ASCK-WELL: A Holistic Approach to Enhancing Work Quality in Long-Term Care Professionals

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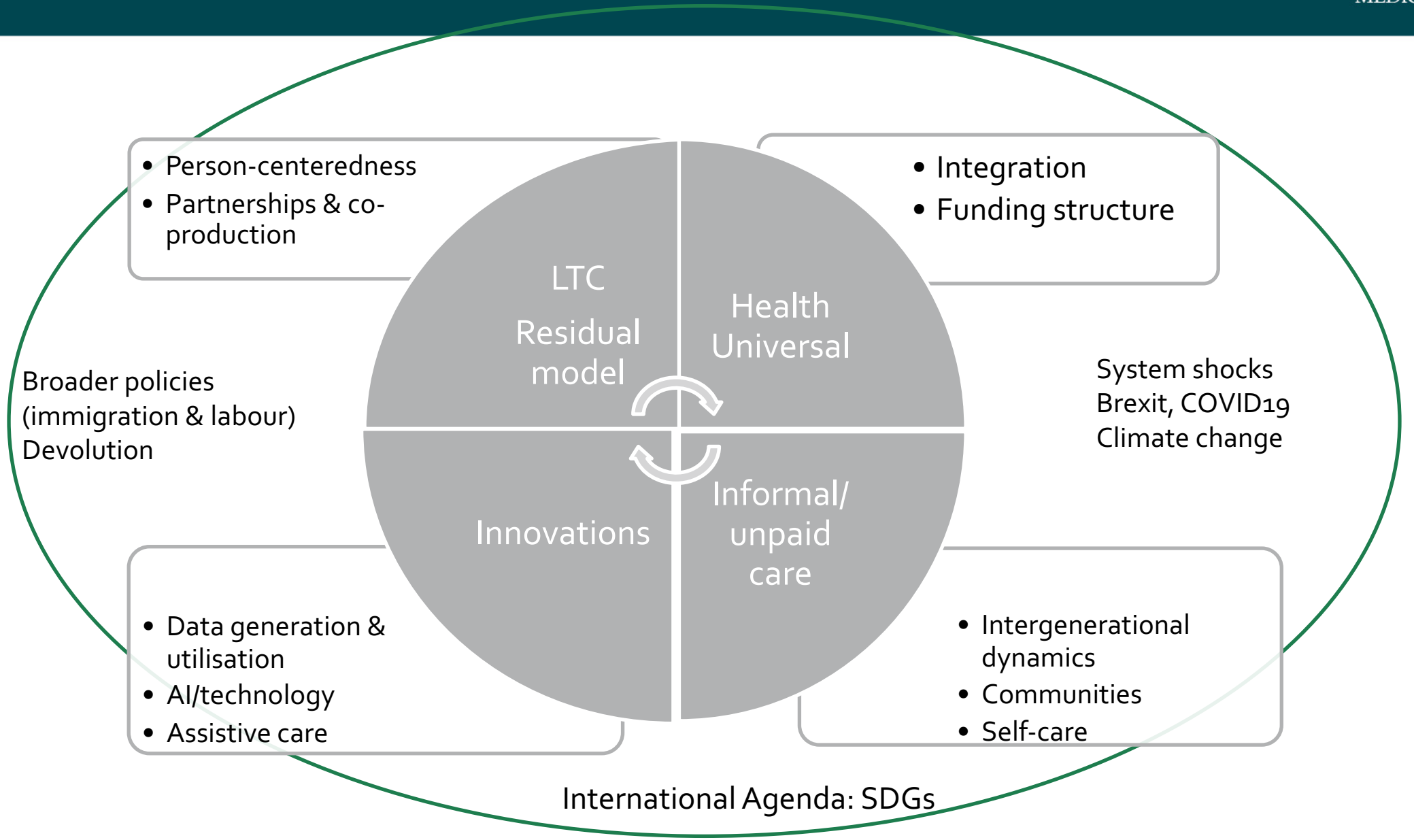
Social Care Policies in the UK



The UK social care workforce

In adult social care in 2022/23 there were

an estimated
1.635m filled posts

equivalent to an estimated
1.52m people
working in these posts

working for
18,000 organisations

at
39,000 establishments

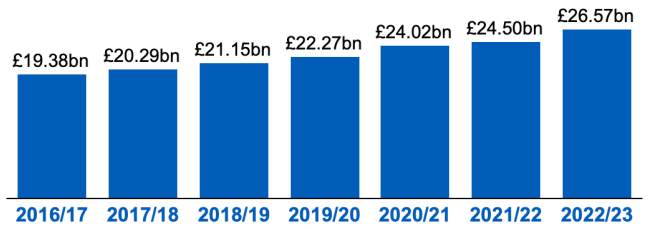
and there were
69,000 individuals employing their own staff
using direct payments

Economic contribution

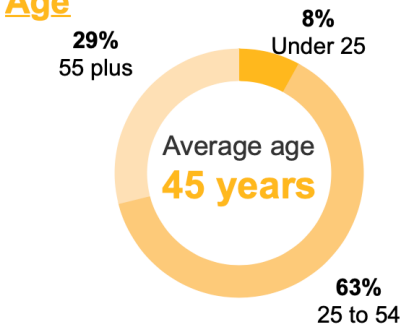
The economic contribution of adult social care to the economy in England in 2022/23 was

£55.7 billion

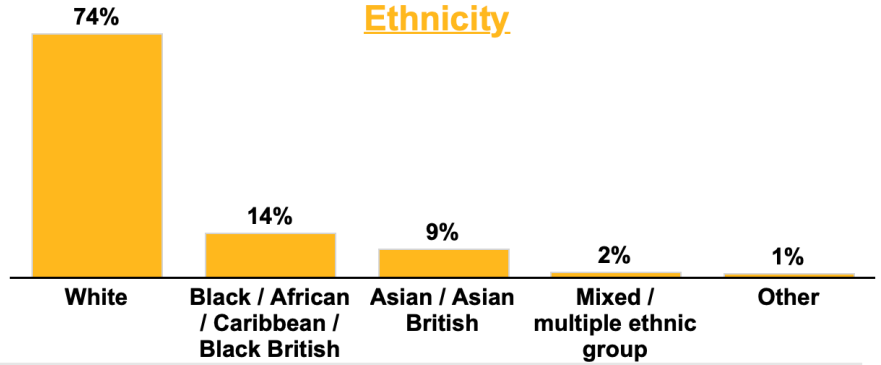
Wage bill trend



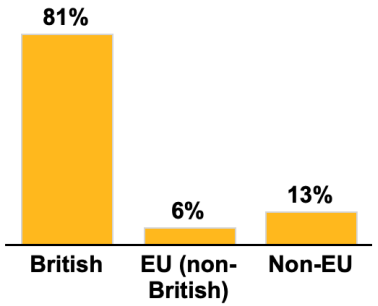
Age



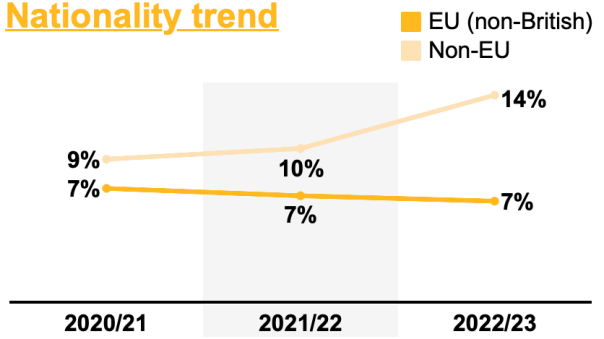
Ethnicity



Nationality



Nationality trend



Trends include local authority and independent sectors only

Gender

81%
of the workforce were **female**

19%
of the workforce were **male**

Motivations to join the sector

Working conditions

Wellbeing at work

Task & role expansion

Care quality

Image source: Skills for Care (2023)

Developing a validated scale for Adult Social Care worK-related quality of life (ASCK-WELL)

Shereen Hussein, Sarah Smith, Mirza Lalani,
Karolina Gerlich, Nadra Ahmed, Fiona Lerigo, John Correa

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NIHR | National Institute for Health and Care Research

A collaboration between:
London School of Hygiene & Tropical Medicine
The Care Workers Charity,
& The National Care Association

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NATIONAL CAREassociation MERGED WITH RNHA
The natural choice for all social care SME providers

CWC the care workers' charity

ASCK-WELL Study- Research Team

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The views expressed in this presentation are views expressed are of the ASCK-WELL team members and are not necessarily those of the NIHR or the Department of Health and Social Care.

Why Care Workers' Wellbeing is Important

- Recruitment & retention
- Attracting talents
- Productivity
- Quality of care & users' satisfaction

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ASK-WELL Advisory Group & Project Team Members

People with lived experience

- Lynne Linehan
- Kinga Milankovics
- Brian Grover

Funder (NIHR- RfSC)

NIHR | National Institute for Health and Care Research

International research

UNIVERSITY OF JYVÄSKYLÄ

Social Care and Relevant Stakeholders

UNISON

skillsforcare

RUNNYMEDE

Local Government Association

Department of Health & Social Care

CareQuality Commission

To be Invited

- 2 care workers
- IMPACT Centre

Research Team

CWC the care workers' charity

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NATIONAL CAREassociation MERGED WITH RNHA

The natural choice for all social care SME providers

Advisory Group Terms of Reference

Objectives:

- To provide advice to the project team on all appropriate aspects of the project
- To consider the progress of the project and advise on new information of relevance to the research question
- To provide expert input and guidance to support the project team.

Engagement:

- Provide feedback on updates and outputs from the researchers
- Advise on methodological / analytical challenges and on the interpretation of results
- Advise on risks and opportunities
- Identify opportunities for knowledge mobilisation and support knowledge mobilisation activities.

Meetings:

- We plan to meet four times over the course of the project (March 24 – March 26)
- The first meeting is planned around September 2024

ASCK-WELL Aims and Methods

AIMS

- RO1: Finalise a conceptual framework to describe care work-related quality of life (CWRQoL)
- RO2: Develop questionnaire items to reflect every component of the final conceptual framework
- RO3: Establish the extent to which the new instrument is psychometrically (scientifically) robust
- RO4: Develop a practical implementation plan to improve the utility and uptake of the new instrument

METHODS

- A mixed-method design
- Qualitative group and cognitive interviews to finalise the conceptual framework, questionnaire wording, and structure.
- Both modern Rasch-based and classical psychometric methods
- A work-strand of engagement with regular communications and three roundtable discussions to co- develop an impact logic model (to utilise the tool in practice)

Previous work: Initial conceptual framework

Financial Wellbeing	2 sub-domains: 1 -Job security; 2 - Having enough money to meet needs
Mental Wellbeing	3 sub-domains (6 items) : 1- Burnout/exhaustion (3 items); 2- Satisfaction/motivations (2 items); 3- Impact of clients' loss (1 item)
Physical Wellbeing	4 sub-domains: Physical injuries; Adequate equipment to do work; Physical health (aches & pains); Impact on health behaviour (sleep, diet)
Organisational Features	5 sub-domains (11 items): 1- Sufficient staffing (1 item); 2- Management & supervision (3 items); 3- Working environment (2 items); 4- Training & Development (4 items); 5 – Pay & Benefits (1 item)
Nature of care work	4 sub-domains (16 items): 1- Time (4 items); 2- Relations (5 items); 3- Tasks & Responsibilities (5 items); 4- Care client's needs (2 items)
Recognition of Care Work	2 sub-domains (5 items): 1- Feeling valued and respected by (4 items); 2- Professional identity
Work-life spill-over	3 sub-domains: 1- Work limits out of work activities; 2- Positive mood from work improves personal life; 3- Negative work-related thoughts stays out of work

Societal recognition of care work

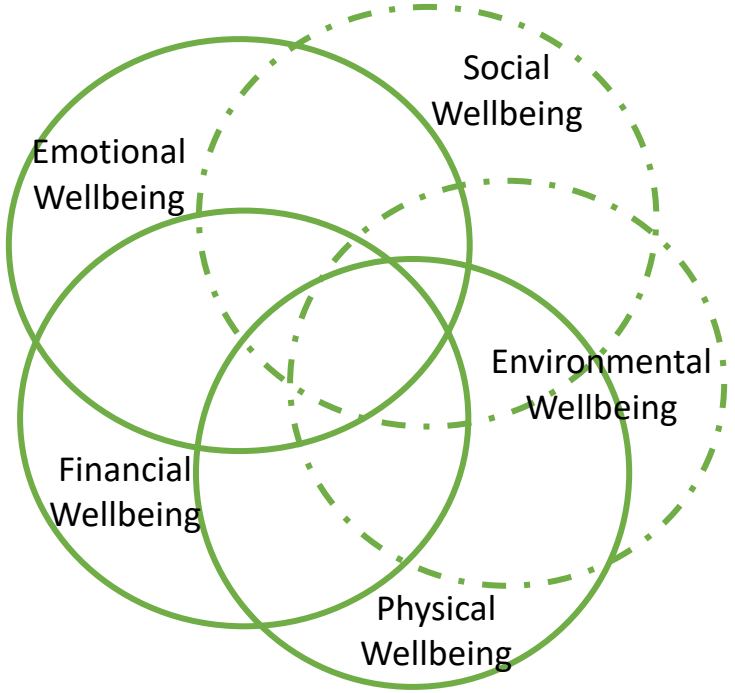
- Professional identity
- Valued

Care Organisation Characteristics

- Staffing
- Management & Supervision
- Environment
- Training & Development
- Pay & Benefits

Nature of Care Work

- Time
- Relations
- Tasks
- Clients' needs

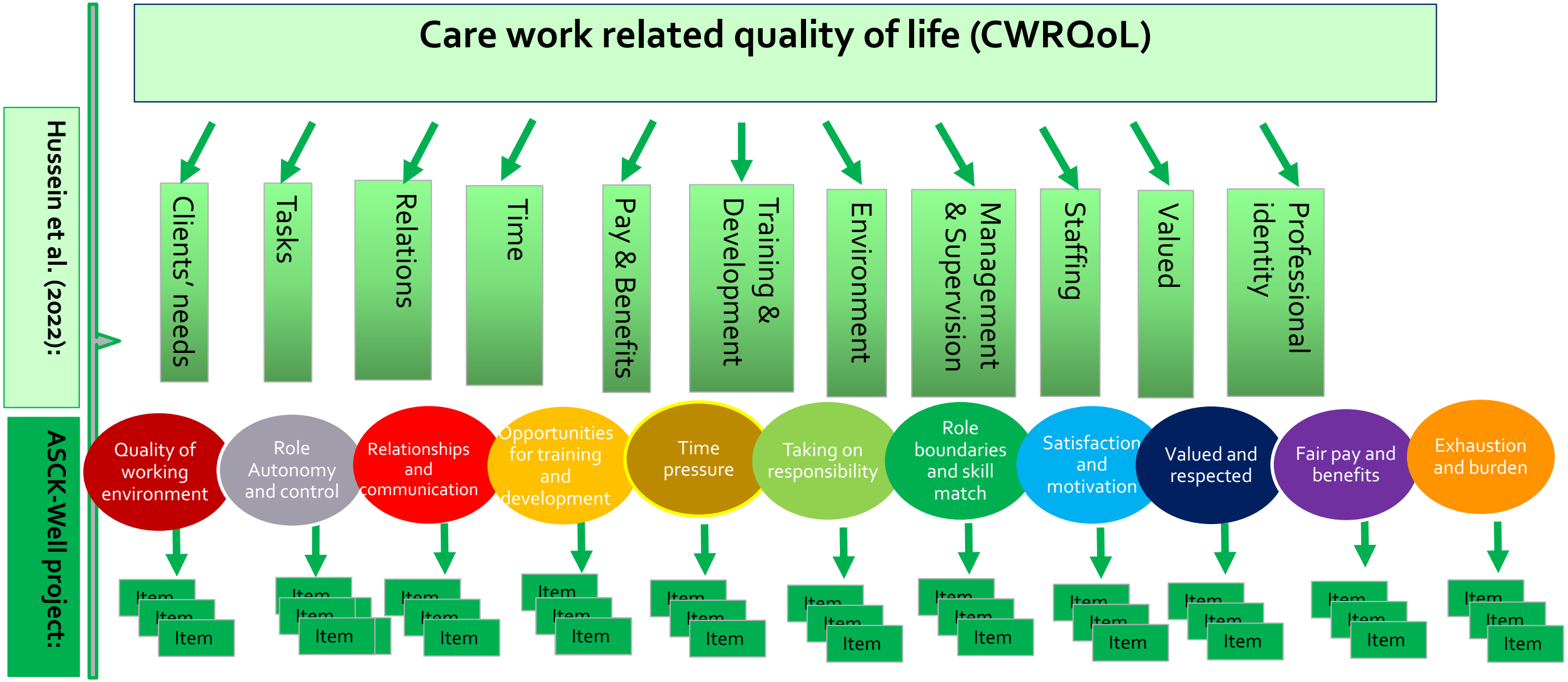


Spill over

Wellbeing in life beyond care work

Source: Hussein et al. (2022)

Where are we now?
Finalising conceptual framework and developing items



Qualitative phase

- Refining of conceptual framework to ensure content validity of instrument
  - Exploring already identified domains in more detail
  - 4-5 group interviews
  - Identifying and addressing any gaps
  - Thematic analysis

- One to one mapping (cognitive interviews) from components of conceptual framework to items on questionnaire
  - Pre-testing (item clarity, no ambiguities, response options and time frame understood as intended)

Instrument Impact Logic Model

- Round table discussions to co-produce a tailored impact logic model to enhance the utility of the ASCK-WELL instrument (months 1-4)
- Actively employ the logic model to enhance uptake (leads: NA/KG, months 11-12 then 21-23)
- Co-produce a user manual (collaborating with SfC, months 21-23)

INPUTS	ACTIVITIES	OUTPUTS	OUTCOMES	IMPACT
A validated ASCK-WELL scale & co-produced user manual	Group discussion, presentations & co-production activities. Steps to convey the scale's purpose. Identify opportunities for scale's utility.	Co-produced blogs, articles, practice & academic presentations. An accessible guide to employers & stakeholders	A fully utilised valid instrument tailored to the diverse needs of the sector. Applied in practice and research.	A sector able to design adequate interventions. Improved workers' QoL at work Improved recruitment & retention. Improved care quality.

Psychometric methods – why it matters

- Paradigm shift – from classical test theory to modern psychometric methods (based on Rasch measurement theory or item response theory)

- Classical psychometric methods produces problematic scores because:
  - potentially imprecise and inaccurate
  - not truly interval
  - not "invariant" making understanding and interpretation impossible
  - cannot be used at the individual level (and therefore not useful to a clinician)
  - not helpful/meaningful to the respondent (care worker)
  - conceptual framework is not always retained

- Using Rasch based psychometric methods:
  - potentially produces scores that are accurate, precise, invariant, truly interval, can be used with individual care workers and meaningfully interpreted

Psychometric phase

- Rasch-based psychometric analyses will determine how robust the new instrument is by addressing the following questions:
  - do the response categories work as intended?
  - do the items map out a continuum from high levels to low levels of CWRQoL?
  - do the items work together?
  - do the responses to one item bias responses to another item?
  - is the performance of items stable across relevant groups (do the items perform in a similar way irrespective of gender, age or work setting (home care vs care homes) of the respondent)?

- Initial analysis to identify any likely anomalies – solutions/new wording for problem items generated through focus groups with care workers

- Full field test to establish final measurement properties of the instrument and responsiveness (sensitivity to change)

Project timeline

Research workstrands and tasks	2024												2025											
	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12
Workstrand 1: Content validity Task 1 - Finalising the conceptual framework Task 2 - Developing questionnaire items																								
Workstrand 2 : Initial Instrument Evaluation Task 1 - Initial psychometric evaluation of item Task 2 - Resolution of anomalies Write up (WS 1&2)																								
Workstrand 3: Final psychometric evaluation of the new scale Task 1 - Item fit, validity, reliability and stability Task 2 - Responsiveness analysis																								
Workstrand 4: Applying activities of the impact logic model Task 1 - Developing an impact logic model Task 2 - Applying activities of the impact logic model Task 3 - Co-producing an instrument user manual Write up (WS 3&4)																								

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ASCK WELL Current Progress

- Ethics approvals granted
- Conceptual framework being finalised

Next steps

- Group interviews to resolve ambiguities (June)
- Draft items based on 1-1 mapping with conceptual framework (July)
- Cognitive interviews to pilot instrument (July)
- Data collection for psychometric evaluation (August)

Policy Dialogue & Impact

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University of Kent

QUALITY OF LIFE AT WORK

What it means for the adult social care workforce in England and recommendations for actions

FEBRUARY 2022

Authors Ann-Marie Towers, Sinead Palmer, Nadia Brookes, Sarah Markham, Helen Salisbury, Barbora Silarova, Petra Mäkelä, Shereen Hussein

Practice Guide

Health and Social Care Committee @CommonsHealth · Apr 20

We have commissioned our Expert Panel to evaluate the Government's progress in achieving its commitments made regarding the health and social care workforce in England.

Health & Social Care Committee's Expert Panel

NEW EVALUATION:

Government commitments made in the area of the health and social care workforce

National & Int. policy

International Labour Organization

International Institute on Ageing

United Nations - Malta

Received: 10 May 2021 | Revised: 23 November 2021 | Accepted: 13 December 2021

DOI: 10.1111/hsc.13718

REVIEW ARTICLE

Health and Social Care in the community — WILEY

Understanding and measuring the work-related quality of life among those working in adult social care: A scoping review

Barbora Silarova PhD[1] | Nadia Brookes PhD[1] | Sinead Palmer MSc[1] | Ann-Marie Towers MSc[2] | Shereen Hussein PhD[1]

Journal Articles

International Journal of *Environmental Research and Public Health*

an Open Access Journal by MDPI

Developing a Scale of Care Work-Related Quality of Life (CWRQoL) for Long-Term Care Workers in England

Shereen Hussein; Ann-Marie Towers; Sinead Palmer; Nadia Brookes; Barbora Silarova; Petra Mäkelä

Int. J. Environ. Res. Public Health **2022**, Volume 19, Issue 2, 945

Future research capitalizing on ASCK-Well

- Utilise the final scale in research & practice
  - relationship between CWRQoL and key outcomes (for the workforce and care delivery)
  - impact of different workforce interventions, including support initiatives
  - impact of policy reforms on CWRQoL (SC & broader policy, e.g. immigration & employment)
- International comparative studies
  - from month 12 of ASCK-Well, we can start to develop collaborations for cross –cultural evaluation of the instrument

Thank you for listening

Happy to respond to questions

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