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How to solve the adult social care workforce crisis in the UK? Stakeholder views on policy reforms

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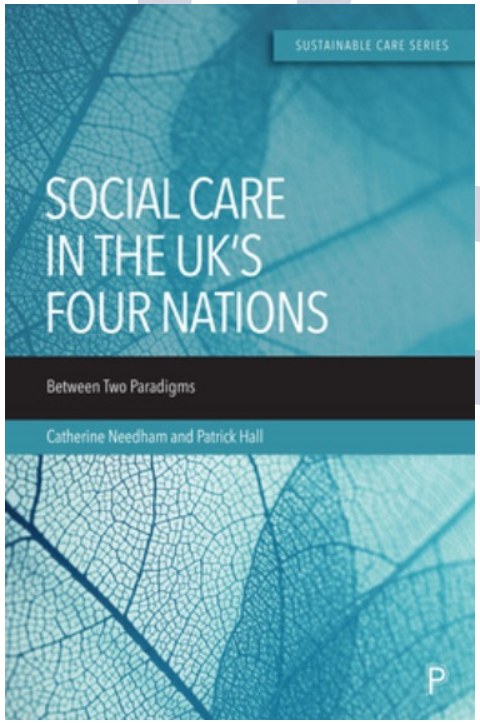
The social care workforce

- More people work in social care than in the NHS
- Largely female, older workforce (Skills for Care, 2023)
- Poor terms and conditions: zero-hours contracts, only statutory leaves, benefits and pensions
- Poverty among care workers (Health Foundation, 2022; Resolution Foundation, 2023)
- Crisis of recruitment and retention, high level of turnover
- Migrant workers are seen as the solution
- Burnout and cases of exploitation and abuse (ethnic minority and migrant workers)

Background

- Discussions about ‘policy conflicts’ in social care policymaking in the UK (Needham and Hall, 2023; Needham et al., 2023) and in the UK and Australia (Allen et al., 2023).
- Conflicting paradigms, values and interests embedded in social care policymaking.
- My question: How to analyse and compare the different arguments when talking about social care policies and the workforce?



Theoretical framework: frame analysis

1. Goffman (1974) ‘social frameworks’
2. Bacchi (2009):
    - What’s the ‘problem’ represented to be?
    - What presuppositions or assumptions underpin this representation of the ‘problem’?
    - Where are the silences in the representation?
3. Verloo and Lombardo (2007): Critical Frame Analysis
    - What is diagnosed as the problem being addressed by the policy?
    - What is proposed as the solution in the policy?
    - Who are the actors involved and what is their relationship to the diagnosis and prognosis?

Study background and research methods

Broader inquiry

Understanding the policy drivers of social care workforce change and some of their implications in the UK.

Methods:

- Stakeholder consultation: interviews, roundtable discussions, prioritisation workshop (Cowan et al., 2021) and foresight exercise (OECD, n.d.). The same group of stakeholders at all stages. Stakeholders from a wide range of backgrounds.
- Interviews and discussions were recorded and transcribed. The text from online whiteboards and chat was gathered and analysed along with the transcripts.
- For the purposes of this paper, I re-analysed the different texts manually, using the following questions as guides.

Questions to analyse stakeholder discussions

1. What did stakeholders diagnose as the key workforce-related policy problems in social care? (Diagnosis)
2. According to stakeholders, what caused the policy problem or what did it lead to? (Causality)
3. What policy actions did stakeholders propose as (part of) the solution? (Prognosis)
4. Who were the key actors involved in the proposed solution? (Actors)

Transforming social care by improving job quality

[I want to] see care workers being funded to the same level as nurses, which is what they should be paid, on the same rates as those. And see the government setting up a proper pension scheme for care workers that matches the local government pension scheme, and that's what keeps people working in the business.

(Foresight activity 1)

How to achieve this:

- sectoral collective bargaining
- fair pay agreement: minimum floors for pay and conditions
- National Care Service

Partnership working between commissioners and care providers

What we want to do is … to change the model towards outcomes [for people drawing on care]. So we stop commissioning hours. … And then we can divert more money into paying our support workers … a fair wage. I don't think we have to continue to just every year uplift what we pay providers. Providers and commissioners would be working in partnership and the workforce would be a happy part of that and everybody felt that they were getting a fair deal. *(Foresight activity 2)*

Actors

Workforce well-being - Pluralist

- Care providers' (employers') organisations
- Trade unions – voice
- State (national government)

Partnership working – Unitarist

- Commissioners - local government
- Care providers
- State (national government)

Conclusions

- Comparing policy proposals aiming to solve the care workforce crisis
- Conflict of values
- Conflict of interests – care relationship means that balancing the interests of people drawing on care and people providing care is very difficult
- Other actors with a legitimate interest: informal carers, the government, etc.

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