull are ready to play their part, and want to do that in partnership with each other and in partnership with government. Skills for Care can support the implementation of the strategy with its own implementation unit, and the work of that unit could include building on the first set of modeling, further developing measures, tracking success, tracking the implementation of the work, and making sure that the energy stays behind the implementation of the strategy. This soon after a general election, we have a lot of unknowns, as you'd expect, and it means that there's a lot of questions that we still need to ask, a lot of conversations we still need to have, people new in post. And as you've heard, we've got a lot of the commitments from, for example, the CQC agreeing to support the strategy by using its role in remit to influence key changes. So we need to carry on with the things that we can do while having the conversations that we need to be having.

David Pearson 47:52

But by far the most powerful action will be for us all to work with government in partnership to make ambitions from this strategy, prioritise them and implement them. And I'm encouraged by positive discussions with the new minister and Department of Health officials this week, and we look forward to continuing that conversation. The bold act would lead to long, lasting transformation in the adult social care sector, the likes of which we have been talking about for a long time, many years. The adult social care sector has galvanized around this strategy that presents an opportunity for a powerful alliance with government, if we can all work together in partnership to the deliver the strategy and transform social care. No one body, no one leader, has all the levers and all the powers to make this happen. We do

collectively. By working together, we can build a future where social care offers fulfilling careers, attracts talented individuals and empowers its workforce to deliver exceptional care.

Oonagh Smyth 49:06

So that's a summary of what's in the historic new workforce strategy for adult social care. But we really have only scratched the surface this morning, so obviously you're all going to go, if you haven't already, and read the whole strategy. You can find the QR code on the screen so scan that, or you can go straight to [ASCWorkforce Strategy.co.uk](https://ascworkforcestrategy.co.uk) and spend your time delving into the detail. Thank you, everyone. We'll leave that up for a little second for people to scan.

David Pearson 49:50

Okay, we're giving you a second. I now want to introduce Jane Townsend. Jane is currently the chair of the Care Provider Alliance, which brings together the 10 main national associations representing care providers in England. Jane was one of the representatives of the Care Provider Alliance on the steering group, and she's also the Chief Executive Officer of the Home Care Association. And it says here, please welcome Jane to the stage. She's already here, but can you welcome her?

Jane Townsend 50:27

Thank you very much, and thank you very much, Oonagh and David, for your fantastic leadership. Really exceptional piece of work that's been produced in a relatively short amount of time. It's such an honor for me to be here today on behalf of the Care Provider Alliance. We are a coalition of the 10 national care associations that represent care and support providers. Between us, we reach over 95% of care and support providers in England who are the employers of our 1.6 million strong workforce. Our workforce is full of people with huge hearts, deep compassion and also a strong desire to improve lives. That's why everyone gets up in the morning. Someone described care workers once as the beating heart of the nation, and I think that's so true. One said to me recently, helping others is the best feeling in the world. And they also observed that their connections with the people that they support help them too, and that reciprocity is so key. These are the kinds of people and the kind of values that we want and need in social care, and this entire strategy is geared to help find, keep and develop these people. From our perspective, this Workforce Strategy represents a pivotal moment for adult social Care. We're speaking with a unified voice across the sector about the importance of our workforce and also the value of care in our communities. Caring is a basic human need. A strategy is however, as Oonagh and David have made clear just the beginning. Achieving this vision requires the government's unwavering commitment, efficient planning and implementation and continuous collaboration across the sector, which I know we're all very up for continuing. Employers in social care are obviously crucial to delivering this strategy, But they cannot do this alone. Councils and the NHS commission and purchase much of social care. On average, staff costs make up 60 to 70% of the total costs of delivering care, so the amount that care providers can spend on wages and training depends on the fee rates set by public bodies whose budgets are under severe pressure. Many are having to ration care and drive down fee rates. Zero hour commissioning at low fee rates leads directly to zero hour employment at low wage rates. Our research in home care, for example, and other parts of the sector have found the same. Only 5% of public bodies are currently able to pay enough for compliance with the national minimum wage, never mind considering training costs on top. We very much welcome the Employment Rights Bill announced yesterday in the King's Speech. For years, all of us in care provider representative bodies

have campaigned for improved pay and conditions of employment for the care workforce, as has been pointed out, is key to recruitment and retention. We cannot though improve pay and working conditions simply by announcing a ban on zero hour contracts and a move to fair pay without backing it up. In fact, doing so in isolation risks unintended consequences. Finding solutions requires collective responsibility. Central Government must enable economic growth and provide ring fenced investment in social care. Councils and the NHS must offer fair fee rates covering the full cost of quality care. Regulators must drive improvements, enforce compliance and prioritise ethical providers, and providers must invest in the workforce so they can improve lives. That's why everyone gets out of bed every day. So we look forward with optimism as we take the first steps on this journey working together to build the care workforce we need now and in the future. Thank you very much.

David Pearson 55:03

So Jane, we know that finding keeping people with the right values is an issue for all the social Care Provider Alliance members. Could you just tell us how you think the strategy will help with this? And I'm sorry that you've gone off the stage, but if you wouldn't mind.

Jane Townsend 55:20

I mean, literally, every element of the strategy is geared to doing that, so it's quite hard to pick out one thing. We know, obviously pay. It's not just headline pay. It's security of income is really key. But that on its own isn't enough. It's that sense of belonging, of being recognised. And sometimes it's the really small things, you know, when the late Queen said in her Christmas speech and she mentioned social care workers and commended them for their contribution, it gave everyone such a lift. And sometimes it's the things that don't cost anything that make the biggest difference. So I think, you know, it's about investment in pay, but that training development, but just the day to day supervision and support, because often care workers are going into situations that can be very challenging, and in home care, they're often on their own as well, and having that support network is absolutely critical for them to feel professionally safe, and that also includes the network locally with professional colleagues, so having district nurses, social workers, GPs, pharmacists that they can draw on, and keeping those communication links and recognising them as a key part of the system. That's what will really help.

David Pearson 56:46

That's brilliant. Thank you so much. Thank you.

Oonagh Smyth 56:53

So when we were thinking about this launch event, we knew that would only have the impact that we wanted if the people working in adult social care were key partners, so it's one of the reasons that we did a lot of consultation with people in different services and different settings. And I'm really pleased to announce that we are joined by four care workers who are people who work in direct care, who represent key parts of the social care sector. So can we please welcome them to the stage? Okay, so let me just do some introductions. So we're joined by Dorcas, who works as a health care assistant for West Gate health care, and is also a social work student at University of East London. We have Chris Hamlet a personal assistant. Debbie Dry is the registered manager at Windsor lodge care home, and Angela Farrow is the general manager and CQC registered manager for Home Instead domiciliary group, and the chair of the Leicestershire and Rutland registered manager support group. So I've got a

few questions that I'll just ask our panel. So if we start with you, Dorcas, so can you tell us just a little bit about why you love your job and what challenges you face?

Dorcas 58:26

Oh, thank you. Thank you for that question. My name is Dorcas, and I work with Westgate healthcare, and I do elderly and people living with dementia, and that's my passion. And working with people living with dementia and the elderly is not and is a thing, because there's no day that is the same. Everything keeps changing according to their internal state of mind and what their thoughts and feelings are. So I enjoy working with them because of the diverse populations that are in, and it provides me with a lot of skills, like I learn a lot, I personally and professionally, and that level of skill is also transferable. That is very important to me, and it keeps on improving. Like, say that the communication skills, the critical thinking skills, they're reflective. Of course, when you do work, you go home, but you still have to reflect and learn more of what you've gone through that day. So working with people, you get a lot of skills, and it allows you to understand human complexities and their internal states of mind and the human nature, it gives you an overall outlook on life. So I like that, and again, I meet different challenges. Doing care has physical and emotional attachment. Physical you get so tired, although you use aids to move people and handle them, but they still get physical fatigue, and then the emotional fatigue is there as well, because you deal with internal states of mind, like fear, anxiety. So you the carer, you're always there, present with the people, and whatever happens to them you see it face to face, and it takes an emotional toll on you sometimes. I just want to give you an example of what happened and could not get off my mind. There is a resident that had three types of cancer. He called for assistance, so I went in, good enough, he knew my name, and he said, Talk us. Can you please stay around for at least five minutes? Five to 10 minutes, because I don't want to die alone. You understand? So that is the emotional beat attached to it. So that is a challenge. And then we move on to the low pay. When you look at what the care run does and what you actually paid, you have to put in so many hours to catch up with the cost of living, which is not fair in this fair Britain, I think.

Oonagh Smyth 1:01:37

Thank you, Dorcas, and good luck in your studies, year two of your social work qualification, I think,

Dorcas 1:01:44

Yeah interesting social work.

Oonagh Smyth 1:01:45

Thank you Dorcas. And Chris, so we have about 70,000 personal assistants in England. Can you tell us how you became a personal assistant, and what more support you think you need?

Chris 1:02:00

Yeah, so I became a personal assistant about 20 years ago. I was attending a Duke of Edinburgh session and I became friends with a lad, a similar age to myself. And after a couple of weeks, his mum approached me and asked, would I become his personal assistant? So I think it shows that you can recruit people in quite sort of informal ways, which I think is quite unique. I don't think I would have been around 16. I don't think I would have applied for a role in care at the time, say, a care agency or but, you know, sort of 20 years on, it isn't my full time job anymore, but I still do work as a personal

assistant with that person. So I think it shows what kind of close relationship you can end up developing. In terms of supporting people into those type of roles. I think pay and conditions would be the most obvious. But aside from that, I think particularly for people who work as personal assistants, the reason people often move into it is because the relationship they build with the person they're going to care for who's often their employer, which is a quite unique relationship. So I think it's really important that we support people who are individual employers. Probably over the last 10/15, years, it's become a lot more restrictive on what you can use your personal budget for. So I think, you know, reversing some of that would allow people to be a lot more creative and innovative with the budgets. I think finally, another point would be that I think Dorcas has said this, and this has been the same for me, as you work as a personal assistant, progression means moving out of the role. So I'm interested social work. Dorcas is doing the same. There is an opportunity to become a specialist personal assistant. I think that devalues the role because actually it's a really skilled job and a really difficult job, so the fact that you've got sort of move out of it to progress, it's negative as well.

Oonagh Smyth 1:03:54

Thank you, Chris and over to you. Deborah, can you give us a sense of what your day looks like as a registered manager?

Deborah 1:04:01

Well, it's not attending a conference like this. Yeah, it's very much varied. I mean, I can be engaging with different stakeholders. I could be monitoring the quality of the care and gathering evidence about the quality of care, networking with health and social care colleagues as well. That is occurring much more. There's much more collaboration happening locally within the integrated care systems. But also, I'm an employer, there is a business to run, so I have to ensure that I review our costs and our resources. I firmly believe that overall, my every day is to support. I believe in great staff provide great care, and so that has to be the main focus, about valuing individuals. Cost and pay, yes, but actually, I think that's a fraction of it. I think it's about absolutely valuing and getting the right people with those right values as well. And as well as training, it's also about developing those people. Training is part of it, but actually rewarding them and giving them those opportunities as well. Thank you, Deborah. And then really important to have a workforce strategy. So finally, Angela, can you give us a sense of what attracted you to the to the job, and a sense of what your team does.

Angela 1:05:45

Sure, yeah, I'm passionate about supporting people to be able to live well at home, supporting their independence, to manage their care and health needs in the safety of their own home. And our team do that by, Home Instead has always, it's foundation is relationship led care, so that obviously is our basis. And we have a lot of workers who absolutely enjoy doing that role, and the relationships they build with our clients and there is an element of drinking tea and eating cake involved in that, and they get to do lovely outings, helping our people to access the community. But more and more we're finding that we do have some of our very skilled workers who want to push further in their professionalisation of their role. And of course, pay is always a part of it, but I think one of the things we're struggling with is the lack of professionalisation in the role. And our people do want professional recognition. Any kind of being valued is terrific, and we're very fortunate at Home Instead, because very many of our clients and their families are moved to write into us and and give their appreciation and give voice to the difference

that our staff make in the lives of them and the clients. To be fair, because it does not just the the individual themselves, but their entire family benefits. But as well as that, that feeling of being valued, they are looking for professional recognition. And I think that aspect of the strategy excites me, and the move towards delegated health care excites me, because not all of our people want career progression to be into management. A lot of them do want more clinical recognition in there, and they're very able to help with these things. So I think seeing that delegation of healthcare tasks being incorporated into people's homes is significant.

Oonagh Smyth 1:07:52

Brilliant. Thank you so much, Angela, can we just give a round of applause?

David Pearson 1:08:04

So wasn't that brilliant, very good. So thank you, Oonagh and our final speaker today, but by no means, least, of course, is Melanie Williams. Melanie is the corporate director of adult social care and health at Nottinghamshire County Council, a role I occupied before her, but she is this year, the President of the Association of Directors of Adult Social Services. So Melanie, welcome.

1:08:35

So I think we've heard today, really why this is important, so my colleagues at Nottinghamshire in the introductory video and that panel were just incredible. Social care is a social justice issue, and our workforce enables people to have a good life, and to do so in a way that makes them feel that it's a good life, safe and secure. So we're there for people constantly in incredibly diverse ways, through 1,000s of relationships every day, and often in contexts that challenge people to have a good life. For our workforce, it involves working in settings that are so diverse, so people live together or they live alone. They may be in institutions where they're detained against their will, or where they're employed by people themselves. So often, we're advocating for basic human rights. We're opposing unfair treatment at times. On most occasions, it's an absolute joy and pleasure to work in adult social care. At times, it takes huge resilience and strength. So this is why recognising, valuing, rewarding, developing and investing in our people is so central. If you want to sustain this amazing contribution to community and individuals lives, this strategy is crucial to that. So my ambition is it's a tool for how we reframe adult social care. So I want us to be able to have national recognition for a sector that employs skilled and committed people. On the leadership and collaboration to get to this point is noteworthy, and I would like to see that collaboration continue, that we can recruit, develop, invest in our people in a deliberate way that has longevity. National support is crucial to this, and with that support, I'm confident we can make that happen. So this strategy recognises the different contributions made by different people. So we have a huge variety of people, from social workers, occupational therapists, people who support them, people who work directly with people, and others who enable that care to happen that involves commissioners, leaders, managers, administrators, domestics and, of course, directors of adult social services. So we've got some specific recommendations to support people, and that's going to be crucial. So local authorities, we have many roles. We're employers, we're commissioners, we're market shapers, we're place leaders and economic developers, and our ability to deliver on those roles is absolutely enhanced by a national workforce strategy. We can't tackle some of these things alone in our places. There's just too much to do. So it's obvious that the investment in our workforce is an investment in people, and this will enable us to meet care needs effectively, but it's so much more than

that. So investing in our care workforce is about numerous social, economical and environmental benefits, so not least raising pay in areas of deprivation and tackling skills deficits in areas where care work is needed most. We care about our people and we want the best for them. So it's really important that when we consider wellbeing, we recognise that our workforce faces many challenges. So it's really important that we have that coalition of our employers and organisations that will tackle workplace based harassment and violence, which is sadly a reality for many colleagues. We want to see genuine action for improving equality, diversity, inclusion, and to recognise that a large proportion of our workforce are women, many with caring responsibilities. One of our strengths is that we employ so many people with protected characteristics. It's quite impressive compared to other sectors. So therefore, the commitment to race equality and advancing equality is so important to us. Women undertake the majority of work, both paid and unpaid, in adult social care. An expanded and better paid care workforce will see it help us reduce gender inequality. So ADASS has long called for a fully funded workforce plan. When we asked directors what's most important to you in the emerging recommendations, they said that pay, improving terms and conditions and well being were most important. So the sense of optimism being the brief some action today that I'm really pleased support the strategy launch. Thank you.

David Pearson 1:12:37

Thank you very much. And that leaves us in no doubt about the priority of this work for 153 directors of adult social services across this country, so thank you so much for that.

Oonagh Smyth 1:12:57

That brings us to the end of the session, we've tried to balance in the strategy, a sense of urgency and hope. And I really get that in the atmosphere today. I personally want to thank everybody who supported the process, all of our partners, anybody that's engaged my own team in Skills for Care, who have been excellent, and obviously my co chair, David, we've become quite the double act. So thank you everybody for coming. I'm going to allow David just to close the session, but thank you.

David Pearson 1:13:32

So thank you, Oonagh. When I reflect on the many things that have happened in adult social care and health over the last two decades, this promises to be the most significant, and the resolution, the determination, the commitment to work across the sector, with the diversity that involves, has been crucial to our success in delivering this strategy. We will need that in greater volumes over the next period, in order to translate something that I believe is a fantastic aspiration, into something that really translates into something that makes a real difference to social care in this country. Thank you.

Oonagh Smyth 1:14:18

Thank you, everyone. So for people in the room, there's loads of time for networking and refreshments outside, and for anybody joining us online, thank you, and I'm sorry we ran over, but have a lovely day.