

Social Care in 2016

Much of what we do in Agincare & across the social care sector is determined not just by our own activity as employers, but by other organisations or statutory agencies.

Every year, 1 April brings with it a flurry of activity relating to the new start of the financial year for the Councils we work with and usual fee reviews for both these Councils, Clinical Commissioning Groups (CCGs) and indeed private pay clients. This year it came with even more impact, with the new National Living Wage (NLW). The government introduced this for workers aged 25 & above, initially set at £7.20. Rather confusingly, the National Minimum Wage (NMW) continues to apply for those aged 21 to 24, with the premium added on top for those aged 25 & over. However, Agincare has decided to place rates for those under 25 at the same rates as those above, other than where specific schemes may be in place. Given increasing publicity about the NMW, the NLW & issues like travel time & use of zero hours contracts, social care employers have increasingly had questions asked of them about their



Agincare's Mel Cairnduff delivering Domiciliary Care in Weymouth

employment practices. Agincare staff & regular readers of our website or social media accounts will know that as an organisation we have campaigned for years regarding the funding of social care system, the manner in which care is 'purchased' (by Councils and CCGs) & the challenges for this on workforce, consistency of supply and quality. Agincare ensure that travel time is covered in our hourly rates, pay additional mileage, enhanced hours where possible & although we do offer various contracts, including zero hours, all have full employment rights. However, the sector remains a challenging one in which to recruit and retain.



After many years of division amongst organisations, more recently there has been consolidation of views, with pointers to a 'broken' system that struggles with the issues mentioned above. The results are an NHS under strain, areas of the country where it's difficult to access care & employers in statutory agencies, charities, not-for profits & private companies all concerned about rising costs & a decreasing workforce. A huge part of this worry is the knowledge that our workforce do a fantastic job, in supporting the most vulnerable people across society & often in difficult circumstances. And yet, the wider system & the funding that supports this means that ongoing improvement in terms & conditions to the degree we would all like – & that the workforce deserves – remains a challenge. Recent media coverage has shown that social care will always be under scrutiny – & rightly so, for we take huge responsibility for the care & support of some of the most vulnerable people in society. Poor care practice, whether by individual lack of care, negligence, malice or by organisational or cultural neglectful behaviour should never be excused. However, the

blanket criticism indiscriminately directed at people just because they operate in the 'independent' sector can be extremely demoralising for staff at every level of an organisation. We provide care in partnership with statutory agencies who play a huge role in determining price, frequency, duration & therefore quality of care and overall, despite mistakes at times, the vast majority of care is delivered well.

As someone who has worked in social care from the age of 18, as a care worker, health care assistant, social worker, a regulator (all public sector) & for the past 12 years various roles within Agincare, I feel very strongly about the company, the people in it, the people we provide care for but also about the wider care sector. Like many others who work in Agincare, I started working in social care because I wanted to do something that made a difference to peoples' lives & to have a job that meant something. I still do. So many people across our organisation give so much of themselves – over & above 'work' time- to striving for good social care, not just because it is their job to do so but because they genuinely care. For them & for me, the

current state of the sector is so very sad because it can feel like we are out of control, caught up in a system that has gone terribly wrong. However, when weighing up the options, you find you have a choice – leave & criticise from the outside, albeit in a much safer & easier position. Or remain within it, continuing to try to make a small difference in small ways every day to various people & in the belief that together we will be able to make the system better.

At times of more sad & bad news for the sector, I take some comfort in reading the many positive comments about caring staff across our CQC reports (even when overall a service may continue to require improvement), to see & hear our staff going the 'extra mile' & to read the heart warming comments received from people who are supported by our services, & from their families, via our Believe in Good Care campaign. These all remind me of why we do it & why it is important to continue to keep trying.

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