

Institution: Bath Spa University		
Unit of Assessment: 17 – Business and Management Studies		
Title of case study: Improving the working conditions and wellbeing of social care workers		
Period when the underpinning research was undertaken: 2018 - 2020		
Details of staff conducting the underpinning research from the submitting unit:		
Name(s):	Role(s) (e.g. job title):	Period(s) employed by submitting HEI:
Dr Mark Loon	Reader in Management	1/6/2017 - present
Dr Jermaine Ravalier	Reader of Work and Wellbeing	30/9/2014 - present
Period when the claimed impact occurred: 2018 - 2020		
Is this case study continued from a case study submitted in 2014? N		
1. Summary of the impact		
<p>The Healthier Outcomes at Work (HOW) Social Work project, led by Loon and Ravalier and funded by the Health and Work Challenge Fund, is a major intervention in workplace wellbeing, delivered via an innovative app designed by the project team. The project had a significant impact on the social care sector and the working conditions and wellbeing of individuals. Through the co-development of a series of wellbeing interventions with social workers employed within Local Authorities, the HOW Social Work project has had demonstrable impact on the wellbeing of social work professionals employed within participating organisations (for example, reducing absence and staff turnover; E3, E5) by improving working conditions (such as improved peer support and communication within participating social work employers) and improving the psycho-educational understanding of stress and mental health at work. It has also shaped organisational climates for staff wellbeing as it led to new wellbeing offers and activities, as well as new organisational interventions.</p> <p>Furthermore, Ravalier's nationally focused work on the mental health and wellbeing of social workers has had a significant impact on national organisations and politicians. Ravalier's national social work research has directly informed parliamentary debate on health and wellbeing. It also led to the Social Workers Union (SWU) launching a new campaign for improved social work wellbeing and working conditions, utilised Ravalier's research-informed suggestions around supervision across its 14,000 membership and led to SWU lobbying politicians. Through working with Ravalier, these lobbying efforts led directly to debates in the House of Lords and questions asked of ministers in the House of Commons.</p>		
2. Underpinning research		
<p>Stress and mental ill health are the biggest cause of sickness absence in the UK (over 15 million working days and 57% of sickness absence), with the health and social care sectors having the highest levels of all. Staff wellbeing in the health and social care sectors is particularly important because poor psychosocial working conditions lead to severely worsened service user outcomes in social care (as in the case of Baby P, for example) and patient outcomes in healthcare (as measured by morbidity and mortality). Projects such as The Healthier Outcomes at Work Social Work (HOW) project, which seek to support and improve psychosocial working conditions and alleviate stress in health and social care, are therefore of great importance to society.</p> <p>Ravalier and Loon's research addresses these issues in a number of innovative ways. In 2017 and 2018, Ravalier's social work working conditions report (R3, R6) used the UK Health and Safety Executive's management standards, as well as measures of job satisfaction, turnover intentions, and presenteeism. Working conditions were found to be chronically poor: 6 of the 7 conditions measured in the management standards approach (demands, control, managerial support, relationships, role, and change) were at chronically poor levels.</p>		

Focused on informal management practices, research by Loon et al. (R1) demonstrates how a reform of such practices can complement policy and systems in addressing staff mental wellbeing. It allows organisations to address the growing issue of poor wellbeing while balancing the need to maintain productivity. Loon et al. argue that a more nuanced approach in the design and use of HR practices is crucial in maintaining equilibrium.

More recent research by Ravalier et al. (R2) addresses the fact that the NHS has a higher-than-average level of stress-related sickness absence and seeks to improve the psychosocial working conditions and wellbeing of NHS staff through an analysis of the influence of working conditions on staff stress levels and mental wellbeing. The study highlights the need for better understanding of and support for wellbeing at work, the role of positive working relationships between staff and management in enhancing wellbeing, and the importance of two-way communication between these groups, which can also increase job satisfaction and reduce sickness absence.

Ravalier has investigated the influence of psycho-social working conditions on stress and related outcomes: sickness presenteeism, job satisfaction and turnover intentions among UK social workers (R6). The results show that social worker stress was associated with interactions between high demands, low levels of control and poor managerial support. Other findings include the presence of poor ergonomic set-up of the work environment and a blame culture that adds to social workers' levels of stress.

Ravalier's research (R3) argues that social workers play a vital role in maintaining and improving the lives of the service users with whom they work. They have high levels of stress-related sickness absence and staff churn (turnover), and low levels of job satisfaction, as well as poor working conditions. The study found that heavy workloads, a lack of managerial support, and service user/family abuse were distinct problems associated with the role, whereas positive resources were the perception of the importance of the social work role, peer support and positive managerial support.

The HOW Social Work project collected data via surveys and interviews with social workers to address key issues affecting mental wellbeing: workload demands, relationships with peers, management and services users, and the way in which change is communicated. Research by Ravalier, Loon and others (R4) highlights how management should support individuals in terms of developing peer and managerial support and adopting best practice in reflective supervision. It argues that a more robust system of caseload allocation would significantly alleviate workload pressures.

The key aim of the HOW project was to work with UK social workers to co-develop, implement, and evaluate a series of smartphone-based mental health initiatives (R5). Participatory Action Research with social workers was used to design the mental health and wellbeing interventions. These interventions include psycho-education, top-down and bottom-up communication improvements, and access to a Vocational Rehabilitation Assistant for those struggling and at risk of sickness absence. Although the collection of post-intervention data was affected by COVID-19, the project demonstrated the positive impact of co-developed initiatives.

3. References to the research

R1 Loon, M, Otaye-Ebede, L and Stewart, J (2019) '[The paradox of employee psychological well-being practices: an integrative literature review and new directions for research.](#)' *The International Journal of Human Resource Management*, 30 (1). pp. 156-187

R2 Ravalier, J.M, McVicar, A and Boichat, C (2020) '[Work stress in NHS employees: a mixed-methods study.](#)' *International Journal of Environmental Research and Public Health*, 17 (18). e6464

R3 Ravalier, J.M, McFadden, P, Boichat, C, Claburn, O and Moriarty, J (2021) '[Social worker well-being: a large mixed-methods study.](#)' *The British Journal of Social Work*, 51 (1). pp. 297-317

R4 Ravalier, J.M, Wainwright, E, Claburn, O, Loon, M and Smyth, N (2020) '[Working conditions and wellbeing in UK social workers.](#)' *Journal of Social Work*

R5 Ravalier, J.M, Wainwright, E, Smyth, N, Claburn, O, Wegrzynek, P and Loon, M (2020) '[Co-creating and evaluating an app-based well-being intervention: the HOW \(Healthier Outcomes at Work\) Social Work project.](#)' *International Journal of Environmental Research and Public Health*, 17 (23). e8730

R6 Ravalier, J.M (2018) '[Psycho-social working conditions and stress in UK social workers.](#)' *British Journal of Social Work*, 49 (2). pp. 371-390

Underpinning grants:

- Ravalier (PI), Loon (Co-I), *The HOW Social Work Project* (2018-2020), DWP Challenge Fund, GBP234,558
- Ravalier (PI), *Co-creating a healthier NHS* (2018-2020), ESRC, GBP218,064

4. Details of the impact

Mental health and wellbeing are key considerations for employers, employees, and service users alike. In the UK, social care has among the highest levels of stress and mental health sickness absence of all UK occupational sectors, exacerbated by chronically poor working conditions. The HOW Social Work project wellbeing app was designed to support the mental wellbeing of social work professionals with the aim of addressing the issues identified in the underpinning research of this impact case study, focussing on the considerable problem of work stress resulting in high levels of absences and staff turnover. Ravalier and Loon's research has created a range of initiatives and interventions to improve the health and wellbeing of social workers, which have supported a greater sense of agency and resilience for individuals as well as organisational changes to support their employees' wellbeing proactively. Ravalier's research has also influenced the national conversation around the working conditions of social workers, through a new campaign with the Social Workers Union (SWU), to support its 14,000 membership, and led to debates in the House of Lords and questions asked of ministers in the House of Commons.

Improving the health and wellbeing of social workers

The initial survey of social workers at Central Bedfordshire Council (recorded in E8) revealed that although staff were highly engaged, 5 of the 7 working conditions investigated were poor. Demands (workload), control (the amount of autonomy an individual has over in their role), peer support (from colleagues), relationships (whether there are strained relationships between colleagues), and individuals' understanding of their role in the organisation, each scored in the 5th percentile. These were worse scores than for 95% of the rest of the UK working population and meant that these conditions needed to be the top priorities for change (E8, p10-11).

The HOW app was co-developed and implemented with social work professionals and their managers (E1) from 7 local authorities (including Bedfordshire) based in the Midlands, South West, and North East of England. The app contains generic and bespoke components tailored to the needs and services of individual local authorities. These included psycho-education so that individuals have a greater understanding of the signs and symptoms of ill psychological wellbeing, an improved bottom-up system of communication, bespoke peer support group sessions, and access to a trained Vocational Rehabilitation professional to support those at risk of leaving work due to mental health sickness absence by coaching in self-efficacy and communication skills, and supporting the implementation of organisational adjustments to support healthy work.

A study of the impact of the app was undertaken across all participating local authorities. The results (E1) show a clear association between using the app and participants recording a sense of feeling more in control and empowered in relation to changes in their organisation. Participants reported that the app represented an invaluable 'one-stop shop' for matters related to wellbeing in their respective organisations. The app has also helped to alleviate feelings of loneliness and isolation caused by working from home during the pandemic (E4).

As part of the evaluation of the impact of the research, we undertook a detailed investigation with Central Bedfordshire Council into the impact of the app. A report by the Council's Principle

Social Worker and Head of Safeguarding and Quality Improvement outlines the key advantages of the app:

[it] offers colleagues information and benefits to recognise the signs and symptoms of stress, where to access help in our organisation and beyond as well as information on ways to improve wellbeing, including local peer led wellbeing events (yoga lessons, team meditations, group guided, meditations, team walks...). (E5, p2)

A particularly innovative feature of the app is its “capacity to suggest and submit ways to improve the organisation and individual support from a dedicated occupational therapist to assist with work related challenges” (E5, p2).

The project was directly responsible for the improvement of the Council’s support systems, wellbeing promotion, peer-led initiatives, and practice guides, which is clear in the evaluation (E5). The Council’s management team shared the impact the research has had on their staff and the organisation as a whole (E3 and E4). Case workers and their managers highlighted the particular benefits of data visualisation provided by the app, leading to improved wellbeing: “I felt good to see a pictorial representation of my work life. I’m actually feeling pretty good about work”; “Maps were brilliant – able to visualise how the various areas of wellbeing are at this point in time and where improvement may be required” (E5, p2). The project has raised the profile of employees’ wellbeing not only amongst staff teams but also across the Council and beyond (E3 and E4).

This project with Bath Spa University developing the Wellbeing App has reminded us [...] how such an initiative can be valued by so many practitioners. The most resounding outcome is that staff are feeling valued and supported. [...] our example will motivate and mobilise the wider wellbeing strategy to be more ambitious, more conscious and more widespread across the whole council allowing professionals to thrive and not just survive (E5).

The app prompted social work teams to implement further wellbeing strategies and also to make a ‘wellbeing offer’ of activities and training available to all staff (E3, E5). The research project also sparked other interventions such as the creation of ‘Wellbeing Action Plans with Guidance for Managers’ (E6) – a preventative tool to identify triggers and symptoms of stress for individuals, facilitate discussion about stress-addressing interventions, and provide information about the individual support available. This preventative initiative has been very well received as a mechanism to encourage conversations about wellbeing and to identify difficulties early on so that staff can access formal or informal support before the situation escalates. Staff involved in the Wellbeing Action Plan pilot emphasised that the strategy encouraged them to reflect and identify personalised ‘really constructive’ strategies: “[the plan] makes you think about what you can do to help yourself stay healthy and avoid the triggers where possible”, and where they are unavoidable, “it does give you confidence to manage the triggers of stress in an effective way that is personal to you. Without the action plan we do not always stop to reflect and consider this”; “a proactive way so that you were prepared if/when times of stress occurred – or to prevent them from happening in the first place” (E5, p3).

The success of the app also led to the development of a COVID-19 ‘Support for End of Life and Bereavement Care Staff Guide’ (E7) which was shared with the Bedfordshire local authority’s care homes and key external providers. It was particularly valuable, given the impact of COVID-19 and the number of deaths in care homes. The local authority also created a programme of wellbeing courses to support staff in a variety of areas through meditation sessions, for example ‘Professional Trauma’, ‘Dealing with Worries’, ‘The Importance of Sleep’, ‘Maintaining Motivation’, and ‘Calming the Mind’ (E3, E4). A suite of managerial courses to support staff wellbeing (E7) has also been developed as a consequence of the project. Bedfordshire local authority reported a reduction in sick leave days taken from 4.60 to 4.26 per person per year (a considerable drop in real terms) and a reduction in staff turnover from 9.71% to 7.65% from January to September 2020 compared to the same period in the previous year (E3). The local authority also reports that staff are more resilient due to the supportive community created by the app (E4).

Influencing the national conversation on social work working conditions

The research project has also had wider impact on local authorities and their health and social care partners across the UK. The project directly led the Social Workers' Union (SWU) to launch its Professional Working Conditions campaign to improve conditions for social workers across the UK, and provided support for implementation of support mechanisms to its 14,000 membership (E9). Ravalier conducts an annual 'state of the workforce' survey of social worker working conditions, stress, and mental health for SWU. In collaboration with the project team, the SWU's work has led to debates in both the House of Lords and the House of Commons. In the summer of 2018, Maria Eagle MP questioned ministers on what was being done about high caseloads, while Tracey Brabin MP (then Shadow Minister for Early Years), Conor McGinn MP and George Howarth MP raised similar concerns. Similarly, in May 2018 Lord Kennedy of Southwark brought forward a debate on strategies to alleviate the work demands faced by social workers. Yvonne Fovargue MP (then Shadow Minister for Housing, Communities and Local Government) also raised the campaign in the House of Commons in May 2018 and asked what action was being taken to reduce the demands faced by social workers to "[avoid a disastrous exodus of talent and expertise](#)" (E10). Finally, the SWU has recently (August 2020) launched the '[Social Worker Wellbeing and Working Conditions: Good Practice Toolkit](#)'. This toolkit is informed by the HOW project and provides a lasting legacy for research.

The HOW project has made a significant demonstrable impact by improving stress and wellbeing outcomes for practitioners in key areas of health and social care and through the Good Practice Toolkit, it will continue to support the health and wellbeing of social workers.

5. Sources to corroborate the impact

E1 Ravalier, J.M, Wainwright, E, Smyth, N, Clabburn, O, Wegrzynek, P and Loon, M (2020) '[Co-creating and evaluating an app-based well-being intervention: the HOW \(Healthier Outcomes at Work\) Social Work project.](#)' *International Journal of Environmental Research and Public Health*, 17 (23). e8730

E2 Department of Health and Social Care (11 May 2020), [Guidance on health and wellbeing of the adult social care workforce.](#)

E3 Testimonial from Principal Social Worker and Head of Safeguarding and Quality Improvement (Social Care, Health and Housing, Central Bedfordshire Council).

E4 Testimonial from Team Manager and Social Worker (Social Care, Health and Housing, Central Bedfordshire Council).

E5 The report submitted by Principal Social Worker and Head of Safeguarding and Quality Improvement (Social Care, Health and Housing, Central Bedfordshire Council) summarising the impact of the project on the organisation.

E6 The wellbeing action plan and guidance for managers developed based on recommendations from the HOW Social Work Project.

E7 Part of the impact of the HOW project is an app to assist social workers who needed support 'on demand'. Central Bedfordshire have uploaded a guide to this app to provide end of life support and bereavement care for staff. Such guides have become immensely helpful resources for staff, building their professional confidence and thus improving their overall wellbeing at work.

E8 Final report for the Department of Health and Social Care, upon the completion of the client-funded project 'HOW Social Work Project (Healthier Outcomes at Work) Challenge Fund'.

E9 Testimonial from the General Secretary / CEO of the Social Workers Union.

E10 Hansard record of House of Commons debate May 2018