



Staffordshire  
Social Care  
Workforce

Staffordshire Social Care  
Workforce Strategy 2022-2027

# Data Appendix



# Data Appendix

## A What does our current workforce look like?

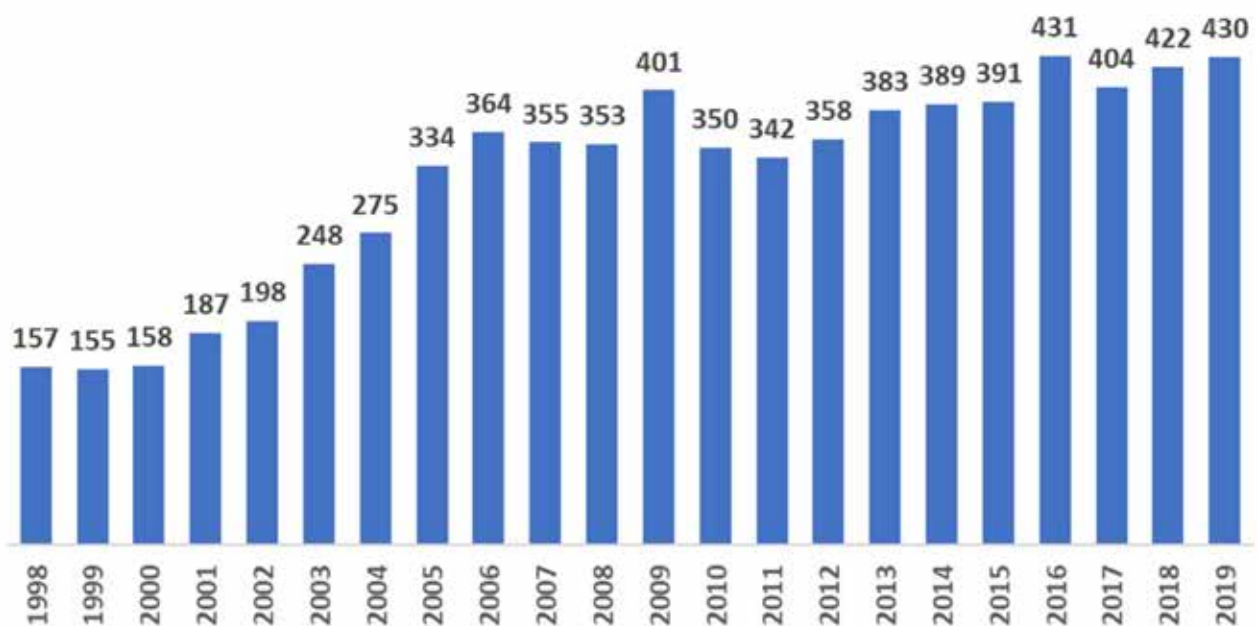
Our local workforce data comes from a range of sources and surveys, which have been updated at different stages before, during and since the pandemic. "Social care" can be taken to include many different roles, and some data sources include roles which are not covered within this strategy. This means that there are some differences in the estimates between these sources.

The scope of this local strategy includes social workers and assessors, staff in care homes, home care, day and community care for adults, care homes and support for children with disabilities, and similar services.

## Size of the sector

The value of the social care sector in Staffordshire (measured by Gross Value Added, which includes nurseries) has grown over the last two decades.<sup>1</sup>

**Size of the Social Care Sector in Staffordshire  
(Gross Value Added in £millions)**



52% of businesses in 2021 were micro businesses with 0-9 employees, 37% small with 10-49 employees, 9% medium businesses with 50-249 employees and 1% large businesses with 250+ employees.<sup>2</sup>

<sup>1</sup> Source: ONS Gross Value Added by Industry and Upper Tier Local Authorities, 2019

<sup>2</sup> Source: ONS UK Business Counts (IDBR based data) - <https://www.nomisweb.co.uk/>

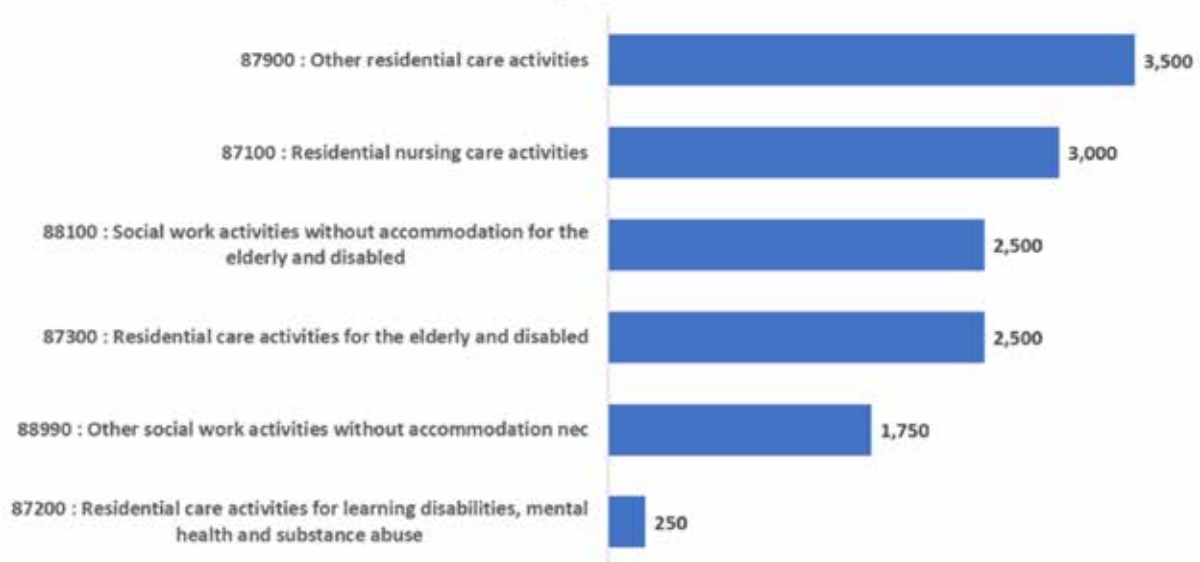
The sector saw growth in employment prior to Brexit but saw a decline during EU transition and early in the pandemic. Based on the Annual Business Survey (ABS) and the Business Register Employment Survey (BRES)<sup>3</sup>

- 13,500 jobs in Staffordshire in 2020 equivalent to 3.8% of all employment slightly lower than the 4.3% share for England.
- 525 growth in jobs between 2015-2019 but 200 decline between 2019-2020 which is equivalent to 1.5% decline in employment compared to 3.1% decline seen nationally.



Other residential care activities and residential nursing care activities are the largest sub-sectors in the Social Care Sector with 3,500 jobs<sup>4</sup>.

Social Care Sector Employment in Staffordshire 2020



Other social work activities without accommodation saw the strongest employment growth pre-COVID, while social work activities without accommodation for the elderly and disabled were the hardest hit at the start of the pandemic<sup>5</sup>

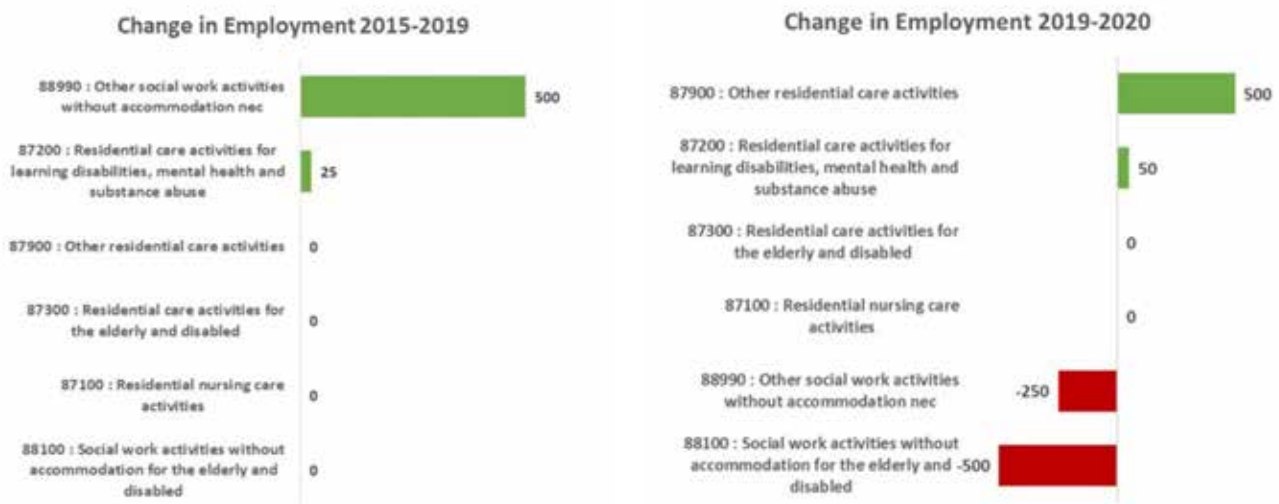
<sup>3</sup> Source: EMSI Social Care Sector jobs trend - based on the Annual Business Survey (ABS) and the Business Register Employment Survey (BRES) - Social Care Sector definition based on ONS Standard Industrial Classification (SIC) code definition - <https://www.economicmodelling.co.uk/>

<sup>4</sup> Source: Business Register Employment Survey (BRES) – Social Care sub-sectors - <https://www.nomisweb.co.uk/>

<sup>5</sup> Source: Business Register Employment Survey (BRES) – Social Care sub-sectors - <https://www.nomisweb.co.uk/>

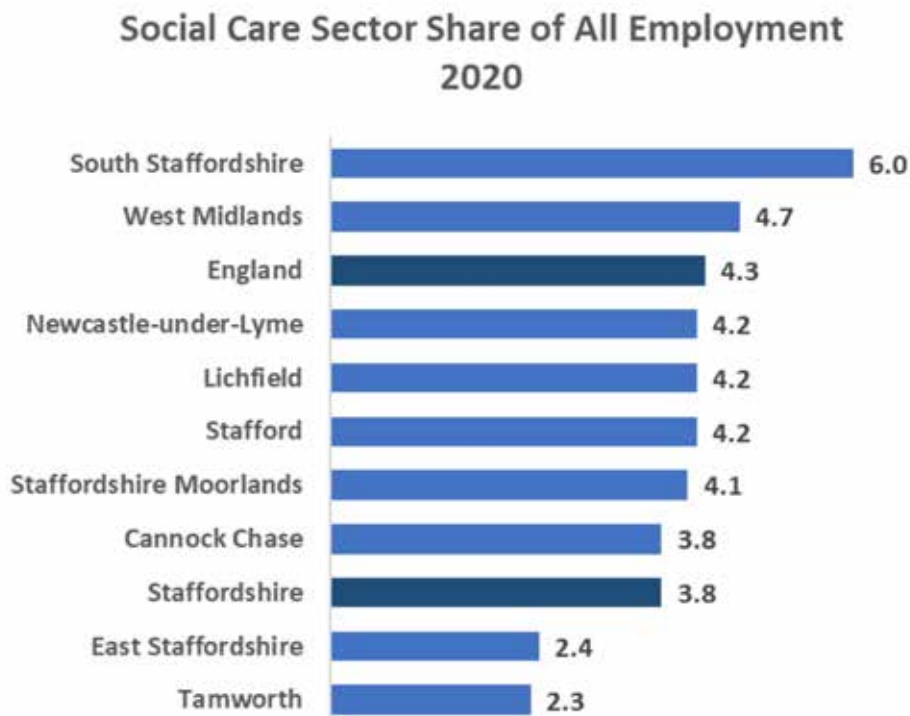
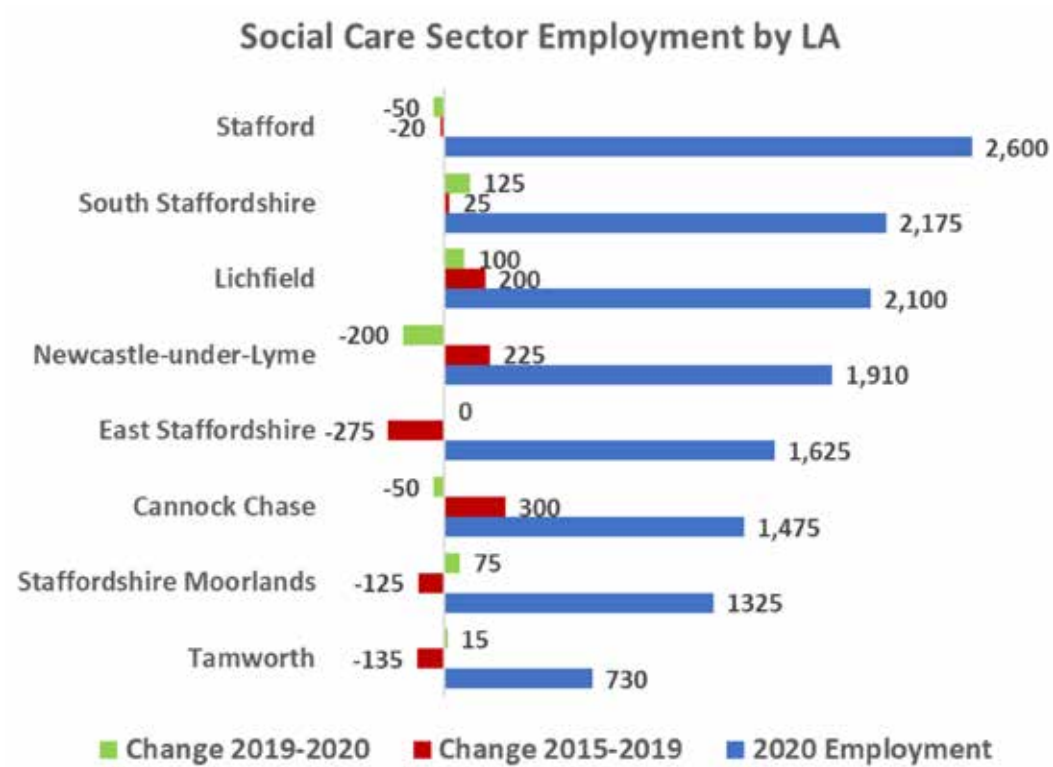
The top posted social care sector occupations in demand are demonstrated below.<sup>6</sup>

Job Title	Total/Unique (Sep 2021 - Aug 2022)	Posting Intensity	Median Posting Duration
Support Workers	5,724 / 1,496	4 : 1	33 days
Care Assistants	3,901 / 1,037	4 : 1	34 days
Health Care Assistants	1,532 / 439	3 : 1	35 days
Staff Nurses	2,384 / 415	6 : 1	35 days
Registered Nurses	1,480 / 389	4 : 1	33 days
Night Assistants	842 / 267	3 : 1	35 days
Registered General Nurses	1,411 / 246	6 : 1	35 days
Residential Support Workers	556 / 156	4 : 1	33 days
Care Workers	650 / 138	5 : 1	36 days
Night Nurses	1,007 / 128	8 : 1	39 days













There is a wide variation in the size of the Social Care sector and its employment share across the boroughs and districts in Staffordshire<sup>7</sup>.

<sup>6</sup> Source: EMSI Social Care Sector Job Postings - <https://www.economicmodelling.co.uk/> (To find out more about what these occupations and more entail please visit the Department for Education (DfE) funded LMI For All website - [https://www.lmiforall.org.uk/explore\\_lmi/](https://www.lmiforall.org.uk/explore_lmi/))  
<sup>7</sup> Source: Business Register Employment Survey (BRES) - <https://www.nomisweb.co.uk/>



The main locations for social care sector job vacancies are<sup>8</sup>

<sup>8</sup> Source: EMSI Social Care Sector Job Postings - <https://www.economicmodelling.co.uk/>

City	Total/Unique (Sep 2021 - Aug 2022)	Posting Intensity	Median Posting Duration
Stafford, England	8,312 / 1,957	4 : 1 	34 days
Burton Upon Trent, England	4,923 / 1,270	4 : 1 	35 days
Cannock, England	2,950 / 819	4 : 1 	35 days
Tamworth, England	2,116 / 621	3 : 1 	34 days
Lichfield, England	2,624 / 595	4 : 1 	35 days
Leek, England	2,128 / 447	5 : 1 	35 days
Newcastle Under Lyme, England	956 / 411	2 : 1 	35 days
Uttoxeter, England	1,264 / 288	4 : 1 	33 days
Rugeley, England	1,057 / 284	4 : 1 	35 days
Burntwood, England	732 / 253	3 : 1 	35 days

## Pay Levels

Many roles in the social care sector have a relatively low level of pay.

In 2021 the average Workplace Hourly Pay for all sectors in Staffordshire was £13.56<sup>9</sup>.

In 2021/22 the average pay for care workers in the Local Authority was £12.91<sup>10</sup>. The average pay for care workers in the independent sector was £9.46, which is £0.55p higher than the national living wage<sup>11</sup>.

Average hourly rates of pay for children's independent social care vary from £10.16 to £21.00 depending on the position.

The average Annual Pay for Social Care Sector in 2021 was £18,838, below national average of £20,699 but well below average workplace FT annual pay for all sectors in Staffordshire of £28,162.<sup>12</sup>

## Skills

There is a greater demand for hard skills than is identified by taking a snapshot of workforce profiles (e.g. LinkedIn)<sup>13</sup>

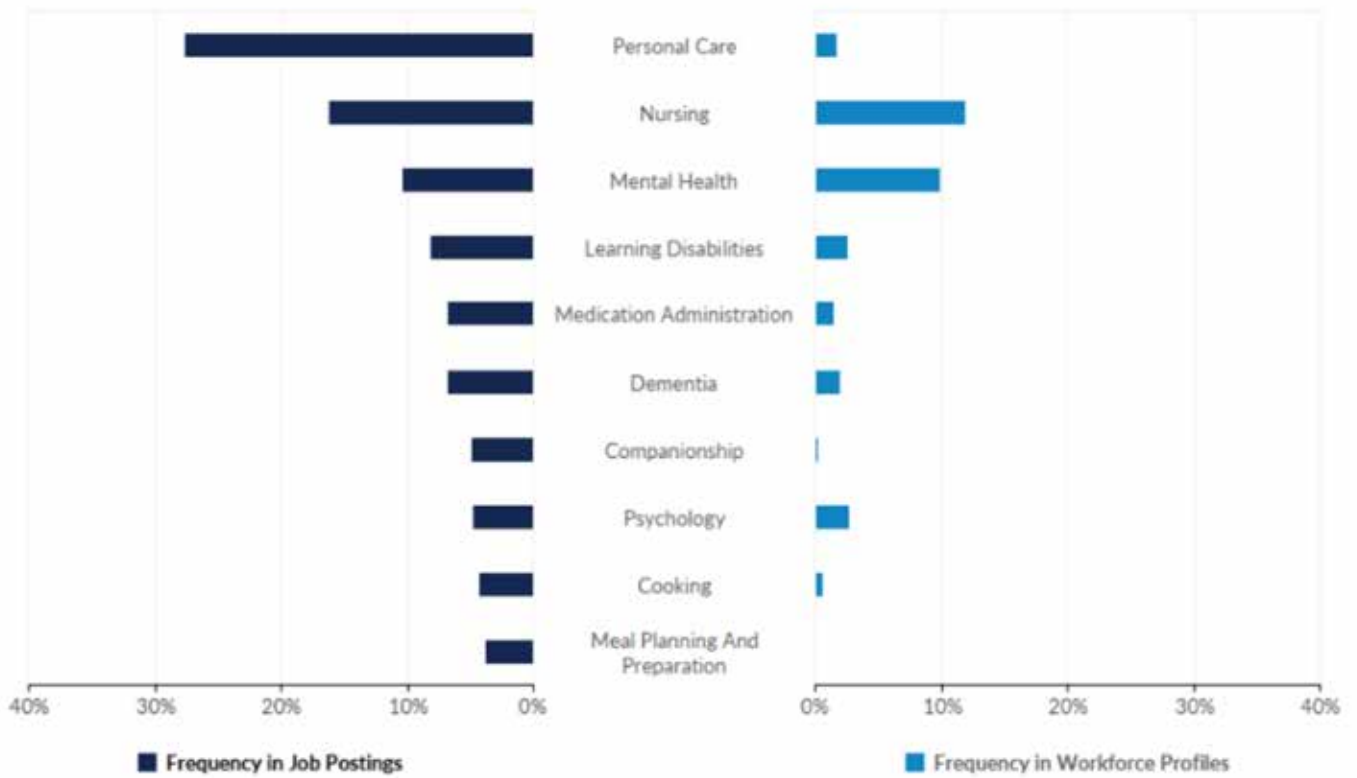
<sup>9</sup> Annual Survey of Hours and Earnings (ASHE)

<sup>10</sup> Source: Skills for Care 2021/22 Dataset

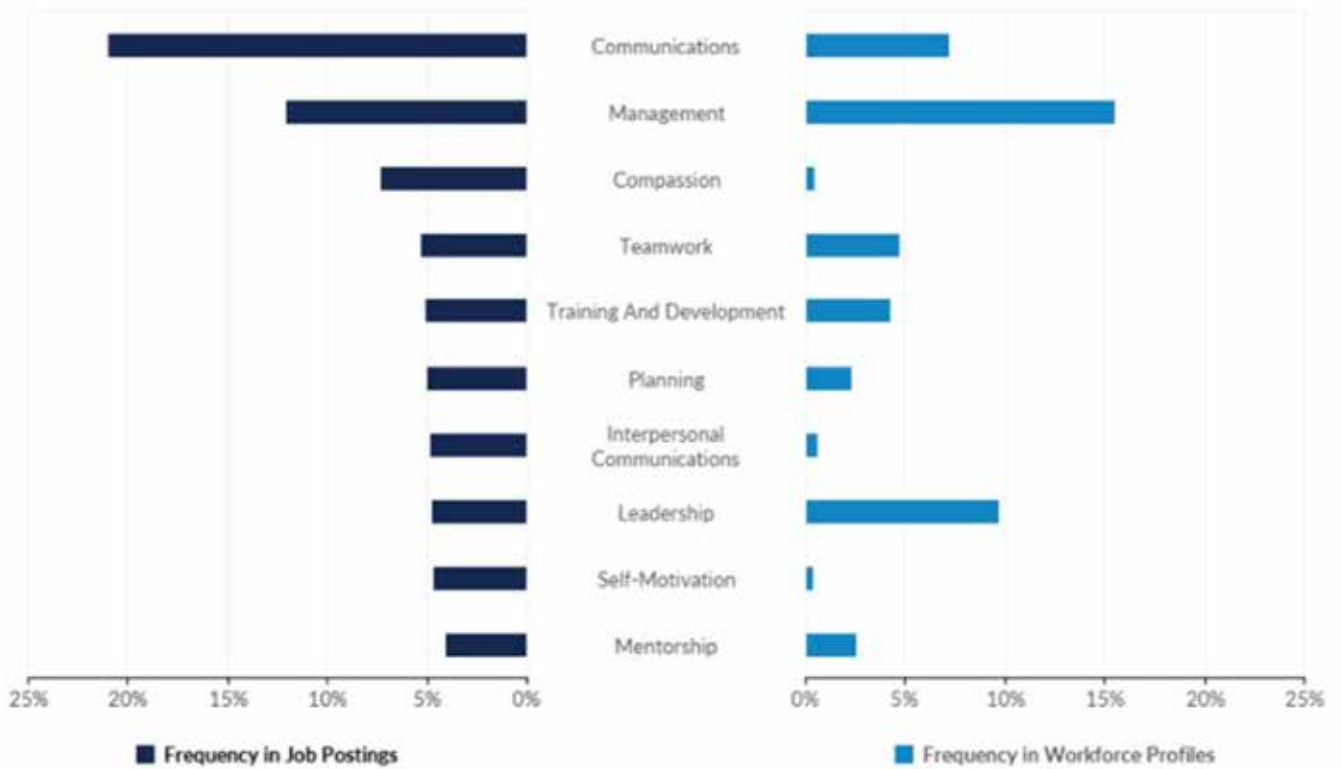
<sup>11</sup> Source: Skills for Care 2021/22 Dataset

<sup>12</sup> Source: EMSI Social Care Sector Staffing Patterns Data in Staffordshire excluding child day care activities - based on Labour Force Survey microdata and Annual Survey of Hours and Earnings (ASHE) - <https://www.economicmodelling.co.uk/>

<sup>13</sup> Source: EMSI Social Care Sector Job Postings hard skills - <https://www.economicmodelling.co.uk/>



There is a different pattern for the match of common skills in demand.<sup>14</sup>



<sup>14</sup> Source: EMSI Social Care Sector Job Postings common skills - <https://www.economicmodelling.co.uk/>

## Skills supply – Education and Training Learning Aim Enrolments by Sector Subject Area<sup>15</sup>

- The most directly related tier 2 learning aims to the Social Care Sector are 'Health and Social Care' and 'Child Development and Wellbeing'.
- There were 5,820 'Health and Social Care' aim enrolments in 2020/21 representing 22.5% of all aims - a rise of 30 or 0.5% since 2018/19.
- There were 510 'Child Development and Wellbeing' aim enrolments in 2020/21 representing 2.0% of all aims – a rise of 160 or 46% since 2018/19.
- These rises are in contrast to a 19% decline for all education and training participation.

## Skills supply – Apprenticeship Starts by Sector Subject Area<sup>16</sup>

- There were 1,680 'Health and Social Care' apprenticeship starts in 2020/21 representing 21.8% of all starts the highest of all Tier 2 sector subject areas - a rise of 10 or 0.6% since 2018/19 which is in contrast to a 17% decline for all apprenticeships.
- There were 480 'Child Development and Wellbeing' starts in 2020/21 representing 6.2% of all starts – a decline of 70 or 13% since 2018/19.

## Social care for adults

Based on data collected by Skills for Care, approximately 21,000 people work in adult social care in Staffordshire. An estimated 1,400 of these are Personal Assistants, providing care to an identified person (and this estimated number includes Personal Assistants who provide care to children, and provide care on behalf of the NHS. Approximately 700 people are in local authority employment, but the vast majority (approximately 17,500) work in the independent (private and voluntary) sector. Approximately 11,500 people work in residential and nursing care, 7,200 in home care, and 950 in day services and community services.<sup>17</sup>

86% of the workforce is female and 14% male. The average age is 43, with 10% of the workforce under 25, 64% aged between 25-54 and 27% aged 55 or above. 91% of the workforce is white, with 9% from Black and other communities. 93% of the workforce is British, with 3% from the European Union and 4% from counties not in the European Union.

According to the Skills for Care data, approximately 94% of the workforce in care homes is employed on a permanent basis with approximately 6% on a temporary, pool or bank basis; however, it is believed that there is also an increasing use of agency staff. 63% of the workforce in nursing care homes work full time and 49% of the workforce in residential care homes work full time. Approximately 5% are on zero hours contracts.

<sup>15</sup> Source: DfE Localism Dashboard Education & Training Participation - <https://viewyourdata.education.gov.uk/> – NOTE: Stoke-on-Trent and Staffordshire data

<sup>16</sup> Source: DfE Localism Dashboard Apprenticeship Starts - <https://viewyourdata.education.gov.uk/> – NOTE: Stoke-on-Trent and Staffordshire data

<sup>17</sup> Source: Skills for Care 2021/22 Dataset



According to the Skills for Care data, average pay in the independent sector for all job roles at March 2021 was £9.75 per hour.

## Recruitment and retention

Based on the 2021/22 Skills for Care data, turnover was 32.2% with 59% of leavers remaining in the sector. At the time the vacancy rate was 9.9% and the sickness rate was an average of 9.4 days. There was an average of 9.1 years of experience in the sector, with a third of the workforce having more than 10 years of experience.

The West Midlands vacancy rate is 10.4% (at April 2022) – with registered managers' vacancies at 10.3%, senior care workers at 7.9%, care workers at 12.7% and registered nurses (in care homes) at 18.5%.

## Qualifications<sup>18</sup>

Across the adult social care workforce, based on the 2021/22 Skills for Care data, 50% had a relevant qualification, with 1% at entry level/level 1, 25% at level 2, 18% at level 3, and 8% at level 4 or above. This compares with 49% across England. 54% of the workforce had completed or were working towards the Care Certificate, compared to 48% across England.<sup>19</sup>

73% of the workforce in a managerial role had a relevant qualification, with 36% at level 4 or above, which is comparable across England. 45% of this workforce cohort had completed, or were working towards, the Care Certificate, compared to 48% across England.

49% of the workforce providing direct care had a relevant qualification, with 1% at entry level/level 1, 28% at level 2, 18% at level 3 and 2% at level 4 or above. This compares with 46% across England. 60% of this workforce cohort had completed, or were working towards, the Care Certificate, compared to 48% across England.

Completion of the Care Certificate by Personal Assistants is lower, at approximately 30%, compared to 48% across England. This data requires further investigation.

## Children's Social Care

In the previous section, the analysis drew on data for adult social care collated by Skills for Care. There is not a comparable data source for children's social care, and there is less information about independent sector services. However, some children's social care providers did respond to a local survey, which is set out in a later section.

## Staffordshire County Council

Within the County Council, there are 788 staff in children and families' services, including around 210 staff working as Family Practitioners, and 40 as Family Time Workers. There are approximately 80 staff in residential care, and 40 Personal Advisors. There are around 330 social workers or senior practitioners. There are approximately 80 management or leadership roles.

<sup>18</sup> Source: Skills for Care 2021/22 Dataset

<sup>19</sup> Although the Care Certificate is available to all, the main target is workers who are new to social care

89% of the workforce is female, with an average age of 43. The average age of qualified social workers is lower than other roles, with safeguarding social workers having both the lowest average age (36 years) and service with the Council (3.9 years).

77% are White British, with 12% from other ethnic groups and 11% unknown. The average service with the Council is 8.1 years. The turnover in 2021/22 is 16%, higher than the previous year by around 5%. Turnover in social work posts is highest in safeguarding roles.

Social workers are qualified to degree level (level 5).

## Independent Providers

Local providers of social care for children were asked to share similar anonymised information; 14 providers based in Staffordshire did so.

The information below relates to these responses and may therefore not be typical of all providers in Staffordshire.

77% of the workforce is female, 23% male – a much higher percentage of male workers than other social care settings. 77% are White, and 23% from Black and other ethnic communities. 84% are British, with 2% from European Union countries and 14% from countries other than those within the European Union.

11% are under 25, 81% aged between 25-54, and 8% aged 55 or above. 67% work full-time and 33% part-time. 93% are on a permanent contract, with 4% working as bank or pool staff, and 3% on zero hours contracts.

31% have less than 3 years' experience in their current role, 48% have 3-9 years' experience and 21% 10 years' experience or more. 25% have less than 3 years' experience in the sector, 40% 3-9 years' experience, and 35% more than 10 years' experience in the sector.

The turnover rate is 23.9% and the vacancy rate is 9%. Average hourly rates of pay vary from £10.16 to £21.00 depending on the position

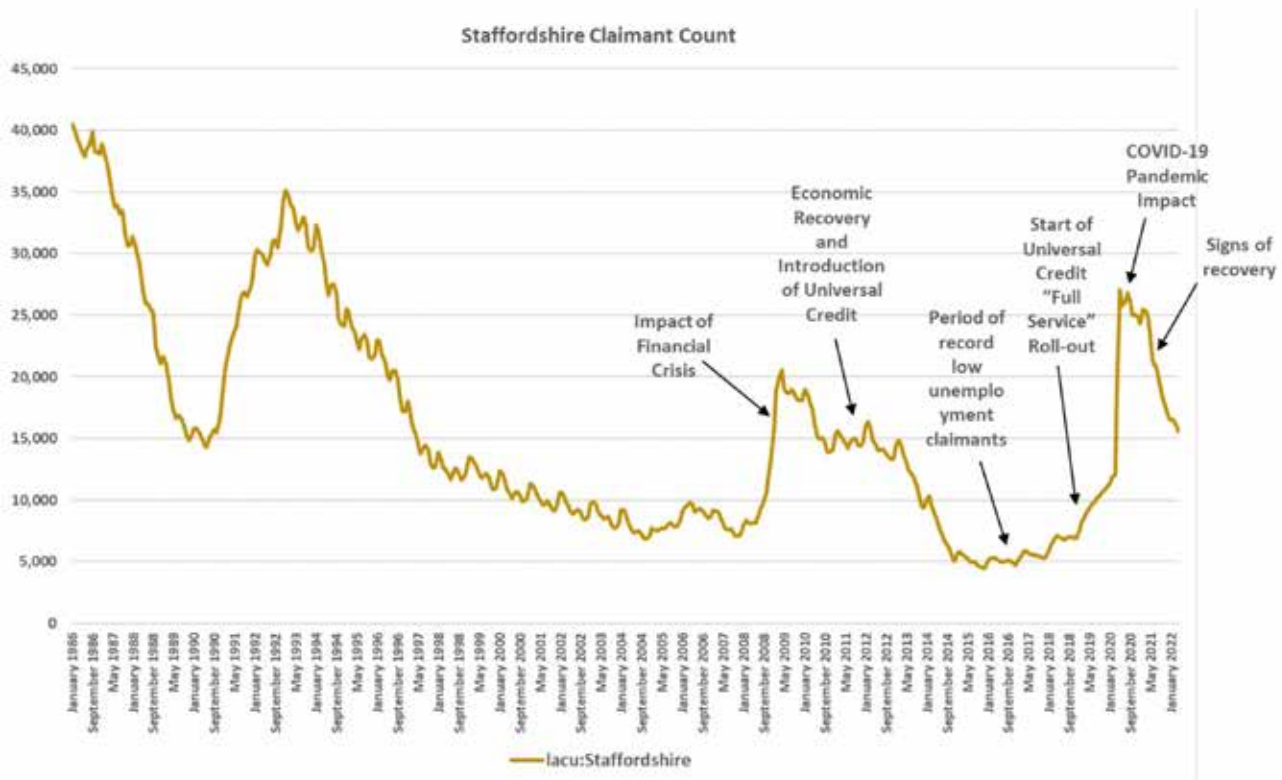
20% of this workforce have no social care qualifications. 6% have entry level/level 1, 4% have level 2, 51% have level 3 and 19% have level 4 or above.

## B What challenges are we facing?

### The local employment market in Staffordshire

Covid-19 has had an unprecedented impact on the local, national, and global economy. The employment and skills landscape has changed considerably in a very short space of time. As the pandemic spread, Staffordshire saw the number of residents on work related benefits significantly increase due to business closure and redundancies, but since 2021 the number of work-related benefits claimants has gradually declined, due to the furlough scheme and the record high number of job vacancies available across the economy to aid the recovery from the pandemic.

The claimant count is the number of working age adults claiming work-related benefits and is recognised as the best local measure of unemployment or loss of work hours at a local level<sup>20</sup>. The claimant count in Staffordshire saw a decline of 495 claimants between March and April 2022 to a total of 15,515 claimants, this was a 3.1% decrease which was similar to the 3.5% decline seen nationally. The claimant rate has declined again to 2.9% of the working age population in April<sup>21</sup>.



Following Covid-19 there has been a decline in the overall workforce due to increased economic inactivity, with an increase in over 50s retiring early and more young people staying in education. Following Brexit, many existing European Union migrant workers have returned to the EU, and there is a reduced level of migration to meet the demand for labour and skills, which has also impacted the health and care sectors.

Overall there is a very tight labour market nationally with around one unemployed worker for every available job vacancy, leading to increased competition between sectors for labour, skills and talent to aid the recovery from Covid-19 and to meet demand.

Labour and skills shortages contribute to market fragility where care providers go out of business or hand back contracts which can lead to the risk of unmet need for care and support.

The impact of the cost of living and fuel challenges seen throughout 2022 will also affect the wider economy, and the social care workforce as part of that economy.

<sup>20</sup> Source: Claimant Count, April 2022, Office for National Statistics (ONS) - <https://www.nomisweb.co.uk/>

<sup>21</sup> Source: Staffordshire County Council Economic Bulletin, May 2022 – monthly Claimant Count update provided each month - <https://www.staffordshire.gov.uk/Business/Staffordshire-means-Back-to-Business-Support-Scheme/Economic-recovery-and-renewal/Economic-recovery-and-renewals.aspx>

## Adult Social Care

The projected growth of the population aged 65 and above is 3.1% by 2024, 8.5% by 2027 and 18.4% by 2032 .

Adult social care is expected to see a growth in demand for workforce, broadly in line with the projected growth of the population aged 65 and above. There is also expected to be an increase in the need for some posts (e.g. relating to assessments) in order to implement adult social care reforms that are expected in 2023. The level of recruitment will be a combination of this additional demand, plus replacing existing staff who leave the sector.

<b>Projected Year</b>	<b>Estimated Workforce requirement</b>	<b>Extra staff needed due to increased demand compared to 22%</b>	<b>Impact of potential staff turnover</b>	<b>Total new staff required compared to 2022 (increased demand + sector leavers)</b>
2024 (+2 years)	23,983	+920	+5,416	+6,336
2027 (+ 5 years)	25,575	+2,512	+13,951	+16,462
2032 (+10 years)	28,506	+5,443	+29,505	+34,948

The impact of the short-term increase due to adult social care reforms for 2023 is not yet fully know, but with a mid-range estimate of around 90 adult social care staff required (plus around 100 staff to support financial assessment, brokerage and similar functions). In addition, an estimate of approximately 25 additional social workers required to support the introduction of Liberty Protection Safeguards.

## Children's Social Care

Based on ONS population projections, Staffordshire's 0-17 year old population compared to 2022 is expected to increase 0.2% by 2024, reduce by 0.3% by 2027 and reduce by 1.8% by 2032.

The impact on the social care workforce supporting children not primarily driven by the number of children in the population, but by their levels of needs and by national policy which sets out how that need should be met. This could mean a change in the balance of staff required in future years between Family Practitioners, qualified social workers, and managers. The number of children in care will affect the number of staff required to provide direct support, and to hold reviews; even if Staffordshire were to reduce the number of children in care, if other local authorities were not able to do so, the level of independent sector provision in Staffordshire may not change.

<sup>22</sup> Source: 'Office for National Statistics 2018 Based Population Projections

<sup>23</sup> Source: Skills for Care Dataset & Staffordshire County Council Insight Team Projection

<sup>24</sup> Source: 'Office for National Statistics 2018 Based Population Projections

The table below shows the impact of an estimated new demand of 2%, but this assumption is heavily caveated, for the reasons set out above<sup>25</sup>.

	2022	2024	2027	2032
Staffordshire population aged 0-17	167,600	167,935	167,097	164,583
% change		0.2%	-0.3%	-1.8%

	Current staffing	Recruitment required to maintain current capacity		
Qualified SW roles	402	110	274	540
Other roles	386	82	205	410
All roles	788	192	479	950

## C What has the workforce told us?

We carried out engagement to give people the chance to put their views about the strengths, challenges and opportunities that exist in the Staffordshire social care workforce. This was between the start of June and the end of July 2022 and included two online surveys, one with current and prospective social care employees, and the other with organisations involved in social care provision. We also held a series of face-to-face focus groups with key staff groups. In total the two surveys received 323 responses: 261 from individuals and 62 from organisations.

- Current social care employees responding to the survey reported high levels of job satisfaction and advocacy, with the overriding reason being that they enjoyed what they did – something positive to build on. The aspect of their job that the greatest proportion of respondents were satisfied with was team working – e.g. receiving “good support from my peers...good work ethos and teamwork spirit”. Many respondents were also satisfied with their physical work environment and their ability to make a difference (80%); “I get the pleasure of making a positive difference/contribution to the lives of some of the most vulnerable people in society”.
- Despite this, organisations still reported huge challenges in recruiting staff, and some difficulties in retaining staff. This was substantiated by almost 20% of survey respondents working in the sector suggesting that they would be leaving their role or the sector within the next 12 months. A common theme related to “little pay, large amounts of responsibility, very little recognition”. The longer people had worked in their existing role, the less satisfied they appeared to be
- Work-life balance, the ability to make a difference and pay were the most important factors to the survey cohort; yet pay and work-life balance were also two areas where they were least satisfied – suggesting potential factors to look at to drive up job satisfaction.

- Pay and benefits appear to present the biggest challenge, and therefore the biggest opportunity, for both recruitment and retention. Organisations who responded also thought the biggest challenge for recruitment was, followed in by travel costs
- Beyond pay and benefits, the most frequently cited ways from survey responses to improve working in the sector were better expense payments including mileage and improving training and progression opportunities. Some local organisations have introduced successful initiatives around these challenges that others could learn from and further develop.
- Successful initiatives do not always have to be costly; through simple cost-free methods such as saying thank you, and introducing an employee of the month, some responding organisations felt they had made staff feel more valued and, in turn, improved retention.
- Linked to staff feeling more valued, respondents suggested that social care roles were not seen as equal to those in health care, both generally and in relation to specific roles such as those of nurses in care homes. Raising the public profile and perception of working in the sector might in turn make social care staff feel more valued and improve retention, and attract more into the profession.
- Several responding organisations welcomed the potential for future support with the recruitment process itself; for example, support with where to advertise, access to jobs fairs, and financial assistance with promotion and marketing.
- Linked to recruitment, focus groups discussed that job centres and careers advice sometimes promoted care roles as a 'stop gap' rather than as a credible profession or career choice.
- In terms of resilience and retention, it was identified that there was a need for good support for mental health and well-being, and a need to build strong team dynamics with effective peer support. There was some suggestion that this could be achieved through effective reflective practice.
- On training and development, some felt that regular mandatory training refreshes were demotivating for staff, particularly when training related to things that staff already did well and had done for some time. Training and development often related to skills needed in the 'here and now' and did not have a long-term view. To build resilience, motivate and retain staff, there was a feeling that there must be a view on longer-term development and upskilling. This longer-term view should also consider succession planning; understanding that skilled staff may move on, but this should not leave settings in a skills deficit.
- Some felt there was a need for staff to undertake more non-care related training, including improving digital skills, and in some cases improving administration and back-office skills, so that managers were able to delegate appropriately.

## D What has worked elsewhere?

Social care is one sector amongst many within our economy, and can learn from different sectors. There are several key areas of focus to help improve recruitment and retentions which have been employed by other sectors:

- To address labour supply shortages other sectors have more effectively promoted labour market entry opportunities to develop skills and move up the career ladder.
- Social care employment can build on the development of transferable skills e.g. team working, communication, etc. Once in employment, people can be upskilled and move up the career ladder (where one is in place).
- There may be opportunities to support recruitment – eg. through the Countywide employment and skills task group partners such as the DWP and Job Centres, with Communications and Marketing campaigns including Job Fairs and local Jobs Brokerage Services.
- To address skills gaps in other sectors stronger partnership working between employers, skills providers and the public sector have been established – with early identification of skills gaps and future demand for skills to inform curriculum development and training and skills supply provision programmes / business support for employer workforce development and training plans. Social care staff need the right training and support to carry out complex, difficult tasks for vulnerable residents, despite the challenges in freeing up time when there is already pressure to meet immediate care needs.
- Large businesses are able to provide training for specialist skills but the majority of small businesses in the sector are not able to support the development of the necessary skills, including digital skills. There is an opportunity for stronger partnership working between employers, skills providers and the public sector, and continuing to develop the local skills ecosystem for the Social Care Sector to ensure support meets demand – with training provision pathways for social care including sectoral reskilling and upskilling at a range of levels, e.g. through a Social Care hub or skills bootcamp, an Academy, apprenticeships, T Levels, and the most effective use of available national funding for courses, etc.<sup>26</sup>. These opportunities include business support for employer workforce development and training plans e.g.. Skills Hub/ Growth Hub/SMBB Programmes (Nil Cost Training) and free .free Level 3 qualifications <sup>27</sup>-under the Government Plan for Jobs.

Specific to social care there are long-term issues with workforce pay and conditions. Although pay has risen as a result of the National Living Wage, for many care workers pay are in competition with roles such as shop assistants and cleaners. The ability of local partners to address this is, however, constrained by the level of funding available for social care (with public funding being a major source of income for social care providers).<sup>28 29</sup>

<sup>26</sup> Developing the digital skills of the social care workforce | The Nuffield Trust

<sup>27</sup> A full level 3 qualification is equivalent to an advanced technical certificate or diploma, or 2 A levels

<sup>28</sup> What's your problem, social care? | The King's Fund (kingsfund.org.uk) -

<https://www.kingsfund.org.uk/publications/whats-your-problem-social-care>

<sup>29</sup> Adult social care workforce survey: December 2021 report -

<https://www.gov.uk/government/statistics/adult-social-care-workforce-survey-december-2021>

Establishing a stronger career structure for staff with clear progression pathways is also important. Currently, staff lack a career structure – care workers with five or more years' experience are now paid on average only £0.15 an hour more than new entrants.

- Employers have a key role in promoting the social care sector to improve perceptions and attractiveness of the sector with a focus on careers and business/skills/training support for lifelong learning.
- There is also a need for more work to promote the image of the sector as a whole. There is an opportunity to improve perceptions and attractiveness of the Social Care Sector to aid recruitment and retention, supported by employers and partners, and also to promote - careers and business/skills/training support for lifelong learning alongside the social value and merit of the work beyond just pay – e.g. through Careers Hubs including School CEIAG, Enterprise Advisors & work placements, SCC PDMS website LMI/CEIAG/Career pathways and Jobs Brokerage Service.
- International recruitment is also a factor in addressing these vacancies. Brexit and changes to immigration policy will have an impact on the ability of social care providers to successfully fill these vacancies.
- There are opportunities in the sector to make better use of new digital technologies to improve quality, efficiency and the experience of people drawing on care and support as well as supporting more integrated care and improving the health of the population.
- There are some potential opportunities to wider the talent pool of people who can work in social care, promoting good practice in supporting applications from people with disabilities, and people with convictions (depending on the nature of their previous conviction).
- There is a wide range of information and advice about working in social care, including information about career pathways, training and job vacancies. Some local areas have drawn together this information into a joint website, linking to national, local and other resources as appropriate.
- Early, proactive and frequent engagement with schools can also encourage young people to consider social care as a fulfilling career choice, supported by virtual or physical work experience, and recruitment can be effectively supported by ambassadors for the social care sector.

At a national level, there has been some interest in models of care which have been developed in other countries, such as the Buurtzorg model of community nursing care which has been developed in the Netherlands. This model combines person-centred and strength-based practice with a model of self-managed teams. There are significant differences between the Dutch system for funding community care, and also between a nursing care and a social care model, and it is unlikely that this, or similar models, could be imposed as a large-scale top-down approach. However, there are some key principles which could be adopted from and this similar approaches trialled in the UK, including an emphasis on reducing bureaucracy, on developing local teams with strong local connections, on developing models of teams with a stronger emphasis on coaching and continual improvement rather than command and control, on developing a stronger role for teams providing direct and frontline care in developing effective solutions co-produced with the people they support and others.