Healthier Working Lives: "A quest to improve care through a collective voice"

The Entrepreneurs' perspective and what lessons can be learned for the future?



The Healthier Working Lives journey started with a question: how can we improve the working lives of the adult social care workforce? We knew our project would be centred around the strong belief that care workers themselves should help to inform, shape and guide development in the sector, and share their ideas to improve their industry.

We know we need to tackle the big challenges facing the care sector including **employee retention**, workplace **effectiveness**, staff **wellbeing** and workforce recruitment and this has steered our work.

Getting started

We began by exploring the experiences and issues from 'the front lines' of the care sector using **interviews with care home workers**, and **focused ethnographic observation** across six different care homes. We spent nine days and one overnight observing the ways in which **work**, **care and life flowed in the residential care homes**. Forty-four interviews were undertaken with care workers and supervisors.

In parallel we embarked on a Programme to discover, interview and document what we recognised as the **leading 'Trailblazer' entrepreneurs** in the health and care sector. We were looking for those enterprises who were

doing **innovative things** ... health, domiciliary or residential care ... whose ideas, if not directly immediately applicable, could possibly be pivoted to be appropriate for residential care.

We interviewed over thirty such companies and were able to filter them by how appropriate they were, at what stage in their development they were and how willing/appropriate they were for involvement in the later stages of the Programme.

Armed with this strong insight and positive engagement – from both the Care Home sector and from entrepreneurs - we then embarked on our **co-design process**. We were open with all involved about our mission: we want *your* suggestions, *your* insights, to help us on our quest to improve. Co-design researchers provided an array of **creative**, **coactive**, **and interactive** tools to help care home workers and managers **share problems and highlight priorities** and 310 workers, managers and relevant organisations were involved in this stage. This group became our intrapreneurs and began to work closely with the entrepreneurs.

We also began to work closely with **Codebase**. Based in Edinburgh ... and now around Scotland ... Codebase is Europe's largest Accelerator. We worked with a small team, two of whom directly led two of the projects that emerged in the second phase of the Programme

What happened?

Over months of repeat visits, the groups built **strong relationships**, developed **engagement**, and deep **collaboration**. By acting as a catalyst for this shared space, we fostered more **transparent communication**. Challenges were shared from all perspectives, creating more **understanding** between care workers and their management. Small **localised and internal solutions** began to emerge.

We heard about **existing innovations and useful ideas** that are already having a positive impact for the workforce. We saw first-hand the benefits of **integrating care worker voice** into solution design – **empowering and validating** for individuals, as well as improvements in **workforce culture** more generally.

Importantly, the four/five entrepreneurs who we involved in the projects had to recognise, early on, that they had to **listen to the care worker teams** and rarely, if at all, were the pre-conceived ideas with which they came fully appropriate for the needs of the sector.

At a retrospective **Workshop**, four groups were formed bringing together care workers, care managers, policy leaders and entrepreneurs from across the care sector, led by a mentor. Of the four groups, three were taken forward, each addressing a core sector issue: approaches to **workforce training**; integrating **technology and digitisation** to offer more personal care; and learning from successful care homes to **assist recruitment and retention**.



Over 6 months, each group worked together to develop their initial ideas into a clearly defined "problem statement", ready to present to potential investors and entrepreneurs.

And now, the work continues. The groups have continued **finalising their problem statements and developing ideas for innovations** which we aim to take forward to policy makers, sector-leaders, investors, and external funders.

Some of the issues raised may be already familiar to employees in the sector, but they are often not seeing the **opportunity or solutions** to those issues. And many **investors and entrepreneurs** may not understand the issues as seen by care workers and manager.

We believe our **cross-sectoral**, **highly participatory**, **care worker driven approach** could address this gap.

What are our lessons learned?

Our findings address the four core challenges: **retention**; **effectiveness**; **wellbeing**; and **recruitment**. These are referenced within the following core findings.

1. The importance of collective voice and autonomy

People at all levels in the sector have really valuable things to say, and creating a space for these insights to be shared with each other should be prioritised. For entrepreneurs the ability to hear, first hand, what it is actually like, the day to day pressures and the realities of running Care Homes on incredibly challenging resources and tight margins proved invaluable – and opened eyes for so many.

Care staff and care managers talking to each other is hugely beneficial: for empowering individual voices, as well as creating a more positive workplace culture. Communication between managers and workers in this way may help introduce **change that is not enforced from the "top down"** but emerges from the workforce.



One key lesson learned by the entrepreneurs was the **importance of Intrapreneurship**. Many of the ideas emerging from the projects have been bubbling away in staff minds for ages and only needed the appropriate forums, permission ... and like minds ... to allow them to **emerge and grow**. Rarely, if at all, did entrepreneurs come in with their ideas and 'impose' them on the Care teams.

Engaging workers in decision-making can increase opportunities for autonomy of decision-making by a team, makes solutions more **sustainable**, and is beneficial for both **retention and well-being**. Encouraging more open communication will also **ease tensions** which exist within the job and workforce: for example, between care workers of different backgrounds; over intergenerational differences in approach; day and night shift staff; agency and permanent workers; or 'local' workers & migrant workers.

Individuals and organisations raised different issues, and prioritised different things based on their own experiences and needs. "One size doesn't fit all", and the co-design process reflected the individualisation of both problems and the solutions. However, knowledge exchange can help here, especially sharing positive ideas and best practice. Another individual or organisation may already have a solution to your problem – get out and see what is working elsewhere.

2. It takes time to develop a new market

Many of our entrepreneurs were pleasantly surprised by how much innovation was either already in place or latently there. Allowing the Care home **staff to lead the process of reviewing and ideating around new (technology) solutions** was indeed the best way to ensure that strong ideas were being developed and embraced.

Making the argument for new ideas also needs to be **rigorously measured**. Too often ideas are tried and not evaluated properly or not given the room and permission to succeed. **Patience is a virtue** - particularly in an environment where innovation and change comes well down the list of priorities when money is tight and pressures on workforce productivity is high.

However, all of our entrepreneurs embraced the opportunity to get close to the 'coal face', to understand the **importance of getting permission**, **embracing co-design** and getting the **impact measures and accreditation** which would be so important to ensure that products and services could be adopted at scale.

3. Be flexible

Several of our entrepreneurs came to their projects with relatively fixed views about how their ideas could be integrated into/embraced by the teams with which they were working. Only **through the co-design process** did they realise how those **ideas needed to pivot**/ be refined/change fundamentally.

Fortunately, we were blessed with entrepreneurial organisations and individuals who did just that, who gained the **respect of staff** and worked positively to **understand the dynamics of the workplace** and the challenges that came with it

The **ability to be flexible** is important in any entrepreneur's journey but it seems to be even more acute in this, the residential Care market, where so little access can be gained.

4. Concentrate on the Problem, not the solution

This is a mantra which can be applied to all start-ups. The statistics are frightening, with over two thirds of start-ups failing because they have either failed to properly identify who their target market might be, what problem they are solving and what other competitors are already doing something like them.

Our work with Codebase helped us to recognise that spending 90% of our time in robustly interrogating what the actual circumstances were, what the overt and underlying issues were and so getting to what was the real problem to be solved was going to be the key.

We also need to sustain energy and passion to sustain and grow entrepreneurial, and intrapreneurial spirit nurturing abilities to develop and promote positive change.

With three years of experiences, if there was one overall lesson to be learned – particularly in a market where access can be so difficult and the resource and commercial constraints so acute – then this fourth lesson is probably the key.



Healthier Working Lives is funded through the UKRI Health Ageing Challenge Social, Behavioural and Design Research, grant number ES/V016156/1.

