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A review of the implementation of employability interventions through employers to increase entrants into adult social care in Scotland

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Abstract

This dissertation is a practice-based research project focused on employability interventions that can promote pathways for entrants into adult social care in Scotland. The research considers the policy context, assesses the extent to which fair work is achievable in social care and the connections between key stakeholders delivering employability and the capacity available for improved recruitment processes.

It reports data from 34 multi-stakeholders across organisations in Scotland, through interviews with four distinct groups: employers, policy makers, employability providers and individual employees working in social care. Interviewees include chief executive officer and senior manager level in policy organisations, senior management, HR and recruitment staff from multiple employers. Employability providers who place individuals through employability pathways into adult social care as well as individuals working within the sector.

The research finds a sector facing acute workforce challenge recruiting and retaining staff, due particularly to pay (including equity and increasing cost-of-living concerns), terms and conditions and the reputation and status of the sector. These challenges have been heightened during the Covid pandemic. This has led to the sector adopting a short-term focus on ‘firefighting’ and ‘survival’, degrading the quality of recruitment practices, and limiting long term planning.

The research highlights enablers used to enhance recruitment relating to word of mouth, the manager, organisational culture and effective matching and meaningful conversations pre-employment.

There was low awareness amongst some employers, employability providers and individuals around fair work and the fair work offer. The sector is fragmented in terms

of practice, baseline audits referenced showing limited implementation of good practice principles. Legislation and funding are two gaps that were identified to drive up fair work with low union representation in the sector.

The Covid pandemic has also reduced practical work experience within the sector. Most job candidates apply directly to employers and do not make use of employability programmes. New employability approaches for the sector are shorter and focused upon quick entry and are not attuned to the needs of the most disadvantaged, facing barriers to entry. Common methods used such as informal channels and word of mouth can disadvantage underrepresented entrants, along with the one-dimensional focus on being person-centred through client choice which can exacerbate existing underrepresentation if unquestioned. There is a clear gap observed for a sustainable employability model for individuals furthest from employment.

The research also found a disconnect between the positions of stakeholders, most prominently between employers and policy makers on one side and employability providers on the other, leading to a dysfunctional relationship. This related to factors such as limited confidence in employability programmes due to past experiences and bureaucratic processes. There were concerns raised around sectoral attitudes to disabled and youth entrants, often the target groups for employability programmes.

The lack of traction from intermediary employability providers have left some policy makers and employers to conclude that providers are unable to deliver what they ‘promise.’ There was a common perception of a ‘middle bit’ missing in the employability journey to recruitment. This limiting facilitation, connections in education as well as missing due to the low visibility of employers and lack of energy and passion shown to engage candidates, whilst appreciating some employer types as more

responsive than others. Values based recruitment approaches hold the potential to offer a distinct employability approach for the sector, but this approach is utilised in a modest manner in practice and employers can adopt default criteria of qualifications and experience despite a selling point for the sector being that entrants don't need qualifications.

Recommendations include a need to align recruitment and retention practices more closely together and increased profiling of fair work principles within the sector aligned to commissioning decisions. Inclusive practices and increased diversity data can assist to increase representation in entrant roles. Innovation is restricted and employers have used adaptive approaches through indirect entry routes for individuals via volunteering and alternative roles ranging from domestic, catering and stewards, roles described as holding less 'responsibility.' On the flip side there was some evidence of the sector being used as a route into 'higher' level roles such as nursing and medicine.

As the role of the manager is key to enhance positive candidate experiences, there needs greater consideration in relation to time given for value added recruitment activity. Organisational capacity for policies that are progressive and focus on inclusion are limited due to a prioritisation on other aspects such as covering care contracts and survival. HR resourcing within the sector is constrained and smaller organisations need to consider collaboration and shared resources to enable quality recruitment. The sector would also benefit from realistic job previews and pre-employment conversations to assist its recruitment and retention efforts.

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“But lo! with hardship goeth ease, Lo! with hardship goeth ease;”

[Quran 94:5-6]

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Chapter 1: Introduction

Adult social care is facing workforce challenges on many fronts. There have been continual concerns around the recruitment and retention of workers (Audit Scotland, 2022; Moriarty et al., 2018; Nickson et al., 2008 and Scottish Government, 2022a). Indeed, it is recognised that there is 'immense pressure' affecting adult social care (Audit Scotland, 2022). Factors for this pressure has included increased workload due to demographic changes including a growing elderly population (Burns et al., 2016) who are living longer and requiring care, including through eligibility for free personal care in Scotland. This pressure is also placed upon staff who have faced challenges relating to wellbeing during the pandemic (Bottery, 2021). The social care workforce in Scotland is large with over 200,000 people, distributed across different sectors, such as residential, housing support/care at home and adult day care (SSSC, 2022a), with approximately 135,000 working in adult social care (Scottish Government, 2022b). It is a highly gendered workforce with over 80% of the workforce being female. It is impacted by policy interventions, from national government, as the key funder of social care in Scotland, whilst a large part of the delivery of social care is via local authorities who purchase care as commissioners (as well as provide adult social care themselves).

Concerns have related to lack of planning, continual challenges to recruit and retain, which is linked to issues around pay and status. Recruitment of entrants thus has taking greater precedence within challenging workforce environments, such as adult social care and there is a need for solutions to increase supply at this entrant level. Therefore, there exists a need for ongoing research and practice-based approaches for effective employability interventions, through employers, to increase the supply of suitable labour. This is in the context of policy reviews, with drives towards a National

Care Service (NCS) (Feeley, 2021) as well as work to review and improve fair work within the sector (Fair Work Convention, 2019).

These concerns are combined with employability as a solution that has received interest from a multitude of academics and policy makers, (Boeren et al., 2020; Bredgaard, 2015; Hillage and Pollard, 1998; McQuaid and Lindsay, 2005; Peck and Theodore, 2000; and Scottish Government 2019a). To get to a common conception, however, of what constitutes employability has been difficult due to the wide use of the term (Williams et al., 2016) such that it has become a 'contested concept' (Gore, 2005). That said, there has been a level of commonality in terms of the types of programmes that are utilised, focused upon 'basic skills leading to a qualification', 'rapid re-entry into the workplace', 'subsidised work placements and 'programmes devised for specific client groups' (EU, 2013:51-52). This situation has led to many UK policymakers accepting 'work first' approaches focused on supply side solutions as having 'dominated' the literature (Adam et al., 2017), but being disadvantageous to those furthest from the labour market (ibid) as these programmes focus on those that are job ready. Programmes have also had a minimal role for employers, thus demand side approaches centred on employers have received little attention (Bills et al., 2017).

Despite the potential of employability programmes to meet the workforce gaps within the sector, the literature notes a health and social care sector that has limited use of employability approaches (Bottery, 2021, Cake et al., 2021) despite high vacancy levels (Audit Scotland, 2022). There is a need to understand better the linkages between programmes and recruitment (Gore, 2005) and the interaction between employability intermediaries and employers. A robust delivery model dealing with the gaps may need to offer improved routes or support for underrepresented entrants into

the sector. In this regard there are concerns around workforce gaps in terms of young workers (Montgomery et al., 2017), people from ethnic minorities (Nickson et al., 2008) and disabled workers (SSSC, 2022a).

On the issue of employability there has been attempts to have a greater focus on a framework for policy analysis (McQuaid and Lindsay, 2005). Within this approach there is a realisation of the critical role of employers, as they 'control access to the jobs' (Hasluck and Green, 2007:148). Despite these attempts for a more holistic perspective, much of the policy focus has centred on skills and youth as a means to meet key policy objectives. The position of other underrepresented or disadvantaged groups has had less attention, despite still facing discrimination within the workplace (Equality and Human Rights Committee, 2020).

Clearly, then, there is a need for increased action to address a number of the challenges facing adult social care employers with regard to employability. To meet this challenge, more action as opposed to description (Breaugh, 2008) will be required, a need for more meaningful interventions. This requirement is during a key time for the sector, when new programmes and funding have emphasised 'fair work', 'values' (Scottish Government, 2018) and a 'human rights' approach (Scottish Government, 2021a), although the policy framework in relation to welfare delivery is more constrained due to differences in policy intent between the Scottish and UK governments.

Moreover, the impact of Covid-19 and sustainability beyond this will need to be considered. Whatever route improved processes derive from, regardless of whether it is from fair work principles or reducing barriers for underrepresented entrants through robust and effective employability delivery models, this will require assessment. This

is in a sector that is very fragmented, with over 2,500 providers delivering services within the remit of adult social care in Scotland, varying in size and scale, including public, private and voluntary/third sector organisations (Oung et al., 2020).

1.1 Aims and objectives of the research project

The primary aim of this project is to review the employability interventions through employers that can support an increase of entrants into the adult social care sector in Scotland.

Underlying the research aim are three key objectives:

1. To what extent is there a fair work offer within adult social care employers in Scotland?
2. How connected are adult social care employers with employability pathways that engage underrepresented entrants?
3. What is the capacity available to adult social care employers to offer improved recruitment processes to engage entrants into the sector?

This research was undertaken at an opportune time as the sector was coming out of the myriad of challenges raised by the Covid pandemic with ongoing discussions towards a national care service in Scotland.

1.2 Who were the participants?

The research participants for this project were key professionals and individuals working within adult social care or holding a key role that had a strong link to the sector. These were multi-stakeholders from a range of public, private and voluntary sector organisations as well as key governmental and non-governmental agencies. There were 34 stakeholders in total representing employers, policy makers, employability

providers and individuals working within the sector. Issues covered ranged from challenges in recruitment and retention, enablers used, fair work within the sector, employability pathways, underrepresented entrants as well as the factors around capacity to improve recruitment processes.

1.3 How are the chapters structured?

The chapters are structured as follows. Chapter 2 reviews the literature in relation to the adult social care workforce focused upon Scotland. Chapter 3 reviews the literature in relation to employability and particularly initiatives and interventions that are used as a route to employment, with a concluding section, that includes an analytical framework, that synthesises key elements of the literature chapters. Chapter 4 discusses the research methodology adopted to deliver the research objectives within this applied, practice based research project. Chapter 5 outlines the research findings before Chapter 6 provides a discussion of these findings with analysis of these in line with the research aim and objectives. Chapter 7 concludes with an outline of how the research has met the aim and objectives with key recommendations.

Chapter 2: Literature Review - Adult Social Care Workforce in Scotland

2.1 Introduction

This chapter will critically review both Scottish policy literature and wider afield to understand workforce challenges within the adult social care sector in Scotland. This is within the context of a distinct policy landscape in Scotland and national reviews, notably the Fair Work Convention (2019) and the 'Feeley Review' (2021), influencing subsequent consultations towards a NCS in Scotland. There will be analysis of the drive for fair work and improved job quality within the sector, along with analysis of the impact of the Covid-19 pandemic and policy trends. The chapter will also set out the position in relation to frontline roles such as care assistants and support workers.

Firstly, the chapter focuses on an adult social care sector split primarily between residential care and care at home, both facing acute labour shortages. Within this discussion there is recognition of a need for more research on entrant challenges, particularly from under-represented groups. Furthermore, the chapter highlights the need for research outlining good practice; assessment of the impact of Covid-19 as well as the opportunities brought about by a fair work approach in adult social care. Although any assessment will require an understanding of capacity to deliver improved recruitment processes for candidates. Solutions and analysis can hinge on application of an employability lens; thus, the employability landscape is reviewed in the next chapter. Thereafter a synthesis of the key elements of the two literature chapters is shown in an analytical framework, which is then taken forward into empirical research.

2.2 Workforce Challenges within Adult Social Care in Scotland

There has been a wide and comprehensive literature on the challenges faced when recruiting workers into adult social care (Moriarty et al., 2018, Nickson et al., 2008). This includes literature analysing practical solutions (Eastwood, 2017, Ekosgen, 2013), for example research noting the importance of effective communication, training and high levels of autonomy and flexibility for employees being common amongst employers with high retention rates (Ekosgen, 2013).

Much of the literature has painted the workforce situation as an international phenomenon, a sector facing demographic challenge within western societies (Kroezen et al., 2015). For example, it is estimated that by 2050, 10% of the population in OECD countries will be over the age of 79 (Hewko et al., 2015). This rise in the number of older citizens increases demand for 'institutional and paid' care (ibid:2). Further issues relate to poor pay and conditions (Beech et al., 2019), 'long hours, low wages and status and insufficient professional education and training' (KPMG International, 2014:16).

In Scotland, the adult social care sector has a distinct policy landscape, that has influenced key legislative change. This includes legislation such as the Community Care and Health (Scotland) Act (2002) and the introduction of free personal care for those over 65. From 1st April 2019, this legislation was adapted so that everyone over the age of 16, received free personal care, which includes help with tasks such as continence, dressing and hygiene. However, to access this help, requires an eligibility assessment through the local authority, and there have been concerns raised about waiting times, particularly, for those with 'critical or substantial needs' (Age Scotland, 2019).

Policy changes also included a duty placed on local authorities to ensure best value as laid out in the Local Government in Scotland Act 2003. The Scottish Government, in 2020, updated their guidance focused on seven themes to demonstrate best value, around Vision and Leadership, Governance and Accountability, Working with Communities, Sustainable Development, Fairness and Equality, the Effective Use of Resources and Partnerships and Collaborative Working. The resources theme committed to 'fairness, equity and safety in the workplace …progressive workplace policies and a commitment to best practice in workplace relationships.' (Scottish Government, 2020a). And in terms of partnership, this includes a commitment for the 'local authority … working with partner organisations to ensure a coordinated approach to meeting the needs of its stakeholders and communities.' (ibid). This approach has not always delivered, with concerns raised that those commissioning care, have focused on cost at the expense of other indicators that determine value (Audit Scotland, 2022).

To improve client choice in decisions about their care, key legislation such as the Social Care (Self-directed Support) (Scotland) Act 2013, was introduced. This followed key reports such as the Christie Commission (2011), which looked at public services and noted the need for services to account for principles of public reform that 'empower individuals and communities', 'integrate service provision', ensure 'expenditure on public services which prevent negative outcomes' and increased efficiency through 'reducing duplication and sharing services where possible' (Public Services Commission, 2011:vi). Following this new policy focus or direction given to Scottish Ministers, policy drivers such as Self-directed support have focused on personalisation and client choice in social care. This choice was facilitated through four options in how clients could receive support. Option 1, being a direct payment to the care receiver,

Option 2, a choice for support by the care receiver and arrangements via local authority or agreed third party. Option 3 was the local authority arranging the support and Option 4 was a mixture of the previous three options. However, there has been concern around Option 3, being used as the default option, due to access difficulties and a 'notoriously difficult, over-complicated and bureaucratic' (Audit Scotland, 2022) process.

Away from the policy changes impacting the workforce via direct patient care, policy within the sector has also focused on qualifications and registration, through the Registration of Social Workers and Social Service Workers in Care Services (Scotland) Regulations (2013). For workers in a care at home service, registration started in 2017, with a required registration date of 2020, with those new to the role having six months to complete registration. Registration for care home workers started in 2009. With a requirement for most workers to renew their registration after five years. There was also a qualification requirement set as part of the registration requirements, which for most support workers in care at home and care home services meant, a SVQ Social Services and Healthcare SCQF Level 6 or HNC Social Services as well as practice qualifications in the practitioner or supervisor category (SSSC, 2023).

The largest legislative change, in Scotland, however, was the Public Bodies (Joint Working) Scotland Act 2014, with a statutory duty on the NHS and Local Authorities to 'integrate the planning and delivery of health and social care services' (Audit Scotland, 2018:4) with the formal introduction of Integration Authorities on 1st April 2016. Although the national auditor recognised some progress, evidence of change has been slow due to factors including a lack of 'collaborative leadership and cultural differences' (Audit Scotland, 2018).

Scotland, has key factors that should make their journey to integration easier, such as political stability, political unity on the subject, and the country's size (Ham et al, 2013). Issues that have been raised for successful integration in the past, including the challenge of disparate bodies coming together, whilst staff within social care are not seen to have an equitable voice, with 'acute specialities' having the 'loudest voice' and the public and media equating healthcare with secondary care and hospitals. Public concern about 'quality of care for older people or for people with mental health problems and learning disabilities' does not have the same resonance as issues related to waiting times and elective procedures and surgery (ibid). The Scottish Government have noted 'future work will look at areas where there is benefit in collaborative and shared approaches to recruitment practice' (Scottish Government, 2019a:29), very much work in progress.

There has also been a shift within the sector to pay a Real Living Wage. The Scottish Government announced in 2022 a 'minimum rate of pay for adult social care workers delivering direct care in Scotland … in commissioned services, in the third and independent (private) sectors.' (Scottish Government, 2022c), from April 2022, at £10.50 per hour due to increased funding announced in the Scottish Budget of 2023-24, increasing to £10.90 per hour from April 2023. The level of funding has not been sufficient however to stop a recruitment and retention crisis and put pressure on unpaid carers to take up the shortfall in care packages to look after their family and friends. As acknowledged by the Scottish Government in their own recent National Carers Strategy, 'recruiting and retaining social care staff have a significant impact on the delivery of care and support and inextricably on the level and intensity of the caring role for unpaid carers.' (Scottish Government, 2022d:29). Such is this downward

pressure, that there are estimated to be nearly 900,000 unpaid carers in Scotland Carers UK (2022), who face risks such as poverty and mental health difficulties.

Moreover, the Scottish policy landscape has been influenced more recently by two reform programmes that will be assessed in further detail, the Fair Work Convention and the Feeley Review.

2.2.1 Fair Work Convention

The Scottish Government in 2014, constituted a review group chaired by Jim Mather, to review progressive workplace policies and practices in Scotland, called the Working Together Review. This made 30 recommendations, including that:

> A fair employment framework should be developed through a stakeholder body … and it should be promoted across private, public and third sectors … The Scottish Government should establish a stakeholder body with representation from trade unions and private, public and third sector employers. The body should be supported by relevant experts in the field of industrial relations and operate with an independent secretariat.

(Scottish Government, 2014: p.50 - 60)

The review promoted a policy focus for fair work and its active promotion within Scottish Government. The review made clear the role a new body should have, around developing and promoting a fair employment framework, promoting good practice, with the ‘potential to extend collective and sectoral bargaining in Scotland’ (Scottish Government, 2014: 60), the review did not challenge the Scottish Government to give this body any statutory footing in the delivery of this fair work framework.

In Scotland, the Fair Work Convention was set up in 2015 and is an independent body that provides advice to Ministers. It developed a framework, with a definition of Fair work around 5 key principles as highlighted below.

> Fair work is work that offers **effective voice**, **opportunity**, **security, fulfilment** and **respect**; that balances the rights and responsibilities of employers and workers and that can generate benefits for individuals, organisations and society.

(Fair Work Convention, 2016:7).

Since its inception the Fair Work Convention has taken a keen interest in social care work due to concerns about the situation of its workforce. This interest led to an 18-month inquiry and stakeholder engagement including the experiences of front-line workers. This review noted concerns around 'recruitment and retention'; 'undervaluing of social care work' particularly in comparison to the health sector; a 'lack of voice and visibility'; 'low pay' and insufficient access to training for some. There was also the issue of pressures and uneven balance of rights for workers who deliver the personalisation agenda via self-directed support. (Fair Work Convention, 2019). It did note some positives in relation to client choice and staff autonomy, however this choice was noted as placing downward pressure onto workers (ibid), stating that the 'funding and commissioning system makes it almost impossible for providers to offer fair work.' (ibid:7).

The report made a number of key recommendations, primarily the setting up of a national body to give voice to workers and 'provide greater coherence of approach in a sector characterised by multiple employers and low levels of unionisation' (Fair Work Convention, 2019:37). Advocating setting minimum standards relating to pay, hours,

supervision, training, and development (ibid) and the delivery of the fair work principles. The work by the Convention has been welcomed, with fair work being described by the Head of CIPD in Scotland as ‘central to achieving inclusive growth and improving job quality and productivity for all employees and employers.’ (CIPD, 2021a).

The Scottish Government refreshed their Fair Work action plan, in late 2022. In terms of social care, they referenced the work of the Fair Work in Social Care Group in progressing fair work, including the two pay uplifts in the year (Scottish Government, 2022e). The action plan did note a listening process in developing a NCS to ‘include’ fair work. However, it recognised key policy goals were required including, ‘improvements to pay, terms and conditions, delivering effective voice – including through sectoral bargaining, supporting workforce, embedding ethical commissioning and Continuous Professional Development.’ (Scottish Government, 2022e:57).

This lack of legislative drivers for the Fair Work Convention to address Scottish Government targets and improvement has been a limitation in the body being able to effect change. Unlike other bodies that were set up, such as the Poverty and Inequality Commission, which was created from the Child Poverty (Scotland) Act 2017 to tackle Child Poverty. As well as setting targets relating to child poverty by 2030, this gave the Commission, powers around monitoring progress, including accessing the relevant information it needed to carry out its duties. Although some have discussed soft regulation and levers that the Scottish Government can use such as ‘public procurement’ and ‘voluntary charters’ (Ahmed et al., 2022) as catalysts, there has been criticism of this approach.

Most notable criticism has come from Professor Gregor Gall, writing for the Jimmy Reid Foundation. He suggests that, ‘given that the Scottish Government is intent upon pursuing a voluntarist approach to achieving ‘fair work’, it should at least commit to periodic assessments of its plan’ (Jimmy Reid Foundation, 2016). More recently, the same author has argued that the ‘SNP Scottish Government believes it is sufficient to create a voluntary framework for labour and capital to operate within and then let them get on with it as per a classic ‘collective laissez faire’ perspective of minimal state intervention.’ (Gall, 2021:24). Thus he believes there is a danger that the Fair Work Convention, is tokenistic and at the periphery of any change that will occur.

The Convention, itself whilst recognising the updated Fair Work action plan and the Scottish Government’s aim to be a world leading fair work nation by 2025, did realise in early 2023 that it is still continuing its call to ‘promote and push for the implementation of the Social Care Inquiry’ (Fair Work Convention, 2023) since 2019, despite calling its recommendations urgent. Its Co-Chair, Mary Alexander in an evidence session to a Parliamentary committee, noted her frustration, ‘three working groups were formed to look at the recommendations and how to take them forward, and they are still going … we started our inquiry on that in 2017, things were really bad; they are still very bad now, and everybody says that we need to do something urgently to intervene. We know what the issues are in social care—low pay, stress, people having to do unpaid overtime, zero-hours contracts and a lack of training, supervision and support’ (Economy and Fair Work Committee, 2022:8-21).

Recent research has also noted ‘institutional stasis about who owns and engages with progressing decent work’ (Gibb and Pautz, 2023:34). These same authors suggest a need for a cultural change to get beyond this statis. They also argue that a case can be made on morality if not business grounds around good jobs and the benefit to

organisations, transcending disputes around reserved versus devolved government powers on employment. Beyond this statis, any research will need to demonstrate that it would be worthwhile to engage with the sector, not only to understand how far these discussions permeate within employers and employees but also in terms of levels of awareness of Fair Work principles and how they can create the conditions for improvement.

2.2.2 Feeley Review

Another key review undertaken related to the sector, with key implications for workers, the Feeley Review. On 1 September 2020, the Cabinet Secretary for Health and Sport, Jeana Freeman, announced that, 'I have commissioned an independent review to examine how adult social care can be most effectively reformed to deliver a national approach to care and support services' (Scottish Government, 2020b). In relation to the workforce, she noted that whilst she believed that care staff were feeling 'more valued' there was more to be done to ensure 'positive experiences are the norm' (ibid). The review was led by Derek Feeley, an ex-Chief Executive of NHS Scotland, with an advisory panel of six members, made up of current and ex-politicians, an external expert, ex-civil servant, and members from the charitable and independent sectors. Although the Cabinet Secretary changed in May 2021, the incoming Minister committed to continue with the report recommendations and intended reform.

Officially called the 'Independent Review of Adult Social Care' the report was released in February 2021 and made many recommendations, most notably the setting up of a National Care service. The Scottish Government agreed to the report and started

wider consultation on creating a ‘comprehensive community health and social care service’ (Scottish Government, 2021a).

The report also made wide reference to a workforce that was ‘undervalued’ disadvantaged and ‘highly gendered’ (Feeley, 2021). For example, Feeley (2021:80) notes that if most staff were male, then the sector would not be ‘marginalised and undervalued as it is’. Furthermore, it noted recruitment challenges and low investment in training and development. Scotland has a workforce regulator, also the improvement body, the Scottish Social Services Council (SSSC). It suggested that current issues in workforce relate to the inability of bodies such as these to drive improvement (Feeley, 2021). It was, though, acknowledged that the sector’s status amongst the populace is less favourable than the NHS, and this recognition is regarded as a determining factor for its predicament.

The review also agreed the Fair Work Convention’s recommendations and areas for progress. The report noted that the workforce has not received the ‘value’ they deserve from government and providers, despite delivering a critical role to vulnerable members of the public. Consequently, it was argued that the workforce requires to ‘feel engaged, valued and rewarded’ (Feeley, 2021:5). Although there were omissions in the report, such as no discussion of the financial framework for delivery of the aims or the implication of IT innovation on the sector now and in the future. In response to the report, the Interim Controller of Audit Scotland commented, whilst appreciating the need for change, that ‘demand for care at home and giving people more choice and control over their own lives is also rising. But the new models of care required to tackle these trends – involving the public, private and third sectors – will cost more money and it’s not clear how they will be funded’ (Clark, 2021). The review, nevertheless,

significantly brought forward a key policy agenda in Scotland, with implications for the sectoral workforce.

Although the Feeley Review also faced criticism, from bodies such as the Convention of Scottish Local Authorities (COSLA), around costs and the centralisation of power away from local authorities (Learmouth, 2022). Others have been more critical still of the process for a NCS noting the review was a ‘deliberate attempt to undermine the role of Trade Unions’ (Dalzell et al., 2022:33) through worker representation, although this is a potentially simplistic view in a sector characterised by a high number of independent and voluntary providers and low unionisation rates.

Discussion of those with lived experience within social care, noted a feeling that the review missed opportunities, notably in not progressing calls for the nationalisation of social care and the current variance in conditions, described as a ‘postcode lottery for staff’ only thought to be resolved by nationalisation (Scottish Government, 2022f), which it hoped would get rid of these differences. Within the same discussions there was also support for a Fair Work Accreditation scheme for employers, although the implementation and delivery model for this is unclear.

Thus, both the Fair Work Convention report and Feeley Review are important to outline as areas of policy reform and for context. Whilst these areas of work have also heightened the challenges that are facing the sector and more so a desire for fundamental improvement in rights in line with fair work principles as well as larger scale transformation and structural change that is needed to improve the position for the workforce. The focus will now shift to this workforce within adult social care.

2.2.3 Scottish Workforce

In Scotland, it is estimated that 134,640 people work in the adult social care sector, with the private sector having the largest share of workforce at 44%, followed by the voluntary sector at 34% and public sector at 22% (Scottish Government, 2022b). The median age of the social care workforce in general, is 47 in the public sector and 40 years old in the private sector. With 15% of workers being male and most (83%) being employed on permanent contracts. (SSSC, 2022a).

Research has highlighted that 'Scotland lacks a 'culture of care' (Pautz et al., 2020:5) within a sector that supports many who are from the elderly population. Pautz et al link this point to wider ageism within society. The view is not dissimilar to the work of Diamond (2012) with 'traditional societies', with the writer noting the predominance in western societies to equate 'care for their aged depends on how useful old people are' (p.221). Demonstrated by retirement homes where individuals become 'socially miserable while physically healthier' (p.236). Whilst, even within 'developed nations', others such as Goodhart (2021), have compared the UK unfavourably to countries like Japan, where more innovative solutions ('happiness centres,' 'retiral villages' and 'digital technology') have been implemented, partly due to increased funding via social insurance contributions.

Thus, it is important to distinguish between societal issues and where pockets of improvement can lead to scalable change beyond current structures (Clark, 2021). Similar, to the earlier comment of the Fair Work Convention (2019), noting the fundamental difficulty in offering fair work, may result in a case for change or intervention within the wider context of a Scottish Government advocating a 'human rights' approach (Scottish Government, 2021a). However, real time challenges

remain, as succinctly put by a company owner, ‘we can’t attract enough quality staff, and we can’t keep them’ (Bunting, 2020:177), rather than trying to change society, it may be more prudent to look for enablers for better practice.

As noted earlier, conditions for workers within the sector are of concern, as shown in previous studies, with ‘work intensification’ including ‘continual demands for providers and workers to do more with less’ (Cunningham et al., 2015:10). Although there is also the possibility of self-fulfilling prophecy traps within the literature, as workers have also noted the positive nature of the work they do, noting the difference they make, support received and enjoyable nature of the job (Scottish Government, 2021b). Although it is undeniable that there are high labour turnover rates, previous research noting figures as high as 30% (Moriarty et al., 2018).

The scale of employment challenges needs to be recognised, there have been positive moves as discussed, such as the implementation of the Scottish Living Wage, through national funding to local authorities, although stakeholders have suggested this is still too low, with some within the sector suggesting £15 per hour as a more appropriate wage (Feeley, 2021). All social care staff in Scotland, unlike England, must be registered. However, this drive for registration has not been the driver for improved pay, something advocated by authors like Dromey and Hochlaf (2018). There have been policy moves, the ability of the sector to resolve workforce sustainability issues has been limited and areas of concern have persisted, something that will be discussed further below.

2.3 Areas of Concern

A key area of challenge has been **workforce planning** and the inability to plan sustainable services. Thus (Feeley, 2021:82) noted ‘There is currently no national

oversight of workforce planning for social care in Scotland. With many different employers in Local Authorities and the third and independent sectors'. Workforce planning, then, can be viewed as a 'finger in the air' (Scottish Government, 2007) approach. That said, it needs to be recognised that planning itself cannot magic up staff when vacancies or turnover is high. In a study of the recruitment challenges facing voluntary sector social care employers in Scotland, Nickson et al. (2008) recognised this as a particular challenge with one participant in the research, a HR director of a social care provider, noting 'if you have exhausted the pool, what is left? Do you really want what is left anyway?' (p. 27). The nature of the job, requiring personal care and supervision of other adults is a critical factor (Scottish Care, 2017) in getting sufficient interest from job candidates. Whilst personal care, is not the only task provided, it is a key task needed for individuals who cannot provide it for themselves, whether due to ill-health, disability, or age. Moreover, it is a sensitive task and one that requires a certain individual with the ability to provide this in a dignified manner, it is difficult to plan for this. In England, the workforce improvement body, Skills for Care, have developed a 'Workforce Capacity Planning model' (Skills for Care, 2014), which they identified requires the consideration of 'prevention, integration and wellbeing' (ibid:21). Although this was responding to legislative changes, notably the Care Act (2004), there is limited information on its implementation since its inception.

In Scotland, additional issues in planning includes operational issues such as the 'time lag' in getting safeguarding checks, via Disclosure Scotland (Nickson et al., 2008), which can mean workers have moved elsewhere. Annual budgeting processes of funders such as the Health and Social Care Partnerships can limit longer term planning. This can be particularly impactful on a sector, which is facing challenges on various fronts, including demographic challenge.

As noted earlier, social care is a **highly gendered** workforce with a majority of females stereotyped into employment in what is a low paid and demanding role. There have also been concerns that males are 'put off by stereotypes' and 'gender-based stigma' that comes with being a social care worker, combined with school level career guidance which pushes boys to 'masculine' roles (Apostolides, 2017).

A younger cohort of workers has also been advocated as a recruitment strategy (Scottish Government, 2019a) with providers focusing on attempts to increase the number of younger workers (Fife HSCP, 2019). SSSC offer a range of resources and materials, including the promotion of the foundation in Modern Apprenticeships (Scottish Government, 2019a) aimed at younger workers. However, a younger workforce being attracted to the sector as a future pipeline may be challenging (Montgomery et al., 2017). Persistent concerns allude to younger staff having to 'accept 'flexibility' and 'precarity' both in working conditions and career progression' (ibid: 414). Others such as Butler et al., (2014) observed a sector used by younger workers only as a short-term option.

Research has shown that ethnic minorities are under-represented in the sector (Nickson et al., 2008), with more recent research also noting a difficulty in appreciating the true picture due to limited workforce data (Equality and Human Rights Commission, 2022). There has been limited research on the reasons why there is a disproportionately small number in Scotland. The literature is also limited on those with disabilities, both areas affected by workforce data issues. The Scottish Social Services Council (SSSC) stating the difficulty of interpretation is due to the number of 'unknown responses' as well as the impact of Covid, particularly due to easements to facilitate temporary workers in the sector during the pandemic. The data classifying the percentage of staff ethnic classification as 0% mixed, 2% Asian, 1% Black and 74%

White in most recent figures, with a high unknown rate of 23% in social care and up to 32% in the housing/Care at Home subset (SSSC, 2022a). In terms of disability, they have noted a 2% disability figure, with an unknown figure of 17% across social care, but as high as 23% in Housing/Care at Home (ibid). The low figures for disability has combined with ongoing concerns raised from practitioners around the presence of people with disabilities in frontline roles (Walton-Cole, 2020).

Any future research will need to account for these under-represented groups to increase understanding on why this is the case. Linked to the challenges of engaging key groups, another area that has had prominent visibility as a challenge relates to **Pay** offered to entrants, which is viewed as 'a major recruitment, retention and worker motivation factor' (ILO, 2018:177). The literature does note a need for valuing of the workforce, and pay being a determinant of 'the sense of value' (Feeley, 2021:82). This national review in Scotland proposed an independent national job evaluation, to 'establish the true value of the skills, competences and responsibilities of social care.' (ibid). These issues of pay are also borne out in previous studies, such as Cunningham et al (2015).

Some authors are optimistic believing that 'supply and demand' (Goodhart, 2021:23) will improve pay eventually. Outlining the moral justification, due to the 'emotional,' 'physical' and 'intellectual' demands placed on workers (Goodhart, 2021). Although the same author did conclude that an economist would respond as to why carers are paid so little, as being, 'because almost anyone can do it!' (ibid: 215) linking pay to a 'qualification threshold' (ibid).

This latter point relates to an ongoing area of concern, the **training, and qualifications** within the sector. This is a contemporary challenge that will become

more visible particularly with registration in Scotland tied to achieving certain qualifications. Offering training in a role working with vulnerable clients is important to improve standards and reduce risk, there are implications upon those working in the sector who are unable or unwilling to meet the qualification requirements. As found by Scottish Care (2019), 'some staff have opted to leave before a formal suspension process was implemented emphasising that a proportion of workers are leaving the sector entirely at the stage of qualification cut-off dates' (p.20). As bodies have recognised, whilst registration is key for the image, quality and safety of the profession, the requirement to be qualified needs an ethos of flexibility and support to enable registrants to demonstrate their skills, amid a fear of losing staff in a recruitment and retention crisis (Scottish Care, 2019). On the other side, as a lever to drive new people or enhance the reputation amongst entrants is unclear. As well as training and qualifications, other situational factors relate to the level of flexibility that employers can offer its workers.

Flexibility is regarded as a determining factor in why many wish to work in adult social care and particularly care at home services. Previous studies have noted this as a lever for increasing supply, offering greater flexibility over hours, tasks, and client load (Butler et al., 2014). Although Timewise (2017) noted the mismatch in terms of employer's noting that they offer flexibility, versus a reality of shifts that prioritise employer or client needs, creating what has been described by others as 'one sided-flexibility' (Fair Work Convention, 2019). The study by Nickson et al., (2008:29) noted HR directors stating that staff staying shortest were 'those with unrealistic expectations of work in the social care sub-sector…people who stay the longest tended to have the right personality and attitude'. To increase retention, whilst also offering increased

possibilities for flexibility within existing policies and procedures to align to worker needs, may require wider support or union interventions.

Although public sector staff have good levels (IPPR, 2018) of **union membership**, for those in the independent/third sectors and private sectors in particular, membership is low. Social care is a 'challenging environment' for unions to operate within, with low collective action. A key factor for this includes the 'fragmented' nature of the sector (Fair Work Convention, 2019), which makes collective bargaining more difficult. However, there have been examples of what can be achieved by a unionised workforce in Scotland. Examples include Dundee City Council withdrawing plans to change workforce shift patterns due to the threat of industrial action by three unions (Dundee Evening Telegraph, 2019). In a similar vein Glasgow City Council agreed a £548million equal pay settlement with unions impacting approximately 16,000 staff including care workers (Taylor, 2019). Although, both are public sector examples, union presence is also prominent in some (larger) social care charities. However, this has not always led to positive relations, for example, the case of social care charity Cornerstone de-recognising Unison, leading to a long running legal dispute that was resolved by a voluntary recognition agreement (Martin, 2020).

It is difficult to get a true sense of how well staff feel involved in decisions, whilst NHS Scotland conduct an annual staff survey (iMatter) it hasn't fully extended to the Health and Social Care Partnerships yet. There have been focus groups and surveys conducted by the Fair Work in Social Care Group, over 2022 and the findings of these may give greater insight. The independent analysis of the NCS consultation found a need to make workers feel more valued, with a 'majority of respondents (87%) in agreement that a national forum should be established to advise the NCS on workforce priorities, terms and conditions and collective bargaining which would include

workforce representation, employers and Community Health and Social Care Boards … to give employees a voice and would make the sector more attractive to recruits and increase engagement of staff.' (Scottish Government, 2022g:12). Others such as the Scottish Trade Union Congress, have called for collective bargaining via 'trade union recognition' (ibid).

A further issue is that of **international recruitment** and the fall-out following Brexit, with the UK having formally left the European Union. Migration is common in global health, '… driven by working conditions and income differentials across countries. Skills recognition and certification present major obstacles for migrant nurses." (ILO, 2018:xxxix). There have also been concerns about exploitation and conditions faced by migrant workers, thus a call for 'decent work' to encompass vulnerable workers that may migrate from the 'Global South' to OECD countries in the search for employment. Bodies such as the ILO have focused on decent work, via Value Chain Development, to 'identify constraints to and opportunities for increasing value chain performance, so that interventions can be designed and implemented to address constraints and improve outcomes' (ILO, 2021:9). But done in ways that are ethical and in line with good practice principles of International healthcare recruitment, that does not burden weak healthcare systems in developing countries, using voluntary codes such as 'The WHO Global Code of Practice on the International Recruitment of Health Personnel'.

The Migration Advisory Committee (MAC, 2022) found from their research in the sector that in terms of migrant social care workers, 'some had sought out their jobs because they had a vocation and a desire to work in the sector (or were already studying in a related field), others had initially gravitated towards social care because they wanted to work in the UK, and knew that social care was in demand, and was a comparatively easy sector for migrant workers to move into.' (p.32), with 'most migrant

workers, including those from the EEA, who start a job in social care were already in the UK.' (p.33). They argued for the Skilled Worker route to facilitate international workers into the social care sector indefinitely. But due to the addition of care roles to the shortage occupation list in February 2022, there is limited data released on the numbers using these new routes and the impact of the earnings requirement of £20,480. This relates to a wider point about data limitations, particularly 'population data … difficult to do without imposing unreasonable administrative burdens' (Office for Statistics Regulation, 2020:23), particularly when 'huge amount of social care activity takes place beyond the scope of public sector service settings.' (ibid).

Although international recruitment and the creation of a diverse workforce has been viewed as a solution to meet demands (Read and Fenge, 2019), this has become incredibly challenging in a post-Brexit environment. Although as Read and Fenge note, workforce issues were in existence prior to the 2016 referendum. Moreover, regardless of issues such as nationality, evidence points to the fact that those from the lowest socio-economic background who invariably provide the workforce, are 'least likely to receive adult skills investment' (Social Mobility Commission, 2019:7) thus are disadvantaged on multiple fronts. There have been moves with care worker and nursing assistant roles added to the shortage occupations list as discussed. However, at the same time the UK government with responsibility for UK wide visa policy, have also told employers to prioritise domestic workers, as Kevin Foster, minister for future borders and immigration commented.

> Engaging with training, apprenticeship programmes and schemes to get people back to work, especially when many UK-based workers face an uncertain future, should be the first recourse for employers with vacancies, rather than viewing immigration as the primary solution (Savage and Tapper, 2021)

However, it is important to recognise the more positive approach to immigration within Scotland (McCauley, 2021). For example, a Scottish Minister Ben Macpherson was critical of the Health and Care visa excluding social care workers. (Scottish Government, 2020c). Although, a report by Reform Scotland also noted that Scotland needs to ensure that increased immigration as a strategy is not at the expense of and avoids current challenges faced within the country in relation to 'education', 'skills training', 'wages' as well as the 'conditions' employees face (McCauley, 2021:3).

Adult social care has tended to rely on traditional **recruitment methods**, consisting of the 'classic trio' of selection via application form, face-to-face interview, and reference checking (Cook, 1993). Although it has been long noted that these methods are outdated or 'ill-equipped' for the skills necessary in care work (Bunning, 2004). The use of digital apps as a method to refer and recruit staff may warrant discussions, for example apps used to refer staff (Jackson, 2019), linked to empirical research showing employee referral schemes as effective recruitment tools (Eastwood, 2017). The efforts made by organisations at the recruitment interface seem limited. There have been examples of organisations starting to take the initiative and give monetary rewards to workers signing up. Such as the example of the largest care home provider in Scotland, Balhousie Care Group, offering a '£1,000 signing on bonus to all newly recruited senior care assistants' (Swindon, 2021). Thus, there remains a broader point about the need for an understanding of capacity within a fragmented sector for change, where collaboration and coordination among providers is unclear, if not non-existent.

Scottish Care (2021) in their report following a survey of providers within adult social care found that the most common forms of job advertising by providers was through the job site 'Indeed jobs' (82.6%), 'Social Media' (82%)' and 'Word of Mouth' (77.3%) (Scottish Care, 2021). But noting as an aside, many noted no method was working. In

a section entitled, ‘Recruitment Sustainability’, they found that most providers could offer permanent contracts and full-time hours, there were key concerns around sustainability of care services (44.2%) (ibid). The report, when discussing whether providers could reimburse travel costs, showed the levels of variance, 17.8% strongly agreed and 23.4% strongly disagreed (ibid). These figures were not categorised by employer type.

There has been guidance for the sector, including ‘Safer Recruitment Through Better Recruitment’ (2016) led by the Care Inspectorate and Scottish Social Services Council (SSSC) updating guidance previously set in 2007. However, this has focused upon legal, regulatory, and statutory requirements for employers. Although there was an appreciation of a need for ‘Innovative recruitment’ including ‘different routes to recruitment.’ It was suggested such innovations included the use of ‘social media such as LinkedIn, Twitter, and Facebook; websites; shopping mall, open days, local window advertising, organisations who help long term unemployed back into work and school leaver programmes’ (Care Inspectorate, 2016:15). The extent and capacity for organisations to offer a fuller or quality-based recruitment process whilst dealing with all legislative requirements are unclear. The SSSC has produced, working with other organisations, a set of common core of skills, knowledge, and values to recruit workers. The overarching values they have noted are ‘Respect, Collaboration, Participation and Dignity and Empowerment’ (SSSC, 2021b). There have been suggestions to assess these elements during an interview by including service users in the process. However, assessing values during a short-observed activity such as an interview may not be the best approach.

Vacancies are promoted via local authorities using My Jobs Scotland and independent/private sector providers using job sites such as Indeed, Good Moves and

the Gov.UK find-a-job site. Caretocare.scot is a website produced by the Scottish Government containing guidance, information and resources for the sector including stories of those working in the sector, however it does not advertise jobs or link to job opportunities, unlike in England with the 'Every day is different' website by the Department of Health & Social Care. Although in Scotland, voluntary sector providers have come together to promote job opportunities within the sector, called 'Because Scotland Cares,' but the current website beyond pointing to employer websites of employers that are part of the 'consortium' has a limited role, particularly its social media interface which is not regularly updated.

There are invariably going to be other challenges, and these are borne out from the literature, such as **transport** and the need for drivers (Moriarty et al., 2018). Previous research has shown that job candidates were willing to spend over one hour travelling for a job (McQuaid and Lindsay, 2002) with challenges relating to access to private transport.

Thus, when faced with transportation challenges (and other barriers), the onus may have to be on a compromise or increased action from the employer and an analysis of what approaches can be advanced at the demand-side – factors assessed in the next chapter. For example, employers can potentially take the lead by looking at increased team approaches by community or geography (Timewise, 2017) or by solutions such as shared transport or pool cars.

This chapter then has, to date, highlighted low pay as a fundamental issue (Butler et al.,2014). However peripheral issues in the literature linked to demographic factors, workforce planning, transportation, flexibility, training, and development, reputation, recruitment practice, union status and international recruitment post-Brexit cannot be

ignored. Solutions need to encompass good practice, policy solutions including the potential of segmentation by sector.

There has been evidence of more ‘compliant,’ (rather than commitment based) approaches used within the sector, the impact is unclear. For example, it is an offence to exercise social care without being registered (Oung et al., 2020), with workers having to be registered within six months of starting (extended to 12 months as an easement during the pandemic). The Scottish Government with devolved power for social care, did include social care staff in bonuses of £500 to full time staff in recognition of ‘their “extraordinary service” during the coronavirus pandemic’ (Christie, 2020) so there are indicators of recognition for social care staff.

However, these and other measures may be limited in terms of impact. Adult social care is viewed unfavorably, particularly in relation to a better regarded and funded health care service.

2.4 Policy

The Scottish Government has not been afraid to progress policy and legislative change within social care as seen by earlier examples and ongoing reform (Feeley, 2021; Fair Work Convention, 2019) and uplifts in pay and recognition rewards. There are areas of policy dissension, however, particularly around policy drivers to increase workers. For example, who should recruitment approaches be targeted at? There has been a focus on a younger workforce but those over 50 risk being ‘locked out of the labour market’ (Foster et al., 2014). Rather than age, there may require a focus on ‘quality and professionalism’ (KPMG International, 2014) and increased investment in areas such as staff training and support to recruit staff on values (ibid). Where employers ‘play a more active role themselves in the design and implementation of

policies.' (Orton et al., 2019:515). Whereas welfare policies have prioritized job entry/re-entry 'underpinned by a 'work first' benefit regime that is complemented by tax and benefit policies designed to 'make work pay' (Finn, 2016:74). In these, employers are at the periphery, whereas there is the potential for greater analysis within underserved sectors such as adult social care. This may include an analysis of the most impactful policy interventions to improve practice.

Research analysed earlier shows that there are key categories of people in the labour market where effort would be welcomed. For example, men (Nickson et al., 2008) and older workers (Manthorpe and Moriarty, 2009). The OECD noted the responsibility for government and organizations to offer 'targeted policies and services to the most vulnerable youth populations' (OECD, 2020:3). Those with experience of care but no employment history (Parry et al., 2005) may also offer a source to mitigate recruitment gaps. However, as noted earlier increased pay may be the ultimate gap to address.

Whereas a focus on young people as a source to mitigate gaps remains questionable. There is the notion of 'cultural capital' where people go into caring occupations not as a 'positive decision' but due to 'constricting cultural and financial limits' (Hebson et al., 2015: 319). Thus, when talking of young people, there remains a question as to whether this approach effectively pigeonholes young working-class women, for example, as they are perceived as 'unlikely to fail' (ibid) within the role. Status is an underlying factor, as described by a carer, it was, 'embarrassing – to be educated and middle class and to have descended to the level of carer.' (Bunting, 2020:196).

The chapter to date has pointed to a conceptual focus upon levelling up the adult social care sector to align it closer in standards to the health service in Scotland, but this is far off. Although some would say the health service has also faced challenges, such

as its focus on New Public Management approaches around measurement and key performance indicators (Travers, 2007) including within Scotland (Smith, 2018) and the ‘heavy burden of administration’ (Verhaeghe, 2012) with targets leading to ‘staff at all levels adapting their behaviour, ceasing to do things that ‘don’t count’’ (ibid:135). This is, despite the Christie Commission on public services stating a need for a more accountable system to the needs of individuals and communities, away from that ‘characterised by a short-termism that makes it difficult to prioritise preventative approaches’ (Christie, 2011: viii).

What authors may ignore though is the opportunity as promoted by management consultancies, for ‘more value, efficiency and productivity … flexible right-sizing may be the better option’ (KPMG International, 2016:3) to engage entrants, which in effect would mean interventions such as reduced hours, furlough, and unpaid leave. Although potentially a more palatable pay-off of ‘home working’ would not work in labour-intensive roles such as a care worker. This factor can be observed during the ongoing Covid-19 pandemic, where social care services were called upon around the world to care for and support clients and residents, putting themselves at increased risk of infection and ill-health. The ongoing impact of the pandemic is worth further analysis to understand its influence.

2.5 The Impact of Covid-19 on Adult Social Care

The challenge of increasing workforce supply comes at the time of the Covid-19 pandemic. Noted by some as the ‘biggest challenge the health and care system has faced in living memory’ (Charles and Ewbank, 2020). Others, state that it is too early to identify the impact and legacy of Covid-19 (Buchan et al., 2020, Hite and McDonald, 2020).

Despite this debate, Audit Scotland have recognised a need for a different approach, whilst noting the Scottish Government publication of a national health and social care integrated workforce plan. They stated that, ‘ways of working and roles in the NHS and social care will need to be different after the Covid-19 pandemic’ (Audit Scotland, 2020:25), requesting more direct involvement in planning by the Scottish government.

An emergency setting has meant the sector has had to introduce significant changes. The Care Inspectorate, which is the care regulator for social care, introduced a new notification system for staffing, where providers had to inform the regulator on a green, amber, and red notification system, where red means ‘you no longer have the staffing levels/skills mix to meet people’s need.’ (Care Inspectorate, 2020). In Scotland, care home related deaths have been a key issue during the current pandemic. With 2,242 deaths being reported to a crown office unit in mid-January 2021, with a majority being related to care homes (Picken, 2021), ongoing investigations including an inquiry that was announced by the Deputy First Minister in December 2021, called the Scottish Covid Inquiry, and led by a serving judge.

What has been clear is that solutions, albeit wider than social care itself, are being advocated, at both the short- and long-term level, to improve recruitment and retention, particularly in the current Covid-19 context. These range from short term interventions related to pay, flexible working, wellbeing, retention, and career pathways to longer term interventions focused on culture, staff experience and tackling discrimination (Charles and Ewbank, 2020). The authors relate pay to a short-term issue, within adult social care, when linked to job quality it may be a more fundamental concern.

Thus, can a job be sustainable when the job has poor terms and conditions, can the intrinsic rewards overcome these extrinsic factors? Consequently, it is worth returning

to the issue of fair work and job quality and assess its potential to transform the adult social care sector.

2.6 Job Quality and Fair Work within Adult Social Care

One, intractable problem for social care has been the issue of job quality and fair work within social care, with the Scottish economy reliant on too many ‘poor jobs with poor working conditions’ (Fair Work Convention, 2019:10). Key elements to determine quality include factors such as level of pay and benefits; level of job security; amount of flexibility allowed; participation in decisions made; autonomy and control and the ability to use and develop skills (Findlay et al., 2013). Although objective criteria such as pay can be used to determine job quality, there is also subjective criteria which makes it difficult to determine what a good quality job is (Warhurst and Wright, 2020), with it consisting of extrinsic and intrinsic factors (Cunningham et al., 2021).

A survey of 1,000 social care workers showed that 81% of workers would be ‘forced’ into work if ill due to entitlement to low levels of Statutory Sick Pay (SSP), £95.87 per week (GMB, 2020). Research by Coulson and Bonnar (2015) has shown that increased pay leads to improved productivity and lower staff turnover. Researchers have found that pay directly correlates with job quality, as labour cost cuts lead to ‘lower job quality, including lower pay and worse conditions, fewer resources, less discretion, and fewer opportunities’ (Burns et al., 2016:993) increasing work intensification (ibid).

Previous research conducted with 1,500 low paid workers across a range of sectors in Scotland prioritised ‘decent hourly rate’, followed by job security and paid leave (Stuart et al., 2016). The Taylor Review, which looked at low paid work, noting pay as a factor in job quality they also recognised that ‘fulfilment, personal development, work

life balance or flexibility … just as important to many people' (Taylor, 2017:10). Other research has noted a key positive for employees in social care being the flexibility offered, to 'especially women with children' (Gao et al., 2015:116) and intrinsic factors meaning workers 'tolerate' lower pay (Hebson et al., 2015). Although there is inherent unfairness, where pay levels within social care are on par with 'supermarket workers' (Cunningham et al., 2021:194) whilst holding higher levels of responsibility and workers 'struggling to make ends meet as a direct consequence of low pay' (ibid). This responsibility includes a workload that has led to 'disruption to relationships with family and friends…exhaustion, loss of enjoyment and stress. Sleep deprivation and fatigue' (ibid: 195). Entrants moving from welfare benefits, can be stuck on the lower rungs and thus still reliant on the UK benefit system to top up their wages. Leading to a situation where, 'state props up the living costs of those in work.' (Rubery et al., 2016:241), a type of 'Speenhamland' system (ibid).

Issues with the gendered nature of adult social care, has been raised by bodies such as Close the Gap, stating the impact on particular groups, 'Women are more likely to be in insecure work such as zero hours and temporary contracts, and account for two-thirds of workers earning less than the real living wage. Black and minoritised women are overrepresented in precarious work, and are more likely to be on zero hours contracts (Close the Gap, 2021:7), linking this to higher in-work poverty rates.

Research has also found the levels of insecurity, has been heightened for workers due to factors such as austerity and personalisation, with evidence of 'hours poverty' due an organisation's 'funder's austerity-driven personalisation programme' (Baines et al., 2021:95). It is thought that workers would just move to seek hours or better conditions, this is not clear cut, as found by recent research, which showed that, workers don't move for three reasons. They see the role as a 'vocation', the 'gendered nature'

combined with childcare responsibilities limiting other options and union membership being low (Cominetti, 2023). These factors also relate to why there are breaches in key employee legislation, such as Working Time Regulations 1998, which require 'rest breaks during the working day of 20 minutes after 6 hours and a daily rest of 11 hours between working days and a weekly rest of 24 hours in any 7-day period, or 48 hours in a 14-day period.' (ACAS, 2023).

A solution proposed, is for 'organisations with a social purpose' to be given preferred provider status in contracts (Hudson, 2016). However, other research has shown that it is not an organisation type but sectoral factors, demonstrating 'financial tightening due to the profit margins in contracts' (Rubery and Urwin, 2011). Lindsay et al (2014) noted within research with third sector organisations, a shift to 'more standardized forms of contracting, characterized by stringent regulation of the content and outcomes of provision' (p.201). Whereas providers preferred previous service level agreement approaches (ibid), contractual requirements can also be restrictive to job quality. Thus, pay becomes the decider and the rate of pay has been an area of deep concern.

In recent analysis, the Resolution Foundation found although job security was higher than other low pay occupations, the Median hourly rate for care workers was £10.90 per hour, 'the average care worker's hourly pay was 5 per cent higher than other low-paid jobs; by 2021, that differential had fallen to just 1 per cent' (Cominetti, 2023:4). The table below shows the median hourly rate for health and social care related low paid sectors in comparison to other low paid jobs, as of April 2022.

Table 1 Median Hourly Rate

All Jobs	£14.47
Nursing assistant public sector	£11.14
Social Care: Domiciliary	£11.07
Social Care: All Frontline	£10.90
Social Care: Residential	£10.50

Cominetti (2023)

As Cominetti notes in comparing other types of low waged work, retail roles are around £10 per hour, with cleaning slightly lower still and hospitality having lower rates to that. Although an online review found many retailers advertising comparable or higher starting rates to the median rate for carers, for example the lowest starting rate found at retailer Aldi was £11 per hour and another Lidl was £10.90 per hour. It was also possible to find many roles in both hospitality and cleaning at higher rates than £10.90 per hour. These factors have led some to note that when a new retail store opens, it is 'bad news for the local social care sector and for the people who use its services.' (Bottery, 2021).

Another key focus is related to the need for 'developing a business case for good jobs' (Warhurst and Wright, 2020) to influence change. One area for hope, may rest in the intrinsic factors pertaining to adult social care jobs. Such as Morgan et al., (2013) finding factors of autonomy; meaningfulness; interpersonal; and social rewards (p.806) in US healthcare work. Regardless, an 'ethical and fair approach' is central for

change in the sector, the Feeley review in Scotland, noted ‘the most frequent observation … the workforce must be better regarded, rewarded and supported.’ (Feeley, 2021:73). This includes a valuing of social care workers to society (Cunningham et al., 2021, Rubery and Urwin, 2011). Although there have been pay freezes used in the public sector, the deterioration in standards for private and voluntary sector workers is more acute (Cunningham et al., 2021). This becomes particularly challenging for workers who make up some of the lowest paid in society.

2.7 Role of the Support Worker (or Social Care Assistant) in Scotland

Care assistants within adult social care also referred to as support workers particularly within care at home services, have a prominent role and make up a larger part of the workforce. They ‘deliver direct personal care or support’ (SCIE, 2016). In analysis for BBCs Great British Class Survey, Savage et al. (2013), noted that care workers were in the ‘precariat’ class, the ‘lowest’ class. This is a ‘class’ with low household income, ‘negligible savings,’ ‘likely to rent,’ ‘social range is small’.

The view that care workers are low in occupational status and pushed to care work due to necessity and lack of alternatives is held, such a characterization may miss compelling reasons for entry. These include ‘making a difference and the rewarding nature of caring for the elderly’ (Hebson et al., 2015:322). Although the same authors have noted people’s financial circumstances pushing them into this work, over a ‘calling’ to do paid care work’ (ibid: 324). Alluded to within previous research conducted with migrants on entry to jobs ‘often avoided by the indigenous population due to the poor working conditions’ (Hussein et. al., 2011:286).

As labour is the biggest cost for providers, when contracts are cut, or savings are required, staff may be at risk. Cases that gain coverage such as the illegality of the

contractor paying less than the minimum wage, restricted annual leave, unpaid travel time and lack of security on zero-hour contracts are viewed as common across the UK (Conway, 2016). It is no longer a surprise those providers are facing increasing churn when the loyalty is not a two-way process, particularly amongst profit orientated companies. Although other types of providers, when faced with commissioning decisions, may prioritise cost. Whilst a big competitor, for social care workers has been the NHS, providing better pay, terms, and conditions. Thus, 'health care assistant roles in hospitals and other roles that require few qualifications on entry can be extremely attractive to staff working in social care' (Beech et al., 2019:119).

2.8 Conclusion

This chapter has critically reviewed the literature within adult social care focused on entrant level roles and found it is facing unique challenges. Within adult social care in Scotland, there is hope due to recent reviews, recognizing the poor employment conditions of the workforce and the need for change. These reviews are hoped to improve conditions focused upon the principles of fair work, however the recurring issue of pay and job quality is present, and the policy compromise is uncertain. Partly due to a default 'negativity' that afflicts the sector, but also due to person centred care with a priority for client need over other considerations, may miss good approaches for action. Future research will also have to account for an understanding of the capacity available within the sector for organisations to deliver upon fair work principles as well as delivering a 'good offer' to entrant workers within the sector, at a time of ongoing reform.

The chapter also discussed the 'lowly' assistant role in adult social care, finding the positioning and perception of this role in society and literature as problematic. Clearly,

then, the sector faces huge challenges in recruiting an appropriate workforce within the context of broader concerns around job quality. Nevertheless, it is important to consider the extent to which the sector is potentially missing segments of the labour market and to assess more broadly debates around employability in considering what interventions can assist social care.

Chapter 3: Literature Review – Employability

3.1 Introduction

This chapter offers a critical analysis of employability, before assessing the position in relation to employers and interventions. Employers of staff are key stakeholders, but within the literature have often been neglected. Although they may hold differing levels of interest in employability approaches, particularly for the long-term unemployed, there is considerable practical action that the literature demonstrates can be adopted by employers.

It is recognised that research will require to improve practice in relation to entrant level recruitment. The literature notes low employer involvement in employability pathways and intermediary models persist, recognising employability research as a gap within adult social care recruitment. This chapter concludes with a section synthesising the key issues from the literature review, in relation to a need for further research in terms of the extent of fair work practice and its role in increasing entrants, the employability approaches used to increase particularly those underrepresented in the sector, along with a need for understanding of the capacity of the sector to deliver change. The chapter concludes with an analytical framework, which seeks to bring together the key elements from the literature review in recognising the key linkages between broader debates about the employment landscape in Scottish social care with the current state of employability initiatives.

3.2 Employability

Employability as a subject has had a history of debate, partly because it is used interchangeably and variably to mean different things across different disciplines. That

said, a common definition by Hillage and Pollard, (1998:1) is that employability is, ‘having the capability to gain initial employment, maintain employment and obtain new employment if required’. This definition is like Thijssen et al.’s (2008) notion of survival in the labour market. Thus, the focus is on the individual and their responsibilities, likened to ‘skills’ or ‘supply-side’ approaches. The focus for employers becomes more about developing ‘assets which have explicit, immediate value to the organisation’ (Hillage and Pollard, 1998:3). For government the focus is on ‘individuals looking to enter the labour market (e.g., from education or unemployment).’ (Hillage and Pollard, 1998:1). Thijssen et al. (2008) have also talked about various levels or perspectives of employability, the company level, employer level focused on ‘matching supply and demand’ and individual level, which the authors took for securing an ‘attractive job’ (ibid:168).

The supply-side focus is described as ‘economistic,’ to ‘fit’ into the ‘market’ of a ‘hourglass economy’ with ‘high skill, high wage, high value added work at the top end of the labour market and the expansion of low skill, low wage, low value added work at the bottom end’ (Nickson et al., 2003:187). However, this supply side approach has been criticised as too ‘narrow’ with a requirement to ‘transcend’ ‘supply side and demand side orthodoxies’ (McQuaid and Lindsay, 2002:626). However, what is described as ‘supply-side fundamentalism’ (Peck and Theodore, 2000) propagates. The same authors believed that supply side programmes are ‘effective’ when there is an abundance of jobs, they are less so where there are less jobs and ‘structural’ challenges, when actually that is when these programmes are needed most (ibid). As an academic area of interest individual employability is understandable in terms of research focus, as it is a ‘lifelong issue … always be aspects of a person’s

employability that would benefit from improvement.' (Dacre Pool and Sewell, 2007:288).

Implementation of employability has been likened to Active Labour Market Policies (ALMPs), which are defined as the aim to 'increase the employment opportunities for jobseekers and to improve matching between jobs (vacancies) and workers (i.e. unemployed people).' (European Training Foundation, 2022:10). Active, in the sense of interventions that help find work for people, as opposed to passive policy measures such as social security assistance. There is a significant literature on the approaches to get people into work, which focus on work first versus human capital approaches. Fuertes and Lindsay (2016), noted the predominance of 'work first' as opposed to human capital perspectives in their research, a trend they linked to 'organisational and high-level policy factors', particularly through the influence of New Public Management perspectives of minimising costs and achieving targets, leading to the standardisation of practice.

Others, including bodies working with vulnerable groups have criticised the tendency for employability approaches to fall between this absolute position of 'work first' quick re-entry approaches on one end and the 'human capital' approaches focused on equipping individuals with training and skills on the other. For example, One Parent Families Scotland (2021:7) note that, 'both approaches demonstrate an individualist, competitive, rational conception of the labour market that may overlook external and structural barriers to employment.' Despite this caution, most large non-governmental organisations in the policy space have fixated on these conceptions, for example the OECD, have advised countries against 'moving too far toward a "train-first", rather than a "work-first", strategy (OECD, 2021), arguing basically that job assistance can be a cheaper intervention. This is despite authors, noting key issues faced in participating

in ALMPs, such as displacement (of other workers), lengthening of ‘unemployment duration’ from participation and routes ‘used by social groups that are not the intended target social groups’, in turn increasing inequality (Benda et al., 2019).

The work of McQuaid and Lindsay (2005) has viewed employability beyond the narrow frames, developing a framework for policy analysis. As they note a broader understanding, ‘may assist analysts and policy-makers to move towards more sustainable, long-term labour market strategies…. the necessary interventions and their interconnections.’ (p.214). The work of McQuaid and Lindsay, chimes with that of Frøyland et al (2019), who noted that ‘by bringing in demand-side and combined approaches, labour market integration policies can draw on a broader spectrum of measures.’ (p.323), noting the ability to tackle more ‘complex’ issues via a more comprehensive toolbox.

3.2.1 Employability Initiatives

Empirical research has recommended designing ‘tailored programmes which address the different issues faced by different groups or people within the labour market and do not force people into jobs which are not suitable or sustainable for them’ (Stuart et al., 2016:6). This point is particularly pertinent, as this has been a criticism of intermediary led programmes, a focus on job ready clients within a target and payment by results methodology (Boeren et al., 2020).

Policymakers have been slow to adopt demand-side solutions, with continual notions that ‘low skills are a major barrier to employment…. adult skills interventions are critical’ (Williams, 2015:3). Arguably this is a dogmatic approach, where ‘individuals are made responsible for their employment: being unemployed is seen as the result of not trying hard enough.’ (Chertkovskaya et al., 2013:705). Even advocates of this

approach appreciate that a skills approach, has led to ‘numerous interventions that are short-lived or quickly rebranded’ (Williams, 2015:12). This focus has emanated from authors, such as Hall (1996) and the idea of the ‘protean career’ that is ‘driven by the person, not the organization’ (p.8). Beyond the focus on individual’s, others would argue that an approach that recognises ‘structural’ issues faced by the unemployed, is regarded as of more value (Chertkovskaya et al., 2013).

Within the context of these debates Scotland may offer a more ‘empathetic’ approach, where more ‘civic’ and innovative approaches may be used (Egdell et al., 2016; Lindsay et al., 2014). Against concepts such as ‘creaming (providers focusing support on the more job-ready to help meet targets or gain outcomes) and ‘parking’ (providers putting less effort into supporting harder-to-place clients)’ (Edgell et al., 2016:733).

Beyond parking, creaming and displacement, the European Training Foundation (2022) noted a more comprehensive list of adverse impacts of ALMPs on participants in programmes such as deadweight effects (where they would have been recruited anyway), locking-in (where a person lowers their job goals), churning from employment to ALMP (from a lack of interest in securing sustainable employment) and stigmatisation (from the intervention focusing on the person’s difference). Although authors have advised to guard against these effects, there has been less willingness to outline what works. Where there has been guidance, this has included involving, ‘employers and HR professionals’ and ‘a more enabling ALMP should provide tangible support to overcome individual barriers to work (e.g., quality training) and recognise and (where possible) help to address needs outside of the paid labour market (e.g. health).’ (Jones et al., 2022:16). Others have noted a need to focus on ‘recruitment practice’ to enable (and thus reduce) discriminatory practices (Johnson et al., 2021).

Although some of these barriers that influence entry or success may be subconscious and permeate all aspects of society, for example, when applied to the social care sector, a care worker noticed a 'care home made far more effort with the elderly people who were visited than those who weren't' (Goodhart, 2021:222). This potentially emphasising the need for more meaningful interventions pre-entry to facilitate success, particularly for those with additional needs or without a voice.

Before discussing a specific Scottish approach to employability in greater detail, Table 2 below highlights a range of approaches to Active Labour Market Policies (ALMPs).

Table 2 Approaches to Active Labour Market Policies

Labour Market Training (Classroom training, on-the-job training, and work experience)
Private sector incentive programmes (wage subsidy and self-employment grants)
Direct employment programmes in the public sector…targeted at the most disadvantaged workers
Job search assistance (job search courses, job clubs, vocational guidance, counselling and monitoring, and sanctions)

Source: Bredgaard (2015:438)

Where there has been a gap in research of ALMPs, this has been in combining 'impact evaluations with programme theory evaluations' (Bredgaard, 2015:449). Similarly, Williams (2015) argues that discussion of programme improvement requires 'robust evaluations that assess the long-term impacts on individuals' (p.2). Some writers have regarded 'job search assistance' as an effective approach, against subsidised programmes that do not translate into job creation, whilst vocational programmes are expensive with some labelling public sector programmes, effectively as 'gimmicks'

(Raffass, 2017). Other findings, suggest that ‘skills training’ and ‘entrepreneurship promotion interventions’ give positive outcomes (Kluve, 2010), whilst regarding the design of programmes as critical, focusing on the “how” rather than “what” in design (ibid:175)

Individualised approaches have also been injected with the ‘ethos’ of New Public Management with ‘standardisation of services and streamlining of procedures.’ (Dall and Danneris, 2019:584). To meet these ‘better results,’ underperformers or those not meeting their responsibilities are sanctioned, having their benefit payments reduced for a period of time. This is a self-limiting process, without regard for a more holistic policy response (McQuaid and Lindsay, 2002). Sanctions may work in the short-term but there is limited evidence to show long-term benefit to job outcomes (Dall and Danneris, 2019).

There are key external factors that McQuaid and Lindsay (2005) and Crisp and Powell, (2017) have noted that influence employability, including employer attitudes, training and education, other assistance (including tax benefits) and local economy supply of jobs. This last factor, led to Crisp and Powell (2017) noting the challenges of the interrelationship between demand and supply side factors, particularly for young people, where the focus is on ‘a narrow conception of employability focusing on improving the motivation, skills and work-related experience of young people.’ (p.1796). As young people are a key focus within empirical and academic research, and government with ‘urban youth’ felt a particular target in the ‘responsibilisation’ of those receiving welfare (Crisp and Powell, 2017). There are felt to be key factors for focus, such as the ‘interaction’ between skills, life circumstances and labour market economy (Boeren et al., 2020, McQuaid and Lindsay, 2005). With, a more ‘holistic’ approach, solutions can arise such as subsidies (Boeren et al., 2020). Though it

should be recognised that those ‘hardest to engage’ being those ‘furthest away from the labour market’ (ibid:130). This relates to other writers who note that programmes ‘should seek actively to redistribute employment opportunities in favour of disadvantaged and marginalised groups’ (Peck and Theodore, 2000:741). Although the perspective of financial subsidies, gets attention (see for example, Boeren et al., 2020, Bredgaard, 2015), others have regarded other approaches, i.e., ‘job search assistance and monitoring are cheap and fairly effective in pushing unemployed individuals off benefits’ (Raffass, 2017:356).

3.3 Employers

Employers, have a key role in debates about employability as they ‘control access to jobs,’ with ‘negative attitudes towards unemployed people,’ ‘stereotyping of customer groups and discrimination and prejudice’ (Hasluck and Green, 2007:148) all impacting upon jobseekers. It could be argued that public service providers, with public duties to promote equality and diversity, are attuned to these issues. However, research has shown that there is still discrimination within organisations holding public sector equality duties (Equality and Human Rights Committee, 2020).

When discussing approaches by employers, previous research by Tamkin and Hillage (1999) have noted a majority of employers that ‘do little or nothing’ about employability and a smaller number ‘concerned about employability and those who use the term’ (p.15). Other research shows when employers assess pre-employment training programmes, outcomes are not always positive as employers can be at a distance (Belt and Richardson, 2005). This links to a perception within the literature, that the employer’s perspective is ‘assumed’ leading to a mismatch within programmes (Ingold and Stuart, 2015) or their views not sufficiently thought important (Rubery and Urwin,

2011). This despite employers playing a ‘crucial’ role (McQuaid and Lindsay, 2005) and calls for ‘employers to be more directly involved in design of skills training and work experience programmes’ (Gore, 2005:343).

However, the evidence base for employers to be ‘connected’ to the concept of employability is low (Belt and Richardson, 2005; Devins and Hogarth, 2006). Thus, there is a predominance of intermediaries between employers and clients on employability programmes. Gore (2005: 346) noted that a successful ‘intermediary led programme’ should be, ‘flexible and responsive to new opportunities…local in nature…(supportive) to employers in improving recruitment practices, training regimes and career progression structures…act as a ‘buffer’ between employers and jobseekers’ when often they are not.

When employers are kept at a ‘distance’ this can also lead to additional problems, particularly in relation to ‘inaccurate job expectations’ (Breaugh, 2008:106). To counter this, there is a need to ‘provide recruits with candid information concerning a job opening’ (ibid). Moving beyond information, as ‘descriptive literature’ is not enough (Breaugh, 2008), a need to use demand-side approaches, i.e., work experience programmes (Bredgaard, 2018) that are employer led. Whilst, moving employers closer can cause issues, where ‘activation’ becomes aligned to ‘employer-centred flexibility’ leading to ‘regressive and repressive’ (Raffass, 2017:349) conditions.

3.3.1 Understanding employer attitudes to the long term unemployed

Research has demonstrated a number of ‘typologies or frameworks’ that have arisen due to attempts to understand the employer’s role in relation to programmes to recruit the long-term unemployed. Two of the more influential typologies are now discussed

further below. Snape (1998) from her research looking at recruitment of long-term unemployed and employer views developed a typology of employers:

1) Socially Motivated Organisations – most disposed to recruitment of unemployed people
2) Commercially Motivated but socially responsible, 'right person for job' approach
3) Purely commercially motivated organisations, who view the unemployed as a risk.
4) Employers where context and resources preclude recruitment of unemployed people.

Although Snape's work is older it has been commonly cited (Orton et al., 2019, Hasluck, 2011). However, the obvious disadvantage is the fixed mindset, not accounting for agency in organisational decision making.

Another more recent approach, this time looking at Danish employers, was developed by Bredgaard (2018). Where again, he discussed, four approaches that employers take:

1) 'Committed employer' motivated by reasons including 'corporate social responsibility,' 'type of jobs and company-specific skills' 'persuasion of member companies by peak employer associations.'
2) 'Dismissive employer' with a 'negative' attitude and non-participation in active labour market policies and programmes.
3) 'Sceptical employer' prone to change to 'committed' status or 'dismissive.'
4) 'Passive employer', who does not 'participate actively', this may change with rational information and the case being made, although the priority is the organisation's interests.

This research taking a more societal perspective than Snape's work, may lack practicality in contemporary settings such as a challenged social care sector, where there may be an employer type whose 'hand' has been forced, due to the challenging circumstances facing the sector. This does offer a more nuanced approach in the shifting nature of employer's mindset, it however also labels employers, without appreciating the complex factors that may be involved, which may be counterintuitive.

There seems an observable gap, to identify the attitudinal position of employers before assessment on the action to be taken. This may be the starting point, the employer's worldview, before there is a focus on practical action and the practice that employers can initiate.

3.3.2 Employer Practice

Empirical research has talked about practical action that employers can take, for example in relation to adult social care workers including clearer communication, about unsociable hours, the realities of the job and what scheduling would mean in practice from the outset. Employers have been advised to try different approaches, as noted by (Timewise, 2017) in more localised community-based approaches. However, the 'power' that employers have, if left unchecked, can limit progress (Cremin, 2010), where the 'worker' is always the cause of disappointment (ibid).

The means by which employer assess suitability may be 'problematic,' with employers placing the emphasis on 'soft skills (e.g., interpersonal and communication skills)' and based on 'interaction with candidates at interview' (Newton et al., 2005:13), short episodes. Although other factors such as 'qualifications' as noted for adult social care entrants, are not as key, with options of on-the-job learning. Within application forms and interviews, 'Scenario-based questioning is relatively common, and a small but

growing number of organisations are also involving service users' (Ekosgen, 2013: ii). Although a common refrain, in the United Kingdom is that it has high numbers of jobs that 'require low, or no, qualifications, and on the other hand, the UK has one of the most qualified workforces in the world but not enough graduate-level jobs to absorb them' (CIPD, 2018:36).

Apprenticeships have been viewed as popular by employers, Newton et al., (2005:59) stated, 'maybe…feel that the skills and qualifications that the apprentice comes out with are directly relevant…to the job'. However, the authors noted completion rates can be low, where 'employer just says, forget the qualification. We'll give you a job' (ibid). Other research has also assessed the challenges of apprenticeships, including 'complexities of partnership working, sourcing and arranging rotational placements, time and resource, recruitment and varying terms and conditions/pay' (Fox et al., 2017:5). In response to these issues, solutions were thought to be through effective planning, increased integrated apprenticeships and innovation and frameworks centred on values-based recruitment (ibid).

Due to the relevance given by employers to 'recent experience' and 'poor work records of many long-term unemployed people,' 'training within a supportive, real work environment is required' (McQuaid and Lindsay, 2002:625). Work experience, trials and internships are valued in the jobs market (Stewart, 2021), reducing risks, recruitment costs and enabling the testing of a candidate before entering a formal contract. However, there is also a concern amongst jobseekers that 'work trials should only be for a limited time to avoid exploiting unpaid labour, or that a longer placement should be paid for by government' (Foster et al., 2014:68). There may be a capacity deficit within social care, where organisations, many of whom are small, do not have the 'resources and expertise' in recruitment, 'primarily working under outsourcing

contracts from local authorities' (Rubery and Urwin, 2011:122). As outsourcing, the writers argue, results in a 'hollowing out of the employment relationship in social care.' (Ibid:123).

Work tasters and work trials and apprenticeships may be outdated models already. What may be required is more 'innovative' solutions to engage employees, potentially underpinned by newer digital technologies in the recruitment interface. There have also been suggestions of 'apprenticeships specifically targeted at the over 50s' (Foster et al., 2014:68) although branded differently. Thus, the focus may not necessarily be on employers but policy drivers, the programmes and support provided from intermediaries. The research showing that 'jobseekers would like to see providers adopting more of a recruitment agency approach; keeping up to date with the labour market, sourcing vacancies and identifying candidates' (Foster et al., 2014:69).

Whereas for employers, organisational culture and leadership in organisations may be a key determinant as to engagement of jobseekers and 'investment' in efforts. As noted in empirical research, 'managers in high retention organisations' (Ekosgen, 2013: v) make the difference. Whereas the focus is shifting onto individual responsibility, who must rely on the whims of employer's commitment to interventions, these interventions will be assessed further.

3.4 Interventions

When discussing interventions, in the literature previously the focus has been on 'stress management,' 'expressive writing,' 'job club' and 'Jobs program' developing job ready skills and marketing these, mock interviews and finding jobs (Wanberg, 2012). These more traditional programmes are perceived to have a 'modest likelihood' of success, with 'private sector incentive programs and services and sanctions' shown

to have improved performance (Kluve, 2010). However, this focus on ‘better performance’ has left what others describe as a large population, ‘subject to the stigma-generating compulsion of activation that becomes a recurrent and enduring state for those churned at the bottom of the labour market’ (Raffass, 2017:362). Theories on interventions have focused upon randomized controlled trials (RCT) to assess research-based and practice-based job searching activities (Malmberg-Heimonen et al., 2019). The aspect that may merit most discussion is the interface between employer and jobseekers during recruitment.

3.4.1 Human Resource Interventions

In terms of human resource interventions within adult social care, there are a wide variety. For example, ‘training’ was more apparent for workers in the voluntary sector within adult social care (Cunningham et al., 2015), whilst the importance of being involved in decision making was highlighted as a positive HR strategy (ibid). Other research in adult social care, focused upon attracting staff, noted ‘staff development,’ ‘flexible working patterns,’ ‘communication that staff are paid the National Living Wage, or more’, ‘develop and promote the organisation’s culture’ and ‘values-based recruitment’ (Figgett, 2017:19).

Invariably these interventions may lead to a focus on gaining a quantity of entrants as opposed to a quality intervention. Authors, such as James Bloodworth, who wrote about his experiences going undercover in frontline care work, noted how ‘easy’ it was to enter the profession. Following an interview, he was ‘invited in first thing on the following Monday to undergo four days’ training, which ‘largely involved classroom instruction and form filling’ (Bloodworth, 2019:85) complemented by a demonstration of using a hoist. Due to the strained nature of the sector, this example within care at

home, points to this being the norm rather than an exception. This point is highlighted further when the author's start was delayed due to excessive waiting times for pre-employment checks via the Disclosure and Barring Service (DBS) in England. Thus, a question arises as to whether employers can really invest the time and money to focus on recruitment innovation at the front-end when they risk significant churn.

There have also been innovations, including doing away with traditional process, by using social media to match employers to candidates, For, example, a local authority service *In2Care* in Kirklees Council, acted as the matching service for jobseekers and employers in adult social care. The type of work and hours the candidate is available is noted from the outset and employers can pick from the candidate profiles, due to the competition for staff, this is aimed at creating more efficient processes. As the Workforce Planning Manager, Karen Wisniewski, noted,

> Some parents, for example, can work school hours but not evenings, early morning or weekends. When the council has carried out Facebook polls, it has found that a flexible working pattern is "far more attractive" to applicants than either salary or a career pathway. If applicants cannot find a role that matches that need for flexibility they will go to a different sector' (Thomas, 2019).

Other examples have come from healthcare and the change in interview processes to enhance digital use. In Scotland, there are few examples of significant development at the recruitment interface. Consequently, there is a clear gap in understanding innovations within adult social care in Scotland specifically through using employability approaches linked to the distinct makeup of the sector.

3.5 Values Based Recruitment (VBR)

Due to the commonality of values across adult social care there has been consideration of the potential of VBR as a solution to meet the recruitment challenge. VBR has been described as ‘a way for employers to get the right people, with the right values in the right roles.’ (Skills for Care, 2016). A key advocate body has been Skills for Care the workforce agency for social care in England, who advocate a 5-step practical model for VBR demonstrating the linear process before assimilation of values.

Figure 1: 5 Step Practical Model for VBR

1. Articulate
2. Attract
3. Apply
4. Assess
5. Assimilate

(Skills for Care, 2021)

This approach would seem laudable, linking challenges of workforce planning with those of focusing on the ‘right values, behaviours and attitudes’ (Figgett, 2017:5). It is argued that a more ‘holistic approach to the process’ (ibid:58) can be used along with the opportunity to embed values in entry educational and training courses (Patterson et al., 2015). It is an approach that is perceived to lead to key benefits such as a reduction in staff leaving and improved staff retention and client care. (Skills for Care, 2020a).

A key issue though is the lack of research evidence of Values Based Recruitment. Where research evidence exists, this has focused on ‘medical school admissions’

(Patterson et al., 2015:863). An additional issue is agreeing a definitive definition of what constitutes a ‘value’ and how this can be assessed. Authors have noted that approaches assessing personality and situational judgement test may prove beneficial (Lievens, 2017), findings lack robust research evidence (Patterson, 2015). Where there has been employer engagement in research, this has been limited to surveys such as, 72% of 81 employers, stating that employees via a ‘values based’ approach ‘perform’ better than ‘traditional’ recruitment (Consilium, 2016), noting a better return on investment (ibid). Although they also admitted the shortfall in the research, in using ‘proxy data’ for the traditional employer comparator. This may lead to another factor, where values-based recruitment is so widespread amongst adult social care providers that the unwillingness to admit to another approach makes any meaningful comparison difficult (Heaslip et al., 2018). There have been calls for improved training as well as involvement of users of services (SCIE, 2016) in VBR. This may be challenging as service users have focused upon ‘motivation and personal experience’ to assess care workers. (Francis and Netten, 2004).

3.6 Scottish Approach

In terms of a Scottish approach, there is clearly a focus on targeting a younger age profile within adult social care as discussed in chapter 2. For example, the Scottish Government has made a commitment in its youth employment strategy, called ‘Developing the Young Workforce’ of reducing youth unemployment in Scotland by 40% (Scottish Government, 2021c). The ‘Young Person’s Guarantee’ (YPG) is a ‘commitment to bring together employers, partners, and young people…connect every 16 to 24 year old in Scotland to the opportunity of a job, placement, training or volunteering with employers committed to the Guarantee’ via Skills Development Scotland’ (SDS, 2021). Although in terms of the youth unemployment reduction by

40% target, since 2010 the rate for 16-24 stands at a 6.2% reduction (Office of the Chief Economic Adviser, 2021). There is some understanding of the challenge, for example in Scotland, funding of employability support is now through the Scottish Government's No One Left Behind (NOLB) approach, funds given to local authorities and delivery overseen by Local Employability Partnerships (LEP) made up of representatives from the local authority, Skills Development Scotland, colleges, the third sector, social security, business and health representatives amongst others. The Scottish Government give a level of autonomy to these LEPs, arguably as it would be difficult to effectively oversee 32 distinct models of provision across the different local authorities, but they have said that services designed need to be person centred and tailored to the needs of the individual (Employability in Scotland, 2022a). The NOLB approach is new its most recent phase launching only in April 2022 where a number of employability funding streams were amalgamated under its remit.

A further key development in the journey to employability in Scotland has been the setup of Fair Start Scotland, in effect from 2018, which is a voluntary Scottish employability service to help those out of work, by offering help finding a job and personal development support with additional help for those with a disability. The service follows on from a number of policy reviews that have influenced the employability landscape from the Christie Commission (2011) onwards. For example, a report by Cambridge Policy Consultants (2014) talked of a need for better measurement of outcomes, better organisation and delivery of employability services. Finally, the Blake Stevenson (2018) review discussed the importance of tailored and person-centred support for those requiring employability support, which is again aimed to be personalised to the individual's needs. It also led to a key concept of the Fair Start Service in Scotland, which is delivered by the public, private and voluntary

sectors, of non-compulsion of participants onto programmes as well as the role of a key worker providing support, contrary it felt to the UK government approach (Hepburn, 2018). Beyond this, there has been talk of a shifting of the balance, to more 'street level' engagement to engage participants, most notably, recent work as part of *Best Start, Bright Futures* the Scottish Government Child Poverty Delivery Plan, for example the Pathfinder projects, currently being launched in Glasgow and Dundee (Scottish Government, 2022h). Within this parental employability is identified as a key focus of activity within the delivery plan and bespoke projects funded in the plan.

Beyond Scotland, there have also been a plethora of schemes during Covid. Firstly, the Kickstart Scheme, a UK wide programme which funds employers to 'create' placements for 16- to 24-year-olds on Universal Credit. (Office of the Secretary of State for Scotland, 2020). The programme saw low take up from employers, which was been explained by the Work and Pension Secretary as being due to the Covid pandemic (Nelson, 2021). Another initiative, the Job Entry Targeted Support (JETS), provides additional support for those 'unemployed for at least 13 weeks…support lasts for up to six months and is intended for claimants who are in the first year of unemployment' (DWP, 2021a). The Scottish Government have also prioritised apprenticeships, including Foundation, Graduate and Modern Apprenticeships, noting that they have removed restrictions, by the 'removal of public sector eligibility restrictions' and offer 'more opportunities for people aged over 25' (Scottish Government, 2021d).

The Fair Start Employment Support service, notes 'respect and fairness at its core…including paying the living wage and avoiding use of zero hours contracts' (ibid). Focused on those most in need of tailored employment support with contracts across Scotland over five years, this initiative is aiming to support 38,000 people. A further

programme of support, for those that are long-term unemployed, called Restart was announced in the spending review, a £2.9billion programme. The delivery vehicle within Scotland will be Fair Start Scotland, differing to the case in England, managed via the Department for Work and Pensions (DWP) and contracted providers (DWP, 2021b).

Fair Start Scotland, as a devolved employability scheme, has faced criticisms for delivery. An economic evaluation by Alma Economics (2021:4) found the scheme faced the recurring challenge of employability of being more impactful for those with 'fewer barriers to labour market entry'. This finding prompted the report to recommend that Fair Start Scotland, 'could try to find ways to reach out to and help more people with disabilities, health conditions, and long-term unemployment achieve sustainable job outcomes' (ibid:5).

Although the service is delivered by multiple providers, recent research on participant experiences of Fair Start Scotland does not break down experience by type of provider (Scottish Government, 2023). In previous research, the third sector has been noted for its parallels to the policy intent of the Scottish Government, namely, research with participants that noted the 'suitability of the third sector for supporting people with sometimes complex additional support needs in their first step into the labour market due to the empathy they demonstrate and the flexibility they can offer.' (Fraser of Allander Institute, 2022:2). This has been linked to calls for the third sector to be a key partner in the economic recovery post pandemic in areas such as employability (Scottish Government, 2020d). Although this does not necessary mean that private sector providers have been unsuccessful within employability, for example delivery partners such as Triage, note a range of accreditation such as 'Disability Confident Leader, Living Wage Employer and Matrix Accreditation for Information, Advice and

Guidance' and a focus on improving lives (Triage, 2023), although it has been hard to find examples of people being placed into social care. Albeit there was testimony from an employer of one provider People Plus Scotland, on their YouTube site, this social care employer had managed to recruit candidates, the employer stating it was 'very rare that we interview someone from People Plus and we don't hire them.' (People Plus Scotland, 2022).

There is also a further challenge, as highlighted earlier in Chapter 2, within immigration practice, in which the approach and 'philosophical' leanings of the Scottish Government and UK Government differ. This difference in approach is also seen in other areas, including welfare policy. There has been the devolution of certain benefits (mainly low-income grants and disability related benefits) to the Social Security Scotland agency, unemployment benefits rest in the hands of the UK government. The approach by the UK government has been criticised, where to 'achieve better labour market outcomes … in some cases, could have a detrimental impact, especially on claimants in vulnerable circumstances' (Social Security Advisory Committee, 2019:3). Previous research has noted the 'disproportionate' impact of benefit sanctions on vulnerable and younger groups (Watts et al, 2014). Authors such as Fuertes and Lindsay (2016) have also noted the institutional basis for decision making and prioritisation, where the UK, has 'produced funding regimes' that has 'embedded work-first activation as the singular supply-side policy response to the labour market exclusion faced by many communities and groups' (p. 531). It is not clear at this point whether the Scottish landscape has escaped this punitive approach to employability, despite the policy making in Scotland being of a more personalised or empathetic kind, as it is the early days of its approach.

The prioritisation of employability within national budget making is also unclear, as demonstrated by the Emergency Budget Review in Scotland, which reduced the funding to employability support, whereas the Employability and Training budget was set for £124.6m it was reduced by £53m through reprioritisation, with reasoning given included that the money was unspent. A key driver for reduction, was due to increased pressure from pay increases for public sector staff, although the Fraser of Allander Institute acknowledged that, 'public sector pay levels are a core part of the Scottish Governments response to the cost-of-living crisis. However, if living standards are of utmost concern, it is difficult to argue that those with a job are a higher priority than those without a job' (Congreve and Randolph, 2022). This is particularly so when the adult social care sector is assessed, with high vacancies. Three key approaches will be analysed further now, The Kickstart Scheme, Values Based Recruitment (VBR) and Sector-based Work Academy Programmes.

3.7 Covid Influenced Schemes: 'Kickstart'

During the pandemic, as part of the Chancellor of the Exchequer's Plan for Jobs, the Kickstart scheme was announced. It is a scheme that funds employers to offer jobs for 16-to-24 year olds (DWP, 2021) across the UK and enables 'participants to gain work based experience through paid six month roles, to improve their chances of progressing into long-term sustainable work' (ibid: 14). Although the government does advertise the age of 16, for most 16- and 17-year-olds, it is not possible to access Universal Credit unless in extremely limited circumstances. The scheme does pay the full amount of the national living wage for 25 hours of work per week, for 6 months, with start dates up to 31 December 2021.

However there has been criticism as many younger people requiring support may not be on Universal Credit; the programmes focusing upon a low-skilled model, in effect internships with negligible impact on job creation (Khan, 2020). Whereas the £2billion funding for the scheme could have been better used to try and instigate a wide scale digital skills and computer science training programme similar to countries such as Estonia and Israel (ibid) or fund large scale entry programmes for challenging sectors such as adult social care. Further the scheme has not met the targets of job creation that was envisioned (Austin, 2021) with employers complaining about how long it has taken to access the scheme (Rigby and Sinclair, 2021).

However, the Government through the advertising and promotion of the scheme regard it as a central plank of its job creation and plan for jobs. Although it is not possible to directly analyse the influence on workforce challenged sectors such as adult social care, the prominence and level of funding attributed to this scheme makes it worthy of assessment. For example, there is a need to assess the impact of this front-loaded support on younger cohorts as opposed to other age groups.

3.8 Sector Based Work Academies (SWAP)

The SWAP initiative is operated by the Department of Work and Pensions via its network of Jobcentre Plus offices and usually lasts up to six weeks, with three main components: pre-employment training; a work experience placement; and a guaranteed job interview (DWP, 2020). These are focused on those aged over 18 and in receipt of certain benefits such as Jobseekers Allowance (Williams, 2015), now mainly subsumed into its successor Universal Credit benefit regime. The DWP note that this scheme allows ‘people to learn the skills and behaviours that employers in particular industries look for’ (DWP, 2021:14).

Providers use this model of pre-employment to match employers with jobseekers. The pre-employment element, acting as a default trial and opportunity to experience the sector as well as gain valuable experience, with shorter 'bite size' programmes in place as well. This approach has been used in Health and Social Care, including healthcare academies within individual NHS health boards.

3.8.1 Healthcare Academies

It is perceived that these programmes can 'solve multiple problems...staff shortages, improve productivity, improve diversity and inclusion and attract a fresh generation of talent into the NHS.' (Accenture, 2018:2). The programmes are believed to be more cost effective with a good return on investment for employers (ibid). The Scottish Government have committed to employability programmes, with similar methodologies to SWAP models via a 'Get into' model which includes a three-year partnership with Prince's Trust Scotland (Scottish Government, 2019a) and the NHS. Sitting alongside individualised approaches by health boards, particularly focused upon the long-term unemployed moving into entrant level roles. Delivered via Department for Work and Pensions (DWP) funding, employers offering work placements and guaranteed interviews with the training elements provided by local further education college providers. However, as described earlier, the extent to which adult social care providers engage themselves in the employability systems and healthcare academy approaches is unclear. This links to earlier points in Chapter 2 around the lack of approach, planning or strategy within the adult social sector to drive its employability work. These can be developed further but there are no employability frameworks in place within Scotland's adult social care sector. The testing of existing and novel approaches is a gap.

3.9 Conclusion

The chapter discussed the key role of employers if any sustainable solutions are to be found for improved practice and increased labour supply, and their involvement within any research will be critical. The empirical literature notes a comprehensive range of practical action that can occur at the employer level. Although interventions were discussed, within the Scottish context these are focused on a younger element, which research shows, face disadvantage and issues such as 'scarring' (World Bank, 2020). This, however, does discount other disadvantaged groups who with support may benefit from job entry into adult social care. Additionally, there needs to be an assessment of the level of engagement by social care providers within employability systems as literature is sparse if non-existent.

The approach of the UK and Scottish government is adversarial and influenced not just by the conditionality regimes for claimants in employment welfare but also in its different approaches to employability. National policy making and delivery via a range of different bodies will likely remain as the literature does demonstrate that there is limited prospect of an employer lead, with over reliance on governmental policy and programmes delivered via intermediaries.

3.10 What has the Literature Review found?

In considering the discussion in Chapters 2 and 3 there are several key findings that are important to reiterate. Clearly Scottish social care more broadly and adult social care in particular, has been influenced by a policy landscape that has prioritised personalisation of care and client choice, with more recent attempts to address workforce challenges, a work in progress, through the Fair Work Convention and its advice along with the Feeley Review (Independent Review of Adult Social Care in

Scotland) calling for change and a National Care Service. The literature points to the realisation of a need for change due to a workforce that is highly gendered and facing inequality, low pay, low status and concerns about the how embedded the fair work principles of effective voice, opportunity, security, fulfilment and respect are in practice. Thus, the literature notes a need to understand implementation and the level of awareness of these principles. The sector was heavily impacted by the Covid pandemic and it is not clear how the sector has responded to pandemic challenges to meet its recruitment and retention challenges during a critical period, thus pointing to the need to focus on this issue within the current policy landscape.

When employability was assessed, there was a clear drive within employability policy in Scotland, again on a personalisation/person-centred agenda to better account for client needs, particularly through the No One Left Behind approach. This is through no outcome targets given to providers and no time limits, albeit delivered via distinct local networks and model of delivery, with success uncertain. There are gaps in understanding the level of employability provision in adult social care particularly, due to a limited evidence base. There is a call for employability programmes to involve employers as they are the gatekeepers for jobs, although their interest and attitudes to the unemployed are unclear, thus understanding factors such as culture and practice in areas such as diversity and inclusion is important. The literature notes a need for a more holistic perspective, away from work first measures that do not meet the needs of those with additional needs or barriers. Thus, there is a clear gap, for research on employability solutions that bridge the social care gap of not only limited data on underrepresented groups but also limited literature on the recruitment and retention of underrepresented workers into social care using employability solutions.

The following page has an analytical framework which outlines how the key findings from the literature shapes the research project and shows the linkages between different elements considered in the literature review.

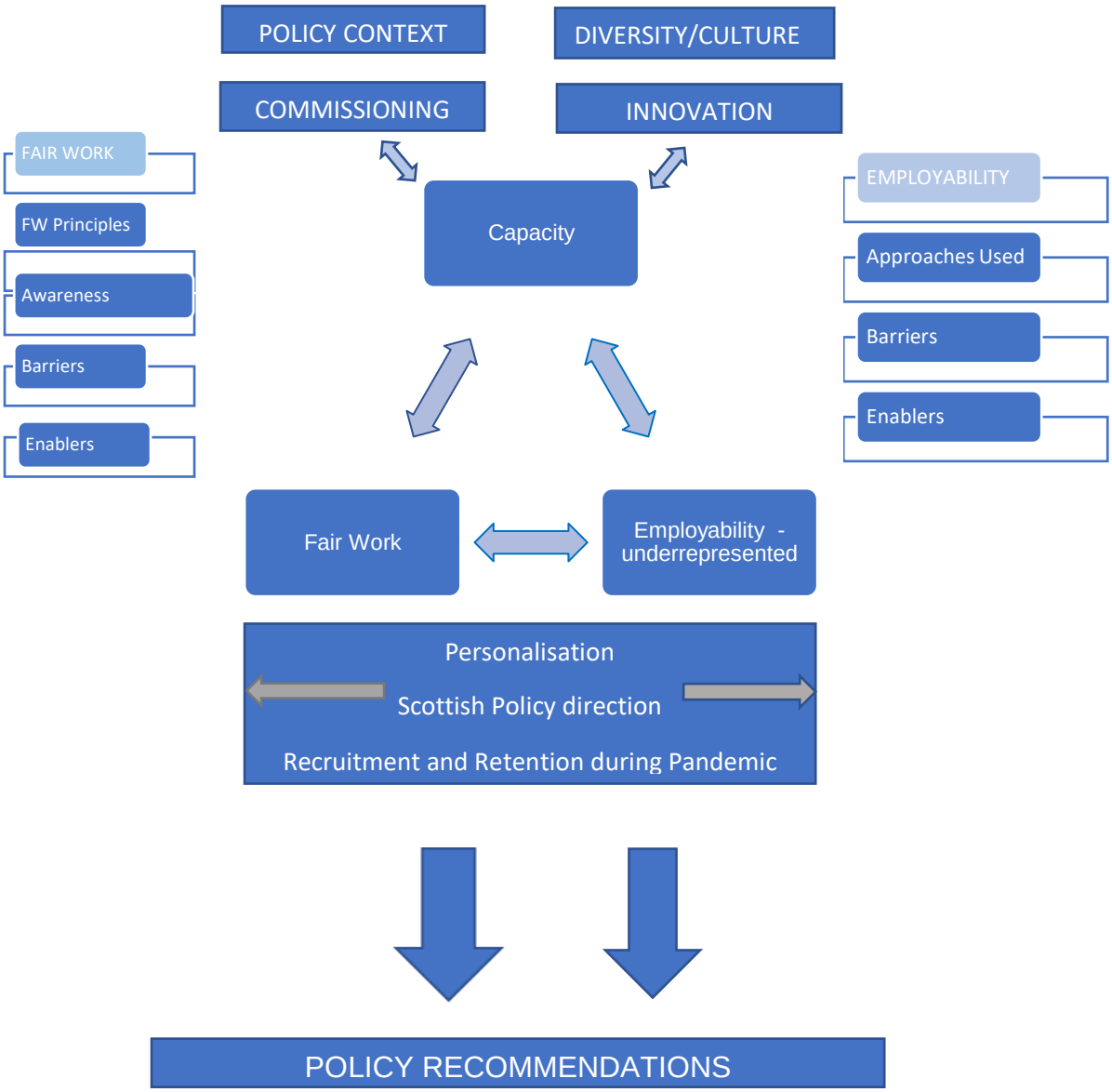
The Analytical Framework consists of the following three elements**:**

1) **Fair Work:** Fair Work Principles, Awareness of Fair Work, Barriers to implementation and enablers to aid implementation.
2) **Employability to increase underrepresented entrants:** What approaches are used in social care, the barriers and enablers used.
3) **Underpinning this will be understanding the capacity:** concepts such as commissioning, policy context, culture and diversity practice and innovation impact upon the capacity that is available to institutions. Used to ensure that any recommendations are realistic.

There are key links between the Fair Work and Employability approaches, particularly in terms of a policy focused on person-centred delivery of care and employability support in Scotland. This distinct policy focus is at a time when there is an ongoing recruitment and retention crisis in social care.

This output from this analytical framework will be the key policy recommendations.

Figure 2: Analytical Framework



Chapter 4: Research Methodology

4.1 Introduction

This chapter will examine how the research aim and key objectives will be achieved within the research project. Outlining the research strategy adopted, focused upon primary research with multi-stakeholder participants via semi-structured interviews within a practice based, applied research project.

There was a comprehensive range of research reviewed, from multiple sources, in the literature. Research noted the workforce challenges, there was more limited empirical literature focused on solutions pre-employment particularly linked to enablers as well as the needs of under-represented groups. The literature on employability programmes in relation to the adult social care sector is also limited. Therefore, this chapter distils and outlines the key priorities focused on assessing interventions used to increase entrants into adult social care.

The chapter first discusses the importance of having clear research questions as a guide in the planning process. The importance of undertaking qualitative primary research, focused on practice within a pragmatic research design is outlined. This focus has directed the research to multi-stakeholder principles, with evidence-based policy. The methods to be used are also reviewed, before an analysis of the sampling, qualitative data analysis and coding process is undertaken. The chapter ends with key ethical considerations and the limitations of the research project.

4.2 Research Questions

A key aspect of this chapter will be outlining the research questions. It is important to have clear and succinct research questions, based around a plan of action (Agee,

2009), which can be influenced by the researcher's experience (Sandberg and Alvesson, 2011). The research questions can act as an outline, focused on a key research aim, with a sub-set of research objectives. Although in themselves they do not 'produce good research, but poorly conceived or constructed questions will likely create problems that affect all subsequent stages of a study' (ibid:431).

The literature review formed the basis of these questions, but other approaches were reviewed, such as 'Gap spotting' (Sandberg and Alvesson, 2011), which is a method, looking for gaps to explore. Within this approach a hybrid approach of 'neglect' spotting and finding 'white spaces' (ibid) is common. The researcher outlined areas where a quality approach is required, areas lacking 'empirical support.' Whilst Kinmond (2012) stated the most critical factor in research questions, is the '*So What*? test, why should anyone be interested and 'Why does it Matter?'. Something that will underline the research study, its direct relevance, to assist an adult social care sector facing workforce challenges.

The focus on the research is moving from 'theoretical gaps' and 'attention' and 'action' to 'emergent phenomena that are significant and relevant to our stakeholders' (George, 2016:1869). There was a process of drafting and re-drafting the research questions to ensure that these fully outline the research study, a process noted by Agee (2009).

The main research aim is to **review employability interventions through employers to increase entrants into adult social care within Scotland**.

To achieve this research aim, there will be three operational objectives, adapted from the earlier literature review. This process will also include outputs such as policy

briefings developed from the learning, with clear recommendations from the research, in line with the practical research focus.

The three research objectives to meet the research aim are:

1. **To what extent is there a fair work offer within adult social care employers in Scotland?**
2. **How connected are adult social care employers with employability pathways that engage underrepresented entrants?**
3. **What is the capacity available to adult social care employers to offer improved recruitment processes to engage entrants into the sector?**

4.3 Primary Research

Much research has fallen between parallel quantitative and qualitative research discussions, albeit with some discussion of triangulation as well. Before this, many consider the ontological and epistemological position. There are usually, 'three philosophical questions to consider: what is the nature of the world and of human beings? (ontology); how do we know what we know and develop knowledge? (epistemology); and how can we "capture" the object of research? (methodology)' (Ospina et al., 2017:594). Paradigm perspectives are ways of thinking that influence research and are based on 'differing fundamental assumptions' (Gioia and Pitre, 1990:585). As explained by Morgan and Smircich (1980), 'between the world view to which the researcher subscribes, the type of research questions posed, and the techniques that is to be adopted as a basis of research' (p.499), is what forms the basis of a research project.

The adopted approach usually relates to perceptions of what ‘quality’ research consists of. This has traditionally seen a dominance of ‘quantitative’ techniques from ‘positivist’ beliefs (Symon et al., 2000), those writers believing that this is where change derives from. Qualitative research, on the other hand, is perceived as inferior regarding its validity and quality to more regulated and objective approaches, as it is more flexible. This has led to authors attempting to justify qualitative research. Authors such as Tracy (2010) have attempted ‘markers for quality’, for example, the eight points of a ‘worthy topic’, ‘rich rigor’, ‘sincerity’, ‘credibility’, ‘resonance’, ‘significant contribution’, ‘ethics’ and ‘meaningful coherence’. An ongoing challenge of developing criteria is the interpretation of these broad factors, what is credibility? Resonance? worthy topic? and to whom? To gain consensus is challenging, although having principles within an honest and transparent process is important for a researcher.

However, one challenge in doing qualitative research is the lack of generalisation to a population at large. You are effectively only reporting experiences of your research group. Individuals build up experience, and within a sector acutely challenged in terms of the workforce, to gain from the knowledge and experience of practitioners is critical. Thus, some experience is better than none and this is a tested route in research, applying these examples into other settings (Gerring, 2004).

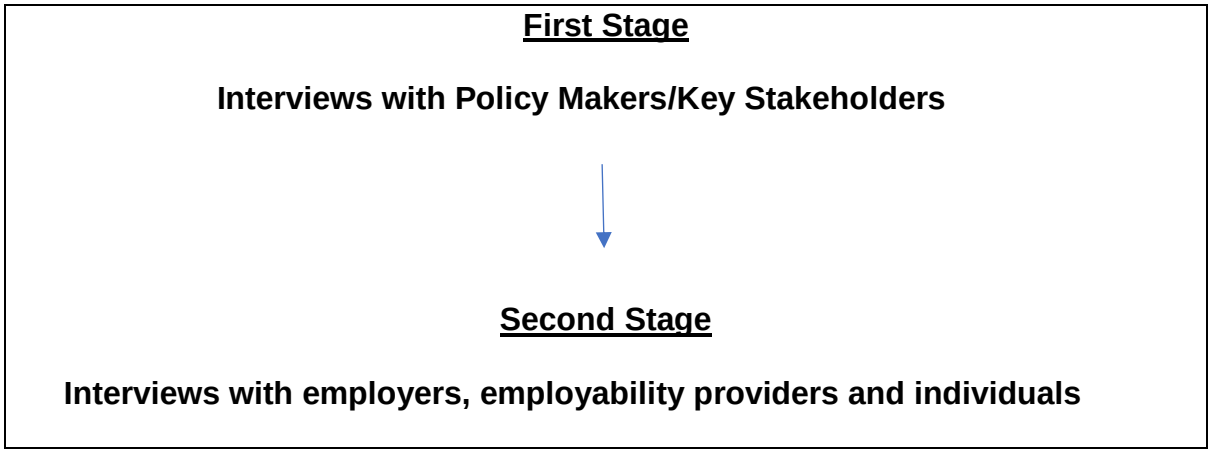
4.4 Pragmatic Research

As discussed earlier, the research will be practice based, linking it to pragmatic principles as opposed to pragmatism as a philosophy. For example, pragmatism is associated with a mixed methodology, whereas the basis of this research agenda is to use the research approach and methods most suited to deal with the research problem or aim. This links to the researcher, interested in practical discussions and

real-life problems, and a focus on improvement linked to pragmatic action. There have been contradictions, for example, the pragmatic principle of ‘knowledge generated for a particular purpose’ in line with improvement versus the action research link of ‘practitioners generating own knowledge’ (Hammond, 2013) as an example, demonstrating a practice versus theoretical dissension. This argument transcends philosophical debates but is more centred in applicability, as noted ‘social research should be regarded as a craft skill that is autonomous from philosophical disputes, which means that research practices may be evaluated on pragmatic grounds’ (McGovern and Alburez-Gutierrez, 2017:101). A well-regarded example is that of Searle (1999) in describing triangulation, not tied to a positivist paradigm, the ‘effect is enhanced by the elicitation of multiple perspectives on, or constructions of, a phenomenon’ (Searle, 1999:475). Searle advocated a series of ‘styles’ that require respect, which build on an apprenticeship in the field, reading others work, building on ‘principled decisions’ rather than ‘uniformed beliefs’ (p. 476).

Pragmatism can be described as a ‘transparent’ process requiring ‘rich descriptions’ (Bansal and Corley, 2011) however an identifiable challenge is that ‘discovery can be serendipitous’ which requires ‘methodological rigor…through the authenticity and candour of the text’ (ibid:236). Aligned to an interpretive paradigm focused on ‘descriptions, insights and explanations of events so that the system of interpretations and meaning, and the structuring and organizing processes, are revealed.’ (Gioia and Pitre, 1990:588). Thus, a qualitative research approach focused on practical discovery and application to the field is central within the project. There were two distinct stages, the first focused on engagement with key policy makers and stakeholders within the adult social care sector and a second stage of research with employers, employability providers and individuals in the sector.

Figure 3: Stages of the research



4.5 Research Design - Applied Research

Applied research has been described as research that 'aims to address some very specific questions or challenges where at the end of the process they'll be closer to some kind of solution, or resolution, or understanding that has really moved forward how we can address these issues or questions. It's about practical solutions as well as furthering knowledge' (Nicholls, 2018).

When discussing applied management research, authors such as Grun (1987) note four key aspects inherent within that type of research; 'Novelty', 'Grounding in basic research', 'immediate relevance to practical business' and 'implementation by cooperation with practical business' (p.5). The same author also notes the distance that is commonplace between 'practical business' and academic staff, impacting upon the implementation of research, something which is described by others as the 'research to practice gap' (Valentino and Juanico, 2020).

Others, particularly when looking at teacher settings, like McIntyre (2006) have also demonstrated limited practice that is present in educational settings, due to the lack of practicability and usability of the research being produced. Arguing for research that was, ‘pragmatic, with primary concern being focused on the usability and usefulness of the knowledge’ (McIntrye, 2006:359). Authors such as Aityan (2022) have also emphasised these points, noting the importance of the purpose behind the research, where completion of the project is only through ‘practical recommendations’ that were ‘constructive’ and ‘feasible’, these recommendations only being achieved with a clear purpose. Without these factors, the research can become a wasted effort, in terms of time and cost.

These aspects can be viewed in this project’s research aim, there is a requirement to solve the issue of recruitment of new entrants into adult social care due to the level of vacancies. The research then aims to review current interventions used and develop policy guidance to assist the sector, through clear recommendations.

The work of Schön (1983) is also useful here with regard to the notion of ‘reflection-on-action’ where thought and action are interlinked leading to continuous learning and change, ‘concerned to improve practice and to develop additional competence … set of attitudes towards practice based upon broader understandings’ (Leitch and Day, 2000:181). This will be through involvement of multi-stakeholders in the research. As opposed to a conceptual framework, there will be fundamental elements to outline the applied research premise of the research. Which combined can develop policy solutions derived from evidence.

4.6 Evidence Based Policy

Discussing the challenge within problem-solving research, due to a 'misconception' of the 'policy process, which is rarely characterised by rational decisions made on the basis of the best information' (Young et al., 2002:218). Investigation of the 'validation' required within the policy process is useful. Authors have discussed four types of evidence: research knowledge; practitioner knowledge and experience; organisational knowledge; and lived experience and voice of service users and carers (Gerrish et al., 2011). However as questioned by authors such as Andrews et al., (2020:598) 'what counts as knowledge and whose knowledge counts?'. Rather than attempting to bring in a different type of knowledge into existing domains, the 'dialogue' process is critical (Andrews et al., 2020). To meet gaps within the policy process, the use of narratives via 'storytelling,' is promoted by authors such as Andrews et al. (2020) and Davidson (2017). When discussing evidence-based policy it is not merely to find the 'best option' (Davidson, 2017) but ensure agreement and clarity on what the best option is.

'How' this can be done, has been discussed by authors such as Cairney and Oliver (2020), noting a closer bridging of the gap between 'grey' literature studies and academic studies, emphasising the need for shorter and more readable text that can have wider accessibility, with increased interaction by practitioners and policymakers. Advocating the idea of a 'policy entrepreneur,' to go to where the issue is and adapt to the 'rules of the game' and 'frame evidence' as per the 'dominant language' (Cairney and Oliver, 2020). Whilst recognising that this is a complicated process and 'relative success results more from societal structures and the policymaking environment than simply from skilful entrepreneurship' (ibid:238).

The researcher having previous experience in the field, will be helpful, although elements of ‘politics’ and social elements are still unavoidable. The best method to counter this is by ensuring that ‘pragmatism’ is front and centre of the research strategy.

4.7 Methods

Methods gain prominence within research, despite being regarded by some as mere ‘tools’ (Charmaz, 2004), to gather the required information to meet your research aims and objectives.

4.7.1 Interviews (Semi-structured)

Interviews are described as a ‘basic information gathering tool’ (Denzin, 2001:23), such is their ubiquitous nature in social research. Others have also stated that sociological research is centred around interviews (Tavory, 2020). Philosophical foundations also play a part in the interview, from ‘interpretivist versus realist understandings’ (Tavory, 2020:450). Charmaz (2004) has discussed the superficial nature of the relationship within interviews, lacking ‘sustained contact’ and giving out ‘clear nonverbal messages’ which impact reliability.

There may also be issues of ‘desirability bias’ (Tavory, 2020) where the interviewee is less likely to share negative factors, and ‘agency bias’ (ibid) where interviewees can inflate their own involvement. Furthermore, ‘hindsight bias’ where ‘interviewers too rarely ask about the paths not taken—the near-misses and the plausible turns that could have been—that our interlocutors are often well aware of.’ (ibid:452). Jerolmack and Khan (2014) consider this notion with regard to the attitude-behaviour consistency (ABC), which is the disparity between attitudes and behaviour, using the ‘truism’ ‘talk is cheap…actions speak louder than words’ (p.179). They criticised the reliance on

verbal information and advocated ethnography. Although DiMaggio (2014) states that interviewers can ‘probe for meanings’ (p.233). Becker and Geer (1957) noted that there was the reticence to speak of particular topics in interviews perceived as not relevant, ‘insensitive’, or ‘impolite’ whilst the researcher may also not have the necessary information to enquire about these topics during interviews, advocating participant observation as a solution. Others such as Lewis (2007) have prioritised the relationship aspect, feeling that once trust develops, there is more likelihood of the interviewee ‘volunteering’ information.

The reverence given to interviews in research, is described as ‘a privilege granted us, not a right that we have’ (Denzin, 2001:24). In research, retrospective methods such as interviews have been most popular, they have been challenged because they require recall and judgement leading to ‘ad-hoc construction’ (Rausch, 2014) or the use of a distorting lens (Becker and Geer, 1957). However, for the purposes of multi-stakeholder research and getting the required information in a practical and reliable manner with the opportunity to probe and elicit information, the question arises as to whether there is a better option than interviews in a semi-structured format?

4.7.2 Other Methods Reviewed

Focus Groups: these can bring about collective thought through a mutual and group process, particularly for participants who may benefit from engagement with each other and feel safer (Gawlik, 2018). However, the approach has been criticised for its ‘generalizability’ (Bryman and Bell, 2007), others have labelled them as a ‘social event that includes performances by all concerned’ (Smithson, 2000). Focus groups may offer scope when developing collective ideas (ibid), there is however the risk of ‘groupthink’.

Participant Observation: Observing participants, particularly those going through employability programmes and pathways may seem desirable, particularly when participant observation is so closely tied to qualitative organizational research (Van Maanen, 1979). However, these hold key challenges and barriers. Notably, blurred lines in objectivity as a researcher, whilst there are 'ethical dilemmas … concern that the presence of the investigator may influence the way informants behave' (Iacono et al., 2009:42). There is also the challenge of gaining sufficient or independent access to these settings in the first place, where 'people like to present themselves in a positive way' (Bickman and Rog, 2009:20) or on the flip side, individuals may hold hidden vulnerabilities or anxieties that can be unnecessary exacerbated by being observed.

Diaries: One way to reduce the practical-participatory tension within the research is via the use of diaries, 'the opportunity to reveal as little or as much as they feel willing to do so' (Milligan et al., 2005:1882) and complement interviews (Bartlett, 2012). Although diaries also hold ethical issues, related to impact on lives and the 'intimacy of data shared' (Cao and Henderson, 2020:842). The challenge of 'participant commitment' is well versed by writers such as Radcliffe, (2016), as well as challenges of 'respondent fatigue' and 'repetition' as well as 'reactive effects', the diary influencing behaviour (Cao and Henderson, 2020).

Other methods were reviewed as above, to gather the information required, it was thought that interviews were regarded as the most reliable method.

4.8 Sampling Strategy

For any research It is important to have a good sample, though the number is not easily defined, with Eisenhardt (1989) discussing theoretical saturation and others

such as Lincoln and Guba (1985) stating data gathering should occur until the ‘point of redundancy’. Although an ‘adequate’ sample is deemed one of the ‘fundamental’ tasks of a research project, following on from choosing your research topic and research design (Marshall et al., 2013). The same authors, whilst noting the influence of subjectivity in deciding how many interviews to undertake, nevertheless advocated between 15 – 30 interviews. For ‘high-level, overarching themes’ six interviews were viewed as ‘sufficient’ (Guest et al., 2006). In a more recent review of organizational and workplace research articles utilizing qualitative interviews, it was noted that the ‘median overall number of participants interviewed per study is 32.5 … numbers range from one to 330’ (Saunders and Townsend, 2016:846).

The sampling approach adopted can be best described as a non-probability type, described as focused upon key ‘informants’ (Peters and Waterman, 1982) with an element of snowball sampling (Farquharson, 2005). This approach chimes with research that notes a combination of sampling strategies can be useful (Wan, 2019). Despite recognizing a need for more ‘epistemological and ontological assumptions’ (Saunders and Townsend, 2016) when describing the rationale behind a sample.

Within this research, to reach the desired population different approaches were adopted, including a presentation to a national forum and discussions with initially policy makers before key organisations and individuals working within the field. In correspondence with potential participants, the researcher’s interest in the subject area was referenced including past work experience including the researcher’s time in frontline care.

4.9 Primary Research with Stakeholders

4.9.1 Employers

Employers within the research are a key actor as they make recruitment decisions. The research aims to get their perspective of challenges faced, good practice, and action as well as solutions to increase employability pathways in entrant recruitment processes. Combined with this is the nature of 'entrant' level work, sometimes referred to as 'low wage' or 'low skill' work and particularly at the nexus of a welfare system that can be restrictive as previously discussed in Chapter 3. Historically research has noted that the majority of those that transition from welfare to lower 'status' jobs face key barriers (Atkinson and Williams, 2003). Whereas much literature when discussing employer support strategies focus on professional or 'higher status' roles (ibid). Although other research found that being unemployed is a lesser barrier than 'problematic' work histories (Hasluck, 2011). The recruitment channel plays a key role used by employers, with a tendency to use informal channels invariably excluding unemployed job seekers who are using more formal channels such as the Jobcentre (Hudson and Runge, 2020). Using informal approaches and word of mouth can discriminate (ibid) as they can exclude already underrepresented entrants. Previous research has also found the difference between words and action from employers is apparent, with employers noting a higher likelihood of hiring ex-offenders and black ex-offenders for example, whereas practice showed this not to be true (Bonoli and Hinrichs, 2010; Page and Quillian, 2005).

4.9.2 Employability Providers

Employability providers act as a key interface in the journey to employment. Their role has been particularly noted in welfare to work programmes in the UK with the use of

intermediary organisations (Ingold and Valizade, 2017) common. McGurk (2014) discussed labour market intermediaries containing characteristics of being ‘passive’ and ‘active’ and ‘in practice … demonstrate both passive and active characteristics’ (McGurk, 2014:5) and in the UK they are central in the employability pathways for participants. The intermediaries are predominantly funded via public funds (ibid), performing key tasks as ‘matchmakers’ and ‘information providers’ (Ingold and Valizade, 2017). Thus, the research engages with employability providers with involvement in employability programmes within the adult social care sector.

4.9.3 Policy Makers / Key Stakeholders

The importance of seeking the views of policy makers is due to the evidence-based focus to inform practice within a contextual platform where governmental action is highly influential in the sector. As well as policy derived from national government, there is engagement with a range of policy makers and non-governmental organisations within the adult social care sector in Scotland. There is a notion of policy makers, in reality, identifying them can be challenging, due to a range of factors including political changes and access issues (Signal et al., 2018). As discussed in Chapter 2, the sector is challenged and fragmented with many of these policy makers representing interest groups and distinct sub-groups. This may limit their openness, along with a natural reticence to discuss as well as underplay their own role in the process of policy formulation (ibid).

There is a further issue in ‘reporting findings from the study whilst maintaining confidentiality’ (Farquharson, 2005:345), particularly as Farquharson advocates a ‘snowball’ technique via peer nomination to get to the required participants, assessing influence by the number of nominations received. Others have gone down the route

of identification by ‘seniority’ believing that was a key factor in ‘policy formulation, implementation and development’ (Duke, 2002). Within a policy context, as per Chapter 3, operating between UK and Scotland employability practices, with an increasingly active posture by the Scottish government in welfare to work approaches, it is an opportune time to discuss policy formulation.

However, there will be a realisation of the criticism, where the views of ‘professionals’ have been taken over those of others, for example the recipients of the service (Young et al., 2002) leading to the wrong path within research and policy solutions. Thus, the views of individuals working on the frontline in adult social care will also be important.

4.9.4 Individuals working within Adult Social Care

The views of individuals working within adult social care are central. Previous research has pointed to a need to incorporate the views of participants/service users, there has also been a caution about the challenges of doing this within an ethical framework of causing no adverse impact or stress. Challenges also relate to time and resource invested to ensure a trusting and meaningful relationship is established (Szmukler et al., 2011). This is linked to other writers that have discussed co-production and participatory processes for participants in decision making (Musekiwa and Needham, 2021). Involving recipients of the services that you are assessing, is valued (Slattery et al., 2020) and can act as an opportunity for reflection and contribute to social change. The same authors have noted the literature lacks clear descriptions, as well as consistent terminology and insufficient evaluation – particularly longer term when service users are involved. Whilst appreciating there is vulnerability due to a power imbalance as discussed in Chapter 3 between employers and employees. Despite

inherent challenges mentioned, for multi-stakeholder research, a good breath of participants is required.

The table below shows the 34 participants that took part in this research project:

Table 3 Participants

Policy Makers/Key Stakeholders

Number	Job Title	Type of Organisation
1.	National Workforce Lead	Sector Body
2.	Chief Executive	Sector Body
3.	Employability Adviser	Sector Body
4.	Senior Policy Officer	Sector Body
5.	Partnership Manager	Government Body
6.	Work Coach	Government Body
7.	Senior Officer (Planning)	Local Authority
8.	Service Manager – Care at Home	Local Authority
9.	Chief Social Work Officer	Health & Social Care Partnership
10.	Senior Officer (Employability)	Local Authority
11.	Curriculum Head – Health & Sport	Further Education College

Contact was made with employability providers within the public, private and third sector, focused on those supporting individuals moving into employment within adult social care. The respondents of those interested in taking part in the research are listed below.

Employability Providers

Number	Job Title	Type of Organisation	Sector
12.	Programme Director	Large Employability Provider	Third Sector
13.	Deputy Director	Large Employability Provider	Third Sector
14.	Head of HR – Employability	NHS Board	Public Sector
15.	Employability Adviser	NHS Board	Public Sector
16.	Youth & Employability Officer	Local Authority	Public Sector
17.	Employer Liaison Officer	3rd Sector Organisation	Third Sector

Employers

Number	Job Title	Type of Organisation
18.	HR Business Partner	Small - Medium Sized Care Company
19.	Director of HR	Large 3rd Sector Care Company

20.	Clinical Quality Manager	Large Private Care Company
21.	Resourcing Manager	Large Private Care Company
22.	Home Manager	Large Private Care Company
23.	Managing Director	Large 3rd Sector Care Organisation
24.	Recruitment and Retention Advisor	Large 3rd Sector Care Organisation
25.	Care Home Manager	Private Care Home
26.	Senior Recruitment Consultant	Large Care Provider
27.	Director	Large family run care home business

All the individuals that were interviewed were those that had been working in frontline adult social care roles at the time of the interview or until recently. It was a challenge in securing agreement for individuals that had been involved directly in employability programmes partly due to the impact of the pandemic on employability programmes at the time of the research and more so generally in finding individuals that had moved into adult social care after completing an employability programme. Four of the seven individuals interviewed had completed an employability programme prior to starting their role. And three had no experience of completing an employability programme prior to starting. Thus, data analysis in relation to employability experience will be limited to these four individuals. All were selected via word of mouth through networks and e-mail. In the end, none of the individuals interviewed worked for any of the employers interviewed. Although there was a plan to interview four individuals from one of the employer providers, this had to be cancelled due to the challenges the

employer was facing due to the ongoing Covid pandemic. Thus, it was not possible to relate individuals experiences at an employer level but focus more upon the sectoral level. All individuals working in the sector were interviewed face to face at mutually agreed venues, except for those marked ** where correspondence was via e-mail due to preferences and challenges of meeting due to the ongoing pandemic.

Individuals working within adult social care

Number	Title	Sector
28.	Ex-Manager	Ex-Care at Home Manager
29.	Care Assistant (Agency)	Care Home
30.	Senior Carer (Agency)	Care Home
31.	Support Worker	Care at Home
32.	Support Worker	Care at Home
33.	Senior Care Assistant **	Care Home
34.	Deputy Manager **	Care Home

For all other stakeholders, interviews were online. All participants were asked for their consent for interviews to be recorded and all agreed. At the time of these latter interviews with individuals working in adult social care, in April and May 2022, the rules around meeting during Covid-19 had been relaxed.

All interviews were recorded and thereafter manually transcribed by the researcher. The total length of recordings was 1,314 minutes and 41 seconds. The average recording length of the 32 interviews was 41 minutes and 07 seconds.

4.10 Qualitative Analysis

Qualitative data analysis has been described as the ‘process of bringing order, structure and meaning to the mass of collected data’ (Marshall and Rossman, 1999:150). Taylor-Powell and Renner (2003) discussed this process further as ‘data familiarization’, production of primary codes, ‘categorize themes’, ‘capturing codes’, ‘revising themes’, ‘formation of the group’ and ‘pattern’ formation and making the relation between themes. A common method of an inductive approach to data analysis is grounded theory, ‘the most widely used framework for analysing qualitative data’ (Bryman and Bell, 2007:584). The core elements of grounded theory are outlined below.

1. Data Immersion
2. Open Coding
3. Clustering – reiterative process until ‘Category Saturation’
4. Axial Coding
5. Selective Sampling
6. Get some feedback from a sample of participants.
7. Emergence of core variables
8. More respondent validation
9. Modification to emergent theory

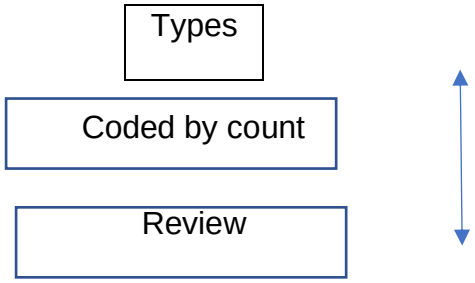
Charmaz (2004) has discussed criticism of the approach, notably the rush to analysis as opposed to understanding and interpreting meaning, a rush to ‘epiphanies’. To do it properly takes time. This research will use an ‘inductive’ thematic approach. Thematic analysis is described as the need to ‘recognize the central importance of the

researcher's engagement with the data through the process of analysis' (King et al., 2018:182). As others have said, the researcher becomes the 'instrument for analysis' (Nowell et al., 2017:2).

Thematic analysis is described as analysis that looks for 'themes, or patterns, that occur across a data set (such as a series of interviews, observations, documents, diaries or websites being analysed).' (Saunders et al., 2019:651). A key part, as described by authors, is familiarisation with your data. Within this context, it is important to state that the interview transcripts were typed up manually, due to the importance of a 'natural' element and becoming comfortable with the data. Despite the laborious nature of the task, this allowed for increased understanding. During the transcription process each audio recording was listened to numerous times whilst typing up the notes and this allowed increased familiarity with the data. This was done after each interview thus the process was not a stand-alone piece of work.

All participants were categorised into specific types such as 'policy', 'employers', 'employability providers' and 'individuals'. A spreadsheet was developed for each type and categorised with tabs related to each interview section of the research interview with all data categorised into key themes. A theme is described as a 'broad category incorporating several codes that appear to be related to one another and which indicates an idea that is important to your research question.' (Saunders et al., 2019:657). The responses were reviewed numerous times and at separate times of the day and over a number of different days to ensure robustness in interpretation.

Figure 4: Categorisation process



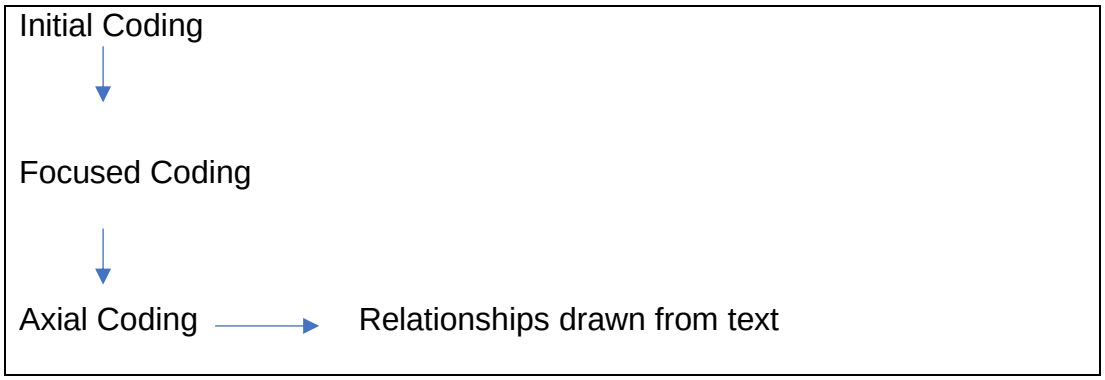
As noted by authors, this process is focused upon familiarization, drafting codes, and then searching for themes, then reviewing these before writing up (Nowell et al., 2017). It is this process of searching for themes that can be open to criticism as it relies on researcher judgement. Although thematic analysis has been lauded for its adaptable and flexible approach, it has also faced criticism due to this flexibility, which can lead to 'inconsistency and a lack of coherence when developing themes derived from the research data.' (Nowell et al., 2017:2) and lead to the term 'elusive' used to describe this analytical method (ibid). Outlining the process in sufficient detail and noting a need to be flexible in line with the research purpose as opposed to a singular focus on the research questions was key (ibid).

This process is critical to ensure the effective reporting of data analysis (Merriam and Grenier, 2019; Rheinhardt et al., 2018). The focus and responsibility within this form of pragmatic and action orientated research falls on the 'practitioner' (French, 2009), beyond the use of a computer programme (Charmaz, 2004). Thus, applications such as NVIVO a computer assisted package were thought less valuable in this context, due to the researcher's familiarity and understanding of the research and output. The analysis technique that was used can be best described as a grounded approach, focused upon limiting any preconceived ideas and notions and letting the text in the transcripts inform the codes and key themes.

The research process involved initial coding, where ‘early analysis by looking at smaller rather than larger units of data’ (Saunders et al, 2012:569) were placed into broad headings. Then more focused coding was utilised where you are ‘analysing your data headings to test which of your initial codes may be used to categorise larger units of these data.’ (Saunders et al., 2012:569), allowing for the identification of key themes. Themes have been described as categories identified by the researcher; linked to the research focus and question; building on the codes that have been identified from the transcripts and provides the basis for the researcher in understanding the data (Bell et al., 2019).

Then a process labelled axial coding, referring to the ‘process of looking for relationships between the categories of data that have emerged from open coding.’ (Saunders et al., 2012:571) and once these ‘relationships have been recognised you will seek to verify them against actual data you have collected’. (*ibid*). This coding process is shown in Figure 4 below.

Figure 5: Coding Process Explained



Due to the amount of data that was produced in this research, key themes were identified. An iterative process was adopted, where the themes emerged from the research analysis. These were grouped within the research objectives initially, however as the coding process continued, it became apparent that there were cross-

cutting themes, within areas such as employability, fair work, underrepresentation, innovation and employer practice across different interview sections, described in detail across Chapter 5. Thus, this meticulous approach was instrumental in identifying key outputs from the research.

4.11 Ethics and Risk

Ethics is a fundamental concern for any research project, regardless of the scale or scope. Ethical principles are constant, described as ‘habitual’ principles of ‘informed consent, harm minimization and confidentiality’ (Schaefer and Narimani, 2021). In the earlier discussion of quality in qualitative methodological research by Tracy (2010), ethics was a key criterion. A need for ‘procedural ethics’ and transparency in the institutional review processes.

A participant information sheet was sent to all interested participants. Consent for the research study was granted via the departmental ethics committee. This included a full disclosure of the research study, its purpose, consent processes and voluntary nature of research. This included an assessment of risk and outline of interview questions for each cohort of participants. Data handling and access criteria was explained along with individual and organizational confidentiality. The contact details of the Chief Investigator as well as Chair of the departmental ethics committee were shared in the participant information sheet for any questions or concerns from participants. The privacy notice for participants of research projects at the University of Strathclyde was also shared in advance for all interested participants. With all relevant information being sent at least 14 days in advance of any interview date.

Tracy (2010) also noted ‘relational ethics’, described as ‘ethical self-consciousness in which researchers are mindful of their character, actions, and consequences on

others' (p.847). This factor also links to another concept of 'situational ethics' and need for constant reflection due to contextual factors, including 'exiting' and on how to 'present the research so as to avoid unjust or unintended consequences' (Tracy, 2010:847). The research participants motivation for being involved is useful to also assess, writers have noted many reasons including 'subjective interest, curiosity, enjoyment, individual empowerment, introspective interest, social comparison, therapeutic interest, material interest and economic interest.' (Clark, 2010:404). The writer explaining the therapeutic function not being via a counsellor type relationship, which would flag ethical issues of their own, but via a 'non-judgment space' (Clark, 2010). Others such as Warwick (1982), have noted the opportunity to express opinions in an area of interest. Economic interests were not explored, and no financial inducements were used in the study.

Key principles adhered to include the voluntary nature of participation such that, 'voluntary means without threat or undue inducement' (Sieber, 2009:111). Participants were 'informed' about the process in language that they could easily understand (Sieber, 2009), with full details of the project and what it entailed. This is particularly pertinent, as the decision-making process of involvement is critical as participants include entrants to adult social care who may feel inclined to join the research project.

4.11.1 Role of the Researcher

There are ethical concerns of confidentiality, protection of workers, approaches from competitors, value framework of both parties and personal involvement within an organisation that can lead to bias (Rapoport, 1970). Within policy networks in particular, others may be aware of the research and also that the researcher has

already spoken to colleagues (Farquharson, 2005) or peers. This leads to the need to have diplomacy and tact whilst protecting confidentiality.

The role of the researcher is key, an individual reflexivity as well as a commitment not to 'exploit' (Smith and Blumenthal, 2012:83). However, more so, 'social characteristics of the researcher can influence the quality of the research.' (McGovern and Alburez-Gutierrez, 2017:99), a need to ensure that personal beliefs and biases, conscious or not, do not influence the research. As noted by Charmaz (2004:982), 'To understand meanings, we need to bracket our internalized views of reality and rationality' and elements such as 'location', 'assumptions' and 'experience' can shape the process of research (Hunt, 2010). This includes an 'unspoken judgement on whether … commonality exists to cultivate a level of trust that will allow for the sharing of their views on a variety of topics' (Horsley, et al., 2017:112). The research project by having procedures and clear explanations, can promote 'transparency, transferability and replicability' (Young et al., 2002). And attitudes and behaviour will be key, the importance of the research being accessible, the importance of being able to '(1) listen and (2) allow participants to speak up' (Rudloff, 2018:173).

Ethics is not a systematic process as all eventualities cannot be planned for. Effective ethical approaches, full adherence to codes of ethics and approval processes and safeguards are important. However, it is also important to note that 'ethical questions appear at every stage of the research process requiring researchers to make their own choices depending on the context of the research and, most importantly, according to their conscience' (Ciuk and Latusek, 2018:209). The role of the researcher requires the highest level of criticality.

4.12 Limitations of the Research

- **Qualitative interviews** may make it difficult to confirm the reliability of the data provided due to implicit biases from stakeholders. This may include employers having a 'positive slant' to their approaches in key areas such as equality, fair work and values-based approaches. This is countered by having multi-stakeholder research.
- **Longitudinal research** is a factor for new programmes and employability initiatives. As noted in Chapter 3 there has been a plethora of Covid induced employability initiatives across the UK. As many programmes are new, there may be an issue with responses noting the need for more time to assess impact combined with the pandemic period stalling initiatives. Longitudinal research could offer a solution in this, but this form of research has its own criticisms in relation to any finding open to continuous change. With added factors of time and cost including impact upon those being researched during a pandemic.
- **The Covid-19 pandemic** impacted this research, as with much research during this time period, due to restrictions. Thus, the majority of the interviews were undertaken via online video technologies. These have become common during the pandemic, but many may favour face to face interviews due to visual clues and ability to assess the work environment (De Villiers et al., 2021). However, settings such as care had high risks and impact of 'staff catching and transmitting the coronavirus' (Hanna et al., 2022:7). Face to face interviews were not thought a feasible option until the latter stages of the research project, when rules allowed this, using distancing and consent measures prioritising public health and importantly only ever taking place within a non-care venue or setting.

Chapter 5: Findings

This chapter outlines the findings from the interviews carried out with multi-stakeholders within adult social care. The findings are presented within key themes identified in the data analysis, namely, fair work, employability approaches and capacity, after an outline of the findings related to recruitment and retention within the sector. These findings relate to the key research aim of reviewing employability interventions through employers to increase entrants into adult social care within Scotland.

5.1 Recruitment and Retention

5.1.1 Employers

When describing most common recruitment methods used to recruit into adult social care there was a mix of methods. These included job sites and portals, such as *Indeed*, *S1 jobs* and *Good Moves*, social media, particularly *Facebook*, as well as radio advertising. Some discussed particular work with marketing colleagues to try and innovate around job adverts and social media to stand out from the crowd. There was also use of word of mouth and employee referral schemes and some limited discussion around recruitment fairs and open days.

All employers noted the challenges and difficulties they faced recruiting in the last year. Words used to describe the situation ranged from ‘challenging’ and ‘problematic’ to ‘horrific’. A number described a challenging situation due to the Covid pandemic and lower volumes of candidates entering the sector putting the sector in a precarious situation. One employer did note improved conversion rates into employment from the lower application intakes, this employer having a distinct recruitment approach

focused upon a relational model. A self-described ‘master recruiter’ stated it had been ‘nigh on impossible to recruit the usual way’ [Participant 22: Home Manager]. Employers referenced high vacancy rates, ‘about 190 vacancies at any one time’ [Participant 18: HR Business Partner] with some noting, ‘the whole pandemic has put people off applying for social care’ [Participant 25: Care Home Manager].

Employers were also asked about barriers to recruitment. These were categorised into pay, terms and conditions; perception and societal view of the sector by the public and media as well as pandemic influenced factors, including fatigue. Although not as prominent, employers also noted concerns around the checks required during the application processes as part of safer recruitment which some felt may put candidates off. The impact of having to undertake SVQ qualifications for those that have not undertaken learning in a long time was also highlighted by some employers. Benefit regulations on the ability to work, was referenced as well, jobseekers saying ‘“I can’t work this week, because of my benefits” and we get that quite a lot in terms of people’s responses’ [Participant 27, Director].

There was also a recognition that the nature of the job can put people off applying or staying, ‘it is a strenuous job, it’s a hard job, it’s 12 hours pretty much on your feet all day. There are elements of residents who might be quite distressed towards you…there’s the dirtier side of the job…It always surprises me when some people don’t think about that’ [Participant 25, Care Home Manager].

There were a number of observations, around new ways of working in the sector due to the pandemic, and some felt that this was against more trusted, traditional ways of doing things.

> That's the thing we are really missing the most, how someone really is in person … you can't tell if someone's got body odour or if someone's got good personal hygiene via zoom call … those seems really simple things but really important in terms of whether someone can evidence themselves as someone that can care for others [Participant 27: Director]

Asked how well they had been able to overcome challenges, employers felt they were 'trying hard' in a difficult market. This included financial incentives such as 'golden hello' payments, although many stated that they are restricted in terms of how much they can do to increase pay, due to contracts and funding. Some noted the importance of pay linked to more prominence of heightened cost of living concerns, making the situation difficult, with many staff looking at the 'hourly rate' as a key determining factor in choosing to join. An employer noting that having comparable pay rates across the sector was actually the only factor in them not facing further reductions in staffing.

An employer within a care home noted a recent increase in staffing numbers, but this was from the care at home sector, as they had been able to offer more stable contracts. Others talked about the importance of having useful and honest conversations about the role and the nature of the work including the realities of the job, including positive aspects such as the difference that can be made for vulnerable people. Some discussed attempts to be more flexible to assist staff, although many shared a common requirement now in recruiting where they are having to 'dig' for candidates.

Employers were asked about what assisted them in this situation, many related specific areas such as word of mouth and a community-based approach, with colleagues sharing vacancies and opportunities, linking it to the culture that was in place within the organisation. This word of mouth also extended to an understanding of the reputation of the provider in a digital space, including social media use and online reviews. This also related to the vital role of the manager.

> … if the person speaks to their pal who works in the home, oh no, it's a bloody nightmare in there, it's not going to work. You know, you've got to be an engaged manager, you've got to be proud of your care home because you want to sell it for people to come and work … promote a work life balance type thing. So, people are coming into the work happy, and they are leaving happy. And they're not knocked into the ground. Which is hard, when you have shifts to cover [Participant 22, Home Manager]

Others mentioned the size of the organisation and its growth, which had aided recruitment efforts. Positive interventions from the Scottish Government during the pandemic such as monetary awards and access to job portals were also thought to have helped. This was balanced with comments comparing this to the support provided to the NHS as well as disparities between local authority, private and third sector providers in terms of salaries and conditions on offer.

5.1.2 Policy Makers / Key Stakeholders

When discussing the most common recruitment channels, interviews was common, although the pandemic had moved much of this online, and hybrid approaches, were thought likely to stay in future. PVG completion had also moved online. There was a

traditional mindset within the sector around recruitment described as ‘not that sophisticated’ [Participant 2, Chief Executive]. In terms of common tools to recruit, these related to job sites like *Indeed* (described as the most frequently used), along with others such as *my jobs Scotland* (commonly via the local authority employers) and *find a job* (via the DWP network). Along with social media, word of mouth combined with local knowledge was common with recruitment fairs limited as per 5.1.1. Policy makers and key stakeholder experiences of recruitment were mixed, due to their indirect role. Challenges were similar to those outlined by employers with more recognition of retention difficulties, ‘highest rate of attrition is in the first year of someone coming into the sector and it decreases the longer someone stays in the different touch points they stay in that first year … there is a very high number of people who drop out after induction training [Participant 1, National Workforce Lead].

In terms of barriers, participants were able to describe work as part of various groups and networks around pay, terms and conditions and effective voice, highlighting concerns. These related to pay and terms and conditions, availability of workers, awareness around the role and negative media attention including the value placed on workers by society. Other points distinct from employers included competition amongst providers and the fall- out from Brexit. Within the education context conversion from courses into adult social care employment was an issue along with parental influence upon career choices.

> We recruit very healthy numbers on to our health and social care courses… what I would say, the conversion into employment I think across the sector, the biggest work that we can do in terms of the recruitment into it, is really around,

> promoting adult social care to be a sustainable and aspirational career path … but really attracting the younger cohort through the school pathways, getting parents on board. I think that is where our biggest challenges are [Participant 11, Curriculum Head]

There were a host of enablers that participants felt had assisted the sector, ranging from improved processes by Disclosure Scotland including digital applications, shorter courses and opportunities provided by training providers and the extension of registration to 12 months by the SSSC. The posting of vacancies free of charge on the *myjobscotland* portal, with a separate page in liaison with COSLA for the third sector was also highlighted as a means to promote the value and ethos of social care work within the third sector. Furthermore, 'word of mouth' was thought to be a useful enabler through local recruitment and a physical presence in the jobcentre by providers. Covid was also referenced as an enabler, allowing for the trialling of novel approaches to deploy staff and with virtual placements.

5.1.3 Employability Providers

Many providers mentioned similar job sites and methods to 5.1.1 and 5.1.2 and that the sector was traditional in outlook:

> At the moment, recruitment is recruitment, they do what they have been doing, for a while with a little bit of social media…. we don't look at pools that we have for recruitment. We don't go out to secondary schools and talk about, we could, entry level posts to see if there are people within that cohort who don't want to go down the traditional route of other things, that want to come in and take on these roles. What we do is slap an advert out to joe public and see what

> happens. If we were more focused and more targeted, we may find it more better' [Participant 14, Head of HR – Employability].

Others mentioned direct recruitment and recruitment to the bank staff. Some providers, due to their contractual requirements, noted they can only get referrals from specific agencies such as DWP and the jobcentre, Skills Development Scotland, and schools and via Developing the Young workforce.

Employability providers noted difficulty in placing individuals into adult social care due to a number of reasons including a lack of engagement from 'adult social care units' at local government level, who they felt monopolised vacancies. And due to the cohorts that providers worked with, it was felt that the sector was closed off for many, with disabled workers referenced.

> [There is] huge stigma attached to disability and employment. But specifically, within adult social care, based on an opinion that if you are disabled you can't support someone else … so we don't tend to recruit many people in, in fact I would say per year it is probably less than 5% ... it's not necessary a preferred career path for a lot of people [Participant 13, Deputy Director]

Due to the pandemic, there had been limited placements, one employability lead noted that they have not had any placements for the last two years. And the recruiting policy for some organisations, was 'the first sweep is qualification, yes or no, it's not there, no matter how good a candidate you are, you don't get past go' [Participant 16, Youth & Employability Officer]. Although also noting that there is proposed change to align more to processes linked to 'values-based recruitment'. A number of interviewees

discussed ongoing work to try and get more people engaged into the sector, this for many related to work with younger cohorts:

> … the barrier to that is that you are never going to get youngsters into it and if you don't catch them early on, it's that early intervention from a recruitment point of view…Scottish Colleges and Universities have created, introduction to care course and what a difference … been enrolled on by I think 8 people. 1 male sadly, the rest female…. average ages has been early 20s so we're getting to, bringing down the average age, so hopefully that will reduce the barrier [Participant 16, Youth & Employability Officer]

> For anybody aged between 18 and up to 29. And on that basis, we did a one month course where we give them all the necessary tools that they require to get into a care job and to understand what a care job encounters, is about … So out of that, we had, we actually had 7 in total, one that went on to do nursing. With the 6 that were left, 5 of them went into an apprenticeship and one of them now works on the bank with one of the care providers [Participant 17, Employer Liaison Officer]

In terms of barriers faced, discussions ranged from stigma around the ability of some candidate groups to carry out roles and perception and status of the sector in society. The application forms were viewed as too 'wordy' for job seekers. Although it was felt that adult social care when compared with the health service can be quicker to recruit. A participant felt that a key problem was that people were often fast tracked when not ready into this type of work as it was the sector with "most vacancies".

Initiatives by government such as the '*No one left behind*' approach to employability was viewed as useful, but a gap was in approaches having more partnership working and joined up working, 'to drive that change more effectively' [Participant 12, Programme Director]. To meet obstacles for younger workers not having experience, one employability lead noted work to circumvent that, using the example of recruitment of vaccinators for the Covid vaccination programme. As a 'stipulation from the national lead job description to be a vaccinator, was experience' [Participant 14, Head of HR – Employability] in health and social care settings, they were able to get around this through getting entrants to join as stewards for clinics as an 'in-route' to build experience before applying for vaccinator roles.

The main enablers that providers had taken to improve the situation have focused upon sector routeways and planning programmes to build experience for entrants. They also noted training in some areas such as unconscious bias and reaching out to employers to discuss how employability programmes and placements work and how they can assist.

5.1.4 Individuals working within Adult Social Care

When asked about the recruitment methods that individuals had used to enter adult social care the most common was telephone and face to face interview, sending in CVs and via an agency. For example, as one noted, 'I have attended a series of face-to-face interviews and also two online interviews. At some point I had to complete tests online which I do not understand how they relate to the job itself' [Participant 32, Support Worker].

Individuals that were working or had worked within adult social care were also interviewed. Most stated that it had been straightforward or easy to find a job in adult social care. One noted they had received a few rejections, finding that 'some of the questions asked at interviews were a bit odd and I was not prepared for them.' [Participant 32, Support Worker]. One ex manager noted the challenges they had faced managing services had been due to 'HR' and the time they took, '3 or 4 months to do all their checks and employ someone. We would then find that person has gone and got another job' [Participant 28, Ex-Manager]. Overall individuals felt the processes was straightforward, 'I have never found the recruitment experience to be difficult' [Participant 33, Senior Care Assistant] and 'never had any issues getting into adult social care' [Participant 34, Deputy Manager].

In terms of barriers they faced to recruitment, the ex-manager noted that the issue was upon starting and people finding that it was not the job for them and thus not staying in the job, that 'it wasn't going to be a walk in the park. That, it was [not] going to be sitting having cups of tea and a blether with them' [Participant 28, Ex-Manager]. The other barrier that the individuals spoken to mentioned was a lack of experience.

> Most employers request some experience which I did not have. I used to work as a marketing director in my own country, so it was difficult to prove that I had any experience doing this kind of work … some of the language used at interviews means nothing if you did not have the experience of working in this field in this country … SVQ level 2 and 3, I don't have this qualification that many employers want [Participant 32, Support Worker]

5.2 Fair Work

Each of the constituent stakeholder groups were asked about their understanding of fair work to assess the extent that a fair work offer was in place, in particular the presence of the Fair Work principles like Opportunity, Fulfilment, Effective Voice, Respect and Security. Whilst also assessing the link of fair work to employment.

5.2.1 Employers

Employers were asked around fair work and their understanding of this term and its meaning with the sector. There were limited levels of understanding, some more senior members had a good understanding of the term and linked it to their organisational position, work with unions or staff representatives.

> We signed up to the basic principles of the fair work scheme in 2018. Around the same time as we signed up as an accredited Scottish Living Wage Employer. So, we have a current people strategy, and we try to build that around the basic frameworks such as effective voice that exists in fair work. We've tried to use that to gauge how we engage [Participant 19, Director of HR]

Others had limited or no understanding: 'limited, so I am aware of the phrase, but I couldn't talk in depth about what that means and if we adhere to it' [Participant 21, Resourcing Manager]. In terms of how confident employers were that there was fair work within the organisation, everyone felt the organisation was a fair work employer or attempting to be as fair as possible within a tight financial situation. This included examples of permanent contracts, monthly salaries, opportunities for progression and increased flexibility. Although one employer did mention the knock-on effect of the

sudden pay uplift to £10.02 announced by the Scottish Government for adult social care workers, to meet the commitment that workers receive the living wage. This meant that they had to increase pay for other entrant roles within children services and support services to minimise disparities within the organisation, requiring movement of funding planned for elsewhere.

Some thought the competitive market had led to a situation where local authorities had an advantage over other employers, including examples of third sector providers being approached by local authorities to provide temporary staff at the third sector organisation's pay rates. There was a feeling of a more privileged position for local authority employers.

> We are paying Scottish Living Wage, for our roles, for home care and we are currently 10.02 … the day we advertise that, one local authority advertised for their own home care team at £8,000 more … when you look at policy changes back in the 1990s community and the interventions from the Westminster government around Margaret Thatcher introduced competitive tendering. You know that was quite a controversial thing at the time within social care. But there, was a sort of assumption that local authorities will become commissioners and not providers. They have not wholly transitioned to that, so as a result we have got a workforce who are on significantly less than local authority colleagues, but doing an identical job [Participant 23, Managing Director]

In terms of the biggest barrier to fair work, all employers noted the challenge due to a lack of funding as they were only able to spend the funding that was available to them.

> I think, yeah, the biggest barrier in work is being able to pay that fair wage, we're not getting enough money put back into the system to be able to afford it. We have other things that we have to pay for as well to improve the experience for residents. And it doesn't balance sometimes… the vast majority of care homes that I know aren't really able to offer, sick pay, what you would get in the NHS for example. So, it does put people off. Certainly, a lot of our staff … they are put off by the fact that they only get that sick pay, and they say they can't afford to live of that. Likewise with maternity pay, they only get the 6 weeks at 90% of their pay and then it's on to maternity allowance. For some staff that might be marginally different to what they would get, for some staff that's a lot of difference [Participant 25, Care Home Manager]

One of the employers noted positive moves made in regards fair work, such as the investment that the Scottish Government had made with a new floor of £10.50 being considered, fees for SSSC registration and PVG costs covered (announced until end June 2022), feeling that the Scottish Government should advertise these positive changes more to gain entrants. There was also discussion from some around the erosion of standards over time. 'When I first started in social care, it was attracting graduates and it has been a little bit of a race to the bottom.' [Participant 23, Managing Director] and the general feeling of unfairness including media coverage of the sector mentioned by numerous interviewees. As well as societal treatment, 'one day we will

see us an industry being valued, acknowledged, respected as we should be you know' [Participant 22, Home Manager].

5.2.2 Policy Makers / Key Stakeholders

Most policy makers and key stakeholders had a good understanding of the fair work agenda, save for a couple of participants who had no understanding, although that could be explained by these participants operating to a UK policy context. That said, there was mixed views around the question of fair work within the sector, some thought there was a fair work offer for staff, whilst others noted the process of fair work as a journey to attempt to reach a 'gold standard' more comparable to the NHS in terms of pay and conditions. Others expressed their disappointment in the approach of having a 'wage floor'. There was also a strong view that felt that the sector does not have fair work, highlighting the disparity across the sector, similar to points made by employers, such as the national care home contract using statutory sick pay as the financial model.

A participant referenced recent audit findings by their health and social care partnership in relation to fair work through consultation with their contracted providers. This was auditing against good practices, such as paying for the whole shift, travel and training; enhanced rates for unsocial hours, not using zero-hour contracts, travel being funded, provided with the equipment needed; not requiring to pay for PVG checks, union recognition and career progression support via funded SVQ qualifications. The results found that only half could confirm that they paid for the full shift including travel and down time; mileage rates ranged from 15p to 45p amongst providers with some not paying for public transport costs. Only some provided mobile

phones as part of the role, thus a recommendation was made to reimburse phone costs for staff. A third did not pay staff during induction training. Nearly half of employers did not normally pay for PVG checks, the 'majority' (although no figure was given) did not recognise unions and a third did not fund SVQ qualifications. Points around a need to go beyond pay were referenced by other interviewees too:

> It's not just enough to pay a good hourly rate, people have to be able to work enough hours to make that income meaningful and useful. And the other thing is employee voice so that effective voice which is much more prevalent in the public sector because their heavily unionised, but private sector much less so and voluntary sector less so as well, some bit different in different areas. Some of the bigger ones … they are unionised but it's not all about unions it doesn't have to be that, but employee voice I think, I think there's a massive power imbalance between the worker and employer in social care [Participant 2, Chief Executive]

Others noted barriers related to funding and work with Scottish Government around 'where the finance is going to come from' [Participant 1, National Workforce Lead]. Some referenced all the work their employer members were doing to ensure fair work, giving examples of financial inducements in rural areas, and providing cars for use. Some thought better line management and greater regulation should be combined with increased pay. Care at home services had the potential to advertise increased flexibility for entrants, although it was noted that practical experience via supervised placements had been difficult to gain in that sector.

Overall, there was felt to be a need for increased interaction around the fair work principles and the Fair Work Convention, focused on raising awareness and what support would be required to ensure greater compliance, although it was accepted that bodies like the Fair Work Convention lacked legal status to force through change.

> I don't think they [Fair Work Convention] have done enough to promote it and I think that's partly because the convention has no teeth I suppose to try and incorporate things…there's a whole, there's lots of barriers too but there's also that how can we do this, in the context the money's not there and some of that is true and some of that is a convenient excuse [Participant 2, Chief Executive]

5.2.3 Employability Providers

In relation to the understanding of fair work, only two participants had a level of awareness due to activism by their organisation leader or their organisation having signed up to fair work principles, 'we're really big on the fair work stuff' [Participant 13, Deputy Director], most had limited knowledge or equated it with equality of opportunity.

> I'm assuming it's something to do with fair pay, hours and promotion…we are as an employability provider in Scotland, we support that fair work, living wage, business pledge [Participant 12, Programme Director]

Others were able to relate their role as providers, noting the need for programme principles to be fair.

> we have to make sure that the ask that we are asking of people is fair in its instance and there has to be less red tape around what would fall into fair work and what falls into the principles that are used especially for youth in kickstart. To a certain extent the kickstart programme has put hands tied behind backs, because of the narrowing of the areas that we are actually allowed to apply for [Participant 14, Head of HR – Employability]

5.2.4 Individuals working within Adult Social Care

There was limited understanding of the fair work offer or principles with most individuals stating they had no understanding or also linking it to assumptions around equality for everyone as per 5.2.3. One interviewee did, however, give an outline of fair work, 'that all, individuals have a voice, opportunity, security, fulfilment and respect' [Participant 33, Senior Care Assistant]. However, it is also important to note that this response was one of two that came in via written e-mail correspondence. Participants were then asked to describe pay within adult social care, all stated that staff needed to be paid more.

> Carers I think should get more money, they are always saying, money, money, money, more. Especially in dementia, people have challenging behaviour, so they are asking us, what are we getting paid, this much? They are getting attacked, it can be better paid, it can be awkward. They are doing everything for them, but they are not getting pay, especially with the challenging behaviour [Participant 30, Senior Carer]

5.3 Fair Work link to Employment

As above, whilst there were challenges for many around their understanding of fair work, particularly amongst employers, employability providers and individuals working in adult social care. When explained, there were mixed reactions around the term being used in adult social care, including someone laughing at the term being used in the adult social care sector in the first place, 'it was basically do what you are asked to basically, I've never heard of that in Adult social Care'. [Participant 28, Ex-Manager].

Beyond a need for awareness, when linked to the fair work principles in employment, the following points were raised by the individual stakeholder groups.

5.3.1 Employers

In terms of approaches to increase entrants and the link with the fair work principles, the most observant point was related to principles around opportunity and respect, particularly in relation to values-based recruitment approaches viewed as effective to increase entrants from different backgrounds, linked to values on compassion. This view centred on recognising how 'the pandemic showed that there are so many people with transferrable skills in other industries…so people have realised that there are transferrable skills in what they have been doing' [Participant 26, Senior Recruitment Consultant]. In terms of wider linkages, there were a few examples highlighted, the pathway to work for those with experience of alcohol and drug addiction giving authenticity in their work with service users. To meet challenges around communication to a dispersed care at home workforce, one employer noted work on a new rostering system accessed via an individual's mobile device. Another employer stated their 'matching stage' pre-employment of conversations around what works for

the candidate was innovative within the sector as they were going into these conversations with the mindset of seeing where they could fit the candidate into the organisation, as opposed to whether the candidate would fit.

5.3.2 Policy Makers / Key Stakeholders

Policy makers were able to give examples, particularly around a principle of opportunity, however these focused upon practice observed within the sector along with importance of conversations with interested candidates. Such as that of an employer who held a large recruitment event, where from initially 150 CVs the application process led to offers of employment to just two people, believing there was an issue with giving a realistic picture of the job role as well as the pay not being 'reflective' of the level of responsibility.

This point linked to the experience of someone working within employability who had worked in the adult social care sector previously and stated that there was a need to go back to basics, work with employability organisations, use service users in recruitment, be open about the challenges and nature of the job but also the difference you can make and spend more quality time on the recruitment journey including pre and post stages. The point about the front end and valuable conversations reoccurred during discussions, 'but what is missing is the passion, is the energy, selling it actively. It's the myth busting, it's the questions you know. But I think that's what is missing. So that's what, I'll just put it on a website, I'll just send an e-mail to the jobcentre to ask them to circulate it to this, that.' [Participant 5, Partnership Manager].

5.3.3 Employability Providers

When employability providers were asked about areas of improvement for fair work in the sector, approaches needed were described as ‘all about common sense in a world where there is no common sense.’ [Participant 12, Programme Director]. The only new area of work regarded as innovative and again linked to the principle of opportunity was foundation apprenticeships. For example, in one local health board area this approach gave 30 pupils experience that can be useful to move individuals into work, a modern apprenticeship or higher or further education. However, also combined with comments around the difficulty in facilitating work experience options within the sector and the sector (particularly care at home) not being aligned to employability pathways, more acute during a pandemic.

Approaches noted as less successful, were ones where assumptions were made, assumptions that the channels used to engage entrants were working and engaging wide ‘pools of people’. Job trials that were unpaid were viewed as not useful for entrants. In terms of placements for disabled clients, there was mention of clients who had been placed in charity shops within employability programmes for years. There had been implementation challenges in foundation apprenticeships particularly timetabling of school pupils where the apprenticeship in many local authorities goes over a number of afternoons as opposed to one full day which was more valuable for experience, afternoons missing key clinical and care exposure due to timings.

Others mentioned structural difficulties for people that want to enter the sector due to the benefits regime in place, making shift work more difficult, resulting in the need to find more hours elsewhere. It was also felt that the realities or the challenges within the sector should not be hidden from candidates.

5.3.4 Individuals working within Adult Social Care

Individual perspectives were more visibly aligned to fair work principles, partly due to individuals working in the sector being more able to demonstrate fair work principles (or not) from their experience. In terms of the hours, most thought that these were tiring or demanding, ‘many times I work for eight days in a row. After five days I feel really tired and my energy level drops so I don't think I can care for anyone properly’ [Participant 32, Support Worker]. Some thought hours were ok, with one describing them as ‘practical’. The mixed responses were across care at home and care home organisations. One participant mentioned that they found the workload in private care homes tended to be more than local authority run homes.

Supervision, it was thought could be improved. Some said that they had no or limited supervision because they worked for an agency but had a contact to go to if needed. Others noted a ‘substantial amount of carelessness’ [Participant 31, Support Worker] in the workplace and meetings described as tick box exercises, because manager actions were minimal or tokenistic. Training and development were also referenced and there were various comments in relation to this. This included a shift to online training over the pandemic and regular training being provided.

On questions of their voice to make a difference, views were mixed. Some felt they could speak out and make a difference. Participants that were working within care at home providers noted a more negative experience in relation to this, ‘my experience is really bad without exaggerating no one listens most of the time especially in

management' [Participant 31, Support Worker]. In terms of opportunities available to them, these were thought to be mixed, with some commenting, that they felt that 'working in adult social care, has been very rewarding and good being able to learn from new experiences that come my way' [Participant 33, Senior Care Assistant]. Others noted a need for upskilling of carers, 'for example, if you are able to see that someone is unwell, they are able to take the Obs [observations] and they can do…you know basic procedures to understand them, why they are no well. Then, they got that knowledge' [Participant 30, Senior Carer]. Others referenced opportunities in terms of looking, along with other staff within their organisation, to move into areas such as nursing to 'escape' the low pay situation.

In terms of job security all noted it was a secure job. The only person that had a slight difference was a carer working for an agency who noted, 'I'm quite safe…that depends on how we are working…if you are not working and they send you to one home and if they don't get back the good feedback, they don't send back.' [Participant 29, care assistant].

In discussions of working relationships within organisations, views were mixed. Some felt that it was good, although relations between agency and non-agency staff can be difficult, due to a perception that agency staff 'don't work properly.' Another mentioned the relationships depend upon the manager, where poor relationships were referenced, this related to perceived poor management. When asked if staff are treated fairly, the majority said that carers were not treated fairly due to the wages and the terms and conditions on offer. When asked what more can be done to ensure fair work, responses related to improved pay and terms and conditions.

5.4 Employability Pathways

5.4.1 Employers

In terms of good practice around employability approaches, a number of employers referred to past examples, pre-pandemic. Previous schemes included placements and work with the Prince's Trust to get entrants into care work along with a volunteer coordinator working with minority ethnic communities and a care apprenticeship scheme. A current pathway included using volunteers with lived experience in the areas of work (drugs and alcohol) to get potential staff into the organisation. Others referenced work focused on supporting those with a disability into the organisation using indirect entry routes such as opportunities for domestic and kitchen assistant staff to move up into care. A number related employability to mean specific approaches they had received from agencies working with those with a disability and mental health challenges. Current options were limited, and many discussed future work around apprenticeships, care academies and early discussions to work with particular communities to engage them in the work of the organisation.

An employer described their work on face-to-face values-based group recruitment, as an effective and fair approach to recruit entrants. The majority noted limited interaction with employability providers or intermediaries in the recent past. One employer had worked in the employability sector before and was able to reference relationships with employability teams to access funding and develop relationships. Another employer discussed a passion for this subject area.

> I've been involved in numerous initiatives and projects, to try to … engage people that might have been wrote off from school or the job market. And show

> them that there is opportunities, I left school at 15 with nothing…We've been involved in the kickstart scheme which is part of the jobcentre, employability thing. And I have staff here that work full time after that. Like that, the colleges as well and like I said, I've done a lot with schools and things too [Participant 22, Home Manager]

Reasons given for why the approaches discussed were good practice, ranged from business sense around an employability scheme bringing in four new recruits and also being able to share the joy of seeing people's confidence grow. There was also a plea for placement models that go beyond eight weeks, but funded from elsewhere rather than employers, as they had restricted financial capacity to cover any 'supplementary staffing.'

The employer that had brought in entrants into care homes via non-care roles such as domestic and kitchen staff, stated that the reason for this was a need for understanding of the sector in a less 'responsible' role first. There was also annoyance around the knowledge that employability providers had of the sector, with comments that many candidates were referred to them only because the individual liked care or was seen as caring.

> a lot of people that work in employability, don't really understand the nature of the beast … they can say that this person likes to care, they should become a carer ... often communication is the biggest element that you need to have for working as a carer. And the people that we get from employability,

> communication is often the thing, that they are not as confident in. They're not able to assert themselves [Participant 27, Director]

There was frustration around the time invested with some of the employability programmes being a waste of time and energy for employers as highlighted by comments about the 'kickstart' scheme, describing a poor experience and that, 'DWP did not really have a real handle on it, and it was kind of, fair enough it was a new programme from its infancy, but I think it wasn't really set up for success. Our experience was very poor' [Participant 21, Resourcing Manager]

On the whole, in relation to specific employability approaches, there was few examples of innovation. As one employer commented:

> These sorts of questions are the ones where if you can lift your head above everything going on, it's a case of trying to regroup and say these are the things that focused pre-pandemic. If I'm honest, it's been about survival. And, because some of our staffing levels have been so badly hit. When I looked at the stats for our services in terms of turnover, we had two services with 100% turnover, over the course of last year. And many who have had turnover of 40% or more [Participant 23, Managing Director]

In terms of approaches that do not work well, some referenced trial shifts as being ineffective, 'sort of doing shadow shifts, trial shifts, so come in and see how you get on and go ahead and offer posts. But that didn't really ever work out.' [Participant 27, Director]. Longer placements could be important, as 'people have to get a proper lived experience' [Participant 25, Care Home Manager]. There were also comments that

there is no wrong answer as employers have found a particular approach worked in one geographical area and not another.

When asked who underrepresented entrants were, most interviewees highlighted the lack of men, those from the minority ethnic communities, those with disabilities and criminal convictions. Others noted good diversity across their frontline roles and mentioned challenges recruiting night staff. In terms of their approaches to recruit underrepresented entrants, there was a common view that employers were fair, and their recruitment approaches encouraged diversity, although they could not pinpoint particular approaches used. Some noted, 'to be quite honest, we have been quite generic, and it has been a numbers game. Try to make sure that we can bring people in.' [Participant 19, Director of HR].

Others, highlighted the systemic issues within social care, that does not allow them to be progressive as they would like to be or expand the energy they would wish, as 'because of the lack of certainty about funding, we're now talking about survival. You know that is really difficult, because we are trying to keep our eye on the ball about progressive policies that we must. It's, in our blood, but actually at the moment because of the lack of communication about funding, you know everyone is in a tailspin about viability' [Participant 23, Managing Director].

A separate employer also noted their perception that particular areas of focus for recruitment should be on young carers and unpaid carers, 'The area to explore is young carers, unpaid carers. That's the area I think, often in poverty, disadvantaged,

hard to reach groups. For all sorts of reasons, they certainly have the right set of skills … and caring attitudes' [Participant 18, HR Business Partner].

Some highlighted signs of less applications from those with EU backgrounds since Brexit and the need to ensure the job is viewed as a valuable and noble profession domestically. There was a sense of regret about the closing down of routes encouraging people from outside the UK to work in the sector:

> I don't have anyone that works with me at the moment that is of another culture. So that isn't usual. My previous home that I was a manager at, I had a girl from, Poland. I had people from the Philippines. Fabulous, fabulous people, fabulous values, that are different to ours. Particularly the Filipino culture, older people are cherished. Taught that from a young age, that older adults are like gods almost. That would be transferred into the work and the care that they provided. Obviously with the EU rules, we're not getting foreign people or people able to come from other countries to fill these vacancies. It's not just possible these days [Participant 22, Home Manager]

One employer discussed regional profile statistics from the NOMIS service that they had used to assist their organisation fill gaps, which enabled them to engage early retirees into part-time work, as well as men and multi-cultural groups in the past. These mapping approaches were viewed as useful as there was a note of a potential 'drop off' in the workforce, with a loss of experience.

> We're probably going to end up, I'm seeing it already, we've had years where it has been a maturing population and concerns about that drop off. Actually,

> that drop off is happening really quickly and we could have you know it's going to be a younger workforce, less maturity and experience than years gone by [Participant 23, Managing Director]

Noting challenges in placing disabled staff due to client choice. 'I've recruited some wonderful and talented people. Somebody with a visual impairment and somebody that had a hearing impairment. But for both of them, because of the service that they worked in, it became problematic because the people they were supporting did not understand' [Participant 23, Managing Director]. Others linked this incompatibility due to the physical nature of the role, 'it could negatively impact someone that has had a back injury even with manual handling training, moving handling training and awareness it can still pose a bit of a challenge for them.' [Participant 21, Resourcing Manager]. Another noted that whilst they had staff that were dyslexic and had dyspraxia, 'by the nature of the job, it becomes difficult' [Participant 20, Clinical Quality Manager]. Although one employer was able to facilitate redeployment to a less physically demanding role due to a debilitating joint disease.

In terms of what more could be done, answers ranged from working with specialist organisations and more work within local jobcentres and increased efforts to build relationships with jobseekers as more face-to-face opportunities opened up. Others mentioned the need to engage via sharing their own career pathway and journeys through stories. For example, one organisation noting the majority of their senior management had started in frontline roles. There was note of short one-minute videos by organisations such as Prince's Trust of a care worker describing their positive experience within the sector. The potential of promoting benefits, to younger people

such as starting on a Scottish Living wage regardless of age, to increase interest had potential for consideration. Others stated their belief in the need to continue to focus their recruitment efforts amongst the general population and not target particular groups.

5.4.2 Policy Makers / Key Stakeholders

Policy makers also referenced limited use of employability providers recently. The focus was felt to be a need to engage DWP and its work coaches around improving understanding of the sector and reducing inappropriate referrals, with podcasts having been used recently within the sector with this aim. Some participants noted a perspective within the sector that 'employability does not work', others disputed this around the need for more investment and time. There was reference to the new 6-week online care courses by the College Development Network mentioned in 5.1.3. To mitigate barriers mentioned in 5.1.3 around application forms and safer recruitment processes, it was felt that employability had a role to assist with completion of paperwork pre-employment.

Others mentioned specific providers work with *fair start* organisations, Skills Development Scotland on apprenticeships and the *kickstart* scheme. Although recognising, 'in terms of employability programmes, probably the volume isn't there. Because a lot of the people they are supporting are too far from the workplace' [Participant 4, Senior Policy Officer]. There was mention of digital systems to track the individualised support of participants in college for students from areas of multiple deprivation. As well as work in conjunction with a local carers centre to use self-directed support monies to train young peer mentors aged 16-18 to assist young people with complex needs due to difficulties that cohort had securing work due to shift patterns. There were also college courses such as the *Skills Boost* that were

giving open learning training to participants interested in the sector. However, the lack of traction of success was mentioned just as with employers:

> Some of my work has been influenced by employers saying to me that … well we tried to use a route like that, or we tried to work with maybe it was DWP or a different provider but it didn't work for us or maybe the candidates were not the right candidate for us, and it was a bit of a non-starter [Participant 3: Employability Adviser]

Others countered this perception around the time that job centre work coaches can have to commit to quality interactions with job seekers. Arguing for more input from those within the sector by being visible and proactive within the network of jobcentres. This visibility it was felt would lead to the work coaches remembering the employer amongst so many other tasks and thus easily refer jobseekers for a conversation. Others referenced some levels of success working with youth services, for example the sector being used for valuable experience for an individual on a career trajectory of wanting to be a doctor.

In terms of innovation there was new enhanced carer roles that would be paid at a higher rate, in a more 'holistic role, they'll be doing assessing and they will be occupational therapy I suppose as well [as] care. They will be a managed team and they will have a coach attached to them as well. In terms of salary…it would be more comparable to Agenda Band for Change 4 or 5.' [Participant 8, Service Manager]. Some recognised the challenge to innovate for providers, due to the limits on time, which some thought led to 'too much standardisation.' It was noted that there was

some discussion of third-party organisations that can undertake pre-employment checks on behalf of providers on a commercial basis and learning can be packaged together in ‘digital backpacks’ from the SSSC for recruiting organisations without any financial cost. It was felt that if organisations ‘had time to breathe and actually sat down and worked out how much they are spending on recruitment costs that are actually resulting in no body’ [Participant 1, National Workforce Lead] they may change their prioritisation and consider getting additional support and trialling new activities.

A local authority organisation that had recently increased salaries, noted increased interest in vacancies on the back of this. This local authority also enhanced wider benefits such as gym memberships, health and wellbeing packages such as riding classes, menopause groups and counselling. Resultantly it was noted that ‘some of them are feeding back that they have never had the calibre of staff that are applying for posts at the moment’ [Participant 8, Service Manager].

Approaches that the participants felt did not work well, were related to a focus on ‘numbers’ and just getting people through the door. It was suggested that there needed to be the passion for and development of programmes, although participants recognised the lack of success of previous well-intentioned efforts. Reasons for this included a lack of interest from candidates. As one interviewee noted, ‘In actual fact we do a lot of employability programmes … they promise a lot but deliver very little.’ [Participant 4, Senior Policy Officer]. Others noted the pressure to recruit when large numbers of vacancies existed, and the need for ‘short term pain’ to hold recruitment when they know that they don’t have the right candidate. The apprenticeship model

was also referenced as something that has to be looked at in general, although it was recognised it may work in cases, for example, early school leavers.

> 25 hours on an apprenticeship wage is not, necessarily a good draw for people…so the apprenticeship frameworks I think, you know, they'll have you need to have a national 4 in English and Maths, but for an entry level post in care, they don't. There's disparity there as well, if you are coming in and training them in SVQ level 2, is a level 2 going to be enough moving forward for their SSSC registration, you know so that's another thing. But then if you are going for a level 3, a level 3 is the equivalent of a higher so you need to ensure the young people could, are academically to get to that level. [Participant 10, Senior Officer]

A 'fast track course' to fill workforce gaps was deemed not to work by a college representative, because 'this is a journey that they are coming on to their studies and you need to give them time to grow in that journey' [Participant 11, Curriculum Head].

In terms of who was viewed as underrepresented, as well as groups previously mentioned, those with criminal convictions, those with mental health support needs and of being care experienced was referenced. There were differences in terms of younger workers, some noting a need for more due to an ageing workforce whilst others noting statistics showing a growth in the 16-25 year old age group. Reasoning for this perception of a need to attract more young workers, included 'anecdotally in the past, some providers may admit that they had been a little less comfortable hiring younger people due to the level of the responsibility. And maybe from the preferences

of some of the people using services, they don't always want younger people' [Participant 3, Employability Adviser]. A participant felt the need to target the 'mature workforce', as they are more likely than younger cohorts to have 'access to a car, have the skills and empathy…perhaps they have the skills as their parents have got older. Maybe that conversion from being on a life on a factory floor or a shop or a hotel.' [Participant 5, Partnership Manager]. There were difficulties noted in understanding the true diversity of the workforce, although pockets of examples were given of a particular cultural group or member from the LGBTQ community joining the organisation. Although there was a clear perception that more work was required. With a feeling that the work was 'seen as women's work still and that's because you know…in the same way that caring responsibilities in too many families are still seen as women's work. It mirrors how we are as a society. But also, the pay and the terms and conditions, men don't put up with that' [Participant 2, Chief Executive]. It was also noted that there was not the throughput of males from education.

> In terms of conversion into employment, I think, into courses, our efforts are very successful. But what actually ends up happening is these very successful candidates end up going to university and doing social work, so I don't see as many males converting into adult social care work at a maybe support worker level [Participant 11, Curriculum Head]

Other areas were noted, for example, there was evidence of increased interaction of the sector in new courses via placement activity, as an indirect way to get exposed to the sector, such as sports and fitness courses working in care homes with elderly clients on physical health and movement.

In terms of what can be done to engage underrepresented groups, there was recognition of a general need to improve the conditions for workers and promote the sector and the role of the manager within the sector to support specific practical action. From reviewing the wording and communications in recruitment, such that words such as career pathways, promotion and leadership that can be used to describe care as well as more stereotypical concepts. Language can also be clearer, simpler and inclusive. An interviewee commenting on a worker from overseas being dumfounded by some of the words used to describe the work done, with unnecessary jargon and acronyms.

5.4.3 Employability Providers

In terms of good practice examples within employability in adult social care it was felt that more needed to be done and it was important to partner with specialist employability agencies for developments as a lot of activity can be rigid. For example, as one interviewee noted:

> We run things like care academies, where we take 10 people in, they'll do their health and safety training, they'll do their risk assessment stuff and then we get them a place and a guaranteed interview, but beyond that, there isn't much that really goes on in the sector to move people into employment in that area [Participant 13, Deputy Director]

Another approach mentioned was apprenticeships and particularly the increase in foundation apprenticeships at school level.

> The modern apprenticeship which tends to be the route to employment, before the modern apprenticeship areas, we have … foundation apprenticeships for 5th and 6th year at school for a one year or two year where we are giving them work experience within a health and social care partnership setting within a very very tight framework… which gives them a qualification which is equivalent to a higher or a SVQ [Participant 14, Head of HR – Employability]

There was also mention of specific work with organisation such as the local college and agencies such as *Project Search* in NHS Scotland. Some of the employability providers were more generalist, whereas others were specialists, working with particular groups. There was also evidence of work done by some with employers to adjust the programme after receiving feedback:

> We used to put the people that came through the course, we used to put them through, all their first aid and manual handling, introduction to medication all these courses … However, we found that a lot of the employers were saying actually be honest it's a waste of time, because when they come on board … they all have to re-do the training. We stopped doing that, instead now…we have the providers come in and do workshops and stuff [Participant 17, Employer Liaison Officer].

The online introduction to a career in social care course and 'stage 4 course' as part of the employability skills pipeline both mentioned in 5.1.3 were viewed as useful interventions, with stage 4 focused on access to jobs and work experience. Via resources shared by a participant, it was clear that many training providers used a

'pipeline' model. For example, an initial stage described as screening, whilst the next stage involved pre-employment training and work experience and the final part in the job, involving completion of a modern apprenticeship such as the SVQ Social Services and Healthcare at SCQF level 6 or 7. It was thought however that more employers, particularly private sector, needed to be involved in these programmes.

A particular focus in one area related to the importance of initial assessments, job carving and covering full employer costs via the employment recruitment incentive (ERI) subsidy: As one interviewee noted:

> Yeah, job carving is a huge thing. The other that has really helped … ERI, employment recruitment incentive which has been there … we have been placing 100% employer costs, to the employer, so we are reimbursing. We're going to give you a 6 month free employee, to prove them, to get away from the tittle tattle of who this person might be or do … So, it's an extremely high cost model, high wrap around costs, come to about £10,000 per participant. That's sustainable unless, unsustainable rather, unless we get backing from Scottish Government … the ERI ticks all the boxes, but also works … so someone getting hired and maintaining that position for in excess of 12 months, is threefold to what the Scottish average is [Participant 16, Youth and Employability Officer]

A job intermediary was thought to be critical, 'between a person that thinks they want to go into care and a care provider, there is a middle bit missing. Which is, do you

realise that this is what you could, this is the type of work that you could be doing you know' [Participant 17, Employer Liaison Officer].

In terms of who was underrepresented, responses were similar to 5.4.1 and 5.4.2. Action focused upon attempts to deliver taster sessions and work with agencies such as Skills Development Scotland and Developing the Young Workforce. There was, though, a perception that people still entered the sector who were not ready, and people were 'shoved' into the sector and thus ended up failing.

When discussing how to engage underrepresented entrants, it was felt that it was important to help employers adjust and 'developing a tripartite approach with the training providers, the employer and the individual …. sometimes people just get thrown in the deep end and they quit.' [Participant 12, Programme Director]. The role of champions from underrepresented groups to share their journey and stories was also noted as a useful initiative. It was also felt that some of the support agencies referenced such as Developing the Young Workforce and Skills Development Scotland had less engagement during the pandemic. This linked to wider points around early intervention and societal perceptions, where jobs discussed at primary school are for job types such as 'vet, doctor and pilot' rather than that of a 'carer' or 'cleaner' [Participant 16, Youth and Employability Officer].

5.4.4 Individuals working within Adult Social Care

Just over half of the individuals interviewed had experience of undertaking a pre-employment programme before joining adult social care. This included a work experience placement via college pre-pandemic. Another on a course run by a third sector provider focused on multi-cultural groups within a community setting, with classroom-based training over six weeks, one day a week. There was also attendance

at two DWP training courses focused upon how to look for jobs and complete application forms whilst claiming Universal Credit and looking for employment. One participant had also attended a college course at SCQF level 5 (equivalent to SVQ Level 2) as an introduction to healthcare.

In terms of their experience of the programmes, the results were mixed. There was a general view that they were useful for awareness raising and understanding more about the role and sector. The participants that got their qualification and attended the community course recently felt that they could have got the job without needing to have attended these courses. The participant that had undertook the placement previously felt that the placement was useful as it allowed them to get some experience which helped them, comments from participants about the programmes included, 'useful, because it enables you to continually develop yourself' [Participant 31, Support Worker].

In terms of suggestions for improvement, being paid on placement was mentioned as well as opportunities for practical experience within distinct types of provision during courses. Some felt that it would have been better if the learning was face to face. Only one participant stated that the pre-employment intervention had a direct link to employment into adult social care, whilst recognising that the recruitment process for their role was straightforward and they potentially could have got the job role without this qualification. The participant that had been on Universal credits, noted the additional benefits if the courses undertaken were linked to adult social care, as they faced a few rejections in their initial few interviews. Relating this to a lack of relevant work experience and being new in the country.

One participant felt that their course had too much focus on manual handling with more information about the practicalities and understanding of the job required. They felt

insufficient attention was given to areas such as personal care tasks, although they appreciated it is a stimulated environment without real residents but noted the challenge that occurred in the workplace from this.

> They talk too much about manual handling but more than that we need … they give the proper manual handling training to everybody, but they should give the description about the job, and how they handle the residents and how they behave for the residents ... for the personal care … one of them coming and saying smell and oh like that. That's not nice [Participant 29, Care Assistant].

Some interviewees were non-committal about the effectiveness of the programmes, 'neither good nor bad for me' [Participant 32, support worker].

5.5 Capacity to improve recruitment processes

5.5.1 Employers

Most HR or recruitment processes were the responsibility of a small HR 'team' or devolved to local sites for local management to take forward, linked to the size of the organisation.

> We have over 500 staff, but we also work with one HR officer … so It's quite a big workforce for one person … they regularly do all the recruitment and organises interviews … take place [along] with members from the onsite teams. So predominantly centres around one person, who does the majority of the work [Participant 27, Director]

Whereas a larger organisation, had a process where a recruitment manager sent CVs and application forms to local site managers to make decisions on who to interview.

Another large organisation had a model around recruitment leads who managed the entire process from start to finish similar to a recruitment agency. Smaller organisations relied exclusively on a local site manager or senior local staff to undertake recruitment.

In terms of what did not work, most common answers related to standard job advert advertising and inappropriate referrals from the job centre. In terms of effectiveness, most felt it was a mixed picture, some related success to being more creative in a crowded market. For example, one interviewee highlighted a story that got national coverage for one of their care homes through connections with a local journalist, generating increased interest in the organisation. Others referenced social media and the importance of active engagement by the job seeker.

> What I have found is, when someone has, a less involved way of contact us. If they filled the enquiry form, text the number, if they fill in the online, we have this sort of online enquiry form via Facebook, when people do that, we struggle to get them to do an application form. So therefore, we get quite a big drop off, however, when someone see's our ad on, I don't know, Indeed, or total jobs or one of the platforms and then comes to our website and completes it, then we get a much higher turnaround ... We definitely find that someone that has taken the time to complete an application is much more committed to going through the process [Participant 26, Senior Recruitment Consultant]

However, the point was made that recruitment, has to be combined with retention as recruitment efforts can be wasted efforts, 'it's alright us doing recruitment and then the person joins, but that's a lot of wasted money and time if that person leaves after two or three weeks.' [Participant 25, Care Home Manager]. It was further noted that

employers ‘need to know if people have been dismissed from a role, those things. To be able to have those valuable conversations at pre-screen, rather than put someone through a whole process.’ [Participant 26: Senior Recruitment Consultant]

In terms of other suggestions for improvements to recruitment processes, this was similar to section 5.1 around early intervention and the role of the manager in determining the candidates experience. There was also a feeling that SSSC should take more of a central role in recruitment and potentially facilitate larger recruitment events. Some felt that a discussion of the ‘glamourous side’ of the role was missing, ‘that this is a place, where people come to live, people don’t come here to die’ [Participant 25, Care Home Manager].

When discussing good practice, some interviewees noted the involvement of residents in the recruitment stage, in an unannounced way to get a sense of how individuals are, to ideas around refer a friend scheme, financial incentives for those with a SVQ 2 to join the organisation and more promotion to highlight the disability compliant sites the organisation has. Some felt they had ideas around streamlining processes, but safer recruitment was a potential reason why they could not make applications simpler. Values based approaches were also highlighted.

> There are so many people that have the ability to care for someone, to give that, emotional and practical support and for us to look at a CV and judged on a CV is inappropriate and it’s not fair, so we take the process of any application that comes in, we call that person first, we have a chat about the role, we have a chat about their expectations, what would be our expectations and then we

> progress from there.…particularly hospitality, social care is a little bit like customer service isn't it? [Participant 26, Senior Recruitment Consultant]

It was also recognised that the use of data to drive decisions was an area that was perceived to be lagging. For example, as one interviewee noted, 'Disabled people is an area where we don't collect information, and as a result, aren't able to comment' [Participant 18, HR Business Partner].

5.5.2 Policy Makers / Key Stakeholders

Policy makers, also made suggestions, focused upon enhancing what can be a traditional sector in terms of recruitment. In relation to earlier points about the potential of a mobile app as a referral method, this was discussed in relation to the commonality of word-of-mouth methods and the opportunity to ease some of the capacity challenges.

> I've known before that word of mouth is quite positive, certainly in my experience …. people would tell other people if they enjoyed their job and we had family members coming in so, and that had been quite a boost to our own teams in terms of sustainability so it would be good to consider an approach like that. I also liked it because the fee for the hard work for finding the right person actually went to the individual. [Participant 3, Employability Adviser].

Some felt that the apprenticeship route could be a good route but was limited in use within adult social care recruitment. There was also support for the use of agency staff, '…to make sure that we don't have any gaps in community provision' [Participant 9, Chief Social Work Officer]. In terms of effectiveness, values-based interviews that were face to face were thought to be effective. It was noted that if candidates wanted

a job in adult social care, they are easy to find and numerous, but the issue was lower volumes of candidates. Other solutions ranged from clearer job adverts and more positive stories. There was concern that placements moving to virtual means had eroded valuable work experience, 'virtual placements' consisting of 'You Tube videos and mock examples … is it really equipping people and we've seen a huge decline in the number of local authority placements…and a much higher use of third sector placements … to really get some of that experience. Cos, there's a huge gulf there. [Participant 9, Chief Social Work Officer].

Good practice was similar to that described in section 5.4.1 along with reference to supporting those with convictions, 'our members also often recruit people with convictions and would link up with organisations such as Recruit with Conviction and Disclosure Scotland [Participant 4, Senior Policy Officer]. And an example was given of the *caretocare.scot* website having a guidance section updated around criminal convictions to enable clearer information and encourage diversity. A participant described a local recruiter that had been successful using social media using 'personable' and positive language.

In terms of what more can be done to recruit underrepresented entrants it was felt that this required a whole system discussion. This included a change in thinking about how engagement occurs with underrepresented groups. However, it was felt that there were systemic issues that needed challenged, such as client choice which can mean less demand for various characteristics, as mentioned disabled workers, younger workers and men, where the discussion should shift, 'it's not about saying sorry you have to have a male worker, but what is the difference, if someone went into a hospital and they didn't object to having a male nurse, what is the difference? [Participant 1, National Workforce Lead]. Other areas of blockages including the use of traditional

language and stereotypical imagery which can impact upon increasing cultural diversity (5.4.2) with suggestions such as the use of guaranteed job interviews for minority ethnic groups not dissimilar to that already in place in a local authority for those that are care experienced. It was suggested that conversations had to start early, however beyond this there were concerns about career guidance also overlooking adult social care as a viable career choice, where those that are not 'on track' for Highers are 'redirected' to other routes despite the vacancies available in the sector. With suggestions made on how the promotional efforts to engage more staff might be focused:

> We have a story to tell that it is quite a stable workforce. The majority of people work full time or permanent. There is also flexibility for people who have different kind of dependencies, kind of child care, caring responsibilities, people who are studying so there's a lot of benefit to working in a career in care that we don't tell the story often … and making sure any technical details in job adverts which are often just boxes, even for the system itself to be better designed so that, if you are putting in an hourly wage or are putting in something pro-rata it displays in a way so that it's more truthfully…I think having real care workers tell their story is so important … you can include that in job adverts too in social media presence. [Participant 3, Employability Adviser]

It was also suggested that there was a need for proactivity to meet queries that come in from underrepresented groups. An example was given of a group of females from the Muslim community noting interest in working in adult social care but not wishing to undertake care for male clients due to cultural needs and still awaiting a response to

this request, despite months having passed. Some referenced private providers as more responsive to recruitment:

> I had 19 people enrolled on it [course], so I contacted the health and social partnership and said do you want to take advantage of this, and their direction and it's not a criticism because they are overwhelmed. Was just to put an application in the normal way … for example XXXX came back to us and said, absolutely anybody that completes that course will get a guaranteed interview. So, the thing, the health and social care partnership are competing against these smaller private companies who actually are able to respond much, much quicker…. One student phoned me and said they put an application in for a private care home, somebody phoned them the next day. The local authorities can't compete with it. It's that responsiveness [Participant 11, Curriculum Head]

Some also guarded against approaches to push people into the sector, due to particular factors that may assume a particular 'calling' for a sector, opposite in view to earlier comments by an employer in 5.4.1 around the need to engage unpaid and young carers.

> In actual fact, just in the same way someone follows their family role model into a profession, some young carers may want to do that. But actually, for young carers, we would want them to have the full range of options as the same as everyone else. Yes, they will have some skills and aptitudes, is that a career move you would want to take as young people. Or would you want them to get a bit more of a rounded experience for themselves. Before maybe coming back round as care workers as somebody older. [Participant 7, Senior Officer]

5.5.3 Employability Providers

In terms of effectiveness of processes to recruit in adult social care, the answers were varied. Opinions were divided between feeling they can work for those with a clearly defined path but less so for those that were further away from the jobs market or unsure of their career path. Interviewees highlighted a gap for open days and the need for more transparency during the recruitment stages, which may include more information on welfare rights and benefit calculations for example if the worker, worked part-time.

The capacity of employability providers to assist at scale was challenged, for example, this participant noted that their employability team could 'only focus on 5 or 6 at a time, it's not enough to fill the sector gaps that there is'. Another interviewee noted in the same vein that the onus is on the jobseekers, 'now the expectation of the client now to come to interview with what they have done. But as long as they have done something, and I don't think the work coach is that bothered, as long as that box is ticked, that that's a big difference from years ago to today in terms of time available of staff to spend with clients.' [Participant 5, Partnership Manager].

Job adverts and entry requirements it was believed required review, only having mandatory elements if required, as per the point about unnecessary requirements for Maths in 5.4.2. The lack of joined up thinking or reticence to involve employability providers was felt as missed opportunities:

> There were several hundred roles in that area that were going to be coming through, but the local authority wasn't engaging about the need to build a pipeline. If I knew that I was recruiting four, five hundred people and I think I

> need three months to build a pipeline, train people up and see who is suitable for the role. Then I should work with the partners to build that up. Then how can I collaborate, to help people to work together. If they do stuff like that it would be fantastic, but that's not what happens [Participant 12, Programme Director]

There was a feeling that the referral bodies may lack awareness on what employability support was out there for jobseekers. Attempts to bridge the gap have been varied, a participant given the example of barriers to building relationships with referral bodies. These barriers included being on an introductory 'zoom' call with new staff, who all had their cameras off, not encouraging inclusion, many services being closed during the pandemic and a change in staff, which impacted on relationship building and knowledge of employability sources.

Suggestions were made for more training in areas of unconscious bias, diversity and a manager who is invested in providing support to entrants. This was noted as a difficulty as managers 'priority list is huge, because they have staff off sick, they've got nobody to cover a shift that starts at five, they've nobody for the weekend all this type of stuff. I can understand why it doesn't.' [Participant 13, Deputy Director].

5.5.4 Individuals working within Adult Social Care

In terms of recruitment being improved, some felt the recruitment process, was effective and allowed for 'getting to know the person better' [Participant 33, Senior Care Assistant]. Another felt that the current norm of having online interviews was a drawback as, 'face to face interviews will allow the employee to discuss things with

people who might later on be your managers. They allow you to get a clear picture of what the jobs involve by asking as many questions as required.' [Participant 32, Support Worker]. Others noted the issue with current recruitment methods, linking it to their perception of the quality of entrants that are currently entering the workforce, and misconceptions about the role 'anyone can work, but you have to see what they have done before…yapping and that, No, you are here to do a job…I asked one of the carers recently, where did you work. Oh, I looked after my granny… but this is different, people have complex needs…more honesty is needed' [Participant 30, Senior Carer].

In terms of what was most important to them when choosing an employer, many felt that pay, the reputation of the employer, the manager, hours of work and friendliness were important along with understanding the expectations of the job.

In terms of additional comments these focused on the need for people to understand the job before they join, thus a need to focus on the pre-employment element. One participant noted that they had met an increased number of younger people coming into the workforce during the pandemic period recently, who this person felt were not joining the sector for the right reasons, only joining to make some money. Another felt that adjustments that people were requesting, such as only working with certain genders or in the tasks they were willing to do, was unhealthy, feeling that the role requirements should be made clearer pre-entry.

Chapter 6: Discussion & Analysis

The key research aim of this project was to assess the effectiveness of interventions through employers to support the employability of entrants into adult social care in Scotland. The primary research consisted of interviews and engagement with 34 multi-stakeholders to assist and inform practice. The research was split into three key objectives, focused upon assessing the current state of and extent of fair work within the sector, employability approaches used and connections between key parties as well as an understanding of improved recruitment approaches and the capacity to deliver these. This chapter will critically assess the research findings against these key objectives.

6.1 Fair Work

6.1.1 Introduction

The first section assesses the extent of fair work and the experiences of participants in recruitment. The findings indicate that there is shared understanding between employers and policy makers in relation to the challenges and barriers facing the sector. Where there were distinct differences, this related to the enablers used and the understanding of the fair work offer. Policy makers operating within a Scottish policy context had the greatest understanding of fair work amongst all stakeholders. With adult social care employers, employability providers and individuals working in the sector having much less understanding of the term and the work that is ongoing in relation to fair work. The exception to this was a small number of managers who held more senior positions within their organisations.

There was also clear disparity between employers and policy makers on one hand and employability providers in other areas as well. This was due to perceptions from

employability providers of the sector, in relation to barriers to entry for some groups such as disabled workers as well as obstacles referenced such as lengthy application forms and entry requirements. Where there was shared understanding across stakeholder groups this related to the lack of funding and financial resources as a barrier to increased investment and pay. The pandemic was referenced many times as a factor that has altered ways of working from new online delivery modes, limiting real life work experience to negative connotations of the sector from media coverage during the pandemic. Terms and conditions were also discussed and seen as being unfavourable when compared to other sectors, particularly the NHS, as well as areas such as retail and hospitality.

To determine the extent of fair work within the adult social care sector, key stakeholders were interviewed. The challenges and barriers faced are increasingly becoming common knowledge, from pay, terms and conditions and status of a challenged sector, however these factors have been exacerbated by the Covid pandemic.

Achieving principles of fair work is challenging within this context, particularly when the sector is inflicted by a short-term focus. Enablers of word of mouth, a supportive manager and organisational culture will assist, along with conversations pre-employment, which can include use of ‘symbolic management’ (Ashforth and Kreiner, 1999) to give a more positive meaning to the work. There is also an awareness gap (particularly amongst employers, employability providers and individuals) on fair work and tools such as the Fair Work Employer Support Tool (Fair Work Convention, 2022).

There is a need for stronger regulation and legislative drivers around implementation of fair work principles and disparities were observed, which cannot be left to

competition alone for change. The rational or business case for worker collectives or forums can offer some potential to act as a catalyst for change, with union representation limited across many parts of social care. An observable gap is funding to enable improved principles in fair work, particularly when the research demonstrates improvements that can occur such as the employer with increased interest in roles when the fuller rewards package is improved. However, employers and providers, continually note their limited financial framework to offer enhancements and state this as the responsibility of the Scottish Government. With increased interest and concerns from workers around cost-of-living concerns (Handscomb et al., 2022) and the challenges faced in adult social care the hope of external salvation for improved fair work practices would seem to be a risky model to pursue,

6.1.2 Recruitment and Retention

Previous research such as the Fair Work Convention (2019), KPMG International (2014) and Audit Scotland (2022) has recognised the severe recruitment problems facing the sector, with the consequence of high vacancy rates. Consequently, a survey from Scottish Care to its members in summer 2021, found that 'just under 45% of social care providers stated they were not confident that they would be able to continue to deliver services at the same level currently' (Scottish Care, 2021:14).

Every employer and policy maker spoken to noted challenges, with common statements around the number of vacancies and the market being 'flooded', the competitive nature of recruitment which required more intensive work by recruiters, having a particular impact for smaller organisations with limited capacity. Some noted that the rate of pay was a key factor in decision making of individuals applying for roles. This research project was undertaken when the unemployment rate in the UK

was around 3.7%, which was the lowest in around 50 years with the consequence that there were around 1.3 million job openings across the economy as a whole (BBC, 2022), which highlights the challenges facing social care providers sourcing labour in such a tight market.

One employer was able to demonstrate an improved conversion into employment due to their perception of a more informed candidate applying for roles along with pre-employment conversations and effective matching to roles in a company that was growing. Showing a difference from 150 applications per week and converting 50 of these into employment to now getting 50 applications and converting on average 30 of these into employment. Other points of difference in terms of the findings with the literature review in Chapter 2, was around perception of some of the employer challenges around transport and rurality, some recruiters noting the challenge around remote rural sites with limited bus links and public transport. Others, however, felt that due to their culture and word of mouth and lesser competition in their geographical area from other providers, they had minimal difficulties. Thus, the findings show levels of variability in addressing challenges due to specific nuances amongst a diverse employer body. Pay was a common factor, there was discussion beyond this, with policy makers highlighting in particular, the importance in aligning any recruitment efforts to retention. As noted in 5.1.2 in reference to ‘touch points’ in the first year which if passed correlates with a decreased chance of the employee leaving. An ex-manager in the research also noted the challenges due to retention, with people leaving when they find the job was not what they had anticipated which put additional pressure on existing staff. These points emphasising and linking to the need for quality meaningful (and realistic) conversations pre-employment.

In terms of rewards, discussions started and ended with pay and a more rounded discussion may be needed, particularly when assessing intrinsic factors of job quality, as per Chapter 2 (Findlay et al. 2013, Hebson et al., 2015). However, pay was mentioned prominently as a challenge for those working in adult social care, with only a minority of individuals interviewed working in the sector viewing it as a long-term career option. In terms of tackling pay, authors have argued that 'raising pay rates' is not enough to reduce turnover (Taylor, 2019), whilst recognising a split between occupational psychologist and economists on this question with the latter being more supportive of pay interventions than the former. However, what the research findings indicate is comments of unfairness in relation to pay, whether it was in the reward for the type of work done, challenges faced in the job or comparison with other jobs paying more but requiring less intensive work. Authors such as Taylor (2019) feel that the public sector has lower turnover rates partly due to 'transparency'. Participants mentioned transparency as well, particularly around the realities of the role and limited preparation for this but also in some job adverts showing hourly rates or annual salary rates which made comparison difficult as well as a clearer information need around impact of employment on benefits via better off calculations. This coincided with the findings of the Feeley Review and comments around how the workforce needs better treatment (Feeley, 2021). This treatment extends to the welfare state where currently, there is a perceived 'cage' for some in moves from benefits into work in lower paid areas, meaning that these individuals are reliant on government assistance (Rubery et al., 2016) and it is difficult to move out of this perpetual cycle.

There have been further concerns of 'work intensification' afflicting the sector, as described by Moriarty et al., (2018) and Cunningham et al. (2015). There was a level of evidence of this in discussions with individuals working in the care at home sector,

noting the tiredness they felt. In terms of care homes, some labelled local authority care homes as being less intensive than the private sector. The research findings also noted individuals who stated it was difficult to concentrate and provide for their clients due to the hours, with managers failing to provide the appropriate support or only providing tokenistic responses. Trust was critical, if promises are not delivered, this can cause 'resentment' and 'push people over the edge into looking for a new job.' (Taylor, 2019:342). This point links to transparency and honesty playing a part in retention and chiming with feelings of fairness and justice.

When assessing the number of vacancies for public bodies, from the last set of statistics available, it is noted that they had higher vacancy rates on average in both care homes and care at home services (76% reported vacancies versus 57% (private sector) and 55% (Voluntary sector) and care homes for older adults (77% reported vacancies versus 51% (private) and 56% (Voluntary) (SSSC, 2021c). It could be that figures were skewed against larger providers as this research only asked providers with more than 100 services. However, it would seem that local authorities are not necessarily attracting more candidates and the research demonstrated public bodies facing the same challenges as other sectors in recruitment. In the research on vacancies by the SSSC, when asked for the reasons why they could not fill vacancies, the most common reasons were: 'Too few applicants with experience (60%), too few applicants in general (56%) and too few qualified applicants (52%) (SSSC, 2021c:6). The first and last factors are interesting, the sector has continually stated that it does not require qualifications, and most staff do not have any qualifications on starting (CCPS, 2022), something shown as well by the profile of the interviewees who were individuals working within adult social care.

Employability providers noted the challenges of placing workers with additional needs into adult social care environments due to a range of barriers including perceived prejudice and stigma. Reasons suggested for this included not wanting the worker to fail, client choice and the manual handling nature of tasks. Word of mouth was noted as an enabler to engage entrants within a tight labour market, this also had the effect of heightening the risk of discrimination through using informal channels (Hudson and Runge, 2022).

Some employers were using indirect entry roles through testing workers in less responsible roles first. However, like the 'hourglass economy' concept discussed by Nickson et al., (2003) this can also be viewed in the indirect routes used to gain entry to the sector, from the divide of 'lower' level routes such as domestic staff versus the sector also acting as an incubation for 'higher' level routes as evidenced by individuals using adult social care to gain experience in their aim of becoming a doctor or a nurse.

In terms of entrants with higher level support needs, there are schemes such as the government *Access to Work* scheme, which can offer practical support such as interpreters, adaptations and finance and 'a support worker or job coach to help' (Access to Work, 2022). However, these practical schemes don't negate assumptions. It would seem that more reflective practices such as unconscious bias training mentioned by employability providers may offer a proposed route in reducing prejudice and self-regulating decision-making behaviour. Although unconscious bias training has been scrapped for use in the UK civil service due to the belief it does not work (Coughlan, 2020) the UK civil service have said that they are focused upon 'measurable action' (Cabinet Office, 2020). Whereas other research has found that

unconscious bias training ‘can increase awareness of bias’ (Atewologun et al., 2018:15). However, some form of action is required to improve recruitment practice, as the findings would seem to exemplify the view of writers such as Frrøyland (2019:317) that ‘employers may describe positive attitudes towards people with disabilities these attitudes are not reflected in actual recruitment practice’. More widely for a large sector such as adult social care, by not having inclusive recruitment practices, they limit the pool of candidates in a tight labour market.

A further recurring theme was the nature of the work and this links to a need to explain what the job involves within a context of perception of the sector within society. This links to research in ‘dirty work’, described as work with ‘physical, social, or moral taint’ (Ashforth and Kreiner, 1999:414). As described by an employer, the job was demanding physically and mentally, with challenging behaviour and a ‘dirtier side’. Some interviewees suggested that there was a conception of adult social care as sitting having ‘cups of tea’ with residents or clients and it is understandable that those that work within the sector may not wish to draw on or reference the less salutary aspects of the role. Beyond personal care, this is also the challenging behaviour from older clients, when people may go into the sector with a rose-tinted view of the work being similar to spending time with a grandparent. This lack of understanding may also feed into a perception of continual turnover in the sector. Although from some comments it is also clear that some enjoyed the job and the difference that could be made to client lives. This theme has been observed in other research, which has noted a ‘stable core of people who wanted to work in social care and another more mobile workforce who moved between care work and retail.’ (Moriarity et al., 2018:9).

In terms of what can be done, Ashforth and Kreiner, (1999) felt that managers could take forward suggestions to use 'symbolic management … the use of stories and myths, distinctive language and metaphors, traditions and rituals, physical setting, rewards and status symbols.' (ibid:431). Given the example of 'social construction' by setting standards, regular discussion, communication and training to increase a collective identity. There were some examples of this during interviews, such as an employer outlining the progression of most senior managers from frontline roles to senior positions and support provided to a member of staff who was thinking of leaving to get them through registration as well as quotes from participants about 'care for the living' and not the 'dying'. Symbolic management can start during the pre-employment stage as well as in onboarding new entrants There is a role for employers and management to reframe discussion.

Issues such as the lack of union membership and the lack of workforce planning had limited reference from participants themselves, although the consequences were more easily recognisable, for example, comments related to the need for funding to be on a longer-term basis and individuals assessing their voice to participate in terms of individualised voice.

Interestingly though individuals working in the sector noted entering was fairly easy. The challenge for those that enter seemed to be once entry is secured, staying in the sector due to pay and also perceptions that they were not valued. Perhaps reflecting the comment by one employer describing their approach to recruitment as a 'numbers game.' Although, potentially a misplaced comment, research by Hanscomb et al. (2021:20) noted, 'feeling like a number and pressure at work make people's lives a

misery – and undermines productivity', relating directly to the importance of enablers referenced such as a supportive manager and positive organisational culture.

6.1.3 Enablers

To move beyond the challenges of recruitment and retention a key enabler was the recognition of the role of the Scottish Government towards a fair work offer, although there were mixed perspectives around this. Some praised recent initiatives and interventions in the sector, whilst others stated that more can be done. This finding could also be linked to increased coverage around proposals for an NCS. The current position around the NCS is that this 'will be debated in the Scottish Parliament from 2022, with a view to establishing the NCS by the end of this parliamentary term in 2026.' (Scottish Government, 2022a:23). In addition, the government announced key 'initiatives' to assist the sector in the interim, around a 'new Induction Programme for Health and Social Care Workers, launched in February 2022', 'new Introduction to a Career in Social Care course available in Scottish colleges which launched in October 2021', (referenced by a number of participants in the research) and 'successful examples of Modern Apprenticeships in some areas of Social Care' (ibid). Equally, there is still a realisation that more needs to be done to 'support a 'pipeline' of workers coming into the profession' (ibid), outlining solutions focused on work in schools, working with young people and widening employability routes.

The importance of 'quick' engagement, such as short videos used by organisations like the Prince's Trust to describe what a care worker does (Prince's Trust, 2022a) was seen as an example that can be expanded on and potentially linked to information on the *caretocare* website around values and the fair work agenda. It was also suggested that there was also a missed opportunity around the promotion of the

Scottish living wage being payable regardless of age, which could draw in individuals. However, on the other side there was a view by some that many of the new and younger entrants coming into the sector were doing so only for the money and may not be well suited to a career in care. Thus, a key enabler that was discussed by many was the need for conversations pre-employment, this is something that has been discussed in other research as well, notably around ‘realistic job previews’ (Baur et al., 2014).

Therefore, the need for a quality recruitment approach has to consider the needs of a diverse workforce with a view for inclusion and ensuring effective communication and honesty particularly where there are a number of challenges faced by recruiters. However, as noted recruitment discussions were linked heavily to, retention. Taylor (2019:343-345) has attempted to tackle this more widely, with his principles or ‘golden rules’:

- Give praise where praise is due
- Avoid the perception of favouritism
- Talk to every team member regularly
- Act when you suspect there are problems
- Give people as much autonomy as you possibly can
- Involve people in decision-making

This is not dissimilar to calls from the interviewees for ‘back to basics’ (5.3.2) or ‘common sense’ (5.3.3). The sector is challenged in a buoyant jobs market and looking at the principles raised as well as the findings, it is clear that the manager has an instrumental role in creating positive conditions. As noted by a local authority service manager in the research, a survey showed time with manager being most important

for them ahead of pay for staff. This is particularly important when there are challenges in creating conditions for fair work.

6.1.4 Barriers

As considered earlier, the sense of fairness was central to discussions and solutions when assessing the sectors predicament. This relates to researchers such as Cook (2008: 143) who have noted that 'being dealt with in a fair manner leads to a climate of openness and respect'. In the research, policy makers referenced work done in relation to three key work streams in particular of pay, terms and conditions and effective voice. This finding is in line with previous research which found in the case of local authorities, many do not usually go beyond 'statutory obligations' around Fair and Decent Work (Gibb et al., 2021). Reasons for not doing more in relation to fair work includes costs and the threat of this undermining opportunities for clients. However, as Hayes (2017:23) notes 'the interests of people in need of social care must be advanced in ways which promote, rather than under-mine, the employment and income security of care workers'. Noting themself union representation as one way that enhancements within the workplace can be gained.

This solution, as demonstrated from the findings may not be feasible, as except for local authorities and one large third sector organisation, there was no union presence. And the findings also demonstrated degradation at the local authority level (with stronger union representation) as their contracted providers did not follow key principles of fair work, with no demonstration of imminent change in commissioning. Voluntary providers noted evidence of local authority contact to negotiate temporary staffing to fill workforce gaps but at reduced voluntary provider pay rates. Although fair work is a principle advocated at a policy level, it is clear that at the operational level,

finance trumps any significant shift. However, as per Chapter 2, and demonstrated by threats of strike action when changes to terms and conditions are proposed, then union representation affords a level of insurance policy at least within unionised environments.

Although the discussion on employee voice may need to move beyond unions and into discussions as noted by Standing (2014) of ‘worker collectives or employee forums’, a more realistic offering within a fragmented sector with many workers unrepresented, as a catalyst for change. This approach will need to go through internal processes, with further research required to profile the good that these collectives or employee forums provide as a consensus for change. There is literature which has talked about the growth in non-unionised forms of representation (Williams and Adam-Smith, 2010). With employee voice now more commonly constituting ‘alternative ways in which employees can articulate their interests, like machinery for raising individual grievances, for example, or arrangements that allow staff to communicate their views to management.’ (ibid:223). Other areas to get to a ‘fair work offer’ will require Scottish Government intervention, notably with regard to pay offers, the government has funded the living wage, with uplifts to £10.50 per hour for all sectors including private and third sector and uplifts announced to £10.90 (from April 2023).

Chapter 2 highlighted some particular challenges expressed via the Fair Work Convention (2019), such as recruitment and retention challenges, undervaluing of social care work, low pay and lack of voice and visibility. These issues were to varying degrees identified by all stakeholders. The research showed a level of opportunity to access work in adult social care and it being regarded as a ‘stable’ income (if not decent income) from the stakeholders engaged. However, effective voice, fulfilment in the workplace and respect in the workplace were less evident. The convention does

have a Fair Work Employer Support Tool (Fair Work Convention, 2022) to assess status, but there was no evidence of awareness or use.

As noted by participants, there is a value to the role around ‘making a difference’ to people’s lives, the work can be fulfilling (Nickson et al., 2008). However, as Cook (2008: 160) recognised, staff ‘look at the total work package’ in terms of rewards, including intrinsic and extrinsic factors. Cook discussed a journey that an employee goes on and key interventions and points where the organisation is able to add value to assist intrinsic job factors. However, this approach of Cook is a linear and traditional pathway from recruitment – induction with reward and recognition being a latter thought in the journey, just before HR policies and retirement policies. When for the sector, reward and recognition can be front ended in any employee journey, especially when concerns of fairness, cost of living and equity are recurring themes and were raised to different levels in the findings.

The Fair Work Convention, have also made recommendations to government about expediating improved conditions for workers, indicating frustration themselves with the slow progress in social care. Acknowledging recommendations raised such as ‘sick pay and unemployment support’ and ‘taking action to improve the experience of fair work for disabled workers, ethnic minority workers, women, younger workers, older workers and LGBT+ workers’ (Fair Work Convention, 2021b).

It cannot be ignored that pay is central not just in the literature review but in the discussions with staff working within the sector, thus interventions and support along the employee journeys may only mask a fundamental problem. The job is devalued by society and there does not seem to be imminent societal change. These points also link to aspects of unfairness, pay being a more direct contributor to feelings of job

quality (Green, 2006). For example, there is the common maxim and idea of a ‘fair day’s pay for a fair day’s work’. Unless pay is increased to a level that is viewed as acceptable, these issues will not disappear.

As observed by the Scottish Government themselves, ‘commissioning’ and ‘procurement practices’, ‘work against both Fair Work and person-centred care’. (Scottish Government, 2021f). This entanglement also relates to comments from interviewees about an ineffectual relationship between key bodies representing local authorities such as COSLA and the Scottish Government. However, there are concerns that the sector cannot sustain itself as currently, one employer describing the situation as a ‘race to the bottom’, due to the deterioration of standards, despite the introduction of qualification criteria for registration which was aimed to increase competence.

The lack of ‘legal’ standing also limited the extent that fair work could influence the sector with its reliance on a ‘goodwill’ approach. This approach has been criticised by other researchers, such as Gregor Gall, as discussed in Chapter 2. This point can be linked to the research by Stuart et al., (2011) which found that ‘soft regulation’, can ‘support … innovation in employment relations terms, creates frameworks in cultural and institutional terms for micro-level developments…the dilemma is whether such developments would be better served by a stronger and more coherent system of regulation.’ (p.3810). Although, other research, such as Heery et al., (2020) using the example of positive Living wage accreditation take up in Scotland relative to size, has shown the influence that governments can make through ‘multiple forms of intervention’ (p.406).

The other issue to contend with, more so in care at home provision is the dispersed nature of the workforce, where many employees are increasingly engaging or controlled by mobile devices to monitor activity and output. Particularly so, when the growth and 'focus of care provision has moved to care at home' (Bell et al., 2021). For an increasingly dispersed and underfunded workforce to fight for increased union representation particularly amongst independent and voluntary providers (particularly smaller to medium sized ones) is difficult. A further solution proposed, as noted earlier is for employers with a 'social purpose' to be given preferential status for contracts (Hudson, 2016) and a stakeholder did note a social enterprise organisation that had been viewed as a fair work provider due to its approach to staff and perceptions of trust within its care at home provision. This is interesting and points to the findings which noted developing distinctions made between employer type, with comments also demonstrating a more social third sector or voluntary provider; more responsive private employer and better conditions within public sector provision.

More widely contracts can be worth examining further as a catalyst for movement. As noted earlier a number of authors have criticised the concept of New Public Management (NPM) and the manner in which it introduces private sector practices into the public sector. One commonly cited example being the 'construction of market mechanisms so that contracts rather than hierarchies became the dominant means of control.' (Dawson and Dargie, 2002:35). However, a transformational solution such as reducing private providers may not be reasonable or practical when considering the thousands of independent providers in Scotland.

With regard to sources of labour, as noted earlier there were also challenges around the benefit system, restricting individuals personal work choice (Rubery et al., 2016). Moreover, there was a realisation that it was not possible to fill roles from the EU anymore due to Brexit. The wider exclusion of international workers was highlighted in the research, and it is unsurprising that there are now calls for social care roles on the shortage occupation list to include roles below the current threshold of £20,480 per annum. Indeed, the Scottish Government has called for a 'migration system tailored to Scotland's needs, including a Scottish Visa' (Scottish Government, 2022a:52), a suggestion supported by some of the policy makers who were interviewed. Although the evidence on the 'ground' is that the Scottish Government, at least in the interim is targeting a domestic workforce, particularly through programmes such as *No one left behind* and the Scottish Government's workforce strategy for health and social care, where there is no mention of social care in relation to international recruitment efforts.

The fair work offer is welcome, but its ability to bring about change is limited due to the lack of awareness amongst key constituent groups as well as limits due to primary legislation in this domain. There is a history of individuals coming into the sector and writing about their experiences 'undercover' and one thing that has stood out has been 'lowly' rewards. As Polly Toynbee, observed back in 2003, the 'rewards' were residents smiling and appreciating the help, whilst noting a doubt around the sector as a career option for those with the choice, 'not at this low pay and low status' (p. 203), it is not clear if there has been much change in this fundamental principle despite all the rhetoric.

6.1.5 Personalisation and Scottish Policy Direction

The literature review, noted a Scottish policy context that highlights the need for person centred and personalised approaches highlighting client choice, both when supporting clients in social care and in supporting candidates seeking employment.

Personalisation has been described as a concept that 'embodies notion of self-determination by people who use services rather than the prescriptive services approach where individuals are passive recipients of care' (Cunningham and Nickson, 2010:6). As noted, within the Scottish Government there has been active promotion of personalisation particularly through direct payments and attempts to move away from medical models of thinking to more social models particularly pushed by disability advocates (Rummery et al., 2023) as seen through the introduction of Self-directed Support (SDS) in Scotland. Indeed, it has been suggested that 'person-centredness and person-centred care are at the heart of government health and social care policy in Scotland' (McCormack et al., 2015:9). Despite this conceptual focus in Scotland, some authors have also stated that the cultural change has not been as 'transformative' as required for personalised social care services (Pearson et al., 2018).

When applied to employability, again the focus of policy has been on person centred approaches in Scotland, with No One Left Behind as discussed being the key Scottish employability approach from 1 April 2022, as stated by a Scottish Minister, devised to be 'in line with Christie Commission principles' and 'more person-centred, tailored and responsive to the needs of individuals and local labour market.' (Lochhead, 2021).

The primary research highlights some challenges with the approach of personalisation. From an employer stating that their attempts to facilitate disabled

candidates have been thwarted by a lack of client understanding to a policy maker discussing equalities legislation not applying, meaning that the default can be female carers as equalities legislation does not apply in the same way, leading to providers being apologetic when offering male carers to client, when arguably they could be assertive or rational about worker choice. For example, this situation can be compared with hospital settings, where male nurses/healthcare assistants are provided routinely if the patient does not object. Employability programmes, beyond the sparse nature of programmes observed during the pandemic, have also focused on small number of candidates that are job ready, which again heightens underrepresentation in the sector.

To crack the underrepresentation of certain groups from the labour market that is presently observed there also is a need to deal with societal assumptions, which the research demonstrates afflict both employability pathways and social care recruitment. Part of this effort includes balancing the dichotomy between patient care and recruitment. There is a need for better relationships between employability providers and social care employers, to develop programmes targeting underrepresented entrants. This can be done whilst advocating for policy makers to develop policy approaches which recognise the merits of person-centred approaches, but ensure conversations are more contextual to not heighten existing underrepresentation.

6.2 Employability Approaches

6.2.1 Introduction

Employability pathways and social care remain fragmented due to a number of reasons. For example. there are limited work experience opportunities, a situation heightened during the pandemic, particularly when traditional models relied on that

practical work experience. Other elements impacting providers are perceptions, past experiences, or anecdotal evidence about the nature of the sector. Furthermore, linked to this was the multitude of approaches and programmes previously that have attempted to increase entrants into the sector without a level of understanding or relationship building. This links to the view of Williams (2015) who has noted that employability interventions that focused upon skills have limited longevity. Despite this skills-based approaches still have more of an opening in the sector than more developmental approaches, due to a need for quick job entry. However, this approach disadvantages those with additional support needs or barriers. This can be viewed in new approaches in the sector of online programmes being one day over 6 weeks (Scotland) or one day over 3 weeks (Wales). Despite previous analysis noting the limitations of these 'short time frames' as 'problematic, forcing candidates to move on before key barriers were addressed' (Blake Stevenson, 2018:35). There is not the flexibility within these programmes and there is a tendency to focus on light touch approaches marketed as a way for employers to source labour. All individuals in the research, in effect, noted the ease of entry, where there are barriers, these are for those with additional support needs and programmes should be developed for these cohorts. Employability providers in the research demonstrated their own limitations to support any more than small numbers of jobseekers. Programmes are not being developed, due to the time required when the sector has an immediate staffing crisis and policy makers do not have the reliance on employability provision as a sustainable route, creating an entanglement. It has already been noted that the sector is 'underserved by the employability literature' (Cake et al., 2021).

Planning is a key shortfall as observed within the sector reflecting Oung et al.'s (2020) comments noting yearly commissioning cycles. Some providers have utilised what can

be best described as adaptable strategies using indirect entry routes for individuals, particularly in less ‘responsible’ roles as a way to prove themselves.

6.2.2 Enablers

The literature review noted a need to understand the nexus and interconnections more fully within the employability space. In some cases, staff from employability departments were deployed to other work (including social care), demonstrating the prioritisation apparent during an emergency situation. Many examples of enablers related to past experiences of employers with the Prince’s Trust, Care apprenticeships and the use of interventions like volunteer coordinators to engage with particular communities. There was reference to Kickstart, although experiences had been mixed in relation to the programme. One employer describing it as a ‘shambles’ due to its inaccessibility.

Others mentioned specific work with Fair Start organisations and Skills Development Scotland in relation to apprenticeships. However, it was recognised that the volume is not there or that individuals were ‘too far from the workplace’, that it was not viewed as a successful pipeline for adult social care. Invariably perception may impact upon connected bodies, as there was a calling for greater understanding of the sector from those in jobcentres, reflecting Moriarty et al.’s (2018:15) contention that they should ‘take a more positive attitude to care work and not simply suggest it just to “get people off their books.”’ And this feeling of staff being ‘pushed’ or ‘shoved’ to the sector was mentioned many times.

Announcements by Scottish Government, also heighten this perception, with wording from the new 6-day online programmes delivered by the College Development Network. These programmes, ‘help individuals develop the skills required to move into

sectors with the greatest potential for future growth …. linked with virtual recruitment events for completing cohorts to bring providers with vacancies in the local area together with those who have completed the programme.' (Scottish Government, 2022a:50). However, the level of funding believed to be at £800,000 per annum for 1,800 spaces (£444 per space) demonstrates a light touch approach as opposed to a more fundamental developmental approach.

Although initiatives to try and meet the shortfall of staff are positive, areas requiring further exploration include paid internships. Baur et al., (2014) in describing the need for realistic job previews (RJP), noted that Internships are a real possibility for 'reconceptualizing the traditional RJP' (p.214). These can offer an opportunity for employers to observe workers, they can also allow candidates to gain from 'lived experience', which was recognised as valued from the research, but paid experiences that were funded. Others looked at unpaid carers as an option, linked to what many consider as the 'formal Health and Social Care system' relying on their contribution (Scottish Government, 2022a:30), despite the existing inequalities and pressures on these individuals.

The research showed a degree of scepticism amongst employers and policy makers for employability providers and approaches in general. Some of the comments may hide a frustration of the time involved in employability programmes, for example an employer noting the time taken to get the composite return. These findings are similar to previous research that has noted that the 'time spent on administration detracts from time spent delivering to users … administration required by programmes needed to be proportionate, and structured in such a way that lessened the administrative burden on both the provider and their users.' (Blake Stevenson, 2018:7).

In Chapter 3 it was noted that the means that employers assess suitability is also ‘problematic’ and is based on short interactions (Newton et al., 2005). Recognising this, as noted by McQuaid and Lindsay (2002) ‘valued’, and ‘supportive’ training is critical. There was also the reference to non-employability pathways via colleges, such as the ‘Skills Boost’ programmes. These are free courses and give those over 16 that are unemployed or at risk of unemployment open learning opportunities to gain key knowledge and skills in sectors such as health and social care. The courses are approximately three weeks long at level SCQF 4 so below the qualification level that is required for SSSC registration and some offer routes into employment by being tied to live vacancies such as a partnership between Edinburgh College and NHS Lothian, which notes for successful participants, job entry upon completion of a short course (3 weeks) and checks (PVG, Occupational Health) (Edinburgh College, 2022). Participants also discussed, using self-directed care funds to provide peer-mentoring opportunities for young people as a taster in social care. However, a continual issue with many of the programmes mentioned was the lack of traction as they did not continue on a recurring basis.

As noted in Chapter 3, the employer position is ‘assumed’ (Ingold and Stuart, 2015) leading to mismatches and lack of applicability. The findings reported here point to a potential need for closer working between the employer and employability providers to reduce this mismatch. Having that ‘middle’ bit may lead to increased retention or improved understanding, that said, it is not clear who would do this best. As one employability provider noted the ‘specialist’ in the relationship will only ever be the employer and there is no capacity elsewhere unless this capacity is funded or introduced through new resourcing.

These factors resulted in some discussing success as a need to go back to ‘basics,’ using service users in recruitment, open days, organisations considering a collective approach, more communication and engagement in pre-employment activities. As noted from this perspective the ‘missing’ part was ‘passion, energy, myth busting’ which requires existing staff time, again constrained. This lack of time, led to short-term interventions, such as golden hellos, offered as a solution to engage staff. However, there was the risk that these met short-term conditions whilst creating longer term risks, from increased resentment from internal staff that do not benefit (Ferguson, 2005). When planning is limited, these short-versus-long term dilemmas are seen elsewhere as well, as one policymaker noted pressure to recruit due to a ‘short-term pain’ of holding a vacancy when faced with no suitable candidates.

Authors such as Argyle (1989) have discussed the importance of ‘achievement and recognition’ for workers, although distinguishing between ‘high’ skill and ‘manual’ work. Interestingly the same author discussed satisfaction and related this to workers that possess ‘challenge, autonomy and skill variety’ as more content versus assembly line workers. This is an interesting observation around the nature of work, and the findings demonstrate a requirement to use pathways of interesting or specialised work to induce people into the sector, to diminish the common perceptual barriers to the sector. This links to researchers who have discussed the ‘artificial’ split between work in homes and out in the workplace, such that ‘gendered work in the home impacts on how women and men work in the labour market’ (Strangleman and Warren, 2008:236). Use of agency staff has been described as a growing trend within the sector (Moriarty et al., 2018). The same authors noting tensions, particularly in training of new staff in new environments and the load on existing staff, challenges with ‘decision making’,

‘continuity of care’ and loss of ‘organisational memory’ (ibid). The individuals in the research working for an agency noted themselves, their increased flexibility and slightly higher pay but set against more limited working relationships.

The complexities noted due to the nature of work and conditions may be a determining factor combined with dysfunctional relationships in relations between key stakeholders, particularly in the view of employability programmes as sustainable models to increase entrants into the adult social care sector. However, the presence of more rapid entry models observed is worth analysis. To assess the employability approaches and the level of provision that was present in the sector. Bredgaard approaches to active labour market policies as discussed in Chapter 3, will be revisited in view of the research findings.

From the approaches discussed by Bredgaard (2015) the type most commonly observed was ‘*Labour Market Training* (Classroom, on-the-job training, and work experience’ (p.438). One of the research participants due to being on welfare benefits, was offered ‘*Job search assistance’* via online courses. This second category was the key growth area in types of employability programmes within adult social care particularly when the quick job entry programmes are added in this category, although they could not constitute as exact job clubs or courses but were specifically lighter touch bespoke programmes targeted at meeting the workforce shortfall in adult social care. Thus, these approaches are limited, when these quick entry programmes such as the College Development Network programme are assessed.

Table 4 – Active Labour Market Policies revisited

1) Labour Market Training (Classroom, on-the-job training, and work experience) - *Most common observation in Adult Social Care with Sector Based Work Academies*
2) Job search assistance (job search courses, job clubs, vocational guidance, counselling and monitoring, and sanctions) - *Growth areas in Adult Social Care with short online programmes and booster courses along with CV/Job preparation, aimed mostly at those on benefits such as Universal Credit (or legacy benefits).*
3) Private sector incentive programmes (wage subsidy and self-employment grants) - *Observed in relation to the use of the ERI, wage subsidies and job carving by one provider.*
4) Direct employment programmes in the public sector…targeted at the most disadvantaged workers - *Not observed*

Labour market training was also more common within employability providers as discussed in programmes such as Princes Trust and Sector based work academies focused on classroom-based training and some placement activity. Accepting an incidence of the use of *Private sector incentive programmes* via the employment recruitment incentive around a model of individualised employability support and subsidies via full employment costs over a period of six months for those requiring increased support. This provider themselves recognised the difficulty in scaling this up

due to its costly model, whilst also having limited experience of this model working in adult social care.

Models used within adult social care thus can be categorised between Labour Market Training (albeit benefiting further from elements of subsidised assistance or enhanced placement activity or positive action measures to be suitable for those furthest from the jobs market) and Job search assistance focused upon quick turnaround as a more likely split within adult social care. Thus, a category for rapid entry, categorised potentially as 'Rapid Job Entry programmes', required within a buoyant jobs market such as adult social care is more apt than a categorisation of job search assistance. The role of the National Transition Training Fund may be a suitable intervention in this regard, with its focus of supporting 1,800 training places for those interested in the 'variety of skilled roles available in Adult Social Care' (Scottish Government, 2022a:8), via short light-touch approaches. However, this still does not account for those with higher level needs who are more likely to be on traditional employability programmes and face greater obstacles to work.

There is much literature which considers the offer of 'low-wage employment subsidies' assisting 'relatively unskilled workers obtain low-paid jobs, which they would otherwise be unable to obtain, since their potential productivity is below the market wage. It has been stated that low-wage subsidies are both non-discriminatory and cost-effective. They enable employers to hire more workers, contributing to the fall in unemployment, which in turn causes most of the subsidy to be paid out as direct or indirect labour compensation.' (Heery et al., 2020:399) and in the long run pays for itself (United Nations, 2007). Job carving was also tied into this approach, described by an employability provider (with specialist support) being able to adjust work tasks to fit the needs of those with key barriers. As Scoppetta et al. (2019:7) note this approach can

be used to ‘identify areas in which tasks and processes can be rearranged to create new positions within firms. The carving process can be accompanied by complementary training for filling a new position, ongoing support measures to advance people in their further careers and by offers to the enterprises, such as workplace adjustments.’ By targeting the more vulnerable groups, this counteracts social exclusion. But as noted some of the funding regimes, have received criticism such as the Kickstart scheme, although much criticism was labelled at the contractual requirements of the scheme, these programmes have also been criticised as they ‘focus on solely ‘employment creation’ (United Nations, 2007) and do not, as one interviewee noted, allow individuals to experience ‘growth’ in their personal journey.

The only element from the approaches Bredgaard mentioned that was not used was *Direct Employment programmes in the public sector*. This is an area for progress for the sector and has potential via future outcomes from *No one left behind* initiatives, though it is potentially too early to see tangible results yet within adult social care. There are also programmes such as the GFiE (Going Forward into Employment) programme within the civil service (The Civil Service Commission, 2022), which has relaxed recruitment routes and interviews via the traditional fair and open competition processes to allow individuals that face additional barriers the opportunity to gain entry. Due to the challenges raised around underrepresentation within adult social care, this may be a development that offers further scope within the sector.

Work trials have been lauded in the literature, by authors such as Newton et al. (2005) who notes the role in, ‘developing work and employability skills in unemployed and inactive people and offering employers an opportunity to test whether the person is appropriate for the job’ (p. 57). However, there was limited evidence of this within the research findings. This was partly due to those on these schemes needing to have the

same pre-employment ‘screen’, interview or conversation as well as a need to be paid. Some thought that there could be further potential for work trials if the funding came from national government and were extended beyond short time frames.

6.2.2.1 Values Based Recruitment

One aspect that was most lauded as an enabler was Values Based Recruitment, to get individuals from a range of sectors such as retail and hospitality, particularly due to the ‘customer service’ element that was common across these different sectors. As noted in marketing literature used in the sector to target workers, ‘If you’re someone who’s kind and patient and treats others with dignity and respect then adult social care could be the perfect career choice for you.’ (My Job Scotland, 2022). As a recruiter stated, to judge based on a CV was not the best assessment of an ‘ability’ to care. This is a valuable approach to widen applicant pools. However, employers will need to do more than just say they are values based. This will need to be in their practices starting from the job advert, limiting any implied bias for those with existing care experience or qualifications. As values play a contributory role to culture and organisational culture, as a differentiator for employers.

However, the challenge as expressed in values-based approaches was not just, as expressed in Chapter 3, assessing how to test values and a lack of self-awareness as these are ‘more difficult to determine because group members are not always consciously aware of, or can easily articulate, the values that influence their behaviour’ (Burnes, 2004:264). Although potentially if you are hearing key values all the time, they may just sink in. There was the age-old challenge when needing workers, the extent to which employers can ensure that all new staff were recruited through values-based processes, especially when surveys showed reasoning for vacancies by

employers related to a lack of experience or qualifications in candidates (SSSC, 2021). Here tools such as *Question of Care,* which are easily accessible and free, can be used by recruiters and those placing individuals into the sector during the screening or pre-employment discussions. As noted by past research from organisations such as the NSPCC who found their values profiling tools 'screened' out those unsuitable to work with children, whilst having confidence of a level of recruitment of those with shared values to the organisation (Armstrong et al., 2010).

There may be a gap however around involving 'service users' in the interface of recruitment to arrive at key values (Manthorpe et al., 2017). These authors note that their research undertaken with service users did not reference values such as 'independence, non-judgementalism and respect' (p.88) which would be 'expected'.

The research was inconsistent on the position of a need to incorporate values in training within adult social care, against conceived wisdom such as the Cavendish Review (2013). However, as the research findings demonstrate from comments, a reason employers have been reticent to increase the diversity of staff has been due to client choice, and increased challenges for those with a disability, of younger age and for males an uncomfortable truth that the sector may need to acknowledge.

6.2.3 Scottish Policy Direction

There was evidence of a specific Scottish policy direction and model within employability, which is outlined below.

No One Left Behind

No One Left Behind, has been described as the government's, 'strategy for placing people at the centre of the design and delivery of employability services … the government works together with third sector training providers to identify local needs

and make informed, evidence-based decisions, flexing these to meet emerging labour market demands' (Employability in Scotland, 2022b). This approach to employability came out from a review of employability in Scotland which called for more joined up and flexible approaches. This is via a focus upon 'personalised support' that is more streamlined and simpler, whilst supporting 'more people – particularly those facing multiple barriers – to move into the right job, at the right time.' (Scottish Government, 2018:2). In reviews of the work, research has highlighted the need for employment support for those with protected equality characteristics but also those 'recovering from substance misuse; those experiencing homelessness and those with convictions.' (Blake Stevenson, 2018:21). From this research, interviewees also noted approaches to work within the area of substance misuse such as a volunteering pathway for those with 'lived experience' that allowed entry into the sector. For those with convictions, the focus was discussions within the employer around the disclosure of the spent convictions and risk management processes to facilitate entry. The role of the employability sector in these candidate discussions were limited, however. The NOLB programme is being delivered through third sector providers with numerous initiatives across Scotland. It will be interesting to see if this can become a significant route to get people into adult social care.

Fair Start Scotland

NOLB is the employability strategy, the devolved employment service in Scotland is called Fair Start Scotland. This provides, '12-18 months of tailored, flexible, and person-centred pre-employment support to people who want help to find and stay in fair and sustainable work. The service also works with employers to help with recruitment and support for the employer and their new employee by offering up to 12 months in-work support' (Employability in Scotland, 2022c).

The programme, like No One Left Behind, was mentioned by providers, via employers noting that they had received ‘fair start’ candidates. This could point to a danger of a homogenous view of applicants with high level needs rather than an appreciation of the heterogeneity of candidates. This is particularly the case when past research by Alma Economics (2021) noted elements of ‘creaming’ within the programme, against the stated values of dignity and fairness that is espoused by the Scottish Government. Moreover, other research has noted that this programme should actively include ‘specialist third sector organisations and community-level venues’ in operational delivery, ‘but they require active inclusion and real incentives to do so.’ (One Parent Families Scotland, 2021:12). Fair start providers are likely to have a head start in engagement with funding bodies and that was a factor for some providers, being locked out of the recruitment processes (when applied to adult social care), the service will need to consider how a wider scope of providers can help it achieve its remit.

Employability Pipeline

NOLB is the strategy and Fair Start Scotland is a support service. A framework that is used in Scotland ‘to support the effective delivery of employability services.’ (Employability in Scotland, 2022d) is the Employability pipeline. This consists of a linear model of stages which a candidate can move from, from stage 1: Referral, Engagement & Assessment when a client is not job ready, stage 2: Needs Assessment, stage 3: Vocational Activity when the client becomes job ready, stage 4: Employer engagement and job matching and stage 5: In work support and aftercare. In previous reviews of the pipeline model, it was thought to have been beneficial for increased ‘partnership working’, ‘improving outcomes’ and the ‘client journey’ (Sutherland et al., 2015). However, as per the research findings and comments from participants, this aligned closely to the work of Sutherland et al. noting challenges,

particularly two, a need for improved ‘referral processes’ due to staff turnover and limited relationship building opportunities during the pandemic. And a need for ‘more resource’, a perennial challenge, when providers note the limited capacity available to provide support to clients with additional needs, who should be prioritised in programmes. But there is the danger as noted in Chapter 3 of ‘parking’ disabled jobseekers in lower stages of the employability pipeline or as noted by a participant in the findings, in charity shops. Or ‘creaming’ by focusing energies on those most job ready, leaving job seekers with more barriers overlooked.

Apprenticeships

Apprenticeships are also available within health and social care, focused on gaining experience whilst developing key skills. There are three main apprenticeship types, Foundation Apprenticeships and Modern Apprenticeships in social services and healthcare as well as in care services leadership and management (CaretoCare, 2022). As noted from the research, the only examples of apprenticeships witnessed was modern apprenticeships within local authority bodies and foundation apprenticeships for secondary school pupils at year 5 & 6. Their prominence as a solution to meet the workforce needs of adult social care, were not as evident as the literature review would suggest. There were concerns around the model of modern apprenticeships and the throughput into employment due to the level of the apprenticeship wage. It was noted that they may work for early school leavers but beyond that, in adult social care, the model to be a successful route would need reviewing.

6.2.3.1 Other initiatives

Kickstart

As mentioned earlier in Chapter 3the kickstart programme, now closed, provided ‘funding to employers to create jobs for 16- to 24-year-olds on Universal Credit’ (Gov.UK, 2020). However, beyond one employer who had secured an employee via this route, it was not well used. Two employers, one referenced earlier (due to the contractual requirement to develop a new role to gain funding) and one other due to their constitution and a religious ethos were not able to access the scheme. Noting a disparity with this scheme developed via a UK Policy framework, comparing it with Scotland’s own employability programmes, which an employer noted as not having the same stipulations and contractual restrictions.

Prince’s Trust

Prince’s Trust programmes were referred to numerous times in interviews, although at the time of the research these were on hold due to the pandemic. The Prince’s Trust delivered courses in Health and Social Care including ‘Get Started’ which is a short course of 2 -3 days and ‘Get Into…’ which is a longer 4–6-week course, focused upon ‘a real insight into what working in a Health and Social Care environment is actually like’ (Prince’s Trust, 2022b). In terms of employer involvement, they noted ‘hybrid approaches’ as a way forward, with note that Prince’s Trust were moving to a blended delivery approach in their programmes. Something other providers have as well, fair start, for example, noted the impact of reduced referrals during the pandemic and a change to non-face to face delivery methods of support as well as easements in contact requirements on participants (Scottish Government, 2021e). Due to the fact that there are issues with online delivery due to digital accessibility and lack of

accreditation being possible. Face-to-face delivery of programmes can have increased costs and providers are restricted to a single location and employer. This may be wider learning for employability provision for the sector. With college and university placements mentioned in the research as well. Research, looking at student placements has noted the 'strain of unpaid placements' and 'hidden costs for students (dress, travel etc.)' (Hoskyn et al., 2020:448). The research findings did note a rise in paid placements partly believed to be due to increased competition rather than moral or dignity-based principles. Whereas speaking to other participants and employers, a large amount of student placements within the sector were still unpaid, justified due to the short duration and nature of these, focused on gaining experience. Despite, this many employers used these initiatives as sources of future staff. Others have noted that 'training, work experience and voluntary work should be expanded, and opportunities to pursue higher and further education should be backed up with effective financial support' (One Parent Families Scotland, 2021:13).

'Healthcare Academies'

Another common model that was referenced related to SWAP or Sector Based Work Academy Programmes delivered via DWP as referenced in Chapter 3. Practical experience had been limited, it was noted that some third sector and private organisations had still been able to facilitate work experience opportunities. These approaches are similar to those discussed by Gore (2005) such as the 'Ambition' programme. This programme was set up to target specific sectors, where there were 'recruitment difficulties and skills shortages by providing appropriate training to unemployed people, who can then find jobs with prospects in what have been identified as growth industries.' (Gore, 2005:350).

All these initiatives and programmes are welcomed, it is unclear as to how effectively they target the perception of the sector. For example, from all the individuals engaged who worked in the sector, employability programmes held no locus of control over their ability to enter the sector. Whereas areas that can help, included careers advisers, teachers and jobcentres becoming ‘better informed about social care’, but also not aiding negative biases. As noted in previous research, ‘one participant recounted how her grandchildren’s teacher had publicly told one student that if she did not do her homework she would “end up as a care worker.” (Moriarty et al., 2018:15).

However, perceptions are not only evident in wider society, but also amongst employers, the implicit notes of an underlying reticence to employ younger workers. This finding chiming with researchers who have found it difficult to undertake research with employers around the subject of youth employment in social care. For example, Montgomery et al. (2017:425) suggest that the sector has a ‘general preference for employing older and more mature carer staff, who were also favoured by clients, particularly in providing care to elderly people.’ And this may also highlight the distance between employers and employability interventions, as noted by numerous studies, there is a majority of employability programmes that are focused on youth and ‘young people’, where many observers have called for a wider ‘age provision’. (Blake Stevenson, 2018).

Whereas there are the possibilities of transformational change through the use of ‘workplace-orientated approaches’ supporting those with needs such as due to mental health illness (Frøyland et al., 2019). This related to some policy makers, noting the potential of a two-pronged approach via work with specialist employability agencies or community groups whilst offering guaranteed interview for these cohorts. Whereas programmes can have Impact assessments in relation to Equality, they may show the

programmes do not disadvantage groups, but if labour market statistics are viewed it is clear that inequalities still exist. For example, of the UK's seven million people of working age with a disability or long-term health condition around a half are working (CIPD, 2021b).

The research also found variability in terms of approach in targeting groups. For example, unpaid carers and young carers were identified as potential growth areas to highlight. Indeed, Parry et al., (2005) have pointed to unpaid carers as a solution to workforce gaps and the Scottish Government (2022d) similarly recognises the reliance on unpaid carers, who actually outnumber the paid workers in health and social care. Moreover, the number of unpaid carers has increased by 392,000 during the pandemic (Carers Scotland, 2020). However, with a total of 1.1 million people classed as unpaid carers in Scotland, many face challenges such as stress and the responsibility that the role brings, with worries about the future (ibid). To expect this group to plug workforce care gaps by seeking additional 'work' would be unrealistic. In terms of young carers, as a policy maker noted, a focus has been to broaden their worldview in terms of career opportunities as opposed to profile them permanently into social care roles.

6.2.4 Personalisation within Employability

As noted in earlier comments, policy makers in Scotland in particular have focused on personalisation and person-centred approaches within employability, however as found by the research, the priority is on 'work first' and there are standardised and quick entry approaches within adult social care. Arguably without the effective relationships and partnerships between social care and employability providers, which the primary research demonstrates is not in place, there is the risk that the sector will be either bypassed or candidates (including underrepresented entrants) move to

sectors more aligned to employability practice. There is a ‘black market’ in social care ‘employability’ where employers are using indirect routes in parallel and shadow systems to gain what would be typical candidates from employability programmes as noted by the research due to a broken and ill-prepared employability system for adult social care.

McQuaid and Lindsay (2005) have discussed the need to identify the ‘key interrelated barriers’, and the ‘need to understand the interaction of individual and external factors affecting the individual’s ability to operate effectively within the labour market.’ (p.207). When assessing the sector of adult social care, the employability components and external factors discussed are apt. This is beyond ‘transferable skills’ such as communication mentioned in the research, including by employers noting this aspect lacking in ‘employability candidates’. But also ‘personal motivation’, ‘individual’s mobility’, ‘information and support networks’ and ‘other personal barriers’ (McQuaid and Lindsay, 2005). However, (as also found in this research), the equally instrumental factors such as ‘attitudes’ of employer, ‘tax-benefits system’ and ‘other assistance for disadvantaged job seekers’ (ibid) are important. This point links to Nathan (2001), who argued that ‘policy makers need to think harder about moving jobs to people, as well as people to jobs. There should be much greater emphasis on matching supply-side and demand-side measures in deprived communities and isolated labour markets.’ (p.19). This approach requires employability providers to go beyond the ‘narrow’ approaches, ‘through more interconnected lens’ (ibid) and can allow for solutions that are more realistic and opportune for the sector and situation.

There have been moves at matching, for example ‘at the request of the Scottish Government’ SSSC have ‘invited previously registered workers to note their interest in returning to care roles by registering’ (SSSC, 2022) on a social care recruitment

portal that SSSC have set up for employers. This links to the matching element that was critical in the initial stages of recruitment and a number of interviewees mentioned. Currently this is online, and it may make sense to expand this to face to face conversations as a useful addition, one possible approach may be via ‘speed dating or matching’ facilitated within the jobcentre network? Combining elements from the research around a need for more visibility of employers with pre-employment conversations and matching may, therefore, be a way forward. This approach may require more facilitation to develop up these opportunities, and it is not clear that this facilitation capacity is available. This is not dissimilar to recent research by Scottish Care, who found that.

> Care providers responded that the most successful routes to recruit new staff remain through social media platforms and by word of mouth. Social care as it stands is not a prominent career option; career pathways still have a great deal of work to go to become an established option for school and higher education leavers. Greater investment in school coordinators and inclusion of social care when discussing career choices with the younger workforce is vital to build the social care workforce of the future. Another concerning finding was that around half of all applicants do not show up on the day of the interview. This data needs further exploring to ascertain the reasons people do not attend and whether employability interventions could provide support to individuals and reduce non-attendance rates (Scottish Care, 2021:13)

Others such as Bolger, (2010) have also noted a need to work earlier within schools, ‘rather than looking at problems of those aged 16 and over’ (p.331).

A key differentiator may be effective diversity management (French and Rees, 2016). There are structural challenges, as currently Scotland policy context for example in terms of International recruitment policy and UK welfare benefits policy, are ‘reserved’ matters, meaning that the Scottish Government has little control (Moriarty, 2010). Previous initiatives have focused upon recruitment campaigns, helplines and websites (Moriarty, 2010), which specifically focus on recruitment and retention advice for SMEs along with e-learning resources (ibid).

Another underrepresented group that was mentioned were those with criminal convictions. There is guidance for the sector, and this includes guidance for the candidates around not needing to tell the employer about spent convictions, unless they ‘have to be disclosed on higher level disclosures.’ (Scottish Government, 2022i). It is clear from the research that there is a hierarchy of convictions. Some convictions in the sector were shrugged off as ‘minor’ such as travel violations or minor levels of common assault. Whereas ‘fraud’ and ‘physical assault’ made employers reluctant to recruit due to fears for their service users. As the workforce body for England have noted, ‘employers may have recruitment policies or practices in place that inadvertently exclude people with criminal records creating a barrier to open recruitment … the reality is many people who have abused in positions of trust don’t tend to have criminal records. Many people who have a criminal record come from disadvantaged or marginalised backgrounds … have moved on from their past mistakes’ (Skills for Care, 2020b). Developing a Safer Recruitment Checklist focused on use of plain English in job descriptions, clear statement around those people with criminal convictions being able to apply, and the disclosure processes involved as well as sending the values of the organisation beforehand and using these values to ‘probe’ candidates at interviews (ibid).

To increase diversity there is the potential for the use of long-term interventions such as ‘culture’, ‘staff experience’ and ‘tackling discrimination’ (Charles and Ewbank, 2020) but this will take time. As, ‘hiring diverse talent isn’t enough – it’s the experience they have in the workplace that shapes whether they remain and thrive.’ (Hunt et al., 2020:5). As discussed, what the sector lacks is an approach to utilising the tools that are available to the sector and may offer the best short-term solution, with a commitment to, in tandem, focus on longer term efforts. This is through a focus on ‘legal obligations, incentives and various kinds of service and assistance to employers. Secondly, there are approaches developed within the field of vocational rehabilitation and supported employment (Frøyland et al, 2019).

Moreover, there can be an implementation gap to meet the policy intention around good work. Metrics and the funding flows can focus on these more abstract principles as opposed to singular outcomes, particularly as the research evidenced candidates stuck in meaningless placement activity in charity shops for years on end. This calls for more qualitative measures to be utilised in employment outcomes and employability funding.

There are multiple forms of disadvantage, beyond just social characteristics but also the fact that people are low paid and have less ‘control’ and are ‘at a disadvantage’ (Handscomb et al., 2022). This requires greater visibility from employability providers working with policy makers and employers to ensure that interventions can be adopted to maximise opportunities from a more engaged and diverse workforce, through better connections and conversations.

6.2.5 Innovation

Research has described ‘tantalising ‘snapshots’ of innovation’ (Bottery, 2021), examples within the literature has included the funding of driving lessons or stocking up a fridge with free food to help staff that are struggling. However, to adopt a large-scale approach may be more challenging, although the research reported here did find scope of a wider programme of innovation related to pre-employment programmes of entry hinged on areas such as quality conversations, values-based recruitment in a transparent and inclusive manner to match and recruit the ‘right’ people into the sector (but at a level of pace).

As observed not only in the previous example of job entry programmes within adult social care in Scotland and Wales, where there has been a move to shorten programmes to three days, an online course one day a week with a workbook to complete. Employers register vacancies on a portal on the website and candidates are able to apply for vacancies, ‘before, during or after attending the training course’ and it is suggested that ‘completing the course will help you to be ‘job ready’ (We Care Wales, 2022). This is an online matching approach to speed up the process and the course is focused upon key areas such as ‘communication’ and understanding of ‘safer recruitment’ practices. However, previous studies have focused on an ‘ambiguity over role clarity, with only 40 per cent of employers providing staff with formal job descriptions … provision and access to training is largely seen as the responsibility of individual providers.’ (Gilburt, 2016:30). These courses may be most beneficial as a realistic and neutral opportunity to outline role requirements before engagement with individual employer processes. However, within these programmes, there is not any criteria around employers registering with the scheme needing to have any pre-

conditioned requirements around fair work or values-based criteria, a missed opportunity and also indicating where the focus lies.

There are limited innovations particularly around enhancing entrant roles, with the 'most common type … an intermediate role between basic grade care workers and professional staff.' (Moriarty et al., 2018:20). These enhanced roles were visible in this research, beyond senior carers, with new enhanced roles trialled in Health and Social Care Partnerships around occupational therapy and care support to enable service users to live independently. This provided a significant salary increase and warrants further investigation as to the success of this approach. The focus of previous enhanced roles has usually been on slight increases in pay, given to those with increased experience, particularly when pay differentials are assessed, showing those with 'more than 5 years of experience' getting £0.12 per hour more on average. (Anderson et al., 2021:1998).

This is similar to previous research in 2016, which found 'few examples of truly innovative roles. The most notable examples are care navigators and community facilitators, enablers or link workers.' (Gilburt, 2016:3). What was evidenced went beyond this information sharing type roles, into more enablers of care, approaches and these were in early development or pilot stages and may need to be tested and funded on a recurring basis before they could be assessed. Change takes time, but within a sector in a perpetual crisis situation, opportunities need to be maximised. As has been observed, there is a need to, 'embrace disruption and external challenges as opportunities for innovation to overcome barriers and change pace. Invest in improvement capacity and build local capability to test, spread and scale up new ways. Whenever possible look to co-produce solutions with citizens and with the workforce.' (Hendry et al., 2021:9).

Some thought that using volunteers may offer a solution, either by those with some extra time on their hands to do some part-time work or volunteering to offer a route into the sector. This perception is not widely supported in the literature and may be prone to challenge, as ‘volunteering was often only one part of individuals’ lives and that their capacity to provide extensive amounts of support were limited (Moriarty et al., 2018:22). The authors note that linking volunteering work to befriending type services to clients, whilst expecting them to undertake roles around personal care and assessment was not deemed suitable. However, the same authors, did recognise the benefit for those, ‘who had experienced redundancy or long-term illness and to help young people build up work experience. However, caution was advised against assuming that substantial numbers of people could be recruited this way’ (ibid:23).

6.2.6 Barriers

Research has focused upon the role of employability programmes that can support inclusion of disadvantaged groups (McQuaid and Lindsay, 2005), so often missed with a focus ‘on individual-centred, supply-side solutions’ (ibid). This research found a similar focus in current approaches. The sector does not have the capacity or will to deliver more developmental approaches that can meet the needs of candidates and the sector, priority is moving to quick entry models. Where there were more focused examples, this related to use within NHS Scotland, such as Project Search, which gives internships to young people with learning disabilities with a focus on practical work experience (NHS Scotland, 2022), supporting those with two intersectional barriers that were apparent in the research.

This links to wider comments from participants around a feeling that the sector is in a ‘race to the bottom’, without the space and capacity to deliver on longer-term change

programmes. As has been described in previous research, providers can have a more ‘active’ role within the sector, through ‘intermediary’ or ‘demand-led’ programmes that can work on an individual basis with employers ‘to meet their exact recruitment needs, train programme participants and then support them whilst in the job, to help them stay there.’ (Nathan, 2001:22). This requires a cultural shift in all providers and pathways to ensure that the connections are there.

As noted by providers, the current approach to push individuals to sectors such as adult social care, due to high numbers of vacancies is unsustainable and adds to the perception of employers around the ineffectiveness of employability routes. As other researchers have noted, it would be ‘more fruitful’ to have a focus on relationships amongst key stakeholders such as employers and intermediaries (Ingold and Valizade, 2017 and Gore, 2005). The literature review noted that men, black and minority ethnic communities, young and disabled workers were particularly underrepresented in the sector. Like previous data (SSSC, 2022) the findings indicated a predominantly female workforce and comments indicating an ageing female workforce. From discussions it was felt that a younger cohort was growing in the sector, some pointing to workforce data whilst others from their experiences. That said, there were some concerns about the perception of younger workers. This finding chimes with Hebson et al’s. (2015:319) contention that ‘constricting cultural and financial limits’ pushed people into the sector, such that younger people see the sector as a ‘short-term option’ (Butler et al., 2014). Employers noted a concern around the loss of experience due to a ‘drop off’ experienced in a more mature workforce. However, this shows a need for a solution- based focus, as per so much of the sectors predicament, there is a sense that the sector is bogged down and unable to see the bigger picture or consider more transformational ideas. And policy intent still notes,

key vulnerabilities in age, where further work was required due to ‘poorer’ outcomes for 16–24-year-olds (Scottish Government, 2019b).

To determine how connected employers are to employability pathways including those that engage underrepresented entrants, the findings demonstrate that the sector has been affected by limited work experience that was available due to the pandemic. Focus on approach, has been on supply-side, online quick entry programmes linked to terms such as ‘rapid’ recruitment that has grown in relation to the sector’s labour supply concerns. There was concern in the discussion that these programmes do not meet the needs of individuals with additional support needs and those that are disadvantaged within recruitment, particularly those with disabilities but also intersectional factors as well such as younger people with disabilities who risk failing without support. Whereas employability providers have focused upon some more ‘traditional’ models of classroom activity, placement activity and offers of a guaranteed interview, it was thought that placement elements can be extended in duration and paid via funding bodies. Subsidies can also assist for those furthest from work.

There is learning from other public sector bodies around supported placements (Project Search) as well as reduced entry requirements (GFiE programme delivered by the Civil Service), can be developed for use in adult social care. Policy makers have focused increasingly on young people and the findings showed a visible increase in younger staff. Giving a realistic view of expectations as well as integrating staff with retention efforts will also be important as there were concerns around a drop-off in experience as well the motivations of newer cohorts entering the workforce.

The research found that the majority of individuals that have entered into adult social care have entered via direct recruitment. There is a role for pre-employability

programmes to give more training on the challenging sides of the job, including communication and empathy for the residents and linked to realistic job profiles of the sector. Innovation is more limited, rather than innovation, the sector has utilised adaptive approaches, whether it be developing volunteer pathways as a way to benefit from lived experience or using indirect routes to gain care experience.

Values-based recruitment can also offer a distinct approach for employability within the adult social care sector and tools such as ‘Question of Care’ were referenced. Currently the focus is on values-based recruitment as rhetoric rather than a reality beyond interviews and cannot be this tokenistic element if it is to be part of an employability strategy to bring in those staff that have never considered the sector before. Especially as employers can resort to qualifications and experience of care as default assessment criteria.

6.3 Capacity to improve recruitment processes

6.3.1 Introduction

Within the literature review, common methods to recruitment focused upon using job sites, word of mouth and social media, with word of mouth particularly prominent, with a lesser role for the local press and Jobcentre Plus in (Ekosgen, 2013). As discussed in the findings, even with the methods outlined there was the potential to do more, particularly through interactive processes and digital technologies. There are long standing concerns around methods used to recruit into adult social care being ‘outdated’ (Bunning, 2004) with widespread evidence of the use of application form, interviews and references, referenced as the ‘classic trio’ (Cook, 1993). There are attempts to modernise aspects, most notably the move to online interviews during the

pandemic and online applications, it is a traditional sector in terms of recruitment. This can be due to regulation particularly the need for safer recruitment practices.

The findings indicate that there are distinct approaches from head office-based recruitment teams to smaller teams with one individual being responsible for the majority of HR processes. The local manager usually takes up a lot of the selection process from interview onwards. In some smaller employers, it is the local manager/site manager that does this, with support from deputies and senior carers.

As noted previously, it is not only recruitment that is a challenge within the sector, but also retention of staff particularly in the key initial stages of the process. This invariably links to factors such as pay, as recent research with workers has shown that those earning lower salaries had increased confidence in finding a new job role within similar low paid work environments. (Handscomb et al., 2022).

The research found that the common complaints of recruiters within the sector were similar to that observed by others such as Bunting (2020). Many used exit interviews as the most common diagnostic tool to understand why someone is leaving, although it was noted that as a tool to identify the question of ‘why’ these are not always the best. For example, in a sector such as adult social care, it can be the line manager that is doing the interview and there may be an unwillingness to criticise the same management due to a fear of response or feelings of ‘goodwill’ to an employer who may have given leaving gifts and thus it is difficult practically to disclose the real reasons for leaving, whilst considering a need for references and ‘wish not to burn bridges’ (Taylor, 2010:341). Thus, a common belief held that individuals leave the sector because they did not have a real understanding of the role on joining or for reasons of pay, could be assumed or mask other concerns.

In the HR literature more widely, there have been concerns around job descriptions, as ‘employees may be reluctant to undertake tasks not actually specified’ (Evans, 2001:16) of them. The same author also questions the need for a person specification. Within adult social care, there is a need to be clearer around job expectations and the job description needs to flesh out what the job role requirements are in clear and simple language. There is also a challenge around the costs of ‘unwanted turnover’ (Griffeth and Hom, 2001). Replacement costs can consist of ‘Job Advertisements’. ‘Personal Recruitment’, Administrative Processing’, ‘Entrance Interviews’, ‘Applicant Selection’ and ‘Testing’ (ibid). There may be a tendency to reduce costs during these processes, which in turn creates a self-fulfilling prophecy. Particularly when you review findings that note a financially restrictive environment and attempts to cut costs in areas such as induction, when these early interventions by employers are key parts of the ’formal orientation, on the job training’ (Griffeth and Hom, 2001). Evans also discussed the costs of turnover and added not just costs in the recruitment processes but also the time taken and other costs such as payroll, pension and loss of skills and experience including ‘salary costs of new staff during the learning period when they may be less productive.’ (Evans, 2001:107). Furthermore, smaller employers are more restricted in capacity, thus the impact of turnover can be more damaging for them. As many of the smaller organisations do not recruit HR staff. This point was observed by Rayner and Howe-Walsh, (2016) who note that SMEs are ‘forever cost-conscious’ and ‘tend not to directly employ HR assistance until it is really needed.’ (p.45). Sharing HR posts as well as group training in the preliminary stages may be a good approach to tackle this issue, however this may require constructive discussions around sensitivity and privacy as the model in Scotland is based upon competitive tendering for services. Another key factor that can be used is employers using ‘job enrichment’ through the

service provided to vulnerable members of society (Griffeth and Hom, 2001). Recent research with workers has highlighted the need for ‘flexibility’, a ‘dislike’ for ‘repetitive jobs’, ‘autonomy’ and ‘purpose’ and ‘meaning’ in job roles (Handscomb et al., 2022).

However, whilst this is a positive at the same time, some of the less salutary aspect of the role need to be outlined, through the use of realistic job previews and rewards. Other options employers have to mitigate turnover have included overtime, temporary workers, technological innovation, retaining workers and new hires (Lussier and Hendon, 2020).

6.3.2 Innovation

In terms of examples of innovation at the recruitment stage, as noted the sector had a traditional mindset and a standardised offering. Where there were opportunities for innovation this related to a need for more collaboration and realistic discussion, particularly at the pre-employment stage.

Realistic Job Previews

Breaugh (1983, 2008) has done a lot of research and work around the effectiveness of Realistic Job Previews (RJP), with a particular focus on their role in reducing turnover, by having better informed workers in the workplace in the first place. However, the same author does note, that realistic job previews still have more to do in discussing specific ‘organizational matters’ and ‘organizational politics’ (ibid). RJPs have been defined as, ‘a technique that presents job applicants with a “realistic” view of what they should expect from the organization’ (Baur et al., 2014:201). Often workers will experience ‘disillusionment’ when they feel the job is misrepresented or they are not given a true reflection of the job role. This has direct relevance to adult

social care, due to the continual comments made about people leaving the role as it was not for them or what they expected. Others have noted that these, can involve ‘case studies of employees and their work, the chance to ‘shadow’ someone at work, job sampling and videos, the aim being to enable applicants’ expectations to be become more realistic.’ (Gold and Mortimer, 2017:170). This process will lose staff once they realise the requirements, it is envisaged that the loss is at an early stage to minimise the costs mentioned and those that stay will have increased commitment and in turn job performance. As RJPs carry out a ‘review of all of the tasks and requirements of the job, both good and bad’ (Lussier and Hendon, 2020:123). This process can be linked to a skills requirement in terms of what is required such as ‘compassion, empathy, patience…listening … writing’ (Care to Care, 2022). RJPs offer a route as ‘some employers with hard-to-fill vacancies associated with ‘lower-level’ occupations reported entry-level criteria largely based on personal characteristics’ (Devins and Hogarth, 2006:58). Employers from the findings in the main were seeking behaviours and attributes at the point of entry, as training is given once employed. There is a qualification and registration requirement by the regulator, but employers can support individuals in achieving these, although this does take time. It is understandable for the sector to feel that they have to promote the sector when it has faced criticism with many commenting in the interviews about negative media coverage. This includes contextual factors such as residential care homes having the most deaths of any setting during Covid-19 (Bell et al., 2020). However, by not giving a balanced and transparent perspective from the outset and responding early to concerns, this can create false expectations on the part of potential employees.

6.3.3 Commissioning

Pay has been extensively discussed as a barrier to entry and the challenges for providers to go beyond the living wage due to funding challenges. It is apt to describe this issue as a 'wicked' problem (Hendry et al., 2021). However, rewards and compensation go beyond direct pay to include the fringe and non-pay awards that can be given. As noted by a local authority there was a significant uplift in interest in care roles when the pay increase was combined with fringe benefits such as gym memberships and wellbeing support. As noted from surveys some of the non-pay requests that have been made are around supervision and time with the manager. This points to a need to accept the capacity challenges for staff and managers who are resourced in low-cost business models and do not have the time, if time can be released, this can be an impactful intervention in the non-pay reward element.

Another key challenge was commissioning not just in respect to pay but beyond, in terms of the annual budget cycles, of Health and Social Care Partnerships and public bodies, which restricts providers in the ability to plan. These budget cycles, have the intended effect of limiting efforts on longer term planning, not only in workforce planning but also in efforts for 'progressive' policies as noted by one employer, due to the lack of certainty about funding, that plays out as an annual event, meaning providers focus upon viability. Beyond the potential consequences on delivery of contracts without the required staffing, it seems that providers are always having to keep an eye over their shoulder, due to a level of uncertainty of contracts, funding pressures and lack of communication. In this environment and context it is seen as difficult to develop extensive programmes for recruitment with longer term outcomes.

6.3.4 Policy Context

As noted by research there is a clear move to a national care service, with projections of this being in place by 2026 (Scottish Government, 2022a). These discussions can be the reason why the sector is more constrained to act as it is unclear as to how this new service would look and the level of intervention and funding that will flow from government. However, this is a risky model when there are so many current workforce challenges. Moreover, the HR capacity within the sector is heavily constrained and there are no examples of pooled HR resources from employers. This limited collaboration or proactiveness amongst providers can increase vacancy and turnover rates and there may need to be a change (arguably only from a national intervention) where recruitment becomes an urgent programme of activity and delivery.

However, it would be wrong to say that providers are just letting their organisations fail, but what invariably happens is that some of the improved recruitment processes are thwarted due to a need for bodies. They do not withstand ‘short term pain’ and focus on rapid recruitment or ‘numbers’. The other issue is the length of time it would take to go through the longer-term approach of ‘analyzing the job, recruiting people, selecting employees, training, and working through a learning curve to get them capable of doing the work’ (Lussier and Hendon, 2020:103). The use of agency staff may be a quicker solution and there is evidence of some growth within adult social care. However as noted by an individual working within the sector, there can be workplace conflict between agency and non-agency staff and arguably it is an unsustainable and a more costly model to rely on agency staff to fill workforce gaps.

There is a role for greater leadership around the strategy and approach of organisations. This may require a need to profile HR departments and individual managers so there is a clear line in responsibilities.

This approach of reviewing practices may have to extend to the use of Jobcentres. Just as employers and policy makers had mixed views of employability providers, this was also the case in terms of Jobcentres, perhaps reflecting the 'unfavourable' comments around the 'service provided' (Devins and Hogarth, 2006). The other approach that was highlighted was that of values-based recruitment. As a common approach that offers potential for the sector, particularly if combined with processes pre-interview and the commitment is sustained beyond interviews. However there have been issues observed when using 'personality testing' tools, being 'considered ethically problematic given its potential to contribute to social engineering of the firm by promoting cloning in selection decisions' (Wilton, 2019:188), thus it has to be applied in a fair and objective manner. There have also been concerns in general around 'digital expansion', without 'addressing the digital divide' (Lindsay, 2006:142) faced by many jobseekers. There has been a plethora of reviews on technology, from the Scottish Executive (2006) to more recently Scottish Care (2020) but these have focused upon the role of IT within patient care as opposed to recruitment.

6.3.4.1 Safer Recruitment

Safer Recruitment processes are to ensure robust processes are in place for safeguarding purposes and is a key policy direction for recruitment into the sector. Although the policy intent may have been lost as many employers point to these guidelines as a barrier to innovate. For example, the need for two full references was mentioned by employers. The guidance states the need for a minimum of two

‘appropriate and relevant references, one of which should be from the current or most recent employer (if they have been previously employed). If this is not possible you should be satisfied there is a good reason for this and record why in the personnel file.’ (Care Inspectorate, 2016:31). Giving the example of situations when they may have no work experience or have been out of the workplace for a significant period of time, it is suggested that it is important to show a ‘proportionate and responsible risk based response from the provider (ibid:32). This risk-based approach may be the challenge, when leaving this to interpretation. For example, good practice around using service users in the recruitment stages, the guidance notes of being cognisance of potential safeguarding issues during a stage that is pre-PVG checking, whilst also needing to ensure inclusive practices are followed including by service users (Care Inspectorate, 2016), which invariably may mean this option is not used, despite it being raised by a number as a good way to recruit and furnish the values based approach whilst improving the quality of the recruitment approach from a ‘bureaucratic’ exercise.

That is the difficulty when guidance has been left open for employers, they may tend to follow a more prescriptive form. The issue is that in a recruitment market with lower availability, without flexibility, you miss good candidates.

Combined with safer recruitment processes, the requirement for registrants to have a qualification at SCQF at level 6 was noted by one policy maker as a reason some were choosing to leave the sector. An employer noted that they were able to, with individualised support and mentoring, help an employee that was concerned stay in work and complete the qualification. However, an interesting observation was that this member of staff was not able to get the same support from a sister organisation. Thus, strengthening earlier points about the supporting role of the manager or organisational culture to facilitate these processes.

6.3.5 Diversity and Culture

On the one hand some employees who had entered the sector noted it was ‘easy’ to get into, a point highlighted by authors such as Bloodworth (2019) and Toynbee (2003) who went undercover to get jobs in the sector. However, at the same time, the findings indicate that there are sectors of the workforce that are underrepresented, particularly men, minority ethnic workers and people with a disability with the perceptions of younger workers being problematic for the sector. It is undeniable that the job is challenging and requires significant amounts of resilience and empathy, when working with vulnerable individuals, ‘what never wears off is the shock of the old … most of them in pain from various sores on their legs, in misery and despair, many wishing to die – strikes you through the heart.’ (Toynbee, 2003:186-187). The author could be argued to be amplifying the challenges, but there are concerns around the challenging behaviour from service users as mentioned from individuals working in the sector, which may come as a shock for some, as well as demanding tasks. However, there remains a question as to whether some of the underrepresented groups have more limited resilience. This was not apparent from the findings, there were comments from interviewees around some cultural groups having more family centred values making them potentially good carers. Arguably, then, the issues relate to the ability of the sector to be accessible, inclusive and engage with key underrepresented groups. Moreover, it is important that is not just the role of bodies such as SSSC but also the role of employers to ensure they can map key trends in diversity and ensure their workforce reflects these trends. This could be a focus for improvement and can act as a catalyst for change. Suggestions mentioned in the research included the use of champions from underrepresented groups to promote the sector. Although invariably the first task would be increases in representation.

There is also the issue of status of the sector along with the financial package provided which restricts entry. An employability provider called for a shift in transparency around ‘better off calculations’ for jobseekers. This view is similar to others who noted calculations along with ‘budgeting and welfare rights advice’ as good interventions along with job start financial support. (One Parent Families, 2021). In terms of financial rewards Toynbee (2003) noted the unfairness of it, noting how hard the carers worked and the ‘objective rewards’ did not meet ‘feelings of gratitude’, a point highlighted by many interviewees.

The discussion has shown in relation to the capacity of employers to offer improved recruitment processes, it is limited due to a number of factors. ‘Safer Recruitment’ was referenced as one by many, where it has been termed a guidance document it has been used in prescriptive ways, limiting efforts for change. Combined with this was a lack of data which was impacting organisational ability to drive change. This is in two ways, the lack of data on diversity and thus understanding on underrepresentation but also in understanding the costs expanded to recruit. The use of geographical profiling of services, may be a good option as discussed to map local community profiles in moves to take a strategic approach to recruitment. Although longer-term planning is not prioritised due to short term challenges and capacity deficits. The capacity of the sector is limited in HR processes. HR functions tend to be small in the majority of cases and many processes are delegated to over stretched recruiting managers. Other approaches such as shared HR staff and processes may need to be considered. There may be a role for national intervention to provide additional capacity and resource to facilitate entrants to the sector. A reluctance to invest may be related to a sense of awaiting the outcomes of discussions towards a national care service,

however this is risky whilst there is continuing degradation in operational delivery and recruitment.

Pre-employment meaningful conversations and the use of Realistic Job previews can make a difference, with the business case for realistic job previews made in better staff retention. These do not just need to be via descriptive job descriptions. But there are other means such as work shadowing, blogs and stories. With work shadowing, a particular option as the sector opens up after the pandemic. There was distance between employers and policy makers versus employability providers in relation to application forms and qualifications. The language may not be inclusive in recruitment materials and values should be prioritised in a sector that has admitted it can train and support those that are new into the sector. There is a plethora of job sites, mainly segmented for organisations by type. Whereas when different organisation types advertise on the same site, this can show the disparity in pay. Social media is important and is growing in importance, there is potential to bring ‘fun’ into recruitment by using additional platforms. Also, there is the opportunity of using mobile devices in areas such as apps for employee referral schemes.

Employability providers note the need to simplify the application form process and reduce the need for non-relevant qualifications. Although some employers have tightened up the need for application forms further due to concerns around literacy levels in applicants.

Chapter 7: Conclusion

This chapter now outlines what the research has achieved and how the research aim and objectives have been addressed.

7.1 Research Aim

The primary aim of this research was to review employability interventions that are used to increase entrants into the adult social care sector in Scotland. The means to achieve this aim was via practice-based research with three interlinking objectives. This allowed the project to provide an assessment of the situation facing the sector during a global pandemic.

The research finds a challenged sector, facing numerous barriers to entry focused upon pay, terms and conditions and status, further heightened by the pandemic, with policy mismatch and limited employability interventions across social care. Key enablers related to meaningful pre-employment conversations, matching of candidates, the use of organizational culture, the role of the manager and short-term incentives by public bodies such as the Scottish Government and SSSC. The research assessed three key objectives, which are now considered.

7.2 Research Objective 1: To what extent is there a fair work offer within adult social care employers in Scotland?

As per the literature review, the sector faces major challenges in terms of recruitment, with particular issues such as pay and the status of care work. Moreover, the challenges facing the sector are exacerbated by the impact of the Covid pandemic.

From the research with stakeholders there was a recognition of the need for more money to fund pay and practices that can increase candidate recruitment, particularly due to a lower volume of applicants to the sector. This has led to a situation where providers found themselves in what was described as a ‘race to the bottom.’ Consequently, there was a focus on ‘numbers’ as opposed to quality processes due to the competitive landscape within the sector. The sector has a short-term focus, limiting long term strategies and planning.

At the organisational level, the role of the manager was important in shaping the experience of individuals within social care, particularly when the workforce can be fragmented and not have regular interaction with other staff particularly within care at home providers. Participants also referenced the benefits of face-to-face interaction with their manager, whilst a policy maker referenced surveys noting time with manager as more important than pay. Additional enablers contained online processes for what were previously paper or face-to-face based such as application forms and interviews. One factor that the literature review did not highlight was that the job for most was viewed as secure and a stable career option, if not a long-term desired career option.

There was good understanding of fair work by most policy makers due to their more direct involvement. However, there was low awareness or assumptions on its meaning across all other groups, including some employers, who were unaware of the tools that can be used to assess whether they are adhering to fair work principles. Where there was a noticeable link between the fair work principles to employment and potential opportunities within the recruitment offer, this related to principles of opportunity and respect. However, the main challenges expressed to achieve fair work

were around money for enhancements, which means it is difficult for the sector to adopt fair work principles. Any interventions in this area, as well as increasing profile and awareness, will have to focus upon contractual processes in commissioning as well as increased regulation and legislation within this area. Commissioning as it currently stands can have an adverse impact on providers ability to plan, through annual processes and is also restrictive to what providers have described as their attempts for more 'progressive' policies as they are in a continual cycle to ensure funding and deliver services.

7.3 Research Objective 2: How connected are adult social care employers with employability pathways that engage underrepresented entrants?

A key finding from the research about connections in the employability pathways was the ineffectual relationships, with difficulties that employability providers have found in accessing the adult social care sector. Beyond the difficulties to facilitate work experience there are difficulties in the perception from employers and policy makers of employability routes as a driver for increased supply within the sector due to low volumes and the levels of candidate support needs of those coming through these routes.

Bredgaard's (2015) discussion of common approaches to active labour market policies were utilised to assess approaches to employability, and it was thought that there is a distinct approach becoming commonplace in adult social care, focused on quick job entry assistance and shorter programmes as seen via the 6-week online programmes in Scotland via the College Development Network and Skills Boost courses, which includes health and social care. In addition, a more 'traditional' model related to labour market training like sector-based work academies, whilst thought to be a good test of candidates' motivation for the sector, its short placement length often meant that it did

not give a candidate a sufficient understanding of the sector and training such as manual handling can be prioritised over key tasks such as client interaction in courses. There was a feeling that employability programmes could be adapted to meet the needs of those furthest from the jobs market. There were some comments about socially constituted organisations being more helpful in these endeavors.

A focus on new quick entry programmes is moving further away from supporting those with higher level needs and is thus problematic. These quicker entry models are ‘light touch’ approaches to get people into the sector when the sector has been found to be an easy sector to get into for job ready individuals. Furthermore, these approaches do not stipulate any rules around fair work principles or value-based processes. The No One Left Behind strategy in Scotland, may offer increased focus regarding individuals with multiple needs particularly through person-centred approaches, however it is too early to examine this approach to adult social care, and it will still not cover mindset or implicit bias during the recruiting stage that the research demonstrates is present. Thus, there are real risks, that the combined ineffectual relationship between employers and providers along with the lack of diversity focus, leads to the extension of underrepresentation.

This is combined with a fundamental mismatch between employers and employability providers. Whereas some employers may have inherent biases against inducting younger people into the sector, when these groups are targeted via employability models and providers. Additionally, the sector more widely has an inherent barrier in thinking around the viability of disabled candidates being able to undertake the role of a care worker. A model focused on subsidies and job carving may allude to historic models of disability support, however, these interventions may offer more pragmatic solutions.

Employability providers have not had a strong presence within the sector. There were several factors that influenced this situation, from historical anecdotes of candidates that failed and were unsuitable, inappropriate referrals and burdensome administration. A multitude of factors heightened during a pandemic that has limited the opportunities for real life work experience. There was also discussion of enhanced roles, and there were examples of practice in individual areas which currently are in initial stages or are limited and small scale but can be investigated as routes to improve the employment experience across the sector in time.

Values-based recruitment is a route that can offer a unique model for the sector, linked to the higher importance of values over qualifications at entry stage. Although obstacles to this come from recruiting approaches adopted, demonstrating a prioritisation for experience and qualifications from employers. Values based recruitment as a model is attuned to the sector and is something that can be leveraged more widely, but the principles need to start before interviews, with meaningful commitment including actively engaging those that have never considered a role in adult social care before. More generally, innovation was limited in the sector, it being more akin to adaptation being applied to offer alternative routes into the sector, either using volunteering or non-care roles as a route into the sector. With examples of individuals using roles as stewards, catering, and domestic assistants as a route into the sector as well as examples of individuals using the sector for experience on a pathway to be a doctor, nurse as well as work placement exposure for sport students within further education.

Due to the number of underrepresented groups, there is a need for diversity management and a focus upon inclusive practices and understanding of unconscious and implicit biases that may hold within the sector, increased representation may offer

opportunities for roles such as champions, whilst practices such as clearer and inclusive information, guaranteed interviews and increased support can also help. Fairness and transparency will need to be embedded into a candidate's journeys within the sector, with a realization that the candidate journey starts from initial interest and is a longer-term focus.

There was a perspective of a missing middle, this middle incorporates employability providers, educational paths, and earlier intervention to promote the sector. However, as a participant also noted, this missing element includes the 'passion,' 'energy,' 'selling it actively' and 'myth busting' thus the importance of meaningful and quality conversations pre-employment between the employer and jobseeker. This will require more focused work by the sector.

7.4 Research Objective 3: What is the capacity available to adult social care employers to offer improved recruitment processes to engage entrants into the sector?

The research also looked at the capacity within the sector to enhance recruitment processes. The key methods utilized now are focused upon 'word of mouth,' 'social media – namely 'Facebook'' and prominent job sites. Despite there being limited evidence of it in the literature review, interestingly, individuals working in the sector, also noted the use of telephone interviewing during the Covid pandemic, highlighting again evidence of the sectors rudimentary approach to recruitment. Due to the competitive landscape, some providers have looked at differential practices, ranging from the use of leaflets, open days, radio advertising, Spotify, decal on vehicles and banners outside sites. Social media can be leveraged further particularly with newer platforms. However, there was limited understanding of data in relation to recruitment success, beyond areas such as number of vacancies, number of applicants and

conversion into recruitment. Arguably, organisations are not making the best use of available labour market data and geographical profiling and labour market statistics can be utilized to outline underrepresented groups and be used as a basis for positive action measures.

Safer recruitment processes adopted by the sector, can be interpreted to limit continuous improvement, which it is argued was not the policy intent, although providers may also be using guidance as an excuse not to innovate and change practices in a challenged environment which requires more transformational leadership. The capacity of providers is limited, there is not the space to fund HR processes and improvement as any money that moves to these efforts is seen as being moved away from direct client care, as with earlier comments on the priority of personalisation in policy making and guidance. Further there needs to be a distribution of tasks between transactional (HR-led) and value-added (Line Manager-led). Due to the lack of understanding that was raised by interviewees from candidates applying for the job role, there was a gap to utilize realistic job previews beyond just more realistic job descriptions. Digital technology was not maximized as the sector is quite traditional in approach, with some linking this to restrictive guidance on recruitment as well as the capacity and time required to deliver change. Greater practice-based guidance, focused on concepts of fairness, innovation and inclusion and organizational values can assist with recruiting workers. Recruitment and HR, however, has not received a key priority, due to a focus on investments linked to client care and on low-cost models. Management will need to utilize all sources available, including leveraging a positive organisational culture and quality conversations if it is to meet the workforce challenges presented.

7.5 Recommendations

As a practice-based piece of applied research it has sought to consider the challenges facing social care organisations in increasing entrants to the sector. Based on the findings from the research there are key recommendations, which are detailed below:

- **Recruitment** should align to **retention,** with the candidate journey starting at the earliest point and focused upon recruitment for values to encourage wider pools of candidate. Reward and recognition factors primarily encompass pay, but non-pay factors will also assist in these efforts. **Realistic Job Previews** are useful for adult social care along with meaningful pre-employment conversations with candidates. Communication and engagement will be key, the sector needs to highlight the 'social' in social care.

- The role of the **manager** is critical in recruitment efforts, tied to a supportive organisational culture. There is a need for the delegation of duties to make the distinction between transactional and focusing upon value-added tasks focused upon candidate engagement and induction carried out by managers. Smaller organisations need to consider opportunities for greater collaboration and pooling of resources due to capacity challenges.

- The **Fair Work principles** should be fundamental to contractual requirements set by commissioners. Stronger regulation and financial support into the sector can drive further enhancements for contracted providers. Bodies that promote fair work and the tools for assessing fair work, require to have greater engagement with employers, employability providers and staff.

- New **Employability approaches,** particularly for those with additional support needs or barriers entering the adult social care sector should be used, linked to inclusive recruitment approaches by employers. For approaches to be successful, there requires to be increased positive engagement between employers and employability providers, to increase sustainable routes into the sector for underrepresented entrants.

- There is a need for greater **data on diversity** within organisations as a catalyst for increased efforts and positive action derived from improved planning processes. Local community mapping can also help in profiling workforce needs for future workforce strategies. Beyond data, policy makers need to consider **guidance** that is more contextual when advocating person centred approaches or personalisation in engagement with clients, so that underrepresentation is not exacerbated.

- **Resources**, there is a capacity gap in staff resources to sufficiently engage and increase the profile of the sector which includes early intervention, due to a rudimentary recruitment approach within the sector. There is a gap for specialist staff focused on signposting to, promoting and increasing interest in the adult social care sector within Scotland, integrated within education, jobcentres and employability partner bodies, with a key role for policy makers including within the Scottish Government and SSSC.

7.6 Suggestions for future research

Based on the findings there are a number of areas that would benefit from further research. This includes policy solutions with the necessary funding to trial entrant level roles and innovative approaches with increased pay and responsibility. There is evidence of some practice such as enhanced roles and digital developments, but these are in design stages and require to be funded at scale to offer increased routes, thus further research on these approaches is welcome.

There are further research gaps, such as a need to assess whether younger workers, can be attracted into the sector, the drivers for this and their longer-term career strategies. More focused research with young people who have an interest in the sector would be useful.

There is also further research within HR practices that can assist the sector and is a gap. One focused upon assessment of collaborative approaches amongst providers in recruitment approaches and the opportunities that are present for this particularly for smaller organisations. There is also the same possibility of assessing the scope for collaboration amongst individuals within organisations towards collective models of employee involvement and voice in organisational decision making.

Further research would also benefit from a review of organisations that adopt a more values-focused approach based on fairness and justice with inclusive practices and the outcomes that are possible in terms of recruitment and retention from this for adult social care.

7.7 Contribution to the literature

This research has contributed to the literature within the adult social care sector, adding insights from a multi-stakeholder perspective. Fair work as a conceptual focus requires greater awareness raising, tied to best practice commissioning and longer-term support for progressive policies to increase entrants, which is currently seen as an extra or good to have and not fundamental in recruitment. Funding and legislative drivers will also be key areas that require Scottish Government input to ensure that the sector can lift itself out of its perpetual fate. There is a dearth of literature assessing employability within adult social care. This primary research has found a sector facing many challenges and not using the opportunities from increased employability interventions. This related to capacity, funding and time due to continual challenges with a continual gap around meaningful conversations at the pre-employment stage, with much of the focus being on getting ‘numbers’ into the organisation. There is also a mismatch between employability providers on one side and employers and policy makers on the other, due to a level of scepticism around the understanding and ability to deliver increased entrants to the sector via employability models, due partly to the candidate profile on these programmes as well as past experience. The sector has implicit biases against particular groups, those targeted by employability providers such as disabled and younger workers. This comes at a time when the focus on models has been on quick job entry via online matching with employers, more attuned to job ready candidates and less to those with additional needs.

7.8 Contribution to practice

The research has been practice-based and focused on an ongoing issue within the sector. Employers have gained success from approaches that offer enhancements whether in rewards or enhanced roles with greater pay, along with a targeted and long-term approach to their recruitment and HR practices centred around a supportive organisational culture and engaged manager. However, this is difficult within a sector facing short-term acute challenges, discussions of a NCS have potentially led to non-development of activity due to a wait for direction and funding from national government. Although providers face acute challenge in the wait, especially when there is degradation in services due to a reduced workforce. There were a variety of practices observed including use of organisational culture, recruitment approaches, manager engagement and indirect routes into the sector, although this was in a piecemeal fashion with a lack of coordination. Capacity hinders change, although if there was a clearer picture of the data including costs of recruitment, there may be a clearer emphasis on the need for change based on a clearer workforce strategy. Whereas uncoordinated and continual rushes to gain candidates in a competitive pool misses the mark and is a factor in lowering standards, with discussion of a ‘race to the bottom’ and degradation in quality.

The research noted practice-based solutions that can assist, realistic job previews beyond job descriptions, such as the use of short videos and work shadowing to improve understanding and retention, when combined with appreciation of the traditions and stories within an organisation along with fairer and inclusive recruitment practices. Employers will have to be more visible in employability networks and centres with a committal to values-based recruitment approaches. The pandemic has

increased digital technology, which will likely continue beyond the pandemic, in a blended approach and can be expanded to include increased social media and mobile technology. Practice showed a move to quick entry models, there is dubiety to the value these ‘light touch’ models provide, as candidates mostly commonly apply direct, and these models do not assist jobseekers furthest from employment.

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APPENDICES

Appendix 1 - Interview Schedule Policy Makers/Key Stakeholders

Introduction

- Explanation of research (Purpose) conducted as part of Professional Doctorate, interest in this subject area.
- Explanation of process – voluntary participation, will be asking questions within discussion areas and may prompt to gain further insight and to benefit from your expertise.
- Will be using an audiotape so that I can better remember what you have said, reiterate that everything is confidential to participants and no names will be used in the final research study.

Introduction: Tell me what your current role is and how long you have been doing this role.

PART 1

To what extent is there a fair work offer within adult social care employers in Scotland?

1.1 What has been your experience of recruitment of or placement of individuals into adult social care settings within the last year?

1.2 What has been the main barriers that you have experienced?

1.3 How well do you feel that the sector has been able to overcome these barriers?

1.4 From your experience, what has been the main enablers that have assisted the sector?

1.5 What is your understanding of a fair work offer within adult social care employment?

1.6 How confident are you that there is a fair work offer within adult social care employment?

1.7 What are the barriers, if any, to overcome to ensure a fair work offer is in place within adult social care employment?

1.8 What more can be done to ensure that employers are able to offer a fair work offer within adult social care employment in Scotland?

PART 2

How connected are adult social care employers with employability pathways that engage underrepresented entrants?

2.1 What have been good practice examples that you have experienced in recruiting individuals into the adult social care sector?

2.2. Why do you feel that these are good examples?

2.3 How innovative do you feel these approaches are and why?

2.4 What approaches have you experienced that have not worked well?

2.5 Why do you think these approaches have not worked well?

2.6 Who are underrepresented groups within recruitment into adult social care?

2.7 How effective have employability approaches been in engaging underrepresented groups?

2.8 What more can be done to engage with underrepresented groups by employers?

PART 3

What is the capacity available to adult social care employers to offer improved recruitment processes to engage entrants into the sector?

3.1 What are the main recruitment processes that you are aware of, to recruit into adult social care?

3.2 How effective do you feel these recruitment processes are?

3.3 How can the current recruitment processes be improved?

3.4 What examples of good practice have you seen in recruitment within adult social care?

3.5 What more can be done during the recruitment stage to recruit underrepresented workers?

3.6 Is there anything else that you would like to add?

Conclusion - Reiterate the aims of the research, confidential, voluntary.

- Next steps – transcribe the audiotape and if you wish to view the transcript once transcribed you are able to request this.

Thank you for your time.

Appendix 2 – Interview Schedule Employers/Employability Providers

Introduction

- Explanation of research (Purpose) conducted as part of Professional Doctorate, interest in this subject area.
- Explanation of process – voluntary participation, will be asking questions within discussion areas and may prompt to gain further insight and to benefit from your expertise.
- Will be using an audiotape so that I can better remember what you have said, reiterate that everything is confidential to participants and no names will be used in the final research study.

Introduction: Tell me what your current role is and how long you have been doing this role.

PART 1

1. To what extent is there a fair work offer within adult social care employers in Scotland?

1.1 What has been your experience of recruitment or placement of individuals into adult social care within the last year?

1.2 What has been the main barriers that you have experienced?

1.3 How well do you feel that you have been able to overcome these barriers?

1.4 What has been the main enablers that have assisted you?

1.5 What is your understanding of a fair work offer within adult social care employment?

1.6 How confident are you that there is a fair work offer within your organisation?

1.7 What are the main barriers to overcome to ensure a fair work offer is in place within your organisation?

1.8 What more can be done to assist you in being able to offer fair work within adult social care employment in Scotland?

PART 2

How connected are adult social care employers with employability pathways that engage underrepresented entrants?

2.1 What have been good practice examples that you used to recruit individuals into the adult social care sector?

2.2. Why do you feel that these are good examples?

2.3 How innovative do you feel these approaches are and why?

2.4 What approaches have you experienced that have not worked well?

2.5 Why do you think these approaches have not worked well?

2.6 Who are underrepresented groups of workers/participants within your organisation?

2.7 How effective have your approaches been in engaging underrepresented groups?

2.8 What more do you feel can be done to engage with underrepresented groups by you?

PART 3

What is the capacity available to adult social care employers to offer improved recruitment processes to engage entrants into the sector?

3.1 What are the main recruitment channels that you use to recruit into adult social care?

3.2 How effective do you feel these recruitment processes are?

3.3 How can the current recruitment processes be improved?

3.4 What are examples of good practice that you have seen in recruitment within adult social care?

3.5 What more can be done to recruit underrepresented workers?

3.6 Is there anything else that you would like to add?

Conclusion - Reiterate the aims of the research, confidential, voluntary - Next steps – transcribe the audiotape and if you wish to view the transcript once transcribed you are able to request this - Thank you for your time.

Appendix 3 – Interview Schedule – Individuals working within Adult Social Care

Introduction

- Explanation of research (Purpose) conducted as part of Professional Doctorate, interest in this subject area.
- Explanation of process – voluntary participation, will be asking questions within discussion areas and that may prompt to gain further insight and to benefit from their expertise.
- Will be using an audiotape so that I can better remember what you have said, reiterate that everything is confidential to participants and no names will be used in the final research study.

Initial Question

Introduction: Tell me about your current position and how long have you been in this position?

PART 1

1. To what extent is there a fair work offer within adult social care employers in Scotland?

1.1 What has been your experience of recruitment into the adult social care sector thus far?

1.2 What has been the main barriers that you have experienced in getting into adult social care?

1.3 What is your understanding of what a fair work offer means, in relation to adult social care employment?

1.3.1 How would you describe the pay within adult social care?

1.3.2 How would you describe the hours of work within adult social care?

1.3.3 How would you describe supervision within adult social care?

1.3.4 How would you describe training/development within adult social care?

1.3.5 How would you describe the voice that staff have to express their opinions and concerns within adult social care?

1.3.6 How would you describe the opportunities that you are afforded to workers in adult social care?

1.3.7 How would you describe the security of your job role in adult social care?

1.3.8 How positive do you feel that the working relationships are within adult social care and why do you say this?

1.3.9 Would you say that staff are treated fairly in adult social care and why do you say this?

1.4 What more can be done to ensure that employers are able to offer a fair work offer within adult social care employment in Scotland?

PART 2

How connected are adult social care employers with employability pathways that engage underrepresented entrants?

2.1 What employability or entry programme(s) have you been on previously or are currently on?

2.2 What has been your experience of this/these programme(s) and why?

2.9 How effective has the programme been in achieving its outcome and why do you say this?

2.4 What more could be done or could have been done to assist you in the employability programme(s)?

PART 3

What is the capacity available to adult social care employers to offer improved recruitment processes to engage entrants into the sector?

3.1 What recruitment method have you experience of within adult social care?

3.2 How effective do you feel this type of method is and why?

3.3 What are examples of good practice that you are aware of within adult social care recruitment?

3.4 How do you feel recruitment could be improved within adult social care?

3.5 During the recruitment process what would be most important to you, in determining which employer to join and why?

3.6 Is there anything else that you would like to add?

Conclusion

- Reiterate the aims of the research, confidential, voluntary

- Next steps – transcribe the audiotape and if you wish to view the transcript once transcribed you are able to request this.

- Thank you for your time.