



UNLEASHING

SOCIAL

CARE

SOCIAL CARE IS PRIMED FOR CHANGE - AND WE WANT YOU TO KNOW WHY
THE REINVENTING SOCIAL CARE REPORT: MAY 2024

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FOREWORD



WHY DO WE CARE? (AND WHY SHOULD YOU?)

Social care is a huge, complex and unwieldy beast.

A challenged and often misunderstood soul that many people don't seem to care about. It is in a poor state - neglected, underfunded and unfit for the future. And yet, and yet.....

Search for *social care reform* and you'll find numerous reports. Individuals, organisations, charities, political parties all desperate to crack the conundrum.

Look deeper and you'll quickly realise that it is a massive industry that survives (and thrives) in spite of the system it finds itself in, a system that seems deliberately obstructive and obtuse, wracked with jargon and contradictions.

You might not know much about social care - maybe you've never had a need for it. Or maybe you're annoyed by the narrative....doesn't social care just take up time and resources for people who probably don't 'appreciate' or 'deserve' it anyway.

But talk to people who work within social care and you'll find people who really, really care. People who find themselves constantly humbled by how it is, quite literally, the very essence of life. Surely caring and supporting those who are struggling with some part of their life is the backbone of a civilised society?

WHAT IS THIS I'M READING EXACTLY?

3 years ago a self-selecting (highly experienced but challenged and frustrated) group of people formed a working collaborative we call 'Reinventing Social Care'.

Made up of around a dozen representatives from across the sector (some working with older people and others with disabilities) between us we have over 300 years of experience.

We set out to bring fresh and innovative thoughts to the table - to use our own resources to work out the game changers for social care. Our aim is always to be solution focused.

Above all we want to **drive a conversation** for positive change and a better version of social care. We want you to read this and maybe read more because of it. We want you to pass it on, tell your friends, post it on your socials.

We won't profess to having it all perfectly nailed down and we won't pretend it's beautifully polished.

But we feel this is the time to get it out there. Time for a debate, time to start making a change for the better.



DO WE REALLY NEED ANOTHER REPORT ON SOCIAL CARE?

Maybe not, but luckily this is not just another report!

This is a collaborative piece written by people who actually deliver care and support. All of the authors work in social care day-to-day.

We aren't just a think tank or government body tasked with trying to come up with some suggestions. We work and breathe this stuff and anything we suggest will directly impact the sector we love.



We have structured our report in a way which we hope has a bit of logic.

We start with the question of what we want social care to be in our society, then move directly to consideration of those who need and want to access services and the important people who deliver them.

What has become overwhelmingly obvious to us is that none of this change can happen in silo. For good and positive change to happen we need to gather people from across the sector for a frank exchange of views. We've called it: 'The Big Conversation' and wherever you see this we have put down a few things that we think should be part of this Big Conversation.

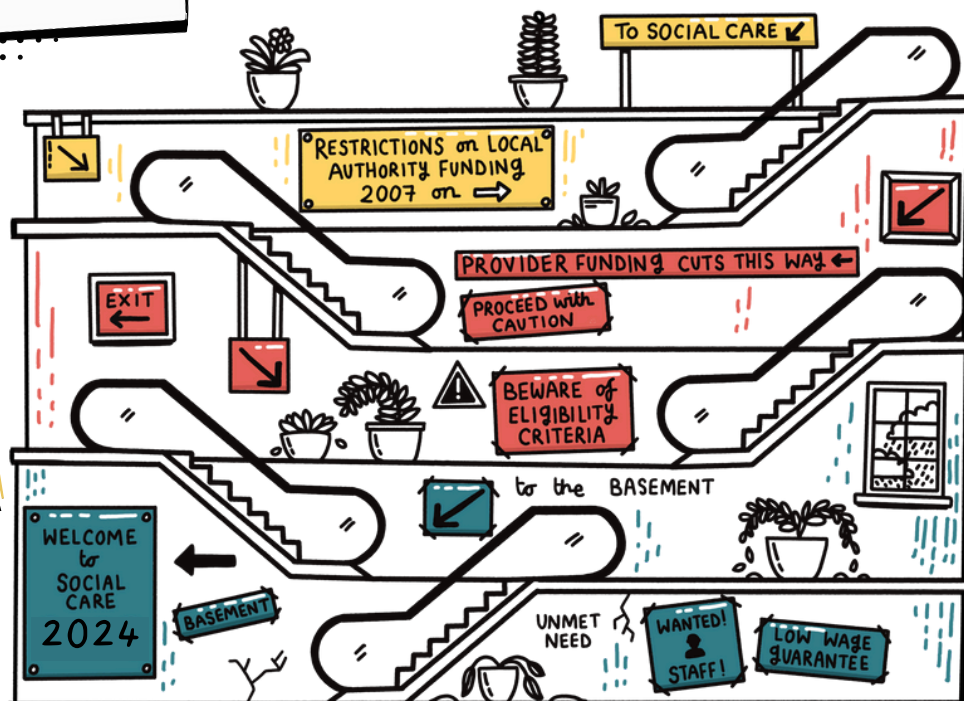
We urge you to read this report actively. Think about the role you can play in making change happen. Because one thing is certain, change will only happen if we make it happen.

**THE BIG
CONVERSATION**

AND THAT MEANS ALL OF US.

HOW ON EARTH DID WE END UP HERE?

To be honest, we all know why. Social care has been driven to the bargain basement through decades of underinvestment, low innovation and crippling bureaucracy. No news here.



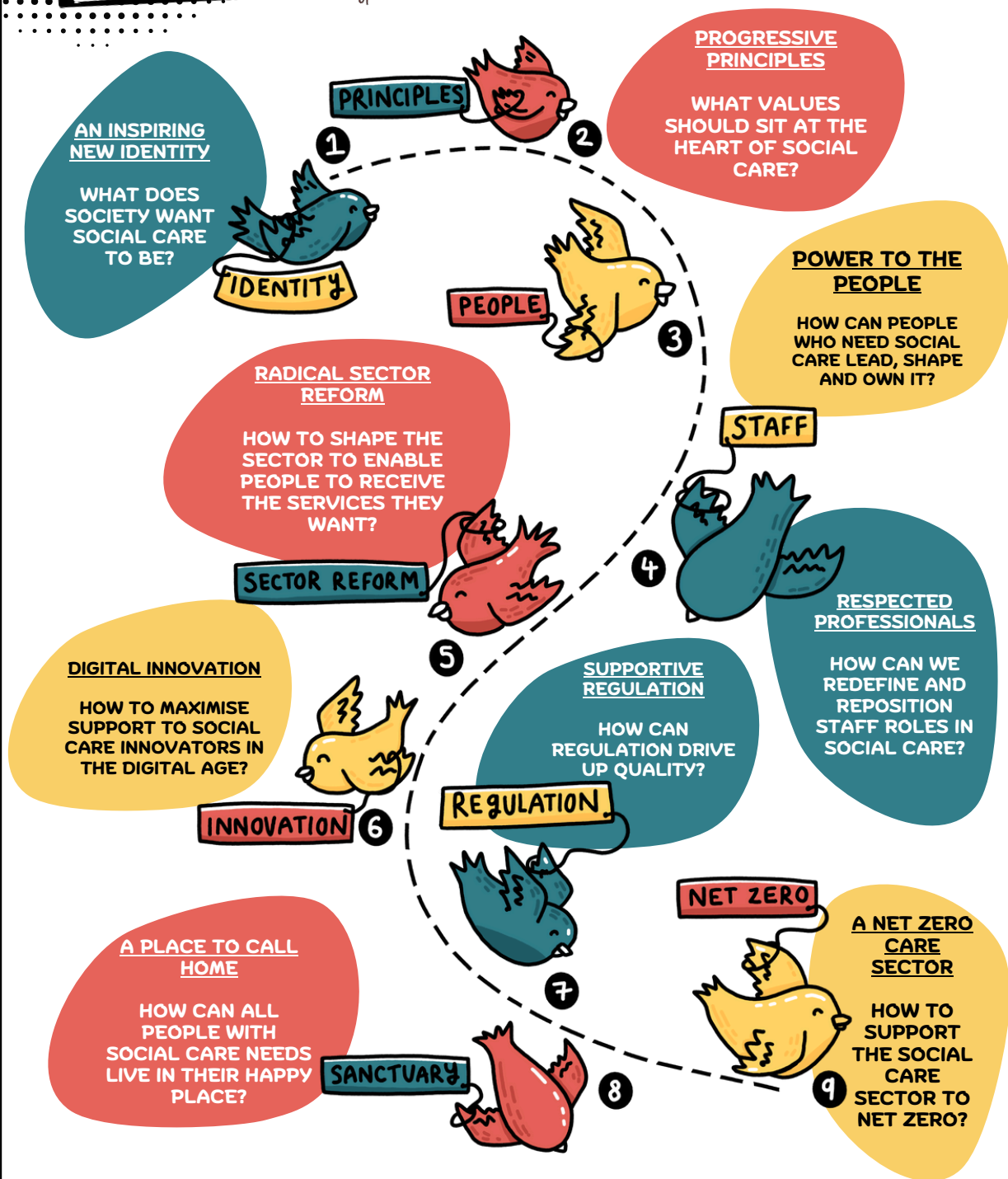
And we also know what the future reality of social care looks like if we continue to ignore the concerns about it. The noise is loud and the threat is real. And it won't just affect social care either. The NHS can't work as it should unless it is partnered properly with a more effective (and better funded) social care system.



It's not just all about the money though. The system as a whole has failed to take a courageous stance, embrace creativity and do things better. We are all culpable for where we are at.

A PATHWAY TO BETTER SOCIAL CARE

But luckily all is not lost. Because social care is brilliant. And the people who work in it are brilliant. Social care has so much potential and it is primed to be set free - ready to be **unleashed**. For that to happen, we must focus on the key areas that need to change.



UNLEASHING

1

AN
INSPIRING
NEW
IDENTITY
FOR SOCIAL
CARE

SOCIAL CARE AS A 'BRAND' IS
BROKEN AND MISUNDERSTOOD. IF
WE WANT PEOPLE TO TRULY VALUE
OUR SECTOR THEN WE NEED TO
VALUE THE BRAND AND GIVE IT THE
MODERN STANDOUT IT DESERVES.

**AN INSPIRING
NEW IDENTITY
FOR SOCIAL
CARE**

**A STRONGER IDENTITY WILL TRANSFORM
PUBLIC UNDERSTANDING AND SUPPORT**

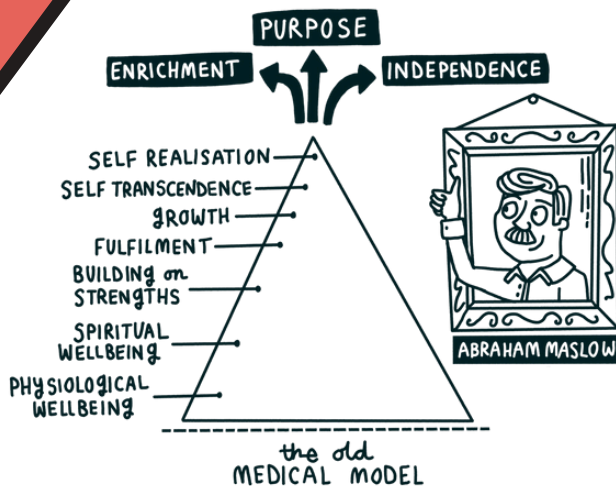
Social care can be (and often is) powerful and progressive. But it is woefully misunderstood. We need to capture the scale of ambition for the sector in a powerful new identity.



**WHAT EVEN IS
SOCIAL CARE??**

Many people feel that social care is for the needy and the helpless. A place for those who are all out of options. It's about existing, keeping people alive, a burden on the state, a necessary evil. But we know that social care is unique because it is about all aspects of life and in some cases, for all of a life.

**AT ITS BEST, MODERN
SOCIAL CARE
TRANSFORMS LIVES
FOR THE BETTER.**



**AN INSPIRING
NEW IDENTITY
FOR SOCIAL
CARE**

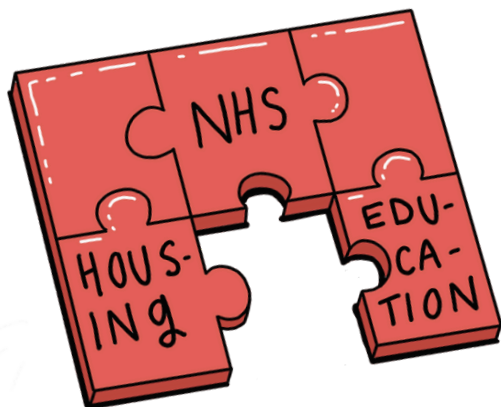
**I LOVE SOCIAL CARE
(AS WELL AS THE NHS!)**

But does society value social care? Does the Government? Commonly, social care is portrayed as a problem to be fixed, a drain on already stretched resources. People working in social care don't have the visibility that people working in the NHS do and social care is sometimes valued only by what it can do for the NHS, rather than being cherished for what it does for society as a whole.

**THE COVID-19 PANDEMIC SHONE
A LIGHT ON THIS DISPARITY. THE
PUBLIC APPRECIATED THE WORK
OF THE NHS SEVERAL WEEKS
BEFORE RECOGNISING THE HUGE
CONTRIBUTION MADE BY THE
SOCIAL CARE SECTOR.**



True partnership between public services is the right way forward. As well as the NHS, social care should also interact well with all other important and closely related functions like education and housing.



**AT THE MOMENT,
SOCIAL CARE JUST
DOESN'T SIT WELL
IN THE PUBLIC
SERVICE JIGSAW.**

**AN INSPIRING
NEW IDENTITY
FOR SOCIAL
CARE**

FROM UNAWARE TO ENLIGHTENED

This really isn't rocket science. When things are properly understood they are more likely to be considered important and worthwhile. If people value social care they will support it, fund it, invest in it and work in it.

**PRIORITISE IT!
INVEST IN IT!
WORK IN IT!**



Wider understanding of social care is vital to embed its value. Let's promote positive stories throughout the sector and society at large to change perceptions.

**THE SOCIAL CARE
SECTOR MUST TAKE
RESPONSIBILITY FOR
HOW IT IS PORTRAYED.**

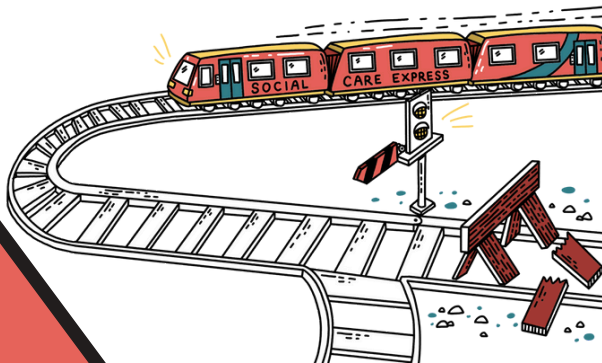


**AN INSPIRING
NEW IDENTITY
FOR SOCIAL
CARE**

READY TO BE UNLEASHED

Before we can truly begin to reinvent or unleash social care, our society needs a clear and shared view of what social care is. We need a national conversation where we articulate how powerful, progressive and important social care should be.

**SOCIAL CARE NEEDS
A BRAND WITH
STAND-OUT
VALUES, CREATIVITY
AND IMPACT.**



THE BIG CONVERSATION

What do we want from our social care? How can we work across society to articulate a modern vision for social care?

What things are called matters. The name should better reflect the sector - there is a great opportunity for a meaningful redesign with national buy-in.

How can we then design a strong, attractive, modern and identifiable brand which conveys all that is good about the sector and gives it the recognition, support and appreciation it deserves?

SOME INSPIRATION!

Brands can perform miraculous turnarounds. In the 1980s Apple was nearly bankrupt and losing market share to Microsoft Windows.

Some inspired product development and super sleek branding means Apple now has a fierce brand loyalty and in 2023 had the world's largest corporate turnover.

UNLEASHING

2

PROGRESSIVE PRINCIPLES FOR A MODERN SOCIAL CARE SYSTEM

- 1) SOCIAL CARE SHOULD FOCUS ON QUALITY OF LIFE AND ASPIRATIONAL OUTCOMES
- 2) PEOPLE SHOULD LEAD THEIR OWN JOURNEY
- 3) SERVICES SHOULD BUILD ON STRENGTHS RATHER THAN FIX DEFICITS
- 4) RELATIONSHIPS ARE KEY!
- 5) SOCIAL CARE SHOULD BE DYNAMIC AND PROGRESSIVE
- 6) SELF-SUFFICIENCY SHOULD BE PROMOTED THROUGH PREVENTION AND ENABLEMENT

PROGRESSIVE PRINCIPLES

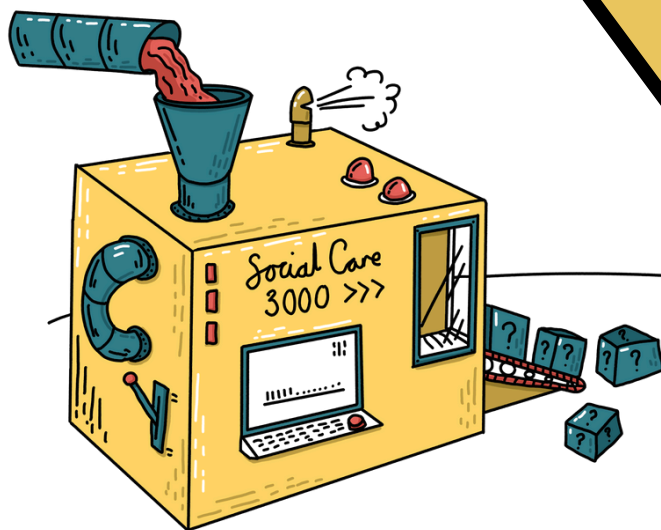
SOCIAL CARE SHOULD BE ALL ABOUT QUALITY OF LIFE

Social care is starting to talk more about 'outcomes' and how important they are. It's a rather cold and technical word to use - what we essentially mean by outcomes are the dreams, the goals and the achievements that each individual might want to fulfil.

THERE'S SO MUCH I WANT TO DO (AND CAN DO WITH A BIT OF HELP!)



But traditionally, social care has been about maintenance - overly focused on 'inputs' or the things that 'go into making care happen'. Commissioners buy care at the lowest price (that's an input), regulators might check quality of environments or staffing levels (more inputs) but.....



THESE INPUTS BRING NO GUARANTEES OF A GREAT 'QUALITY OF LIFE' OR 'WELL-BEING' OUTCOME.

PROGRESSIVE PRINCIPLES

CHANGING THE FOCUS FROM 'WHAT GOES IN' TO 'WHAT IS ACHIEVED'

There is no doubt that the quality and sufficiency of the inputs in social care are important. But we all know that actually, supporting someone to achieve their aspirations (and to design and promote new models with positive, strength-based aspirations at their heart) is even more so.



WHY NOT MEASURE THE ACHIEVEMENT OF DREAMS AS THE NORM, RATHER THAN THE EXCEPTION?

THE BIG CONVERSATION

How can we work together across the sector (with provider input) to devise an approach for outcome-based models that works for all? How can we promote outcome-based models through proper, research-driven, progressive commissioning practices? And how can we make this the new norm in social care?

SOME INSPIRATION!

Great examples are few and far between, but we particularly like the Somerset work with Community Catalysts from a few years back. The Council established an approach based on releasing local people's capacity to care.

It stimulated the market to develop around 200 small, self-organising enterprises which were able to deliver low-cost, flexible care for older people and support the achievement of great outcomes.

PROGRESSIVE PRINCIPLES

PERSON-LED CARE IS A NO-BRAINER

'Person-Led', 'Person-Centred', 'Nothing About Us Without Us'.....we know them all, they've been around for years. But the harsh fact is that care and support delivery processes are still frequently paternalistic. Care plans, for example, are shaped and 'owned' by social services, providers or the NHS not the person.

HOW CAN IT BE RIGHT
THAT THE PERSON WHO IS
THE SUBJECT OF THE
CARE PLAN HAS NO
OWNERSHIP OF THE PLAN?



The review process is especially de-humanising. Imagine a bunch of people (who you didn't choose) sitting around discussing random aspects of your life; your deficits; your incontinence; your sexuality; your behaviour; and (less likely) your future. What gives us the right to subject people to this horrible process? Just who do we think we are?



FUTURE
GENERATIONS WILL
JUDGE US HARSHLY
FOR THIS :/

PROGRESSIVE PRINCIPLES

FROM CONTROLLING AND PATERNALISTIC
TO EMPOWERED AND PERSON-LED

People must be supported to lead all aspects of their life, care and support. They must shape and own the planning and oversee delivery. An effective plan should be portable, long-term and achievable.



I SHAPE IT,
I PAY FOR IT,
I OWN IT,
I LOVE IT!

THE BIG CONVERSATION

Surely we all agree that all aspects of social care must be shaped, owned and led by the individual. Personalised processes will unleash consumer sovereignty and pull quality through the system.

We should discuss how we can take a critical look at all of our processes and re-engineer them. For example, we might need to consider some new processes too (for example could social care have a central digital record like the NHS does?)

SOME INSPIRATION!

Does anyone do this really well? Can anyone say their processes are truly person-led? If so, we want to know about it and celebrate it!



PROGRESSIVE PRINCIPLES

LET'S CREATE AN ASPIRATIONAL SYSTEM WHICH BUILDS ON PEOPLES' STRENGTHS

Historically social care adopted what has been called a 'deficit model' or a 'medical model'. People were seen as having something wrong with them - something that needed to be fixed; something that a pill could cure.

THIS WILL
MAKE IT ALL
BETTER!



But think how great social care could be if it focused on strengths and aspirations? If a social care journey started with people setting out their hopes and ambitions; what is important to them; what they are good at and what they want to build on. And what if this was a standardised, streamlined process done once?

GET THIS BIT OF THE
PROCESS RIGHT AND
EVERYTHING THAT
FOLLOWS WILL BE RIGHT
TOO. BUT GET IT WRONG.....



PROGRESSIVE PRINCIPLES

WE MUST LISTEN TO PEOPLE
RIGHT FROM THE OUTSET

A process like this would require a framework or structure. A structure that considers the aspirations of the individual and lays out everyone's rights – a charter or **Statement of Aspiration** if you like.



A STATEMENT OF
ASPIRATION COULD
BUILD THE RIGHT
FRAMEWORK RIGHT
FROM THE START.

THE BIG CONVERSATION

Would a flexible 'Statement of Aspiration' (which enables people to articulate their strengths, qualities, hopes and ambitions right at the very start of their social care journey) be the right way to ensure we are listening to people right from the outset? Are there any other ways we could do this?

SOME INSPIRATION!

Does anyone use anything like this? If so, we want to know about it and learn from it.



PROGRESSIVE PRINCIPLES

AT THE VERY HEART OF SOCIAL CARE LIES A HUMAN RELATIONSHIP

Being great at delivering care is about being great with people. But somewhere along this journey people have become a commodity - care has become all about 'systems' and 'processes'.

LET'S REMEMBER THAT HUMAN BEINGS ARE SOCIAL ANIMALS.



We have segregated people from their communities and because we are so averse to risk, we have created professional boundaries which have become overly restrictive and stifling. Support staff are discouraged from forming close relationships. But life is all about relationships, surely?

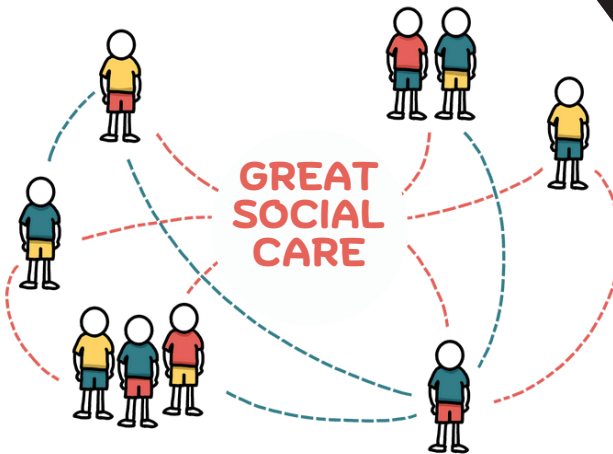


SOMETIMES GREAT CARE MEANS GIVING SOMEONE A HUG!

PROGRESSIVE PRINCIPLES

GREAT CARE MEANS MOVING FROM ISOLATION TO ASSOCIATION

Nurturing and developing relationships should be the cornerstone of social care. People should be supported to maintain existing relationships and build new ones with families, friends, communities and support staff too.



SOCIAL CONNECTIONS DRIVE PURPOSE, WELL-BEING, FULFILMENT AND LOVE TOO.

THE BIG CONVERSATION

How can we ensure we put relationships right at the centre of care?

What sort of relationship-based models could we develop to enable and encourage people to maintain existing relationships, build new ones and live life to the full with friends, family and the community?

SOME INSPIRATION!

The Isle of Wight's 'Living Well and Early Help' service provides support and early help to vulnerable people on the island. The service focuses on the individual's strengths, passions and capabilities, enabling them to stay strong and prevent a need for service intervention.

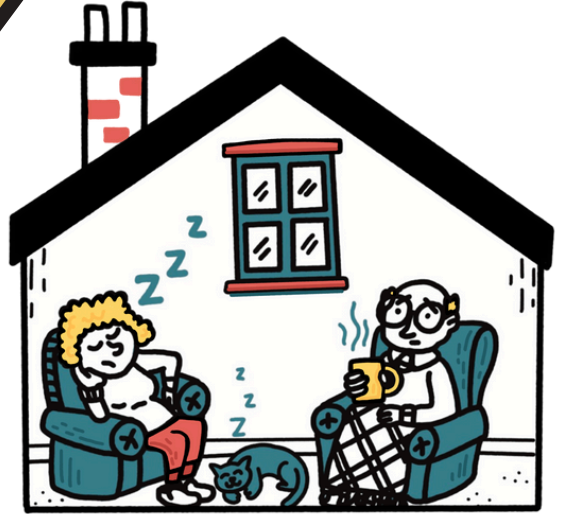
Key to this is working with communities to increase their capacity, resilience and wellbeing through a community development approach. The service offers a range of projects and activities, such as gardening groups, befriending schemes and crisis support.

PROGRESSIVE PRINCIPLES

SOCIAL CARE ISN'T STATIC - IT'S A JOURNEY

Social care of the past was designed to maintain the status quo. 'Old' people's homes were waiting rooms - necessary medical care was dispatched but there was little variety and/or choice.

I'M NOT READY FOR THIS :(



And it was no better for people with learning disabilities. They were in the community but not part of the community. People lived empty lives, doing the same thing everyday.

SOCIAL CARE IS JUST ADULT-SITTING ISN'T IT?



PROGRESSIVE PRINCIPLES

PEOPLE SHOULD BE INSPIRED TO LIVE FULL RICH LIVES AT ALL STAGES OF LIFE

Some social care is still static but thankfully most has moved on. In our vision of modern social care the choice to move to a 'care' home is a positive decision to start a new, exciting, stimulating and progressive phase of life.



THIS IS MY TIME!

THE BIG CONVERSATION

How can we design and promote models of care and support which are dynamic and progressive that support people to live rich, fulfilled and purposeful lives at all stages of their life?

SOME INSPIRATION!

A story from Southern Healthcare Ltd.....an older man was suffering with mobility issues and mental health difficulties. His response to trying something new was always negative. But thanks to innovative and challenging care work the team were able to identify a lifelong passion for sports cars and he spent his birthday driving an Aston Martin!

PROGRESSIVE PRINCIPLES

SOCIAL CARE SHOULD ASPIRE TO BUILD HIGH QUALITY LIVES WITH LESS SUPPORT

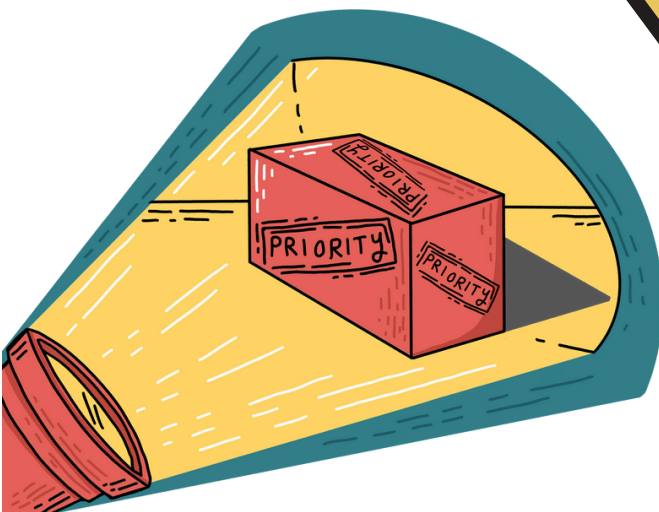
The optimum goal in social care must be to prevent deterioration and enable capabilities so that individuals are better able to live high quality lives with less reliance on the social care system. But preventative and enabling services often require up-front investment to deliver long-term savings.

DO LOCAL AUTHORITIES LACK THE FUNDS OR THE COURAGE TO INVEST?



Long term erosion of funding has forced local authorities to focus on only the highest immediate priorities. Eligibility criteria have risen from moderate, to substantial and now to critical - resulting in increasing unmet need and heartache.

PREVENTATIVE AND ENABLING SERVICES INCUR A COST IN THE SHORT TERM BUT DELIVER SIGNIFICANT BENEFITS OVER THE LONG TERM.



PROGRESSIVE PRINCIPLES

SELF-SUFFICIENCY ULTIMATELY MEANS LESS DEMAND ON FUTURE SERVICES

Social care is a long term game and playing the P&E cards early with up-front investment will ultimately mean that people achieve great quality of life outcomes and minimise demand for future services.



WITH PREVENTION AND ENABLEMENT EVERYONE WINS :)

THE BIG CONVERSATION

Let's look at some data!
Let's talk about best practice!

If we can prove that Prevention and Enablement Models deliver strongest results over time then that approach should form the cornerstone of everything we do.

SOME INSPIRATION!

The Virtual Care Home is an innovative model developed by Birtley House Nursing Home in Surrey. The aim is to provide improved technology for communication so that people can come out of hospital earlier to regain their independence in a care home whilst still remaining in direct contact with NHS specialist support.

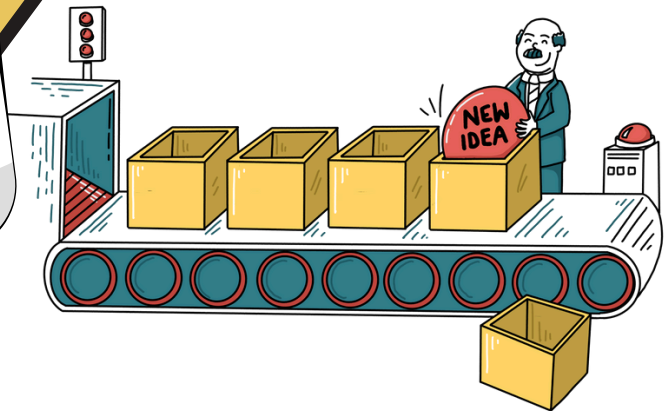
They can return to their own home with a domiciliary package sooner too, whilst still using the technology to remain in contact with the friendships they made in the Care Home. This gives the individual personal choice on timings and location without breaking the chain of both social and medical support.

PROGRESSIVE PRINCIPLES

POWER TO PROVIDERS!

Social care providers need to be empowered too. Currently they are at the bottom of the food chain - micro-managed and untrusted. This lack of trust can mean that providers shy away from creativity and are forced to fit new ideas into old business models.

THINKING OUTSIDE THE BOX IS TRICKY WHEN YOU'RE NOT EMPOWERED TO DO SO.



Social care providers are working in a system that always thinks the worst of them. This has created a closed culture where providers are anxious of unwarranted retribution or blame. This makes it harder to spot and call out those providers demonstrating poor performance and malpractice.

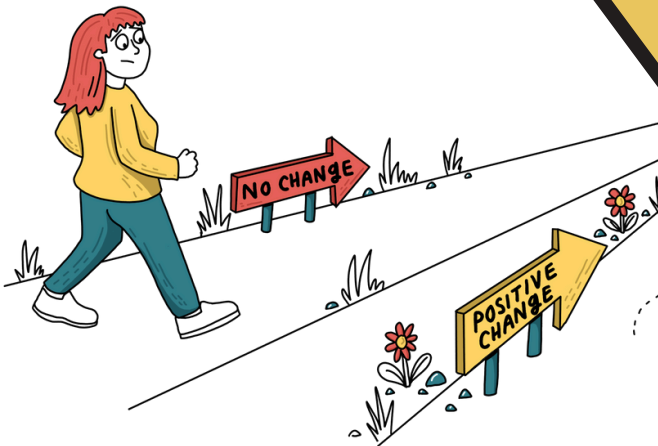


POOR PERFORMANCE CAN'T HIDE IN AN FAIR, OPEN AND HONEST CULTURE.

PROGRESSIVE PRINCIPLES

PROVIDERS ARE NATURALLY PROGRESSIVE

Keeping social care providers on a tight leash with low expectations will force a path of no change. But give them the freedom to be creative, the freedom to embrace new ways of working and the freedom to disrupt and just watch what happens!



SOCIAL CARE PROVIDERS HAVE IT IN THEIR POWER TO INSTIGATE POSITIVE CHANGE.

THE BIG CONVERSATION

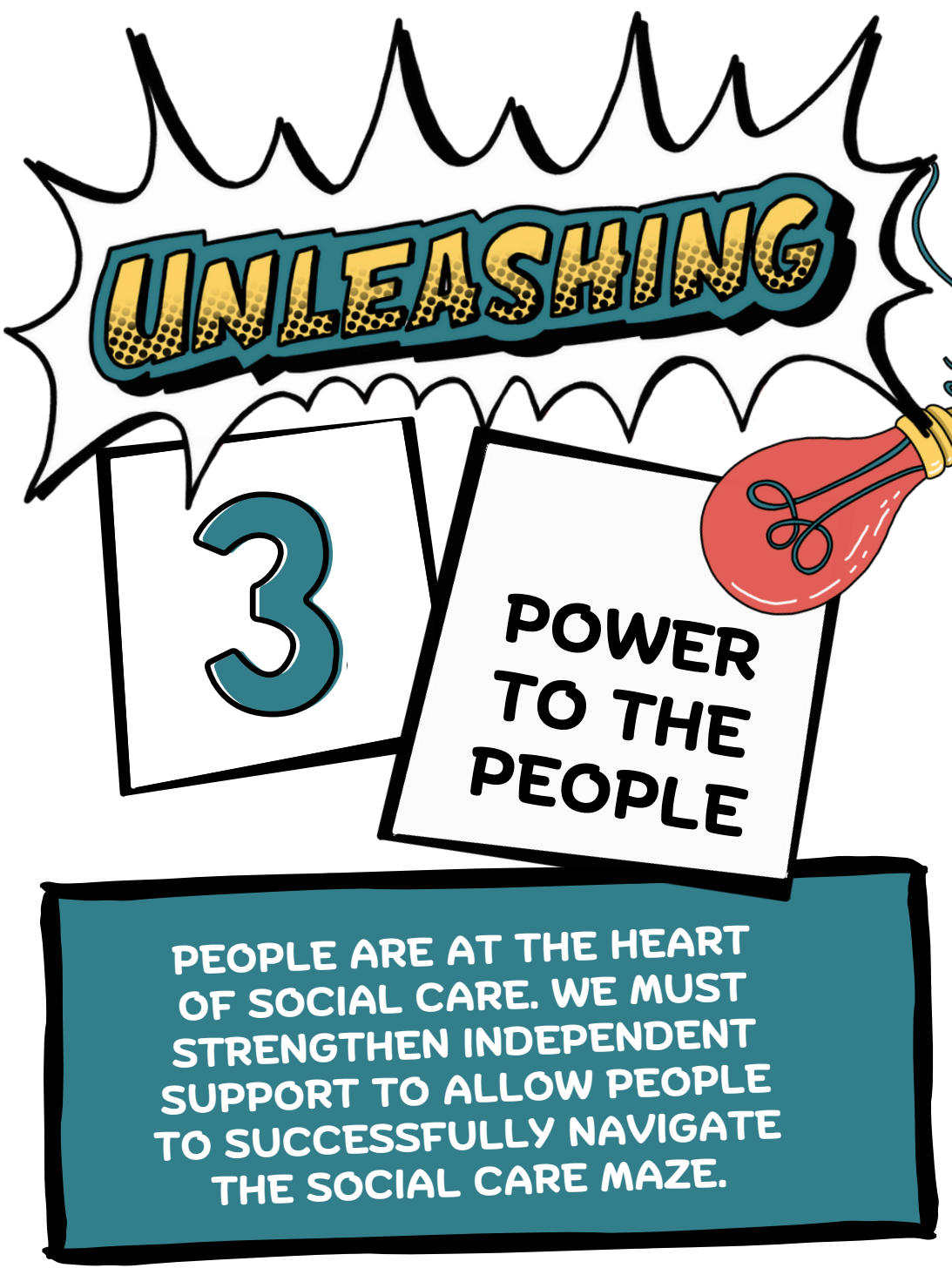
This feels like an opportunity to get everyone around the table. This should be a big conversation that involves providers, regulators, insurers, funders and all other stakeholders as well.

How can we empower providers to look at new ways of working? How can we give providers the space to try new things?

SOME INSPIRATION!

We would love to hear some great examples of providers being empowered to bring about change.....





UNLEASHING

3

POWER
TO THE
PEOPLE

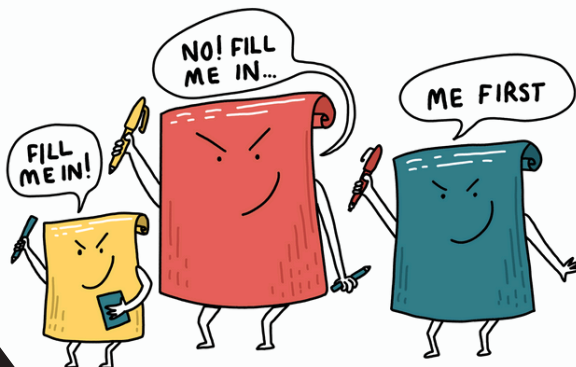
PEOPLE ARE AT THE HEART
OF SOCIAL CARE. WE MUST
STRENGTHEN INDEPENDENT
SUPPORT TO ALLOW PEOPLE
TO SUCCESSFULLY NAVIGATE
THE SOCIAL CARE MAZE.

POWER TO THE PEOPLE

SUPPORT PEOPLE TO MAKE THE BEST CHOICES AT THEIR TIME OF GREATEST NEED

The people accessing care must be at the heart of the system. They should hold the power and be able to make choices and informed decisions about their future. But before anyone can access social care they go through an impersonal and paternalistic assessment process designed for others to assess their needs.

**WE KNOW
WHAT'S BEST
FOR YOU!**



People suffer multiple replicating assessments from social services and providers and the quality of these assessments varies enormously.

**ASSESSMENT
THIS WAY** →



**ASSESSMENTS
TEND TO FOCUS ON
PEOPLE'S
DEFICIENCIES :(**

POWER TO THE PEOPLE

PEOPLE WHO ACCESS CARE SERVICES SHOULD HOLD THE POWER OF CHOICE

People should be supported to make informed decisions around their future. A (friendly) navigator is needed to help with establishing eligibility, sorting funding and choosing the right service.



FROM
POWERLESS TO
POTENT :)

THE BIG CONVERSATION

We should discuss and debate the feasibility of a new entity, and what that could look like. This entity should give power back to the individual.

Could it be an independent body of advisors and highly trained guides who are briefed to act independently and without bias. Or is there a better way?

SOME INSPIRATION!

The much-lauded Buurtzorg model has elements of the independent facilitation we propose here. An innovative district nursing and homecare model developed in the Netherlands, the principle is that the nurse acts as a "health coach" for the individual and their family, emphasising preventive health measures but also delivering necessary care themselves or calling on others to do so.

Buurtzorg nurses report that this model unleashes their creativity and enables them to find innovative solutions for their patients.

Great social workers have great relationships with their customers. They have ongoing and enduring relationships which allow them to advocate in the best interests of the individual and support them on their social care journey.

**GREAT SOCIAL
WORK IS SO
IMPORTANT**



But the role has changed. Social work has been dumbed down - with experienced staff substituted for less qualified practitioners and dedication replaced by duty. Social workers aren't given the time or freedom to make a difference. Their days are filled with crises and box ticking rather than anything more progressive, persistent or worthwhile. Social work has become a mechanism for cutting costs.



**EXCESSIVE WORKLOADS,
HIGH LEVELS OF STRESS,
BURN-OUT, SICKNESS
AND RESIGNATIONS ARE
THE NORM.**

POWER TO THE PEOPLE

LESS BOX TICKING MORE WELL-BEING

We see the role of social worker as vitally important within the local authority care management structure. A role that requires re-evaluation to ensure it is outcome focused and supportive to the individual. A role where the support worker is given time and space to develop long term partnerships with those that they work with.



WE ARE CONVINCED THAT
PEOPLE WHO HAVE THE
BEST SOCIAL WORKERS,
ACHIEVE THE BEST
OUTCOMES. AND WE DON'T
THINK THAT'S NEWS!

THE BIG CONVERSATION

How can we prove that people who have the best social workers achieve the best outcomes?

How can we take on the challenge of restructuring and reallocating resources to enable everyone to have an allocated social worker?

We know that social work is the cog which makes the social care machine work better and a lively exchange of views on how to bring social work not just back to life, but full of life would be a great start!

SOME INSPIRATION!

Does anywhere do this really well? If so, we want to know about it and celebrate it!



UNLEASHING

4

RESPECTED
PROFESSIONALS

IN MODERN SOCIAL CARE, STAFF ARE EXPECTED TO BE COUNSELLORS; ENABLERS; MENTORS; TEACHERS AND BEFRIENDERS. OUR SECTOR IS DEFINED BY OUR STAFF - SO MAYBE IT'S TIME WE ACKNOWLEDGED THEM PROPERLY?

RESPECTED PROFESSIONALS

CARE AND SUPPORT STAFF ARE THE BACKBONE OF OUR SECTOR

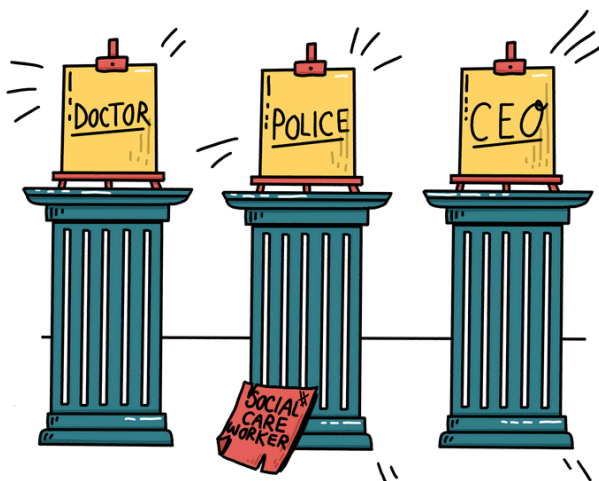
Getting the best possible outcomes for those who draw on social care won't happen until we value those who deliver it. Staff need the recognition and reward they deserve. Care and support staff are phenomenal - their work is increasingly highly skilled and complex and they require specialist training, skills and self motivation in bucket-loads.



SO WHY ARE CARE AND SUPPORT WORKERS SOME OF THE LEAST RESPECTED AND POOREST PAID PEOPLE IN SOCIETY?

Care and support work is sophisticated work, requiring high levels of 'soft' skills - things like selflessness; empathy; dedication and self-motivation - as well as increasingly high levels of technical skills.

IT'S CRUCIAL TO RECOGNISE THE ELEVATED RESPONSIBILITY CARE AND SUPPORT WORKERS HAVE.



**RESPECTED
PROFESSIONALS**

**CARE WORK IS SYSTEMATICALLY
UNDervalUED**

Lots of the hard work has already been done to be honest. Forward thinking associations such as the Surrey Care Association have commissioned and paid for investigative work into social care pay (see the inspiration box below).

**SOCIAL CARE IS
NOT A MINIMUM
WAGE JOB!**



THE BIG CONVERSATION

We need to discuss the merits of a national social care grading and pay framework. How can we develop it? What would it look like? How can we support local authorities to implement and fund it? (And fund it at a level which allows providers to reward staff appropriately).

SOME INSPIRATION!

A recent report produced by Campbell Tickell is well worth a read. Entitled 'Social Care Workforce Structure Project' (April 2023) they concluded that paid care work is changing and wider skills are now required which should (but doesn't) translate when looking at salary benchmarking. Care work is systematically undervalued when compared to similar roles.

RESPECTED PROFESSIONALS

WE MUST BUILD THE STATUS OF THE CARE AND SUPPORT ROLE TO REFLECT REALITY

It's not just about pay though. The way society views the care and support worker role is outdated and inaccurate. It is a highly skilled and responsible role requiring people with immense personal attributes. Take a moment to picture what it must be like to support someone with severe learning disabilities and challenging behaviour.....



IT TAKES A VERY SPECIAL PERSON TO BE A GREAT CARE AND SUPPORT WORKER :)

We wholeheartedly support accreditation of care and support workers. It's an essential step on the journey towards the professionalisation of the care and support role.

THIS MEANS SOMETHING TO ME :)

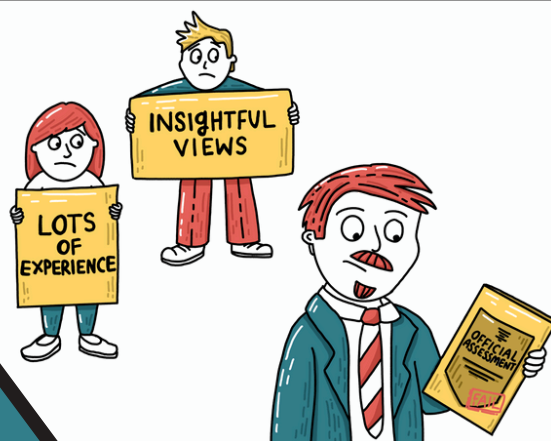


RESPECTED PROFESSIONALS

CARE AND SUPPORT WORKERS SHOULD ALSO HAVE A SEAT AT THE TABLE...

Providers may feel that they are neglected in the social care system but care and support workers are even further down the food chain. Until care and support workers have a strong governing body they will always be walked all over. We would like to see a 'Royal College for Care and Support Professionals' (or an even better name!) Now wouldn't that make a statement?

UMM, I MIGHT HAVE SOME VALUE TO ADD HERE?



THE BIG CONVERSATION

We feel it's crucial that there is a body set-up to give care and support professionals a voice and to set standards. This body should also be able to accredit care and support staff to reflect the skilled and professional nature of the role.

What could that look like? Could it be a Royal College? Are there any other examples from around the world we can learn from?

SOME INSPIRATION!

In Finland, a prison officer is a well-paid and highly respected profession with entrants educated to degree level. The country has the lowest re-offending levels in the western world.

Coincidence?

RESPECTED PROFESSIONALS

PEOPLE SHOULD ASPIRE TO PURSUE A FULFILLING AND PROGRESSIVE CAREER IN CARE

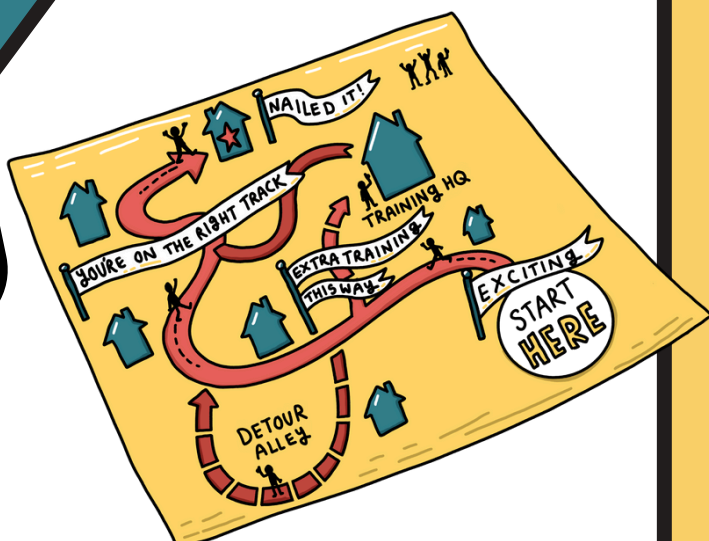
A career in care shouldn't be an after-thought - something that happens by accident or because of limited options. We want people to actively pursue a career in care - as care and support workers, yes, and in management too. For the right people, working within specialist areas of care can be hugely transformational both for the individual and the people around them.



"WHEN I GROW UP I WANT A CAREER IN SOCIAL CARE"

To be frank, society only has itself to blame. Have we ever clearly defined job roles and career pathways? Do we give enough time to training and development, always with an eye to developing the great people within our sector?

AS A SECTOR, WE CAN BE BETTER AT THIS. MORE EXCITING, MORE APPEALING, MORE FULFILLING.



RESPECTED PROFESSIONALS

SUPPORT WORK SHOULDN'T BE SEEN AS 'JUST A JOB'

Beyond specifying job roles, social care needs to be inspirational and have clearly defined career pathways. Ambitious people need to know that they will receive the support they need with training and development and that they will be rewarded fairly.

YOU HAVE A GREAT FUTURE HERE :)



THE BIG CONVERSATION

Providers can do their bit to improve career prospects within their own organisation, but clear career pathways and support to build training frameworks would ensure a consistent and best practice approach.

Could we bring together existing sector experts to debate and define the most effective approach? What sort of frameworks would be most useful to providers?

SOME INSPIRATION!

The Eden Alternative is based on the core belief that ageing should be a continued stage of development and growth, rather than a period of decline.

To achieve this, people should live in positive environments, but importantly, supported by staff who take the time to understand, listen, talk and respond positively.

Staff who are properly trained and properly appreciated will change lives.

RESPECTED PROFESSIONALS

FACT: OUTSTANDING SERVICES HAVE OUTSTANDING LEADERS

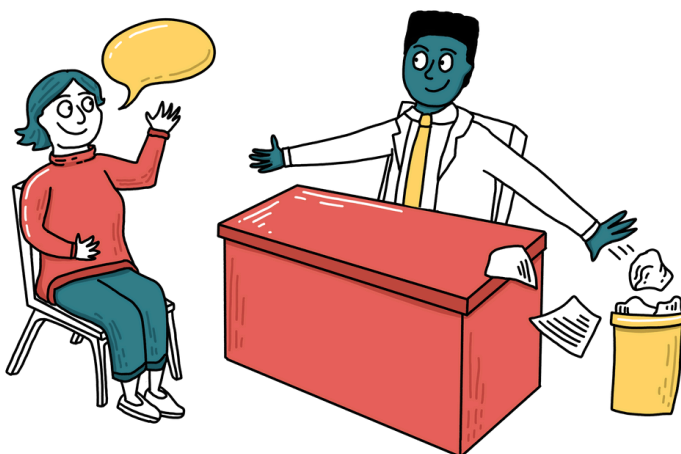
Social care managers are often undertrained, overworked and undervalued. But outstanding social care managers lead outstanding services with outstanding outcomes. This vital leadership role has been driven to be all about ticking boxes in a culture of fear.



EXCESSIVE RED TAPE HAS FORCED MANAGERS INTO THE ROLE OF COMPLIANCE OFFICER, AUDITOR AND POLICEMAN.

Compliance-heavy processes stifle creativity and innovation so it is imperative managers are given more freedom. Yes, this will require some streamlining and yes, this will require some investment. And a conversation about what people really value.

MANAGERS NEED TIME AND SPACE TO LEAD, MANAGE AND DEVELOP THEIR SERVICES.



RESPECTED PROFESSIONALS

A MORE POSITIVE LEADERSHIP CULTURE WILL SEE US MOVE FROM COMPLIANCE TO CREATIVITY

By developing universal leadership training for social care managers (maybe for owners, senior managers and commissioners too) we can develop a culture of positivity throughout EACH organisation.

GREAT LEADERS POSITIVELY INFLUENCE EVERYTHING!



THE BIG CONVERSATION

Independent mentoring, coaching and on-the-job training will enable managers to thrive and make everything in the system work better.

How can we engage with willing providers and associations from across the sector to co-produce and co-design a universal training offer plan for managers and leaders? What could that look like? Who would manage that?

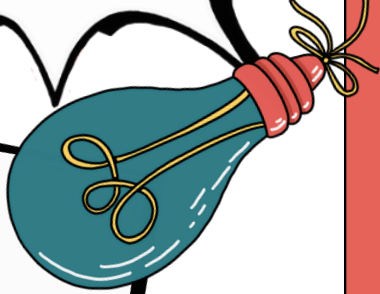
SOME INSPIRATION!

Active Prospects has recently been awarded a substantial grant from the Surrey Workforce Innovation Fund to lead a two-year pilot on behalf of 6 other care providers - working specifically with people with learning disabilities and autistic people. This co-production may yield some interesting results to share.

UNLEASHING

5

RADICAL
SECTOR
REFORM



HOW SHOULD THE SOCIAL CARE
SYSTEM BE STRUCTURED TO
ENSURE PROGRESSIVE
PROCESSES, PEOPLE AND
PRINCIPLES ARE AT ITS HEART?

RADICAL SECTOR REFORM

UNLIKE THE NHS, THE SOCIAL CARE
SYSTEM WAS NEVER ACTUALLY DESIGNED

Social care has just morphed over time from the Elizabethan poor law, through the 1948 National Assistance Act and all the way up to care in the community in the 1980s. Modern social care is a result of countless policy and legislative initiatives.



NOT MY
BEST
DESIGN :(

Social care is organised at local authority level. The argument for this is that local problems will receive local solutions. But local authorities set their own thresholds and provision varies widely. Every commissioning process is different and every contract is different resulting in inefficiency across the board.

SOCIAL CARE IS A
POSTCODE
LOTTERY - NOT
EVERYONE'S A
WINNER.



RADICAL SECTOR REFORM

THE CASE FOR A NATIONAL CARE SERVICE

In recent years there has been a great deal of discussion about a National Care Service and we quite like the idea. We would like social care to be available and accessible, clear and consistent. We like that a National Care Service will have a strong national brand with national standards, processes and systems.

**BUT A NATIONAL
CARE SERVICE MUST
BE AGILE, FLEXIBLE
AND SMART. DON'T
CREATE A MONSTER!**



THE BIG CONVERSATION

There is merit in many of the key principles of a National Care Service and the big conversation could help us to clarify the advantages and disadvantages.

A fresh re-design could take on board the great things about the NHS and learn from the things that don't work as well. This feels like a perfect opportunity to share from each other whilst having the freedom to build something from scratch.

SOME INSPIRATION!

The Fabian Society Report (June 2023) made a strong case for a National Care Service and made a series of recommendations focusing on peoples' rights and a fair workforce.

We like lots of it although we'd like to see the power of local authorities diminish and we see virtue in a mixed market in which ethical independent providers drive quality and innovation.

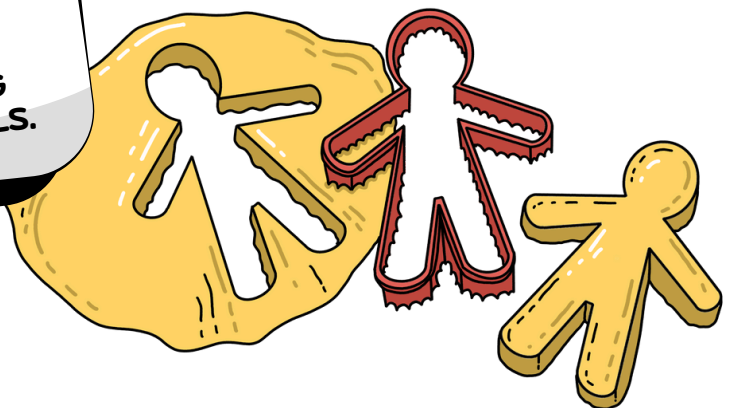
For those not in the know, 'commissioning' (done by 'commissioners') is the process performed by local authorities to shape, identify and then purchase social care services. It's a vital function and has been around since the 1990's as a way of creating a system whereby providers compete for resources which theoretically results in efficiency and innovation. (It doesn't by the way).



**GOOD
COMMISSIONING IS
ABOUT
ENCOURAGING
INNOVATION**

The process has many issues: the relationship between commissioner and provider is controlling, conservative and overly bureaucratic. Often procurement takes over and just focuses on lowest cost - buying services as cheaply as possible. And people are treated like commodities.

**COMMISSIONING OFTEN
FOLLOWS A ONE-SIZE-
FITS-ALL 'COOKIE
CUTTER' APPROACH
RATHER THAN SEEING
PEOPLE AS INDIVIDUALS.**



RADICAL SECTOR REFORM

**BUT COMMISSIONING CAN MOVE FROM
BEING BUREAUCRATIC TO BEING BOLD**

Great commissioning starts with an equal partnership between commissioner and provider. Where barriers are removed, space is created and great outcomes incentivised. It recognises people as individuals, playing to their strengths, needs and aspirations.

**GREAT COMMISSIONING
INCENTIVISES PROVIDERS TO
DELIVER THE HIGH QUALITY
OUTCOMES DEMANDED BY
CONSUMERS. IT IS BOLD,
BRAVE AND BALLSY!**



THE BIG CONVERSATION

What do the best outcome-based commissioning models look like?

How can we design them to support delivery of great quality-of-life outcomes? And how can we consistently apply them across the sector?

We'd also like to debate the merit of incentivising outcomes.

SOME INSPIRATION!

In 2019, commissioners in the Isle of Wight approached the voluntary and community sector and asked them to lead on the development of a system-wide dementia strategy.

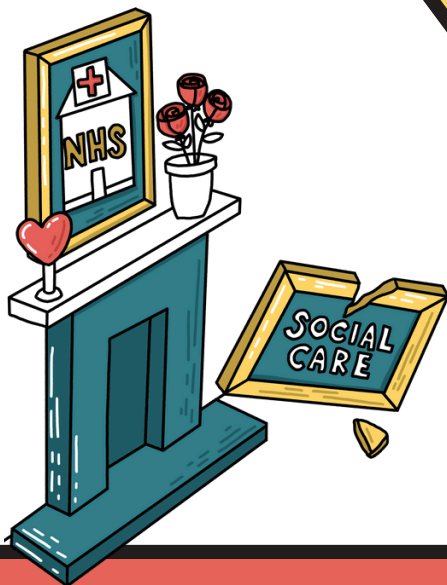
Widespread engagement took place to understand peoples' views on current provision and what could be improved.

A thorough programme of public consultation and engagement enabled the Isle of Wight to produce an effective, targeted and responsive strategy with widespread support. It has since made a good start at implementing.

RADICAL SECTOR REFORM

INTEGRATED CARE SYSTEMS... FRIEND OR FOE?

Integrated Care Systems (ICS) are partnerships designed to bring together various organisations and authorities in a local area to develop and implement health and social care strategies. There is a lot of positive work happening such as joint commissioning of services, but the ICS sits firmly in the NHS structure and is dominated by NHS people.



**SOCIAL CARE IS
FREQUENTLY
CONSIDERED IN TERMS OF
WHAT IT CAN DO FOR THE
NHS, RATHER THAN BEING
TRULY INTEGRATED.**

Sector reform can't take place until we have facilitated seamless and efficient partnership working in parity with the NHS and other agencies.

**EQUALITY
RULES OK!**

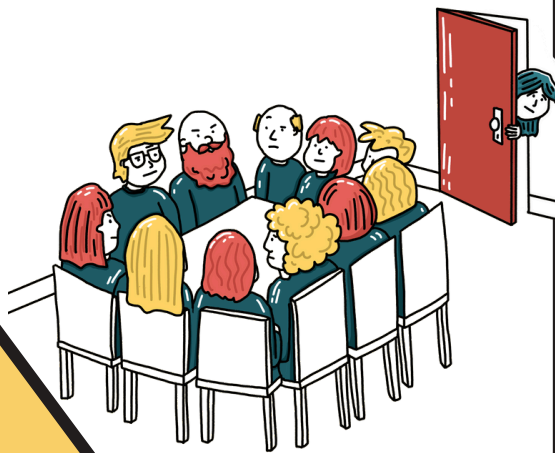


RADICAL SECTOR REFORM

INCLUSION BY RIGHT, NOT AS AN AFTER-THOUGHT

There is distinct under-representation of social care providers in the ICS structure and many partnership boards do not include them. We find this incredibly short-sighted given how much they have to offer in partnership working.

WHERE'S OUR
SEAT AT THE
TABLE?



THE BIG CONVERSATION

This is a big conversation about the big conversations! Providers have much to contribute to social care reform. They are the long term permanence in the social care sector and they must be at the strategic table from the get-go. How can we ensure that providers are given equal billing to discuss and debate sector reform?

SOME INSPIRATION!

After Winterborne View, the Government set out its aspiration to move people from inappropriate hospital care to community settings. This became known as the Transforming Care programme.

Active Prospects, a Surrey-based provider, enabled over 50 people to move from long-term hospital care into their own homes in the community. 92% are still in their new homes after two years.

Active Prospects success has been built on working closely with people, their families or advocates, and health and social care professionals to develop specialist accommodation to meet their individual needs.

RADICAL SECTOR REFORM

MAKE MARKET SHAPING A REALITY

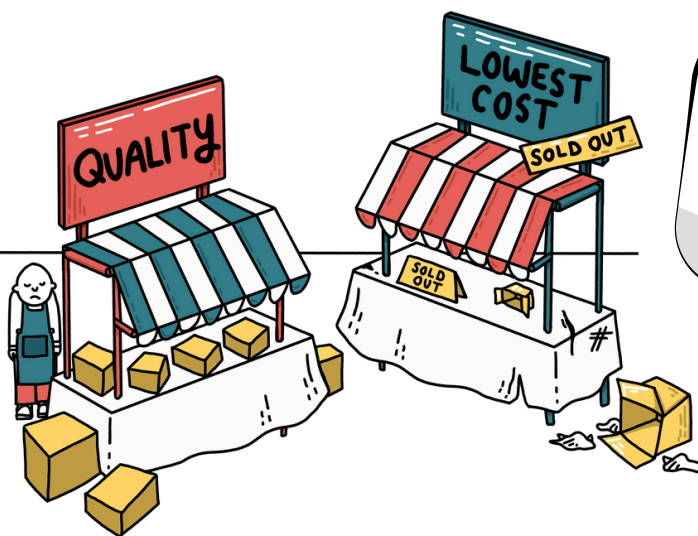
The social care market is largely unplanned and comprises of many different public and privately owned entities including charities, housing associations, private owner-operated and equity-backed private. This haphazard market represents a failure of local authorities to shape the market. This matters because some organisations are making money by delivering poor quality care.

WHAT ARE THE BEST
ORGANISATIONAL
MODELS FOR
DELIVERING HIGH
QUALITY CARE?



Much of the market is distorted by the behaviour of the local authority as the single monopsonic buyer. Services are bought at the lowest cost, often at the expense of quality.

LOCAL AUTHORITIES
SHOULD BE
ENCOURAGED TO
COMMISSION FOR LONG
TERM QUALITY OF LIFE
OUTCOMES



RADICAL SECTOR REFORM

CONSUMER SOVEREIGNTY RULES!

A free market would have the right offer of the right product in the right place at the right time. The best organisational models would be promoted through effective market-shaping, whilst consumer sovereignty would mean that organisations would have to deliver or fail.

**SURELY THE PERSON
RECEIVING THE
SERVICE SHOULD
MAKE THE BUYING
DECISION?**



THE BIG CONVERSATION

How can we ensure best practice characteristics are clearly defined? Do we need new models? How can we positively support market development based on what good looks like? What measures can we put in place to ensure the person accessing the service has real choice?

All stakeholders must work together to define ethical, transparent and accountable business models for social care.

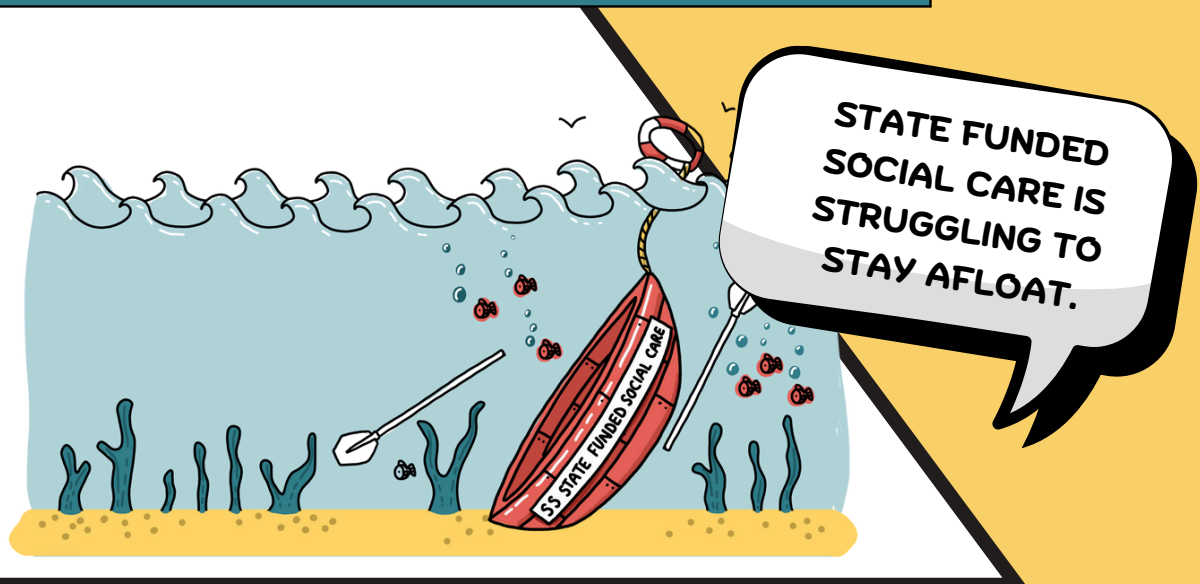
SOME INSPIRATION!

Writing in 2020, New Economics Foundation produced a thought-provoking report entitled 'Ownership in Social Care' and we feel it's worth a look.

This considered the characteristics of the best business models for supporting people to the best outcomes. Not a great read for those with private-equity or venture-capital backing.....

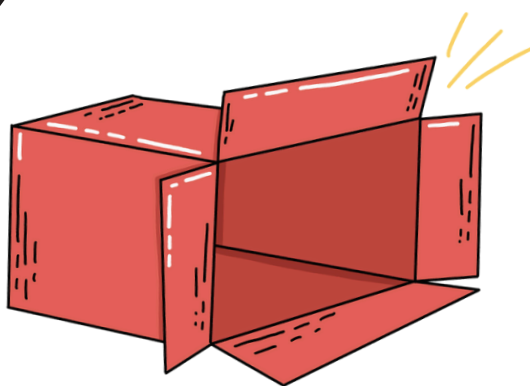
TO FUND OR NOT TO FUND?

Does anyone really understand how social care is funded and what that means for you? Essentially if you can afford it, you pay for it. if you can't, the state pays. But what happens when the state has underfunded social care for years?



Social care reform is promised over and over again. Successive Governments wax lyrical about how important it is, how desperately it needs reform, how the current situation is untenable. Promises made, proposals submitted and guess what happens.....

A BIG, FAT,
NOTHING!



Often the proposals are way off the mark - focused around ensuring people conserve their own wealth rather than increasing the funding available to front-line services.

RADICAL SECTOR REFORM

FUNDING REFORM ISN'T A NICE TO
HAVE, IT'S A MUST HAVE!

There's no getting around this I'm afraid. Social care requires a bigger pot. It is only right that funding enables providers to pay a fair wage to social care staff for the complex and professional work they do.

MAYBE WE NEED A
SOCIAL CARE
LEVY.....OH, WAIT,
THAT SOUNDS
FAMILIAR?



THE BIG CONVERSATION

We know that the way social care is currently funded is not fit for purpose or sustainable. The big conversation should define and debate better models such as the social care levy, retirement/inheritance contributions, compulsory saving schemes, social care insurance etc.

And this conversation should look beyond our borders. Let's draw on worldwide practices to inform our choice of system - and - importantly - just get on and do it!

SOME INSPIRATION!

Germany: utilises a social insurance model with employer and employee contributions.

Norway: funds social care through taxation and focuses on independence and well-being.

Sweden: has a tax-funded universal model.

Japan: employs a social insurance-based system funded by premiums, co-payments and taxes.

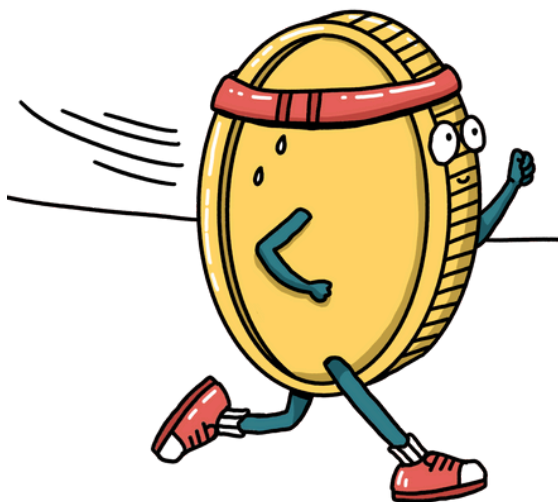
Netherlands: operates a mandatory, nationwide insurance system.

RADICAL SECTOR REFORM

WE NEED TO GET MORE
BANG FOR THE BUCK

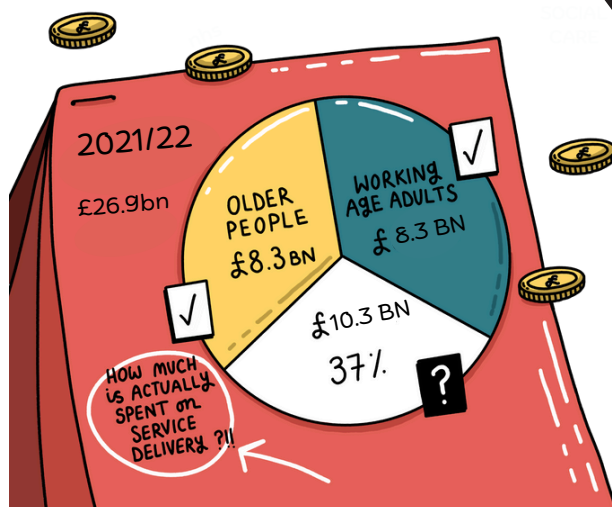
Underfunding is only part of the story - the other is efficiency. A lack of transparency means we can't tell whether funding is translating into outstanding individual outcomes. Do we even know whether the social care system is efficient and effective?

TO BE BLUNT -
WHERE DOES THE
MONEY GO
EXACTLY?



The Kings Fund Report in 2022 suggested that over a third of the pot - over £10 bn - does not go directly to providers to deliver services. This seems like an awful lot. And maybe less than half of the total £27 bn ends up with the (outstanding) people actually doing the work.

REALLY?



WASTE NOT, WANT NOT

According to the UK Civil Society 'Almanac 2022', 86% of charity sector expenditure relates directly to the charity's purpose. We wonder what the percentage would be for social care? 50%? 60%?

**IT'S NOT JUST THE
SIZE OF THE POT
THAT'S IMPORTANT
- IT'S WHAT WE DO
WITH IT!**



THE BIG CONVERSATION

How is the money being spent? Where are the inefficiencies, duplication and waste? How can we rebalance the budget - ensuring front-line services receive greater value?

We need the detail. We should commission the National Audit Office to carry out a deep-dive into social care funding



SOME INSPIRATION!



Does anywhere in the world do this really well? If so, we want to know about it and celebrate it!



RADICAL SECTOR REFORM

ENHANCED REPRESENTATION FOR THE PROVIDER COMMUNITY

Some sectors have consolidated representation into one or two powerful bodies but the care sector still has many, each with its own vested interest. And whilst there are some talented and principled people fighting the corner of care providers, the messaging is often lost in the noise.

WHO SHOULD I
ENGAGE WITH?



The Care Providers Alliance is the 'collective national voice of adult social care providers' and it brings together ten national associations. But it can often struggle to make its voice heard and doesn't have the exposure and clout it requires to make a difference.

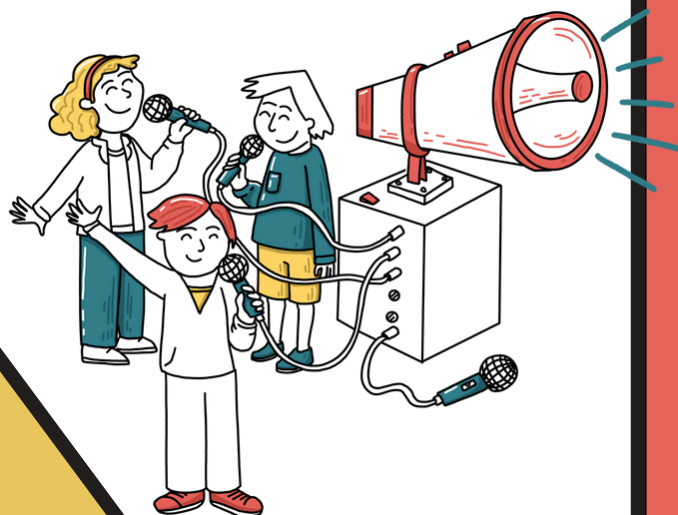
SOME HELP
HERE
PLEASE!



ONE SECTOR, ONE VOICE

Just imagine if the care sector had strong, unified representation! Clear, well-articulated and unambiguous - a strong, singular representative body speaking up and out for care providers.

**ONE CLEAR
VOICE - MUCH
BIGGER IMPACT.**



THE BIG CONVERSATION

We think we need a new body for the whole sector to rally behind. What would this body need, to be able to speak with one sector voice on things like: policy function; lobbying and influencing; infrastructure; effective comms and strong leadership? Do we need something new or can we reinvent the Care Providers Alliance? Could the Government provide some funding to make this happen?

SOME INSPIRATION!

The National Housing Federation is the voice of England's housing associations. It supports members with ambitious work that leads to positive change.

The National Housing Federation has recently produced a 'Plan for Housing' along with a digital toolkit for members to use to influence Government policy in advance of the next election.

We are far behind this in the social care sector.



UNLEASHING

6

DIGITAL
INNOVATION

PROVIDERS MUST BE SUPPORTED TO
CREATE THE BEST, MOST CREATIVE,
MOST INNOVATIVE MODELS OF CARE
AND SUPPORT AND USE GROUND-
BREAKING TECHNOLOGY TO
SUPPORT WITH THAT

DIGITAL INNOVATION

IS SOCIAL CARE JUST ABOUT OLDER PEOPLE? NO!

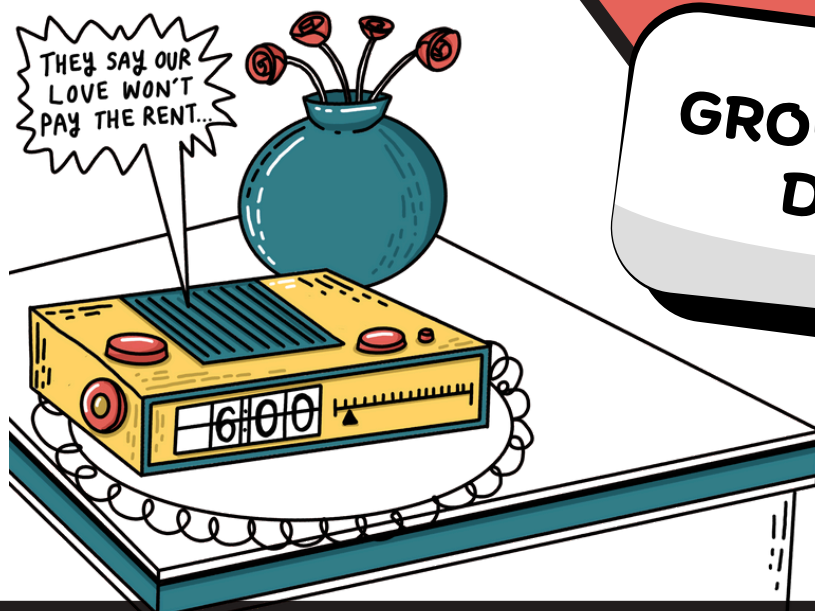
Almost half of the total social care budget goes on people with learning disabilities but they have been overlooked for years and the gap between them and other citizens is huge. For example only 3% of people with learning disabilities live with a loved one (compared to 70% for everyone else). This is further perpetuated by a system which creates low expectations.

THERE IS A MASSIVE SOCIAL AND DIGITAL DIVIDE AT THE MOMENT



Over recent years community based models have become the norm but placing people in the community does not, sadly, mean that they live like everyone else. People often still live narrow, segregated lives - lives without purpose.

THEY SAY OUR LOVE WON'T PAY THE RENT...



GROUNDHOG DAY :/

Supporting people with learning disabilities is a specialist skill so wouldn't it be great to adopt a strength based approach which supports people to raise expectations! Discover the possible! Articulate big long term aspirations! Close the gap!



PEOPLE WITH LEARNING DISABILITIES LIKE TO DO EVERYTHING YOU DO.

THE BIG CONVERSATION

To support people with learning disabilities to articulate and achieve their goals we should be implementing methodologies which stretch ambitions and build positive futures. What are these methodologies? How can we access them? Is there a centralised database? A centre of excellence? Who is our trusted digital friend? How can we engage with commissioners to ensure they are buying to transform lives?

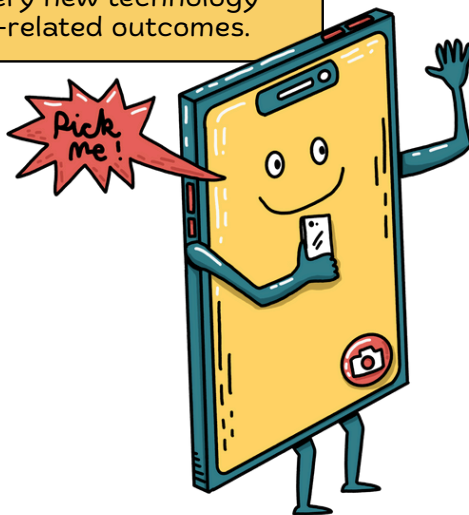
SOME INSPIRATION!

The Peak15 Group in Surrey is working on a brand new digital planning and development framework called Big Life Adventure which will revolutionise LD support and encourage people to dream big and make those dreams a reality. It will also give opportunities for people to interact through a social digital platform, allowing online freedom like never before.

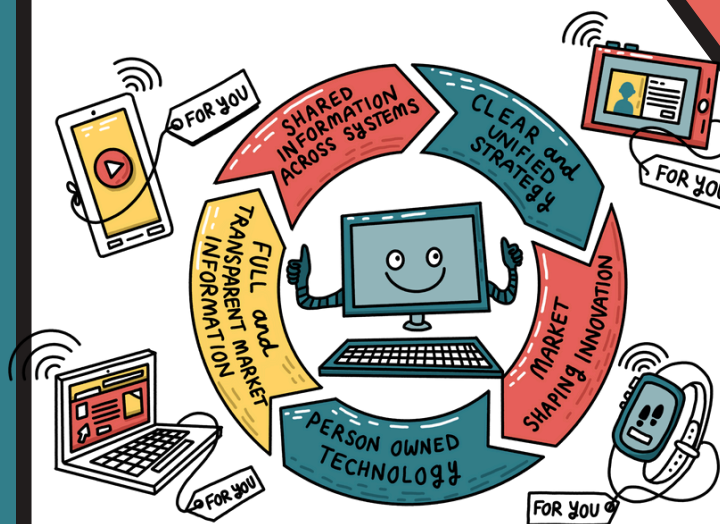


There's no getting away from technology - our world is increasingly reliant on it, but social care has been a late adopter. It is used inconsistently and data is rarely captured or applied to support decision-making. Digital transformation and innovation is all around us and it provides great scope for improving products and processes. Social care must embrace every new technology and use it to deliver both quality and health-related outcomes.

IT IS CRUCIAL THAT PEOPLE WHO RECEIVE SUPPORT ARE NOT LEFT BEHIND.



Implementing technology is particularly difficult for providers, who receive little guidance on how to harness the potential of technology, little support and no funding.

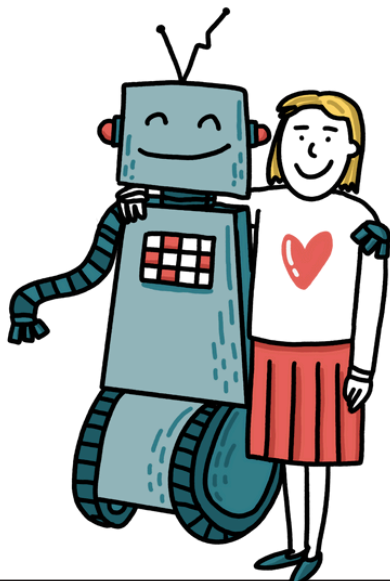


OTHER SECTORS RECOGNISE THE IMPORTANCE OF CAPTURING DATA AND USING IT TO SHAPE DECISIONS. WHY NOT IN SOCIAL CARE?

DIGITAL INNOVATION

A CLEAR TECHNOLOGY STRATEGY WILL IMPROVE ORGANISATIONAL PROCESSES

The use of digital technology and data could transform organisations. Wouldn't it be fantastic to have a 'hub' where providers can trial, feedback and evaluate digital solutions and share best practise innovations?



SOCIAL CARE PROVIDERS DESPERATELY NEED A 'DIGITAL FRIEND' - A TRUSTED SOURCE OF INFORMATION.

THE BIG CONVERSATION

We need an ambitious digital strategy. We need to discuss how we can expand funding to support technical innovation and ensure that it is distributed by technical experts. We need good ideas! Support!

What about something like a digital hub to support providers who are keen but scared to invest? What about going one step further and providing grant funding to enable providers to 'pump prime' their technological journey?

SOME INSPIRATION!

Peak15 has found a beacon of hope in the form of 'Guided Innovation', a company which aims to 'inspire the imagination of social care companies

and help them solve their challenges by using cool tech.' Their experience is that they do what it says on the tin!

UNLEASHING

7

SUPPORTIVE
REGULATION

AN EFFICIENT REGULATORY
REGIME SHOULD INSPECT
EFFECTIVELY, FOCUS ON
OUTCOMES AND BE FAIR,
POSITIVE AND BALANCED.

SUPPORTIVE REGULATION

BIG BROTHER IS WATCHING....

The regulatory culture in the UK mirrors the parent-child culture promoted by local authorities. You would struggle to find a provider who considers their regulator to be supportive or helpful – just the opposite, in fact. Providers see the inspection process as unwanted interference from people looking to find fault.

AND I'M
PAYING FOR
THIS AM I?



What is being inspected anyway? Often regulators look at inputs to ensure that every 'i' is dotted and every 't' is crossed. But surely regulation should focus on achievement of quality-of-life outcomes? And whilst services with a perceived risk may be investigated and downgraded, good-rated services (which may be operating at outstanding) don't get a visit.



WE'RE
OUTSTANDING!
BUT NO-ONE
KNOWS :(

SUPPORTIVE REGULATION

A PARTNERSHIP APPROACH TO REGULATION AND INSPECTION

We aspire for the regulatory regime to be 1) supportive: gathering and sharing best practice and 2) fair: giving strong performing services the rating they deserve and struggling services the opportunity to improve.

**EQUALITY
AND FAIRNESS
RULE OK.**



THE BIG CONVERSATION

How can we make inspections positive and balanced? How can we ensure services are inspected equally and fairly? How can we inspect for outcomes not inputs - ensuring it's not just another tick-box exercise? How can we change the process so it gives people a chance to fix issues?

How can we ensure great inspections are celebrated and acknowledged? How can we ensure the process finds and eliminates bad practice whilst celebrating all that is good?

SOME INSPIRATION!

This is a hard box to fill....

If anyone has a positive example of how a regulatory regime is working in partnership with a sector please let us know.



UNLEASHING

8

A PLACE TO
CALL HOME

THERE IS A DEFINITIVE LINK
BETWEEN POOR HOUSING AND POOR
WELLBEING. GREAT CARE CAN'T
SUPPORT GREAT OUTCOMES IN SUB-
STANDARD ACCOMMODATION

A PLACE TO CALL HOME

SOCIAL CARE HOUSING NEEDS TO BE PLANNED AND MANAGED

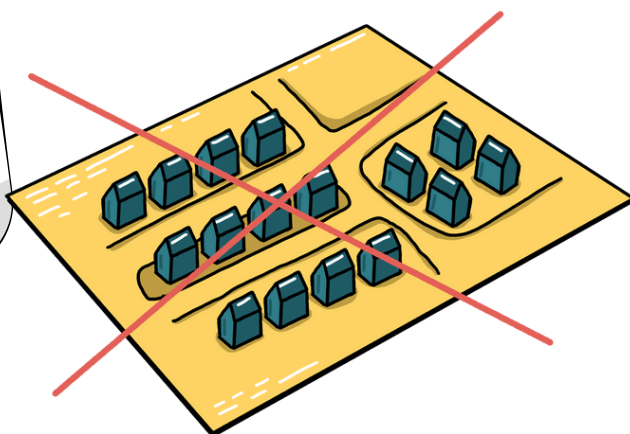
The development of high standard accommodation for recipients of social care services has largely been unmanaged so good housing is scarce and quality can vary. We all know the importance of a good home. At the very least it provides security and certainty.



THE HOUSING SHORTAGE AFFECTS THOSE WHO RECEIVE CARE AND THOSE WHO WORK IN IT.

Planning is the crux of this issue and there is a disconnect between responsibilities. In two tier local authorities the county has responsibility for social care, whilst planning and housing sits at district and borough level.

PLANNING HASN'T GOT IT QUITE RIGHT YET :(

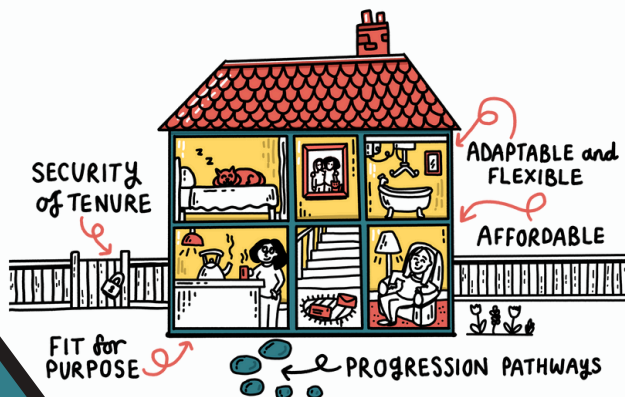


**A PLACE TO
CALL HOME**

**WE NEED TO MOVE FROM SUB-STANDARD
TO SOMETHING THAT WORKS**

Planning strategies need to be co-ordinated with social care. Investment should be targeted towards sustainable and affordable housing infrastructure and there should be much better consideration of the need for and provision of key worker accommodation.

**RIGHT HOUSE,
RIGHT PLACE,
RIGHT PRICE.**



THE BIG CONVERSATION

It's crucial that planning strategies are co-ordinated and suitable. How can we ensure that accommodation for people with social care needs is prioritised? How do we tackle the disconnect between county and district responsibilities? How can we ensure funding for private providers is fair and equitable?

SOME INSPIRATION!

The Housing Learning and Improvement Network (LIN) is a sophisticated network which brings together housing, health and social care professionals in England, Wales, and Scotland to exemplify innovative housing solutions for an ageing population.

Recognised as a leading knowledge hub on specialist housing, its' online and regional networks connect people, ideas and resources.

Through sharing market insight and intelligence and engaging with industry it aims to plan, design and deliver aspirational housing for an ageing population.

A PLACE TO CALL HOME

ACCOMMODATION FUNDING IS, TO BE BLUNT, A BIT OF A MESS

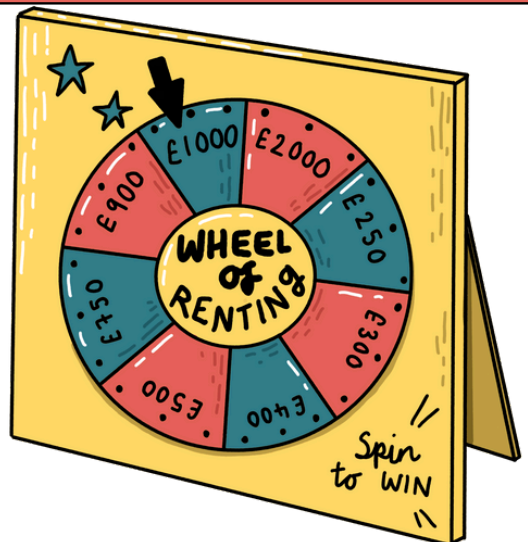
Accommodation funding is complex and inconsistent. Social Services is responsible for funding housing for those in residential settings but not for those in supported living and community settings. This creates a perverse incentive and makes no sense, creating confusion across the board.



I'M CONFUSED :(

Maximum rents can vary according to the type of landlord. Registered charities, voluntary organisations and housing association landlords (who also provide care/support or supervision) can claim at higher rates and charge higher rents.

THIS DOESN'T SEEM FAIR? ARE PRIVATE PROVIDERS OF SOCIAL CARE BEING PENALISED?

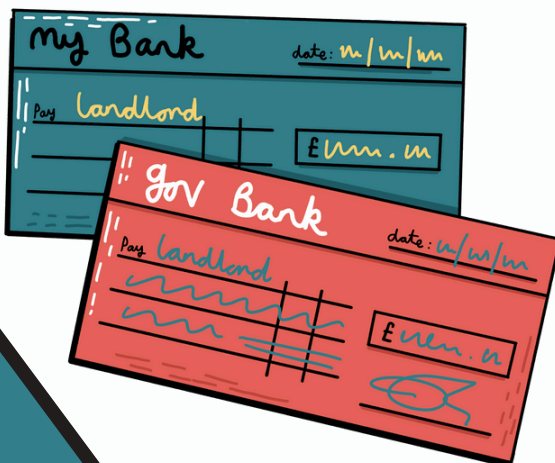


**A PLACE TO
CALL HOME**

**A SIMPLER AND MORE TRANSPARENT
SYSTEM WOULD BE FAIRER TO ALL**

What about if all accommodation costs were funded by either
1) the private buyer or 2) via housing allowance/universal credit
so each element is funded through the right channel?

**IT'S CRUCIAL TO
ENABLE PEOPLE TO
MAKE MORE
INFORMED BUYING
DECISIONS**



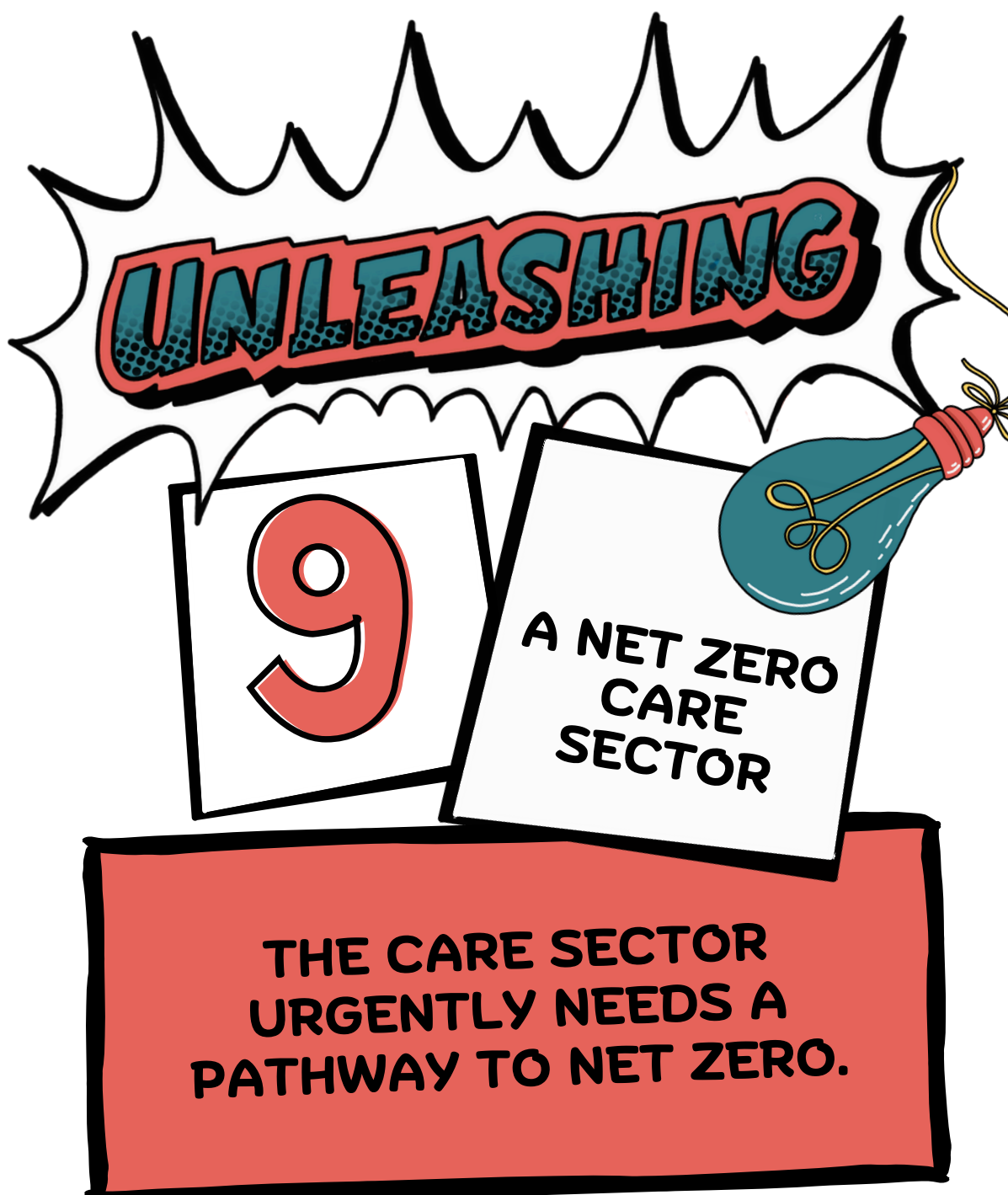
THE BIG CONVERSATION

How can we ensure a simple and transparent system for accommodation funding? Can we break out the accommodation cost of residential care and fund it separately? Can we reform the 'exempt accommodation' rules to enable higher rents to be paid to all providers of specialist accommodation? Who do we need to bring the table to make these decisions?

SOME INSPIRATION!

We couldn't find any
but would be happy to
be contradicted.....!





UNLEASHING

9

**A NET ZERO
CARE
SECTOR**

**THE CARE SECTOR
URGENTLY NEEDS A
PATHWAY TO NET ZERO.**

NET ZERO CARE

SAVING MONEY AND THE PLANET -
A NO-BRAINER SURELY?

The care sector is a huge employer with a consequentially large carbon footprint. There is however, no attempt made at measuring this footprint, or initiatives to try and reduce it and transition to a greener future to protect people and planet.



THE CARE SECTOR
EMPLOYS 1.5 MILLION
PEOPLE IN THE UK.
THAT'S 5.2% OF THE
TOTAL WORKFORCE!

Climate change will disproportionately affect the most vulnerable in society. We are already seeing direct and immediate negative consequences from climate change on people here in the UK and across the world.

WE CAN'T KEEP
UNDERESTIMATING
THE IMPORTANCE OF
MOVING FROM NET
'WHO KNOWS' TO
NET ZERO?



NET ZERO CARE

THERE ARE OPPORTUNITIES OUT THERE....

We know that transitioning to renewable energy, and other net zero adaptations can save money, as well as people and planet. And we shouldn't underestimate how important this is to the majority of the population.

THERE ARE
PLENTY OF GREEN
INITIATIVES OUT
THERE....



THE BIG CONVERSATION

It's imperative that we all work together to build a central plan with clear accountabilities to move the sector to net zero.

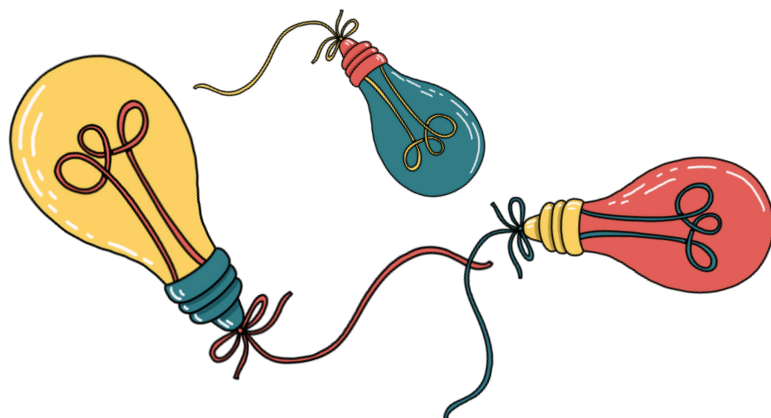
The key question for us is how can providers be supported, both financially and otherwise, to transition to renewable energy and make other net zero adaptations. This could include things like setting up a hub to provide advice, resources and support.

SOME INSPIRATION!

Is anyone making progress in this? if so, we want to know about it and celebrate it!



SOME BIG IDEAS TO GO ALONGSIDE THE BIG CONVERSATIONS



Throughout this report we have promoted the view that we need a Big Conversation addressing many different aspects of social care.

By gathering a cross-section of the sector together can we begin to build a consensus around a radical new vision for social care that works for all. The people we support must take centre stage, and providers, as the long-term custodians of the market, must be included too.

We must embark on the Big Conversation, but to do it properly, to win hearts and minds, will take time, and time is a luxury we don't have. So we also wish to share a range of tangible and practical solutions which can be implemented in the here and now.

Below are some specific 'call-to-actions' driven out of our research. Some may already be under consideration, some may be new ideas. All will direct us towards a brave new world for social care.

A POWERFUL NEW IDENTITY FOR SOCIAL CARE

1

SUBJECT	CALL	ACTION FOR
Define Social Care	Form a working group with representation from across the sector to drive a national Big Conversation about what we want our nation's social care to be.	Government to initiate. All Stakeholders to participate.
Build the Brand	Recruit specialist help to design a strong, modern and identifiable Social Care brand. Then market-test on the sector.	Government to recruit a specialist Brand Agency
Change the name	As part of the branding work, come up with a better name for social care - a name more reflective of the important and life-changing work that happens within it. A fresh start.	Government Brand Agency

PROGRESSIVE PRINCIPLES

2

SUBJECT	CALL	ACTION FOR
Outcome-Based and Relationship-Based Models	i) Confirm (through research if necessary) that outcome-based models should form the basis of modern social care. ii) Collate the best outcome-based models into a directory and share with commissioners and providers. iii) Ensure all models are dynamic and progressive – designed to move with the individual throughout their life and to enable and encourage people to maintain and build relationships. iv) Facilitate a supportive process to help providers to access and use best practice models, and provide funding to pump-prime their implementation.	Government, Local Authorities, Academics & Providers Government Government Local Authorities, Commissioners & Providers
New frameworks	Design a flexible ' Statement of Aspiration ' which enables people to articulate their strengths, qualities, hopes and ambitions at the very start of their Social Care journey to shape everything that follows. Then make it universal.	Government, Local Authorities & Providers
Process improvement	Task a group to re-design care and support processes so that individuals can lead all aspects of their life, care and support.	Government, Providers & People We Support
Prevention and Enablement	i) Commission secondary research to identify areas where investment in P&E is proven to deliver the best value and a win for everyone ii) Design best practice models in areas where P&E is proven to work. iii) Issue guidance to Local Authorities, and audit to ensure it is followed.	Government, Commissioners & Providers

POWER TO THE PEOPLE

3

SUBJECT	CALL	ACTION FOR
A choice	Create an independent body of highly trained guides to support people on their social care journey (and counterbalance the all-powerful position of the Local Authority in the system)	Government
Social Work	Conduct research on Social Worker effectiveness vs outcomes. Ensure that everyone has a qualified, allocated Social Worker with the time and capacity required to make a difference for each individual.	Government All Stakeholders

RESPECTED PROFESSIONALS

4

SUBJECT	CALL	ACTION FOR
Grading and pay	Develop a National Social Care Grading and Pay Framework which defines job roles in social care and sets guide pay ranges.	Government, Local Authorities & Providers
Pay funding	Fund care and support provision at a level which enables providers to implement the National Social Care Grading and Pay Framework.	Government Local Authorities
Professionalisation of care and support work	Set up a Royal College for Care and Support Professionals to set standards and give the sector's workforce a voice.	Government
Career pathways	Define clear social care career pathways and build a training and support framework to support them.	Government & Providers
Leadership Development	Co-produce a universal training offer for managers and leaders in the social care sector.	Government All Stakeholders

RADICAL SECTOR REFORM

5

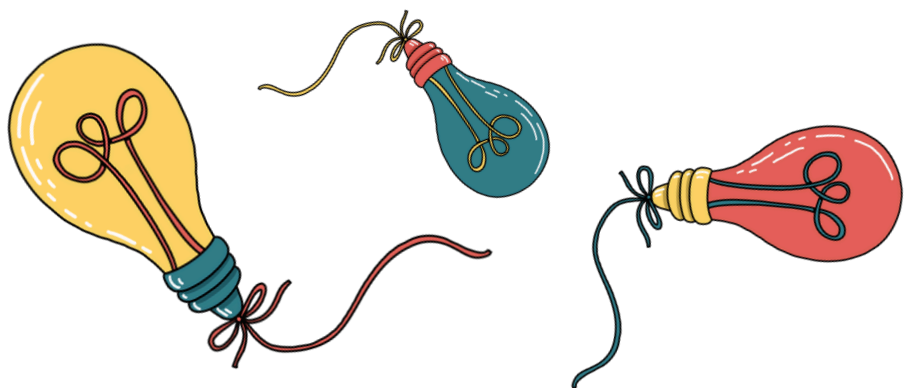
SUBJECT	CALL	ACTION FOR
National Care Service	Deepen designs for a light-touch, supportive and highly efficient National Care Service , with ethical and independent providers core to its design and delivery.	Government All Stakeholders
Commissioning	Build a process to support Commissioners to shape markets which embrace progressive models of social care - outcome-based, relationship based, P&E focused.	Government All Stakeholders Commissioners
Inclusion	Ensure parity between the NHS and social care in national structures . This includes placing social care on an equal footing in the DHSC and ICS.	Government ICB's Local Authorities
Market Development	Define ethical, transparent and accountable business models for social care and positively support market development based on those models.	Government Commissioners All Stakeholders
Funding	Review worldwide practices and research to inform the reform of social care funding . Evaluate which is best, and just do it!	Government
Funding Efficiencies	Commission the National Audit Office to carry out an audit of social care funding in order to identify areas of duplication, waste and inefficiency. The system need more funding, but we also need to make the best of what we've got.	Government
Unified Representation	i) Facilitate and fund an overarching representative body to be the collective national voice of social care providers (perhaps based on the existing Care Providers Alliance, but with full-time leadership and a permanent policy function). ii) Pump-prime the new body by giving it the resources (and the voice) it needs to ensure strong and unified representation.	Government Care Providers

DIGITAL INNOVATION

6	SUBJECT	CALL	ACTION FOR
	Digital Innovation	Build an ambitious digital strategy for social care which includes centralised support and funding to support uptake and innovation.	Government
	Learning Disability Digital Innovation	Support LD providers to use innovative technology to break down the digital divide, promote learning and independence, and fix long-term inequalities.	Government Local Authorities Providers Commissioners

SUPPORTIVE REGISTRATION

7	SUBJECT	CALL	ACTION FOR
	Regulatory Oversight	Redesign the regulatory and inspection regime to ensure it finds and fixes any poor practice but within a system that is effective, fair and allows providers to shine.	DHSC
	Regulatory Oversight	Ensure the regulatory system inspects for outcomes not inputs.	DHSC



A PLACE TO CALL HOME

8

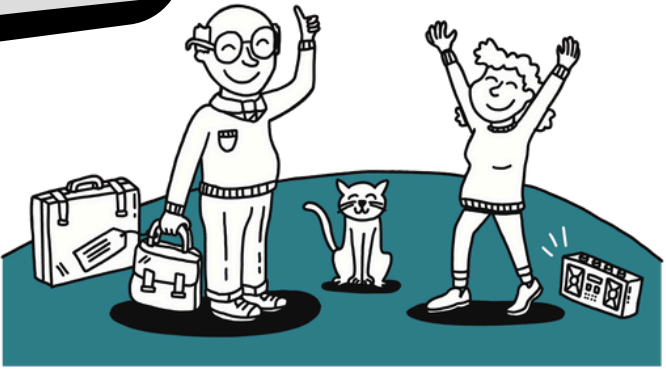
SUBJECT	CALL	ACTION FOR
Planning Strategy	Develop and implement coordinated and targeted planning strategies which prioritise the development of accommodation for people with social care needs.	Government Local Authorities
Accommodation Funding	Create a simpler and more transparent funding system for social care housing.	Government

A NET-ZERO CARE SECTOR

9

SUBJECT	CALL	ACTION FOR
Net-zero	Create a net zero strategy for the care sector with clear accountability to meet agreed targets and centralise support and funding to enable providers to make the shift.	Government All Stakeholders

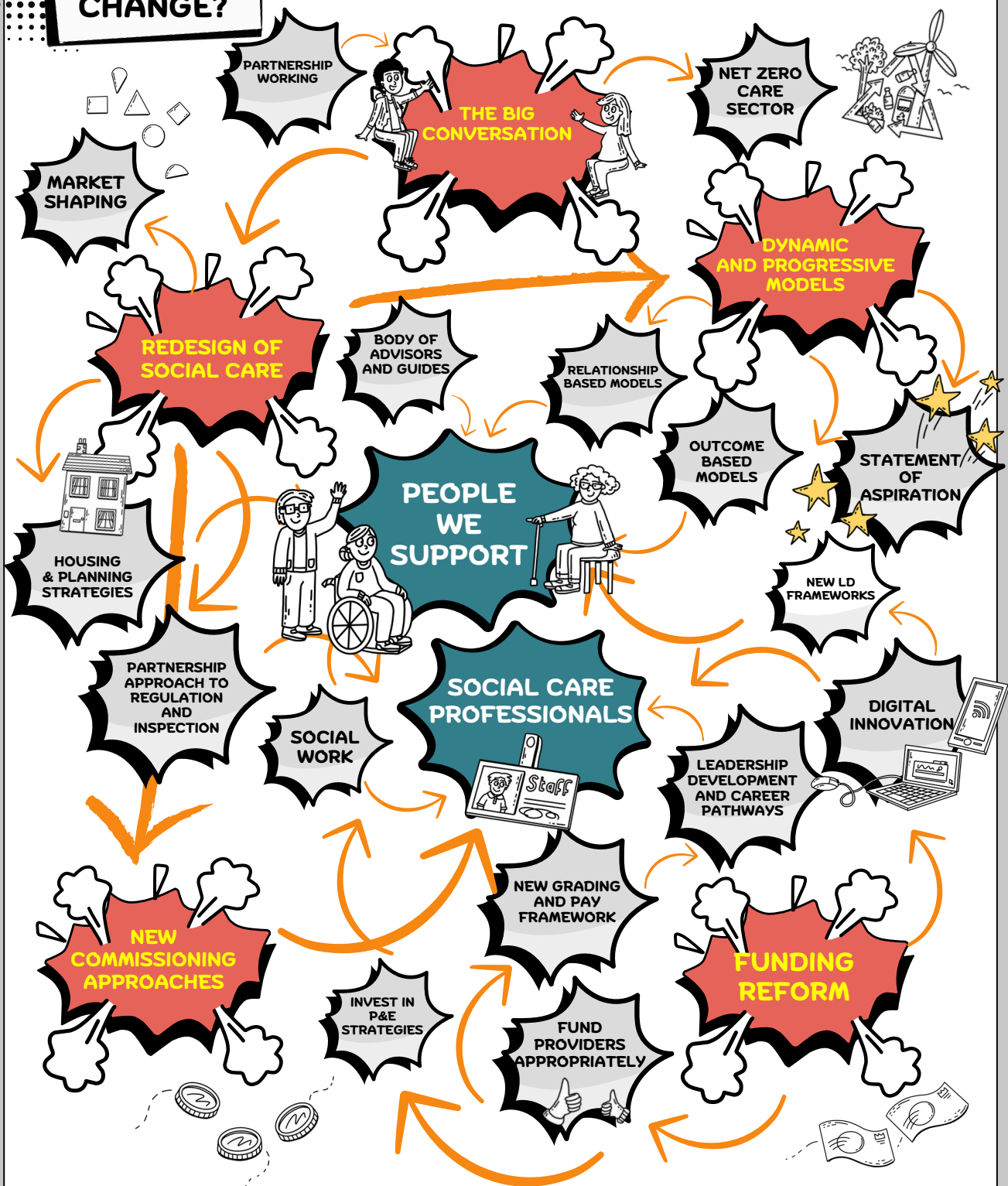
WE KNOW THIS IS A LOT.
DAUNTING EVEN.
BUT EACH ACTION CAN
BE TAKEN, AND IN DOING
SO, SOCIAL CARE WOULD
BE TRANSFORMED FROM
WHERE IT IS TODAY.



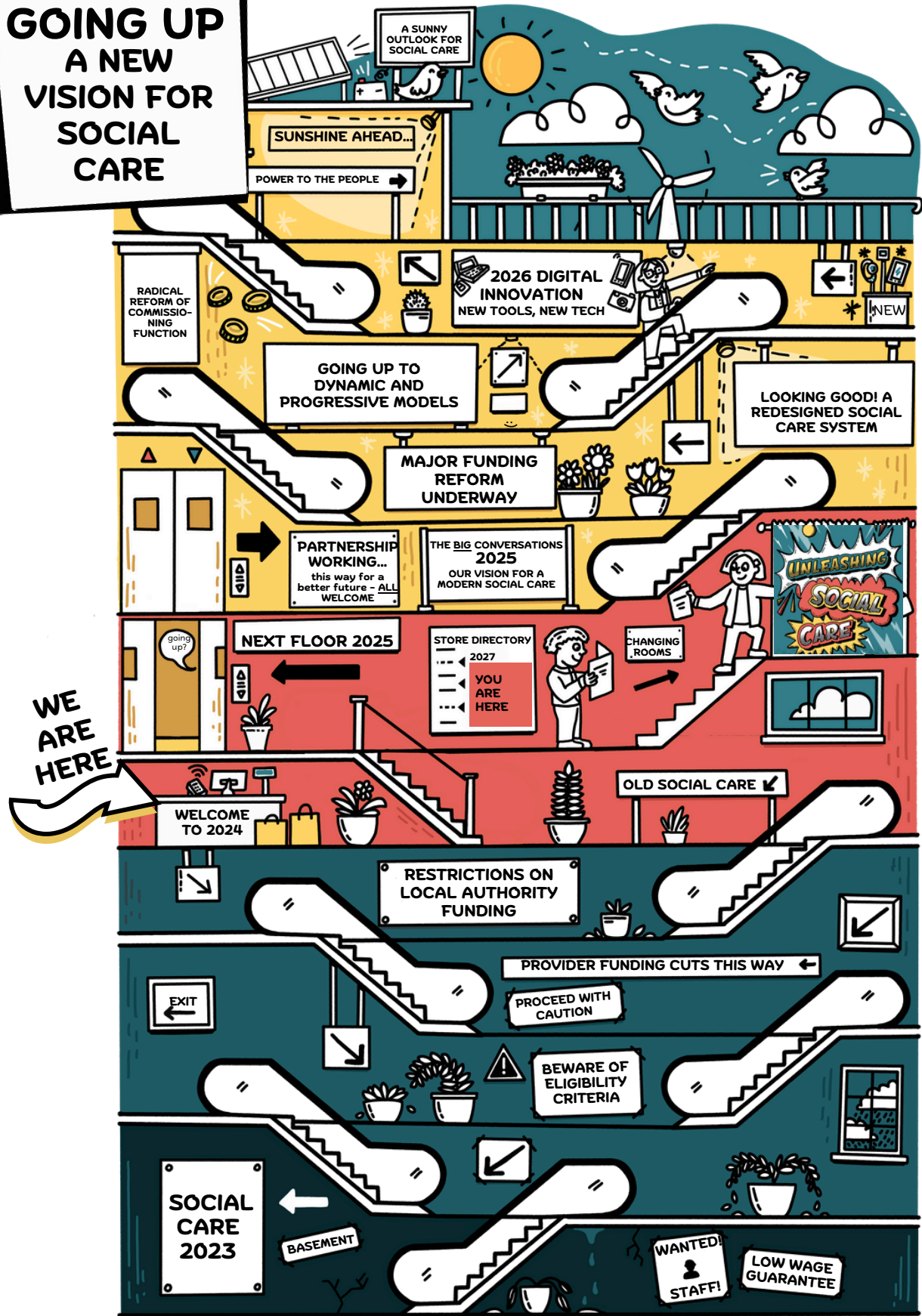
BUT WHERE ARE THE HOTSPOTS OF CHANGE?

Initially we envisaged labelling our call to actions as 'quick wins' or 'big ticket items'. Guiding the reader towards those solutions which could be implemented quickly and easily (our quick wins) and those which might take longer but may have a bigger impact (our big ticket items).

But it became clear that actually all of these calls to action are inter-dependent and generally pivot around a few key areas - things that we are calling the 'hotspots of change'. Looking at these calls as a whole (a whole system approach) shows how closely linked they are.



GOING UP A NEW VISION FOR SOCIAL CARE



A WORLD-LEADING SOCIAL CARE SYSTEM

Every part of the whole system approach is important and inter-related.....tinkering just won't work. We recommend a roadmap to success - one that follows logical, phased steps on a path towards excellence.

Years of discussion have led us to this point and the end result would be a world-leading social care system. And what a fantastic end result that would be. We think it goes something like this.....

CRITICAL INPUT

EFFECTIVE PARTNERSHIP WORKING: PROVIDERS, THE PEOPLE WE SUPPORT AND THE PUBLIC HAVE AN EQUAL RIGHT TO BE INVOLVED IN STRATEGIC PLANNING RIGHT FROM THE OUTSET

CRITICAL INPUT

A DEEP UNDERSTANDING OF THE VALUE CREATED BY SOCIAL CARE SPEND - JUST HOW IS THE POT BEING SPENT?

1 THE BIG CONVERSATION



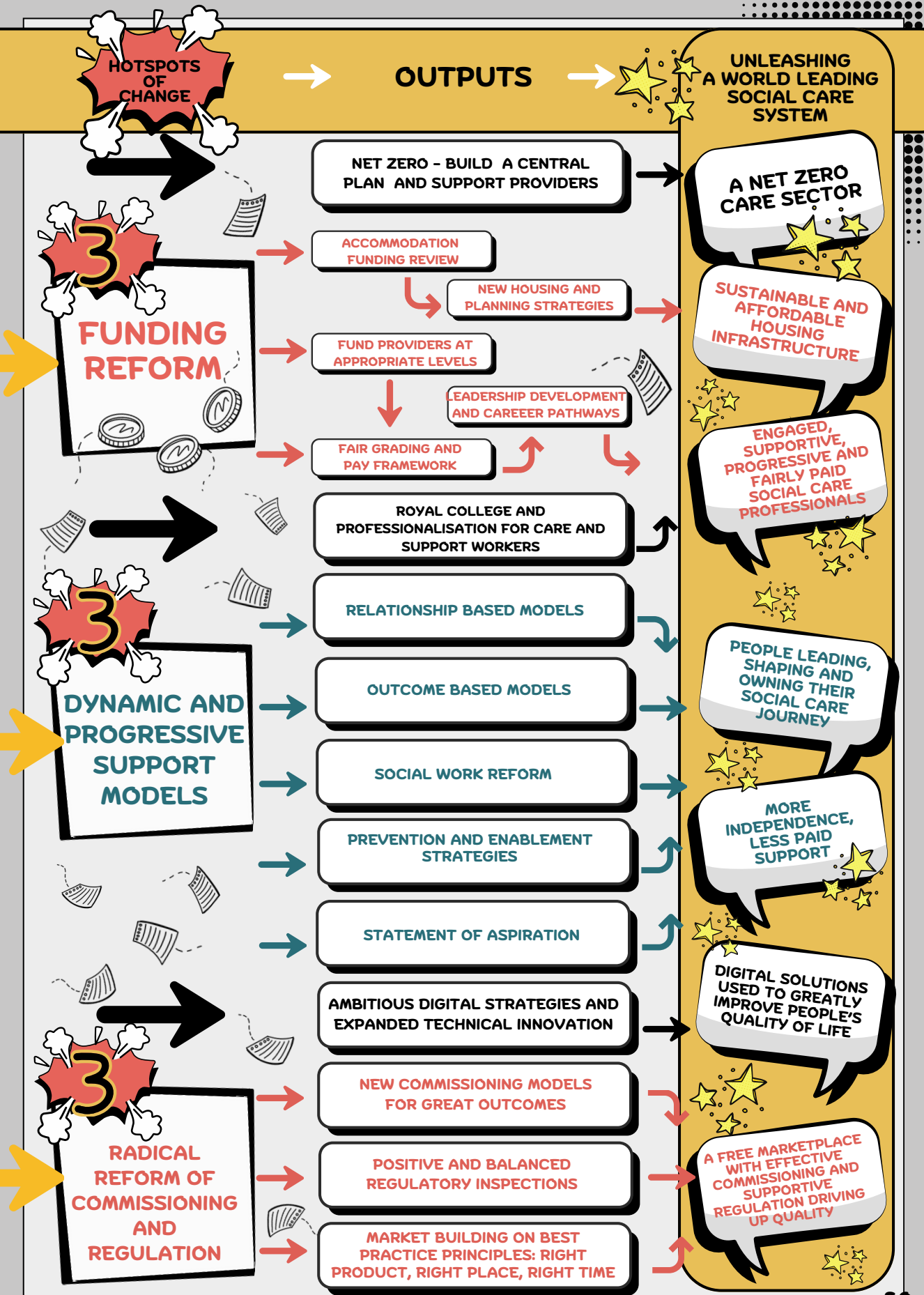
2 REDESIGN OF THE SOCIAL CARE SYSTEM (A NATIONAL CARE SERVICE?)

VITAL OUTPUT

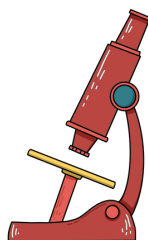
SOCIETY UNDERSTAND & VALUE SOCIAL CARE: NEW BRAND/NEW NAME/NEW IDENTITY/NEW VISION/NEW MISSION

CRITICAL INPUT

AGREEMENT ACROSS ALL STAKEHOLDERS ON THE MODERN OUTCOME-BASED COMMISSIONING MODELS REQUIRED TO DELIVER QUALITY OF LIFE OUTCOMES



IS THE STRENGTH OF FEELING GROWING?



Social care has come under the microscope in the last year or so.

There are some reports of bad practice and there is undoubtedly poor provision out there. The sector has had its problems.

But there have also been a run of papers signposting a brighter future for social care. For example....

'PEOPLE AT THE HEART OF SOCIAL CARE'



Published in late 2021, the Government's White Paper for the reform of social care had some great stuff in it. We welcome the strong focus on the individual and on concepts such as:

- enablement and prevention
- building on strengths,
- promoting independence,
- modern models of care

This represents a positive change in language and emphasis across the sector.

And we welcome recognition of social care as an important entity in a mutually-supportive wider system. And we like what it says about staff, innovation and technology too.

Now we need to deliver!

But is the White Paper just a little too safe? Could it have more clearly defined the purpose, ethos and principles underlying the sector? Could it have been more radical and transformational in reforming structures to give power to the people?

Will it really enable people to live rich and purposeful lives? Does it focus too much on older people, to the detriment of others with social care needs? And does it properly address funding, the eternal elephant in the room?

IN THE PAST YEAR TWO OTHER IMPORTANT REPORTS HAVE GAINED SOME TRACTION....



The Archbishops' 'Care and Support Reimagined,' publication is a considered piece which echoes many of our themes. We share the sentiment that social care is everybody's business, and their proposals for a new care covenant overlap with our aspiration for a wider conversation about what our society wants its Social Care to be.

We have already mentioned the recent Fabian Society report promoting a National Care Service. This is a positive proposal which advocates for national standards, geographic consistency and strong branding. We especially like its proposals around staffing and funding.



IS THERE SOME MOMENTUM GATHERING.....?



**DON'T
LET THIS
BE THE
END**



WHAT HAVE YOU TAKEN FROM THIS REPORT?

Hopefully it is our love of social care.

Not the old social care - a paternalistic, patronising and dehumanising process which tried to fix people.

BUT OUR VISION FOR A NEW SOCIAL CARE WHERE PEOPLE FLOURISH AND THRIVE.

Social care that starts with the person. That embraces individuality, that understands purpose, that sees life as a journey not a destination.

Modern social care is progressive and developmental. It is creative and innovative. It is dynamic, brave and exciting. It takes risks, because life is for living. And in our social care it is ok to dance, to have a beer, to hug.

Modern social care is fun! It is a place where people want to be. It attracts those who bring joy and have the ability to share it with others, and bring it out.

People who have it in their heart to befriend, help, support, mentor, guide, teach, and to do so in a kind, caring and loving way.

Special people, who we don't take for granted, but recognise and reward for the highly skilled role they fulfil.

IT WILL REQUIRE US TO BE BRAVE.

To challenge the status quo, to do things differently. And that means all of us, for no-one can do it alone.

If we do, we can create a social care system of which our nation can be proud. And there is no finer mark of a nation than the way it supports people at the time of their greatest need.

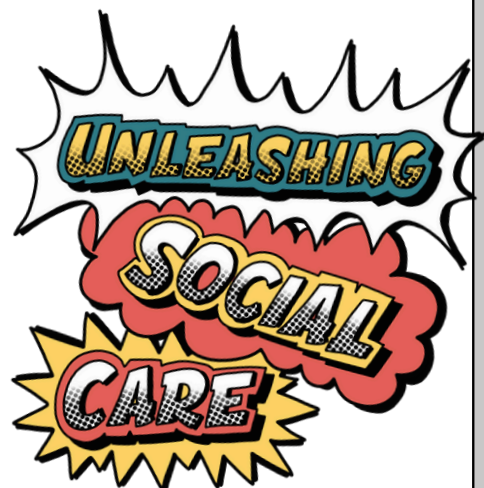
It starts with the BIG conversation about what we, our society, want social care to be and what we are prepared to do for others.

The BIG conversation includes all of us, especially those we serve.



**OVER
TO YOU**

**WE ARE UNASHAMEDLY
SEEKING TO INFLUENCE
THE AGENDA AND BRING
ABOUT POSITIVE CHANGE
IN SOCIAL CARE BUT WE
CAN'T DO IT ALONE.**



SCAN HERE!



JOIN THE DEBATE!

START THE BIG CONVERSATION!

SCAN THE QR CODE TO SHARE YOUR THOUGHTS

VISIT OUR LINKEDIN PAGE: REINVENTING-SOCIAL-CARE

#UNLEASHINGSOCIALCARE

#THEBIGCONVERSATION

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DON'T LET THIS BE THE END
#UNLEASHINGSOCIALCARE
#THEBIGCONVERSATION

UNLEASHING

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