The implications of policy reform for the adult social care workforce in England: The personalisation of care Erika Kispeter and Shereen Hussein

Transforming Care Conference, Sheffield, 26-28 June 2023





Large body of research on personalisation but lack of attention to the workforce.

Research questions

- 1. How is the ASC workforce represented in key policy documents on personalisation?
- 2. What does the literature say about the impact of personalisation on the adult social care (ASC) workforce?

Methods

- 1. Analysis of policy and guidance documents on personalisation and social care reform
- 2. Literature review



Tailoring care and support services to the needs, wants and preferences of people drawing on social care.

Origins:

- Disability movement: 'independent living' and 'self-directed support' (Hayes et al., 2019)
- Client-centred psychotherapy and person-centred nursing (see Ettelt et al., 2020)

The concepts 'personalised care' and 'person-centred care' are used interchangeably (e.g. ,Care Act 2014, White Paper of 2021).

The meaning is not always clear: Needham (2011) argued that this is ambiguity is an important element of personalisation's success as a catalyst for policy reform.

The workforce in policy documents



Expectation that care professionals would resist personalisation.

Celebration of existing skills and commitment (2010) v concern about the quality of care (2012).

Embedding personalised care is the starting point for the vision of social care transformation

- It is important to win the "hearts and minds" of the frontline staff (2007: 5).
- "We can draw on a workforce who can provide care and support with skill, compassion and imagination" (DH, 2010: 8) v
 "We will work ... to promote culture change and skills development" (HMG, 2012:50).
- Care workers made memory books, organised trips to local parks and "took the time beyond their care duties to tidy up the garden as the couple had been unable to do it themselves" (DHSC, 2021: 75).

The workforce in guidance documents



Staff are crucial to 'personalised' and 'personcentred' care and support

Care Certificate-Standard 5

Making it real framework (TLAP) – how to do personalization?

- Job satisfaction from personalisation -developing relationships with the people they support (NICE, 2015)
- Person-centred could be challenging to implement (NICE, 2015). Staff morale and confidence needs boosting through better pay, training and leadership (SCIE, 2014).
- Emphasis on values and communication that is essential to person-centred care planning. Trainees encouraged to ask for further information and training opportunities.
- "We don't make assumptions about what people can or cannot do. ... We know how to have conversations with people that explore what matters most to them " (TLAP, 2018: 16)

The implications of personalisation: Skills and values



Skills

- Higher level skills
- Soft competencies

Values

individuality, choice, independence, privacy, rights, dignity, respect, **partnership**

Personality traits/structures

- Empathy
- Compassion

- "A gap between the promotion of personalisation in policy and care workers' knowledge, understanding and ability to put concepts into practice" Hayes et al. (2019:5)
- How do you measure values? CQC inspections observe care workers' behaviour and comment on

• Care home managers use their experience to judge the personality of applicants (Ettelt et al., 2020). The dark side of compassion – job strain and burnout (e.g., Hussein, 2017).



Restructuring at local authorities

• "... assessment is carried out by one team; support planning is then taken over by another. In some cases it is a third team [...] that works on facilitating access to the agreed services. [...] and finally, a fourth team may be responsible for service reviews." (Pile, 2014: 105).

Worsening pay and conditions of care workers

Personal Assistants

Conclusions



- Personalisation continues to be at the centre of policy documents but the link between personalisation and the workforce is not always at the centre. We did not find signs of social care professionals being represented as (potentially) adversarial to personalisation after the 2007 Concordat but the need to improve workforce skills is mentioned in almost all policy documents.
- Describing the skills of personalisation is very difficult. Values are easier to describe but also difficult to assess. Behaviours reflect values and skills but also the conditions of work, e.g., understaffing.
- Pay and conditions of employment for the broader social care workforce have declined, concern about the employment conditions of PAs.
- The impact of personalisation is difficult to disentangle from the effects of other drivers of change: marketisation and public sector austerity. Outsourcing created large 'networked organisations' which contributed to new forms of labour market segmentation and inequality not only in England/the UK but across Europe. The largely female adult social care workforce is treated as contingent workers, who are always available for low wage work.