



Gofal Cymdeithasol **Cymru**
Social Care **Wales**



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Welsh Government

Understanding attraction and recruitment in the Welsh social care and child care sector and the role of WeCare Wales

Main report



Prepared by



**Urban
Foresight**



Gofal Cymdeithasol Cymru
Social Care Wales

Social Care Wales is responsible for regulating and developing the social care workforce in Wales, as well as setting priorities for research, supporting innovation and gathering data. It is funded by the Welsh Government and was established in 2017.

socialcare.wales

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.cymru | **.wales**

WeCare Wales aims to raise awareness and understanding of social care, early years and childcare and attract more people with the right skills and values to work in caring roles with children and adults. It is part of Social Care Wales and has been running since 2019.

wecare.wales



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Meeting our challenge

This report is part of a wider research programme to generate insights into how workforce challenges in the social care and child care sector can be addressed. It consists of five reports and two additional resources. This document is highlighted.

Five reports on attraction, recruitment, and job-seeking in the social care and child care sector:

Understanding attraction and recruitment in the Welsh social care and child care sector and the role of WeCare Wales

Main report

Understanding job-seeking behaviours: insights for social care

Main report

Understanding attraction and recruitment in early years and childcare in Wales and the role of WeCare Wales

Main report

Understanding attraction and recruitment in the Welsh social care and child care sector and the role of WeCare Wales

Summary report

Understanding job-seeking behaviours: insights for social care

Summary report

Two additional resources to support care employers and the sector:

Social care and child care: attraction, recruitment and retention

A guide for employers

A resource for social care employers to personalise job-seeking

User personas toolkit

Executive summary

This report explores the current attraction and recruitment crisis in the Welsh social care and child care sector, as well as the role of WeCare Wales in supporting attraction.

Recommendations

Addressing the attraction and recruitment crisis in the social care and child care sector is a difficult task. Drawing on findings from desk-based reviews and qualitative research with stakeholders, ten recommendations aimed at WeCare Wales and four aimed at social care and child care employers are proposed.

Table 1: Recommendations to address the recruitment and attraction crisis in social care and child care in Wales

Recommendations for WeCare Wales	Priority
Expand advertising and campaigning activities.	Immediate
Develop more resources for the website.	Immediate
Extend the 'Introduction to...' courses and GIS.	Immediate
Develop a clearer identity.	Immediate
Support the sector to professionalise from within.	Medium-term
Engage and support the local system.	Medium-term
Improve use of the job portal.	Medium-term
Focus on small and medium providers and settings.	Medium-term
Facilitate better provider networks and relations.	Long-term
Support the sector understand the importance of diversity, equality and inclusion.	Long-term
Recommendations for employers and providers	Priority
Get involved in local and national discussions about the sector.	Immediate
Seek out local and national funding.	Medium-term
Explore the use of digital technology.	Long-term
Collaborate with other providers and settings.	Long-term

For the purposes of this report, '**social care and child care**' will be used to refer to the entire sector. This should be taken to include the three sub-sectors: social care, social work, and early years and childcare.

It is also recognised that wider system change is needed for meaningful change to happen. Six priority areas where system change is needed are also provided.

Table 2: Priority areas where system change is needed

System changes needed

- 1 A sector-wide approach to pay

- 2 Longer-term capital investment into WeCare Wales

- 3 Consideration of the needs of the sector in non-care policy directives

- 4 A redesign of benefits systems

- 5 A greater commitment to co-production of policies and approaches

- 6 Multi-sector collaboration to develop a future supply of workers

Methods and approach

To understand the current challenges, the role of WeCare Wales, and potential strategies to address the crisis, Urban Foresight conducted a series of desk-based reviews and qualitative engagement with stakeholders in the sector.

This included:

- Online interviews and/or discussions at online forums with 52 social care and child care providers and employers.
- Online interviews with 13 individuals representing 5 services involved in supporting roles in the sector.
- Desk-based reviews of:
 - the social care and child care and employment context in Wales
 - relevant literature concerning attraction and recruitment challenges
 - a review of solutions to this problem elsewhere.

Key findings and recommendations were presented back to the sector across two sense-checking workshops held in March 2023. The first workshop included seven stakeholders from Social Care Wales, and the second had 29 stakeholders from across the wider sector.

Understanding the context

Findings from the desk-based reviews show that:

- **The sector is facing chronic and worsening shortages in its workforce** – care demands are rising while providers and employers face increasing challenges in attracting, recruiting and retaining staff. It is estimated there are around 5,000 vacancies across the sector.
- **The Welsh social care and child care sector is complex** – there is a diversity of settings and stakeholders working across different scales and in different sub-sectors. This can make it challenging to navigate.
- **The Welsh Government is taking a series of actions to make Wales a full-employment, high-tech, high-wage economy** – some of these moves may hinder recruitment efforts in the social care and child care sector.
- **Learning from other care settings that have developed strategies to address attraction and recruitment issues can be helpful** – it is clear that pay and professionalisation, reforming the system, and adopting a long-term approach are key to success.
- **Learning from attraction campaigns beyond the sector is also useful** – outside the sector, attraction challenges have been addressed through innovative and targeted social media campaigns and improving and showcasing benefits.

The attraction and recruitment crisis

Engagement with employers and those in supporting roles identified a series of complex challenges and obstacles faced in attracting and recruiting social care and child care workers.

Attraction and recruitment challenges

The stakeholder engagement and desk-based reviewed highlighted a series of key issues that contribute to the attraction and recruitment crisis.

- Attraction challenges include pay and incentives, working conditions and responsibilities, professionalisation and regulation, lack of public awareness, and a series of external challenges including COVID-19, Brexit, and the ongoing cost-of-living crisis.
- Recruitment challenges include application and interview processes, ineligible applicants, competition between employers, workforce planning issues, and difficulties recruiting a diverse workforce.
- The sector is also facing challenges in retaining staff that are likely to get worse in the future.

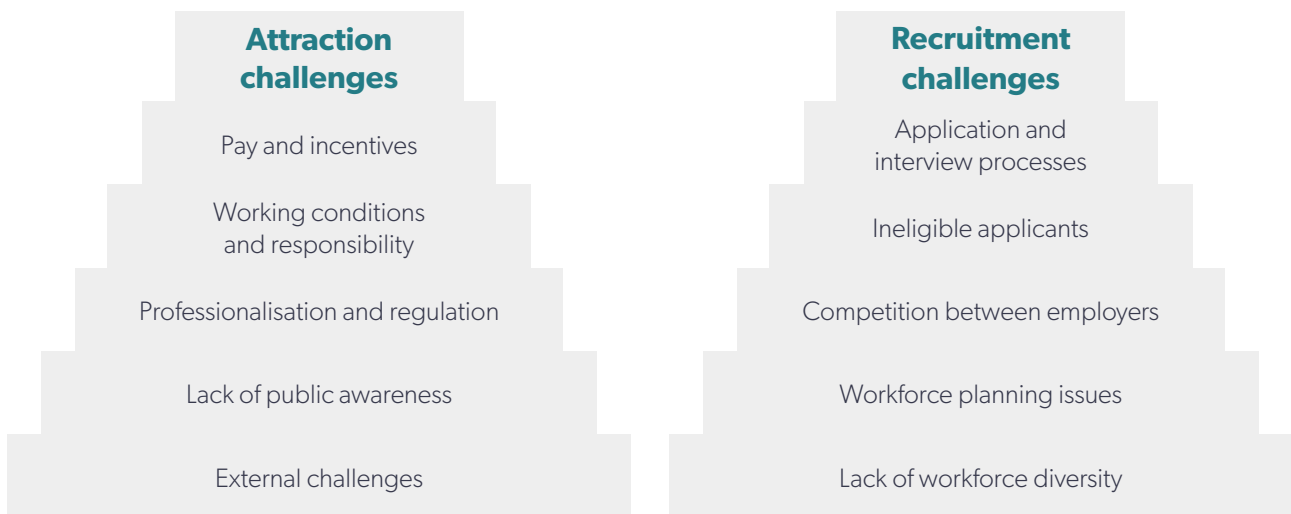


Figure 1: Attraction and recruitment challenges in the social care and child care sector

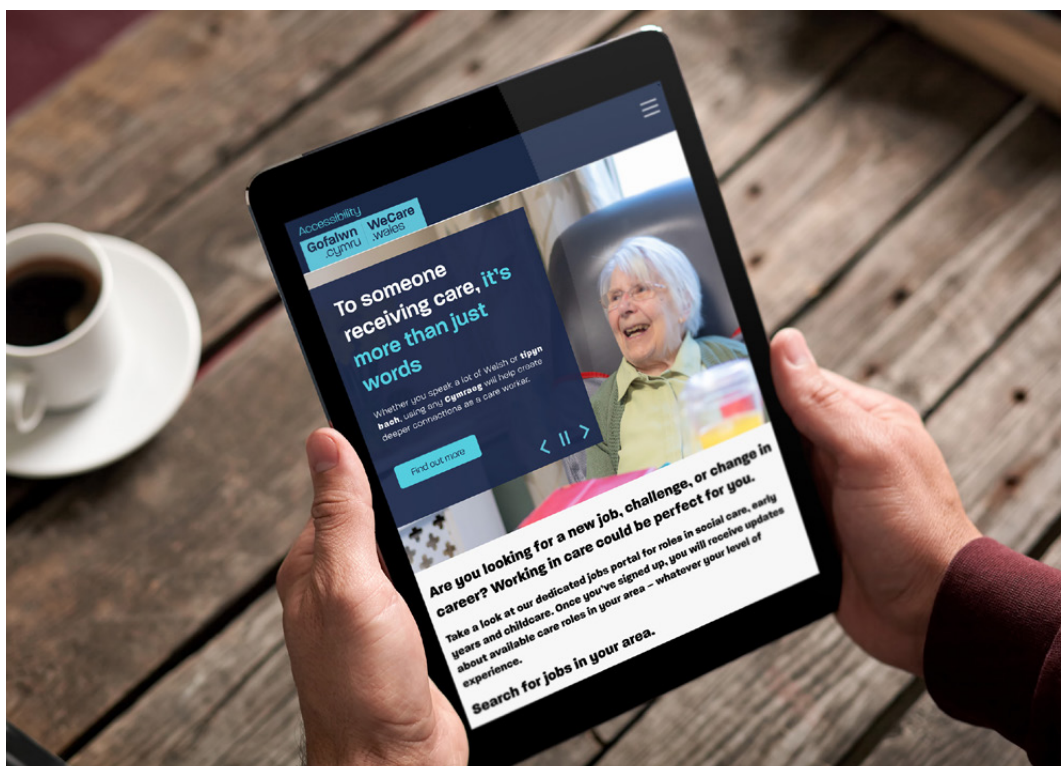
Solutions and strategies

WeCare Wales has been successful in supporting the sector in attraction efforts. Employers and providers have also been active in developing their own activities to engage jobseekers and improve attraction and recruitment.

The role of WeCare Wales

WeCare Wales brings significant value for the sector. Its activities, that are designed to engage and inform jobseekers, are perceived as vital to address attraction and recruitment challenges. However, awareness is low.

- Those with knowledge of WeCare Wales believe it is a positive force for the sector. However, awareness of WeCare Wales and its work is low and uneven.
- WeCare Wales's activities have been successful in raising awareness and changing perceptions of the sector, and in engaging and supporting jobseekers and potential applicants.
- The website is effective at targeting suitable audiences, but there is a lack of clear identity, while the job portal has not achieved the traction expected.



Provider- and employer-led solutions

Employers and providers also engage in a series of activities to encourage jobseekers to enter the sector that may be useful for others to consider.

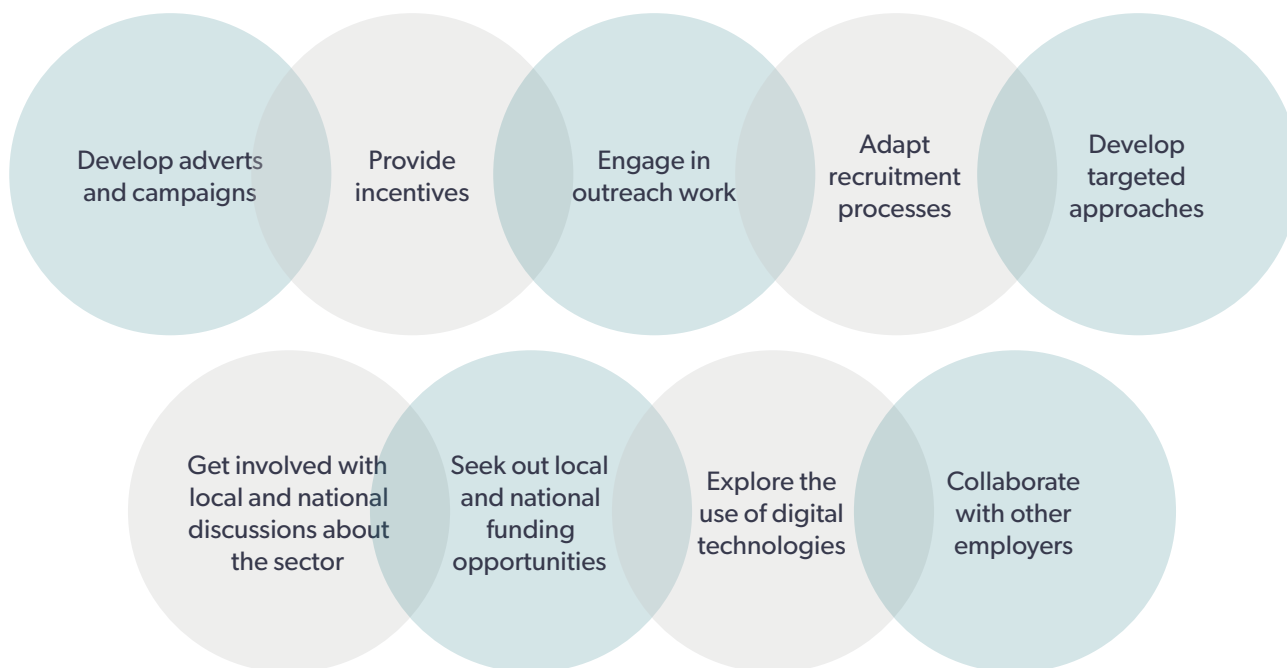


Figure 2: Employers' activities to encourage jobseekers to enter the sector

- Strategies to address attraction include advertising campaigns, providing incentives for joining, and collaborating with local actors. There are also innovative steps being taken to attract drivers.
- To address issues in recruitment, solutions are focused on streamlining the application process, spending significant time working with applicants, and providing flexibility across all stages of the recruitment process.
- Although successes are reported, respondents stress these solutions are not enough to solve attraction and recruitment issues where pay remains low and barriers to entry are high.

This report

This report is structured as follows:

- 1 **Introduction** – provides an overview to the attraction and recruitment crisis and an introduction to WeCare Wales. A brief overview of the methods and approach is also included. More detail is provided in Appendix I.

- 2 **Understanding the context** – provides findings from the desk-based review about the current workforce shortages. Outlines the key components of the Welsh social care and child care sector and employment landscape. Additional information about sub-sectoral differences, policies, and relevant actors found in Appendices II-V accompanies this section.

- 3 **Learning from other recruitment campaigns** – provides an overview of existing literature on strategies to recruit in the social care and child care sector and nine case studies covering best practice in recruitment in and beyond the sector.

- 4 **Current attraction and recruitment challenges in Wales** – findings from the qualitative stakeholder engagement are provided. Here, the view of employers and those in supporting roles are presented and analysed. The section examines attraction strengths and challenges; recruitment challenges; variations within the sector; and impacts on retention. It also shows how the care trilemma is useful to understand the complexity of improving attraction.

- 5 **Provider- and employer-led strategies and solutions** – presents strategies providers and employers use.

- 6 **The role and value of WeCare Wales** – reviews the impact of WeCare Wales, including awareness and perceptions of the programme overall and specific activities, with a focus on the [wecare.wales](https://www.wecare.wales) website. An assessment of the value for money is also provided.

- 7 **Recommendations** – lists and provides detail about the recommendations that have emerged from this research.

- 8 **Conclusion** – summarises the report and provides reflections on its wider implications.

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1

Introduction



Introduction

The social care and child care sector – including social care, social work and early years and childcare – supports individuals who receive care and support, as well as their families and wider society.

However, longstanding challenges in attraction and recruitment have worsened in recent years, and the sector is now undergoing a workforce crisis¹. Sector-wide and nationwide, employers are struggling to attract, recruit and retain their workforce.

To help address the challenges in attraction and recruitment, WeCare Wales was launched in March 2019. It aims to raise the profile of the social care, social work and EYCC workforces and improve attraction across the sector. WeCare Wales runs local and national campaigns, develops online resources, and provides support to jobseekers and employers².

Social Care Wales commissioned Urban Foresight to conduct a review to understand the challenges and opportunities in attraction and recruitment and assess the impact of WeCare Wales to date.

For the purposes of this report, '**social care and child care**' will be used to refer to the entire sector. This should be taken to include the three sub-sectors: social care, social work, and early years and childcare.

This report presents the findings from this project, before presenting a series of recommendations aimed at WeCare Wales, providers and employers.

The attraction and recruitment crisis

The Welsh social care and child care sector is undergoing an attraction and recruitment crisis. An estimated six per cent of posts are unfilled at the time of writing.

The social care and child care sector is vital to society. Workers support and safeguard vulnerable people, empower individuals who receive care and support to live independently, and improve standards of childhood development.

Despite this, the work is generally low-paid and emotionally and physically challenging. Most roles are paid hourly, with irregular hours. It is part of the Welsh foundational economy that "creates and distributes goods and services that we rely on for everyday life"³, but unlike sectors with similar low pay and unpredictable shift patterns, involves significant responsibility.

In 2021, 10,423 people started a new role in social care whilst 7,987 left the sector. In total, 2,676 social care vacancies were reported by employers, with a further 1,675 posts 'held vacant' (a post that is purposefully left unfilled). The combination of vacant and held posts represents 6.1% of the total workforce (5,581 posts)⁴.

Also, according to CWLWM in 2021, 54% of EYCC settings had to replace staff and it was estimated that there were a further 1,000 vacancies in EYCC settings⁵.

WeCare Wales

WeCare Wales was launched by Social Care Wales in 2019 to support attraction in the sector. It fills an important gap in becoming the Wales-wide home for the promotion of the social care and child care sector.

Its work is mainly facilitated via its website – wecare.wales and via regional career connectors funded by Social Care Wales's workforce development grant programme that operate in the seven Welsh regions.

WeCare Wales's activities can be categorised across five areas, all of which fall within 'attraction':

- 1.** Improving the public image of the sector through advertising and campaigning and promoting social care and child care as a career option.
- 2.** Providing clarity to and promoting career pathways within the sector, developing resources to support employers and jobseekers.
- 3.** Engaging and supporting potential employees through activities such as outreach with jobseekers and schools.
- 4.** Providing training opportunities for those interested in joining the sector.
- 5.** Supporting employers and service providers in their own efforts to attract and recruit workers, including hosting a job portal for the sector.

These areas of focus are shaped by a stakeholder advisory group and informed by evidence from research. WeCare Wales also prioritises engaging people involved in the sector, including employees and those who receive care and support. Most of its advertising campaigns, for example, include real care workers.

Methods and approach

Urban Foresight conducted desk-based and primary research to develop the findings for this report.

Two overarching questions steered the project:

- 1.** What is the current landscape of recruitment, attraction and retention in the social care and child care sector in Wales and what is the role of WeCare Wales within this landscape?
- 2.** How could WeCare Wales better understand and support recruitment, attraction and retention in the social care and child care sector moving forwards?

A series of techniques were used to collect primary and secondary data (see Appendix I for more information). Data collection took place from December 2022-February 2023.

Data collection activities included:

- Desk-based reviews to understand the Welsh social care and child care and policy context as well as relevant literature concerning attraction and recruitment challenges and solutions elsewhere.
- Online interviews and/or discussions at online forums with 52 social care and child care providers and employers including those from the private sector, third sector, and local authorities (LAs).
- Online interviews with 13 individuals representing five services involved in supporting roles in the sector including those working at WeCare Wales and Social Care Wales, other organisations that support care workforces, and regional connectors.
- Key findings and recommendations were presented back to the sector across two sense-checking workshops held in March 2023. The first workshop included seven stakeholders from Social Care Wales, and the second had 29 stakeholders from across the wider sector.

This report uses 'stakeholders' to refer to all interviewees. Where something applies to just providers/employers or those in supporting roles, this is made clear.

Report structure

1 **Introduction**

2 **Understanding the context**

3 **Learning from recruitment campaigns elsewhere**

4 **Social care and EYCC recruitment and attraction: the current situation in Wales**

5 **Provider- and employer-led strategies and solutions**

6 **The role and value of WeCare Wales**

7 **Recommendations**

8 **Conclusion**

2

Understanding the context



Understanding the context

It is important to understand the context for the workforce challenges. This section outlines the key challenges, the components of the Welsh social care and child care sector, and the context of employment in Wales.

Takeaway messages

- 1 The Welsh social care and child care sector is complex, comprised of a diversity of settings and stakeholders working across different scales and in different sub-sectors. This can make it a challenging sector to navigate.
- 2 The sector faces chronic and worsening shortages in its workforce. Care demands are rising while providers and employers face increasing challenges in attracting, recruiting and retaining staff.
- 3 Given the employment landscape in Wales, there are opportunities to attract a wider pool of applicants into the social care and child care sector. However, political ambitions to develop a high-wage, high-skilled economy may complicate attraction efforts.
- 4 Understanding how to monitor the future employment market is important. There is no singular, clear source to monitor the future employment market, so consulting a range of different resources is needed.

Understanding workforce shortages

The Welsh social care and child care sector faces chronic shortages in its workforce, experiencing issues attracting and recruiting new staff and retaining existing employees.

The social care workforce faces challenges associated with a high rate of turnover and number of vacant posts. As noted, it is estimated that across Wales about 5,581 (6.1%) posts are vacant or held. Most vacancies are in commissioned services, with estimates suggesting that 68% are in commissioned services compared to 32% in local authority-run services. Domiciliary care and adult residential care face the most significant shortages with 1,979 and 1,701 vacancies respectively⁶. A survey of early years workers conducted in 2021-22 further showed that 37% of settings (120) had job vacancies⁷.

Research suggests that a complex set of factors contribute to the workforce crisis⁸:

- **Low pay** – A 2021 report found that 56% of the social care workforce in Wales earned below the Real Living Wage of £9.50 an hour⁹. The Welsh Government are addressing this issue. For example, local authorities and health boards will be provided with around £70 million to implement the real living wage uplift by June 2030. This should mean workers receive £10.90 per hour¹⁰.
- **Perceptions of the sector as low status** – Research conducted by Social Care Wales surveyed perceptions of the sector amongst the general public through 1,000 telephone interviews and an online survey with 242 respondents. This showed that two thirds of respondents felt the care roles were poorly paid and had long hours¹¹.
- **Insecure working arrangements** – Although 78.5% of those employed in the sector in Wales are on permanent contracts, some roles require insecure working arrangements and short-term and zero-hours contracts are common¹².
- **Difficulties delivering care in rural areas due to travel requirements**¹³ – Domiciliary care in particular relies on a workforce that can drive.
- **High levels of sickness within the workforce** – Social Care Wales workforce data shows that in 2021, at least 85,848 days were lost to sickness, with over 75% of these days being due to long-term sickness. As submitting this data was optional for commissioned services, it is likely that the number of sickness days is higher than this figure¹⁴.
- **Increasing complexity of the role, and the responsibilities involved** – Workers have significant responsibility over the wellbeing of others, and are exposed to risks such as verbal and physical abuse and infection.

The role of external factors

Workforce shortages have been affected by recent events such as COVID-19, Brexit, and the ongoing cost-of-living crisis.

Before January 2021, urban areas relied on a steady flow of workers from the European Union, but since Brexit, recruiting international workers has become much more challenging. Many employers are unfamiliar with the sponsorship process¹⁵, while many existing EU migrants have left the UK¹⁶.

The COVID-19 pandemic placed increased strain on the social care and child care workforce, as responsibilities expanded and risks involved in the work increased. In Wales and England, for example, the social care workforce was twice as likely to die from COVID-19 compared to the general working-age population¹⁷. This experience led to some workers leaving the sector due to burn-out.

Additionally, the ongoing cost-of-living crisis means there are increased pressures on demand for social care and child care services, while much of the workforce are at risk from poverty. In April 2020, the Health Foundation reported that over a quarter of UK residential care workers lived in or were on the brink of poverty, with around one in ten workers experiencing food insecurity. This situation will only get worse as the cost-of-living crisis continues¹⁸.

The threat of increasing demand

Shortages in the workforce present a significant challenge to the overall care system. As future demand for care services is likely to rise, workforce shortages will also rise without long-term interventions.

In Wales, the percentage of the population over the retirement age is higher than in England, Scotland and Northern Ireland, and this part of the population is growing¹⁹. By 2040 projections suggest that the proportion of people aged over 75 in Wales will increase by 53% and by 2050 one in four of the population will be aged over 65²⁰. This means that people will be living longer with needs that require more complex support. For example, the number of adults living with severe dementia is predicted to double by 2040²¹.

Further, since 2011, the proportion of people providing between 20-49 hours of unpaid care per week in Wales has increased from 1.9% to 2.2% in 2021²². Pre-pandemic it was estimated that around 96% of all care in Wales was provided by unpaid carers such as family and friends²³. There are also increasingly higher levels of children who are looked after, and between 2013 and 2022, the number of children looked after increased by 22.9% to 7,080²⁴.

Additionally, there are clear political commitments to increase access to early years and childcare settings. For example, programmes such as Flying Start increase the number of hours of free quality child care parents and guardians can access for children aged 2–3.

Meeting these increased care demands requires significant investment. Pre-pandemic, the Health Foundation estimated that the Welsh social care budget would need to reach £2.3 billion by 2030/31 to match the growing demand, and this is likely to have increased as a result of the impact of COVID-19²⁵. As it stands, the Welsh Government 2023-2024 budget allocates just £10,979,811 of resources across both health and social care²⁶. There is a long way to go until the sector is adequately funded.

The policy context

Increasing worries about the implications of the ageing population and the impacts of the COVID-19 pandemic means that building resilient health and social care systems is a policy priority. The Welsh Government are actively responding to these workforce challenges, but more must be done.

In Wales, the health and social care system is devolved and is funded by the Welsh Government. The Welsh Government Draft Budget for 2023-24 outlined a commitment to investing a further £165 million into health and social care. This budget includes a recurrent provision of £70 million to continue to support the implementation of the Real Living Wage for social care workers. It is hoped that this, alongside funding for schemes such as apprenticeships, will help the social care and child care sector to support an adequate workforce to fulfil the care needs of the population²⁷.

The Welsh Government have also formed an expert group who have looked at the potential of creating a National Care and Support Service for children, families and adults. Practical recommendations have been created across seven thematic areas covering creating a National Care and Support Office, co-producing care with citizens, supporting and valuing the workforce, supporting what matters, taking a localised approach, promoting prevention and early intervention, and ensuring that care is financially accessible²⁸.

Other key policies and strategies are listed in Appendix IV. These documents stress the need to better equip the health and social care systems to deal with future challenges and meet population needs. To do so, there is a need for:

- Better integration of systems.
- Preventative services.
- Improved access to and quality of health and care services.
- Ensuring adequate staffing levels equipped with the right skills.

The components of the social care and child care sector

The Welsh social care and child care system is complex, including a variety of roles related to the care of both adults and young people. This can make it a challenging sector to navigate.

The social care and child care workforce

The sector is divided into three main categories or sub-sectors: social work; social care; and early years and childcare.

There are variations between the sub-sectors regarding the type of work completed and salary structures. Appendix II gives additional information about differences in minimum registration and qualification requirements.

- Social care is the largest sub-sector with almost 91,000 workers²⁹. Social care refers to care and support to improve quality of life, to help people manage their daily activities and live as independently as possible. It includes adult and children's residential and domiciliary care settings as well as more specialised provision, such as mental health support.
- Early years and childcare (EYCC). EYCC settings provide opportunities for play and learning through a nurturing and well-being approach whilst maintaining children's safety. A range of regulated settings are included such as childminders, day nurseries, children's centres, holiday clubs, clychoedd meithrins, playgroups, and flying start. It is estimated that around 15,000 are employed in EYCC settings in Wales³⁰.
- Social work is the smallest sub-sector. It is a protected title profession (meaning only people with the qualification and who are registered can practise). Social work involves protecting, supporting and empowering adults and children. In April 2023, of the 6,729 registered social workers, 4,457 reported having a social work caseload.

In terms of pay, newly qualified social workers can expect to earn at least £27,000 per year. There are clearly defined career progression routes, and experienced senior social workers can earn over £50,000 per year. However, there are no set salary bands for social care or EYCC. Most workers earn the real living wage³¹. There are opportunities to move into senior positions, managing people or services (with additional qualifications).

Across the whole sector, there are 5,276 registered providers and settings. Given 1,320 of these are self-employed childminders, for the purposes of this report, the focus is on the 3,956 settings that employ other staff (see Figure 3). Social care and EYCC services can be provided by private and third sector organisations and local authorities (LAs), while social work services are largely provided by LAs. In social

care, commissioned services are twice the size of LA-run services, with 61,000 people employed in commissioned services compared to 30,000 in LAs³².

The social care workforce is largely made up of women (81%) from a white ethnic background (nearly 90%)³³. In EYCC settings, only 3% of staff are men³⁴. The age profile of the workforce varies according to specific services and roles. For example, social care commissioned services have a higher proportion of people aged between 16-35 years, whereas LA services have the highest proportion of workers in the 46-65 age group³⁵. Additionally, it is estimated that over 40% of the workforce possesses some Welsh language ability³⁶.

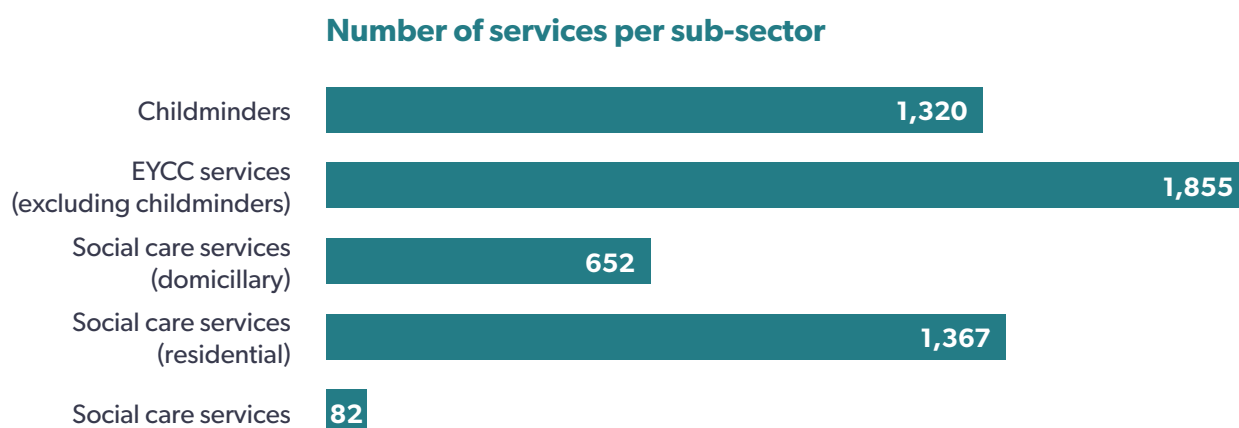


Figure 3: Number of registered care services in Wales by sub-sector

The development of the Welsh care system

The social care and child care sector has undergone significant transformation in recent years. There is a current drive to improve working conditions and address workforce shortages.

In 2016 the Regulation and Inspection of Social Care (Wales) Act (RISCA)³⁷ was introduced. RISCA aimed to place service quality and improvement at the heart of regulation, establish a regulatory system in line with the Social Services and Well-being (Wales) Act 2014, and strengthen protection for those who require care and support, and the workforce. RISCA was based on five key principles:

1. Reflecting the changes brought about by the Social Services and Well-being (Wales) Act 2014.
2. Putting people at the centre of their care and support.
3. Developing a coherent and consistent approach across Wales.
4. Tackling provider failures.
5. Responding quickly and effectively to new models of services, and concerns over quality of care and support.

As of April 2018, the requirement for the registration and regulation of care homes, secure accommodation, residential family centres and domiciliary support services was introduced. New requirements were put into place for service providers, such as completing staff checks, training, and maintaining records. Service providers are now legally required to complete an Annual Return while LAs must provide annual reports about their care and support services³⁸.

As part of this change, the Care Council for Wales became Social Care Wales. The reformed organisation had a wider scope, bringing social care and EYCC within its scope. Social Care Wales has a remit for workforce regulation, workforce development, innovation, research and data for social care and social work, and a role of workforce development for EYCC.

Social Care Wales was also granted new powers and duties, one of which was workforce registration. Registration was introduced for social workers, social work students, children's care home managers and staff, and adult care home managers, and in 2022 this expanded to include adult care home workers³⁹. EYCC workers do not have to register at the moment.

More recently, the establishment of the Social Care Fair Work Forum, that brings together government, regulators, employers and unions, is an important step to address workforce challenges.

The forum sets out what good practices should look like in social care to ensure that the value of the work is recognised and rewarded (particularly following the COVID-19 pandemic), and that it is a career that people aspire to pursue⁴⁰. It also aims to give employees a voice and collective representation. The Fair Work Forum's priorities for 2023 include⁴¹:

- Considering the development of a unique model of collective bargaining to improve terms and conditions for workers.
- Developing a draft framework with role descriptors and responsibilities for social care roles to improve recognition of what the role involves and what progression looks like.
- Making the case for extensions of the Real Living Wage uplift to all ancillary employees in care homes and looking at how provisions for sick pay can be improved.
- Prioritising employee rights and voice and conducting research into the impact of zero-hour contracts.

Other important actors are listed in Appendix III.

The employment context in Wales

To fully understand attraction and recruitment issues and opportunities the social care and EYCC sector faces, it is also important to understand the broader workforce dynamics in Wales.

Employment and unemployment

Although almost half a million people in Wales are economically inactive, and a further 79,200 seeking work, vacancies have risen since COVID-19.

As of December 2022, the Welsh employment rate was 72.2%. Men are more likely to be in employment – 80.3% of men are economically active compared to 69.6% of women⁴². There were an estimated 1.32 million vacancies across the UK in February 2022, a 62.5% increase from pre-pandemic levels⁴³.

Table 3 provides a breakdown of the key reasons for economic inactivity based on data between October 2021 to September 2022. In this period, 460,400 people were economically inactive (24.1% of the population). Of this group, 17.2% wanted a job (approximately 79,200 people). This highlights a potential applicant pool for the sector⁴⁴. There are also an estimated 11.1% of 16–18-year-olds and 15.2% of 19–24-year-olds who are 'not in education, employment or training' (NEET)⁴⁵ as of 2020.

There is an uneven spread of unemployment, between and within counties. For example, Swansea West has the highest unemployment rate at 10.3% and at the lowest end of the scale is the Vale of Clwyd with a rate of 1.7% (see Figure 4 and Appendix V).

COVID-19 has altered some employment trends. Employment and unemployment rates for women have broadly remained unchanged since the pandemic, but men's employment rates have decreased, and unemployment rates have risen⁴⁶. There has also been a decrease in the employment rates of 16-24-year-olds⁴⁷. The *Understanding job-seeking behaviours: insights for social care* report offers further detail on these changes.

Table 3: Percentage of economically inactive population⁴⁸

Population	Number	Percentage of economically inactive population
Student	113,700	24.7
Looking after family/home	76,900	16.7
Temporary sick	8,700	1.9
Long-term sick	156,800	34.0
Discouraged	2,500	0.5
Retired	56,400	12.3
Other	45,400	9.9

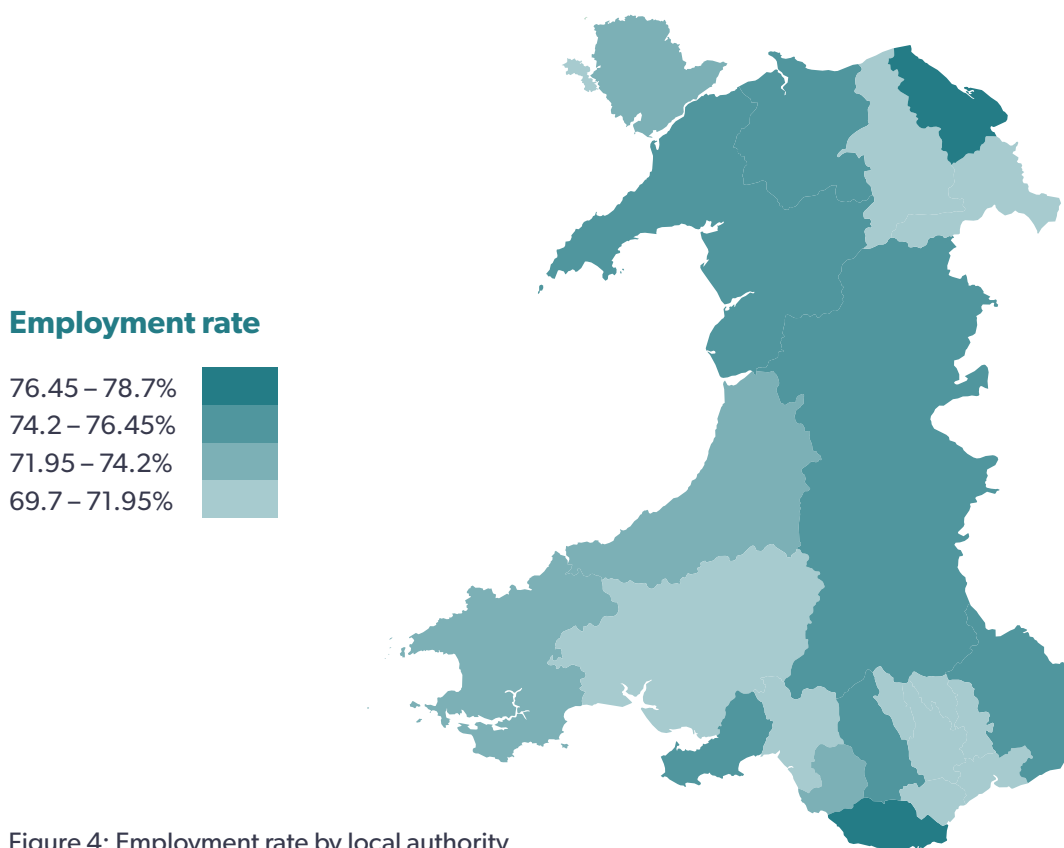


Figure 4: Employment rate by local authority

Employment landscape

The Welsh Government is taking a series of actions to make Wales a full-employment, high-tech, high-wage economy. Some of these moves may hinder recruitment efforts in the social care and child care sector.

The Welsh Government's 'employment plan' outlines the actions that will be taken to educate, train and prepare people for the world of work, remove barriers to accessing work, and provide opportunities for individuals to fulfil their potential regardless of their ability, background, gender, or ethnicity. Key aims include:

- Taking an individualised approach to employability support.
- Making clear the responsibility of employers to upskill and support their staff and provide fair work practices.
- Responding to current and projected skills gaps.
- Preparing for a radical shift in the world of work in response to technological change.

This work was guided by the vision of making Wales a full employment, high-tech, high-wage economy where society is prepared for the changing world of work, whilst also ensuring that the foundational economy remains supported. It aims to engage people of all ages, abilities, educational levels and skillsets⁴⁹. This is important given the average gross weekly pay in Wales is £603.50 for full-time workers, lower than the UK average of £640⁵⁰, while only 38.6% of the Welsh population have a NVQ4 or above qualification⁵¹.

Further to these commitments, in 2020 the Welsh Government pledged to support everyone to find work, education, training or start their own business through a £40 million skills and job fund⁵². Policies and programmes are aimed at guiding school leavers into work and supporting those who have left work to re-enter the workplace. Table 4 outlines key schemes.

A range of organisations work within the employment landscape to support people in finding work, developing their skills, and staying well within work. These include Careers Wales, Adult Learning Wales, Jobs in Wales, Wales Employment and Skills Board, Working Wales, and Wellbeing for Work. WeCare Wales already has relationships with these organisations.

Table 4: Programmes on offer to support the population in entering work

Scheme	Description	Target audience
Apprenticeships⁵³	Those aged over 16 and not in full time education can apply for an apprenticeship. Varying levels are offered including foundation, higher and degree.	School leavers and back to work
Jobs Growth Wales+⁵⁴	A training and development programme for 16–18-year-olds.	School leavers
Young Person’s Guarantee⁵⁵	Support for under 25s to gain a place in education or training, to find a job or to become self-employed.	School leavers
Big Ideas Wales⁵⁶	Support for under 25s to start their own business.	School leavers
The Out of Work Service Programme⁵⁷	Offers free confidential employment advice for those recovering from substance misuse or mental health issues that are NEET (16-24) or unemployed for over 12 months (25 years and over).	Back to work
ReAct+⁵⁸	Financial support, skills and personal development support to remove barriers to employment for over 18s.	Back to work
Parents, Childcare and Employment (PaCE)⁵⁹	Support to cover childcare costs, advice and skills development.	Back to work
Communities for Work⁶⁰	Advisory services that take a community-based approach to increase the employability of individuals who face barriers to employment and are not in employment, education or training. This can include CV writing support, work experience, and confidence building.	School leavers and back to work

Approaches to monitor the future employment market

Understanding how to monitor the future employment market is important. Employment market intelligence can support the social care and child care sector in engaging jobseekers, whether by targeting campaigns or offering specific support to certain groups.

There is, however, no singular, clear source to monitor the future employment market. Instead, consulting a range of different resources is needed to gather insights into the changing market. Table 5 summarises some of the key sources that can be used to monitor the future employment market.

This data can be used to understand:

- Where local and regional opportunities can lie. This can be used to develop targeted and timely advertising campaigns.
- Graduate outcomes of those who have undertaken relevant and similar qualifications. This can bring insight into the types of sectors and roles people enter and the salaries they earn which can be used for benchmarking.
- Trends in other sectors with similar workforce dynamics. This can also be used to target campaigns.

Table 5: Source to monitor the future employment market

Source	Strengths	Weaknesses
Nomis Labour Market Profile Wales ⁶¹	Brings together data from several sources to provide in-depth insights into the resident population, labour supply, employment by population, economic inactivity, qualifications, earnings, out-of-work benefits and labour demand.	Wales-wide and does not provide a smaller scale geographical breakdown.
The Higher Education Statistics Agency (HESA) Higher Education Graduate Outcomes (graduate retention data) ⁶²	Provides information on graduate salaries, and employment outcomes.	Mainly UK-wide data with limited options to reduce the geographical scale. Based on 2018/19 data so may not provide an up-to-date indication.
ONS Welsh Productivity Assessment ⁶³	Provides information on Gross Value Added (GVA) per hour worked, GVA per job filled, and GVA per head in Wales. Some LA breakdowns are included.	Does not include a complete breakdown for every LA.
ONS Community Life Survey (Volunteer Rates) ⁶⁴	Provides detailed data on levels of volunteering in Wales including identity characteristics of those taking part and the type of volunteering completed.	Mainly Wales-wide, only includes details about some local authorities.
ONS Location Quotient Data (Specialism within LAs) ⁶⁵	Provides detailed information into the relative concentrations of industry sectors by LA.	Current data is reflective of 2015, and the next release date is to be announced.
Stats Wales Index of Market Services ⁶⁶	Provides a quarterly index showing short-term movements in the output of market service sector companies in both Wales and the UK. This sector includes distribution, transport, accommodation and food service activities, information and communication activities, financial and insurance activities, real estate activities, professional, scientific and technical activities, administrative and support service activities, and other service activities. The data is up to date, covering up to 2022.	Only provides insights into one section of the economy.



Section summary

The Welsh social care and child care sector is highly complex, with a range of actors and sub-sectoral differences. There is already a crisis in attraction and recruitment, and as future care demands rise, the sector is at serious risk.

While there are many jobseekers in Wales, current policy ambitions to create a high-skilled, high-wage digital economy may make the social care and child care sector less attractive to jobseekers.

Understanding the employment landscape, including the types of people that may be seeking work and trends in the employment market, can be important to identify opportunities for attraction and recruitment activities. The next section turns to other places and sectors to understand what can be learnt for the Welsh case.

3

Learning from other recruitment campaigns



Learning from other recruitment campaigns

The issues facing Wales are not unique. Across the UK and throughout the world, places struggle to recruit and attract workers and implement solutions to address shortages. This section presents learning from other places and sectors that can be harnessed to address attraction and recruitment challenges in Wales.

Takeaway messages

- 1 Across the world, places struggle to recruit care workers. A range of strategies have been used to address these challenges, but no perfect solution has been found.
- 2 Learning from interventions and strategies in the social care and child care sector, it is clear that pay and professionalisation, reforming the system, and adopting a long-term approach are key to success.
- 3 It is also useful to learn from beyond the sector. Innovative and targeted social media campaigns and improving and showcasing benefits are key.

Recruiting care staff

There are many reasons that workforce shortages emerge in care sectors. In many cases, shortages are highly contextual and related to the local cultures, economies, societies, and political direction of a place.

There are, however, some important commonalities that are useful to recognise. Care crises are more likely to happen in places where:

- Populations are ageing and care demands are higher.
- Culturally, care is perceived as something that happens outside of the home/ immediate family.
- There are changes in health, social care, labour and migration policies. The withdrawal of the UK from the EU, for example, resulted in immediate reductions in the numbers of care workers.

- The work is not valued economically, whether in terms of worker pay or investment into the sector.
- The work is not valued societally, whether in terms of public perception of the sector or the work itself.

In relation to the last two points, it is also important to note that sectors that are largely staffed by those from marginalised groups, such as women or ethnic minorities, are typically valued less than other comparable sectors. There is limited but convincing evidence that in health and care sectors, the entry of men can lead to improved status of the sector⁶⁷.

Strategies to address

Given the global nature of care crises, there are many examples of places attempting to mitigate and reverse shortages in care staff.

The literature review suggests that there are ten primary strategies used elsewhere to address issues in recruitment and attraction of workers (see the Wales COVID-19 Evidence Centre for further information⁶⁸):

1. Improve pay and incentives.
2. Invest in training, apprenticeships and pre-employment initiatives.
3. Develop local and national recruitment campaigns.
4. Improve working conditions.
5. Improve the status of the sector.
6. Take steps to professionalise the work.
7. Develop career progression opportunities.
8. Adapt recruitment processes, such as values-based practices or supportive inductions.
9. Use digital technology to supplement care services.
10. Rely on migrant labour to fill positions.

It is difficult to rank these strategies in any meaningful way. Each has drawbacks, and the implementation of any strategy will look different depending on the context in which it is used. Additionally, in practice, places tend to use a combination of different strategies to address shortages, making it particularly difficult to determine the impact of any one activity. In section 5, where the care trilemma is discussed, some of these strategies are assessed according to the trilemma.

Case study examples: recruiting social care and EYCC workers

Almost every country worldwide has a shortage of care staff and a series of approaches have been adopted in attempts to address these issues. There seems to be no perfect solution, but there are things we can.

Key themes include:

- Improving pay and professionalisation.
- Reforming the social care system.
- Taking a long-term approach.
- Increasing funding.
- Showcasing the value of the work.

Although the following examples focus on places that are comparable to the Welsh case, the strategies have been developed in different contexts and would need to be adapted.

1. A professional and well-paid workforce: Early years in Finland

Finland places a high value on early childhood settings, and all instructors are considered professionals and paid well.

One of the most significant improvements took place in August 1995, when ECEC kindergarten teacher training was transferred to universities and established as an academic field of research and instruction after years of experimentation⁶⁹.

Today all pre-primary teachers in Finland hold an undergraduate or postgraduate degree, and one out of every three employees must hold a higher education degree⁷⁰. Teacher training is competitive to enter, and sets an early expectation of autonomy and excellence. Employers are extremely selective, and candidates are accepted based on a variety of criteria, including essays, entry exams, interviews, and values-based assessments⁷¹.

Finish early childhood teachers are paid well compared to EYCC workers in Wales with an annual salary of €30,213 (approximately £27,000), or an hourly rate of €15 (£13.50)⁷². This is well above the minimum living wage at €24,108 (£21,276)⁷³. Workplace autonomy is high, and employees report high levels of job satisfaction and security⁷⁴.

2. Reforming the system: Scotland's National Care Service

Scotland's care system is fully devolved. In 2021, the Scottish Government confirmed its intention to create a National Care Service (NCS).

The proposal is to create a set of care boards and move services including children's services and some justice work under national operation. At the time of writing, the bill creating the NCS had been published and a co-design process was unfolding, but the ultimate future is not yet clear. Discontent from providers, trade unions, patient representatives and local government has led to a debate over the proposals.

Wales is also considering a national care service. Given that many of the cultural, economic and geographical factors affecting Scotland are similar to Wales, such as demographic changes increasing demand, challenges with recruitment and retention of social care staff, and tensions between cost and quality in commissioning, it is possible to identify lessons on how this kind of big-picture reform can affect recruitment and retention in a care service. These lessons include:

- **Care staff interpret the same policy concept differently.** The phrase 'national care service' is open to interpretation. Some think the reforms go too far, while others assume that it will be, like the NHS, a fully state-owned and operated system. In other cases, a lack of clarity causes a loss of faith in the reforms. For example, the Scottish Government did not publish key details such as the number, location and role of care boards. The lack of clarity means some individual staff and stakeholders are tuning out of the discussions and missing the opportunity to influence aspects of the NCS.
- **Uncertainty undermines recruitment and retention.** LAs will still be able to act as care providers, but there is uncertainty as to how this will work. For many staff employed by councils, this is deeply unsettling. LAs report it has been harder to recruit and retain staff when there is a question mark over their future – whether real or perceived.
- **Providers may dilute ongoing workforce programmes in anticipation of change.** Many private and voluntary providers are engaged in direct advocacy over the bill. Many more are waiting to see what happens, often pausing programmes that could be affected by the reforms.

The main lesson is one of process – a major reform has a series of effects on the workforce, with people interpreting and reacting to change before it happens. It is vital that Wales retains the focus on the importance of the workforce as it continues exploring the potential of its own national care service.

3. A long-term approach: Germany's social care system

Germany faces similar challenges to the UK in terms of its ageing population and rising care costs. In response to this, Germany reformed its approach, introducing the long-term care system in 1995.

The long-term care system operated around a set of principles that aimed to ensure it was fair, transparent, sustainably resourced, and beneficial for both service users and providers. There are a series of nationally set benefits and state-level legal frameworks, whilst flexibility is maintained at a more local level.

The system is funded through a long-term care social insurance scheme that acts as a strictly ring-fenced tax. Everyone pays in a fixed proportion of their income, which continues into retirement. When individuals require care and support, they can draw a benefit in proportion to their need to partially cover their costs. The stability produced by this funding system gives the market a level of certainty.

Despite the successes, as Germany's population continues to age, it still faces workforce pressures. The social care system is becoming increasingly reliant on unpaid carers to remain sustainable.

The Government is taking steps to respond to this by putting in place cross-departmental groups to improve wages, the status of the work and working conditions. Additionally, legislation is being put in place to better support unpaid carers to stay in employment and have necessary access to social security and support⁷⁵.

4. Capital investment into the sector: New York early years recruitment

Two years after launching a universal prekindergarten programme in the autumn of 2014, New York City (NYC) almost quadrupled the number of free full-day prekindergarten seats from 20,000 to 53,000 in the first year to 73,000 in the second. NYC recruited 2,000 extra lead teachers and hundreds more teaching assistants and aides to accommodate this need⁷⁶.

In contrast to Finland, where teachers have a high cultural value, New York had to attract teachers — both from students who might not have considered teaching and from already qualified teachers outside their system — to make up for their shortfall. This was made possible by the city's willingness to spend an unprecedented amount on early years. To ensure competitive teacher pay, NYC lobbied the state of New York for \$340 million per year⁷⁷. An additional \$6.7 million was set aside for a partnership with the City University of New York's early childhood professional development institute to maintain a supply of qualified teachers⁷⁸.

Early years workers must hold either an undergraduate degree in early years, complete a childhood education coursework or have significant work experience and a commitment to getting the New York State teaching certificate for early childhood (NYSEC) within three years⁷⁹.

To create clear pathways to teacher training and certification, NYC also established a 'Study Plan Lead Teacher' position for people who do not possess the NYSEC. This programme has been essential in attracting high calibre teachers from all over the nation and even from abroad.

5. Showcase the value of the work: Local approaches in the UK

Showing the positive value of the work to both society and individual lives can help to make the sector more attractive and recruit individuals with the necessary values. This approach has been widely used in the health and care sectors.

A Bristol-based charity offering care for older people ran a recruitment campaign to celebrate its employees and inspire others to join. A comic-book style photoshoot was carried out with staff members and their individual superpowers were showcased such as 'spreading positive energy' or 'comforting service users' (see Figure 5). This campaign highlighted the value of care staff and their unique skills and capabilities⁸⁰.

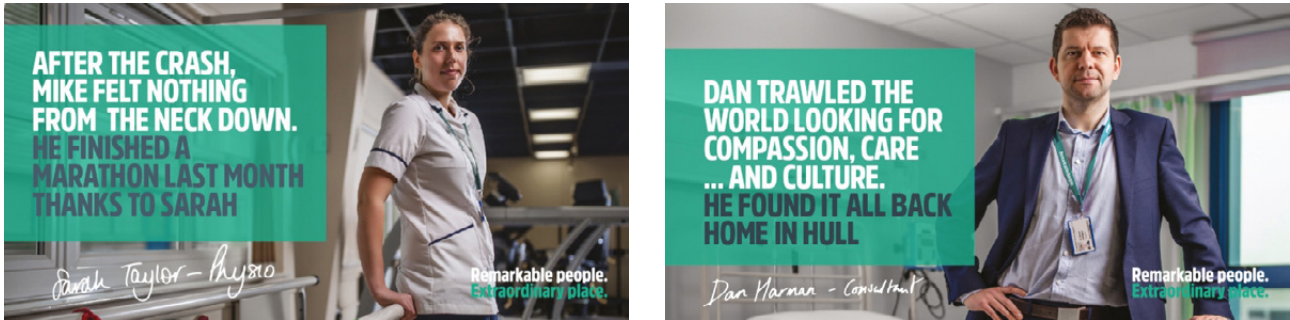


Figure 5: Example of Brunelcare recruitment campaign materials

NHS Lanarkshire and Health and Social Care Partnership took a similar approach. A series of 'espresso clips' were launched across social media channels in October 2022 to provide day-in-the-life snapshots of the life-changing work carried out by staff members in the context of the COVID-19 pandemic. For example, one features a taxi driver who took up a care role due to being out of work in the pandemic. He discussed the rewarding nature of meeting people and making a difference to their lives, as well as the benefit of being part of a pension scheme⁸¹.

The Hull and East Yorkshire Hospitals NHS Trust also ran a recruitment campaign titled 'Remarkable People, Extraordinary Place' to address challenges in filling vacancies. This campaign focused on real staff and provided a snapshot of their experiences and the difference they created through their work. An example of these can be seen in Figure 6. This campaign was highly successful, reaching over 92,000 people through social media and more than doubling the applications from the previous years⁸².

Figure 6: Example materials from The Hull and East Yorkshire Hospitals NHS Trust campaign



Lessons from recruitment campaigns in other sectors

Recruitment challenges are not limited to the social care and child care sector. In other sectors, a range of techniques have been used to boost recruitment.

The examples that follow show how public services and sectors with similar pay and working profiles are addressing attraction and recruitment challenges through:

- Diversifying the recruitment pool.
- Taking a creative approach.
- Improving and showcasing the benefits.

The final example – the professionalisation of UK nursing – is intended as a cautionary tale.

1. Diversifying the potential recruitment pool: The British Army

The British Armed Forces face challenges in recruiting personnel. In 2018, a new campaign was launched called 'This Is Belonging'. This represented a shift from the approach of previous campaigns, by expanding the idea of who can be a soldier⁸³.

The campaign featured videos showing female soldiers taking on leadership roles, and soldiers from varying faiths and sexualities being welcomed into the ranks. It aimed to change existing perceptions of the military to widen the recruitment pool by emphasising that diversity is welcomed⁸⁴.

Significant resources were invested in the campaign with a total cost of £1.6 million for the radio, TV and animated adverts⁸⁵. This is part of a wider investment in recruitment where it is estimated that more than £1 billion has been spent in the last few years⁸⁶. The investment proved successful, with the campaign winning gold at the Institute of Practitioners in Advertising (IPA) effectiveness awards in 2018 and propelling applications to record levels⁸⁷.

2. Improving and showcasing the benefits: McDonald's Archways to Opportunity

The fast-food chain McDonald's had been struggling to fill job vacancies in the US. It improved the benefits offer, and targeted adverts at younger generations⁸⁸.

McDonald's advertising campaign, 'Where you want to be', focused on the educational opportunities and career advancement options available to workers as part of its 'Archways to Opportunity' programme. The programme and campaign greatly enhanced the desirability of working for the organisation⁸⁹. Benefits included:

- Free career and academic advice services with a Master's-level prepared advisor.
- A mobile app to assist with career and education exploration with built-in guidance and resources to support employee career progress.
- Transferable skills in teamworking, customer services and managing responsibility.
- College tuition assistance.
- Options to learn English as a second language.

Amazon and Deliveroo took similar approaches to increase recruitment. Amazon offered benefits such as higher hourly wages, sign-on bonuses and other enticements. In the US, it offered to pay for workers' college tuition if the individual stayed with the company throughout the whole course⁹⁰.

Deliveroo offers riders a specifically tailored insurance product to protect them whilst completing their work, which helped give them a competitive edge in attracting riders and drivers⁹¹.

3. Taking a creative approach: The Swedish Army

The Swedish Army took an innovative approach to raise their profile and attract new recruits. A social experiment was live streamed on social media in which a black box was placed in central Stockholm and every hour someone was invited to enter the box through a controlled airlock.

People were given no instructions and could only leave if a stranger was willing to exchange places with them for the next hour. This gained significant media attention and resulted in an inundation of applications. The initial target was to gain 4,300 applications to fill 1,430 positions – 9,930 applications were received⁹².

Some employers are also turning to resources such as TikTok and Snapchat to take a more creative approach to attracting employees. A pub in Dublin called Sober Lane asked candidates to send in a video via Snapchat detailing why they should be considered for a role. McDonald's also utilise this social media platform to attract recruits by producing short videos discussing what it is like to work for the brand. The viewer can then swipe up to be redirected to the McDonald's careers page⁹³.

Some social media platforms are even developing employment functions: for example, TikTok will be piloting the 'TikTok Resume' with a select group of companies. This will allow job openings to be posted in an in-app webpage and users can submit CVs through video format. Standout TikTok resumes and creators who provide career advice will also be featured on the page⁹⁴.

4. Professionalising a sector: Nursing in the UK

Nursing has not always been seen as a profession in the UK. Moves to professionalise the sector from the late 1980s have led to a series of benefits and challenges for the sector.

Originally, there were two levels of nurses: enrolled nurses (ENs) – who completed two years of training and registered nurses (RNs) – who completed three. Both received similar on-the-ward training, but the training was different in terms of the theoretical content⁹⁵.

From the late 1980s, however, moves were taken to professionalise the nursing sector in the UK. In 1989 'Project 2000' Registered Nursing courses were introduced. As part of this, training was conducted in higher education institutions rather than on-the-job. The transformation was driven by the nursing profession itself in response to a range of issues such as⁹⁶:

- The perception that the apprenticeship style of training was outdated and did not equip nurses for the rapidly changing demands of health care systems.
- The perception of nursing as being of a lower professional status due to the less formalised style of training, and the impact that this had on recruitment and retention.
- Suggestions that on-the-job training led to exploitation of student nurses and did not permit adequate time for nurses to focus on learning.

Formalising the training and qualifications has brought both benefits and challenges to nursing. On the one hand, it has succeeded in raising the status of the occupation⁹⁷. On the other, professionalisation has led to changes in the structure of the profession, leaving a skills gap.

For example, the UK Central Council for Nursing, Midwifery and Health Visiting (UKCC) recognised that it would be unrealistic for the new, more qualified nurses to carry out the lower skilled tasks involved in basic care and created the Health Care Assistant (HCA) role as a less qualified non-nurse helper to aid the RNs⁹⁸.

The creation of the HCA role has had some negative effects on the sector. It has complicated the relationship between nursing and care. It also has the potential to narrow the 'skill mix' of the workforce as employers are more likely to hire a greater number of HCAs due to their cheaper rate.

Additionally, elevating the level of qualifications required for nursing has limited the potential recruitment pool for nursing, particularly given that significant time and financial investments are required to achieve these qualifications. The situation has got worse following the removal of bursaries in England⁹⁹.



Section summary

Across these case studies, three factors are key in addressing underlying causes of attraction and recruitment issues – investment in the sector, ensuring the sector is actively consulted and engaged when enacting changes, and taking a long-term approach. Additionally, in improving attraction and recruitment in the short-term, enhancing benefits and taking a creative approach are useful strategies.

While it is beneficial to learn from other places, there is also a need to understand the specific context of the Welsh case. The following section provides evidence about the current challenges facing the social care and child care sector in Wales.

4

Current attraction and recruitment challenges in Wales



Current attraction and recruitment challenges in Wales

Employers and those in supporting roles identified a series of complex challenges faced in attracting and recruiting social care and child care workers. Pay, professionalisation and regulation are major obstacles. This section explains the key challenges in attraction and recruitment.

Takeaway messages

- 1 Attraction challenges include pay and incentives, working conditions and responsibilities, professionalisation and regulation, lack of public awareness, and a series of challenges external to the sector.
 - 2 Recruitment challenges include application and interview processes, ineligible applicants, competition between employers, workforce planning issues, and difficulties recruiting a diverse workforce.
 - 3 The sector is also facing challenges in retaining staff that are likely to get worse in the future.
 - 4 Moves towards professionalisation and regulation have led to a series of unintended consequences with implications for attraction, recruitment and retention. A 'care trilemma' is suggested as a tool to better understand these challenges.
 - 5 The care trilemma shows that addressing low pay is a key solution to improve attraction and recruitment.
-

This section draws on findings from the stakeholder engagement to address:

- Attraction strengths and challenges.
- Recruitment challenges.
- Variations within the sector.
- The impact on retention.
- Future threats.
- The care trilemma – a new model to understand attraction and recruitment challenges in the social care and child care sector.

Attraction strengths and challenges

Attracting people to the sector is the first step in addressing the crisis. While some people are attracted to the nature of the work and/or have a desire to make a difference, in general, potential applicants are dissuaded due to low pay, poor working conditions, and a lack of understanding about what the work involves. External factors such as COVID-19 and the cost-of-living crisis further make the sector less attractive.

Strengths in attraction

Although the stakeholder engagement highlighted that social care work is increasingly becoming less attractive in Wales, some small strengths were highlighted.

These include:

- Some people have a passion to care and ‘make a difference’.
- The nature of the work is suited to those looking for part-time and flexible work.
- International migrants already living in Wales and those considering moving to the UK seem to be attracted to the sector.
- Some people want to work for LAs regardless of the sector as they are generally seen as good employers that provide stable opportunities and attractive incentives (pensions, sick pay, annual leave).

As Table 6 shows, EYCC settings are seen as the most attractive, while social work also has strengths in terms of attraction. Recent public perceptions data further highlights that EYCC work is considered more attractive than the other sub-sectors¹⁰⁰.

Table 6: Strengths in attraction across sub-sectors

Sub-sector	Attraction strengths
Domiciliary social care	Entry level roles don't require experience. <i>"There's no problem recruiting applicants who need an easy starting point".</i>
Residential social care	There is more awareness of what residential care includes than other elements of the social care and child care sector. More senior roles, that are easier to attract people to, are available. Entry level roles don't always require experience. Working patterns are more stable and consistent work than domiciliary.
EYCC	EYCC is the most attractive sub-sector. <i>"it's attractive to all ages – [especially] schoolgirls and women in their 50s".</i>
Social work	The public are aware of the role. Pay, incentives and progression routes meet expectations for professional career. The move to degree route has made it more attractive for younger people. It seems easier to attract Welsh language speakers than in other sub-sectors. LAs are the primary employers, and they provide good pensions and working benefits. Many roles can offer homeworking and other flexible working arrangements.

Overarching challenges in attraction

The stakeholder engagement highlighted five areas of note in regard to attraction – pay and incentives, working conditions and responsibilities of the role, issues concerning professionalisation and regulation, lack of public awareness, and external challenges.

However, across most of these areas, the issue of pay interweaves with other issues. Pay is by far the largest challenge in terms of attracting people to the sector.



Figure 7: Attraction challenges

Pay and incentives

By far the most common theme across the stakeholder engagement is the issue of pay. Pay was reported as an issue by all employers but is particularly challenging in social care and EYCC settings where workers are typically paid hourly.

Pay is low, particularly in social care and EYCC settings.

Most employers pay at least the living wage and have reported increasing pay rates in recent years. However, pay in other sectors is also increasing and any rises in the social care and child care sector are not competitive. Similar findings are also evident in Social Care Wales's 2022 Public Perceptions Survey¹⁰¹. Here, pay is the second biggest reason people leave the sector, after pursuing a different career.

"People just scroll past social care roles on job websites due to the low pay."

Private providers are not properly reimbursed and cannot raise pay further.

Employers have reported they are unable to further raise wages without increases in funding for the sector. Uneven reimbursements from LAs for providing care services, alongside higher pay where the LA is the employer, also affects the ability of private settings to improve pay.

"If employers aren't properly reimbursed, care staff can't be."

"Council fees do not always reflect a deserving amount to care homes in some areas."

Pay does not match level of responsibility or value of the role.

Respondents frequently compared domiciliary and residential social care roles to that of a nurse or Healthcare Assistant, and EYCC roles to that in education. Questions were raised about why pay does not reflect the increased responsibilities.

"Why should people be doing medication management for only £10.50 an hour? There are new qualifications and regulation of the sector, but the pay level and respect for the role hasn't adjusted. Healthcare assistants are paid more with less responsibility, so why would you go into care over that option?"

"The goal post keeps moving up for carers and they are getting more responsibility, but the pay isn't rising to match."

"It comes down to the offer – the salary. If we could pay more, it will save a lot of issues. It's flipped around, care's no longer a better offer than retail."

"The level of pay is a huge challenge; you basically rely on people doing it out of charity"

"I cannot see the incentive for anybody wanting to come into social care now"

Paying to work.

Requirements for qualifications, training, and registration mean many have to 'pay to work'. There are several ways this happens:

- Bursaries for social work are not enough to support those with other responsibilities (i.e., children or mortgages) through their education.
"Bursaries are a help, but it doesn't go far enough".
- Domiciliary workers are not always compensated fully for transport-related costs, i.e., fuel, vehicle maintenance, travel time. This is the case in both LA and private settings. Although the Welsh Government have implemented guidance to ensure transport costs are covered, settings are often unable to increase pay. This can also lead to very short calls which 'are dangerous and stressful for workers.'
- Mandatory registration costs potential social care applicants. £30 a year can be a very high cost for someone currently not in work. There was also a lack of clarity as to when people need to register.

"Not only do people need to do their job now, which is already so hard, they now have to try and register with Social Care Wales and have to pay to register".

Issues concerning professionalisation and regulation

Moves to professionalise and regulate the sector include mandatory qualifications and training and registration of individual employees with Social Care Wales. Although providers and employers are overall positive about the need to professionalise and regulate the sector, they raised a series of obstacles they and potential employees must now encounter and navigate.

Professionalisation does not match pay.

Again, pay is central. Where employees are being asked to do more for the same money, or having to pay-to-work, issues arise.

"It's become a job now that's essentially skilled but still low paid. A difficult combination." "Social care is becoming too like social work in terms of qualifications but doesn't have the accompanying salary or reputation."

Qualifications are 'too academic'.

The sense that the current and potential workforce are not motivated to pursue additional qualifications and training to access work was very common. Employers believe things have gone 'too far' and have not taken into account the needs of existing and potential employees.

"Training is important and [we] need a knowledgeable and skilled pool of staff, but the new qualifications have gone too far."

“Some staff leave as they don’t want to do anything academic, particularly older staff, who can fear professionalisation.”

Minimum requirements, whether undergoing training, obtaining qualifications or registering, can be difficult to understand.

Understanding the requirements takes time for both existing staff and potential applicants. This takes away from time spent caring and can make the role unattractive.

“So much is needed from care workers, medication, paperwork, everything is more. Everyone wants more.”

“Registration has caused more of a hindrance, some people can’t do it by themselves and need support.”

Working conditions and responsibilities of the role

Providers and employers discussed how working conditions and responsibilities associated with the roles dissuade people from the sector. Again, although noted in all settings, this is particularly the case for social care and EYCC settings. It is a problem that mainly affects those in direct care and support roles, but also impacts senior workers and managers.

“the role [adult social care] is emotionally and financially draining”

Whether administering medication, or working alone, workers’ roles and responsibilities seem to be continually expanding. As noted, this is a particular issue given pay does not match professions with similar responsibilities. There is also a sense that training is insufficient, particularly in regard to administering medication.

“Carers do the role of everyone in health care – like nurses, physios, counsellors [...] but the profession isn’t respected.”

“The medication element is risky and puts care workers in a challenging position.”

“Nurses get a huge amount of training before being able to administer medication, domiciliary workers are just getting a 3-hour session.”

Lack of public awareness

A lack of public awareness about what the sector is and what specific roles may involve was highlighted as a key challenge across the sector.

A lack of awareness as to what specific roles entail.

This is particularly the case in social care where differences between residential and domiciliary care are not well understood.

“Domiciliary care is not as well-known as it should be.”

“People just think residential care is just about dealing with faeces rather than the rewarding nature of the role.”

“There’s no clear perception of what the job [EYCC] is and what it contains.”

The lack of dedicated teaching in schools.

Schools tend not to have the in-house expertise to provide expert-led health and social care teaching.

“Health and social care in schools is being dropped or is poor quality. Often the teachers delivering it don’t have a background in it and are PE or art teachers. Or school just can’t find staff to deliver it, so it is dropped from curriculum.”

“Perceptions of the [social care] sector are challenging – there is the assumption that people in care just wipe bottoms, but it is so much more than that.”

Negative media attention.

Where the social care and child care sector does feature in the public eye, attention is often negative.

“All press that you see about care is bad – it’s always about abuse scandals, or when things go wrong.”

External challenges

A series of challenges external to the sector also makes social care or EYCC roles comparatively less attractive to potential applicants. Although beyond the scope of WeCare Wales to address, it is important to understand this wider context.

Cost-of-living crisis.

The ongoing cost-of-living crisis in the UK is affecting the sector in a variety of ways:

- It is already affecting households across Wales. Stakeholders reported that the potential workforce are choosing better paid positions in sectors they are less attracted to, such as retail, because of cost-of-living concerns.

“People are doing BTECs in health and care [and then] not actually working in the sector, they’re going straight into retail.”

- Employers, particularly in residential social care and EYCC, are already facing higher operating costs. Where this includes the need to heat spaces and provide food for users, there are serious implications for the ability of settings to maintain the quality of care, given current funding¹⁰².
- A protracted crisis will lead to a rise in health and care demand in both the short- and long-term. This is particularly the case in Wales where poverty already shortens lives, and further entrenches health inequalities¹⁰³. A report by Public Health Wales suggests that the cost-of-living crisis poses a public health emergency that will have a cross-generational, lasting effect, particularly on the most vulnerable groups in society. In July 2022 30% of people in Wales reported that their current financial position was negatively impacting on their physical health, and 43% on their mental health¹⁰⁴. Further as noted, the existing workforce already faces poverty.

“For some of our staff, £35 is a lot of money to go on a register, They have food and fuel and heating to pay for that the money needs to go towards.”

Brexit and its impact on migrant workers.

The impacts of the end of free movement of EU nationals are still being felt in the sector. Brexit has reduced the potential applicant pool and caused retention issues.

“We used to have a lot of EU nationals working in the branches and they were fantastic. [... We] ended up with a loss of a lot of people in a short time because they couldn't meet the earning requirements to be able to stay in the country through social care.”

Other sectors becoming comparatively attractive.

As Brexit has removed much of the available low-wage workforce, sectors such as retail and hospitality have moved to increase wages to attract employees.

Although wages have increased across the social care and child care sector and most employees receive the living wage, stakeholders repeatedly referenced local retail outlets offering at least £2 more an hour. The same findings have also been reported by the King's Fund¹⁰⁵.

“[Potential applicants are] working in Tesco, with higher wages and less responsibility, and less verbal abuse, can leave work at work. Lots of staff we have lost have gone to retail where you can get £14-15 an hour like at B&M.”

Complications in the benefits system.

People who work irregular hours each week face difficulties navigating the UK benefits system. Employers also find it difficult to navigate, and held clear misconceptions about recipients of benefits. The issue arises when employees cannot be guaranteed regular hours at either lower than or above 16 hours per week¹⁰⁶.

“Staff aren't motivated to work more than 16 hours due to the benefits system”.

Employers reported that some employees will not work more than 16 hours to avoid losing Jobseeker's Allowance. In other cases, generally in EYCC after-school and holiday club settings where full-time hours are difficult to offer, it was reported that where settings cannot guarantee 16 hours per week, employees may leave for more stable options so as not to lose their Working Tax Credit.

The impact of COVID-19.

COVID-19 caused many challenges for the sector and has had far reaching effects.

- Retention issues have got worse as workers have become ill, and in some cases blamed by the media for weaknesses in care provision.

"We lost a lot of staff as a result of experiences during COVID-19. People are feeling scared and blamed."

- Public perceptions are poor. Just 12% of respondents from a 2022 public perceptions survey believed the sector had become more attractive in the last 12 months. Pay, long hours and workforce shortages are key reasons for poor perceptions¹⁰⁷.
- Heightened perception (or awareness) of the risky nature of the work.
- Societal transformations in job-seeking behaviours. For example, some employers noted that attendance at job fayres and other events has decreased. The accompanying ***Understanding job-seeking behaviours: insights for social care*** report contains additional insight.

"Lots of people who would've perhaps come into care now don't want to work as they have been made redundant and have had time with their family."

Recruitment challenges

Despite the challenges in attraction, many stakeholders reported that they often encounter individuals who are enthusiastic about joining the sector. However, a series of 'obstacles' in the recruitment phase dissuade potential applicants from ultimately securing a care role.

Therefore, while WeCare Wales primarily addresses attraction, it is important to understand the recruitment challenges to recognise how WeCare Wales can best support the sector.

Overarching challenges in recruitment

The stakeholder engagement highlighted five key recruitment challenges – application and interview processes, ineligible applicants, competition between employers, workforce planning issues, and challenges recruiting a diverse workforce.

Figure 8: Challenges in recruiting social care and child care workers



“There’s various points of drop-out – people apply, then when contacted they don’t reply. Then when people accept the interview, they don’t turn up. Then also some drop out after they’ve been offered a role.”

For some stakeholders, recruitment is the most difficult in over 30 years. Where usually there are increases in applicants around Christmas, for example, no employers witnessed this in Christmas 2022. Others have been searching for months and have not been able to fill positions.

“In one branch they have lost staff and not recruited one new person since July.”

“We used to recruit twice a year, now it’s a continuous cycle.”

Application and interview processes

Application processes are often lengthy and can be difficult for applicants that are new to the sector to navigate. Where applicants cannot or are unwilling to navigate these processes, employers experience drop-outs. However, employers may dedicate significant time to applicants before they drop out.

A variety of challenges emerge in the application and interview process:

Application forms are difficult to complete and differ from employer to employer.

They are generally lengthy and quite complicated to complete, particularly for those who are not confident in their literacy or digital skills. One LA reported that 50% of applications are started are not completed, and that application forms are over 25 pages long.

“There is a mixture of literacy levels. The overly complicated forms are off-putting, people aren’t going to be doing this for multiple jobs.”

“Jobseekers can’t just hand a CV in anymore.”

“It’s a complicated process that people don’t have the patience for, especially if they’ve been out of work for a long time and have no CV.”

Application processes are very time consuming.

On average, employers report that time between accepting an applicant and them starting the role is around 12 weeks. This is because of the need for DBS checks and references, induction and mandatory training. For those who are seeking work in general rather than social care work specifically, delays can be highly unmotivating. Employers lose decent applicants to opportunities elsewhere. This issue is particularly problematic for LA employers.

“If they can’t start work, they will leave if they get an earlier job offer from retail etc. People need money now. Even if people like the role, money is key.”

Some applicants are unable to attend interviews in 9–5 hours.

This is particularly the case where applicants have unpaid caring responsibilities or part-time work and study commitments.

“Care is not a 9am–5pm job, so we can’t just do the recruitment process in 9am–5pm hours.”

Pre-employment training is lengthy and is rarely reimbursed.

Pre-employment training can last from a few days to a few weeks. This often depends on the capacity of the provider or trainers to deliver induction training.

“Training is lengthy and it lead[s] to losing people in the process.”

“Workers aren’t paid for all of their travel time or the time needed for training.”

Ineligible applicants

Almost all employers reported that recently, they have seen an increase in applications from individuals who are ineligible, unsuitable, or uninterested in the roles. This places a strain on already stretched resources as employers sift through applications.

Overseas applicants are applying despite not having suitable visas.

While some employers requested WeCare Wales develops advice on how to recruit overseas applicants, others are unable or unwilling to sponsor applicants.

“Most CVs are from applicants who are abroad, and you have to sponsor them, which is not something we are going to do.”

Where employers use national job boards (i.e., Indeed or Reed), they often find that people send their CVs without wanting the job.

“I don’t know if it is a formula on Indeed, but we’re now getting CVs pushed to us that are not suitable at all. If we contact the applicant, they often don’t turn up for their interview.”

In EYCC settings, those with a lack of or unsuitable qualifications are applying.

It has been reported that there are many qualifications options, and a lack of clarity as to which qualifications are suitable by both employers and applicants. There are cases where applicants spend time and money on unsuitable qualifications and then become less likely to pursue other opportunities in the sector.

Those claiming Jobseeker’s Allowance may submit applications without any intention of following through. This leads to no-shows at interviews.

Competition between employers

Providers and employers do much to attract people to their vacancies, but often find that potential applicants and/or recent recruits seek other options in the sector. While employers still see this as a win for the sector, it again leads to lost time and resources.

Competition between private employers.

There are worries that larger providers are playing the system by offering attractive joining bonuses and incentives.

“Some organisations are deceptive and wrap extra things into an hourly rate.”

Competition between private and LA.

Private employers report that after engaging individuals and communities via job faires and outreach events, applicants may seek more secure roles in their LA.

“Local authorities put limits on the pay that they will give to private providers, but then pay their own staff a lot more.”

Competition between care and allied roles — the NHS vs social care, education vs EYCC.

Again, where work may have been done to attract people to the sector, even among young people studying health and social care courses, there is a lack of interest to work in social care and child care.

“Those studying health and social care aren’t interested in working in care, they’re more interested in NHS or just didn’t know what else to study.”

“As employers we are competing with one another and with NHS. It’s hard to stand out as an employer of choice.”

Competition from agency and bank work.

Providers and employers are unable to compete on pay and flexibility with agency and bank work.

“Bank work for health is taking away carers. Bank work pays double time and the hours are also more flexible.”

Workforce planning issues

In some cases, employers can attract and recruit enough workers, but not with the right combination of skills, experience, qualifications, and availability.

Quotas.

Changes to regulatory requirements are difficult to keep on top of and can lead to manufactured shortages, i.e., quotas for level 2 staff in EYCC settings.

“There are many different regulations and qualifications that makes it more confusing. Many services are on their quota of unqualified staff.”

Applicants request infeasible levels of flexibility.

Some applicants are unable or unwilling to work core times such as early mornings, evenings, and weekends. But the requirement for high levels of staff at certain hours impacts the ability of employers to offer more flexible shift patterns to applicants.

“People need too much flexibility.”

Fluctuations in demand for care services.

Particularly in rural areas, changes in local care demands can mean there are not enough care packages to offer to willing workers.

“It is difficult to set up walking routes in rural areas, especially if something happens to a client, that can make a route become unviable.”

EYCC and domiciliary providers are unlikely to be able to offer full-time positions.

This makes the roles less viable for those seeking full-time work. It was reported this can have a particular impact on recruiting men.

“People can’t get mortgages on a zero-hour contract.”

“The gaps in rotas mean pay is lost by workers. This is often seen as more problematic for males as they are the main breadwinner for the family.”

Difficulties in recruiting workers from diverse backgrounds

The majority of the social care and child care workforces are white women, and this group are also the most likely to apply to vacancies. Some employers are attempting to attract a more diverse workforce but face various barriers in doing so. Others are not actively building diversity into their recruitment strategies given the issues they face recruiting anybody.

Employers have had particular challenges recruiting:

Welsh speakers.

Given the multitude of other issues faced, most providers are not placing emphasis on attracting Welsh speakers. Where they are placing emphasis, as to be expected, those in predominantly Welsh-speaking areas find few issues, while those in predominantly English-speaking areas face difficulties in attracting Welsh speakers.

“The emphasis on Welsh language is having a counterproductive effect as it makes the process slower and adds extra demand”.

Men.

Men are reported as less willing to work part-time or irregular hours.

“Often the male is the breadwinner still so men can’t take on part-time work and need a definite 40 hours otherwise they aren’t interested.”

In other cases, where settings have recruited men, individuals receiving support and care may opt against having a male care worker.

Migrants and overseas workers.

Many employers have hired and wish to hire more migrants already living in the UK. However, they report that people receiving care and support may be discriminatory and that for some conditions, fluency in English and/or Welsh is key.

“It’s hard to recruit people who don’t speak English as their first language as their accents bother people.”

“first language English is very important particularly when dealing with people with dementia and when people are wearing masks to deliver care.”

Employers' perceptions of the labour pool.

There are also a series of issues in the ways that some providers refer to the current workforce and potential labour pool. Perceptions include:

- *“Younger people don't make as much of a good carer as they lack the life experience and patience, and they aren't that reliable.”*
- Referring to the workforce in highly gendered terms such as 'the girls' or 'the mums'.
- Perceiving those with worries about what working means for their benefits as workshy.
- Perceiving a lack of willingness to engage in registration and qualifications as lack of motivation for the role or for work.
- Reluctance to improve approaches to diversity by not challenging discriminatory behaviour either from within the workforce or from people receiving care and support.

Variations within the sector

There are additional challenges that only affect parts of the sector. The place-based and sub-sectoral differences are important to understand.

Sub-sectoral differences in attraction and recruitment

Table 7 highlights the sub-sector-specific challenges across domiciliary and residential social care, EYCC, and social work settings.

There are three elements that are of particular note:

Attracting drivers.

In domiciliary social care and social work settings, attracting people with driving licenses and access to vehicles is reported as the biggest challenge. This is further exacerbated in rural areas where public transport is poorer, and service users are generally more geographically dispersed.

“It's particularly difficult to recruit drivers, and it's getting worse!”

“How are they meant to afford to buy and maintain a car on the wage?”

Recruiting EYCC workers with level 2 qualifications.

Although it is not mandatory for EYCC staff to have qualifications, services face losing registered status if they do not have the correct balance of qualified and unqualified staff. Settings find it more difficult to recruit level 2 and 3 qualified applicants than unqualified. In many cases, they may have enough willing workers, just not at the right qualification level.

“Many nurseries are at their quota of unqualified staff, meaning they must accept anyone with qualifications, regardless of the person’s quality.”

Inefficiencies and complications in local systems.

A lack of consistency of packages across different LAs, including expectations on how long to keep slots open for, is a key challenge for the sector. Available staff hours are being unused due to these issues.

“It’s difficult for individual organisations to juggle care packages in an efficient way where workers have full hours and pay.”

Table 7: Sub-sectoral attraction and recruitment challenges

Domiciliary settings

Difficult attracting drivers.

“We’ve experienced a lack of drivers in the business and find it easier to recruit non-drivers.”

Residential social care settings

Exceptionally poor pay for nightshifts.

Poor public transport options affect the ability to staff early and late shifts.

Struggles in attracting people to non-care roles within the sector such as kitchen and cleaning staff.

“We have lost kitchen staff to a warehouse who will pay £13.50 an hour to people to make bath bombs.”

Eliminate profit agenda leads to uncertainty about sustainability of private organisations in children’s settings.

EYCC settings

Lack of clarity as to the minimum qualifications and to which qualifications are suitable or legitimate. There appears to be a series of online and in-person courses that are provided but do not give people the necessary qualifications to work in the sector. Additionally, teaching-related qualifications are not recognised.

Other than nursery work, there are few options for regular working hours.

“Lots of positions are advertised as zero-hour, this reflects the way that provision runs but isn’t ideal for people.”

Requirements for new recruits to work 16 hours are very difficult in after-school settings.

There is a lack of public understanding of what the work actually involves, particularly post-nursery age.

There are few career progression opportunities and many do not consider EYCC as a career.

“Those there for longer go on to training or management, but most people pass through. People are often training for other things and see it as a summer job.”

Social work settings

Repeated negative media attention and/or a public lack of understanding about what the role entails.

Public perception that the job is emotionally draining.

There are few higher education institutions (HEIs) that offer courses meaning qualified social workers are not evenly distributed geographically. Courses are also often undersubscribed. There are particular struggles in rural areas.

“Courses only run in certain areas of Wales, so people have to move to do them then are often not moving back to their original areas.”

There is competition from England where fast track schemes and bursaries are perceived as preferable.

“People move to England for social work from Wales, because of the schemes that are available there.”

Bursaries don't go far enough to support students. It should, however, be noted that in Wales bursaries increased in September 2022 and this should result in a positive impact for the 23/24 academic year.

“think of the strategy for teachers and nurses, this idea of a bursary to cover fees, here is the career you can have. Where's this for social work?”

There are few opportunities for those without academic credentials to enter the sector.

It can be difficult to attract drivers.

Place-based differences

Challenges also vary according to the specific place-based contexts in which settings exist. There are five ways that the place-based context, or the geography, complicates attraction and recruitment challenges in the Welsh social care and child care sector.

1. Across the sector, densely populated urban areas seem to experience fewer challenges in attraction and recruitment. The difficulties faced by rural and remote areas are likely to quickly lead to reductions in provision of care offered to these areas. There is anecdotal evidence that some private employers are already removing their services from rural areas due to logistical challenges and lack of profitability.
2. Within domiciliary care and social work settings, while there are struggles in all places to attract drivers, urban areas are more likely to have sufficient public transport and/or the ability to offer walking routes, making these roles more feasible and attractive to non-drivers.
3. Rural and remote areas struggle to develop viable driving routes for domiciliary care. Routes can quickly become unfeasible if circumstances change for the person receiving care and support.

4. Employers in rural and remote areas seem more able to draw on local networks and word-of-mouth to fill positions.
5. Places without large retail employers or without a tourist economy encounter lower competition in attracting and recruiting staff. Perhaps surprisingly, this means Wales's most deprived areas may face fewer challenges in attracting staff.

The impact on retention

Although retention of the workforce is beyond the scope of the project, the stakeholder engagement highlighted four ways that the challenges in attraction and recruitment impact retention.

1. Low sector awareness means new recruits are not always aware of the realities of the job and may leave positions after a short time.
2. There are concerns that participation in and motivation to undertake training is lower among older, more experienced employees than among younger employees. Long-standing, experienced care workers are leaving the sector when faced with mandatory qualifications or registration requirements. The loss of experienced workers is particularly problematic as they are much more difficult to replace. Various employers reported experienced staff are leaving the sector as they 'don't want to do anything academic and can fear professionalisation' or 'consider themselves 'too old' to undertake any learning.'
3. In other cases, as carers receive training and become more skilled, they may use this as an entry point into other allied professions such as the NHS or teaching.
4. Long-standing vacancies result in more challenging (and occasionally dangerous) working expectations for remaining staff. Experienced staff are leaving the sector due to burnout, overwork and dangerous conditions.

“Pattern on staff retention, main reasons people are leaving is the low hourly rate for what they do and also the expectations and responsibilities from SCW.”

Future threats

Stakeholders also discussed a series of future threats.

- Vacancies may lead to a decline in quality; in turn this can lead to a rise in negative media stories.
- An ageing workforce means experienced workers are nearing retirement age.
- Demand is increasing due to Wales's ageing population, particularly in rural areas, and the introduction of programmes such as Flying Start.
- Prioritising social care provision closer to home will complicate the ability of providers and employers to deliver services.
- There was uncertainty about the future implications of ongoing industrial action in the health sector.
- The sector can't afford to recruit more senior staff, meaning there is a bottlenecking situation wherein those who are currently undergoing additional training are unlikely to find offers of more senior roles when they qualify.
- The 'good nature of the existing workforce won't last forever'. Unless changes are made to how the sector operates, existing loyal staff may seek opportunities elsewhere.

"I sometimes worry if this is the end of social care if things don't change soon"

The care trilemma: A new model to understand status, quality and attraction

This research has highlighted that policy interventions, though designed with good intentions, can inadvertently create new issues.

Improving the status of social care and child care roles and the quality of services through the registration of social care workers, increasing the qualification level of the EYCC workforce, and the registration of settings and providers makes it more difficult and therefore less attractive, to enter the sector.

It is proposed that understanding the social care and child care system via the lens of the care trilemma is useful to better understand the relationship between attraction, status and quality.

The moves towards professionalisation and regulation

Across the last two decades, there have been clear moves to improve quality and increase the professional status of social care and child care provision in Wales. Such moves are important to improve the quality of care and to raise the esteem of those working in the sector.

Many respondents believe a better quality, more professional sector is key to attracting more workers. This is particularly the case in social work, where employers report that the move to degree programme made the role more attractive for younger people with academic strengths. Further, some adult social care providers find that some more experienced staff have responded well to new progression and professionalisation frameworks.

However, the stakeholder engagement also shows how increasing demands on workers to have qualifications, undertake training, and/or achieve registration status, are factors that complicate attraction and recruitment efforts.

Employers report that professionalisation and regulation are “obstacles in our way” that “put people off entering” the sector and lead to “unintended consequences”. In many ways, concerns mirror what has happened with nursing in the UK, where professionalisation has not solved workforce challenges.

Challenges from increasing qualification levels

Qualifications, particularly the assessment process, are perceived as too academic by a significant portion of the existing and potential workforce.

As it stands, the sector does not have enough low-entry-barrier roles to attract those that fear more academic work. It is likely that pay would not be as big a barrier if entry-level roles had fewer needs for training and registration.

“The qualifications are now more academic and have exams and things, this puts people off.”

“People want to care, and love to care. But the fact is now, [social] care is becoming more of a profession in terms of making sure things are filled out correctly, and not all carers have the right amount of detail or grammar. So little time for calls too. Doesn’t leave much time for thinking... It’s caused more of a hindrance [to recruitment] than anything.”

Values-based recruitment is increasingly difficult to pursue in EYCC settings where there are quotas for staff with qualifications.

EYCC settings find it difficult to recruit the right balance of qualified staff. Settings that don't meet quotas can lose regulated status. It can also mean existing staff are no longer qualified.

"It's dangerous, we are desperate for the qualification balance so will take anyone."

There is a sense that parts of the existing and potential workforce do not value or may even fear qualifications.

This dissuades people where pay is not a concern (i.e., those who have retired early and may otherwise volunteer) and can lead to retention issues.

"We lost staff because they don't want to do anything academic, [...] especially older staff, they don't want to be doing it, and the thought frightens them."

"People work part-time for a reason, they don't have time for this, for example people in their 60s."

Challenges due to registration requirements

Registration processes are difficult and time consuming to navigate, adding pressures to providers and employees.

There is also a consensus that these moves are too much too quickly, and that "regulations are unachievable".

"People have a lot to read and it changes it very frequently. It makes it very time consuming for carers."

"Social Care Wales don't have enough staff to deal with the registration process. Phones are not open other than between 10am and 2pm – they need to operate in the hours that social care operates."

Changes to care policies and regulatory requirements can increase demand and lead to unintended shortages in certain areas of the sector.

Flying Start, in particular was highlighted as an issue for EYCC settings.

“An extra 4,000 places [for Flying Start]? Where are the staff coming from, especially for the Welsh language provision?”

“SCW registration was meant to be positive, it was started to show that care was a respected profession, but this hasn’t worked, and it has actually scared people off.”

Professionalisation and career progression moves frontline staff into office roles.

“Promotion means fewer caring responsibilities. Some people want to stay in caring roles, so they don’t seek promotion, or you have skilled carers no longer working on the frontline”

There is a clear sense that pay has not kept up with professionalisation.

“There’s no incentive for people to get qualifications”.

“Social care is becoming too much like social work in terms of qualifications but it doesn’t have the accompanying salary or reputation.”

The care trilemma

The research suggests that three main interconnected elements shape the sector:

- **Status of the sector** – how the sector is perceived by existing and potential employees and the general public. Moves to professionalise the sector are intended to increase the status.
- **Quality of care** – the standards of care provision across the sector. Moves to regulate the sector are intended to increase quality.
- **Attractiveness of sector** – how attractive the sector is for jobseekers. The development of programmes such as WeCare Wales are intended to increase the attractiveness.

Figure 9 shows how these factors are interconnected via the care trilemma – a visual model intended to sharpen thinking about policy trade-offs by simplifying the main relationships.

In the care trilemma, status, quality and attractiveness are outputs of other policies; factors like pay, training, regulation or quality improvement are policy inputs which shape those three elements. Any decision or intervention made should be assessed according to its likely impact on these outputs and the following three questions asked:

1. How will this affect the **quality of care**?
2. How will this affect the **professional status of care**?
3. How will this affect the **attractiveness of care**?

These three elements should be held in balance. Or, put in visual terms, there is a need to ensure that the triangle does not distort – as appears to be the case at the moment with the increasing moves to professionalise and regulate the sector.

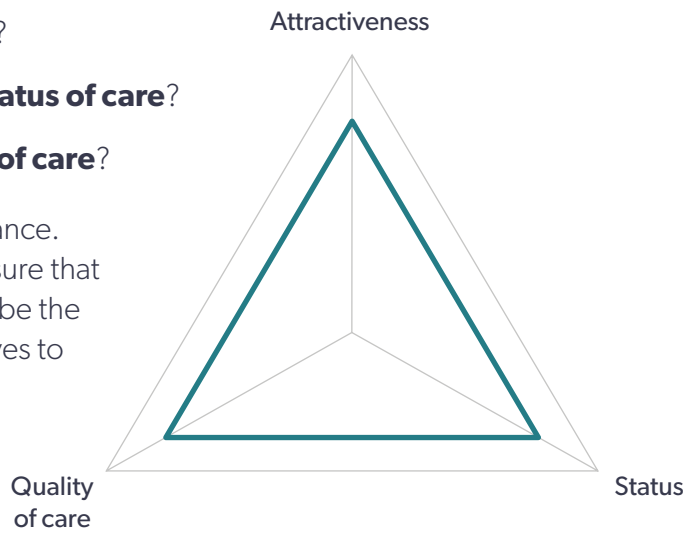


Figure 9: The care trilemma

For example, Figure 10a shows how moves towards professionalisation have led to the sector becoming less attractive for many potential applicants and existing workers. Figure 10b shows that with fewer new recruits and more staff leaving, providers are already concerned that quality is decreasing.



Figure 10: How moves towards professionalisation affect the care trilemma. 10a (left) shows how at the beginning, quality improves and attractiveness decreases. 10b (right) shows that when attractiveness is low, status and quality can decrease.

Table 8 shows care trilemmas for some of the main strategies care systems adopt to address attraction and recruitment challenges. This shows that improving pay seems to be the only strategy that will not harm the sector in terms of attraction, status or quality.

Table 8: How different strategies impact the care trilemma

Strategy and impact

Influence on the care trilemma

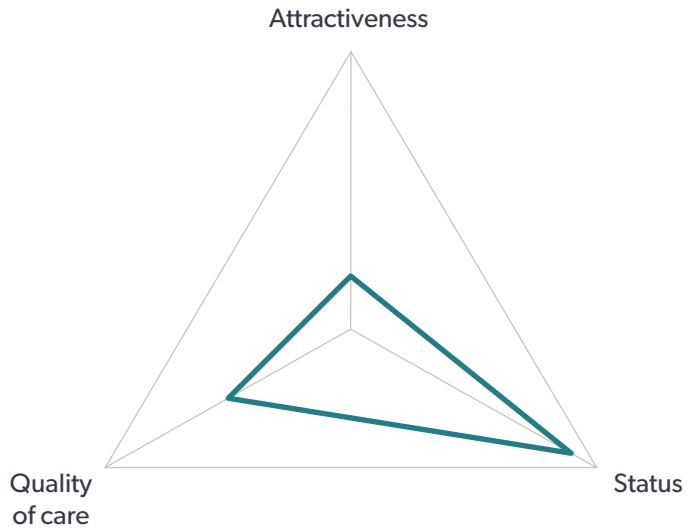
Increase pay

Increasing pay will improve the status and attractiveness of the sector. It will have an indirect impact on the quality of care if more skilled and passionate people are attracted to the sector and if existing staff face fewer financial worries.



Increase regulation

Increasing levels of regulation will increase the status of the sector. However, it will create barriers to entry which will reduce the attractiveness of the sector. As a result, quality of care will initially increase but as the sector becomes less attractive it will decrease.

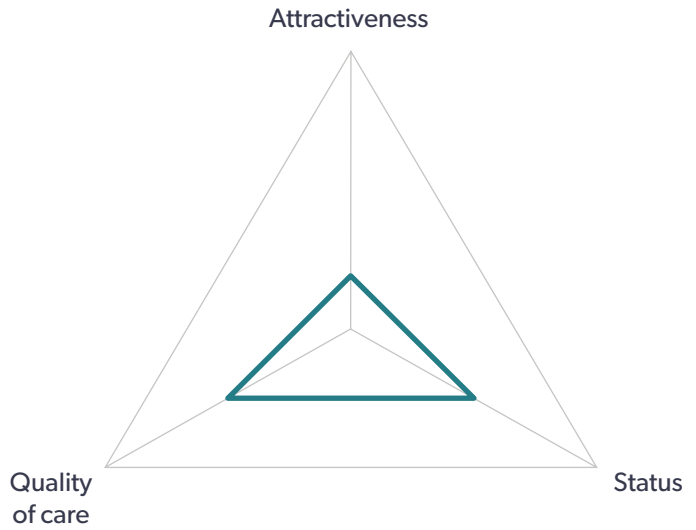


Strategy and impact

Influence on the care trilemma

Increase minimum qualifications

Improving the quality of care through increasing minimum qualification requirements, as is happening now in EYCC settings, increases the entry barriers and makes the sector less attractive. Further, as is beginning to happen, difficulties recruiting qualified workers risks the status of the sector as services become unregulated.



Recruit overseas migrant workers

Recruiting migrant workers will lower perceptions of the status of the sector. It may also reduce the attractiveness of the sector for Welsh-born populations. The impact on quality of care will vary depending on who is recruited and how, but migrant workers can improve quality – particularly where they work with people from the same community or with the same language.



Offer on-the-job training

At least with current social attitudes to work, offering on-the-job training will lower the status of the sector as training is perceived as easier than more formal qualifications. However, it would lower entry barriers thereby increasing the attractiveness of the sector. In the short-term, at least, it is likely to decrease the quality of care.





Section summary

Stakeholders face many challenges in attracting and recruiting people to the sector. They are concerned about what the ongoing attraction and recruitment crisis means for retention and the future of the sector.

Pay, and issues surrounding professionalisation and regulation, emerged as the most challenging obstacles. Largely these are beyond the scope of providers and employers or WeCare Wales to address.

Understanding how attraction, status and quality of the sector are connected through the care trilemma may be an important step in ensuring future changes do not have unintended consequences on attraction efforts.

In the following section, provider- and employer-led strategies and solutions to address some of these challenges are given.

5

Provider- and employer-led strategies and solutions



Provider- and employer-led strategies and solutions

Providers and employers have been very active in attempting to address the attraction and recruitment challenges. This section outlines strategies and solutions that have been used across the sector.

Takeaway messages

- 1 Strategies to address attraction include developing advertising campaigns, providing incentives for joining, and collaborating with local actors. There are also innovative steps being taken to attract drivers.
- 2 To address issues in recruitment, solutions are focused on streamlining the application process, spending significant time working with applicants, and providing flexibility across all stages of the recruitment process.
- 3 Although successes are reported, stakeholders stress these solutions are not enough to solve attraction and recruitment issues where pay remains low and barriers to entry are high.

A drop in the ocean

While many of the solutions presented have resulted in successes for employers, it is important to note that these are 'drops in the ocean' and cannot solve the attraction and recruitment crisis, particularly where pay remains low and barriers to entry are increasingly high.

Employers spoke of having to navigate a 'series of obstacles', 'shifting sands', and 'moving goalposts'. They reported spending significant time on understanding their own attraction and recruitment challenges and developing and implementing time-intensive solutions, generally to limited success.

"We did manage to recruit during COVID-19. We used our own advertising too, and people who had lost their job or wanted to help joined despite the risk. We opened it up to people with no experience and the response was amazing."

There is the clear sense that while there are things organisations can do, the issues in attraction are largely related to pay, working conditions, and qualifications: things that are beyond the control of individual providers and employers. The strategies that follow are aids to support employers, not to fix the staffing crisis.

Advertising campaigns

Developing and disseminating advertising campaigns is a common tactic. There are several ways employers approach this.

The capacity of employers to respond to attraction-based challenges is variable. Smaller private organisations and third sector providers tend not to have the in-house capacity to develop effective marketing campaigns. Larger organisations are able to do this but are often less embedded in local areas and find it hard to attract people via word-of-mouth. Additionally, there is variance across LAs, with some having dedicated marketing teams and others having more limited capacity.

National advertising campaigns in print, TV and social media

Large providers and employers are developing national campaigns to attract people to the sector, but with a focus on their own organisation.

Given high costs of advertising, national campaigns were only led by large private organisations and LAs. Many of these campaigns have received high numbers of views. Generally, the campaigns are quite standard, focused on explaining what the role involves and trying to communicate the fulfilling nature of care work.

In the case of Pembrokeshire LA, a more innovative campaign approach was adopted. Here, the LA developed a campaign intended to attract people to the region, highlighting the beautiful landscapes and local attractions. Working in care was framed as a convenient way to find employment in the area and move to Pembrokeshire. As yet, Pembrokeshire are unsure about the impact of the campaign. Similar campaigns have also been developed in Gwynedd and Monmouthshire.

Hyper-local, community-based advertising

Nearly all employers and regional connectors are engaged in hyper-local, community-based advertising, whether via word-of-mouth or using personal connections and/or local pages on Facebook.

People draw on existing connections in local areas to fill positions. The more embedded a provider is in the local community, the more successful this approach appears to be. Several small providers, for example, reported that they can easily fill any vacancies this way and would be unlikely to post vacancies on job boards. For these employers, recruitment and retention issues remain, but attraction is less of a concern.

“We’re living off word-of-mouth as if you refer a friend, you get a bonus.”

It is important to stress the dominance of Facebook here: no other social media site was named as being used in this way. Given that several LAs noted policies that restricted their ability to use Facebook to engage the general public, LAs may be missing out on this fruitful avenue of engagement.

Providing incentives

Employers are also trying to improve the broader employment offer through offering a variety of incentives.

Incentives include:

- Pensions, sick pay, annual leave, paid training opportunities, etc.
- Offers of Welsh language training.
- Referral bonuses.
- Incentives for drivers (see below).

Some incentives are short-term, low-cost options such as referral bonuses. The ones that have more success also have more risk. For example, in giving people additional training that can benefit their lives, i.e., Welsh language training or driving lessons, providers are concerned that people will become skilled enough to leave for other, higher-paying sectors. Employers further struggle to find an offer that is attractive for all potential applicants. For example, improving pension offers is unlikely to attract younger staff. And there is also the sense that incentives are only really working for those already in the sector.

“All that happens is they [workers] move around. It’s not helping us attract more people, it’s just the same people moving around.”

It is also important to note that there are some less desirable strategies being undertaken in the sector. For example, some social care providers include travel pay or overnight pay in hourly wages to make it seem as though the rate is higher. This can give the wider sector a bad name and can lead to employees jumping between positions or leaving the sector.

“A bad experience in one organisation can tarnish the whole sector.”

Provide additional training and/or cover costs of training

Training is a key factor that influences attraction, recruitment and retention. Fitting in the required training and, in many cases, not being paid for the time needed to complete training can make care roles seem less attractive. This is an issue across all service types.

In response to these challenges, employers have taken the following steps:

- **Providing additional training.**
“Short training courses help applicants with getting to know the jobs.”
- **Covering the costs of training.**
“We’re using small funding pots to train sixth formers up to level 2 for the holidays.”
- **Where possible, delivering training online** – to allow more flexibility for those who cannot attend training in 9am–5pm hours.
“We’re making the most of training online so that people can do it at a time that suits them, this is particularly useful when recruiting students.”

Changing the way that training is delivered can also contribute to increasing the potential pool of applicants, such as opening the role up to students who are looking for work outside of university hours.

Outreach and local collaborations

Many providers and employers take a localised approach to attraction and recruitment and collaborate with other sectors and organisations in the local area.

Those who have engaged key individuals and organisations in local settings, often in job centres and schools, for example, find a steady stream of suitable applicants. Additionally, all employers with experience of regional connectors have found benefits in developing and/or strengthening their local connections.

Key forms of local collaboration and outreach include:

- **Schools and education providers** – to recruit younger people into part-time positions or work placements, to provide understanding about the sector.
- **Jobseekers and job centres** – to engage the unemployed. Despite the successes here, closures of local spaces and organisations is already having an impact on providers’ ability to engage potential applicants.
“It was much better in terms of recruitment when the local job centres were open and we could liaise with them, as they would essentially know those seeking jobs and who would be ideal for care.”

- **Local communities** – engaging with champions, ambassadors, career connectors, job centres and existing career events to engage those who may be economically inactive, and/or to showcase the virtues and importance of the social care and child care.
“We go out to local supermarkets with champions to show that care is key for the community as it is linked to hospitals and healthcare.”
- **Other care providers** – there are limited cases of employers joining together to organise local care-specific careers events, or of regional connectors organising such events and bringing different providers together.
- **Other local events** – given the flexibility of caring roles in which casual and part-time work is commonly on offer, there can be use in engaging those not actively seeking work such as at county events, drawing on the Care Ambassadors system.

Adapting recruitment processes

Providers and employers noted that often issues with the application and on-boarding process, in terms of their complexity and length, acted as barriers to attraction and recruitment.

As a result, employers try to improve application and interview processes by streamlining approaches, reducing the gap between job offer and starting the role, and spending time with applicants. These moves are intended to increase the conversion rate of applicants to employees, and boost retention in the long term.

“We have put effort into streamlining our processes, so we have quicker responses and application systems. Now we have 20 staff going through training next week.”

The importance of spending time with applicants:

- Explaining the realities of job to prepare candidates for the role. Employers reported communicating over the phone, in person and online.
“By spending time with new applicants and supporting them through it, you get a sense of what people are like and can address their worries.”
- Building rapport with candidates.
- Assisting applicants in completing forms (especially where there are literacy and language issues).
- Maintaining engagement with applicants during the ‘danger zone’ between job offer and start-date.
“People feel forgotten about. We need to make people feel valued.”

Approaches to streamline the application and interview process:

- Conducting group interviews.
- Providing flexible interview options such as weekend and evening interviews, and options for on-site childcare.

Approaches to reducing the gap between job offer and starting the role:

- Ensuring that candidates bring all the necessary paperwork with them for interviews.
- Starting training whilst the DBS process is underway.

“As a local authority we have worked really hard with Human Resources to get the processes down to a manageable process. We trialled this with three people and told them to bring the documents for DBS checks, offered them the job on the day, and letting them start induction before getting their DBS.”

Targeted approaches

To increase the potential pool of workers attracted to work in the sector, some employers are changing their recruitment processes and taking a more targeted approach.

Examples include:

- Introducing flexible working patterns targeted to needs of parents or students.
- Being open to people with no experience.
“Qualities are more important than qualifications.”
- Pursuing those in later life who may be re-entering the workforce or changing career.
“Recruiting older people is an opportunity to bring skills, knowledge, a different perspective, and resilience to the workplace.”
- Pursuing international workers.
- Supporting asylum seekers with digital technologies.
- For social work, developing and promoting grow your own schemes, reducing the length of required experience to newly qualified, and providing additional support and training on-the-job.

Attracting drivers and reducing the need for drivers

As noted, while there are attraction challenges sector-wide, it appears that domiciliary care faces the biggest challenges given the demand for employees who can drive.

For those involved in the provision of multiple types of care (such as LAs) the biggest challenge is often in attracting domiciliary drivers. Significant time, energy, and money is spent attempting to attract drivers and/or reduce the need for drivers. While often these strategies have been successful, employers are unable to shoulder extensive costs, particularly when new recruits may leave after a few months.

Key strategies include:

Promote car sharing between employees.

This reduces the need for every employee to own a vehicle, but logistically can be difficult to organise, particularly where the provider does not own the vehicle.

Promote carpooling between employees.

This reduces the need for every employee to own a vehicle, but logistically can be difficult to organise, particularly where individuals who receive care and support are dispersed and there is not a density of calls in an area.

Providing free or discounted driving lessons and/or driving tests.

In 2022 the Welsh Government provided a £10 million supplementary budget to support local authorities in delivering domiciliary care services. Some providers have made use of this to subsidise driving lessons. Additionally, the Driver and Vehicle Standards Agency agreed to prioritise driving test dates for Welsh domiciliary care workers to overcome test waiting lists caused by the pandemic¹⁰⁸. This reduces the personal burden of learning to drive and provides employees with additional skills. However, this is costly, and leads to no guarantee that an employee would be able to take on driving routes unless a vehicle can also be procured.

Offer car maintenance vouchers and/or MOTs.

One private provider had established a good working relationship with a local garage. The garage offer discounts on their services to the company's care workers and the provider offers payments for repair of wear and tear up to a certain financial cost for its staff. This seems to be quite successful in attracting those who already drive and own a vehicle but does little to bring more drivers into the sector.

Electric bike trials.

Some providers are embarking on trials to pilot e-bikes as a lower cost and lower entry mode of transport. In this case, employees would be provided with free access to an e-bike. However, e-bikes are unlikely to be suitable in winter and periods of poor weather, while in rural areas distances may still be too great, or terrain too uneven, for this to be viable. In urban areas, however, this could serve as an interesting solution.

Driver-only roles.

Some providers are considering the possibility of hiring drivers to drive their care staff. In this scenario, drivers themselves would not be delivering care, and it quickly becomes quite costly. This is likely more appropriate for bigger organisations that could support multiple carers with one driver.

We note that many health services operate Volunteer Driver Services to drive patients to and from hospital and GP appointments. This could be an interesting avenue to explore.

Develop walking routes.

Some employers have reorganised care packages in order to develop walking routes, i.e., a series of care packages near to the care worker's home. This may mean negotiating with individuals receiving support to alter timings of calls.

Although such attempts have found some clear successes, there are certain drawbacks. Here, changes in local care needs or the circumstances of an individual receiving support can make entire walking routes unviable. Given the time employers spend setting up walking routes in the first place, this is not sustainable.



Section summary

Providers and employers have been active in developing strategies to address their attraction and recruitment challenges. Their experiences can be useful for other employers to learn from, while their remaining struggles highlight additional places where the sector needs support. As the following section shows, WeCare Wales has done well to fill some of these gaps.

6

The role and value of WeCare Wales



The role and value of WeCare Wales

WeCare Wales brings significant value to the sector. This section shows how its activities, that are designed to engage and inform jobseekers, are perceived as vital to address attraction and recruitment challenges.

Takeaway messages

- 1 Those with knowledge of WeCare Wales believe it is a positive force for the sector. However, awareness of WeCare Wales and its work is low and uneven.
- 2 WeCare Wales's activities have been successful in raising awareness and changing perceptions of the sector, and in engaging and supporting jobseekers and potential applicants.
- 3 The website is effective at targeting suitable audiences, but there is a lack of clear identity, while the job portal has not achieved the traction expected.

This section examines the impact of WeCare Wales's work to date. It explores stakeholders' perceptions and awareness of WeCare Wales and its activities; the use of website analytics to understand who uses the website and how, supplemented with additional insights from providers; and an assessment of the value for money and return on investment of WeCare Wales.

Perceptions and awareness of WeCare Wales

Overall, WeCare Wales is viewed as a positive force for the sector. Sector-wide, those who have been involved with WeCare Wales believe it is a great programme of work with immense potential to support and unify the sector. However, WeCare Wales's major limitation is that it has not yet engaged the entire sector.

"It's positive to have a national group representing the sector. Care struggles as it doesn't have a unitary body so things can't be done collectively in the same way they can for health such as with nursing salary bands. WeCare [Wales] are representing a bit of unity for the sector."

EYCC employers, in particular, were very positive about WeCare Wales. It seems that this is because EYCC have traditionally been marginal to wider social care discussions and settings appreciate the new attention (see the EYCC focused report for more detail). Social work providers, however, believe the social work message can be lost in WeCare Wales's activities.

Despite the largely positive perceptions, there was a clear lack of certainty about the scope of what WeCare Wales does:

"WeCare Wales need to provide more clarity on what their purpose is."

Awareness of WeCare Wales

Many organisations, including prominent national ones, are either unaware of what WeCare Wales does, or are unaware of its existence.

"Even our care ambassadors [different to WeCare Wales ambassadors] aren't aware of them, let alone the wider public."

It also appears that engagement is uneven and that providers and employers in Mid and North Wales have lower awareness of and engagement with WeCare Wales's activities.

Nonetheless, even where providers were not aware of WeCare Wales, they are in support of Social Care Wales's involvement in such a project.

"SCW should provide career pathways, not just qualifications, but clear profiles and a positive image [for the sector]".

It is, however, important to note that in a 2022 public perceptions survey 11% of the population surveyed were aware of WeCare Wales's marketing activities¹⁰⁹, and around 1 in 5 are aware of the programme.

WeCare Wales activities

WeCare Wales runs a series of activities intended to support the sector. In general, the sector is very positive about these activities. Where weaknesses are noted, these present opportunities for WeCare Wales to further refine its offer.

Table 9 outlines the key activities and their strengths and weaknesses. More detailed information follows.

Table 9: Analysis of WeCare Wales activities

Raising awareness

Description	Weaknesses	Strengths	Opportunities
Raising awareness of the social care and child care sector and job roles through campaigning.	Awareness of WeCare is still limited within the sector. Unclear messaging on what they do, their mission and why they are separate from SCW.	TV and radio advertisements. Very helpful resources, case studies, videos and posters.	Develop new approaches to campaigning.

Outreach

Description	Weaknesses	Strengths	Opportunities
Collaborating with other organisations, community centres and schools.	Uneven across Wales.	Reaching out to the African community increased percentage of male carers. Working with schools is particularly effective.	Expand and increase outreach activities. There are opportunities to engage migrants and refugees.

Jobs portal

Description	Weaknesses	Strengths	Opportunities
A portal for employers to publish and manage their job vacancies in one place.	Job portal is too complicated and time consuming for employers. Not well known by jobseekers outside of the sector and places like Indeed have a monopoly over recruitment.	Simpler application process than applying for various jobs separately (just uploading one CV). Free job advertisement for employers.	Engage a bigger player (i.e., Indeed) to encourage cross-posting.

Introduction to... courses

Description	Weaknesses	Strengths	Opportunities
A funded 3-day training programme for people interested in working in social care or childcare settings.	Difficult to get long-term monitoring data to evaluate the effectiveness.	Introduces people to what the sector and specific roles involve. Participants enjoy the interactive nature.	Further expand the courses and offer more targeted sessions.

Guaranteed Interview Scheme (GIS)

Description	Weaknesses	Strengths	Opportunities
The GIS ensures anyone who has completed the Introduction to... courses can get an interview.	Employers are unsure how to manage it with fair recruitment.	Allows tailoring to individual needs and requirements. Creates an opportunity to recruit from diverse backgrounds. Supports applicants to complete application forms.	Bring more employers onto the scheme.

Raising awareness and changing perceptions

WeCare Wales has developed a series of campaigns since its launch in March 2019. In general, campaigns follow care employees across a typical day or moment in the work, and show their connection with the people they support.

In the first six weeks after launch, WeCare Wales reached a total of 609,452 views through a combination of social media posts, LA website features, and national media attention.

Stakeholders appreciate the extent of WeCare Wales's engagement across different media and targeting different groups. There is a sense that campaigns and videos are high quality, informative, and useful in myth-busting and building a better identity for the sector. By engaging people from the sector in videos, many employers express a clear sense of pride and ownership over the campaigns. There are some minor concerns that the campaigns can be too positive and not fully reflect the stressful nature of care roles, but these are only held by a minority of respondents.

All videos and materials are developed in English and Welsh, and some are available in British Sign Language. They are all shared on WeCare Wales's social media profiles. The specific channels used depends on the target audience but include YouTube, Facebook, Instagram, Twitter, LinkedIn and Snapchat. Many are also played on national TV and radio or printed in national and local media outlets. The most successful campaign in terms of views is the 'We Care Will You?' that has reached over 330,000 views on YouTube.

Campaigns focus on improving the image of the sector more broadly or improving the image of and awareness of specific roles. For example, the campaign 'Make a difference in a child's early years' focuses on EYCC roles. This campaign has been particularly successful, reaching an audience of almost 200,000 views.

Figure 11: Still from the 'We care Will you?' campaign



Outreach and engagement work

WeCare Wales facilitates and runs an extensive programme of outreach and engagement activities. These activities provide jobseekers and potential applicants with information, advice, and support in order to increase attraction and recruitment.

There are four key activities in this regard, and employers and those involved in the delivery of these activities are positive about them all.

- **Regional Care Career Connectors** – Social Care Wales provides £50,000 of funding per region to employ regional care career connectors that act as the link between national and regional work, and lead engagement with partners and regional campaigning. All employers who had engaged with their regional connector were very positive about this role, appreciating having someone both in touch with local concerns and involved in national discussions.

Where regional connectors attend or run job fayres and regional-specific resources, smaller providers in particular are very grateful. Regional connectors have also been central in identifying additional providers that may not have been involved with existing work or local groups.

However, regional connectors we spoke with described difficulties in finding and engaging providers, and in prioritising increasingly busy workloads.

- **Stakeholder toolkit** – WeCare Wales has developed a package that can be used by careers and job-seeking organisations and education providers to supplement social care teaching and resources. The toolkit is adaptable to different audiences.

Regional connectors report it has been received well by universities and colleges. In colleges, there is anecdotal evidence that it is encouraging students to seek part-time opportunities in the social care and child care sector rather than in retail or hospitality.

- **School engagement** – via the regional connectors and the wider WeCare Wales team, WeCare Wales has made important steps in engaging school children across their schooling journey. Although most engagement is with 16+, more recently, connectors have been engaging younger children. Importantly, in engaging children, there are opportunities for messages to be passed onto adults.

Stakeholders particularly appreciate the engagement work with school children in providing longer-term approaches to the attraction and recruitment crisis. This is important given schools often don't have the capacity to deliver quality and accurate information about the sector and specific roles. Stakeholders also recognise that the impact of this work will not be felt for many years.

There is further scope to engage school children in work experience opportunities, but few providers know how to go about this.

- **Engaging jobseekers** – Connectors also attend local job centres, attend and/or organise job fayres, and seek to work with other employment-focused organisations in localities and regions. WeCare Wales has led several large sessions aimed at job centres and work coaches.
- **WeCare Ambassadors** – WeCare Wales supports ambassadors across the sector. These are existing employees who volunteer to be an ambassador. They are expected to share their experience and engage with jobseekers and schools to further the aims of improving attraction. They are based within the regions and run by regional leads.

Importantly, the outreach and engagement work shows the importance of prioritising local and regional engagement and tailoring more general/national resources and approaches to local needs. Figure 12 is an example of a user journey showing the importance of these outreach activities in engaging jobseekers.

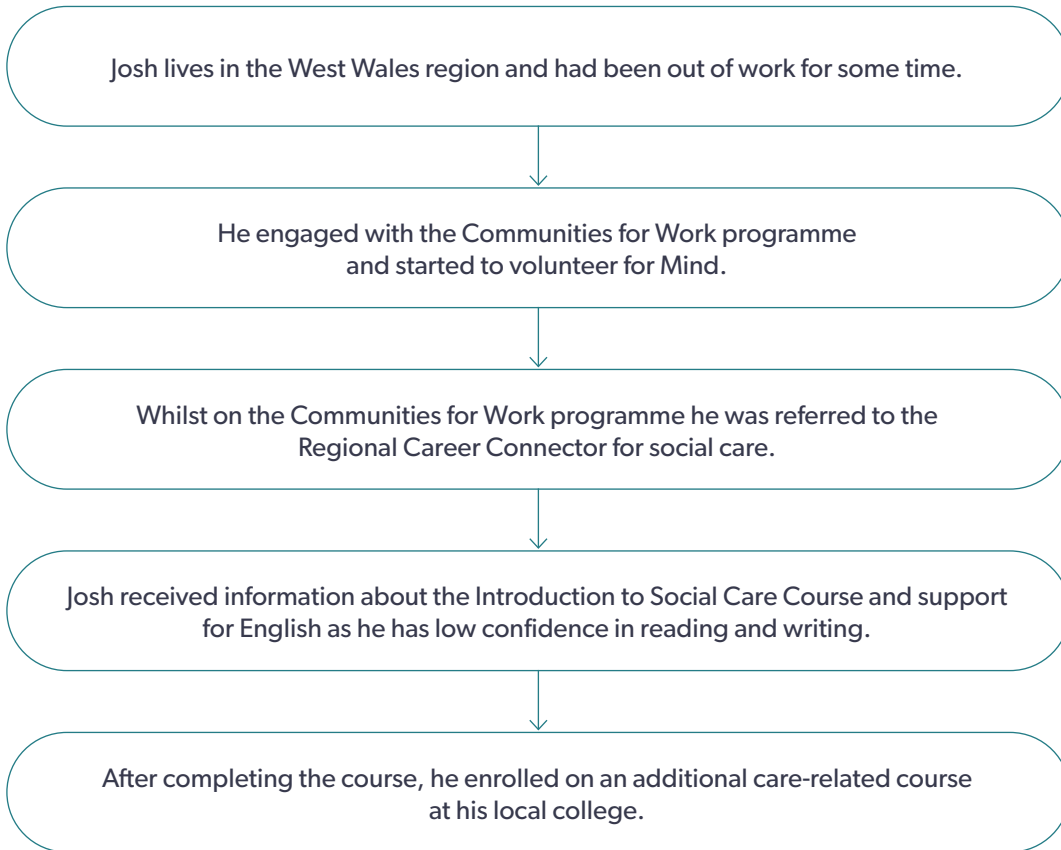


Figure 12: User journey showing how WeCare Wales’s outreach activities support jobseekers into entering the sector

Supporting potential applicants

WeCare Wales has also developed schemes and courses designed to make it easier for people without knowledge of and experience in the sector to find employment.

In providing tailored support for applicants, WeCare Wales is taking important steps in better preparing applicants for the realities of the work.

“WeCare Wales has done a lot to simplify routes into social care, and create a very user-friendly experience.”

- **Introduction to... courses** – The 3-day courses are free of charge and intended to introduce people to the sector and to the specific demands of the role. Topics such as communication, safeguarding and working practices are covered by the course. At the end of the programme a work coach assists candidates in finding and applying for vacancies. Additionally, when starting a role in the sector, candidates will receive extra support and additional training from their employer.

Although fairly new, there is already evidence that people are transitioning into the social care and child care sector following completion of the course. So far, there have been 606 people who have completed the Introduction to social care course, with at least 123 people entering relevant work or education after completion. A further 70 people have completed an Introduction to childcare course. Given the childcare courses only began in late 2022, there is not yet outcome data.

- **Guaranteed interview scheme (GIS)** – providers that sign up to the GIS must guarantee an interview to applicants who have completed an Introduction to... course. There are currently 61 providers signed up, but there are ongoing plans to extend this to over 2,000 providers.

Providers already engaged are very complementary about the GIS and are excited to see it grow.

- **Work coaches** – provide potential applicants, including those who have completed the Introduction to... courses, with tailored individual support to apply for jobs, understand training and registration requirements, and provide wider career planning and personal development support.

Supporting applicants to understand the process and complete forms is important to aid recruitment but is very resource intensive. Work coaches are perceived as useful but are currently working at capacity.

Insight into WeCare Wales's website

Given the importance of the WeCare Wales website as a way to engage providers and applicants, and as a home for its resources and job portal, it is useful to understand how the website is being used.

It is important to note that the website is currently being migrated and re-built to address the known issues in functionality and in ensuring information is clearer and easier to find. This will be completed by Summer 2023.

Usability

In general, few issues with website usability were raised. Of the issues that were raised, most are already being addressed in the ongoing website improvement.

There are two key takeaways in terms of usability:

Things are not always in an obvious place.

- It is unclear where information on social work sits from the main headings.
- It is difficult to navigate to information on the GIS without already knowing it exists.
- Banner pictures are very large and hide important text and links below.
- Some important links – apprenticeships, ambassadors – are not clear on the main menu bar.

There are issues with accessibility.

- Often there are only videos without accompanying write-ups on type of employer and type of role.
- In other cases, pages are very text heavy.
- Many links do not highlight when hovered over and look like broken links.
- The website uses the entire width of a screen and can be difficult to view on larger screens.

Importantly, there are no additional or differing issues raised for the Welsh language content. Welsh users are happy that the website is fully bilingual.

Site identity

One of the main issues highlighted with the website is lack of clear identity, particularly on the homepage.

Large banners obscure key information, while there is no clear ‘about us’ section (see Figure 13). It is not clear from the homepage what WeCare Wales is, what it is trying to achieve, or who it is aimed at.

“The website doesn’t clearly state who they are and what they do. There’s no clear statement that it is a recruitment campaign.”

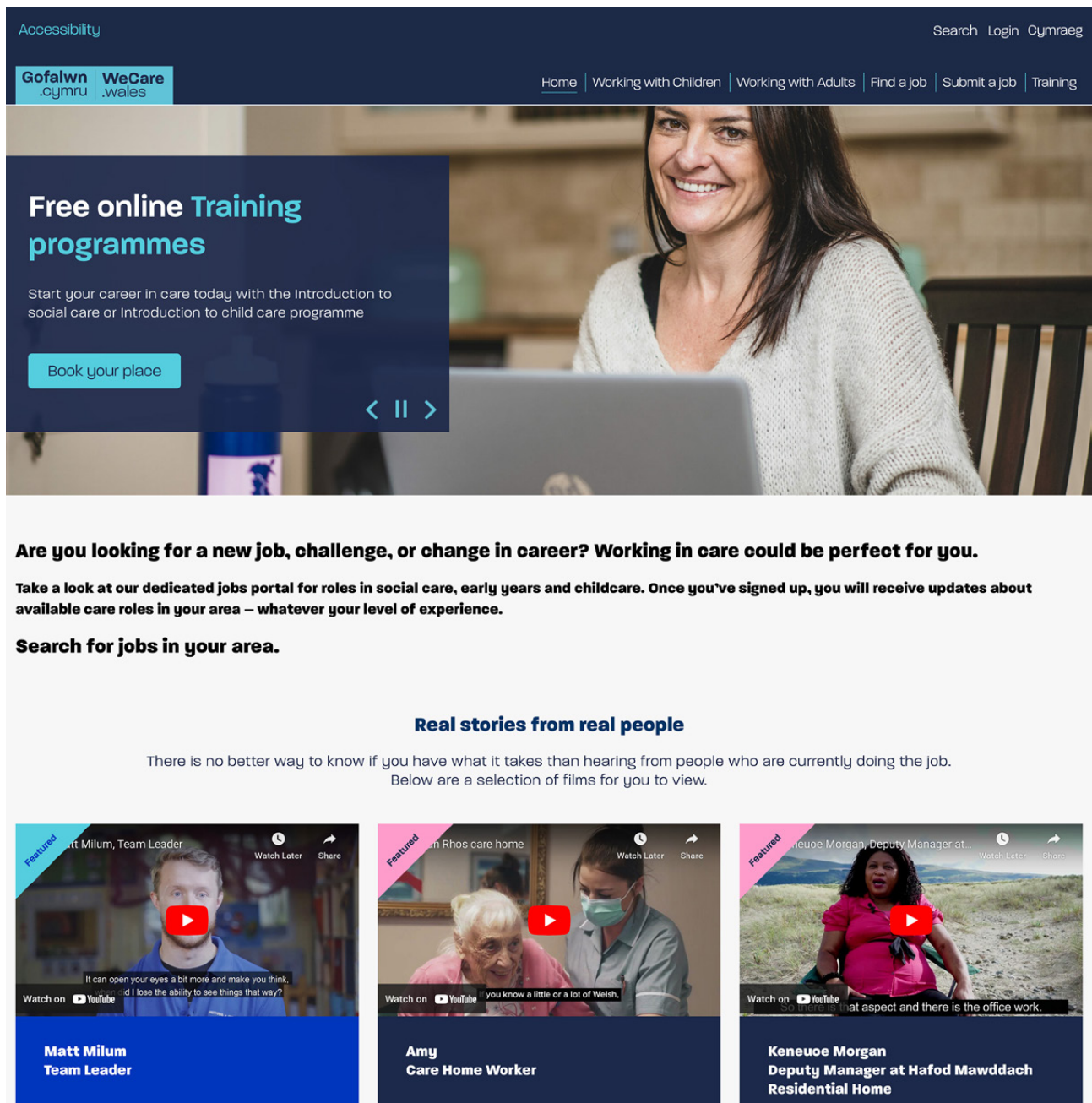


Figure 13: A screengrab of WeCare Wales’s homepage

Job portal

In principle, employers support the job portal. They appreciate having a free place to post vacancies. However, they receive very little, if any, traction from postings.

“We’ve advertised on WeCare Wales for years but only two applications have come through this, even though we keep the adverts refreshed constantly.”

“Job adverts have been put on WeCare Wales, but we’ve only had one applicant from Nigeria and nothing else.”

It appears the lack of traction is due to the market dominance of other national and global brands – Indeed, Reed, and Totaljobs among others. Unless someone is seeking a role in care, they are unlikely to stumble across the WeCare Wales website. Those who do may then apply via more well-known sites or go directly to the employer’s site. In this case, it is unlikely that employers would be aware of the role WeCare Wales may have had in bringing applicants to their site.

“People outside of care haven’t heard of WeCare so they don’t go there to look for jobs.”

Further, issues in the initial roll out have led to a lack of confidence:

“The WeCare Wales jobs portal was a great idea but was very poorly executed, with lots of technical issues. These were reported by providers, but nothing was done. It should have been taken down, the issues fixed and then it re-launched. Now people don’t use it.”

The job portal does, however, seem to have use when it comes to the GIS and the Introduction to... courses. Plans to expand the Introduction to... courses and bring over 2,000 settings onto the GIS provides a clear opportunity for increased use and success of the portal.

It is also important to note that employers have frustrations with more traditional job boards such as Indeed or Reed, including:

- High costs to post job adverts.
- Hard to make roles stand out.
- Roles are advertised multiple times, drowning out available roles.
- Often leads to excessive applications from ineligible or unsuitable applicants.
- Providers and recruiters are wasting a lot of time and money pursuing applicants who are ineligible or uninterested.

Who is using the website?

The user profile of the WeCare Wales website broadly matches the profile of existing staff.

Approximately 150,000 users viewed the website from January 2022–January 2023, with 33% of all user activity being carried out in the first quarter of the year. This trend also appears common across previous years. It should be noted that WeCare Wales receives uneven funding across the year, which plays out in this imbalance of activity.

As Figure 14 shows, users of all ages use the site, but the core audience lies between the ages of 25-54 who make up 60% of all users. Additionally, 61% of users were women.

Nearly all users who viewed the website over the past year are new visitors; just 11% are returning visitors. Most users access the site in the mornings as opposed to evenings. 95% of all users are viewing the site in English, and most are based in the UK.

Percent of users per age group accessing WeCare Wales

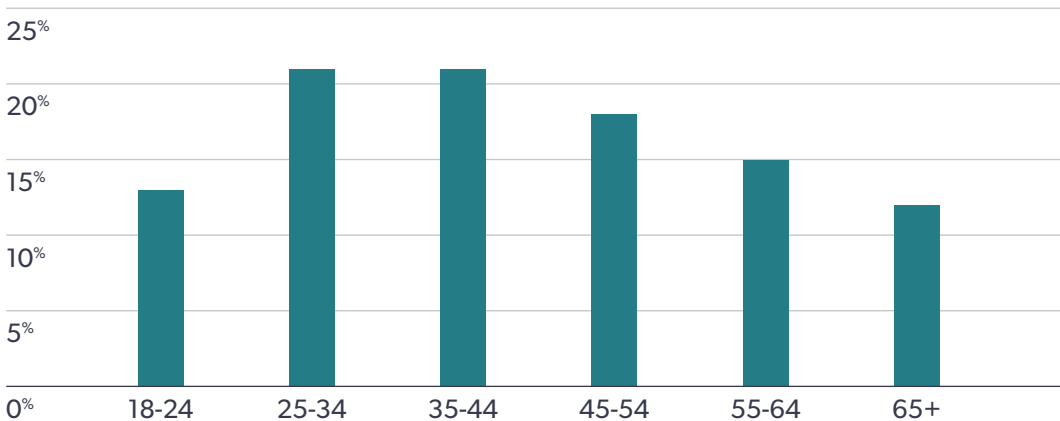


Figure 14: Percentage of users per age group accessing the WeCare Wales website (January 2022-January 2023)

How are they using it?

Users primarily access the website via mobile phones. Time spent on the website is increasing, suggesting engagement is too.

On average, from January 2022-23 users spent approximately 44 seconds on the website at any given time. Importantly, since October 2022, the average time is increasing: users now spend on average 150 seconds on the site.

As Figure 15 shows, most users find the site through a paid search (32%) or via social media (18%). Most users access the website from a mobile phone, with a small number of users using desktop machines, laptops, or tablets. The session duration spent on desktops is considerably larger (4x) than the session duration spent on mobile phones. This is likely because users will open a page from the website and leave the tab open instead of closing it instantly.

How many users access the site from each source

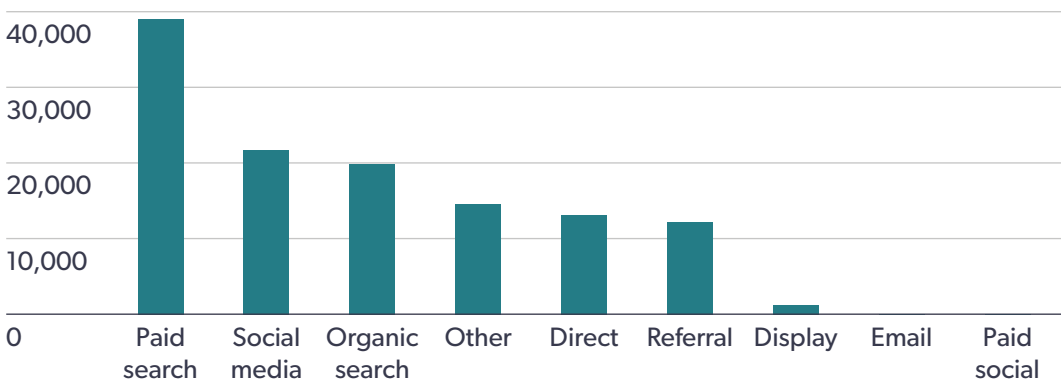


Figure 15: The number of users accessing wecare.wales from each source (January 2022-January 2023)

What are they using it for?

Most users visiting the website appear to be searching for jobs or apprenticeships or finding out information about the sector.

The *working with children* page receives the most views of just over 15,000, translating to 37% of all users and an average time of 17.5 seconds spent on the page per user.

The pages *more than just words, jobs, and apprenticeships* are the next most viewed pages, respectively, receiving approximately 5,000 views each. Users spend an average of 40 seconds looking at job listings or searching for apprenticeships. Two other commonly viewed sites are *introduction to social care* and *gweithio-gyda-phlant*, with users spending around 120 seconds on these pages.

Key actions taken on the website appear to be related to jobs or apprenticeships, with users most commonly viewing job listings, clicking on job applications, searching for apprenticeships, or signing up using the website.

Importantly, those who find the website from an organic search or referral from another website or social media site are more likely to complete one of the website goals. Goals include actions such as viewing a job listing or contacting an employer. Figure 16 shows the percent of users that completed goals based on how they initially found wecare.wales. Men and those aged below 34 are more likely to contact an employer than other groups.

Percent of users that complete goals according to how they accessed the website

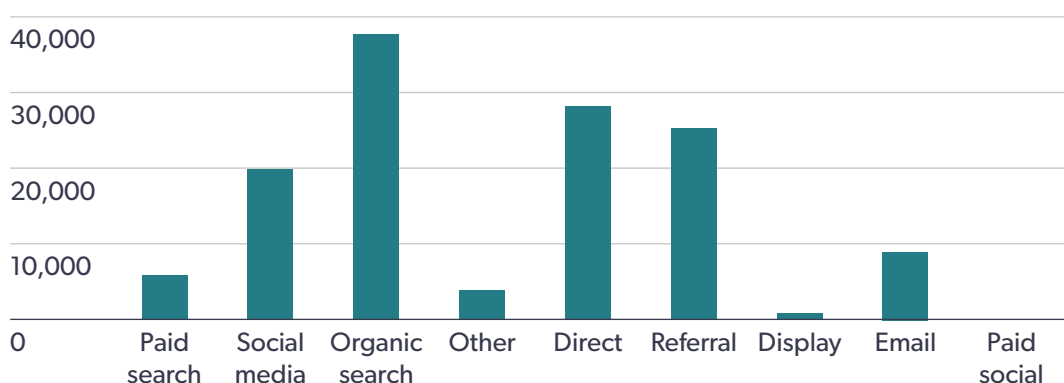


Figure 16: Percentage of users that complete goals according to how they accessed the website (January 2022-January 2023)

Value for money and return on investments

It is important to understand how WeCare Wales offers value for money and creates a return on investment. To do so, a broad comparison with other organisations attempting similar campaigns and projects has been conducted.

Comparing spending and return on investments (ROI) of recruitment communications is complicated by the contextual nature of goals, and the lack of strong data on both spending and impact. It is further complicated by the uneven, unpredictable and short-term nature of WeCare Wales's funding. However, a rough benchmarking of WeCare suggests that in absolute terms it is in line with comparator organisations. Examples in health and care include:

- In 2023, the Scottish Government launched a campaign called 'There's More to Care Than Caring' aiming for an increase in applications to jobs in adult social care. This cost £500,000 and has not yet been evaluated.
- In 2018 NHS England launched 'We are the NHS' to increase nursing applications. This campaign cost £6m and claimed to have led to a 4.5% increase in applications to nursing degrees.

- In 2020, NHS England launched 'Then, now, always' as a broader recruitment and brand campaign. They claimed to have saved £248m in freelance costs, and created £35.6 of benefits for every £1 invested. This suggests a total spend of around £7m.

Wider public sector campaigns and advertising budgets vary significantly but where they are targeting mass media, including online, they tend to have large budgets. Examples include:

- The Department for Education spends approximately £10m a year on teacher recruitment in England, with significant variation year-on-year. Sector media reports a cost to recruit of around £400 per teacher.
- The MoD was reported to have spent £70m over two years on recruitment for all the armed services (unlike Social Care Wales, the MoD acts as both the employer, and as a promoter of careers in a sector). In 2015, the cost to recruit a single member of the armed forces was around £800.
- NHS England's 'Help us help you' campaign, had a total contract value of up to £28.6m across three years.

Comparison of online advertising is difficult as few advertisers release results, and budgets are generally smaller and often not made public. As a comparison, the Scottish Government spent around £2.9 million across all of its campaigns (on any topic) on Facebook, Twitter, Instagram, and Reddit in 2021-22.

A further consideration is that the main social media sites have significant power to set prices, and costs are usually measured per click. Often these costs are standard across any given industry. Whether this is seen as good value or not is largely an internal consideration, often set by metrics on the total cost of acquiring a customer, sales targets, or budgets. This means that Social Care Wales is unlikely to be paying wildly outside industry norms for online advertising.

Assessing the value for money is largely about understanding WeCare Wales's own sense of priorities, and what it considers an appropriate spend given competing demands for investment. This is likely to be the best approach to a future value for money assessment – to distinguish between spend which should be absolutely in line with market prices (such as website builds, updates and migrations), and spend which is a relative judgement on the costs and benefits (such as campaign spending).

Some companies – in particular startups – use a metric called Customer Acquisition Cost (CAC). This is the amount of money they have to spend to attract a new customer. They also often measure Lifetime Value (LTV) – the total amount of revenue each customer will bring in. A CAC:LTV ratio is a standard metric for working out if marketing spend is overall proportionate and worthwhile. Variations on this model tracking the spend-per-hire and benefit-per-hire could be explored by Social Care Wales.



Section summary

WeCare Wales brings significant value for the sector. Its activities, that are designed to engage and inform jobseekers, are perceived as vital to address attraction and recruitment challenges. Although awareness is low, as the recommendations that follow show, there are some steps that can be taken to increase awareness.

7

Recommendations



Recommendations

Recommendations to address the attraction and recruitment challenges are provided for both WeCare Wales and social care and child care providers and employers.

However, this research has shown that without more meaningful and joined up collaboration with providers, regulators, workers, the education sector, the public, and the government, the ability of WeCare Wales (and by extension Social Care Wales) and providers/employers to create change is limited.

Because of this, after the recommendations, six areas where system reform is needed are outlined.

What can WeCare Wales do?

For the most part, WeCare Wales should keep doing more of what it already succeeds at – campaigning, engaging jobseekers and employers, and developing resources. Ten specific recommendations as to where efforts should be focused are suggested (see Table 10).

All ten recommendations are considered essential, high priority recommendations. Most are low-cost, easy to implement solutions.

As many of the recommendations are to continue and expand existing activities, they are categorised as reconsider how to do, keep doing and start doing. Details about each of the WeCare Wales focused recommendations follows.

Table 10: WeCare Wales recommendations

Recommendations for WeCare Wales		Priority
Keep doing	Expand advertising and campaigning activities.	Immediate
Keep doing	Develop more resources for the website.	Immediate
Keep doing	Extend the 'Introduction to...' courses and Guaranteed Interview Scheme (GIS).	Immediate
Reconsider how to	Develop a clearer identity.	Immediate
Start doing	Support the sector to professionalise from within.	Medium-term
Keep doing	Engage and support the local system.	Medium-term
Reconsider how to	Improve use of the job portal.	Medium-term
Start doing	Focus on small and medium providers and settings.	Medium-term
Keep doing	Facilitate better provider networks and relations.	Long-term
Start doing	Support the sector understand the importance of diversity, equality and inclusion.	Long-term

1. KEEP DOING: Expand advertising and campaigning activities

With few exceptions, the sector is overwhelmingly positive about WeCare Wales's existing advertising and campaigning, although there is scope to adapt approaches or develop new ones.

Approaches could include:

- **Engage celebrities and other well-known figures** – There is clear scope to bring key voices into the campaigns. It was noted that Rhod Gilbert's episode on Care Workers for his *Work Experience* show (2020) has been important for the sector; encouraging similar interventions may be fruitful.

A former Wales Rugby Union player, Peter Rogers, has been working in the social care sector for around five years in a domiciliary role. Peter has also become an active spokesperson for dementia, an issue that he deals with in his new job and has knowledge of from his rugby days¹¹⁰. Such moves could be particularly important in improving the attractiveness of the sector for men. There is clear scope to engage him and other well-known figures in campaigns.

It could also be useful to engage those with experience as service users or family members of service users.

- **Develop social-media-friendly campaigns and activities**, i.e., material that can be easily shared in short clips. A stunt akin to the Finnish army campaign's use of a locked box in a public space, for example, is relatively low-cost but can achieve a much bigger reach than more traditional campaigns.
- **Targeted social media advertising** – Developing targeted adverts aimed at specific groups, such as those used by Uber and Deliveroo in targeting morning shift work at those in other employment.
- **Showcase the social care and child care sector as a vital component of Welsh society** – More can be done to explain to the public the importance of the sector rather than just raising awareness. In particular there is a need to demonstrate to the public the importance of the sector in:
 - Facilitating independent living.
 - Upholding Welsh healthcare.
 - Ensuring children have the best start in life.
 - Supporting local regional and national economies.

2. KEEP DOING: Develop more resources for the website

WeCare Wales should develop a series of new resources to support the sector and potential applicants.

Table 11 lists resources that have been suggested throughout the stakeholder engagement. Employers further requested that additional and more up-to-date case studies are provided, and that information is presented in easy-to-read formats as employers don't always have the time to read long documents or watch videos.

Developing and keeping resources up to date is a difficult task, particularly when resources refer to policies and schemes that are beyond the sector, such as the benefits system. However, the current system of signposting people to other sites and resources where information is held is not working. In most cases, information elsewhere is difficult to understand for employers and applicants and creates challenges in attraction and recruitment.

Table 11: List of resources WeCare Wales should develop

Resource	Description	Target audience
Guide to understanding training and qualifications for care roles	A very clear overview of minimum and preferred training and qualification requirements for social care and EYCC. Employers note that existing resources are not clear enough.	Applicants, with a resource for each sub-sector.
Guide to navigating the benefits system for social care and child care workers	Focus on understanding Jobseeker's Allowance, Working Tax Credit and Universal Credit for those working around 16 hours per week is essential.	Ideally two standalone resources should be developed, one for employers and one for applicants.
Guide to supporting people in returning to work	There are various schemes and opportunities in the UK aiming to engage people in returning to the workforce such as the Return to Work Programme and Re-Start Scheme. Providing guidance as to how these schemes work in practice would be useful.	Ideally two standalone resources should be developed, one for employers and one for applicants.
Marketing guide	Not all providers have in-house marketing expertise and find it difficult to know how to navigate marketing, including how to use social media and how to target campaigns to specific audiences.	Small and medium-sized organisations.
Guide to work experience and work placements	Even providers with strong relationships with local schools are unclear how work placements and experience could work in practice. Updating the existing guide to offer more clarity about the process and key things to consider would be useful.	Ideally two standalone resources should be developed, one for employers and one for schools.
Navigating apprenticeships	Providers are interested in apprenticeships but unsure how they work. Current WeCare Wales information is only aimed at applicants.	Employers.
Guide to overseas recruitment and sponsorship	<p>Various providers noted they would consider overseas recruitment but are unsure how to navigate visa restrictions and sponsorship.</p> <p>However, we caution about promoting migrant workers as a solution to vacancies and if developed, this resource should be sensitively handled and not widely promoted.</p>	Employers.

3. KEEP DOING: Extend the Introduction to... courses and guaranteed interview scheme

Both the Introduction to... courses and GIS are very successful activities. WeCare Wales is already in the process of bringing an extra 2,000 service settings onto the GIS and is working with HEIs to increase the ability to run the Introduction to... courses. Given the findings of this report, these are sensible moves.

Extending access to the Introduction to... courses will help address some of the issues with ineligible applicants and smooth the application process.

Extending membership of the GIS to more employers also offers an opportunity to extend and deepen connections with providers across the social care and child care system, and as noted above, provides clear opportunities to increase use and success of the job portal. As the Introduction to... courses expand, it is assumed the success of the scheme will increase.

As the schemes expand, it is, however, important to ensure that employers offer decent working conditions. Given the mutually beneficial relationship of the GIS for applicants and providers, there is scope in the future for WeCare Wales to impose minimum requirements of fair working practices to employers that wish to be involved, building on the work of the Fair Work Forum.

4. RECONSIDER HOW TO: Develop a clearer identity

WeCare Wales needs a clearer identity. It needs to have absolute conceptual clarity over what it is trying to do, and which system dynamics and groups of people it is addressing/working with. This should also help improve awareness.

As website changes are currently underway, now is a good time to develop this identity and to clarify what WeCare Wales stands for.

The website should have a clear homepage that explains what WeCare Wales is and how it supports the sector. An About Us section would also be useful, perhaps featuring the Regional Connectors and Work Coaches employers and applicants may encounter.

The sector needs a way to close the gap between providers and the wider pool of jobseekers, as well as a way to support providers, employees and applicants. There is an opportunity for WeCare Wales to be framed as a platform or bridge connecting and supporting employers and jobseekers. It also needs to be recognisable as a place to go for support across the sector. Developing a mission statement and clear goals may go some way in this regard.

A suggested mission statement would be:

WeCare Wales supports the care system from early years and child care, to social care and social work. We support providers in understanding and addressing challenges in attracting and recruiting employees. And we help aspiring carers, applicants, and care workers to understand the sector and how they can succeed.

To do so, we have five key goals:

1. Change understandings about what care work involves to further improve the status of care.
2. Give people the skills, understanding and confidence to enter care.
3. Give providers the tools and knowledge to understand their workforce challenges.
4. Connect jobseekers and providers.
5. Create a space for providers to share concerns and best practice and receive support.

5. START DOING: Support the sector to professionalise from within

There are some clear benefits in professionalising the care workforce, but this needs to be done in a way that is more sensitive and responsive to the concerns of providers. It is also important to ensure providers and employees feel they have ownership over the process and that moves to professionalisation do not impact on their autonomy.

Supporting the sector to standardise and professionalise from within is key to paving a smoother path to professionalisation. Given the connections with employers and applicants, WeCare Wales are well positioned to do this. This can involve:

- Working with organisations in localities and regions to promote streamlining and standardising of processes.
- Supporting employers to understand and appreciate registration and qualification.
- Supporting applicants to understand and appreciate registration and qualification, perhaps by providing a forum or live chat option on the website.

6. KEEP DOING: Engage and support the local system

Engagement and outreach with schools, job centres and other local employment focused organisations is perceived as one of the key strengths of WeCare Wales's work. This work needs to continue and grow.

The following forms of engagement have been identified as key priorities by employers and other stakeholders:

- **Work placements** – Support providers to engage schoolchildren in undertaking work experience and work and volunteering placements. Giving young people a taster of working in care settings may increase motivations to apply later.
- **Continue developing resources for schools and colleges** – The lack of expert social care and child care teaching in schools and colleges makes it difficult for the sector to control its messaging in education settings. Developing resources that schools and colleges can use that give more realistic understandings and expectations of the sector is key.
- **Universities** – Given that universities tend to have existing careers services that support students in gaining part-time employment and work placements, there is clear scope to engage universities and their career services. Many have student-facing internal job boards that could be used to display WeCare Wales job postings. There are also large careers events that regional connectors can attend.
- **Job centres and career organisations** – Again, job centres and other organisations supporting jobseekers may not have care-specific expertise. Connecting with organisations and assessing their needs in terms of care resources and information can be key to ensure more potential applicants learn about the sector and are provided with reliable advice concerning training and qualification pathways.

7. RECONSIDER HOW TO: Improve use of the job portal

Various issues were raised with the WeCare Wales job portal. There is no easy fix to this issue, but there are potential future directions.

Potential strategies to improve the job portal are listed in Table 12. Figure 17 shows the expected impact and effort of each option. This shows there are few opportunities for a quick win.

Table 12: Potential options for the job portal

Strategy	Description
Remove portal	Remove the job portal and divert the costs towards other activities such as branding and developing resources.
Organic growth	Accept that the main value of the job portal is connecting those who have completed Introduction to... courses with employers on the GIS. In this scenario, the job portal should not be promoted as a core function of WeCare Wales, and instead it is assumed that it will grow organically as the GIS extends and more people complete the courses. It can be pushed via colleges and other education providers, but there should not be an expectation of attracting the general public to the job portal.
Connect with bigger player	Do the above and try to engage with an established online job site, such as Indeed, and agree cross-promotion. For example, Indeed could direct jobseekers to WeCare Wales's resources on care job roles, while WeCare could direct care applicants to Indeed's application and CV support pages. While this requires the buy-in of a profit-driven organisation, there is scope to frame the relationship as an opportunity to demonstrate commitment to social value.
Significant investment	For the job portal to become a central place in the care system connecting any applicant with aims of working in care to providers, significant and costly advertising campaigns are required. Given the diversity of providers, this will be a difficult task. Even if WeCare Wales can achieve household status, it will be difficult to compete with general job boards. This would cost millions and is not recommended.

Figure 17 maps the potential options for the job portal onto an impact-effort matrix. This shows the potential each solution has to improve the job portal as well as how much effort it would take. Options that are low-impact and high-effort should be avoided. The best option would be one that is low-effort but has high-impact. As Figure 17 shows, there is no easy way to improve the job portal. A balance needs to be made between impact and effort.

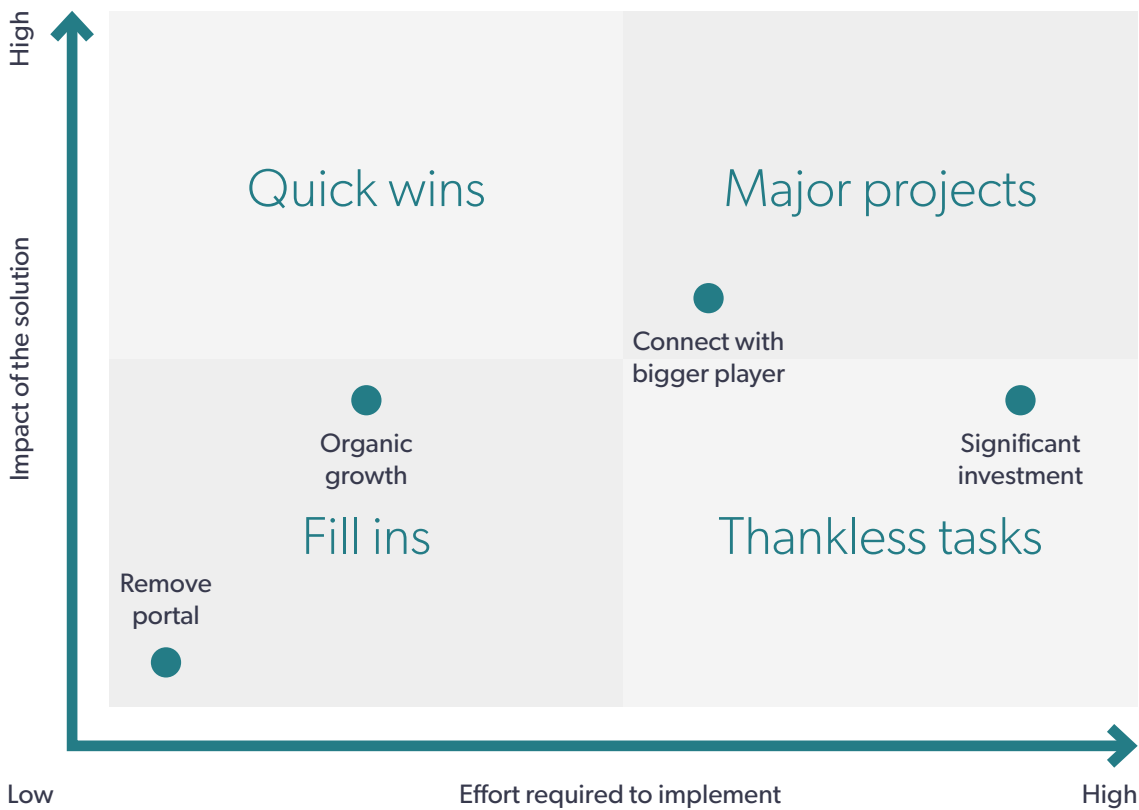


Figure 17: Impact-effort matrix for job portal options

8. START DOING: Focus on small and medium providers and settings

WeCare Wales aims to support the entire sector. While organisations of any size can and do benefit from WeCare Wales's activities, small and medium providers without in-house capacity and expertise stand to gain the most.

Small and medium employers, particularly in social care, seem less likely to be engaged in regional and national forums, less likely to be members of the GIS, and less likely to know their regional connector. Recruiters at larger organisations, however, seem more actively involved in national and regional discussions, likely given that their job roles allow for such engagement.

9. KEEP DOING: Facilitate better provider networks and relations

Extending and deepening connections across the system is key. Although not a core aim, one of WeCare Wales's main strengths lies in its ability to support, represent and unify the sector.

Regional connectors can be an important tool by which to lead this work. In some cases, regional connectors have helped improve private and LA relations. In other cases, connectors have found and brought employers from smaller settings into conversations they previously did not know about.

However, regional connectors are already overworked and often unable to keep up with the demands of their entire region. Connectors at the LA level may be better to maintain and develop provider networks and relations. There is also a need to ensure the regional focus is not lost given how often care issues cross local boundaries.

10. START DOING: Support the sector to understand the importance of diversity, equality and inclusion

There is a lack of motivation from providers and employers to actively increase diversity in hiring. However, the findings from the research strongly suggest that adding further pressures on providers to build diversity into their recruitment practices would be counterproductive.

The lack of motivation to increase diversity stems from the wider challenges employers face in hiring anyone. For the most part, they do not have the time, resources, ability, or motivation to engage in such work.

However, there is significant evidence that more diverse, inclusive, and equal workforces are more attractive to jobseekers¹¹¹. Further, care workforces that are representative of their users can provide better quality of care. Finally, the widespread use of gendered and ageist language to describe the workforce can make it unattractive to those who do not identify with such terms.

This means it is important to ensure diversity is not overlooked. WeCare Wales should promote the benefits of diversity, provide resources and advice to support providers, and provide support to applicants from more diverse backgrounds. It is not recommended that WeCare Wales attempts to 'preach to' providers – but rather works with them.

What can providers and employers do?

There are many ways providers and employers can change or develop new practices in order to improve their approach to attraction and recruitment.

Section 5 highlighted best practice examples of strategies providers and employers are taking to improve attraction and recruitment to their services (see Figure 18). Here, an additional four recommendations are provided (see Table 13).

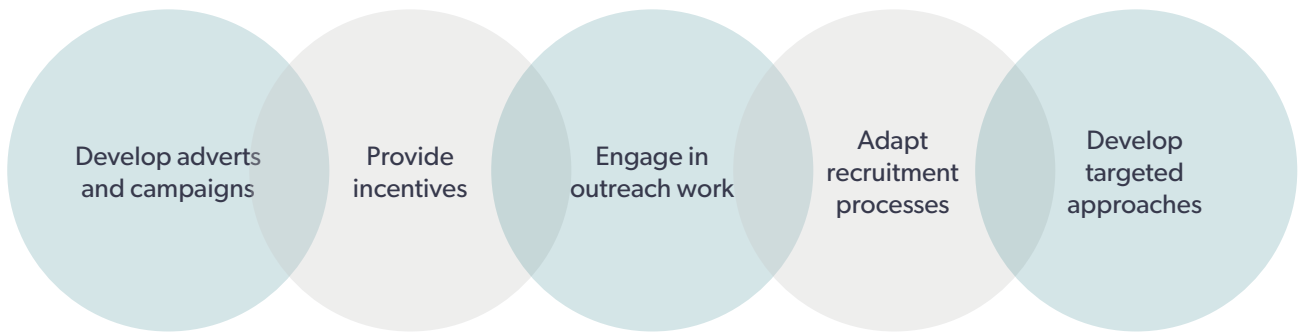


Figure 18: Provider- and employer-led recruitment strategies and solutions

Table 13: Recommendations for employers and providers

Recommendations for employers and providers		Priority
Must do	Get involved in local and national discussions about the sector.	Immediate
Should do	Seek out local and national funding.	Medium-term
Should do	Explore the use of digital technology.	Long-term
Could do	Collaborate with other providers and settings.	Long-term

1. MUST DO: Get involved with local and national discussions about the sector

There are many opportunities for employers to actively engage with and give their views on local and national discussions about the future of the sector.

Those that engage with their regional connectors and local and national stakeholder forums tend to be more positive about their ability to address attraction and recruitment challenges. They are also more aware of WeCare Wales's activities, and are more likely to be signed up to the GIS and other schemes.

Employers must be active in their engagement. In particular, they should engage with and keep informed about the ongoing work of WeCare Wales. They should use the national campaigns as an opportunity to share their own local messages, adapt resources for their own purposes, signpost potential applicants to the website, and engage with local and regional events and forums.

2. SHOULD DO: Seek out local and national funding opportunities

Providers and employers should actively seek out schemes, funding opportunities and support available to employers in Wales and the UK that could support their recruitment efforts.

This type of support includes schemes and funding that support workforce recruitment and development, such as the Re-Start Scheme and Return to Work Programmes or Returnships (an internship designed to support people re-entering the workforce).

It can also include support given to employers to reduce carbon emissions and meet net zero goals, to address local and national transport challenges to support driving roles, to explore the use of digital technologies, or train workforces in digital skills.

3. SHOULD DO: Explore the use of digital technologies

There is clear scope for providers to integrate digital technologies into their workforce planning activities to manage workforces more efficiently and address increasing care demands.

Across the stakeholders, few examples where digital technologies have been used in care settings were reported. Most commonly, digital technologies such as iPads seem to be used within EYCC settings. There was also an example of using digital translation software to engage Ukrainian asylum seekers.

There are, however, opportunities to use employee referral apps such as Care Friends, AI programmes to plan domiciliary routes, or video technologies for lone working solutions. There is also scope for digital technologies to reduce the demand for workers. Examples here include using technology to deliver remote services or to monitor and communicate with individuals receiving care and support and their families.

4. COULD DO: Collaborate with other providers and settings

Inefficiencies in the sector mean in some cases there may be enough staff, but care packages are too geographically distant, staff are unable to work at core hours, or there is a local shortage of care packages. Collaboration with other employers may help address these issues.

This would require radical changes to the ways providers work together. This could look like:

- **Form or join local pools of workers across organisations** – currently, one LA is considering setting up a not-for-profit recruitment agency that would run as a LA Trading Company. Profits would be put back into the care sector and/or used to support attraction and recruitment activities.
- **Provide free and/or discounted childcare to employees** – as many social care and child care workers have children, providing childcare for employees can be a huge draw for parents considering entering the sector. While this may be more practical in EYCC settings where qualified child care workers are in post, there is the potential to, for example, hire an EYCC worker to support staff in an adults' residential social care setting.
- **Use consistent job titles and descriptions** – inconsistency in job titles and roles makes it more difficult for experience to be portable. This also leads to wider confusion in the public sphere about what roles there are.

What system changes are needed?

Small wins in attraction are possible – but to fundamentally improve recruitment and attraction, wider system reform is needed.

To do so, an aligned approach across the sector with all partners is required. Six priorities for system change are suggested (Table 14).

Table 14: Priorities for system change.

System changes needed

1	A sector-wide approach to pay
2	Longer-term capital investment into WeCare Wales
3	Consideration of the needs of the sector in non-care policy directives
4	A redesign of benefits systems
5	A greater commitment to co-production of policies and approaches
6	Multi-sector collaboration to develop a future supply of workers

Cutting across these priorities is a need to better recognise and account for the complexity of the social care and child care sector.

This research has highlighted that policy interventions, though designed with good intentions, can inadvertently create new issues.

Although public bodies have a range of tools to understand impact, communicating trade-offs can be challenging. The interconnected nature of social care challenges can lead to political paralysis.

Supplementing existing impact assessment methodology and modelling with the care trilemma can help show the potential impact of policies in a format that decision makers with a range of leadership styles and backgrounds will understand.

Policy proposals can be stress-tested for their impact on each aspect – and rare policies that hold all three goals in balance, such as increasing pay, can be identified. Examples of how this could work in practice include:

- Plot recommendations from proposed or planned policy commitments against the tool. This could include discussions of the National Care Service in Wales or current policy commitments to extending child care support.

- Identifying long-term research questions for the whole sector. For example, policies that aim to reduce the cost of providing care through better use of technology may support all three goals of attractiveness, quality and status. In this way, the tool can be used as a first filter for deciding whether to pursue ideas in more detail.
- Making economic modelling more accessible. For example, in most public services if subsidies increase without also increasing supply, overall costs will go up, not down. The trilemma model helps to take this kind of economic thinking about care and put the same concept in more tangible terms.

1. A sector-wide uplift in pay

The importance of pay is a consistent theme in the literature, in this project and in most policy discussions. There needs to be a long-term, sustained commitment to improve pay in the sector.

As the care trilemma demonstrates, additional funding for the sector that is targeted at increasing pay would likely have a material impact on care recruitment and retention. Indeed, increasing pay is the only obvious solution that would not negatively impact attraction, status or quality of care.

Welsh Government officials are well aware of the underlying financial challenges in social care – and the basic relationship between this situation and recruitment. We suggest that Welsh Government continue to develop policy with this understanding. In particular:

- Findings from this research can inform the implementation of fair pay practices.
- Consideration into minimum requirements on pay and parity with NHS roles or pay bands must continue.
- Work must continue to be done to set consistent expectations and limits to local authorities regarding the cost of care packages.

2. Longer-term capital investment into WeCare Wales

WeCare Wales currently receives a relatively low amount of funding on a fairly short-term basis. Short-term and variable budgets make it difficult for Social Care Wales to develop long-term strategic plans. This means much of WeCare Wales's work has been reactive rather than proactive.

Additional and longer-term funding would allow WeCare Wales to expand its activities and build on its success, providing additional support for the sector and growing its attractiveness.

3. Consideration of the needs of the sector in non-care policy directives

Wider policy portfolios such as transport, housing, health, education, and environment affect the social care and child care sector.

For example, carbon reduction measures are often focused on transport and buildings, and require changes to vehicles, housing stock and energy systems. As domiciliary and residential care needs will continue to grow, it is important that the sector is offered additional capital support or protection from carbon reduction policies.

Housing policy – specifically the type and location of social housing – can also be tailored to better support the sector. Accessible housing in accessible locations is key to alleviating some of the challenges in domiciliary care. Provision of social housing, particularly aimed towards older people, would support people living independently and ease the planning of domiciliary work.

The Welsh Government and Senedd have a range of forums for this kind of cross-portfolio coordination, including parliamentary committees, Ministerial working groups, and cross-cutting legislation. These forums should continue to explore how care can be supported through other policy strategies.

4. A redesign of benefits systems

Addressing complications around the 16-hour mark for legacy benefits is important.

Although most benefits are UK-wide, some are within the Welsh Government's influence. In particular, council tax discounts and the Discretionary Assistance Fund are devolved. These should be designed to support entry into work and progression within work, particularly in avoiding sharp withdrawal rates or incentives to reduce hours.

There is also a lively ongoing debate around UK-wide devolution of wider benefits – for example, the ability of the Scottish Government to vary elements of Universal Credit – and how far other UK-wide benefits should be devolved. As this debate unfolds, the implications that any changes to benefits can have on recruitment and retention issues should be considered.

5. A greater commitment to co-production of policies and approaches

Ultimately, for wider change to be successful, the sector needs to support policies and approaches. There is currently a strong sense that government does not always listen to the needs of the sector.

For example, many EYCC settings fear that Flying Start will increase demand beyond their ability to provide services¹¹². Social care providers feel they are unfairly penalised for issues that are beyond their control, such as if planned care does not align with what was commissioned or what was actually delivered. This means services can be penalised if those accessing support no longer require it (i.e., if they go into hospital).

Co-designing approaches will ensure providers and employers feel they have a sense of ownership over any changes and that potential unintended consequences can be identified earlier on. It also contributes to wider Welsh Government aims.

6. Multi-sector collaboration to develop a future supply of workers

The previous suggestions would lead to short- and medium-term improvements in attraction and recruitment. However, there is also a need to ensure a constant supply of future employees. While increasing pay will be important here, it is unlikely to be enough.

Many of the suggestions for WeCare Wales are aimed to improve the future supply of potential care workers. However, there is also a role for the Welsh Government, the education sector, and careers services here. Options include:

- Better demonstrating the importance of social care in the curriculum of the citizenship agenda.
- Adding a range of care-related experiences to the Skills Challenge Certificate element of the Welsh Baccalaureate.
- Adapting the Young Person's Guarantee so that people aged 16–21 would have to take six months of national service in a sector including social care and child care.
- Further exploring the use of volunteering roles in the sector. This could also support in return-to-work initiatives.

8

Conclusion



Conclusion

This report has shown the complexity of the attraction and recruitment crisis facing the Welsh social care and child care sector.

The sector is made up of highly engaged providers, employers and those in supporting roles who are actively working to improve the image of the sector and attract people to it. Providers and employers have implemented a range of strategies to alleviate their challenges in local spaces and appreciate the support of WeCare Wales from a national and regional level.

However, providers and employers continue to struggle recruiting staff. Low pay, issues concerning professionalisation and regulation, external challenges (including competition from other sectors), workforce planning issues and increasing demand are challenges they cannot easily address.

The findings therefore demonstrate the importance of an approach that both supports existing attraction efforts and addresses the obstacles providers and employers face.

WeCare Wales is an important step to improve attraction, but without increased investment and political attention alongside active buy-in from the wider sector, the crisis is unlikely to improve.

It is recommended that systemic change in the social care and child care sector as well as significant and long-term capital investment are required. Adopting the care trilemma as a decision-making tool is important to bring attention to the potential consequences of changes. There is also a need for buy-in and collaboration across the sector.

Appendices



Appendices

Appendix I: Method and approach

Project aims

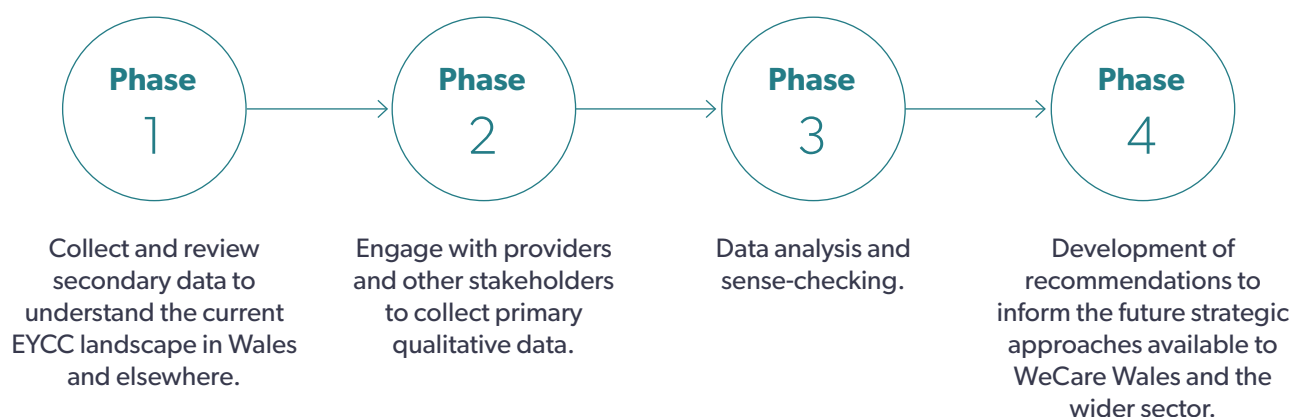
Two overarching aims have driven the project:

1. What is the current landscape of recruitment, attraction and retention in the social care and child care sector in Wales and what is the role of WeCare Wales within this landscape?
2. How could WeCare Wales better understand and support recruitment, attraction and retention in the social care and child care sector moving forwards?

Project approach

Urban Foresight undertook a series of desk-based and qualitative data collection methods between January and March 2023.

The project was structured across four key phases:



Data collection methods

A series of techniques were used to collect primary and secondary data. Data collection took place from December 2022-February 2023.

Reviews of secondary data

- Literature review of peer reviewed and grey research relating to social care and child care recruitment practices and policies in Wales and the UK, as well as a review of data already collected by Social Care Wales.
- Best practice review to explore the broader landscape of social care and child care recruitment beyond Wales.

- Review of attraction and recruitment approaches beyond the sector, focusing on public services and the foundational economy.
- WeCare Wales website data analytics review to understand who is using the website and how.

Collection of primary qualitative data from stakeholders

Primary data was mostly collected via online interviews and engagement at online forums. In three cases, providers gave responses via email at their own request.

Data was collected from:

- 52 providers. Providers included national and local providers, local authorities, private companies and third sector organisations working across Wales. Those involved in the provision of general and specialist social care were engaged, including representatives from each of the three sub-sectors – social care, EYCC, and social work.
- 13 individuals representing five services involved in supporting roles in the sector. This includes a number of people working at WeCare Wales and Social Care Wales, other organisations that support care workforces, as well as those working as regional connectors.

This report uses the term ‘stakeholders’ to refer to the entire cohort of interviewees. Where something applies to just providers or those in supporting roles, this will be made clear.

Data analysis

To understand the key challenges and opportunities facing the sector, an extensive strengths, weaknesses, opportunities, and threats (SWOT) exercise was undertaken for social care, social work, EYCC and the role of WeCare Wales. This SWOT exercise involved three levels of analysis. First, all notes from the desk-based research and stakeholder engagement were coded. This generated over 48 pages of evidence. Second, the codes were categorised into broad thematic areas, such as ‘regulation’ or ‘application process’. This stage generated 39 broad thematic areas or codes. Finally, statements for each thematic code were developed based on the evidence for each code. These statements are intended to demonstrate the overarching barriers and opportunities faced by the sector.

Key findings and recommendations were presented back to the social care and child care sector across two sense-checking workshops held in March 2023. The first workshop included seven stakeholders from Social Care Wales, and the second had 29 stakeholders from across the wider sector.

Appendix II: Registration and training requirements for social work, social care and EYCC roles

Social workers

All social workers must register with Social Care Wales. This costs £80 for initial and renewal registration.

To register, a DBS and evidence of a social work degree (either graduate or postgraduate) must be provided.

Degree courses must be the equivalent of at least three years and cover topics such as law and policy, and social work theory¹¹³.

Social workers are expected to increase their knowledge and skills after they qualify through CPD. Example courses include an Approved Mental Health Professional (AMHP), Team Manager Development, and Middle Manager Development¹¹⁴.

Social carers

Registration with Social Care Wales is mandatory for social carers. It costs £30 for initial and renewal registration.

Registration requires a DBS and evidence of one of the following two options:

- Registration by Qualification – level 2 or 3 in health and social care (Diploma, QCF, NVQ or equivalent) or the City and Guilds Level 2 Health and Social Care: Core are accepted.
- Registration by employer assessment – Employers can confirm workers' application by assessing them against a list of areas. Workers must then complete one of the listed qualifications within the first 3-year period of registration.

Domiciliary workers who registered by experience before October 2022 will not require a qualification to re-register¹¹⁵.

Short training courses such as administering medication, first aid, food hygiene, how to move people safely, awareness of dementia, caring for children, and supporting activity provision in social care are available.

EYCC workers

EYCC workers are not required to register as individuals.

However, as services are subject to quotas of unqualified vs qualified staff, in practice, level 2 or 3 qualifications are generally desirable.

There are also university degrees available.

Appendix III: Key Stakeholders in the sector

Key stakeholders in the social care and child care sector are listed alphabetically in Table 15.

The third column includes the RACI rating for each organisation in terms of their responsibilities for workforce development. This identifies organisations that are responsible or accountable, as well as organisations that should be consulted or informed.

Table 15: Key stakeholders in the sector

Actor	Brief overview	RACI rating
Academi Wales	A membership-based organisation open to those working in public service organisations or registered charities operating in Wales. It provides access to learning resources, news, and courses to develop those working in public services in Wales (particularly targeted towards leadership and management development).	Informed
ADSS Cymru	The Association of Directors of Social Services Cymru is the voice of professional and strategic leadership of social care services in Wales. It represents the collective view of all 22 local authorities' social services departments across Wales and delivers positive outcomes for communities by influencing and informing legislation, policies and practices in the social care sector.	Accountable
All-Wales Heads of Adult Services (AWASH)	A group comprised of the heads of adult services from all local authorities. It meets on a quarterly basis to discuss issues impacting on the effective delivery of services for adults, particularly older adults.	Consulted
All-Wales Heads of Children's Services (AWHoCS)	A group comprised of the heads of children's services from all local authorities that meets on a quarterly basis to discuss issues impacting the effective delivery of services for children.	Consulted
Alzheimer's Society Cymru	A third sector organisation that raises awareness and provides resources about dementia in Wales (including providing resources in Welsh).	Informed
BASW	The British Association of Social Workers (BASW) is the UK's professional membership organisation and independent voice for social work.	Consulted
Care Forum Wales	An organisation representing over 450 care homes, nursing homes and other independent health and social care providers across Wales. It operates to support members to provide high quality social care and dignity for all by sharing best practice, resources, influencing policy makers, providing training and updating members on legislation.	Consulted
Care Inspectorate Wales	Registers, inspects and takes action to improve the quality and safety of services in Wales.	Accountable

Actor	Brief overview	RACI rating
Childcare Wales Learning and Working Mutually (CWLWM)	A consortium of five childcare and play partners – Mudiad Meithrin, Early Years Wales, Clybiau Plant Cymru Kids Clubs, National day Nurseries Association and PACEY – delivering a bilingual integrated service to ensure best possible outcomes for children and families across Wales.	Accountable
Clybiau Plant Cymru Kids Clubs	Through its out of school childcare club network, Clybiau Plant Cymru Kids' Clubs promotes, develops, and supports communities in Wales.	Consulted
Digital Health Wales	A community dedicated to digital health technologies that informs about events, news, projects and provides information on digital health.	Informed
Early Years Wales	An umbrella organisation supporting a range of comprehensive membership services to the early years sector in Wales. Aims to enhance the development and education of pre-school children in Wales by encouraging parents to understand and provide for their needs through high quality pre-school provision and childcare.	Consulted
Employers and providers	Organisations offering social care and early years services that employ workers in these areas. They include private and third sector organisations and LAs.	Accountable
Estyn	Inspects both maintained and non-maintained EYCC settings that offer the Foundation Phase curriculum. CIW and Estyn are piloting joint inspections.	Accountable
Health and Social Care Research Wales	A networked organisation that is supported by the Welsh Government and operates to bring a range of partners across the NHS, local, authorities, universities, research institutes and third sector together in Wales. Acts to promote research into diseases, treatments, services and outcomes to create innovation and improvement in health and social care.	Informed
Health Education Improvement Wales (HEIW)	A dedicated authority working to transform the workforce for a healthier Wales. HEIW is a Special Health Authority in NHS Wales and sits alongside Health Boards and Trusts. It takes a leading role in education, training, development and shaping of the healthcare workforce to ensure high-quality care.	Consulted
Home Care Association	The only membership body in the UK dedicated to supporting homecare providers. Aiming to ensure that homecare is valued so that everyone can live well at home and flourish within their communities.	Accountable
Improvement Cymru	The improvement service for NHS Wales. Aims to support the creation of the best quality health and care system in Wales.	Accountable
Local authorities	Local authorities are required to ensure there is sufficient childcare in their area through providing workforce development and assistance to the local childcare sector. They both commission and provide care services.	Responsible

Actor	Brief overview	RACI rating
Local Government Association (LGA)	The LGA is the national membership body for local authorities. Its core membership is made up of 317 English councils and the 22 Welsh councils through the Welsh Local Government Association.	Accountable
Measuring the Mountain	Third sector organisation funded by the Welsh Government. Measuring the Mountain gathered and analysed people’s experiences of using care and support services, and of being an unpaid carer in Wales to better understand day to day experiences and lead to key recommendations.	Informed
Ministerial Advisory Group for Carers	Advises Welsh Government on how to improve the lives of carers.	Consulted
Mudiad Meithrin	Mudiad Meithrin, a voluntary organisation that provides Welsh-medium early years care and education.	Consulted
National Adoption Service	Launched in November 2014, is an innovative collaborative for the provision of adoption services. It brought together Welsh LA adoption services into a 3 tier structure which includes partnerships at all levels with Voluntary Adoption Agencies based in Wales, Health and Education Services as well as others.	Consulted
National Commissioning Board Wales	Part of the Welsh Local Government Association established to improve the quality of commissioning in Wales and develop effective practice in relation to integrated commissioning between local authorities and local health boards. It comprises of representatives from LA, NHS Regional Leads, National provider Forum, Third Sector (WCVA), Wales Procurement Officers, Social Care Wales, CIW, WLGA and Welsh Government.	Accountable
National Day Nurseries Association	In Wales, NDNA Cymru is a membership association that provides support, information, advice, guidance, and training to employees working in childcare, early years, and nurseries.	Consulted
National Mental Health Partnership Board	Aims to ensure that mental health services in Wales improve.	Informed
Professional association of childcare and early years (PACEY)	It is the mission of Pacey Cymru to provide support to people who work with and care for children in Wales. Assisting members and childcare workers in Wales to provide the highest standard of childcare is one of Pacey Cymru's top priorities.	Accountable
Public Health Wales	A government agency working to protect and improve health and wellbeing in Wales and reduce health inequalities.	Accountable
Regional Partnership Boards	Seven statutory regional partnerships that work closely together to drive the strategic regional delivery of social services in close collaboration with health.	Responsible

Actor	Brief overview	RACI rating
Registered managers	Individuals in charge of registered services.	Consulted
Skills for Care and Development	The sector skills council for people working in social work and social care for adults in the UK. It is comprised of 4 partners – Social Care Wales, Skills for Care, Northern Ireland Social Care Council (NISCC) and Scottish Social Services Council (SSSC).	Consulted
Social Care Wales	Providing national leadership and expertise in social care and early years. Leading on developing and regulating the social care workforce, service improvement, data and research to improve care and support.	Responsible
Social Workers Union	SWU is the only UK trade union for all social workers and is run by qualified and registered social workers. SWU works alongside BASW to protect social work professionals speaking as social workers for social workers.	Consulted
The registered workforce	Workers operating within roles that provide practical support to help people cope with the day-to-day business of living.	Consulted
Trade Unions	Unions include TUC, unions unite, unison and GMB, which are largest unions representing social care staff. Unite, Unison and the GMB are now the most commonly recognised trade unions in the UK.	Consulted
UK Healthcare Regulators	This includes regulators in health, safety and care nationally including the Health and Safety Executive, the General Medical Council, the Care Quality Commission, and the Medicines and Healthcare Products Regulatory Agency (MHRA).	Accountable/ Consulted
Universities and learning providers	Institutions that educate individuals and may provide qualifications to train potential social care workers.	Informed
Wales Council for Voluntary Action (WCVA)	The national membership organisation for the third sector and volunteering in Wales that aims to support the work of the third sector and volunteering across Wales.	Consulted
Welsh Government	The devolved government for Wales, responsible for education, health, local government, social services and other key areas of public life.	Responsible
Welsh Local Government Association (WLGA)	A cross party organisation that represents the interests of local government, promotes better local government and supports LAs.	Accountable

Appendix IV: Key policies

Key policies that affect the social care and child care sector are listed in alphabetical order in Table 16.

Table 16: Key policies

A healthier Wales: long term plan for health and social care (2018, Welsh Government)

Sets out a long-term vision for the future of health and social care. The overarching goal is to enable the Welsh population to lead happy, active, long and independent lives. Key themes include a whole system approach, prevention, collaborative working, independent living, and technological development. The need for new, more integrated models of working within health and social care is recognised.

A Healthier Wales: our workforce strategy for health and social care (2020, Social Care Wales)

Outlines a vision to create an engaged, motivated and healthy workforce in Wales. This will require sharing of good practice and resources, networking, peer support groups, learning and development, collecting data and intelligence, and launching a framework for health and wellbeing. Attracting and recruiting more workers, and upskilling the workforce is recognised as important.

Age friendly Wales: our strategy for an ageing society (2021, Welsh Government)

Establishes a vision of an age friendly Wales that supports people of all ages to both live and age well so that the ageing process is a more positive experience, and the older population are able to continue to participate fully in society. Ensuring that services build individual capacity and independence is a key part of this.

Childcare, play and early years workforce plan (2017, Welsh Government)

Outlines the Welsh Government's aim to create a skilled childcare and play workforce, and ensure that this sector is regarded as a desirable career pathway that contributes towards supporting child development. Three key themes include 'attracting high quality recruits, raising standards and skills, and investing in building capacity and capability'.

Children and young people's plan (2022, Welsh Government)

Sets out the ambition for Wales 'to be a wonderful place to grow up, live and to work, now and in the future'. Priorities include improving early years services, offering these services to more children and families, offering more Welsh medium early years services, supporting children across multiple settings including schools and the home, helping parents and carers, and prioritising play-based learning.

Cymraeg 2050: Welsh language strategy (2017, Welsh Government)

Sets out the ambition of achieving one million Welsh speakers by 2050 and doubling the use of the Welsh language, particularly among children. Recruiting more Welsh speakers in the health sector is a priority.

Digital health and social care strategy (2015, Welsh Government)

Outlines how technology and information will be used to improve the health and well-being of the Welsh population through empowering staff, service users, patients and carers with readily available information, data and evidence.

Early years outcomes: framework (2015, Welsh Government)

A framework to allow the Welsh Government to identify the impact of policies and programmes in early years and childcare.

Improving health and social care (COVID-19 looking forward) (2021, Welsh Government)

Outlines the impact of COVID-19 on the health and social care sector and how best it can recover utilising the lessons identified from the pandemic. Key priorities include building resilience in the system, developing the workforce, reducing treatment delays, improving mental health and tackling inequalities.

Improving Outcomes for Children: 2 year plan (2019, Welsh Government)

A plan to improve services for children and families requiring support. Goals include reducing the need for children to enter care, improving outcomes for those in care, and supporting care leavers.

More than just Words – 5 Year Plan 2022-2027 (2022, Welsh Government)

A framework that sets out how the Welsh language offer will be improved across services in Wales, specifically in health and social care settings.

National clinical framework: a learning health and care system (2021, Welsh Government)

A framework to guide the health and care system in Wales to transform to become fit for purpose. Strategies are outlined to allow the NHS to transform and modernise clinical services. Key areas of focus include workforce development, community services and digital health services.

Programme for government 2021 to 2026: Well-being statement (2021, Welsh Government)

Sets out 10 well-being objectives that will be used to guide the Welsh Government's efforts in meeting the seven long-term well-being goals in Wales. This includes developing services for vulnerable people.

Prosperity for All: economic action plan (2017, Welsh Government)

Outlines how Wales aims to grow in a way that is inclusive, promotes well-being and spreads opportunity. Five key priority areas are identified in terms of well-being that includes early years, housing, social care, mental health and skills and employability.

Regulation and Inspection of Social Care (Wales) Act (2016, Welsh Government)

This legislation aims to centralise quality and service improvement within the task of regulation to strengthen protection for those in need. It puts in place a regulatory system that aligns with the Social Services and Well-being (Wales) Act 2014.

Strategy for an ageing society: delivery plan (2022, Welsh Government)

This plan is linked to the Age friendly Wales strategy and sets out specific actions to deliver the aims identified in the strategy. A key aspect of this is improving access to core services, and reviewing social care funding.

Strategy for unpaid carers (2021, Welsh Government)

This shows a commitment to improving the recognition and support available for unpaid carers in Wales.

The Health and Social Care (Quality and Engagement) (Wales) Act: summary (2019, Welsh Government)

This legislation reinforces the requirement of the NHS to deliver quality services to patients across Wales.

The Social Services and Well Being (Wales) Act (2014, Welsh Government)

The act came into force in 2016 and provides a legal framework to improve the well-being of people in need of care and support, carers who need support and to transform Welsh social services. It is built on the themes of a person-centred approach, prevention and early intervention, well-being and co-production.

The Well-being of Future Generations Act (2015, Welsh Government)

The act aims to improve the social, economic, environmental and cultural well-being of Wales by setting out seven wellbeing goals for public bodies in Wales.

The Welsh Government Annual Report (2022, Welsh Government)

Sets out what progress has been made towards the objectives outlined in the Well-being of Future Generations Act (2015).

Appendix V: Employment rate by local authority (2020)

Local Authority	Employment rate
Isle of Anglesey	72.9
Blaenau Gwent	74.6
Bridgend	72.9
Caerphilly Borough	71.8
Cardiff	71.6
Carmarthenshire	71.4
Ceredigion	72.8
Conwy Borough	77.7
Denbighshire	70.6
Flintshire	78.7
Gwynedd	76.7
Merthyr Tydfil	71.7
Monmouthshire	77.7
Neath Port Talbot	70
Newport	69.7
Pembrokeshire	73.8
Powys	75.7
Rhondda Cynon Taf	74.9
Swansea	74.4
Torfaen	71.4
Vale of Glamorgan	78.2

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