

# CareTalk

The voice of excellence in social care

Let's Talk Social Care! Issue **131** | May **2024**

## Cultivating Wellbeing in Social Care

### In This Issue:



#### WHERE'S THE Z IN 'SOCIAL CARE WORKFORCE'?

**Simon Bottery**  
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The King's Fund



#### LEADING THE WAY IN SOCIAL CARE

**Alicia Francois**  
Specialist Services  
Director,  
SweetTree Home  
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#### WHAT KEEPS ME AWAKE AT NIGHT

**Joanne Balmer**  
Chief Executive,  
Oakland Care



#### COULD CARE HOMES BE THE HOSPICES OF THE FUTURE?

**Nuno Santos Lopes**  
Director of Research,  
Innovation & Community  
Engagement, Nightingale  
Hammerson



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- OVERSEAS RECRUITMENT
- ADDRESSING WORKFORCE INEQUALITIES
- RECRUITMENT AND RETENTION
- CARERS MONTH

## Circulation List

Has this month's Care Talk been read by all your staff? Use our list to be sure!

- Chief Executive
- Managing Director
- Registered Manager
- Supervisor
- Care Staff
- Ancillary Staff
- Service Users
- Families

### Welcome to the May issue of *Care Talk* which focuses on **Cultivating Wellbeing in Social Care.**

In the field of social care, nurturing the wellbeing of those we support is paramount, requiring a holistic approach that addresses physical, emotional, social, and psychological needs.

In this issue, we explore how caregivers, professionals, and organisations cultivate wellbeing in social care through innovative interventions, best practices, and personal stories.

Wellbeing also takes the spotlight throughout May with the start of two prominent annual campaigns.

Dying Matters Awareness Week commences on 6th May, and in this issue Nuno Santos Lopes, Director of Research, Innovation, and Community Engagement at Nightingale Hammerson, and Dr Ros Taylor, Medical Director at Harlington Hospice, examine the indispensable role of care homes for individuals nearing the end of their lives. **Could care homes be the hospices of the future?** Turn to page 28 to read their piece.

Additionally, 20th May marks the start of Dementia Action Week, during which our sector unites to raise awareness, improve support for those with dementia, and advocate for better access to resources and community support. Dementia Adventure, a national charity dedicated to transforming lives through outdoor activities, exemplifies this mission. On page 26 their Head of Innovation, Research, and Development, Sue Hinds, explores their impactful work and how their organisation is **Opening doors to the outdoors.**

We do hope you enjoy this issue and as you read on, uncover strategies and perspectives that promote wellbeing, sow seeds of compassion, and cultivate a flourishing culture of support within our communities.

Till next time,

Lisa

✉ @lisa\_caretalk



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# Wellbeing is a cornerstone of care homes

**Professor Martin Green, Chief Executive at Care England shares his thoughts on the role of wellbeing in residential care.**

*“Providers and the NHS must remember that care home residents are entitled to the same services as citizens.”*

Improving wellbeing in care homes is essential to ensuring that residents receive the best possible care and support. Several key strategies can be implemented to enhance the wellbeing of residents, and wellbeing must be at the top of the agenda for all care homes.

Implementing person centred care is crucial for improving the wellbeing of residents. This approach focuses on each resident's individual needs and preferences, ensuring that care is tailored to meet their unique needs and aspirations. Care homes can create a more supportive and empowering environment by treating residents as individuals and involving them in decision making. We all need to feel in control of our own lives, and whatever our frailties or challenges, we still want to make decisions over our own lives.

Encouraging social engagement among residents is vital for promoting wellbeing. Care homes work hard to provide opportunities for residents to socialise, participate in group activities, and form meaningful friendships with others, which can help combat feelings of loneliness and isolation. Organising social events, group outings, and recreational activities can foster a sense of community and belonging among residents. It is often forgotten that residents support each other and form communities of mutual interest, which can also help wellbeing.

Promoting physical activity and exercise is essential for a good quality of life, and however frail people are, they can usually do some form of exercise. Regular physical activity can improve physical health, mobility, and overall wellbeing. Care homes can offer exercise classes, walking groups, and other physical activities to encourage residents to stay active and maintain their physical health. In the past, many people became much more sedentary when they went into care, but over the last few years, we have seen care homes really embracing the need to engage people in physical activity as an essential part of maintaining their independence and improving their mental health and wellbeing.

People in care homes tell me that meal times are really important, not only in terms of nutrition but also for engaging with friends and developing relationships.

A healthy diet can contribute to overall health and improved energy levels and mood. Care homes offer various nutritious meal options, but we must also remember that nutrition is a very important part of meal times, as are personal preferences and connection with others.

Offering emotional support and counselling services can help residents cope with feelings of anxiety, depression, or stress. Moving to a care home or facing the realities of life with several health conditions can lead to depression, and care homes often provide access to mental health professionals, support groups, and counselling services to address residents' emotional needs and promote mental wellbeing. This is where we need to see much more cooperation between the NHS and care. Providers and the NHS must remember that care home residents are entitled to the same services as citizens.

In recent years, many care homes have embraced holistic therapies such as aromatherapy, massage, and relaxation techniques, which can contribute to wellbeing. These therapies can help reduce stress, promote relaxation, and improve overall quality of life. Many care homes are also offering these therapies to their staff. It must be remembered that staff wellbeing is a cornerstone of delivering high quality care and good quality lives to the people we support.

Creating outdoor spaces and gardens within care homes can allow residents to connect with nature and enjoy the outdoors. Access to outdoor spaces can improve mood, reduce stress, and enhance overall wellbeing. Care homes should design outdoor areas that are safe, accessible, and inviting for residents and their visitors.

Recently I was lucky enough to attend a reception for National Association for Providers of Activities for Older People, (NAPA). The number of activities NAPA has helped care homes deliver is outstanding. What was fantastic about this reception was the number of older people engaging with care homes and ensuring they were part of the community.

The wellbeing of residents and staff has to be at the very centre of the agenda for all care homes, and I'm particularly proud of the work being done in this area.

*“Moving to a care home or facing the realities of life with several health conditions can lead to depression.”*

 @ProfMartinGreen @CareEngland  
 careengland.org.uk



**Professor  
Martin Green OBE**  
Chief Executive, Care England



# Reimagining society, reimagining care



**Rt Revd and Rt Hon  
Dame Sarah Mullally DBE**  
Bishop of London

**The Rt Revd and Rt Hon Dame Sarah Mullally DBE is the Bishop of London and the Lead Bishop for Health and Social Care in the House of Lords. She was previously the Chief Nursing Officer for England. Here she explains the role of society in enabling everybody to live a good life.**

How could we develop a vision for care and support which enables everyone – regardless of age or ability – to flourish?

This was the question the Archbishops' Commission on Reimagining Care sought to answer in a report published in January 2023. The Commission outlined a vision of the future which would reimagine the way that social care is thought about, organised, and delivered. Doing so requires us to lift our eyes and raise our aspirations.

As the name suggests, the Commission was established by the Archbishops of Canterbury and York. Whilst the expert panel of Commissioners comprised of people of



*“At the heart of our faith is a belief that every single human being is of innate value.”*

different faiths and none, there was a particular focus on understanding social care through the prism of Christian theology, tradition and values. You may not be surprised that I believe there is great richness in approaching social care in this way. At the heart of our faith is a belief that every single human being is of innate value and dignity, not because of what we do or contribute, but because we have been created in the image of God. We believe that God dwelt among us in the person of Jesus Christ. Through his life, death and resurrection, we are shown a radical way of understanding what it means to be human. We are created for a purpose infinitely larger than ourselves.



What difference does it make to explore social care from this perspective?

First, it helps us to think about the nature and purpose of a good life. Desmond Tutu, the great racial justice and reconciliation pioneer of South Africa, spoke often of the principle of Ubuntu, which is best described as follows: *I am, because we are; my humanity is caught up with your humanity. At the heart of Ubuntu is the belief that we all need each other; that my flourishing depends on yours; that yours depends on mine.*

A good life does not depend on each of us gaining more independence. Of course we want to see people who draw on care and support enjoying as much freedom to do the things that bring joy, fulfilment and purpose as anyone else – in the words of a House of Lords report, ‘a gloriously ordinary life’. But none of us are truly independent.

***“We saw starkly just how much we rely on one another during the pandemic.”***



We saw starkly just how much we rely on one another during the pandemic, when we were dependent on the generosity of neighbours, the dedication of key workers, the skill of medical professionals. We all have needs – emotional, physical and spiritual – which are often most helpfully met when we cherish our interdependence in pursuit of a good life together. Our approach to social care should be based on the principle that we need one another, not caring for the *vulnerable* out of pity or charity.

Second, it enables us to move beyond the idea of society as an abstract construct. We are society. Therefore, the question is not about the role of society in enabling people to live the good life, but of what we each will do with and for the people around us.

We must recognise our shared stake in getting this right. There is an important role for national government, ensuring that social care reform is a priority at a time of limited resources, providing the vision and investment to ensure that people can access what they need. Trying to support the government to do this work is what those involved in the Commission will continue to do.

But reimagining care is a shared endeavour, requiring everyone to play our part by loving our neighbour and committing to nurturing communities of warmth and authentic participation, so that we can each experience the full life for which we were created.

 @BishopSarahM  
 bishoppoflondon.org

# Batteries not included



**Oonagh Smyth**  
Chief Executive  
Skills for Care

**Social care providers have an opportunity to attract and keep excellent people with the right skills and values to work in adult social care. Oonagh Smyth, Chief Executive at Skills for Care discusses factors that can influence better staff retention by supporting staff wellbeing and culture and reducing burnout.**

*“We can’t recruit our way out of retention issues.”*

We know that keeping the right staff is a top priority for care providers right now. The vacancy rate across the social care sector remains high at 9.9% as at 2022/23, while the latest turnover rate is 28.3%.

We can’t recruit our way out of retention issues, and so while attracting more people to work in social care is vital our attention must also be focused on keeping new and existing staff long-term.

We want our excellent colleagues to remain in social care.

Care providers with lower turnover rates have higher Care Quality Commission (CQC) scores, as do care homes with more staff in post per bed.

This is because when we have the right number of staff in the right place at the right time we can deliver the highest quality of care.

When staffing levels are right our teams are less stretched and able to focus on the task at hand and delivering the best care to the people they’re supporting.

When this is the case staff are also more likely to feel happier in their roles, and less likely to experience burnout.

So, we can see this is an ongoing cycle where having high levels of workforce capacity and low turnover rates means staff will be happier in their roles and less likely to leave, and so the cycle continues.

But what can employers do to reduce staff turnover and in turn increase capacity?



In our latest 'State of the adult social care sector and workforce in England' report, we identified five key factors which can support better staff retention. These are:

- **being paid more than the minimum wage**
- **not being on a zero-hours contract**
- **being able to work full-time**
- **being able to access training**
- **having a relevant qualification.**

Where none of these factors apply, care workers are more than twice as likely to leave their jobs than when all five factors apply – a 48.7% turnover rate compared with 20.6%. Implementing these factors should make it easier for the people who love what they do to stay, by improving terms and conditions and investing in their career development.

We also know from our further research and our connections with care providers across the country that developing and maintaining a positive workplace culture has a hugely positive impact on retention.

In our 'Recruitment and retention in adult social care: secrets of success'<sup>1</sup> report, employers with a turnover rate of less than 10% were asked to consider what they believe contributed to their success in relation to recruitment and retention. The results included:

- **investing in learning and development (94%)**
- **embedding the values of the organisation (92%)**
- **celebrating the achievements of both the organisation and the individual (86%)**
- **involving colleagues in decision-making (81%)**

All these factors feed into creating a positive workplace culture.

A positive workplace culture supports staff to feel happy and confident at work.

Culture is the character and personality of your organisation and what makes your organisation unique. It's made up of the shared characteristics of people in your organisation including values, traditions, beliefs, interactions, behaviours, workplace norms, and attitudes. We have a positive culture toolkit<sup>2</sup> which helps explain what a positive workplace culture is and how you can develop, maintain, and where needed, change an existing culture.

Providing ongoing learning and development is also part of a positive workplace culture and supports greater staff retention. We know from our data that average turnover rates decreased from 37% among staff who had no qualifications to 26.5% among those that had a qualification. The average turnover rate was also 9.0 percentage points lower amongst care workers who had received some form of training (31.6%), compared to those who had not (40.6%).

*“We know from our research that developing and maintaining a positive workplace culture has a hugely positive impact on retention.”*

✉ @skillsforcare  
🌐 [skillsforcare.org.uk](https://www.skillsforcare.org.uk)



<sup>1</sup>[www.skillsforcare.org.uk/resources/documents/Recruitment-support/Retaining-your-staff/Secrets-of-Success/Recruitment-and-retention-secrets-of-success-report.pdf](https://www.skillsforcare.org.uk/resources/documents/Recruitment-support/Retaining-your-staff/Secrets-of-Success/Recruitment-and-retention-secrets-of-success-report.pdf)

<sup>2</sup>[www.skillsforcare.org.uk/culture](https://www.skillsforcare.org.uk/culture)

# It's a family affair



**Helen Wildbore**

Director  
Care Rights UK

**Helen Wildbore, Director at Care Rights UK, a charity focused on defending the rights of people in care, discusses the role of families in promoting wellbeing for friends and relatives in care.**

The wellbeing of people living in care will no doubt be front and centre of your service design and delivery. But making this a reality when services are so stretched can sometimes be challenging. Often the role of friends and family in promoting wellbeing can be overlooked. Here we share some thoughts and tips on what we hear via our helpline – 30 years of supporting people needing care and their families has given the charity some insights into what works and pitfalls to avoid.

## Getting to know you

As we all know, a key part of good care planning is getting to know the person; their likes, dislikes, preferences, wishes, needs. Understanding who is most important in their lives is also vital. Relationships are central to emotional and mental wellbeing. Care staff play a key role in helping maintain relationships, by welcoming relatives and friends.

Letting everyone know that promoting their right to family life is fundamental to your approach will start things off on a positive note.

## Taking some time to get to know friends and relatives will also help staff:

- Understanding what role they played before the person moved into care, and the role they would like to play now, will help you to frame your discussions
- Respecting these roles and clearly recording them in the care plan will help to avoid any misunderstandings
- People may rely on family and friends for different things – such as advocating their wishes, help with finances, support for health appointments – respecting the nuances of these roles can help avoid confusion or miscommunications
- Understanding who the person trusts as their eyes/ears/voice for support will help you know who should be kept informed and consulted about their health and care

*“We are calling for a change in law to create a new right to a Care Supporter.”*

On the latter, we are calling for a change in law to create a new right to a Care Supporter. This would make it easier for health and care staff to know who a person has chosen as their vital support network. Visit our website to find out how you can support this campaign: <https://www.carerightsuk.org/glorias-law>

*“Often the role of friends and family in promoting wellbeing can be overlooked.”*

### Meeting your legal duties

Of course, promoting wellbeing and relationships is not just a ‘nice to do’ but a core part of your legal duties to residents (Care Act, Human Rights Act). Some will need (or want) the support of loved ones to communicate information crucial to their care plan – the people who know them best can help with knowledge, memory and the confidence to speak up. If a person has been assessed as lacking capacity on a particular decision, consulting their relatives and friends is central to making a best interests decision (Mental Capacity Act).

### Things change

Of course, things will change – preferences, health and care needs. Relatives and friends who know the person best can help you to spot changes, things that are out of character or unusual for that person. Particularly when the person may not be able to communicate it themselves. Treating relatives and friends as partners in care will help you to protect the person’s wellbeing. So often problems raised on our helpline are caused by lack of communication, and a failure to include a person’s chosen representatives in discussions and decisions. Such as when care staff changed a person’s medication without consulting their relative, placing them on medication the relative knew they had previously had a bad reaction to.

### Making a home a home

Welcoming and involving family and friends can also improve the culture of a care home, making it feel more like a person’s home. This can not only improve the wellbeing of all residents, but also the morale of staff. For example, do you:

- welcome family and friends to take part in an ‘induction’ to the home?
- encourage them to help their loved one move in and get settled, easing everyone through what is often a stressful and anxious time?
- run a buddy scheme for new relatives and their loved ones?
- encourage loved ones to form a WhatsApp group, to offer peer support?
- organise social events to welcome family and friends? – they could get involved in suggesting ideas or some may even want to help organise socials
- run a residents and relatives group, to encourage them to get more involved in the life of the home?

Ultimately, everyone is different and there are no ‘one-size-fits-all’ solutions. Promoting wellbeing and ensuring person-centred care is all about treating people as individuals. Relatives and friends can play a vital and helpful role – after all, this is about the person they love.

# A culture of wellbeing



**Alex Pugh**  
Head of HR  
Eden Futures

**Alex Pugh, Head of HR at Eden Futures, a provider of specialist care and supported living services, talks about the organisation's innovative culture of wellbeing.**

At Eden Futures, we deliver exceptional support to people diagnosed with a learning or physical disability, acquired brain injury, autism or a mental illness. We use our experience to support people on their journey towards greater independence and live fulfilling lives. We recognise that every bit as important, is the wellbeing and development of our incredible staff who make it all possible.

Our commitment is to ensure that our staff experience is a positive one throughout the employee lifecycle, being able to change and adapt to provide excellent care and support and meet the needs of our service users. Our commitment is underpinned by the Investors in People (IIP) Framework, which has helped us secure IIP Gold accreditation.

Using the Framework, our People Strategy outlines our 3 key overarching ambitions:

- **To attract and retain strong talent**
- **To give our people the opportunity to learn, develop and progress**
- **To make sure that health and wellbeing is supported so that our people feel happy, safe and supported in every aspect at work**

In October 2022, I designed and launched 'Eden Together,' our answer to the growing need for more support, especially during the cost-of-living crisis. Eden Together is our monthly health and wellbeing magazine, packed with articles on mental health, financial advice, physical wellbeing, and more. It celebrates our collective achievements while championing the values of equality, diversity, and inclusion. In the magazine, we also signpost to the valuable resources on our Eden Futures Wellbeing page: [edenfutures.org/wellbeing](https://edenfutures.org/wellbeing). "Sharing is caring" and all our magazines and resources are available to the public. We're adding new materials all the time and we've recently created a new space dedicated to the menopause and external support available.

But we haven't stopped there. In January 2024, we introduced 'EdenEvolve,' a leadership programme designed by our HR team, featuring 16 modules with a keen focus on nurturing wellbeing at work. It's our belief that to provide the high-quality care and support our service users deserve, we must first care for our staff, equipping our leaders to create a supportive, engaging environment.

I think it's fair to say that we're in an incredibly rewarding but difficult sector, where there's a phenomenal amount of responsibility and pressure. Our leaders in Operations are ensuring care and support for our service users, maintaining excellent quality standards, managing within a national recruitment crisis, leading teams, keeping staff engaged and motivated, juggling audits, inspections, supervisions, appraisals... and the 'day-to-day' which can throw several curve balls... And that's not even all of it; the list goes on in our sector!



... And because of that, supporting the wellbeing of our people isn't – and can never be – simply an Employee Assistance Programme poster on the wall or placing tokenistic posts on social media for World Mental Health Day. Our approach to wellbeing is deep-rooted and personal; it's about meaningful actions. From our 'Shining Stars' monthly recognition programme to our annual Care Awards, we celebrate the extraordinary contributions of our team, all while keeping our ears to the ground with our annual employee opinion surveys, where wellbeing is always a hot topic.

*"We're in an incredibly rewarding but difficult sector, with a phenomenal amount of responsibility and pressure."*

All our wellbeing and people engagement initiatives are designed in partnership with our 'Eden Influencers'. This group of staff and Expert Partners shape our People Strategy, ensuring that every voice is heard, every concern is addressed, and every achievement is celebrated.

One of our measures of success is in our 21% attrition rate, well below the industry average, which truly reflects our commitment to remaining a genuine people's organisation as we continue to grow our services and workforce.

At Eden Futures, we know where the highest quality of care and support begins... and it's with those who choose a rewarding career in care.

 @EdenFutures  
 [edenfutures.org](https://edenfutures.org)

# A Zest for friendships through physical activity



**Helen Core**  
Wellbeing Manager  
Anchor

**Helen Core, Wellbeing Manager for Anchor, England's largest not-for-profit provider of care and housing for people in later life worked as a personal trainer before she joined the social care sector and has seen first-hand how physical activity can help combat social isolation, form friendships and improve overall mental wellbeing.**

*“Their friendship has blossomed as a result of the Zest programme.”*

When you hear the words ‘exercise’ and ‘physical activity’ the last thing you might think of is that this could lead to long lasting friendships. I’m sure you don’t believe me when I say that one of the best places to find new friends is through movement.

When I first joined the fitness industry, I was self-employed running group exercise classes in the community (boxing fitness, circuits, Pilates and more) and working with personal training clients and, while there is a perception that a lot of exercise environments can be intimidating, this was never something I experienced. New members to the group sessions were welcomed and encouraged, and I saw friendships blossom that last to this day – it was never about who was the fastest or the strongest it was about working to whatever your best effort was that day, the improvements you make each time and celebrating those achievements together. Even for me as the trainer I forged connections that last to this day. I stopped teaching my classes and personal training work to join the ranks of the employed, eight years ago, but the bond is still there and I have continued to see friendships blossom as a Wellbeing Manager, delivering the Zest programme, an inclusive physical activity programme designed to be suitable for all needs and abilities, across our Anchor care homes.

At Anchor’s Primrose Court care home, where shorter Zest movement sessions are delivered directly before lunch it has helped improve connections between residents. Once or twice a week while they wait for lunch service to begin, colleagues at the home go table

to table giving residents gentle exercises to try out while they wait. Lifting their arms and stretching upwards to wherever is comfortable for them and working on their posture. Not everyone is open and willing to join in with this activity but those who do join in with the exercises, become much happier and enthusiastic. Residents often end up talking about the activity and sometimes laughing to each other about how well some of the movements are executed, opening up discussion and providing social interaction.

At our other care home, The Manor House in Barnard Castle, a resident loves her Zest movement sessions so much she tries out the exercises outside the sessions and that is partly because another resident who regularly takes part recommended it to her and encouraged her to come, as she wasn’t sure about attending to begin with.

Their friendship has blossomed as a result of the Zest programme and it is just one of a number of activities, we offer across our care locations to help residents interact and bond, enhancing their wellbeing.

Zest has grown from strength to strength since its introduction in 2020. 2023 saw the introduction of Zest Balance, our falls prevention programme, and Zest To Connect for people living with dementia. This is in addition to live sessions, Zoom dances and our YouTube channel where recordings of Zest sessions are available to residents, making them accessible at any time.

Friendship is one of the forgotten benefits of physical activity but can turn out to be the most impactful.



# The rise, fall and rise of generations growing together



**Denise Burke**  
Director  
United For All Ages

**Denise Burke, Director and Co-Founder of intergenerational think-do tank, United for All Ages, examines the fluctuation of intergenerational action in the UK.**

As Global Intergenerational Week (24-30 April) comes to an end for another year, it's a good time to celebrate and reflect on the rise, fall and rise of intergenerational action in the UK.

In short, the last ten years have been a rollercoaster ride. Until spring 2020 we saw a massive growth in activities bringing older and younger people together. Then the pandemic and lockdown meant that mixing stopped in care homes, nurseries, schools and communities for three years. But over the last year plus, we have seen a resurgence in intergenerational interaction as everyone realises what we missed during Covid.

Thousands of care homes and older people's housing schemes are now linked in various ways with local schools and nurseries. This has many benefits for older people, for young people and for all ages in between – care and education providers and workers, relatives of older people and parents of children as well as their local communities.

*“We have seen a resurgence in intergenerational interaction as everyone realises what we missed during Covid.”*

For older people, care providers recognise that regular interaction with children brings a mix of joy, fun and magic that adds purpose and meaning to life. The Care Quality Commission also regularly highlights intergenerational activities in improving the quality of care and promoting the mental and physical well-being of older people including those with dementia.

For children it is happy learning, with older adults who have the time and interest to share in activities. The need to develop children's social and communication skills has increased since Covid.

Bringing generations together helps promote mutual awareness and understanding, tackling ageism as well as loneliness and isolation. Uniting generations and sharing experiences and activities strengthens families and communities.

The key to success is regular contact, well organised activities which older people and children are involved in planning, with committed staff and leaders.

As intergenerational interaction has taken off again over the last year, there are exciting developments to report:

- **New co-located care homes and nurseries have opened, most notably run by Olea Care Group in Stockport and Ready Generations with Belong Chester. United for All Ages is working with several other new sites in the pipeline. Apples & Honey Nightingale in London also goes from strength to strength offering a range of training courses as a centre for intergenerational practice.**
- **Two of the largest intergenerational projects have brought together schools with local care homes. Intergenerational Linking and Move & Groove are now sharing their learning as well as sustaining their programmes.**
- **The Together Project has been scaling up its Songs & Smiles project which enables parent and toddler groups to visit care homes with regular music and arts activities, reaching many more care homes across the country.**
- **The first intergenerational play garden on a care home site has opened in Bath at Hallmark Care Homes' Midford Manor, funded by Hallmark Foundation and developed with London Play, to encourage intergenerational and family friendly interaction.**
- **At Southampton University, students are leading a project which is linking local nurseries with care homes, providing an extra resource to oil the wheels and bring young and older people together.**





***“The key to success  
is regular contact,  
well organised  
activities.”***

Alongside these activities, there are more academic studies researching the impact of intergenerational interaction and the wide-ranging benefits for care providers and staff as well as older and young people.

We hope to see more of these projects celebrated in Care Talk's new Dementia Care Awards which United for All Ages is proud to support through a special intergenerational category. And the forthcoming Care Home Open Week (24-30 June) organised by Championing Social Care will be another opportunity for care homes to engage with their local communities and start something new.

 [@united4allages](#)  
 [unitedforallages.com](https://unitedforallages.com)

# Where's the Z in 'Social Care Workforce'?



TheKingsFund>

**Simon Bottery**  
Senior Fellow, Social Care  
The Kings Fund

**Simon Bottery, Senior Fellow in Social Care at independent think tank, The King's Fund, discusses the challenges in attracting and retaining younger talent.**

*“For some younger people who draw on services, younger workers were a particularly good fit.”*

Visit a typical restaurant and around half the waiting staff will be under the age of 25. Visit a typical social care service and, on average, fewer than one in ten staff will be under 25.

Why is this - and does the social care sector want to do anything about it? The King's Fund's research with social care providers has found a range of answers to the first question and, perhaps surprisingly, some ambivalence about the answer to the second.

We spoke with 11 leaders in larger providers, who varied in the type of care they provide, the settings in which they provided it, and the people who drew on their services. Typically, they were enthusiasts for recruiting younger people.



They told us that young people have a lot to offer social care. Sometimes this was personal qualities like energy and a strong sense of social justice. Other times it was specific knowledge and experience – there was a clear belief that younger people are often more familiar with technology (and some particular applications of it, like social media) than many older people. And there was also recognition that for some younger people who draw on services, younger workers were a particularly good fit. One senior manager told us how a 21-year-old went to a concert with a 24-year-old careworker and said: ‘For the first time, I felt normal’.

For the providers we spoke to, these advantages outweighed any disadvantages. However, they also felt that this view was not universally the case across social care or even, sometimes, in their own organisations. One told us: ‘We’ve had it in some of our services where managers have turned around and said ‘Oh, don’t give me anyone young’. Or, where younger people were employed, there was an acceptance that they would leave quite quickly.

Lying behind these attitudes were a range of issues. We heard in particular that younger people were thought to be less ‘workplace ready’ than older people, an issue which had been exacerbated by Covid-19 lockdowns. This meant providers had to provide greater ‘wraparound’ support to younger people than they might otherwise have had to.

But we also heard, even from some of these providers who were generally positive about younger people, attitudes that verged on stereotypes. Younger people were ‘always on their phones’, had short attention spans and were a ‘mollycoddled’ generation.

*“Younger people were thought to be less ‘workplace ready’ than older people.”*

Providers felt that social care could – and should – get better at recruiting and retaining younger workers. Individual providers could get better at ensuring that younger staff feel valued and that other staff recognise their benefit. At local level, providers could combine to forge relationships with schools and colleges so that social care was seen as a more attractive career (we heard that all too often it was not). And at national level, there was a need for a centralised effort to promote social care. At the moment, one provider told us sadly, ‘young people want to be influencers, don’t they?’

We agree with these recommendations but also think that social care needs to do even more if it wants to attract more younger people. It does need to have an honest debate about those stereotypes of younger people. Differences between generations, research suggests, are more nuanced than we think and, even where they have a grain of truth, do not apply to all younger people.

In our next work, which we’ll publish in the summer, we’ll report on what younger workers themselves have been telling us. They were impressive young people but, sadly, many did not plan to stay in social care or had already left. There is work to be done if that situation is to change.

 @blimeysimon @TheKingsFund  
 [kingsfund.org.uk](https://www.kingsfund.org.uk)



# Nurturing your workforce



**Karolina Gerlich**  
Chief Executive  
The Care Workers Charity

**Karolina Gerlich, Chief Executive at The Care Workers' Charity discusses why engaging in discussions about the wellbeing of care workers should be a priority.**

*“A designated mental health first aid person can create a vital support system.”*

As Chief Executive of the Care Worker's Charity, an organisation dedicated to supporting and advocating for care workers across the UK, and with 12 years of personal experience as a care worker, I am acutely aware of the importance of prioritising and discussing care worker wellbeing. The social care sector has encountered substantial challenges during and after the COVID-19 pandemic and it's essential to address mental health openly and encourage individuals to speak up when they are struggling. As somebody who has had different mental health struggles over the years, with depression and anxiety, I think sharing your experiences and accepting mental health issues without judgement is incredibly important. Social care leaders have a responsibility to be open-minded and compassionate when it comes to the wellbeing of their colleagues. Mental health should be central in the workplace, including training and awareness and making wellbeing a regular discussion topic.

In our discussion with care workers, they have spoken about the significance of having a good relationship with their manager and the impact of this on their overall wellbeing at work. Management styles should be empathetic and understanding, with leaders actively listening and engaging with their teams to understand what is happening in their lives outside of work. Supervision and group supervision are valuable tools for addressing mental health concerns and sharing best practices within the field. These forums provide care workers with a space to reflect on their experiences and receive support. Additionally, having a designated mental health first aid person can create a vital support system for care worker teams.

To create a thriving work environment, listening to staff is essential. Wellbeing initiatives will look different to different individuals and teams but could include improving staff rooms, providing wellbeing grants, and asking returning mothers (or others who have taken time out) about their needs. Addressing care worker wellbeing also encompasses promoting financial

stability, advocating to decision makers for competitive pay rates to enhance overall quality of life. Additionally, prioritising working conditions, including adequate training, advanced rotas, promoting breaks and holiday time, job security, and a supportive learning culture, significantly contributes to a higher level of overall wellbeing. This fosters a happier and more effective workforce.


It's important to embed recognition into daily practice in care settings, to express gratitude to care workers and to celebrate their achievements. Long Service Awards and Awards for Outstanding Work can serve as a source of recognition, honoring exceptional contributions that go above and beyond. Finding ways to share success stories, whether via monthly newsletters or in team meetings, can create positivity by highlighting the transformative impact of care workers' efforts.

Apart from formal awards and acknowledgements, it is equally vital to acknowledge people's work on a day-to-day basis. A simple thank you or a "well done" email can be an important token of appreciation, fortifying the sense of camaraderie and belonging within the workplace. It also includes providing opportunities for development which fosters long-term careers and personal growth, as employees identify areas for development and access training opportunities.

Alongside acknowledging achievements, the other thing that is needed is to provide support when things go wrong. Care workers, like everyone else, can make mistakes. When errors occur, it's essential to adopt a supportive approach. Care workers should be able to seek support when they need to and have the information and trust to utilize the resources and support your organisation offers. Encouraging care workers to seek assistance, fostering transparency in addressing mistakes, and investing in comprehensive training and prevention mechanisms are instrumental in mitigating difficulties and supporting the wellbeing of care workers when faced with challenges.

In essence, cultivating wellbeing in care necessitates a multifaceted approach. Most importantly, leaders need to apply person-centered care principles to team members, fostering an atmosphere of trust, flexibility, and inclusivity, which makes care workers more comfortable. Ultimately empowering them to provide better care and leading to their own enhanced satisfaction and fulfillment.

*“Cultivating wellbeing in care necessitates a multifaceted approach.”*

 @KGerlich777  @CareWorkersFund  
 [thecareworkerscharity.org.uk](http://thecareworkerscharity.org.uk)

# Empowering female colleagues is enhanced by a culture of EDI



ARIA CARE

**Kelly Howell**  
Chief People Officer  
Aria Care

**Kelly Howell, Chief People Officer at residential care provider Aria Care, outlines her organisation's commitment to fostering gender equality and creating a diverse and inclusive work environment.**

*“Our Senior Leadership team has 75% female representation.”*

When Aria Care was formed in December 2022, our new CEO Caroline Roberts, was very clear that she wanted to build an organisation that puts people first and champions equal opportunity.

According to the latest report from Skills for Care, men make up almost a third (31%) of senior leadership roles within the social care sector in the UK, despite only accounting for 19% of the overall workforce. This signals that there is more work to be done within our industry to achieve gender equality and ensure women are empowered to progress in their careers.

We are pleased that our Executive Team has a balanced representation with 50% females holding Executive positions. Our Senior Leadership team has 75% female representation and includes myself, as Chief People Officer, as well as Caroline Roberts, CEO, and Ruth Yates, Managing Director of Operations. We have all taken active steps to create an inclusive organisation that supports our female workforce and effectively reduces the gender pay gap.

One of our priorities has been to create real opportunities for progression for Aria Care's colleagues and tackle the misconceptions about what a career in social care looks like. The frequent undervaluing of social care is one of the factors that creates gender inequalities in the industry, and we are challenging this by investing in career and personal development for all our colleagues and creating new pathways to make social care a more exciting and attractive career. For example, in February 2024 we launched our first Leadership Programme, 'Inspiring Leaders', where nine of the twelve delegates are female. We will also soon be launching our Emerging Leaders program to offer further opportunity for development and progression. We are working with colleges and schools to raise awareness of the opportunities that the social care sector can offer.

Additionally, we have also taken a number of initiatives to promote and empower employees at all levels, such as our recognition schemes, Hearts of Gold and 'Living Our Values Everyday', where, each month, home managers, colleagues, and residents can nominate outstanding colleagues who have gone above and beyond in order to celebrate their hard work.

Creating rewarding careers and improving retention can have a truly transformational impact within an organisation, creating opportunities for progression at all levels, which positively impacts gender equality, ensuring female colleagues can rise through the ranks and reach senior positions. This is perfectly illustrated by Ruth, as well as reflecting my own experiences at Aria Care. We have both been promoted internally to reach our positions in the senior leadership team.

At Aria Care, we always want to lead by example, and have become a Living Wage employer, alongside improving our pay rates and benefits, to ensure our people-first approach is also translated into remuneration. As such, we are glad that our gender pay gap is significantly lower than the UK average, at 2.3% across the organisation (compared to 8.3% UK median average).

As a high-profile female leader in the business, and alongside my colleagues in the senior leadership team, we have also worked to maintain our visibility within Aria Care's communities, and we all have a regular presence at roadshows and within the homes, to directly speak with and hear from all our colleagues and further empower everyone to have their say in how the organisation is run.

Promoting gender equality is only one aspect of creating an open and transparent business where everyone feels included. Empowering female colleagues goes hand in hand with driving a culture that celebrates diversity and inclusivity. At Aria Care, we are extremely proud to have a diverse workforce and we actively recognise and celebrate different cultures and traditions that enables us to share stories and learn others' experiences so that we can understand and appreciate other cultures. We strongly believe in being 'One Team' and irrespective of background, gender, beliefs we all come together to deliver our collective vision to be the best care provider in the UK.

 [ariacare.co.uk](https://ariacare.co.uk)



# Whizzing for inclusivity



**Sarah Howe**  
Head of Young People's Services  
& Safeguarding  
Whizz Kidz

**Sarah Howe, Head of Young People's Services & Safeguarding at Whizz Kidz, explains how this charity is tackling social isolation for young wheel chair users and their families.**

*“Whatever the activity, we like to find a way to do it.”*

Imagine a family day out. For most of us, it's easy to picture. We have fond memories of getting soaked on theme park rides, over-competitive mini-golf championships, and ice creams for everyone, melting faster than you can lick them.

For the 75,000 young people in the UK who need a wheelchair to be mobile, it's not that easy and carefree. A family trip is often not an option at all. So many

attractions are inaccessible, and so many activities are unavailable to disabled people that the kind of relaxed days out we take for granted remain out of reach for young wheelchair users and their families. And that's before the devastating cost of living crisis that impacts disabled people most severely of all pulls the possibility of family fun even further away.

Here at Whizz Kidz, the UK's leading charity for young wheelchair users, we see this effect on the whole family. We know how isolating disability can be on individuals. Research from the charity Sense<sup>1</sup> showed nearly two-thirds (61%) of disabled people were chronically lonely, and this is even higher (70%) for younger disabled people. Having mobility issues can restrict your ability to participate in activities and meet people. Whizz Kidz exists to help with those challenges. We supply high-quality mobility equipment that is fitted to meet young people's unique needs. But the right wheelchair is only the start. Our activity programmes run nationwide to give young people the confidence-boosting skills to be more independent.

But as our community is made up of young people and their families, we are also well-placed to see how the social isolation of young wheelchair users extends to the loved ones around them. This is important because many of our happiest memories are ones we share with our loved ones. You might not think it when you were being teased by your older brother on a “Are we nearly there yet” car journey, but we probably have the most fun





together with siblings, parents, carers and close friends. These are family highlights we share as we grow up. The “what I did on my summer holidays” stories we tell when we get back to school and work, the highlight reels in our photo albums at the end of the year.

At Whizz Kidz, we were determined to address the social isolation of young wheelchair users and their families. After much thinking and research, the answer came in the form of our Kidz Max Days, made possible by Caretech’s generous funding.

Starting in 2022 with four events across the UK, these take our programme of accessible activities and pack them into one special day in the summer for the young wheelchair user and their family to enjoy together. Last year’s four events in Scotland, Wales, and the North and South of England were even more successful as over 78 young wheelchair users, 140 parents/carers, and 67

siblings came to have a fantastic time on boats, bikes, skis and toboggans. They played mini-golf and laser tag, danced, painted, climbed rock faces, drove fast around a racetrack, handled exotic animals, learned circus skills and more. This year, we are looking forward to another year of exciting events and introducing new activities like white water rafting and paddle boarding.

We want to push perceptions of what’s possible for young wheelchair users. Whatever the activity, we like to find a way to do it. Often, the most difficult thing is reassuring naturally cautious parents that their child getting wet, climbing high, or going fast is as fun as their children tell them it is afterwards. Working with incredible adaptive providers like Access Adventures, which has disabled instructors, helps make the argument, and it’s motivating for young people who can see it so they can be it.

The value of Kidz Max isn’t just the chance to challenge yourself with new, heart-pounding adventure sports, though. We pride ourselves on offering something for everybody. Campfire making, painting your message on communal artwork, or meeting a meerkat is as popular as the more thrill-seeking experiences.

Equally as important as what you do is who you get to do it with. For many young wheelchair users, this is the first time they have met that many other young people in wheelchairs. What could be more important than the chance to make new friends and have fun together? Families have much to discuss with other families in similar situations, and the conversation flows in this casual, unforced environment.

Kidz Max has a significant impact on families. We’ll never forget the parent who told us how this was the first time their two daughters had been able to do the same activity together - to share the experience and be able to gleefully talk about it on the journey home and for years to come.

It’s moments like this - and there are thousands of them across a summer of Kidz Maxes, that make you realise how these events are a glimpse into how things could be if accessibility and inclusion were properly funded aims in society, not just buzzwords. A day out for a family with a young wheelchair user is the opposite of carefree. The preparation and planning need to be military in scale, and you’re only ever one out-of-order lift or toilet from disappointment. With Kidz Max, everything is accessible, and anything is possible. Families tell us how much they love the freedom to have fun together without worrying about wheelchairs being included. They just are.

Many young people and families attending Kidz Max are new to Whizz Kidz (29 last year), and it’s great to welcome them into our community. We may kick off our relationship with the chance to ski or race around a track, but we know that social isolation must be tackled daily with the right equipment and experiences. Whizz Kidz’s vision is a society where every young wheelchair user is mobile, enabled and included. By removing the barriers young wheelchair users and their families face in the rest of their lives, Kidz Max starts to bring this vision about. Ultimately, accessibility and inclusion are the opposite of isolation and the most powerful ways to end it.

 @WhizzKidz @CareTechFdn  
 [whizz-kidz.org.uk](http://whizz-kidz.org.uk) [caretechfoundation.org.uk](http://caretechfoundation.org.uk)

[www.sense.org.uk/media/latest-press-releases/loneliness-rises-dramatically-among-disabled-people/](http://www.sense.org.uk/media/latest-press-releases/loneliness-rises-dramatically-among-disabled-people/)

# Valuing our inspiring volunteers



JEWISH CARE

**Jo Selwyn**  
Department of Volunteering  
Jewish Care

**Jo Selwyn, Department Manager of Volunteering at Jewish Care, sheds light on the invaluable contributions and profound impact of volunteers, both within the organisation and the communities they serve.**

*“Our intergenerational volunteers include children from nursery age through to secondary schools.”*

It gives us great pleasure to recognise the wonderful contributions our volunteers bring to Jewish Care, the largest health and social care organisation for the Jewish community in London and the South East. The remarkable work our volunteers do every day makes such a difference to us and to the communities we support.

We simply couldn't do what we do without the commitment, love and care that our volunteers give each day. They support Jewish Care's residents, community centre members, clients and Retirement Living Room tenants as well as clients at Jami's Hubs and Head Room social enterprise café, run by Jami mental health service which recently integrated with Jewish Care.

As Volunteer's Week approaches (3rd – 9th June) it's a good opportunity to highlight the invaluable contribution all of our volunteers make, and the many benefits that volunteering brings.

Building connections and growing skills through volunteering is a positive way to give back to our communities. Relatives of residents and community centre members we have supported say they find volunteering is a meaningful way to show they care and to express their thanks for the care their relatives and friends received.

JCoSS students win Young Volunteer Group Award for volunteering at The Sam Beckman Centre for people living with dementia





Volunteering is good for well-being. Giving time provides a way to connect with others, to contribute to and be involved with community life and to feel valued, which can be all be beneficial for mental health. It can be a stepping stone back into employment after a career break. For many people in retirement, it creates that sense of purpose and routine that work previously gave them. Donating time creates opportunities to utilise skills and experience people have acquired and to learn new skills, which is beneficial for everyone involved.

We value the precious time our volunteers give to us. We know that offering flexible roles helps to fit volunteering into busy lives for those who are juggling work, studies or caring for grandchildren or older parents.

Our volunteers build strong relationships with our staff and with the people they support. We orient volunteers to understand and embrace our values of inclusivity, compassion, integrity, excellence and innovation. They listen without judgement, they entertain and build relationships, deliver meals to older, isolated people at homes and drop off our members to our services including our community centres and centres for people living with dementia. As well as the practical side, it's the little things that volunteers do that can make a huge difference to someone's day. Taking the time to remember something that a resident or community centre member has told them shows thought and kindness and can make a day extra special.

It's important to us to pay the kindness back by acknowledging how valued our volunteers are to us throughout the year. A thank you can go a long way. Regular communication through our newsletter as well as wishing happy birthday to volunteers helps them feel appreciated and valued.

Our recognition celebrations during Volunteer's Week and regional award ceremonies give the opportunity for our senior team to highlight how special volunteers are. Our annual Betty and Aubrey Lynnes Volunteers Awards are a celebration of the successes, dedication, and love that our almost 3,000 volunteers bring to Jewish Care and gives us the opportunity to thank some of our amazing volunteers.

They have a great attitude, spreading positivity and motivation and a strong sense of care and compassion, and we know we can always rely on their help and support.

Many of our volunteers love to share their skills, for example Valerie Nead, otherwise known as the Dancing Queen, loves to dance with our members when we have entertainment and lights up the room. Our JC Explore volunteers patiently enable older people to learn new skills like connecting their mobile and devices to Bluetooth or speaking to their families across the world on Zoom. We celebrate the creativity and tenacity of those who fundraise for us.

Our intergenerational volunteers include children from nursery age through to secondary schools. JCoSS Year 8 student volunteers create amazing connections with members at Jewish Care's Sam Beckman Centre for people living with dementia.

All our volunteers play an important role in supporting us as a culturally specific organisation so that the spirit of Jewish festivals and celebrations is brought to life all year round.



**Valerie Nead**, the winner of the Sonia Douek Award for Excellence in Volunteering with community centre and outreach coordinator **Jojo Dando**

As Volunteering Department Manager I am proud to lead a fantastic team of staff who recruit, welcome, train and communicate with the volunteers, new and old with a positive attitude and a friendly smile. Imagine coming to work and to be surrounded by people who give their time so generously. It's an incredibly positive and warm environment and a real pleasure and privilege to work with our volunteers.

*“We simply couldn't do what we do without the commitment of our volunteers.”*

 @Jewish\_Care  
 jewishcare.org

## #DementiaActionWeek

## Opening doors to the outdoors



dementia  
adventure

**Sue Hinds**

Head of Innovation, Research  
and Development  
Dementia Adventure

**Sue Hinds is Head of Innovation, Research and Development at Dementia Adventure, a charity with a vision for a more active and fulfilled life for people living with dementia. Here Sue explains the role of outdoor activities and nature in enabling people living with dementia to live their best and meaningful lives.**

In the intricate landscape of dementia care, nature and the great outdoors offer great potential for people with dementia and those who care for them. Dementia Action Week reminds us how important it is to harness

the therapeutic benefits of nature so that we can all, including those affected by dementia, lead more fulfilling lives.

**The role of nature in cultivating wellbeing**

Whether through quiet walks, breezy adventures by the sea or by bringing the outdoors indoors - perhaps through potted plants, the sound of birds through the window or some aromatic herbs - nature has the unique ability to uplift the spirit and rejuvenate the soul.

Dementia Adventure is dedicated to giving people with dementia and their carers the opportunity to reconnect with nature and each other. Through bespoke small group holidays and tailored breaks, we create space for meaningful experiences and the creation of precious family moments. These breaks offer more than relaxation; they are often a lifeline for families in need of a break and a chance to recharge their batteries together.

*“By working with community organisations, providers can guide people to dementia-inclusive spaces.”*





***“Inclusive communities are the cornerstone of Dementia Adventure’s approach.”***

The Reed Barn at Peckover, home to the Damson's group | © National Trust

### **Engaging positively with people living with dementia**

Inclusive communities are the cornerstone of Dementia Adventure’s approach to supporting people with dementia and their carers. For example, by working with organisations such as the National Trust and the Alzheimer’s Society, we have helped to create safe and welcoming environments where everyone feels valued and supported. One of our initiatives is the National Trust’s Damsons project at Peckover House.

The project was born out of a shared commitment to create inclusive spaces for people living with dementia and their carers. With funding from the EU-funded MONUMENT pilot project, we have transformed Reed Barn at Peckover House into a safe and welcoming environment.

Throughout, we received overwhelmingly positive feedback from Damsons participants. One member, Karen, described the welcoming atmosphere and positive effect on her mother’s demeanour. She said, *“Mum loves wandering around the garden on the way to the barn, and what’s really lovely is when you walk through the doors, everybody says hello and welcome, and is smiling - that’s what brings mum in.”*

Our Gardening Group at the Jubilee allotment site in Great Dunmow is further evidence of our commitment to nature-based activities in the community. The allotment is a real enclave and we pride ourselves on the fact that you often can not tell who is living with dementia and who is a volunteer because we all work together. At each session, up to six volunteers support six people with dementia to work together on the two plots of the allotment.

The group acts as a beacon of community connection and support by actively caring for the allotment by planting, weeding, watering and harvesting. Physical activities are tailored to the individual abilities of the participants. All produce grown on site is shared amongst members to encourage healthy eating habits and provide a platform for meaningful discussion.


### **Guiding individuals towards outdoor activities**

Social care professionals can play a crucial role in guiding people with dementia and their families to enriching outdoor activities. Although Dementia Adventure does not provide direct social care itself, we champion nature experiences and work with partner organisations to promote access to outdoor activities.

By working with community organisations, social care providers can effectively guide people to dementia-inclusive spaces and outdoor activities. Information sessions and social media platforms can also be used to disseminate details of dementia-welcoming events and outings. In addition, transportation support for people with dementia is essential to ensure they can access nature trails, parks or botanical gardens. By offering personalised recommendations, activity calendars and staff training, social care providers can empower people with dementia to engage with nature in a meaningful way, improving their overall wellbeing and quality of life.

Moreover, with advances in access to technology and the ability to order from around the world, there is an opportunity to connect people with the nature of their past, such as native plants and sounds from different parts of the world. By finding innovative ways to bring nature into the home, even for the most frail people, social care providers can ensure that everyone, regardless of physical ability, can benefit from the therapeutic power of nature.

By recognising the transformative power of nature and fostering inclusive communities, we can open doors for access and inclusion for people living with dementia. Together, we can create a future where people affected by dementia experience independence, connection and fulfilment in the outdoors.

 [@DementiaAdv](https://twitter.com/DementiaAdv)  
 [dementiaadventure.org](https://dementiaadventure.org)

# Could care homes be the hospices of the future?



**nightingale  
hammerson**

**Nuno Santos Lopes**  
Director of Research, Innovation  
and Community Engagement  
Nightingale Hammerson



**Shape  
your care  
Harlington  
Hospice**

**Dr Ros Taylor MBE**  
Medical Director  
Harlington Hospice

**Nuno Santos Lopes is Director of Research, Innovation and Community Engagement at Nightingale Hammerson, a London based provider of residential, nursing and palliative care, and Dr Ros Taylor is Medical Director at Harlington Hospice. Here they discuss the role of care homes for people nearing the end of their lives.**

Over 129,000 care home residents died in England and Wales between October 2022 and September 2023. These are huge numbers of 'endings' and we hope that most were peaceful and managed well by the teams who knew them best. We also know that the demographics predict a huge increase in the numbers of people likely to need institutional care in their final years, as life expectancy increases.

The question is whether care homes can provide the holistic, multidisciplinary care – attending to mind, body and spirit – that defines hospice care in the UK?

*“There are so many benefits for a care home resident to spend their final days where they live.”*

Care Homes all aim to provide the most fulfilling last years of someone's life. Over the past few years we have observed an increase in the vulnerability and multiple comorbidity of residents, making the care required more challenging and complex, with an increased need for confident and expert palliative care.

Just over 20% of all deaths happen in Care Homes nationwide, and if we compare the age of people dying in different settings, we observe that for people aged 85 or older, almost 35% died in care homes, compared to only 2.2% in Hospices.<sup>1</sup>

It is also estimated that around 70% of people living in care homes have a diagnosis of dementia or cognitive impairment which is now the leading cause of death in England and Wales.<sup>2</sup>

If we focus on dementia as a condition, it is known that for the person living with dementia, the less we change the environment the better. Care homes therefore will be best positioned to deliver palliative dementia care, compared to hospices, which are short-stay, often without secure environments for people living with distressed behaviours and the need to walk with purpose.

So how can care homes become more confident with the huge role they have to play in supporting residents at the end of life? Ideally it needs to be a team effort between the care home team, primary care and hospice outreach staff. The key need is to have a multi-disciplinary approach with access to therapies, psychological and spiritual support, and symptom expertise if needed. Confident communication with families, and recognising closeness to death is key – without inappropriate admission to hospital.





Nightingale House, an outstanding-rated care home in South London, is a good example of collaborative work between the different teams that has led to over 90% of the annual deaths (between 50 to 60 deaths/year) happening in the care home. This compares to national data suggesting that only 80% of permanent care home residents end their days in their care home, with 16,000 (20%) residents sadly dying in hospital each year.

There are so many benefits for a care home resident to spend their final days where they live: a familiar homely environment, a palliative care approach to what matters, unrestricted visits, long term relationship with care staff, resident and family, and crucially a much more economic cost compared to hospice or hospital.

To increase the public and commissioners perception of the potential of excellent end of life in care homes, it will be important to understand the value of ongoing education in palliative care for staff, to have hospices structurally involved in the ongoing support of care providers and to incentivise GPs to support care homes. Currently providers are required to spend thousands

# “Can care homes provide the holistic, multidisciplinary care that defines hospice care?”

of pounds on GP retainers if they wish to have robust, continuity of GP cover. It is also essential to have access to reliable data for example on care home deaths, hospital admissions, and ambulance conveyance so that Care Homes can be benchmarked, motivated and supported to be the Hospices of Future.

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<sup>1</sup>[www.gov.uk/government/statistics/palliative-and-end-of-life-care-profiles-december-2023-data-update/palliative-and-end-of-life-care-profile-december-2023-update-statistical-commentary](https://www.gov.uk/government/statistics/palliative-and-end-of-life-care-profiles-december-2023-data-update/palliative-and-end-of-life-care-profile-december-2023-update-statistical-commentary)

<sup>2</sup>[www.alzheimers.org.uk/about-us/news-and-media/facts-media#:~:text=It%20is%20estimated%20that%2070,dementia%20or%20severe%20memory%20problems.](https://www.alzheimers.org.uk/about-us/news-and-media/facts-media#:~:text=It%20is%20estimated%20that%2070,dementia%20or%20severe%20memory%20problems.)



# The importance of normalising dying as part of life



hospiceUK

**Anita Hayes**  
Clinical Quality Lead  
Hospice UK

**Anita Hayes, Clinical Quality Lead at Hospice UK, the national charity for hospice and end-of-life, highlights the significance of accepting death as a normal aspect of life.**

Death is often viewed as a taboo subject, something that makes people feel uncomfortable and should be avoided in discussions, yet, the reality is that death is an inevitable part of life, and end-of-life care should be everyone's concern. It's time we normalise dying and recognise the importance of living well until the very end.

At Hospice UK, we're the national charity for hospice and end-of-life and we represent the UK's 200+ independent hospices. Our hospice members are experts in end-of-life care, and through conversations about and planning for death, we believe everyone can be supported to live as well as possible until they die.

One of the fundamental aspects of end-of-life care is supporting individuals to identify what matters most to them. Whether it's spending time with loved ones, finding peace, making plans for what happens after they die, or fulfilling a lifelong dream, everyone deserves the opportunity to define their priorities as they approach the end of life. By understanding and respecting these wishes, we can ensure that individuals receive the support and care they need.

End-of-life care can be delivered in any setting and people should have the choice to live out their final days in the setting that suits their preferences and circumstances. Hospices provide dedicated and compassionate end-of-life; they make people comfortable in their final days and support them in the lead up to end of life through outpatient or community care. Some people may choose to receive end-of-life in the comfort of their own homes, surrounded by their loved ones. Social care plays a crucial role in making this possible, by offering support in various settings, including the home and hospices.

Social care professionals, including hospice staff, social workers, and professional carers, are at the forefront of end-of-life care, playing a vital role in communication and care planning. They deliver person-centred, holistic care, working in partnership with healthcare providers

and multidisciplinary teams. Whether in hospice settings or other care environments, these professionals can support effective care coordination to ensure that individuals receive quality support and assistance from all involved parties.

Hospice staff have a wealth of end-of-life care expertise, and it is important for social care professionals to have access to education in palliative and end-of-life care skills. This equips them with the knowledge and tools needed to provide high quality compassionate care to individuals in their final phase of life.

It is highly important for staff to take care of their own well-being through reflective practice, as ongoing support and training are essential not only to improve skills, but also to help them navigate the emotional and practical challenges that come with end-of-life care. Professional grief, and the emotional context experienced by staff working in hospices, care homes, hospitals and other care settings, means these individuals need to prioritise self-care. Working in end-of-life care can be incredibly rewarding, but professionals still need to protect their emotional well-being to prevent burnout, compassion fatigue, and cause staff to be less effective in providing care.

Ultimately, end-of-life care is not just a medical issue, but a human one. It's about honouring the dignity and autonomy of individuals as they approach the end of their journey. By normalising dying as part of life, we can create a culture of openness and compassion, where conversations about death are met with understanding, rather than fear. In conclusion, end-of-life care is everyone's business. It's about living well until the very end, respecting individual wishes, and providing support wherever it's needed.

*“Social care professionals are at the forefront of end-of-life care, playing a vital role in communication and care planning.”*

 access

Care

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# Two-way communication is key when it comes to TEC



**Dr Sarah Alden**  
Independent Social  
Policy Researcher

**Dr Sarah Alden, an independent Social Policy Researcher commissioned by the TEC Action Alliance, discusses new research that identifies what people and their families want most from digital care, but don't always get.**

I've spent the last six months asking people who draw on care what they want from the devices and apps designed to support them – and the results have been eye-opening.

One woman told me how technology is often imposed on people. *"Don't 'do' to people,"* she explained. *"Make sure communication works both ways and listen. Technology is not for everybody – it will take away from some as well as add – if you don't have a conversation you won't know."*

This piece of advice set the tone for much of my research into what people want from technology enabled care (TEC). In 2023 I was commissioned by the TEC Action Alliance, a group of around 30 care organisations - including the Association of Directors of Adult Social Services (ADASS), the Local Government Association, Care England and the TEC Services Association (TSA) - to identify people's priorities around digital care.

This alliance was set up to put the voice of individuals, families and unpaid carers at the heart of technology enabled care and they wanted my research to inform a report about how to implement personalised TEC at scale.



*"The need for a common, simple TEC language to help people navigate the options really came to the fore."*





The problem was that no one really knew what older and disabled people wanted from TEC because there hadn't been a large-scale study asking this question. When I looked at previous research, the views of care workers and care organisations dominated - there was far less on the opinions of people drawing on support.

This speaks to the issue of paternalism that many in the care sector are trying to tackle. Historically, people who draw on care have been seen as passive service users who had to be fixed by professionals. This sometimes led to care packages, including technology, being given to people with little consultation, leading to low engagement and poor outcomes.

Thankfully this power dynamic is slowly changing and people who draw on support are being recognised as experts by experience. I tapped into this real-life expertise by examining over 100 perspectives and conducting 42 interviews with people and families, and some clear learnings emerged.

I discovered that people didn't use acronyms or technical terminology to describe devices. Instead, they talked about how tech supported their lives. Phrases like 'providing support if I need it outside my home' or 'living well in and around my home' were regularly used, rather than 'GPS tracking device' or 'lifestyle monitoring system'.

The need for a common, simple TEC language to help people navigate the options really came to the fore. One family carer told me: "I have heard about pendants, but I don't know about anything else... there is so much of it, it's hard to know where to start." Another said, "I could do with a technology expert... to...talk me through what is best...someone who sits down and listens."



*"I've spent the last six months asking people who draw on care what they want."*

As I continued my research, nine principles around what people want from TEC surfaced:

- 1 Awareness:**  
To know more about the ways technology can meet their needs.
- 2 Independence:**  
Devices and systems that support them to do more for themselves.
- 3 Control:**  
To maintain control over care technology, wherever possible.
- 4 Reassurance:**  
Peace of mind for themselves and their families.
- 5 Seamlessness:**  
Technology that is joined-up and compatible with familiar devices.
- 6 Personalisation:**  
Technology to be tailored to their needs.
- 7 Equal decision-making:**  
A say in the design and functionality of technology.
- 8 Support:**  
Help, advice and training if they struggle with technology.
- 9 Privacy and Security:**  
Reassurance around online safety and data autonomy.

You can read about my research in the TEC Action Alliance's report, 'Implementing TEC so we can all live gloriously ordinary lives'<sup>1</sup> and more detailed findings are here.<sup>2</sup>

My hope is that these principles are adopted by councils, care and housing organisations when they procure care technology, so suppliers respond to what people really want from TEC – not what they think they want.

 @TSAVoice  
 [tec-action.org.uk](https://tec-action.org.uk)

<sup>1</sup>[www.tec-action.org.uk/implementing-tec-so-we-can-all-live-gloriously-ordinary-lives/](https://www.tec-action.org.uk/implementing-tec-so-we-can-all-live-gloriously-ordinary-lives/)

<sup>2</sup>[www.tec-action.org.uk/wp-content/uploads/2024/01/SarahAldenImplementingTechnology-V-FINAL-240124.pdf](https://www.tec-action.org.uk/wp-content/uploads/2024/01/SarahAldenImplementingTechnology-V-FINAL-240124.pdf)

# A happy future for co-production



**In the realm of social care, the term “co-production” has emerged as a powerful concept, emphasising the collaborative efforts between professionals**

**and the individuals they serve.**

Meet Cassie Vasey, Administration Manager at Happy Futures Support Specialists in Scarborough, a supported living care provider who support individuals with a learning disability and autistic people.



Cassie Vasey

The Shadow Quality Group meet once a month and the meetings usually involve discussions and activities around a quality theme. The agenda also includes the 5 CQC standards to ensure that the meeting is meaningful for all involved. The group have co-produced the company’s Quality ‘I’ Statements, a document that confirms what the individuals expect from their support staff, and Happy Futures and how the individual wants to be involved in their care. The document works alongside the Quality ‘We’ Statements



**BELONGING**

**INCLUSION**

which is an agreement from the company of what it will do to ensure that a high standard

of care is given to the individual from all staff, whatever their role at Happy Futures. The group also complete quality audits, create easy read information booklets, as well as organising events, such as a party for the King’s Coronation last year which involved a weekend of activities, afternoon tea and a gathering with family and friends.

Cassie’s passion and drive to ensure inclusion at every level of the organisation is truly inspiring to all around her. By cultivating an environment where differences are not just tolerated but embraced, Cassie and the team at Happy Futures create a sense of belonging and acceptance that is truly transformative.

**DIVERSITY**

**EQUITY**

**CO-PRODUCTION**

care, experiences, and environment they live in. Cassie strongly believes that inclusion isn’t just a buzzword but a guiding principle in every interaction with an individual to assist them with decision making.

At Happy Futures, inclusion and co-production is ingrained in all daily practices, to ensure that individuals express their views and contribute to their care and development of the service. This is through the use of easy read social stories, PEC boards, information booklets and daily board planners in individuals’ homes as well as a Shadow Quality Group which Cassie created with the Business Unit Head, Registered Manager and an individual who is the co-chair of the meetings.

*“Inclusion isn’t just a buzzword but a guiding principle in every interaction.”*

*“Cassie’s passion and drive to ensure inclusion at every level of the organisation is truly inspiring to all around her.”*



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# Chris martial the art of caring



**Meet Chris Guest, a Customer Relationships Manager at Blenheim House, part of the Berkley Care Group, who's journey working in the entertainment industry and running a martial arts academy, led him to a career in care.**



Chris Guest

Having graduated from Staffordshire University with a Masters degree, Chris became part of a thriving entertainment agency in the north of England, managing festivals and events which saw appearances such as Mohammed Ali, Archbishop Desmond Tutu, and numerous musical artists entertain audiences in their thousands.

At the same time he also opened a successful martial arts academy which helped disadvantaged people find balance and a place in their community, a position he has won numerous awards for as well as becoming a Sports Personality of the Year for his work with hard to engage communities.

With this exciting and fast paced life it came as a surprise to Chris' friends and family that he was to relocate to Wiltshire to work in a care home.

After years of owning 2 successful businesses and working long hours Chris began to look at relocating closer to the south coast, he felt a new change of pace was needed as he entered his 40's, and when offered the role of Lifestyle and Events Manager at Blenheim House in 2019 he relocated to Melksham, a farming town in Wiltshire.

Chris quickly gained National recognition for the home through a series of unique and eye catching projects to engage the homes residents. He was acutely aware that activities within the home had a direct impact on the health and wellbeing of it's residents and was a key contributor to Continue Being Me, a comprehensive guide to running activities and social interactions, engaging the mind, body and soul of the residents on an individual, person centered basis.

*“He was acutely aware that activities within the home had a direct impact on the health and wellbeing.”*

*“It is through his extensive community work that he has won numerous awards for the home.”*

Chris found that although the home had a large amount of enquiries the occupancy remained in the mid 60's and he volunteered his skills to see if he could increase the admission rate by taking over the tours of the home and following the enquiries through. In 2022 the home became full at 85 residents, for the first time in the homes 13 years, and continues a healthy 90%+ occupancy, having won a Top 20 Care Home Award for the fourth year running and maintaining a consistent 10/10 rating on Carehome.co.uk for those years.

Building relationships in the community to discuss elderly care was one of his first actions, and this continues to be an important part of his role to this day. Chris holds regular stalls and meet and greets across Wiltshire, he supports community events to make sure the home is visible and feels these relationships with the community are vital when families are seeking a care home for their loved on. It is through his extensive community work that he has won numerous awards for the home, and gaining Highly Commended recognition at the 2023 Great British Care Awards.

At the same time Chris was keen to increase the reviews and ratings of the home, as he knew families would be looking at real-life testimonials amid a town with many care homes, he knew that Blenheim House needed to be set apart from the others and that reviews from within the home would greatly increase this.

Chris takes the enquirer through from the initial stages all the way to admission. This is often an emotionally challenging role as he will be supporting relatives who feel they may be losing their partner, or there is family guilt at placing a relative in care. Once a family agrees on a stay at Blenheim House Chris works with the family to ensure they have everything they need, and maintains this relationship throughout their loved ones stay at the home- and often long after wards too.

Chris will often work with other departments in the home to look for improvements, or special moments that the homes residents could experience. He understands that leaving a lasting memory for residents on respite stays lead to repeat bookings and often permanent stays. He will venture into the community to deliver breakfasts to emergency workers, and supports local elderly clubs with resources that their finances cannot reach.




**“Chris had a successful martial arts academy which helped disadvantaged people find balance and a place in their community.”**

Chris was recently nominated for Community Engagement Person of the Year, and received some wonderful comments which he feels motivates him in his work.

*“Thank you so much for supporting me and my family with our mum’s journey from her treasured home into Blenheim House. It would never have happened without you”*

*“Thank you from the bottom of our hearts, my father thinks you’re great and when we really needed someone to help us you shone through.”*

 [berkleycaregroup.co.uk](http://berkleycaregroup.co.uk)

# Grease is the word for Darren!

**When Darren, a 50-year-old with a learning disability, first moved to his supported living service in Staffordshire run by national charity, Ambient Support, his Team Leader was keen to understand his likes and interests.**

*“Interacting with the other mechanics has given him a good sense of routine and independence.”*

It was soon discovered that Darren was very passionate about motorbikes and mechanics and so the team enquired at the local garage as to whether Darren could trial voluntary work for one day a week. The garage agreed and Darren has been volunteering at DK Motorcycles for around three years now and is thriving in the workplace environment.

Darren has built a good working relationship with his manager at DK Motorcycles, Matt, and helps him to strip bike parts and place them onto the internet to sell. He also enjoys the comradery and sits and has lunch in the canteen. Darren's confidence has grown considerably and he always returns cheerfully at the end of his working day.

**Darren says:**

*“Working at DK Motorcycles is really fun. I enjoy working with Matt and he has become a good friend. He has shown me how to use tools and strip and clean bike parts. When I go to work, I like to look at the race bikes. There are about a thousand bikes in the showroom and it is amazing!”*

Darren is not paid but he is a willing and enthusiastic volunteer at the garage which gives him flexibility and suits his personal needs.

**Matt Cartlidge, Mechanic at DK Motorcycles, says:**

*“Darren has been working with me for three years now, he helps with a lot of jobs in the workshop, such as cleaning various bike parts ready for reselling. Occasionally, he goes around the main display room and polishes the bikes that are for sale. I enjoy teaching him about what the various parts of engines do. I think it's good for Darren to interact with the other mechanics in the workshop, it's given him a good sense of routine and independence. I believe it's positive for his mental health and working here has boosted Darren's confidence. I also think it encourages the wider team to be more understanding and accepting of people with a learning disability and helps to encourage engagement. We really enjoy seeing Darren each week.”*

Darren's Learning Disability Supported Living Service in Staffordshire provides 24-hours support for him and two other individuals and is a good example of exceptional person-centered care.

**Vicky Morris, Head of Quality at Ambient Support says:**

*“Our Learning Disability service in Staffordshire is an excellent example of Ambient Support's exceptional person-centered care approach. The People We Support (PWS) are involved in all decision-making processes and at their request, given more responsibility to help manage their home- from looking after pets to growing vegetables in the garden- which encourages independence and boosts confidence.*

*“Darren's volunteering work shows the importance of understanding people's preferences, their life interests and then turning that into a reality to ensure good quality of life. We're extremely proud of our care teams and their hard work.”*



**Darren** has a keen interest in motorbikes - his favourite bike is a Kawasaki Ninja and he has met his idol, John McGuinness a Tourist Trophy races (TT) rider.

 @ambientsupport  
 ambient.org.uk

# The suds of success

**From Laundry Assistant to Director of Digital Transformation, we share Alvin Singelee's remarkable career journey with Excelcare.**



Alvin Singelee

Alvin Singelee has been an integral part of the Excelcare family since 2008, leaving an indelible mark through various roles he has taken on within the organisation. Following a recent company restructuring, Alvin has been entrusted with the pivotal role of spearheading Excelcare's development of systems as the newly appointed Director of Digital Transformation.

Alvin's journey with Excelcare began with part-time work at the Rainforest Café in London while supporting chefs with mealtime preparations. Balancing this role with studies for a BA Hons in Digital Media, he then transitioned to roles within Excelcare, starting at Limetree Care Home as a Laundry Assistant and part-time Receptionist. Over time, he advanced to become the Home Administrator at Queens Oak Care Home before joining the London Maintenance Team in 2011 as the Maintenance Administrator.

Throughout his seven-year tenure with the Maintenance Team, Alvin progressed to roles including Maintenance Supervisor and eventually Maintenance Manager for the region. However, reflecting on his digital media background and the desire to apply his skills, he approached Sam Manning, Excelcare's Chief Operating Officer, seeking new career opportunities within the organization.

Sam offered Alvin a position in the Lifestyle and Innovation team, where he served as a Project Lead. In this role, Alvin had the opportunity to leverage his digital media expertise, contributing to projects such as Radar and Aplyss, which aimed to enhance the digital systems used across Excelcare's care homes.

The onset of the COVID-19 pandemic prompted a renewed focus on digital systems within Excelcare. Alvin's expertise proved invaluable as he contributed to the formation of the Digital Transformation Team in 2020. Over the following years, he led the implementation of crucial software, including Radar and Atlas eMar, across Excelcare's care homes.

In recognition of his contributions and commitment to excellence, Alvin was promoted to Head of Digital Transformation, tasked with ensuring the optimal performance of Excelcare's digital systems. In March 2024, he ascended to the role of Director of Digital Transformation, where he will lead efforts to further strengthen Excelcare's digital transformation initiatives. When asked about his career progression with Excelcare Alvin said:

*"I want to thank the amazing people I have worked with and the opportunities I have been offered. I wouldn't be here without the ongoing support of my directors and the people along the way who have helped me to challenge myself."*

Looking ahead, Alvin is excited to continue collaborating with Excelcare's care services to leverage innovative technologies, ultimately advancing the quality of care in alignment with Excelcare's vision.

***"When I was a Laundry Assistant at 19, I never thought that 15 years later I would be the Director of Digital Transformation."***

In response to his recent promotion to director, Alvin said:

*"In two words, excitement and accomplishment. When I was a Laundry Assistant at 19, I never thought that 15 years later I would be the Director of Digital Transformation. I enjoyed a moment of reflection and looking back on my journey so far, but there is still so much more to come!"*

 @excelcareuk  
 excelcareholdings.com



## CO-PRODUCTION COUNTS!

# The road to co-production Where family matters at every Avenue

**Doing things together has always been integral to the way Avenues, a social care charity supporting autistic people and people with learning disabilities and acquired brain injuries, works.**



Mullett family with their support worker

Listening to the views and opinions of people supported and their families and friends is fundamental to good support. Indeed, co-production is a pivotal part of the charity's five-year strategy, launched in 2021 and significantly titled 'Building better lives together'. In 2022 a period of renewed investment and awareness in co-production began across the organisation.

With a new Manager of Co-Production at the helm, among the changes were the formation of local engagement groups for the people we support and, in that year, the creation of the Family Matters group.

The aim of the Family Matters Group is to provide a real voice for families, carers and friends in the work that Avenues does, so their perspective is included in everything we do. The group consists of 'family members' and senior members of Avenues staff, including the Chief Executive. They meet every three months.

Mandy Mullett is the mother of two young women supported by Avenues. The Family Matters group gives her and her husband a chance to pass on valuable knowledge to the Avenues team and others:

*"As parents we wanted to continue to be involved in the lives of our daughters, and as we have a lot of 'lived experience', we wanted to have the opportunity to share this experience with other families who found themselves in the same situation as us. We know that thinking about a family members' future can bring heartache and anxiety,"* says Mandy.

In 2023 the Family Charter was co-produced with members of the group, setting out Avenues' commitment to families as well as expectations of them. Other projects include liaising with the recruitment team to write new interview questions for support workers.

*"Family Matters gives us the opportunity to be engaged from the start in decision making, and provides a platform to have the voices, opinions and thoughts of families heard"* says Mandy.

For Mandy and others like Chris Howell, whose family member is also supported by Avenues, having senior decision makers from Avenues meet together with family is hugely beneficial: *"I want to understand and support the people Avenues cares for, to listen to their opinions and ideas and help them to achieve change. Having people attend this group from different areas of Avenues brings different ideas and opinions to the group which is great,"* says Chris.

The group also gives the family members an added awareness of the pressures of working in social care: *"Being a part of the Family Matters group has helped me to get to know the Avenues senior staff and to understand just how hard they work. They all have the same high expectations we as families have. As an organisation, they genuinely care about the people they support,"* says Mandy.

There is no doubt about the transformative effects of working together:

*"Co-Production is so important in social care; it's not just a set of principles but changing how care is delivered. It's about everyone working together, those who deliver care, and those who receive it. It proves that everyone's ideas and experiences matter."* says Mandy.

It's something echoed by Chris:

*"I feel very privileged to be part of this group and to have the opportunity to help people supported by Avenues to live their lives to the full,"* says Chris.

Co-Production Manager Cressida Rapela is looking forward to the future: *"I'm really excited. It's really great to see everyone in a meeting together, people we support, families and others in the organisation. Sometimes there's no filter, which is great because we really get to know what everyone thinks. It's brilliant."*



Mum and her daughters **Tori and Emily**

If you would like to find out more about Avenues' Family Matters group please see [www.avenuesgroup.org.uk/our-support/family-matters/](http://www.avenuesgroup.org.uk/our-support/family-matters/)

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## WHAT KEEPS ME



## AWAKE AT NIGHT

**Joanne Balmer BEM, Chief Executive at residential care provider Oakland Care, shares her thoughts on the current state of social care and hopes for the future.**

Against the backdrop of the pandemic the social care sector has a lot to be proud of. The care sector demonstrated resilience, dedication, and imagination in the face of these challenges, and from here we have collectively emerged in a better and stronger position than before.

Indeed, occupancy levels in care homes have largely recovered or risen. Meanwhile, good progress has been made with workforce recruitment and development, with an upsurge of a wide range of innovative labour models and career growth programmes which has elevated the image of working in care. As a result, we are seeing higher levels of recruitment, better retention, and consistent quality of care being delivered to residents up and down the country.

The sector has also witnessed an increasing interest in the sector driving positive environmental change. Many care providers are starting to build frameworks and action plans to reduce their carbon footprint – an area that I have been proud to share my knowledge and experience of with other providers. Indeed, at Oakland Care, we are continuing to lead the way as a carbon neutral care group with an array of initiatives, and construction set to commence on our first net zero home.

Providers should keep the focus and deliver on their sustainability commitments. It is essential to engage the workforce through a bottom-up, not a top-down approach. I have found that many team members, residents, and relatives relish the opportunity to be involved in delivering environmental change for the future.

I would also advise providers to not be too focussed on sustainability changes that require heavy financial investment. There is a lot that can be done to improve your footprint with little cost, such as litter-picks, recycling programmes and tree planting.

SMART plans are an important part of monitoring change. Start by developing a 12-month plan with practical and achievable goals. For example, taking a baseline assessment of your carbon footprint so you know where you are starting from and setting five focussed actions that will help reduce your footprint.

Despite these positive signs of progress there do remain challenges. The current economic climate is among the biggest, with providers tasked with managing rising costs which reduces their ability to invest funds in new innovations and technologies.

Meanwhile, those who are reliant on a high proportion of local authority funding are having to deal with late payments for residents and negligible, slow, fee rate increases by some councils, which is putting added strain on those providers.

To help alleviate this, I would welcome a new national agreement on annual fee setting. By ensuring all local authorities communicate and implement fee rates within an agreed time period each year, providers will then have the financial certainty to plan accordingly. At present, many councils simply don't make decisions on this until halfway through the financial year (or later) which is unsustainable for many providers.

I worry that, after the sectors recent progress, these economic challenges are impacting some providers' abilities to offer competitive and innovative opportunities to team members. It is imperative that we continue to prioritise this through effective and pioneering strategies.

The development of internal training pathway programmes can offer an excellent route for growth. At Oakland Care, we have found success through this process with an Assistant Practitioner Development Programme which supports the development of Senior Care Assistants, a bespoke Leadership Development Programme for aspiring leaders, and numerous accredited learning courses.

Greater collaboration between the NHS and social care could also be beneficial. Integrated practical learning opportunities would be useful. For example, a district nurse coming to work in a care home for a month in exchange for a social care nurse. If conducted as part of a development plan with specific goals for learning these work placement exchanges would benefit the NHS, social care, and the public.

We know that these are challenging times for many providers. However, I am confident we will continue to develop into a robust, sustainable social care sector fit for the future.

 @OaklandCare  
 oaklandcare.com

*“Economic challenges are impacting some providers' abilities to offer competitive and innovative opportunities to team members.”*

*“I would welcome a new national agreement on annual fee setting.”*



**Joanne Balmer BEM**  
Chief Executive  
Oakland Care





## ASK THE EXPERTS

# Tackling loneliness

With the release of the Government's 5th annual Tackling Loneliness report\* on the horizon, we are asking a group of stakeholders the question: "5 years on from the initial paper, to what extent has the Tackling Loneliness report been effective in achieving its aims, and how can further improvements be made?"

"Care and support workers play a vital role in supporting people to engage with their communities."



**Liz Jones**  
Policy Director  
National Care Forum

### The Policy Expert

"The 2018 Tackling Loneliness report had a grand vision. Despite a number of funded campaigns focussed on social connection, volunteering and social prescribing it hasn't exactly lived up to that vision. The report recognised the vital role of social care in tackling loneliness by working with people, communities and other partners to connect people so they could live their best lives, and referenced the government social care reform ambitions, which have mainly been delayed or cancelled. In our view, the government is neglecting one of its most powerful tools in tackling loneliness - a properly funded and sustainable adult social care system. Loneliness overlaps with health and care needs, and care and support workers play a vital role in supporting people to engage with their communities. Adult social care can help build resilient communities, support unpaid carers and enable people to live the lives they want to and can enable the original 2018 vision of building a country where families, friends and communities support one another and where institutions value the human element in their interactions with people."



**Shaleeza Hasham**  
Chief Executive  
Adopt a Grandparent



"The mutual enrichment derived from intergenerational relationships offers a double-edged solution."

### The Intergenerational Expert

"Reflecting on the progress since the inception of the Tackling Loneliness Strategy, we have witnessed commendable strides in addressing loneliness, a condition that knows no age or socioeconomic bounds. The introduction of the Building Connections Fund, alongside the pioneering appointment of a minister dedicated to tackling loneliness, represents a significant commitment to this cause. However, as we look ahead, the necessity to deepen and diversify our approach becomes increasingly clear, particularly through the lens of intergenerational connection. The essence of combating loneliness extends beyond mere numerical reductions in those feeling isolated; it is about enhancing the quality of societal bonds, fostering a culture where intergenerational relationships are not just encouraged but are seen as foundational to our social fabric. The mutual enrichment derived from these relationships offers a double-edged solution: alleviating loneliness while simultaneously bridging societal divides."



**Dr Lis Bolton**  
Health and Care Policy Manager  
Age UK



*“Labelling services ‘for lonely people’ can be unhelpful.”*

**The Charity**

*“There is still a great deal of stigma around loneliness, particularly for older people. Labelling services ‘for lonely people’ can be unhelpful if people are unwilling to admit that they are lonely. We need to think carefully about how we badge our support offers to reach those in need. Whilst there has been some great work in building networks of organisations working together to drive a lasting shift in how we address loneliness, financial pressure over the past few years has led some organisations to cut down the support they are able to provide to older people or withdraw it altogether. Many small organisations depend on funding from local authorities, whose budgets have been cut in recent years while local need has generally continued to grow. The evidence base on loneliness has been growing, but it is often hard to access for people outside of academia. Simple, easy to understand evidence documents and infographics would be invaluable.”*

*“Countless studies show that loneliness increases the risk of dementia.”*



**Tony Stein**  
Chief Executive  
Healthcare Management Solutions

**The Care Home Expert**

*“Sadly, loneliness and social isolation are still not taken as seriously as they should be when considering an individual’s care needs. There is a heavy emphasis on physical health needs and unfortunately, an equally heavy emphasis on cost. Consequently, medical interventions, and attempts to keep people at home with minimal care visits, are too often the solution. Countless studies show that loneliness increases the risk of depression, anxiety, heart disease, stroke and dementia. Seldom, if ever, when an individual is assessed for a care home place, is loneliness considered, and it should be. Operators have known for years of the therapeutic impact of community and, particularly when it involves interactions between the generations. With the loss of community through families moving apart, the decline of the church, a loss of social clubs, when people find themselves alone, often following the death of a loved one, their links to the wider community are severed. Social prescribing, as mentioned in many previous reports, should be at the top of the health agenda.”*



**Martin Jones MBE**  
Chief Executive  
Home Instead UK & International



*“I would like to see more focus on age-friendly technology.”*

**The Home Care Expert**

*“First of all, I commend the government for tackling loneliness. What struck me when reading the report is the limited mention of older people. Perhaps because the DCMS research mentioned in the report found that younger people are more likely to be lonely than people aged over 65. But ageing adults in the population are an increasing trend and so the impact of loneliness in this group is more likely to have a negative economic impact on the health and social care systems in future years; yet no mention in the ‘what’s next’ list. I would also like to see more focus on age-friendly technology as it can do so much to support people to remain connected with loved ones and their local communities. Many of the tools and help mentioned in the report are ‘online hubs’ which are not necessarily accessible to our ageing population.”*

# HAVE YOUR SAY!

## 3 Wishes!

**Justine Millington, Registered Manager, Weaver Lodge Independent Hospital - Alternative Futures Group (AFG)**

Justine Millington is a Registered Manager at Alternative Futures Group's Weaver Lodge. Here are her 3 wishes for the social care sector:



**1 Better funding.**

At AFG, our frontline staff have been awarded a pay rise in line with the Real Living Wage which is amazing, but as I'm sure everyone working in health and social care will agree, this is still not enough for the skilled and critical work they do – so more government funding for our sector would be my first wish.

**2**

**More time in the day.**

My role managing AFG's independent mental health hospital in Cheshire is busy and varied – from providing leadership and guidance to our team of senior nurse practitioners, mental health nurses and support workers, to ensuring we are compliant with Care Quality Commission's standards, to keeping good relationships with patients, families and stakeholders, to liaising with the estates team to ensure the safety of the hospital estate and much more - which leads me on to my final wish...

**3**

**More time with patients.**

Everyone who goes into social care does for the same reason – to help others. Although I know my role is still integral in helping the people we support in their recovery journey, I do miss spending as much face-to-face time with patients as I did as a Support Worker and a mental health nurse, so I try to join as many patient groups as I possibly can!



## In The Spotlight

**Inver House, Hartford Care**

**Fashion, modelling, jet-setting and more! The extraordinary lives of Hartford Care's female residents.**

At Hartford Care's Inver House in Bembridge, Isle of Wight, 95-year-old Heather has been reflecting on her career with fellow residents and care home staff. Heather initially trained in nursing, encouraged by her mother Marjorie to break away from traditional roles for women. When she was 22, Heather was scouted by a modelling agent while traveling on a train. This led her to a glamorous career in London, working for top designers like Dior and traveling to exciting places like Honolulu, Australia, and New York with Sybil Connolly. After that, she moved to Paris, where she worked with Yves Saint Laurent and Givenchy. Heather later returned to nursing in her late 30s before retiring in her mid-50s.



Then there's Pamela Pulfer at Bethel House in Barton on Sea, who founded the New Milton stroke group in 1991. This group became a vital social hub for stroke survivors, thanks to Pamela's leadership, providing support, motivation, and engaging activities.

And finally, Jennifer Butler at Boulters Lock in Maidenhead, who transitioned from nursing to becoming an air stewardess and even delivered a baby during a flight! Each woman's journey is so unique and inspiring, showcasing the truly extraordinary lives they've led!

# Movers & Shakers

## Weston View and Wakefield House Teams, Parklands Care Homes

In March 2023, Parklands Care Homes took over Weston View in Keith and Wakefield House in Cullen with a clear vision: to raise care standards at these homes. Safe to say, through the team's hard work and dedication, this vision has come to fruition! Recently the Care Quality Commission conducted routine inspections at both homes, evaluating them on key criteria like residents' wellbeing, leadership quality, staff performance, home environment, and care planning effectiveness.



At Weston View, inspectors found a positive atmosphere with staff dedicated to residents' needs and improving their experiences. Care plans were detailed and tailored to each person. The report highlighted strong leadership and teamwork, a testament to the management of Shona Conlin.

Meanwhile, Wakefield House, under the leadership of Ruth Smith, showed significant improvements in community engagement and overall morale.

The progress at Weston View and Wakefield House within such a short time reflects the hard work and dedication of everyone at Parklands, especially Shona and Ruth. Their commitment to enhancing residents' lives is truly inspiring!

# Lightbulb Moment

## Think holistically!

### The Team, Oyster Care Homes

At Oyster Care Homes, our team's lightbulb moment is that wellbeing, family, and community are interconnected pillars of quality care. By prioritising these elements, they create an environment where residents feel supported, valued, and empowered to lead fulfilling lives.

The importance of wellbeing, family, and community cannot be understated. Gone are the days of mere physical assistance; quality care should encompass fostering an environment where residents thrive holistically.



Wellbeing should form the foundation of care, where team members prioritise the physical, mental, and emotional health of residents. A holistic approach is essential for overall quality of life. Family is an integral part of the care process. Family members should be actively involved in decision-making and care planning, which underscores the vital role they play in providing support and continuity of care. Community engagement is also important as a means of enriching the lives of residents. Our team facilitate opportunities for residents to participate in community events and activities, fostering social connections and a sense of belonging.

More than anything, our lightbulb moment is that we should all be thinking holistically!



## Now have your say!

Do you have any thoughts you'd care to share? Care Talk want to hear from you! Email [kirsty@care-awards.co.uk](mailto:kirsty@care-awards.co.uk) for the opportunity to appear in upcoming editions.



# Elevating excellence above profit



**Alicia Francois**  
Specialist Services Director  
SweetTree Home Care Services

**Alicia Francois, finalist in last year's Women Achieving Greatness in Social Care Awards, is Specialist Director at SweetTree Home Care Services. Here, Alicia explains how her compassionate approach to leadership empowers others to find their voice.**

*"I sought inspiration from local women who embodied strength and power, fearlessly speaking out."*

Have you ever found yourself in a situation, maybe in a meeting, or at a conference and things just seem to lack a certain clarity? It's not that you don't grasp the discussion—it's just that you sense there's a straightforward solution staring everyone in the face, yet you hesitate to voice it.

Ever ask yourself why? After all, how could your answer be the one that no one else can see? And when you do summon the courage to share your insight, it almost feels to you as though the explanation is too simplistic, and it may even be dismissed. Was it deemed too basic for consideration? And perhaps the original conversation or issue is pivoted to an entirely different topic altogether.

This was a part of my journey entering the health and social care world. I faced the challenge of finding my voice. I sought inspiration from local women who embodied strength and power, fearlessly speaking out. Their example guided me as I navigated how best to make my own voice heard. Observing and listening intently, I identified the key points I wished to carry forward and frequently pondered how best to assert myself with confidence. Even today, reflection remains a cornerstone of my approach.

Among my proudest achievements is the growth and development of our Brain Injury Service. Through tireless dedication and collaboration, we have assisted countless individuals on their journey to independence, to the point where they no longer require our assistance. Each success story is a testament to the unwavering commitment of our team and the transformative impact of personalised care.

Furthermore, my approach to business expansion prioritises quality over profit, sitting with the faith that quality inevitably delivers financial security. We pursue strategic growth strategies that are in alignment with our core values, ensuring that the integrity and quality of our services remain uncompromised, while not always easy has always made me feel right in what I do each day. By embracing this ethos, we not only uphold personalised care standards but also extend our reach to serve a broader demographic in need.

As I look back on my past experiences, I can't help but recall certain moments that stick with me. They were the starting points of a journey toward change and understanding myself better and understanding what I wanted to do differently. These moments helped me to become confident and allowed me to see that in today's complex and rapidly changing world, the right leadership in social care is more vital than ever and that we all have a part to play. Those in leadership in my journey have empowered me to stick by my word, to create strong foundations and a structure that works without that amazing person but to have a meaningful and strong culture that thrives throughout all who work within it and to not be afraid to fail. It is a force for compassion, resilience, and innovation, driving positive change and advocating for those who often go unheard.

So, if you find yourself in that meeting or you encounter those moments of doubt, I would say remember that your voice matters. Trust in your insights, as it could hold the clarity for others. Embrace simplicity, for often the most effective solutions are the ones hiding in plain sight. Let the journey of finding your voice be guided by those who inspire you and fuelled by the courage that you do hold!

 @SweetTreeHCS  
 [sweettree.co.uk](http://sweettree.co.uk)





*“Among my proudest achievements is the growth and development of our Brain Injury Service.”*

Care Talk has a packed agenda of events ahead.  
We are proud to be media partners and supporters for some  
fantastic events listed below.

## Coming up...

### **Housing With Care Awards**

7th June 2024 Hilton Bankside, London

### **The Dementia Care Awards**

13th June 2024 Royal Lancaster Hotel, London

### **Learning Disabilities & Autism Awards**

21st June 2024 ICC, Birmingham

### **The Palliative & End of Life Care Awards**

28th June 2024 Marriott Regent's Park, London

### **Social Care Top 30 Awards**

15th October 2024 Grosvenor Square Hotel, London

### **The Children & Young People Awards**

24th October 2024 ICC, Birmingham

### **Great British Care Regional Awards**

1st November 2024 East of England Milton Keynes Dons

2nd November 2024 West Midlands ICC, Birmingham

6th November 2024 Wales Marriott Cardiff

7th November 2024 North East Grand Hotel Gosforth Park, Newcastle

8th November 2024 Yorkshire & Humberside Royal Armouries, Leeds

9th November 2024 North West Kimpton Clocktower Hotel, Manchester

14th November 2024 South West Ashton Gate, Bristol

15th November 2024 South East Hilton Metropole Hotel, Brighton

16th November 2024 London Hilton Bankside, London

27th November 2024 East Midlands East Midlands Conference Centre, Nottingham

### **Women Achieving Greatness in Social Care Awards**

28th November 2024 Hilton Bankside, London

\*please note: some dates/venues subject to change.

# Recruit2Care

Recruit2Care offers an affordable service that supports social care providers by recruiting talented nurses and care staff from overseas



## INTERNATIONAL RECRUITMENT

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We offer the employer a stress-free, efficient service during the careful shortlisting process.



## RELOCATION

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[www.recruit2care.co.uk](http://www.recruit2care.co.uk)

# Breaking the taboo about poo



Beth Britton

**Beth Britton**  
Trainer and Social Care Consultant



**Rachel Furniss**  
Health and Wellbeing Facilitator  
MacIntyre

**Beth Britton, Trainer and Social Care Consultant chats to Rachel Furniss, Health and Wellbeing Facilitator, MacIntyre, around tackling the taboo of poo, why staff need this knowledge, and how to deliver this in a transformative way.**

The provision of personal care has always meant dealing with poo, and yet a huge taboo still exists around the topic of bowel movements. When the importance of regular pooing isn't understood by staff, fatal consequences can result. The death of Richard Handley, a gentleman with Down's syndrome, in 2012 is one high-profile example. Richard's inquest verdict in 2018<sup>1</sup> concluded he died from constipation complications, with 10kg of faeces having been removed from Richard's body two days before he died.

LeDeR (Learning Disability Mortality Review) referred to constipation in their 'Action from Learning Report 2022/23'<sup>2</sup>

LeDeR commissioned a new Constipation Campaign Toolkit in 2023<sup>3</sup> and MacIntyre's Health Team have increased constipation awareness for their staff by running interactive workshops. I caught up with my colleague, the pioneer of these workshops - Rachel Furniss - MacIntyre's Health and Wellbeing Facilitator, to find out more.

## Why did MacIntyre begin constipation workshops?

### Rachel:

Chris, a person we support, was constipated for over a week because they were waiting for their key worker to come back from annual leave and didn't want to talk to anyone else. On returning to work Chris' keyworker swiftly spoke to Chris' GP and arranged medication, but it raised questions within our Health Team about why Chris, who has a mild learning disability and is otherwise outgoing, was only comfortable talking about this topic with one person. Our concern was that if this could happen with Chris, it could be happening with other people who draw on MacIntyre's support.

Our staff use the Anticipatory Care Calendar<sup>4</sup> but for Chris this just meant staff asking if they'd had a poo and recording their response as 'self-care/unknown'. We talked to Chris and together with their keyworker we designed a constipation awareness workshop called 'Let's talk about poo'

THE BRISTOL STOOL CHART		
Let's Talk		POO!
Type 1 		<b>LOOKS LIKE</b> rabbit droppings separate hard lumps, like nuts
Type 2 		<b>LOOKS LIKE</b> bunch of grapes sausage shaped hard but lumpy
Type 3 		<b>LOOKS LIKE</b> corn on the cob like a sausage with cracks
Type 4 		<b>LOOKS LIKE</b> sausage smooth and soft like a sausage
Type 5 		<b>LOOKS LIKE</b> chicken nuggets soft blobs with clear cut edges
Type 6 		<b>LOOKS LIKE</b> porridge fluffy pieces with ragged edges
Type 7 		<b>LOOKS LIKE</b> gravy Watery no solid pieces, liquid

*“People with a learning disability are at greater risk of constipation.”*

## What content have you included in 'Let's talk about poo'?

### Rachel:

We created slides that were checked by MacIntyre's Learning Disability Nurse, and added some fantastic resources to bring the training alive including:

- The 'Poo Busters' video.<sup>5</sup>
- A chocolate version of the Bristol Stool Chart.
- 'The Trouble with Poo' Beyond Words.<sup>6</sup>
- 'Fishing for Floaters' game (using gravy to symbolise diarrhoea, which can be a lesser-known sign of constipation).
- 'Let's talk poo' graphic.
- A film about Richard Handley. We share this film sensitively to raise awareness of how important it is to recognise changes in bowel pattern.

## How have staff found the 'Let's talk about poo' workshops?

### Rachel:

Our first session was delivered on our fortnightly online call with senior staff. Everyone loved the training and wanted it to be available to all frontline teams. We had an initial plan for a 3-month roll out of 1-hour virtual sessions with a maximum of 20 staff per session; we found demand was high.

The workshops have had lots of positive feedback, including:

“

*I would recommend for all staff to do this training as it is an eye opener and will ensure more vigilance re constipation.*

Alison

”

“

*I found the training very informative and relaxed. I will show the Poo Busters video at our team meetings.*

Adam

”

We currently have dates to run in-house workshops until Summer 2024, and plan to create further resources and provide accessible workshops for people who attend MacIntyre Lifelong Learning. We also track constipation trends and provide service-specific support where needed.

Chris didn't want to co-deliver the workshops but observed and enjoyed the first session. We are looking to find an expert with lived experience within MacIntyre to be a co-trainer.



## What would be your top tips to be more poo aware in all social care services?

### Rachel:

- Make poo part of everyday conversations: "I've had a poo, have you?"
- Use your senses to check a person's pooped: a smell in the bathroom after a person's left or seeing less toilet paper on the roll.
- Observe - Is a person going back and forth to the loo? This could indicate they are struggling to poo.
- If someone is rectal digging, has poo under their fingernails or has smeared poo on surfaces/pants, look more closely at the person, their bowel habits and discuss with their GP.
- Pay attention to diet & exercise – Food should be fibre-rich and encourage water to drink. Bananas can cause constipation so don't eat more than two per day. Exercise frequently to help with digestion.
- Think about positioning on the loo – using a stool can help.
- If a person is on more than three medications that can cause constipation they should be offered a prescribed laxative.

As a postscript to this story... Since working on the constipation awareness training with the Health Team, Chris has come to understand how important it is to tell someone if they can't go to the toilet and now has several members of staff who they would feel comfortable to discuss this with. This is what we're aiming to achieve for everyone who draws on MacIntyre's support.

\* Name changed to protect identity

✉ @bethyb1886 @MeetMacIntyre  
 🌐 bethbritton.com macintyrecharity.org

<sup>1</sup>www.bbc.co.uk/news/uk-england-suffolk-42989091

<sup>2</sup>www.england.nhs.uk/wp-content/uploads/2019/05/action-from-learning.pdf

<sup>3</sup>www.england.nhs.uk/long-read/constipation-campaign-toolkit/

<sup>4</sup>www.macintyrecharity.org/our-approach/health/

<sup>5</sup>www.youtube.com/watch?v=R16WY6MLBBU

<sup>6</sup>www.booksbeyondwords.co.uk/bookshop/trouble-with-poo

<sup>7</sup>www.youtu.be/8Dxh5eLCjKc?si=V0iWYhJHKvkKUGW8

# Attracting and retaining talent

## The **key** to a successful workforce



Recruit2Care

**Joe Desmond**  
Director  
Recruit2Care

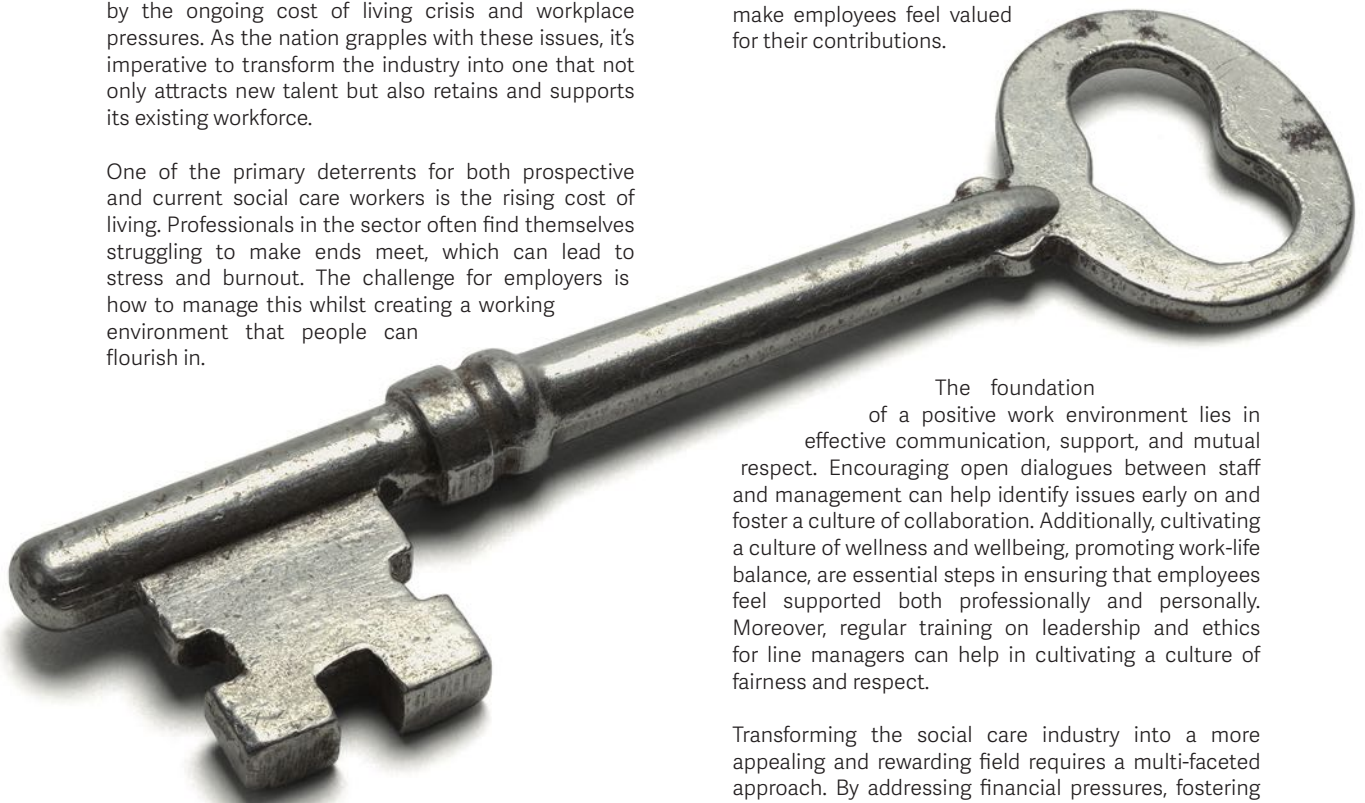
**Joe Desmond, Director at Recruit2Care discusses why making social care a rewarding career is key to recruitment and retention.**

In the UK, the social care sector faces significant challenges in recruitment and retention, compounded by the ongoing cost of living crisis and workplace pressures. As the nation grapples with these issues, it's imperative to transform the industry into one that not only attracts new talent but also retains and supports its existing workforce.

One of the primary deterrents for both prospective and current social care workers is the rising cost of living. Professionals in the sector often find themselves struggling to make ends meet, which can lead to stress and burnout. The challenge for employers is how to manage this whilst creating a working environment that people can flourish in.

Employers could consider implementing measures such as salary enhancements, flexible working arrangements to accommodate personal commitments, and financial wellness programmes. These initiatives can help ease the burden on employees, making their roles more sustainable and appealing.

However, creating a rewarding work experience goes beyond financial incentives. Recognising the hard work and dedication of social care workers is crucial. This can be achieved through a comprehensive reward system that includes both tangible and intangible benefits. Examples might include employee of the month awards, professional development opportunities, and team-building activities. Such gestures can boost morale, foster a sense of belonging, and make employees feel valued for their contributions.



The foundation of a positive work environment lies in effective communication, support, and mutual respect. Encouraging open dialogues between staff and management can help identify issues early on and foster a culture of collaboration. Additionally, cultivating a culture of wellness and wellbeing, promoting work-life balance, are essential steps in ensuring that employees feel supported both professionally and personally. Moreover, regular training on leadership and ethics for line managers can help in cultivating a culture of fairness and respect.

Transforming the social care industry into a more appealing and rewarding field requires a multi-faceted approach. By addressing financial pressures, fostering a positive workplace culture, and recognising the hard work of care workers, employers can not only attract new talent but also ensure that their current employees feel valued and supported. As the sector moves forward, it is crucial social care builds a more resilient and compassionate working environment.

For those seeking knowledgeable assistance or guidance on navigating these challenges, Joe Desmond invites businesses to reach out for support. Email Joe at [joe@recruit2care.co.uk](mailto:joe@recruit2care.co.uk)

*“The foundation of a positive work environment lies in effective communication, support, and mutual respect.”*

 [recruit2care.co.uk](https://recruit2care.co.uk)  
 [email icon: joe@recruit2care.co.uk](mailto:joe@recruit2care.co.uk)

# This month, *Kirsty meets...*



**Kirsty Hollins**  
Communications Executive  
Care Talk

Each month I meet key stakeholders and business leaders in the social care sector. This month I met Mitchell Miller, Chief Executive at Astute Home Care. I caught up with Mitchell to discuss spinal injury, the right to equitable care at home, and the importance of advocacy efforts in ensuring this right.

### So Mitchell, can you tell us a little about Astute Home Care?

I founded Astute with the simple idea that people living with spinal injuries and physical health conditions have the right to access equitable care at home. Our service specialises in providing 24-hour live-in care at home for people living with spinal injuries and other physical health conditions. We provide care professionals who are trained in delegated healthcare activities such as bowel care and catheter management, and they are supervised by our own in-house clinical director, who is an experienced registered nurse.

### Care for those living with spinal injury forms a specific focus of your work – what drew you to this area of the sector?

I've served on the board of the UK's largest advocacy charity for four and a half years, witnessing firsthand the pervasive inequality in our society. According to the Spinal Injury Association, over 50,000 people live with spinal injuries in the UK, with approximately 2,500 new cases each year. As the UK's population grows, strain on the healthcare system worsens, which leads to a worrying trend of declining years free from disability, as highlighted by the Office for National Statistics.

With my decade of social care experience, I've observed significant challenges for people with spinal injuries, especially in accessing community services. Unequal distribution of care funding is a major issue, with spinal injuries receiving less attention and support due to lower public awareness and NHS cuts. Addressing these discrepancies is crucial for ensuring equitable care, requiring advocacy efforts for awareness, improved service access, and fair funding allocation.

I'm deeply passionate about addressing this inequality by enabling individuals with chronic health conditions to lead fulfilling lives in the community. Through my involvement in the charity and my work with Astute Home Care, I advocate for accessible, equitable care and support services that foster independence and dignity. It's crucial to strive for a society where everyone, regardless of ability, can thrive and contribute meaningfully.



**Mitchell Miller**  
Chief Executive  
Astute Home Care

### Public awareness of spinal injury clearly plays a major role in addressing this inequality. Can you expand upon the ways in which bowel care is specifically implicated?

Breaking the taboo around bowel care is crucial for an inclusive society. Many with spinal injuries require this care, necessitating a nurse or skilled care professional. Without it, issues like constipation, incontinence, and discomfort can lead to serious health problems such as bowel obstruction and infections, impacting mobility, social life, and independence, sometimes resulting in hospitalisation.

*“People living with spinal injuries have the right to access equitable care at home.”*

Greater education and awareness are needed to normalise discussions and reduce stigmas surrounding bowel care, while open communication in families and healthcare settings is essential. Advocating for policy changes to prioritise these needs, which I believe constitute a basic human right often overlooked, are crucial. Peer support networks by the SIA offer emotional and practical help. With these efforts, we can break the taboo and ensure everyone receives the care they need.

Charities like the Spinal Injuries Association, with their 'This is #SeriousSh1t' campaign, are thankfully addressing these issues. Shockingly, according to the SIA's latest research, 26 NHS trusts admitted they had no bowel assessment and management policy in place at all, with 40 NHS trusts stating they had no ward-based staff skilled in supporting these patients if admitted.

**Sign the 'This is #SeriousSh1t' petition to require bowel care policies and specialist bowel care at all NHS hospitals:**



[linkedin.com/in/mrmiller/](https://www.linkedin.com/in/mrmiller/)  
[astutehomecare.co.uk](http://astutehomecare.co.uk)

# Enhancing compliance with the Mental Capacity Act through circles of support

**Pete Crane**

Parent and advocate and  
campaigner of inclusion

**Pete Crane is a parent, campaigner for inclusion and an advocate of Community Circles, a membership organisation that fosters connections to improve lives. Here Pete explores how to comply with the 2005 Mental Capacity Act in a straightforward, and cost-effective manner and the role of a circle of support.**

We all have to follow the Law. We may not like it, we may not agree with it, but it is the Law – and if you break the Law there will be consequences.

The basic premise of the 2005 Mental Capacity Act is clear: Engaging in harmful actions towards vulnerable individuals can have severe consequences.

The Act is typically the legal framework utilised to prosecute individuals who have perpetrated abuse in care settings. In instances of public scandal related to care facilities, criminal prosecutions often ensue under the 2005 Mental Capacity Act. Conviction of such crimes can have life changing consequences for the individuals involved.

*“The Act is the legal framework utilised to prosecute individuals who have perpetrated abuse in care settings.”*



So, the question is, in this time of austerity, amid significant strain on both NHS and social care, and with many Local Authorities struggling to find adequate funding to meet their legal obligations...

“

*How can you make sure that you comply with the law in a common sense, straight forward and economic way?*

”

The key is to understand that, because we are discussing “The Law,” evidence is paramount. You may face consequences if there is evidence of law-breaking, whereas having evidence of consistently acting in the “best interests” of the individuals in question can mitigate any issues.

We often believe that our personal opinions will serve as strong evidence to justify our actions. However, in practice, under the 2005 Mental Capacity Act, the Court of Protection is where your evidence will be evaluated. The Court prioritises reviewing whether discussions, consultations, and, most crucially, the inclusion of the individual at the centre of any care situation have occurred meaningfully. So, how can we ensure this in practice?

My preference has always been to use a ‘circle of support’ – a generic term of course, that simply means a support system for individuals who seek and require organised support in their life.

*“A ‘circle of support’ simply means a support system for individuals who seek and require organised support in their life.”*

There is no right or wrong way to set up and run a circle of support but here are my suggestions for you to consider.

- 1 Of course we’re discussing vulnerable individuals, so the initial step should involve asking the person (typically referred to as the ‘focus person’ within circle terminology), or their advocate if they’re unable to speak for themselves, if they are interested in participating in a circle of support to potentially enhance their quality of life.
- 2 The next step is to determine the optimal means for individuals familiar with the person to share knowledge, ideas, and practical tips aimed at enhancing the well-being of all involved, whether through face-to-face or virtual computer-based meetings.
- 3 Who wants to be involved? From the perspective of the Court of Protection, evidence indicating the involvement of the person, their family network, or, if no family exists, any unpaid friends, alongside professional support, will significantly bolster the evidence of decisions made by this collective group of individuals.
- 4 Just to remind you - this is all about creating evidence of good care and a sound decision making process for the focus person. Therefore, maintaining an agreed record of each meeting is crucial for demonstrating compliance with the 2005 Mental Capacity Act. If this record can be owned by the focus person and kept by them (or by the person who typically acts on their behalf), then over time, a coherent and easily accessible record of decisions made - including why, how, what worked, what did not work, and future plans - will become available to anyone involved in making ‘best interest’ decisions.
- 5 You will find this evidence base becomes very useful when discussing care funding needs. The more individuals involved in the circle of support, including the person, family, friends, and professionals, the stronger the funding request will become, as they share knowledge of effective care solutions.

# Take notice!

## If the CQC proposes, you do not need to accept



**ACUITY  
LAW.**

**Jenny Wilde**  
Partner  
Acuity Law

**Jenny Wilde, Partner at Acuity Law, discusses the evolving landscape of Care Quality Commission enforcement actions and their impact on care providers, focusing on the “slow process”.**

*“Under the “slow process” of enforcement action the CQC will issue a “Notice of Proposal.”*”

In recent years there has been a notable increase in the level of enforcement action taken by the Care Quality Commission (“CQC”). This can be directly linked to the CQC’s shift to risk-based regulation. There are a number of levels of enforcement action available to the CQC. The action can be executed on an urgent basis (which is used in the most serious of cases under Section 31 Health and Social Care Act 2008) or using the more common “slow” process. This article will focus solely on enforcement action taken on the “slow process”.

Under the “slow process” of enforcement action the CQC will issue to the provider a “Notice of Proposal” letter. This will indicate that the regulator intends to take steps to cancel a registration, remove a location from a registration or vary the conditions of a registration in some other way.

At this stage the provider needs to understand that the action described in the correspondence is simply a **proposal** and that no action has yet been taken (unlike in Section 31 cases where a decision will take immediate effect). The letter will set out information on which the CQC seeks to rely to justify the action that it wishes to take. This is likely to be an account of a recent inspection where concerns have been found.

Providers should spend time reflecting on the contents of the Notice of Proposal and establishing their position in relation to what the CQC are alleging. Providers will note at the end of the Notice of Proposal that the CQC gives them 28 days to make a response to the correspondence. If, at the end of that 28-day period, no response is submitted, the Notice of Proposal will automatically convert to being a Decision and it will take immediate effect. This essentially means that the proposed action is executed and the only way that the

provider can appeal that Decision is through the First Tier (Care Standards) Tribunal.

As such, it is absolutely critical that robust representations are submitted within this timeframe, whether a provider agrees with the contents of the Notice of Proposal or not. Given the very high stakes of the enforcement action (e.g. the continuation of the business’ registration), it is crucial to take detailed and expert advice on how to robustly and effectively convey your position.

It is important for providers to understand that if the enforcement action did proceed to the aforementioned Tribunal then the panel considering the case would be largely concerned with the position of the service as it is on the day of the hearing, rather than what it was at the time of inspection on which the CQC relies as its main body of evidence. At the time of writing, Tribunals are being heard around 6-9 months after an appeal is lodged, meaning the position could be completely different to how the service was perceived by the CQC at the offending inspection. As such, if the provider accepts that there were deficiencies in its service then it can produce a response to the Notice of Proposal demonstrating the action that it has taken and will take to remedy the issues. This could be enough to persuade the CQC not to adopt the Notice of Proposal or if the regulator decides to adopt the Notice of Proposal in any event, it will show the Tribunal that the provider was proactive in making changes quickly.

Essentially, in its response to the Notice of Proposal, the provider is attempting to persuade the CQC that it is neither reasonable nor proportionate to take this serious enforcement action.

After considering the representations, the CQC will serve a Notice of Decision, which will either confirm that no further action will be taken in respect of the action or uphold its proposal to cancel or amend the registration (which essentially means that the representations have been rejected).

In the event that Notice of Proposal is adopted and a Decision to take the intended action issued, this is still not the end of the road for the provider.

At this point, the process moves away from the CQC and the provider has the option to appeal to the Tribunal, independent to the regulator. The provider has 28 days from the date of the Decision to submit such an appeal. If no appeal is submitted by the provider, then the action cited in the Decision takes effect on the 29th day and the registration will either end or be amended as per the Decision. However, if an appeal is submitted to the Tribunal within the set period, the registration will continue as normal until a Tribunal orders otherwise. This illustrates how important it is to put in representations at every possible stage. The business can carry on as usual during this period and every day that passes where the service improves will be useful evidence to the Tribunal in making the Decision more remote and historical in its relevance.



In my experience, most appeals do not make it to a final hearing. During the aforementioned 6–9-month period and through the appeal documents and witness statements, the provider can illustrate the changes that have been made and implore the CQC to return to inspect to avoid the final hearing. This is done on the basis that the CQC’s action is no longer necessary because the position of the service has changed so drastically. In most cases where improvements are significant and sustained (and verified through a CQC inspection), the regulator will withdraw its opposition to an appeal and the action falls away. This negotiation must be done with caution and under the advice of a legal representative who can assist with building arguments and help to guide a provider on what the most compelling evidence looks like.

On many occasions I have been contacted by providers who have missed the opportunity to respond to a Notice of Proposal, not understanding what it meant or how important it was to put their position forward.

In those cases, they enter straight into the appeals process and can still take their opportunity to put their case forward -however, this is now through formal legal proceedings rather than in representations to the CQC.

If providers are faced with this type of enforcement action then they should treat it with the utmost seriousness. I have seen providers’ own attempts at responding to proposals which simply haven’t done enough to convince the CQC that the action isn’t warranted. Responses need to be comprehensive and supported by evidence. Registrations and therefore businesses are at risk and if costly and time-consuming appeals can be avoided then more resource can be directed to making necessary improvements (where needed).

If the basis on which the enforcement action is being taken is not accurate, then this can also be challenged through the representation stage and relevant evidence provided to the CQC to counter the assertions. A provider’s true position should be reflected at every given opportunity or it will be assumed that the provider is in agreement with whatever position the CQC is putting forward. This will become more relevant when the service users, stakeholders and press become aware of the action that is being taken by the CQC.

Being reflective, proactive and detailed is hugely beneficial in these types of proceedings. The most important message that providers should take from this article is that engagement at the earliest opportunity is vital and investment in detailed representations will go a long way to limiting more averting a final hearing where a registration hangs in the balance.

*“Being reflective, proactive and detailed is hugely beneficial in these types of proceedings.”*

For any advice on this or any other type of CQC enforcement action, contact Jenny Wilde on **07581 063602** or by email at [Jenny.Wilde@acuitylaw.com](mailto:Jenny.Wilde@acuitylaw.com)

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