

Wales COVID-19 Evidence Centre (WCEC) Rapid Review

What innovations help to attract, recruit and retain social care
workers within the UK context?

Report number – RR00026 (December 2021)

Rapid Review Details

Review conducted by:

Wales Centre for Evidenced Care

Review Team:

- Deborah Edwards
- Judit Csontos
- Liz Gillen
- Maggie Hendry
- Judith Carrier

Review submitted to the WC19EC on:

30th November 2021

Stakeholder consultation meeting:

30th November 2021

Rapid Review report issued by the WC19EC on:

06 January 2022

WC19EC Team:

- Adrian Edwards, Alison Cooper, Ruth Lewis, Becki Law, Jane Greenwell involved in drafting, Topline Summary and editing

This review should be cited as:

Report RR_00026. Wales COVID-19 Evidence Centre. A rapid review of the innovations that help to attract, recruit and retain social care workers within the UK context. December 2021

http://www.primecentre.wales/resources/RR00026_Wales_COVID-19_Evidence_Centre_Rapid_review_of_Social_Care_Recruitment_December_2021.pdf

Disclaimer: The views expressed in this publication are those of the authors, not necessarily Health and Care Research Wales. The WCEC and authors of this work declare that they have no conflict of interest.

What innovations help to attract, recruit and retain social care workers within the UK context?

Report number – RR00026 (December 2021)

TOPLINE SUMMARY

What is a Rapid Review?

Our rapid reviews use a variation of the systematic review approach, abbreviating or omitting some components to generate the evidence to inform stakeholders promptly whilst maintaining attention to bias. They follow the methodological recommendations and minimum standards for conducting and reporting rapid reviews, including a structured protocol, systematic search, screening, data extraction, critical appraisal, and evidence synthesis to answer a specific question and identify key research gaps. They take 1-2 months, depending on the breadth and complexity of the research topic/ question(s), extent of the evidence base, and type of analysis required for synthesis.

Background / Aim of Rapid Review

The shortage of social care workforce and the pressure that the social care sector is under predates the COVID-19 pandemic. However, since Brexit, international recruitment of health professionals including those working within social care has become problematic. The added challenge of the COVID-19 pandemic has further affected attracting, recruiting and retaining staff within the social care sector. **We aimed to explore the evidence for innovations to attract, recruit and retain social care workers and understand which factors influence turnover within the UK context.**

Key Findings

Extent of the evidence base

- **13 UK articles involving social workers** (professionals working with children and adults to protect them from harm, often working as case managers)
Primary studies (n=10), organisational reports (n=2), narrative review (n=1)
- **28 UK articles involving the social care workforce** (workers who provide direct practical support to children and adults with their daily activities)
Primary studies (n=16), organisational reports (n=9), narrative reviews (n=3)

Recency of the evidence base

- Studies were published **2001-2021**, largely pre-pandemic
- **Findings may not be fully generalisable to the circumstances brought on by the pandemic and Brexit**

Evidence of effectiveness for social workers

- **Nine innovations were described** across the evidence base to attract, recruit and retain social workers; of these **only three were evaluated**
- **Pre-employment initiatives** including practice-based learning activities may contribute to retention (mixed methods evidence)
- **Graduates of fast-track programmes** may be more likely to remain in employment, thus contributing to increased retention (mixed methods evidence)

- **Apprenticeships** are a potentially impactful way to train and then retain social workers (mixed methods evidence)
- Frequently cited factors causing social workers to leave were identified as: **high caseloads and excessive workload, combined with organisational stress.**
- There was **no evidence identified** that explored **increasing diversity or good working conditions** for social workers

*Evidence of effectiveness for **social care workers***

- **11 innovations** were described to attract, recruit and retain the wider social care workforce across the evidence base; **only four were evaluated**
- **Care workers as ambassadors** to promote career opportunities can have a positive impact on attraction, recruitment and retention levels of new staff and the ambassadors themselves feel more valued and more likely to stay with their current employer (mixed methods evidence)
- **Pre-employment training initiatives** such as the Care First Careers Pilot scheme are important in building basic care skills, interview preparation and confidence and can enhance recruitment (mixed methods evidence)
- **National recruitment campaigns**, specifically 'Every day is different' campaign saw an increase in enquiries and applications (attraction), and interviews and vacancies filled (recruitment) (organisational report evidence)
- **Values-based recruitment** has resulted in lower recruitment costs, positive return on investment, lower staff turnover and better staff performance (mixed methods and quantitative descriptive evidence)
- Negative factors affecting turnover were identified as: **poor terms and conditions, low pay, unsociable working hours, and inexperience** of both employees and managers.
- Positive factors included: **pay and retention bonuses, good working environment and celebrating achievements**

Policy Implications

- **Systemic and structural factors need addressing** for both social workers and social care workers including high case load and working conditions.
- Despite a **proliferation of initiatives** to promote attraction, recruitment and retention, there has been **very little robust evaluation** of specific approaches. Future policy initiatives should **include evaluation planning from the outset** to develop a more extensive evidence base.
- **Research funders should also be encouraged to design funding schemes to support research in this area.**
- Based on the available evidence, several approaches show promise. For social work, these include **a focus on practice learning which is well-embedded in local authorities, supportive induction and development activity, fast track graduate schemes, and diverse career pathways.** Social Care Wales are currently devising a new social work framework for Wales that will consider these approaches.
- For social care, there is a general acceptance in the literature that **campaigns to promote care work** are necessary and important, to **counter the negative perceptions and low status of care work.**

Strength of Evidence

Poor reporting of methods so the quality of most of the work informing this rapid review is of **low quality.**

TABLE OF CONTENTS

TABLE OF CONTENTS	4
1. BACKGROUND.....	7
1.1 Purpose of this review	7
2. RESULTS.....	7
2.1. Overview of the evidence base for social workers.....	8
2.1.1. Innovations that help to attract, recruit and retain.....	8
2.1.1.1. Workforce planning	8
2.1.1.2. Increasing diversity	8
2.1.1.3. Promoting career opportunities	9
2.1.1.4. Pre-employment initiatives	9
2.1.1.5. Local and national recruitment campaigns.....	9
2.1.1.6. Values-based recruitment	9
2.1.1.7. Supportive induction and development.....	10
2.1.1.8. Pay, rewards and recognition.....	10
2.1.1.9. Training and career development.....	11
2.1.1.10. Apprenticeships.....	14
2.1.1.11. Good working conditions.....	14
2.1.2. Factors affecting turnover rates for social workers	14
2.1.3. Bottom line for social workers.....	15
2.2. Overview of the evidence base for the social care workforce.....	18
2.2.1. Innovations that help to attract, recruit and retain.....	18
2.2.1.1. Workforce planning	18
2.2.1.2. Increasing diversity	18
2.2.1.3. Promoting career opportunities	19
2.2.1.4. Pre-employment initiatives	20
2.2.1.5. Local and national recruitment campaigns.....	21
2.2.1.6. Values-based recruitment	21
2.2.1.7. Supportive induction and development.....	23
2.2.1.8. Pay, rewards and recognition.....	24
2.2.1.9. Training and career development.....	26
2.2.1.10. Apprenticeships.....	27
2.2.1.11. Good working conditions.....	28
2.2.3. Factors affecting turnover rates for the social care workforce.....	29
2.2.4. Bottom line results for the social care workforce.....	30
3. DISCUSSION.....	33

3.1 Summary of the findings	33
3.2 Limitations of the available evidence	34
3.3 Quality of the available evidence	34
3.3 Implications for policy and practice	35
3.4 Strengths and limitations of this Rapid Review	36
4. REFERENCES.....	37
5. RAPID REVIEW METHODS	42
5.1 Eligibility criteria	42
5.2 Literature search.....	42
5.3 Study selection process.....	43
5.4 Data extraction.....	43
5.5 Quality appraisal	43
5.6 Synthesis	44
6. EVIDENCE	44
6.1 Study selection flow chart	44
6.2 Additional information available	44
7. ADDITIONAL INFORMATION.....	44
7.1 Conflicts of interest	44
7.2 Acknowledgements.....	44
8. APPENDICES	47

Abbreviations:

Acronym	Full Description
ADASS	Association of Directors of Adult Social Services
CPA	Care Providers Alliance
CPD	Continuing Professional Development
CSA	Care and Support Alliance
CQC	Care Quality Commission
DBS	Disclosure and Barring Service
GYOS	Grow Your Own Scheme
LGA	Local Government Association
MMAT	Mixed Methods Appraisal Tool
PET	Pre-employment training
PPQ	Personality profiling questionnaire
SCIE	Social Care Institute for Excellence
SFC	Skills for Care
SUSW	Step Up to Social Work
TLAP	Think Local Act Personal
VBRT	Values-based recruitment toolkit

1. BACKGROUND

This Rapid Review is being conducted as part of the Wales COVID-19 Evidence Centre Work Programme. The above question was suggested by Social Care Wales.

1.1 Purpose of this review

The shortage of social care workforce and the pressure that the social care sector is under predates the COVID-19 pandemic (CQC 2021, The King's Fund 2018) and it was acknowledged that "concerted action was needed to improve retention and active support for international recruitment" (The King's Fund 2018 p. 7). Since Brexit however, international recruitment of professionals from across the health and care sector has become problematic (Devi et al. 2021) and with the added impact of the COVID-19 pandemic the challenge of attracting, recruiting, and retaining staff needs to be urgently addressed (CQC 2021; Devi et al. 2021). In preparing a rapid evidence summary we found a number of systematic reviews based on international literature that focussed on innovations that might help to attract, recruit and retain social workers and social care workers. However, the commissioning brief presented by our stakeholder group from Social Care Wales was to look for evidence within the UK context. Our initial searches identified that there was sufficient evidence to undertake a rapid review in this area.

The question for this rapid review is as follows:

What innovations help to attract, recruit, and retain social care workers and which factors influence turnover within the UK context?

2. RESULTS

Of the 1,835 citations retrieved from our searches, 40 met our eligibility criteria. These focused on social workers (n=13) and the social care workforce (n=28). One study was reported across two publications (Parker & Whitfield 2006, Parker et al. 2006) and for the purposes of this rapid review from this point on we will only reference the main report which is Parker & Whitfield (2006). One study and one review focused on the social service workforce which included both social workers and the wider social care workforce (Mulholland et al. 2017, Social Work Services Strategic Forum 2016). For details of the included studies see Tables 1 to 5.

In this rapid review, the literature was divided into two parts based on the group of professionals the interventions aimed at, namely social workers and the wider social care workforce. For the purposes of this rapid review, social workers and the social care workforce are defined below.

The British Association of Social Workers (2021) state the "social workers aim to improve people's lives by helping with social and interpersonal difficulties, promoting human rights and wellbeing. Social workers protect children and adults with support needs from harm." This can range from helping keep families under pressure together to supporting people with mental health problems. In the UK, social workers are generally employed by local authorities.

The social care workforce provides direct support to adults, such as personal care or practical assistance, because of needs related to age, illness or disability, to help them live their lives as comfortably and independently as possible (TLAP 2021). For adult social care in the UK, this includes residential care, domiciliary (home) care, and care in other settings such as day centres or extra care housing. Workers are employed across a range of local authority, independent and third sector employers (All Party Parliamentary Group on Adult Social Care 2021). For children, in England, Scotland and Wales local authorities have a number of statutory duties in relation to the children taken into their care and are obliged to safeguard and promote their welfare, including through the provision of accommodation and care (Competition & Markets Authority 2021).

2.1. Overview of the evidence base for social workers

Ten primary research studies, two organisational reports (non-research) and one narrative review provide information about recruitment and retention issues in the field of child and adult social work and provide some insight into innovations that help to attract, recruit, and retain social workers within the UK context.

The primary research studies focused either on child (n=4), adult (n=1) or mixed settings (n=5) with employers (n=2), employees (n=4) or both employers and employees (n=4). The authors described one further study as being conducted in a social work and higher education setting. The research was conducted in England (n=8), Scotland (n=1) or Wales (n=1). The study designs were mixed methods approach (n=8), qualitative descriptive (n=1) or quantitative descriptive (n=1).

2.1.1. Innovations that help to attract, recruit and retain

Categories of innovations to attract, recruit and retain social workers are workforce planning, increasing diversity, promoting career opportunities, pre-employment initiatives, local and national recruitment campaigns, values-based recruitment, supportive induction and development, pay, rewards and recognition, training and career development, apprenticeships and good working conditions.

2.1.1.1. Workforce planning

One organisational report (non-research) discussed that for effective workforce planning to occur, systems should be used to make sure that the right number of social workers, with the right skills and experience are available to meet service demands both current and future (LGA 2015).

Evaluation

We did not find any evidence regarding the evaluation of this area as part of this rapid review.

2.1.1.2. Increasing diversity

We did not find any evidence regarding recruiting social workers from a diverse range of backgrounds as part of this rapid review.

Evaluation

We did not find any evidence regarding the evaluation of this area as part of this rapid review.

2.1.1.3. Promoting career opportunities

One organisational report (non-research) made reference to career promoting activities for social workers such as the development a specific campaign, in partnership with employers, promoting the Social Work Degree as a career choice (Social Care Wales 2021).

Evaluation

We did not find any evidence regarding the evaluation of this area as part of this rapid review.

2.1.1.4. Pre-employment initiatives

Two primary research studies (Baginsky et al. 2010, Parker & Whitfield 2006) explored practice(-based) learning opportunities and placements and asked how these contribute to the retention of experienced social work staff. While there is no single definition for practice learning (Nixon & Murr 2006), in the context of the included primary research studies it refers to learning via practicing social work and placements as a minimum requirement for a qualification (Parker & Whitfield 2006).

Baginsky et al. (2010) interviewed senior managers regarding recruitment and retention of social workers, and practice learning, and placements were discussed as an entry into the profession. Practice learning was seen as a **potential way to recruit new staff**, particularly if students had a positive placement experience, which was highly dependent on the quality of practice teachers. However, senior managers mentioned that taking on students and providing placement can put additional strain on staff, particularly in child services as caseloads were high.

Evaluation

Parker & Whitfield (2006) conducted interviews with practice teachers and newly qualified social workers who felt that there was evidence of an association between practice learning activities and the recruitment and retention of staff. The authors reported that practice learning is becoming increasingly embedded within local authorities and has an important part to play in the future recruitment of social workers.

2.1.1.5. Local and national recruitment campaigns

One primary research study and one organisational report (non-research) highlighted a case study of a local (LGA 2015) and national recruitment campaign (Smith et al. 2013).

Evaluation

We did not find any evidence regarding the evaluation of this area as part of this rapid review.

2.1.1.6. Values-based recruitment

One organisational report (non-research) mentioned a values-based approach to recruitment and suggested that recruitment practice and market development are crucial to attracting the right people with the right skills and values (LGA 2014).

Evaluation

We did not find any evidence regarding the evaluation of this area as part of this rapid review.

2.1.1.7. Supportive induction and development

Two primary research studies reported about supportive induction to prepare newly qualified social workers (Baginsky et al. 2010, Baginsky 2013). Senior managers and leaders recognised that they had a responsibility to provide good induction, supervision and support and provided examples of how they were going about this (Baginsky et al. 2010). Baginsky (2013) reported a case where an authority provided a supportive environment via reduced caseloads and extensive training to prepare newly qualified social workers. New social workers had support from managers, senior staff members, coordinators, and administrators and following the intensive support, newly qualified social workers were able to go into teams independently in six months.

Evaluation

We did not find any evidence regarding the evaluation of this area as part of this rapid review.

2.1.1.8. Pay, rewards and recognition

Three primary research studies, one organisational report (non-research) and one review article explored the issue of pay, rewards and/or recognition (Baginsky et al. 2010, Evans & Huxley 2009, LGA 2014, Parker & Whitfield 2006, Social Work Services Strategic Forum 2016).

The LGA (2014) noted that **basic pay has never been reported by social workers as a reason that influences them to leave jobs**, although when experienced staff move between employers this maybe an influencing factor. They suggested that **employers should consider a rewards and benefits programme that goes beyond basic pay** to help retain social workers (LGA 2014). A number of schemes have been reported across the literature (Baginsky et al. 2010, LGA 2014, Parker & Whitfield 2006, Social Work Services Strategic Forum 2016) and include:

- payment of higher rates for out of hours work
- use of career grade progression schemes
- lump sum retention payments
- market supplements
- lump sum long-service payments
- career break opportunities
- flexible working hours
- payment of professional fees to qualified post holders
- mobile phone provision.
- 'golden hellos'
- 'golden handcuffs'
- relocation allowances
- lease cars
- rent-buy schemes

Newly qualified social workers in the study by Parker & Whitfield (2006) reported the use of special incentives in the form of one-off payments and accelerated progression to attract new recruits. The Chief Social Work Officer Annual reports identified work that Aberdeen and Aberdeenshire were offering a council house for a year as part of an incentive package (Social Work Services Strategic Forum 2016). It is not known with any certainty whether any of these initiatives are effective to recruit and retain social workers on the middle or long-term (Baginsky et al. 2010). As a result, some councils report that some financial initiatives were discontinued as these were seen as increasing competition for staff between authorities (Baginsky et al. 2010). Some authorities mention examples of competition and how they deal with it. For example, one authority promotes career change or progression opportunities to its staff and new recruits within its confines alongside various incentives and awards (Baginsky et al. 2010). Others attract social workers with higher salaries than offered in their current workplace, where working conditions, including caseload and staff support are better (Baginsky et al. 2010). Evans & Huxley (2009) conducted an analysis of vacancy rates and factors and reported that pay and benefits schemes such as increased salaries or golden hellos were not associated with lower staff turnover. They also surveyed social workers and the results indicated that over half of the respondents (52.4%) would have been more likely to stay in their employment if they received enhanced salaries and just over a third would have liked to receive payment for additional duties (34.3%) and wanted employers to pay for their registration fees (35.2%) (Evans & Huxley 2009).

Evaluation

We did not find any evidence regarding the evaluation of this area as part of this rapid review.

2.1.1.9. Training and career development

Seven primary studies and two organisational reports (non-research) explored training and/or career development initiatives which included training for managers, development of a senior social work practitioner role, grow your own schemes (GYOS) and fast track graduate schemes (Baginsky et al. 2010, Baginsky & Manthorpe 2016, Holmes et al. 2013, LGA 2014; Mulholland et al. 2017, Parker & Whitfield 2006, Scourfield et al. 2020, Smith et al. 2013, Smith et al. 2018).

It is acknowledged that there are significant problems with the retention of effective social workers and that clear career progression routes that recognise experience are needed (Baginsky et al. 2010, Baginsky 2013, Holmes et al. 2013, Mulholland et al. 2017). In most cases it was noted that career progression for social workers is through more administrative or managerial positions. Some employers gave examples of initiatives designed to provide additional support such as coaching or mentoring to allow social workers to progress their careers while staying in practice rather than move into a managerial position. Specific posts at the level of Advanced Practitioner and Senior Social Worker had been developed in order to assist with the day-to-day supervision and support of newly qualified social workers, as well as to provide additional support across teams (Baginsky 2013). Baginsky et al. (2010) reported that in some areas the introduction of the Senior Social Work Practitioner role had helped to attract experienced staff from other authorities. Holmes et al. (2013) suggested establishing more diverse career routes for social workers that include an emphasis on development of 'practice educator' positions to supervise training and continuing professional development.

Training for first line managers

Baginsky et al. (2010) interviewed senior managers from 52 authorities, including child and adult social services. There was a difference in how training for first line managers was provided in adult and child services. In adult social care most authorities offered specific training packages for first line managers, which often covered generic leadership and development skills, or prepared senior staff for their managerial responsibilities to avoid them being overwhelmed when newly appointed. However, some adult social care authorities reported more ad hoc and less specialized training for management staff. This ad hoc training provision was similar in child services, where some short courses were offered for first line managers, although majority of children's social care authorities reported that managerial training was neglected and under-resourced (Baginsky et al. 2010).

Continuing Professional Development

Baginsky et al. (2010) also explored Continuing Professional Development (CPD) opportunities for social workers as part of their study. While at the time when this research was conducted in 2009 there was a UK-wide CPD framework for social workers, there was variability in how training provision was approached within and between adult and child services. In adult services, CPD opportunities could be provided within the organization or by several authorities joining together, which was seen as a more economical way for training provision. In authorities where in-house training was available, significant priority and resources were given to CPD, while other authorities outsourced training or provided a mixture of in-house and outsourced training. In child social services, similar to adult services, there were variations in how CPD and training provision was handled. Some authorities provided in-house training or opportunities for external training. Moreover, training plans via appraisal or supervision, and training needs assessment were available, which also helped authorities focus on what training to commission. However, one third of authorities participating in the study reported a lack of structure in training assessment and provision due to limited guidance and resources. While authorities were committed to CPD and research activities, some employers expressed that there was a need for a structured CPD and competency framework for social workers. However, **issues with retaining experienced social workers and high caseloads were seen as a barrier to creating any CPD or competency frameworks** (Baginsky et al. 2010).

Grow your own schemes

Grow your own schemes (GYOS) covers two main activities, namely secondment and traineeships and can be offered by local authorities and other agencies, although their provision has been on the decline (Baginsky et al. 2010). Baginsky et al. (2010) explored the reasons for the decline in the provision of GYOS by interviewing senior officers in both adult and children's services. In adult services, some authorities stopped providing GYOS as they had no issues with recruitment and others had no need for new social workers. In places where GYOS was still provided, it was seen advantageous, as participants of the scheme were high calibre who were committed to their organisation, contributing to higher retention rates. In addition, GYOS strengthened relationships between adult service providers and higher education institutes. However, disadvantages of these programmes were identified as high costs, and the impact of secondment on the workload of other staff members. In children's services, GYOS were stopped in some local authorities, due to funding issues, and concern about the quality of trainees. Some authorities experienced that their staff graduating from GYOS had shortfalls in their academic skills compared to their traditionally trained

counterparts. However, other authorities mentioned that the issues were not with the quality of training or graduates, but that these schemes stopped bringing in 'new blood' into children's services, as GYOS graduates were picked from existing staff (Baginsky et al. 2010). This is supported by Parker & Whitfield's (2006) research, who found that while GYOS **increased the number of qualified social workers, they did not increase diversity of the workforce** as the pool of local workers were used, people who were already committed to social care.

Fast track graduate schemes

The literature describes two fast track graduate schemes in England, namely Step up to social work (SUSW) (Baginsky & Manthorpe 2016, Scourfield et al. 2020, Smith et al. 2013, Smith et al. 2018) and Frontline (Scourfield et al. 2020). These fast-track programmes are intensive courses providing increased work experience via extensive placements and support in the field of child and family social work. Both Frontline and SUSW provide a new entry route into social work with a Postgraduate Diploma in social work upon completion. Frontline aims to attract high-achieving graduates into child and family social work via a two-year programme which integrates theory and practice. Students are allocated to placement in a local authority, alongside which they receive theoretical education (Scourfield et al. 2020). Step up to social work is a 14-month long programme aiming to attract high-achieving graduates and career changers who would like to qualify as a social worker. Step up to social work is designed to provide intensive hands-on, practice-based learning, alongside academic progression (Baginsky & Manthorpe 2016, Scourfield et al. 2020, Smith et al. 2013, Smith et al. 2018).

Evaluation

Four studies have been conducted to investigate the impact of SUSW on the entry and retention of social workers in the field of child and family social care and one further research study focused on Frontline. Smith et al. (2013) reported on the development and first few years of SUSW. Representatives of local authorities where SUSW trainees were allocated reported that students were high quality and often actively contributed to practice development (Smith et al. 2013). Local authority representatives mentioned that SUSW programmes improved relationships between social care providers and academic institutions, and the recruitment process developed for SUSW could be used in wider social care workforce recruitment (Smith et al. 2013). Baginsky & Manthorpe (2016) investigated the experiences of the first SUSW cohort two and a half years post qualification, while Smith et al. (2018) investigated the first and second cohorts at three- and five-years post qualification. Baginsky & Manthorpe (2016) reported that 82% (106/130) of the first cohort still worked in children's social work services, and of these 58% (76/106) were still employed at the local authority where they trained. However, out of all those currently working in either children's or adult services around 37% indicated that they only want to stay in their current employment for 12 months or less. However, it was noted that not all of these responders would want to leave social work altogether. Around 28% of respondents (36/130) have already changed employers or have left child services two and a half years post-graduation (Baginsky & Manthorpe 2016). The main reasons for changing employers or leaving was high caseloads. Other factors included insufficient supervision, poor management, and dissonance between social work values and practice (Baginsky & Manthorpe 2016). Retention rates three years post-graduation were 85% (cohort 1) and 80% (cohort 2), while this percentage dropped to 73% (cohort 1) five years post-graduation (Smith et al. 2018). Regarding SUSW graduates' intention to leave, findings from surveys and interviews with SUSW cohorts were compared to a group of social workers who trained via generic social worker courses. Findings indicated that **SUSW graduates**

might be more likely to remain in children's services than their comparators trained via the generic social work route, although this difference is not shown to be statistically significant (Smith et al. 2018).

Scourfield et al. (2020) set out to track the career progression of one SUSW cohort (cohort 4) and four different Frontline cohorts (cohort 1, 2, 3, and 4). In this study, due to the limited availability of professional registration data to follow fast-track programme graduates throughout their practice, authors referred to attrition instead of retention rate. The attrition of SUSW cohort 4, which indicated the ratio of graduates who left children's services, was 11% 18 months post-graduation. Attrition rate of Frontline programme cohorts ranged between 5% (cohort 2) and 14% (cohort 3) 18 months post-graduation. Attrition rate three years post-graduation was 29% for Frontline cohort 1, while this data was not yet available for SUSW cohort 4. Thus, authors compared attrition of Frontline with the work of Smith et al. (2018), indicating an attrition rate of 15-20% for SUSW cohort 1 and 2. This could indicate that **SUSW graduates might be slightly more likely to stay in children's services** than **Frontline**.

2.1.1.10. Apprenticeships

One primary research study reported on apprenticeships as a route to increase the number of qualified social workers (Stone & Worsley 2021). Apprenticeships are mainly work-based learning programmes, with academic elements compressed into a 'day release' approach. Apprenticeships could provide a route for career progression to retain social work staff or training of a new workforce.

Evaluation

Stone & Worsley (2021) conducted a survey with 29 apprentices from the first cohort of the social work degree apprenticeship in England to explore their experiences two years in. Based on the survey findings the majority of apprentices seemed satisfied with their learning, and the support provided by academic and practice staff. The authors concluded that **apprenticeships are a potentially cost-effective and impactful way to train and then retain** social workers.

2.1.1.11. Good working conditions

We did not find any evidence regarding recruiting social workers from a diverse range of backgrounds as part of this rapid review.

2.1.2. Factors affecting turnover rates for social workers

Six primary research studies and one organisational report (non-research) identified reasons why social workers entered or left the profession (Baginsky et al. 2010, LGA 2014, Baginsky & Manthorpe 2016, Evans & Huxley 2009, Mulholland et al. 2017, Smith et al. 2018, Scourfield et al. 2020) as displayed in Table 6. Frequently cited factors causing social workers to leave were identified as high caseloads (Baginsky & Manthorpe 2016, Baginsky et al. 2010, Mulholland et al. 2017) and excessive workload, combined with organisational stress (Scourfield et al. 2020, Smith et al. 2018).

Table 6: Reasons for social workers entering or leaving the profession

Citation	Key findings
Baginsky et al. 2010	<i>Factors which would lead social workers to cease to practice:</i> heightened stress because of high referral rates, high caseloads, low support and further limitations on the control which they had over their working life
Baginsky et al. 2016	<i>Factors contributing to changing or leaving:</i> Most mentioned factor leading to this decision was high caseloads Half of both groups also pointed to poor and irregular supervision and poor team management , while similar numbers of those leaving social work also cited too few opportunities to put their social work values into practice as influencing their decisions
Evans & Huxley 2009	A large proportion of respondents would be persuaded to stay in their authority by enhanced salaries (52.4%) or training opportunities (44.8%), payments for additional duties (34.3%) or additional qualifications (40.9%), flexible working hours (49.7%) or extra leave entitlements (44.5%) More than 30% might be enticed to stay by good caseload management systems (38.5%), more support from clerical staff or social work assistants (38.2%), payment of registration fees (35.2%), more post-qualifying training opportunities (34.4%), homeworking (31.4%) or improvements to facilities such as office accommodation and car parking (30.7%)
LGA 2014	<i>Reasons for entering the profession:</i> “making a difference” and “wanting to help others”
Mulholland et al. 2017	One respondent expressed concerns about high caseloads and poor management and noted that external factors can also impact on the ability to recruit; such as poor quality or lack of housing preventing people from moving to the area
Scourfield et al. 2020	The most often cited reasons for leaving by were management / organisation and a positive decision to move into a job in an allied field . Stress, mental health challenges or emotional burden and excessive workload also mentioned. For Step Up graduates the reason for leaving most reported was workload, followed by management / organisation, stress and personal reasons unconnected to work.
Smith et al. 2018	‘push factors’ which related to a combination of extrinsic and intrinsic factors such as the stress of the role/job, desire to achieve a better work life balance, disillusionment and dissatisfaction. Personal and organisational factors played a part

2.1.3. Bottom line for social workers

The evidence is presented in the form of a graphical evidence map (see Figure 1), populated by information describing the number and types of studies, reviews, organisational reports (non-research) with the innovation paired alongside the outcomes of interest (attraction, recruitment, and retention). If an innovation was described within the evidence as having the potential to have an impact on the outcomes of interest, then this was indicated on the evidence map using the following key in the appropriate boxes (mixed methods: M, quantitative descriptive: D; qualitative descriptive: Q, reviews: R, organisational reports (non-research) O). If an innovation was implemented and also evaluated to determine its effectiveness on the outcomes of interest, then this was indicated in bold on the evidence map

with a suffix of a plus sign (for example M+, D+, etc). We identified **no evidence** that explored **increasing diversity** or **good working conditions** for **social workers**. The only three innovations that had been implemented and evaluated were pre-employment initiatives, training and career development and apprenticeships. There were **nine innovations** that were suggested as being **helpful to attract, recruit, and retain social workers** reported across the evidence base and of these **only three were evaluated**. Practice teachers and newly qualified social workers **feel that pre-employment training** that involves **practice learning activities contributes to retention** (mixed methods evidence). There are **indications** that graduates of **fast-track programmes** might be **more likely to remain** in employment (mixed methods evidence). **Apprenticeships** are a **potentially impactful way to retain existing and train** new social workers (mixed methods evidence). **Frequently cited factors** causing social workers to leave were identified as **high caseloads** and **excessive workload**, combined with **organisational stress**.

Figure 1: Evidence map of different study designs (colour) addressing various innovations (rows) against outcomes (columns) for social workers

INNOVATION	OUTCOMES											
	Attract				Recruit				Retain			
Workforce planning												
Increasing diversity												
Promoting career opportunities												
Pre-employment initiatives												
Local and national recruitment campaigns												
Values-based recruitment												
Supportive induction and development												
Pay, rewards and recognition												
Training and career development												
Apprenticeships												
Good working conditions												

Key: + indicates where an evaluation was conducted

Quantitative descriptive studies (D)	Qualitative descriptive studies (Q)	Organisational reports (non-research) (O)	Mixed method studies (M)	Review articles (R)
--------------------------------------	-------------------------------------	---	--------------------------	---------------------

2.2. Overview of the evidence base for the social care workforce

Sixteen primary research studies, nine organisational reports (non-research) and two narrative reviews and one narrative review with a stakeholder consultation provided information about recruitment and retention issues in the adult social care sector and workforce and provide some insight into innovations that help to attract, recruit, and retain social care workers within the UK context.

The primary research studies all focused on adult (n=14) or mixed settings (n=2) with employers (n=9), employees (n=1) or both employers and employees (n=6). The research was conducted in England (n=11), Wales (n=1), Scotland (n=2) or across the UK (n=2). The study designs were mixed methods approach (n=9), qualitative descriptive (n=5) or quantitative descriptive (n=2). Two of the studies also contained a literature review as part of the mixed methods approach.

2.2.1. Innovations that help to attract, recruit and retain

The innovations that have been reported in the literature that help to attract, recruit and retain the social care workforce are workforce planning, increasing diversity, promoting career opportunities, pre-employment initiatives, local and national recruitment campaigns, values-based recruitment, supportive induction and development, pay, rewards and recognition, training and career development, apprenticeships and good working conditions.

2.2.1.1. Workforce planning

Five primary research studies, two organisational reports (non-research) and two literature reviews stressed the importance of ensuring **retention** features in workforce planning in the social care sector (CPA & LGA 2021, Figgitt 2017, Moriarty et al. 2018, Mulholland et al. 2017, Ross et al. 2016, Social Care Leaders 2021, Skills for Care 2013, Social Work Services Strategic Forum 2016, Swift & Teicke 2021).

Evaluation

A literature review conducted in Scotland found that there was little specific evidence on the incidence or use or any specific tools being used (Social Work Services Strategic Forum 2016). We did not find any additional evidence regarding the evaluation of this area as part of this rapid review.

2.2.1.2. Increasing diversity

Six primary research studies (one with a literature review), five organisational reports (non-research) and two additional literature reviews commented on the need to recruit workers from a diverse range of backgrounds such as unemployed, gender, age, ethnicity and disability (Atkinson et al. 2016, CPA & LGA 2021, Johnston et al. 2017, Moriarty et al. 2018, Mulholland et al. 2017, Rubery et al. 2011, Skills for Care 2013, Skills for Care 2021b, Social Care Leaders 2021, Social Work Services Strategic Forum 2016, Swift & Teicke 2021, Welsh Government 2016) and those able to speak Welsh language (Welsh Government 2016, Atkinson et al. 2016).

Skills for Care (2021b) have suggested that employers could actively target people from a diverse range of backgrounds especially those who have been previously under-represented in the workforce. The Care Provider Alliance and the Local Government Association, both

based in England, recommend **recruiting from the local community through the use of creative strategies** to advertise the vacancies including engaging with previously marginalised groups (attraction and recruitment) (CPA & LGA 2021).

Evaluation

Johnston et al. (2017) as part of their mixed methods study conducted a literature review and did not identify evidence to indicate that employers or providers target specific groups as part of their recruitment strategies. However, they did report on a **number of case studies** of local projects from across the UK where opportunities to recruit a more diverse workforce were presented. We did not find any additional evidence regarding workforce planning as part of this rapid review.

2.2.1.3. Promoting career opportunities

Nine primary research studies (two with a literature review) and three organisational reports (non-research) made reference to England's 'I Care...Ambassadors' programme developed by Skills for Care (Ekosgen 2013, Ekosgen 2016, Figgitt 2017, Johnston et al. 2017, Lucas et al. 2009, Moriarty et al. 2018, Skills for Care 2021b, Skills for Care 2013) or career promoting activities such as careers fairs (Moriarty et al. 2018), a targeted promotion campaign focusing on career opportunities and rewarding nature of the career (Dobson & Byrne 2010, Mulholland et al. 2017), a national Careers service (including the use of social media and TV based campaign approaches) (Social Care Wales 2021) and working with schools and colleges to promote careers in social care (Atkinson et al. 2016).

The 'I Care...Ambassadors' seeks to develop existing staff and find new staff by delivering careers activities in the local community such as schools, colleges and jobs services. This initiative aims to ensure that those recruited into adult social care understand their job roles better and increases the chance of them remaining in their posts (Skills for Care 2013, Skills for Care 2021b). Care ambassadors were generally seen as positive developments (Figgitt 2017, Moriarty et al. 2018), however employers were mindful of the negative image and perception of social care that is often portrayed (Moriarty et al. 2018).

The **low status of social care** was cited as a reason for recruitment and retention problems and that improving the public understanding about the nature of the work involved through 'real-life' stories was suggested (Moriarty et al. 2018). It was felt that media coverage often focused on negative issues such as scandals and abuse with little attention being paid to instances where high quality care and support were being provided (Moriarty et al. 2018, Mulholland et al. 2017). Campaigns to enhance perceptions of the status of care work were therefore seen as important (Atkinson et al. 2016, Mulholland et al. 2017).

Evaluation

In the Skills for Care Evaluation of the 'I Care Ambassadors' initiative nearly half of the employers who had been involved with the programme reported it had a **positive impact on retention levels** and stated that retention rates had improved across the workforce as a whole as a result of programme-related activities. Similarly, a number of ambassadors fed back that their involvement had made them more likely to stay with their current employer and that they feel more valued and the initiative had enabled them to **do something as well as front-line care** work (Ekosgen 2016).

2.2.1.4. Pre-employment initiatives

Four primary research studies (one with a literature review) and four organisational reports (non-research, one with a literature review) highlighted several pre-employment initiatives (CPA & LGA 2021, Dobson & Bryne 2010, Figgett 2017, Johnston et al. 2017, Ross et al. 2016, Skills for Care 2013, Skills for Care 2021a, Work Foundation 2021).

Skills for Care (2021a) have provided an overview of funded initiatives that social care employers can use to recruit and develop staff which include traineeships. Traineeships are skills development programmes that include a work placement for 16–24-year-olds, to prepare them for permanent work or an apprenticeship (Skills for Care 2021a). Pre-employment training helps prepare potential applicants to work in the social care sector and employers who had tried this reported that they would use this initiative to help with recruitment again (Figgett 2017). One service provider reported on the use of a cadetship available to those over 17 years of age where the fundamentals were learnt as a trainee before moving over to care work (Atkinson et al. 2016). It has been suggested to target jobseekers by partnering with Job Centre Plus and **promoting pre-employment training to help attract** people into social care (Skills for Care 2013).

Other funded initiatives are sector-based work academy programmes. These programmes help prepare those receiving unemployment benefits to apply for jobs in a different area of work and is available in England and Scotland(attract) (Skills for Care 2013, Skills for Care 2021a).

Employer suggestions to improve recruitment of young people included encouraging people to find out about social care by offering open days, candidate visits, taster sessions or shifts as part of the recruitment process (Figgett 2017, CPA & LGA 2021, Dobson & Bryne 2010, Skills for Care 2013) or allowing potential recruits to shadow a worker for the day before they apply for work (Ross et al. 2016).

Another funded initiative that social care employers can use is Kickstart. This initiative provides funding for employers to create high-quality six-month job placements for 16-to-24-year olds on Universal Credit to help them get into the job market (Skills for Care 2021a). A literature review was able to demonstrate that placements undertaken by young people on health and social care courses helped to increase awareness of what roles in social care entail. The Work Foundation (2021) recommended that care providers should create **work experience opportunities** that involve close collaboration between sector bodies, colleges, schools and local authorities that aligns with national campaigns.

Evaluation

One mixed methods evaluation explored the effectiveness of Care First Careers pilots which were designed to attract unemployed young people to work in the care sector (Dobson & Byrne 2010). The pilot scheme which is run by the Department of Work and Pensions in England offered employers in the care sector a choice of taking candidates who have been through a two week pre-employment training (PET) programme with an entitlement to a recruitment subsidy of £650 (for the employer), or just a recruitment subsidy of £1500 (for the employer) without the PET. Employers generally preferred training interventions to recruitment subsidies, although large employers preferred subsidies to support their own in-house training. Those who preferred PET felt it filtered out uninterested candidates saving time and resources. The

majority of small employers preferred a six-week PET whilst large employers preferred a two-week PET. Whilst 70% of employers felt that the recruitment subsidy was welcomed to **cover recruitment costs** half of employers felt **experience and aptitude of the candidate were the key factors**. Pre-employment training was found by the Jobcentre Plus providers to be important in building basic care skills, improving interview preparation and confidence. Just under three quarters of employers surveyed believed PET enhanced recruitment and employers who experienced recruitment or retention difficulties favoured PET with the £650 subsidy over a £1500 subsidy.

Skills for Care (2013) in their report 'Finders Keepers' present a number of case studies of local initiatives in England that have utilised pre-employment training, sector-based work academies and taster shifts.

2.2.1.5. Local and national recruitment campaigns

Three organisational reports (non-research) and one narrative review made mention of local and national recruitment campaigns (Griffin 2020, Skills for Care 2013, Skills for Care 2021b, Swift & Teicke 2021).

Local advertising campaigns should be simple and make the recruitment process personal and should have adverts that stand out (Skills for Care 2013). national recruitment campaigns focus on attracting people to work in social care. In February 2019 the Department of Health and Social Care launched the 'Every Day is Different Campaign' in England. The latest phase of the adult social care recruitment campaign 'Care for others. Make a difference' has been launched by Department of Health and Social Care which is running continuously until March 2022 (Skills for Care 2021b). Griffin (2020) described the launch of a recruitment campaign that was linked to a web-based portal that offered a simplified application process with the potential to upload a video CV, and for care providers to find available care workers and post jobs.

Evaluation

An evaluation of the 'Every Day is Different Campaign' found that over 50% of those aged 20 to 39 (target audience) took action as a result of seeing the advertisement (jobs searches and applications). An online survey with care providers was conducted as part of this evaluation and one in four care staff reported an **increase in enquiries and applications (attract), and interviews and vacancies filled (recruit)** was reported by one in four care staff surveyed (Skills for Care 2021b).

2.2.1.6. Values-based recruitment

Six primary research (one with a literature review), seven organisational reports (non-research, one with a literature review) and one additional narrative review (Consilium 2016, CPA & LGA 2021, Figgett 2017, Goode 2014, Johnston et al. 2017 Moriarty et al. 2018, Ross et al. 2016, Skills for Care 2013, Skills for Care 2020, Skills for Care 2021b, Social Care Leaders 2021, Social Care Wales 2021, Swift & Teicke 2021, Work Foundation 2021). Values-based recruitment and retention involves establishing strong workplace values and ensuring that the workforce matches them. **Attracting and recruiting the right people is seen as a key to increasing retention rates** (Skills for Care 2013, Johnston et al. 2017, Moriarty et al. 2018, Social Care Leaders 2021, Social Care Wales 2021).

Employers report that finding staff with the **right values and behaviours is more desirable than specific qualifications or previous work experience** (Figgett 2017). Several reports have highlighted that values such as kindness, compassion, empathy, respect, recognition, importance of dignity, being person-centred, reliability, honesty, professionalism, positivity, life experiences and a willingness to learn are essential (Figgett 2017, Johnston et al. 2017, CPA & LGA 2021, Ross et al. 2016, Skills for Care 2021b). Employees agree, Ross et al. (2016) asked front line employees what values and qualities they thought they had, and the responses were flexible, adaptable, focused on the person, competent, professional, trustworthy, reliable, hardworking, organised, focused and creative.

A rapid review and stakeholder consultation conducted by the Work Foundation (2021) identified that people do not work in social care because they felt they did not have the required qualifications. Thus, the Work Foundation (2021) recommends that values and motivation should be more important prerequisites for working in the social care sector as opposed to having to have specific qualifications. Communicating the organisation's values through its website, social media and promotional literature and ensuring that job adverts reflect this is seen as important (Figgett 2017) but emphasis was placed that these to be kept up to date (Moriarty et al. 2018). **Values-based interviews** enable employers to explore whether potential candidates will be suitable for the organisation and is a strategy that is welcomed by employers (Figgett 2017) with Johnston et al. (2017) suggesting that values-based recruitment could be incorporated into the selection process for pre-employment training courses or apprenticeships.

Evaluation

Skills for Care has conducted a number of evaluations of values-based recruitment toolkit (VBRT) in the social care setting (Goode 2014, Consilium 2016, Skills for Care 2020). A range of resources and guidance form part of the toolkit and involve the Leadership Qualities Framework for Adult Social Care, example job adverts, online personality profiling questionnaire, suggested interview questions, Skills for Care's Qualifications and Credits Framework, suggestions on a range of ways to improve retention and recruitment, a situational judgment test and links to other useful materials and websites.

The first evaluation focused on the pilot year (n=102 employers) of introducing VBRT incorporating a range of resources and guidance (Goode 2014). Evaluation activity included collecting a range of primary and secondary quantitative and qualitative data. Results indicated that the online personality profiling questionnaire (PPQ) when used on its own did not provide sufficient assessment about the applicant's suitability during the recruitment process, but did prove beneficial in settings including induction, supervision, appraisal, and staff development. Some limited evidence indicated that the VBRT was being used to develop and role model values-based working throughout the organisational hierarchy, to implement it successfully senior management buy in is required from the outset. Employers generally agreed the VBRT was successful and added value to the recruitment process, with 68% of survey respondents indicating they had or were making changes to the recruitment processes. All employers were including the PPQ at some stage and a significant number indicated they would purchase this at the end of the pilot with findings showing that it added value to the recruitment process, aiding the selection of employees with the right values. Overall, the data indicated that the **VBRT tools and resources was beneficial value in the recruitment of social care workers**.

The second evaluation was conducted by Consilium Research consultancy (Consilium 2016) who gathered quantitative data supplemented with qualitative interviews to assess the longer-term effectiveness and impact of a values-based approach to recruitment and retention in adult social care. Respondents included 83 employers using a values-based approach and 29 using a traditional approach. Half of the respondents used one or more elements of the VBRT. Out of those able to make a comparison 72% stated that **staff recruited for values performed better** than traditional approaches in relation to performance, this included improved rates of sickness absence (62%), skills (58%) and punctuality (52%). Additionally, between 73-76% of employers stated that staff recruited for values exhibited **better core values**. Turnover was also lower at 19% compared to a whole sector average of 25.4%. Employers were adamant that benefits outweighed any costs. Barriers included confusion around terminology, preoccupation with online personality profiling tools and that some organisations felt it was too much of a step change at the current time.

The final evaluation (Skills for Care 2020) conducted a cross-sectional survey of 300 employers, investigating the prevalence, perceived support and benefits of values-based recruitment and retention in the adult social care sector in England. Ninety seven percent of respondents indicated that prevalence is high among CQC-registered social care establishments with 94% agreeing that recruitment for values was important. Awareness was also high, 55% of respondent felt Skills for Care was important in implementing values-based recruitment and retention, 50% said they would like further support mainly related to information, communication, and promotion. Around three-quarters of respondents using values-based recruitment and retention cited at least one benefit. These benefits included improvements in staff retention (31%), helped with recruiting staff with the correct values (20%) and better quality/improved person-centred care (16%). The report concluded that whilst prevalence and awareness of VBRT is high, reported benefits are lower than expected and that employers may need more support to follow values-based practice through into retention.

Based on the findings of these evaluations, employers indicate that a values-based approach to recruitment has resulted in **lower recruitment costs, positive return on investment, lower staff turnover and better staff performance** (Skills for Care 2021b).

2.2.1.7. Supportive induction and development

Eight primary research studies (two with a literature review), two organisational reports (non-research, one with a literature review) and one additional literature review stressed the importance of providing effective induction and/or ongoing development to help ensure good levels of workforce retention, particularly where a new starter is entering the sector (Atkinson et al. 2016, Dobson & Byrne 2010, Ekosgen 2013, Figgett 2017, Johnston et al. 2017, Lucas et al. 2009, Rubery et al. 2011, Mulholland et al. 2017, Skills for Care 2013, Work Foundation 2021). Across the evidence base supportive induction can include one or more of the following elements: shadowing, structured supervision, mentoring, buddying, peer support, values-based learning and additional training around core skills and specific health conditions, regular performance appraisals, individual performance development plans and reflection on practice.

In England the Care Certificate was developed by Skills for Care, Health Education England and Skills for Health and launched in 2015 which is a set of minimum standards that should

be covered as part of the induction training of new care workers. An evaluation found that 69% of new care workers had **engaged with the Care Certificate** (Skills for Care 2021b) and national and local stakeholders felt it was a positive development in ensuring basic caring skills (Johnston et al. 2017).

In Wales, all new domiciliary care workers must also complete induction training within 12 weeks of undertaking a new role in social care and are encouraged to undertake the Level 2 award for Social Care Induction (Wales)(Atkinson et al. 2016). However, some care workers reported that the initial induction and training provided was inadequate and in the private sector in particular some employees cited **limited induction as a reason for leaving care work** (Atkinson et al. 2016). Also, some care workers spoke of the importance of supervision but most reflected that it rarely happened (Atkinson et al. 2016).

In the mixed methods study conducted by Rubery et al. (2011) employees reported that the length of induction training for new staff varied from one day to six months which sometimes varied according to the previous experience, qualifications of the new recruit, or the length of time taken for the DBS check. Other reasons for this included some employees distinguishing between an initial induction period of a few days followed by a number of weeks shadowing, working under supervision, probation and mandatory training courses.

Evaluation

Skills for Care (2013) in their report 'Finders Keepers' present a case study of local initiatives that have utilised detailed induction, regular appraisals and individual performance development plan. We did not find any additional evidence regarding the evaluation of supportive inductions and development initiatives or as part of this rapid review.

2.2.1.8 Pay, rewards and recognition

Eight primary research (two with a literature review), six organisational reports (non-research, one with a literature review) and three additional literature reviews explored the relationship between rewards and incentives and their relationship to recruitment and retention. **Rewarding and recognising employees for their good work** is seen as way of retaining the social care workforce and can be achieved through verbal and written means, awards, bonus or pay progression (Atkinson et al. 2016, CPA & LGA 2021, Ekosgen 2013, Figgett 2017, Griffin 2020, Johnston et al. 2017, Lucas et al. 2008, Lucas et al. 2009, Reddington et al. 2020, Social Care Leaders 2021, Skills for Care 2021b, Social Work Services Strategic Forum 2016, Moriarty et al. 2018, Mulholland et al. 2017, Swift & Teicke 2021, Work Foundation 2021, Welsh Government 2016).

Staff considering entering care work may have to pay for upfront costs such as the costs of DBS certificates checks, the purchase of uniforms and the cost of attending induction training. The CPA & LGA (2021) suggest that employers should support staff by providing **payment for things like travel, induction, and DBS certificates**. However, Rubery et al. (2011) reported that some independent sector providers are unwilling to fund such costs and this can lead to employee dissatisfaction.

Pay is one indicator to staff that they are valued and appropriately rewarded (Social Care Leaders 2021). Many employers reported that they pay slightly above the national Living Wage, with some also offering further incentives for working unsociable hours or when staff

obtain higher qualifications (Figgett 2017). Employers reported that they feel it is important to pay above the national Living Wage in order to competitive with other sectors (Figgett 2017).

Some employees reported good pay and benefits as reasons for working in adult social care (Reddington et al. 2020). It is recognised however that there needs to be a sustainable approach to pay and rewards in social care that brings **parity with other public sector roles** (Social Care Leaders 2021). It has been reported that local authorities pay higher hourly rates of pay and also offer better benefits and terms and conditions (e.g. 20% pension) (Mulholland et al. 2017) and are more likely to pay for travel time compared to those working in the independent sector (Atkinson et al. 2016).

A large number of employers, although not all offer **some form of top up to basic pay** or other means of rewarding staff to demonstrate their value to the organisation, as a way to address recruitment and retention of the social care workforce (Atkinson et al. 2016, Ekosgen 2013, Figgett 2017, Lucas et al. 2009, Moriarty et al. 2018, Mulholland et al. 2017, Work Foundation 2021).

- Vouchers
- Uniform
- Membership of a pension scheme
- Costs associated with travelling to clients
- Additional payment for evening/night work, shift work, weekend work, bank holidays, overtime, for covering staff sickness
- Rewarding staff for tenure with increase in pay
- Performance related pay
- Gain sharing
- Sick pay
- Holidays that increase with tenure
- Membership of a savings plan
- Membership of the Hospital Saturday Fund
- Investment in learning and development
- Free meal provision
- Negotiated discounts with local businesses
- Option to purchase or sell annual leave days
- Benefits platforms
- Childcare vouchers
- Wheels 2 Work schemes
- Health cash plans
- Gym subsidy membership

One further innovative example was the provision/lease of scooters for those non-driving employees (Atkinson et al. 2016, Lucas et al. 2009).

The Work Foundation (2021) recommended “that care providers should consult with their workforce to understand the rewards and benefits they would value most, and use this insight to **develop a package of benefits that reflects staff preferences**” (p. 10). The CPA & LGA (2021) suggest the employers should ensure staff utilise all available benefits, such as annual leave and sick leave if required and find areas where terms and conditions could be developed further across pay, leave and hours, as well as communicating changes to staff.

Some providers reported that they offered incentives for existing employees who introduce potential new employees known as **refer-a-friend scheme** (Ekosgen 2013, Figgett 2017, Moriarty et al. 2018). This ranged from £25, £100, £350 if the person they recruited stayed with the employer for a set period of time. The Care Friends app is a tool for employers to organise their employee referral schemes. Research captured through the app found that employee referrals made up 36% of high-performing care workers, compared to 11% from internet job boards. Within the first six months following the app's launch, Care Friends reported that care workers half as likely to leave within their first year compared to the average rates for the sector (retention rates of 78%, and 58.3% respectively) (Skills for Care 2021b).

Employees often reported that they wanted to know that they were making a difference and feedback from employers was welcomed although this was not always the case. Employers also noted the value of **rewarding and celebrating the achievements of staff** (Figgett 2017). Verbal feedback or more formal employer awards in recognition of their work was reported or suggested (Ekosgen 2013, Welsh Government 2016, Ross et al. 2016). A lack of appreciation was often cited as a reason for staff applying for jobs elsewhere (Atkinson et al. 2016). Organisations where employees felt appreciated had low turnover rates (Reddington et al. 2020). Griffin (2020) suggested in light of the COVID-19 pandemic that organisations could show appreciation through the introduction of the CARE badge and access to similar recognition and benefits as those with the NHS badge.

Evaluation

Two review articles, one conducted in 2008 (Lucas et al. 2008) and the other in 2017 (Johnston et al. 2017), did not find any conclusive evidence of the impact of applying rewards and incentives in the sector. This rapid review did not find any additional evidence in this area.

2.2.1.9. Training and career development

Eight primary research studies (two with a literature review), five organisational reports (non-research) and two additional literature reviews stressed the importance of training and career development as specific measures to keep care workers (Atkinson et al. 2016, CPA & LGA 2021, Cornes et al. 2011, Ekosgen 2013, Figgett 2017, Johnston et al. 2017, Moriarty et al. 2018, Mulholland et al. 2017, Social Care Leaders 2021, Social Work Strategic Forum 2016, Skills for Care 2013, Skills for Care 2021a, Swift & Teicke 2021, Welsh Government 2016).

Retention can be influenced by companies offering **training that goes beyond mandatory requirements** and which is of direct relevance to staff's roles (Ekosgen 2013, Figgett 2017, Skills for Care 2013). In a mixed methods study of employees who worked for organisations with a low turnover it was reported that the almost 90% of the employees consulted had a training plan and 93% stated that they had sufficient opportunities to undertake training (Ekosgen 2013). Employers recognise that offering training and development makes a difference to staff commitment (Figgett 2017) and it is recognised that there should be improved access to training and development opportunities which include recognisable qualifications which support career pathways (Social Care Leaders 2021). Skills for Care (2021a) described the Workforce Development Fund which provides funding for further learning and development in care provider organisations.

There has been some discussion across the literature regarding the **development of new roles such as senior care workers** and care workers being trained to become 'care

practitioners' who provided more assistance to nurses in care homes with nursing (Moriarty et al. 2018). Other examples included a service for people with learning disabilities that created a 'specialist support worker' role which involved giving support workers a combination of training about specific conditions, such as autism, and teaching them techniques to improve the way they supported people with challenging behaviours (Moriarty et al. 2018). Johnston et al. (2017) describes the role of an enhanced care worker (HC-one) called a nursing assistant that is between a senior carer and a qualified nurse that can be obtained through the Care Assistant Development Programme.

There is general consensus across the literature that there are limited opportunities for progression within social care and that there is a need for clear career pathways and development opportunities (Atkinson et al. 2016, CPA & LGA 2021, Johnston et al. 2017, Mulholland et al. 2017, Skills for Care 2013, Social Care Leaders 2021, Social Work Strategic Forum 2016, Welsh Government 2016). However, there is also evidence to suggest that there is also a **lack of awareness of opportunities for progression where they do exist** (Atkinson et al. 2016, Johnston et al. 2017). Employers across all sectors in the study by Mulholland et al. (2017) commented on the need for clear and attractive career pathways and a suggestion that there should be a path from care worker through to social worker that can be completed internally. The CPA & LGA (2021) suggested that staff should be encouraged to explore other parts of the system for progression, such as domiciliary care staff exploring a care home role or an administrator moving into a care worker role. Skills for Care (2013) commented that introducing fast track for supervisors or graduate schemes is a positive way to promote career opportunities. Social Work Services Strategic Forum (2016) suggests that there should be a fast-track promotion in place for employees who show the right attitudes.

Evaluation

A case study of four provider organisations (Cornes et al. 2011) focused on whether emotional loyalty training can improve workforce retention rates in social care. Data were collected through focus groups and telephone interviews. Overall feedback was positive with opportunities for team building and better insight into management practices. Commonly perceived was that the course encouraged self-perception, renewed confidence and self-belief and that personal effectiveness and mental toughness was more important than the emotional loyalty element. The study was not able to evidence impact of reducing staff turnover, but the training was related highly by participants, only one of the four organisations implemented recommendations related to the emotional loyalty process. The overall recommendation aligned with Skills for Care suggesting the importance of **developing human resource practices which support retention**, including developing training around good management practice in supervision and appraisal rather than importing new concepts such as emotional loyalty.

2.2.1.10. Apprenticeships

Five primary research studies (two with a literature review) and three organisational reports (non-research) discussed apprenticeships (Ekosgen 2013, Figgett 2017, Johnston et al. 2017, Moriarty et al. 2018, Mulholland et al. 2017, Skills for Care 2013, Skills for Care 2021a, Skills for Care 2021b). Apprenticeships are periods of paid employment that include both on-the-job and off-the job training, in combination with studying for recognised qualifications (Skills for Care 2021b). Skills for Care (2021a) described funding that is available for employers for offering apprenticeship schemes.

Across the literature there was **strong support for apprenticeships** schemes, and they were generally perceived as positive although employers had little first-hand experience of them (Figgett 2017, Johnston et al. 2017, Moriarty et al. 2018). Some employers however, felt concerned about the quality of training that was offered because of the introduction of the apprenticeships levy in 2017. Apprenticeships were welcomed as having helped the sector, but employers reported that a **skills gap** appears to be developing in the number of workers with the knowledge and skills to support people with complex conditions, such as dementia and severe autism (Moriarty et al. 2018).

Evaluation

Johnston et al. (2017) as part of their mixed methods study conducted a literature review and did not identify evidence that illustrates how effective social care apprenticeships are in improving recruitment and retention. We did not find any additional evidence regarding the evaluation of apprenticeship schemes as part of this rapid review.

2.2.1.11. Good working conditions

Eight primary research studies and three organisational reports (non-research) talked about the how offering good working conditions beyond the legal requirements can make a difference to staff retention (Atkinson et al. 2016, Welsh Government 2016, CPA & LGA 2021, Ross et al. 2016, Rubery et al. 2011, Mulholland et al. 2017, Skills for Care 2013, Figgett 2017, Johnston et al. 2017, Ekosgen 2013, Lucas et al. 2009). Examples from across the sector included:

- Taking care of staff wellbeing
- Removing barriers to working and enhancing terms and conditions
- Creating and promoting a positive work environment and inclusive culture
- Making staff feel valued
- Creating the right culture where staff are encouraged and where they can enjoy work
- Promoting person-centred care
- Ensure staff utilise all available benefits, such as annual leave and sick leave if required

Flexible working by providing set shift patterns that recognise the importance of supporting the personal lives of staff such as caring responsibilities was considered important (Atkinson et al. 2016, Welsh Government 2016, CPA & LGA 2021, Ross et al. 2016, Rubery et al. 2011, Mulholland et al. 2017, Skills for Care 2013, Figgett 2017, Johnston et al. 2017, Ekosgen 2013, Lucas et al. 2009). Some managers reported that care workers valued the flexibility of zero-hours contracts. Although care worker opinion was divided between those who cited problems with zero-hours contracts, and others who suggested it brought them benefits in the form of flexibility and the ability to choose hours as and when convenient (Atkinson et al. 2016, Welsh Government 2016). Care workers reported that **flexibility in working hours and the flexibility of part time or variable hours** helped make their job more enjoyable (Ross et al. 2016).

Ekosgen (2013) talked about autonomy and flexibility and its importance to retention. In the context of their study this related to the freedom which care workers have to make decisions about the tasks they carry out and the degree to which employees are encouraged or have

the opportunity to exchange ideas with their colleagues about best practice or new ways of working.

Evaluation

We did not find any evidence regarding the evaluation of this area as part of this rapid review.

2.2.3. Factors affecting turnover rates for the social care workforce

Five primary research studies, two organisational reports (non-research) and two narrative reviews (Atkinson et al. 2016, Ekosgen 2013, Figgett 2017, Reddington et al. 2020, Rubery et al. 2011, Skills for Care 2021b, Social Work Services Strategic Forum 2016, Swift & Teicke 2021, Welsh Government 2016, Work Foundation 2021) commented on workforce factors affecting turnover (see Table 7). Negative factors were identified as poor pay and conditions including working hours (Ekosgen 2013, Rubery et al. 2011, Swift & Teicke 2021, Skills for Care 2021b) and where both the employees and the managers are less experienced (Skills for Care 2021b). Employers feel that **work pressures, unsociable hours, poor terms and conditions and low pay** often dissuade candidates from applying for care work and are reasons given for leaving the organisation (Welsh Government 2016, Work Foundation 2021). On the other hand, positive factors identified by both employers and employees included **pay and retention bonuses** (Figgett 2017, Ekosgen 2013, Social Work Services Strategic Forum 2016), **good working environment and celebrating achievements** (Figgett 2017, Ekosgen 2013). Reddington et al. (2020) summarised predictive measures of retention as **employee advocacy, organisational support, work engagement and quality of conversational practice**, whilst participants in Atkinson et al. (2016) argued that attraction and retention was related to **worker motivations and the nature of care work**.

Table 2: Reasons for social care workers entering or leaving the profession

Citation	Key findings
Atkinson et al. 2016	All participants argued that attraction and retention was related to worker motivations and the nature of care work . Care workers seemed resigned to employment terms and conditions. While they expressed dissatisfaction with development, pay and employment security , the greatest concern arose around working time.
Ekosgen 2013	A range of negative factors were identified as causes of poor retention, including poor pay, working hours and recruitment. 90% of managers in the study sample agreed that the most important positive factors promoting staff retention are effective communication, training and providing employees with autonomy and flexibility . Informal factors listed by employees as being attractive for recruitment included: retention bonus , contacting interested applicants when vacancies arise, bonuses for staff recommending other applicants who are then successful. Factors listed as attracting employees included: employer reputation , wanting to work in social care being able to work locally, career and training opportunities , hours of work to suit circumstances and pay and conditions.
Figgett 2017	Common reasons given to employers for leaving the organisation included: personal reasons (30%), career development (21%), retirement (12%), pay (11%), the nature of the work (6%). Key positive retention factors included: training, pay, a good working

	<p>environment and rewarding and celebrating achievements. Employers verbalised that to attract, recruit, develop and retain the best people to work for them, and enable them to deliver high quality, person-centred, professional care and support services the things that worked were cost effective strategies such as maintaining an emphasis on recruiting for values and behaviours and a strong emphasis on developing a positive workplace culture</p>
Reddington et al. 2020	<p>Overall satisfaction with their employment deal was the single most important positive factor influencing whether employees wish to stay with their employer. Other predictive measures were employee advocacy (the extent to which an employee would recommend their organisation to a friend) and perceived organisational support (an expression of the quality of delivery of various types of support experienced by employees in the workplace) such as the provision of appropriate training to improve job skills</p> <p>Work engagement (An employee's pride in their work) was the single most important factor influencing whether employees wish to stay with their employer. The quality of conversational practice (Recognises the importance of day-to-day conversations between managers and their teams and within teams that provide pathways to performance) was another predictive measure</p>
Rubery et al. 2011	<p><i>Push factors and other reasons for the turnover of care workers</i></p> <p>Push factors: More convenient working times, better pay, unhappy with manager/office and lack of support for promotion</p> <p>Other top reasons: family responsibility, nurse training, relocation, work for NHS, work for another care provider</p>
Skills for Care 2021b	<p><i>Factors negatively influencing retention included:</i></p> <p>Low pay, increased travel distance to work, less experience in adult social care work sector and in the role, experience of the manager (less experience equated to increased turnover), fewer contracted hours zero-hours contracts, high sickness rates establishments with higher previous turnover rates</p> <p><i>Factors positively influencing retention included:</i> Training</p>
Swift & Teicke 2021	<p>Factors negatively influencing recruitment and retention included: poor understanding of social care, lack of suitable applicants, job insecurity, low pay and poor terms and conditions; lack of progression and developmental conditions</p>
Welsh Government 2016	<p><i>Why do you think it might be difficult to recruit domiciliary care workers?</i></p> <p>71 (or 66%) of responses highlighted that the difficulties around recruitment and retention of staff were because of the low wages that domiciliary care workers were paid. Many of the responses also cited other issues (e.g. work pressures (55 or 51%), unsociable hours (52 or 48%) and poor terms and conditions (51 or 47%) that also confounded the matter</p>
Work Foundation 2021	<p>Our analysis found that low pay within the sector is dissuading candidates from care work, with 38% of respondents selecting this as a reason they wouldn't apply for a role within the sector</p>

2.2.4. Bottom line results for the social care workforce

The evidence is presented in the form of a graphical evidence map (see Figure 2), populated by information describing the number and types of studies, reviews, organisational reports (non-research) with the innovation paired alongside the outcomes of interest (attraction, recruitment, and retention). If an innovation was described within the evidence as having the

potential to have an impact on the outcomes of interest, then this was indicated on the evidence map using the following key in the appropriate boxes (mixed methods: M, quantitative descriptive: D; qualitative descriptive: Q, reviews: R, organisational reports (non-research) O). If an innovation was implemented and also evaluated to determine its effectiveness on the outcomes of interest, then this was indicated in bold on the evidence map with a suffix of a plus sign (for example M+, D+, etc).

There were **11 innovations** that were suggested as being **helpful to attract, recruit and retain the wider social care workforce** reported across the evidence base. The only four innovations that had been implemented and evaluated were promoting career opportunities, pre-employment training initiatives, local and national recruitment campaigns, and values-based recruitment. Using **care workers as ambassadors** to promote career opportunities within social care can have a **positive impact on retention levels** of new staff and the ambassadors themselves feel more **valued** and **more likely to stay with their current employer** (mixed methods evidence). **Pre-employment training initiatives** such as the Care First Careers Pilot scheme are important in building basic care skills, interview preparation and confidence and can **enhance recruitment** (mixed methods evidence). **national recruitment campaigns**, specifically 'Every day is different campaign' saw an **increase in enquiries, applications, interviews, or vacancies filled** (organisational report evidence). **Values-based recruitment** has resulted in lower recruitment costs, positive return on investment, lower staff turnover and better staff performance (mixed methods and quantitative descriptive evidence). **Negative factors affecting turnover** were identified as **poor terms and conditions, low pay, unsociable working hours, and inexperience of both employees and managers**. On the other hand, **positive factors** included pay and retention bonuses, good working environment and celebrating achievements.

Figure 2: Evidence map of different study designs (colour) addressing various innovations (rows) against outcomes (columns) for the social care workforce

INNOVATION	OUTCOMES															
	Attract				Recruit				Retain							
Workforce planning									M	M	M	Q	Q	O	O	R
Increasing diversity	O	R	M	M												
	O	R	M	M												
	O	O	Q	Q												
	O															
Promoting career opportunities	O	M+	M	R	O	M+	M	R	O	M+	M	R				
	O	M	M	R	O	M	M	R	O	M	M	R				
	O	Q	M		O	Q	M		O	Q	M					
	Q	Q	M		Q	Q	M		Q	Q	M					
Pre-employment initiatives	O	O	O	O												
	M+	M	M	Q												
Local and national recruitment campaigns	D+	O	O		D+	O	O									
Values-based recruitment	O	O	M+	Q	O	O	M+	Q	O	O	M+	Q				
	O	O	M	R	O	O	M	R	O	O	M	R				
	O	O	D+		O	O	D+		O	O	D+					
	O	M+	Q		O	M+	Q		O	M+	Q					
Supportive induction and development									O	M	R	Q				
									O	M	M	Q				
									M	M	M					
Pay, rewards and recognition					O	O	M	R								
					O	O	Q	R								
					O	M	Q	R								
					O	M	Q									
					O	M	D									
Training and career development									O	O	M	Q				
									O	R	M	Q				
									O	R	M	Q+				
									O	M	Q					
Apprenticeships					M	M	O	O								
					M	M	Q	O								
					R	R										
Good working conditions									M	M	M	M				
									Q	Q	Q	M				
									O	O	O					

Key: + indicates where an evaluation was conducted

Quantitative descriptive studies (D)	Qualitative descriptive studies (Q)	Organisational reports (non-research) (O)	Mixed method studies (M)	Review articles (R)
--------------------------------------	-------------------------------------	---	--------------------------	---------------------

3. DISCUSSION

3.1 Summary of the findings

The findings of this rapid review concur with other international work in this area in finding that the available evidence to inform best practice for social workers and the wider social care workforce is limited and is of variable quality (Johnston et al. 2020, Turley et al. 2020, Webb & Carpenter 2012). As a consequence, there is **little research into the effectiveness** of existing interventions. Out of nine innovations included in this rapid review to attract, recruit, and retain social workers, only three were evaluated. Similar to the available evidence on social workers, out of 11 innovations for the wider social care workforce, only four were evaluated. While these evaluations suggest that the innovations might have beneficial impact on attraction, recruitment, and retention of social workers and the wider social care workforce, as the evidence comes from small scale qualitative and mixed methods studies the findings should be interpreted with caution.

There is some international evidence however, that interventions provided at an organisational level as opposed to an individual worker level maybe effective to improve retention (Turley et al. 2020, Webb & Carpenter 2012). This is supported by this rapid review, as findings indicate that **national recruitment campaigns, values-based recruitment, and nomination of care work ambassadors** can positively impact on recruitment and retention levels. In addition, **pre-employment** and **career development training opportunities** organised by social care authorities, sometimes with academic institutions, such as the Care First Careers Pilot, practice learning, apprenticeships, and fast-track programmes might improve recruitment and retention of social workers and the wider social care workforce. There is also some indication from the international literature that when **more than one intervention** is introduced at the same time, this can trigger a **multiplier effect** (Lethbridge 2017).

While the rapid review reported here, and the international evidence indicates innovations that could potentially help attract, recruit, and retain social workers and the wider social care workforce, investigating the mechanisms of how these strategies work, for whom and in what circumstances were not the main focus of previous research. To answer what works in social care services, for which staff, and under what circumstances, one realist review of the international evidence is currently underway (Devi et al. 2021).

In addition to innovations, this rapid review identified a broad range of factors associated with turnover and retention in social workers and the wider social care workforce. Frequently cited factors causing social workers to leave were identified as **high caseloads and excessive workload, combined with organisational stress**. Negative factors affecting turnover of the wider social care workforce were identified as **poor terms and conditions, low pay, unsociable working hours**, and inexperience of both employees and managers. On the other hand, positive factors included **pay and retention bonuses, good working environment and celebrating achievements**. This corresponds with previous reviews conducted across the international evidence base (Turnpenny & Hussein 2020).

3.2 Limitations of the available evidence

This rapid review was conducted to inform strategies that could help attract, recruit, and retain social workers and the social care workforce in the UK. While it has been mentioned that **some of the workforce issues were exacerbated by the COVID-19 pandemic and Brexit, most of the included primary research studies were conducted pre-pandemic**. From the available evidence, only four has been published since the pandemic started and when the UK officially left the European Union (Reddington et al. 2020, Scourfield et al. 2020, Skills for Care 2020, Stone & Worsley 2021). However, **three of these primary research studies reported the results of pre-pandemic data** (Reddington et al. 2020, Scourfield et al. 2020, Skills for Care 2020). One study collected data during the beginning of the pandemic, and while the survey tool was not developed to explore the impact of the pandemic on apprenticeships, some social work students reported that universities responded well, and highlighted the importance of online peer support (Stone & Worsley 2021). However, this feedback did not provide insight on whether the pandemic impacted on the attraction, recruitment, and retention of social workers. Thus, **the findings from the included studies might not be fully generalisable to the circumstances brought on by the pandemic and Brexit**.

A more significant issue with the available UK evidence is that **included primary research studies mainly relied on more descriptive and explorative methodologies, such as surveys, qualitative research, and mixed methods**, and none of the available evidence originated from experimental designs, such as randomised controlled trials, which are considered gold standard in the hierarchy of evidence. This is also the case from the international evidence base where a lack of controlled studies has also been noted (Johnston et al. 2020, Lethbridge 2017, Webb & Carpenter 2012). While this does not mean that the interventions and strategies summarised in this rapid review could not be advantageous in attracting, recruiting, and retaining social care workforce, **the findings of the included primary studies should be interpreted with caution**.

3.3 Quality of the available evidence

Studies were critically appraised with MMAT based on their chosen methodologies (further information on the MMAT and the quality appraisal is presented in the [Appendix](#)). Out of the six included qualitative studies only one (Atkinson et al. 2016) met all quality criteria of the MMAT, indicating a well conducted and reported research. Three qualitative studies met 80% of MMAT criteria due to uncertainty arising from the way analysis methods and data interpretation were reported (Baginsky 2013, Lucas et al. 2009, Moriarty et al. 2018). Two qualitative studies only met 20% of the MMAT quality criteria due to poor reporting of methods (Cornes et al. 2011, Ross et al. 2016).

Three quantitative descriptive studies, such as surveys were included in this rapid review, out of which only one study met all quality criteria of the MMAT (Evans & Huxley 2009), indicating an adequately reported, methodologically sound research. One study met 80% of the MMAT criteria (Skills for Care 2020), due to unclear reporting of response rates, thus determining the potential for nonresponse bias was not possible. One study met 60% of the MMAT criteria (Reddington et al. 2020), as the reporting of the sampling strategy and response rates were insufficient.

Sixteen mixed methods primary research studies were included in the rapid review with varying methodological quality. None of the included studies met all MMAT criteria, due to reporting of the methods and results, or methodological issues. Five studies met 80% of the MMAT criteria (Baginsky et al. 2010, Ekosgen 2016, Parker & Whitfield 2006, Smith et al. 2018, Stone & Worsley 2021). These studies did not meet all criteria, as reporting of the methods often did not allow to determine if the studies followed the principles of qualitative trustworthiness, or if the design of the quantitative component was adequate. Two mixed methods primary studies met 60% of the MMAT quality criteria (Goode 2014, Rubery et al. 2011), due to unclear methodological rigour, and issues with the handling of differences and similarities between qualitative and quantitative findings. Five studies met 40% (Baginsky & Manthorpe 2016, Dobson & Byrne 2010, Figgett 2017, Mulholland et al. 2017, Smith et al. 2013) and four studies met 20% of the MMAT quality criteria (Consilium 2016, Ekosgen 2013, Johnston et al. 2017, Scourfield et al. 2020). There were various reasons for low quality rating, including unclear rationale for using mixed methods, insufficient integration and comparison of qualitative and quantitative findings, and poor reporting of methods and overall study results.

The organisational reports were not quality appraised; the value of their recommendations and policy proposals is inferred by the reputation for knowledge and professional expertise attached to the organisations themselves.

3.3 Implications for policy and practice

Despite a **proliferation of initiatives to promote attraction, recruitment and retention, there has been very little robust evaluation of specific approaches.** Future policy initiatives should **include evaluation planning from the outset to develop a more extensive evidence base.** Research funders should also be encouraged to design funding schemes to support research in this area. Initiatives can have unintended consequences, for example, increasing competition for candidates in an already-stretched employment market. Again, this reinforces the need for research on the implications of policy choices in this area.

Several approaches show promise. **For social work, these include a focus on practice learning which is well-embedded in local authorities, supportive induction and development activity, fast track graduate schemes and diverse career pathways.** Social Care Wales are currently devising a new social work framework for Wales that will consider these approaches. The research identified in this review can now be used to inform the recommendations for this framework.

For social care, there are a number of schemes in England that have been evaluated but similar versions in Wales have not. The schemes in England are the 'I Care Ambassador' programme (in Wales, Social Care Wales's WeCare Ambassador scheme), the 'Every day is different' attraction campaign (WeCare Wales in Wales), pre-employment schemes and apprenticeships. A promising new scheme is the 'Care Friends' refer-a-friend app – a review of this for the Welsh context could be helpful. There is a general acceptance in the literature that campaigns to promote care work are necessary and important, to counter the negative perceptions and low status of care work.

Systemic and structural factors need addressing for both social workers and social care workers. For social workers, high caseloads are cited in several studies as a cause for attrition, and other factors include stress, poor supervision, insufficient administrative support and dissonance between social work values and practice. For social care, well-known systemic issues – poor pay and working hours – feature in a number of studies as significant barriers to attraction and retention.

3.4 Strengths and limitations of this Rapid Review

Limitations of this rapid review mainly originate from the issues with the available evidence identified above which impact on the generalisability of the findings. In addition, the interventions mentioned in this rapid review are mainly based on qualitative and descriptive studies, and their effectiveness have not been determined through randomised controlled trials. Apart from the fast-track educational programmes for social workers and values-based recruitment for the wider social care workforce, there is a lack of primary research studies investigating the longer-term impact of interventions to attract, recruit and retain social workers and the social care workforce. Thus, the benefits of interventions presented in this rapid review cannot be declared with full certainty. **Further research is needed to determine the short- and long-term effectiveness of the interventions to attract, recruit, and retain social workers and the social care workforce.**

In this rapid review, all included evidence are UK-based, which is a potential strength for local audiences, but this does mean that this rapid review might not be generalisable outside the UK. Although the systematic searches focused on UK-based evidence, reviews of the international research on the topic area that were retrieved from an initial evidence summary have been referenced in the discussion and do draw similar conclusions.

The strength of this review is that a thorough search was undertaken by an information specialist across **three electronic databases, and the websites of 32 organisations** were searched. Although this was a rapid review in which several of the systematic review processes could have been streamlined, we searched a significant time period between 2001 and 2021, and it should be noted that data screening, data extraction and critical appraisal of each study were undertaken by different reviewers and then independently checked for accuracy and consistency by the same second reviewer. The synthesis identified overall that there was reasonable agreement among all the included literature, which may be considered to imply some degree of reliability.

4. REFERENCES

- All Party Parliamentary Group on Adult Social Care. (2021). A vision for social care. Available at: <https://adultsocialcareappg.com/> [Accessed 13th December 2021].
- Atkinson C, Crozier S, Lewis L. (2016). Factors that affect the recruitment and retention of domiciliary care workers and the extent to which these factors impact upon the quality of domiciliary care. Cardiff, Welsh Government. Available at: <https://gov.wales/sites/default/files/statistics-and-research/2019-07/160317-factors-affect-recruitment-retention-domiciliary-care-workers-final-en.pdf> [Accessed 13th December 2021].
- Baginsky M. (2013). Retaining experienced social workers in children's services: the challenge facing local authorities in England. London, King's College London. Available at: <https://kclpure.kcl.ac.uk/portal/files/151570334/baginsky13retaining.pdf> [Accessed 13th December 2021].
- Baginsky M, Manthorpe J. (2016). The views and experiences of step up to social work graduates: Two and a half years following qualification. *British Journal of Social Work*. 46: 2016-32.
- Baginsky M, Moriatry J, Manthorpe J, et al. (2010). Social workers' workload survey: messages from the frontline - findings from the 2009 survey and interviews with senior managers. London, The Social Work Task Force, Department for Children, Schools and Families. Available at: <https://dera.ioe.ac.uk/1945/1/SWTF%20Workload%20Survey%20%28final%29.pdf> [Accessed 13th December 2021].
- British Association of Social Workers. (2021). What do social workers do? Available at: <https://www.basw.co.uk/resources/become-social-worker/what-do-social-workers-do> [Accessed 13th December 2021].
- Care Provider Alliance, Local Government Association. (2021). Top tips for retention: a briefing for adult social care providers. London, Care Provider Alliance. Available at: <https://careprovideralliance.org.uk/assets/pdfs/top-tips-for-retention-cpa-lga-briefing.pdf> [Accessed 13th December 2021].
- Care Quality Commission. (2021). The state of health care and adult social care in England 2020/21. London, Care Quality Commission Available at: https://www.cqc.org.uk/sites/default/files/20211021_stateofcare2021_print.pdf [Accessed 1st November 2021].
- Competition & Markets Authority. (2021). Children's social care market study interim report. UK Government. Available at: <https://www.gov.uk/government/publications/childrens-social-care-market-study-interim-report/interim-report> [Accessed 13th December 2021].
- Consilium. (2016). Study into the impact of a values based approach to recruitment and retention. Leeds, Skills for Care. Available at: <https://www.skillsforcare.org.uk/Documents/NMDS-SC-and-intelligence/Research-evidence/Values-based-recruitment-Final-evaluation-report.pdf> [Accessed 13th December 2021].
- Cornes M, Gill L, Armstrong S, et al. (2011). Can emotional loyalty training improve workforce retention rates in social care? A case study of four provider organizations in rural Cumbria. *Journal of Care Services Management*. 5(2): 97-104.
- Devi R, Goodman C, Dalkin S, et al. (2021). Attracting, recruiting and retaining nurses and care workers working in care homes: the need for a nuanced understanding informed by evidence and theory. *Age and Ageing*. 50(1): 65-7.

Dobson C, Byrne Y. (2010). Evaluation of the Care First careers pilot: employer research. London, Department for Work and Pensions. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/214380/WP78.pdf [Accessed 13th December 2021].

Ekosgen. (2013). Why are some employers more successful than others in retaining their workforce? Final report. Leeds, Skills for Care. Available at: [https://www.skillsforcare.org.uk/Document-library/NMDS-SC,-workforce-intelligence-and-innovation/Research/Research-Reports/Workforce-Retention-Study-FINAL-\(DF-070313\).pdf](https://www.skillsforcare.org.uk/Document-library/NMDS-SC,-workforce-intelligence-and-innovation/Research/Research-Reports/Workforce-Retention-Study-FINAL-(DF-070313).pdf) [Accessed 13th December 2021].

Ekosgen. (2016). Product, process and outcome evaluation of I Care... Ambassadors - Phase 2: Interim process and outcome evaluation. Leeds, Skills for Care. Available at: <https://www.skillsforcare.org.uk/Documents/About/Evaluating-our-impact/Evaluation-of-the-products-and-processes-for-the-I-Care-Ambassadors-initiative.pdf> [Accessed 13th December 2021].

Evans S, Huxley P. (2009). Factors associated with the recruitment and retention of social workers in Wales: Employer and employee perspectives. *Health & Social care in the Community*. 17(3): 254-66.

Figgett D. (2017). Recruitment and retention in adult social care: secrets of success. Learning from employers what works well. Leeds, Skills for Care. Available at: <https://www.skillsforcare.org.uk/Documents/Recruitment-and-retention/Secrets-of-success/Recruitment-and-retention-secrets-of-success-report.pdf> [Accessed 13th December 2021].

Goode J. (2014). Value based recruitment toolkit: evaluation of 12 month pilot (July 2013/14): final report. Leeds, Skills for Care. Available at: <https://www.skillsforcare.org.uk/Document-library/Finding-and-keeping-workers/Practical-toolkits/Values-based-recruitment/Final-report.pdf> [Accessed 13th December 2021].

Griffin E. (2020). Potential impact of COVID 19 Government policy on the adult social care workforce. Brighton, Institute for Employment Studies Available at: https://www.employment-studies.co.uk/system/files/resources/files/Potential_impact_of_covid_policy_adult_social_care_workforce.pdf [Accessed 13th December 2021].

Holmes E, Miscampbell G, Robin B. (2013). Reforming social work: improving social worker recruitment, training and retention. London, Policy Exchange. Available at: https://www.basw.co.uk/system/files/resources/basw_94559-5_0.pdf [Accessed 13th December 2021].

Hong Q, Pluye P, Fàbregues S, et al. (2018). Mixed Methods Appraisal Tool (MMAT), version 2018. Registration of Copyright (#1148552). Canadian Intellectual Property Office. Available at: [https://www.nccmt.ca/knowledge-repositories/search/232%20\(accessed%20May%202017\)](https://www.nccmt.ca/knowledge-repositories/search/232%20(accessed%20May%202017)) [Accessed 1st November 2021].

Johnston L, Malcolm C, Rambabu L, et al. (2020). Supporting the resilience and retention of frontline care workers in care homes for older people: A scoping review and thematic synthesis. Available at: Preprint available from <https://www.medrxiv.org/content/10.1101/2020.09.05.20188847v1> [Accessed 5th November 2021].

Johnston L, Barker T, Holmes P, et al. (2017). Building the future social care workforce: a scoping study into workforce readiness, recruitment and progression in the social care sector. London, Social Care Institute for Excellence Available at: <https://www.scie.org.uk/future-of-care/care-workers/final-report> [Accessed 13th December 2021].

- Klinger C, Burns J, Movsisyan A, et al. (2021). Unintended health and societal consequences of international travel measures during the COVID-19 pandemic: a scoping review. *Journal of Travel Medicine*. 28(7).
- Lethbridge J. (2017). Recruitment and retention in social services: unlocking the sector's job creation potential. Brussels, Social Services Europe. Available at: <https://www.socialserviceseurope.eu/reports> [Accessed 13th December 2021].
- Local Government Association. (2014). Social work: a toolkit for social workers and employers. Local Government Association. Available at: <https://www.local.gov.uk/sites/default/files/documents/social-work-toolkit-social-0aa.pdf> [Accessed 13th December 2021].
- Local Government Association. (2015). Recruiting and retaining qualified social workers: LGA/PPMA member guide. London, Local Government Association.
- Lucas R, Atkinson C, Godden J. (2008). Employment practices and performance: rewards and incentives and their relationship to recruitment, retention and quality of service in adult social care in England: phase 1: literature review: Summary. Manchester Metropolitan University Business School. Available at: http://www.skillsforcare.org.uk/Document-library/NMDS-SC,-workforce-intelligence-and-innovation/Research/Research-Reports/Rewards-and-incentives/Litreview_Summary.pdf [Accessed 13th December 2021].
- Lucas R, C. A, J. G. (2009). Skills for care: Reward and incentives research. Nursing homes, residential homes and domiciliary care establishments. Manchester, Manchester Metropolitan University Business School. Available at: https://www.basw.co.uk/system/files/resources/basw_101251-10_0.pdf [Accessed 13th December 2021].
- Moriarty J, Manthorpe J, Harris J. (2018). Recruitment and retention in adult social care services. London, King's College London. Social Care Workforce Research Unit. Available at: https://kclpure.kcl.ac.uk/portal/files/86594147/Recruitment_and_retention_report.pdf [Accessed 13th December 2021].
- Mulholland S, Fawcett J, Granville S. (2017). Recruitment and retention in the social service workforce in Scotland. Scotland, Social Work Services Strategic Forum. Available at: <https://www.gov.scot/binaries/content/documents/govscot/publications/corporate-report/2016/12/social-work-recruitment-retention-project-survey-findings/documents/recruitment-retention-survey-findings-pdf/recruitment-retention-survey-findings-pdf/govscot%3Adocument/Recruitment%2B%2526%2BRetention%2BSurvey%2BFindings.pdf> [Accessed 13th December 2021].
- Nixon S, Murr A. (2006). Practice learning and the development of professional practice. *Social Work Education*. 25(8): 798-811.
- Page MJ, McKenzie JE, Bossuyt PM, et al. (2021). The PRISMA 2020 statement: an updated guideline for reporting systematic reviews. *BMJ*. 372: n71.
- Parker J, Doel M, Whitfield J. (2006). Does practice learning assist the recruitment and retention of staff. *Research Policy and Planning*. 24(3): 179-95.
- Parker J, Whitfield J. (2006). Effective practice learning in local authorities (2): workforce development, recruitment and retention. Leeds, Practice Learning Taskforce.
- Reddington M, Elmi F, Ahmadiyankooshkghazi M, et al. (2020). Adult social care provision in the NW region. An exploratory study of the employee experience. Leeds, Skills for Care. Available at: <https://www.skillsforcare.org.uk/Documents/About/Evaluating-our-impact/NW-adult-social-care-report-March-2020-FINAL.pdf> [Accessed 13th December 2021].
- Ross K, Strathearn D, Macaskill D. (2016). Voices from the front line. Exploring recruitment & retention of social care support workers. Ayr, Scottish Care. Available at:

<https://scottishcare.org/wp-content/uploads/2019/11/Voices-from-the-Frontline.pdf> [Accessed 13th December 2021].

Rubery J, Hebson G, Grimshaw D, et al. (2011). The recruitment and retention of a care workforce for older people. European Work and Employment Research Centre (EWERC), Manchester, University of Manchester. Available at: <http://www.scie-socialcareonline.org.uk/the-recruitment-and-retention-of-a-care-workforce-for-older-people/r/a11G0000017rimIAA> [Accessed 13th December 2021].

Scourfield J, Maxwell N, Venn L, et al. (2020). Social work fast track programmes: tracking retention and progression. Interim report. London, Department for Education. Available at: <https://cascadewales.org/research/social-work-fast-track-programmes-tracking-retention-and-progression/> [Accessed 13th December 2021].

Skills for Care. (2013). Finders keepers: The adult social care sector recruitment and retention toolkit. Leeds, Skills for Care. Available at: <https://www.skillsforcare.org.uk/Document-library/Finding-and-keeping-workers/Practical-toolkits/FindersKeepers.pdf> [Accessed 13th December 2021].

Skills for Care. (2020). A cross-sectional survey investigating the prevalence of values-based recruitment and retention approaches in the adult social care sector in England. Leeds, Skills for Care. Available at: <https://www.skillsforcare.org.uk/Documents/Recruitment-and-retention/Values-and-behaviours-based-recruitment/Values-based-recruitment-prevalence-survey.pdf> [Accessed 13th December 2021].

Skills for Care. (2021a). Funded initiatives to help you to recruit and develop staff. Leeds, Skills for Care. Available at: <https://www.skillsforcare.org.uk/Documents/Recruitment-and-retention/Funded-initiatives-to-help-you-to-recruit-and-develop-staff.pdf> [Accessed 13th December 2021].

Skills for Care. (2021b). Skills for Care: The State of the adult social care sector and workforce in England. Leeds, Skills for Care. Available at: <https://www.skillsforcare.org.uk/adult-social-care-workforce-data/Workforce-intelligence/publications/national-information/The-state-of-the-adult-social-care-sector-and-workforce-in-England.aspx> [Accessed 13th December 2021].

Smith A, McLenachan J, Venn L, et al. (2013). Step up to Social Work Programme evaluation 2012: the regional partnerships and employers perspectives. London, Department for Education. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/563268/Step_up_to_Social_Work_Programme_Evaluation_2012.pdf.

Smith R, Stepanova E, Venn L, et al. (2018). Evaluation of Step Up to Social Work, cohorts 1 and 2: 3-years and 5-years on: research report. London, Department for Education. Available at: <https://www.gov.uk/government/publications/step-up-to-social-work-evaluation-after-3-and-5-years> [Accessed 13th December 2021].

Social Care Leaders. (2021). Social care leaders' vision for a future workforce strategy. London, Care Provider Alliance Available at: <https://careprovideralliance.org.uk/assets/pdfs/vision-for-a-future-workforce-strategy-july-2021.pdf> [Accessed 13th December 2021].

Social Care Wales. (2021). A healthier Wales - Our workforce strategy for health and social care (Social Care Wales - Delivery Plan 2021/2022). Cardiff, Social Care Wales. Available at: https://socialcare.wales/cms_assets/file-uploads/Workforce-Strategy.pdf [Accessed 13th December 2021].

Social Work Services Strategic Forum. (2016). The position on recruitment and retention in the social service workforce in Scotland. Literature review report. June 2016. Scotland, Social Work Services Strategic Forum. Available at:

<https://www.gov.scot/binaries/content/documents/govscot/publications/corporate-report/2016/06/social-work-recruitment-and-retention-project-literature-review/documents/social-work-recruitment-retention-project-literature-review-pdf/social-work-recruitment-retention-project-literature-review-pdf/govscot%3Adocument/Social%2Bwork%2Brecruitment%2Band%2Bretention%2Bproject%2B-%2Bliterature%2Breview.pdf> [Accessed 13th December 2021].

Stone C, Worsley A. (2021). 'It's my time now': the experiences of social work degree apprentices. *Social Work Education*. DOI: 10.1080/02615479.2021.1873936

Swift J, Teicke J. (2021). Evidence review and sector consultation to inform Skills for Care strategy: Final sector report. Leeds, Skills for Care. Available at: <https://www.skillsforcare.org.uk/Documents/Evidence-review-and-consultation-analysis.pdf> [Accessed 13th December 2021].

The King's Fund. (2018). *The health care workforce in England. Make or break?* London, The King's Fund, The Health Foundation, Nuffield Trust. Available at: <https://www.kingsfund.org.uk/publications/health-care-workforce-england> [Accessed 5th November 2021].

Thomas J, O'Mara-Eves A, Harden A, et al. (2017) Chapter 8. Synthesis methods for combining and configuring textual or mixed methods data. In Gough D, Oliver D, Thomas J (eds) *An introduction to systematic reviews*. London, SAGE publications Ltd.

Thordardottir B, Malmgren Fänge A, Lethin C, et al. (2019). Acceptance and use of innovative assistive technologies among people with cognitive impairment and their caregivers: A systematic review. *BioMed Research International*. 2019: 9196729.

TLAP. (2021). TLAP Care and Support Jargon Buster. Available at: <https://www.thinklocalactpersonal.org.uk/widgets/jargon-widget/?a2z=1&filter=1&letters=1#Social%20worker> [Accessed 2nd December 2021].

Turley R, Roberts S, Foster C, et al. (2020). Promoting the retention, mental health and wellbeing of child and family social workers: a systematic review of workforce Interventions. July 2020. London, What Works for Children's Social Care. Available at: <https://whatworks-csc.org.uk/research-report/promoting-the-retention-mental-health-and-wellbeing-of-child-and-family-social-workers-a-systematic-review-of-workforce-interventions/> [Accessed 13th December 2021].

Turnpenny A, Hussein S. (2020). Recruitment and retention of the social care workforce: longstanding and emerging challenges during the COVID-19 pandemic. London, The Health Foundation Available at: https://researchonline.lshtm.ac.uk/id/eprint/4662686/1/RESSCW_Policy_Brief_revised_final2.pdf [Accessed 13th December 2021].

Webb CM, Carpenter J. (2012). What can be done to promote the retention of social workers? A systematic review of interventions. *British Journal of Social Work*. 42(7): 1235-55.

Welsh Government. (2016). *Domiciliary care workforce: improving the recruitment and retention of domiciliary care workers in Wales: Consultation - summary of response*. Cardiff, Welsh Government. Available at: <https://gov.wales/sites/default/files/consultations/2018-01/161117domiciliary-consultation-responsesen.pdf> [Accessed 13th December 2021].

Work Foundation. (2021). *Social care: a guide to attracting and retaining a thriving workforce*. Lancaster, Work Foundation. Available at: <https://www.lancaster.ac.uk/media/lancaster-university/content-assets/documents/lums/work-foundation/reports/SocialCareGuide.pdf> [Accessed 13th December 2021].

5. RAPID REVIEW METHODS

5.1 Eligibility criteria

The inclusion criteria were informed by SPIDER (Sample, Phenomenon of Interest, Design, Evaluation, Research type) framework

	Inclusion criteria	Exclusion criteria
Sample	All staff working within child and adult social care. For example, social workers, community occupational therapists; care workers; support workers; day services workers; domiciliary care workers; nurses	Volunteers Hospital based nurses
Phenomenon of interest	Innovations or factors that help to attract, recruit and retain Factors which influence turnover	Predictors of intention to leave / turnover by organisational and demographic characteristics
Design	Published literature of any research design, grey literature (UK third sector and government reports and briefings)	
Evaluation	Characteristics, views, experiences	
Study design	Qualitative, quantitative, and mixed methods	
Countries	UK	
Language of publication	English	
Publication date	2001	
Publication type	Published and preprint	
Other factors		

5.2 Literature search

Searches were conducted across three databases: On the OVID platform: MEDLINE and, Social Policy and Practice and Scopus from 2001 to November 2021 for English language citations. The websites of key third sector and government organisations were searched ([see Appendix](#))

An initial search of MEDLINE was undertaken (retention or retain* or recruit* or turnover or attract AND social work* or care work* or domiciliary care or residential care) followed by analysis of the text words contained in the title and abstract, and of the index terms used to describe article. This informed the development of a search strategy which was tailored for each information source. A full search strategy for Medline is provided ([see Appendix](#)). The reference list of all included studies was screened for additional studies.

All citations retrieved from the database searches were imported into EndNote™ (Thomson Reuters, CA, USA) and duplicates removed. Irrelevant citations will be removed by searching for keywords within the title using the search feature within the Endnote software.

The project team agreed which keywords to use to identify papers which did not meet the inclusion criteria. At the end of this process the citations that remained were exported as an XML file and then imported to Covidence™.

5.3 Study selection process

Two reviewers dual screened at least 20% of citations using the information provided in the title and abstract using the software package Covidence™, resolving all conflicts. The citations were then screened by a single reviewer with categories of include, exclude; at least 50% of all those that were categorised as exclude were screened by a second reviewer, resolving all conflicts as needed.

For citations that appeared to meet the inclusion criteria, or in cases in which a definite decision could not be made based on the title and/or abstract alone, the full texts of all citations were retrieved. The full texts were screened for inclusion by two reviewers using the software package Covidence™ and any disagreements resolved by a third reviewer. The flow of citations through each stage of the review process is displayed in a PRISMA flowchart. The reasons for exclusions were listed ([see Appendix](#))

5.4 Data extraction

All demographic data were extracted directly into tables by one reviewer and checked by another. The data extracted included specific details about the interventions, populations, study methods and outcomes of significance to the review question and specific objectives. All outcome data were extracted independently by two reviewers and the software package NVIVO™ was used to facilitate this process.

5.5 Quality appraisal

The methodological quality of all the research studies was assessed by one reviewer (and judgements verified by a second reviewer) using the Mixed Methods Appraisal Tool (MMAT) Version 2018 (Hong et al. 2018) and reported in a table ([see Appendix](#)). The MMAT contains two initial screening questions and five separate study design sections for the appraisal of qualitative, quantitative (randomised controlled trials, non-randomised, and descriptive studies), or mixed methods research. As part of this rapid review, sections were completed according to study design, for example if the study is qualitative, only section 1 for qualitative research will be completed. Each section contains five questions inquiring about the quality of the methods used, and their appropriateness to answer the study question. Each question was answered as 'yes', 'no', or 'can't tell', depending on the study meeting the quality criteria and availability of information (Hong et al. 2018).

In this rapid review, an overall study quality rating was generated, in which stars (*) were allocated to each 'yes' answer, if any questions were answered 'no' or 'can't tell', no stars were given. Based on how many stars a study has, a final quality percentage was provided. Studies that scored five stars (*****) in the given study design section were rated as 100% meeting the MMAT quality criteria, while studies with no stars were scored 0% indicating poor reporting or methodological quality (Thordardottir et al. 2019).

5.6 Synthesis

The data were reported narratively as a series of thematic summaries (Thomas et al. 2017). The themes were developed a priori based on one recent third sector report (Skills for Care 2021a) and evidence review with sector consultation (Swift & Teicke 2021). The evidence was presented in the form of a graphical evidence map (Klinger et al. 2021), populated by information describing the number and types of studies, reviews, organisational reports (non-research) if any that explored and evaluated the innovation paired alongside the outcomes (attraction, recruitment and retention).

6. EVIDENCE

6.1 Study selection flow chart

The flow of citations through each stage of the review process is displayed in a PRISMA flowchart (Page et al. 2021), see Figure 3.

6.2 Additional information available below and on request

1. Full search strategies
2. List of organisational websites searched
3. Critical appraisal scores
4. Excluded studies
5. Protocol

This is available at:

http://www.primecentre.wales/resources/RR00026_Social_care_recruitment_additional_material_December_2021.pdf

7. ADDITIONAL INFORMATION

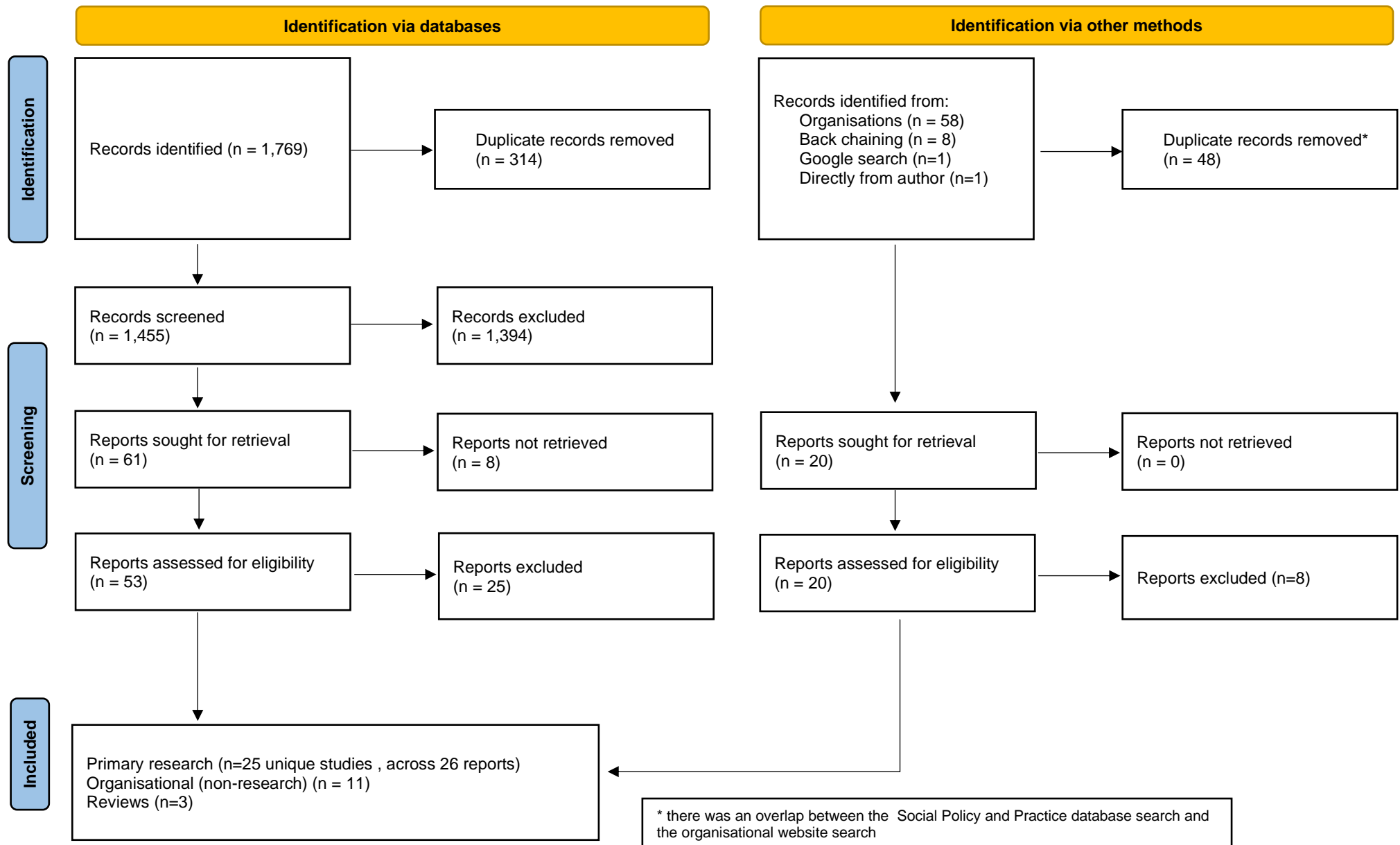
7.1 Conflicts of interest

The authors declare they have no conflicts of interest to report.

7.2 Acknowledgements

The authors would like to thank Lisa Trigg and Jon Day for their contribution in guiding the focus of the review and to interpreting the findings.

Figure 3: PRISMA 2020 flow diagram for primary research, review articles and grey literature which included searches of databases and other sources



ABOUT THE WALES COVID-19 EVIDENCE CENTRE (WCEC)

The WCEC integrates with worldwide efforts to synthesise and mobilise knowledge from research.

We operate with a core team as part of [Health and Care Research Wales](#), are hosted in the [Wales Centre for Primary and Emergency Care Research \(PRIME\)](#), and are led by [Professor Adrian Edwards of Cardiff University](#).

The core team of the centre works closely with collaborating partners in [Health Technology Wales](#), [Wales Centre for Evidence-Based Care](#), [Specialist Unit for Review Evidence centre](#), [SAIL Databank](#), [Bangor Institute for Health & Medical Research/ Health and Care Economics Cymru](#), and the [Public Health Wales Observatory](#).

Together we aim to provide around 50 reviews per year, answering the priority questions for policy and practice in Wales as we meet the demands of the pandemic and its impacts.

Director:

Professor Adrian Edwards

Contact Email:

WC19EC@cardiff.ac.uk

Website: <https://healthandcareresearchwales.org/about-research-community/wales-covid-19-evidence-centre>

8. APPENDICES

Table 1: Summary table of included studies for social workers

Citation Citation retrieval source	Participants Setting Geographical location	Aims, study designs Data collection methods MMAT critical appraisal scores
<p>Baginsky et al. 2010</p> <p>Social workers' workload survey: messages from the frontline: findings from the 2009 survey and interviews with senior managers https://dera.ioe.ac.uk/1945/1/SWTF%20Workload%20Survey%20%28final%29.pdf</p> <p>Back chaining</p>	<p><u>Participants (survey)</u> Employees (n=1153) - social workers (71%) - senior social workers/practitioners (13%)</p> <p>Employers - managers (12%)</p> <p><u>Participants (interviews)</u> Employers - Senior officers from all cooperating agencies (n=52)</p> <p><u>Setting</u> Adult service departments (25%) Children's service departments (63%) Joint departments (2%) Private, Voluntary and independent sector (10%)</p> <p><u>Geographical location</u> England</p>	<p><u>Aims</u> To look at all of the factors that impact on frontline social work practice and to conduct a survey of workloads and pressures facing social workers</p> <p><u>Study design</u> Mixed methods</p> <p><u>Data collection methods</u> Diary Survey (with open and closed questions which generated qualitative and quantitative data) Interviews (telephone)</p> <p><u>MMAT critical appraisal scores</u> 80% (****) meeting MMAT quality criteria</p>
<p>Baginsky 2013</p> <p>Retaining experienced social workers in children's services: the challenge facing local authorities in England https://kclpure.kcl.ac.uk/portal/files/151570334/baginsky13retaining.pdf</p> <p>Database searching</p>	<p><u>Participants</u> Employers - representatives of children's services in 34 local authorities in England - senior managers with responsibility for workforce issues in 18 local authorities (interviews) - assistant directors and heads of service (n=20)</p> <p><u>Setting</u> Local authority children's services</p>	<p><u>Aims</u> To understand more about the challenges facing social work</p> <p>After the more general discussions were concluded, in each group a summary of the approaches being taken to recruit and retain experienced social workers and any additional suggestions was compiled</p> <p><u>Study design</u> Qualitative descriptive</p>

	<u>Geographical location</u> England	<u>Data collection methods</u> Group discussions Interviews (face to face and telephone) <u>MMAT critical appraisal scores</u> 80% (****) meeting MMAT quality criteria
Baginsky & Manthorpe 2016 The views and experiences of Step up to social work graduates: Two and a half years following qualification https://academic.oup.com/bjsw/article-abstract/46/7/2016/2622262?redirectedFrom=fulltext Back chaining	<u>Participants</u> Employees - Step up to social work graduates (n=138) <u>Setting</u> Child and family; Children's service departments (82%) Adult and other services (4%) Non-social work-related settings (14%) <u>Geographical location</u> England	<u>Aims</u> To report findings from a survey of the first cohort of the new English fast-track, employer-led programme: Step Up to Social Work <u>Study design</u> Mixed methods <u>Data collection methods</u> Surveys (online survey with open and closed questions which generated qualitative and quantitative data) <u>MMAT critical appraisal scores</u> 40% (**) meeting MMAT quality criteria
Evans & Huxely 2009 Factors associated with the recruitment and retention of social workers in Wales: employer and employee perspectives https://pubmed.ncbi.nlm.nih.gov/19040696/ Database searching	<u>Participants</u> Employers - all local authority employers (n=22, rr 100%) Employees - all social workers and senior practitioners (n=998; rr 46%) <u>Setting</u> Adult Social services <u>Geographical location</u> Wales	<u>Aims</u> To determine: <ul style="list-style-type: none"> the scale of recruitment and retention problems within the social work profession in Wales how workplace and workforce characteristics might relate to staff retention the effectiveness of current initiatives to address recruitment and retention difficulties <u>Study design</u> Quantitative descriptive <u>Data collection methods</u> Surveys

		<p><u>MMAT critical appraisal scores</u> 100% (****) meeting MMAT quality criteria</p>
<p>Mulholland et al. 2017</p> <p>Recruitment and retention in the social service workforce in Scotland https://www.gov.scot/binaries/content/documents/govscot/publications/corporate-report/2016/12/social-work-recruitment-retention-project-survey-findings/documents/recruitment-retention-survey-findings-pdf/recruitment-retention-survey-findings-pdf/govscot%3Adocument/Recruitment%2B%2526%2BRetention%2BSurvey%2BFindings.pdf</p> <p>Back chaining</p>	<p><u>Participants</u> Employers - stakeholders representing organisations from a wide range of areas and service types and employing several thousand service sector staff across the voluntary, independent and public sector Survey (n=163) Interview (n=50)</p> <p><u>Setting</u> Adult and children social care settings A variety of services that included Residential care homes for older people Adult day care Residential child care</p> <p><u>Geographical location</u> Scotland</p>	<p><u>Aims</u> The research looked at recruitment and retention issues relating to the following staff types: - Care / support workers and social workers (other staff also included but data not extracted)</p> <p><u>Study design</u> Mixed methods</p> <p><u>Data collection methods</u> Survey (online survey with open and closed questions which generated qualitative and quantitative data) Interviews (telephone) Literature review</p> <p><u>MMAT critical appraisal scores</u> 40% (**) meeting MMAT quality criteria</p>
<p>Parker et al. 2006</p> <p>Does practice learning assist the recruitment and retention of staff? https://www.academia.edu/24558129/Does_Practice_Learning_Assist_the_Recruitment_and_the_Retention_of_Staff</p> <p>Database searching</p> <p>Parker & Whitfield 2006</p>	<p><u>Participants</u> Employers - training managers responsible for practice learning</p> <p>Employees -practice teachers - new recruits (appointed ≤ 12 months ago) Total survey participants (n=39, rr 26%) Total interview participants (n=27)</p> <p><u>Setting</u> Councils with Social Services Responsibilities Takes into account social workers across multiple settings: children, adults, specialist settings etc</p>	<p><u>Aims</u> To help understand the current practice learning scene and to uncover activities aimed at enhancing recruitment and retention To address the question: does practice learning assist the recruitment and the retention of staff?</p> <p><u>Study design</u> Mixed methods</p> <p><u>Data Collection Methods</u> Survey Interview (face to face, telephone, email)</p> <p><u>MMAT critical appraisal scores</u></p>

<p>Effective practice learning in local authorities (2) Workforce development, recruitment and retention (not available online)</p> <p>Back chaining</p>	<p><u>Geographical location</u> England</p>	<p>80% (***) meeting MMAT quality criteria</p>
<p>Scourfield et al. 2020</p> <p>Social work fast track programmes: tracking retention and progression Interim Report https://cascadewales.org/research/social-work-fast-track-programmes-tracking-retention-and-progression/</p> <p>Back chaining</p>	<p><u>Participants</u> Employees</p> <ul style="list-style-type: none"> - Step up to social work graduates 2017 survey (n=212, rr 49%) / 2018 survey (n=171, rr 39%) 2019 survey (N/A) Interviews (n=21) - Frontline programme graduates 2017 survey (N/A) 2018 survey (based on 3 cohorts: n=81-99, rr 69-82%) 2019 survey (based on 4 cohorts: n=62-155, rr 49-71%) Interviews (n=27) <p><u>Setting</u> Child and family social work</p> <p><u>Geographical location</u> England</p>	<p><u>Aims</u> To investigate the longer-term outcomes (up to early 2021) for Frontline cohorts 1 to 5 and Step Up to Social Work cohorts 4 and 5</p> <p><u>Study design</u> Mixed methods</p> <p><u>Data Collection Methods</u> Survey (online survey with open and closed questions which generated qualitative and quantitative data) Interviews (semi-structured telephone interviews)</p> <p><u>MMAT critical appraisal scores</u> 20% (*) meeting MMAT quality criteria</p>
<p>Smith et al. 2013</p> <p>Step Up to Social Work programme evaluation 2012: the regional partnerships and employers' perspectives https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/563268/Step_up_to_Social_Work_Programme_Evaluation_2012.pdf</p>	<p><u>Participants</u> Employers</p> <ul style="list-style-type: none"> - key stakeholders in regional partnerships (n=93) - regional partnership members (n=75; rr 30%) <p><u>Setting</u> Eight regional partnerships between local authorities and higher education institutions Child and family social work</p> <p><u>Geographical locations</u></p>	<p><u>Aims</u> To determine the effectiveness of 'Step Up to Social Work', a fast track, master's level qualifying programme for social work</p> <p><u>Study design</u> Mixed methods</p> <p><u>Data collection methods</u> Quantitative analysis of recruitment and selection patterns and outcomes Analysis of key policy and programme documents Interviews</p>

<p>Database searching</p>	<p>England (East, East Midlands, Greater Manchester, West London, West Midlands, Yorkshire and Humber, Merseyside and Cheshire)</p>	<p>Surveys</p> <p><u>MMAT critical appraisal scores</u> 40% (**) meeting MMAT quality criteria</p>
<p>Smith et al. 2018</p> <p>Evaluation of Step Up to Social Work Cohorts 1 and 2: 3-years and 5-years on. Research Report https://www.gov.uk/government/publications/step-up-to-social-work-evaluation-after-3-and-5-years</p> <p>Database searching</p>	<p><u>Participants</u> Employer interview (n=14) -managers (n=3) -workforce development roles (n=5) -practice educators (n=3) -Step Up for social work coordinators (n=3)</p> <p>Employees -Step up for social work cohort 1 Survey 1 (n=61, rr 52%) / Survey 2 (n=41, rr 67%) Interview (n=21) -Step up for social work cohort 2 Survey 1 (n=60, rr 37%) / Survey 2 (N/A) Interview (n=11)</p> <p>Comparators trained via traditional route Survey 1 (n=86, rr 37% approx) / Survey 2 (n=31, rr 63%) Interview (n=31)</p> <p>-Step up for social work leavers Interview (n=7)</p> <p><u>Setting</u> Child and family social work</p> <p><u>Geographical locations</u> England</p>	<p><u>Aims</u> To assess the effectiveness of Step Up to Social Work as a route into practice in child and family social work</p> <p><u>Study design</u> Mixed methods</p> <p><u>Data collection methods</u> Interviews (semi-structured and unstructured (for leavers) telephone interviews) Survey (online survey with open and closed questions which generated qualitative and quantitative data)</p> <p><u>MMAT critical appraisal scores</u> 80% (****) meeting MMAT quality criteria</p>
<p>Stone & Worsley 2021</p> <p>'It's my time now': the experiences of social work degree apprentices</p>	<p><u>Participants</u> Employees - students enrolled in a social work apprenticeship (n=29, rr 36%)</p> <p><u>Setting</u></p>	<p><u>Aims</u> One part of a mixed methods study to examine the experience of social work degree apprentices</p> <p><u>Study design</u> Mixed methods</p>

<p>https://www.tandfonline.com/doi/full/10.1080/02615479.2021.1873936</p> <p>Database searching</p>	<p>Social work Higher education</p> <p><u>Geographical location</u> England (Northwest)</p>	<p><u>Data collection methods</u> Survey (online survey with open and closed questions which generated qualitative and quantitative data)</p> <p><u>MMAT critical appraisal scores</u> 80% (***) meeting MMAT quality criteria</p>
--	---	--

Table 2: Summary table of included studies for social care workforce

Citation Citation retrieval source	Participants Setting Geographical location	Aims, study designs Data collection methods MMAT critical appraisal scores
<p>Atkinson et al. 2016 Factors that affect the recruitment and retention of domiciliary care workers and the extent to which these factors impact upon the quality of domiciliary care. Welsh Government https://gov.wales/sites/default/files/statistics-and-research/2019-07/160317-factors-affect-recruitment-retention-domiciliary-care-workers-final-en.pdf</p> <p>Database searching Organisational website</p>	<p><u>Participants</u> Employers - managers (n=48); commissioners (n=24) Employees - domiciliary care worker (n=41)</p> <p><u>Setting</u> Adult social care Domiciliary care</p> <p><u>Geographical location</u> Wales (7 local authority areas)</p>	<p><u>Aims</u> Exploring the factors that affect the recruitment and retention of domiciliary care workers and the extent to which these factors impact upon the quality of domiciliary care</p> <p><u>Study design</u> Qualitative descriptive</p> <p><u>Data collection methods</u> Focus groups Interviews</p> <p><u>MMAT critical appraisal scores</u> 100% (*****) meeting MMAT quality criteria</p>
<p>Consilium 2016 Study into the impact of a values-based approach to recruitment and retention https://www.skillsforcare.org.uk/Documents/NMDS-SC-and-intelligence/Research-evidence/Values-based-recruitment-Final-evaluation-report.pdf</p> <p>Database searching Organisational website</p>	<p><u>Participants</u> Employers - social care employers (n=112)</p> <p><u>Setting</u> Adult Social care</p> <p><u>Geographical location</u> England</p>	<p><u>Aims</u> An evaluation of the VBRT pilot The main objective was to understand the longer term impact of values-based recruitment and retention, including an assessment of the associated cost savings, compared with traditional methods used in the sector</p> <p><u>Study design</u> Mixed methods</p> <p><u>Data collection methods</u> Surveys (online) Interviews Case studies</p> <p><u>MMAT critical appraisal scores</u> 20% (*) meeting MMAT quality criteria</p>

<p>Cornes et al. 2011</p> <p>Can emotional loyalty training improve workforce retention in social care? A case study of four provider organisations in rural Cumbria https://www.tandfonline.com/doi/abs/10.1179/175016811X12966397673713?journalCode=yasm20</p> <p>Database searching</p>	<p><u>Participants</u> Employers - social care managers in 4 social care organisations who had undertaken a training course in in personal effectiveness, mental toughness and emotional loyalty. (n=23 out of 32 who received the training)</p> <p><u>Settings</u> Adult and children Domiciliary care agency (n=1) Large learning disabilities charity (n=1) Special school for looked after children (n=1) Care home for older people with dementia (n=1)</p> <p><u>Geographical location</u> England (Rural Cumbria)</p>	<p><u>Aims</u> To evaluate a recruitment and retention strategy that included the appointment of a project officer to support recruitment and retention, and a 2-day intensive training course for social care managers in personal effectiveness, mental toughness and emotional loyalty</p> <p><u>Study design</u> Qualitative descriptive</p> <p><u>Data collection methods</u> Focus groups Telephone interviews</p> <p><u>MMAT critical appraisal scores</u> 20% (*) meeting MMAT quality criteria</p>
<p>Dobson & Byrne 2010</p> <p>Evaluation of the Care First Careers pilot https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/214380/WP78.pdf</p> <p>Database searching</p>	<p><u>Participants</u> Employers - employers in the districts where the Care First Careers pilot projects were operating (n=30)</p> <p><u>Setting</u> Adult Social care The Care First Careers pilot offered employers the choice of taking employment candidates who had been through a Pre-employment Training programme plus a recruitment subsidy (£650), or a recruitment subsidy alone (£1500)</p> <p><u>Geographical location</u> England (three districts) and Wales (Southwest)</p>	<p><u>Aims</u> To conduct 30 interviews with employers across the 4 pilot districts and make recommendations as to how the Care First Careers could be rolled out nationally</p> <p><u>Study design</u> Mixed methods</p> <p><u>Data collection methods</u> Survey (conducted as interview with open and closed questions which generated qualitative and quantitative data)</p> <p><u>MMAT critical appraisal scores</u> 40% (**) meeting MMAT quality criteria</p>
<p>Ekosgen 2013</p> <p>Why are some employers more successful than others in retaining their workforce</p>	<p><u>Participants</u> Employers - managers (n=80) from providers with below average turnover (or high retention)</p>	<p><u>Aims</u> To gather and analyse evidence from employers about the measures they can take that can influence retention with a view to helping Skills for Care to develop tools and products to assist other employers in addressing high turnover</p>

<p>https://www.skillsforcare.org.uk/Document-library/NMDS-SC,-workforce-intelligence-and-innovation/Research/Research-Reports/Workforce-Retention-Study-FINAL-(DF-070313).pdf</p> <p>Database searching</p>	<p>- managers (n=19) from providers with above average turnover (or low retention) - individual employer (n=93)</p> <p>Employees - employees (n=160) from providers with below average turnover (or high retention) - personal assistants (n=52)</p> <p><u>Setting</u> Adult Residential care Nursing care Domiciliary care Day care Community care</p> <p><u>Geographical location</u> UK</p>	<p><u>Study design</u> Mixed methods</p> <p><u>Data collection methods</u> Interviews Focus groups Surveys Evidence review Analysis of data from the national Minimum Data Set for Social Care</p> <p><u>MMAT critical appraisal scores</u> 20% (*) meeting MMAT quality criteria</p>
<p>Ekosgen 2016</p> <p>Product, process and outcome evaluation of <i>I Care...Ambassadors</i> Phase 2: Interim process and outcome evaluation</p> <p>https://www.skillsforcare.org.uk/Documents/About/Evaluating-our-impact/Evaluation-of-the-products-and-processes-for-the-I-Care-Ambassadors-initiative.pdf</p> <p>Back-chaining</p>	<p><u>Participants</u> Employers (n=88) Event organisers (n=10) Programme Stakeholders (n=6)</p> <p>Employees - ambassadors (n=46)</p> <p><u>Setting</u> Adult Social Care</p> <p><u>Geographical Location</u> England</p>	<p><u>Aims</u> This study was in two phases: Phase 1 focused primarily on the resources that are available to those involved in <i>I Care</i> Phase 2 focused primarily on the outcomes and impacts being generated by the employer led initiative.</p> <p>The objectives of Phase 2 of the evaluation were to consider:</p> <ul style="list-style-type: none"> • Motivations for employers' and Ambassadors' involvement with the initiative; • Outcomes experienced by employers, Ambassadors and audiences; • Funding and future sustainability options. <p><u>Study design</u> Mixed methods</p> <p><u>Data collection methods</u></p> <ul style="list-style-type: none"> • Telephone surveys (ambassadors & employers)

		<ul style="list-style-type: none"> • Qualitative consultations (event organisers & programme stakeholders) • Follow up consultations (employers (n=5) ambassadors (n=3)) <p><u>MMAT critical appraisal scores</u> 80% (****) meeting MMAT quality criteria</p>
<p>Figgett 2017</p> <p>Recruitment and retention in adult social care: secrets of success: Learning from employers what works well https://www.skillsforcare.org.uk/Documents/Recruitment-and-retention/Secrets-of-success/Recruitment-and-retention-secrets-of-success-report.pdf</p> <p>Database searching Organisational website</p>	<p><u>Participants</u> Employers - social care employers with low staff turnover rates (defined as less than 10%) (n=140)</p> <p><u>Setting</u> Adult Residential care (42%) Domiciliary care (36%) Community care (12%) Day care (4%) Other (6%)</p> <p><u>Geographical location</u> England</p>	<p><u>Aims</u> To investigate what contributes to adult social care employers' success in relation to recruitment and retention</p> <p><u>Study design</u> Mixed methods</p> <p><u>Data collection methods</u> Surveys (online or mailed survey with open and closed questions which generated qualitative and quantitative data)</p> <p><u>MMAT critical appraisal scores</u> 40% (**) meeting MMAT quality criteria</p>
<p>Goode 2014</p> <p>Value based recruitment toolkit: evaluation of 12 month pilot (July 2013/14): final report http://www.skillsforcare.org.uk/Document-library/Finding-and-keeping-workers/Practical-toolkits/Values-based-recruitment/Final-report.pdf</p> <p>Database searching Organisational website</p>	<p><u>Participants</u> Employers - using the VBRT (n=102)</p> <p><u>Setting</u> Adult Residential, domiciliary and day care</p> <p><u>Geographical location</u> UK</p>	<p><u>Aims</u> The toolkit was designed to help employers recruit people with the right social care values, who will stay with them to develop their careers in social care, adding value to their service. This report is a summary of the VBRT's first 12 months of operation, the pilot year</p> <p><u>Study design</u> Mixed methods</p> <p><u>Data collection methods</u> Surveys (telephone or online survey with open and closed questions which generated qualitative and quantitative data) Case studies</p>

		<p><u>MMAT critical appraisal scores</u> 60% (***) meeting MMAT quality criteria</p>
<p>Johnston et al. 2017</p> <p>Building the future social care workforce: a scoping study into workforce readiness, recruitment and progression in the social care sector https://www.scie.org.uk/future-of-care/care-workers/final-report</p> <p>Database searching Organisational website</p>	<p><u>Participants</u> Employers - national and local stakeholders including care providers and education and training providers (n=43)</p> <p><u>Setting</u> Adult Social care settings</p> <p><u>Geographical location</u> England (East London)</p>	<p><u>Aims</u> To research the latest data and evidence about the challenges in increasing workforce readiness in the recruitment of appropriately skilled staff and the development of high-quality career pathways in social care</p> <p><u>Study design</u> Mixed methods</p> <p><u>Data collection methods</u> Interviews Review of existing data and evidence on the state and size of the workforce Five case studies A futures workshop</p> <p><u>MMAT critical appraisal scores</u> 20% (*) meeting MMAT quality criteria</p>
<p>Lucas et al. 2009</p> <p>Skills for care: reward and incentives research. Nursing homes, residential homes and domiciliary care establishments https://www.basw.co.uk/system/files/resources/basw_101251-10_0.pdf</p> <p>Database searching</p>	<p><u>Participants</u> Employers - managers (n=20)</p> <p>Employees - care staff</p> <p><u>Setting</u> Adult Domiciliary care homes (n=6) Care homes (n=5) Care homes with nursing (n=5) Nursing homes (n=2)</p> <p><u>Geographical location</u> England (7 regions)</p>	<p><u>Aims</u> To identify and explore relationships between: pay, other rewards and incentives, terms and conditions of employment, qualifications and human resources factors; and staff vacancy, sickness and absence and turnover rates; and any relationships between these and outcomes for service users in terms of quality and continuity of care</p> <p><u>Study design</u> Qualitative descriptive</p> <p><u>Data Collection Methods</u> Interviews</p> <p><u>MMAT critical appraisal scores</u></p>

		80% (****) meeting MMAT quality criteria
<p>Moriarty et al. 2018</p> <p>Recruitment and retention in adult social care services https://kclpure.kcl.ac.uk/portal/files/86594147/Recruitment_and_retention_report.pdf</p> <p>Database searching Organisational website</p>	<p><u>Participants</u> Employers – human resource directors, managers and senior managers - Family carers Total participants (140)</p> <p>Employees – care workers, social workers, nurses, occupational therapists</p> <p><u>Setting</u> Adult Social care settings</p> <p><u>Geographical location</u> England</p>	<p><u>Aims</u> To explore if the 2014-2017 social care strategy is fit for purpose to meet future recruitment challenges from the perspective of people working and using the social care sector</p> <p>To explore the best levers that can be used to improve the ongoing and systemic difficulties in social care recruitment and retention and which can be seen as representing the most effective approach</p> <p><u>Study design</u> Qualitative descriptive</p> <p><u>Data collection methods</u> Open and closed questions via email Interviews Focus groups</p> <p><u>MMAT critical appraisal scores</u> 80% (****) meeting MMAT quality criteria</p>
Mulholland et al. 2017 (see Table1)		
<p>Reddington et al. 2020</p> <p>Adult social care provision in the NW region. An exploratory study of the employee experience. Skills for Care, Leeds 2020 https://www.skillsforcare.org.uk/Documents/About/Evaluating-our-impact/NW-adult-social-care-report-March-2020-FINAL.pdf</p> <p>Organisational website</p>	<p><u>Participants</u> Employers - managerial (n=283)</p> <p>Employees - direct care roles (n=642) - other regulated professional roles (n=47) - not direct care providing role (n=114)</p> <p><u>Setting</u> Adult Social care settings</p>	<p><u>Aims</u> To address 3 research questions: What motivates employees to join the adult social care sector? How do they perceive their working environment? What factors influence them to remain in their organisations and sector more generally, or choose to leave?</p> <p><u>Study design</u> Quantitative descriptive</p> <p><u>Data collection methods</u> Surveys</p>

	<u>Geographical location</u> The Northwest of England	<u>MMAT critical appraisal scores</u> 60% (***) meeting MMAT quality criteria
Ross et al. 2016 Voices from the front line. Exploring recruitment & retention of social care support workers. Scottish Care https://scottishcare.org/wp-content/uploads/2019/11/Voices-from-the-Frontline.pdf Organisational website	<u>Participants</u> Employees - members of the Front Line Support Worker Strategy Forum and/or Scottish Care, who considered themselves to have a front line role (n=40) <u>Setting</u> Adult Care home staff (n=17) Care at home (n=12) Care/housing support (n=7) Direct access homeless service (n=4) <u>Geographical location</u> Scotland	<u>Aims</u> To discover the qualities that front line workers in Scottish social care think are most important for the job, as well as what keeps them motivated and what might turn them away from social care. To investigate engagement, workforce satisfaction and motivation, and thereby inform the development of better recruitment and retention strategies <u>Study design</u> Qualitative descriptive <u>Data collection methods</u> Interviews (face to face or by telephone) <u>MMAT critical appraisal scores</u> 20% (*) meeting MMAT quality criteria
Rubery et al. 2011 The recruitment and retention of a care workforce for older people. European Work and Employment Research Centre (EWERC), University of Manchester February 2011. https://www.kcl.ac.uk/scwru/res/hrp/hrp-studies/HEARTH/dhinitiative/projects/ruberyetal2011recruitmentfinal.pdf Database searching Organisational website	<u>Participants</u> Employers - LA directors of social services (n=92 rr 62%) - key actors in LA commissioning and contracting (n=14, rr 93%) independent providers and LA inhouse departments (n=115, rr 115/>300) - national chains (n=10, rr 83%) - care providers (n=20, 67%) Employees Care workers (n=98, rr 98%) <u>Setting</u> Adult Social care settings <u>Geographical location</u>	<u>Aims</u> Overall, to contribute to the debate on how to recruit and retain a social care workforce to meet current and future needs, with a specific focus on care assistants and care for older adults <u>Study design</u> Mixed methods <u>Data collection methods</u> Interviews Surveys Case studies <u>MMAT critical appraisal scores</u> 60% (***) meeting MMAT quality criteria

	England	
<p>Skills for Care 2020</p> <p>A cross-sectional survey investigating the prevalence of values-based recruitment and retention approaches in the adult social care sector in England</p> <p>https://www.skillsforcare.org.uk/Documents/Recruitment-and-retention/Values-and-behaviours-based-recruitment/Values-based-recruitment-prevalence-survey.pdf</p> <p>Database searching Organisational website</p>	<p><u>Participants</u> Employers - social care providers registered with CQC (n=300)</p> <p><u>Setting</u> Adult Social care settings</p> <p><u>Geographical location</u> England</p>	<p><u>Aims</u> To establish how for the values-based approach to recruitment and retention had been adopted by the adult social care sector in England as a whole</p> <p><u>Study design</u> Quantitative descriptive</p> <p><u>Data Collection Methods</u> Survey (telephone)</p> <p><u>MMAT critical appraisal scores</u> 80% (****) meeting MMAT quality criteria</p>

Key: CQC: Care Quality Commission; LA: Local Authority; MMAT: mixed methods appraisal tool; RR: response rate; VBRT: Values-based Recruitment Toolkit

Table 3: Summary of evidence from UK organisational reports (non-research): Social workers

Citation Citation retrieval source	Details
<p>Holmes et al. 2013</p> <p>Reforming social work: improving social worker recruitment, training and retention https://www.basw.co.uk/system/files/resources/basw_94559-5_0.pdf</p> <p>Database searching Organisational website</p>	<p><u>Type of publication</u> Report of policy recommendations</p> <p><u>Focus</u> Social work profession and the provision of social services Broad focus: Child & Adult services</p> <p><u>Geographical location</u> UK</p> <p><u>Aims</u> This report outlines the barriers to achieving reform, which include: high vacancy rates; poor recruitment of new social workers; long term supply shortages; insufficient experience and training; a shortage of high-quality placements; high turnover rates; evidence of low morale; perceptions of high caseloads; and excessive paperwork</p> <p>This report lays out a series of recommendations to improve the state of the social work profession and the provision of social services</p>
<p>Local Government Association 2014</p> <p>Social work: a toolkit for social workers and employers https://www.local.gov.uk/sites/default/files/documents/social-work-toolkit-social-0aa.pdf</p> <p>Database searching Organisational website</p>	<p><u>Type of report</u> Toolkit</p> <p><u>Focus</u> Adult social care</p> <p><u>Geographical location</u> UK</p> <p><u>Aims</u> A document providing practical advice on how best to recruit and retain social workers, how to implement the refreshed Employer Standards and how to engage with the local media</p>

Table 4: Summary of evidence from UK organisational reports (non-research): Social care workforce

Citation Citation retrieval source	Details
<p>CPA and LGA 2021</p> <p>Top tips for retention: a briefing for adult social care providers</p> <p>https://careprovideralliance.org.uk/assets/pdfs/top-tips-for-retention-cpa-lga-briefing.pdf</p> <p>Database searching Organisational website</p>	<p><u>Type of publication</u> Top tips</p> <p><u>Focus</u> Adult social care</p> <p><u>Geographic Location</u> UK</p> <p><u>Aims</u> To capture some of the approaches taken by organisations to reduce staff turnover and help retain people in the care and health workforce</p>
<p>Griffin 2020</p> <p>Potential impact of COVID 19 Government policy on the adult social care workforce</p> <p>https://www.employment-studies.co.uk/system/files/resources/files/Potential_impact_of_covid_policy_adult_social_care_workforce.pdf</p> <p>Back-chaining</p>	<p><u>Type of publication</u> Report</p> <p><u>Focus</u> Adult social care</p> <p><u>Geographic Location</u> England</p> <p><u>Aims</u> The purpose was to identify how government COVID-19 related policy may have impacted upon the adult social care workforce in England. The project had a particular focus on test and trace, and the ways in which policy changes may have enabled and incentivized the necessary behaviours of care workers</p>
<p>Skills for Care 2013</p> <p>Finders keepers: the adult social care sector recruitment and retention toolkit</p>	<p><u>Type of report</u> Toolkit</p> <p><u>Focus</u> Adult social care</p>

<p>https://www.skillsforcare.org.uk/Document-library/Finding-and-keeping-workers/Practical-toolkits/FindersKeepers.pdf</p> <p>Database searching Organisational website</p>	<p><u>Geographical location</u> England</p> <p><u>Aims</u> This recruitment and retention toolkit is designed to help care providers, particularly small organisations, to improve the way they recruit and retain staff</p>
<p>Skills for Care 2021a</p> <p>Funded initiatives to help you to recruit and develop staff</p> <p>https://www.skillsforcare.org.uk/Documents/Recruitment-and-retention/Funded-initiatives-to-help-you-to-recruit-and-develop-staff.pdf</p> <p>Organisational website</p>	<p><u>Type of publication</u> An overview containing initiatives and infographics</p> <p><u>Focus</u> Adult social care</p> <p><u>Geographic Location</u> England</p> <p><u>Aims</u> Provides an overview of funded initiatives that social care employers can use to recruit staff and grow their workforce</p>
<p>Skills for Care 2021b</p> <p>Skills for Care: The State of the adult social care sector and workforce in England</p> <p>https://www.skillsforcare.org.uk/adult-social-care-workforce-data/Workforce-intelligence/publications/national-information/The-state-of-the-adult-social-care-sector-and-workforce-in-England.aspx</p> <p>Organisational website</p>	<p><u>Type of publication</u> Report</p> <p><u>Focus</u> Adult social care</p> <p><u>Geographic Location</u> England</p> <p><u>Aims</u> The report provides information about the adult social care sector, including its size and structure, employment information, recruitment and retention issues, workforce demographics, pay, qualification rates and future workforce forecasts</p>
<p>Social Care Leaders 2021</p> <p>Vision for a future workforce strategy</p>	<p><u>Type of publication</u> Report</p> <p>Developed by: ADASS, CPA, CSA, LGA, SFC, SCIE and TLAP</p>

<p>https://www.skillsforcare.org.uk/Documents/About/For-SCL-Priorities-for-a-workforce-strategy-people-plan.pdf</p> <p>Database searching Organisational website</p>	<p><u>Focus</u> Adult social care</p> <p><u>Geographic Location</u> UK</p> <p><u>Aims</u> Adult social care leaders have come together for the first time to offer a collective vision of what should be in a workforce strategy for the growing sector</p>
<p>Social Care Wales 2021</p> <p>A Healthier Wales. Workforce Strategy Delivery Plan. Social Care Wales – Delivery plan 2021/2022</p> <p>https://socialcare.wales/cms_assets/file-uploads/Workforce-Strategy.pdf</p> <p>Database searching Organisational website</p>	<p><u>Type of publication</u> Strategy</p> <p><u>Focus</u> Health and social care</p> <p><u>Geographic Location</u> Wales</p> <p><u>Aims</u> This report provides a workforce strategy for health and social care which includes a full list of social care actions</p>
<p>Work Foundation 2021</p> <p>Social care: a guide to attracting and retaining a thriving workforce</p> <p>https://www.lancaster.ac.uk/media/lancaster-university/content-assets/documents/lums/work-foundation/reports/SocialCareGuide.pdf</p> <p>Database searching</p>	<p><u>Type of publication</u> Report</p> <p>Containing a rapid literature review and a stakeholder consultation</p> <p><u>Setting</u> Adult social care</p> <p><u>Geographical location</u> UK</p> <p><u>Aims</u> To explore the challenges within the different career pathways that adult social care workers can take (from entering the sector to building and progressing within their careers).</p>

	To provide recommendations to employers and government on how to create e long-term solutions for a thriving workforce
<p>Welsh Government 2016</p> <p>Domiciliary care workforce: improving the recruitment and retention of domiciliary care workers in Wales: consultation - summary of response</p> <p>https://gov.wales/sites/default/files/consultations/2018-01/161117domiciliary-consultation-responsesen.pdf</p> <p>Back chaining</p>	<p><u>Type of publication</u> Summary consultation</p> <p><u>Setting</u> Domiciliary care services</p> <p><u>Geographical location</u> Wales</p> <p><u>Aims</u> This document provides a summary of the responses by the Welsh Government to the consultation document that sought views on what changes the Welsh Government should seek to improve the quality of domiciliary care services and have a positive impact upon the recruitment and retention of domiciliary care workers in Wales</p>

Key: ADASS: Association of Directors of Adult Social Services; CPA: Care Provider Alliance; CPA: Care Providers Alliance, CSA: Care and Support Alliance; LGA: Local Government Association; LGA: Local Government Association; SCIE: Social Care Institute for Excellence; SFC: Skills for Care; TLAP: Think Local Act Personal

Table 5: Summary table for included reviews: Social workers and social care workforce

Citation Citation retrieval source	Details
<p>Social Work Services Strategic Forum 2016</p> <p>The position on recruitment and retention in the social service workforce in Scotland. Literature review report. Social Work Services Strategic Forum. June 2016 https://www.gov.scot/binaries/content/documents/govscot/publications/corporate-report/2016/06/social-work-recruitment-and-retention-project-literature-review/documents/social-work-recruitment-retention-project-literature-review-pdf/social-work-recruitment-retention-project-literature-review-pdf/govscot%3Adocument/Social%2Bwork%2Brecruitment%2Band%2Bretention%2Bproject%2B-%2Bliterature%2Breview.pdf</p> <p>Google search</p>	<p>Narrative review</p> <p><u>Setting</u> Social work Children’s services: Adoption services; fieldwork services; fostering services; residential childcare; school care accommodation Adult social care services: day care; placement services; care homes; fieldwork services; fieldwork services for offenders; generic fieldwork services; housing support/care at home; offender accommodation services Central and strategic staff Nurse agencies</p> <p>Excluded: childcare agencies, childminding; day care of children</p> <p><u>Geographical location</u> Scotland</p> <p><u>Focus</u> To inform the development of the online survey questionnaire and to complement the online survey findings in providing an overall picture of the issues and challenges of recruitment, retention, and workforce planning for social services in Scotland</p>
<p>Lucas et al. 2008</p> <p>Employment practices and performance: rewards and incentives and their relationship to recruitment, retention and quality of service in adult social care in England: phase 1: literature review: Summary. Manchester Metropolitan University Business School http://www.skillsforcare.org.uk/Document-library/NMDS-SC,-workforce-intelligence-and-innovation/Research/Research-Reports/Rewards-and-incentives/Litreview_Summary.pdf</p> <p>Organisational website</p>	<p>Narrative review</p> <p><u>Setting</u> Adult social care</p> <p><u>Geographical location</u> England</p> <p><u>Focus</u> To examine the relevant literature regarding issues relating to employment of staff in the social care sector in England. More specifically there is an exploration of the literature regarding rewards and incentives in the sector and the possible impact of rewards, incentives, and other employment issues on the quality of service for people that use social care services</p>

<p>Swift & Teicke 2021</p> <p>Evidence review and sector consultation to inform Skills for Care strategy: Final sector report</p> <p>https://www.skillsforcare.org.uk/Documents/Evidence-review-and-consultation-analysis.pdf</p> <p>Organisational Website</p>	<p>Evidence review with stakeholder consultation</p> <p><u>Setting</u> Adult Social Care</p> <p><u>Geographical Location</u> England</p> <p><u>Focus</u> To enhance our understanding of the key workforce priorities and issues for the adult social care sector as a whole and for specific groups within the sector, so that Skills for Care can focus on creating positive change in those areas; and to</p> <ul style="list-style-type: none"> • Form a core building block for the development of Skills for Care's strategy • Assist with an understanding and articulation of our core purpose • Listen to the adult social care sector and articulate what is important to them
--	---

Full search strategies

Medline 01.11.2021

Search Number	Description	Results
1	((retention or retain* or recruit* or turnover or attract*) adj3 (worker* or workforce* or staff* or employe* or workplace or "work place*" or "human resource*" or occupation* or personnel or profession* or practitioner*)).tw.	10,556
2	("turnover rate*" or "turnover intention*" or "voluntary turnover" or "inten* to leave" or "inten* to stay" or "retention rate" or "leave intention*").tw.	15,899
3	1 OR 2	25,760
4	exp Social Workers/	857
5	exp Social Work/	18,157
6	(care adj2 (worker* or workforce or assistant* or staff or sector or home* or system*)).tw.	121,810
7	(nurs* adj2 (home* or residence* or residential or institution* or facilit*)).tw.	43,570
8	("social care" or "social work*" or "social service*" or "child welfare" or "child protection" or "welfare service*" or "welfare system*" or "support work*" or "day service*" or "domiciliary care" or "residential care" or "residential aged care" or "residential home*" or "care residence" or "assisted living facilit*" or "supported living" or "occupational therap*").tw.	61,707
9	OR (4 – 8)	220,688
10	3 and 9	1,732
11	(gb or "g.b." or britain* or (british* not "british columbia") or uk or "u.k." or united kingdom* or (england* not "new england") or northern ireland* or northern irish* or scotland* or scottish* or ((wales or "south wales") not "new south wales") or welsh*).ti,ab,jw,in.	2,239,322
12	(bath or "bath's" or ((birmingham not alabama*) or ("birmingham's" not alabama*) or bradford or "bradford's" or brighton or "brighton's" or bristol or "bristol's" or carlisle* or "carlisle's" or (cambridge not (massachusetts* or boston* or harvard*)) or ("cambridge's" not (massachusetts* or boston* or harvard*)) or (canterbury not zealand*) or ("canterbury's" not zealand*) or chelmsford or "chelmsford's" or chester or "chester's" or chichester or "chichester's" or coventry or "coventry's" or derby or "derby's" or (durham not (carolina* or nc)) or ("durham's" not (carolina* or nc)) or ely or "ely's" or exeter or "exeter's" or gloucester or "gloucester's" or hereford or "hereford's" or hull or "hull's" or lancaster or "lancaster's" or leeds* or leicester or "leicester's" or (lincoln not nebraska*) or ("lincoln's" not nebraska*) or (liverpool not (new south wales* or nsw)) or ("liverpool's" not (new south wales* or nsw)) or ((london not (ontario* or ont or toronto*)) or ("london's" not (ontario* or ont or toronto*)) or manchester or "manchester's" or (newcastle not (new south wales* or nsw)) or ("newcastle's" not (new south wales* or nsw)) or norwich or "norwich's" or nottingham or	1,559,630

	"nottingham's" or oxford or "oxford's" or peterborough or "peterborough's" or plymouth or "plymouth's" or portsmouth or "portsmouth's" or preston or "preston's" or ripon or "ripon's" or salford or "salford's" or salisbury or "salisbury's" or sheffield or "sheffield's" or southampton or "southampton's" or st albans or stoke or "stoke's" or sunderland or "sunderland's" or truro or "truro's" or wakefield or "wakefield's" or wells or westminster or "westminster's" or winchester or "winchester's" or wolverhampton or "wolverhampton's" or (worchester not (massachusetts* or boston* or harvard*)) or ("worchester's" not (massachusetts* or boston* or harvard*)) or (york not ("new york*" or ny or ontario* or ont or toronto*)) or ("york's" not ("new york*" or ny or ontario* or ont or toronto*))))).ti,ab,in.	
13	(bangor or "bangor's" or cardiff or "cardiff's" or newport or "newport's" or st asaph or "st asaph's" or st davids or swansea or "swansea's").ti,ab,in.	62,129
14	(aberdeen or "aberdeen's" or dundee or "dundee's" or edinburgh or "edinburgh's" or glasgow or "glasgow's" or inverness or (perth not australia*) or ("perth's" not australia*) or stirling or "stirling's").ti,ab,in.	230,316
15	(armagh or "armagh's" or belfast or "belfast's" or lisburn or "lisburn's" or londonderry or "londonderry's" or derry or "derry's" or newry or "newry's").ti,ab,in.	29,568
16	OR (11 – 15)	2,625,953
17	(exp africa/ or exp americas/ or exp antarctic regions/ or exp arctic regions/ or exp asia/ or exp australia/ or exp oceania/) not (exp United Kingdom/ or europe/)	3,106,068
18	16 not 17	2,492,711
19	3 and 9 and 18	239

Social Policy and Practice 02.11.2021

Search Number	Description	Results
1	((retention or retain* or recruit* or turnover or attract*) adj3 (worker* or workforce* or staff* or employe* or workplace or "work place*" or "human resource*" or occupation* or personnel or profession* or practitioner*)).tw.	1,948
2	("turnover rate*" or "turnover intention*" or "voluntary turnover" or "inten* to leave" or "inten* to stay" or "retention rate" or "leave intention*").tw.	276
3	1 OR 2	2,118
4	(care adj2 (worker* or workforce or assistant* or staff or sector or home* or system*)).tw.	18,769
5	(nurs* adj2 (home* or residence* or residential or institution* or facilit*)).tw.	5,512
6	("social care" or "social work*" or "social service*" or "child welfare" or "child protection" or "welfare service*" or "welfare system*" or "support work*" or "day service*" or "domiciliary care" or "residential care" or "residential aged care" or "residential home*" or "care residence" or "assisted living facilit*" or "supported living" or "occupational therap*").tw.	78,868
7	OR (4 – 6)	91,083
8	3 and 7	1,207

Scopus: 01.11.2021

Search Number	Description	Results
1	TITLE-ABS-KEY ((retention or retain* or recruit* or turnover or attract*) adj3 (worker* or workforce* or staff* or employe* or workplace or "work place*" or "human resource*" or occupation* or personnel or profession* or practitioner*))	38,283
2	TITLE-ABS-KEY ("turnover rate*" or "turnover intention*" or "voluntary turnover" or "inten* to leave" or "inten* to stay" or "retention rate" or "leave intention*")	38,980
3	1 OR 2	72,540
4	TITLE-ABS-KEY (care adj2 (worker* or workforce or assistant* or staff or sector or home* or system*))	350,820
5	TITLE-ABS-KEY (nurs* adj2 (home* or residence* or residential or institution* or facilit*))	93,307
6	TITLE-ABS-KEY ("social care" or "social work*" or "social service*" or "child welfare" or "child protection" or "welfare service*" or "welfare system*" or "support work*" or "day service*" or "domiciliary care" or "residential care" or "residential aged care" or "residential home*" or "care residence" or "assisted living facilit*" or "supported living" or "occupational therap*")	231,274
7	OR (4 – 6)	621,429
8	TITLE-ABS-KEY (gb or "g.b" or britain or british or uk or "u.k." or "united kingdom" or england or "northern island" or "northern irish" or Scotland or Scottish or wales or "south wales" or welsh)	1,662,448
8	2 and 7 and 8	501

List of the websites of key third sector and government organisations searched

Resources searched	
Association of Directors of Adult Social Services (ADASS) https://www.adass.org.uk/publications2	Searched, nothing found
British Association of Social Work https://www.basw.co.uk/resources/publications-policies-and-reports	Searched, results found
Care and Support Alliance https://careandsupportalliance.com/	Searched, results found
Care Inspectorate Wales https://careinspectorate.wales/	Searched, results found
Care Quality Commission https://www.cqc.org.uk/	Searched, results found
Department of Health & Social Care https://www.gov.uk/government/organisations/department-of-health-and-social-care	Searched, results found
Google Advanced Search https://www.google.co.uk/advanced_search	Searched, results found
Health Education England https://www.hee.nhs.uk/	Searched, results found
Institute for employment studies https://www.employment-studies.co.uk/publications	Searched, results found
Joseph Rowntree Foundation https://www.jrf.org.uk/	Searched, nothing found
Local Government Association https://www.local.gov.uk/	Searched, nothing found
National Audit Office https://www.nao.org.uk/search/type/report/	Searched, results found
National Institute for Clinical Excellence (NICE) https://www.nice.org.uk/guidance	Searched, results found
NHS Improvement https://www.england.nhs.uk/publication/	Searched, results found
Northern Ireland Social Care Council https://nisc.info/	Searched, nothing found
Northern Ireland Social Services Council https://nisc.info/	Searched, nothing found
Nuffield Trust https://www.nuffieldtrust.org.uk/	Searched, results found

Personal Social Services Research Unit (PSSRU) https://www.pssru.ac.uk/	Searched, nothing found
Royal College of Nursing https://www.rcn.org.uk/professional-development/publications/	Searched, nothing found
Scottish Government https://www.gov.scot/health-and-social-care/	Searched, results found
Scottish Social Services Council https://www.sssc.uk.com/	Searched, nothing found
Skills for Care https://www.skillsforcare.org.uk/Recruitment-retention/Recruitment-and-retention.aspx	Searched, results found
Social Care Institute for Excellence (SCIE) https://www.scie.org.uk/	Searched, results found
Social Care Wales https://socialcare.wales	Searched, results found
Social Work England https://www.socialworkengland.org.uk/	Searched, nothing found
The Care Provider Alliance https://careprovideralliance.org.uk/	Searched, results found
The Health Foundation http://health.org.uk/	Searched, results found
The Kings Fund https://www.kingsfund.org.uk/	Searched, results found
The National Care Forum https://www.nationalcareforum.org.uk/	Searched, nothing found
The Scottish Social Services Council https://www.sssc.uk.com/	Searched, nothing found
Think Local Act Personal https://www.thinklocalactpersonal.org.uk/Latest/?s=337	Searched, nothing found
What Works for Children's Social Care https://whatworks-csc.org.uk/	Searched, results found

Critical appraisal scores

MMAT Critical appraisal of qualitative studies

Study	MMAT Qualitative Items					Score
	1.1	1.2	1.3	1.4	1.5	
Atkinson et al 2016	Y*	Y*	Y*	Y*	Y*	100% (****)
Baginsky 2013	Y*	Y*	Y*	Y*	CT	80% (****)
Cornes et al 2013	Y*	CT	CT	N	N	20% (*)
Lucas et al 2009	Y*	Y*	CT	Y*	Y*	80% (****)
Moriarty et al 2018	Y*	Y*	Y*	Y*	CT	80% (****)
Ross et al 2016	Y*	CT	CT	CT	CT	20% (*)

- 1.1 Is the qualitative approach appropriate to answer the research question
- 1.2 Are the qualitative data collection methods adequate to address the research question
- 1.3 Are the findings adequately derived from the data
- 1.4 Is the interpretation of results sufficiently substantiated by data?
- 1.5 Is there coherence between qualitative data sources, collection, analysis, and interpretation?

Critical appraisal of quantitative descriptive studies

Study	MMAT Quantitative descriptive Items					Score
	4.1	4.2	4.3	4.4	4.5	
Evans and Huxley 2009	Y*	Y*	Y	Y*	Y*	100% (****)
Reddington et al 2020	CT	Y*	Y*	CT	Y*	60% (**)
Skills for Care 2020	Y*	Y*	Y*	CT	Y*	80% (****)

- 4.1 Is the sampling strategy relevant to address the research question?
- 4.2 Is the sample representative of the target population?
- 4.3 Are the measurements appropriate?
- 4.4 Is the risk of nonresponse bias low?
- 4.5 Is the statistical analysis appropriate to answer the research question?

Critical appraisal of mixed methods studies

Study	MMAT Mixed methods Items					Score
	5.1	5.2	5.3	5.4	5.5	
Baginsky et al 2010	Y*	Y*	Y*	Y	CT	80* (****)
Baginsky and Manthorpe 2016	CT	Y*	CT	Y*	N	40% (**)
Consillium 2016	Y*	CT	CT	CT	CT	20% (*)
Dobson and Byrne 2010	Y*	N	N	Y*	CT	40% (**)
Ekosgen 2013	CT	Y*	CT	CT	CT	20% (*)
Ekosgen 2016	Y*	Y*	Y*	Y*	CT	80% (****)
Figgett 2017	N	Y*	Y*	CT	CT	40% (**)
Goode 2014	Y*	Y*	Y*	CT	CT	60% (***)
Johnston 2017	Y*	CT	CT	CT	N	20% (*)
Mulholland et al 2017	Y*	N	CT	Y*	CT	40% (**)
Parker et al 2006 Parker and Whitfield 2006	Y*	Y*	Y*	Y*	CT	80% (****)
Rubery et al 2011	Y*	Y*	Y*	CT	CT	60% (***)
Scourfield et al 2020	Y*	N	CT	CT	CT	20% (*)
Smith et al. 2013	Y*	Y*	CT	CT	CT	40% (**)
Smith et al 2018	Y*	Y*	Y*	Y*	CT	80% (***)
Stone and Worsley 2021	Y*	Y*	Y*	Y*	CT	80% (****)

- 5.1 Is there an adequate rationale for using a mixed methods design to address the research question?
- 5.2 Are the different components of the study effectively integrated to answer the research question
- 5.3 Are the outputs of the integration of qualitative and quantitative components adequately interpreted?
- 5.4 Are divergences and inconsistencies between quantitative and qualitative results adequately addressed
- 5.5 Do the different components of the study adhere to the quality criteria of each tradition of the methods involved?

Excluded studies

From database searches

1. Astle et al 2001. Raising the profile of care home nursing through collaborative working.
Reason for exclusion: Journal article but not primary research
2. Atkinson et al. 2016. Factors that affect the recruitment and retention of domiciliary care workers and the extent to which these factors impact upon the quality of domiciliary care: interim findings summary
Reason for exclusion: Main report already included
3. Baker 2006. The Pendine pathways project in the independent sector
Reason for exclusion: Description of local initiative but no evaluation
4. Bowyer and Roe 2015. Social work recruitment and retention: Strategic briefing (2015)
Reason for exclusion: Unavailable (£10 download fee)
5. Burns et al. 2020. Findings from a longitudinal qualitative study of child protection social workers' retention: job embeddedness, professional confidence and staying narratives
Reason for exclusion: No outcomes of interest (narratives of embeddedness)
6. Cohen et al. 2019. Retaining workers approaching retirement: why child welfare needs to pay attention to the aging workforce
Reason for exclusion: No outcomes of interest (moderating effects of age on the relationship between individual and organisational factors on work and job withdrawal)
7. Eborall and Garmeson 2001: Desk research on recruitment and retention in social care and social work
Reason for exclusion: A review of secondary research conducted before 2001
8. Eurofound 2013. More and better jobs in home-care services
Reason for exclusion: 30 case studies across 10 EU Member States
9. Harris and Dutt 2004. Meeting the challenge: a good practice guide for the recruitment and retention of black and minority ethnic workers
Reason for exclusion: Unavailable (£10 plus £2.40 postage)
10. Hughes et al. 2009. Recruitment and retention of a social care workforce for older people
Reason for exclusion: No outcomes of interest (commissioning of services in general)
11. Hussein et al. 2014. Organisational factors, job satisfaction and intention to leave among newly qualified social workers in England

Reason for exclusion: No outcomes of interest (factor analysis and regression modelling of job satisfaction)

12. Johnston et al. Longitudinal study of local authority child and family social workers (Wave 2)

Reason for exclusion: No outcomes of interest (longitudinal survey comparing recruitment issues to demographic characteristics)

13. Johnston 2021. Care to stay: a report into the recruitment and retention of social work and social care staff

Reason for exclusion: Unavailable (broken link)

14. Kothari et al. 2021. Retention of child welfare caseworkers: the role of case severity and workplace resources

Reason for exclusion: Wrong population group (Child welfare workers for children in foster care)

15. Local Government 2014. Heling social workers, improving social work.

Reason for exclusion: Case studies of local initiatives but no evaluation presented

16. Local Government Association 2015. Recruiting and retaining qualified social workers: LGA/PPMA member guide

Reason for exclusion: Same information as contained within an earlier article by same organisation

17. O’Kell 2002. Care staff recruitment and retention: what is happening in the independent care sector.

Reason for exclusion: Opinion piece not primary research

18. Oung et al. 2020. What does the social care workforce look like across the four countries?

Reason for exclusion: Blog post

19. Manthore et al 2018. Coming back to social work: a pilot national programme for social workers returning to practice

Reason for exclusion: No outcomes of interest (about getting people back to work)

20. Parker and Whitfield 2006. Effective practice learning in local authorities (2): workforce development, recruitment and retention

Reason for exclusion: Conference abstract (full paper retrieved)

21. Pavlidis and Downs 2016. Helpcare project: report on research with care workers, care users and commissioners of care

Reason for exclusion: No outcomes of interest (about the state of health and social care, and what to do to improve)

22. Prost et al. 2020. Professional quality of life and intent to leave the workforce: gender disparities in child welfare
Reason for exclusion: No outcomes of interest (relationship between burnout and intention to leave)
23. Ravalier et al. 2017. UK social workers: working conditions and wellbeing
Reason for exclusion: No outcomes of interest (wellbeing)
24. Ravalier et al. 2018. The influence of work engagement in social workers in England
Reason for exclusion: No outcomes of interest (work engagement)
25. Ravalier et al. 2021. Social worker well-being: a large mixed-methods study
Reason for exclusion: No outcomes of interest (wellbeing)
26. Rubery et al. 2011. The recruitment and retention of a care workforce for older people: summary
Reason for exclusion: Main report already included
27. Stronlin-Goltman 2009. Design teams: a promising organizational intervention for improving turnover rates in the child welfare workforce
Reason for exclusion: Non UK study
28. Skills for Care 2015a. Experience of the adult social care workforce
Reason for exclusion: Unavailable (broken link)
29. Skills for Care 2015b. Recruitment and retention
Reason for exclusion: Unavailable (broken link)
30. Skills for Care 2009. Attracting, retaining and developing staff in the adult social care sector in England: research briefing.
Reason for exclusion: Unavailable (broken link, but is the same as Lucas et al, 2009 in main review)
31. Vadean and Salonki 2020. Determinants of staff turnover and vacancies in the social care sector in England
Reason for exclusion: No outcomes of interest (determinants of turnover)
32. Welsh Government 2016. Domiciliary care workforce: improving the recruitment and retention of domiciliary care workers in Wales
Reason for exclusion: Consultation document
33. Wiseman and Davies 2013. Recruitment, retention and career progression of social workers. Prepared for the Local Government Association
Reason for exclusion: No outcomes of interest (facts, figures and statistics)

From organisational websites

1. Beech et al 2019. Closing the gap. Key areas for action on the health and care workforce. Overview
Reason for exclusion: Nothing specifically related to the social care workforce

2. Beech et al 2019. Closing the gap. Key areas for action on the health and care workforce. Full report
Reason for exclusion: Nothing specifically related to the social care workforce

National Audit Office 2018. The adult social care market in England
Reason for exclusion: Recommendations for adult social care in general
3. National Audit Office 2021. The adult social care market in England
Reason for exclusion: Recommendations for adult social care in general
4. Health Education England 2014: Evaluation of Values Based Recruitment (VBR) in the NHS
Reason for exclusion: Nothing specifically related to the social care workforce
5. RCN 2019. Social care workforce in England
Reason for exclusion: Member briefing
6. Scottish Social Services Council 2020. The Adult Social Care Review: second submission by the Scottish Social Services Council (November 2020)
Reason for exclusion: Summarises the role and impact of the Scottish Social Services Council
7. Skills for Care 2017. Recruitment and retention in adult social care: secrets of success. Learning from employers what works well. Executive summary
Reason for exclusion: Summary document full report retrieved
8. Tamkin et al 2012. Sector skills insights: Health and Social Care
Reason for exclusion: Nothing specifically related to the social care workforce