

# Developing a scale of work-related quality of life for adult social care staff (ASCOT-Staff): Phase One Sep 2019- March 2021

RDS Event 7 October 2020

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## Acknowledgment & Disclaimer:

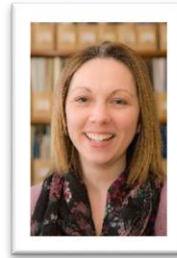
This study/project is funded by the National Institute for Health Research (NIHR) Research for Patient Benefit (RfPB) Programme NIHR200070. The views expressed are those of the author(s) and not necessarily those of the NIHR or the Department of Health and Social Care.

*This presentation is a collective effort of the ASCOT-Staff research team*

# Project Overview – Project Team



**Prof. Shereen Hussein\***



**Ann-Marie Towers\*\***



**Nadia Brookes\***



**Sinead Palmer\***



**Dr Barbora Silarova\***

\*Personal Social Services Research Unit, University of Kent, \*\* Centre for Health Services Studies, University of Kent

# Thinking process

- Identify key theme:
  - Social care practice and workforce
- Referring back to the core aim of RfSC
  - The central focus is: “What’s in it for patients and service users?”
- Here the research is focused on the wellbeing of formal care workers
  - Important to connect improving the wellbeing of staff to improving the organisation and delivery of care and broader quality outcomes
- The key role of public involvement
  - Who are they and how I can actively involve them
- Research quality, team, management and quality assurance
  - The role of the project advisory group

# Project Overview – Project Advisory Group

- Nadra Ahmed (National Care Association)
- Jennifer Bostock (Stakeholder/PPI)
- Professor Sara Charlesworth (RMIT University, Melbourne, Australia)
- Matthew Egan (UNISON)
- Margaret Fox (Skills for Care)
- Karolina Gerlich (the National Association of Care & Support Workers (NACAS))
- Lyn Griffiths (Stakeholder)
- Professor Teppo Kröger (the Department of Social Sciences and Philosophy of the University of Jyväskylä, Finland)
- Dr Sarah Markham (PPI)
- Professor Allister McGregor (the Department of Politics and the Sheffield Political Economy Research Institute (SPERI) at the University of Sheffield, UK)
- Professor Ann Netten (previous director of PSSRU, University of Kent, UK)
- Clark Rushbrook (Department of Health and Social Care)
- Helen Salisbury (PPI)

**Representative of funder:** Rifat Mahbub

16/09/2020

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# Project Overview – Patient and Public Involvement (PPI)

- **Types of involvement in this research:**
- join face-to-face or via phone two Project Advisory Group meetings
- be involved in developing study documents, for example to assist with forming the questions for interviews and group discussions
- provide feedback on the research findings
- support the write up of lay summaries of the research findings for the dissemination

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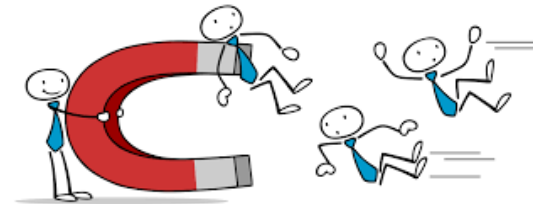
# Project Overview - Background

- Work-related quality of life (WRQoL) is important to:

- Individual's emotional and physical wellbeing

- Work outcomes – e.g. turnover

- The quality of service provided and outcomes related to service users



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# Project Overview - Background

- Care and nursing staff are particularly vulnerable to low levels of WRQoL, due to:
  - Caring being emotionally taxing
  - Structural pressures in sector – low wages and increased fragmentation
  - Moral distress

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# Project Overview - Background

- Existing scales focus on:
  - wages, patterns of work and supportive environment yet ignore emotional rewards from caring
  - do not examine the impact of care work on workers' own quality of life
- A conceptually similar measure exists of the impact of caring on the quality of life of unpaid carers – ASCOT-Carer

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# Aims and Objectives

- To begin development of an ASCOT-staff measure, examining the quality of life of care staff, and the impact of care work upon this
- The first stage, and the focus of this project, is to determine the domains of WRQoL that are relevant to care staff

## What is social care work-related QoL?

- ASCOT-Staff
- Aspects of QoL most affected by care work.
- Expect these to be sensitive to working conditions and culture.
- Each domain has negative and positive outcomes for that attribute.
- Focus is always on the outcome not the process
  - There may be lots of ways to create a positive workplace or culture
  - This measure aims to reflect how working conditions in social care impact on care worker's QoL.

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# Research Questions

- **RQ1.** Review and appraise current quality of life at work scales that are relevant to social care work
- **RQ2.** Identify key domains necessary to develop a WRQoL tool that is specific to the adult social care workforce in England (ASCOT-Staff)
- **RQ3.** Identify potential 'at work' supporting mechanisms that are likely to improve care staff WRQoL

# Methods

1. Scoping review



2. Group discussions and individual interviews



3. Survey



# Project changes in response to COVID-19

- All fieldwork paused March 2020, resumed end of July
- Amendment to Ethics
  - Focus groups changed to be held remotely using MS Teams/Zoom
  - Consent process adapted- completed and returned online
- Additional journal article- Scoping Review Protocol submitted to BMJ Open
- Six-month extension (pending)

# Scoping Review



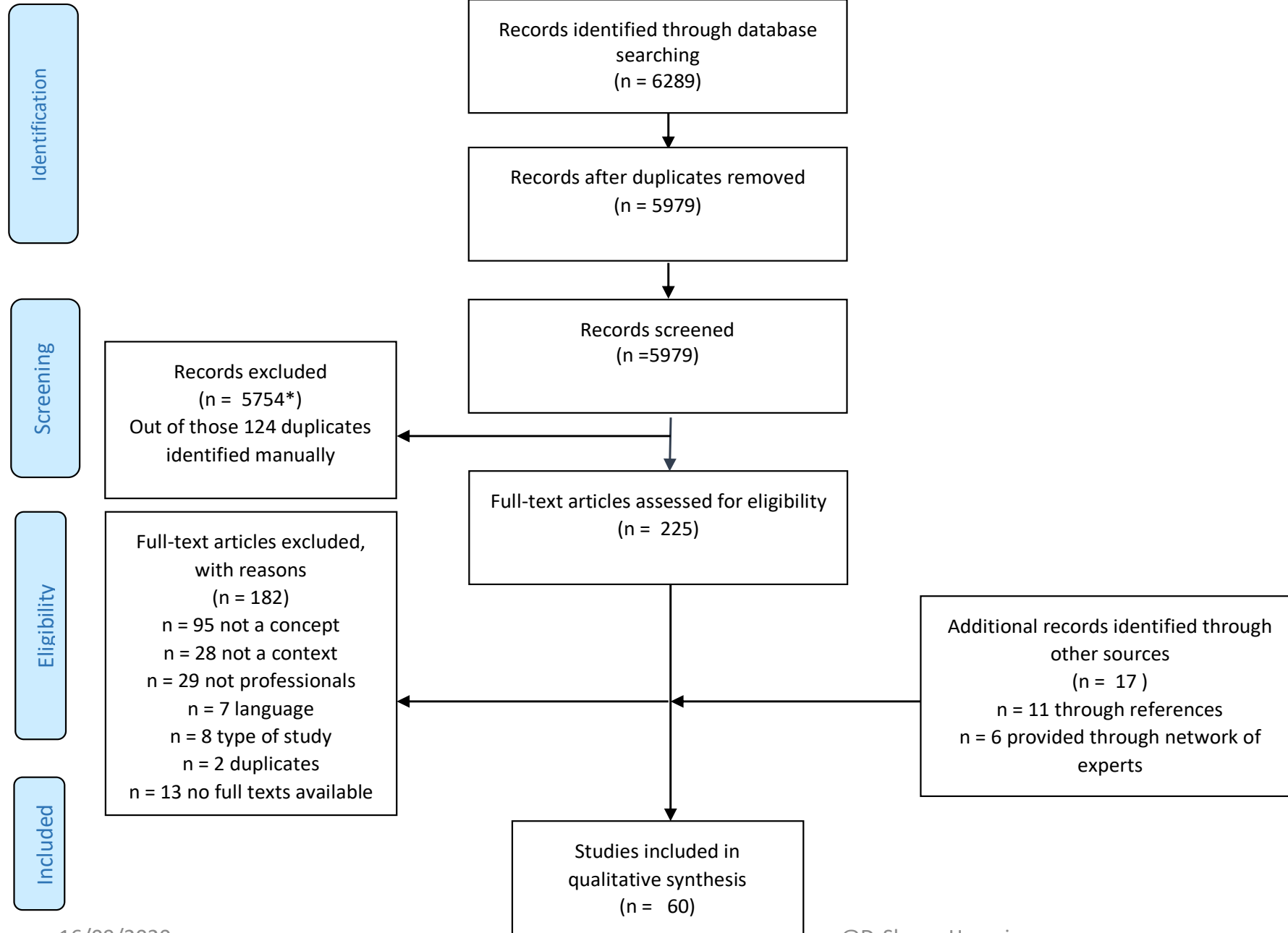
## Research questions:

- 1) What are the existing definitions of work-related quality of life in adult social care?
- 2) What are the dimensions (characteristics) of work-related quality of life in adult social care?
- 3) What aspects of adult social care work has an impact on the social care worker's quality of life?
- 4) What questionnaires of work-related quality of life are available to be used in adult social care?
- 5) What factors are associated with work-related quality of life in adult social care?
- 6) What strategies have been implemented and evaluated that addressed care staff' work-related quality of life?

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# Prisma Flow Diagram





# Scoping Review: preliminary findings

Level	Organisational culture	Job characteristics	Personal characteristics
<b>Key Areas</b>	<ul style="list-style-type: none"> <li>Wages and benefits</li> <li>Time issues</li> <li>Racism and discrimination</li> <li>Social support</li> <li>Career progression</li> <li>Communication</li> <li>Accountability/responsibility</li> <li>Training</li> </ul>	<ul style="list-style-type: none"> <li>Skill variety</li> <li>Work-life balance</li> <li>Autonomy</li> <li>Self-actualisation</li> <li>Working conditions</li> <li>Commitment to clients</li> <li>Client's characteristics</li> </ul>	<ul style="list-style-type: none"> <li>Strategies for coping</li> <li>Individual characteristics</li> <li>Job involvement</li> </ul>

# Focus Groups



- How working in social care impacts care workers' life?
- What aspects of their work help people to feel positively about their lives and what aspects of their work have a negative impact on their lives?

Original plan: 2 Focus Groups with managers, 4 with frontline staff

To date: 2 with managers, 1 with frontline staff

We decided to replace FG with frontline staff with interviews

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# Individual Interviews



- Top – down perspective
- To reflect on the initial outcome domains identified so far.
- To explore how the sector as a whole might use data like this.
- To explore organisational support mechanisms to address staff work-related quality of life as identified through the scoping review.

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# Individual Interviews



- 12 semi-structured interviews completed on telephone or MS Teams/Zoom
- Participants included representatives from carer and care organisations, policymakers and other relevant stakeholders
- Interviews (and focus groups) transcribed and to be analysed using thematic analysis

# Individual Interviews- initial findings

## Key points

- Perception of tool-
  - Important to know *how* data will be used
  - A helpful resource rather than 'a stick to beat with'
  - Good to have a standardised tool for social care
- Requirements for tool-
  - Sensitive to change
  - Adopted into *or* supported by national framework/policy
  - Consider how to make changes, rather than just measure
- Benefits of the tool-
  - Help identify areas for development
  - Good working environment=good quality of care
  - Prevent staff burnout
  - Forge better relationships between workforce and management

## Next steps – Survey



- Specific feedback on the importance and priority of the domains identified through the qualitative stage of the research.
- All participants from the focus groups and individual interviews and advisory group members.
- Online survey, option to complete it via phone call.

# Project Overview - Some ideas/examples

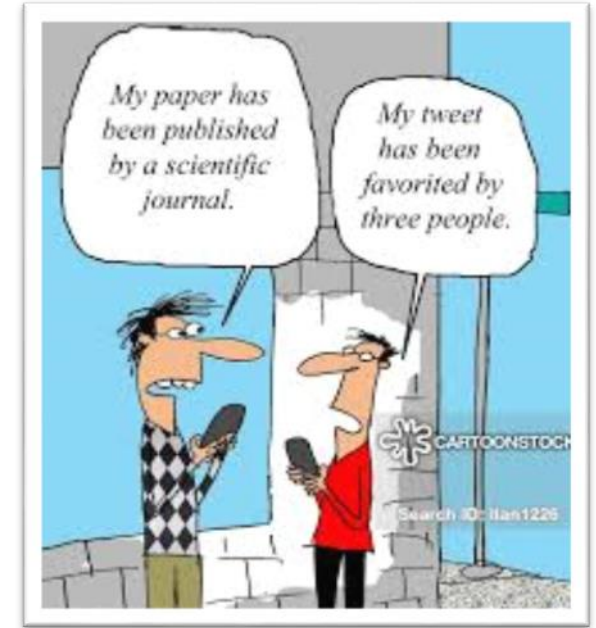


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# Dissemination and Outputs

- Agreed domains of ASCOT-Staff
- A brief guide for social care practitioners and employers
- A summary report to be published on the PSSRU website
- Two peer-reviewed journal articles (open access)
- Project website:  
<https://www.pssru.ac.uk/ascotforstaff/homepage/>
- Twitter: #ASCOT\_staff

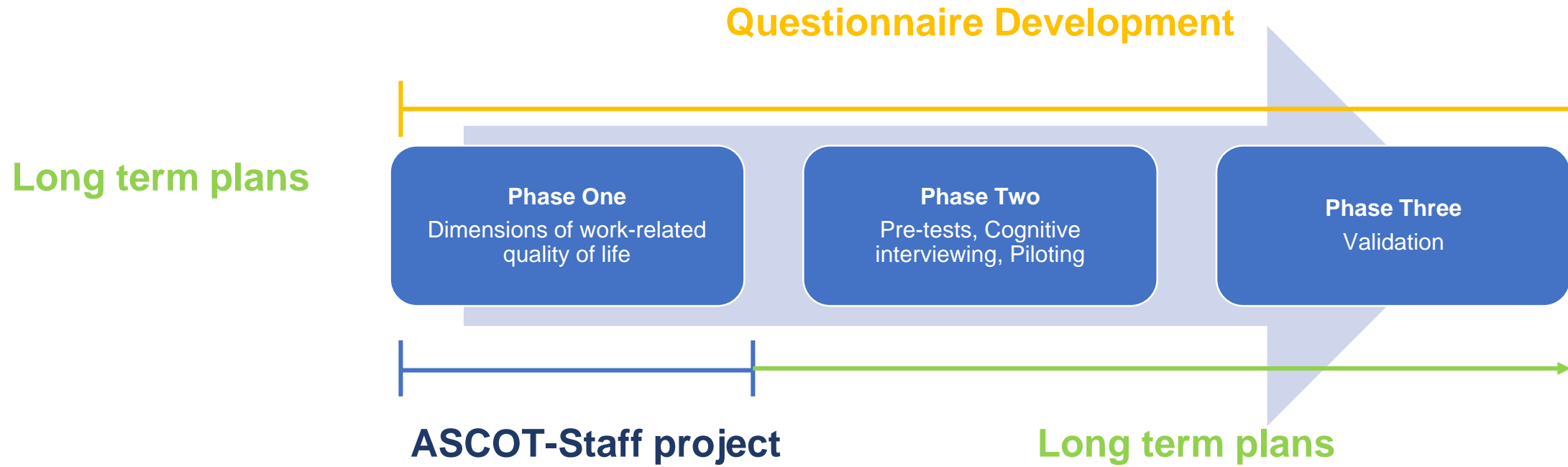


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# Anticipated Impact



## Short term plans



# Developing an application: Key Criteria

- The topic is of relevance to the funder and programme aims
- The team, especially the PI, is well-situated with enough expertise to undertake research in this area
- The research design and methodology are sound
- The project activities are feasible within the suggested time frame
- Clear awareness of potential risks and mitigating factors
- There are tangible outcomes that have direct impact on social care service users' outcomes
- Effective Patient and Public Involvement (PPI) throughout the process
- Involvement and collaboration with organisations that deliver social care services (e.g. local authorities, care providers)

# Developing an application: Tips

- You might have an idea for a while
  - Connect with relevant researchers, discuss and reflect
  - Seek advice from service users/carers and public in a meaningful way
- It is very important to read and follow the application guidelines
- Frame the idea bearing in mind the call specification and application form
  - Essential elements to include and connect them well:
    - Do the research questions follow logically from the identified problem?
    - Are the methods suitable to the proposed questions and objective?
- Make clear connections to outcomes
  - What will your project produce? How are you going to build upon it further? What are the short and long term benefits?
- Language and diagrams

# Questions

