

The landscape of opportunity for nursing careers

Speakers

Lucy Gillespie, Michael Fullerton, Caron Sanders-Crook

Lucy Gillespie 00:01

Lucy, so welcome everybody. My name is Lucy Gillespie. I am a national professional lead, and I focus on the nursing portfolio here at skills for care, for Adult Social Care, and today's webinar is all about the land of opportunity. So around careers for registered nurses and nursing associates in social care. Today's webinar will will look very briefly at the nursing workforce itself in social care, but also some of the things that make that up in terms of what a social care approach to nursing might be. We'll then go on to explore with some panellists who are key nursing leaders in social care settings, some of the knowledge and skills and what you might expect from a role that that happens in social care, as well as contemporary professional practice, how people access career development and also the wider social care workforce, and how social care is actually A place for nursing across that whole career span. So in terms of our nursing workforce and social care, our adult Workforce Data Set tells us that we've got around 33,000 nurses in posts, primarily within the independent sector. We also have another around 7000 nurses working in other roles within the sector. The majority of those nurses work in CQC care homes with nursing, but there are nurses as well, working in care home only, non residential or other settings such as day centres and day services. It collects quite a traditional view of nursing, I would say, in social care. And we know that that landscape is changing. We know that people are choosing, very much wherever possible, to have their care within their own homes. So as that changes, then nursing and those posts change too. And in terms of our turnover, our turnover rate is down this year, quite significantly. It was 42% last year, down to 32% so still really high. And hence the importance of these webinars. So we did a consultation a few years ago here at skills for care with nurses in the sector about what is it that's different about nursing in a social care model as opposed to that medical model. And one of the things that came through from that was that it absolutely is about that person centred, strengths based approach. It's about working with people, often developing quite long term relationships with people and their families, and working very much in people's own home, or a place that they might call home. Nurses also described managing the

Realise that working in social care is not what it used to be, and it's not the misconception that everybody thinks it is. You know that it's, it's something that you do at the end of your career, or it is definitely something that you can make a very rewarding career out of.

Lucy Gillespie 10:18

Yeah, yeah. And, you know, I think sometimes as well, people think that that the people we care for at the end of their lives, and yes, they may well be but you know, social care nursing reaches, really across the whole lifespan, and we have nurses who are learning disability, nurses like yourself. Michael, mental health nurses, adult nurses. We've got our nursing associates now working in the sector, and we also have children's nurses, because that relationship that people have built has sometimes learned that they've transitioned with people into adult services, and their provision has transitioned, and they've stayed with the people through their lifetime. So some really strong drivers in terms of the nursing passion and all of that. So some of the things you touched on there are around person centred practice, which we talk about a lot when we're talking about social care nursing. And the other thing that I think Michael you mentioned was around some of the moral and ethical decision making and positive risk taking we make in social care settings that's very different to some of those other settings. How important is all of that, in terms of the people who draw on that care and support

11:35

critical? So I obviously, I'm working with a people with learning disabilities, also people who are autistic and our our aim is obviously for people to enjoy a fulfilling life and an ordinary life. And in order to do so, it's about sort of paying attention to what individuals want from for their life, but lifestyle they want to adopt. But we're also mindful within that context that we're dealing with sort of guite a diverse population in terms of degree of learning disability, other health complications, neurological conditions. We know from the leader reports in the learning disability sector that people with learning disabilities are typically dying quite a lot younger than the general general population. So so with sort of nursing head on, we need to ensure that we are focused on health promotion and and risk management for people within four people, but but also making sure we are actively listening and coproducing their support with them and with their network. So for those people who perhaps don't have the capacity to make particular decisions. we can involve their circle of support and their families, but it's ensuring that whatever we're doing, it's as much as possible, is coproduced, and we are sort of focused on what that person's aspirations are and helping them work towards that. If that includes positive risk taking, then all the better. So it's about us making sure that we are working in a sort of forward thinking way with individuals. Unfortunately, my role, where one of my key focal points is overseeing our coproduction team, so that involves people that we're supporting, so they've got a voice in the organisation. But then we're also looking

know with this population of people accessing health screening programmes, less so than the general population. So a massive drive this year in order to help overcome some of the anxieties that people face when it comes to those sort of clinical interventions, and making sure that sort of externally, health organisations are making the reasonable adjustments they need to make. So so there's a strong advocacy role for us in adult social care, or social care generally, in order to make sure that people sort of don't face inequalities. A lot of our time is also focused in interacting with hospitals and other clinical settings to make sure that people get equal treatment and that they're not being discharged too early from hospital, etc. So so a lot a lot of our work is also then sort of like interacting with health professionals to get the right levels of support for people.

Lucy Gillespie 17:58

Thank you, Karen, did you want to add anything there?

Caron Sanders-

health issues. So in order to expand my expertise around that, a lot of work, a lot of sort of training around supporting people with learning disabilities who are at risk of offending, and then sort of, like, quite differently, sort of focus on people with profound and multiple learning disabilities and those involved in helping to develop a national set of standards around how you support people with profound and multiple learning disabilities. So quite fortunate that I got an understanding and supportive organisation. But these days, a lot of my learning is through webinars, free webinars, cheap webinars, Twitter, LinkedIn, so those are my main source of learning today, and what one area of concentration for me at the minute is around a condition called autistic catatonia, and really because it's largely misunderstood, misdiagnosed and a lack of research. So we support three people that we know of that condition, so So therefore, sort of digging quite deep into understanding that condition a bit more. So then in turn, I can educate champions? And I know not all your role models will be nurses, but But where do you find that inspiration from those other people who are working in the sector?

24:18

what she did. And I thought that was quite a difficult combination to be able to display at that time. I think more recently, obviously, has got to be Professor Deborah sturdy, you know what she's done for social care has been amazing in the time that she's been imposed, first ever Chief Nurse, civil servant working for the government. And I think what she's been able to open up for social care since she's been imposed is we've never had anything like it before. So I think, yeah, she's definitely my my recent one. And I can't, I can't, kind of leave that point without mentioning the people that I've worked alongside and the people that I've looked after as well have also been a source of inspiration and development, because every day is a school day, I learn something new every day. So I'm kind of really grateful for every interaction, really that I've had

Lucy Gillespie 28:40

brilliant thank you. So thinking about nursing in social care settings across the career span. And I think, Karen, you mentioned the myth that it's for people at the end of their careers. What is the to attract, you know, nurses in early careers into social care settings. You know, what should we be doing as a sector? And what are the, what are the narratives around social care across that career span? Do you

Caron Sanders-Crook 29:08

want me to start with that one? Okay, the narratives, there is a career path now. There is a defined career path within within social care. I think what we need to do is do more to promote it and promote the accessibility to it. There are lots of different fields that you can that you can go into. So, you know, starting off with working within your training within the social care sector, I think people that come into the sector need to really reflect on where they are when they start and their journey throughout it, and then

for me. It's such a rich and varied with this so many career opportunities. It's like the world is your Oyster within within my journey, and also the journey of other nurses that I know, there's a lot of autonomy and the ability to, yeah, just ensure that you are constantly sort of seeking to embed research evidence based practice in everything that you do, and strongly influence that unqualified social care workforce who then sort of rely on you for your wisdom and guidance. So there's a real sense within social care of getting that buzz from from making a difference to people's lives every single day, and using that wider nursing knowledge and skill in order to do that and have that influence. But there's so many career opportunities. I don't know if that's a part of this question or a further question, but in terms of the organisation I work with, so there's me and my

and actually, there's a question in the chat about apprenticeship opportunities, and how do we create more of those apprenticeship opportunities, especially in light of some potential funding that's coming out later this year. Do you see apprenticeship opportunities in your organisations?

Caron Sanders-Crook 35:29

Should I start? Yeah, yes, yes, the answer, short answer to that, lots of opportunities around apprenticeships. And I know we kind of, we've had them a while now, and they keep kind of moulding and changes. It changing as we as we go through time. But I think there are, there are people within our sector and in the environments that we work in that are really, really skilled and have some some key talents that maybe they don't realise that they have. And not everybody wants to go on and do you know, nurse training and then go into management. So I think what it does is create another opportunity to value the people that that, that we're working with, and for them to be able to have some credibility and recognition and enlargement for the skills that they have got.

Lucy Gillespie 36:23

Michael anything to add yeah,

36:24

I think for us, I think apprenticeships probably sort of less advanced, although, to be fair, I'm not directly involved in that, so, so I'm not, not sure I can speak in an informed way, but I think there's a lot more we can, we can do around, apprenticeships, but we do, we do have a strong focus on for a lot of most of the people that we support are of working age. We do support people who are older age, and then obviously supporting people to hopefully have a good death. And so we're sort of supporting people through that age spectrum, but a lot of people are working age. So we, within my team, CO production team, we have somebody who's dedicated to helping people sort of seek active employment. Again, we know for people with learning disabilities and autistic people, Access to Work is much more difficult, so we're sort of seeking employment and internships and apprenticeship opportunities for those people as well,

Lucy Gillespie 37:29

brilliant. And there's a really good question, actually in the chat that I'm going to put to you, and somebody's asked, but do you still feel like a nurse? I've often thought of social care, but worried that you might lose this sense of identity when you're not working in health.

Caron Sanders-Crook 37:47

I think I feel I've worked in the NHS, and I've worked in different environments, and I think I've never felt more a nurse than working in social care. I think there are, if I'm

having a bad day, you know, as operations, I'm out there. I'm supervising. I'm kind of got a number of you, a number of you of what's going on, but in the facilities that I go into, I every time I go in, I make the effort to go in and speak to families and speak with residents. I do work alongside carers. I was working along some beside somebody yesterday that's working through her assistant practitioner. So we were doing her practice document. And if I'm having a bad day, then I am the first person to turn up my laptop and go and spend time with the residents. And they, they kind of ground me and bring me back to what I know. So I think I've, I've I've never felt more a nurse than I have working in social care. So I don't feel like I've lost the identity I feel within social care. There may not be the recognition for the autonomous practitioners that we are, but, but that's a different, different story altogether. Brilliant.

Lucy Gillespie 38:58

Thank you. Michael,

39:01

Yep, yeah, never lost that sense. But first and foremost, I'm a nurse and using skills every day. In fact, obviously my sort of career has moved on, hopefully more influential in terms of my nursing role, so in terms of the vision and the strategy for the organisation, then I collaborate with other people, but using my skill set and knowledge base in order To drive forward how supporting people, around behavioural support, around complex epilepsy, around enteral feeding, around postural management, whatever it might be, making sure that I'm using my knowledge base, using the evidence and research based practice available in order to influence. Audience, how the organisation thinks and acts. Yeah, it never leaves. So, so then, in terms of like, also, then clinical governance, then have responsibility for, for monitoring and managing risk, a clinical risk issues, a wide range of issues around epilepsy or choking, dysphagia, etc. So it's all there.

Lucy Gillespie 40:26

Yeah, it sounds like nursing

40:32

a tomorrow. I could be going out fishing with somebody as part of a therapeutic process with them. So it's funny, involved in lots of football and athletics and all sorts, so it's a lot of fun.

Lucy Gillespie 40:51

So fun, but complicated and certainly having impact on people's lives. So this is part of a series of career stories that we're developing, and Karen and Michael have kindly

time. But thank you very much to our panellists, and to the supporting people in the background as well.