

Meeting	Care Scrutiny Committee
Date	15 November 2018
Title	Recruiting and retaining domiciliary care staff in Gwynedd – Older People
Author	Rhion Glyn, Senior Business Manager
Member	Gareth Roberts, Cabinet Member Adults, Health and Well-being

1. Introduction

- 1.1. In April 2018, Cwmni CELyn was commissioned to research the recruitment and retention of domiciliary care staff in Gwynedd. It was recognised that the Adults, Health and Well-being Department was facing challenges as a commissioner and provider and that the research would be the basis to assist the response to the situation. As well as presenting the conclusions of the research thus far, this report will highlight the context and will draw attention to work which is already underway in the field of domiciliary care. It will also provide a basis and a starting point for the Scrutiny Committee to consider the work in greater detail in order to improve the situation.
- 1.2. Historically, it has been a challenge to ensure sufficient domiciliary care in the Meirionnydd area. By now the situation has deteriorated and for the first time there is a waiting list for care in parts of Arfon and Llŷn. This is a cause for concern for the department and means that a number of people have to go without care across the county. The impact of this is additional pressure on families or the users having to remain in hospital for longer than required. This problem in itself is not unique, throughout the Country there are reports of huge pressure on the sector but in Gwynedd the situation has got significantly worse recently. The implications of not being able to support people in their homes has an impact on a large number of people, staff and partners such as the Health Board.
- 1.3. In addition to this the Social Services and Well-being Act (Wales) 2014 reinforces the need for us to put individuals at the centre of what we do, to work with partners in a way which prevents needs from increasing. It also emphasise the need to ensure the well-being of those who need care and support in order to make sure that the right support is provided at the right time.
- 1.4. The brief for the research was as follows: To research the recruitment and retention of domiciliary care staff in Gwynedd and find out:
 What is the situation across the sector in Gwynedd?
 What are the reasons behind this?
 What is the good practice based on research?

2. Background

- 2.1. The population of Gwynedd is ageing, particularly the population aged 85 and over. The average age of people who receive a social care service in Gwynedd is 84 years and 1 in 4 of the oldest people in Gwynedd are living with dementia. This means a huge challenge to ensure that suitable, timely and sustainable support is available for the older population.
- 2.2. The census data over the last decade shows that the population of those aged 65 and over has increased in Gwynedd by 28% and the population of those aged 85 and over has increased by 157%. By 2030 it is expected that there will be a further increase of 68%.
- 2.3. The Gwynedd Ageing Well Plan (2016) states that there is a high percentage of households with only one person, and that person is over 50 years old. The percentage is already higher than the rest of Wales – 28% compared with 24% - and it is expected that this will increase to 32% by 2030. At the same time, the aspirations of older people – and those of society in general are changing. All surveys show that older people wish to remain in their own homes, to be as independent as possible and to have as much choice as possible. Obviously, these will have implications in terms of the requirement to satisfy the care needs of an increasing proportion of the population and this at a time when local authority budgets are under continuous pressure. Preparing for ageing well will be a challenge for everyone, and we all have a part to play when trying to seek the best solutions for older residents.

- 2.4. The main aim and principles of the Adults, Health and Well-being Department are:

“To provide social care services for residents aged 18 years old and over who require advice, information, support or care due to specific needs . The Department’s main principles are:

- *Ensuring the well-being of those who require care and support*
- *Our services will focus on people, and give them a strong voice in the decisions made on the support they will receive*
- *Services will be provided by means of Partnerships and by collaborating*
- *Services will attempt to prevent the escalation of people’s needs, and endeavour to ensure that the right support is available at the right time*

The four above principles interweave in order to achieve the Department’s objective, namely to enable Gwynedd adults to: **‘Live my life as I wish.’**

- 2.5. Once a person comes to the department’s attention, the first step is that the worker discusses with the person what is important to him/her and how they can achieve that. This will encompass the individual’s health and care needs, and will take place jointly with health workers. If care and support needs are identified, any arrangements to respond to those will be discussed and confirmed with the individual and very often the family. If there is a specific need for domiciliary care, the lead worker (who can be a health or a social care worker) will contact the Brokerage Officers within the department and they will set about to find a provider who can provide care.

3. The conclusions thus far

The initial conclusions of the research are summarised below:

- 3.1. The research has demonstrated that the situation regarding the current recruitment and retention of home care staff is very problematic and is now in 'crisis'. The situation is complex, there is no one reason which is causing the problem, but rather a combination of matters and factors.
- 3.2. Domiciliary care staff are completely vital for maintaining older people at home for as long as possible. There are waiting lists in areas where it hasn't been a problem before and providers report that they are finding it difficult to respond to the demand as a result of lack of capacity and that it is very difficult to run as a 'business' by now. The words "crisis" and "breaking point" are used often by carers to describe the seriousness of the situation.
- 3.3. The demand for care in the community is increasing as the population ages, but there is now no sufficient workforce to respond to the demand. The situation is not unique to Gwynedd, the country's challenging financial situation has an effect on the money available for the field and therefore has an effect on the level of payment that the authority is able to pay to providers. Nevertheless there are 'factors and unique matters' which are within the ability of Gwynedd Council to respond to, and to influence to address the situation and create a sustainable model for the future.
- 3.4 The conclusions of the research can be summarised under the following headings:

3.4.1 Pay and conditions of service

The research has demonstrated that current staff 'retention' is as much of a problem as recruiting from the outset, with providers competing against each other for a small pool of staff. Workers feel that their level of pay is too low to 'live' on, whilst the responsibilities of the post and the expectations placed on them have increased over the years. Staff also reported that it was difficult to maintain a balance between life and work because of the need for them to be available for lengthy hours, and that they are keen to work established block hours/shifts in order to have stability. They are often attracted to work in the Health sector and in the retail field.

It is concluded that the Council's internal workforce feels that the recent changes in their conditions of service have a negative effect on staff retention, with this in turn affecting the recruitment of new carers as they hear of the reasons why workers leave.

3.4.2 Image, status and profile

When talking to workers as part of the research work, some said that they felt that there was a lack of acknowledgement of the important work that domiciliary care workers do to keep people at home. Carers don't know what will be facing them when they enter someone's home and they need to be ready to respond there and then.

There are also concerns regarding the need to register providers by 2020, which, in the view of workers places further responsibilities on them without acknowledgement through pay to support that.

3.4.3 Attracting people to the field

Although work has been happening to attract workers to the field jointly with schools, Careers Wales and the Jobcentre Plus, that work has happened on an ad-hoc basis. There has also been a lack of a clear career pathway in the field, unlike the situation in other fields, e.g. health workers.

3.4.4 Commissioning arrangements

It appears that commissioning arrangements have an effect on the ability of providers to offer a sustainable service, and on the terms and conditions that they have agreed with their staff. Concerns have been raised by some providers that the care business is no longer profitable. Providers also had strong feelings that the sector is not sustainable and that we are currently in crisis with the problem of staff recruitment and retention at its worst.

4. Other considerations

- 4.1 Gwynedd Council and the Betsi Cadwaladr University Health Board has a project underway which looks at a different model of providing home care. The intention is to commission jointly to achieve outcomes, rather than paying for specific tasks or hours.
- 4.2 The project thus far suggests that it is possible to reduce the demand by working with the individual and family on the outcomes, work on more of a community and flexible basis, and give more capacity for domiciliary care workers to make decisions. Although advantages are anticipated the research highlights the significant challenge regarding how home carers could see the change, the risk of losing experienced staff during a time of uncertainty, and therefore the need to ensure that they have been included along the journey and own the change.
- 4.3 A presentation was made to the members of the Care Scrutiny Committee on the initial successes of the project on 29th May 2018.

5. Next steps

Some work continues to need to be done in order to complete the research, and the conclusions thus far have demonstrated that there are elements which need further work. Work is already underway with domiciliary care workers on the alternative model of provision and that will continue. The Scrutiny Committee is now asked to consider what further work is needed in order to reduce the effect of the current situation and remove barriers to providing a quality domiciliary care service which places the individuals at its centre. The final report will be available for members in order to carry out that work.

