
Solihull Adult Social Care Workforce Strategy 2022 - 2027

Great Care, Great Careers



Solihull
METROPOLITAN
BOROUGH COUNCIL

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Foreword

The Adult Social Care workforce is the backbone of the care sector; crucial to delivering high-quality care to those who need it. Ensuring that there are appropriate numbers of staff who have the skills and compassion to care for the people that they support is central to the work that we do.

During the COVID pandemic, care staff have been at the forefront of the most significant health crisis in living memory. Throughout the pandemic, care workers across Solihull continued to provide care in a dedicated and professional manner, despite the many challenges, including working with infection control measures and being a vital source of comfort for those unable to spend time in the company of their loved ones.

In Solihull, we are proud of our social care workforce and recognise the importance of ensuring that every worker feels valued and supported. With the ever-changing nature of Adult Social Care and the increasing demand for services, Solihull Council seeks to ensure that the social care workforce is appropriately equipped with the knowledge, skills and resources needed to be able to respond to these changes. This Strategy sets out the steps we will be taking to work in partnership with care providers to achieve a workforce sufficient in numbers and skills to be the vital source of care and support in the years ahead.



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Executive Summary

The Adult Social Care workforce is central to providing care and support to the people who need it. The COVID pandemic threw several significant challenges at a care sector that was already showing signs of struggle and our engagement with Solihull care providers has confirmed this.

Independent care providers have told us that they often find recruitment challenging. The process is constant for them and takes a toll on their time and resources. Attracting jobseekers is challenging as they show reluctance to take on care roles due to the nature of the work and relative low pay. In addition, many applicants do not drive and so are inappropriate for a care role where staff need to be mobile in visiting people's homes to provide support. Our providers also tell us that often, care staff do not feel their roles are valued, particularly in comparison to the NHS workforce, and people do not see the care sector as a place where they can develop a career. Care workers are hard to retain if they see limited prospects for progression, being valued or receiving a competitive income.

Whilst we have supported providers both pre-COVID and throughout the pandemic, it is clear that the social care workforce remains under immense pressure. As such, we have developed a five-year Workforce Strategy that focuses on three identified priority areas developed in partnership with the sector: **Being Valued**, **Transport Solutions** and **Recruitment Support**. We have developed a vision for our social care workforce ambitions, and the actions we will take to achieve this vision.

Our Vision

Our vision for the social care workforce in Solihull follows the three priorities of **Being Valued**, **Transport Solutions** and **Recruitment Support** and ensures that:

- › The social care workforce feels valued in their role;
- › Care work is seen as a worthwhile and rewarding career, in which people can develop and progress, and potential workers understand the personal qualities necessary;
- › Pay levels are appropriate to recruit and retain quality staff;
- › Care services are operating with safe and sustainable staffing levels to ensure quality and consistency of care for residents;
- › There is increased staff retention in the sector as people choose to stay and develop their careers in care;
- › Providers feel supported by the local authority to recruit and develop a sustainable and highly skilled workforce;
- › People at a socio-economic disadvantage are given opportunities to enter the care sector and supported to develop;
- › The mobile care workforce has access to sustainable and environmentally friendly travel options.

How we will achieve our vision

In this section we will detail the practical actions we will take to deliver the vision and begin to address the identified challenges.

This strategy has been developed in partnership and we will continue to work with all our social care provider partners in the Borough and with colleagues from across the health and social care sector and beyond, including:

- › Skills and Employment team
- › Inclusive Growth team
- › Highways team
- › Sustainable Travel team
- › Business Intelligence team
- › NHS – Trusts across the region and NHS England / Improvement
- › Solihull College
- › Solihull Care Association
- › West Midlands Care Association
- › Birmingham City Council
- › Solihull Community Housing
- › Department of Work and Pensions (job centres)
- › Skills for Care
- › West Midlands Combined Authority
- › Transport for West Midlands
- › National Express

We will undertake work in the following areas, starting initially with small pilots, collecting clear data on which projects are successful before widening out across the borough. This will be reviewed annually and refreshed as needed.

Five year action plan

		Year 1	Year 2	Year 3	Year 4	Year 5
Being Valued	Professionalisation	Training offer	Outcomes from White Paper	Ongoing professionalisation of the care workforce		
	Rewards and Incentives	Value offer including rewards, discounts, amenities	Expansion of offer to look at childcare options	Evaluation and development of value offer		
	Early career development	Career and development signposting on website	Developing placement and employment pathway from education			
	Pay	Annually ensuring sustainable fee rates to attract and retain skilled workforce				
	Communications campaign	Begin campaign to show how we value care workers	Evaluation and further development			
Transport Solutions	Driving lessons	Identify and establish pilot process for job-seekers	Pilot with Job Centre	Evaluation and further development		
	Electric mopeds	Small pilot for 2 providers		Evaluation and further roll out if pilot successful		
	Demand Response Transport	Scoping with transport partners	Development and pilot	Evaluation and further roll out if pilot successful		
	Electric bikes	Further pilot with clear parameters	Evaluation and further roll out if successful and if demand is there			
	Electric cars	Small-scale pilot	Offer wider support for providers to switch to electric pool cars			
Recruitment Support	Dedicated Project Support	Establish dedicated project support to implement action plan				
	Care Friends App	Explore funding options for providers				
	Pathways into social care - Solihull College, Solihull Community Housing, job centres	Develop pathways and pilot schemes to attract more people into the care sector		Evaluation, development and further roll out		
	Pre-employment training	Designing, piloting and procuring (work with WMCA)		Implementing	Evaluation and further development if needed	

What we've done so far

Pre-COVID

Prior to the pandemic the Council offered support to providers through a range of initiatives, training, and networking events. Meetings were held early in the day to suit providers' schedules. At these business breakfast meetings, speakers were invited to the sessions to give information, share ideas or co-ordinate approaches. This also gave providers the opportunity to network with each other.

We offered registration and support to complete Health and Social Care Diplomas and supported providers to claim funding for this. Staff were able to obtain a qualification required in Health and Social Care and managers were able to achieve a level 5 qualification.

We also held our first Provider Conference which was a two-day event bringing together providers from all types of care settings to interact, attend information sessions, listen to guest speakers, and contribute their ideas for development.

Through our Workforce Development team, we worked with providers to assess their workforce training needs and provide or signpost to learning and development opportunities.

Solihull Council has recognised the need to ensure pay rates are sustainable for care provision and has built above inflation increases into its Medium Term Financial Strategy (MTFS) in recent years in order to support providers to improve worker conditions. Fee modelling takes into account not just inflationary pressures on wages, but also demand pressures, travel time, and training time and is conducted annually with a three year forward view. In doing this, budgetary planning can help ensure greater sustainability of fee rates, and local care providers can see that the Council understands the link between fees and ensuring stability and quality care in the local market. Financial planning reflects a realistic understanding of the fees necessary in order to meet people's needs.

During the pandemic

As the pandemic began, the Council understood the impact on the Adult Social Care sector and prioritised efforts to support providers. We began a seven-day-a-week on call system to respond to queries from providers. Support was offered to ensure providers had enough staff to operate safely: through running recruitment campaigns, supporting with recruitment administration such as DBS checks, and by sharing local authority staff when needed in a crisis.

Workforce development support was provided in the form of training. Providers were supported to access a range of training courses, including the Care Certificate induction, moving and handling, and more specialist targeted training such as Infection Prevention and Control and use of Personal Protective Equipment (PPE). A newsletter was created to promote training opportunities with managers. We also trained staff to train others within their organisation. This benefitted providers by both reducing future training costs and reducing any infection risk from external trainers. To maintain learning and development throughout the pandemic, we supported digital training provision through offering licences for an online learning platform. The impact of these interventions meant that providers were able to successfully train and induct new members of staff during the pandemic in a cost-effective way, despite the challenges and new ways of working required.

During the pandemic the Council distributed the £435,000 Workforce Capacity Fund as well as just under £5.5 million of Infection Control and Testing grants. We worked with care providers to ensure that funding was spent to ensure the greatest impact on improving their workforce capacity to enable them to provide safe and resilient care.

To provide emergency funds for those facing hardship as a result of COVID, the Council worked with the Care Workers' Charity to provide a designated fund to the value of £129,000 for Solihull's care workforce where employment and benefit entitlements did not meet unexpected personal costs associated with the pandemic. The funds have supported nearly 200 workers to date.

The Council also distributed £1.677 million of Recruitment and Retention fund for the social care workforce, which included a £50 gift voucher for staff and a grant allocation to support key workforce issues.

Background

Adult Social Care and its workforce in Solihull

Adult Social Care is the delivery of a range of activities to support people who have care and support needs, including people living with a disability, a mental health condition, or frailty. These activities range from personal care delivered within a person's own home or within a residential setting like a care home, to support to engage with the wider community and participate in ordinary activities.

Care and support are delivered by a range of organisations and providers including the Local Authority, private companies, individual personal assistants as well as independent and community providers and many others. Whilst there is a wide variety of types of providers who deliver Adult Social Care services, most are delivered by private organisations.

Our responsibilities

As a local authority, we have a responsibility under the Care Act 2014 to all the social care workforce in Solihull. The Council's task is to consider how to help foster, enhance and appropriately incentivise this vital workforce to ensure effective, high-quality services, whether employed by private, voluntary or independent organisations, or the Council itself. We must ensure that providers are paying staff adequately enough to attract and retain a quality workforce, pay at least in line with national minimum wage legislation as well as encourage the training and development of care workers to at least the standard of the Care Certificate.

We also have a responsibility to our residents to ensure that there is a sufficient range of high-quality care provision for people to choose from, offered by a variety of care providers, and that care workers are equipped to deliver this support when and where needed.

Our Workforce Strategy

We recognise that there are workforce challenges within the care sector, some of which are complex, long-standing, and structural. This strategy aims to focus our efforts and intentions on supporting a more sustainable care workforce over the next five years. This strategy focuses exclusively on those care staff employed by the independent care sector in a wide range of roles but does not include the staff employed directly by Solihull Council. A separate plan is in place for that workforce.

This strategy will give an overview of the current picture including the size and structure of our workforce and the challenges identified, as well as briefly outlining what may be required in Solihull in the future. It will then set out our vision for the next five years followed by a plan outlining the actions that we will take to achieve this.

The workforce data used in this strategy comes from the national skills organisation, Skills for Care, as well as from engagement that we have undertaken with care providers in Solihull.

Skills for Care collects and publishes care workforce data from across the country and produces reports for each local authority area annually. The Skills for Care data is based on information from local providers which is then scaled-up to give a picture of the whole sector. While the Skills for Care data contains some estimates rather than exact figures, it is the most accurate source of data of its kind available for social care and is regarded as a trusted source.

The social care market in Solihull

Solihull has 115 social care providers who are registered with the Care Quality Commission (CQC). These providers deliver a range of services but the two most common types of care in Solihull are care homes, where individuals are cared for in a residential setting, and care at home, where individuals are cared for in their own home (sometimes called domiciliary care). These providers all deliver services to both people whose care is funded by the Council and to those who pay for their own care, often referred to as self-funders.

Individuals funded by the Council sometimes choose to arrange their own care and support and are given funds by the Council through a direct payment to source and pay for this care. Individuals employed by those who receive a direct payment to help them with daily tasks are referred to as personal assistants. According to Skills for Care, in Solihull there are approximately 475 employees working for direct payment recipients.

Today, the majority of Adult Social Care services in Solihull are provided by private companies. They are the biggest employers in the sector, with 85% of the care workforce being employed by independent providers.

The current picture of our workforce

In Solihull we have over 6,000 care workers who support people in our borough to live as independently as possible, with over 85% of those workers employed by the independent sector.

The social care sector and its workforce have been, and continue to be, under immense strain with staff 'depleted' and 'exhausted'¹, in part due to the pandemic, but many of the underlying problems existed before COVID.

History and issues pre-COVID

There are long-standing challenges in social care recruitment nationally, and this is reflected locally in Solihull. These have centred around pay and contract conditions which have had an impact on vacancy and turnover rates across the country. In 2020, the average wage nationally for care workers was £8.50 which was only 29p above National Living Wage. Further, around a quarter of staff nationally were employed on zero-hour contracts, where work is not always guaranteed. In addition to this, the nature of providing personal care and the often-unsociable hours has led to challenges in providers recruiting staff. The national vacancy rate was 8.6% before COVID, although historically Solihull was in a relatively good position both regionally and nationally.

2020 turnover and zero-hour contract rates in the Solihull care sector compared to West Midlands and England

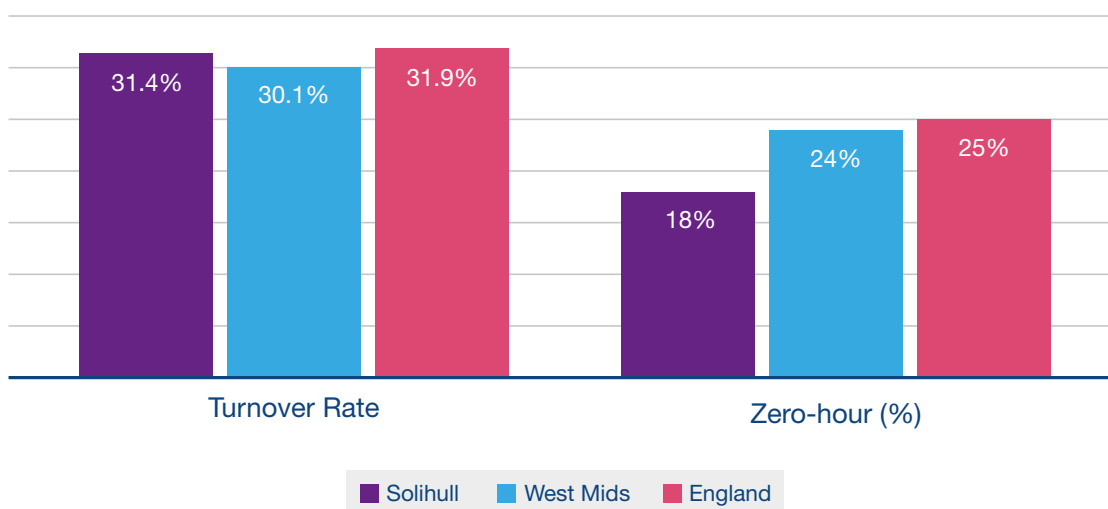


Figure 1. Data taken from Skills for Care 2021 Report

¹ Care Quality Commission report 'State of Care 2020/21'.

Pandemic effect

The COVID pandemic has had a profound impact on the social care workforce, which is still being felt. The long-term impact may be seen for years to come. In Solihull we can see the effect of the pandemic in the differences between Skills for Care data from March 2019 – March 2020² as follows:

Size and Structure

- › Estimated 6,200 jobs up from 5,900 across all sectors, including Local Authority employees.
- › Slight decrease in percentage of people employed through a direct payment as a personal assistant from 9% to 7%.
- › Now 115 CQC-regulated services in the borough up from 108, all 7 new services are non-residential.

Recruitment and retention

- › Decrease in staff turnover rate in Solihull by 4.5% from 31.4% to 26.9% now below the national average (29.5% was 31.9%).
- › More people who leave care jobs have been leaving the care sector from 67% to 62%.
- › Increase in the length of experience of the Solihull workforce, with average years worked in the sector up from 7.8 to 8.6 and 80% of the workforce having worked in the sector for 3 or more years (up from 71%).

Employment information

- › Increase in total number of jobs in care within the independent sector, from 5,400 to 5,800, of whom care workers have increased to 4,200 from 3,900.
- › Average number of sickness days taken by employees has increased from 7.4 to 13.7 resulting in 35,000 extra lost days.
- › Slight increases in the number of workers on zero-hour contracts from 18% to 20%.

Workforce demographics

- › Slight increase in the number of under 25s in workforce from 8% to 10%.
- › 1,600 workers now approaching retirement age in next 10 years up from 1,500.

Pay

- › Slight increases in wages amongst lower paid earners reflecting an increase in the National Living Wage.
- › Registered nurses' pay in the care sector has grown by £2,700 from £31,300 to £34,000 slightly above average increases at both regional and national levels.

Qualifications and training

- › Slight decline in the number of workers holding a relevant qualification (from 56% to 53%) mirrored by similar declines regionally and across England.

² Skills for Care 'Solihull Summary 2021'

Vacancies and turnover

Vacancy rates were another area significantly impacted by COVID. At the start of the pandemic, the number of vacancies in the care sector dropped as people remained in their jobs. This coincided with many other sectors being forced to close due to lockdowns. As there was a continuing need for social care staff, many took up jobs in social care as an alternative to furlough or where they were not eligible for that scheme. As the economy began to recover and hospitality and tourism sectors re-opened, there was a rise in vacancies in social care to above pre-pandemic levels.

Vacancy rates in Care Homes and Domiciliary Care from pre-COVID to November 2021

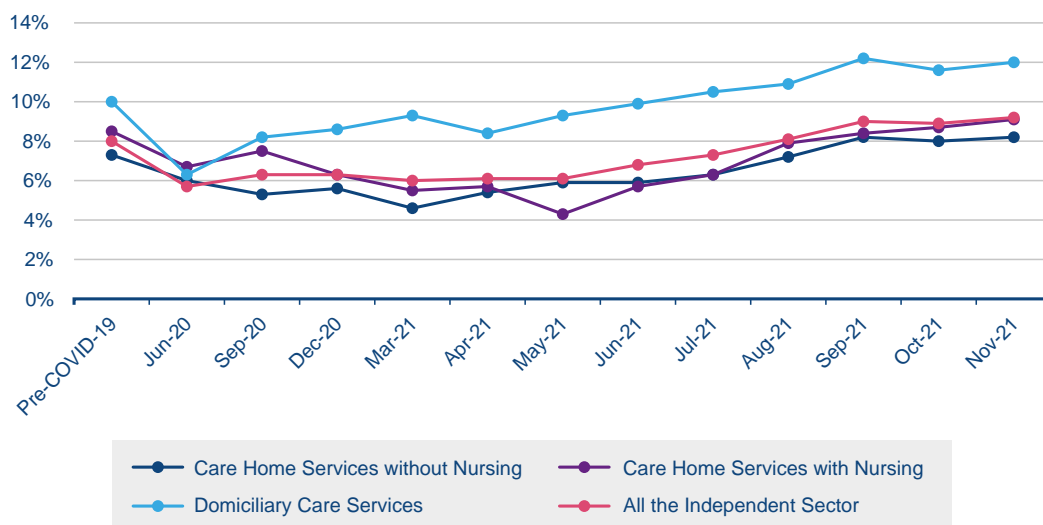


Figure 2. Data taken from Skills for Care, correct as of December 2021.

Turnover rate in types of care in Solihull

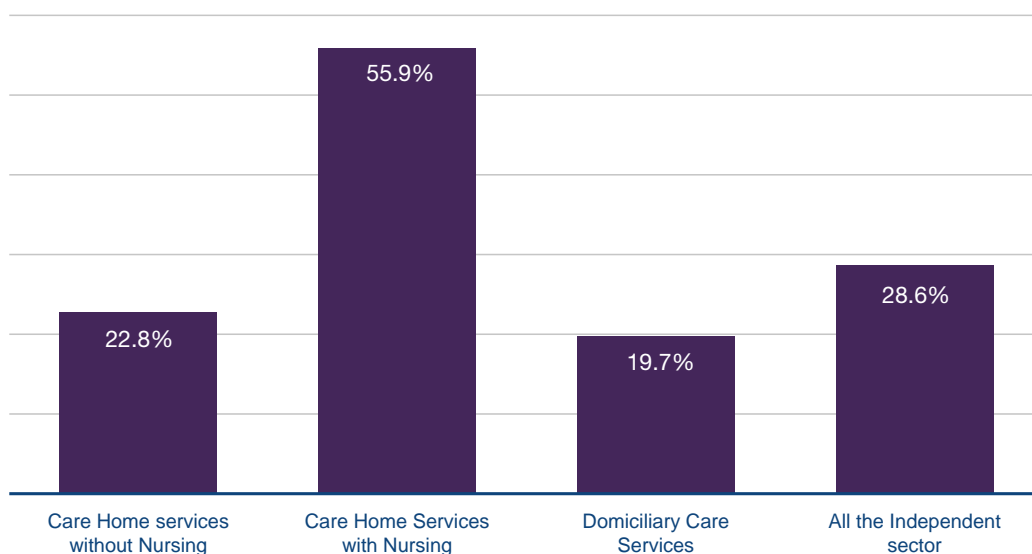


Figure 3. Data taken from Skills for Care 2021 Solihull Report

Vacancy, turnover and zero-hour contracts rates in the independent sector for Solihull, West Midlands and England

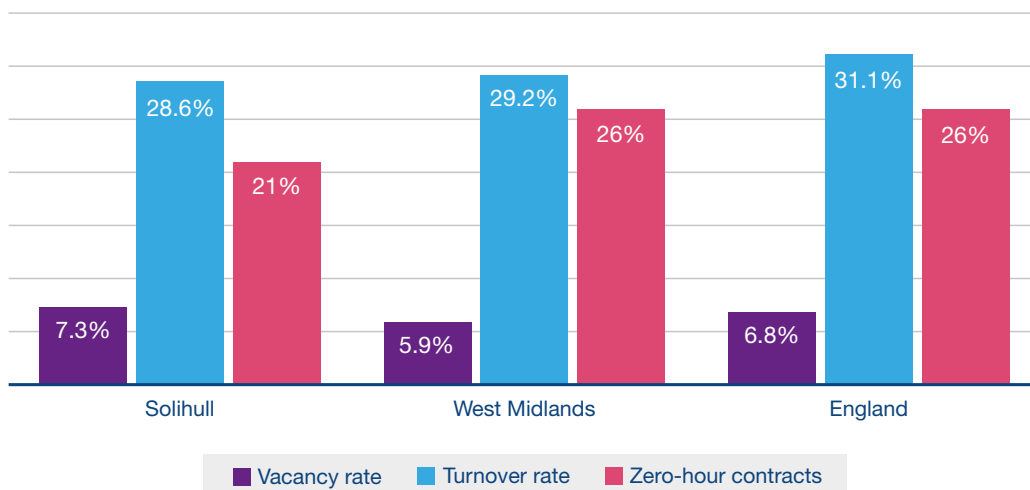


Figure 4. Data taken from Skills for Care 2021 Report

According to Skills for Care’s latest data, Solihull has a vacancy rate of 7.3% in the independent sector, equating to 375 vacant roles. This is higher than both the West Midlands rate of 5.9% and the rate in England of 6.8%. The turnover rate in the independent sector in Solihull is also high at 28.6% showing difficulty in providers retaining staff, however this is below both the regional (29.2%) and national (31.1%) rates. Finally, whilst 21% of workers in the independent sector were employed on zero-hours contracts in Solihull, this is lower than the regional and national rates both of 26%.

There appears to be differences between vacancy and turnover levels experienced by residential and care at home providers. Care homes have a lower vacancy rate than nursing homes and care at home providers but a slightly higher turnover rate than the latter. In addition, care homes with nursing have a higher rate of vacancy and turnover than both standard care homes and care at home providers.

There is also a national shortage of nurses which is reflected locally with a pre-pandemic vacancy level of 12% in Solihull. Current local data is not available from Skills for Care, but nationally, as at January 2022 they are reporting a 3.4% increase in vacancies from March 2021, so it is reasonable to assume the above rates are currently higher.

The care sector has faced significant challenge with the introduction of mandatory COVID vaccinations for those working in care homes, with staff legally unable to be deployed unless they have had both doses of the COVID vaccine. Locally, there has been much work and collaboration between providers, the Council, and partners to encourage staff to take up the vaccine. For care homes, at the deadline of 11 November 2021, less than 2% of staff remained unvaccinated.

Care at home providers in the borough, however, are reporting serious difficulties in recruiting and retaining staff, with many seeing staff leaving to join the hospitality and retail sectors where there are many vacancies of a similar or slightly higher pay rate. Proposals to extend mandatory vaccination to this workforce group from April are likely to be withdrawn and the requirements for care homes are likely to be revoked, subject to the outcome of a consultation to change the law.

Transport data

Many care providers in Solihull report to us that they struggle to recruit local Solihull residents to work in care. Many applicants for care at home jobs either do not possess a driving license or have no access to a car, which is generally essential to the role.

This map, drawn from the 2011 census shows the home locations of care workers across the area. This shows that the vast majority of care workers are travelling into the borough daily, and whilst care home workers may be able to travel by public transport, domiciliary care workers need to travel throughout the day and so will be using their car.

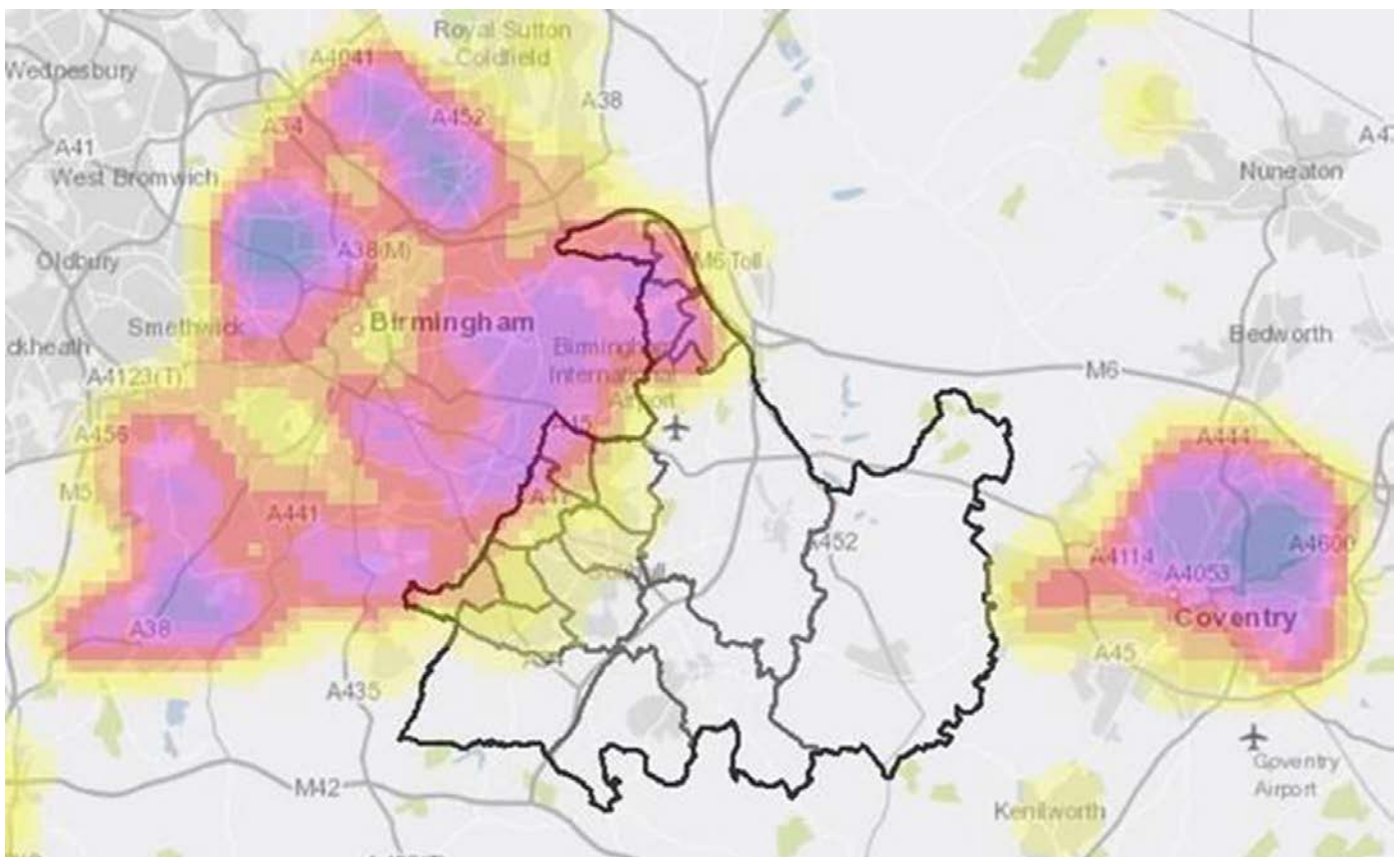


Figure 5. Location of care workers by home address Ordnance Survey data © Crown Copyright and database right 2021, Solihull MBC Licence N° 100023139

There are currently 21,000 calls per week being made to around 850 service users, so the need for transport is significant. Whilst the commissioning model for domiciliary care was designed to minimise travel, the realities of the service delivery mean that some care workers are driving 30-50 miles per shift. The peak times of the calls are early morning, lunchtime, early evening, and then between 9-10pm.

Our engagement with providers

To identify problems experienced by providers in the local area and how we could assist them in overcoming these, we conducted both a survey and a workshop to gather feedback. Key areas where feedback was given by providers included:

- › Difficulties with the recruitment and retention of staff
- › The impact of COVID-19 on the sector
- › How we could help to support the sector with these issues

The most reported problem was the rate of pay within the sector, particularly for care worker roles. It was noted that in other industries, staff could gain equal or better pay, often for less skilled and demanding work, with traditionally low-paying industries such as cleaning now able to draw away and attract social care staff. Of the pool of staff who do apply for jobs in the sector, many either lack the skills to perform well at interview or leave their jobs soon after gaining employment, as they often underestimate the demands of the roles available.

Providers also reported to us that many of their applicants are non-drivers; one care at home provider stated that 90% of their applicants are non-drivers. In addition, providers noted that the administrative time associated with recruiting staff was a challenge, particularly given that recruitment is a constant process for providers. When asked about the impact of COVID, providers cited a number of key issues. First, COVID-related challenges such as being able to secure prompt test results and sufficient supplies of PPE (Personal Protective Equipment) and managing the impact of work rotas of self-isolation requirements for staff exposed to or infected by COVID. Staff difficulties with mental health and anxiety were also reported.

Alongside these, providers reported that staff who had taken on care work during the pandemic as an alternative to furlough were returning to their original sector when restrictions lifted. The need for training to be delivered online rather than face to face was noted as a problem, as it made those new to the role feel isolated and unable to simulate situations as well as in-person training. However, 75% of providers who participated in the survey said that COVID-19 had not impacted on their workforce as severely as they expected due to factors such as better infection control planning and Council support.

In terms of how the sector could be helped with issues around recruitment and retention, multiple methods were suggested by providers. These ranged from providing help with transport to supporting advertising roles more widely, and often focused upon collaborative approaches. The three best received options on how the council could use small-scale projects to support them, were:

- › Council-funded pre-employment training support
- › A dedicated council officer to offer support with recruitment
- › A campaign around core values of care work

Current demand

In 2020, the Office for National Statistics (ONS) estimates indicated that Solihull is home to 217,500 residents, of whom 21% are aged 65+. In addition, there are an estimated 31,400 adults under the age of 65 living with a disability.³

Life expectancy (2017-19) in Solihull is approximately a year longer than the England average at 80.7 years for men and 84.3 for women and is the 4th highest in the West Midlands for women and the 5th highest for men.

During 2020-21, 4,338 adults received support from Solihull Adult Social Care. 3,523 of these individuals received services as part of a long-term care and support plan. Of these 3,523 individuals, 72% received care at home at some point during 2020-2021 and 29% of the people we support were cared for in a residential or nursing setting.

Of the 4,338 adults in total, 1,206 received short-term support either through reablement or hospital discharge support. Some of these adults then went on to have a long-term care plan, so they are also counted in the long-term figures above.

In Solihull, there are over 6,000 jobs in the social care sector, with the vast majority made up by workers in the independent sector: 5,300 jobs. The latest estimates for the independent sector from Skills for Care show a vacancy rate of over 7% which equates to over 375 unfilled roles.

Future demand

Over the next 10 years (to 2031), the Solihull population is projected to grow by 6% (12,313 individuals), broadly in-line with national and regional averages. During this time, the 65+ population in Solihull is projected to grow at four times the rate of younger age groups (14% compared to 3%). With those individuals born during the post-war baby boom now reaching ages that are more prevalent in terms of social care need, there is likely increased demand for adult social care provision.

Older population growth over the next 10 years is most evident among those aged 80+ with a projected increase of 31%. In addition, those aged 80+ with dementia are projected to rise by 28% to 2030 (likewise for those unable to manage a self-care activity).

Between 2001 and 2011 the Solihull Black, Asian and minority ethnic (BAME) population more than doubled. Growth is expected to continue, and our estimates suggest 1 in 5 of the Solihull population will be from a BAME background by 2029. We have more diversity in our local population each year meaning our social care services and workforce should also reflect this diversity and be equipped to offer personalised care to the local community.

With people living longer the need for Adult Social Care services rises every year meaning there will also need to be a sufficient workforce to deliver these services. If the workforce grows proportionally to the projected number of people aged 65 and over then the number of Adult Social Care jobs in the West Midlands will increase by 24% between 2020 and 2035⁴. For Solihull this would mean an extra 1,500 jobs over the next 15 years. It is realistic therefore to assume an extra 100 care jobs per year will be required to meet the needs of the population of Solihull. So, for the purpose of this five-year strategy we will be looking at the sector increasing by 500 jobs.

³ Institute of Public Care PANSI data 2021

Future demand by 2027

65+ Population
estimated to be

49,852



65+ Population
estimated at⁵

45,675

Solihull Adult Social
Care could support

4,728



Solihull Adult Social
Care supports⁶

4,338
adults

Would need

6,500
care roles



Currently

6,000
care roles in the
whole sector

Current demand

⁴ Skills for Care 'Solihull Summary 2021'

⁵ ONS Crown Copyright Reserved [from Nomis on 18 November 2021]

⁶ If support numbers increase in line with population estimate increase

Conclusions

The latest data from Skills for Care and the information we have collected from care providers build a picture of the challenges that currently face the sector and that will continue to pose challenges in the future. We have grouped them together as areas of priority that we will focus on, to make it clearer to understand, although it is recognised that many of the issues are interlinked.

Being Valued

Our research and conversations lead us to believe that care staff do not feel their roles are valued by society, especially when compared to the NHS, and that people do not see the care sector as a place where they can develop a career. This is especially problematic in Solihull as it is a relatively affluent borough, with high housing costs, where the combination of low pay and low interest in the care sector from potential workers, such as school leavers, means that many of our care workforce travel from Birmingham and Coventry, where housing is more affordable.

Despite current high levels of unemployment, many jobseekers are reluctant to take on care roles due to the relatively low pay and the nature of the work. Pay is cited by many providers as the fundamental barrier to recruitment, especially of Solihull residents. The average care worker in the independent sector in Solihull earns £9.19 an hour⁷, only 47p higher than the National Living Wage, whereas the average Solihull resident earns £23.09⁸ which is £14.37 higher than the National Living Wage.

Recruitment Support

Recruitment and retention prove challenging in Solihull, consistent with the pattern regionally and nationally. Recruitment is a near constant process for many of our providers, which is both time- and resource-intensive. Providers report that whilst they get good numbers of applicants from online job boards, the majority of candidates are inappropriate, either because they cannot drive (for care at home roles), or that they don't understand the nature of the role (eg personal care). The success rate of applicants appears to be much higher through 'refer-a-friend' incentive programmes as they are more likely to understand what the job entails.

Transport Solutions

Care at home requires staff that are mobile, and able to travel between people's houses across the borough to deliver care. The tight timescales involved, alongside shift patterns and late nights mean that public transport is often unsuitable for this work (especially for a predominantly female workforce) and the majority of workers need to use their own car. This can prove challenging, as the costs of learning to drive, then purchasing and maintaining a car are high, and difficult to support on a care wage.

Care at home providers report to us that up to 90% of new applicants do not drive, which is essential to the role, and that younger drivers face high insurance costs to use their vehicle for work. Those with a car are also able to work in a variety of roles, such as delivery drivers, which have grown during the pandemic, and which often offer higher pay. As we look to the future of Adult Social Care, we see an increase not only in the numbers of people requiring care, but an increased proportion of those

⁷ Skills for Care 'Solihull Summary 2021'

⁸ ONS 2021

people remaining in their own homes, which will increase the need for mobile care workers. This may be affected by where people choose to live, as groups that live in collective settings such as extra care would be easier to support.

In environmental terms, we know that most of our care workforce travels in from Birmingham and Coventry, which adds extra journey time and CO2 emissions. The rates of pay mean that staff are likely to be driving older vehicles, which are less fuel efficient, further increasing emissions as workers travel round the borough delivering care.

Glossary

Care at home / Domiciliary Care / Homecare

These terms refer to the care and support provided by a professional paid carer in an individual's own home.

Care Homes

This is where individuals live and are cared for in a residential setting.

Day Opportunities / Day Centres / Day Services

These terms all refer to community building-based services that provide care services and/or activities for older people, disabled people or people who need extra support.

Disclosure and Barring Service (DBS) checks

Employers can check the criminal record of someone applying for a role. This is known as getting a Disclosure and Barring Service (DBS) check.

Direct Payments

A direct payment is the money that the Local Authority pays directly to somebody for them to arrange and pay for their own care and support services.

Extra Care

Extra Care is an independent housing arrangement for older people who require accommodation and some level of care and/or support, including personal care and chores.

Personal Assistant

Personal Assistants are employed directly by a person who needs care and support and who manages and pays for this themselves or through a direct payment and supports them with various aspects of their daily life.

Personal Protective Equipment (PPE)

Personal protective equipment is protective clothing, masks, aprons, or other garments or equipment designed to protect the wearer's body from injury or infection.

Self-Funder

A self-funder is someone who pays the full cost of their care and support with no contributions from the Local Authority.

Skills for Care

Skills for Care is an organisation that supports adult social care employers to deliver what the people they support need and is the sector's leading source of workforce intelligence.

Supported Living

Supported Living refers to the arrangements for younger adults with disabilities, mental ill health and social impairments who require accommodation and some level of care and/or support.

The Care Quality Commission (CQC)

The independent regulator of all health and social care services in England.

Useful links

[Care Act 2014 Factsheets](#)

[CQC 'State of Care' 2021 Report](#)

[ONS People in Work Data](#)

[Projecting Adult Needs and Service Information \(PANSI\)](#)

[Projecting Older People Population Information \(POPPI\)](#)

[Proud to Care West Midlands website](#)

[Skills for Care 2021 data](#)

[Skills for Care website](#)

[Solihull Council Adult Social Care](#)

[Think Care Careers website](#)