

# Planning and preparing



## Overview of actions

This section sets the foundations for meaningful provider engagement – by building a clear case for change, defining the objectives, assessing risks and planning the order of activities.

### Identifying the case for change

Adult social care needed a dedicated, adult social care provider led approach to address persistent workforce, perception and capability challenges that were not being resolved through broader ‘health combined’ planning.

- **Improving visibility and understanding in FE** – Addressing outdated tutor knowledge and the limited presence of social care in study programmes so young people see accurate, realistic career opportunities.
- **Strengthening long-term interest and retention** – Tackling misconceptions about the work, improving awareness of available roles, and enhancing early employment support so learners and staff remain engaged.

**“Health gets quite a lot of the focus, and often social care is seen as the poor cousin to healthcare. We were really keen to split health and social care so we could shift and focus on social care. We appreciate the crossover, but we wanted social care to have that singularity, and as an LSIP I realised we had much more work to do.”**

**Camilla Maurice**, LSIP Project Manager, Kent Invicta Chamber of Commerce

# Setting objectives and benefits

KICC's objectives centred on rebalancing the system, so adult social care providers drive the agenda, learners gain meaningful insights, and colleges deliver provision aligned with real job expectations.

- **Adult social care provider insights guided strategic decisions** – This meant that actions reflected genuine workforce realities, rather than assumptions or current learning provision. For example, some learning provision had been shaped by assumptions about what social care roles involve – such as focusing predominantly on basic personal care tasks – even though providers reported a stronger need for digital capability, communication skills, and confidence supporting people with complex needs.
- **Improving education-employment alignment** – Placements, curriculum involvement and tutor CPD were strengthened. This helped to ensure learners enter the sector with relevant expectations, skills and awareness of varied progression routes.
- **Creating meaningful learner encounters** – Immersive events showcased real equipment, lived experience and provider insight, helping shift perceptions and dispel outdated views about social care roles and responsibilities.
- **Following through on feedback** – Showing providers that their feedback was acted on, helped to encourage continued involvement and build trust in the LSIP process.

# Identifying and managing risks

Risks were addressed early to prevent provider disengagement and misdirected investment.

- **Keeping providers engaged** – Providers needed to see tangible outcomes from their contributions. Communicating how their input influenced decisions helped sustain momentum.
- **Co-designing capital or specialist projects** – Past experience showed that facilities or qualifications developed without provider involvement risk being underused; future investments were therefore planned collaboratively from the start.
- **Engaging hard to reach audiences appropriately** – Specialist groups such as care experienced young people required expert involvement to design accessible, sensitive and appropriately supported engagement.



# Developing a realistic timeframe

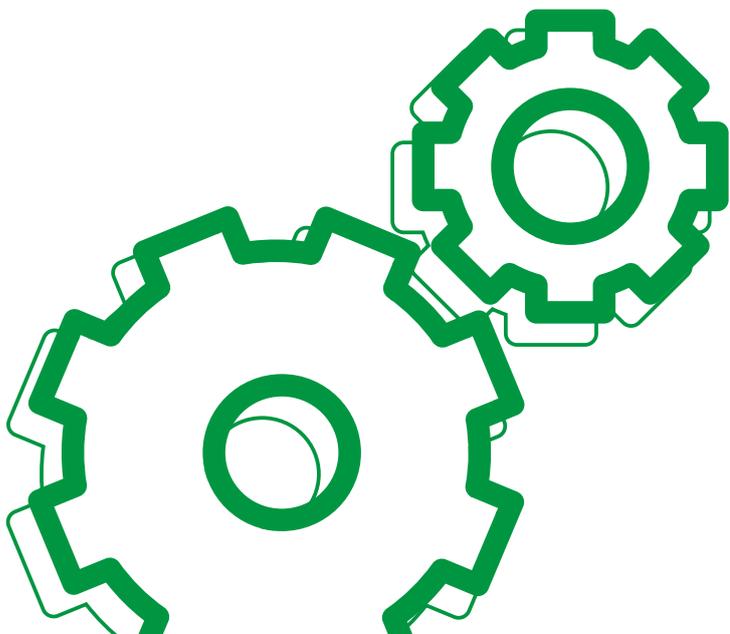
Timelines were designed to respect provider capacity while meeting national expectations and maintaining consistent progress.

- **Carefully paced evidence collection** – Evidence collection took place outside peak pressure periods, with synthesis and validation carefully timed to maintain momentum without overloading providers or LSIP partners.
- **Conference alignment** – Major events were held within a six month planning cycle, enabling deeper collaboration across sectors and building anticipation for recurring annual gatherings.
- **Roundtable rhythm** – Holding structured roundtables at strategic intervals helped maintain up-to-date insight and supported reporting cycles without duplicating effort or information.
- **Blended evidence sources** – Telemarketing, surveys and network engagement complemented events, giving a giving a complete yet manageable evidence base for LSIP development.

# Engaging the right people

Engagement focused on people with direct responsibility for workforce development, while ensuring provider insight remained genuine and unbiased.

- **Targeting practitioners and leaders** – Registered managers, HR leads and learning and development professionals provided detailed, practical understanding of workforce issues, making their input essential for real-life insights.
- **Adult social care provider only discovery sessions** – Early engagement excluded FE providers. This allowed providers to be open and candid, without external influence or pressure.
- **Using trusted communication channels** – WhatsApp groups, newsletters and familiar networks ensured messages landed quickly and reliably, reaching providers who may not respond to traditional engagement methods.
- **Focusing on under represented groups** – Plans recognised the need to extend engagement to overlooked groups such as personal assistants and regulated professionals.





## Key decisions

- Create a standalone social care profile to ensure the sector's specific workforce needs are visible and not overshadowed by health.
- Establish a Skills Advisory Panel to provide strategic oversight while keeping provider-focused forums separate and practical.
- Begin with provider-only discovery sessions to capture unfiltered insight and shape priorities based directly on lived experience.

## Key learning

Key lessons highlighted the value of genuine collaboration, in-person engagement and disciplined planning.

- **Understand that providers are motivated to contribute beyond their own organisation** – Experienced leaders often feel a moral responsibility to 'give something back,' which LSIPs can harness through purposeful, well-structured involvement.
- **Co-design with providers** – Initiatives developed with providers were more relevant, accessible and impactful, avoiding pitfalls seen when sector expertise was not included early in the planning.
- **In person engagement builds trust** – Face-to-face participation deepened relationships, increased honesty and reinforced confidence in LSIP activity.
- **Explicitly connect input to outcomes** – Providers remained invested when shown direct links between their feedback and resulting actions or opportunities.
- **Quality over quantity in intelligence** – Focused, well curated insight was more actionable, helping to keep priorities achievable and clearly defined.

