

Scrutiny Report

Care Work as a Career

March 2020

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Foreword

The world has changed since our Task Group reached the end of its five-month scrutiny review as to how the Council could promote and improve recruitment and career prospects for front-line care workers and better support and celebrate the current care workforce. The intimate personal service and support that they give to vulnerable individuals did not appear to be widely valued by members of the public. Clear career pathways and training opportunities to enable them to progress were limited and rewards and recognition were low.

Our report was completed just before the Covid-19 pandemic turned our whole world upside down, shining a spotlight onto the NHS and the social care sector. The commitment, determination and fortitude that these employees have shown carrying out their duties has led to the whole nation pouring out its gratitude and respect. We recognise that the vital role that care workers carry out has been brought to the fore in a way which none of us could ever have predicted, however, we also feel that it makes our findings even more important and relevant. Surely, this is an ideal time to enhance the career prospects for our front-line care workers and to ensure that the value and potential job satisfaction of their day to day work is embedded within the public's understanding.

The Task Group recognised that budget constraints meant it would be more productive to concentrate our efforts on where we could best make a difference rather than spend much time working up recommendations on pay and job evaluation criteria. The low pay is clearly an important cause of recruitment and esteem problems; however, care workers spoke warmly of the rewarding relationships they formed supporting their clients and our recommendations concentrate on other ways of increasing the attractiveness of this type of work as a fulfilling career.

I would like to thank my fellow members of the Care Work as a Career Task Group, each one of us brought a different and valuable perspective to our subject. I would also like to thank the Scrutiny Officers, Samantha Morris and Alison Spall, who have worked so hard to help us establish contacts, stick to the core subject and ensure our recommendations are properly grounded in evidence. I thank all the people we met, from within the Council and the wider care sector, who gave up their time to meet with us and explain the reality and challenges from their own perspective. Lastly, I thank the then Interim Strategic Director of People and the Cabinet Member with Responsibility for Adult Social Care for their availability, generosity of time, and help in clearing up any misunderstandings throughout the exercise.

Councillor Liz Tucker

Lead Member of the Care Work as a Career Scrutiny Task Group

Care Work as a Career

Background and Purpose of the Scrutiny

1. At its meeting on [14 February 2019](#), the Council agreed the following Motion:
"Council acknowledges and respects the 15,000 Worcestershire residents who work in the care industry. Many more residents are dependent upon their care. Council asks the Cabinet Member Responsible to consider ways in which their work can be celebrated and encouraged and how more people can consider care work as a viable career option."
2. The Cabinet Member with Responsibility (CMR) for Adult Social Care suggested a Scrutiny Task Group be established with the Terms of Reference set out below. The Overview and Scrutiny Performance Board (OSPB) agreed at its meeting on [28 March 2019](#) that a Scrutiny Task Group would be set up to scrutinise this issue, led by Councillor Liz Tucker. The Scrutiny Task Group commenced its work in October 2019.

Terms of Reference

3. The terms of reference for the Scrutiny were to investigate:
 - How the Council can promote and develop care work as a career
 - How the existing care workforce can be better supported and celebrated
4. The Scope of the Scrutiny is detailed at Appendix 1.

The Task Group's approach

5. Evidence has been gathered from a variety of sources, including Officers of Worcestershire County Council (the Council), the CMR for Adult Social Care, the owner of a company providing Residential Care Homes, the Managing Director and Caregiver from an agency providing domiciliary care, Unison Representatives and the Locality Manager (Midlands) from Skills for Care (SFC).
6. Visits by the Task Group were also made to Kidderminster College to find about their social care courses and apprenticeships and their interactions with the Council and also to Shropshire Council, to look at the Bridge Project in Shrewsbury and to learn about Shropshire Partners in Care (SPIC).
7. A full schedule of the Task Group's activity is listed in Appendix 2.
8. Prior to the completion of the Task Group's work, due to the timings of the Budget Scrutiny process, an update report from the Task Group was presented by the Lead Member to the OSPB on 29 January 2020. The Report recommended consideration of a publicity campaign to promote the Care Worker role. It also recommended development of a structured route for Care Worker apprentices to flow into adult social care (*see Recommendations 1 and 6*). At the meeting, the Leader of the Council confirmed that if these recommendations were accepted as a way forward by the CMR

(as part of the Task Group's final report), given the financial amounts involved, they could be dealt with in-year.

9. In drawing up its recommendations, the Task Group has been mindful of what the Council can realistically achieve, given budget constraints and its remit. **Accordingly, the issue of Care Workers' salaries was not considered in detail.**
10. Since the completion of the Task Group's work, the Covid 19 pandemic has clearly had a colossal impact on the social care sector and individual care workers in particular, with the critical role that they are carrying out. The Lead Member's Foreword draws attention to the fact that the evidence contained in this report refers to the situation in social care in late 2019, prior to Covid 19. As a result of the pandemic there are clearly new and pressing priorities for the sector, but at the heart of this will be the importance of supporting and promoting care workers, which was, of course, the focus of the Task Group's work

Recommendations

Promotion of the Care Worker role

Recommendation 1: The Task Group recommends that resources be identified to prioritise a publicity campaign aimed at promoting the work of Care Workers and increasing public understanding of the crucial role they carry out.

11. The Task Group felt there should be a specific publicity campaign to raise the profile of the profession and provide insight into the role that Care Workers carry out. With greater public understanding, it is anticipated that the profile and respect for the Care Worker role would be enhanced and more people would perceive care work as a worthwhile career option. This could include reference to case studies and testimonials highlighting the positive experience of the Care Workers that Members met.
12. The Task Group was advised that an additional budget of c£15-16k would be required for the Communications Team to provide a dedicated member of staff to be allocated to this task for at least a 3-month period, with some capacity for ongoing and legacy work.
13. Later in the Report (at Recommendation 8) the Task Group recommends that there should be a general package of measures introduced to support and celebrate the dedication, commitment and outstanding performance of Care Workers (where appropriate) which will also assist in raising the profile of the profession.

Recommendation 2: The Task Group recommends that the Council should sign up to the 'I Care Ambassador' Scheme as an employer. The Council should then encourage and enable a minimum of six Council employees (one from each of the six district areas) to be supported to carry out the 'I Care Ambassador' role.

14. The Task Group met with Locality Manager (Midlands) from Skills for Care (SFC) which is a government funded organisation that helps to create a well-led, skilled and valued adult social care workforce. SFC support adult social care employers to deliver what the people they support need and what commissioners and regulators expect. One of their initiatives is the 'I Care Ambassador' Scheme, which positively promotes the care worker role. The ambassadors are staff from across the sector who work to inspire and motivate people to understand more about working in social care. They are involved in a range of activities and can make a difference to employers both in helping to recruit new staff and also retain existing workers.
15. There are currently very few 'I Care Ambassadors' active in Worcestershire and the Task Group felt that the Council should consider embracing this initiative by signing up as an employer and encouraging and enabling a number of Council employees to carry out such a role alongside their other duties. The Task Group suggested that at least one Ambassador for each of the six districts in the County could work well.

Recommendation 3: The Task Group recommends that the Council should seek to build a closer working relationship with Skills for Care and develop networking opportunities for the mutual benefit of both organisations.

16. SFC is a charity currently receiving 70% of its funding from the Department of Health and Social Care (DHSC). The Task Group received a wealth of valuable insight and information about the care sector from the SFC Locality Manager (Midlands) and a visit was also facilitated to the Bridge Project in Shrewsbury (*see recommendation 10 and paragraph 102*).
17. The Task Group felt that there would be a mutual benefit to be gained from Officers from the People Directorate networking with SFC. The Lead Commissioner, People Directorate has already made initial contact with SFC.

Recruitment and Retention of Care Work Staff

Recommendation 4: Whilst understanding the budgetary conditions faced by the Council, the Task Group recommends that the Cabinet Member with responsibility for Adult Social Care explores what influence the Council is able to have to enhance the terms and conditions of Care Workers through its commissioning process.

18. The Task Group gained some knowledge about the commissioning process and was keen to identify areas where the Council could add influence through this process, including the specification for the Domiciliary Care preferred providers contract. The Task Group felt that in seeking to be an exemplar to private care providers, the Council should consider not only how to demonstrate its own high standards in conditions of employment, but also to seek to add influence (where possible) via its contract specifications for other care providers outside of the Council.
19. The Task Group has identified examples where the Council might be able to have influence through the commissioning process, for instance in training requirements and with paid travel for split shift workers. The Task Group acknowledged that they were not in a position to directly influence the detail of the specification, but Members felt that the commissioning process presented an ideal opportunity for the Council to be able to have a positive influence on the terms and conditions of Care Workers.

Recommendation 5: The Task Group recommends that the Council considers introducing an employee referral scheme to incentivise staff to recommend friends or family for roles in social care.

20. The Task Group learnt that employee referral schemes such as 'Refer a Friend' can be very efficient and cost-effective. Referral Schemes tend to be popular with employees and have proved to be an effective way of recruiting, as applicants have a realistic idea of what the job entails, hence leading to new recruits being more likely to remain in the role. Schemes also tended to attract people who already had personal caring responsibilities and therefore were well suited to the role.

Development of the Care Worker role

Recommendation 6: The Task Group urges the Cabinet Members with Responsibility for Transformation and Commissioning and Adult Social Care to consider scaling up the provision of care worker apprentices to flow into adult social care. This could be achieved with the development of a structured rolling programme of apprenticeships of 18 month's duration commencing every 6 months, centrally managed and coordinated. Care Worker apprentices would be of considerable benefit to social care teams by providing a regular source of newly qualified apprentices and would also help to make effective use of the Apprenticeship Levy.

21. The Task Group was aware that the Council was revising its Apprenticeship Strategy and as part of the process, it seemed an ideal opportunity to scale up the Care Work Apprenticeship Scheme. In the meantime, as mentioned at paragraph 8, the Task Group provided an update report to OSPB at its meeting on 29 January 2020 in which they requested that their idea was considered as part of the Budget Scrutiny process.

22. The Task Group felt that the Council should lead from the front and become an exemplar of good practice among care worker employers in this. With a structured route into social care and appropriate support and encouragement, it is expected that more people of all ages will be attracted to the many professional development opportunities available for a fulfilling career in social care.

Recommendation 7: The Task Group recommends that in developing its best practice and aiming to be an exemplar of a care work employer, the Council should consider whether there would be economies of scale, by extending its existing training offer to preferred providers, to ensure standards and consistency.

23. The Task Group was aware that training services varied across care providers, with some using in-house provision and others accessing training via colleges and other training facilities. With the Council's soon to be introduced new framework arrangements for domiciliary care in Summer 2020, (including the introduction of a new system of a Lead Provider for each of 10 zones), it was suggested that as the new contracts would require certain levels of training to be met, this could an opportunity to expand the Council's training provision to support the needs of the Lead Providers. This would aid the Council's statutory duty from the Care Act 2014 to help develop a market that delivers a wide range of sustainable high-quality care and support services, that will be available to communities.

Supporting and Celebrating the Existing Workforce

Recommendation 8: The Task Group recommends that the Council considers developing a package of measures to recognise, reward and celebrate the work of Care Workers, under the strap line of ‘Worcestershire Cares’.

24. The Task Group felt there needed to be a package of measures introduced to recognise the valuable work and commitment shown by individual Care Workers. It was important that this should not be a tokenistic exercise, but instead should involve a series of initiatives which could be used to reward and celebrate dedication and commitment in a meaningful and timely way. Such measures could shine a light on examples of good practice and seek to raise the morale of individual Care Workers.
25. The Task Group felt that the measures should support and celebrate Care Workers and needed to be backed up by a specific publicity campaign to raise the profile and provide insight into the role that Care Workers provide. Linking the initiatives together under a ‘Worcestershire Cares’ theme would help to provide a focus for promotional and celebratory events. With greater public understanding of the role, it was expected that the care worker role would be more valued by the public and this would, in turn, encourage people to consider a worthwhile career in the sector.

Liaison with education and training providers

Recommendation 9: The Task Group recommends that the Council should develop a plan to co-ordinate and strengthen its relationships with education and training providers in the County.

26. The Task Group discovered that there was a range of contacts between the Council and education and training providers, although there was inconsistency in these connections and a lack of formal arrangements. Members identified that there was a range of opportunities for the Council to work with colleges including extending its provision of work placements and work experience opportunities, attending job fairs and providing information talks to groups of students. Whilst there are examples of this taking place at present, it appeared that there was considerable scope for improved connections to be built on and developed in a much more co-ordinated and formal manner. The Task Group felt that it was crucial that the Council should have a regular presence at college events and pursue opportunities to interact proactively with relevant students to encourage them to consider developing a career in social care.

Evidence of what works well elsewhere

Recommendation 10: The Task Group urges the Council representatives to keep abreast of the Bridge Project at Shropshire Council. This Project uses sophisticated primary data from local sources to predict future service need aiding early intervention alongside more clearly defining the commissioning need. The Task Group feel that there are opportunities for collaborative working and for savings to be made to help Worcestershire’s care sector.

27. The Task Group carried out a visit to the Bridge Project in Shrewsbury which proved to be very interesting and worthwhile. The project takes housing, social care and health data from a local area to predict likely future needs at individual household level and can enable highly targeted early intervention. The combination of data from many

services speeds up the identification of the location of groups of clients for contracting purposes. It had also led to significant savings being achieved for Shropshire Council during contract negotiations. Members felt that there was greater scope for Worcestershire to benefit from this initiative.

Recommendation 11: The Task Group recommends that the Cabinet Member with Responsibility for Adult Social Care considers facilitating a County-wide body to represent care providers across the social care sector.

28. When the Task Group visited the Bridge Project in Shrewsbury, it also heard about the work of Shropshire Partners in Care (SPIC) which is a not for profit organisation representing approximately 240 independent Nursing, Residential, Supported Living and Domiciliary Care companies in Shropshire and Telford & Wrekin. SPIC offer a wide range of services for adult social care providers including acting as a conduit for fee negotiations between the private and voluntary sector and Shropshire Council as well as providing support, advice and guidance to its members.

29. Members were encouraged by the success of the SPIC organisation which had been operating for 20 years and felt that a similar organisation could work well in Worcestershire.

Recommendation 12: The Task Group requests that the Cabinet Members with responsibility for Transformation and Commissioning and Adult Social Care report back to the OSPB in January/February 2021 to provide details of progress made on this Report's recommendations.

Care Work as a Career

The classification of care work roles

30. Skills for Care advise that **job roles in social care** can be categorised as follows:

- **Direct Care roles** such as Activities Worker, Care Worker, Personal Assistant, Rehabilitation Worker, Shared Lives Carer and Advocacy worker.
- **Management roles** such as Team Leader, Supervisor, Manager, Deputy Manager or Team Manager and Specialist Coordinator such as end of life or dementia Coordinator.
- **Other Social Care support roles** such as Housing support officer, Volunteer Coordinator, Social Care prescriber, Welfare Rights Officer, Employment Advisor, Trainer or Assessor and Administration roles including Finance, HR and Marketing.
- **Regulated professional roles** such as Social Worker, Occupational Therapist, Nurse (including Nurse Associate), Complementary Therapist and Counsellor.
- **Ancillary roles** such as Cook or Kitchen Assistant, Housekeeper or domestic worker, Driver or Transport Manager and Maintenance.

31. For the purposes of this Task Group's work, the role of 'Care Worker' has been specifically focused on those providing **direct care roles** in residential homes and on a domiciliary basis. We have used the term 'Care Worker' to incorporate all those roles.

32. There are 314 (Care Quality Commission regulated) care employers in Worcestershire that employ 16,100 workers across the independent sector, the Council and jobs working for direct payment recipients. The largest percentage of these jobs (over 85%) are within the independent sector.

33. The following is a summary of the demographics of the Worcestershire social care workforce. This data was supplied by Skills for Care in January 2020 and was taken from the Adult Social Care Workforce Data set. The figures refer to the whole adult social care workforce (private, independent, voluntary and local authority):

- 86% of workforce are female, 14% male
- The average age of a worker is 44 years
- 10% of workers are under 25 years, 63% are aged between 25 and 54 and 27% are 55 years and above
- 91% of Care Workers are British, 5% from the EU, 3% Non-EU and 1% unknown
- There is a 38.8% turnover which equates to 5,000 leavers
- 67% of these leavers remain in the sector, moving to another employer
- There is an 8.9% vacancy rate, which equates to 1,300 jobs
- The average years of experience in a role equates to 4.1 years
- The average years of experience in the sector equates to 9.1 years
- Rates of pay - the average pay per hour in the Council for front line workers is £10.15 and for Registered Managers £16.72. In the independent sector the figures are £8.46 for front line workers and £12.88 for Registered Managers
- 54% of staff hold a qualification relevant to adult social care.
(figures supplied by Skills for Care)

34. The Council currently employs 465 Care Workers (344.32 FTE) across the following roles: Care Assistant, Support Worker, Senior Support Worker, Home Care Assistant, Senior Care Assistant, Senior Home Care Assistant, Promoting Independence Assistant, Shared Lives Worker, Residential Support Worker, Senior Residential Support Worker, Senior Support Worker.

35. The Council's employees are split between the different settings as follows:

Employee Profile 31/10/2019	Headcount	FTE
Directorate of Adult Services	397	287.92
Adult Day Care	157	118.55
Adult Residential Care	55	39.92
Adult Resource Centre	37	22.72
Home Care	141	100.16
Shared Lives	7	6.57
Worcestershire Children First	68	56.4
Children with Disabilities Short Breaks	18	11.21
Children's Residential Care	50	45.19

How the Council can promote care work as a career

36. The Task Group met with some Council Care Workers and one from the private sector. It was evident that for these Care Workers, the difference that could be made to people's lives was a crucial factor for them choosing to work in social care. The needs of the residents and clients were paramount, and they were dedicated to ensuring that they carried out their duties with care and compassion. The Care Workers were keen that people carrying out social care roles should receive effective support from their employers and the recognition from wider society of the value of their work.

Publicity

37. One of the primary objectives of the Task Group was to seek ways to improve the recognition of the role of Care Workers and increase public understanding of the importance of the personal work that they do. The Council's Communications Manager was invited to discuss ways in which the Communications Team could help with this objective.
38. The Task Group was informed that priorities for the Communications Team were established once a year, around April, and that Adult Social Care had been one of the top priorities in the last three years. The Communications Team were regularly involved in publicity campaigns to support recruitment drives for the People Directorate and currently to support recruitment for the Reablement Service which featured current care staff in the campaign.
39. The Task Group was also informed of the 'One Worcestershire' initiative which the Council was involved in, which draws together public and private bodies from across the County with the aim of promoting and showcasing what Worcestershire has to offer. It was suggested to the Task Group that a campaign to promote the values of social care work could be highlighted through this initiative in the future.
40. The Task Group felt that a specific publicity campaign was required to raise the profile and provide insight into the role that Care Workers provide. With greater public understanding of the role, it was expected that the Care worker role would become better understood and valued by the Public and that more people would be encouraged to seek careers in this rewarding sector. Additionally, current employees would hopefully feel much more valued and appreciated for the difficult role that they carry out. Any promotional work could also have a positive impact on recruitment across the County, potentially leading to a more stable care sector as a whole.
41. The Task Group was advised that if any additional publicity was required, a member of staff would need to be allocated for at least a 3-month period, with some capacity for ongoing work. This would require an additional budget of £15-16k. The Task Group suggested that it may be possible to seek some funding from the discretionary part of the Public Health Ring-Fenced Grant to support this initiative. The Director of Public Health indicated that whilst supportive of the idea of a campaign in principle, it was necessary to check how it would sit alongside initiatives already in the pipeline. The importance of liaising with the Local Workforce Action Boards (LWAB) to ensure joint working was also highlighted.
42. As mentioned at paragraph 8, following the Update report to OSPB in January 2020, there was general support for the publicity campaign, with assurance that the funding

could be identified from within current budgets, without having to seek approval through the Budget Scrutiny process.

43. The Task Group felt that there was also a need for more internal publicity on the role of the Care Worker, in order to promote the valuable work that was carried out and to aid a greater understanding of the role. Through the Council's own staff, this message would then disseminate to their friends and family and the wider community.
44. Outside of the work that the Council can do with its own resources, the Task Group asks the Cabinet Member to work with the LEP in raising the profile of care workers and developing a meaningful strategy of support.

Skills for Care

45. Skills for Care (SFC) is an organisation which helps to create a well-led, skilled and valued adult social care workforce. The practical tools and support help organisations and individual employers in England to recruit, develop and lead their staff, retaining them from entry level right through to senior leadership and management roles. The Task Group met with the SFC Locality Manager (Midlands) to learn about their work and benefit from their knowledge and experience in the care sector field. The Task Group was informed that the SFC was a national charity, established about 20 years ago by the Department of Health to support adult care employers. The charity currently received 70% of its funding from the Department of Health and Social Care (DHSC) and had clear responsibilities to ensure that the sector was effectively managed and resourced and with an appropriate framework of qualifications available to support the sector.
46. The Locality Manager provided a report which included detailed information about what other local authorities were doing in the areas of commissioning, market shaping, recruitment, retention and celebrating care. In addition, it highlighted the DHSC's national campaign 'Every day is different' which aimed to raise the profile of adult social care and highlight the personal and professional rewards of working in a growing sector. Campaign materials were freely available for use by all those in the sector. Members felt that the Council would benefit from developing closer links with SFC to learn from their expertise and the work of other authorities.
47. The Task Group was informed of the SFC initiative whereby 'I Care Ambassadors' worked to positively promote the care worker role. These ambassadors were staff from across the sector who worked to inspire and motivate people to understand more about working in social care. The work of the 'I Care Ambassadors' included giving talks and presentations, attending careers fairs, mentoring and media and publicity work. Their work was largely targeted at students and teachers in schools and colleges, unemployed people, careers advisors and community groups. Their work had been shown to make a difference to employers both in helping to recruit new staff and also to retain existing workers.
48. Key outcomes relating to the work of the I Care Ambassadors nationally in the past two years, have shown that:
 - 361 Ambassadors have delivered activities to 122,000 people.
 - 100% of those who requested an ambassador gave positive feedback
 - A 23% increase in people were interested in a career in care after hearing from an ambassador.

- The areas where Ambassadors were most active were the South West, London and the East Midlands.

49. The Task Group were informed that there were very few employers in Worcestershire signed up to the 'I Care Ambassadors' Scheme. Members felt this was a very proactive initiative and one which the Council could usefully participate in. Therefore, the Task Group recommends that the Council considers embracing this initiative and identifying and supporting some Council employees who would be willing to consider carrying out such a role. They suggested that a minimum of six with one representing each District area could be a good approach.

Issues with recruitment and retention of care workers and how the Council and partners can improve this

Current recruitment situation

50. The Task Group discovered that the situation regarding recruitment and retention varied considerably between the Council and the private sector. They were informed by the Trade Union that pay, conditions and job security were key issues that all Care Workers were concerned about, but that working within the public sector was often seen as preferable because of the more stable, regulated working environment, and the support structures in place. Anecdotally, it was suggested that NHS Health Care Worker roles (with similar duties to a Care Worker) benefitted from significantly higher salaries than Care Workers in local authorities, although from a review of job adverts, there appeared to be little difference. Both roles were however, paid higher salaries than Care Workers in the private sector, which clearly impacts social care recruitment in the private sector.
51. The Council has some care settings where staff turnover was an issue, but in general the level of vacancies was at a lower level. Between April and September 2019, there were 25 Leavers across Adult Services and Worcester Children First, with an average of 5.38% turnover. As at November 2019, there were 6 job vacancies being advertised and 8 other job roles where candidates were undergoing checks to be able to start work.
52. This was in addition to a recruitment campaign for a new Community Reablement Team where 27 new roles were being created. There had been 119 applications received for these posts, the number being boosted by a number of initiatives to capture interest, including Open Days, use of social media and videos posted of current care staff talking about their role. Also, those invited for interview were then supported with a 'tips for interview' guide to help them prepare fully for their interview. This recruitment process was now coming towards completion, with the Service due to be up and running on 1 April 2020.
53. The Task Group's meetings with private care providers had illustrated there was a significant recruitment problem within the sector. A private care provider advised the Task Group that national turnover rates for care work staff working for private providers was around 35%, which increased when there were substantial changes such as a new Care Home Manager in place. Private providers were regularly having to rely on Agency staff to provide adequate cover, at a significant cost to their business.

Issues impacting on recruitment and retention

54. From discussion with a Trade Union, the Task Group was informed of some issues of concern from their members, including:
- The isolation and loneliness experienced by some staff in 'side by side' roles especially, when working unsociable hours.
 - The impact of the Council's Attendance Policy which, was seen as contentious as care workers felt they were penalised because they were much more susceptible to picking up viruses, in comparison to office-based staff.
 - The impact on staff when they felt that genuine career progression routes in day care centres had been removed as a result of restructuring.
 - Payment for travel – care staff were not paid for their first or last journey of the day and split shift workers could be further disadvantaged as four journeys per day were classified as first or last journeys.
55. The level of wages paid by private care providers (often national minimum wage) and the zero hours contracts were key issues, and it was accepted that improved rates of pay would undoubtedly help the recruitment situation. The Task Group learnt that the shift pattern working was not as flexible as some staff would wish. It was reported that this was less of an issue with staff from overseas who were often keen to work any extra shifts.
56. Care Workers could sometimes feel undervalued and under paid. It was highlighted, for instance, that a promotion which came with significantly more responsibility, would sometimes have very little monetary benefit to the employee.
57. Care Workers commented how demoralising it was to see a Care Worker role advertised with wording to the effect of 'no skills required'. The Care worker role requires a multitude of skills if it is to be carried out effectively. It also comes with significant responsibilities including ensuring that a Clients Care Plan was followed accurately. They felt that this should be reflected in a person specification.
58. There was variation between private providers in whether travelling time was paid between clients. Some roles were advertised with relatively high hourly rates, but this masked the fact that the rate was only paid for the time actually spent with clients and not travelling between, so in reality paid hourly rates were significantly lower. The Trade Union had referred to their 'Ethical Care Charter for the commissioning of homecare services' which they were keen for the Council to sign up to in order to protect private sector Care Workers.
59. In terms of working hours of staff employed by the Council, the Task Group learnt that some staff would find it more convenient to work more hours at one location, rather than having to seek a second job or temporary shifts elsewhere. They highlighted that the availability of posts with longer working hours would encourage recruitment in general. The Interim Strategic Director for People (ISDP) advised that there was currently a range of contracts in place in provider services, but that an overhaul was needed.
60. Private Care providers commented that any help from the Council on awareness raising, promotion of the profession and assistance with a recruitment programme overseas would be very welcome. One provider commented on the critical shortage of qualified nurses wishing to work in nursing homes.

61. The possibility of a Recruitment Portal for permanent staff was raised by the ISDP, which could benefit all providers. This had been discussed as part of 'One Worcestershire' and if it came to fruition would be a live portal including all Worcestershire jobs.
62. One of the private providers had commented that if the Council could facilitate a Forum for Residential Care providers to network, it would be supported by the sector.

Commissioning process

63. Members were advised about changes to the commissioning arrangements for domiciliary care. In the Summer of 2020, a new system would be introduced whereby the County would be divided into 10 zones and there would be a Lead Provider appointed for each zone, with the Lead Provider sub-contracting if necessary (*although they were required to provide at least 95% of the contract themselves*). This new arrangement was expected to be more efficient and simplify the process of dealing with providers who were not meeting the current standards. It was noted that clients would still have the same Care Workers, although in time there might be some changes.
64. The Task Group clarified that the Lead Provider was required to ensure that all packages of care within its zone were delivered in accordance with the specification, including those delivered by any sub-contractor. Members would wish to seek assurance that there was a formal reporting mechanism on the performance of the sub-contractors to ensure that there was accountability and that standards, such as appropriate training levels, were maintained.
65. The Task Group felt that the that the commissioning process was a useful way in which the Council could exert some influence to improve the Care Workers situation across the County. Setting and demonstrating high standards for other care providers as a way forward should be seen as a key part of its exemplar employer role in the County.
66. The Task Group were informed that contracts with private providers were outcome based and included issues such as ensuring that residents and clients felt valued and treated with dignity, that their health and well-being was maximised, that staff should have positive relationships with residents and clients and be well motivated themselves. The Council wasn't in a position to dictate employment terms and conditions to the agencies. Having said that, there was still some scope for influence in the commissioning process, asking questions about social value, for example, and checking that contractors were signed up to the 'Working for Carers' commitment. Members were keen to ensure that any possible scope and influence that the Council could have to improve the situation of Care Workers through the tendering process was effectively used.
67. A Care provider informed the Task Group that the gap between the price paid per bed by the Council compared to self-funders was over £250 per week therefore if the provider had a home which was reliant on Council residents, this could lead to a problem with the sustainability of the home. This funding gap clearly had a significant impact on the salary levels able to be offered to recruit staff.

68. The Task Group was informed by a private provider that through the Council's contractual arrangement, private providers used to be required to ensure that all their staff completed a Diploma in Social Care. This had not been enforced by the Council for some time, which he felt had led to a less robust service. The Task Group were made aware of the training and development expectations under the new Domiciliary Care preferred providers contract, which required Lead Providers to ensure that a minimum of 60% of their staff should have or be working towards a Level 2 or 3 NVQ in Social Care or a Diploma in Health and Social Care.

What the Council can do to develop care work as a career

Apprenticeships

69. As part of being an exemplar employer, the Task Group felt that a structured route into social care should be provided. With appropriate support and encouragement throughout their apprenticeship, it is hoped that more people would be attracted to work in the social care sector and take up opportunities for a fulfilling career in whichever role they chose.
70. The Council has a role in respect of apprenticeship opportunities, both as an internal provider and through external contracts. Currently social care apprenticeships are managed through the internal and development delivery team, which could offer apprenticeships up to level 5. External contracts were entered into when the Council did not have the accreditation or expertise to offer a particular apprenticeship in-house.
71. As a result of the Public Sector Apprenticeship Targets Regulations 2017, the Task Group learnt that large public sector organisations have a 4-year target to have 2.3% of employees on apprenticeships by 2022. It was noted that the current number of apprenticeships was approximately 100 across the whole Council, although it was noted that only 4 of these were in direct Care worker roles with a further 4 in Lead Care worker roles. The Task Group learnt that during the current Organisational Review of the Council's structure, there had been a less proactive recruitment of Apprentices taking place, but this situation was expected to change after April 2020.
72. In terms of the Council's Employer Provider Status (delivering apprenticeship training directly to staff, rather than outsourcing to an external training provider) and the Government's Apprenticeship Levy (AL) Scheme which was available to fund the training and assessment of apprentices, the Task Group discovered that if the Council did not use all the available AL monies during a two-year period, the money was then returned to the Government. This had started to take place in April 2019 and between April and the end of November, £311,798.84 had been returned. The Task Group wanted to ensure that the AL monies were used in the most effective manner going forward and that recruitment to adult social care roles was boosted by regular availability of newly qualified apprentices.
73. The Task Group supported a plan for an enhanced apprenticeship programme into social care roles. Noting that an apprenticeship would normally take place over an 18-month period, Members suggested that if new apprenticeships were commenced every 6 months, this would mean that there would be a rolling programme of newly qualified apprentices into social care. This enhanced programme could see apprentices benefitting by receiving a varied training programme, with time spent in each key distinct area of the Directorate. Their 20% training time could then be managed by the central Learning and Development team in terms of providing training, support and

workshops. At the end of the process, apprentices would be awarded a City and Guilds qualification, a Level Two Diploma in Adult Care. The Task Group recognised that it would be beneficial to the Council to have a mix of youth and maturity on the apprenticeship scheme.

74. The Task Group was aware that a revised Apprenticeship Strategy was currently being approved by the Senior Leadership Team of the Council. In the meantime, as referred to in paragraph 8, the Task Group had provided an update report to OSPB in which they asked that their idea was given due consideration as part of the Budget Scrutiny process as they wished to see some additional monies, in the region of £6-10k identified and set aside towards the start-up costs for an apprenticeship programme and any associated materials required for use in publicity campaigns and recruitment events.
75. The Assistant Director for Human Resources, Organisational Development and Engagement (Assistant Director (HR, OD and Engagement)) attended a Task Group meeting and was supportive of the Task Group's drive and enthusiasm to see apprenticeship numbers increased. He explained that as part of the development of a revised Council Apprenticeship Strategy, there were a number of initiatives planned which together could see the Council developing and supporting a larger number of apprenticeships each year. This included the Council engaging with a national programme of traineeships for those young people currently not in education or training and also a structured approach to supporting care leavers with their careers. He hoped that the Social Work Academy could be used to support the development of the Apprenticeship programme into the future.
76. The Task Group informed the Assistant Director (HR, OD and Engagement) that they were seeking additional funding (c.£6-10k), part of which they envisaged helping towards the start-up costs of an apprenticeship programme into adult social care. The Assistant Director whilst welcoming the possibility of additional monies, advised that there was an existing Talent Management Budget which would be used for the overall plans of the future Apprenticeship Strategy.
77. A Member of the Task Group visited Kidderminster College to discuss the variety of courses offered in social care, apprenticeship schemes, work experience placements and the areas of current and possible interaction with the Council. The College had a rapidly expanding provision of apprenticeships and advised that they were able to offer to facilitate the promotion and co-ordination of apprenticeships in the future, if this was of interest to the Council. The College were keen to develop closer links with the Council and Members felt there was considerable scope for working together in the future.

Training

78. The Task Group learnt that all Care Workers were required to complete a Care Certificate as part of their Induction process, to ensure that they had the basic skills and competencies to start their role. This involved training and workplace assessment. Whilst employees of the Council and some private providers paid employees for the time spent on completing their Care Certificate, the Task Group discovered anecdotally that a few private providers expected new staff to complete this process on a voluntary basis. The Task Group was advised that the Council's Quality Assurance Team carried out checks on this as part of their inspections.

79. It was noted that some care providers had in-house training provision, whilst others sourced their training from elsewhere. Officers from the People Directorate indicated that there were initial discussions taking place to see whether the Council's training provision could be expanded in the future to support the needs of contractors. With the soon to be introduced new framework arrangements for domiciliary care and the introduction of a new system of a Lead Provider for 10 zones, it was felt that this could be an opportunity to expand the Council's training provision to support the needs of contractors. The new contracts would require certain training provisions were met and there would be scope for the Council's training provider to expand its role. The Task Group supported the idea of standardising training for Care Workers across the County. It was also noted that grants were sometimes available to small businesses to help them with training costs.
80. The Task Group was pleased to learn that within the Council it was very possible, for those who wished to do so, to start as a Care Worker and work their way up the levels, with on the job training, carving out a rewarding career. One of the Team Leaders the Group met had done just this, whilst remaining in full time employment throughout. The Task Group were also informed that it was possible to use credits obtained for example through a Level 3 Social Care Certificate and transfer on to a healthcare assistant or nursing pathway in the NHS.
81. The ISDP advised that they were working on a defined career path to make effective use of very experienced staff in a role such as Social Work Assistant. This was welcomed by the Task Group.

How the existing care workforce be better supported and celebrated.

82. The Task Group felt that the dedication and commitment of Care Workers in carrying out their crucial work was under-recognised and under-valued. The needs of the residents and clients were put first, and they performed their duties with care and compassion. One example, the Task Group learnt, was how difficult it could be to ensure a rota was fully staffed and that Care Workers would often cover shifts at short notice, despite the impact to their personal life, to ensure that the service could be fully supported.
83. Care staff were keen to emphasise that the value of the Care Workers role needed to be recognised. They felt it needed personal marketing, good news stories and explanation about the reasons for going into care roles, so that people might be inspired to work in the sector. They felt that increased positive publicity would be very helpful to combat the often-unhelpful stories in the Press about the Care sector and particularly when something had gone wrong. Such stories, which appeared in the Press from time to time, could tarnish the care sector as a whole in the minds of the public and linger long in their memory. Some also expressed their dislike of the title 'Care Worker' which they found to be old fashioned and off putting.
84. In addition to the promotional activities referred to earlier, the Task Group agreed that there needed to be a package of measures introduced to support and celebrate the dedication and commitment of individual Care Workers. It was important that this should not be a tokenistic exercise, but instead should involve a series of initiatives which could be used to reward and celebrate dedication and commitment in a meaningful and timely way. Such measures could shine a light on examples of good practice and seek to raise the morale of the individual Care Workers. Linking initiatives under a 'Worcestershire Cares' strap line was felt to be a useful approach. An annual social

care stakeholder roadshow could be held and an awards ceremony would raise the profile of Care Workers, along with the use of industry recognised badges. Other smaller, more timely recognition would also make a difference too. Evidence of what worked well in other places included loyalty bonuses where there was a high turnover of staff, 'You're a Star' card and gift voucher for individual initiative or achievement, perks or discounts for shopping for all Care Workers (*made available by working with local businesses*).

85. The Task Group had been informed of the work of Shropshire Partners in Care, which is a social care organisation representing independent care providers within Shropshire and Telford & Wrekin. The organisation is the voice of the independent care sector and is the main conduit for fee negotiations between the private and voluntary sector and Shropshire Council. It also supports its members by providing advice and guidance, mandatory training at a low cost and help with job fairs, work coaches and care ambassadors. Members felt that a similar organisation could work well in Worcestershire.
86. The Task Group learnt from care staff that the Council's 'relief pool of Care Workers' benefitted from the inclusion of some highly motivated workers, for instance, trainee Occupational Therapists and Physiotherapists who were required to gain some experience in care work as part of their course. When these workers covered a shift, the other Care Workers found them to be very helpful and supportive. The Task Group suggested that there could be a formal arrangement with Worcester University to ensure there was a regular supply of suitable students to work on the relief pool. The ISDP agreed to look into this suggestion.

How the Council liaises with education and training providers to develop skills and promote care work as a career

Careers events

87. With the Council's reorganisation process, responsibility for attending Careers events and jobs fairs, was currently being transferred to a different Council team. Members were informed of certain events that the Council was often represented at, such as the main Jobs, Apprenticeship and Skills shows each year, but there were many more events at Colleges which it would be useful for the Council have a presence at, to demonstrate how a career path in social care was possible and the rewards that could be obtained from pursuing such a career.
88. The Task Group felt that there was considerable scope available for meeting with young people at schools and colleges to talk to them about social care as a career. No individual team currently had specific responsibility for this role, however, provider services had indicated they were willing to attend a school or college for this purpose, if asked. Members were pleased to learn of a recent initiative where Social Care Managers had been attending Worcester 6th Form College to inform young people about the roles on offer. Some shadowing of staff was also to take place. Members welcomed this initiative and hoped it could be expanded to other Colleges in time. Members felt that the Council should be proactively seeking to engage with health and social care students in all Colleges, and where possible taking along social care staff to directly promote the roles available and the career paths that are possible. They felt that the enthusiasm of the Councils staff should be harnessed to spark the interest of the next generation.

89. Members were pleased to learn about a new initiative which was currently being developed through joint working on the Sustainability Transformation Plan around the apprenticeship theme, whereby all health and social care providers across the County were looking to form a partnership to act as representatives of the sector. This would mean, that once up and running, partners would be carrying out promotional activity and information talks on behalf of the whole sector. This was seen as a very positive initiative, making good use of joint working to share the role to promote the sector as a whole.

Colleges

90. As part of their work, the Task Group contacted representatives from the Heart of Worcestershire College, Worcester 6th Form College, Evesham College (*part of Warwickshire College*) and the University of Worcester. A visit was also made to Kidderminster College. These institutions offer a range a range of full-time courses for people keen to work in the social care sector, from entry level, through intermediate, advanced, level 5 management courses and foundation degrees. Some of the Colleges also offer a range of 12 – 18-month apprenticeships at Level 2, 3 and 5. These are available to new recruits to the care sector or those already employed in the sector looking to upskill. All of the social care courses involve work placements with care providers, which vary dependent on the level of qualification involved.

91. The Task Group were informed by some colleges that only a small percentage of the health and social care students currently entering the job market on completion of their studies, chose the social care route.

92. Members identified that there was a range of opportunities for the Council to work with Colleges including providing work placements and work experience opportunities. The Task Group discovered that the contact between the Council and with education and training providers regarding work placements, was currently on an ad hoc basis arranged through individual managers, rather than being managed by one particular team. This, however, meant that there was inconsistency in the connections between the Council and different colleges and no overall formal rolling programme of work placements in the Council's social care settings. Some initial work was being carried out to try to informally co-ordinate what was taking place.

93. Some Colleges had indicated that they would welcome closer links with the Council. The Task Group felt that the Council should continue to strengthen its relationships with education and training providers in the County to ensure that stronger connections and working relationships were forged. They felt that the connections between the Councils and Colleges should be much more co-ordinated and set out in formal arrangements. It was crucial that the Council should have a regular presence at key College events across the County and proactively interact with relevant students to encourage them to consider developing a career in social care.

How Private Care Providers support Care Workers in particular those used by the Council

94. The Task Group met with a Managing Director of Domiciliary Care Service, who outlined the comprehensive package of measures in place to fully support his Care Workers which included a full Induction process including shadowing of initial visits to

clients, a buddy scheme for new starters, training opportunities and career development, a range of communication methods to keep employees fully informed and recognition of individual initiative and achievements. This standard of support was very comprehensive, and Members were mindful that it was unknown to them whether this was replicated across other care providers in the County.

95. As referred to above, Members were keen to understand what influence the Council had as part of the Commissioning process, in respect of the terms and conditions for Care Workers employed by private providers, to ensure that they were operating as fair and ethical employers.

Evidence of what works well elsewhere

96. **Value based recruitment.** The first phase of the DHSC's Adult Social Care Recruitment Campaign, 'Every day is different' took place in early 2019 and aimed to drive a new generation of people to consider social care roles. Campaign toolkits were issued with materials for posters, leaflets, social media tweets etc. After the first phase of the campaign 40% of females and 31% of males surveyed said the adverts had made them want to find out more about jobs in the SC sector. Derbyshire County Council used campaign materials in their own advertising and saw a 45% increase in visits to their recruitment website. The 2nd phase of the campaign was currently underway.
97. **Employee referrals** can be very efficient and cost-effective. As 8 in 10 care staff would recommend a job in adult social care, employers should be making more use of the potential of this advocacy role. It is important that staff making referrals are given a reward and thanked personally for their role. The Providers we talked to use a 'Refer a Friend' scheme which was popular with employees and proved to be an effective way of recruiting as applicants have a better idea of what the job entails. The referrer was issued with a financial reward. The Task Group felt that this was an initiative that the Council could usefully take forward.
98. **Work Ambassadors.** Referred to previously in this report, the SFC 'I Care Ambassadors' help to promote the social care sector and inspire others. They can have considerable impact with results demonstrating that there was a 23% increase in young people and adults showing interest in a career in social care after talking to/listening to an Ambassador. The feedback obtained by the Ambassador was also helpful to employers.
99. **Family Care-er Recruitment events.** Targeting those who have caring responsibilities at home, to see how a career in Social Care could fit around their responsibilities. Events encourage people to bring their children and activities are available to entertain them whilst their parents find out more about potential careers.
100. **SFC and the Local Government Association** have supplied us with some current examples of local authorities which are engaging in a range of interesting initiatives to boost recruitment in social care. A summary is shown below:
- Derbyshire – Joint health and Social Care apprenticeships
 - Lincolnshire - Developing use of Nurse associates in nursing home sector
 - Shropshire - Recruitment fairs in conjunction with the Department of Work and Pensions

- Herefordshire – Care Heroes scheme in conjunction with learning programmes to ensure that employers have the rights skills and knowledge to prepare and support care staff, when recruited.
 - South West Proud to Care initiative – a joint recruitment initiative between LA's and the NHS.
 - Staffordshire County Council – targeting local companies in danger of mass redundancies, to highlight the benefits of working in social care.
 - Shropshire Partners in Care – focused recruitment targeting two groups, career changers (20 to 39 years) and retirees/those wanting a second career.
 - Haringey – a series of outreach events, including use of the local website 'Proud to Care'
101. **Warwickshire County Council** was currently working with Coventry University to look at what the workforce of the future will look like for an integrated health and care system, supporting people in their own homes. One of the challenges has been the different pay scales.
102. **Commissioning and Market shaping.** SFC provided details of local authorities which were involved in initiatives and activities in these areas. These included:
- Tameside Council which had introduced commissioning for outcomes (rather than time and task) and 6 care providers were currently commissioned on a neighbourhood basis and paid in advance for an estimated number of hours of care in that area. Each provider was required to pay staff the living foundation wage i.e. £9.30ph. Outcomes for Care Workers and their clients had greatly improved.
 - Bradford Council which had introduced a continual payment of a care package even if the individual who was receiving care was admitted to hospital. This had helped with the delays that were faced when trying to find a care provider to take up a care package at the point of discharge from hospital. The Council had also included travel time in their care package which had supported retention of staff and improved productivity. This had also allowed some 'walking rounds' in some areas.
 - Shropshire Council - The Bridge project – Members visited the Bridge project and received a presentation from Shropshire's Executive Director of Adult Social Care and Housing and their Strategic Lead for the project. The project, based on digital technology, takes housing, social care and health data about individuals and is able to predict demand for future services. It is also able to identify when intervention is likely to be needed with preventative measures for individuals potentially at risk. The key to the success of the project is the use of very local information and combining data from various sources. When the data sources were combined, the system could predict likely future service needs at household level e.g. elderly, alone and poorly incapacitated at home, as well as where the best location was for a new care home linking into local housing and transport links or to determine the most efficient allocations of work for Care Workers. Members were impressed with the effectiveness of the project and encouraged by the potential of positive financial and social outcomes.
 - Somerset Council which was working in partnership with Community Catalyst which developed micro, community-based care and support services to provide flexible solutions in very rural communities.

Conclusion

The Task Group has identified that the dedication and commitment of Care Workers in carrying out their crucial work was often un-recognised and under-valued. They performed their duties with care and compassion and the needs of the residents and clients were always put first. In carrying out this task, Members were pleased to be able to meet with a number of Care Workers directly; their dedication and enthusiasm for their job was clearly evident and much appreciated. It was evident that for these Care Workers, the difference that could be made to people's lives was a crucial factor as to why they chose to work in social care. Members were keen to ensure that Care Workers should receive effective support from their employers and the recognition from wider society of the value of their work. This was the driving force behind the Task Group's work.

The Task Group has set out a number of recommendations which it is hoped will have an impact towards helping the current workforce to feel better supported and celebrated and also to boost the promotion and development of Care work as a worthwhile and respected career.

Appendix 1

Scope of the Scrutiny

To find out:

- What roles are classed as care work?
- What the Council can do to promote and develop care work as a career?
- How can the existing care workforce be better supported and celebrated?
- What are the issues with recruitment and retention of care workers and how can the Council and partners improve this?
- How the Council liaises with education and training providers to develop skills and promote care work as a career?
- How agencies support Care Workers in particular those used by the Council?
- What has worked well elsewhere? For example, use of social media, creation of homecare co-operatives, links with education and training providers, value-based recruitment and saturation marketing, use of apprenticeships, establishment of a social work/carers academy

Appendix 2 - Schedule of Activity

Date	Activity
17 October 2019	Discussion with the Director of Adult Services.
31 October 2019	Discussion with: Registered Shared Lives Manager, Senior Home Care Assistant and Senior Promoting Independence Assistant
20 November 2019	Discussion with: Senior Content & Communications Manager & Unison representatives
25 November 2019	Discussion with: The Registered Manager, Team Leader and Support Worker from a Council setting which provides respite/replacement Care to adults with Learning Disabilities. The owner of a Residential home in Worcestershire.
5 December 2019	Discussion with: Learning & Development Manager Vocational Accreditation Lead Commissioner, Learning disabilities Lead Commissioner, Older people, Physical disabilities
9 December 2019	Discussion with the Managing Director and Care giver from domiciliary home care service in Worcestershire.
8 January 2020	Task Group Meeting.
13 January 2020	Discussion with the Cabinet Member with Responsibility for Adult Social Care, Interim Strategic Director for People and Interim Director for Public Health.
28 January 2020	Visit to Kidderminster College
29 January 2020	Discussion with: Skills for Care, Locality Manager (Midlands) Lead Commissioner, Older People, Physical Disabilities Assistant Director for Human Resources, Organisational Development and Engagement
29 January 2020	Update Report to the Overview and Scrutiny Performance Board
3 February 2020	Task Group Meeting
20 February 2020	Site visit to The Bridge Project in Shrewsbury. Meeting with Shropshire's Executive Director of Adult Social Care and Housing and the Strategic Lead for the Bridge project.
3 March 2020	Task Group Meeting
10 March 2020	Discussion with the Interim Strategic Director of People

