

DIGITAL SKILLS AND RESEARCH METHODS

A research report on Skills shortage in Health and Social Care



Lecturer: Anupam Mazumdar

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FATEMA AKTER
Student No: 1810256

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Total Word Count: 2088 words (excluding references)

1.Introduction:

The Global shortage of health care workers is projected to be 18 million by 2030 as per the WHO and GHWA report (Malema & Muthelo, 2018). In the UK, with the growing number of ageing population with complex physical and mental health, the demand for support workers are increasing rapidly however, the skills shortage is also on the upward trend due to various reasons.

To accomplish this research, the participants were asked for responses on the shortage of skilled worker in Surrey health and social care. A survey questionnaire was circulated with in the sample size of 30, through using Likert scale 5 to get responses, who were somehow affected to the shortage of skills in this sector around Surrey to investigate the difficulties and find possible clarification with solution for this sector.

The reason I have chosen this topic is for the suffering that disabled people are facing due to the shortage of skilled care workers in care industry.

Aim:

The aim of this research is to find out the difficulties about the scarcity of skilled support workers for day centres and residential care homes for people with disabilities in the areas of Surrey.

Objectives:

The objectives of this research are:

1. To find out the reasons and factors of skilled workforce shortage in the care sector.
2. To investigate the experiences and understand the needs / requirements of support workers for local people with disabilities.

Research Question:

Why there is a shortage of skilled care workers in Surrey and how this shortage can be resolved?

2.Literature Review:

This literature review aims to identify the facts about the shortage of skilled workers in the care sector that are already recognized through utilizing published papers. Therefore, the literature of skills shortage in the area is solely concerned to address

the existing issues by concentrating on secondary available sources relating to people with disabilities and their support workers.

As per the National Policy, the NHS England (NHS England 2014; National Collaboration for Integrated Care and Support 2013) demands more skilled workforce in Health and Social care. The reasons are to improve the greater efficiency and effectiveness with the service, to provide empowered individual by reducing pressure from hospitals (Gilbert, 2016).

Shortage of skilled workers due to technological advancement:

Although adult care assistive technologies such as 'electronic monitoring, electronic sensors and computer based cognitive stimulation' (Zhu & Thomassen, 2018), supporting service users in care settings, the ultimate mental pressure and exhaustiveness are taken by the support workers.

Job competition and non-fulfillment of needs ratio:

As per Moriarty, et al. (2008), there is a predominant concern to be addressed that after getting trained, care assistants and nurses are leaving care sector due to the competition held with other professional areas such as occupational therapists. Similarly, care providers are not recruiting enough staff members as per the demand or needs ratio resulting worse outcomes for the people using adult social care services and their families.

Recruitment, retention and individual optimism:

As per Health Foundation UK, the viability of health care industry is under imminent danger because around 900 social care workforces are projected to move out from the care job every day. The reasons are the combination of concerns around recruitment, retention and individual Optimism in the health and social care sector. Similarly, National Living wages are capped with minimal changes with different age groups, insufficient workforce continued to be larger with sectoral bureaucracy and lack of appropriate attention in the sector (Stilwell, 2017).

Ambiguity over the quality and the availability of the care services:

Stilwell, (2017), another ambiguity has been growing over the quality and availability of care services on Brexit issue because around 90,000 EU social care workers and over 60,000 in the NHS health workers are projected to create major implication on the health care sector.

Financial support and adequate remuneration:

Inadequate Government or non-Government financial support and its fluctuating circulation all over the country restricts the Health and Social care services to be

sustainable which leads workers to be with insufficient training and inadequately remuneration (Alana & Aleksandra, 2011). Therefore, many workers find it pessimistic to carry on in the field. Low skilled employees are paid less compare to London Living wage as per 2015 Annual Survey of Hours and Earnings.

3.Research Methodology:

This literature review was planned and offered in couple of steps (Malema & Muthelo, 2018):

The 1st step: the identification of subject of literature review.

2nd step: once subject selection is done, a systematized search was activated to find out relevant information from online published sources through various search engines such as, Google Scholar, Freefullpdf search engine and Wiley online Library.

The search terms used were skills shortage in health care and Health and social care, recruitment and retention of health care workers, incentives and education of health for health care workers, job satisfaction and motivation of care workers and health care skill crisis.

3rd step: the chosen papers were analyzed by summarizing and synthesizing the specific subject area to capture and enrich information on the subject. Secondary online published sources are used through quantitative methods in the literature review (Melissa, 2014). Quantitative data collection method is a viable method which directs to close ended questionnaires for the participants (Cronin, et al. 2008).

Further, these questionnaires were distributed to workers, employers, main carers in the field. This enlightens the divergence in the number of sample sizes finishing the survey. For all answers, 5 Likert scale were used to collect data. All data collection was not only on a voluntary basis but also anonymous. In addition, participants were communicated that their participation would be entirely voluntary and therefore; they can withdraw themselves whenever they want. Moreover, their participation will be completely anonymous (Corker and Holland, 2015).

4th step: This step was writing the literature review in the process.

4.Findings, Analysis & Discussion:

Moreover, these findings, analysis and discussion below will provide appropriate reasoning why there is a shortage of skilled support workers which will find out the problems and possible solutions of this sector.

Question 1. Care workers/ support workers are leaving care industry more frequently due to technological advancement supporting service areas.

Strongly agree	agree	Don't know	Disagree	Strongly disagree
10	8	6	4	2

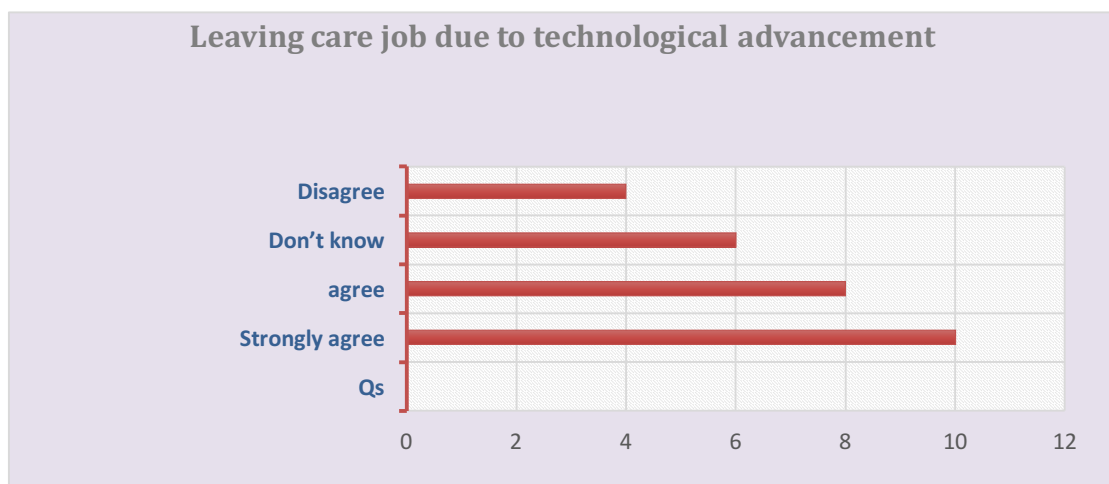


Figure: 1 (a)

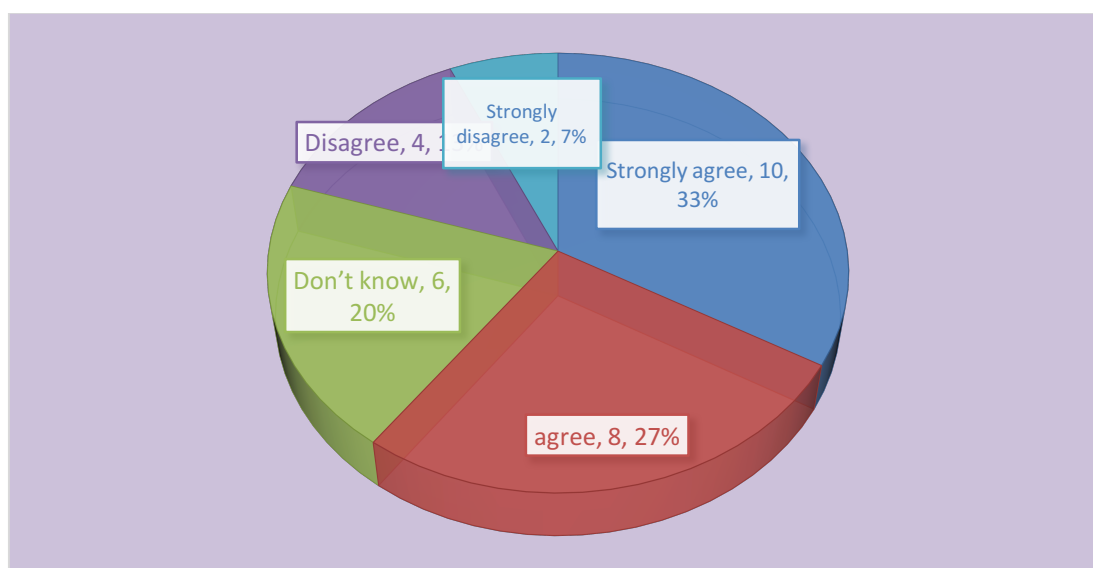


Figure: 1 (b)

Analysis of Q1: The highest number of people responded that the care industry is losing skilled workers due the usage of technology in the sector whereas 7% of the respondent did not agree with the fact. Even though 20% of population has no idea about the fact, it is clearly notable that technology taking over human interactions and industry losing skilled workers.

Question 2: Care workers are under paid than any other profession and not having national minimum living wage.

Strongly agree	agree	Don't know	Disagree	Strongly disagree
9	11	6	4	0

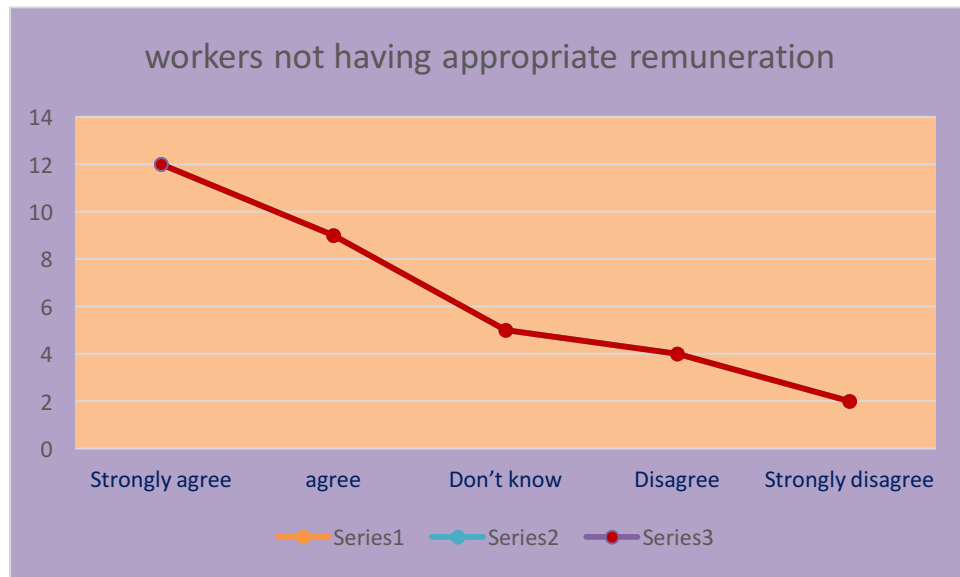


Figure: 2(a)

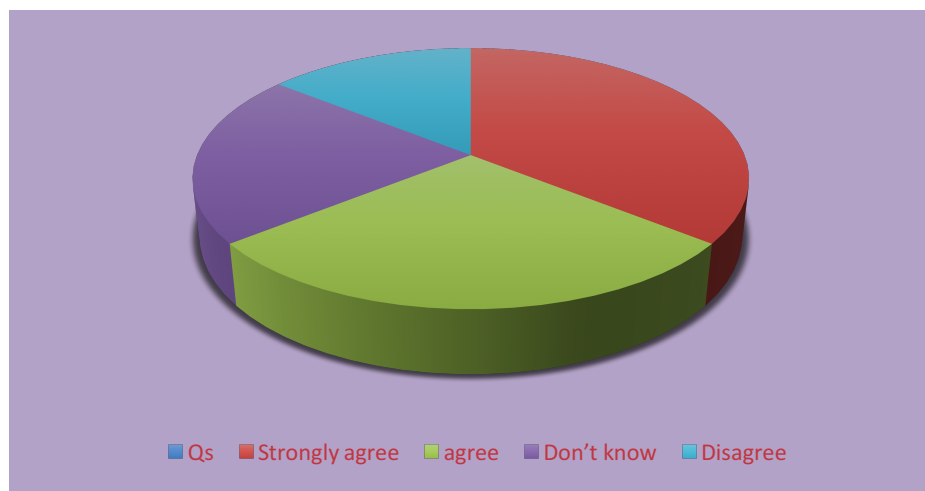


Figure: 2(b)

Analysis of Q2: Above charts show that the upward trends of skilled workers are not having national minimum wages which forces them to leave the sector. Though nobody strongly disagreed with the fact, 21% of the sample sizes did not respond to it.

Question 3: Mixed-skill requirements put employees in a challenge to carry on their jobs effectively.

Strongly agree	agree	Don't know	Disagree	Strongly disagree
10	8	6	4	2

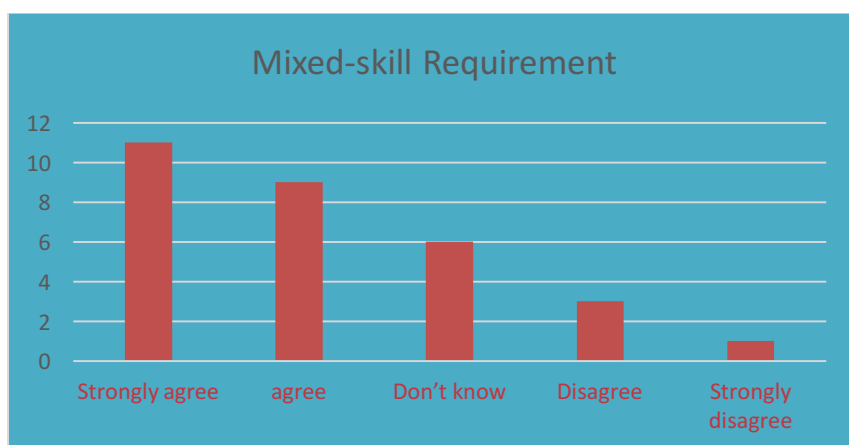


Figure: 3(a)

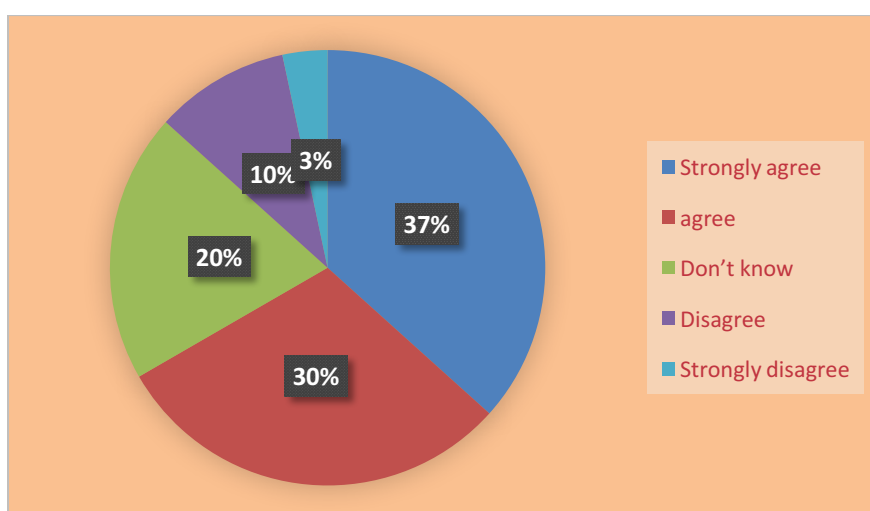


Figure: 3(b)

Analysis of Q3: Barely 3% affected samples were intensely against the idea that mixed-skill requirements pushed workers to doubt whether to stay in health and Social care jobs as per figure 3(b). On the other hand, a greater proportion strongly established that skills shortages are affected by mixed-skill constraint.

Question 4: Workforces are having difficulty to pay for vocational training and basic mandatory training to fulfill their employers' initial demands in Health and Social Care

Strongly agree	agree	Don't know	Disagree	Strongly disagree
12	9	5	4	2



Figure:4(a)

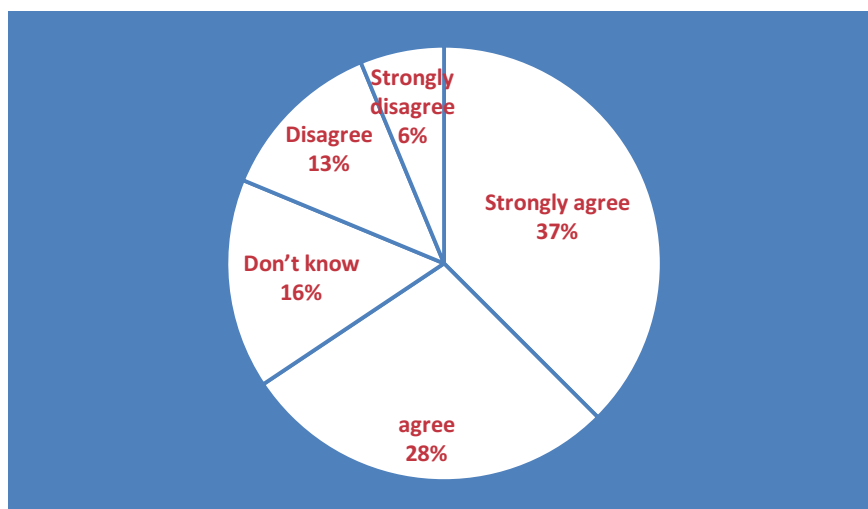


Figure:4(b)

Analysis of Q4: A higher proportion of sample sizes highlighted that employees are struggling to fulfill their employers' initial demands of basic vocational training therefore, not entering to the care sector jobs. Likewise, a small number of samples (only 6%) opposed with this notion.

Question 5: Health and social care workers are under huge pressure to perform double duties to cover shifts due to shortage of staff members.

Strongly agree	agree	Don't know	Disagree	Strongly disagree
11	9	6	3	1



Figure: 5(a)

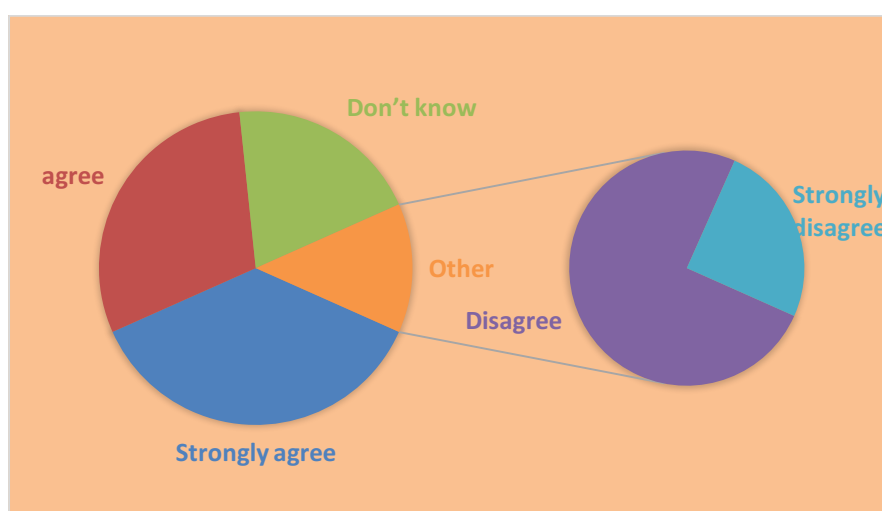


Figure: 5(b)

Analysis of Q5: Pie of Pie and 3D column chart clearly show that more people strongly agreed that Health and Social care workers work excessive hours to cover their potential colleagues in their settings. Whereas, 30% approved that the workers are under undue work load with the opposite of 13% for disagreeing. Performing additional responsibilities to cover shifts due to shortage of staff members are on the upward trend.

Summary of Findings: The data table and line graph below show the number of participants who responded to the questionnaires on the chosen topic.

Qs	Strongly agree	agree	Don't know	Disagree	Strongly disagree
Q 1	10	8	6	4	2
Q 2	9	11	6	4	0
Q 3	10	8	6	4	2
Q 4	12	9	5	4	2
Q 5	11	9	6	3	1

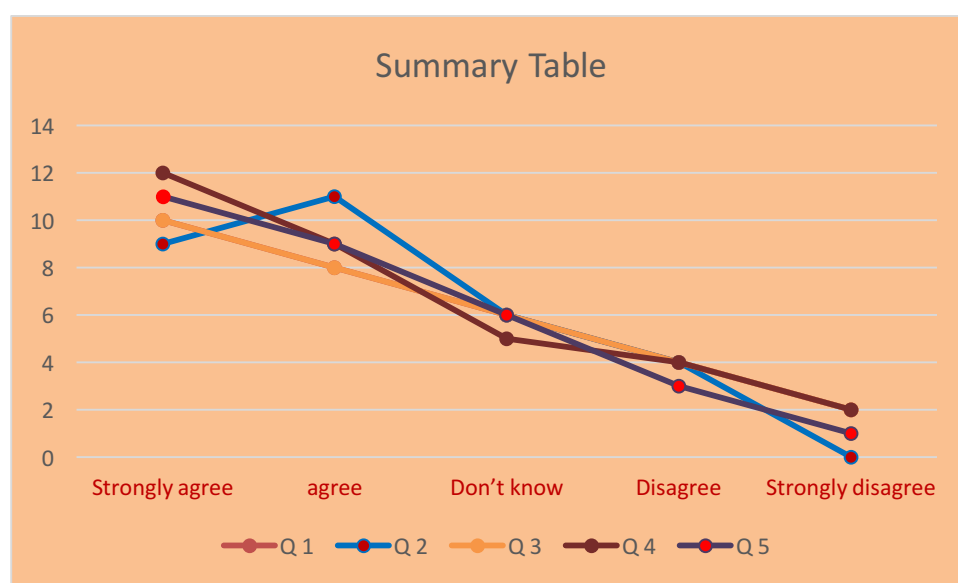


Figure: 6

The summary line graph for the shortage of skilled workers show some similarities on 5 different questionnaires which represent a clear the deficiency in trained employees in health and social care. There is effectively an increased peak of responses from the participants which support the subject matter on the area. An average of 36% participants supported that trained workforces are losing interests from the Health and Social care sector due the uncertainty in the sector. However, several notable changes have been observed through gradual decrease that overall 18% sample sizes are unaware of the topic.

5. Limitation:

(i) Data collection: Both methods or mixed method (Maund et al. 2016) with additional questionnaires could be used to enrich and verify the research.

(ii) Time constraint: I had a restricted time allocation to concentrate on the topic since I had to accomplish 8,000 words altogether for the term.

(iii) Geographical barriers and targeted population:

The data collected through the quantitative method may not be an appropriate due to the geographical location and targeted population. There is a growing risk that the targeted population may misunderstand the questions.

(iv) Family commitments: Being a mother of 3 young children and a working parent I was unable to concentrate more on the topic elaborately.

(v) Literature Selection and word limit:

The literature used could be expanded however, due to the word limit I could not explain my point even more.

(vi) Sample Size: Reduced sample size was chosen due to the time restriction.

6. Recommendation for future research:

For future research, if both qualitative and quantitative or mixed methods were used to explore more about the topic, the findings would be concrete with enriched data. However, most of the limitation I have suffered could be avoided by allowing enough time. Larger sample sizes could be used to reach population to supplement data collection. Limitation of words could be removed to support the researcher to include all findings.

7. Ethical considerations:

When accomplishing this research, some ethical issues were considered (Mary A.P. et al. 2012):

- Participants were informed and made understand about the research.
- When consents were taken, I made sure it was given voluntarily.
- Anonymity and confidentiality were maintained as per Data Protection Act 1998.
- Even though, Ethical Committee's approval was not taken, University guidance and protocols were followed thoroughly as precautions to protect participants, researcher and University.

8. Conclusion:

The sufferings by the employees, carers and employers because of skills scarcity are on the upward trend due to the issues with high turnover, unoccupied vacancies and lack of endurance in care job (Moriarty, et al. 2008). The findings of this research will contribute to reduce the information gap between providers, local authority and central government.

However, a realistic workload and with systemic approach could help workers to boost their motivation and reduce their exhaustion and encourage health and social care worker stay in the occupation for longer.

In addition, Government support with finance and allocation of health workers all over the country without fluctuation could reassure workers to have appropriate training and remuneration to reduce the skills shortage.

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