CMM
CAREMANAGEMENTMATTERS
JULY 2022
www.caremanagementmatters.co.uk

A VIEW FROM WESTMINSTER

What's the vision for social care?

Making impact

Giving care providers a voice

Training the next generation

Preparing for assessments

Monitoring morale

Why staff feedback is so important

Now is the time to go digital!

Person Centred Software

"It feels like a huge leap to make but it's an inevitable direction of travel for us all. It makes things much, much easier.

There are a number of digital care planning systems on the market, but what I would say sets Person Centred Software apart is that it's so ahead of its time and so simple to use – that's the reason we chose it."

Ed Russell, CEO, **WCS Care**

You're in safe hands

With over 2,500 care homes using our digital care management system, Mobile Care Monitoring, you're in safe hands.

- 40% staff retention increase
- More time to care
- Number 1 choice for care staff
- Reduces stress
- Facilitates teamwork

NHSx ASSURED SUPPLIER LIST

PRSB QUALITY PARTNER

CYBER ESSENTIALS CERTIFIED PLUS

GP Connect

Book a demo with us today

Call 01483 357657

hello@personcentredsoftware.com

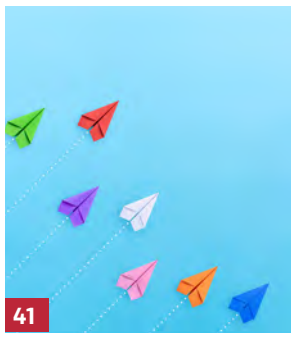
www.personcentredsoftware.com

DRIVING OUTSTANDING CARE

In this issue

FEATURES

REGULARS



CMM
CAREMANAGEMENTMATTERS

EDITORIAL

editor@caremanagementmatters.co.uk
Editor: Olivia Hubbard
Commissioning Editor: Angharad Burnham
Content Editors: Aislinn Thompson, Henry Thornton

PRODUCTION

Lead Designer: Ruth Keating
Director of Creative Operations: Lisa Werthmann
Studio Manager: Jamie Harvey

ADVERTISING

sales@caremanagementmatters.co.uk
01223 207770
Advertising Manager: Daniel Carpenter
daniel.carpenter@carechoices.co.uk
Assistant Advertising Manager: Aaron Barber
aaron.barber@carechoices.co.uk
Director of Sales: David Werthmann
david.werthmann@carechoices.co.uk

SUBSCRIPTIONS

Non-care and support providers may be required to pay £50 per year.
info@caremanagementmatters.co.uk
01223 207770
www.caremanagementmatters.co.uk

CCL REF NO: CMM 19.5

CareChoices

CPD MEMBER The CPD Certification Service

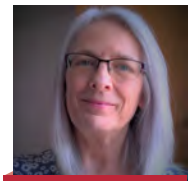
CMM magazine is officially part of the membership entitlement of:

CARE ENGLAND NCF skillsforcare

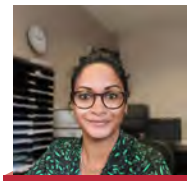
CONTRIBUTORS


@blimeysimon

Simon Bottery
Senior Fellow in Social Care, The King's Fund


@CQCProf

Debbie Ivanova
Director for People with a Learning Disability and Autistic People, Care Quality Commission


@cpvnel

Tayvanie Nagendran
Co-Chair, Care Providers' Voice


@GillianKeegan

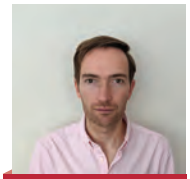
Gillian Keegan
Minister of State for Care, Department of Health and Social Care (DHSC)Care (DHSC)


@sturdy_deborah

Deborah Sturdy
Chief Nurse for Adult Social Care


@AveryHealthcare

Jo Crossland
Head of Dementia Care, Avery Healthcare


@RichJamesOakley

Dr Richard Oakley
Associate Director of Research, Alzheimer's Society


@NCF_HelenG

Helen Glasspool
Events and Partnership Lead, National Care Forum


@ChrisGrahamUK

Chris Graham
Chief Executive, Picker


@ProfAssessment

Paul Kelly
Ofqual Deputy Responsible Officer, Professional Assessment Ltd

Jorawar Singh Rathour
Founder, London Homeless Welfare Team


@eclcarecompany

Keir Lynch
Chief Executive, Essex Cares Ltd

SOCIAL CARE INSIGHTS

From Simon Bottery

Local authorities are under huge pressure to implement social care reforms by October 2023, writes Simon Bottery. But calls for delay can't help but recall past failures to bring in change.

1st October 2023 is International Day of Older Persons, so there would be a rich symbolism if the Government were finally to introduce its social care charging reforms on that date.

In practice, we don't know the exact start date (just 'October') and local authorities are already struggling not just with implementation of charging reform but in accommodating the wider changes in social care, including introduction of a CQC inspection framework, a new data strategy and the expectations of involvement in newly formed Integrated Care Systems. Together they add up to unprecedented administrative change for local authorities at a time of intense external pressure, particularly around the social care workforce.

That's why local authorities are now calling for the reforms to be phased in. A report in May by the County Councils Network found that, while there was general support for the reforms from member councils, 97% thought there was not enough money to implement them, 88% thought there were not enough staff and 77% thought there wasn't enough time. Overall, barely a third thought they were even 'quite well prepared' for the changes. The report suggests that, for the charging reforms alone, an additional 4,300 social work staff would be required and an extra 700 financial assessment staff.

However, the Government is showing no sign of willingness to rethink the timetable. It has staked significant political capital on the charging reforms, which allow it to say it has met its manifesto commitment to fix adult social care (even if such a claim is clearly misplaced). But it is not just the Government that would lose out: delay would mean that the people who are intended to benefit from the reforms will have those benefits postponed and providers would see a move towards a 'fair cost of care' take longer to come into effect.

Any delay would also, inevitably, make people recall the last time social care charging reform was due to take place. A reform of the means test and lifetime cap on costs was scheduled for April 2016 but postponed by the Government, with the ill-advised acquiescence of much of the social care sector. They were later, of course, abandoned entirely (it is particularly galling that the 2016 cap was a far more generous and progressive one than what is now due to be implemented). The failure to implement as planned in 2016 has meant many people have lost out on the protection against catastrophic cost that they deserve.

The moves scheduled for October are also critical because they increase the numbers who use – and therefore have some understanding of – publicly funded social care. That in turn may well be a prerequisite for the further funding and reform the sector needs.

Together, these make a strong argument for pressing ahead now, while the opportunity for reform still presents itself. DHSC has set an ambitious timetable and now needs to ensure that local authorities, and the wider sector, have the support they need to meet it. The joint approach established between central and local Government to implement the Care Act would be a good basis to understand the challenge and opportunities of the latest reforms.

Money will be critical. The last decade has seen local authorities attempting to implement the 2014 Care Act without the resources they need to do it properly. The next wave of reform cannot be allowed to falter in the same way.

Simon Bottery is a Senior Fellow in Social Care at The King's Fund. Email: **S.Bottery@kingsfund.org.uk** Twitter: **@blimeysimon**

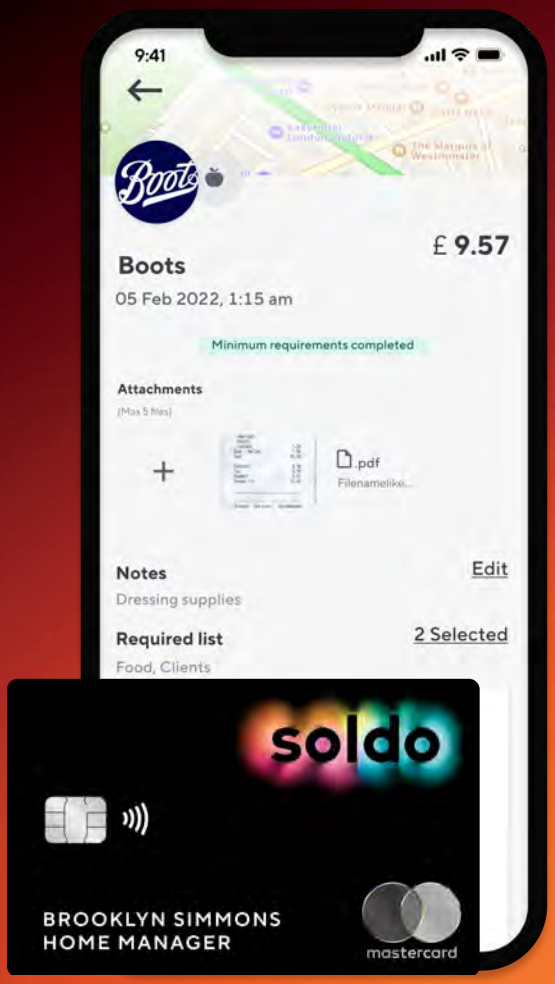
soldo

Replace petty cash with individual cards

Soldo cards empower care home employees to make urgent purchases safely, without the paperwork.

"Employees can have the right funds in a matter of seconds."

Cairn Mhor,
Residential Care for Children



Trusted by

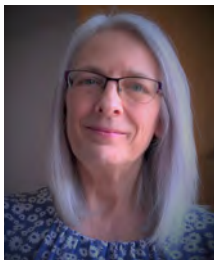
TLC CARE

Home Instead

Inside CQC

DEBBIE IVANOVA

Debbie Ivanova, Director for People with a Learning Disability and Autistic People at the CQC, updates on Supported Living and Integrated Care Systems.



A year ago, we published our new strategy. We set out our ambitions under four themes, with people and communities at the fore, so now feels a good time to see how things have developed.

Sadly, our update to the review of restrictive practice, 'Out of Sight, Who Cares?', sits amid a growing number of publications, including 'Safeguarding Adult Reviews' and the 'Learning from Deaths of People with a Learning Disability (LeDeR)' programme, that highlight how the needs of people with a learning disability and autistic people are not being met. Too many times, people are not getting access to the right care.

Whilst we acknowledge providers are delivering good and outstanding care, we continue to expose poor practice and want to see improvements in quality of care in supported living. The model of care we're looking for across all sectors is described in 'Right Support, Right Care, Right Culture', ensuring people's needs always frame the support and care given. We will not register services unless they meet this model and will protect people and communities through our regulatory remit. This year, we have made 167 enforcement decisions, including cancellation, imposing positive conditions and restricting admissions – a 25% increase on 2021.

SUPPORTED LIVING

The Supported Living Improvement Coalition is led by people with experience of supported living services. Established in response to our increasing concerns about the variation in people's experience of supported living services, the coalition meets regularly to explore key themes and understand what can be done to improve services. The actions are taken forward by providers, local authorities, housing associations and other key partners. The coalition's themes for future work are:

- Citizenship and community.
- Ensuring and protecting people's rights.
- Person-centred choice and control.
- The importance of good partnership working to create a supportive system.

They told us what good support and care looks like: 'It starts with the person and working out what they need and want; building a plan around their needs and aspirations, the choice to live alone, supporting people to have a life, to be connected, to grow, to develop ... whatever the person needs and what is right for them.'

By year end, we want the coalition to be led independently from the CQC, by the very people who are part of it. I encourage you to join the group. The coalition is open to people like you, from advocacy groups, care providers, clinical commissioning groups, local authorities and housing developers – you can join or advocate with consent, on behalf of someone who has experience of supported living. Email SupportedLivingImprovementCoalition@cqc.org.uk to get involved.

ICS AND LOCAL AUTHORITY ASSURANCE

The needs of people, including those with a learning disability and autistic people, will be central to how we review local authorities' provision of social care, and to our assessment of Integrated Care Systems, starting from April 2023. We are developing and testing our approach in collaboration with local authorities, system leaders, providers and people who use services. In spring, we ran co-production workshops to inform and influence our approach. Recently, a follow-up session shared the themes from those workshops and how we're responding. Watch this on our YouTube channel, where we also outline the current thinking in our approach.

> ***"Whilst we acknowledge providers are delivering good and outstanding care, we continue to expose poor practice"***

The collective action of all of us connected to adult social care – people who use services, families and carers, providers and commissioners, and CQC in our regulatory role – will bring about the greatest improvements for people with disabilities and autistic people. To collaborate, join our co-production events, share feedback on Citizen Lab and keep up to date with our regulatory model on our YouTube channel, which includes accessible podcasts. There is more work for us to do to ensure every person has the care they deserve, tailored to their needs.

Debbie Ivanova is Director for People with a Learning Disability and Autistic People at the Care Quality Commission.
Visit **www.caremanagementmatters.co.uk** Twitter: **@CQCProf**

Financial software that helps care homes thrive

Learn how Sage can help:

- **Increase revenues by 25%** without adding additional headcount
- Save over **400 person-hours** annually
- Improve **productivity by 65%**
- **Consolidate hundreds of entities** in minutes
- **Streamline** your operations and **automate** your financials

Find out more:

sage Intacct

NEWS

Sector responds to cost-of-living package

The Chancellor, Rishi Sunak, has set out a package of support to help with the cost of living. This includes several measures, such as £400 for all households, a boost of £650 for people in receipt of means-tested benefits, extra support for pensioners and an extra £150 for people in receipt of disability benefits.

Access Social Care, the organisation that offers free legal advice and support to people who access care, said the Chancellor's failure to address the pressures on social care will lead to millions of older and disabled people going without the social care they need and have a right to.

Kari Gerstheimer, Chief Executive of Access Social Care, said, 'We welcome the announcement from the Chancellor of the Exchequer that targeted financial support will be provided to those in need, alongside one-off disability and pension payments.

'Nevertheless, older and disabled people will continue to bear the brunt of the ongoing financial crisis, and their plight will undoubtedly worsen once winter is upon us again. Without additional funding from the Government, the most vulnerable in our society will continue to be neglected and deprived of the care that they are entitled to.'

Helen Walker, Chief Executive of Carers UK, said, 'They [carers] have been struggling with decisions every day about whether to heat or eat and they've been terrified about what this will mean for them and their family. However, there are several hundred thousand carers who don't receive means-tested benefits, but who are in receipt of Carer's Allowance, the main carers' benefit. They will be shocked and devastated to see that they won't get any of the extra payments of £650 even though Carer's Allowance is the lowest benefit of its kind at only £69.70 per week and [they] won't even get an extra £150 alongside people who are in receipt of disability benefits.

'Carers continue to provide unpaid care worth £530m per day – with a combined total since March 2020 of over £400bn. Many of these people have had to make huge sacrifices to do so, including giving up their paid jobs.'

New ONS figures on self-funded care

The Office for National Statistics (ONS) has published new data, sharing an estimation of the size of the self-funding population in care homes in England.

These latest insights include data covering the period between 1st March 2021 and 28th February 2022 and are broken down by geographic variables and care home characteristics. The data included the following main points:

- There were an estimated 360,792 care home residents in England which is a 7.9% reduction from before the coronavirus pandemic (2019 to 2020: 391,927); of these, 34.9% (125,954) were self-funders, which is a 12.4% drop compared with pre-coronavirus pandemic figures (143,774; 36.7% of the total).
- The South East had the highest proportion of self-funders in care homes (44.1%), which is significantly higher than the North East, which had the lowest (21.5%).
- Care homes located in the least deprived areas had a significantly higher proportion of self-funders (52.5%) than care homes in the most deprived areas (18.7%).
- Smaller care homes, with one to 19 beds, had the lowest proportion of self-funders (12.5%), which is significantly lower than all other care home sizes.
- Care homes providing care for older people had the highest proportion of self-funders (47.1%), which was significantly higher than all other care home types; care homes for younger adults had the lowest proportion of self-funders (1.9%)
- The coverage of the care home population has improved in this release (68.6%) compared with the previous release (39.1%); statistical comparisons between years cannot be made because of differing response rates from care homes in each year.

Dr Charles Armitage, Chief Executive and Founder of Florence, said, 'The Government has squandered a huge opportunity to dive deep into the systemic reform needed in the health and social care systems that is forcing so many to pay astonishing rates when self-funding. Ultimately, the worsening staff crisis is leading to unforeseen wait times and forcing many to pay for care they barely have access to. Implementing the right reform at the heart of the system is the way forward.'

APPOINTMENTS

ANCHOR

Anchor Hanover Group has announced the appointment of Sarah Jones as Chief Executive from August following Jane Ashcroft's decision to step down from the role at England's largest not-for-profit provider of housing and care for older people. Sarah is currently Anchor's Chief Financial Officer and has been a member of the Anchor Board since 1st April 2020.

Jane has held senior roles at Anchor for more than 20 years, including 12 years as Chief Executive. She was made a CBE in 2013 for services to older people.

BIELD HOUSING AND CARE

Nikki Ritchie has been appointed by Bield Housing and Care to help position it as the employer of choice in the sector, while targeting increased staff development and retention and the delivery of industry-leading levels of service. She brings more than 20 years of senior-level experience to the role, serving most recently as Head of Organisational Development, HR and Learning and Development at Historic Environment Scotland, where she spent more than 10 years.

CQC

Sir Robert Francis QC has announced that he will step down from the board of CQC, of which he has been a member since 2014. He will also retire as Chair of Healthwatch England, leaving both roles in November.

Announcing his retirement, Sir Robert said, 'It has been a privilege to serve on the CQC Board and as chair of Healthwatch England. This unique position has enabled me to raise the issues which really matter to patients, service users and those close to them.'

The Department of Health and Social Care will start the recruitment process for a new CQC board member and Healthwatch Chair shortly.

New report reviews social care leadership

A new independent report has been published exploring leadership across health and social care in England.

In October 2021 the Government announced a review into leadership across health and social care, led by former Vice Chief of the Defence Staff General, Sir Gordon Messenger, and supported by Dame Linda Pollard, Chair of Leeds Teaching Hospital Trust.

The review focused on the best ways to strengthen leadership and management across health and with its key interfaces with adult social care in England. Following extensive stakeholder engagement, the review has now completed with the following seven recommendations:

- Targeted interventions on collaborative leadership and organisational values.
- Positive equality, diversity and inclusion (EDI) action.
- Consistent management standards delivered through accredited training.
- A simplified, standard appraisal system for the NHS.
- A new career and talent management function for managers.
- Effective recruitment and development of non-executive directors (NEDs).
- Encouraging top talent into challenged parts of the system.

All seven recommendations have been accepted by the Government and publication of the report will be followed by a plan committing to implementing the recommendations.

Professor Martin Green OBE, Chief Executive of Care England, said, 'The publication of the review presents a window of opportunity for greater collaboration between adult social care and the NHS. We hope that this report will signal a new era of cross sector partnership through leadership and a greater parity of recognition, with equal esteem between health and social care sectors.'

Professor Vic Rayner OBE, Chief Executive of NCF said, 'There is nothing of substance in this report for social care leaders across the country, grappling right now with all of the same challenges around workforce and pressure that those in the NHS experience. Instead, the review focuses on secondary healthcare problems and solutions – it is not the leadership review of health and social care it purports to be.'

Providers urged to check data protection

All care services across England are being encouraged to check and improve how they store and share information.

It is part of a national and local programme – Better Security, Better Care – to improve data protection and cyber security within the adult social care sector. The programme is also reminding services that the Data Security and Protection Toolkit (DSPT) needs to be completed every year. The deadline for 2021/22 is 30th June 2022.

The Better Security, Better Care programme supports providers to use the official DSPT to assess and improve their current policies, procedures and practices on data management and cyber security and to share the level they reach on the Toolkit with others.

Having an up-to-date DSPT is required under NHS contracts and is increasingly being added to local authority contracts. The DSPT also opens up access to secure email with the health service via NHSmail, and it is a prerequisite for accessing NHS shared records systems such as GP Connect or proxy medication ordering.

The Better Security, Better Care programme offers expert advice to care homes, homecare agencies, supported living and other care services for adults on how to check and improve their current data protection. This includes both national and local support from 28 Better Security, Better Care local arrangements partners right across England.

Find out more at www.digitalsocialcare.co.uk/bettersecuritybettercare

Book free webinars on using the DSPT in June and July at https://www.digitalsocialcare.co.uk/events/

Learning lessons from COVID-19

A new £265,000 study led by the University of Stirling is seeking to understand how the COVID-19 pandemic has affected health-visiting services across the UK, with a view to improving them in the future.

The 18-month project – funded by the National Institute for Health and Care Research (NIHR) – will explore the changes that health visiting has experienced over the past two years and provide recommendations to enhance organisation and delivery as part of a strong post-pandemic recovery.

Dr Erica Gadsby, a Senior Lecturer in Public Health from Stirling's Faculty of Health Sciences and Sport, is Principal Investigator on the new project, which began on 1st June and also involves researchers at the Universities of Oxford and Kent.

Across the UK's four nations, devolved Government policies and opinions differ as to how services are best organised and delivered, and there is limited research-based evidence to inform what works best where.

The team includes realist review, health visiting and public health experts, as well as a patient and public involvement lead. A stakeholder group – comprising practitioners, commissioners, policymakers, policy advocates and members of the public – will advise and provide feedback throughout the project.

Signature gets a creative touch

One resident at local care home, Signature at Elstree, has been inspiring both residents and team members to pick up the paint brush and begin their own artistic journey.

Betty Chapman has always been drawn to the creative side of life. Over the course of a long and successful theatre and film career, Betty performed in the iconic West End and toured the country starring in countless productions. After she arrived at Signature at Elstree in July 2021, aware of Betty's wonderful talents, the care home team were eager to do their part and allow her to continue to express her artistic flair. Inspired by her talents, the team decided to introduce an art studio as a permanent area for residents to continue to paint. Betty was quick to embrace this opportunity and over the past year has spent much of her time working in the art studio.

Alongside working on her own pieces of art, Betty has also inspired many residents and team members at the care home to embark on their own creative journey and express their artistic flair.

WASHCO
LEADERS IN LAUNDRY

LOVE LAUNDRY

We understand how important laundry equipment is to your care or nursing home. Our goal? To make it simple.

Safe and sound

Helping you create an infection-free environment.

Made for you

Bespoke laundry and finance options to suit you.

Count on us

Professional, approachable and at your service.

LOVE LAUNDRY AWARDS

Nominate your laundry hero
washco.co.uk/lovelaundryawards

08000 546 546 | WASHCO.CO.UK

WASHCONNECT Miele Speed Queen primus

Charities unite for Carers Week 2022

Carers UK and six other charities are calling on the Government to outline additional support for carers.

Carers Week is led by Carers UK, with the support of Age UK, Carers Trust, MND Association, Rethink Mental Illness, Oxfam GB and the Lewy Body Society.

The annual campaign aims to raise awareness of caring, highlight the challenges unpaid carers face and recognise the contribution they make to families and communities throughout the UK. It also helps people who don't think of themselves as having caring responsibilities to identify as carers and access much-needed support.

Support outlined in the calls to Government includes breaks for carers, respite and care services, infection control, identification of carers, financial help and support to juggle work and care.

The COVID-19 pandemic has had a monumental impact on unpaid carers' lives – not only because of the increased amount of care that many provided but because of the far-reaching effect that providing this level of care has had on unpaid carers. The charities said that many people also took on new caring responsibilities for their relatives and friends who are disabled, ill or older and who need support.

Charities say increased support will go some way towards helping to mitigate some of the negative impacts that caring can have on carers' own physical and mental health. New research, based on a Carers UK survey of over 3,300 carers that was undertaken in February 2022, reveals the financial pressure on unpaid carers has become untenable.

Annual State of Care report published

Access Social Care has published its annual State of the Nation report, which reveals a staggering 229% increase in the number of social care needs assessment enquiries in the year 2021/22.

This second annual State of the Nation report is based on a data collaboration project in partnership with Royal Mencap Society, Age UK, Carers UK and Independent Age. With the use of 74,000 separate data points, the report outlines the key challenges facing people who need social care and looks at the extent to which advice demand and provision has changed.

There has been an 88% increase in enquiries relating to specialist legal advice in the year 2021/22, compared to 2019/20. The number of enquiries regarding problems or concerns about existing social care and support rose by 43% in the year 2021/22 compared to 2019/20. The wellbeing of both care users and care providers has continued to spiral downwards, because of the widening gaps in necessary support needed for people to live fulfilled and meaningful lives. This pressure on capacity has meant that helplines have been required to take on additional staff and expand opening hours to cope with the increase in demand on their services. Household bills continue to soar, the lifetime cost of care cap has been announced, and there has been a wider adoption of the minimum income guarantee (MIG) which has failed to rise in line with real time inflation.

Caroline Abrahams CBE, Charity Director Age UK, said, 'The findings in this report provide clear evidence of a system under severe duress. Councils are struggling to discharge their responsibilities to people in need of care and support and are having to adopt explicit prioritisation measures to deal with the overwhelming demands they face.'

R&RA writes to CQC to update guidance

The Relatives and Residents Association (R&RA) has written to the Care Quality Commission (CQC) to express profound concern about its guidance on managing infection in care homes.

The letter is the latest in an exchange with the CQC during the pandemic expressing disappointment with the lack of action by the regulator, which R&RA feels has left older people at risk and led to continued suffering.

R&RA has repeatedly called on the CQC to take a proactive role in monitoring compliance with the Government guidance on visiting to end the harmful impact of isolation. The organisation hears daily from family members and carers on its helpline. The call includes requesting care homes to make their visiting policy publicly available and to report current practice to people, so this can be assessed against the regulations in CQC's inspections and reports. The letter to the CQC has criticised the delay in COVID-19 infection control guidance being updated and R&RA has said the disparity in the Government guidance compared to the CQC guidance is 'shocking' and notes that it's a vital tool for providers to use in order to manage their policy.

For example, the R&RA said encouraging the use of booking systems to limit the number of people visiting a home is in direct contradiction with Government guidance, which states there should not normally be any restrictions on visiting. The campaigning group added that it is also inevitable that booking systems designed to limit access undermine individual residents' needs and the right to family life as they work on a first-come, first-served basis rather than according to individual care plans.

JCVI publishes advice on COVID-19 booster

The Joint Committee on Vaccination and Immunisation (JCVI) has provided interim advice to the Government regarding coronavirus (COVID-19) booster doses this autumn.

JCVI said the advice should be considered as interim and for the purposes of operational planning for the autumn, the NHS, care homes and the wider health community.

The committee recognises that there is considerable uncertainty with regards to the likelihood, timing and severity of any potential future wave of COVID-19 in the UK in the year ahead.

Following the objective in autumn 2021, the primary objective of the 2022 autumn booster programme will be to increase population immunity and protection against severe COVID-19 disease, specifically hospitalisation and death, over the winter period.

The JCVI's current view is that, in autumn 2022, a COVID-19 vaccine should be offered to:

- Residents in a care home for older adults and staff.
- Front-line health and social care workers.
- All those 65 years of age and over.
- Adults aged 16 to 64 years who are in a clinical risk group.

The JCVI will continue its ongoing review of the vaccination programme and the epidemiological situation, particularly in relation to the timing and value of doses for less vulnerable older adults and those in clinical risk groups ahead of autumn 2022. The committee will announce its final plans for the autumn programme, including further detail on the definitions of clinical risk groups, in due course.

FAMILY MEMBER OF Manutan

Call or go online

0300 303 88 21

IronmongeryDirect.co.uk

Request your **FREE** catalogue here

*Exclusions apply. See website for full delivery T&Cs.

Adult social care white paper

An adult social care (ASC) engagement white paper from the Good Governance Institute (GGI), Care England and the Homecare Association has been published. The white paper is designed to explore the extent to which the ASC sector is being appropriately engaged in the ongoing development of Integrated Care Systems (ICS).

The purpose of ICS is to deliver properly joined-up care, so that people accessing health and care services experience them as seamlessly as possible.

Despite this, it seems that effective engagement among ICS with the ASC sector has not been consistent, Care England reports. According to Care England, much of the recent focus in healthcare has been more on post-pandemic restoration and recovery, although even that situation still seems to be changing rapidly. The adult social care engagement white paper sets out to explore these topics.

Key recommendations include:

- ICS note that the social care partner member on the Integrated Care Board (ICB) will not necessarily be able to effectively represent providers and, therefore, ICS should workwith providers to develop more effective engagement mechanisms.
- ICS should develop a plan about how to engage with ASC providers and involve them in the process.
- ICS should have a provider forum or liaise with local care associations, which nominates a representative to the ICS Partnership Board.
- ICS should ensure that ASC providers have a role in the new local place arrangements, the Integrated Care Partnership (ICP) and/or the ICB, perhaps through the creation of a paid position that is tasked with furthering the ASC agenda and educating others around them on the issues facing the sector.

You can read the paper by visiting the Good Governance website.

Sector response to RCEM report

The adult social care sector has issued its response to the Royal College of Emergency Medicine's (RCEM) 'Beds in the NHS' report.

The RCEM report has revealed that 13,000 more staffed beds are required across the UK. The report details that, since 2010/2011, the NHS has lost almost 25,000 beds across the UK and warns that since then, the health service and its staff have faced accumulating pressures.

The adult social care sector's response to the RCEM report argues that solving the staff shortage and underfunding problems affecting the social care system is essential for easing the pressure on the NHS.

Continuing the sector's response to the RCEM report, Cllr David Fothergill, Chairman of the Local Government Association's (LGA) Community Wellbeing Board, said, 'With high vacancy levels in all areas of social care, the workforce doesn't have the capacity to deliver what is currently required to get people where they need to be with an appropriate level of care. The system is also suffering from long-term underfunding and the situation continues to worsen with increasing unmet and under-met need.

'The LGA has been warning of the increasingly urgent need for sustainable funding and support for social care for some time and said vital action is needed to improve this situation, not just to free up hospital beds but to put social care on a sustainable footing, recruit and retain, and increase the pay of staff and allow the sector to thrive.'

IN FOCUS

Cost of reforms report

WHAT'S THE STORY?

A new report from the County Councils Network (CCN) and Newton examines the cost of the Government's flagship adult social care reforms. The report reveals the regional impact on local authorities, concluding that the costs of these proposals could be significantly underestimated.

WHAT WERE THE FINDINGS?

The report estimates that the cost of reforms could be a minimum of £10bn higher than currently estimated and could create a further workforce crisis in social care, with over 5,000 extra staff projected to be required to carry out extra care and financial assessments for those seeking to benefit from the reforms.

Some of the findings include: The cost of the care reforms, including the cap and means test for over 65s, a new 'fair cost of care' and administrative overheads in England will cost a minimum of £25.5bn over the next decade. This compares to the Government's estimate of £15.6bn for the same elements of the reforms. The analysis suggests more people will benefit from some financial support under the means test and cap, meaning the cost of this element alone is £2.5bn higher than Government projections.

There is a significant regional variation in the cost of implementing the reforms, county and rural areas, which are predominately in the South, East and West of England, account for 64% of the total cost of the means test and cap on care costs over the next decade. As a result, county and rural areas could face a minimum funding deficit of £7.6bn unless the Government provides more funding and changes the way it allocates resources between councils. The South East faces a potential minimum funding shortfall of £3.8bn, the East of England £1.7bn, the North West £1.6bn and the South West £1.3bn.

The report projects that an extra 200,000 care and financial assessments will be required annually, which determine the level of support an individual receives, at a cost of £1.9bn to councils over the next decade. Some 3,000 additional new social workers and financial assessors will be required in county and rural areas – 60% of all new recruitment.

The Health and Social Care Levy will generate an extra £12bn in annual revenue earmarked for both the health service and social care, but only £1.2bn in each of the next three years has been committed to social care reforms so far.

WHAT DID THE EXPERTS SAY?

Cllr Martin Tett, Adult Social Care Spokesperson for the County Councils Network, said, 'There is clear support from local Government for the Government's package of social reforms, which will make the system fairer and ensure that more people do not face catastrophic care costs.

'We urge ministers to clearly examine these findings, which show costs are likely to be higher than the Government is forecasting, and potentially devastatingly so in some regions.'

Government must back dementia ambition

Alzheimer's Research UK said the Government must increase funding for dementia research if its bold approach to tackling dementia is to be successful. Sajid Javid, Secretary of State for Health and Social Care, said in a recent speech that he has an ambitious plan to tackle the dementia crisis, which will be unveiled later this year when the Government publishes its dementia strategy.

The Health Secretary acknowledged that economic growth, medical breakthroughs and vastly improved health and care services have seen life expectancy increase by more than a decade in our lifetimes. He called it one of the 'great triumphs of the 21st century'. However, this won't be the case for everyone and, by 2025, one million people in the UK are expected to have dementia and that is expected to rise to 1.6 million by 2040.

There has been some evidence of commitment from the Government – the Challenge on Dementia 2020 was seen as a landmark piece of work, which saw a million care workers and a million NHS workers receive dementia awareness training. Over the five years of the strategy, the Government invested some £420m into dementia research.

However, the pandemic has stemmed the tide of progress. Alzheimer's Society has estimated over 30,000 people didn't receive a diagnosis because of the pandemic and tens of thousands of people are still missing out on a dementia diagnosis each year.

Autism and learning disability training creates positive change

A trial of learning disability and autism training has had a positive impact on health and care staff's knowledge, skills and confidence.

The new training is named after Oliver McGowan, who died in 2016 after being given antipsychotic drugs by hospital staff, despite protests from himself and his parents.

The Health and Care Act 2022 has now created a requirement for CQC-registered service providers to ensure their employees receive learning disability and autism training appropriate to their role.

Between 80% and 94% of people who did the tier-two training agreed or strongly agreed that it had given them new information about learning disabilities, made them more aware of the needs in healthcare settings of people with a learning disability and autistic people, and given them new ideas for things to do to better support people with learning disabilities and autistic people in their own work.

The training was co-designed, delivered and evaluated alongside people with learning disabilities, autistic people and those with lived experience. The report on the training trials will be used by the Department of Health and Social Care to prepare for a wider rollout of the training to all health and care staff.

A summary of the key findings from the trial was presented at an online event, which gave an update on the programme's progress.

Visit the National Development Team for Inclusion training website to view the evaluation in more detail.

NHS Digital launches new cyber security resources

NHS Digital's security awareness toolkit, Keep I.T. Confidential, has been updated to help support social care organisations to improve security culture within their care settings.

The free campaign materials, developed in partnership with Digital Social Care, are specifically designed to be used by social care organisations to help improve staff knowledge of cyber security concerns such as phishing, data sharing, unlocked screens and weak passwords.

Assets included in the toolkit are:

- Screensavers.
- Web banners.
- Social media graphics.
- Suggested copy for bulletins and newsletters.

The campaign, which first launched in 2019 to clinical staff in healthcare organisations, has now been updated to meet some of the challenges faced by the social care sector.

The materials are relevant across all types of adult social care, such as nursing homes and supported living.

Michelle Corrigan, Programme Director, Better Security, Better Care, said, 'Our sector is making good progress, with increasing numbers of care providers demonstrating that they have good data and cyber security arrangements in place, by using the official Data Security and Protection Toolkit. But there is definitely room for improvement.

'The Keep I.T. Confidential campaign provides valuable, clear advice for care staff and we encourage everyone to share these messages widely.'

New report on sign language and dementia

The British Deaf Association (BDA) marked Dementia Action Week 2022 with a campaign to raise awareness of the unique social, cultural and linguistic needs of Deaf British Sign Language (BSL) signers living with dementia.

The campaign will highlight two key pieces of work led by the BDA Scotland, the Deaf Dementia Research Project and the Transforming the Deaf Dementia Experience Project.

In March 2022, the BDA published the findings of the Deaf Dementia Research Project, funded by the Life Changes Trust and led by BDA Scotland in partnership with SORD (Social Research with Deaf people) at the University of Manchester. The project aimed to find out how to improve care homes for deaf people with dementia.

Some of the report's recommendations included:

- Creating guidelines for best care for Deaf people with dementia in care homes.
- Employing Deaf BSL staff.
- Training more Deaf BSL cultural advocates and befrienders.
- Improving BSL and Deaf Awareness training for care home providers.
- Enhancing inspection to include specific cultural elements relating to Deaf people and providing information about care home options in an accessible BSL format.

The Transforming the Deaf Dementia Experience Project is a community interest initiative that supports Deaf people living with dementia and their carers. The project aims to promote a better understanding of dementia by developing accessible resources, information and toolkits in BSL.

IMPROVING QUALITY & COMPLIANCE ACROSS YOUR CARE HOME

Digitalise and improve your manual processes with our all in one risk, quality and compliance software

- **Create, schedule and monitor your required audits**
- **Manage incident reporting and create automated action plans**
- **Workforce compliance - show regulatory bodies all training documentation in one place**

> The most important thing for us as a business is that we are providing the best care possible to our residents. By simplifying our systems stack and streamlining our business processes with Radar Healthcare, we've been able to save our operations team valuable time that they can now spend caring for our residents, rather than completing documentation.
>
> **CRAIG RAINFORD, OPERATIONS SYSTEMS MANAGER AT FOUR SEASONS HEALTH CARE GROUP**

radar healthcare

Book your consultation of our award-winning software:

radarhealthcare.com

0330 223 2740

NEWS FROM ACROSS THE GLOBE

Social care training for international students

Oxford International Education Group (OIEG) is preparing international social care students to become workplace ready, through its Continuing Care Assistant (CCA) Programme as part of its ongoing partnership with the East Coast International College (ECIC), in Halifax, Nova Scotia, Canada.

This is in response to an overall shortage of qualified carers in the region, as 25% of vacancies in Nova Scotia are going unfilled.

With 21% of the population over 65, the ageing population requires trained and experienced care professionals to fill vacancies.

The CCA Programme is a vocational course for existing care workers or those with relevant care experience in their home country to study for 40 weeks in Halifax. It includes a work placement in Nova Scotia so students can gain experience and opportunities for further career progression into the care sector. On completion of the course, graduates can choose to apply for settlement to continue their care careers via the International Graduates in Demand Stream (IGDS) for immigration into Canada. As an incentive, OIEG will refund tuition fees if qualified students fail to secure long-term employment as a Continuing Care Assistant after their training is complete.

Sheila Nunn, Director of Business and Partnerships from ECIC, said, 'Without a significant intake of care staff, there will not enough people in the social care system to aid the elderly and those needing help in Nova Scotia, but throughout Canada.

'International students offer a plethora of knowledge, skills and motivation, and will also boost the local economy. Our programme with OIEG means we can provide real-life experiences for our students while they study, preparing them for careers in the care profession.'

Social isolation linked to higher dementia risk

Researchers from China and the UK have found that social isolation, but not loneliness, is linked to lower brain volume in regions associated with cognition and higher dementia risk. The findings have been published in the journal, Neurology.

Dr Sara Imarisio, Head of Research at Alzheimer's Research UK, said, 'Researchers from this study were able to distinguish the effects of social isolation from loneliness on the brain and dementia. They observed that people who were socially isolated were more likely to develop dementia and that loneliness was not associated to an increased risk of developing dementia. This finding may inform future approaches to reduce risk of dementia in older people living isolated lives.

'The group of participants studied had fewer health conditions and were less likely to live alone compared to the general population, so we can't be certain how relevant these findings are to the country as a whole. We will need further studies that are more representative of the wider population to validate the conclusions of this research.'

Opening doors to ageing services

The Global Ageing Network's members have participated in a webinar to learn about LeadingAge's Opening Doors to Aging Services, a long-term, local-national initiative designed to raise awareness of the ageing services sector. LeadingAge represents more than 5,000 non-profit ageing services providers and other mission-minded organisations in the United States.

Susan Donley, Senior Vice President of Communications and Marketing at LeadingAge, and Gwen Fitzgerald, Director of Public Messaging at LeadingAge, outlined how the initiative delivers original research on perceptions of the field, as well as communications strategies, guidance and tools.

Research found that while perceptions of the field are mixed, they are more favourable than unfavourable. But a solid one-third of US adults don't know how they view the field. This presents the opportunity to inform them of the availability of services and benefits of the services for older adults. A second foundational finding is that people with experience with ageing services have strongly favourable views.

The Opening Doors to Aging Services strategy incorporates eight components for providers to communicate effectively with the public: encourage them to look inside ageing services, demonstrate your commitment to delivering quality services, showcase caregiving professionals, emphasise independence and strength, focus on the needs of older adults and their families, not providers, talk about us (not them), using inclusive language, frame ageing as a basic right for everyone and emphasise public support for greater Government investment in ageing services.

Katie Smith Sloan, Executive Director for LeadingAge and the Global Ageing Network, said, 'There is no fast way for changing widely held public views. But with these new strategies and resources grounded in research, we have a significant opportunity to proactively define the ageing services sector for millions of people around the world. I'm incredibly proud of this groundbreaking initiative and think you will agree that Opening Doors is truly a gift to the field. I look forward to working together in 2022 as we bring this important initiative to life.'

Opening Doors to Aging Services guidance and materials are applicable to all provider settings and for organisations of all sizes. Much of the initiative is publicly available to anyone in the sector, to broaden the work's impact. Review the in-depth research and full communications strategy at https://openingdoors.org/

LeadingAge has also created a new public service campaign developed with Opening Doors strategies, Keep Leading Life. Visit https://keepleadinglife.org/ The campaign seeks to inform the public about the breadth of available ageing services.

MAKING AN IMPACT

When COVID-19 hit care homes, many felt completely alone. Tayvanie Nagendran, who describes the early days as like living a parallel life to those around her, found that connection was key. From this, she and colleagues created Care Providers' Voice, an organisation which is collaborating widely to break down barriers long pre-dating the pandemic and rebuild innovative structures in their place.

Care Providers' Voice (CPV) is a network connecting care providers across London, with a focus on North East London. Our platform is free to access and has been created by providers, for providers, to collate resources, ensure care providers are represented and to support recruitment.

The idea for CPV first came about when Mike Armstrong and I were introduced to one another in the early days of the pandemic by our Skills for Care locality manager. It was a very lonely time. Friends did not understand what we in social care were going through. Guidance was changing all the time and teams were looking to us for answers, when often we did not have them. The need for peer-to-peer support became very apparent, and it was from this desire to support one another, break this sense of isolation and get a fairer deal for care that CPV was born.

In two years, we have developed from this support system for local providers into a unified voice bringing about permanent, useful change via collaborative working and communication. We now sit on a range of groups at borough, sub-regional and regional levels across London, with a real focus on ensuring the voice of the care sector is heard and acted on.

COLLABORATING FOR CHANGE

We have partnered with local authorities, Skills for Care, North East London Health and Care Partnership (NEL HCP), Care City, Department for Work and Pensions, Job Centre Plus and Barking & Dagenham, Havering and Redbridge Community Education Provider Network (BHR CEPN) to find new ways in which we can all support each other to reach our mutual and independent goals. This includes supporting Job Centre staff to understand who to put forward for roles in social care, helping local authorities to have constructive conversations with care providers, and engaging providers with training opportunities for their staff.

CPV's new website shows the benefits of working in this way. It is a member portal where our partners can list opportunities and information for providers. One key feature of the site is a shared calendar where partners can input their events, training courses and other relevant activities and providers can access a single point to find this information. Working with NEL HCP, NEL Careers Website and Skills for Care allows us all to collate resources, rather than duplicating work and ultimately creating a jarring experience for providers and partners.

We have formed extremely positive relationships with local authorities – we even work out of their offices now – and it's come as a result of admitting that, historically, both parties have made mistakes. The council would hold meetings to hear from providers, but providers felt they weren't listened to and stopped attending, so councils stopped holding them. We have worked to bring back these forums; we ensure that providers do attend and we support the council to make changes in line with what providers are telling them. Everyone benefits.

Ben Campbell, Commissioning Program Manager at London Borough of Havering Council, says, 'The London Borough of Havering and care providers in the borough have been working together for a number of years developing and building a strong relationship which is to the benefit of all.

'There was a desire from both care homes and the council to work on a project together that would involve a positive dialogue and deliver shared benefits. One of the first such projects concerned the review of the usual rates for care. Previously a contentious issue, Havering Care Association (HCA) helped put forward the collective concerns and issues of the market and jointly agreed an approach with the council that would show greater transparency. This has resulted in an improved process that has been positively received by both providers and the council. There have been many other successful joint initiatives, but the recent pandemic has demonstrated the benefit of the relationship. HCA and the council worked together to find solutions to difficult situations, provide mutual support and help keep residents safe and receiving good-quality care.

'HCA have extended their reach to include homecare providers and now those providing supported living services and, in partnership with CPV, cover all care providers in neighbouring authorities, which has provided greater scope for joint working.' >

> LEADING THE WAY

It is clear that the work we do is valued by those across the system in North East London, with the London Boroughs of Redbridge, Havering and Barking & Dagenham having recently funded us to deliver a new care recruitment initiative.

We are working with care providers in the three boroughs to list their vacancies and opportunities, ranging from full-time work to student placements, on our website. We see this as similar to the NHS Jobs site (though on a smaller scale) – somewhere that candidates can easily see and apply for local opportunities.

We also run regular sessions supporting providers through the recruitment process, and risk assessment workshops to help disproportionately disadvantaged groups to enter the workforce. We have partnered with Grey Matter Learning, a Skills for Care-endorsed training provider, to offer two years' free training to BHR providers to encourage them to take on new entrants to the sector.

As providers, we have agreed to remove the element of competition and turn it into support, recognising that the best candidate is the one who is best suited to the job. For example, if a new hire in a care home seems more suited to a job in homecare, or decides they'd rather take that route, we work together with them and members of CPV to help them secure a job in a homecare service that is looking for a new recruit. This goes all the way down to personality matching, too.

From a partner perspective, the BHR employment teams and Job Centre work advisers are signposting candidates to register on our website, and our Job Brokerage Officer is visiting Job Centres in each of the boroughs weekly. We host monthly 'Inspired to work in care' virtual sessions that are open to any work adviser to promote the amazing web of opportunity in the care sector and to answer questions. A Care Ambassador from a care service supports the session so that they can both promote their own service and answer practical questions as an employer.

Since the launch of the initiative on 16th March 2022, CPV has had over 800 applications from those wanting to work in the sector. There have been 30 successful placements and 11% of those are new entrants to the sector.

We are also currently working in partnership with the BHR Training Hub to appoint a Nurse Educator Facilitator who will support the apprentice nursing associate (ANA) and registered nurse degree apprenticeship (RNDA) programmes in primary and social care and the expansion of clinical placements. We have also partnered with London Borough of Barking & Dagenham to appoint a Social Care Sector Coordinator who will proactively support the social care sector in BHR.

All of this has only been possible because we have brought together parties with a shared goal. Funding from the local authorities proved that they had trust and confidence in us, because they had seen what we could deliver. And we are confident that it will continue to work, that by putting providers in control, so much more will be achieved.

Anthony Pardoe-Matthews, Head of Service at London Borough of Redbridge, says, 'One of the benefits and learning from the experience gained during the pandemic, across the local authority and wider, is the need to both recognise and break down some of the barriers that have existed in the past between statutory agencies such as the local authority and providers of care. Ultimately, the forging of relationships that did not previously exist, and the strengthening of those that did, has provided the foundation for greater opportunities to support the health and social care system, and the most significant of these is CPV.

'CPV was supported through joint funding across Barking, Havering and Redbridge (BHR) councils. The immediate priority is to identify opportunities and engage across all care sectors to support providers with recruitment, retention and succession planning of the workforce. CPV being managed by local providers representing the interests of all sectors leads to more effective use of local authority resources and also promotes a more meaningful engagement with providers, breaking down previous barriers. The aim of both local authorities and providers is aligned to market sustainability and one of the more contentious issues is the cost of care, which is itself impacted upon by issues that affect the workforce. The value of this collaboration has meant that we as local authorities act as facilitators to support CPV to make the most of the opportunities they are able to unlock.

'The CPV Directors have already demonstrated both the opportunity and value of collaboration across BHR and have opened doors to opportunities for local authorities to support all providers across the area.'

SUCCEEDING TOGETHER

As it stands, two years after we set out, CPV reaches over 280 providers in North East London through our networks. We engage with two thirds of care providers in Redbridge, Havering and Barking & Dagenham.

CPV is a unique example of how true support and commitment to partnership can make a real change for the health and social care sector. For us, it is important not just to be heard, but to be part of the positive action. Social care is a rich tapestry of ideas and intelligent and interesting people, and we believe that, together, we can help the whole of health and social care succeed. **CMM**

Tayvanie Nagendran is Co-Chair at Care Providers' Voice. Email: **hello@cpvnel.co.uk** Twitter: **@cpvnel**

What do you think of the work CPV is doing? How could this work in your area? Share your thoughts and feedback on the feature at **www.caremanagementmatters.co.uk**

Leecare: UK's leading healthcare solution.

Leecare's clinically robust Platinum5 system is paving the way in clinical governance.

Over 1,000 clients throughout the United Kingdom, Australia, New Zealand, Singapore, Zimbabwe and China agree this fully integrated clinical, medication, operational and financial dashboard keeps real-time resident and facility data at your fingertips.

Designed for the industry, by the industry.

Request a demo of Platinum5 today.

Platinum5




The choice is in your hands.

leecare

Petrina Turner-Benny
Deputy CEO / UK Executive Director
0773 277 53 85
Petrina.T@leecare.co.uk

Annick Guirate
Consultant / Trainer
0773 529 47 45
Annick.G@leecare.co.uk

leecare.co.uk

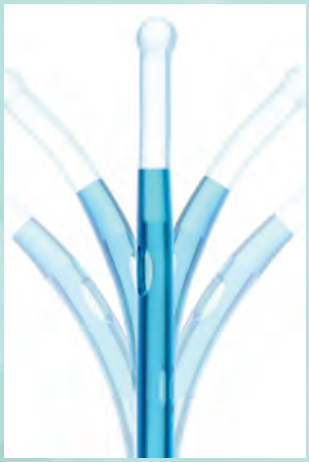
iQ-CATH female single-use catheter, ready to use immediately

Available on prescription

iQ CATH FEMALE

4-6 times a day, 150 times a month, 1,800 times a year.
This is how often an average user of intermittent self-catheterisation inserts a catheter. This is why the quality and application safety of the catheter are crucial.

Advantages of using the iQ-CATH female



Unique soft and flexible rounded tip
This combination allows the catheter to smoothly follow the path of the urethra.

For convenience, the catheter is immersed in saline for immediate use.

Male and paediatric catheters also available

MANFRED SAUER UK

For more information, please contact the helpline on:

01604 595 696

helpline@manfred-sauer.co.uk

Or visit: **www.manfred-sauer.co.uk**

FREE HOME DELIVERY SERVICE
Providing a personal service from a professional team.

MANFRED SAUER CARE
NHS Prescription Dispensing Services

For your FREE information pack contact **0800 999 5596**
or email **prescriptions@manfredsauercare.co.uk**

A VIEW FROM WESTMINSTER

With so much change happening in Westminster, and with new faces at the leadership helm, CMM caught up with the Minister of State for Care at the Department of Health and Social Care (DHSC), Gillian Keegan, and the Chief Nurse for Adult Social Care, Deborah Sturdy, to find out more about the Government's vision for the care sector.

CMM: WHAT IS THE DHSC'S VISION FOR SOCIAL CARE?

Gillian Keegan: The Government's white paper, 'People at the Heart of Care', was published in December and sets out the department's 10-year vision for the social care sector. People deserve a care system that works for them, and personalised care and support is central to our plans.

In April, the Health and Social Care Levy came into effect and will reform the adult social care system by ending spiralling social care costs, introducing a limit to the cost of care for the first time and striking the right balance between public contribution and people's personal responsibility. I want people to have the choice and control they need to live independent and fulfilling lives and be able to fairly access outstanding quality and tailored care and support delivered by our fantastic social care workforce, who rightly take great pride in the work they do.

Deborah Sturdy: My vision for the workforce is that people experience a rewarding career where they are recognised for the vital work they do, and have the right training and qualifications with their wellbeing at the forefront of all we do. The Government has committed £500m to develop the workforce so they can continue delivering outstanding quality, personalised care and support and I look forward to working with them on initiatives to achieve this.

CMM: WHAT WILL BE THE FOCUS FOR ENSURING A SUSTAINABLE FUTURE OF SOCIAL CARE NURSING? THE RECENT KCL AND NIHR REPORT HIGHLIGHTED THE NEED FOR MUCH MORE RESEARCH – IS THIS SOMETHING THAT IS BEING PLANNED?

DS: Research is one of my top priorities as Chief Nurse for Adult Social Care and that's why I commissioned the KCL report. It's key to shaping our nursing practice and to ensure we're providing safe, effective and high-quality care.

The report highlighted the range of work social care nurses undertake, from clinical practice to education and leadership, while making recommendations to address recruitment and turnover challenges and ensuring the skills of nurses are utilised across the care sector. I'm working with researchers to take these ideas forward and recently held a very positive research roundtable with representatives from across the social care nursing sector, which will inform future research being led by NIHR.

CMM: HOW HAVE PEOPLE USING SERVICES FED INTO THE VISION YOU'VE CREATED?

GK: It was very important to us to hear from those with direct experience of care services when creating our bold vision for social care. We hosted a range of forums with the help of organisations like Carers UK and Think Local Act Personal across England. I am also continuing these conversations with those with lived experiences as we implement our plans for reform to ensure we're getting this right for the people that need it. We spoke to over 200 stakeholders to shape our long-term vision of reform.

CMM: SAJID JAVID RECENTLY SAID THAT £500M WOULD BE GIVEN TO SUPPORT SOCIAL CARE STAFF. HOW WILL THIS MONEY BE SPENT AND WHAT DOES THIS SUPPORT LOOK LIKE?

GK: Social care staff work tirelessly, and we can't thank them enough for the incredible work they do. We are aware of the recruitment and retention challenges and the £500 million will address this, focusing on progression, development and wellbeing.

Through this investment we will develop a knowledge and skills framework to outline the key skills needed for roles, alongside hundreds of thousands of funded training places. Managers will also receive leadership development training and tailored support.

A new Workforce Hub will be a central digital platform that allows staff to identify themselves as working in care, and it will include a new skills passport, so that care workers can keep a permanent record of their training and skills. Both the hub and skills passport will be voluntary in the first instance, establishing a foundation for registration of staff in the future, something we intend to explore further.

The investment also includes budgets for continuous professional development (CPD) to help the whole workforce access learning and development to refresh their knowledge so that they can confidently deliver the best possible care.

The last two years have been immensely challenging for us all, but particularly for those on the front line, which is why the funding will also >

> launch new wellbeing interventions such as talking therapies and improve access to occupational health so that the workforce can get the support it needs.

CMM: WHAT ARE THE PLANS FOR IMPROVING THE IMAGE OF SOCIAL CARE NURSING?

DS: The pandemic has further highlighted the huge contribution social care workers make to society. Having this permanent role and working closely with the Chief Nursing Officer, Ruth May, is important to positioning social care as an equal partner alongside the NHS. I want to develop a new narrative for social care nursing, which moves beyond nursing homes to thinking about nurse-led services, recognising nurses' skills and expertise as central to the success of our care system.

One of my first and ongoing priorities in the role has been to recognise the extraordinary work of social care nurses at a national level, which is why I announced the first Chief Nurse for Adult Social Care Awards in May 2021, to recognise the incredible efforts of nurses and care staff.

I am also working with Skills for Care and the Council of Deans to increase student nurse placements in social care and I want to see social care included in the undergraduate curriculums of all clinicians, including nurses, doctors, therapists and paramedics. Moving to an integrated student experience of social care will improve understanding of the care experience and build better relationships through shared learning.

Nurses and the wider workforce will also benefit from the £500m workforce investment package.

CMM: WITH THE WORKFORCE DEFICIT CURRENTLY HIGHER IN HOMECARE THAN IN RESIDENTIAL CARE, HOW DOES GOVERNMENT PLAN TO SUPPORT THE GROWTH OF THIS PART OF THE WORKFORCE SPECIFICALLY?

GK: We know there are particular challenges for recruitment for homecare. In addition to our Made With Care campaign, we added care workers to the Health and Care Visa and Shortage Occupation List so vital vacancies could be filled and careers in social care are promoted to jobseekers by the Department for Work and Pensions. In the longer term, the £500m workforce investment will help to tackle the structural barriers to recruitment and retention. Our 'People at the Heart of Care' white paper also committed a further £570m per year to provide funding for people to adapt their homes to allow them to live out their lives independently.

CMM: SOME PROVIDERS MIGHT SAY THAT THEY HAVE HEARD THIS ALL BEFORE. WHAT'S YOUR MESSAGE TO THEM?

GK: My message to providers is that this work is already underway, and it is my personal mission – and the department's mission – to see this through. Genuine transformational change takes time, but we are working with the sector to drive forward our ambitious plans for reform. The new Health and Social Care Levy provides us with a long-term funding solution for health and social care, from £3.6bn to reform care costs, £150m to increase digitisation and £300m to integrate housing into local health and care strategies. This is about reform that is impactful and benefits the individual and sector as whole.

CMM: SOME OF THE PLANS FOR REFORM RELY ON FUNDED PILOTS/PROJECTS. IF SUCCESSFUL, HOW WILL THESE BE EXPANDED TO REACH THE WHOLE OF THE SECTOR?

GK: These pilots are really important for gathering valuable evidence and insight on how reform plans are being implemented on the ground. We want these to have meaningful, sector-wide impact in moving us closer to our 10-year vision for reform.

In March, we announced five local authorities that will implement a new and improved adult social care charging reform system which caps the cost of care. Blackpool, Newham, North Yorkshire, Wolverhampton and Cheshire East local authorities will help us develop best practice and find out what works and what can be improved, so we can share these with key stakeholders and better roll out our plans nationally.

We're also investing up to £30m to launch the Innovative Models of Care programme to help bring good and impactful examples of innovative care from the margins into the mainstream, providing the vehicle for local areas to come together to trial and embed ambitious new services.

"One of my first priorities in the role has been to recognise the extraordinary work of social care nurses at a national level, which is why I announced the first Chief Nurse for Adult Social Care Awards in May"
Deborah Sturdy

CMM: HOW WILL YOU ENSURE THAT PEOPLE WHO MIGHT BE RESISTANT TO CHANGE ARE ENCOURAGED TO ACCEPT NEW MODELS OF CARE?

GK: I am working with local leaders and the sector to implement our plans for reform. Integrating the health and care sector is a shared mission and stakeholders will be involved every step of the way. The Innovative Models of Care Programme is about building a cultural change in the sector so that there are more options for people to suit their needs and circumstances.

By introducing more variety and volumes of models of care (for example, the Buurtzorg model) that support people in their own homes and local communities, local leaders can deliver greater personalisation and better meet complex care and support needs. This is backed by more than £70m to increase the support offer across adult social care to improve the delivery of care and support services.

The pandemic has shown the sector is dedicated to ensuring everyone gets the best possible care and we have had to be adaptable and flexible in challenging circumstances. I am confident they recognise the benefits of our plans for reform and will get behind them. **CMM**

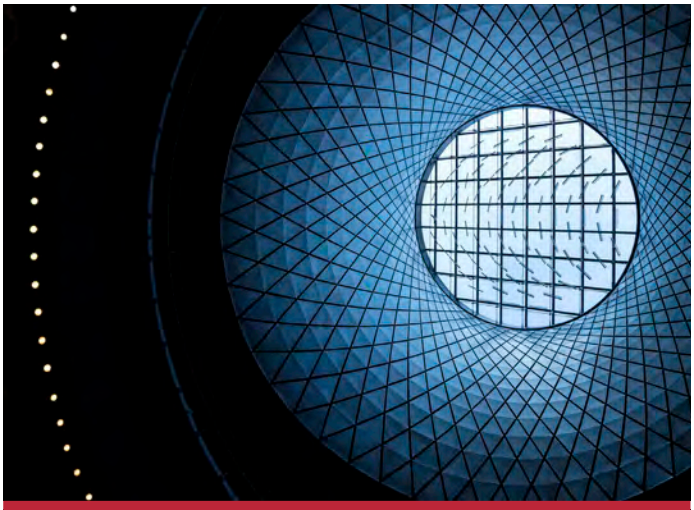
An extended version of this interview is available on the CMM website at www.caremanagementmatters.co.uk

Gillian Keegan is the Minister of State for Care at the Department of Health and Social Care (DHSC).
Email: **pressofficenewsdesk@dhsc.gov.uk** Twitter: **@GillianKeegan**
Deborah Sturdy is the Chief Nurse for Adult Social Care. Email: **pressofficenewsdesk@dhsc.gov.uk** Twitter: **@sturdy_deborah**

What is your response to the comments in this interview? CMM would love to hear your feedback and views.
Visit **www.caremanagementmatters.co.uk** to leave your comments and join in the conversation.

INTO PERSPECTIVE

WHAT DOES GOVERNMENT'S NEW 10-YEAR PLAN TO TACKLE DEMENTIA NEED TO ENTAIL?



Speaking at the Alzheimer's Society Conference 2022 on Tuesday 17th May, Sajid Javid confirmed that a new 10-year plan to tackle dementia will be published later this year. The Health and Social Care Secretary confirmed the 10-year plan will focus on how new medicines and emerging science and technology can be harnessed to improve outcomes for dementia patients across the country. The plan will also focus on supporting people with their specific health and care needs while living with dementia. With the number of people living with dementia predicted to rise to one million by 2025 and 1.6 million by 2040, what must Government's 10-year plan entail to tackle dementia?

HERE AND NOW

Estimates from Alzheimer's Society suggest that people living with dementia and their families would prefer an immediate response to the reform of dementia diagnosis and care, rather than waiting for the conclusion of Government's plan. According to the charity, at least 33,000 more people who have dementia would have been diagnosed if the pandemic had not happened. The Health and Social Care Secretary's speech acknowledged that 'the pandemic has stemmed the tide of progress.'

We already know that Government plans to spend more than £8bn on tackling the backlog from 2022/23 to 2024/25, supported by a £5.9bn investment in capital – for new beds, equipment and technology. This is in addition to the £2bn Elective Recovery Fund and £700m Targeted Investment Fund (TIF) already made available to systems this year to help drive up and protect elective activity. Individuals and families concerned about emerging dementia symptoms in a loved one or those seeking a diagnosis may be eager to learn what timely steps will be taken to clear the backlog caused by coronavirus, specifically for people living with dementia.

THE '4 P'S'

Prevention, personalisation, performance and people, the four main themes driving Government's 10-year plan to tackle dementia, according to the Health and Social Care Secretary.

Prevention is the standout ambition of Government's plan and the Lancet Commission's theory that 40% of worldwide dementias could be prevented or delayed, adds weight to Government's responsibility to follow through with its pledges.

The prevention agenda has been at the forefront of Government policy for at least the last decade since the launch of the Prime Minister's Challenge on Dementia in 2012. Sector representatives such as Professor Martin Green, Chief Executive of Care England, who was appointed Department of Health Independent Sector Dementia Champion in 2012 and led the development of the Dementia Care and Support Compact, have committed to improving care and support for people with dementia, their carers and families from a national providers' perspective.

THE BIG PICTURE

The sector will expect the 10-year plan to tackle dementia to intertwine itself seamlessly amongst Government's wider plans for adult social care reform. For people affected by dementia to experience meaningful change, the Government's 10-year plan must play its part in the system-wide overhaul proposed by the adult social care reform white paper, the Health and Social Care Integration white paper and the Health and Care Act. Deborah Sturdy, Chief Nurse for Adult Social Care, suggests that Government's 10-year dementia plan should incentivise its sector-wide reform agenda, 'not least because dementia overlaps with so many other long-term conditions.'

Current provision must not be neglected

Jo Crossland, Head of Dementia Care, Avery Healthcare

Sajid Javid made some very encouraging comments in his speech during the Alzheimer's Society Conference on 17th May, including acknowledging the huge physical and emotional cost that the pandemic has cost the social care sector. The Secretary of State also announced a new 10-year 'dementia' plan, including reinforcing the commitment to funding £375m research into neurodegenerative diseases, which will hopefully hasten towards preventing up to 40% of dementia diagnoses.

The Health and Social Care Secretary's comments about the intention for Integrated Care Boards and Integrated Care Partnerships to be directed towards caring for people and keeping them well in the first place is also positive.

However, an assertion that the context for future work on dementia will be much more preventive, professional and joined up is ambitious. With an ageing population, it is currently estimated that 900,000 people are living with dementia in the UK, a figure that is estimated to rise to one million by 2025 in just three years' time.

The current provision to support people when receiving a dementia diagnosis and in the often emotionally turbulent months afterwards can be at best patchy, and at worst, woefully inadequate. All as an individual and their family begin to navigate their way along an unknown and frequently obscure path towards an undetermined destination.

These people don't have 10 years on their side to wait for new and innovative support systems. Instead of being regarded as the beginning of the end, a renewed and rapid commitment to training in all areas of the social care sector, for care staff, health practitioners and our regulator, is essential to make sure that people with dementia and their families receive a consistent level of practical information and emotional support.

Of course, continuing research into neurodegenerative diseases is important – even essential as our population continues to age. We must never lose sight of the very real possibility that prevention and eventual cure of many forms of dementia can be a reality. However, research into care and support for people and their families who are already living with the disease is of equal significance if we are to have a real, comprehensive dementia plan.

The time for action is now

Dr Richard Oakley, Associate Director of Research, Alzheimer's Society

In its national healthcare system, the UK has an enormous opportunity to be a world leader in truly integrating research, care and treatment of dementia. Its vital research is included at the heart of the systemic seismic change promised by the Secretary of State.

We're pleased to see the Government reaffirm the importance of research funding, but we are still waiting two years on for the promised Dementia Moonshot. Funding must be ringfenced for the diseases which cause dementia. Collectively they affect around 900,000 people in the UK and are the number one cause of death in the UK, yet there remain no available treatments here which can stop or slow down their progression.

Emerging technologies such as simple blood tests will soon allow us to detect and diagnose dementia earlier, giving more people access to crucial treatment and support. Earlier diagnosis will be vital to make the most of coming new treatments which slow down the progression of the disease. Sajid Javid's speech shows an encouraging commitment, but we still have a long way to go to diagnose dementia earlier and find treatments which provide real benefit – we need tangible action and delivery of the Dementia Moonshot promises.

The Secretary of State spoke of the 'seismic shift' needed in dementia diagnosis and care and a bold 10-year plan that gives the UK's largest killer the attention it needs. As he rightly recognises, we are now at a crucial and promising turning point for dementia care and treatment: we will soon have a new 10-year dementia strategy, a revised long-term plan for the NHS in England and a once-in-a-generation opportunity to demonstrate true integrated care. We're in a stronger position than ever to deliver transformational change to people with dementia.

However, his words will mean nothing if not backed by equally ambitious funding and delivery mechanisms which put people with dementia at their heart, and who need to see tangible change now. For too long Government action has not matched the scale and impact of dementia. We welcome the Secretary of State's ambitious words, but we must now see this translate quickly into meaningful delivery plans for which ministers should be held accountable.

MAKING IDEAS A REALITY
THE CARE INNOVATION CHALLENGE

Excitement is growing for the Care Innovation Challenge, which is taking place in July. The National Care Forum (NCF) shares what providers can expect from the weekend and delves deeper into those all-important entry requirements.

The Care Innovation Challenge, a creative weekend of idea generation and prototype trialling, will be held on 2nd- 3rd July 2022 at Coventry University's TechnoCentre. With cash prizes for the top spots, expert mentoring and guaranteed media coverage – this is an opportunity not to be missed.

Applications for a place at the weekend are open until 10th June. Creative thinkers, anyone who has a passion for making ideas a reality and people who want to make a positive difference to people's lives are invited to apply at www.careinnovationhub.org.uk

'We welcome anyone who wants a chance to be part of the future of care. We are delighted to have received applications >

> from a diverse group of people, including individuals and teams from care providers, undergraduates and postgraduates from universities and people with social entrepreneurial ambitions,' said Professor Vic Rayner, OBE – NCF's Chief Executive. 'With the support of Think Local Act Personal (TLAP) through their National Co-production Advisory Group (NCAG), people with lived experience will be an integral part of creating solutions to key challenges faced by the care sector.'

The Challenge, hosted by the Care Innovation Hub (CIH), was established in 2018 to create a platform for exploration and innovation in the social care sector. The CIH is now run by the National Care Forum (NCF). NCF is dedicated to developing innovation in the social care and support sector and this is a natural home to drive the CIH into the future.

WHO CAN APPLY?

- ✓ Working professionals.
- ✓ Care managers and care staff.
- ✓ People with lived experience of care and support.
- ✓ University students.
- ✓ Entrepreneurs.

You do not need to be an expert in social care, or have any experience of social care yourself, to apply. You do not need to have any technical skills. You just need to have an intention to improve the quality of life of those receiving care in the UK.

You can apply as a team of two to three people or as an individual at www.careinnovationhub.org.uk

Maaha Suleiman, 2019 Runner-Up and Founder and Chief Executive of www.carematched.co.uk, said, 'I would wholeheartedly encourage anyone to apply if you're interested in care, innovation, in helping people in general, making a difference to the way care is delivered, or just networking with individuals who are doing great work. It can change your life for the better. It did mine.'

YOU DON'T NEED TO HAVE ANY TECHNICAL SKILLS

The Challenge is aimed at creating lots of fantastic ideas and technology is creating lots of opportunities. However, ideas do NOT have to be focused on technology.

2022 mentor Neil Eastwood, Founder and Chief Executive of www.carefriends.co.uk, said, 'There has never been a better time to launch a start-up focused on helping our sector. The costs of creating a prototype and scaling up are much reduced with cloud-based architecture. The pandemic has pushed us all to adopt technology and has accelerated the acceptance of technology in a traditionally paper-based social care sector.'

> ***"I've just had the most amazing experience this weekend. We've all been inspired to believe in our ideas"***
>
> ***Pearl Jordan, Challenge Participant 2019***

> ***"The energy in the room was great, there was a lot of enthusiasm, a lot of excitement. It was a great area to be in with lawyers, entrepreneurs and care workers. Everyone from different backgrounds coming together and really bringing innovation and change into the social care sector"***
>
> ***Faizah Akeil, Challenge Finalist 2019***

WHAT'S PLANNED FOR THE CHALLENGE WEEKEND?

Successful applicants will be invited to attend a creative weekend of idea generation and prototype trialling on 2nd-3rd July 2022 at Coventry University's TechnoCentre.

1. Starting with 12 teams, the weekend will end with teams presenting their projects to a judging panel of industry experts.
2. Five teams with the highest-quality ideas selected to go through to the final will receive £500 funding and mentoring.
3. The winning team will receive £1,000 in prize money and further mentoring.

On arrival, participants will be matched to form a number of small multi-disciplined teams with a range of skill sets and perspectives. Participants may have an idea that is quite well formed or they may have nothing in mind – either is great. The weekend will culminate in teams presenting their solutions to a judging panel of experts in social care.

Participants will have a chance to meet and work with leading experts from the care sector including successful entrepreneurs, investors, influencers and people with lived experience of care. Mentors will include representatives from the Challenge partners of RWK Goodman, QCS, Person Centred Software, Marrgo, Home Instead, Hilton Nursing Partners, Hallmark Foundation, Greensleeves Care, Care Management Matters, Care Friends, BRAN Investment, Borough Care and apetito.

Five teams will be selected to go to the Challenge Final at the 2022 Care Show on 12th-13th October 2022 at the NEC Birmingham to present their developed solution to the final judging panel.

The winning team will receive £1,000 in prize money, media coverage and further mentoring to develop their idea.

Good luck to everyone involved in this year's challenge and CMM looks forward to meeting you all at the Challenge Weekend. **CMM**

Limited places – APPLY NOW **www.careinnovationhub.org.uk** Visit **@NCFCareForum** for updates.

Visit **www.caremanagementmatters.co.uk** and share your feedback on the article.

CareChoices

ENHANCE YOUR PROFILE TODAY

www.carechoices.co.uk

Promote your service to care seekers for as little as £3.75 per week*

For full details of opportunities to promote your service on the website, contact us.

01223 206967 | **paul.ocallaghan@carechoices.co.uk**

* Minimum booking period is 1 year. Price excludes VAT.

Monitoring morale:

Why collating staff feedback is essential to improving services

CHRIS GRAHAM, CHIEF EXECUTIVE OF PICKER, AN INTERNATIONAL CHARITY WORKING ACROSS HEALTH AND SOCIAL CARE, CONSIDERS HOW MONITORING INDUSTRY MORALE AND CULTURE CAN SUPPORT IMPROVEMENTS IN THE SOCIAL CARE WORKPLACE.

UNDERSTANDING WORKFORCE NEEDS

What's the most important metric to understand the performance of health and care providers? Service quality is a complicated thing to assess, comprising a range of separate but related factors such as user outcomes, safety and value for money. Few would be bold enough to go on record with a single measure that should take priority over others. Yet, in 2017, Sir Mike Richards, who at the time held the position of Chief Inspector of Hospitals at the Care Quality Commission, did just this – calling England's NHS Staff Survey 'probably the most useful single data source that we all have' for understanding and monitoring service quality. Why? Because staff feedback provides insight into morale and organisational culture, as well as revealing the pressures that staff face: it tells you about the environment in which care is delivered from the perspectives of the people tasked with providing it.

Today, this idea that workforce issues are central to how effectively providers can function seems particularly important. Two years of a pandemic have greatly exacerbated existing challenges related to turnover, vacancy rates, pay and working conditions, thus creating a profoundly difficult set of circumstances for leaders and front-line staff alike. But do we know enough about the pressures facing the social care workforce – and what needs to change to ensure staff are heard and supported?

WORKFORCE BURNOUT AND RESILIENCE

Last year, the House of Commons' Health and Social Care Committee published a report titled 'Workforce burnout and resilience in the NHS and social care', describing the findings of an inquiry launched in July 2020. The inquiry sought to explore the resilience of the health and social care workforce pre-COVID, as well as the impact of the pandemic, and aimed to investigate what measures might be required to understand, manage and reduce burnout.

Evidence submitted to the Committee as part of the review highlighted the extreme conditions that care staff have been working under. Care England, for example, wrote 'unprecedented … physical and mental strain', describing how 'adult social care staff [took] the place of relatives and loved ones [during lockdown] … they have felt bereft and grief stricken when residents have died'. Similarly, the Diocese of Rochester described care home staff as feeling 'abandoned … exhausted and demoralised': both heartbroken over excess deaths amongst residents and fearful for their own future employment as families avoided placing elderly relatives in permanent care.

Despite clear recognition of the significance of workforce burnout, the report found a lack of reliable evidence to quantify the problem for social care workers. This stands in contrast to the NHS, where the National Staff Survey – co-ordinated by Picker for NHS England and Improvement – provides detailed insight into stress and burnout in >

> different organisations and staff groups. The report notes that 'understanding the scale and impact of workforce burnout can only be achieved with a metric for staff wellbeing and staff mental health that covers both the NHS and social care' and recommended the extension of the NHS Staff Survey to cover the care sector.

The idea that consistent measurement matters makes a great deal of intuitive sense. After all, evidence about the scale of burnout in the NHS can be used to direct support, ensure accountability and monitor trends. And the report rightly identified 'a need to [put] recognition of the work of social care ... on an equal footing with medical professionals'. But is parity of recognition as simple as extending NHS measures to social care – and is that even practical?

From our experience of co-ordinating the NHS Staff Survey since 2011, we predicted that there would be challenges in extending the model to cover the social care workforce. However, we wanted to understand wider perspectives from experts across the sector. Therefore, in December 2021, we convened a roundtable discussion focusing on staff experience in social care – especially in care homes and domiciliary care for older people. The discussion covered a range of themes, including what is already known about the experiences of the social care workforce, the priorities to address and how data could be gathered and used to support improvements in workforce experience.

SOCIAL CARE WORKFORCE EXPERIENCE

Strikingly, the early parts of the roundtable discussion centred not on the stresses of caring through the pandemic, but on the passion and dedication of the care workforce. We talked about why people choose to work in social care: about how satisfying and meaningful it can be, and about the impact that care workers can have. Attendees told us that staff 'really do feel they can make a difference to people's lives'. These positives can keep people going in the face of stresses and challenges; they are resilient because they offer constant reminders that people's roles matter.

At the same time, there was a recognition that this sense of impact often carries with it a burden. The stakes are high, the consequences of mistakes severe. One former sector leader told us that they always felt they were 'one well-meaning but ill-judged decision away from a crisis'. Also, pay and reward for front-line staff rarely feels commensurate with these high-stakes, high-pressure, demanding roles. We heard that expectations on the sector have increased over the last decade and that care home workers, for example, now do many tasks that were previously the preserve of district nurses – but care staff still receive lower pay and recognition than those in healthcare.

The social care workforce is, of course, hugely diverse and is made up of a number of organisations and includes a variety of job roles. But pressure is felt across the board, particularly during the pandemic. Front-line staff in care home settings faced extreme challenges during 2020 when sickness absence rates tripled due to COVID-19: this ramps up the workload for others and creates complications for leaders such as care home managers. We heard about the importance of good leadership and about the need to nurture and support leaders, as well as the front line – particularly as many managers are leaving the sector.

Good leadership is particularly important when many of the problems the front line experiences are borne from environmental pressures. Experts told us about how the fragmented nature of the sector leads to inconsistency in a range of areas that affects staff experience and development. First, it is difficult to develop collective bargaining to give employees a formal voice – contributing to variation in pay rates. Similarly, the lack of a consistent training infrastructure makes it difficult to develop staff. Strong leadership is needed to navigate these challenges – and leaders need insight from the workforce to understand their priorities.

USING DATA TO IMPROVE PEOPLE'S EXPERIENCES OF WORK

Survey respondents were united on the importance of building better data on the experiences and composition of the social care workforce. Co-ordination of administrative data is a part of this: for example, developing a systematic workforce register could help to track the changing composition of the workforce, shining light on sector-wide capacity and development issues. Hearing staff voices – and acting on them – was also recognised as being vital to improve staff engagement and to allow improvements to be identified and co-designed.

If social care needs a more systematic approach to hearing the voices of staff, we have asked is the solution as simple as extending the NHS Staff Survey to the sector? Experts at our roundtable were apprehensive. Social care is fundamentally different from the NHS in the way services are structured and staffed; a differentiated approach is likely required, rather than a one-size-fits-all solution. Whilst there are clear benefits to a model like the NHS Staff Survey – it is robust, replicable and fosters a sense of cohesion and commonality – it may need adaptation to be useful to social care organisations that are typically much smaller than large NHS providers.

ADVANCING WORKFORCE EXPERIENCE

Although extending the NHS Staff Survey to social care may be neither simple nor sufficient, attendees were clear about a number of priorities for advancing workforce experience in social care.

To understand the shape of the workforce and build an evidence base, a first step may be to use and synthesise existing data about the composition of the workforce. This could provide evidence to enable the development of a framework for measuring and improving staff experience across the diverse range of roles in the sector.

Ultimately, there was a sense that maintaining capacity through the sector is a critical issue: this means both retaining and developing existing personnel as well as attracting new people to careers in the sector. Whilst funding is tight, leaders should focus on interventions that can improve morale and retention in their own workforces – even through simple things such as listening to staff feedback and reviewing details such as how rotas are managed to support work-life balance. And nationally, a new, positive narrative is needed to highlight the potential rewards of working in the sector – including using the voices of current staff to bring to life the benefits of social care roles.

Readers would be forgiven for thinking that some of this may be easier said than done. There can be a sense that the challenges facing the workforce are so great that small steps are not enough. But the reality always is that we must work with what we have – and, in any organisation, workforce is a core asset and working culture is a key determinant of success. For those reasons, change will often start here – measuring, understanding and improving workforce experiences will be critical to success. **CMM**

Chris Graham, Chief Executive of Picker. Email: **chris.graham@pickereurope.ac.uk** Twitter: **@ChrisGrahamUK**

What do you think needs to happen for the Government to understand the scale of the social care workforce challenges and what should a positive narrative of social care look like? Visit **www.caremanagementmatters.co.uk** and share your feedback.

Stay informed.
Stay in control.
Join Care England.

Keeping abreast of the key issues in policy and regulation is a challenge for care providers.

At Care England we provide our members with a daily flow of policy news, regulation changes, media updates and more. This gives access to the latest information and advice from one well connected, reliable source. Wouldn't that save time and worry in your care business too?

To find out more about the benefits of membership, visit **www.careengland.org.uk**, email **info@careengland.org.uk** or call **08450 577 677**.

CARE ENGLAND
Representing independent care providers

@careengland

@wecareforengland

PROVIDERS SIGN UP FOR FREE

Yes, that's right. Absolutely free.

- Gain CPD points
- Access extended features and additional content
- Read latest news email alerts
- Comment on features and debate on important subjects
- Get discounts to CMM Insight events*
- Access archived editorial
- Receive a digital edition of CMM (10 issues per year)

CPD CERTIFIED
The CPD Certification Service

CMM CAREMANAGEMENTMATTERS

Sign up at **www.caremanagementmatters.co.uk**

@CMM_Magazine

Non-care providers receive a three month free trial, £50 per year thereafter. *Cannot be used in conjunction with any other offer.

TRAINING A NEW GENERATION:

PREPARING APPRENTICES FOR ASSESSMENTS

Are your social care apprentices assessment-ready? Paul Kelly, Ofqual Deputy Responsible Officer at Professional Assessment Ltd, shares his top five tips on how to ensure your apprentices have the support they need to pass with flying colours.

INSIGHT IN PERSON

EARLY BIRD TICKETS AVAILABLE NOW

- **FULL CONFERENCE AGENDA**
- **NATIONAL SPEAKERS**
- **YOUR QUESTIONS ANSWERED**

Berkshire, Buckinghamshire & Oxfordshire

CARE ASSOCIATION CONFERENCE

20th October 2022

CMM INSIGHT 2022
CONFERENCES • EXHIBITIONS

Organised by CMM CAREMANAGEMENTMATTERS

Supported by CareChoices

www.caremanagementmatters.co.uk

In association with

Berkshire Care Association

OACP

MKB care association
Milton Keynes and Buckinghamshire

@CMM_Magazine #CMMInsight

The social care sector continues to be troubled by staff shortages and, when we also consider the residual trauma experienced by teams working on the front line during the pandemic, training and equipping staff with the knowledge to cope with challenging situations has become more important than ever. For firms struggling to meet skills gaps in their teams, offering apprenticeships for staff at all levels of the business will help to close these gaps. The schemes also help to foster loyalty by showing they are prepared to invest money and effort in boosting the skills and qualifications of their workforce.

If you're considering introducing an apprenticeship programme, there are steps you can take to provide the learning and development opportunities that will help people perform to the best of their abilities. It's essential to consider existing apprentices as well and how you can best support them.

National apprenticeship standards have come a long way in recent years, helping apprentices acquire a broader understanding of the industry they work in. The standards also ensure people have developed the skills, knowledge and behaviours to be job-ready on completion. Apprenticeship qualifications are therefore a good benchmark of the skillset and competence required for a specific job role in a particular sector.

In line with these new standards, a combination of methods is currently used to assess apprenticeships, helping to produce highly skilled workers who meet a national standard.

There is much you can do as an employer to help your apprentices to do the best they can at assessment time. Here are my five top tips:

1. Familiarise yourself with assessment plans

Ask your training provider for its assessment plan. This will give a clear outline of each assessment method that will be used to grade your apprentice, which gives you the opportunity to support them in preparing for their end-point assessment from early on in their apprenticeship.

For example, if a portfolio of work is required, encourage them to think about the aspects of their day-to-day work that would be worth reflecting on and including in their evidence of what they have learned.

Assessment plans also include useful practical details, such as how long any formal assessment will take. Providing the apprentice with this information earlier in their training will go a long way to helping them feel prepared and in control.

2. Get to grips with Professional Discussion

Professional Discussion (PD) has become an increasingly popular means of assessing apprenticeships at all levels. Essentially, it's a two-way conversation between an assessor and an apprentice. PDs centre around a list of set questions aimed at gaining a deeper understanding of the level of knowledge an apprentice has about their role.

This is an ideal opportunity for apprentices to show their skills and expertise in a less formal setting. However, it's natural they may feel nervous at the prospect of taking part in an interview. To help ease their nerves, give them a chance to practise through mock PDs where you ask them questions. If possible – and if they feel comfortable – film those so they can watch them back and review their performance.

Above all, remind apprentices that PDs aren't an interrogation, but instead a great opportunity to show how much they have learned. Giving apprentices plenty of opportunities to practise will help them feel more confident in presenting their ideas, giving evidence and communicating clearly.

3. Hold mock observations

Being observed by an assessor in their workplace gives an apprentice the opportunity >

> to show their practical 'real-world' skills and behaviours. However, as with PD assessments, they might feel nervous about this, so it's a good idea to give them the chance to practise an observation scenario.

My advice would be don't necessarily pick a quiet shift to hold a practice observation, as there's every chance a formal assessment will take place in a busy period. Your apprentice is likely to feel far more overwhelmed if they haven't had a chance to practise an observation at busy times.

4. Preparing for a written exam

Some apprenticeships include a formal written test, which is also a common source of nerves.

Exams are held on a closed book basis and usually centre on multiple choice or short answer questions, so it's important for apprentices to have a good factual understanding of skills and issues relating to their role.

To help ease any pre-exam nerves, remind apprentices to give themselves time and read the questions carefully. There are no trick questions and it's simply a case of achieving a pass.

5. Create opportunities for success

It may sound obvious, but some apprentices will naturally perform better in certain assessment scenarios than others. For example, some will thrive in the context of a professional discussion while for others, missing out on the chance to gather their thoughts and revisit their answers as they would in a written assessment could hinder their performance.

Once you have an idea of which assessment methods will best suit your apprentice, play to their strengths and give them the chance to practise those first. This will help build their confidence as they progress to prepare for the assessment styles they're less comfortable with.

Following these top tips will help both employers and their apprentices to better prepare for the assessment, but don't be afraid to ask for help. End-point assessment organisations (EPAOs) are on hand to support employers through the process and there are a number of useful resources available. For instance, the Institute for Apprenticeships and Technical Education has published a video with a simple overview of some of the most common assessment methods used for apprenticeships. Visit YouTube to watch: https://www.youtube.com/watch?v=57uWc6EDjKw

ANNUAL CELEBRATION

The sixteenth annual National Apprenticeship Week will take place from 6th to 12th February 2023. The Institute for Apprenticeships and Technical Education (IfATE), which supports thousands of businesses to design apprenticeships to fill national skills gaps and uphold their quality for the good of apprentices, will work with a network of employers, inspiring apprentices from its Panel of Apprentices and colleagues across Government to promote this exciting time in the skills calendar.

National Apprenticeship Week is an annual week-long celebration of apprenticeships, showcasing the brilliant impact apprenticeships can have on communities, local businesses, and regional economies and how they all benefit from the impact of apprenticeships.

Jennifer Coupland, Chief Executive of IfATE, said, 'National Apprenticeship Week is such an important time to celebrate everything that is great about apprenticeships and IfATE will be throwing our weight behind it in 2023. It's the perfect opportunity to promote all the incredible opportunities that apprenticeships now provide to get a foot on the careers ladder and progress to the top, push forward with levelling up right across the country, and support the green agenda.

'There are now almost 650 apprenticeships to train people for a huge variety of jobs, across all the different sectors, from entry right up to senior management level. That covers level two right up to degree level. Apprenticeships still cover all the traditional trades, like plumbing and hairdressing, but now they also train people to become nurses, laboratory technicians, aerospace engineers, countryside rangers, digital designers and much more.'

The celebration, which takes place across England, highlights how apprenticeships have helped employers of all sizes and sectors, and people of all ages and backgrounds. It is always a brilliant chance to celebrate everything that's great about work-based training and bring the whole sector together.

ENDLESS OPPORTUNITIES

Ofqual's Executive Director for Vocational and Technical Qualifications, Catherine Large, delivered a speech at the Annual Apprenticeship Conference 2022 in March and spoke of Ofqual's motivation to improve assessment quality. Catherine took the opportunity to invite an open dialogue with those engaged in the apprenticeships sector and asked delegates to provide feedback on assessments. She told delegates that Ofqual wants those working in the apprenticeship area to help Ofqual continue to ensure that the assessments taken by apprentices and used by employers are as 'valid' and 'reliable' as they can possibly be. Most importantly, it's the people taking the assessments who must continue to be encouraged. While it's natural to find any assessment potentially daunting – especially when it involves working with residents or patients – just remind apprentices that they're an opportunity to show off just how many skills and how much knowledge they've gained and to make the most of it through thorough preparation. **CMM**

Paul Kelly is the Ofqual Deputy Responsible Officer at Professional Assessment Ltd. Email: **info@professionalassessment.co.uk**
Twitter: **ProfAssessment** For more information about Professional Assessment Ltd, visit **www.professionalassessment.co.uk**

Visit **www.caremanagementmatters.co.uk** to share your thoughts and experiences on supporting apprentices with assessments and how you are creating opportunities for young people to work in care.


the
care
workers'
charity
Professional Care
Workers' Week
12th - 16th September 2022

CELEBRATING EXCELLENCE

Continuing a series of features celebrating 2022's winners, CMM is delighted to hear from Jorawar Singh Rathour, founder of the London Homeless Welfare Team, who were winners in multiple categories at this year's awards.

The London Homeless Welfare Team sum up exactly what the awards are all about, said the judges. Getting the basics right, a tireless dedication to supporting its local community and a clear, personal commitment to the organisation's daily operation. The judges were also impressed by the winner's diverse recruitment of volunteers and organic approach to leadership.

PERSONAL CONNECTION

The London London Homeless Welfare Team was formed on the 1st January 2020 – the day of our first outreach. This was the result of an alarming number of rough sleepers that we would come across on a daily basis whilst commuting in and around London. As the founder of our charitable organisation and having experienced a difficult past myself, this became a very personal matter, as I am well aware of the every day horrors faced by rough sleepers.

We were one of the first organisations to initiate the COVID-19 defence packs on 4th March 2020. The packs contained some vital essentials: bottled water, hand sanitiser, pocket tissues, an NHS COVID-19 leaflet and a mask. We put this into action before any lockdown measures were introduced by the Government. Many rough sleepers were unaware of the extreme dangers of COVID-19 that we know became a pandemic. A large proportion of homeless people have various underlying and often complex health issues, so it was crucial to distribute the packs rapidly and efficiently. We did so, not only throughout London, but we also distributed these packs across the UK. Being able to cook and provide nutritional food and bottled water to maintain health and immune systems was equally important in combatting the virus.

RAISING AWARENESS

Initially, our charity was very challenging to get off the ground and funding was a real issue. Self-funding was our only option in the beginning. However, we were fortunate to receive help from various food supermarkets and local businesses with food surplus. Our first outreach took place outside Finsbury Park tube station in North London. This was a turning point for us when we attracted national and international media attention. Many became aware of our efforts to help those that were sleeping rough. We were also able to highlight our work via radio interviews and podcasts.

The fact that we were self-funding (although on an extremely small scale) as six team members helped us develop trust amongst the public as an unknown organisation at the time. This contributed to our success with outside donations which in turn, allowed us to steadily expand.

Our expansion involved partnering with the Neighbourly Scheme who then put us in touch with Marks & Spencer as well as Sainsbury's. The amount of food surplus that we were given came as a pleasant surprise, as we had not expected so much. This made so much sense, as a high quantity of edible food would be sent to landfills and ultimately, go to waste. We became increasingly aware of how we can help reduce waste and our own carbon footprint. We do our very best to recycle packaging on a weekly basis at our local recycling centres.

"Many rough sleepers were unaware of the extreme dangers of COVID-19 that we know became a pandemic"

EXPANDING SUPPORT

It became increasingly apparent, that it was more than just basic survival necessities that were required, as so many were suffering from addictions, as well as mental health issues. Acknowledging this, we undertook the two-day Mental Health First Aider (MHFA) training from the charity, Mind. We encourage all volunteers to take part in becoming a MHFA. We believe that this is extremely important considering the nature of the work that is involved, and how it can directly affect volunteers. This was especially important, being NHS check-in-and chat volunteers. We have also been involved with suicide prevention and were kindly invited to be a part of 'StreetFest' in 2021 which took place in Finsbury Park and was a huge success. We set up a 'Positive' board that anyone could write a word or a message on. This was an excellent conversation starter and was appreciated by all. The highlight of this interaction was of a gentleman who drew a smiley face as he was not able to form words. We were delighted to see how this became such a positive experience for him.

"We encourage all volunteers to take part in becoming a Mental Health First aider. We believe that this is extremely important"

PILLARS OF COMMUNITY

One of the major difficulties we faced was logistics. We had to prioritise and limit how much food, wash supplies and clothing we were able to carry whilst commuting on public transport. Applying for grants and fundraising were crucial in overcoming this. Our first ever grant was awarded for our COVID-19 work (Southern Co-op). Thereafter, for help with the purchase of our community vehicle (Capital Arches Group Ltd). Our most recent grant has been for our mental health training programme (Arnold Clark Community Fund), for which we are extremely grateful. We are now able to operate stationary food support at least four times per month.

We also deliver to those with mobility issues, elderly care homes, struggling families, food banks, homeless shelters and to those with mental health support needs. Our on-foot homeless outreaches take place at least once a month across London. This is where we drive to a designated area with all our supplies and do a mile walk along rough sleeper hot spots. The busiest so far was our Victoria outreach which took place on an extremely hot day. We were constantly having to purchase and replenish our bottled water supplies. This particular part of our work has been extremely important, enabling us to visit those that may not have otherwise been able to get to us.

RISING TO THE CHALLENGE

On average, we are now able to provide support services to 100 people per month, with the likelihood of this rising due to economic uncertainties. Our next phase of support with the help of funding will include the expansion of volunteers to involve food safety training, MHFA training, being able to purchase a trailer, power generator, hot food servers and rent storage space. This is essential for us to be able to meet the increasing needs following the rise in living costs. An example of this was our 'back to school packed lunch' initiative. We would give specifically packed food items to young families who were struggling to send their children to school with healthy meals.

The services that we are able to provide are a direct result of the commitment of individuals and organisations, ensuring that we are able to support the vulnerable in our society. This is a collaborative effort, and we are truly very grateful to all. **CMM**

Jorawar Singh Rathour is the founder of the London Homeless Welfare Team.
Email: **lhwteam@aol.com**

MARKEL 3RD SECTOR **CARE AWARDS** 3

Headline Sponsor MARKEL®

The Markel 3rd Sector Care Awards is run specifically for the voluntary care and support sector. Visit **www.3rdsectorcareawards.co.uk** to view the 2022 event winners and find out more about next year's event. Sponsorship opportunities are available.

With thanks to our supporting organisations: National Care Forum, Learning Disability England, The Care Provider Alliance, Association of Mental Health Providers and VODG.

The Contribution to Sector Development Award was kindly sponsored by Markel Law and the Making a Difference Award was kindly sponsored by Markel UK.

CMM INSIGHT NORTHAMPTONSHIRE CARE ASSOCIATION CONFERENCE 2022

25th May 2022

CMM was delighted to welcome delegates back to the first face-to-face event of 2022 in Northamptonshire on 25th May.

UPFRONT

Stuart Lackenby, Director of Adult Social Services and Statutory DASS Officer, West Northamptonshire Council, delivered the keynote address – it was an honest account about the challenges facing the sector, including the abolition of CCGs, but it was also full of hope and collaboration. Stuart spoke of a 'fragile market' but of a 'resilient' one, too. There was acknowledgement that the pandemic has not been kind to the care workforce. The scale of unmet need in social care and the postcode lottery effect were also examined. Delegates were told to engage with market sustainability plans, engage with Fair Cost of Care Exercises and feedback.

REFORM AGENDA

Care England Chief Executive, Professor Martin Green OBE, warned delegates that he has 'grave concerns' about the Government's reform agenda, describing it as 'an NHS recovery plan.' He delved into the Government's big spending promises, notably the £500m banked for the care workforce. What does this look like in practice? £312.50 each, apparently. Speaking of National Insurance contributions, quite simply, the Care England Chief Executive said, 'Millions of pounds are coming out of social care before anything goes in.' While the sector waits for reform agenda to be implemented, Professor Martin Green revealed a wish list of 10 priorities. You can read them by visiting the CMM website.

WORKFORCE TALENT

Recruitment specialist, Neil Eastwood, offered take-home recruitment and retention advice. He outlined where providers can go to source new talent, what 'quality employment' looks like and drew on global examples from his travels. The presentation posed several questions – if you're rejecting a candidate, could you share that individual with someone else? For those who have left for COVID-19 related reasons, why not send them a postcard to ask how they are and if they would like to return to work? There was a focus on why the first 90 days of employment are critical for retention and the five pillars of care worker quality were also outlined. You can read them by visiting the CMM website.

STRATEGIC DEVELOPMENT

Lauren Stacey, Locality Manager (Midlands) at Skills for Care, cited the latest tools, resources and intelligence to support workforce recruitment, development and culture. Delegates were presented with local workforce data – for example, there is an 8.2% vacancy rate and the workforce has an average of 3.7 years of experience per role in the Northamptonshire area. Skills for Care shared insights into the latest masterclasses and workshops to support providers in leadership development, digital skills and equality and inclusion.

YOUNG PEOPLE

The national age of a care worker in the UK is 44 years and, according to the latest report, there are 529,000 young people (16-24 years old) not in education, employment or training. This figure is expected to increase with the impact of COVID-19. Jaimini Watson, Service Delivery Manager for Northamptonshire at The Prince's Trust, explained how the charity works with young people through employability programmes and mentoring support to start their careers in health and social care. Attendees were encouraged to support young people to develop a career in care and learnt how the Prince's Trust programmes are flexible and can be tailored to employers.

WORKSHOPS

Neil Grant, Partner, Gordons Partnership and Lucy Bowker, Solicitor, Gordon Partnership, presented an interactive LPS Consultation workshop to find out about the key changes planned and discuss the implications for services. Peter Ellis, CEO and Head of Strategy, Intelligent Care Software, discussed why providers should go digital and what they need to look for and Robert York of SWIFT Management Services delved into CQC inspection in a post COVID-19 landscape to help providers prepare for data requests.

With thanks to the conference's sponsors and exhibitors, Gordons Partnership Solicitors, Intelligent Care Software and SWIFT Management Services Ltd. Visit the CMM website to explore our future events.

WHAT'S ON?

Event:	From DoLS to Liberty Protection Safeguards: Managing the Interim
Date/Location:	23rd June and 15th September VIRTUAL
Contact:	Web: www.socialcareconferences.co.uk/virtual-online-courses/from-dols-to-lps

Event:	Self Neglect and Adult Safeguarding: Responding to Self Neglect and Hoarding during COVID-19
Date/Location:	6th July VIRTUAL
Contact:	Web: www.socialcareconferences.co.uk/virtual-online-courses/self-neglect-and-adult-safeguarding-responding-to-self-neglect-hoarding

Event:	UK Care week
Date/Location:	6th-7th July, NEC Birmingham
Contact:	Web: www.ukcareweek.com/

Event:	Integrating Health and Social Care Conference 2022
Date/Location:	15th September, London
Contact:	Web: www.convenzis.co.uk/events/the-integrating-health-and-social-care-conference-2022-2

Event:	Retirement Housing Conference
Date/Location:	22nd September, The King's Fund, London
Contact:	Web: www.laingbuissonevents.com/retirement-housing-conference/

Please check with event organisers that conferences have not been cancelled or postponed due to coronavirus before booking or attending

CMM EVENTS

Event:	Leeds Care Conference
Date/Location:	30th June, Oulton Hall, Leeds.
Contact:	www.caremanagementmatters.co.uk/event/leeds-care-conference-2022/

Event:	Berkshire, Buckinghamshire, Oxfordshire Care Conference
Date/Location:	20th October, Wokingham
Contact:	www.caremanagementmatters.co.uk/event/berkshire-buckinghamshire-oxfordshire-care-association-conference-2022/

Please mention CMM when booking your place.
Sign up online to receive discounts to CMM events.

KEIR LYNCH • CHIEF EXECUTIVE • **ESSEX CARE LTD**

STRAIGHT TALK

How can care employers protect their workforce during the cost-of-living crisis? Essex Care Ltd Chief Executive, Keir Lynch, discusses the impact of the cost-of-living crisis on the sector, examining what employers can do to address it.

With the cost of living rising to the highest levels that we have seen in 30 years, care staff are at the hard edge of this crisis. In the wake of COVID-19 burnout, our sector is losing even more valuable talent.

The current cost-of-living crisis couldn't have come at a worse time. Already struggling from staff shortages in the wake of COVID-19, the industry is still trying to recruit to pre-pandemic levels. But sadly, many care workers are looking to move to other sectors to increase their income. I feel so disappointed when I hear this because, in my view, salaries should be reflective of the role. I see first hand the amazing work our carers do each day and the level of skill and personal qualities needed. As an industry, we should be asking ourselves why are we losing valuable talent and what can we do about it?

The obvious solution is pay. However, this presents a significant challenge for companies. You want to reward and hold onto valuable individuals who are leaving you but, in the current climate, you simply can't afford to pay more to keep them. Despite these extraordinary times, there are things that can be done. We've increased our average salary for front-line staff by more than double the rate of inflation since January. Yes, we've had to make savings in other areas but, without our staff, we wouldn't be where we are today. Average salaries for Essex Care Ltd (ECL) front-line staff are now as high as a newly qualified nurse/paramedic, and so they should be! Social care workforces are just as valuable as their NHS colleagues. Having a strong, efficient network of homecare and community services takes the pressure off an already over-stretched health system.

The cost of fuel is a huge concern. Our 750 community-based staff can each travel over 250 miles a week and reimbursement for this is important. Fuel prices have increased 40% in a year but the HMRC mileage rate has remained the same at 45p per mile for the past 12 years, so we've taken additional measures to help. When the fuel prices rocketed, we provided a one-off payment to all front-line staff towards this added cost. When we saw the energy price increase, we brought forward annual pay increases by three months to help further. We can't sustain this and we need commissioners in health and social care to see workforce capacity as an investment worth making to prevent the costs and poor outcomes of hospital admission delays, unmet need, failed discharges and re-admissions.

Hourly rates are important but they are just one element of staff retention. Making employees feel valued, providing a flexible and supportive working environment and offering opportunities for personal development keep your workforce with you for longer and will help to make you more attractive to potential employees. We have to be brilliant at everything non-salary related to compete with other sectors and we are investing more in management training and staff development than ever.

It seems to be working. We have high staff engagement, even after two years of pandemic working, our retention is better than the rest of the sector and we now have more front-line staff than at the start of the pandemic. Yet, despite these promising developments, we still need to recruit more staff to meet the growing demands on care.

Vanessa Worham, an ECL Community Care Assistant, also says that the rising cost of fuel and energy prices are concerning. Vanessa joined ECL during the first wave of the pandemic after being made redundant from her job in print and promotional sales. In relation to the rising cost of living, Vanessa told me, 'I think ECL, like so many other care providers, is doing as much as it can to help with the cost of living. Providers are very restricted to funding and, as much as they might want to pay staff even more, it's not always possible. I love this job; even though my old industry paid more, I wouldn't go back. With the additional benefits and pay rises that ECL has introduced, my salary is close to what I earned in sales and they are funding my health and social care diploma, which is invaluable.'

There's no doubt these are testing times for everyone and, as Chief Executives, we have a responsibility to do as much as we can to help our staff to get through this. I firmly believe that valuing existing staff not only results in greater retention, but they are also your best assets when it comes to attracting new employees.

Keir Lynch is the Chief Executive of Essex Cares Ltd.
Email: **Keir.Lynch2@essexcares.org.** Twitter: **@eclcarecompany**

MARKEL
3RD SECTOR
CARE AWARDS 3

CELEBRATE
WITH US IN 2023

Ceremony date
CONFIRMED

Friday 3rd March 2023
The Grand Hotel, Birmingham W1K 6JP

www.3rdSectorCareAwards.co.uk

@3rdSectorCare #3rdSectorCareAwards

Organised by

CMM
CAREMANAGEMENTMATTERS

Headline sponsor

MARKEL®

Nominations
OPENING SOON

Want to help improve the quality of life of those receiving care in the UK?

APPLY NOW

Are you a creative thinker?
Have you a passion for making ideas a reality?
Do you want to make a positive difference to people's lives?

The Care Innovation Challenge is a hackathon-style creative weekend of idea generation and prototype trialling in July 2022.

With cash prizes for the top spots, expert mentoring and guaranteed media coverage this is an opportunity not to be missed.

Who can apply?

- University students
- Entrepreneurs
- Working professionals
- Care Managers and Care Staff
- People with lived experience of care and support

> **"Without the Challenge, it would have been a much, much longer journey. Maybe I'd have ended up burnt out as it's really hard to run a start-up model by yourself. The Challenge made it 100 times easier."**
>
> *Maaha Suleiman, 2019 Challenge Runner-up and CEO/Founder of www.carematched.co.uk*

You can apply as a team or as an individual.

Teams must be 2-3 people.

REGISTER NOW
at **www.careinnovationhub.org.uk**

NCF THE NATIONAL CARE FORUM

CiH