**Meeting between the APPG on Adult Social Care and Tom Surrey, Director of Adult Social Care Workforce and Policy at the Department of Health and Social Care**

**Date and time:** Monday 27th November: 4pm to 5pm.

**Location:** Microsoft Teams Meeting

**Meeting Attendees**

* Liz Twist MP (Chair)
* Tom Surrey (Director of Adult Social Care Workforce and Policy at the Department of Health and Social Care)
* Nigel Taylor
* Deborah Rozansky
* Nathan Jones
* Helen Broad
* Jane Cox
* Finn Turner Berry
* Chris Poole
* Isaac Samuels
* Rebekah Moll
* Matthew Spencer

**Tom Surrey introduction**

We know that the social care sector is an incredibly diverse sector. There are 18,000 to 19,000 providers and 40,000 care homes. We know that 2% of providers employ 47% of the sector and that there is a 28% turnover in the sector. We also know that 60% of recruitment is happening internally, accounting for internal movement within the sector, with external turnover at around 9%, which is more comparable to lower paid sector equivalents.

We also know that pay differentials have been eroded in the sector and that currently across the sector 5 years’ experience equals 6p more an hour. The Department of Health and Social Care (DHSC) is also aware that there is currently limited organisational capacity, so to invest in the workforce is limited in terms of time and funding. DSHC will shortly publish a national career pathway for social care. This is a project which they have been working with Skills for Care on.

DHSC will also introduce a revised version of the Care Certificate which will be introduced in the new year. This will be a Level 2 qualification which will be portable and has the intention of reducing the volume of retraining required in the sector. DHSC is also working on options for funding for subsidised training programmes and estimates that £250 million a year spent on retraining which could be used wider in the sector.

The core ambition of the introduction of a revised version of the Care Certificate is to provide a quality assurance process for training in partnership with Skills for Care, to make sure that training is high quality and standardised across the sector.

**Q & A Section**

Nigel Taylor raised concerns around the points that Tom Surrey raised on the repurposing of retraining budgets. CareTech staff have to retrain in line with compliance (35 modules a year around CQC requirements) and Nigel raised concerns that the Care Certificate would act as an additional training requirement rather than a replacement of existing retraining requirements. Nigel also raised that the lack of accreditation was the reason for the lack of recognition for the existing Care Certificate.

**In response to this question Tom Surrey (TS) acknowledged Nigel's point between regulatory mandatory training for CQC and the Care Certificate proposals. However, TS outlined that it was undeniably the case that less than half of the workforce has a qualification, and this contributes to high turnover rates. The intention behind the implementation of a Care Certificate was to ensure a higher quality, more professional workforce.**

Isaac Samuels (IS) raised concerns around training for training’s sake, and not about making sure that people live fulfilled lives. Specifically, IS highlighted concerns about an overdue focus on basic training that doesn't support independence and individual choice.

**TS outlined that the reason the Government has committed to implementing the career pathway is not just about competency and the 'hard skills', rather it’s about values and behaviors. TS outlined that the Government had been working closely with TLAP to go beyond the minimum.**

Nathan Jones asked for timelines on publication of the workforce offers, and when something was likely to be publicly communicated on this.

**TS responded that he was hopeful that the workforce pathway will be published shortly and the Care Certificate will be released in the new year.**

Finn Turner Berry asked what the Department's long-term strategy for the workforce was and why hasn't there been a workforce strategy published as there has been for health.

**TS responded that the Government's long-term thinking on the workforce is a more sustainable, more professional and higher quality workforce, though a subsidized development and career framework. TS outlined that the question of a strategy is much harder. This is a private market with 18,000 individual providers in it. These employers are responsible for the wages, terms and conditions for their staff and operate in a devolved market across local authorities.**

**An additional important point is that it is not this Government's policy to produce a strategy. From his perspective the Government's workforce policy was outlined in the People at the Heart of Care White Paper and next steps document. TS also outlined that ICSs should be developing joint workforce strategies for their local areas.**

Deborah Rozansky asked whether TS had any update on the Market Sustainability and Improvement Funding outcomes including what are local Government doing in the short term for winter and long term local partnerships.

**TS outlined that while DHSC does get reports from MSIF, DHSC will be focusing on the CQC assurance of local authorities. TS said this is a significant step change in local authority performance.**

Nigel Taylor raised concerns about the lack of joined up thinking and asked TS what impact measures and quality assessment DHSC would put in place to measure the impact of the initiatives being discussed. Noting the lack of strategy for 16 - 24-year old's entering the sector.

**TS outlined that the impact measure would be to see a higher level of staff qualified and have higher rates of retention and higher quality of care. On the point of a strategy for 16- to 24-year-olds, TS noted the question of whether we should prioritise 16-24 year olds over the high levels of those in their 50s leaving the workforce, stating that this is a wider Government concern across industries.**

Isaac Samuels recounted personal experience of when training has been offered to PAs, they soon leave the care sector and go and work for the NHS because of the better pay propositions. Jane Cox (JC) built on this concern and highlighted the importance of quality assurance in the delivery of a new Care Certificate and making sure that it’s applicable for the whole sector. JC also highlighted the importance of pay needing to be baked into the funding allocated to local government to ensure the delivery of career progression frameworks.

Nigel Taylor (NT) echoed the need for more funding from central Government outlining that any cost of implementation training over and above mandatory is a cost to the business. NT outlined that we must stop thinking that care has levels like the NHS. We need to look at options to broaden skills as well as linear career progression. We need to look at the career progression for Managers and frontline staff with skills to match future workforce needs.

**In response to these questions TS outlined that pay is difficult for reasons already set out. TS said DHSC are aware that some people leave the social care sector to join the NHS, and around 6% of recruits come from the NHS to the social care sector every year. TS said the uplift to living wage which will impact care workers for an 18 - 20% pay rise over the next 2 years.**

**TS outlined his desire to see ICSs and local systems planning their local system effectively and to see people moving fluidly between the NHS and the social care sector.**

**TS also outlined that the social care workforce is a massive workforce, with over 1.6 million people involved. TS stated that a 10-year vision is an appropriate timeline, and this isn’t going to happen overnight, noting that there are some deep-seated issues that we need to work on.**

**In answer to Nigel's question, TS gave his assurance that when the Government produces the pathway it will be about depth and breadth in equal measure and will feature specialist skills. TS outlined that we do need a workforce that has specialist skills for those living with dementia. TS also outlined that there are areas where we can see the demographics of care need changing and need to be cognisant and alert to that change.**

**Finally, TS outlined, in response to a question in the chat, that it is DHSCs intention / plan to provide funding for Oliver McGowan training for providers and working with NHS England.**

**For more information**

Please contact the Secretariat of the Adult Social Care APPG via, [ascappg@healthcommsconsulting.co.uk](mailto:ascappg@healthcommsconsulting.co.uk)