

How policy influences workforce outcomes: The case of England's 2023 social care workforce reforms

Professor Shereen Hussein
London School of Hygiene & Tropical Medicine
Shereen.Hussein@LSHTM.ac.uk

ILPN Conference

Bilbao, Spain, September 2024

LONDON
SCHOOL of
HYGIENE
& TROPICAL
MEDICINE



ASSERT Team: LSHTM



PI

Professor
Shereen
Hussein

Co-I

Professor
Nicholas Mays

Co-I

Professor
Richard Grieve

Co-I

Dr David Lugo
Palacios

Co-I

Dr Mirza Lalani

Researcher
Meherunissa
Hamid

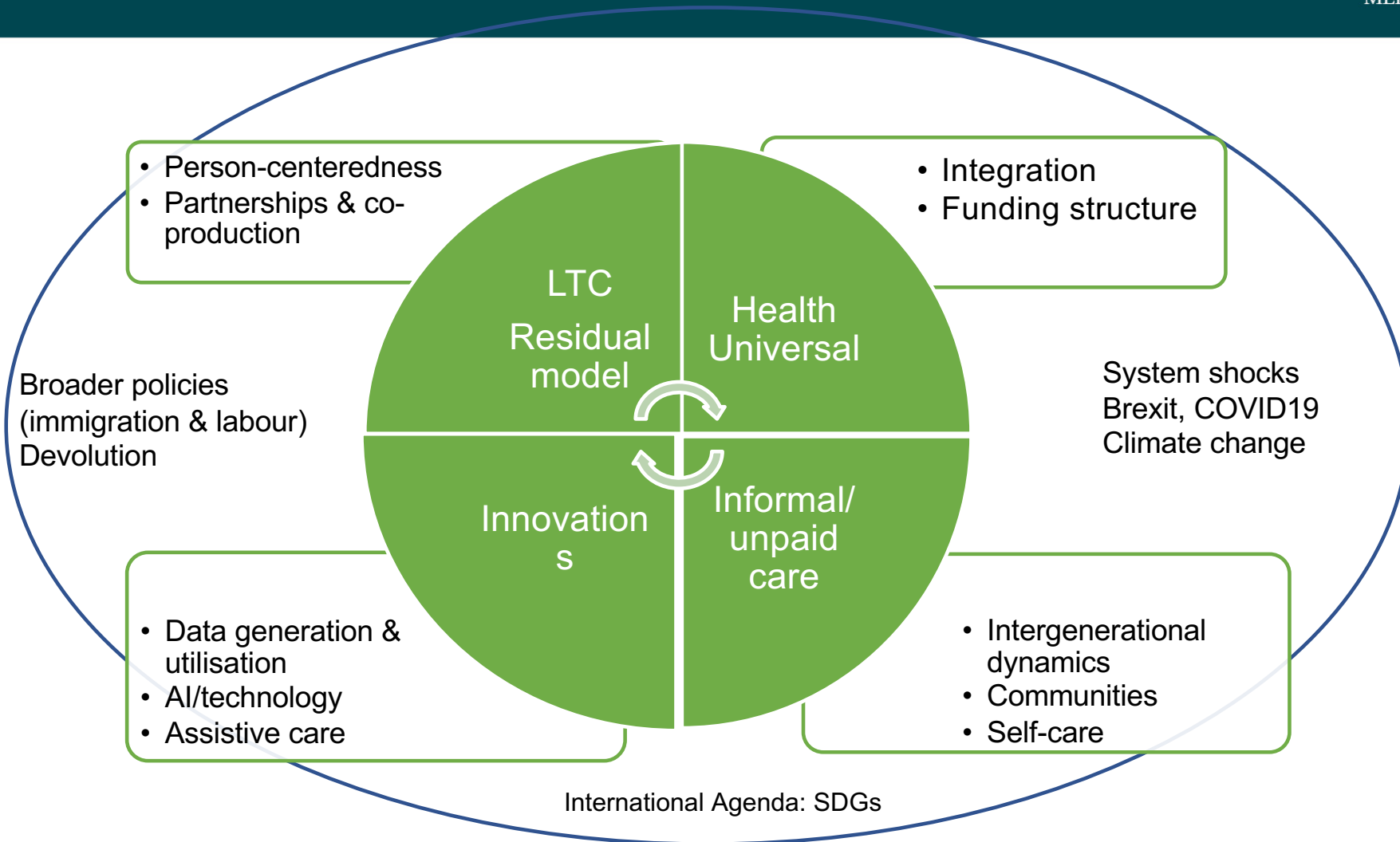
This study is funded by the NIHR Policy Research Programme [Developmental Phase for A Mixed-Methods Evaluation of Adult Social Care Workforce Reforms, NIHR206541]

LONDON
SCHOOL of
HYGIENE
& TROPICAL
MEDICINE



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

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



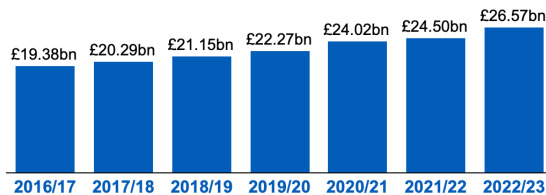
Economic contribution

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

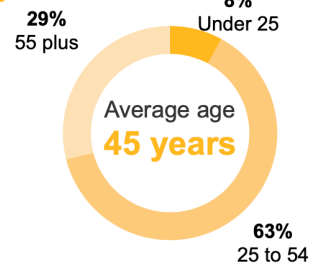
£55.7 billion



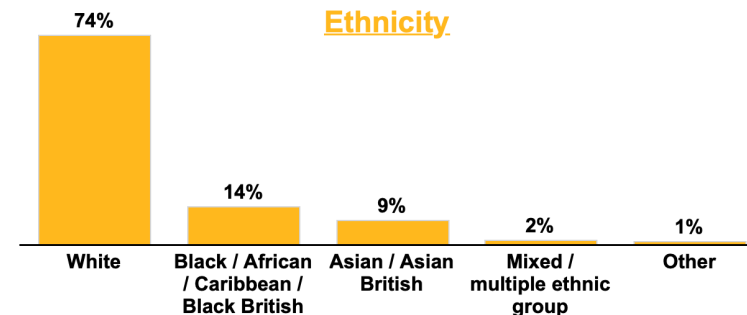
Wage bill trend



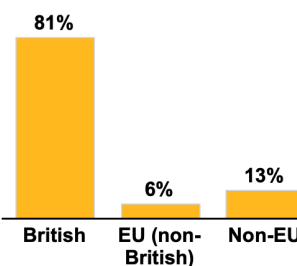
Age



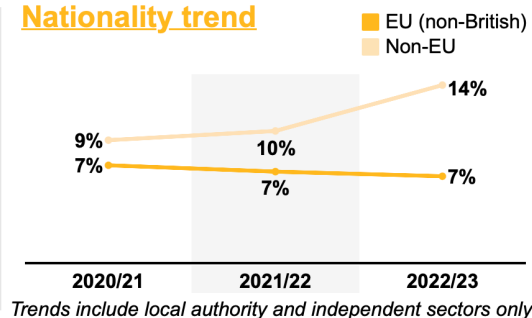
Ethnicity



Nationality



Nationality trend



Gender



Motivations to join the sector

Working conditions

Wellbeing at work

Task & role expansion

Care quality

Adult Social Care Workforce Reforms

- In 2023, the UK government proposed Adult Social Care Workforce reforms in England to address recruitment and retention issues
- Focus on workforce training and upskilling.

Reforms comprise:

- New Care Certificate as a standardised and recognised qualification,
 - Funding for training and qualifications for the workforce
 - Structured Care Workforce Pathway
 - Digital Skills Passport to reduce training repetition
 - Delegated Principles
- This study examines the purpose of the reforms and the prospective challenges associated with their implementation.

- Mixed-method preliminary study.
 - Scoping evidence review (literature and policy documents)
 - Semi-structured interviews with national policymakers and NGO representatives.
- Consolidated Framework for Implementation (CFIR) model was used as a conceptual framework.
 - Domains: Inner setting, Outer Setting, Process, Intervention Characteristics, and Individual Characteristics
- Short-term, formative research to inform the co-design of a more comprehensive mixed method evaluation of the workforce reforms later in 2024.

CFIR domain	Semi-structured interviews (England focused)	Rapid review (high income countries)
Intervention characteristics	<ul style="list-style-type: none"> Design of the reforms - concerns regarding access for migrant workers, those with English as a second language and PAs/live-in carers Reforms are an improvement on existing approaches e.g. Digital Skills Passport increases portability; standardised Care Certificate 	<ul style="list-style-type: none"> Role of training in staff retention and job satisfaction, associated with elevated morale, reduced burnout and increased service longevity.
Outer setting	<ul style="list-style-type: none"> Sector wide issues - lack of pay uplift and risk of staff mobility to the NHS 	<ul style="list-style-type: none"> Sector wide issues - lack of funding, staff shortages
Inner setting	<ul style="list-style-type: none"> Organisation preparedness for implementation – disparities according to sized employers and settings; resource capacity and infrastructure 	<ul style="list-style-type: none"> Capacity within organisations to deliver interventions is a significant barrier to effective implementation of these sorts of complex changes in long-term care settings
Individual characteristics	<ul style="list-style-type: none"> Engagement from sector; relies on employers with innovative leaders in to facilitate policy adoption 	
Implementation process	<ul style="list-style-type: none"> Reforms are voluntary – no regulatory lever could hinder adoption 	<ul style="list-style-type: none"> Potential positive relationship between training and enhanced care quality in care. Difficulty in translating knowledge to behaviour change were noted

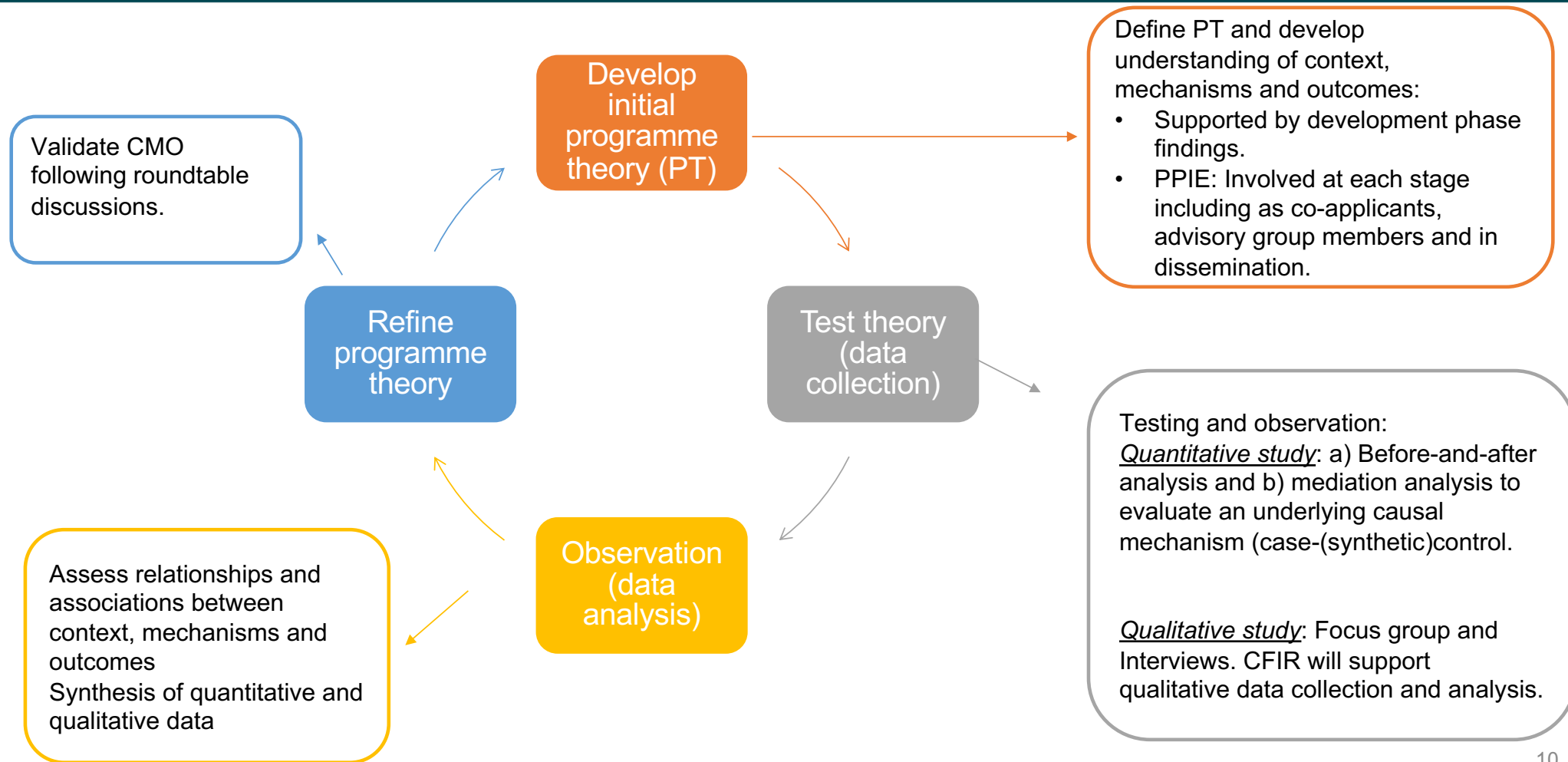
International learning: Findings from the scoping review

- Policies can **be driven** by change and **drive** change – not always planned or anticipated
- The significance importance of context, status of care work and its evolving nature
- Care markets are not free markets – the power of state commissioning / the limited power of workers and users
- Care policies can not be isolated from broader (intersecting) policies and other mega trends (demography, mobility and technology)
- The balance between local (tailored) and central decision power and authority
- Funding sources, structure & allocation
- Training and career development are important aspects but can not be isolated from the working conditions and pay across the sector
- Inequalities and diversity- differentiated impacts

Considerations when implementing the reforms: Findings from stakeholders' interviews

- Training may improve quality of care for the client as well as staff wellbeing.
- Local level factors influencing effectiveness:
 - Disparity between organisation size and setting. Large organisations have established career pathways and HR support and care homes have registered managers and nurses on site which makes for a more conducive environment for training
 - Training accessibility and applicability disparity
- National level factors influencing effectiveness:
 - Need for addressing pay and mobility of staff for training to be effective.
 - Political change, policy direction and lack of national level funding. Inhibit progress

Proposed Evaluation: A longitudinal quasi-experimental, mixed-method evaluation



Impact Logic Model (ASSERT II)

Input

Financial resources for the evaluation.

Expertise and human resources for data collection and analysis.

Collaborative partnerships with key stakeholders (DHSC, SfC, Care Workers Charity and PPIE colleagues).

Policy documents and guidelines related to the social care workforce reforms.

Existing data

Activities

EA & non EA participants: Qualitative FG/ ints. ; maximum variation sampling across employer and worker characteristics.

Delegation Principles; focus groups with care managers and care workers in nine pilot sites

Mediation and Before-After quantitative analysis

Engagement with key stakeholder groups and Advisory Group

Synthesis of qualitative and quantitative findings

Outputs

Enhanced understanding of perspectives on the CWP and delegation principles framework.

Identification of variation in views of the reforms across different employer and worker characteristics.

Quantify correlations between intervention and outcomes of interest

Qualitative insights into barriers, facilitators, and changing behaviours over time.

Outcomes

Improved intervention specifications

Effective roll out of interventions

High level of uptake of interventions

Impact

Improved workforce outcomes

Improved care worker's wellbeing

Improved quality of care

Learning to inform impact on wider health and social economy

Assumptions: Stakeholder collaboration and cooperation are maintained throughout the evaluation.
Adequate levels of participation in focus groups and interviews .
Adequate resources and expertise are maintained.
Accessibility of existing data on time.

Context: The social care workforce is dynamic and diverse, requiring a flexible and inclusive evaluation design.
External factors such as changes in national policies or economic conditions may influence outcomes.
Continuous feedback loops and iterative adjustments to the evaluation design based on emerging findings are integral for adapting to the evolving context.

Unanticipated changes

New UK Labour Government, July 2024.

Reconsidering the ASC Workforce reform's scope.

Decided to discontinue the ASC Training & Development Fund.

Considerable implications on the specific components of the reform, their scope and coverage.

Further evaluative work is uncertain at this stage.

Statement made on 30 July 2024

Statement UIN HCWS50

Statement made by



Stephen Kinnock

Minister of State for Care

Labour

Aberafan Maesteg

Text

 Commons

Statement

This Government is being honest about the appalling economic circumstances we inherited, and takes seriously its responsibility to help manage down overall fiscal pressures in 2024/25

As a result, we have decided that the Adult Social Care Training and Development Fund proposed by the last Government, decisions around which had been suspended since the announcement of the election, will not be continued.

Implications of the Social Care Workforce Reforms: Initial Takeaways

1. Equitable access to training and development for those working in diverse care settings, thereby addressing the career pathways of all social care workers.
2. Workforce development initiatives need to be adapted to the social care sector's unique features.
3. Need for research to track the long-term effects of these reforms and inform future policy adaptations.
4. The devolved nature of care policies results in some variations at the four nation level- however, UK broader policies (esp. immigration and labour) limit the autonomy of change
5. Social Care reforms intersect with other policy reforms to affect care workforce change
6. Care workers have limited influence on policy dynamics but are the most affected, with potential implication on their wellbeing and the quality of care they provide
7. Need a comprehensive strategy actively involving all stakeholders

For Further Information

Hussein, S., Lalani, M., Palacios, D.L., Hamid, M., Grieve, R. & Mays, N. (forthcoming). The Adult Social Care Staff Evaluation of Reforms to Training (ASSERT). Developmental Phase, Final Report.

Seminars & Conference Presentations:

- *Shaping the Long-Term Care Workforce: Insights from UK Policy*, University of California San Francisco, January 2024.
- *Examining England's 2023 Social Care Workforce Reforms: Insights and Ways Forward*, Stanford University, January 2024.
- *How Policy Can Develop a Well-Trained Cadre of Long-Term Care Workers: International Learning from the English Social Care Workforce Reforms 2023*. International Association of Geriatrics and Gerontology & MENARAH Network Regional Symposium, April 2024.
- *Examining England's 2023 Social Care Workforce reforms: Insights and Challenges Ahead*. Health Services Research UK Conference, June 2024.
- *Enhancing the UK Long-Term Care Workforce in the UK: International Learning from ASSERT and ASCK-WELL Projects*. Tokyo Metropolitan Institute for Gerontology, June 2024.

Thank you for listening
Happy to respond to questions

Shereen.Hussein@LSHTM.ac.uk
[@DrShereehussein](https://www.instagram.com/DrShereehussein)

LONDON
SCHOOL of
HYGIENE
& TROPICAL
MEDICINE

