

CMM

CAREMANAGEMENTMATTERS

SEPTEMBER 2022

www.caremanagementmatters.co.uk

WHY ESG MATTERS

And how to do it right



Making culture count

Offering culturally appropriate care

Protecting your business

The dos and don'ts of cyber security

Resource Finder

Training

Used by over 3,500 care providers

A simple way for staff to create care plans
and log care as it happens



40% Staff
retention increase



More time to care



Number 1 choice
for care staff



Reduces stress



Facilitates
teamwork

Are your care staff being weighed down by the burden
of maintaining paper-based care records?

Using a Digital Care Planning System doesn't have to be daunting!



GP Connect



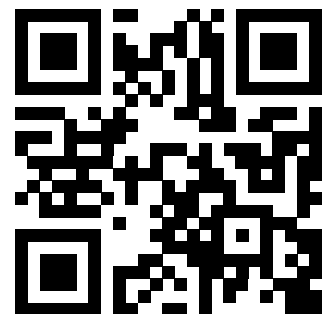
Person
Centred
Software

Book a demo with us today

01483 357 657

hello@personcentredsoftware.com

www.personcentredsoftware.com



Scan me to find out more

In this issue

Social Care Insights	05
Simon Bottery finds evidence of quality gaps, management failings and racism in adult social care.	
Inside CQC	07
In her latest column, Chief Inspector of Adult Social Care at CQC, Kate Terroni, shares further insights into the regulator's future plans and updates on inspections and workforce training.	
CMM News	09
Into Perspective	30
This month, we ask, how can providers work with families to improve care?	
Celebrating Excellence	46
Find out why The Grange won in the Campaigning for Change category at the Market 3rd Sector Care Awards 2022.	
Event Review	48
A look back at ARCO's Housing with Care Conference.	
What's On?	49
Straight Talk	50
Dr Jane Townson shares thoughts on what needs to be done to sustain the homecare sector.	



20



36

REGULARS



25



33



41

- 20 Sowing the seed: Why sustainability and business go hand in hand**
With Environmental, Social and Governance (ESG) climbing up the agenda, social care needs to take action. Jonathan Freeman MBE offers the inside scoop on what CareTech is doing in this area and gives key tips for other providers.
- 25 Understanding identity: Providing culturally appropriate care**
The sector is always striving to improve its offering of person-centred care, so how can this be extended to culturally appropriate support? Maaha Suleiman of Care Matched gives insights and practical tips for change.
- 33 The Care Innovation Challenge: CMM meets the finalists**
Find out all about the finalists in NCF's Care Innovation Hub Challenge in this exclusive interview.
- 36 Under lock and key: Making the NHS and social care cyber safe**
As we head deeper into a digital world, it has never been more important to keep your cyber security protocols up to date. With this in mind, NHS Digital's Executive Director of Cyber Operations, Mike Fell, explores best practice in staying safe.
- 41 Resource Finder: Training**
It's no secret that retention rates need improvement, and training your staff and offering new learning opportunities is a step towards that. CMM profiles some of the sector's top training providers.

FEATURES

CMM

CAREMANAGEMENTMATTERS

EDITORIAL

editor@caremanagementmatters.co.uk

Editor: Olivia Hubbard

Commissioning Editor: Angharad Burnham

Content Editors: Aislinn Thompson, Henry Thornton

PRODUCTION

Designer: Rebecca Mendil

Director of Creative Operations: Lisa Werthmann

Studio Manager: Jamie Harvey

ADVERTISING

sales@caremanagementmatters.co.uk

01223 207770

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

Care Management Matters is published by Care Choices Ltd who cannot be held responsible for views expressed by contributors. Care

Management Matters © Care Choices Ltd 2022

CCL REF NO: CMM 19.6



CMM magazine is officially part of the membership entitlement of:



CONTRIBUTORS



@blimeysimon

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



@CQCProf

Kate Terroni
Chief Inspector
of Adult Social
Care, Care Quality
Commission



@jonathanfreeman

**Jonathan
Freeman MBE**
Group
Sustainability
Director, CareTech
Holdings PLC



@carematched1

Maaha Suleiman
Founder and Chief
Executive, Care
Matched



@kathrynsmith

Kathryn Smith
Chief Executive,
Social Care
Institute for
Excellence



@jewish_care

Rachel Jones
Director of Care,
Housing and
Hospitality,
Jewish Care



@NHSDigital

Mike Fell
Executive
Director of Cyber
Operations,
NHS Digital



@grangecentreceo

Eloise Appleby
Chief Executive
Officer, The
Grange Centre
for People with
Disabilities



@drjanetownson

Dr Jane Townson
Chief Executive,
Homecare
Association

**Are you getting the benefit
of the CMM website?**

Sign up today to start getting more
from CMM. It's **FREE** for care providers.

www.caremanagementmatters.co.uk

SOCIAL CARE INSIGHTS

From Simon Bottery



Simon Bottery digs deep into a recent report by MPs and finds evidence of quality gaps, management failings and racism in adult social care.

The recent House of Commons Health and Social Care Committee's report had some damning things to say about the failure to plan for our health and social care workforce needs. It ran to 77 pages and generated a fair amount of media coverage, yet the report could only scratch the surface of the 154 pieces of written evidence it received. Dig into this and we get an even more vivid – and often alarming – picture of the state of social care. These are snapshots of individual experience, submitted in January 2022, and they may not be fully representative, but they nonetheless point to concerns that workforce shortages are impacting on service quality

and financial viability, while also flagging worrying problems about issues such as management quality, lack of training and racism.

On service quality, for example, the Norfolk Care Association – which represents social care providers in Norfolk and Waveney – said recruitment was particularly difficult in its area and believed this was resulting in too many below-par CQC reports due to 'unsafe staffing levels'. It said, 'It's clear to see in Norfolk we are struggling with recruitment and retention to the extent that it is having an effect on safety.' The disability charity, Papworth Trust, meanwhile, spoke of the impact of staff shortages,

and resulting increased use of agency staff, on their residents, 'We must ask the question; what does inconsistency of staff, or a change in their ratios from 2:1 to 1:1, limit them doing? We need to consider the detrimental impact this staffing crisis is having on the individual's quality of life and their independence.'

Another provider said it was having to turn away potential residents because of staff shortages and was concerned about the impact on its financial viability. Rapport Health and Care told the committee that over three months its nursing home in Tonbridge had declined around 50 enquiries because of lack of staff, with a potential annual loss of revenue of £3.8m. This was despite receiving calls 'almost daily' from Tunbridge Wells Hospital wanting to discharge patients.

Providers were facing staff issues that had their origins well before the pandemic. In its evidence, Dimensions – a large not-for-profit provider – highlighted the issue of management quality. In its exit interviews with departing staff, it found that local leadership was commonly cited as a reason for leaving. It believed that decades of underinvestment in social care meant 'too many of those managers lack the soft leadership skills to cope'.

Another, the Mortimer Society, said underfunding meant it was unable to give staff the training that would help to retain and

motivate them saying, 'All care staff undertake induction training leading to the Care Certificate and we encourage staff to undertake further training. However, there is limited funding for this and without increased funding of residents' fees there cannot be adequate provision of training for staff at all levels.'

Perhaps the most disturbing evidence came from Prema Fairburn-Dorai, of Primary Homecare, who said it had looked to recruit from overseas to tackle staff shortages but found this had generated problems with some existing staff, who had been 'intolerant, judgmental and unhelpful' to the new recruits, coupled with 'undertones of racism' from some of them. It sometimes found similar problems with clients' attitudes but said, 'If we make it clear that we will not tolerate such behaviour, we are not always supported by the local authority and are criticised for handing back the care package.'

Overall, the committee's report – and the wider evidence submitted to it – should be essential reading for anyone who still thinks that social care will be 'fixed' by the current reforms to eligibility and the introduction of a cap on lifetime care costs. The evidence shows that the problems go far, far deeper and will require sustained action and investment to tackle. The worry is that the Government shows no sign of providing that.

Simon Bottery is a Senior Fellow in Social Care at The King's Fund. Email: S.Bottery@kingsfund.org.uk Twitter: [@blimeysimon](https://twitter.com/blimeysimon)



Health & Social Care Lawyers You Can Trust

Gordons Partnership
SOLICITORS

Persistence and resilience only come from having been given the chance to work through difficult problems. - Gever Tulley

At Gordons Partnership, we understand the challenges care providers are confronting. Let us guide you through any legal issues you are facing, with specialist lawyers you can count on.

 www.gordonsols.co.uk

 sols@gordonsols.co.uk

London: 020 7421 9421 | Guildford: 01483 451 900

soldo

Replace petty cash with individual cards

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

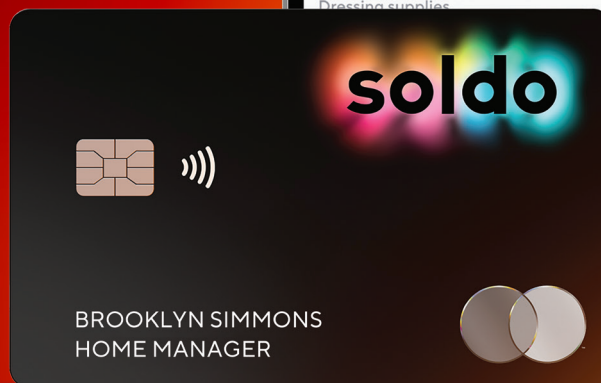
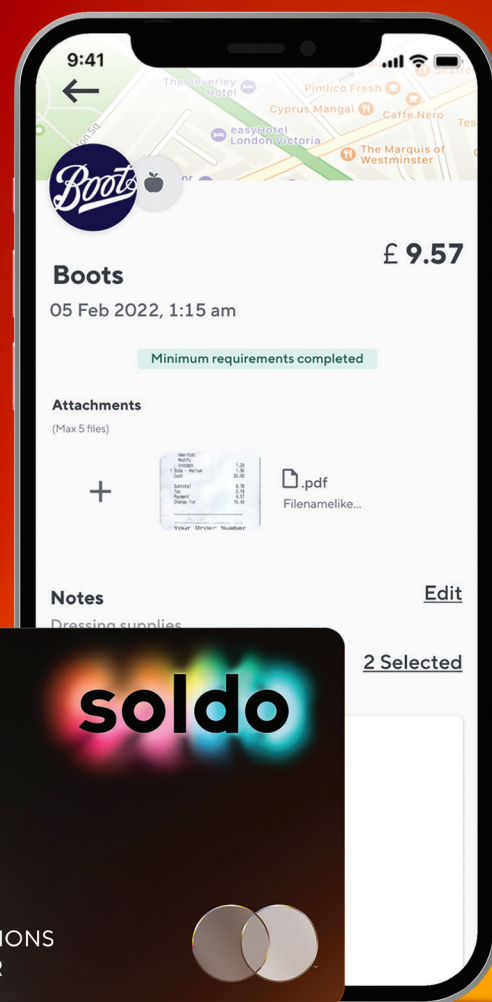
Talk to us at

The Care Show
12-13th Oct, Stand E93

Trusted by



soldo.com/care



I am absolutely committed to the sector's shared goal – that people receiving good care is at the heart of what we do, to help us recover from the pandemic. We know that many of you face long-standing challenges such as funding, recruitment, infection prevention control and risk management. I would like to personally acknowledge the hard work and dedication shown by you all; it's something seen by CQC's inspection teams every day. It remains crucial for all of us who work in health and social care to overcome these challenges to provide high-quality, person-centred care.

NEW FRAMEWORK

I've spoken previously about the importance of bringing people's experiences and their stories into the heart of our work at CQC.

"As part of our continued transformation, we are developing a new single assessment framework to deliver our ambitious strategy"

Understanding the expectations, needs and experiences of people using care is vital to all our work and, ultimately, to improving the quality of care. As part of our continued transformation, we are developing a new single assessment framework to deliver our ambitious strategy. This new single assessment framework is for providers, local authorities and systems and focuses on what matters to people who use health and social care services and their families.

The new regulatory model is aligned to the Think Local Act Personal (TLAP) 'I' statements which my colleague Joyce Frederick, Director of Policy and Strategy, recently wrote about. It is our shared goal that everyone gets the best possible care. Using 'I' statements will mean our starting point will always be what the public said is important to them. Listening to people's stories and making the voice of people's lived experience central to the decisions we make as

a regulator, is something I will always champion.

The new single assessment framework will form the basis for our assessments of quality from 2023, so I am sure you will be keen to see the new quality statements and evidence categories which are now on our website. Between now and the end of 2022, we will be piloting our new ways of working with a small number of providers including some homecare and care home providers, and my team continues to be open to your feedback through Citizen Lab, online workshops, forums and provider steering groups.

FEEDBACK AND TRAINING

Through feedback from recent inspections, I'm aware that we need to focus on some of the basics of care. Attention to pressure area care, nutrition and hydration and medicines management are essential and those are some of the areas that we have seen deteriorate.

With more than 20,000 inspections

undertaken since the start of the pandemic, my inspection team continues to prioritise inspections where there is a risk to people's safety. We will also look for improvement and, where possible, we will inspect those services and re-rate.

As you will know, from 1st July, all health and social care providers registered with CQC are legally required to ensure that their staff receive training in how to interact appropriately with people with a learning disability and autistic people, at a level appropriate to their role. If you haven't seen them already, you may find the Government's FAQs useful. Since my last column, we have updated our infection prevention and control in care homes tool and we have also shared the latest resources and guidance on recruitment of staff, including overseas workers and refugees. As ever, you will find additional resources and guidance on our website, and useful updates in our email bulletins which you can sign up for on the CQC website.

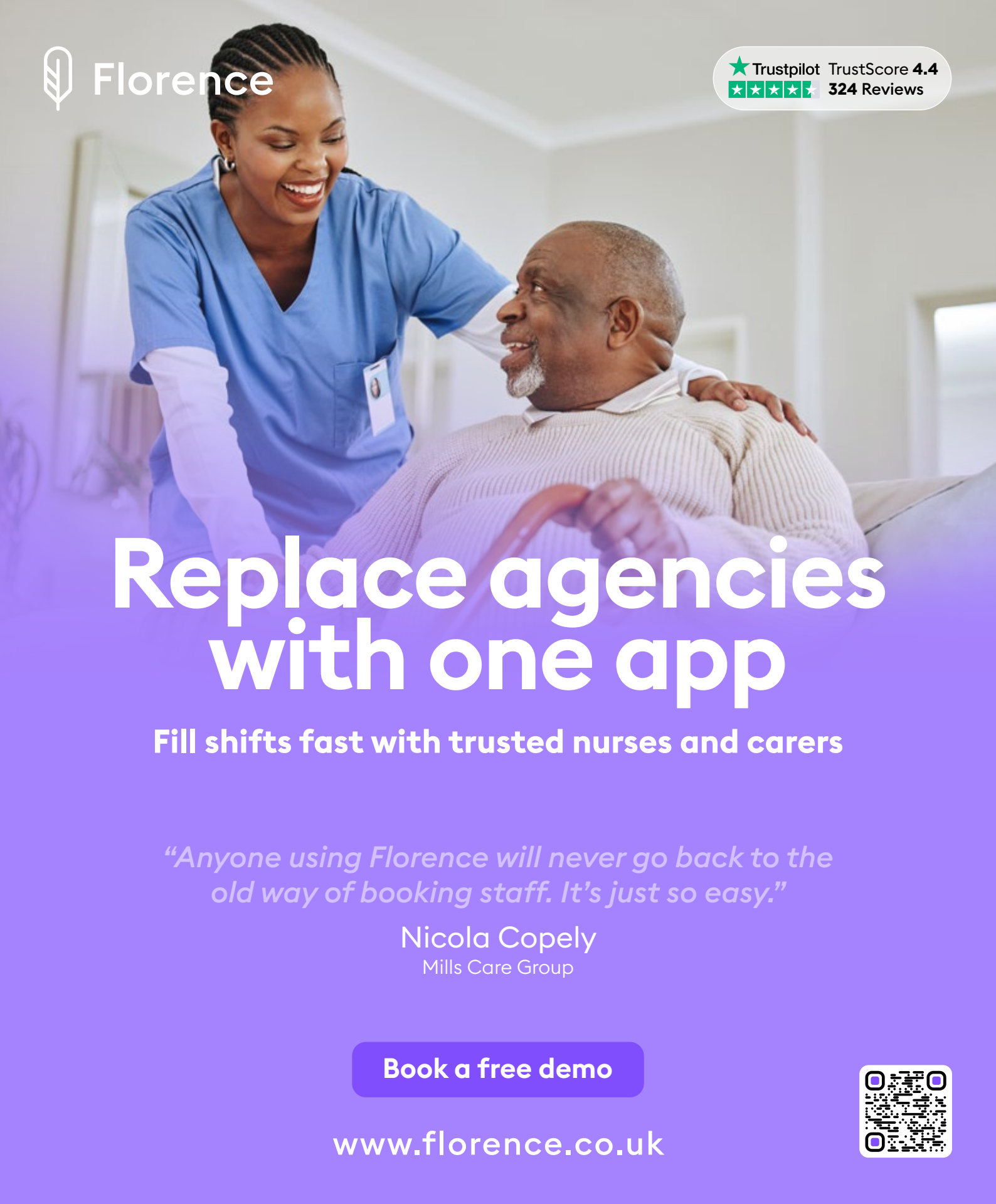
Inside CQC

K A T E T E R R O N I

In her latest column, Chief Inspector of Adult Social Care at CQC, Kate Terroni, shares further insights into the regulator's future plans and updates on inspections and workforce training.



Kate Terroni is Chief Inspector of Adult Social Care at the Care Quality Commission. Twitter: @CQCProf. Share your thoughts and feedback on Kate's column in the comments section at www.caremanagementmatters.co.uk, and don't forget to stay up to date with the latest social care news on CMM's twitter feed, @cmm_magazine.



Replace agencies with one app

Fill shifts fast with trusted nurses and carers

"Anyone using Florence will never go back to the old way of booking staff. It's just so easy."

Nicola Copely
Mills Care Group

Book a free demo

www.florence.co.uk



NEWS

Call for long-term plan

Adult social care needs immediate funding and a long-term plan, says the Levelling Up, Housing and Communities Committee (LUHC).

Examining the Government's charging reforms and local government finance, unpaid carers and workforce challenges, the report says the 'message rang clear throughout our inquiry: the adult social care sector does not have enough funding either in the here and now, or in the longer-term'.

The Committee's report outlines that:

- The Government currently has nothing more than a vision for adult social care, with no roadmap, no timetable, no milestones and no measures of success. The Government should come forward with 10-year plans for how it will achieve its vision outlined in the 'People at

the Heart of Care' White Paper and for the adult social care workforce.

- The Government should provide a multi-year funding settlement to give local authorities what they need in terms of their own sustainability and their ability to help shape sustainable local care markets.

Clive Betts, Chair of the LUHC Committee, said, 'The NHS and adult social care provision should not be pit against one another. The two systems are interdependent and each needs to be adequately funded to reduce pressure on the other. Wherever the money comes from — from allocating a higher proportion of levy proceeds to social care, or from central Government grants — the Government urgently needs to allocate more funding to adult

social care in the order of several billions each year.'

Councillor David Fothergill, Chairman of the Local Government Association's (LGA) Community Wellbeing Board, said, 'Developing a strategy for the social care workforce, with a requirement of working towards parity with the NHS is something the LGA has long campaigned for and could be transformative for social care, in both changing perceptions of the critical role of care work and increasing capacity in the workforce. Reducing the reliance on Council Tax to fund adult social care and publishing a new burdens assessment by the end of the year to determine the level of resource needed by local government to deliver the full package of adult social care reforms would also be a positive step for the sector.'

ADASS survey on assessments

Six hundred people a day are joining growing waiting lists to be assessed for care and support in England, as adult social care buckles under unprecedented pressures.

Almost 300,000 people are now waiting for an assessment of their needs by social workers, an increase of 90,000 (44%) in five months. One in four have been waiting longer than six months. At this rate of increase, the number waiting will hit 400,000 by November — double the total 12 months previously.

The latest figures have emerged from a count carried out by ADASS through its members in local councils across England. The results are extrapolated from responses from 83 councils (55% of those concerned).

On the count date of 30th April, a total of 294,449 people were awaiting the first assessment of their care and support needs, of whom 73,792 had been waiting more than six months.

A further 37,447 people who had been assessed as needing a service, were waiting for it to begin or for their first direct payment to arrange it for themselves. 210,106 people receiving a service or payment were overdue for a review under the terms of the Care Act. In all, 542,002 people were awaiting assessment, review or the start of a service or direct payment — an increase of 37% on an equivalent count in November 2021.

The ADASS Spring Survey found that most councils were facing rises in numbers of people seeking

support: 87% said more were coming forward for help with mental health issues, 67% reported more approaches because of domestic abuse or safeguarding, and 73% said they were seeing more cases of breakdown of unpaid carer arrangements. In addition, 82% of councils were dealing with increased numbers of referrals of people from hospitals and 74% were reporting more referrals or requests for support from the community.

Almost seven in 10 ADASS members surveyed said that care providers in their area had closed or handed back contracts. Many more said they could not meet all needs for care and support because of providers struggling to recruit and retain staff.

APPOINTMENTS

AMBER HOUSING

Property development and housing management provider Amber Housing has appointed Troy Henshall as its new Chief Executive as the not-for-profit continues its five-year strategy plan for growth and expansion of its portfolio.

Amber Housing operates as a fully owned subsidiary of UK charity care provider, Ambient Support, providing quality housing management, property development and facilities management across the UK.

ORBIS EDUCATION

Orbis Education and Care has appointed Kelley Fray as its new Chief Operating Officer. Orbis is one of the UK's leading providers of specialist schools and homes, supporting children and adults with complex needs associated with autism. Previously Managing Director at the Salutem Group, Kelley brings with her more than two decades of experience working in the care and SEND sector.

PJ CARE

Specialist neurological care provider, PJ Care, has appointed Lisa Andrew as its new Operations Director. Lisa, who joined PJ Care as Clinical Operations Manager in July last year, takes over the role from Mark Butler, who has retired.

SALUTEM CARE AND EDUCATION

Salutem Care and Education has appointed a new Chief Operating Officer as it celebrates its fifth birthday as a multi-service care group. Martyn Heginbotham has worked with the group, which specialises in caring for individuals with complex mental and physical disabilities, since 2017 but established himself in the care sector as a school leaver.

COVID-19, disablism and racism commission

A new COVID-19, disablism and racism commission, led by the Voluntary Organisations Disability Group (VODG), has launched a call for views and experiences. The Commission urges disabled people and people with long-term health conditions from Black, Asian, and minority ethnic groups to share their perspectives on the impact of the COVID-19 pandemic.

The evidence gathered by the Commission on COVID-19, disablism, and systemic racism will be used to hold the UK Government to account over failings during the pandemic, as well as build solutions for transformative and sustainable change in social care.

Research already conducted by the Commission has shown that disabled people, as well as people from Black, Asian, and minority ethnic groups, experienced disproportionate levels of harm

during the pandemic. This was both in terms of risk of infection, illness, and death from COVID-19 but also because of the wider impact of COVID-19 on socioeconomic and health inequalities that already existed for these groups of people.

Dr Rhidian Hughes, Chief Executive of VODG, said, 'VODG is honoured to be leading this important programme of work and to be supported by such an informed and accomplished Board of Commissioners. We will work closely with people who draw on social care, and their allies, to call attention to the injustice that has taken place for disabled people and their families since the onset of the pandemic. Our focus on co-produced solutions and future progress will enable us all to uphold the principles of justice and human rights.'

The deadline for submissions is Friday 30th September.

New research on workforce pressures

Research on workforce pressures has revealed that 43% of health and social care workers are considering a job change due to the pressures of their current job.

A study of over 1,000 health and social care workers, conducted by Florence, the tech platform providing health and social care workers access to available shifts, found that almost a third of healthcare workers (28%) admit to feeling overwhelmed at least once a week, with 17% feeling burnt out every day. A staggering 97% believe the cost-of-living crisis has caused further stress or burnout among healthcare professionals.

It comes after more than half of healthcare workers (56%) admit to working more than two to three times a week over their contracted hours, with 7% working overtime every day. Not having enough staff is causing the most pressure in their role (50%), followed by low pay

(39%) and high workload (35%).

The study reveals nine in 10 (89%) NHS and social care workers state chronic staff shortages are affecting the quality of care. Analysing this deeper, three quarters (76%) stated quality of care is already being 'severely' impacted as high vacancy rates sweep across the industry.

However, research suggests that things are set to get a lot worse with nearly nine in 10 (85%) health and social care workers expecting wait times to increase over the rest of 2022.

The study shows that to reduce wait times a third (30%) believe the Government needs to put an increased focus on recruitment and hiring, over a quarter (27%) are calling for the whole system to be overhauled and over one in five (22%) feel the Government needs to encourage more people into the sector early on (for example, at school or college).

KIERAN
LYNCH & CO

CARE SECTOR VAT SPECIALISTS

Supporting Care Providers with VAT Mitigation

Contract Restructuring of Welfare Services

Business as usual annual VAT savings going forward

Retrospective four year opportunity

Capital goods items across the last ten years within scope

Established VAT practice in the social care sector for last eight years

All cases undertaken with both funder approval and HMRC approval prior to inception

We act as your outsourced VAT team, minimising impact on your in-house Finance Team

No major need for wholesale system changes or additional admin

Contact either **Ian Sutton** or **Jock Waugh** for more details.

e ian.sutton@kieran-lynch.co.uk or e jock@kieran-lynch.co.uk

Telephone: 0114 262 2127

w: kieran-lynch.co.uk

Councils raise concerns over resources

A Local Government Association (LGA) survey of councillors shows councils are concerned about the growing pressure facing social care. The capacity and financial resources required to deliver the Government's reform agenda is also a concern, reports the LGA.

The survey found that lead members for adult care have serious concerns over the deliverability of the imminent adult social care reforms within the current climate and to the current timescale, with many concerned that crucial council services may be negatively impacted to afford the reforms.

According to the LGA, these join growing evidence from across the health and care sector of the growing pressure facing adult social care and the need for urgent new investment to deliver much-needed care so

that people can live a life of equality.

A survey from Association of Directors of Adult Social Services found that as of 30th April 2022, more than 540,000 people were waiting for assessments, care, direct payments, or adult social care reviews, an increase of 37% in just six months. The NHS Confederation said in a recent statement that NHS leaders were 'sounding the alarm' on social care and called for a 'rescue package' for the sector.

The LGA had previously warned that underfunded reforms run the serious risk of exacerbating significant ongoing financial and workforce pressures, including significant vacancy rates across the sector. Unless action is taken and Government rethinks its plans, people who draw on care may experience reductions in quality and availability of services.

Study on family caregivers' experiences

Family caregivers in the UK were marginalised during the pandemic and vulnerable older people were let down by the health system, according to a new study from the University of Stirling Management School.

The paper, 'Locked-in: the dangers of health service captivity and cessation for older adults and their carers during COVID-19' is published in the *Journal of Marketing Management*.

Caregivers felt 'powerless, voiceless and choiceless' during the first six months of the pandemic, as chaos reigned in some parts of the health system. Elderly relatives were prematurely discharged and health records sometimes changed without due process.

Dr Carolyn Wilson-Nash analysed 2,607 posts on forums for UK-based family caregivers between 15th March and 15th September 2020. She said, 'When the pandemic hit,

the NHS responded by postponing non-emergency procedures, closing non-emergency services and redeploying specialists, which released necessary hospital beds. Unfortunately, these actions had negative consequences for older people and their carers.'

The report makes a number of recommendations, including improving communication between the NHS and family caregivers, not closing complaints procedures and reducing the stress of front-line NHS employees through reduced workloads, emotional support services and better provision of PPE.

It also recommends policy changes such as addressing the scarcity of in-home care services, both NHS and private, by offering business loans, for example; and increasing regulations on service providers so that patients cannot be discharged if they have nowhere to go.



CQCexperts.com

Total CQC Compliance Solutions

CQC Experts work with you to achieve and maintain CQC Compliance for your business, allowing your staff to focus on caring.



**CQC
Registration
Support**



**Ongoing
CQC
Compliance**



**Policies and
Procedure
Packs**

Call us on **01462 222600** to find out how we can support you.

www.cqcexperts.com • hello@cqcexperts.com

Policy packs from £74.95 per month

Sector responds to NHS survey

NHS leaders across England say staffing gaps, and a lack of capacity in social care, are putting the care and safety of patients in the NHS at risk.

Almost 250 NHS leaders responding to an NHS Confederation survey say that patients are being delayed in hospital much longer than they should be, with the knock-on impact resulting in higher demand on A&E departments and longer ambulance response times.

NHS leaders stand in support of their social care colleagues

and are urging the Government to increase investment in care services, including boosting wages for care workers. They say failure to act will leave more and more vulnerable people without the care and support they need, as well as piling further pressure on front-line NHS services.

Nine in 10 leaders report that the pressure from the fallout of a lack of appropriate and timely social care pathways for people leaving the hospital is having the biggest impact in A&E, with almost the same number (86%)

saying this is having a huge knock-on effect on ambulance response times. Almost three-quarters also say their efforts to bring down waiting lists are being hampered by a lack of social care capacity.

Almost all said that the one immediate single change the Government could make now to alleviate the pressure on the social care system would be to increase pay for social care staff. NHS leaders recently called on the Government to immediately implement a national care

worker minimum wage of £10.50 an hour.

Professor Martin Green OBE, Chief Executive of Care England, said, 'The Government must understand that health and social care are two interdependent systems and social care needs immediate extra funding to improve pay and conditions and then a long-term workforce strategy that aligns with the NHS workforce plan. If the Government fails to focus on the social care workforce, the impact on the NHS will be catastrophic'.

Annual review of complaints published

The Ombudsman's annual review of complaints has been published, giving a concise overview of the state of local government complaints over the past year.

As it increasingly focuses on making wide-ranging recommendations to better council services, the Local Government and Social Care Ombudsman has directed more improvements to local councils in the past year than ever before.

Although the Ombudsman's role is to remedy individual people's problems, it is increasingly looking at how it can make sweeping recommendations on the back of those complaints to help councils learn and improve services for everyone.

In 2021-22, the Ombudsman made 1,848 service improvement recommendations, with all but a small number of councils complying (99.7%).

In one case, a council insisted

a family pay a top-up fee for a relative's care home place, despite not offering one where they did not need to pay extra. Following the Ombudsman's investigation, the council reviewed its processes and reimbursed a further 29 families.

Michael King, Local Government and Social Care Ombudsman, said, 'One complaint can have immense power to change things for the better, and we're increasingly

focusing on to how we, and the local authorities we investigate, take the learning from those complaints and improve service provision.

'The vast majority of councils agree to the recommendations we make and see them as common-sense ways of providing better services for people in their area. However, this can only happen when councils act swiftly when they have committed to do so.'

Analysis on the workforce pay gap

The Voluntary Organisations Disability Group (VODG) warns that pressures on essential social care will continue to mount if the workforce is not given parity in pay.

It comes in response to the public sector pay rise announcements, which will see levels of pay increase for NHS and other public sector workers.

VODG, an infrastructure body representing more than 130 voluntary sector providers of disability services, raises concerns that charities are being disproportionately impacted by increasing workforce challenges and that without parity in workforce pay, and more sustainable funding from central government, the risk of cuts to service provision will only increase,

leaving disabled people and their families without essential care and support.

Research commissioned by VODG member Community Integrated Care, indicates many social care workers would be paid up to 39% more – an additional £7,000 – if they worked in other public-funded sectors. Voluntary sector providers are also being hit by National Insurance reform which requires them to find upwards of £134m in 2022/23 to contribute to the health and social care levy. The full three-year effect allowing for the impact of increased salaries driven by uplifts in the National Living Wage (NLW) is estimated to be £428m. The reality of this situation is that charities will, on average, need to

contribute an extra £20,392 a year in National Insurance payments.

The VODG survey of 28 not-for-profit providers which covers some 32,000 employees suggests that currently around 6% are paid at NLW rates. With the further increases in NLW it will mean that this number will rise to 54% of the workforce covered in the survey by 2024. In other words, in the course of just three years around half the workforce would fall into NLW rates of payment unless their employers are able to increase pay at a rate higher than 6% per year.

Most not-for-profit employers appear to have recognised the need to increase pay but have struggled to deliver consolidated uplifts year on year, with many

resorting to non-consolidated bonuses dependent upon their end-of-year position. Respondents to the survey show an average uplift of around 2.2% in 2019, increasing to 3.7% by 2021. Most respondents were unable to confirm their strategy for uplifts in 2022. Many social care employees did not anticipate such a significant uplift to NLW, which means that some plans for additional pay have been overtaken by the legal requirement to increase pay to £9.50 per hour.

It would seem increasingly likely that as NLW increases, employers will need to use what resources they have to meet this statutory requirement rather than seek to increase workforce pay above this rate.

LOVE LAUNDRY

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

✓ **Safe and sound**

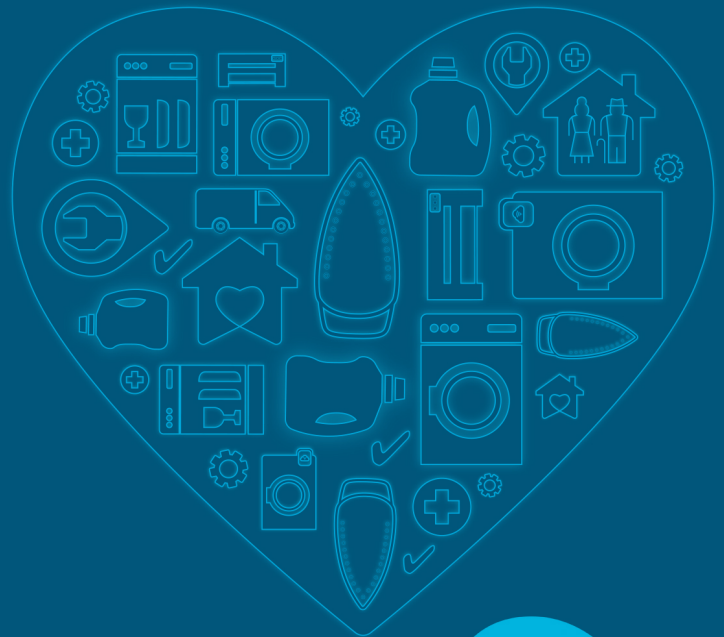
Helping you create an infection-free environment.

✓ **Made for you**

Bespoke laundry and finance options to suit you.

✓ **Count on us**

Professional, approachable and at your service.



Nominate your laundry hero
washco.co.uk/lovelaundryawards

**LOVE
LAUNDRY
AWARDS**

08000 546 546 | WASHCO.CO.UK



Financial management 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.
- Streamline your operations and automate your financials.



Download product brochure

Sage

Human rights in care settings report published

The Joint Committee on Human Rights (JCHR) has warned that gaps remain in how vulnerable people are protected in care settings, leaving their human rights at risk of being breached.

The report found that mechanisms such as Do Not Attempt Cardio Pulmonary Resuscitation notices and Deprivation of Liberty Safeguards are often not applied correctly, meaning treatment can be wrongfully withheld or an individual's liberty infringed. It calls on the Government to work with the Care Quality Commission (CQC) to ensure there is stringent oversight of how care providers implement safeguards designed to protect the human rights of care users.

Findings also raised concerns about the slow progress in securing visitation rights for care users. It warns that continued blanket restrictions are a needless risk to the mental and physical wellbeing

of care users. It calls on the Government to establish a legal right for care users to nominate individuals for visiting rights. It also calls on the CQC to play a greater role in ensuring care providers are not needlessly blocking care users from seeing loved ones.

Helen Wildbore, Director of the Relatives & Residents Association, said, 'The Committee's report is a damning indictment of the failure to protect people placed in the most vulnerable of situations. From the lack of action from the regulator to the lack of training for care staff, older people are being left at risk of having their fundamental rights breached. Our helpline hears from people using care and their families who feel powerless and voiceless. Rather than seeking to weaken human rights laws, the Government must urgently act to redress the power imbalance in care and ensure older people are treated with dignity and respect.'

Report outlines population trends in counties

New analysis, carried out by the County Councils Network (CCN), shows for the first time in history, county and rural areas now have as many people aged over 65 as children and young people.

The CCN warns that this demographic shift is adding significant pressure to adult social care services. But funding from Government has failed to keep up with these changes, with county authorities receiving money based on an 'outdated' funding formula.

Because of this, social care services in county and rural areas are hundreds of millions of pounds worse off compared to cities and large towns in England – with these councils facing a further multi-billion-pound shortfall from next year's planned care reforms. The analysis of Census data shows that between 2011 and 2021, those

aged 65 and over grew by 1.1m (23.3%) in county areas, while the number of those aged 0-19 rose by just 72,000 (1.3%), meaning the number of new over 65s outnumbered children and young people by a ratio of fifteen to one.

In contrast, the ratio of new over 65s to children and young people in towns and cities in the North and West Midlands was three to one and in London two to one, with the combined growth in older people in these areas 400,000.

Analysis for CCN shows that if the Government had implemented a new funding formula for social care services the Government previously developed as part of its long-promised reforms, county and rural councils would be receiving at least £440m additional funding each year.

IN FOCUS

Recruiting and retaining personal assistants

WHAT'S THE STORY?

A survey by Think Local Act Personal (TLAP) and the Local Government Association reveals that people who draw on care and support are finding it very hard to recruit and retain personal assistants (PAs) and it has worsened during the pandemic period. There are around 70,000 people in England who employ a personal assistant. PAs play a vital role in supporting people to have choice and control in their lives but are too often 'forgotten' within the wider social care workforce.

WHAT WERE THE FINDINGS?

The online survey, responded to by 995 people, shows that recruitment and retention are getting harder, regardless of the additional pressures imposed by COVID-19. Low pay and poor terms and conditions are the primary drivers, alongside the effects of the pandemic and a shortage of workers across social care.

- 77% of people who had needed to recruit a PA had found it more difficult and two thirds said people were taking jobs with better pay rather than PA jobs.
- 59% think it's harder to find PAs with the right skills, values or training.
- Low pay, poor terms and conditions and insufficient hours were key factors in PAs leaving.

WHAT DID THE EXPERTS SAY?

Councillor David Fothergill, Chairman of the Local

Government Association's Community Wellbeing Board, said, 'It's worrying to hear about the struggle that many who draw on care have in recruiting and retaining personal assistants and highlights the continued issue all areas of social care currently have with finding and keeping staff. Personal assistants are a crucial part of the social care workforce; they deliver brilliant care and support and hugely enhance the lives of the people they work for.'

The responses to this survey are stark, and clearly show how much more support is needed in this vital area of social care. Thank you to all of those who took their time to respond and inform us of their concerns within this critical service.'

Martin Walker, TLAP Policy Adviser for Self-directed Support, said, 'We know the Government is keen to increase the uptake of direct payments and a personalised approach in both health and social care, so we hope this report should stimulate some improvement for personal assistants and their employers.'

The full report shines a light on the needs of people who employ personal assistants, recognising the valuable role they play as part of the wider social care workforce. The detailed findings and people's personal experiences bring to life many of the points in the survey, which should be required reading for social workers, commissioners and those who work with direct payment recipients.

Visit www.thinklocalactpersonal.org.uk/Latest/Personal-Assistant-Survey-The-Forgotten-Workforce/ for more insights.

ARC launches research centre

Association for Real Change (ARC) England has launched the ARC England Learning Disability Research Unit, a major new strategic research programme to provide more and better data for the sector.

The COVID-19 pandemic shone a spotlight on the social care sector and exposed the data failings and poor understanding that have hindered its development for years. The new initiative is designed to enable a step-change in the understanding and appreciation of the large, but often neglected, learning disability and autism sector within the broader social care sector. The research programme will allow new insight into the size, value, structure and dynamics of the sector, identifying best practice and innovation and providing a knowledge base to inform business planning and shape future policymaking.

The development and content of the research programme will be guided by a new Research Steering Group that will also provide core funding for the initiative. The Group, chaired by ARC England, is formed of a cross-section of care providers and leading stakeholders and will meet for the first time on 11th August 2022, to confirm research priorities for the first 12 months. Amongst the new research projects being discussed will be a quarterly 'CEO Confidence Index' that will help track the health of the sector across a range of key indicators. The Steering Group will also act as a forum for discussing sector-wide issues and agreeing joined-up solutions.

ARC England has also set up a new Research Fund for individuals and organisations wishing to support this initiative. All donations will go towards increasing the scope and efficacy of the research programme.

Diabetes training and guidance launched in care homes

A multi-award-winning care home group has welcomed a new innovative set of guidelines which aim to improve care for residents living with diabetes following the successful launch of a training scheme in three of its centres.

Hallmark Care Homes held the first of many training sessions in collaboration with DUET diabetes recently at Henley Manor in Henley-on-Thames, Chamberlain Court in Royal Tunbridge Wells and Greenhill Manor in Merthyr Tydfil.

The purpose of the training was to show care home teams how to use the latest set of comprehensive guidelines from the National Advisory Panel on Care Home Diabetes (NAPCHG). In addition, care workers also took part in a practical training session on

blood glucose monitoring and glucometers.

A quarter of people living in care homes across the UK have diabetes. International diabetes expert, Professor Alan Sinclair, of King's College and Foundation for Diabetes Research in Older People (fDROP), is the lead author for the guidelines, which are set to improve the wellbeing, quality of life and clinical outcomes of all care home residents with diabetes.

The recommendations are now available for all care homes across the country. The National Advisory Panel for Care Home Diabetes (NAPCHD), chaired by Professor Alan Sinclair, was formed in mid-2020 to bring about a culture change in the way residents with diabetes are cared for in order to bring about sustained benefits.



Scan me

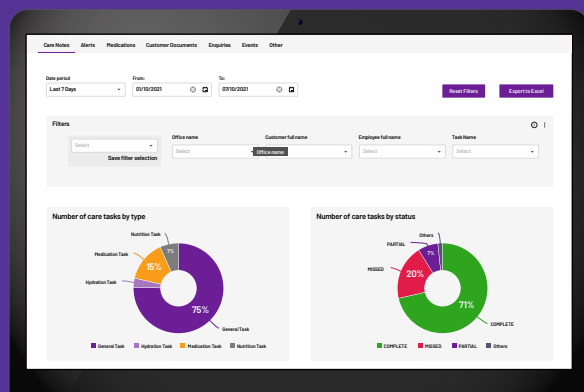
PASS
powered by everyLIFE



View | understand | share

The right information,
in the right hands,
at the right time

everylifetechnologies.com/pass-reporting



Organisations welcome start of COVID-19 public inquiry

Changes to the Terms of Reference for the Public Inquiry into the COVID-19 pandemic have been welcomed by organisations representing people needing care and support.

The inquiry will now look at the effect on the human rights of vulnerable people within the health and social care system, including those in care homes, hospitals, mental health units and rehabilitation facilities.

The acceptance of the revised Terms of Reference now paves the way for the inquiry to get started.

In April, the Relatives & Residents Association and John's Campaign submitted a joint response to the consultation on the inquiry's terms of reference calling for changes to ensure the impact on mental health and wellbeing of people needing care and support were reflected, as well as highlighting the

unequal impact of the pandemic on this group. These were two key revisions to the terms of reference the inquiry's Chair, Baroness Hallett, recommended to the Prime Minister.

The two organisations will be applying for core participant status in the inquiry as soon as possible and are represented by the law firm Leigh Day.

Julia Jones, the Co-Founder of John's Campaign, said, 'The

official mindset too often prioritises institutions over the individuals for whom they exist. By choosing to maintain a focus on the personal impact of COVID-19 measures in health and social care, the inquiry has the chance to do important work towards protecting our human rights and individual wellbeing in the future as well as analysing the errors of the past. This will matter to us all.'

NCF delivers care Innovation challenge

The National Care Forum (NCF) Care Innovation Challenge, a hackathon-style creative weekend, returned on 2nd-3rd July 2022. Creative thinkers, entrepreneurs and experts from the sector, including people with lived experience, came together at Coventry University's Technopark for two days of idea generation and prototype trialling.

Five finalist teams were selected to present their ideas at The Care

Show, the largest care event in the UK, on 12th-13th October at the NEC in Birmingham. The winning team will receive £1,000 in prize money, media coverage and further mentoring to develop their idea.

Team Care Tech Guide presented an idea focused on accelerating digital transformation in care. Team CHIP's idea was a cashless solution for adults with learning disabilities to support independent living. Team

Fall Free presented a solution to prevent falls and fractures in older people. Team Myghty's innovation was an app to foster employee recognition and team working to improve staff retention. Team Star offered the idea of local reablement and assessments with housing for people living with dementia.

Professor Vic Rayner OBE, Chief Executive of the NCF, said, 'The energy in the room was extremely

high, generating an explosion of ideas. The teams then got down to the process of business planning and prototyping, supported by our amazing mentors. There were so many great innovative approaches to social care being discussed it was a tough decision to pick the five teams to go through to the final.'

Visit www.caremanagementmatters.co.uk/nfc-care-innovation-challenge/ for more information.

dccare 
specialist healthcare business agents

Independent expertise
Nationwide knowledge



DC Care is delighted to confirm the sale of **Boars Tye**, a residential care home specialising in care for those with and without Dementia, including Palliative care, registered for a maximum of 27 service users.

When industry knowledge and wisdom are needed, when a discreet sale is desired, our clients choose DC Care to sell their healthcare business.

SALES | ACQUISITIONS | APPRAISALS | CONSULTANCY



01937 849 268

www.dccare.co.uk sales@dccare.co.uk



NEWS FROM ACROSS THE GLOBE

Alzheimer's Association International Conference (AAIC)

Research into Alzheimer's disease entered a crucial phase, as clinical trial results were presented at the 2022 Alzheimer's Association International Conference (AAIC).

The conference in San Diego presented an overview of clinical trial results for potential drugs for the diseases that cause dementia, as well as top line results on the impact of exercise on cognition in mild cognitive impairment. Researchers from the pharmaceutical company Annovis Bio looked at markers

of Alzheimer's disease, and found those who received Buntanetap were more likely to have improved nerve structure and function and lower levels of inflammation. In another study presented at AAIC, researchers in the US looked at the impact of exercise on memory and thinking in people with Mild Cognitive Impairment (MCI).

Participants were split into two groups: one which did stretching and balancing activities, and another which did aerobic intensity training over the course of the

study. For the first 12 months of the study, participants carried out exercise twice a week under supervision and completed unsupervised exercise a further two times a week. Between months 13-18 all their exercise was unsupervised. There was no decline in memory and thinking in either group over the course of the study.

Speaking about new drug treatments, Dr Rosa Sancho, from Alzheimer's Research UK, said, 'Dementia research is at a crucial phase, particularly in the search for life-changing treatments for

people with the disease.

'Many years of funding pioneering research, backing bright people with bold ideas, has taken us to this point, with several potential Alzheimer's treatments on the horizon. But while there are now nearly 150 drugs in clinical trials for Alzheimer's' disease, the reality is that, even if any one of these new drugs were to be deemed safe and effective for use in the UK, most people with dementia in this country would still face a significant wait to access them.'

Australia extends COVID-19 antivirals

As Australia experiences another rise in transmission of COVID-19, the Government has expanded the eligibility criteria for COVID-19 oral antiviral treatments.

The oral antiviral treatments, molnupiravir (Lagevrio®) and nirmatrelvir and ritonavir (Paxlovid®) can be used by adult patients in high-risk groups

who do not require initiation of oxygen due to COVID-19 who are at increased risk of hospitalisation or death.

All Australians aged 70 years or over who test positive to COVID-19, with or without symptoms, are able to access these oral antivirals on the Pharmaceutical Benefits Scheme. Treatment should be offered

to every person 70 years of age or older who tests positive for COVID-19 (regardless of setting), where clinically appropriate, within 24 hours of a positive test.

With the increased transmissibility of current COVID-19 variants, it is highly likely there will be an increase in residential aged care outbreaks and an increase in the number

of residents infected. It is critical that oral treatments are accessible for every COVID positive resident 70 years of age or over. To facilitate speedy access and best practice treatment in a residential aged care facility (RACF) setting, RACFs are encouraged to pre-assess any potentially eligible residents.

Global report on assistive technology

The World Health Organization (WHO) together with the Global Alliance of Assistive Technology Organizations (GAATO), co-led several sessions at the Joint International Conference on Digital Inclusion, Assistive Technology and Accessibility ICCHP-AAATE 2022 in Lecco, Italy, to disseminate the findings of the recently launched Global Report on Assistive Technology (GReAT).

The policy session on 14th July 'The WHO-UNICEF Global Report on Assistive Technology: Moving Forward Together' brought together panellists from different organisations to open a dialogue

on the GReAT recommendations, exploring their implementation and identifying priorities for actions to advance access to assistive technology worldwide.

Two scientific sessions on 14th and 15th July presented the work WHO and partners have done to collect data on population access to assistive technology. 11 countries presented their experiences and the findings of their investigations using the WHO rapid Assistive Technology Assessment tool (rATA). The methodology and findings are published in the open access conference proceedings.

The inclusion forum on 15th July 'Measuring Population Access to Assistive Technology' engaged global stakeholders to reflect on the methodology, process and outcome of measuring population access using the WHO rATA tool and to set up an action plan for data collection for the WHA Progress Report on improving access to assistive technology in 2026.

During the forum, WHO launched a call for experts to form a working group on continued data collection on population access to assistive technology, including:

- Further development and improvement of the WHO rATA questionnaire.
- Improvement on data collection and analysis process for WHA Progress Report.
- A global platform/forum on sharing of data, knowledge and experience.

The report is primarily directed at policymakers, providers of assistive technology, donors and funding agencies and industry leaders. It is also aimed at broader stakeholders including users and potential users of assistive technology and their families or caregivers.

Are you struggling to keep up with best practices and deliver great care for people living with dementia?

More than a million people and their families are expected to be living with the condition by 2025 in the UK. **Dementia and its progression offer unique challenges to carers and a tick box exercise is not what great dementia care should look like.**

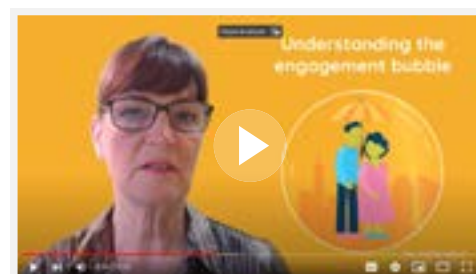
How the QCS Dementia Centre can help?

The QCS Dementia Centre is here to improve the wellbeing and experiences of people living with dementia or cognitive decline with real-world dementia best practice.

Led by Jackie Pool, founder of the QCS PAL Instrument, Dementia Centre is a resource hub of evidence-based tools and content offering guidance on HOW to deliver great dementia care and for evidencing excellence through visible staff actions and impact on service user wellbeing.

What is included?

-  The NICE-recognised PAL Cognitive Assessments
-  Four Mental Capacity Act Assessment examples
-  Nine specifically curated Purposeful Practice guides
-  A library of dementia-relevant learning resources to support in-house, continuous professional development
-  A reflective practice tool, to help supervisors monitor and evaluate team members' progress
-  New 'How do I?' guides covering some of the main difficulties encountered daily across care services



BUY NOW & deliver great dementia care with your team, starting from today!

BUY NOW



SOWING THE SEED:

WHY SUSTAINABILITY AND BUSINESS GO HAND IN HAND



Jonathan Freeman of CareTech, a specialist social care and education provider, shares how the organisation is approaching Environmental Social Governance (ESG) and explains why it is an essential requirement for all social care providers.

Caring is what we do. And we do it because we care. That is why we care about the way in which we do our business.

For any organisation to thrive, grow and succeed, the work being done by care professionals on the ground and decisions made by management teams must be aligned.

For us at CareTech, it is very clear that sustainability and business success go hand in hand. Fundamentally, we believe that only by being true to our wider social purpose can we deliver sustainable business success and positive experiences for those who live and work in our services.

Short-term quick fixes don't create the better world we all want. Sustainability at the heart of our business and corporate strategy is integral to all we do. It enables us to embed actions that will have a long-lasting positive impact and allow our people, and those whom we support, to thrive in the long term.

That is why we take ESG factors so seriously. Quite rightly, a rigorous commitment to ESG factors is increasingly seen by customers, commissioners, investors and staff as being the primary benchmark by which to judge an organisation. We don't do ESG because it is the latest fad. We firmly believe that these three factors are key to measuring the

sustainability and ethical impact of a business. It also provides us with the framework to ensure we live up to the values of the sort of business we want to be.

THE STORY SO FAR

Whilst the ESG conversation has been growing in volume over the past few years – with increasing requirements made on companies and calls from consumers to take action – there have been legitimate concerns regarding sustainability targets as a 'box-ticking' exercise.

Since my appointment as Group Sustainability Director, the first such role for any UK-based social care provider, I have been zeroing in on codifying our commitment to ESG right across the organisation with relevant and measurable targets that complement business growth.

I would like to illustrate our approach for providers to consider, which may aid any discussions that you are currently having. CARE4, our Responsible Business Strategy, launched in 2021 and sets out the group's purpose-led approach to being a responsible business. It guides us to create value for all stakeholders and ensures that we manage our business effectively, ethically and profitably. It shows that the social purpose and moral values that run through the group run deep and are the most important measure against which we judge long-term success.

CREATING A FRAMEWORK

CARE4 sets out our commitments, goals and measures for responsible business. There are four pillars to the framework:

- **CARE4 People.** Our business exists to facilitate better lives — for the people in our care and the people who work for us. We aim to be the sector's best workforce and so we offer



- market-leading employment opportunities, creating better futures for our employees. Our CARE4 People headline commitment is that we will be an employer of choice, investing in our people and valuing diversity.
- **CARE4 Planet.** We know that healthy lives go hand in hand with a healthy planet. We are committed to caring for the wellbeing of our planet to safeguard all our futures. That is why our headline commitment is to be a Net Zero business by 2050.
- **CARE4 Innovation.** We believe that good business creates value for society as well as for those for whom we care. Our innovative approaches will expand our business for a successful future, helping us to enable independence for more people, positively impacting on more lives. Our CARE4 Innovation headline commitment, therefore, is to have established our new CareTech Technology Division to spearhead our technology and innovation agenda.
- **CARE4 Community.** Thriving communities are central to our success and we aim to be an active contributor in all the locations in which we operate. We also support the vital role of the wider social care sector. Our CARE4 Community headline commitment is to donate 2.5% of our pre-tax profits to the CareTech Foundation annually.

Providers can produce an annual Purpose Report to outline their approach and to record progress. Making formal ESG disclosures also sends a clear message to stakeholders as to the seriousness of your intent. I would recommend reviewing the World Economic Forum's ESG reporting framework alongside your own purpose metrics and external ratings from regulatory stakeholders. Yes, ESG is complicated. Together, we can simplify it.

When it comes to aligning progress, the UN's Sustainable Development Goals (SDGs) are a useful point of reference; for us, the most relevant of the SDGs are:

- Goal 3 – Health and wellbeing.
- Goal 4 – Quality education.
- Goal 5 – Gender equality.
- Goal 8 – Decent work and economic growth.
- Goal 13 – Climate change.

This ambitious programme requires action that cuts across all aspects of the Group and its constituent business units. That is why I chair a CARE4 Leadership Group, responsible for co-ordinating activity across the whole Group, to oversee workstreams that span all business units and which reports on a regular basis to the Board.

The Leadership Group has agreed a comprehensive programme plan, establishing the key projects required over the next 12-24 months to deliver on our ambitions and an ambitious set of supporting targets to galvanise our efforts and to ensure that we deliver our headline commitments.

Commitment to the CARE4 strategy is required at every level, from the company's leadership board, senior management and regional managers to every team member, resident and student across all CareTech's services and offices.

LEADING THE WAY

Our priorities across the group include reducing our carbon emissions in our property portfolio and vehicle fleet and aligning our procurement policies with sustainability criteria. From a people perspective, we are

working to embed HR processes to ensure that they are fully inclusive and supporting our staff to achieve their full potential.

We have also empowered our staff at a service level to deliver grassroots change, using the One Planet Living® sustainability framework – Bioregional to develop our Runway programme to enable change at a very local and individual level.

We are already seeing very tangible impacts of the new strategy. For example, the Runway programme has already had a very significant impact at Cambian Hill House School in Lymington. Using the model, the school's catering team has implemented a range of changes that have significantly reduced food waste, increased local purchasing and reduced transport costs. Without compromising on quality, this initiative has created savings of £6,000 in food and catering costs to date this year – despite a feast during Jubilee Week! This is just one element of the school's work that has very recently earned it recognition with an Eco-Schools Green Flag Award with Distinction. The assessor noted, 'It was brilliant to be able to see the creative and innovative ways educators in your school tackled huge global issues in a child-friendly way and this shows a true dedication to environmental education.'

We have also established an Alternative Recruitment Pathway project within the CARE4 People workstream, seeking to address the company's recruitment pressures whilst providing support for individuals facing significant challenges. Within the first month of the new partnership with refugee charity Breaking Barriers, two former refugees have secured roles in the company and a number of others will start shortly. Similarly, we are proud to have secured roles for young people supported by the Prince's Trust. These are all possible routes that providers can explore to harness talent and support the community.

As part of our CARE4 Community workstream, over 80 services participated in Care Home Open Week 2022 organised by the Championing Social Care initiative. A range of different care services organised events to engage their local communities, enabling local people to understand the care services better. One group of young people in one of our children's services, for example, volunteered to put the bins out for all the residents on their street!

Our most immediate priority will be to address our carbon footprint to meet our CARE4 carbon target. With external carbon consultants, we are reviewing our existing carbon footprint to understand how we can decarbonise the business. The outcome will be a plan spanning the next 28 years to ensure that we are on target to meet our net zero commitment by 2050. The plan will span all areas of the business, from buildings' energy efficiency to electric vehicles and business travel. Developing a clear view on decarbonisation will enable a long-term approach to investment and operational impacts.

We were thrilled when the company's commitment to ESG and charitable endeavour was recognised as the winner of the Philanthropy Award at the Better Society Awards 2021. However, we know that we are at the foothills of our ESG journey. We are strongly committed to our sustainability journey for the long term, yet we recognise that we will not meet each target on that journey.

Continuing to move forwards and building momentum to become a truly sustainable business is what matters most to us. What needs to happen now is for the whole sector to unite and review its approach to sustainability. ESG should no longer be viewed as an acronym for something in the future – it's in the here and now and we must all embrace it and do our best to make progress. **CMM**

Jonathan Freeman is Group Sustainability Director of CareTech. Email: Jonathan.freeman@caretech-uk.com Twitter: [@jonathanfreeman](https://twitter.com/jonathanfreeman)

What's your response to the points outlined in this article and are you running projects in relation to ESG?
Visit www.caremanagementmatters.co.uk to share your feedback on this feature.

Urology products that make a difference



Unique features
and benefits often
designed by end users.

b.sure

Short and strong.

- Available in 9 sizes, from 18mm-35mm (Ø)
- **Shorter length – 75mm**
- Stronger adhesive
- Buffer/comfort zone to prevent backflow and sheaths blowing off
- Latex-FREE



p.sure

No more embarrassing leaks?

- Available in 11 sizes, from 18mm-40mm (Ø)
- **Longer length – 130mm**
- Large buffer/comfort zone to prevent backflow and sheaths blowing off
- Latex-FREE
- Customise/remove excess length (scissors provided)
- Perfect fit/size for all



A bag for all seasons and occasions



Bendi Bags

- Specifically designed for wheelchair users
- 700ml and 1300ml sizes
- Shaped to the contours of the bended knee



Comfort Bags

- Traditionally shaped leg bag
- 600ml and 1000ml sizes
- 7cm shorter in length than many 750ml bags – no unsightly taps dangling



Discreet Bags

- Ideal for sun, sports and even some short clothing
- 500ml capacity
- Dress as YOU want, not to cover the leg bag

 **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**

SWiFT

MANAGEMENT SERVICES LIMITED

Swift Management Services Ltd is a Health and Social Care Consultancy. We have a specialist team of consultant working within the Care Home Sector, who can provide immediate support for short term issues or build a long term relationship with homes who choose our retained consultancy service.



OUR SERVICES INCLUDE

- Mock Inspections
- Assistance with new Registrations
- Planning and development of new builds/extensions
- Strategic Reviews
- Crisis Management
- Assistance with Regulatory issues
- Crisis Management
- Policy Review and Bespoke Quality Systems
- Registered Manager support
- Interim Management – Registered Managers– Area Managers – Senior Management

Visit our website for details of all our services, we offer a free initial consultation, via Zoom or MS Teams.

CALL US NOW

020 8087 2072

www.swiftmanagement.org.uk
info@swiftmanagement.org.uk

EXPERTS IN CARE TRAINING



**Trusted providers to some of the largest care organisations in the UK...
...and the very smallest.**

Over 160 course options with face to face, virtual and online delivery options.

Call, email or click online to book your training needs today!

**T: 01622 766078 E: info@edify-consultancy.co.uk
W: www.edify-consultancy.co.uk**

STAY SAFE

WITH SMART WIRELESS NURSE CALL

Safer, more efficient care



courtney thorne
NURSE CALL SYSTEMS



**WANT TO TRY?
Call 0800 086 2462**

**Find out more
www.c-t.co.uk**

Understanding identity:

Providing culturally appropriate care

Every provider is (or should be) striving towards making their care as person-centred as possible. But how many of us are considering people's cultural backgrounds and preferences in this? Maaha Suleiman, Chief Executive of Care Matched, explains the impact culturally appropriate care can have on outcomes and shares ways providers can ensure they are meeting people's cultural needs.



According to the Care Quality Commission (CQC), culturally appropriate care means being sensitive to people's cultural identity or heritage when providing care. Such cultural identity might be based on ethnicity, nationality or religion. Culturally appropriate care might also relate to a person's sexuality or gender identity.

Unfortunately, the current narrative of social care often neglects to mention the specific needs of the ethnic minority community and how the lack of culturally appropriate care leads to a poorer quality of care for them. For example, Alzheimer's Society found that advanced dementia can cause some people to lose their English language skills and revert to their native language. It then becomes difficult to connect them with a care worker who can communicate with them in their preferred language. This will inevitably lead to feelings of loneliness in the person being cared for.

In addition, healthcare studies have found that the language barrier between people and providers prevents people from accurately describing their symptoms and causes problems for providers when fully explaining diagnoses, leading to adverse health effects. In fact, healthcare environments that show an awareness of and respect for differences create more satisfying experiences for patients. The Plos One review found that black men rated providers' behaviours and attitudes significantly higher after the clinic gave its providers cultural competence training.

IDENTIFYING PEOPLE'S NEEDS

There are many ways we can ensure that people receiving care are getting the culturally appropriate support they require. Firstly, identify what people need from you

"Arguably the most vital part of considering culture in care is to ask the person you support and/or their representatives what they prefer and then meet their preferences wherever possible"

beyond their care needs and, specifically, how their cultural needs might impact on their day-to-day requirements.

Arguably the most vital part of considering culture in care is to ask the person you support and/or their representatives what they prefer and then meet their preferences wherever possible. You should try to understand a person's history by talking to them and their family and ask questions if you are unsure about something. This all forms a part of understanding what is important to them to help them live their fullest life.

As a starting point, during your initial assessments, include a questionnaire regarding the person's cultural needs; it goes without saying that while planning their care, you should incorporate these needs into their care plan. Such needs may include religious and spiritual practice; for example, people who follow some religions like Islam may wish to get up early to pray. They might also need to eat at different times during religious festivals, such as Ramadan.

Other cultural needs might include food and drink. If someone follows a Kosher or Halal diet, you may need to prepare their food differently to avoid cross-contamination. In addition, if someone is vegetarian and from a South Asian or African culture, only having English vegetarian dishes might be boring for them.

Healthcare is another important need to take into consideration when providing culturally appropriate care. If someone lacks the mental capacity to consent to a decision about a particular care or treatment option, it's important to apply the Mental Capacity Act. When assessing if someone lacks mental capacity or when giving information to support someone to make a decision, you should ensure you take cultural factors into account.

These are just a few examples of the needs that you should take into consideration if you hope to provide the people you support with culturally appropriate care. Other examples of such needs include clothes and personal presentation, personal and shared space and shared activities.

MOVING BEYOND BARRIERS

Sadly, there are some possible barriers to providing culturally appropriate care. For example, there may be limited resources in terms of time and money, both of which are necessary for developing the infrastructure to provide culturally appropriate care. You

may also face pushback from some staff who consider themselves culturally competent already.

In such cases, you can implement educational programmes that broaden the definitions of cultural competence. The best place to start looking into this is the Care Quality Commission website. The CQC has written up a report on culturally appropriate care and has provided resources on how care providers can start providing culturally appropriate care within their services.

You could also provide care workers with cultural competence training (CCT). This has been proposed as a strategy that facilitates the provision of culturally appropriate care. There are many free and paid resources available for providers that will give them the tools and provisions needed to provide culturally appropriate care, some of which are listed below:

- Health Education England and the Royal College of Midwives produced a cultural competence e-learning programme for healthcare professionals in the NHS.
- The Department of Health and Social Care produced 'Religion or belief: A practical guide for the NHS'.
- The Royal College of Nursing created 'A guide to cultural and spiritual awareness'.
- 'The Competency Standards Framework for culturally responsive clinical practice: Working with people from migrant and refugee backgrounds' was created in Australia. Its overarching principles and recommendations for practice are applicable to the UK context.
- Blackpool, Fylde and Wyre Hospitals NHS Trust developed guidelines on religious and cultural beliefs.
- The NHS Chaplaincy Programme has published guidance on 'Promoting Excellence in Pastoral, Spiritual and Religious Care'.
- The Health Care Needs Assessment (HCNA) includes a chapter on Black and minority ethnic groups: 'Culture, Health and Illness', 4th edition. By Cecil G Helman. London, Arnold. 2000.
- First response training. Its health and social care range includes person-centred care, dignity in care, duty of care, equality, diversity and inclusion.

It might also be helpful to match staff with people from the same culture. However, it's important you give the person you support a choice and do not assume it's what they want. You should discuss it both with them and the staff member(s) with whom you might look to match them.



FILL 100% OF YOUR STAFFING NEEDS WITH **CARE HIRES**



Take control of your recruitment needs and save time with our easy-to-use forward planning rota management system, holistically integrating care providers with agency staff nationwide.



"Care Hires has been a massive help with temporary recruitment"

- Spoilt4Choice

"Care Hires is by far the best neutral vendor Fastline has worked with"

- Fastline

- 100% Fulfilment of available shifts
- 100% Matched staff compliance
- Save huge amounts of time on candidate selection, scheduling, invoice management and more.
- Workforce management tool integrating your permanent and temporary staff scheduling into one
- Mobile App to keep all staff informed and to instantly update records

Book Free Consultation

See us at the
CARE SHOW,
NEC BIRMINGHAM
- Oct 12/13, stand B31

www.carehires.com | 0116 4822 999

> OPEN CULTURES

You can also make use of skills your staff have that are not strictly part of their job.

For example, a member of staff who shares a language with someone using the service could teach their colleagues a few useful phrases. Again, it's important to ask them first if they're happy to do things like this.

Organising events in your service that recognise the cultural backgrounds of your staff, as well as people using the service, can really help people to understand each other better and show that you are dedicated to supporting people's cultural traditions.

"Diverse teams have a wider cultural knowledge base that they can share with one another, which makes them more likely to respond with empathy to the unique cultural needs of the people they support"

It's also important to take racism and other forms of discrimination into consideration. Having an open culture can help with this; so, staff can raise any issues with managers to work out solutions. You need to provide

a safe environment not only for the people you support, but also your staff members – especially those from a Black, Asian and Minority Ethnic (BAME) background – by shielding them from discrimination and harassment over characteristics protected by the Equality Act.

You might find benefits in building teams with care workers who reflect the diversity of the populations they serve. Diverse teams have a wider cultural knowledge base that they can share with one another, which makes them more likely to respond with empathy to the unique cultural needs of the people they support. There's also a greater likelihood that a person will be able to be matched with a care worker who can affirm their cultural needs when providing care.

MAKING PROGRESS

Although we've seen a significant increase in the number of providers attempting to provide culturally appropriate care, it's worth noting that we still have a long way to go in accomplishing this on a wider scale across the UK. There are consistent reports of health inequalities, disparities in the quality of care, lower rates of satisfaction and a convincing perception of culturally inadequate healthcare provision for members of minority groups.

This clearly demonstrates that the UK healthcare system is struggling to meet the needs of culturally diverse populations. However, we can still turn this around and ensure that culturally appropriate care is being provided on a wider scale. We can start by emphasising the importance of culturally appropriate care among all providers and local authorities, because it can make such a positive difference in the lives of people who are receiving care.

The results of a recent Care Matched client satisfaction survey found that there were significant increases in engagement between care workers and care receivers. The survey results also found that there was a significant improvement in the mood of the care receiver as a result of their newfound sense of belonging after being matched with a culturally appropriate care worker.

It's clear that providing culturally appropriate care can change the way adult social care is perceived by the public. People would be happier to use care services if the option of receiving culturally appropriate care was more readily available.

We must keep pushing for the need for culturally appropriate care and raise awareness on this topic across all platforms. This will help to ensure that more people are receiving the culturally appropriate care they need and rightly deserve. **CMM**

"It's clear that providing culturally appropriate care can change the way adult social care is perceived by the public"



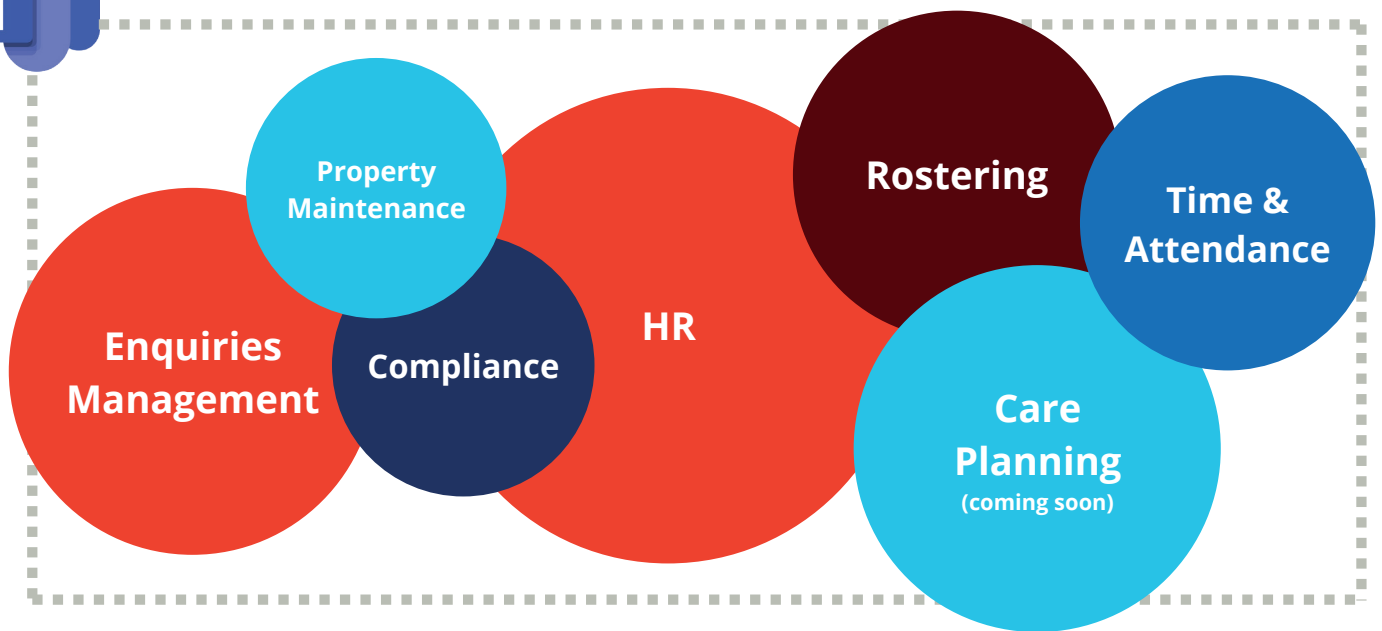
Maaha Suleiman is Founder and Chief Executive of Care Matched. Email: maaha@carematched.co.uk Twitter: [@carematched1](https://twitter.com/carematched1)

In what ways does your care setting successfully support different cultures? Do your staff have the necessary skills to support people who draw on care services? Visit www.caremanagementmatters.co.uk and share your feedback on this feature.



Microsoft Solution
Partners for the
Care Sector

Integrated modules available in Teams for

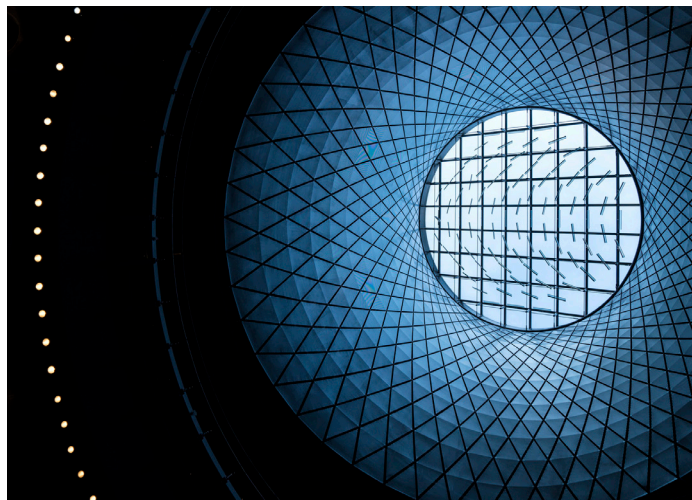


We focus only on the Care Sector and are specialists in SharePoint, MS Teams, Office 365, Outlook, InTune, Autopilot, PowerApps, Power Automate and all other things Microsoft.

Get in touch to find out more by
Visiting our website at www.CarePoint365.co.uk
Emailing us at GetInTouch@CarePoint365.co.uk
Call us on **020 4558 1503**

INTO PERSPECTIVE

HOW CAN PROVIDERS WORK WITH FAMILIES TO IMPROVE CARE OUTCOMES?



It may sound obvious, but when providers and families work together to deliver care, the quality is more likely to be higher than from providers that do not have strong relationships with the families of people they care for. So how can providers incorporate families into their care?

While providers' focus should undoubtedly remain on delivering person-centred care, the importance of drawing on family expertise cannot be underestimated and should not be dismissed. Skills for Care's framework for adult social care employers outlines four central themes for ensuring successful working relationships with the families of people receiving care.

PUT YOUR BEST FOOT FORWARD

Establishing a positive rapport

with families from the outset lays the foundation for the delivery of quality services with the preferences of the cared-for person at the heart of decision making. Simple yet effective actions to achieve this could include making timely contact with families to allow for plenty of time for planning and offering to visit families in person to discuss any concerns. This may help to strengthen relationships in the early stages.

In what can be a time-sensitive situation for families

who may have already contacted another member of your team for an initial discussion, it makes sense to check what information you may already have about the cared-for person and the family to avoid repeated discussions and dedicate as much time as possible to forming a strong relationship.

RESPECT FAMILY DYNAMICS

It is always possible that the cared-for person may not wish for family members to be involved in some or any aspect of service delivery. Avoid assumptions about typical family structures and roles and discuss in as much detail as you can with the cared-for person about the nature of their family relationships and how they will determine care planning.

The cared-for person lacking mental capacity to make decisions for themselves must also be considered. As well as working in line with relevant legislation and guidance, it is undoubtedly important to establish which family members, if any, will be best placed to contribute their skills and experience to assist care planning and delivery.

COMMUNICATION IS KEY

Strong and frequent communication will likely underpin most positive working relationships between providers and the families of the people they care for. By keeping channels of communication open, each party provides itself with the opportunity to learn from the other. Care providers

can offer up their expertise to fill in any blanks that families may have in relation to their loved one's condition and families can impart invaluable information about the cared-for person to the provider.

This may be especially helpful if the cared-for person lacks capacity to communicate themselves. Communication between providers and families should be mutually beneficial.

PART OF THE FAMILY

The process of working with the families of cared-for people can be as delicate as it can be fulfilling. While all providers would wish for harmonious relationships between themselves, the cared-for person and their family, conflicts may arise and/or some family members may need support to cope with their involvement in care delivery. Agreeing your role and establishing boundaries with family members from the outset, while also being aware of how this may need to change to suit an individual's ongoing care needs, is vital to preserving positive working relationships with families.

Signposting families to relevant information and advice in situations where you may not be best placed to offer help could provide a lifeline for families who may be struggling with their situation. On the contrary, family members may wish to undertake training or enhance their skillset to further contribute to care delivery. It makes sense to have an up-to-date record of external service providers to fall back on, or perhaps investigate if it's possible to provide training opportunities yourself.



A growing appetite for co-production

Kathryn Smith, Chief Executive, Social Care Institute for Excellence (SCIE)

We've just seen the seventh annual Co-production Week take place. This is an important time for SCIE because it's our chance to celebrate and highlight the unique contribution that people who draw on services make to social care.

Co-production helps develop better public services by putting people at the heart of decisions made about them. It's not about people 'participating' in things like consultations. You wouldn't go into a café and be told that you're drinking coffee when you want tea.

We've discovered a growing appetite for co-production. During Co-production Week, we heard from organisations across the country sponsoring their own events. SCIE produced a webinar on developing our understanding of the difference co-production makes in social care, and nearly 300 people attended. And the 10 blogs we hosted were from Bradford to Hampshire. Our updated guide on what co-production is – and how to do it – was the most popular item in our recent newsletter.

During Co-production Week, we hosted a podcast where two people who draw on services in Suffolk explained how they used their voices to support changes to local health services, making them more efficient for providers and

people who receive care.

Their unique perspective was listened to and acted upon.

Designing services is only one aspect of co-production. Services need to be monitored and assessed for their outcomes and impact.

That's why, for instance, the Care Quality Commission has 'Experts by Experience' accompanying its inspections, to give the perspective of the people accessing services.

Despite co-production's evident popularity, more is needed to realise its potential for people who draw on care and support. For instance, Valerie, a family carer from Doncaster, told us that she thinks services are still very much service-centred, with personalised care missing out. She says co-production is very good 'on paper' because there's a 'good framework', but more is needed to translate co-production into tangible improvements.

Fundamentally, co-production is about understanding people's preferences and lived experiences to deliver better, more personalised care. As we mark the successes of this year's Co-production Week, we look forward to advancing co-production principles and practices with our sector partners over the coming year.



Forge strong working relationships

Rachel Jones, Director of Care, Housing and Hospitality, Jewish Care

Our teams try to involve family members and relatives as much as we can. We find that communication is vital to give reassurance to residents and relatives that we are consistently providing excellent, high-quality professional care.

We have regular meetings and care reviews giving relatives and families the chance to ask questions, hear about what's going on in the organisation and forge strong working relationships with our care professionals.

Understanding the lives that our residents lived before they came into care is key to ensuring that people are cared for in a meaningful way. We ask for the help of the wider family members to engage with us and tell us as many details as possible so we can understand as much as we can about a person. This open communication helps staff to get to know a resident and their families and in turn can result in caring interactions and the forming of relationships.

We also call on relatives and families to offer reassurance and support to our care teams, especially for care with a resident living with dementia. This collaborative working can result in meaningful care for the resident.

We want to continually improve

at Jewish Care so we use a rigorous spectrum of quality assurance where we ask all stakeholders to tell us what we do well and how we can improve. This helps us sustain positive working relationships and allows us room to grow, understand expectations and use feedback, continuously monitoring and working within the legislative framework.

We have recently launched an innovative project with our volunteers who work with residents and their families to give live feedback instead of completing a survey. This is an excellent way to encourage a safe place to talk and can often yield more fruitful responses than filling in a form.

We have also started in-person meetings with relatives and multi-disciplinary clinical teams. We share information about relevant news, questions and answers and most importantly, bonding between the teams delivering care and the advocates for cared-for people. This has developed relationships and built trust.

We always want to improve every aspect of care for our residents and make care a positive journey for our relatives and families. We will continue to strive towards these goals in an ever-changing landscape of care.

Care 4 Quality Ltd

Health & Social Care Consultants

*Mock Inspections • Full Home Audits
Regular Compliance Visits • Medication Audit
Pre CQC Inspection Visits • CQC Action Planning
Manager / Provider Support • Training Packages
CQC Inspections - Fac's and Challenges
PIR Completion • Document Review
NOP & NOD Support*

E-Document Shop Now OPEN!

- Governance documents
- Audit Tools
- Dependency Tool
- Clinical Policies & Procedures
- FREE Downloads
- Risk Assessment Templates
- PRN Protocols

01579 324787

admin@care4quality.co.uk
www.care4quality.co.uk

**Care 4
Quality**



Providing Expert Health & Social Care Consultancy Services

We Can Help With:

- Undertaking Mock CQC inspections reporting and development of action plans
- Satisfaction surveys or 'mystery shopper' reviews
- Review of Care Quality & Governance systems
- Supporting preparation for regulatory inspections and monitoring visits
- Undertaking a wide range of audits
- New business startups and preparing to register for the first time
- Changes to your registration
- Providing management support and oversight

Email: support@carequalitysolutions.co.uk

Further Information www.carequalitysolutions.co.uk



Intelligent • Intuitive • Cost Effective



Care Management System

Providing the intelligent software solution for care home and domiciliary care.

Included in the CAREiS suite:

- Care and Support, our care planning platform.
 - Policies and Procedures.
- Quality Assurance, our audit and inspection records app.
 - Supervision and appraisal records.
- Mandatory Training (with Matrix) and Care Certificate.

With eMAR coming in 2022.

Contact us
for a chat

01424 400060

info@careis.net

www.careis.net

INTRODUCING...THE LATEST EVOLUTION IN STAFF SAFETY:

PINPOINT'S P2 STAFF SECURITY SYSTEM

Combining proven technology perfected over our
30-year history, with enhanced functionality and design.

- Keyless functionality for rapid response
- Enhanced graphical display
- Robust design for long life

A new generation of security alarms to protect staff for the next 30 years and beyond.



www.pinpointlimited.com

[pinpointlimited](https://www.linkedin.com/company/pinpointlimited)

[@PinpointLimited](https://twitter.com/PinpointLimited)

THE CARE INNOVATION CHALLENGE

CMM MEETS THE FINALISTS



The National Care Forum (NCF) Care Innovation Challenge, a hackathon-style creative weekend, returned on 2nd-3rd July 2022. CMM's Olivia Hubbard caught up with the finalists to find out more about their innovations. This month, we were delighted to speak to **Team CHIP** and **Team Myghty**.

Creative thinkers, entrepreneurs and experts from the sector, including people with lived experience, came together at Coventry University's Technopark for two days of idea generation and prototype trialling. Five finalist teams were selected to present their ideas at The Care Show, the largest care event in the UK, on 12th-13th October at the NEC in Birmingham. Good luck to the finalists: Team Care Tech Guide, Team Chip, Team Fall Free, Team Myghty and Team Star. The winning team will receive £1,000 in prize money, media coverage and mentoring to develop their idea.



INTRODUCING TEAM CHIP

Remember these names – Lauren Stacey and Megan Hamill. Megan joins me on Zoom and I'm struck by her true entrepreneurship,

intelligence, drive for change and creativity. It is by far one of the most progressive and motivating conversations I've had in a while. If the care sector needed a reason to harness young talent, look no further than the care innovation finalists.

TEAM CHIP (Megan): When I arrived, I met Lauren who I formed a team with. Lauren works with adults who have learning disabilities at Skills for Care – she's so knowledgeable about the care sector. She found an issue with adults with learning disabilities managing their money and, in particular, the lack of autonomy, responsibility and independence when it comes to managing their finances. ➤

> CMM: How would you describe CHIP?

Team CHIP (Megan): CHIP stands for cash for independent people. It's a banking app that supports adults with learning disabilities in digital transformation – it's fully tailored to what people need. At the Coventry event, we pitched three prototypes – one using voice prompts, one using symbols and images, and there were different colours people could use. I think it's important to remember that different people need different things and that's where the innovation side of things comes in. Money is becoming digitalised and we are benefitting from it, but people with learning disabilities are being left behind.

CMM: How did you discover the need for the app?

Team CHIP (Megan): In the UK, there are 1.1 million adults with learning disabilities and Lauren and I explored the apps which are currently on the market, such as challenger, revolut and Monzo – people with learning disabilities can't use those apps. CHIP is a combination of the two apps and that's what we got across to the judges – that there isn't anything in this space. We understand the need and that's where our idea was born.

CMM: Where does your passion for innovation come from?

Team CHIP (Megan): My dad was in an accident in 2010 and he's in a wheelchair. He lost his legs; he can't walk. This obviously had a toll on his physical and mental health. Dad was also the main breadwinner in our family and since the accident has no control over his finances. I don't even know if he has a bank account, but he doesn't have a bank card. My mum gives him money to go to the shop. I just think if something was in place to help them, it would give Dad some independence and

a sense of control and greater self-esteem. So our idea can expand beyond people with learning disabilities too.

CMM: What are the next steps for the project?

Team CHIP (Megan): We are going to establish relationships with local authorities to see if there is a cheaper route to market. We are also exploring holding focus groups in Northamptonshire. We have existing connections and will be getting in touch with Cube Disability to hold these groups. We have also looked into the Go Henry app and will be considering global competitors and potential app growth. The design is the fun part! I'm also really looking forward to setting out a clear mission and vision for CHIP.

One idea is to create a version of the app for personal assistants, so if they are shopping then the person with a learning disability can approve the payment on their app and retain independence.

CMM: How would you describe your time at the Care Innovation weekend?

TEAM CHIP (Megan): The weekend was probably the most organised Care Innovation weekend I've been to. From start to finish, everything was streamlined so well. I learnt so much about the care sector, left with so much knowledge and gained so many insights from everyone who was there – mentors, participants and judges.

Lauren of Team CHIP said, 'The challenge weekend was a fantastic opportunity to meet with people from different sectors to talk about the big topics in social care. Megan and I have been able to draw on our different strengths and experiences to create an idea that we hope could make a real impact on the lives of people with learning disabilities. I'm excited to see where the journey takes us!'



INTRODUCING TEAM MYGHTY

Vasudev Menon, Zeke Steer and Prabha Thirthahalli Venkatesh are the faces behind Team Myghty. The intelligent trio have big ambitions and with Zeke, Chief Executive Officer of Milbotix, in the team, they will be putting everything into the final race. Milbotix primarily develops smart socks for people with neurocognitive disorders, improving the management of stress and agitation.

CMM: Tell us about your innovation idea.

Team Myghty (Vasudev): Team Myghty's innovation is an app to foster employee recognition and team working to improve staff retention. Something that a lot of the mentors mentioned was retention – we found out that the turnover in the care industry is 34%. This is more than double the national average of 15%.

Having a positive work environment is something that helps staff stay at that workplace for a long time. We wanted to develop something to support this – that's how we decided on the care community.

CMM: What's your message behind the brand?

Team Myghty (Vasudev): Lots of care homes currently work on paper-based systems and the workforce will take a photograph of the staff rota. If we can bring

that onto a phone, then staff know who to approach for extra shifts. We hope the app will be a community and social media platform for staff to talk to each other.

We also have the idea of a dashboard page where people can post good news and notes. Our mentor, Shona King of Greensleeves Care, told us that they have a physical noticeboard in all their care homes. Care workers can write a positive note and we thought digitalising that will keep the positivity going.

CMM: What are your future plans for the app?

Team Myghty (Prabha): The app, although it's been developed for the care sector, has applicability in many sectors. It could be something that comes out of the care sector and is used in multiple sectors. A long-term idea is to make this app a one-stop-shop for all care workers' needs. We thought we could create a mental health wellbeing app, incorporating training and skills. We have a meeting with Neil Eastwood soon, founder and Chief Executive of Care Friends, which will help and we are meeting with care home focus groups to aid our market research. We are also planning to connect with Lauren Stacey from Skills for Care.

CMM: How would you describe your experience of the Care Innovation weekend?

Team Myghty (Zeke): I was clear that the idea the team developed would be theirs to carry forward. I thought the challenge was such a good opportunity to get different perspectives on the care sector. It's not often that you get so many different people in a room with different perspectives, understand what the challenges are, be that vehicle to develop ideas and solutions and get some feedback directly. It was an amazing event.

Visit www.caremanagementmatters.co.uk to read an extended version of the interviews.

For more information about the Care Innovation weekend, visit <https://careinnovationhub.org.uk/>

To contact Team CHIP, email Megan at: megan.hamill@hotmail.com To contact Team Myghty, email: contact@myghty.co.uk

How To Streamline Your Care Business

Strategic Thinking

Premier Care Management Platform

Software

Digitising your care business through the use of bespoke sector software is a proven way to save time, resources & money; allowing you to focus on what matters most - providing the best care possible.



How can going online save me time?

Do you ever struggle to organise last minute shift changes? Maybe it's keeping up with compliance requirements that's the most time consuming for you? A large number of organisations find not having all their staff training progress & certifications in an easily accessible place to be one of their biggest headaches.

All these activities can be fully streamlined through the use of sector-bespoke software made specifically for businesses like yours. Harmonise your care business by utilising apps & software that your whole team can access. Easily reduce stress and improve communication channels - visit our website to learn more.



Training

Working with an organisation that can answer all your training requirements - face-to-face on-site, online or remote - and gives you a platform where you can access all the documentation you need is a game changer. Why have it any other way?

At Strategic Thinking, our dedicated team has been working in the health care sector for years - which is why we're one of the highest rated training providers in the UK & Ireland. First Aid, Moving & Handling and Fire Safety courses - all up to date and bespoke to your business requirements.

Contact us today to learn how we can help streamline your processes. With a team of sector experts on hand, we supply a total operating platform for your care business.

info@strategicthinking.online

Tel: +44 333 577 3383

www.strategicthinking.online

UNDER LOCK AND KEY:

Making the NHS and social care cyber safe



As we move into a more digital age in social care, NHS Digital's Executive Director of Cyber Operations, Mike Fell, talks about why it's so important to support staff and create effective policies when it comes to cyber security.

Cyber security is the protection of devices, services and networks, which includes information about them such as unintentional access, theft or damage. It is a collaborative effort which relies on everyone in an organisation doing their bit to keep information, networks and applications safe.

Possible cyber threats include everything from email and social media to online banking and shopping. Quite simply, there has never been a more crucial time to take simple, but vital, steps to prevent criminals from getting hold of data, devices and accounts.

DATA IS VALUABLE

Information about our health and care is hugely valuable in driving positive change – data saves lives. Access to data improves population health, supports service planning and can help us to tackle unequal outcomes.

As a result of the pandemic and increased partnership working between national agencies and local care providers, health and social care is even more digitally dependent. Data is being shared more widely to improve efficiencies and outcomes; however, this also increases the amount of data we need to secure, as well as the dependency on it.

Getting cyber security wrong has the potential to cause significant impacts across the health and care system. It could lead to patient safety incidents, disruption to healthcare services and the loss of sensitive information.

BETTER SECURITY, BETTER CARE

Improving and promoting good policies, procedures and practices are essential first steps in reducing cyber security risk. If your organisation accesses health and care data, then the Data Security Protection Toolkit (DSPT) should be completed every year.

The toolkit, which is an online self-assessment tool, enables you to check that you are undertaking good data security and that personal information is handled correctly. Achieving the 'Reaching Standards Met' level on the toolkit is a requirement if you want access to shared information systems, such as GP Connect. It's important to remember that things change, so the toolkit needs to be completed at least once a year in order to be valid. An increasing number of care providers are keeping it up to date as a live document.

All adult social care providers can access support from the Better Security, Better Care programme to help complete the toolkit.

Better Security, Better Care is a free national and local support programme to help adult social care providers to store and share information safely. It covers paper and digital records and focuses on helping care providers to complete the Data Security Protection Toolkit. It includes access to free guidance, template policies, a helpline and 28 local support partners across England.

As a care provider, the programme aims to help you evaluate and improve your data and cyber security. This means you can reassure the people you support, their families, your staff, commissioners, regulators, and health and care partners that you are following good practice and meeting legal and regulatory requirements.

Programme Director of the Better Security, Better Care Programme, Michelle Corrigan, said, 'Storing and sharing information appropriately is essential to good care.'



➤ 'Keeping that information secure is also a safeguarding responsibility and more and more care providers see it that way. But we know they are not data and cyber experts – and they don't need to be. The Better Security, Better Care programme provides that expertise – and it is free.'

Visit www.digitalsocialcare.co.uk/data-security-protecting-my-information/better-security-better-care/ to access support from the Better Security, Better Care programme.

TAKING RESPONSIBILITY

Cyber security is just as important as health and safety. It is therefore the responsibility of every person in a social care organisation to understand security risks and what they can do to reduce them. NHS Digital's 'Keep I.T. Confidential' campaign is a fantastic way to help organisations promote good cyber security with staff in social care. The campaign has an online security awareness toolkit, which is available for free, to help the NHS and social care organisations learn about basic security practice and the impact it can have on patient safety. It includes practical steps that staff can adopt into their everyday jobs, such as setting secure passwords, keeping devices locked when they're not in use, and being aware of phishing, email scams and social engineering.

Launched by NHS Digital's Data Security Centre, the materials have been designed to help NHS organisations run their own security awareness campaigns at a time and in a way that suits them.

After a successful first launch in 2019, it has now been updated to meet some of the challenges faced by the social care sector. The toolkit contains a variety of security awareness materials, including screensavers, web banners, social media graphics and suggested copy for bulletins and newsletters, to help raise staff awareness.

There are lots of different versions of images and other resources that can be used easily within individual social care settings and channels, such as a staff intranet page or internal newsletter. The campaign can also be linked with any staff training on data or information governance. It's entirely up to organisations to choose how it will best resonate with their staff.

TIPS FOR BETTER CYBER SECURITY

Use a strong password: The longer and more complex your password, the more difficult it is to crack. Passwords should be easy to remember, but difficult for someone else to guess. The National Cyber Security Centre (NCSC) suggests a good rule to go by is to 'make sure that somebody who knows you well could not guess your password in 20 attempts'. The centre also recommends combining three random words to create a single password or you could use a password manager, which can create strong passwords for you and remember them.

Report suspicious emails: Be aware of potential phishing scams and emails that try to trick you into providing information. Do not open attachments or click on links without establishing if they are legitimate. Successful phishing attempts could pose a risk to patient safety or result in disrupted IT systems.

Watch out for these common signs of a phishing email:

- Incorrect branding.
- Spelling and grammar mistakes.
- An email address with an irregular format.
- Suspicious links which look out of place.
- An urgent title or request.

If you think you have received a phishing attempt:

- Do not click on any links or attachments.
- Inspect the email address or domain name to determine if it's from a legitimate source.
- Report any suspicious emails as an attachment to report@phishing.gov.uk.

Do not provide your login, password or sensitive information if you are asked to by email, phone or text message. Look up the main number for the organisation and contact them to check if the request is genuine.

Be aware of what you share: Do not share or wear your ID pass out in public or show it on social media. Avoid discussing any sensitive information in public places and lock your screen when you're away from your device – unlocked screens are an open invitation.

Watch out for tailgaters: Tailgating is a physical security breach where an unauthorised person gains entry to protected areas by following a member of staff through security barriers, such as doors and gates. Letting unauthorised people in could lead to them taking personal data or accessing systems.

Some useful tips to stop tailgating:

- Query the status of strangers if it is safe to do so, especially if they try to follow you into staff areas.
- Wear your building pass or ID if issued and ensure it is visible.
- Challenge anyone who doesn't display a visible ID badge, if it is safe to do so.
- Make sure you shut or lock doors and cabinets where necessary.
- Maintain a clear desk policy when away from your workstation.
- Know who to tell if you see anything suspicious or worrying.

Keep up to date with data training: Knowing how to handle data will reduce the risk of service disruption. Data breaches can lead to fines, disruption to services and reputational damage. Make sure you understand and follow the latest guidance around data sharing.

Do not be tricked into giving away information: Social engineering is when criminals use tricks or deception to manipulate people into giving them access to data or systems. Giving unauthorised or suspicious people access to information, or places, could risk someone swiping people's data.

How to stop social engineering:

- If a web browser states that you are about to enter an untrusted site, then be very careful. It could be a fake phishing website that has been made to look genuine.
- If you see a red padlock or a warning message stating your connection is not private, be careful.
- Never give your login details to anyone. Your ICT department will never ask you to disclose your password.
- Be cautious with sharing information about your work on social media sites, especially on your personal accounts.
- If in doubt, seek advice from your local ICT team.

I understand how busy social care staff are but I would encourage everyone to make sure cyber security is a top priority, to help protect data and maintain public trust in our vital services.

Once you start taking small, simple steps, they will become part of your day-to-day work and will make a massive difference to protecting crucial information. **CMM**

Mike Fell is NHS Digital's Executive Director of Cyber Operations. Email: media@nhs.net Twitter: [@NHSDigital](https://twitter.com/NHSDigital)

How confident do you feel about preventing cyber-attacks and how regularly do you update your systems?
Visit www.caremanagementmatters.co.uk and share your feedback.



An inspiring care model enhancing retention & wellbeing

As experienced Care Home practitioners we provide training to teams in sustainable innovation and leadership, to embed companionship, partnership working and wellbeing designed to build enriched quality of life into care homes.

Developing a culture of care with wellbeing, positive relationships and inclusion at its heart, in a 6 x 1hr per week online training programme.

Develop how to address loneliness, helplessness and boredom with companionship, partnerships and meaningful quality of life.

Contact us today and join the care evolution

Call today on **01626 868192 • 07483 359471** or visit **www.eden-alternative.co.uk**

Now is the time to go digital

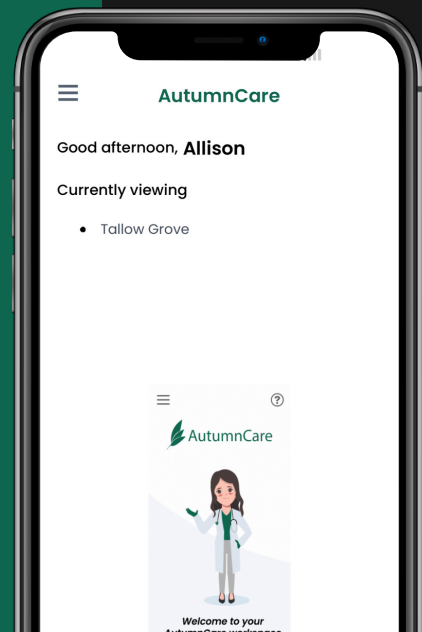
10 key reasons care providers are choosing to go digital, what will yours be?

Book a demo to find out how AutumnCare can help

[BOOK A DEMO](#)

[10 KEY REASONS](#)

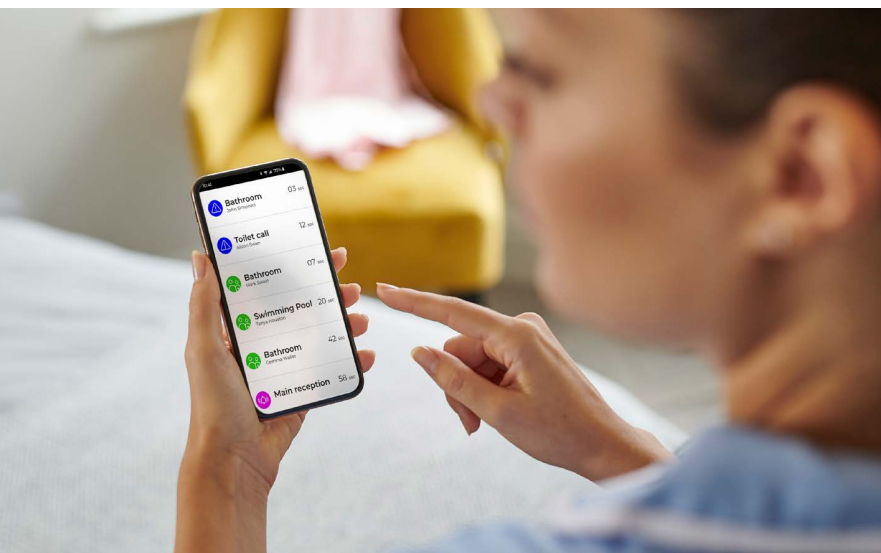
uk.autumn.care info@autumn.care 0800 009 2121



This is the One.

Intercall One builds on the platform of our bestselling legacy systems, providing a modern, affordable call system created for the digital age.

Discover how to simply upgrade your nurse call system by visiting one.intercall.co.uk or scanning the QR Code.



Intercall will be exhibiting at this year's Care Show, showcasing our most recent innovations Intercall One and Intercall Touch, as well as the newly developed App.

Visit us at stand E30, or get in touch at www.intercall.co.uk/contact to find out more or arrange a demo.



RESOURCE FINDER: Training

Training to strengthen workforce retention has never been so paramount and there are so many training platforms, technologies and courses within the social care sector to help advance your workforce and your organisation. This resource finder gives you information on some of the sector's leading providers, to help with planning your next training objectives.

Eden Alternative

Tel: **01626 868192**

Email: **admin@eden-alternative.co.uk**

Website: **www.eden-alternative.co.uk**



SECTORS

- Care homes and groups.
- Domiciliary care providers and groups.
- Community care organisations, housing associations.
- Healthcare providers.
- Organisations who have an interest in eradicating loneliness, helplessness and boredom occurring in care settings.
- Organisations who are committed to the wellbeing of older people receiving care and support and the people providing such care and support.

SERVICES

- Three-day (or seven-day session online) flagship 'Eden Associate Training' course.
- Eden Trainer course.
- Eden Fellowship course.

LEAD INDIVIDUALS

The UK board consists of Geoffrey Cox, Margot Whittaker and June Burgess, all with extensive professional hands-on experience in health and social care.

Geoffrey Cox, Chief Executive, has a group of four nursing homes which adopted Eden 10 years ago, having come across this work in New Zealand. Margot Whittaker, Registered Nurse, Director of Nursing is its Development Officer. June Burgess, Registered Nurse, brought Eden to the UK in 2005.



Geoffrey Cox, Chief Executive

Tel: 07483 359472

Email: admin@eden-alternative.co.uk

COMPANY INFORMATION

The Eden Alternative (UK) is a 'not for profit' training provider for the Eden Alternative model of care. It has operated in the UK since 2005 and Eden itself has operated since 1992.

It's an 'Alternative' because it drives forward the culture of care with its members, building care environments that are different from most people's experience, understanding or perception. Its programme has many elements, many of which are common sense and often what people in the sector are already aspiring to. However, its detailed body of material focuses on developing a progressive vision, applies theory to practice and makes vision a reality.

The reason why people adopt the Eden Alternative is to enhance the wellbeing of residents, the essential workforce, and residents' families. It also makes very good business sense. It has plenty of material, principles, and ways of enhancing wellbeing; put together in a way that delivers a home's ambitions. The model has been tried and tested over 30 years and suits homes already likely running ambitious training programmes. Whilst Eden dovetails with most programmes it also stands alone and gets results.

Eden operates in 20 countries: the UK, USA, Canada, Australia, New Zealand, Germany, Austria, Denmark, Switzerland, Spain, Iceland, Mauritius, Singapore and many other regions.

Edify Training

Tel: **01622 766078**

Email: **info@edify-consultancy.co.uk**

Website: **www.edify-consultancy.co.uk**



SECTORS

- Care homes.
- Nursing homes.
- Domiciliary care.
- Supported living, extra care.

SERVICES

- Face-to-face training.
- Virtual training.
- Online video e-learning.

LEAD INDIVIDUAL

Caitlin Greenaway joined Edify after 10 years of service at St Georges NHS Trust within Paediatric Therapies. She brings a wealth of experience across many disciplines, and you will find her friendly, reliable and in tune with Edify's ethos – keeping things simple, helpful and always trying to deliver the very best service possible at all times. Caitlin welcomes your call to demonstrate these qualities to you and assist you with your training needs.

COMPANY INFORMATION

Edify Training was founded in 2006 with the aim of providing highest quality training to the health and social care sector. The business now also serves the education and wider commercial sectors. The starting concept is simply to play our part in improving the lives of those in care. Edify aimed to do this by enhancing the knowledge and skills of the persons who help to

care for them. Client feedback has been that the courses are very apt because they are full of examples that can be encountered within care settings. The training therefore might be more relevant than the generic courses offered by many training providers.

Courses are largely based around tutor-led activities where delegates learn through doing rather than just listening and, as a result, the core material becomes very memorable. This helps staff to feel better prepared when the training is called upon to be put into action.

The full range of over 100 course options includes all core mandatory subjects and also a large number of specialist topics. Edify has worked hard to put a suite of courses together to cover the majority of staff training needs within most types of work settings.

Qualified trainers are recruited from appropriate backgrounds and the current team includes nurses, paramedics, fire and rescue personnel, care managers, mental health and learning disability specialists. The trainers have a wealth of experience and are passionate about delivering really inspiring sessions, which allow staff to return to their workplace with vastly improved knowledge.

We look forward to working with you and demonstrating our commitment to the above points.



Caitlin Greenaway, Customer Service Manager

Tel: 01622 766078

Email: caitlin@edify-consultancy.co.uk

My Learning Cloud



My Learning
Cloud

Tel: **0800 088 6109**

Email: **enquiries@mylearningcloud.org.uk**

Website: **www.mylearningcloud.org.uk**

SECTORS

- Care homes.
- Domiciliary care providers.
- Hospices.
- Clinics.
- Nursing homes and supported living.
- Housing associations.

PRODUCTS

- E-learning.
- Learning management systems.
- Online training and development.

COMPANY PROFILE

We were born out of a passion for delivering excellent and innovative learning solutions for the health and social care sector. Our vision is to support organisations with a blended learning approach, to maximise their ability to assist all staff in becoming competent and confident in the areas necessary for their role.

Our user-friendly technology and the resources we create aid best practice and management control, helping to give full transparency and saving administration time. Your workforce acquires skills and knowledge quickly through engaging and accessible courses and all our solutions are backed-up with expert support from our experienced team.

Our experience within the health and social care sector has also inspired the creation of our Learning Management System; the amazing features within it are tailored to the demands of the sector and the necessary requirements.

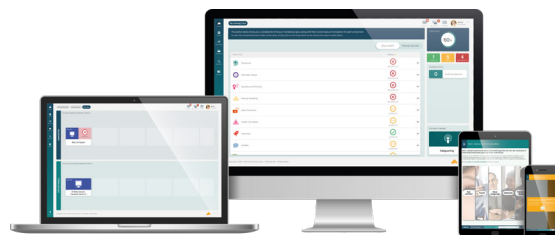
We're solely focused on the health and social care sector, our amazing CPD certified e-Learning courses are inclusive and relatable by all organisations within the industry.

My Learning Cloud is constantly working to improve and create new and innovative ways of learning in line with the ever-changing needs and requirements of organisations within the sector.

We currently support several organisations within all areas of the industry, from housing associations to care in the community, eating disorder services to fertility clinics and we're growing every day.

As a Skills for Care Centre of Excellence, and as an endorsed provider, we are the blended and e-Learning specialists for the health and social care sector.

Our bespoke Learning Management Systems, and accredited content empower organisations to confidently manage and deliver compliant, higher standards of care.





ENHANCE YOUR PROFILE TODAY

www.carechoices.co.uk

Promote your service to care seekers
for as little as £4.71 per week*

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

Solitude Training Ltd

Tel: **01256 242272**

Email: **info@solitudetraining.co.uk**

Website: **www.solitudetraining.co.uk**



SECTORS

- Care homes.
- Nursing homes.
- Domiciliary care.
- Local authorities.
- Hospitals.
- Schools.

SERVICES

- Mock inspections.
- Compliance support.
- Preparation of action plans.
- Care consultancy.
- Audits.
- Training needs analysis.
- Training (face-to-face or virtual).
- E-learning.
- Competency assessments of staff.
- Staff coaching, mentoring and development.

LEAD INDIVIDUAL

Jenny has over 30 years' experience working as a nurse within the health and social care sector. She is a qualified nurse (RGN), holds a nursing degree BSc (Hons), as well as management, teaching (PGCE) and assessing qualifications. Jenny has held positions from volunteer through to Director of Nursing and Specialist Adviser for the Care Quality Commission.

Having worked as a registered manager, Jenny understands the dilemmas and complexities that managers are faced with and, due to this, is able to offer appropriate support.

Jenny Gibson, Director/Nurse Consultant

Tel: 01256 242272

Email: jenny@solitudetraining.co.uk

COMPANY INFORMATION

Solitude Training was founded over 10 years ago, with a view to providing high-quality, cost-effective, and engaging training. Jenny and her team are passionate about providing bespoke training that is relevant to the individual service. All trainers come from a clinical background and can therefore relate to the staff in a meaningful manner. Trainers can offer constructive support throughout the training when practice questions and issues are raised.

Due to the nature of care work, training can be provided to meet the needs of shift workers and this includes delivering training not only on Monday to Friday between 9am and 5pm, but also on an evening or weekend at no additional cost to the service. Training can be face-to-face, virtual or e-learning. There has been a shift over the past couple of years and more services are using the blended approach to learning. Staff will gain the theoretical knowledge via e-learning; but this is then re-enforced and applied to practice during face-to-face delivery. Services can also be supported with the provision and/or completion of competency frameworks following training.

Solitude Training would be very happy to undertake a FREE training needs analysis for your service and submit a report.

Strategic Thinking



Tel: **0333 577 3383**

Email: **info@strategicthinking.online**

Website: **www.strategicthinking.online**

SECTORS

- Care homes.
- Domiciliary/homecare.
- Specialist residential homes.
- Nursing agencies.

SERVICES

- On-site training.
- Training management software for managers and staff.
- Up-to-date e-learning courses with certification.
- Rota management software.
- Care management software.
- Online training courses.

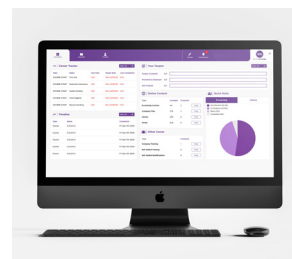
COMPANY INFORMATION

Strategic Thinking provides an all-in-one training and software solution for your care business. We are one of the highest rated training providers in the UK and Ireland, with software built to complement all activities across the spectrum of care and training.

Digitising your processes through sector-bespoke software is a way to save time, resources, and money, allowing you to focus on what matters most – providing the best care possible. Harmonise your care business by utilising our apps and software for your whole team to access. Whether it's managing rotas, keeping on top of training and compliance or assigning tasks – you can reduce stress, increase productivity, and improve communication channels with ease.

Strategic Thinking can answer all your training requirements face-to-face on-site, online or remote, with a platform where you can access all documentation and certifications in seconds. We provide First Aid, Moving and Handling and Fire Safety courses, which are all up to date and bespoke to your business requirements. Our dedicated trainers have been working in the health and care sector for years and bring a wealth of knowledge and expertise to the training sessions. Our clients love our friendly and collaborative approach and highly regard the work that we do.

We supply a total operating platform for your business, with our welcoming team helping you get up and running straight away. With 24/7 support, we're always just a phone call away in case of emergencies. So, get in touch today and learn how we can support your care business with our software and training for care.



Elaine Rankin, Managing Director

Tel: 0333 577 3383

Email: elaine@strategicthinking.online



the
care
workers'
charity

Professional Care Workers' Week

12th – 16th September 2022

CELEBRATING EXCELLENCE



Continuing a series of features celebrating 2022's winners, CMM hears from Eloise Appleby, Chief Executive Officer at The Grange, who sheds light on the Keep Safe Team's successful campaign to improve road safety in its community.

According to the judges, the Keep Safe Team's campaign has 'saved lives'. The judges acknowledged how the campaign has positively impacted on an entire community and were impressed with the high level of detail included in its research. The judges said this campaign has shown how people at the heart of care are central to advocating for change and spoke of continuing more projects to encourage others to take action on matters affecting them.

SAFETY FIRST

The Grange at Bookham supports around 130 adults with learning disabilities. Its eight acres of grounds are set in a beautiful, semi-rural location. But as is often the way in countryside areas, traffic races around the surrounding lanes without paying much attention to speed limits and parents park carelessly during school drop-off and pick-up times.

Rectory Lane, where The Grange is situated, is adjacent to a care home and close to a large secondary school. Hundreds of young people and vulnerable adults cross it each day, often twice a day.

Tenants at The Grange set up a Keep Safe Team in 2019 – a type of 'neighbourhood watch' designed to promote safety at home and in the community. Their first priority was to campaign for a safer crossing point on Rectory Lane. People with visual impairments, wheelchair users and those with mobility challenges all lacked confidence when trying to cross. Parked cars made it hard to see oncoming vehicles, and the width of the road made people anxious about reaching the other side in time.

A HELPING HAND

One of Surrey County Council's Highways Officers gave the team some good advice.

He suggested that a campaign run by the Keep Safe Team would be far more powerful than any lobbying by councillors or Grange staff. So, the Keep Safe Team rounded up their friends, put on high visibility jackets, and took turns on a rota to stand at the roadside in all weathers, counting the passing vehicles. Keeping a simple tally on their clipboards, they passed the results to friends in IT training sessions, who produced some beautiful graphs and charts showing just how busy Rectory Lane could be.

With a little help from The Grange's Chief Executive Officer, the Keep Safe Team secured an invitation to appear at Surrey County Council's local committee in November 2019.

"The next step was a classic move by The Grange: inviting the decision-makers for tea and home-made scones on-site"

Armed with a PowerPoint presentation setting out their graphs and photos, they took turns to explain to councillors just how anxious they were about the situation in Rectory Lane. The committee agreed that something should be done, and the Area Highways Officer promised to look at the possibilities.

The next step was a classic move by The Grange: inviting the decision-makers for tea and home-made scones on-site. No one can resist a Grange scone, freshly baked in a catering session: this is often the point at which 'Grange Magic' occurs. In spite of some protests from officers about a lack of time and funding, and higher priorities in the county, ideas began to emerge, and a commitment was made by the County Councillor, Clare Curran, to make something happen.

MAKING IT HAPPEN

COVID-19 arrived, and things went quiet for a

"The project was an exemplar of collaboration, with local politicians, officers and amenity groups all working together"

few months, until the Chair of the Bookhams Residents' Association (BRA) – a keen Grange supporter – decided to shake things up. He started writing an application for Community Infrastructure Levy monies to pay for the crossing. Within weeks, the funding was agreed, and designs were approved. The project was an exemplar of collaboration, with local politicians, officers and amenity groups all working together. By March 2021 – just as we were emerging from lockdown – the new 'apron-style' crossing was installed. The Keep Safe Team had achieved their goal.

Co-Chair of the Keep Safe Team, Luke Tye, commented, "We were delighted with what we did. What helps The Grange helps the whole community. We made things happen, and now everyone is safer as a result."

I was so proud of the Keep Safe Team. They spoke up for change, and they put the work in to show why it was needed. I felt they should be recognised for what they had achieved, so I nominated them for a Markel 3rd Sector Care Award last autumn.

AWARDS ACTION

Luke and his fellow chair Joanne Broadhurst-Jones were interviewed by a panel of judges. They invited the chair of the BRA to join them, to emphasise the strong relationship between The Grange and the community.

Joanne stated, "We did the interview on Zoom, which made us a bit nervous. But the judges were obviously impressed by the project right from the start. They said, "So you have actually saved lives?" And I think we really have done that."

On the day of the Markel 3rd Sector Care Awards in March this year, Joanne and Luke were quite overwhelmed to find themselves in a smart hotel in Birmingham, with former news presenter Angela Rippon hosting a very glamorous event with her informed and humorous commentary. It felt a million miles from Great Bookham in Surrey and their everyday worries about road safety.

NO PLANS TO STOP

The Keep Safe Team hasn't wasted any time since then. In the spring, they undertook a series of four 'street audits', mapping out the challenges for walkers and wheelchair users on local pavements – the kind of hazards that deter them from making apparently simple, short trips to town for shopping or socialising. They aim to present their findings to Surrey County Council's Highways Department and other agencies keen to promote walking since the COVID-19 pandemic.

This autumn they are working with the police to develop a Speed Watch campaign,

stopping speeding cars on local roads, and speaking directly to them about why their driving behaviour is unacceptable. They are writing their own speech to read out to the drivers, having seen just how much impact they can have.

"We should never underestimate the power of the people we support," commented Eloise. "Time and again, I see the respect of people in authority for their ideas and aspirations. The Grange simply amplifies their voices so that they are heard more widely. People we support have taken part in discussions about hospital provision, police communications, the environment and housing in recent months: the world will definitely become a better place when it learns to listen to the most disadvantaged in our midst." **CMM**

Eloise Appleby is Chief Executive Officer at The Grange Centre for People with Disabilities.
Email: eloise.appleby@grangecentre.org.uk
Twitter: [@grangecentreceo](https://twitter.com/grangecentreceo)

MARKEL 3RD SECTOR CARE AWARDS 3



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 sponsors: National Care Forum, Learning Disability England, The Care Provider Alliance, Association of Mental Health Providers and VODG.

ARCO WHAT NEXT? CONFERENCE 2022

6-7th July 2022

Associated Retirement Community Operators (ARCO) hosted its sixth Annual Conference on 6-7th July at the IET London: Savoy Place. The programme consisted of a main conference day and a secondary knowledge exchange day. With over 400 experts representing over 190 organisations, from across the housing with care sector, ARCO welcomed national and international speakers to network with delegates on a number of topic areas.

PERCEPTION OF AGEING

ARCO shared insights from its 'Retirement Reconsidered' research – which explored what people want in later life and the possible barriers people face when looking for care in later life. Delegates heard how people are less confident about finding care for reasons such as finances or worrying about being a burden on the family. Speakers discussed the fear of ageing and how many people are ageing without children. People don't like the word 'retirement' and 'care', so a question put forward was how can providers market their business effectively to enable people to think they are prolonging 'mid-life' rather than later life?

As the Integrated Retirement Community (IRC) sector evolves and matures, so must its customer proposition. Do customers know what they want, and do they want what they need? What's the smart approach to balancing marketable lifestyle factors, with more difficult conversations about age-related factors? Managing Director of Richmond Villages, Phillipa Fieldhouse, shared how the retirement group supports people to retain independent living for as long as possible, with its

self-contained apartment offerings with care on-site when required to encourage a multi-level care provision offering on one site.

Dr Sam Carr, Senior Lecturer, Centre for Death and Society, Department of Education, University of Bath, said when it comes to creating a model of care that works, the provider needs to consider the conflicting needs of a wide range of people depending on their independence/dependency needs. Not everyone is going to experience ageing in the same way.

REVIEWING UNMET NEED

There are currently 75,000 people living in retirement communities and, in the next 30 years, the number of over-75s in the UK will double. ARCO's Director of Policy and Communications, Gareth Lyon, outlined 'Vision 2030' which includes six main priorities that the retirement community needs to deliver to keep up with demand. The sector's vision is to provide for 250,000 people by 2030 and to release over 562,000 bedrooms into the general housing market.

Delegates heard how Professor Les Mayhew will be leading a review to identify the level of unmet need for housing with care for older people in the UK. ARCO said that, quite simply, not enough houses are being built and there is a 15 million bedroom surplus.

ETHICALLY DIVERSE

Tade Muiyiwa-George, Partnerships Manager at ARCO, shared that by 2051, in England and Wales, there will be 3.8 million ethnic minority older people aged 65 and over and

2.8 million aged 70 and over. 'Providers need to be future proofing their business,' she told delegates. Attendees heard from Millie, a resident at ExtraCare Charitable Trust, on how the care group meets her cultural needs. Millie urged developers to explore redevelopment opportunities so people can remain living in their communities.

FURTHER AFIELD

Richard Hinchliffe, Director Sector Strategies, ANZ Business, the retirement village sector in New Zealand, shared how decisions on funding are made, how quickly schemes fill up, how both consumers' and lenders' interests are protected and how New Zealand's retirement village sector grew to be the largest in the world (relative to the size of its population). People in New Zealand go into care for friendship, companionship, wellness, care, no maintenance, security, release equity and age-appropriate living. 70% of villages have care. Delegates also learnt that there are 211 villages in the pipeline in New Zealand.

FROM THE MINISTER

The Minister for Health and Social Care, Gillian Keegan, was unable to attend the conference in person but told delegates via video link that everyone must 'harness the energy and creativity of the sector' and that 'our nation's housing needs to change.' The Minister added that the upcoming taskforce is crucial and should help to bring more people together.

Visit www.eventcreate.com/e/arco-conference for the full list of speaker details.

CMM INSIGHT
CONFERENCES • EXHIBITIONS

Look out for announcements about CMM Insight events happening in 2022



@CMM_Magazine #CMMInsight

www.caremanagementmatters.co.uk

Care Home Finance

up to **80%** funding
against full market value

- 80% for high quality modern purpose built
- 75% for high quality converted homes
- 70% for older style converted homes
- 70% for first time buyers
- 65% for homes with 'requires improvement' rating
- 100% for extensions and purchasing further homes

Repayment profiles of up to 25 years available

Fully sanctioned facilities before valuations,
then subject to valuation and legals

Call: **01242 227172**

E-Mail us at: mvhwiddows@aol.com

www.globalbusinessfinance.net

Global Business Finance

FINANCE SPECIALISTS IN THE CARE SECTOR

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)



Sign up at www.caremanagementmatters.co.uk

[@CMM_Magazine](https://twitter.com/CMM_Magazine)

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

WHAT'S ON?

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

Event: National Day of Arts in Care Homes
Date/Location: 24th September / Nationwide
Contact: Web: www.careengland.org.uk/national-day-arts-care-homes

Event: NCF CEO's and Director's Conference, National Care Forum
Date/Location: 26th-27th September 2022 / London
Contact: Web: www.nationalcareforum.org.uk/events/ncf-managers-conference

Event: Digital Health and Care Conference, The King's Fund
Date/Location: 11th October / London
Contact: Web: www.kingsfund.org.uk/events/digital-health-and-care-congress-2022

Event: The Care Show
Date/Location: 12-13th October, NEC Birmingham
Contact: Web: www.careshow.co.uk

CMM EVENTS

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

Event: Lancashire Care Conference
Date/Location: 30th November / Lancashire
Contact: Web: www.caremanagementmatters.co.uk/event/lancashire-care-conference-2022/

Event: Markel 3rd Sector Care Awards
Date/Location: 3rd March 2023 / Birmingham
Contact: Web: <https://www.caremanagementmatters.co.uk/event/markel-3rd-sector-care-awards-2023/>

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

STRAIGHT TALK

Jane Townson, Chief Executive of the Homecare Association, explains how the Government's under investment in the homecare sector is having detrimental consequences.



Home-based support and care play a vital role in enabling us all to live well at home and flourish in our communities. Investing in support and care at home helps to prevent admission to more expensive settings of care, such as care homes and hospitals. Available homecare also enables people to return home from hospital safely. It makes little sense to neglect people in the community, wait for a crisis, then rely on expensive and limited critical care services. Regrettably, though, this is the UK's current health and care strategy, and evidence suggests it is failing.

In July 2022, the number of deaths in England and Wales was over 1,000 per week above the five-year average in private homes, hospitals and care homes.

Ambulance response times across all incident types increased in the latest month: in June 2022, one in 10 patients waited over one hour 54 minutes for a Category 2 (emergency) ambulance.

In June 2022, 28% of people attending A&E spent more than four hours from arrival to admission, transfer or discharge.

Performance against the two-month cancer waiting time target is the worst on record. In May 2022,

the proportion of patients who waited less than two months from an urgent GP referral to first treatment for cancer fell to 62%, the lowest recorded level. The elective care waiting list continues to grow; as of May 2022, 6.6 million patients were waiting for planned hospital treatment.

Furthermore, the UK ranks among the highest for rates of hospital admission in the Organisation for Economic Co-operation and Development for asthma and chronic obstructive pulmonary disease, both of which are considered largely treatable within primary care.

NHS leaders have suggested that the unsustainable pressure on health and care services is driven strongly, though not exclusively, by severe capacity challenges affecting social care. This is unsurprising given that investment in homecare is less than 4% of that in the NHS – most of which is directed at hospitals.

Demand for homecare is outstripping supply. The Association of Directors of Adult Social Services reported in May 2022 that hours of homecare delivered had increased by 16% over the last year. In the same period, though, hours of homecare commissioned but undelivered increased from 286,000 to over 2.2 million.

Data published by Skills for Care in July 2022, shows that the number of filled posts in adult social care fell from 1,670,000 in 2020/21 to 1,620,000 in 2021/22. In homecare, vacancies in 2020/21 were an estimated 52,000 (9.3%) and have increased to 75,000 (13.2%) in 2021/22. So, both recruitment and retention are declining.

Poor pay and terms and conditions of employment have long been problems for the homecare workforce, particularly in the state-funded part of the sector which represents 70% of the whole. These stem from inadequate funding by central Government and poor practices in commissioning and purchase of homecare by public sector organisations. In recent years,

the homecare sector has also been adversely affected by Brexit, COVID-19, and now international conflict. Tightening of labour markets, pressure on supply chains and rising energy costs are fuelling inflation, which is placing further pressure on low-paid workers and their employers.

To make matters worse, many homecare workers are now not being paid or are receiving only Statutory Sick Pay (£99.35 per week) whilst isolating after a positive COVID-19 test, following removal of the Infection Control and Testing Fund by the Government. Almost half of homecare workers are on zero-hour contracts due to zero-hour purchase of homecare by councils, so they are paid only for hours worked.

A Homecare Association survey on fuel costs indicated that many homecare workers are also struggling to afford fuel for their cars. Government statistics show that fuel prices have risen by 46-48% in a year, leading to an unfunded additional cost of £107m for fuel. Responses from 627 homecare providers, representing approximately 101,170 care workers and 146,100 care recipients, indicated that over half of care workers have asked for an increase in mileage rate, while just over a fifth added that care workers had either given notice, intended to look for work elsewhere or had already done so because they cannot afford to put fuel in their cars. Our research indicates that most care workers are paid mileage rates of 30p or lower, with many receiving only 10p per mile, in contrast to NHS mileage rates of 54p.

We continue to urge Ministers to:

- Pay for a temporary fuel allowance for homecare.
- Reinstate emergency COVID-19 funding for social care to enable care workers to receive full sick pay whilst isolating.
- Invest in homecare so we can pay care workers fairly, build capacity and reduce unmet need, recognising that NHS performance is critically dependent on social care.

Jane Townson is the Chief Executive of the Homecare Association. Email: jane.townson@homecareassociation.org.uk
Twitter: [@drjanetownson](https://twitter.com/drjanetownson)

What are your thoughts on the current situation in homecare? What support do you think could be most effective? Share your experiences and feed back on this article on the CMM website, www.caremanagementmatters.co.uk



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



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