

## **Report on workforce challenges in Adult Social Care.**

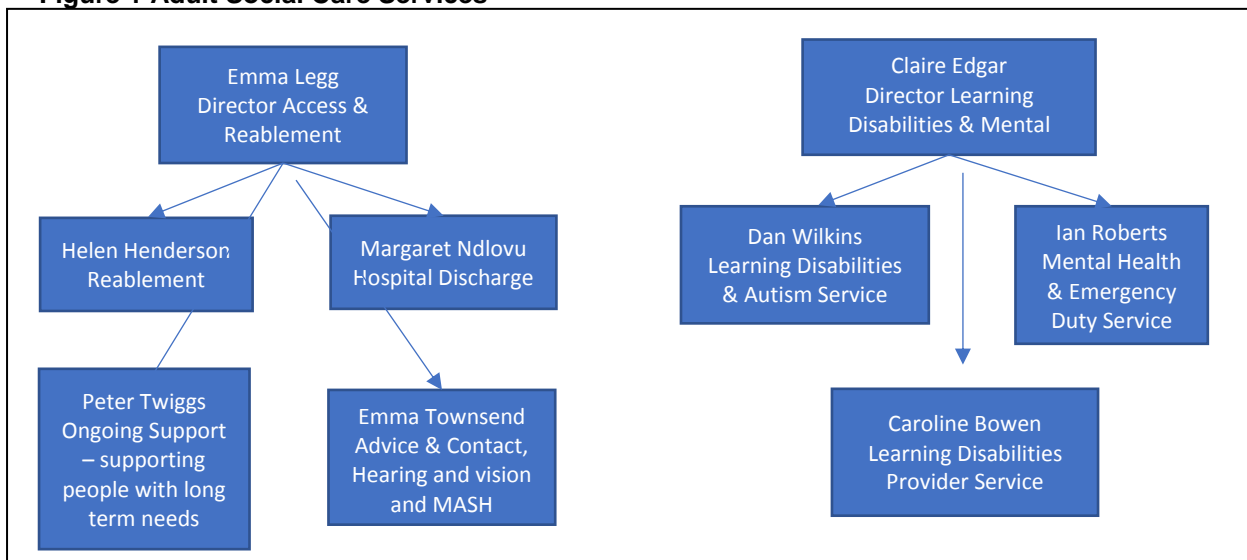
### **Purpose of Report**

This report presents the challenges experienced by the 'Adult Social Care' (ASC) Workforce in Wiltshire and actions agreed to meet these challenges. This report includes consideration of Wiltshire Council adult care staff and also the challenges of the workforce commissioned by Wiltshire Council from private sector agencies. The information gathered reflects local feedback and observations from staff and managers as well as national trends, publications and research.

### **Background**

There are approximately 650 staff employed by Wiltshire Council in 'Adult Social Care' (ASC) working in a range of teams and roles to meet our statutory duties under social care and housing legislation and government guidance. The main legislation being the Care Act 2014. The different services in ASC are presented in figure 1

**Figure 1 Adult Social Care Services**



Appendix 1 provides information on the key roles in ASC and the services and teams they work in (with vacancy rates). Adult Social Care also commission services such as domiciliary care, care home placements and respite from private agencies and independent organisations (often called the provider market)

The majority (86%) of the workforce in Wiltshire are female, and the average age is 43 years old. 11% of the workforce are aged 24 and under. 27% of the workforce are aged over 55 and will be reaching retirement age in the next 10 years.

An estimated 86% of the workforce in Wiltshire identified as British, 7% identified as of an EU nationality and 7% a non-EU nationality, therefore there was a similar reliance on EU and non-EU workers<sup>1</sup>

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<sup>1</sup> <https://www.skillsforcare.org.uk/adult-social-care-workforce-data/Workforce-intelligence/publications/local-information/My-local-authority-area.aspx>

## The Challenges

The main challenges experienced by Adult Care Work force are those identified in the recently developed Adult Social Care Workforce Strategy. The focus of the strategy is to establish and develop a highly effective and stable workforce to work alongside adults with care and support needs and carers in Wiltshire. The areas for development identified in the strategy are: vacancies, recruitment and retention of staff and staff development and learning outcomes. There have also been challenges to the adult social care workforce as a whole related to the COVID-19 pandemic.

### 1. Vacancies

Adult Social Care regularly successfully recruit newly qualified and non-professionally qualified staff. The main challenge is recruiting experienced qualified staff. The current vacancy rate for Social Workers varies from 15% to 31% in different teams and is around 15% for Occupational Therapists (see appendix 1). There are regional and national shortages of experienced Occupational Therapists and Social Workers. Wiltshire Council ASC currently support around 10 student Social Workers and three student Occupational Therapists on placements every year to encourage newly qualified workers to work for Wiltshire Council.

The recruitment of support workers in inhouse provider services in reablement and working with people with learning disabilities remains a constant pressure and requires dedicated time and resource in order to ensure that services maintain CQC “safe” levels of staffing.

Recent government guidance<sup>2</sup> stipulates that from 11 November 2021 care homes must only allow individuals who are fully vaccinated against COVID-19 (or exempt) entry inside of a care home. It will be the responsibility of the Registered Manager to assess who they let in to the home. This may have a direct impact in terms of vacancies, as some staff may not wish to have the vaccination.

The impact of vacant posts in ASC:

- Vacancies within one team may adversely affect other roles and teams within the service, covering additional tasks of others may impact on wellbeing and sickness.
- Vacancies impact on work allocation, teams prioritise people at the highest risk for allocation to limited staff. Therefore other people are not able to be assessed in a timely manner leading to pressure on families.
- Vacancies for occupational therapists reduces the number of people we can support to be discharged from hospital and means that people wait longer for equipment and adaptations to support them to remain at home.
- Teams with vacancies require more management attention.
- Employment of temporary staff (locums) is an expensive option for Wiltshire Council.
- Vacancies may send negative messages to customers.

### 2. Recruitment and Retention of staff

Retention of staff across the provider services remains higher than the national average for domiciliary care services. Our current turnover rate in operational teams was recorded as 12.9%. This is similar to the national average for Local Authority ASC workforce of 13%. The turnover rate for Social Workers in Wiltshire is 16.5% compared to the national average of 12.9%. The turnover rate for Occupational Therapists in Wiltshire is 9.4% compared to the national average of 14.9% for Occupational Therapists employed in Local Authorities.

ASC sickness rate for 2019/20 is 17.9 average days lost per FTE (compared to 9 days for whole of Wiltshire Council). This is an increase on figures for 2018/19 (15.6 days) but the figure is expected to be lower for 2020/21. National figures for local authorities for 2019/20 show 9.5 average days lost for Social Workers and 7.5 average days lost for Occupational Therapists.

A Social Work degree apprentice scheme has been implemented in Wiltshire, there are currently 6 staff undertaking the qualification, their training will take 3 years. We have joined the South West Occupational

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<sup>2</sup> <https://www.gov.uk/government/publications/vaccination-of-people-working-or-deployed-in-care-homes-operational-guidance/coronavirus-covid-19-vaccination-of-people-working-or-deployed-in-care-homes-operational-guidance>

therapist degree apprenticeship and have supported one worker to join the apprenticeship this year. In other areas there is evidence that this supports good retention of staff.

In terms of recruitment, several initiatives are being progressed. These include additional support for Newly Qualified Social Workers (NQSWS) who are undertaking their 'Assessed Year in Supported Employment (ASYE)', there is a focus on supporting students to have placements in ASC teams. Evidence and experience suggests that when staff feel supported, their wellbeing considered and are supported to work in a flexible manner then they are more likely to remain in post.

### 3. Staff Development & Quality Assurance.

Adult Social Care (ASC) face challenges both now and in the future in terms of staff development and quality Assurance. Staff development impacts on retention of staff and is central to ensure we have a competent workforce trained effectively to support the population of Wiltshire.

ASC are currently working with Children's services to review the effectiveness of the current transitional pathways. One challenge is currently associated with young adults who place themselves at risk due to high risk situations that are the result of exploitation, known as **Transitional Safeguarding**. We need to support the ASC workforce to enhance their knowledge and skill base around working and supporting people who are at high risk within our communities.

ASC is building on earlier work introduced with Partners for Change 'Three conversations model' and is planning to embed the '**Strengths-based Approach**' to working across all teams. Strengths based working focuses on what the person is able to achieve for themselves balanced with effective risk appraisal.

ASC have implemented a workforce **Quality Assurance Framework**, including the use of monthly case file audits of staff to review practice. Quality Assurance is reviewed in Performance Outcome Groups (across all teams) and the Performance Outcome Board (whole service).

Future imminent challenge is related to the **Liberty Protection Safeguards (LPS)** which will replace the Mental Capacity Act (2005) Deprivation of Liberty Safeguards (DoLS) in 2022. LPS will involve changes to practice across a number of operational teams, including significant review deadlines that will have to be met. Different levels of training will be required for different staff roles.

The **Health and Care Bill**<sup>3</sup> currently at the House of Commons – Committee Stage will place a new duty on the Care Quality Commission to assess local authorities' delivery of their adult social care duties. Wiltshire Council will need to ensure that Adult Social Care is ready for implementation, and that the Quality Assurance framework has been reviewed and improved ahead of implementation.

Amendments to the **Mental Health Act (1983)** are due that may require training and support for the workforce. The amendments will transform Mental Health Services to enable them to meet predicted future demands on services. The ethos of this includes – choice and autonomy, least restriction, therapeutic benefit and the person as an individual.

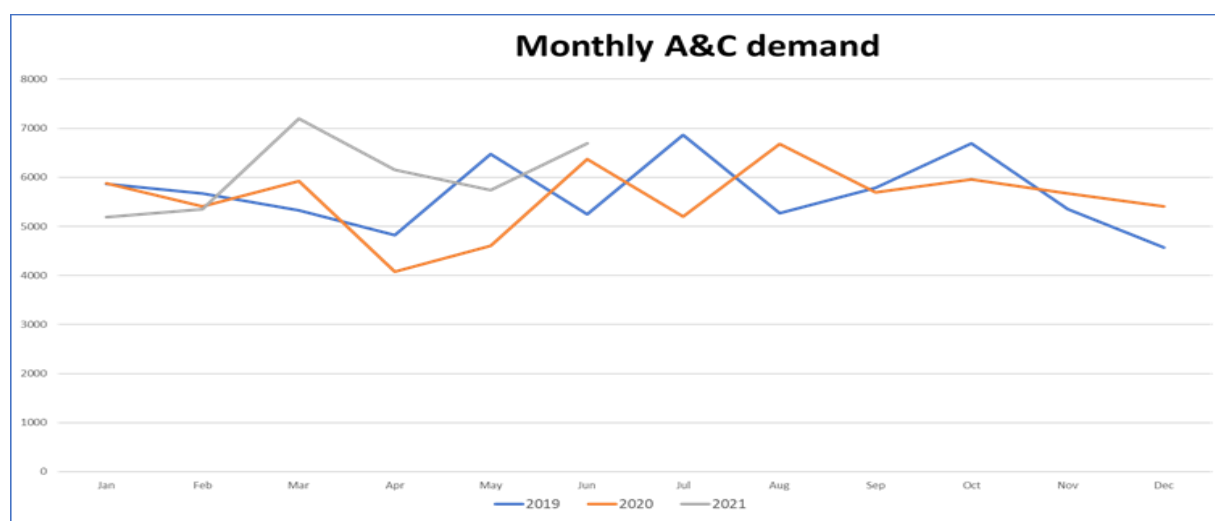
### 4. Covid – Response and Recovery:

The demand for advice and support for adult social care received by the Advice and Contact Team (ASC's front door) has increased over the last year and continues to increase on an annual basis, see figure 2. This adds an additional demand on teams with vacancies.

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<sup>3</sup> <https://www.gov.uk/government/publications/working-together-to-improve-health-and-social-care-for-all/integration-and-innovation-working-together-to-improve-health-and-social-care-for-all-html-version>

**Figure 2 Contacts (including telephone calls and emails) received per month by year**



Alongside colleagues in other agencies the ASC workforce have been central to the Covid19 Pandemic response. Staff commenced working from home and many are still based from home. Initially the majority of visits were completed by telephone and video with home visits undertaken following a risk assessment. Reablement and the hospital social workers changed their practice to support people being discharged from hospital. Currently ASC are reviewing how they will return to the office and what ASC's 'new normal' will look like. Wiltshire Council have under taken wellbeing questionnaires, the main challenges noted by ASC to working from home include social isolation, communication with colleagues, a lack of physical workspace and distractions in the home.

Working remotely has impacted on the sharing of 'practice wisdom' (conversations where experienced staff share practical experiences, solutions to complex scenarios, enhance difficult conversations and support professional curiosity with others who are newer to practice). Opportunities have been missed in relation to absorbing knowledge and experiences of others which in turn enable the workforce to sustain and develop.

A wellbeing hub was established by Wiltshire Council to provide advice and support for the residents of Wiltshire during the pandemic. The wellbeing help line is now integrated into the Advice and Contact team who support the public with their queries.

At the start of the pandemic Wiltshire Council launched a COVID-19 advice and update site as a support for staff, which was live until April 2021 and was visited over 900,000 times. Three staff Engagement and Wellbeing Surveys were undertaken which laid the basis for engagement and wellbeing strategy objectives. The leadership team published videos, updates and vlogs to keep staff connected, informed and updated. Staff have followed the Chief Executive's request to make sure they don't book meetings between 1pm and 2pm to make sure people had a chance for a break in their day. The HR department launched flourish chat channels to support staff connections at a time when many people have told us they feel disconnected. There are regular Chief Executive webinars (with live Q&A sessions) and council wide virtual quizzes to help keep staff connected. Workplace pilots have been launched for people to book to safely work from our main hubs. HR are launching a mental health advocates initiative and the Wellbeing and Employee Engagement workstream is collaborating on a new wellbeing strategy.

## **5. Provider workforce**

The Banes, Swindon & Wiltshire Care Skills Partnership (BSWCSP) is an employer led partnership which works across the 3 Local Authority areas, with the lead employed by Wiltshire Council. The purpose of the partnership is to support the Independent, Voluntary and private sector (IVP) adult care employers and Registered Managers to access learning and development and the national Workforce Development Fund for themselves and their staff.

COVID has been a very challenging time for the sector. The Partnership has had to shift to remote and online working. Although the percentage of managers who have attended the online meetings has dropped during the last 12 months, there has still been good attendance from Wiltshire IVP managers.

Feedback from attendees is positive; 93% of attendees strongly agreed that networks were useful for their professional role; 100% agreed they supported their learning and development and 93% thought that the partnership was positively working with and promoting the care sector.

The Partnership was able to claim £76,900 of Workforce Development Fund for 30 Wiltshire providers between September 2020 to May 2021. This equates to 17 Level 2 Diplomas, 55 Level 3, 5 Level 4 and 10 Level 5, plus a number of short courses.

The Partnership also created a WhatsApp group aimed at frontline Managers throughout COVID 19 to enable networking, information sharing and mutual peer support. This group had 47 attendees from the Wiltshire Council area and was in constant use.

The Council has provided support to the provider workforce in a number of ways. At the start of the pandemic a COVID Team was established as a single point of advice and support. This has included providing advice on infection prevention and control, arranging mutual aid when a provider suffered significant staffing shortages as well as being a source of support as care homes managed deaths of some of their residents. The team operated six days a week and has a dedicated telephone number and email address. In addition, a weekly joint newsletter was distributed providing the most recent government and Public Health advice and guidance and fortnightly provider webinars were held. The team remains in existence and has been renamed the Provider Oversight & Support Team. In addition, the Council has provided Wiltshire Care Partnership with funding to lead a learning conference so that providers can reflect on lessons learnt in the pandemic and will also be a celebration of the hard work our Wiltshire providers have undertaken to care for our most vulnerable residents.

## **Conclusion and Actions in place to address the challenges:**

Many of the observations and challenges within this report are not new to Adult Social Care. The aspects in relation to recruitment, vacancies and the impact of Covid are noted across the care / health sector in general. The workforce has been supported by the development in IT systems. Within the initial response Wiltshire Council implemented MS Teams in an extremely short amount of time and this has supported teams to remain in contact with each other and has been a method of completing online interviews and video calls with the people we support.

## **Actions to address the challenges highlighted include:**

1. ASC has benefited from focused recruitment drives, where a landing page has been developed, this has worked well for the Adult MASH. Recruitment drives will be considered across ASC.
2. Additional funding is being applied for through the Pan Dorset & Wiltshire Training Partnership to provide additional support to AYSE Social Workers across Children and Families and ASC. With reference to a plan to support retainment of staff and additional support for BAME employees / students. This will build on the recently published 'Inclusion Strategy'.
3. Group has been set up for newly qualified occupational therapists to support their development. To develop a newly qualified occupational therapist programme based on Skills for Care framework.
4. We will support social care practitioners and occupational therapy assistants to gain a professional qualification through the social work or occupational therapy degree apprenticeships.
5. Consider offering flexible working including compressed hours.
6. Engage more with Universities to increase the visibility of Wiltshire Council as an employer and increase the number of student placements we provide
7. Ongoing review of Transitional Safeguarding across Wiltshire.

8. Development of Strength-Based Training and development of staff teams across ASC.
9. Planned review of Quality Assurance policy and framework
10. Workforce Plan underway to prepare and implement changes in relation LPS.
11. Review of services in line with LGA Health check and standards of practice. The Principal Social Worker will also be developing and implementing a 'self-assessment' tool / guidance to support preparation for the Health and Care Bill implementation.
12. Continuation of staff reference group to suggest ideas and comment on proposed changes.
13. Principal Social Worker and Principal Occupational Therapist to scope of career pathways for all ASC roles and review training needs and provision for these roles.
14. Continue to increase the diversity and inclusiveness of the workforce, creating career opportunities that appeal to all parts of our community.
15. Design services co-produced with people who use services and people who work in social care – their needs and aspirations is the central question
16. Build on existing data-sets to produce projections and assessments of supply and demand, accompanied by gap-analysis.

### **Priorities specific to Covid recovery**

- Frontline staff need to be given the time, space and resources to recover following intense periods of demand, this may include access to automatic psychological support and a review of examples of supportive working environments.
- Leaders should continue to encourage cultures of compassion, inclusion and collaboration to create high-quality workplaces for staff.
- Developing teamwork may be more important than developing the roles of one professional group. Strong teams can also reduce dependence on any single professional group, so work can be shared.
- Support the informal Workforce & focus on early intervention. Adult Social Care could and should take a much more strategic approach to the support and development of volunteers. This was a success of the initial Covid19 response which should continue to be maintained and enhanced.
- Focus on integrated ways of working which focus on resilience and surge demand on Adult Care.
- Work to better understand the impact of COVID 19 on Black, Asian and minority ethnic people and other groups in the workforce, in order to support them to be safe.

### **Terence Herbert Chief Executive**

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Date: 1<sup>st</sup> Sept 2021

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**The following unpublished documents have been relied on in the preparation of this report:**

None

## Appendix 1 Numbers of full time equivalent staff planned for different services and percentage of vacancies

Roles and Teams	Information Officers	Social Worker	Occupational Therapist	Social Care Practitioner/ Occupational Therapy Assistant	Support workers	AMHP <sup>4</sup>	ROVI/ROHI <sup>5</sup> / dual sensory specialists	Investigating Managers
Advice and Contact	16 22% vacant	3 No vacancies	2 No vacancies	-	-	-	-	-
Hospital Teams	-	35 17% vacant	-	14 14% vacant	-	-	-	-
Reablement	-	-	27 15% vacant	9 No vacant	98 <1% vacant	-	-	-
Wiltshire Support at Home provider service	-	-	-	-	13 15% vacant	-	-	-
Ongoing Support	-	36 31% vacant	21 14% vacant	33 9% vacant	-	-	-	-
MASH (multi agency safeguarding hub)	2 No vacancies	-	-	-	-	-	-	9 No vacancies
Hearing and Vision	-	1 No vacancy	-	-	3 communicator guides	-	7	-
Learning Disability and Autism Service	-	24 20% vacant	-	17 19% vacant	-	-	-	-
Learning Disability Provider service	-	-	-	-	138 19% vacant	-	-	-
Mental Health	-	16 15% vacant	-	11 5% vacant	-	16 24% vacant	-	-

All figures rounded to the nearest whole number

Not included in this chart are specialist teams such as the Court of Protection Team, the Deprivation of Liberty Safeguards Team and the Financial Assessment and Benefits Team.

<sup>4</sup> Approved Mental Health Practitioner

<sup>5</sup> Rehabilitation officer for the visually impaired, Rehabilitation officer for the hearing impaired