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SCoLPP
Staffordshire Centre of Learning
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Evaluation of the Sector Hub Action Research Project.

Funded by the Community Renewal Fund

“I am in training and education for one reason and that is to see people progress, to take people that are struggling, feel a little low, don’t feel they’re educationally at the level where they need to be. Pick them up, give them some training, build them some confidence” (Project Facilitator)

Promoting care as a career – a pilot project devised and led by
Acacia Training in Stoke on Trent



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Executive Summary

The Sector Hub Action Research Project (SHARP) is a pilot project designed to inform how providers can work collaboratively to address skills shortages in the adult, child, and domiciliary care sectors. The project was funded by the Government Skills for Growth Plan; a national programme, which seeks to promote the Levelling Up Agenda by improving skills, infrastructure, and innovation. The project had three strands, first was to promote care as a career, including care-focused outreach targeting under-represented groups delivered by Acacia Training and Acorn Training. Secondly, Acacia Training provided care-focused information, advice, and guidance on careers in care, job opportunities, transferrable skills, salary, and progression. Finally, Acacia Training developed a portfolio of care provider resources and actions which support job retention and career progression in the health and social care sector.

The evaluation led by Staffordshire University monitored and tracked the outreach, training, and support as well as navigation to employment in the target sector using an Appreciative Inquiry (AI) model. AI provided a rich tapestry of experiences of staff and trainees or potential care staff. The report includes findings from the surveys and interviews illustrating a direct correlation between support provided and outcomes. Six key themes are highlighted in the report, reiterating the impact Covid-19 had on employment relations which are particularly important in the health and social care system. The evaluation emphasised how lack of orientation opportunities influenced workflow and team management procedures during the pandemic. Other barriers identified have been cited in literature, such as the policies around enforced vaccination, the emotional labour of work in the care sector and unwillingness to engage with pride in jobs which involve personal care. The report also stresses the need for holistic support, with reference to enhancing digital access for potential trainees who may be motivated but do not have the technical resources and know how to engage with digital employment routes or systems.

The recommendations are linked to the holistic needs highlighted in the pilot and its evaluation, suggesting wrap-around support which enhances appreciation of the range of roles in the sector, the need for localised opportunities and established, attractive progression routes. Comprehensive training and development programmes that support skills, confidence and care as a career are also important.

Introduction

This report is an evaluation of the Sector Hub Action Research Project (SHARP) project. SHARP was developed and led by Acacia Training¹ based in Stoke-on-Trent in response to the Government Skills for Growth Plan and received funding from the United Kingdom Community Renewal Fund (UKCRF). SHARP is a pilot programme exploring routes into health and social care careers in Stoke-on-Trent in collaboration with local training providers Acacia Training and Acorn Training² and employers. The project aims to contribute to the Levelling Up strategy by developing skills and infrastructure addressing local skills shortages in the adult, child, and domiciliary care sector (HM Government 2022).

Acacia Training designed this project to investigate how best to engage with people who are under-employed, low skilled, unemployed, or economically inactive living in Stoke-on-Trent and introduce local opportunities for careers in health and social care. They work to engage with people who are long term unemployed, returners to the labour market, those who were made redundant during the pandemic or furloughed for prolonged periods of time and those who fear they may be made redundant. The SHARP project seeks to reinvigorate routes into care roles locally with individualised training and support managed by experienced staff called navigators. Unemployment rates in Stoke-on-Trent are relatively stable at 4.3%, only slightly above the national average of 4.1%. Skills for Care estimate that while staff turnover in social care is slightly lower than the national rate of 29.5% at 26.7% in Stoke-on-Trent, health and social care roles face continuing skills shortages with the lack of clearly defined progression routes being cited as a particular barrier (Skills for Care 2022). In Stoke-on-Trent the demand for roles in health and social care including care workers, home carers and nurses are the strongest of all occupations (Staffordshire County Council 2022).

Stoke-on-Trent is a city in central England with a population of 258,400 people ranked twelve in a list of the twenty local authority areas identified as having the most deprived neighbourhoods in England (ONS 2022). The need for health and social care support is increasing annually. The Joint Strategic Needs Assessment for Stoke on Trent (Stoke-on Trent Council 2022) reported that by 2030:

There will be increasing numbers of older people in the city with limiting long-term illnesses, dementia, depression, falls, unable to manage one self-care activity/domestic task/mobility activity, providing unpaid care (pg. 58 – 59)

Requests for care and support for older people in Stoke-on-Trent averaged twenty-four calls per day to adult social care in 2019/2020 with 2,790 adults aged 65 and over accessing long-term funded social care support in the city. Whilst the demand for adult social care is increasing locally and nationally vacancies in the sector are also increasing. The impact of the Covid-19 pandemic has exacerbated already established challenges in recruiting and retaining staff into the adult social care sector.

This evaluation report will discuss the extent to which this project meets its project indicators and is informed by the views of participants and staff. The impact of the pandemic on the delivery of this project will also be discussed. The data have been analysed to determine key findings and establishing

¹ <https://acaciatraining.co.uk/>

² <https://www.acorntraining.co.uk/>

recommendations for future development. The report concludes with recommendations for future practice in this area and strategies for promoting care as a career.

The Sector Hub Action Research Project.

The project has three delivery strands (see Figure 1). The first strand relates to promoting care as a career to individuals currently in receipt of unemployment benefits and support. In addition, those currently accessing other support programmes for example: Department for Work and Pensions (DWP) Jets and Restart; Adult Education Budget, Kickstart, Traineeships, Apprenticeships, and community learning. The project aimed to deliver grassroots activity to ‘sell’ careers in the care sector to participants who may not normally consider it as an attractive or progressive career path. The second strand is to support people engaged in training programmes to navigate an often-complex route into employment. Finally, the third strand is to support the retention of existing care staff with skills audits and wellbeing activities in collaboration with employers. The project aimed to implement tools and techniques to encourage staff to maintain their own wellbeing and enable managers to support their staff to aid staff retention and their progression in work. Project delivery should have been hosted at two local job centres: Hanley Job Centre (programme overseen by Acacia Training) and Longton Job Centre (programme overseen by Acorn Training). However, due to the pandemic restrictions which continued to be in place for face-to-face meetings until June 2022, SHARP project work began online and by phone.

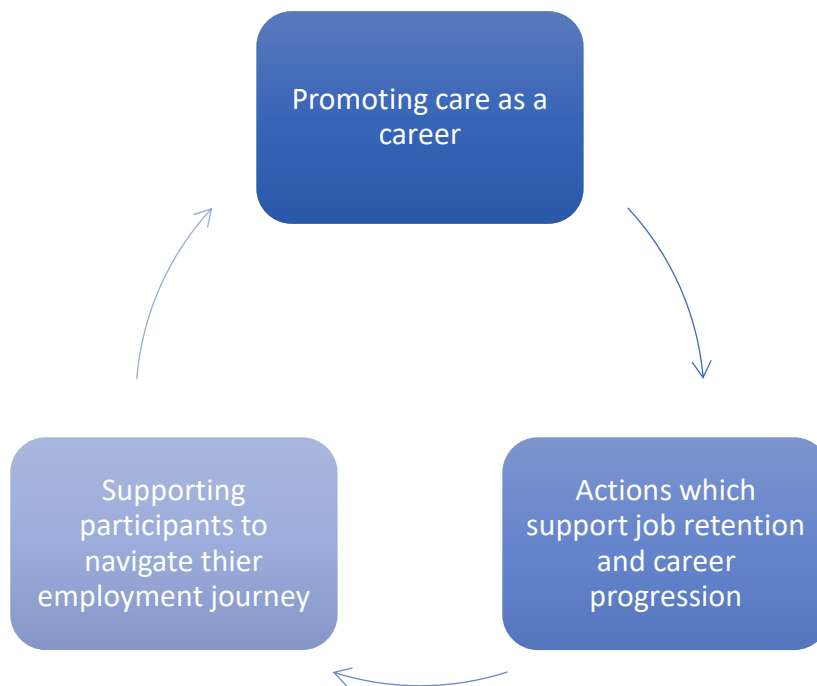


Figure 1 The three project delivery strand

SHARP project activities.

The project aims to deliver a broad range of activities under each strand with some participants engaging in several activities at any one time and others focused on gaining initial skills in strand one including accessing 'taster' visits to potential employers and undertaking voluntary work to learn more about the career options available.

Activities planned for strand 1: Promoting care as a career.

- Care-focused outreach targeting under-represented groups delivered by grassroots organisations.
- Care-focused information, advice, and guidance on careers in care, job opportunities, transferrable skills, salary, and progression.
- Development of a portal sharing care provider programmes, jobs, linked to local provider websites and Staffordshire Partnership for Employment and Skills (SPES).

Activities planned for strand 2: Navigating the route to employment.

- Sector-focused digital skills including accessing Government services, better-off-in-work calculations, using electronic care plans, care-focused Information Advice and Guidance (IAG) and advocacy and Pooling apprenticeship job vacancies.
- Signposting to relevant local provision such as Area Education Board (AEB) funded Sector Based Work Academies, or Department for Work and Pensions (DWP) Job Entry Targeted Support, taster programmes or work experience opportunities, transitioning Kickstart participants to an apprenticeship.
- Promoting sustainable travel-to-work patterns, using the train, buses, walking and cycling, travel training, promoting the use of rail services to move across North Staffordshire and impacting Towns Fund initiatives.

Activities planned for Strand 3: Staff retention.

- Apprenticeship tasters for existing staff that are low skilled and wishing to progress, using a level 3 power up programme to support level 3 engagement
- Roll out of a wellbeing tool which measures individual perception of wellbeing and provides a monthly dataset to employers on the health of their team.
- Deliver strategic wellbeing activities such as managing sleep around shift patterns.
- Condition management training and support

Methodology

The team at Staffordshire University designed an evaluation that aimed to gather the experiences of participants and delivery staff. The planning process involved consultation with the lead partner Acacia Training and ethical approval was gained from the Staffordshire University Ethics Committee. The research adheres to the principles of the British Educational Research Associations' guidelines (BERA, 2018).

Initially the team considered the Kirkpatrick model (Kirkpatrick and Kayser-Kirkpatrick, 2014). This model is widely used for evaluating training activity and training programmes and provides a straightforward and systematic approach. The model's four levels are *reaction*, *learning*, *behaviour*, and *result*. However, it became clear in the initial stages of developing the evaluation plan that access to groups of learners was not feasible due to restrictions in group meetings and delays in gathering the teams needed to deliver the programme. The pilot was due to complete in June 2022 but has since been extended by mutual agreement with the funder and the provider until December 2022, in common with many similar programmes across the UK impacted by the pandemic which have been faced with slow recruitment.

The Staffordshire University team then chose to design and develop the evaluation using an appreciative inquiry lens because it was clear the lead partner was gathering helpful data around how best to deliver the project post-pandemic and we wanted to capture this valuable learning as part of the evaluative process.

Appreciative inquiry is an emerging research methodology and aids an asset-based approach to evaluation which considers what is working well in organisations (Cooperrider and Whitney, 1999). The evaluation team decided to apply the 4D cycle to individuals working on the SHARP project. In our planning meetings the evaluation team could see the team were succeeding in building relationships and aiming to meet the outputs of project in challenging circumstances. This appreciative inquiry model can be useful in evaluating organisational learning and change (Preskill and Catsambas, 2006).

The 4D cycle involves considering the evaluation in relation to four stages. the first stage is 'Discovery' where the evaluation team consider how the SHARP project has evolved, secondly 'Dream' where the evaluation team consider the data generated from each interview to develop themes to analyse further, thirdly 'Design' where the evaluation team consider the ways the SHARP team are planning for the future and fourth and finally 'Destiny' where the evaluation team explore the next steps and make recommendations based on the findings. Cooperrider and Whitney (1999) contend:

Appreciative Inquiry is the cooperative search for the best in people, their organizations, and the world around them. It involves systematic discovery of what gives a system 'life' when it is most effective and capable in economic, ecological, and human terms. (pg. 69)

Research questions

The research questions driving the evaluation, and which reflect a combination of process and output approaches are:

1. What are the experiences of learners who participated in outreach sessions, signposting and / or taster sessions?
2. What are the experiences of trainers in engaging participants and promoting care as a career?
3. In what ways do learners perceive care as a career?
4. Have participants entered care work following engagement with activities delivered through the S.H.A.R.P project?
5. What are the initial outcomes of the S.H.A.R.P project compared against the planned outcomes and impact indicators?
6. What do you value most about your work?

Research Methods and Instruments

A semi-structured interview schedule was developed (Robson, 2017) to address the research questions with delivery staff and project managers (see Appendix 1). A focus group discussion guide was developed (Appendix 2) and further developed as an online questionnaire to gather useful data from participants who had short term involvement with the project. Participants were able to meet outcomes through varied routes, including employer referral, learning programmes, work programmes and those engaged in other activities with Acacia Training. Data were gathered and triangulated using a combination of interview, focus groups and Acacia Training's reporting of outcomes to the funder. Information about the project and the rights of participants was provided in an information sheet (see Appendix 3) and a consent form was also provided to all participants (see Appendix 4). All participation was anonymous and where quotes are used in the reporting, they are identified with a broad job title, for example: Project Facilitator.

Participants

Participants consisted of the contract manager, the employability director, a project facilitator, a care home manager working with the team, and two navigators.

Appreciative Inquiry Evaluation Process

Discovery Phase	Three planning meetings and a literature review. The evaluation team worked to understand the application and how the project had evolved
Dream Phase	Six structured interviews, thematic analysis, and discussion
Design Phase	Five meetings discussing progress and innovations to engage participants, development of an online questionnaire based on Focus Group schedule
Destiny Phase	Final meeting to discuss next steps and three evaluation team meetings to consider recommendations

Figure 2 Appreciative Inquiry Evaluation Process

The Appreciative Inquiry evaluation process is presented in Figure 2. Three planning meetings formed the Discovery phase. These meetings were followed by six in-depth interviews applying the Dream phase. The Design phase was ongoing as the delivery team worked to find ways to engage potential participants and included the development of an online participant questionnaire drawn directly from the focus group schedule, this was returned by three people. It was not possible to undertake focus groups with participants as group meetings were not being held. This was due to continued pandemic restrictions in place at each training centre at the time. Five additional conversations were held with team leaders to discuss progress. The Destiny phase involved discussions on next steps as outputs began to develop. Participants were introduced to the project online, by telephone and during limited delivery of other provision. It was necessary to focus data collection on the in-depth interviews with project staff who discussed a meticulous approach to meeting outcomes and the challenges they faced post-pandemic. The interviews were transcribed, and a thematic analysis was used to locate shared themes and then understand any differing perspectives held by the participants. To further illustrate their work three case studies were provided to demonstrate the complex routes participants had taken and outcome data were also provided by Acacia Training to demonstrate the project outcomes.

Findings and discussion

Discovery – the core aims of the SHARP programme

Long term unemployment negatively impacts confidence, mental health, and physical health (Abraham et al., 2019). Acacia Training work with people who are at risk of and recently redundant as well as people who have been unemployed for several years. They have a nuanced understanding of the incremental steps someone needs to take to return to employment. This includes gaining digital skills and access to resources. It may include gaining literacy skills and specialised training but often will include working with someone to improve their overall health and wellbeing,

You could be talking to those that have been in and around the system for you know two, five, ten, fifteen years you know ranging from many, many reasons, that could be redundancy, or they have been out of work since furlough and Covid or they have just been stuck in that system for a significant period of time that they can't get themselves out of it. (Navigator 2)

The staff utilise a broad range of resources to slowly introduce people to new opportunities, identifying transferable skills that people may have not considered. Some people have had long periods as a carer at home, may still be caring for relatives or have endured ill health themselves. The staff will help prospective participants to identify the tasks they are already undertaking and discuss how these skills could be used in a new career in care. This subtle conversation offers the opportunity to recognise transferable skills from personal life experiences to professional skills,

you just ask them and they might say things like well I look after my cousins of a weekend, and it gives you an easy route in or I go and fetch the shopping for my nan or you know it is all of those things that you know you kind of go well that's... you are on the right lines, this is what we're talking about, this is the caring industry that you're looking into. (Project Facilitator)

The SHARP programme was designed with many opportunities to engage with someone, starting where they are most comfortable. Identifying the different roles available in care work may be one conversation or several visits to different services. Training may include a one-off workshop or several weeks of more in-depth training to prepare for a specific role. People can work in groups or individually, online, over the phone or study at home with workbooks developed by the training provider.

Confidence

The aim of the SHARP programme is to help people to navigate through a complex system of benefits and the routes into employment while supporting them to build confidence and gain valuable work experience.

One lady, we have supported her with life skills in general, so supported her with her confidence, she was very, very shy, very reserved you know we have supported her with engagement to employers, she also went through our Prince’s Trust programme as well which is specific health and social care provision. (Contract Manager)

The training providers are undertaking a complex task they must work in tandem with employers at the same time as supporting prospective care workers to build confidence. All employers may not be able to offer the time and support to everyone, preferring someone with prior experience for example.

Everyone has different levels of capabilities, and there are all sorts of things to consider, and a lot of companies out there quite rightly are being very selective of who they want to work in their business, and they are looking for people who are trained specifically within the sector and ideally that have got experience because why would you not? (Contract Manager)

During the Discovery phase the evaluation team identified a complex range of aims for the SHARP programme with the lead partner. They are working to support potential care workers who may be presenting with a multitude of personal and financial challenges as well as trying to navigate through a complicated benefits system. In addition, they need to respond to individual employers who are also navigating through a pandemic that continues to impact their services daily.

Dream Phase – interviews and conversations

The Dream phase relates to the interviews and conversations with team members which sought to understand the way the SHARP team both delivered the project and responded to challenges. Thematic analysis of this data offered several themes summarised in Figure 3 and discussed below.

Theme	Summary
Covid-19	Negative views of care work
Orientation	Reduced access to care providers, lack of face-to-face meetings / training
No Job, No Job	Continued policy position being a barrier to prospective employees
Personal Care	Perception that this is the sole role available and reticence to undertake
Emotional Labour	The impact of the pandemic has been global and working in care is seen as stressful and emotionally taxing
Digital Access	People are eager to learn, lack of technical resources – laptops, phone credit

Figure 3 Thematic Analysis

Covid-19

It is a credit to the lead partner that they have continued this pilot programme and found routes through to meeting its numerous outcomes. This is especially the case given the additional challenges arising from the Covid-19 pandemic.

There are still concerns and obviously the major one would be Covid, you know we know it is still there, we talk about what restrictions there may be within the workplace. (Project Facilitator)

The Covid-19 pandemic has only sought to further exacerbate the negative views held by people who may have otherwise entered care careers. Excess deaths in care homes were widely reported in the media and staff sickness increased as patients with Covid-19 were discharged from hospital into care homes

“The pandemic has disproportionately affected people living in care homes, who accounted for an estimated 30% of all deaths from covid-19 across 25 countries despite making up only 1% of the world’s population” (Collateral Global, 2021: pg.1)

Prior to the pandemic negative views about working in social care were prevalent but coverage of care workers experiences in the media have influenced prospective candidates for care work. As this comment exemplifies:

I think it is the way it’s been portrayed on the news; I think it was portrayed that the care staff were like second rate citizens if I can say that? That is the feedback that I am getting, that they wouldn’t go back in to care (work) and especially after what they had to go through, during the pandemic, I don’t think the media has done a lot over the last two years for this industry at all (Navigator 1)

The challenge of increasing demand due to an ageing population and an insufficient workforce was evident well before the global pandemic (Colombo et al., 2011 Gori et al; 2015). The SHARP project aimed to address these low public and professional views of working in social care (Spilsbury et al., 2015).

I think this last two years with Covid and the pandemic has had a major knock-on effect for the care sector. I don’t think the younger group are fully aware of the potential career opportunities for them as a pathway. I think the older group who have already been in it are very unsure whether to go back due to the pandemic (Navigator 1)

Employers dealing with staffing shortages also must make decisions about using their time for training inexperienced staff versus providing a high standard of care. This also represents a challenge when potential candidates need a lot of training to prepare them for entry into a care career,

Prioritising bringing someone new on board is kind of hard for employers, probably weighing up the amount of time they are going to have to spend training and upskilling people and making space for that against the care needs for the people that they have got (Contract Manager)

The team have responded positively to the additional pressures by consistently re-visiting their aims and working across the whole organisation to gather ideas and resources to aid recruitment to the sector.

Orientation

One of the barriers the team wanted to address was the lack of information available to prospective care workers about progression routes and the roles available. Drawing on their own expertise the training providers knew that the optimum introduction to different environments and experiencing the range of roles available was to facilitate access to services, care homes and community care. However, from the outset the pandemic impacted access to care homes, social care workers were required to minimise any contact with people including those they cared for and wear necessarily restrictive personal protective clothing when they did so. The prospect of 'taster days,' volunteer placements and visits to employers ceased to be possible throughout 2020 and 2021.

Generally we would invite the learner to go to the workplace first and have a conversation, have a chat, have a walk around and see if that is something that they would like to do but we try where we can and encourage it because it gives them a flavour for you know that environment, the different types of roles that they can do which allows us to signpost much better when they have had that experience, to see which jobs we can then signpost them to (Project Facilitator)

Despite the restrictions being withdrawn by the Government towards the end of 2021 in the wider community, restrictions have remained in place in the social care sector much longer and some delays are inevitable as volunteers need a Disclosure and Barring check (DBS) which can take upwards of two weeks to arrange:

It is not easy to arrange but it is possible. So, they can have a volunteer DBS which is generally done by the employer, so it is us engaging with those employers that are happy to do that (Project Facilitator)

The two job centres the project aimed to involve remained closed to face-to-face visitors for much of the time until June 2022. The team worked to provide access to online resources which included using the Slack online platform where they gathered materials about wellbeing, finance. They have also developed resources using Padlet, an online learning space for people to share experiences. The SHARP team currently have a pre-employment Padlet in development. In addition to the resources developed at Acacia Training they have linked prospective candidates to the Staffordshire Jobs Careers Forum and are working on links to local provider platforms as these are developed. Even when the job centres started to re-open the team found challenges in engaging with employers who may not have looked at recruiting through a training provider or aiming for people who have been long term unemployed.

We can work with individuals who can go and try different elements of work, but the care sector just doesn't lend itself to that much of work experience. It is more of a you are interested, we are recruiting, you have come through this model because some employers potentially perhaps haven't thought about working with Job Centres before (Employability Director)

Team members contacted employers they have supported in the past and offered to undertake training audits and well-being surveys with existing staff. They found that existing care workers were interested in gaining additional qualifications and finding out about other opportunities. This required an investment in time from both the employer and the training provider but demonstrated how they both value existing staff and opened routes to further discussion about staff needs.

Relationships

At the time of the evaluation interviews navigators were building relationships over the phone and online due to restrictions of meeting candidates and may have had only one opportunity to discuss a care role. If a prospective candidate has been unemployed for an extensive period, they may be lacking in confidence and this alongside the reticence around care work was a challenging barrier for navigators to overcome. Despite this the navigators were beginning to provide initial placements in care settings to introduce roles and responsibilities as access begins to open:

A young person that started with us on an employability programme, went in to care setting and initially did a little of a couple of days of voluntary just to see if that is what they would like to do. Then moved into a part time role within that industry and are doing very well (Project Facilitator)

No Jab, No Job

I think that (vaccine) has had a massive impact as well because people are sort of you know they don't want to be sort of guided by... to work in the sector you have got to be double vaccinated and whether it is law or not, you know they feel very much against (Care Home Manager)

Another barrier related to Covid-19 has been the vaccine debate, the policy of 'No Jab, No Job' (HM Government (2021) for care staff was withdrawn by the UK Government in March 2022 after almost 20,000 care staff resigned (Homecare 2022) but many local employers have retained this as policy, and this has also affected recruitment and interest in care roles.

a lot of providers whether they have got to or not, are still saying to protect our services users you know quite rightly, we expect individuals to be vaccinated to ensure we have the upmost protection (Contract Manager)

On the rare occasion team members were able to engage in a face-to-face event during the evaluation period they found barriers to recruitment related to vaccines remained evident.

I have spoken today to a domiciliary care organisation based in Stoke on Trent, at the job centre and somebody was sitting... because they were right next to me and they said about the vaccinations and this person said no, I am not having them, I don't want them, and this employer said OK fair enough, I respect your views on that but our policy because of the vulnerability of our clients we will not employ anybody who isn't vaccinated so I am sorry we're not in the position to offer you a job (Navigator 1)

Personal Care

The most consistent theme in the interviews was that people expressed negative views about care work, especially prevalent were ideas about care work being solely personal care.

Personal care can be a barrier but many more roles available (Contract Manager)

The training providers worked hard to promote other roles in particular administrative roles, activity coordinator roles and home care that did not involve personal care, but this remains a barrier. Especially since many care operators are still working with full personal and protective clothing including masks. The options for activities, outings and entertainment are severely limited while Covid remains evident and staffing levels are low.

I think people get very hooked up on, you know, it could be a busy ward or it could be in a care home, and, you know, you're dealing with all of the... you know, the not so nice piece of working in a care home I suppose, and it is just obviously breaking down those barriers to encourage people to think about it from a wider perspective (Employability Director)

Emotional Labour

In addition to personal care, a long-term challenge for care staff is the impact of care work emotionally, something not always addressed in busy care settings.

It is my vocation; it is all I have ever done, and I can't imagine doing anything else. It is so rewarding to see the impact you can make on other people's lives and to support them, basically through the end of their life, until the end of their life. And you become a family with the residents, so they become part of the care home family and their family becomes part of our family as well (Care Home Manager)

Care home workers often view the residents they care for as extended family and their experience of grieving for residents who die will be similar anyone who grieves a family member (Rickerson, 2005). There is acknowledgment in the literature that care workers are affected by the death of people in their care (Tsui, et al. 2019, Boerner et al. 2015). Care home staff experience grief and loss when residents die (Boerner et al. 2015) but their professional role may provide them with scant time to process this before another individual take's residence.

I think knowing that what we are trying and I will use the word trying, to do, is to have an impact on both the person and individual who is looking for work, to explain to them that it is a very fulfilling and it isn't a job, it is a career as well as a job, it is, you know, a family as well as a career and a job, because you become a family don't you when you're in that sort of sector and industry because it is so personal and it is because you work so closely with that individual, other team colleagues (Navigator 1)

Another challenge for the training providers is engaging with people who are yet to be motivated to become a carer whilst acknowledging that this profession is viewed as a vocation. Five out of six interviewees mentioned care as a vocation and three discussed the emotional investment.

Being a carer, it is a vocation, it is a very privileged role to do. People may see it as an under skilled role, but I think the complete opposite of that, I think it is a highly skilled role, you're looking after people, and you are keeping them safe in their lives (Care Home Manager)

The difficulty for the training providers is to recruit people to roles caring for some of the most vulnerable people in our communities, in a sector that has been one of the most hard hit not only during the pandemic but also prior to this with pay rates, conditions and an emotional impact not prevalent in many other occupations paying similar salaries (Mahase, 2021). The lead partner has been innovative in responding to this challenge and providing often individualised packages of support to prospective candidates.

Digital access

I have spoken to a gentleman today and he has got a laptop, he says "but it is stuck on Outlook and I don't know how to get... close Outlook" and I said "to be honest it is a click of a button", he said "but I don't know which button" because there isn't somebody sitting by the side of him to say, "all you do is press that cross there and Outlook will go or you press that line there and it will minimise it" and it is just that... he said, "I can send emails, I can receive emails but that is all I can do because I don't know how to get rid of Outlook". (Navigator 1)

Prior to the pandemic one in five businesses in Stoke-on-Trent and Staffordshire reported a digital skills gap (Staffordshire Business & Environment Network, 2022). This gap relates not only to skills in using digital technology but also consistent access to computers and the internet. Acacia Training have expertise in successfully addressing this issue because it relates to people who access the entire portfolio of programmes.

Lack of IT access and skills in Stoke - we do not allow this to be a barrier, we loan laptops, access work coaches to see if they can support, use libraries, and offer digital skills courses. We build in functional skills literacy and numeracy in all the sessions (Project Facilitator)

Digital skills courses are popular because people recognise the need for these skills to progress in employment. Some people will have basic skills but no access to equipment and others have not used any digital technology. Acacia Training provides training, support, and resources across all levels in this group.

Some of our other learners that have never opened a laptop or a tablet or used any of that information, email is new to them and again we would run and support them at those different levels (Project Facilitator)

When a potential care worker engages with the programme it may be several weeks of confidence building and learning basic skills such as using email before the specialised work, investigating care roles, and visiting services or volunteering can begin.

Design Phase – motivation and innovation

Values



Figure 4 Values Question - Words >3

For me it is about knowing that I am trying to help somebody's grandma, granddad, mum, dad because what would I want for my parents, or even me as I get older?
(Navigator 1)

When access to the initial recruitment and training sites were unavailable, they collaborated with existing employers to support both the wellbeing and progression of their staff. They worked to understand the employer priorities and developed a two-week academy to introduce people to Health and Social Care core concepts, discussed further in the Destiny section. They held online information events and attended a jobs fair to promote their services. They approached candidates completing employability programmes to discuss the potential for care work and productively used meetings with the evaluation team to talk through future ideas.

“I value most seeing, I suppose, a pathway of opportunity for people and watching people grow, you know, it is not about anything else for me, it is about that distance that is travelled from our candidate's perspective. Seeing someone we have supported.... thousands of

candidates as you can imagine across all of our provision and just seeing what they can actually get from these sorts of provisions that we offer and the support that we put in place”
(Contract Manager)

Outcomes and Impact

Output data

The Community Renewal Fund (CRF) priority of Investing in Skills is addressed by six SHARP project outcomes. The table below illustrates progress across all outcomes to the end of August 2022. The SHARP pilot project will conclude in December 2022. Outputs have been negotiated with the CRF and risk rated by Acacia Training. They demonstrate two outputs as ahead; these are the numbers of people supported to participate in education currently fifteen out of a target of twenty and the numbers of people supported to engage in job searches currently fifty-eight out of a target of seventy. Two outputs are on track these are supporting people to engage in life skills currently thirty-seven out of a possible seventy and supporting people who are economically inactive to engage with the benefits system currently twenty out of a target of thirty-six.

Finally, two outputs are currently at risk these are supporting people to gain employment currently standing at six out of a target of forty-five and supporting people to gain a qualification which stands at twenty-eight out of a target of eighty-five. It is envisaged that some data for the last two outputs: gaining employment and gaining a qualification will not be available until the project ends. Individuals may be undertaking job trials and volunteering before gaining employment and people have only recently started qualifications which will take several months to complete.

Investment Priority	Output Name	Output target in # of people supported	Output delivered	Output delivered %	Variance - difference
			(To end December 2022)		
Investment in skills	Participate in education	20	15	75%	5
Investment in skills	Engage in job-searching	70	58	82%	12
Investment in skills	Engage in life skills	70	37	52%	33
Investment in skills	Economically inactive people engage with the benefits system	36	20	55%	16
Investment in skills	Gain employment	45	6	13%	39
Investment in skills	Gain a qualification	85	28	33%	57

Figure 5 Community Renewal Fund reporting data. Provided by Acacia Training September 2022.

Survey data

Three people responded to the survey and all reported being satisfied with the quality of training they had received, to date none have entered any voluntary work, but one participant has started formal training in care. The people approached to participate in this project are reported as lacking in confidence and often basic or digital skills. It is a complex process for navigators to build relationships and gradually introduce options for training and employment.

Destiny – Next steps

As the evaluation period concluded Acacia Training have introduced a new Health and Social Care Academy to aid further engagement with potential care workers. An initial cohort of eight people are working together intensively for two weeks to gain accreditation on a Level 2 Employability course. The candidates will then work through fourteen accredited modules in health and social care and complete a face-to-face First Aid course. The programme has been developed in collaboration with local health and social care employers who will meet all candidates at a job fair. Every candidate who completes the course is guaranteed an interview with an employer of their choice. This programme illustrates the flexibility of the project lead in devising new ways to engage meaningfully and support people with their employment goals.

Conclusion and Recommendations

Undertaking a pilot programme to introduce care as a career post-pandemic is a monumental challenge. People successfully working in the care sector have a set of skills and values that are more akin to a vocation and many people who engage with this pilot programme will not be eager to enter care work. However, this initial pilot has demonstrated that the way to identify transferable skills and share the wide range of roles in care is to gradually build relationships with people. These relationships are formed despite communication challenges, over the phone or video calling. They are formed in short exchanges where the skilled navigators take any opportunity to get to know an individual and learn more about their experience. People are supported to gain more confidence and experience within the boundaries of a non-judgmental professional relationship, a wrap-around approach offering appreciation of how complex entering the care workforce can be.

It is a full circle so being able to see those participants that come out of each of those contracts and whatever the outputs are for those contracts, it is not always getting into work, it is you know could get a qualification or has managed to secure a home after you know being released from a sentence so it is a whole number of those and I think it is just about celebrating each one of those outputs for each of the contracts (Navigator 2)

This evaluation considered six questions discussed throughout this report and summarised here:

1 - What are the experiences of learners who participated in outreach sessions, signposting and / or taster sessions?

It was challenging to access the voice of participants who were working remotely and often only accessing the training services on only one occasion. Primarily due to the difficulties with face-to-face work arising from the pandemic which prevented group sessions as initially planned. As the evaluation progressed the lead partner Acacia Training responded to these challenges and developed a new Health and Social Care Academy training programme, in collaboration with local employers. In addition, the secondary partner Acorn Training began to engage with participants, but further interviews were outside the scope of this evaluation due to time constraints. Further

evaluation of the SHARP project would benefit from access to participants on this Academy programme and participants supported by Acorn Training.

2 - What are the experiences of trainers in engaging participants and promoting care as a career?

Given the historic perceptions of social care as a career which has been further impacted by the experiences and public perception of care workers during the pandemic navigators (trainers) found it really challenging to promote care as a career. They report people having negative perceptions of working in social care and a fundamental misunderstanding of the roles available, due in no small part to a lack of promotion nationally and unclear progression routes.

3 - In what ways do learners perceive care as a career?

In addition to the above care work is seen as a vocation, it requires a level of emotional labor that people may not have the capacity for especially post pandemic. Learners perceive care work as personal care; many learners are not keen to engage with this. The SHARP project is working to raise awareness of the different roles available and give people opportunities to try out working in different care settings so they can make informed choices.

4 - Have participants entered care work following engagement with activities delivered through the S.H.A.R.P project?

At the time of this evaluation which completed in August 2022 and six people had gained employment through engagement with the SHARP project. A further eight people were enrolled on the Health and Social Care Academy through Acacia Training at the end of which they are guaranteed an interview with a local employer.

5 - What are the initial outcomes of the S.H.A.R.P project compared against the planned outcomes and impact indicators?

The sharp project is on track to meet all output indicators. We have discussed in this report the range of challenges faced by the lead partner in delivering the project and they have responded to this with innovation and flexibility. They are working towards people gaining employment and more importantly perhaps, increased confidence towards entering the workplace. This holistic approach to continued support means that when participants of the SHARP project do gain employment, they will continue to receive support from Acacia Training who work collaboratively with employers in the city.

6 - What do you value most about your work?

The following quote from a project facilitator demonstrates the values of everyone we spoke with through this evaluation.

The best reward is seeing them get into employment or progression you know and building their confidence and seeing them grow (Project Facilitator)

The SHARP team members are mindful that this pilot project can only serve to offer insights into how best to increase the social care workforce. Central to their approach is an aim to ensure people entering a new career are well trained, confident, and supported. This extends to their

continuing relationships with local employers and an interest in promoting wellbeing in addition to as progression.

This work is complex and is not easily distilled into numerical outputs. However, the SHARP team have demonstrated that they understand the delicate framework they must build to find and subsequently support people who may find their vocation in care work.

Recommendations

- Widescale promotion of a broader range of roles available to people in the care sector
 - Interviews with care home residents about their experience of support
 - Interviews with existing care workers “a day in the life of....” these interviews could be developed as case studies to showcase the range of roles available to care workers.
 - Interviews with service managers
 - Locally grounded advertising campaign to promote local opportunities
- Progression routes
 - Mapping of all progression routes locally – especially into Nursing
 - Collate case studies of people who have progressed locally
- Actions to improve confidence
 - Training providers aiming to deliver this kind of employability intervention must acknowledge the complexity of this client group in future tenders
 - This work requires support for people to embed improved confidence and this can take considerable time
 - Behaviour change is gradual and requires a flexible approach to delivery

While participating in this evaluation process the lead training provider has shown a dedication to not only meeting project outcomes and indicators but also to supporting people in locating the right role or employee for them. This support does not cease when someone gains employment but rather a relationship is maintained to support future learning and progression.

I am really passionate about changing people’s lives, I have been in this sector for over 10 years, so and I am really passionate about the pool of people that have potentially been left behind with regards to the pandemic. I know we talk about that still, but it is not going to go away and there is going to be a lot of people that were affected, that are even further away from the job market (Employability Director)

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