# Evaluation of the impacts on research and policy of the

# National Minimum Dataset – Social Care (NMDS-SC)

Final report

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The charts presented in this report are best printed in colour

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# Executive summary

## Background and approach

The National Minimum Dataset for Social Care (NMDS-SC), managed and delivered by Skills for Care, provides detailed data on the workforce and services in adult social care in England. In early 2012, Skills for Care commissioned an evaluation of the impacts of NMDS-SC on the research and policy communities. The evaluation consisted of four strands:

- web metrics to assess NMDS-SC related traffic on relevant websites
- bibliometrics to assess the use of NMDS-SC data in scholarly publications and grey literature
- telephone interviews with 12 key users of the dataset identified by Skills for Care, and
- an online survey completed by 24 key users of the dataset identified by Skills for Care.

Participants were experts from the research and policy communities, and were chosen to represent a broad range of dataset users, including researchers, policy-makers and knowledge intermediaries, i.e. those concerned with the dissemination/interpretation of research who are not themselves researchers.

## Findings

### Evidence of dissemination of the dataset

We found ample evidence of dissemination of the dataset and its associated products by Skills for Care themselves, including:

- a 30% increase in web traffic on the NMDS-SC page of the Skills for Care website 2009-11
- a 200% increase in the numbers of downloads of the *State of the Adult Social Care Workforce* report (the principal publication reporting on NMDS-SC data) between the 2008 and 2010 editions, and
- an eight per cent increase in traffic to the 'Research' section of the NMDS-SC website, where all the published outputs from the dataset are held, between 2010 and 2011.

We also found evidence of dissemination of the dataset by third parties, in particular the *Social Care Workforce Periodical* published by the Social Care Workforce Research Unit (SCWRU) based at King's College London, and evidence of internal dissemination of NMDS-SC reports and briefings within a number of organisations including the Department of Health (DH). This is in addition to the regular supply of raw datasets and bespoke datasets by the Skills for Care team to a wide range of organisations including the Department of Health, Department for Education (DfE), Local Government Association

(LGA), Centre for Workforce Intelligence (CfWI) and Care Quality Commission (CQC), as well as individual local authorities, research units, employers and trade associations.

**Evidence of understanding and use**

We identified reference to the dataset in 175 separate publications (published since 2006), of which 15% were articles in journals intended for an academic audience, 50% were reports intended for policy-makers, funders, researchers and practitioners, and 35% were media communications (including items in the professional and mainstream press), intended for social care practitioners or the general public.

The great majority of interviewees and survey respondents felt that the dataset had made a profound contribution to the general understanding of workforce issues, both within and beyond the sector, had challenged conventional wisdom and had contributed to the exchange and transfer of knowledge about the workforce between all parts of the sector.

The bibliometric analysis showed that after a time lag due to the lengthy review and publishing cycles in scholarly media, the most frequent use of NMDS-SC is now in academic works. Three of the five most widely cited academic publications that used NMDS-SC concerned the issue of migrant workers, likely a reflection of political interest in an issue that transcends sectoral boundaries.

**Evidence of influence**

Respondents in the research arena said that the advent of the dataset had made the social care workforce a 'legitimate' field for research enquiry, as it provides the robust and reliable data researchers need, which had hitherto been unavailable. The breadth and depth of the dataset enables researchers to compare different parts of the workforce across a range of demographics and characteristics, thus opening up new areas of research.

Respondents with knowledge of policy-making felt that the dataset had enabled them to identify issues, prioritise them, and develop policy which was more accurate and focused because it was evidence based. As some respondents pointed out, evidence alone does not dictate policy, but nonetheless policy-makers in this study were clear that their work benefited from the deeper understanding of the workforce that the dataset afforded. When asked what they would do if the dataset did not exist, one policy-maker commented 'we would have to invent it'.

**Evidence of application**

Many direct and practical applications of the dataset were identified by respondents. Research applications included:

- secondary analysis of range of trends
- linkage to other large datasets to examine correlations between workforce characteristics and service quality, inspection and so on
- international comparison work.

Specific applications for policy-makers included:

- access to bespoke and up-to-date data for media and communications work, civil servant and ministerial briefings
- reliable source data for evidence-based policy work.

A range of specific applications for service planning, management and inspection were also identified:

- workforce modelling and planning at national and local level
- qualifications and training strategy development
- service planning and management.

## Recommendations for enhancing impacts

Efforts to improve completion rates, particularly in the independent sector, will enhance the value of the dataset for all stakeholders, employers as well as researchers and policy-makers. A programme of work is ongoing in this area.

Clear articulation of the potential benefits to employers of completing an NMDS-SC return is needed, and a programme of work, including quantification of benefits, is ongoing.

Skills for Care could also consider publishing:

- annual rather than bi-annual editions of the *State of the Adult Social Care Workforce*
- a 'myth-busters' series aimed at non-academic audiences, which uses the data to challenge conventional wisdom and/or media misrepresentations about the sector and its workforce
- a 'trends' series that compares data on key metrics from an employer perspective from each year since the dataset started.

# Part A: About the evaluation

## 1. Background and scope

### 1.1 Background

The Department of Health commissions Skills for Care to provide workforce intelligence for social care via the National Minimum Dataset for Social Care (NMDS-SC). The NMDS-SC was developed by Skills for Care in partnership with the Department of Health (DH), the Department for Education (DfE), local government employers and other stakeholders to collect data on social care providers and the workforce in England, from both independent and statutory sector care providers. The NMDS-SC was launched in October 2005 and since November 2007 it has been collected online at http://www.nmds-sc-online.org.uk .

The NMDS-SC has received data from around 28,000 care-providing locations (across the statutory and independent sectors) and at the time of writing has individual worker data for approximately 750,000 workers spread across the 152 local authority areas in England. Although the data is primarily from social care providers for adults it also has an increasing amount of data submitted by children's services.

This evaluation is concerned with identifying the impact of the National Minimum Dataset for Social Care (NMDS-SC) on the policy and research communities in social care and related areas.

It has been commissioned by Skills for Care, and is one of two strands of an overall evaluation of the impacts of the dataset. The other strand focuses on the impacts of the dataset on social care employers (as defined by the return on investment realised by adult social care employers).

The overall aim of this evaluation is to identify and quantify the observable impacts of NMDS-SC on research and policy. In addition, possible areas for further improvement, and opportunities for enhancing the dataset's impacts on research and policy, are identified.

In this assessment, we have taken 'research settings' to cover both formal research from academic bodies, and non-academic research undertaken by knowledge organisations, think tanks, trade organisations and the mainstream media. We have defined 'policy settings' as primarily national, and we are interested in how NMDS-SC interacts with policy thinking and influences policy directions and

choices. This research does not cover in detail the impact of the dataset on the local decision-making – including local policy and commissioning decisions – undertaken by individual employer organisations, though we do reference some more local processes in passing, particularly in the interviews and survey data.

## 1.2 Scope of the research

### 1.2.1 Defining 'research use'

This evaluation addresses both what have been termed 'instrumental' and 'conceptual' uses of the dataset. Sandra Nutley and colleagues at the Research Unit for Research Utilisation provide the following distinction between these typologies of use:

> Instrumental use of research refers to the direct impact of research on policy and practice decisions. It identifies the influence of a specific piece of research in making a specific decision or defining the solution to a specific problem… Conceptual use is a much more wide-ranging definition, comprising the complex and often indirect ways in which research can have an impact on the knowledge, understanding and attitudes of policy-makers. Such uses of research may be less demonstrable but are no less important than more instrumental forms of use.[1]

In considering how best to assess the impacts of the dataset, we made reference to existing frameworks of research use, in particular that of Landry and colleagues, who defined a 'ladder' of research use, based on their assessment of the utilisation of social science research knowledge in Canada:

- Transmission

  The researchers have transmitted key findings to relevant policy-makers and practitioners
- Cognition

  The research findings have been read and understood by their recipients
- Reference

  The findings have been cited in reports
- Effort and influence

  Efforts have been made to ensure the findings influence decisions

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[1] Nutley et al. (2007) *Using Evidence: How research can inform public services* Policy Press, p. 36

- Application

   The findings led to applications and extension within the policy or practice communities.[2]

The data we report on in Section B below illustrates impacts in all these stages, and we discuss this further in Section C on conclusions.

**1.2.2 Defining the nature of NMDS-SC**

Different forms of research have different purposes and audiences, and this determines their intended impacts. Nutley and colleagues have described the following types of research enquiry in the social policy arena:

- *Know-about* problems: for example the knowledge base about social or health inequality
- *Know-what* works: what policies or interventions will bring about desired outcomes at acceptable costs
- *Know-how* to put into practice: understanding about effective programme intervention
- *Know-who* to involve: estimates of need and information on key stakeholders
- *Know-why*: knowledge about why action is required, for example the relationship between values and policy directions.[3]

In the context of overall social care policy, we can see that the National Minimum Dataset for Social Care primarily addresses the 'know-who' question, by expanding and deepening the knowledge base about the workforce as one of the key stakeholders in the sector. Tracking the impact of interventions (on, for example, turnover) over time, and being able to link to other datasets such as CQC, also means NMDS-SC contributes to broader 'know-about', 'know-what' and 'know-why' questions.

Separating academic research from policy research or practice based evidence in the field of social care is extremely difficult, as research is partly driven by the needs of funders, and funders are most often interested in research that has a practical outcome. For the 2014 Research Excellence Framework (REF) administered by the Higher Education Funding Council for England (HEFCE), the Panel responsible for social work and social policy assessment provides a list of types of impact relevant to social work and social policy research. For the purposes of this study, the most relevant examples are:

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[2] Landry et al. (2001) 'Utilization of Social Science Research Knowledge in Canada' *Research Policy* 30
[3] Nutley et al. (2007) *Using Evidence: How research can inform public services* Policy Press, p. 23. (Framework adapted from Ekblom in the field of criminology)

- influence on professional standards and guidelines

-  influence on planning or management of services

- challenge to conventional wisdom among stakeholders

-  improved public understanding of social issues.[4]

### 1.2.3 Defining NMDS-SC users

We have adopted a pragmatic approach to identifying the types of users relevant to this study, based on the client brief, our knowledge of the sector and our understanding of existing patterns of research utilisation:

- Academic institutions (e.g. the Social Care Workforce Research Unit (SCWRU), Personal Social Services Research Unit (PSSRU))[5]

- National government and national bodies for local government (e.g. DH, LGA)

- Knowledge intermediaries (e.g.  the Social Care Institute for Excellence (SCIE), National Institute for Clinical Excellence (NICE), Skills for Care, CfWI)

- Campaigning organisations (e.g. Unison)

- Think tanks (e.g. King's Fund)

- Trade/employer organisations (e.g. English Community Care Association (ECCA), Association of Directors of Adult Social Services (ADASS))

- Professional and mainstream press (e.g. Community Care).

Members of the Data User Group (DUG) for NMDS-SC, which includes representatives from a number of the organisation types identified above, were individually invited to contribute to the interviews and/or the online survey.[6]

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[4] HEFCE (January 2012) Panel criteria and working methods REF 2014. Table C1, p.69-70.

[5] See Appendix 8 for details of all acronyms used in this report

[6] The DUG is comprised of representatives from Skills for Care, ADASS, Care Providers Alliance (CPA), Age UK, LGA, Learn to Care, CQC, Health and Social Care Information Centre, General Social Care Council (GSCC), DH, DfE, SCIE, Higher Education Research Institute (HERI), SCWRU, PSSRU.

## 2. Our overall approach to the evaluation

The research approach had four strands, intended to complement each other and to provide some triangulation of data. It incorporated:

- Web metrics – a quantitative assessment of NMDS-SC related traffic on the Skills for Care and NMDS-SC websites

- Bibliometrics – a primarily quantitative assessment of how NMDS-SC manifests in scholarly and professional publications, and in grey literature

- Interviews – telephone interviews based on a semi-structured discussion guide with 12 key users of the dataset in the policy and research fields

- Short online survey – 24 selected individuals gave their views on whether specific types of policy impacts could be ascribed to NMDS-SC.

The research was conducted between 3 March and 11 May 2012.

### 2.1 Bibliometrics

### 2.1.1 General issues in bibliometrics

Bibliometrics is a way of measuring the influence or impact of an author, an academic institution, or as in this case, a specific dataset, on (primarily) scholarly media. The main premise is that references to data or articles in published items can be assumed to indicate use of the data or article. Hence, the more times a piece of data is cited, the more times it has been used. In addition, bibliometric analysis assigns an 'impact factor' to academic journals, as a measurement of prestige and influence. As Cronin (1981) suggests:

> Metaphorically speaking, citations are frozen footprints in the landscape of scholarly achievement; footprints which bear witness to the passage of ideas. From footprints it is possible to deduce direction; from the configuration and depth of the imprint it should be possible to construct a picture of those who have passed by, whilst the distribution and variety furnish clues as to whether the advance was orderly and purposive.[7]

However, bibliometric approaches have a number of drawbacks, some generic and some specific to the knowledge domain of which NMDS-SC is a part.

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[7]Cronin B. The need for a theory of citing *Journal of Documentation* 1981; 37(1):16-24.

- Not everything that has been read in preparation of an article or report will be cited; background reading may inform thinking, but may not be cited, even though it may have been influential. We found evidence of this in our interviews.

- Equally, it is easy to reference documents without actually reading them thoroughly; citation may be done to acknowledge the work of presumed experts in the area, or based on a hazy memory of what the writer thinks the author said.

- A difficulty for UK social science bibliometrics is that US academic journals tend to dominate the Social Sciences Citation Index[8], the main bibliographic index for the disciplines covering social care.

- The length of time required for acknowledgement of previous research can also add to difficulties in assessing research impact.[9] The five year impact factor for many social work and social policy journals is higher than the two year impact factor. This suggests there is a significant time lag for new knowledge to percolate through and to be acknowledged in publications; our findings confirmed this.

- Impact factors for social work and social policy journals are generally low in comparison, for example, to most medical specialties. The highest impact factor for general social work and social policy journals are 1.722 (*American Journal of Community Psychology*) and 1.524 (*British Journal of Social Work*). As a comparison, *The Lancet's* impact factor is over 30.[10]

- The wider range of outputs in the social sciences (in the form of policy reports, as well as journal articles) means that research performance monitoring for the social sciences is more complex than for example, the physical sciences.[11] Hence we need to look beyond formal citation metrics for a true picture of research performance. In the UK higher education sector, the group working on social work and social policy for the Research Excellence Framework 2014 'recognises that work of the highest quality can be found in a range of media… [we] will assess all forms of output on an

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[8] A Thomson Reuters database providing bibliographic and citation information in the social sciences. http://thomsonreuters.com/products_services/science/science_products/a-z/social_sciences_citation_index/

[9] Van Leeuwen T. The application of bibliometric analyses in the evaluation of social science research: who benefits from it and why it is still feasible. *Scientometrics* 2006; 66(1):133-154.

[10] Thomson Reuter *Journal Citation Reports* 2010

[11] Nederhof AJ. Bibliometric monitoring of research performance in the social sciences and humanities: a review. *Scientometrics* 2006; 66(1):81-100.

equal basis, with no preconception of quality attached to the form or medium of an output. [We will not] …. use journal impact factors or any hierarchy of journals in [our] assessment of outputs.'[12]

### 2.1.2 Tracking NMDS-SC in published outputs

Bearing the above issues in mind, we used several approaches to searching published outputs in this study.  First, **Thomson Reuters Web of Science** [13] was used to assess the patterns of citation of the National Minimum Dataset for Social Care, and main compilations based on NMDS-SC – the *State of the Adult Social Care Workforce* reports, and the *NMDS-SC Briefings* series. The Web of Science (WoS) is a cited reference index, allowing the discovery of accurate citation counts. The Thomson Reuters *Journal Citation Reports* provide information on the Impact Factors of the academic journals in which the citing articles appear.[14]

For the second approach, **Google Scholar** provided entry points into both the academic literature and the grey literature[15] in the form of reports.  Google Scholar offers 'cited by' for some items included in its results page. Very little evaluation or comparison of Google Scholar with the more traditional WoS citation metrics has been done. Google Scholar is constructed in a different way from WoS, and the range of material included is much greater. One useful study does suggest that Google Scholar is picking up on literature that is not well covered by WoS for the social sciences. [16]

**Other databases** were also used to identify any appearance of NMDS-SC in the legal, business, health service, social services and local authority literature. The databases and their differences are discussed further in Appendix 1.

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[12] HEFCE. Panel criteria and working methods. January 2012.
http://www.hefce.ac.uk/research/ref/pubs/2012/01_12/01_12.pdf
[13] http://wokinfo.com/products_tools/multidisciplinary/webofscience/
[14] http://wokinfo.com/products_tools/analytical/jcr/
[15] 'Grey literature' is a library and information science term that refers to written material such as reports that are difficult to find because they are not published commercially or within formal academic publishing systems.
[16] Kousha K, Thelwall M. Google citations and Google Web/URL Citations: A multi-discipline exploratory analysis. Journal of the American Society of Information Science and Technology; 2007: 58(7), 1055-1065.

We then conducted an extensive **targeted 'grey literature'[17] search**, by manually searching and if necessary browsing the websites of organisations considered likely to be publishing materials drawing on NMDS-SC. A total of 24 organisational websites were manually searched and browsed, including government departments, sectoral bodies, knowledge intermediary organisations such as independent research organisations , campaigning organisations, think tanks, trade/employer organisations and the professional and mainstream press. We also conducted a limited search of **social media**, using social media aggregator sites. All search sources are listed in Appendix 1.

### 2.1.3 Assessing search results

We reviewed all the items retrieved during these various searches against three typologies. First, we attributed each item a level of use rating, to reflect the degree of contribution of NMDS-SC data to the individual published item. Then each published item was categorised according to its intended primary audience:

- Article  in academic journal: intended for other academic researchers
    - Includes both journal with and without impact factor
- Report: intended for funders, academic researchers, policymakers, and practitioners
    - A wide variety was possible, from academic sources, government sources, knowledge intermediaries and sectoral bodies; Skills for Care's own publications were identified separately
- Communication (often web page items, professional press): intended for social care practitioners
    - Local authority items concerning NMDS-SC process, or article in the professional press (including *Community Care*) and mainstream media including newspapers and TV.

Finally, the type of organisation originating each published item was identified:

- Academic institution
- National government and national bodies for local government
- Knowledge intermediary
- Campaigning organisation
- Think tank
- Trade/employer organisation

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[17] Such as papers, reports, or other documents produced by government or other stakeholders, and not usually indexed by publishers.

- Professional and mainstream press and media.

Using these categorisations, we analysed the nature and extent of NMDS-SC utilisation in a range of different domains and disciplines, as well as trends over time. A full description of the bibliometric and documentary search methodology is at Appendix 1.

## 2.2 Web metrics

The web metric analysis focused on data provided by Skills for Care showing levels of use of various HTML pages and pdf document downloads directly related to NMDS-SC, either from the Skills for Care website or from the NMDS-SC website.

The data was generated by Google Analytics, and shows topline trends in total number of visits, unique visitors, new and returning visitors, and some data on referral sources.

The drawbacks of Google Analytics include the potential for inaccurate data due to website users blocking cookies, leading to under-estimations of traffic volumes, and variations in the ways site sessions are recorded, leading to over-estimations for total numbers of visits. Unique visitors are generally a more robust metric when using Google Analytics. Google Analytics figures provide useful estimations of overall volume and trends over time, but cannot provide a great deal of insight into types of user.

## 2.3 Interviews

Documentary research can provide very useful quantitative evidence of dissemination and use, i.e. the more instrumental types of research impact, but cannot shed much light on the more conceptual impacts of research.[18] To identify the more complex and often indirect ways in which NMDS-SC may have impacted on the knowledge, understanding and attitudes of policy-makers, we undertook a series of interviews. These were conducted by phone during April 2012, using a semi-structured interview schedule to elicit:

- why and how the dataset was used
- any complementary types of data used
- the perceived impacts of the dataset
- the alternatives (if any) if the dataset had not been available, and

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[18] See section 1.2 on defining research use

- possible improvements or enhancements.

The 12 interviewees were identified by Skills for Care as key stakeholders and users of the dataset. They are a mix of researchers, policy-makers and knowledge intermediaries. The interview data were audio recorded and field-notes checked against the audio for completeness and accuracy. The interview data was then coded and analysed using thematic analysis to compare and contrast responses and perceptions between respondents.

The convenience sampling approach means that we cannot draw conclusions about the impact of NMDS-SC on the sector as a whole. The individuals identified were known users of the data, and chosen because they were likely to be aware of its impacts. They are not statistically representative of the social care research or policy communities overall, although they were selected to represent a range of user types (i.e. researchers, policy-makers and consultants, government and non-government). See profiles at Appendix 2.

## 2.4 Online survey

In order to further investigate the policy impacts of the dataset, a short online survey was developed that focused on this specific area. The survey identified eight specific types of impact that research can have on policy, as identified in the research utilisation literature and also taking account of definitions of research impact from the UK HEFCE Research Excellence Framework 2012. A total of 63 identified individuals were asked to complete the survey. Thirty members of the NMDS-SC Data User Group were invited to respond, 10 additional Skills for Care and Skills for Care and Development staff, and 23 additional data users or key stakeholders involved in policy or research at a national level.  Of these 63 invitees, 24 responded, a response rate of 38%. As some respondents preferred to have their comments presented anonymously, all profiles of respondents have been anonymised for consistency. See Appendix 2 for profiles.

As with the interviews, the survey respondents were identified individuals who were considered to be likely to use the dataset or to be aware of how others use it. The text of the survey is provided at Appendix 3. The survey data was analysed using a mix of quantitative and thematic analysis approaches. The examples of impact provided by the survey respondents supplemented the examples provided by interviewees.

# Part B: Findings

## 3. Evidence of dissemination of NMDS-SC

Effective dissemination of information about the dataset, the data itself, and its derivatives such as *Briefings* and reports, is a pre-requisite to influence and impact. To assess changing patterns of dissemination we requested a range of data from Skills for Care. This section analyses and discusses the data provided regarding use of various pages and elements of the Skills for Care and NMDS-SC websites. Unless otherwise indicated, the raw data on which the charts and their discussions are based was obtained by Skills for Care using Google Analytics.

### 3.1 Skills for Care website
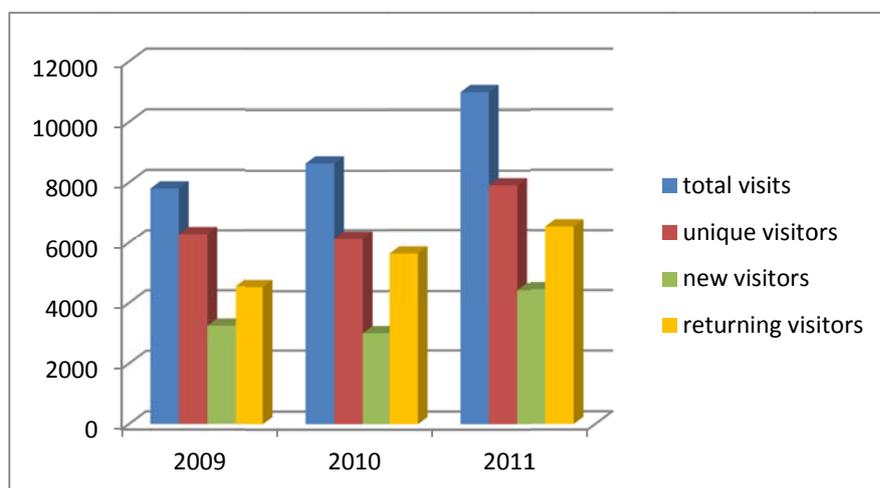


*Figure 1: NMDS-SC landing page on Skills for Care website: Visitor overview 2009-2011*

Figure 1 above gives an overview of the site traffic for the three years 2009-2011[19] on the National Minimum Dataset for Social Care landing page[20] of the main Skills for Care website. We can see a steady increase in traffic over the course of each year, with a slightly larger jump in numbers between 2010 and 2011. Overall, these figures suggest an increasing level of interest in the dataset from visitors to the Skills for Care site.

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[19] Data for previous years is not available
[20] http://www.skillsforcare.org.uk/research/N_M_D_S_-_S_C/NMDS-SC.aspx

### 3.2 NMDS-SC website

### 3.2.1 Traffic volume on NMDS-SC whole site

Figure 2 below shows the overall traffic trends for the NMDS-SC website[21] as a whole since 2008. We can see a significant year on year increase between 2008 and 2010. Total visits peaked at just under 225,000 in 2010. The number of unique visitors, new visitors and returning visitors also peaked in 2010.
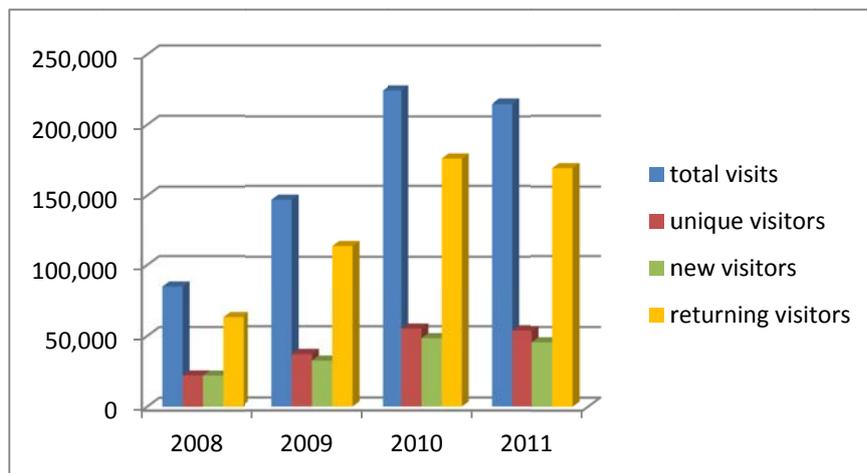


*Figure 2: NMDS-SC website: Visitor overview 2008-2011: whole site*

### 3.2.2 Traffic volume on NMDS-SC Research page

Figure 3 below shows the overall traffic trends for the 'Research' landing page of the NMDS-SC site.[22] This page, containing links to the main research outputs of the dataset such as *Briefings*, ad hoc reports and key statistics, is likely to be of most interest to researchers and policy-makers. The overall traffic for the NMDS-SC 'Research' page is roughly five percent of the total for the whole NMDS-SC site. In contrast to the whole site figures, traffic for this page continues to rise slightly in 2011.

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[21] http://www.nmds-sc-online.org.uk/

[22] http://www.nmds-sc-online.org.uk/content/gateway.aspx?id=5
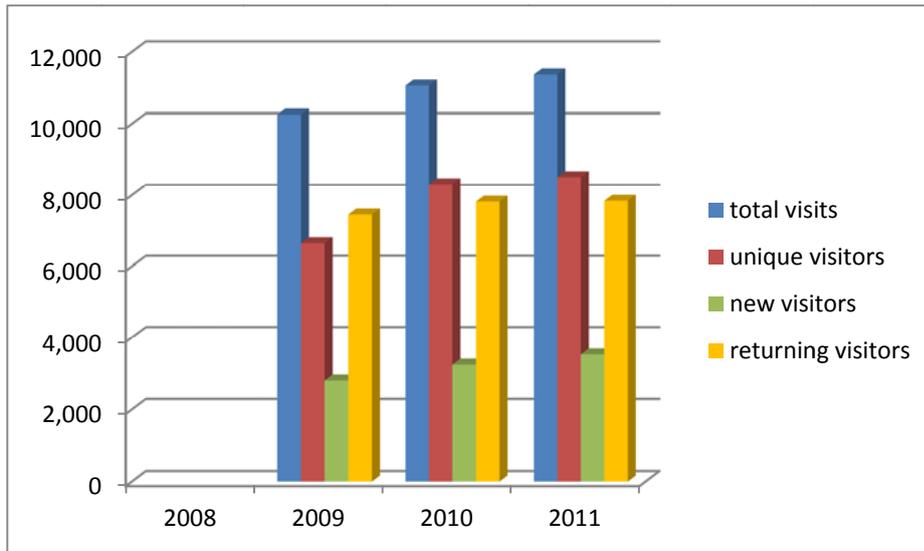
*Figure 3: NMDS-SC website: Visitor overview 2009-2011: Research page*
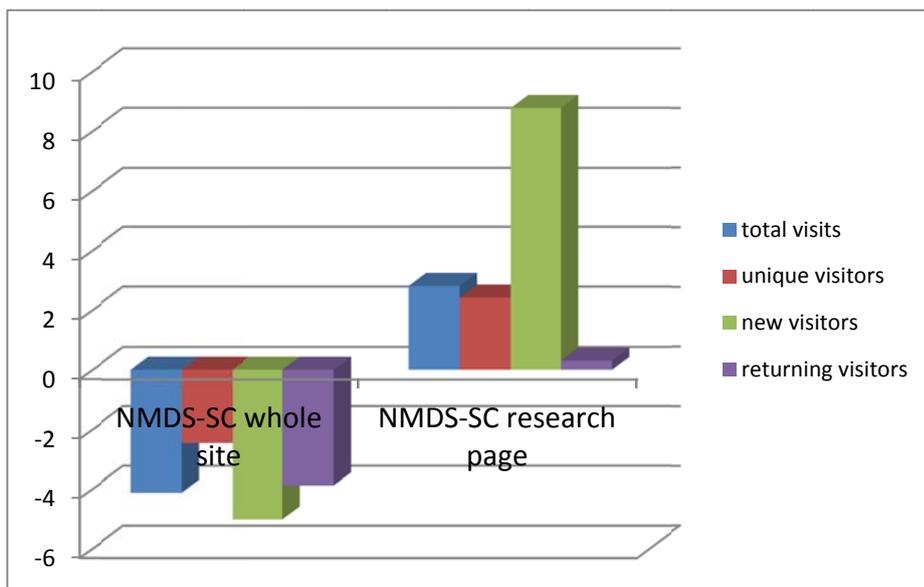


*Figure 4: Percentage change in site traffic 2010 to 2011; whole NMDS-SC site compared to NMDS-SC 'Research' page*

Figure 4 above compares the percentage change in volume of traffic from 2010 to 2011 for the NMDS-SC Research page and the NMDS-SC site overall.  We can see that while the traffic overall for the whole NMDS-SC site declined slightly between 2010 and 2011 (as shown by the negative figures), the traffic overall for the NMDS-SC Research page increased. Most noticeable is the eight per cent increase in new

visitors for the Research page 2010-11 compared to a five per cent decrease in new visitors for the whole NMDS-SC site over the same period.

Clearly there are a number of factors which will influence traffic volumes on the NMDS-SC site as a whole, most particularly the trends in employers' use of the site to upload their own data, which are outwith the scope of this review. However, it is reasonable to assume that increasing traffic on the NMDS-SC research pages is a proxy indicator for increased awareness and use of research outputs, including those related to NMDS-SC throughout the period 2008 to 2011.[23]

### 3.2.3 Volume of downloads of *State of the Adult Social Care Workforce* reports
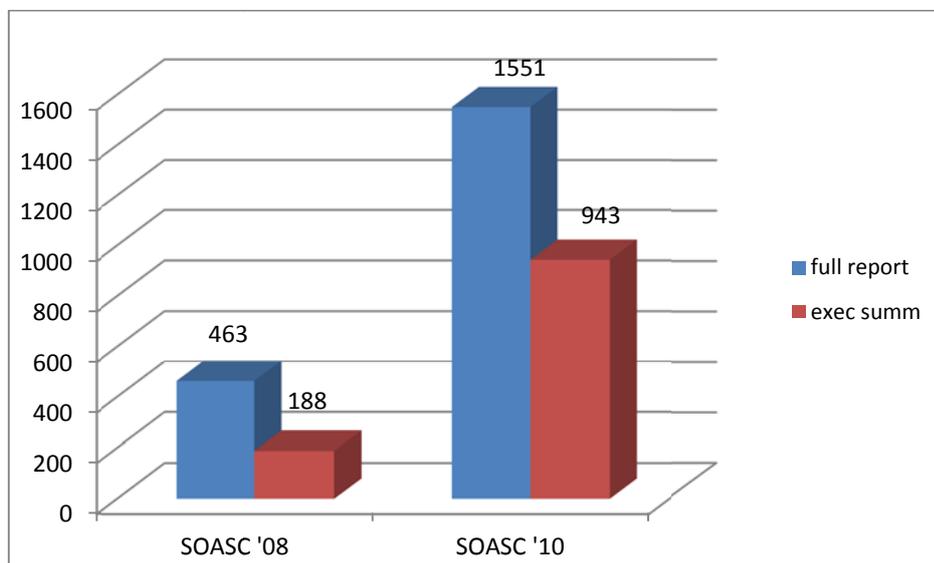


*Figure 5: Total number of downloads 2009-11 of the State of the Adult Social Care Workforce reports*

The bi-annual *State of the Adult Social Care Workforce* (SOASC) is the most prominent output based on NMDS-SC data published by Skills for Care. Figures for the total number of downloads show a significant increase; the most recent version, 2010, has been downloaded 1551 times, compared to 463 downloads of the 2008 version (see Figure 5 above). This is an increase of over 230%, and suggests that awareness and use of the report has increased significantly over the last three years. It should be noted however that this period also covers a shift by Skills for Care to promoting dissemination of reports via digital channels rather than via print. [24]

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[23] See additional supplementary data about dissemination in Appendix 5.

[24] The print runs for SOASC 2008 and 2010 were 50 copies of full report and 500 executive summaries

**3.2.4 Requests for NMDS-SC bespoke analysis and bespoke datasets**

Skills for Care have a number of arrangements for regular sharing of datasets, including with CQC, SCWRU, and CfWI (see section 5 for more on these). Other organisations are also able to make requests to Skills for Care's workforce intelligence team for anonymised raw datasets, either at 'establishment' level, and at 'worker' level.

There is also a large demand for bespoke analytical work by Skills for Care's analytical team. Requests come from a range of key stakeholders including:

- DH
- DfE
- CfWI
- LGA
- PSSRU
- Migration Advisory Committee (MAC)
- UK Border Agency (UKBA)
- CQC
- Local authorities
- Independent sector employers
- Trade associations
- Consultancy firms
- Data brokers
- Other Skills for Care teams.

## 4. Evidence of NMDS-SC use in published outputs

Using the various search and discovery strategies described in Section 2 above, **we identified a total of 175 documents that made mention of NMDS-SC during the period 2006-2012**. The complete list, alphabetical by author, is included at Appendix 5.

### 4.1. Types of document retrieved
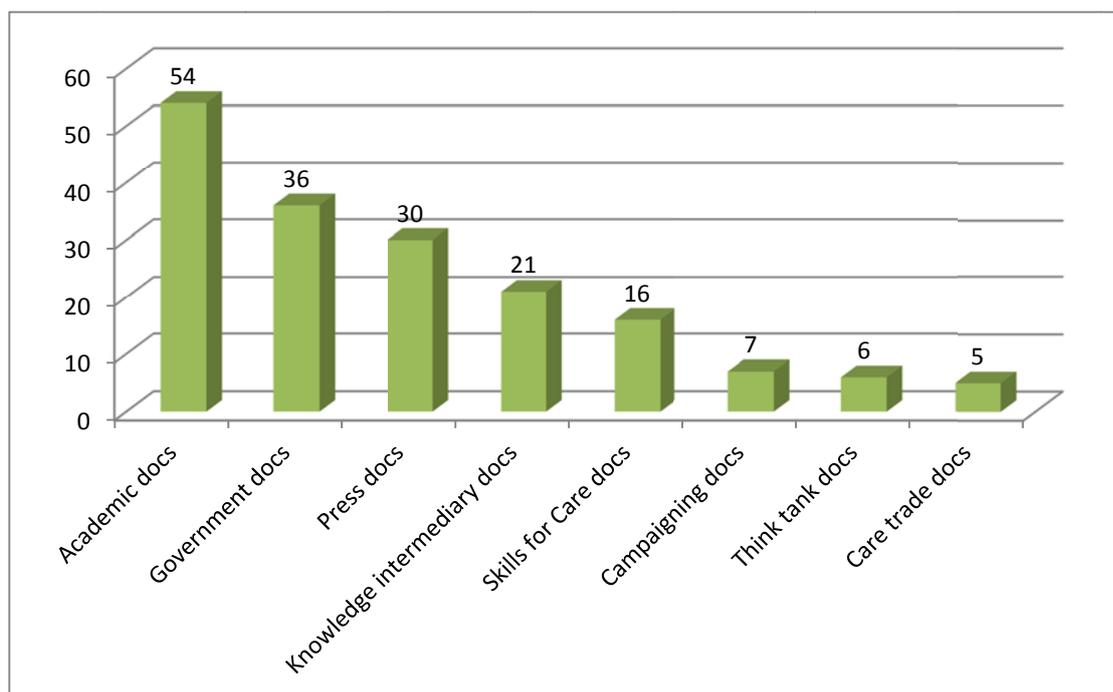


*Figure 6: Documents retrieved (total 175), period 2006-12, by organisation type*

As Figure 6 above shows, documents from academic sources, which include articles in journals (both peer reviewed and non-peer reviewed), as well as reports from academic institutions, are the most numerous, making up about one-third of the total (54 of 175). Next most numerous (36) are government documents, which include documents from central government and local government, including policy, strategy and practice guidance. The 30 documents described as 'press' include both the professional press such as *Community Care*, and mainstream press such as the *Guardian*, *New Statesman*, BBC.

What we have termed 'knowledge intermediary' documents (21) includes reports from sectoral bodies such as SCIE, CQC (and its predecessor, the Commission for Social Care Inspection (CSCI), as well as research organisations like Joseph Rowntree, many of which were the subject of our targeted grey

literature searches. Skills for Care's own output has been identified separately. (Please note that the Skills for Care website itself was not part of the targeted search, as Skills for Care is the originating organisation of the dataset. However, the Skills for Care Research Knowledge Base, which contains third party material, was.)

Campaigning documents (seven) include those from Unison, and Age Concern, and the six Think Tank documents include the Kings' Fund and IPPR. Finally, the five 'Care Trade' documents are from ADASS, some of which are joint publications with Skills for Care.
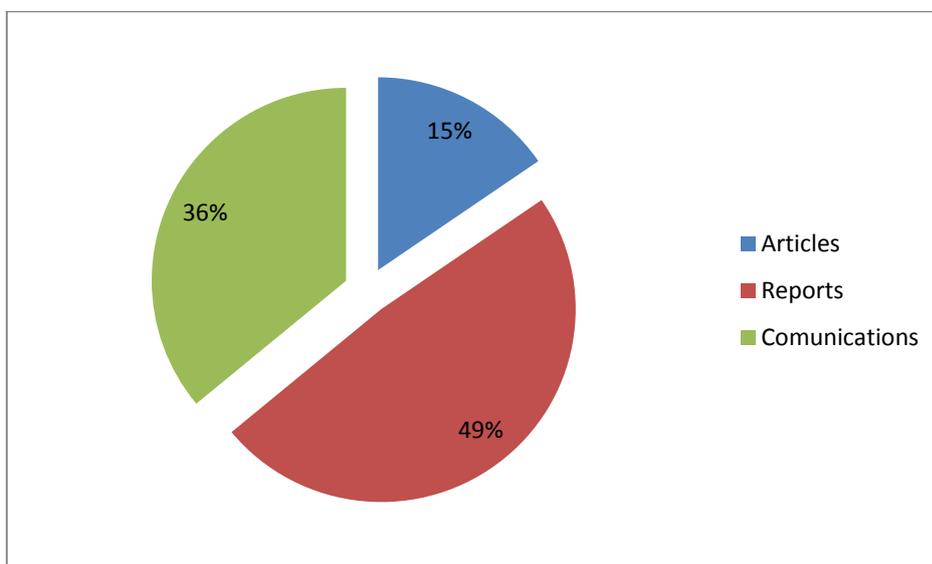


*Figure 7: Documents retrieved (total 175), period 2006-12, by document type*

As well as organisational provenance, we assigned each item we discovered a document type:

- 27 of 175 items (15%) were classified as Articles in academic journals – intended for other academic researchers; includes journals with impact factors and without
- 85 of 175 items – almost half – were classified as Reports – intended for funders, academic researchers, policymakers, and practitioners; this includes Government reports and Skills for Care's own outputs
- 63 of 175 items (36%) were classified as Communications – including content on web pages and the professional and mainstream press – intended for social care practitioners or the general public.

When considering these results, it is important to bear in mind that the quantity of document types retrieved is dependent on how easy they are to find in either databases or search engines. Ensuring

discoverability requires some knowledge of metadata and general web informatics, not necessarily something smaller organisations such as trade or professional bodies will have access to.

## 4.2 Levels of use of NMDS-SC

For each document retrieved we made an estimate of how central the use of NMDS-SC data was to the content of the document:

1: Listing: news announcement, catalogue entry or other listing concerning NMDS-SC service or output

2: Mention-background: NMDS-SC data or service is part of background in document

3: Mention-central: NMDS-SC data or service is evaluated or discussed in document

4: Citation-background: NMDS-SC data is formally referenced but use of data is part of background to document

5: Citation-central: NMDS-SC data is formally referenced and use of data is central to document.
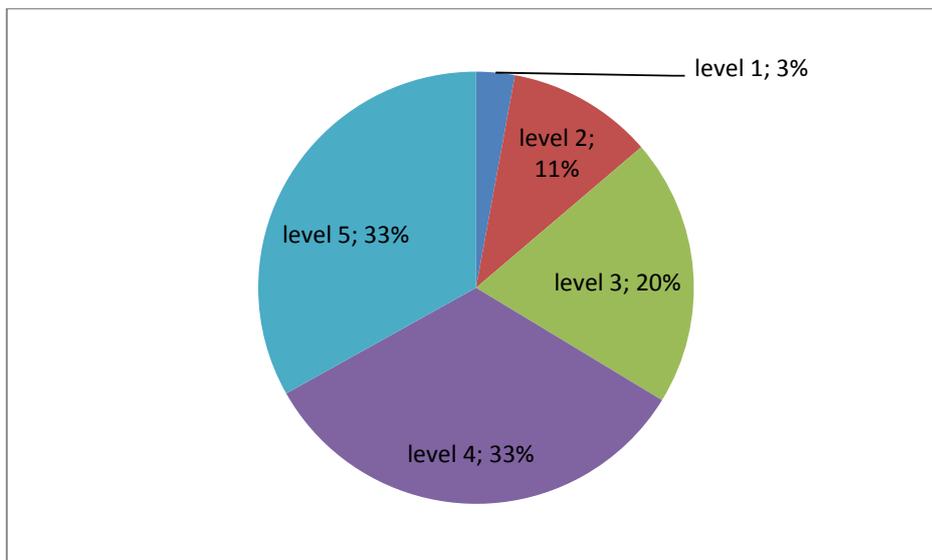


*Figure 8: Levels of NMDS-SC use in 175 documents retrieved*

As Figure 6 above shows, the largest groups were 'Level 4' and 'Level 5' documents, i.e. those in which NMDS-SC data is formally referenced, either as background or as a central data source. The use of NMDS-SC in these documents was usually in the form of *The State of the Adult Social Care Workforce* (SOASC 2008 or 2010), or NMDS-SC *Briefings*, rather than references to raw data. However, as we discovered in the interviews, this may be an artefact of citation formats: one interviewee, who made

extensive use of the raw dataset, was nonetheless unsure how to formally reference it, and so referenced the SOASC report instead.

We then looked at the levels of use of the data for each document type, as illustrated in Figures 9 and 10 below.
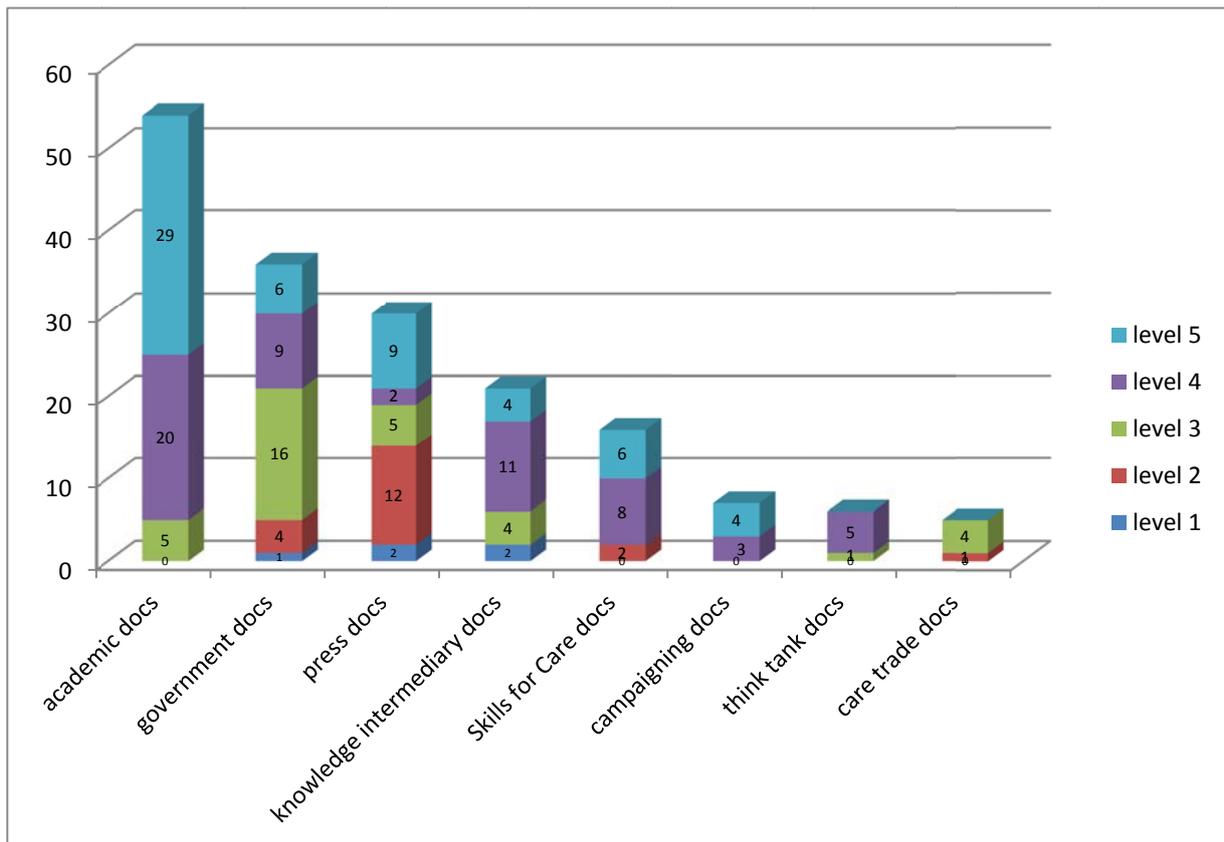


*Figure 9: Document types retrieved by levels of NMDS-SC use*

We can see that almost half of the academic uses of the dataset were at level 5, in other words the dataset was central to the content of the article or report. It is interesting to note that the government documents tended to use the dataset at level 3, in other words the dataset was central to the document but not formally referenced. This illustrates clearly the challenge posed in the evaluation of use of the dataset: most of these items would not have been discovered through a standard bibliometric citation search, yet they are central to the picture of NMDS-SC impact. We can also see that the press items contained the most level 2 mentions, where the dataset is not formally referenced (unsurprisingly) and the data is part of the background to the items.
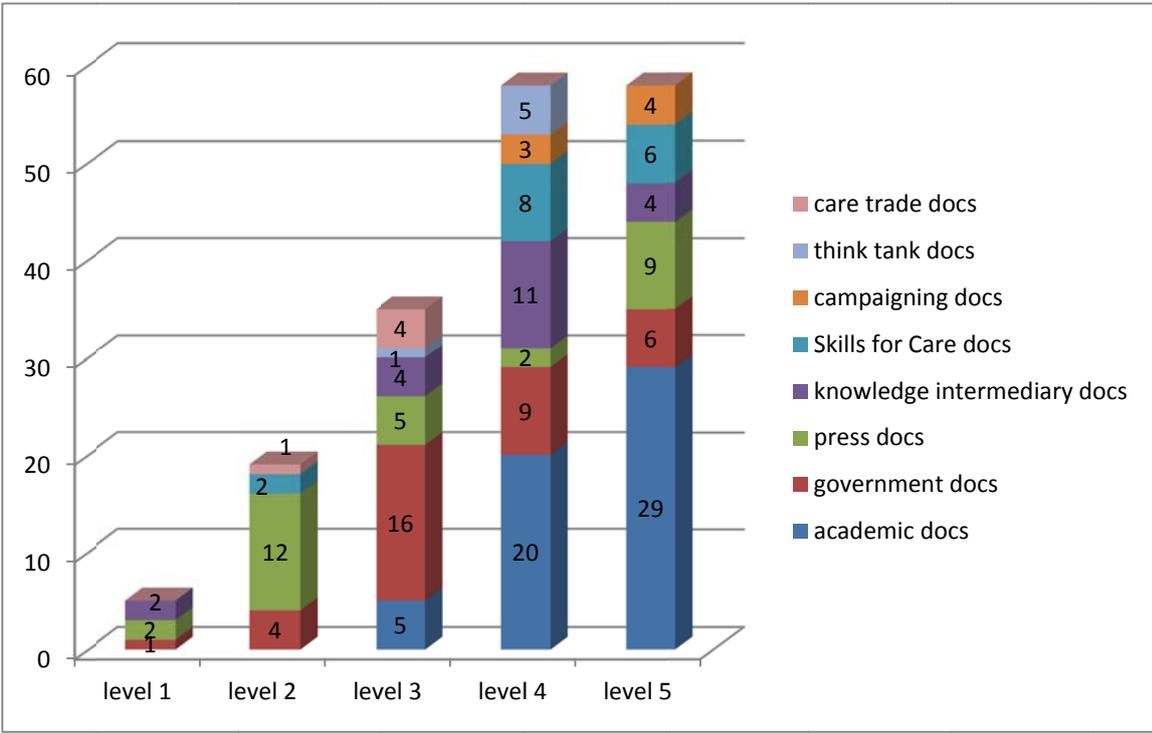
*Figure 10: Levels of NMDS-SC use by document type*

Figure 10 above shows how the total mentions at each level divide by document type. Many of the Level 2 items were from *Community Care*, the others were a mix of press releases, local newspapers, and local authority items. Level 3 items were largely from local authority websites with examples of how NMDS-SC would benefit local workforce planning.  The reports on development of the integrated local area workforce strategies (InLAWS) were often judged as level 3 items.

Level 4 items were the most varied – government documents, reports by knowledge intermediary/ sectoral bodies, and journal articles. A wide range of non-academic organisations provided level 4 citations in their reports, and sometimes the report was the result of collaboration (e.g. Centre for Workforce Intelligence produced for the Department of Health South West).  Several of the Skills for Care reports also featured the work with local authorities, often on InLAWS, or work with a research consultancy (e.g. Vector Research). Four of the five King's Fund reports retrieved were level 4 (the other was level 3), and the King's Fund was one of the main non-statutory organisations where citations were found.  Other prominent organisational users included Unison (four documents). Unsurprisingly, the DH (six documents) was the main government department citing NMDS-SC in its published output.

However, as the interview data in the next section shows, the documentary evidence reveals only one element of NMDS-SC influence within DH.

## 4.3 Diffusion timescales

It is possible to identify some trends over time of the diffusion of use of NMDS-SC data.
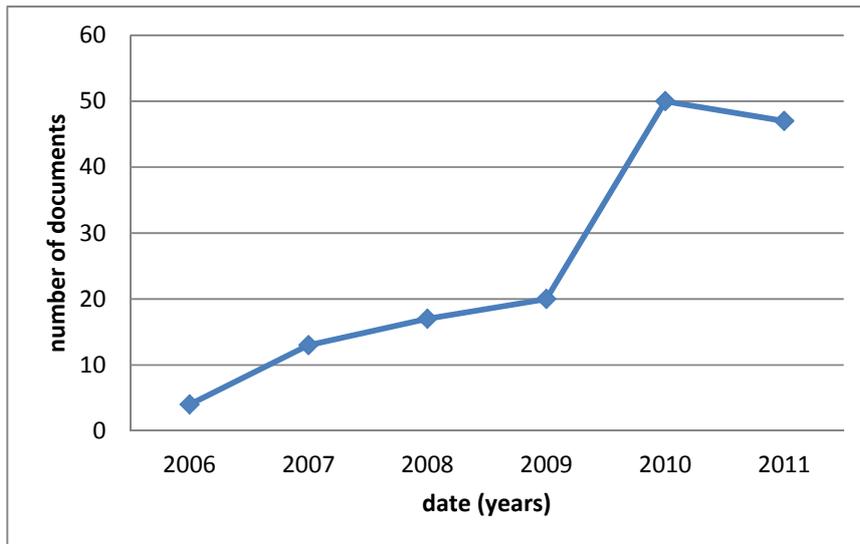


*Figure 11: Year on year rate of publication of documents using NMDS-SC, 2006 to 2011*

Figure 11 above shows overall numbers of documents discovered for each year between 2006 and 2011. There is a steady upward trend from 2006 to 2010, with a noticeable spike from 2009. In 2011 the total number of documents using NMDS-SC levels off somewhat.
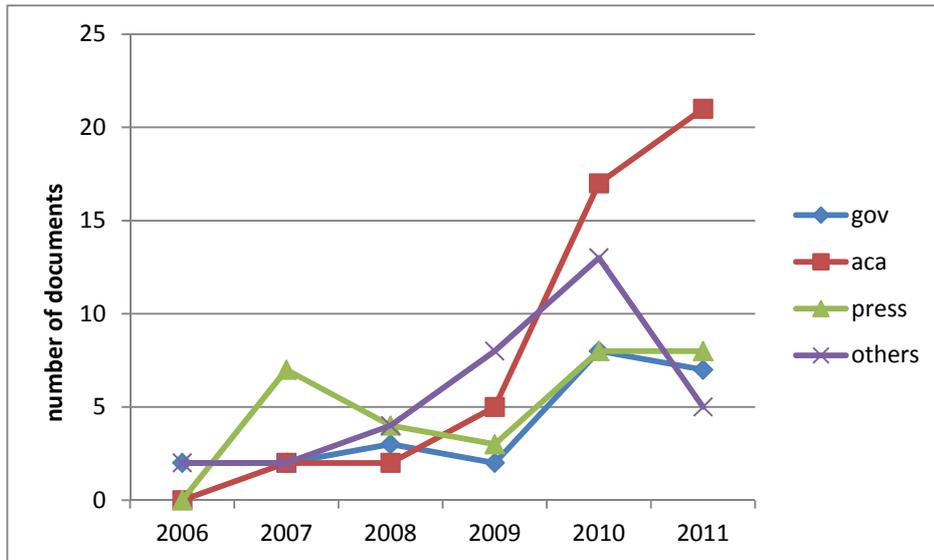
*Figure 12: Use of NMDS-SC data in Government, academic, mainstream press and all other sources, by year 2006 to 2011*

Figure 12 shows interesting variations in rates of diffusion in different types of document. We can see the spike in press reporting of NMDS-SC in 2007 in its first full year of life. Academic use takes much longer to get going, but by 2010 it is the dominant channel of diffusion of NMDS-SC data by some distance.[25] Government use starts to be firmly established in 2010, but remains considerably smaller in document volume terms than use in academic research.

We can see that NMDS-SC data use by other types of organisations – this includes sectoral organisations (excluding Skills for Care), trade bodies, think tanks and campaigning organisations – falls quite sharply in 2011. It is hard to identify direct cause and effect to these trends, as they are inevitably multi-factored.

There may also be some correlation with the publication of the *State of the Adult Social Care Workforce* reports.  The last SOASC report was published in May 2010, and that year saw the highest number of references to the dataset in reports by the sectoral organisations, think tanks *et al*. It will be interesting to see if a similar spike of references to NMDS-SC by these types of organisations follows the 2012 SOASC.

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[25] We understand that the 2012 figure for academic publications is likely to exceed 2011. We are aware from the interviews that, for example, a dozen or so academic articles are in press from SCWRU alone.

We should also bear in mind that the wider policy context – with a significant white paper on social care having been imminent since early 2011 – may also account for a lull in outputs.

## 4.4 Citation patterns in academic articles

For articles discovered using Web of Science searches, it is possible to produce 'citation maps' which show the references used in the article in question (of which NMDS-SC is one), and also the 'downstream' citations – in other words those articles which then go on to reference the article that originally used NMDS-SC. Overleaf is a WoS citation map for an article by researchers from the Social Care Workforce Research Unit and the Personal Social Services Research Unit.

Figure 13: Citation map: Curtis, L., Moriarty, J., & Netten, A. (2010) 'The expected working life of a social worker'

*British Journal of Social Work* 40, 1628-1643.



Source: Web of Knowledge™, www.thomsonscientific.com
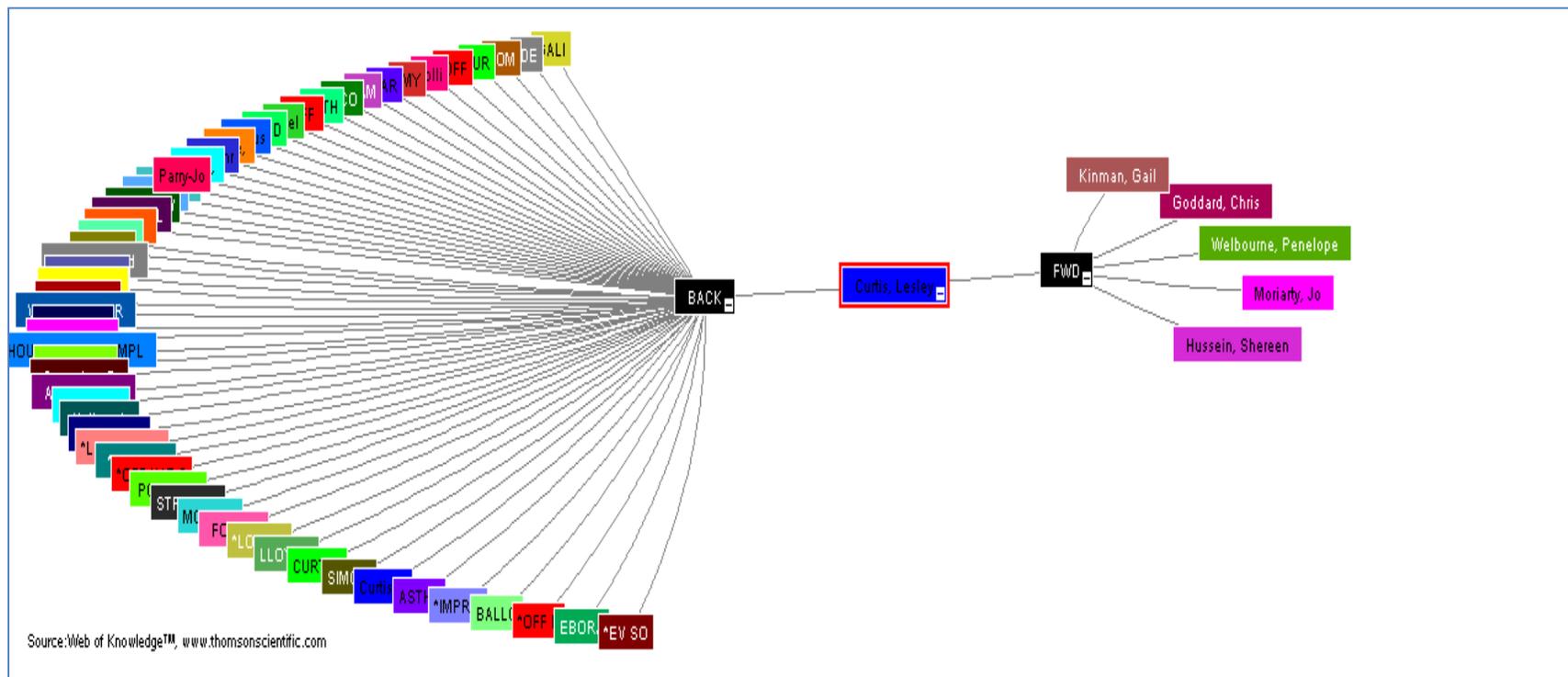
The boxes on the far left (the backward citations) show all the references included by Curtis *et al.* when authoring their article, and these include Eborall, C. *State of the Adult Social Care Workforce* 2008**.** The boxes on the right (the forward citations) show subsequent articles which reference Curtis *et al.*'s article.

We can see that the article has then been cited by five authors in articles in WoS cited journals:

- Gail Kinman, Professor of occupational health psychology at the University of Bedfordshire

- Chris Goddard, Child Abuse Prevention Research Australia, Monash University

- Penelope Welbourne, Associate Professor of Social Work, University of Plymouth

- Jo Moriarty, Research Fellow, SCWRU, King's College (self-citation)

- Shereen Hussein, Senior Research Fellow, SCWRU, King's College (institutional self-citation).

Viewing the record for this article in Google Scholar, we discover 13 extant forward citations (see Appendix 7 for complete list). These include the five WoS items above, plus

- three further articles by SCWRU/PSSRU researchers (self-citations)

- Grant and Kinman in *Social Work Education: The international journal*

- Chiller and Crisp in *Australian Social Work*

- Webb and Carpenter in the *British Journal of Social Work* [26] (BJSW)

- a doctoral thesis from the University of Birmingham

- a slidepack by Fisher of SCIE for a seminar at National Institute for Health Research (NIHR) School for Social Care Research.

Overall, the citation maps and the Google scholar results indicate that use of NMDS-SC disseminates within a relatively limited specialist field of interest, and hence we see a number of self-citations within research teams and relatively small number of forward citations. This citation maps will of course change over time; the article is still relatively recent when we consider the long lead times in academic publishing.

Using Google Scholar, it is also possible to make some overall assessment of which academic articles using NMDS-SC have had the widest dissemination, in terms of quantity of forward citations.

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[26] The WoS citation map did not pick this BJSW article up, despite BJSW being part of WoS, because is it an online early publication i.e. not yet in print.

| Number of citations (Google Scholar) | Article details | Level of NMDS-SC use |
|---|---|---|
| 50 | Cangiano, A., Shutes, I., Spencer, S., & Leeson, G. (2009) *Migrant care workers in ageing societies: research findings in the United Kingdom* Oxford: University of Oxford, COMPAS | 5 |
| 13 | Curtis, L., Moriarty, J., & Netten, A. (2010) 'The expected working life of a social worker' *British Journal of Social Work* 40, 1628-1643. | 4 |
| 9 (7 self-citations within SCWRU) | Manthorpe, J., Hussein, S., Charles, N., Rapaport, P., Stevens, M., & Nagendran, T. (2010) 'Social care stakeholders' perceptions of the recruitment of international practitioners in the United Kingdom - a qualitative study' *European Journal of Social Work* 13, 393-408. | 4 |
| 5 | Gospel, H. & Lewis, P. A. (2011) 'Who cares about skills? The impact and limits of statutory regulation on qualifications and skills in social care' *British Journal of Industrial Relations* 49, 601-622 | 5 |
| 4 | Pemberton, S. & Stevens, C. (2010) 'The recruitment and retention of Central and Eastern European migrant workers in the United Kingdom: A panacea or a problem under the new policies of 'Managed Migration''? *Regional Studies* 44, 1289-1300 | 5 |

*Table 1: Most widely cited academic articles using NMDS-SC*

It is perhaps unsurprising that the greatest number of citations is for an article concerning migrant care workers. This has been a high-profile political issue in recent years, and the article concerns cross-sector patterns, and therefore is referenced by researchers from a broader range of disciplines. The contribution by NMDS-SC to the policy debate around migrant workers was identified by many respondents as an important example of its impact, as detailed in Section 5 below, so there is a close correlation between the qualitative and bibliometric findings.

**4.5 The Social Care Workforce Research Unit**

The Social Care Workforce Research Unit at King's College warrants specific mention as the main academic research team working in this area. SCWRU researchers are author or co-author on approximately 20 per cent of all the items discovered (38 of the total 175). Shereen Hussein, as primary or co-author, accounts for 33 items.

The *Social Care Workforce Periodical* is published online by SCWRU, and acts as third party dissemination channel for NMDS-SC data. It is reviewed by Skills for Care and the Department of Health prior to release, and it enables SCWRU to get data and analysis into the public domain more quickly than is possible via the formal scholarly publishing routes. While precise data about its distribution and reach are unclear[27], we know from interviews that it is intended to reach a more policy-oriented audience than academic journal articles, and has an audience beyond the UK.

## 4.6 NMDS-SC in mainstream and social media

We identified the following examples (presented chronologically 2007-11) of data from NMDS-SC being used directly by mainstream media. Due to inconsistent archiving of media content, and the large variation in the quality of indexing and search engines on media sites, these examples will represent only a proportion of media mentions of NMDS-SC.

| Publication Medium | Title/content | Date | Level of NMDS-SC use |
|---|---|---|---|
| Guardian: Society > social care human resources; article D. Brindle | 'Proof in the figures: recruitment and retention crisis confirmed' | Oct 2007 | 5 |
| Guardian Social Care Supplement October 17, by Andrew Cole | 'In search of the invisible workers' | Oct 2007 | 3 |
| Community Care: Article by N Jacobs | 'Adult social care workforce needs to grow by > million' | Feb 2008 | 5 |
| Community Care: Article by N Jacobs | 'Skills for Care predicts huge hike in workforce' | Mar 2008 | 5 |
| Community Care: Article by M Samuel | 'Data barriers hamper council workforce planning' | Jun 2009 | 1 |
| Guardian: Society > Social care; article by David Brindle | 'Andy Burnham calls for better pay for careworkers' | Sept 2009 | 2 |
| Guardian: Social Care > Social care | 'State of the adult social care | Mar 2010 | 1 |

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[27] SCWRU do not keep this data for the periodical

| Publication Medium | Title/content | Date | Level of NMDS-SC use |
|---|---|---|---|
| careers > reports | workforce' | | |
| Community Care: Article by K McGregor | 'Gender pay gap revealed in adult social care' | April 2010 | 5 |
| Community Care: Article by D Lombard | 'Adult social care workforce set to double in 15 years' | July 2010 | 5 |
| Community Care: Workforce blog by D. Lombard | 'Care workers paid less than supermarket cashiers' | July 2010 | 5 |
| Guardian: Society > JoePublic blog by David Brindle | 'Is social care about to be swallowed up by health' | July 2010 | 2 |
| Community Care: Article by ML Clews | 'Social care staff shortages set to worsen with immigration cap' | Nov 2010 | 5 |
| Community Care: Article by D Lombard | 'Job satisfaction more important than pay' | April 2011 | 5 |
| Community Care: Article by D Lombard | 'Outsourcing: the different employment models' | May 2011 | 5 |
| 'British Politics & Policy at LSE': blog post by S Hussein | 'Government immigration policies may well restrict quality and quantity of social care professionals' | Oct 2011 | 3 |
| BBC Panorama: TV doc inc interview w. S Hussein using NMDS-SC data | 'All work and no pay' | Nov 2011 | 3 |
| New Statesman: Blog by Gavin Kelly references S Hussein using NMDS-SC data | 'The scandal of low paid care workers' | Dec 2011 | 3 |

*Table 2: Use of NMDS-SC data in mainstream media*

We also searched a range of social media sites and aggregators for reference to NMDS-SC. The principal shortcoming of social media search engines is that most are limited to recent content and most do not give any option for refining by date. Overall we found very little mention of NMDS-SC – as was expected.

| Publication Medium | Title/content | Level of NMDS-SC mention |
|---|---|---|
| Twitter | 2 posts, from Skills for Care, about the dashboard testing of NMDS-SC | 1 |
| | 3 retweets of these posts | 1 |
| Slideshare | PSSRU *Unit costs of health and social care 2010*, containing 3 references to *The State of the Adult Social Care Workforce* 2010 | 5 |
| | CWDC: *A Picture worth millions: state of the children and young people's workforce 2010* containing 5 references to NMDS-SC data, cited as Skills for Care 2009 | 5 |
| Delicious | Link to NMDS-SC home page saved by Swapweb (SWAP in Southampton University) | 1 |
| | Link to NMDS-SC home page saved by Anglia Ruskin | 1 |

Table 3: NMDS-SC mentions in social media

## 5. Qualitative evidence of impact of NMDS-SC

The document searches revealed substantial evidence of use of the dataset in outputs from research and policy. The interview and surveys were designed to elicit further information on the impacts of the dataset on research and policy processes, and other undocumented impacts.

A total of 31 participants were interviewed or replied to the survey, and in some cases did both. See Appendix 2 for anonymised profiles of all respondents. Participants were a mix of research, policy knowledge, intermediary and consultant roles, and were identified either by Skills for Care or by the researchers, based on existing knowledge of the dataset and its users.

### 5.1 Descriptions of uses of NMDS-SC

Twenty-one different kinds of use of the dataset were identified by the interviews and survey respondents, with the purpose of the usage falling broadly into five groups:

- research purposes
- policy development purposes
- service management and planning purposes
- inspection or quality assurance purposes
- communications purposes.

Where respondents mentioned specific uses of either primary/bespoke NMDS-SC data or of outputs such as the *State of the Adult Social Care Workforce* reports, these are itemised separately.

| Uses of NMDS-SC | Number of respondents reporting use |
|---|---|
| **Research uses** | |
| 1. use primary data to link with other datasets e.g. on quality, inspection outcomes | 5 |
| 2. to disseminate to other researchers and to policy-makers | 3 |
| 3. use primary data on which we do secondary quantitative analysis | 2 |
| 4. use SOASC for international comparisons | 2 |
| 5. use primary data to inform qualitative research | 1 |
| 6. use NMDS-SC Briefings and SOASC to triangulate our own findings from raw data | 1 |
| **Policy uses** | |
| 1. to help make policy as evidence-based as possible | 6 |

| Uses of NMDS-SC | Number of respondents reporting use |
|---|---|
| 2. use bespoke data to inform ongoing policy work | 5 |
| 3. use SOASC to as background introduction in policy documents | 3 |
| 4. use bespoke data to inform ministerial briefing work | 2 |
| 5. use SOASC as a constant reference in all policy work | 2 |
| 6. used as reference in EIAs so we know impacts on equality | 1 |
| **Service planning/management uses** | |
| 1. to inform workforce planning and management and performance planning in LAs | 9 |
| 2. use raw data as one of bases for workforce modelling | 6 |
| 3. to inform training priorities and programmes (inc use of job role classifications) | 4 |
| 4. to inform care service planning and management | 3 |
| 5. use SOASC to understand trends for workforce modelling at national level | 1 |
| **Inspection/QA uses** | |
| 1. use bespoke data to construct risk profiles on social care establishments as part of inspection process | 4 |
| 2. use it to fulfil statutory requirement to publish workforce data on LA social services workforce | 1 |
| **Communications/media uses** | |
| 1. use reports in ongoing communications and outreach work about SC sector | 5 |
| 2. use bespoke data to inform policy responses in short term e.g. media | 3 |

*Table 4: Uses of NMD-SC as identified by respondents*

### 5.1.1 Competing and complementary datasets

We asked the interviewees about any competing or complementary datasets they used. The majority of respondents said there was no competitive overlap with any other datasets. Four respondents identified a previous overlap with SSDS001, but this was no longer the case as SSDS001 was no longer collected (having been replaced by NMDS-SC). Two respondents identified gaps in data arising from the switchover between SSDS001 and NMDS-SC (see Section 6 on areas for improvement). One respondent commented that they used to collect some (more complete) data on qualifications levels as this was collected by CSCI/CQC under the National Minimum Standards requirements, but this is no longer the case.

A number of complementary datasets, or areas of enquiry, were identified by interviewees:

| Complementary data or areas of enquiry | Number of respondents identifying use |
|---|---|
| Data about user perceptions collected directly from own communication channels | 2 |
| Labour Force Survey | 1 |
| Annual Survey of Hours and Earnings | 1 |
| Data on voluntary sector workforce researched elsewhere (e.g. NCVO) | 1 |
| DH/NHS IC User Experience Survey | 1 |
| Electronic Staff Record for NHS | 1 |
| Views of Directors of Adult Services sometimes collected directly | 1 |
| Views of corporate members about local commissioning practices collected directly | 1 |

*Table 5: Complementary data or areas of enquiry*

## 5.2 Perceptions of impacts of NMDS-SC

### 5.2.1 Impacts on research work

We asked participants about how they perceived the impact of the dataset on research processes and activities. Conceptual impacts on research activities included making research into the social care workforce more robust, hence improving its reputation, thereby enabling access to the more prestigious scholarly publications and encouraging more researchers to engage with social care as a topic of enquiry. Operational impacts on research included the provision of underpinning quantitative data to inform qualitative research, the ability to compare different roles and levels within the workforce, and the ability to compare the workforce dataset with other datasets on, for example, service user perceptions.

| Impact | Number of respondents identifying impact |
|---|---|
| encourages more researchers to engage with social care sector as a topic of enquiry | 3 |
| puts social care on a par with other sectors, particularly healthcare | 3 |
| is an evidence 'backcloth' in discussions between researchers and policy-makers | 2 |

| Impact | Number of respondents identifying impact |
|---|---|
| having national statistics status would give it more kudos with researchers generally and helps with funders such as ESRC | 2 |
| gives underpinning concepts we can then investigate with qualitative research, e.g. on motivations, burnout, job satisfaction etc | 1 |
| means we can produce research in high quality academic journals which was not possible before as workforce data was so weak | 1 |
| will be crucial to research investigating links between user perceptions of service quality and workforce characteristics | 1 |
| means we have data about all levels of the workforce; some sectors only have information about professional or more qualified roles; arguably we are better off than colleagues researching healthcare workforce | 1 |
| throws up trends in the way only a large dataset can | 1 |
| encourages a 'virtuous circle' between NMDS-SC researchers and other researchers, whereby research from each influences the other | 1 |

*Table 6: Reported impacts of NMDS-SC on research activities*

When we asked respondents what the impacts on research activity would be if the dataset did *not* exist, they commented:

- we would be basing research on weak data and anecdote (three respondents)
- we would have to consider researching the data ourselves, which would probably not be feasible (two respondents)
- we would constantly have to prove the basics about the characteristics of the workforce (one respondent)
- we would have more limited opportunities about the areas we could research (one respondent)
- we would be back to only knowing about the qualified end of the workforce and nothing about the bulk of it (one respondent)
- there would not be a publicly available dataset (one respondent).

**5.2.2 Impacts on policy work**

Policy impacts of the dataset were summed up by one interviewee thus: 'It allows policy-makers to identify a problem, assess its scale and nature, and work out a response.'

A significant majority of the respondents to the survey, in each case felt that NMDS-SC had 'alerted policy makers to a particular issue in adult social care on several occasions' (19 of 24) and 'had identified priorities for policy action (which may include further research) on several occasions' (18 of 24).

Somewhat fewer felt able to draw a direct line between the dataset and a final policy output, but even here 11 of 24 respondents reported NMDS-SC 'had influenced policy decisions on several occasions'.
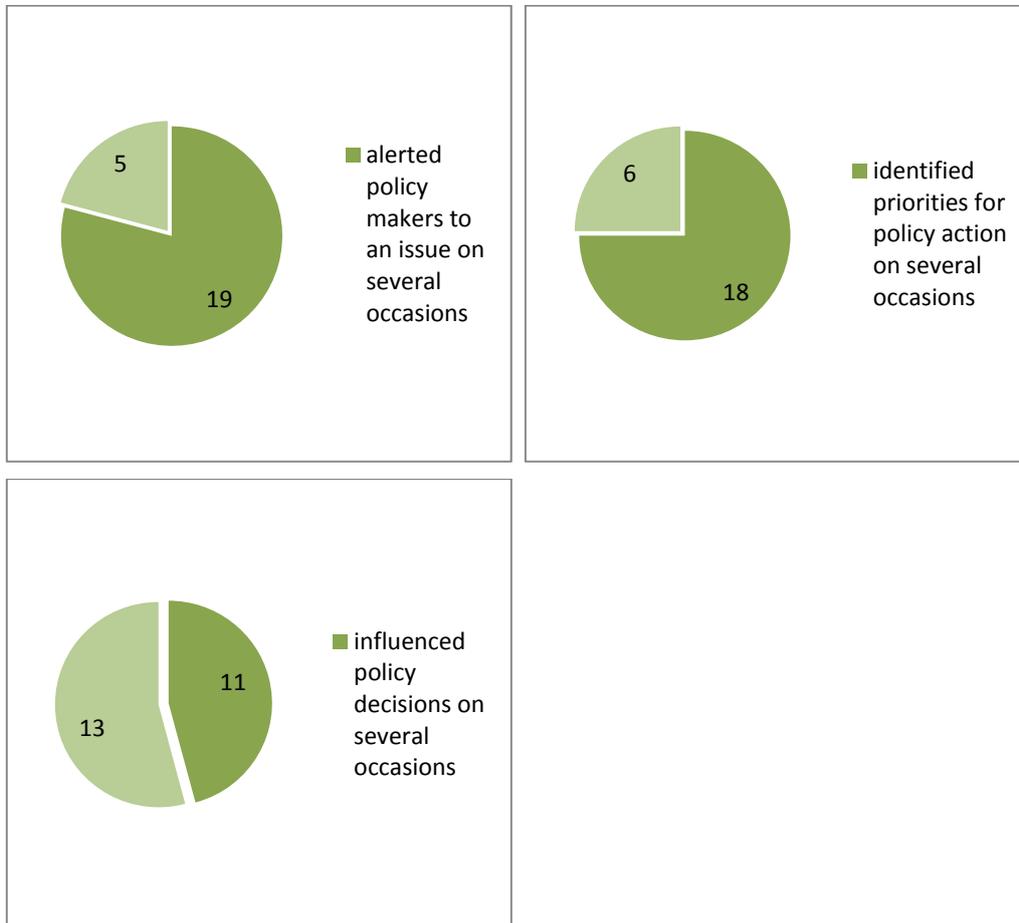


*Figure 14: Impacts on policy work reported by survey respondents*

Participants identified a very broad range of types of impact of NMDS-SC on policy processes and outputs, including the following:

- underpinning policy development with sound evidence: "it is our policy to make sure our policy work is evidence-based, and NMDS[-SC] is invaluable in this regard"
- alerting policy makers to an issue that was hitherto unknown or under-reported
- enabling policy to be more accurately targeted or focused
- enabling the social care workforce to be robustly represented in broader policy discussions e.g. on equality or migration
- providing government ministers and civil servants with accurate briefings
- providing evidence-based policy responses to issues in the media
- providing evidence-based policy responses to government consultations.

Many specific examples of policy impact were identified. These are detailed below, with the most frequently cited examples first.

| Impacts | Number of respondents identifying impact |
|---|---|
| NMDS-SC data on migration such as the numbers, age profiles and qualifications of non EEA workers has influenced policy at national level | 9 |
| Analysis based NMDS-SC data on pay rates has been and continues to be influential in policy terms | 9 |
| Analysis based on NMDS-SC data on qualifications and variations within parts of sector has been influential in developing qualifications policy and frameworks e.g. on dementia, learning disability | 7 |
| Detailed NMDS-SC data was used to focus policy action on reducing staff turnover | 6 |
| Need for more work on impacts of personalisation on workforce inc need for further research on direct payments workforce (PAs) | 3 |
| Levels of qualification and link to CQC ratings | 2 |
| Senior colleague attended ministerial meeting on equality and needed immediate up to date figures on gender and ethnicity in the workforce which we got from NMDS-SC; this meant that social workforce was robustly represented in discussions | 1 |
| Used dataset to support statements about numbers of qualified social workers and rebut claims that they were falling | 1 |
| Using NMDS-SC data to inform thinking on policy for career development for social workers – including the data on reasons for leaving employment, sources of recruitment, demographics such as age | 1 |
| Data on qualified nurses in social care recently used in DH nursing policy work | 1 |
| Used data to underpin policy response to DH White Paper | 1 |
| Used data to underpin policy response to Dementia Challenge | 1 |
| Overall NMDS-SC will be important source of data as we refresh ASCW strategy following forthcoming white paper | 1 |
| Need for further understanding of workforce for self-funders | 1 |
| Need for further research into needs of leadership development needs of domiciliary care workforce | 1 |
| Organisational role in attracting male workers | 1 |

*Table 7: Reported impacts of NMDS-SC on policy activities*

Two respondents suggested that the dataset alone cannot influence policy; they felt that policy-makers are 'not always willing or able to base decisions on evidence'.

We asked respondents what the impacts on policy activity would be if the dataset did *not* exist:

- we would be basing policy on weak and woolly data and reliance on anecdote (three respondents)

- we would constantly have to prove the basics about the characteristics of the workforce before we could start policy work (one respondent)

- we would have to research the workforce ourselves, which would be incredibly expensive (one respondent)

- it would severely affect the accuracy of our policy decision-making (one respondent)

- 'if it did not exist we would have to create it' (one respondent).

Participants also identified a number of specific national policy documents as having been influenced by the dataset.

| Policy document identified as having referenced or used NMDS-SC data |
|---|
| Vision for Adult Social Care (DH) |
| Dilnot Commission on Funding of Care and Support (DH) |
| Working to Put People First (DH) |
| Personal Assistant Framework (DH) |
| Workforce Development Strategy (SfC) |
| Recruitment and Retention strategy (SfC) |
| Sector Skills Agreement (SfC) |
| ASCOT Framework (PSSRU) |

All but one these had been picked up in the document search phase of this study. The Dilnot report and all its associated supporting documents had been manually searched; they do not contain explicit mention of the dataset, so influence was likely to have been at one remove, in other words the dataset influenced research which went on to influence the report.

On a related point, we asked interviewees whether all their uses of the dataset would be recorded or referenced. While all the researchers said that sources would always be publicly acknowledged, policy-maker interviewees suggested that a number of types of use of the dataset on policy work would not be publicly recorded, including:

- provision of internal briefings

- informing internal policy discussions with no public outputs

- informing policy summary documents that did not have a formal reference style.

**5.2.3 Impacts on other activities in the sector**

While the focus of this evaluation was on impacts on research and policy, a number of participants pointed to impacts on planning, management or inspection/QA activities in the sector (these could be at a national or local level). 15 of 24 survey respondents said that the dataset had influenced the planning or management of services within the sector on one or several occasions. Examples provided by participants are detailed below.

| Impacts | Number of respondents reporting impact |
|---|---|
| Used by LAs in workforce planning and service commissioning, through InLAWS and more generally | 7 |
| NMDS-SC is the key dataset for workforce forecasting e.g. modeling future demand for social workers | 5 |
| Data on qualification levels influenced employers approach to training & qualifications | 4 |
| Used by CQC during inspection process | 2 |
| Informed set up of National Skills Academy | 2 |
| Pay rates, turnover and impact on CQC are data of most use to managers of services | 2 |
| Used to assess needs for leadership development services | 2 |
| Informed set up of College of Social Work | 1 |
| Job roles classifications inform practice guidelines, training programmes etc | 1 |
| Informed DH ref Local Education and Training Boards (for healthcare workforce) | 1 |
| Influenced funding of training through government departments other than DH (e.g. BIS) | 1 |
| Referenced by SW Reform Board regarding approach to supervision | 1 |
| Sector better recognised by employment support services such as Job Centre Plus | 1 |
| Employers encouraged to use dataset as benchmark | 1 |
| Used by LAs during Joint Strategic Needs Assessment (JSNA) process | 1 |

*Table 8: Reported impacts of NMDS-SC on planning, management and inspection activities*

### 5.2.4 Enhancing general understanding

Participants drew attention to a number of impacts of the dataset which were not specific to research or policy or management activity but concerned more general awareness of workforce issues within and beyond the social care sector.

Seventeen of 24 survey respondents said that the dataset had supported the **transfer of knowledge** between researchers, policy-makers and others within the sector on several occasions. Examples given by individual respondents included:

- work of SCWRU, Research in Practice (RiP), SCIE, the National Skills Academy for Social Care (NSASC), King's Fund all informed by dataset
- DH, SCWRU, CQC, CfWI, PSSRU, MAC, UKBA, local authorities all exchange information based on dataset
- dataset used in discussions between NSASC and ECCA, the National Care Forum (NCF), and the National Care Association (NCA)
- SCWRU has various networks through which to report NMDS-SC data
- researchers have informal discussions with policy-makers who need briefing on social care because new to role or not working in the sector – NMDS-SC invaluable for this

We asked survey respondents whether they felt the dataset had **challenged conventional wisdom** within the sector:  12 felt it had done, 10 of these on more than one occasion. Examples given included:

- social care workforce was not being lost to retail sector or health sector (four respondents)
- how workforce relies on outside European Economic Area (four respondents)
- turnover not uniformly high (four respondents)
- adult social care workforce older but not ageing (one respondent)
- showed that the range of pay is wide  (one respondent)
- showed that some workers paid below national minimum wage (one respondent)
- though migrant workers are prevalent in London and in some operations, overall they are a relatively small proportion (one respondent)
- numbers of qualified social workers not decreasing as fast as some claimed (one respondent).

Twenty-one of 24 survey respondents felt that the dataset had **enhanced general knowledge** and understanding about the workforce, within and beyond the sector. Examples offered included:

- everyone had a better understanding of actual size of workforce (three respondents)
- information about shape and nature of the workforce was not previously available (two respondents)
- SOASC very useful for general understanding, it is a 'seminal text ' (two respondents)
- enhanced understanding within the NHS, the Department of Business, Innovation and Skills (BIS), and DfE (one respondent)
- it means we are able to compare the statutory and independent sectors (one respondent)
- mainstream media reports on work by academics based on the dataset (one respondent).

Interviewees spoke of how the dataset has made the sector 'more mature' in its understanding of the importance of reliable data in all aspects of planning and decision making, and that the dataset has put social care on a par with other sectors – particularly healthcare – in terms of workforce data.

### 5.2.5 Perceptions of areas for improvement of NMDS-SC

A number of interviewees and respondents commented on areas of the dataset process or outputs which they felt could be improved.

Most often mentioned by respondents was their perception of low **completion** rates[28]; eight respondents commented on perceived low completion rates from employers in the sector and the adverse effect this had on the robustness of the dataset as whole. One respondent commented that the SSDS001, which had been superseded by NMDS-SC, had higher completion rates (although much more partial coverage) so for their specific purposes the robustness of workforce data had declined somewhat. Three respondents commented in particular on the relatively low completion rates for independent (voluntary and private) employers, and for people employing their own care workers. Respondents were aware that this was an ongoing issue, and one that Skills for Care (and other stakeholders) continue to address. One respondent felt that the lack of clarity regarding whether completion was mandatory for local authorities certainly contributed to the problem.

The next most commonly cited drawback of the dataset was incomplete **coverage**, specifically the fact that the dataset did not cover the children's workforce in the same way it covers the adult workforce.

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[28] The actual completion rate for NMDS-SC is approximately 55-60% for CQC registered establishments, and 90% for local authorities.

Again, interviewees were aware that this is an ongoing issue and one for which the dataset providers alone were not responsible (as Skills for Care's own remit is for adult social care only.) One interviewee in a research role said the fact the dataset was England only (as Skills for Care's remit is England only) made international comparative research harder, as well as comparison with other national datasets such as the Labour Force Survey which tend to cover all of the UK.

Two respondents raised issues with **job role classifications**. One respondent said that the ability to differentiate roles undertaken by qualified as opposed to unqualified social work staff was needed, by local authorities in particular. The other respondent commented that review of the classifications was required to address the new types of roles being created by personalisation.

**Presentation and dissemination** issues were raised by a number of respondents. Three respondents felt that the data was not presented in a very user-friendly way, either in raw datasets or in the aggregated reports. Two respondents felt that more trend analysis being published by Skills for Care would be very useful for their purposes. One respondent felt that they struggled to access and manipulate the data at the level of detail they would ideally like. Four respondents felt that the worth and potential of the dataset could be better promoted – they felt this responsibility was shared by Skills for Care as the publishers of the dataset but also by them as users of the dataset.

Some quite specific **technical** issues were also raised:

- one respondent was unclear how to formally reference use of the raw dataset, and said they often referenced SOASC instead as this was easier
- one respondent said the lack of a single unique identifier for individual care establishments which was used across the range of datasets in health and social care services made comparing datasets and following market change (for example provider mergers) very problematic.

# Part C: Conclusions and recommendations

## 6. The overall impacts of NMDS-SC

Each of the strands of this research has identified significant impacts of NMDS-SC. The impacts are evident in the research and policy arenas which were the focus of the study, and we have also found evidence of impacts on social care service planning, management and inspection.

We found a correlation between the document searches and the qualitative data collected during the interviews and via the survey. We also confirmed that there are considerable areas of influence of the dataset which cannot be uncovered using solely documentary search approaches.

We can usefully summarise the patterns of impact by comparing our findings with the social policy research utilisation process framework developed by Landry and colleagues in Canada (see introduction Section 1.2.1). This staged process starts with 'dissemination' by the originator of the research, moves through 'cognition' of and 'reference' to the research by third parties, and culminates with 'influence' on policy and 'application' in the real world.

### 6.1 Evidence of dissemination of NMDS-SC

We found ample evidence of dissemination of the dataset and its associated products:

- increasing website traffic on the NMDS-SC page of the Skills for Care website 2009-11
- an increase of over 200% in downloads or SOASC 2010 compared to the same report in 2008 (though this is partly explained by an explicit shift to online dissemination)
- an increase in traffic to the research pages of the NMDS-SC site, in particular an eight per cent increase in new visitors to the research page compared to a five per cent decrease for the site overall in 2011.

Visitor traffic to the actual NMDS-SC website itself peaked in 2010. This suggests some level of saturation was reached with existing marketing approaches, and/or the actual limits of the potential users of NMDS-SC are being approached. This may suggest that while interest in or engagement with the data completion process *may* have plateau-ed, dissemination of the outputs from the NMDS-SC process is continuing to grow.

We also found evidence of dissemination of the dataset by third parties, including the *Social Care Workforce Periodical* from SCWRU, and internal dissemination of Reports and Briefings within a number of organisations including the Department of Health. We did not find as much evidence of dissemination of the dataset via Health and Social Care Information Centre as we might have anticipated, but the publication of the key Health and Social Care Information Centre report based on the dataset – *Personal Social Services Staff of Social Services Departments 2011* – occurred just after at the end of the bibliometric research period for this study (29 March).

Nevertheless, a number of respondents did comment that they felt the existence, the current value and the potential use of the dataset was not as well publicised as it could be, and there are some recommendations related to this in the following section.

## 6.2 Evidence of cognition of NMDS-SC

Evidence that the research findings have been read and understood by their recipients is amply provided by the document search results showing the extent of references to the dataset in a range of media – 175 mentions of the dataset ranged across academic, sectoral, government and mainstream media. The great majority of interviewees and survey respondents felt that the dataset had made a profound contribution to the general understanding of workforce issues, both within and beyond the sector, had challenged conventional wisdom and had contributed to the exchange and transfer of knowledge about the workforce between all parts of the sector.

Some respondents did comment that the presentation of the dataset and of reports was not as user-friendly as it might be, making it harder to extract key messages, and also that the messages in the dataset did not reach all parts of the sector equally. In particular respondents commented that the independent sector was less well represented in terms of establishments completing returns, which in turn made it less likely to find the outputs from the dataset relevant to them. There are some recommendations related to this in the following section.

## 6.3 Evidence of reference to NMDS-SC

We identified reference to the dataset in 175 separate published items, of which 15% were articles in journals intended for an academic audience, 50% were reports intended for policy-makers, funders, researchers and practitioners, and 35% were media communications (including items in the professional

and mainstream press), intended for social care practitioners or the general public. Overall we could see that references to the dataset were, unsurprisingly, concentrated in a relatively specialist group of researchers, policy-makers and other organisations with a stake in social care or wider social policy.

We saw that after a time lag due to the lengthy review and publication cycles in scholarly media, academic reference to the dataset now predominates, and according to our interviewees in academic research roles this is set to continue for the foreseeable future. We did see a falling off of mentions of the dataset by non government and non academic organisations in 2011 – this includes the sectoral bodies, think tanks, campaigning and membership organisations. The reasons for this are not entirely clear – it may be a lull caused by major social care legislation still being in the offing. Three of the five most widely cited academic publications that cited NMDS-SC concerned the issue of migrant workers, likely a reflection of political interest in an issue that transcends sectoral boundaries.

## 6.4 Evidence of influence of NMDS-SC

Given the complex and non-linear nature interaction of research and policy, it is not possible to demonstrate a straightforward causal link between the dataset and specific policy decisions. However, we did find evidence from many respondents of the influence of the dataset on both research and policy approaches, as well as on specific topics of enquiry.

Respondents in the research arena said that the advent of the dataset had made the social care workforce a 'legitimate' field of enquiry as it provided the robust and reliable data researchers required, which had hitherto been unavailable. The breadth and depth of the dataset enables researchers to compare different parts of the workforce across a range of demographics and characteristics, thus opening up whole new areas of research.

Respondents with knowledge of policy-making felt that the dataset had enabled them to identify issues, prioritise them, and develop policy which was more accurate and focused because it was evidence based. As some respondents pointed out, evidence alone does not dictate policy, but nonetheless policy-makers in this study were clear that their work benefited from the deeper understanding of the workforce that the dataset afforded. When asked what they would do if the dataset did not exist, one policy-maker commented 'we would have to invent it'.

The specific topics of enquiry where the dataset was seen to be most influential to date were common across research and policy responses, and were also reflected in the bibliometric results:

- NMDS-SC data on migrant workers contributed to influential research and was seen to have impacted on policy decisions beyond the social care arena.
- NMDS-SC data on rates of pay contributed to research which was picked up in mainstream media and also contributed to policy debate beyond the social care arena.
- NMDS-SC data on qualifications and skills enabled detailed understanding of differences between different parts of the sector and had contributed to qualifications strategies and frameworks (e.g. in dementia training and social work post-qualification training)

## 6.5 Evidence of application of NMDS-SC

Many direct and practical applications of the dataset were identified by respondents. Research applications included:

- Primary large dataset allowing secondary analysis of range of trends
- Linkage to other large datasets to examine correlations between workforce characteristics and service quality, inspection and so on
- Enabling international comparison work
- Primary data reference for statistically representative samples in empirical research.

Specific applications for policy-makers included:

- Access to bespoke and up to date data for media and communications work, civil servant and ministerial briefings
- Reliable source data for evidence based policy work
- Reliable source data for calculating Equality Impact Assessments, (e.g. on issues of gender, age of workforce etc)

A range of specific applications for service planning, management and inspection were also identified:

- Workforce modelling at national and local level
- Workforce strategy and planning at national and local level
- Qualifications and training strategy development
- Service planning and management  (including use of InLAWS and contributing to JSNA)
- Contributing to establishment profiles as part of inspection process.

While these planning and management applications were a mix of local and national level, a number of respondents in this study felt that the benefits to those responsible for providing the data i.e. care sector employers, were not sufficiently well articulated to offset the time needed to complete returns. While this is a tension common to many forms or research, particularly large national datasets, it was clear that respondents felt more work can always be done to improve the applications of the dataset for those whose data it represents. This issue will be explored and reported on further in the companion study to this one, which explicitly focuses on identifying and quantifying employer benefits.

# 7. Recommendations for enhancing impact

While these recommendations are primarily suggestions for actions by Skills for Care (a number of which we understand are under way or planned), some elements would also require actions from other stakeholders.

## 7.1 Data collection and scope

- Initiatives to improve completion rates from the types of employers currently covered by the dataset would enhance the impacts of the dataset for research and policy users; this applies particularly to the independent sector
- Efforts to get coverage of the children's workforce on a par with coverage of the adults workforce would also greatly improve its utility for research and policy purposes
- Clear articulation of the potential benefits to employers of completing an NMDS-SC return is needed; these benefits must be specific to the employer. One possibility would be to provide each employer with a bespoke Benchmarking Report, comparing their responses to regional and national metrics, as an automatic 'thank you' for completing a return. (This will be provided in autumn 2012 as part of the 'Dashboard' upgrade of the NMDS-SC.)
- Review and update of job role classifications in relation to social work roles and impacts of personalisation would improve utility for some users.[29]

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[29] At the time of writing Skills for Care were conducting a consultation on this topic.

**7.2 Data analysis, presentation and dissemination**

- If not already doing so, lodge a copy of each NMDS-SC output with the British Library Social Policy collection, and submit them for coverage in Welfare Reform on the Web.[30]

- If not already doing so, ensure all NMDS-SC outputs are indexed on Social Care Online.

- If not already available, set up a corporate account on Slideshare and upload each NMDS-SC report, briefing and other output

- Consider setting up accounts and special interest groups related to the dataset on ResearchGate, Mendeley and Academia.edu. While these research sharing sites and academic social networks do tend to have a bias towards hard sciences, there are communities of interest related to social sciences as well.[31]

- If this is not already in hand via Health and Social Care Information Centre, consider submitting NMDS-SC data to the Economic and Social Data service.[32]

- Provide clear guidance on how to reference NMDS-SC.

- For each NMDS-SC output – bespoke datasets as well as reports such as Briefings, Ad Hoc Reports, *State of the Adult Social Care Workforce* reports and so on – provide a reference which can be cut and pasted by authors wishing to cite their sources. Provide alternative versions which have individuals as authors, in addition to a version with Skills for Care as corporate author (as some academic databases do not accommodate corporate author citations)[33]

- Consider making the *State of the Adult Social Care Workforce* an annual publication, with publication tied to an annual workforce conference which is aimed at researchers and policy-makers (rather than employers).

- Consider making a clearer distinction on the NMDS-SC website between the areas that are concerned with the administration of data returns and the areas that are promoting reports and other outputs from the dataset; it may improve usability to keep all the reports and briefings (i.e. outputs) on the Skills for Care website and keep the NMDS-SC website solely for the collection of data (i.e. inputs).

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[30] http://www.bl.uk/welfarereform/index.html

[31] http://www.researchgate.net; http://www.mendeley.com/; http://academia.edu/

[32] http://www.esds.ac.uk/

[33] Useful guidance on the best formats for formal citations can be found at the Online Writing Lab (OWL) at Purdue University http://owl.english.purdue.edu/

- Consider developing a 'myth-busters' series – short items aimed at the professional and mainstream press that challenge conventional wisdom about the social care workforce; this could be in response to topical items on the news.

- Consider developing a 'trends' series, which compares data on key metrics from an employer perspective from each year since the dataset started – possibly pay rates, turnover and qualifications. A mix of headline interpretations as well as statistics will further enhance engagement with the dataset by stakeholders beyond the specialist researchers and policy-makers. As with the 'Myth-busters', the 'Trends' publications could be in response to topical items.

## Appendix 1: Bibliometrics and document search methodology

**A1.1 Bibliometric approach to searching academic literature**

Bibliometric analysis should be done according to standard measures of scientometrics/bibliometrics. The following units (as defined by Vinkler[34]) are used in this study.

- Impact factor (Thomson Reuters Web of Science) of journal

- Journal paper (scientometric unit of scientific information). The type of paper may be an article, letter, note, report, communication, short communication and review.  For the purposes of this study the type of paper has been distinguished by the intended primary audience:

    o Article  in academic journal – intended for other academic researchers

        ▪ Either journal with ISI impact factor (ISI) or without

    o Report – intended for funders, academic researchers, policymakers, and practitioners

        ▪ 'Government' and 'Other' (wide variety possible; Skills for Care's own publications items were identified separately, and itemised in the findings )

    o Communication (often web page items, professional press) – intended for social care practitioners

        ▪ Local authority items concerning NMDS-SC process, or article in the popular and professional press (including Community Care)

- Number of citations (citation as the measurement unit)

- Citations per paper/report.

Various database sources were searched to provide coverage of the possible audiences for documents using or mentioning NMDS-SC, as well as the contribution to the bibliometric analysis.  The date range searched for documents was 2006-present (2012). We considered using 2011 as a neater endpoint, but in fact this makes little sense as journal articles may appear online early, many months prior to the print publication. In addition, many journal articles formally published in 2012 may be available in web format in 2011. All searches were restricted to retrieval of English language items only (although it was not actually necessary to specify this in many of the databases searched).

Some experimentation in Web of Science searching revealed that it was more productive and reliable to use individual author name (Eborall) to identify publications citing the *State of the Adult Social Care*

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[34] Vinkler P. The evaluation of research by scientometric indicators. Oxford: Chandos Publishing, 2010

*Workforce* report in Web of Science, particularly given the variations in the way the report has been cited. The Social Care Workforce Research Unit (SCWRU) at King's College University of London is by some distance the heaviest academic user of NMDS-SC, and accordingly we ran initial citation searches on leading SCWRU researchers Hussein S., and Manthorpe J. (as cited authors) to help identify further relevant documents. Pilot work indicated that using Hussein as the cited author was sufficient.

| Database name | Scope of database | Search strategy | Results produced by database |
|---|---|---|---|
| ISI Web of Science (date of search 28 February – 4 March, updated 1 -4 April for citation maps) | General, academic research, selective coverage, mostly peer reviewed literature. | • Subject searching (NMDS-SC, "national minimum dataset", "social care workforce" (phrase searching), <br>• Social care AND workforce AND data (most useful search string) <br>• Citation searching - Citations for individual authors (Eborall C, Hussein S, Manthorpe J), corporate author (SCWRU, Skills*), <br>• Journal Citation Reports (for impact factors of journals) | • 20 items <br>• Identified self-citation pattern for SCWRU researchers <br>• Identified documents citing SCWRU (and Hussein) work on NMDS-SC (via Eborall C* and Skills*) <br>• Details of numbers of citations to documents, some citation maps (backward and forward citations) |
| Google Scholar (date of search 29 February – 9 March) | General, broad coverage of academic and report literature | • Phase 1 – NMDS-SC subject search <br>• Phase 2 – searching items in the set retrieved which had been cited further <br>• "Skills for Care" – mostly irrelevant, but State of the Social Care Workforce reports identified, and searched the items listed that had cited the 2008 or 2010 reports | • 58 items <br>• Details of citations to documents, authors (Eborall, Hussein) as well as subject searching and corporate author (Skills for Care, Social Care Workforce Research Unit) searches <br>• Hussein (10 items explored) <br>• 30 items explored |

| | | | |
|---|---|---|---|
| | | • Advanced Scholar search - Social care workforce data (all words), 2006-2012, social sciences only<br>• Social + "national minimum dataset" + (England OR UK) | • ca.27600 items<br>• 59 items (5 relevant items) |
| SCO – Social Care Online<br>(date of search 7- 8 March) | Social care | • NMDS-SC OR (national minimum dataset) OR ('social care workforce' AND data)<br>• author="skills for care" AND (topic="social care professionals" OR topic="care workers") | • 44 items<br>• General social care literature, Social Care Institute for Excellence reports<br>• 42 items, some relevant InLAWS material (some restricted material, so unable to assess relevance), omitted ephemeral material (less than 2 pages) |
| NHS Evidence<br>(date of search 9 March) | Health and social care | • NMDS-SC<br>• National minimum dataset social care<br>• Social care workforce dataset | • 84 items<br>• Provided access to some SCO material difficult to retrieve from SCO directly. Omitted ephemeral Skills for Care items.<br>• 0 items<br>• 157 items (screened three pages, no additional items found, duplicated NMDS-SC output largely) |
| LGSearch<br>(date of search 8 March) | Local authority websites, local authority | • NMDS-SC | • 5660 items<br>• Search mostly produced Local Authority guidance |

| | information | | | and promotion of NMDS-SC. Lots of duplication |
|---|---|---|---|---|
| | | | | • Searched the first 70 items only, took sample items highly relevant to assessing policy impact, including some InLAWs documents, as well as examples of use of NMDS-SC for local purposes |
| | | | | • Local authority examples of use of NMDS-SC, some best practice noted. |
| HeinLaw Online (date of search 9 March) | Legal/policy legislation | • NMDS-SC<br>• National minimum dataset<br>• Social care workforce data | • Nothing of relevance identified |
| EBSCO Business Source Complete (date of search 9 March) | Business and management | • NMDS-SC<br>• National minimum dataset<br>• Social care workforce data | • Only one additional item found |
| Nexis (date of search 16 March) | Newspapers, professional press | • NMDS-SC<br>• National minimum + social care (within same paragraph) | • 69 items (several duplicates within these)<br>• Coverage of print media and professional press (included Community Care). Mentions CC Social Work blog by Kirsty McGregor |
| Emerald Journals (date of search 9 March) | Business and management | • NMDS-SC<br>• National minimum dataset<br>• Social care workforce data | • No additional relevant items found |

*Table A1: Database search strategies for NMDS-SC*

The database searching started with the most productive databases first (Web of Science, Google Scholar). For the subject searching, the main strategy was to search for 'NMDS-SC' first, then to broaden out to 'National Minimum Dataset', and finally (and if necessary) to 'social care workforce data'. Some variations were necessary according to the way the database was structured (and the type of indexing used). For example, in Social Care Online, an advanced topic search was used and a search string could be constructed to do all the searching of subject terms at once. For NHS Evidence, a search engine with a Google type structure, the searching was done in stages. For ISI, phrase searching 'social care workforce' as a string was necessary to make the output manageable for scanning. Author name searching used 'Eborall', 'Hussein', 'Skills for Care' (where it was possible to use a corporate author as a main entry author term or limiter).

The bibliographic details (authors, title, source, date of publication, publisher/journal title) of relevant items retrieved were entered on to a Reference Manager database, and full text downloaded wherever possible. In order to determine the kind of mention or use made of the dataset in each document, the full text was scanned when available, and failing that a best guess was made from the abstract or snippet.

For the documents retrieved from Web of Science, notes were made of the number of citations to the document (if any), and whether the document retrieved cited NMDS-SC itself, or Eborall/*State of the Adult Social Care Workforce* report(s) or NMDS-SC *Briefings*. Similar data were recorded for Google Scholar, and where the number of citations differed to the figure from the Web of Science, the number of Google Scholar cites were recorded.

**Targeted searching for grey literature**

In addition to the structured searching of the academic literature, we undertook a set of targeted organisational website searches to cover non-academic sources. These covered the range of user types identified previously (see section 1.4):

| National government bodies | |
|---|---|
| | 1. House of Commons and House of Lords |
| | 2. Department of Health |
| | 3. Department for Education |
| | 4. Department for Work and Pensions |

| | |
|---|---|
| | 5. Migration Advisory Committee |
| | 6. Local Government Association |
| Knowledge intermediaries | |
| | 7. Social Care Institute for Excellence |
| | 8. Skills for Care and Development |
| | 9. Care Quality Commission |
| | 10. Joseph Rowntree |
| | 11. Research in Practice for adults |
| | 12. UK Commission on Employment and Skills |
| | 13. Health and Social Care Information Centre |
| | 14. Centre for Workforce Intelligence |
| | 15. Skills for Care (Knowledgebase) |
| Campaigning | |
| | 16. Age UK |
| | 17. Unison |
| Think tanks | |
| | 18. Kings Fund |
| | 19. Institute for Public Care |
| Trade/employer organisations | |
| | 20. Association of Directors of Adult Social Services |
| | 21. English Community Care Association |
| Trade and mainstream press | |
| | 22. Community Care |
| | 23. Guardian |
| | 24. The Times |

*Table A2: Targeted searching of organisational websites*


The approach to searching these websites had to be adapted to each site, given a large degree of variation in quality of information architecture, indexing, search functionality and archiving. In general, we started by using the following terms in the site-wide searches, followed by publication searches, where they existed. Date parameters of 2006-2012 were used where possible.

- 'NMDS-SC'
- 'National Minimum Data Set'
- 'Social care workforce data'
- 'Skills for Care'.

We then adopted a browse strategy based on our knowledge of the likely sources of documentation related to the adult social care workforce.

It should be noted that many of the documents uncovered in the manual searching of these organisational website were also discovered through other routes in the bibliometric research, notably via Google Scholar and Nexis. While this suggests a reassuring degree of data saturation, it should be borne in mind that despite this systematic and comprehensive approach, the results uncovered will not represent the totality of mentions of NMDS-SC in documents produced by these organisations. In addition it cannot of course identify documents where NMDS-SC data was influential but un-mentioned, as previously discussed.

Finally, we undertook a search of the following social media sources using the same search terms as for the grey literature:

- Technorati: real time search for user generated media (blogs and Wikis)
- Social Mention: social media search/analysis platform that aggregates user generated content
- Twitter search: real time search for Twitter micro-blogs; Tweet Deck
- Slideshare: supports sharing of presentations documents, PDFs, videos and webinars
- Cite u like: service for managing and discovering scholarly references
- Delicious: social bookmarking site.

All searches were conducted between 5 March and 3 April 2012.

## A2: Respondent profiles

Interviews conducted by telephone 22 March - 18 April. Surveys were completed 1-10 May.

| Organisation | role | interviewee | survey respondent |
|---|---|---|---|
| Association of Directors of Adult Social Services | policy/strategy | ✔ | |
| Care Quality Commision | policy/strategy | ✔ | |
| Centre for Workforce Intelligence | research | ✔ | ✔ |
| Department of Health | policy/strategy | ✔ | ✔ |
| Department of Health | policy/strategy | | ✔ |
| Department of Health | policy/strategy | ✔ | |
| English Community Care Association | policy/strategy | ✔ | |
| Health and Social Care Information Centre | research | ✔ | |
| independent | consultancy | | ✔ |
| independent | policy/strategy | | ✔ |
| independent | consultancy | | ✔ |
| independent | consultancy | | ✔ |
| independent | consultancy | | ✔ |
| independent | consultancy | | ✔ |
| independent | consultancy | | ✔ |
| independent | consultancy | | ✔ |
| Local Government Association | research | ✔ | ✔ |
| National Skills Academy for Social Care | policy/strategy | | ✔ |
| Personal Social Services Research Unit | research | ✔ | ✔ |
| Personal Social Services Research Unit | research | | ✔ |
| Research in Practice | research | | ✔ |
| Skills for Care | research | | ✔ |
| Skills for Care | policy/strategy | | ✔ |
| Skills for Care | policy/strategy | | ✔ |
| Skills for Care | research | | ✔ |
| Skills for Care | policy/strategy | | ✔ |
| Skills for Care | policy/strategy | | ✔ |
| Skills for Care | research | ✔ | ✔ |
| Social Care Association | policy/strategy | | ✔ |
| Social Care Workforce Research Unit | research | ✔ | ✔ |
| Social Care Workforce Research Unit | research | ✔ | ✔ |
| | | 12 | 26 |

## A3: Interview schedule

1. How would describe your organisational (as opposed to individual) utilisation of NMDS-SC as an overall service?
(Do you use any of the 'added value' NMDS-SC products such as *Briefings*, ad hoc reports?
Do you refer to the biannual 'State of the Social Care Workforce' report?
Do you ask for bespoke data sets? If so why? How do you decide what you need for this?)

2. What other databases or sources of intelligence does NMDS-SC duplicate, displace or complement?

3. Can you give some specific examples where NMDS-SC has been particularly influential in research terms or policy terms, or where it has enabled more effective decision-making?
 (For example by ensuring accuracy or reliability of workforce intelligence, aiding decision making in areas where data was previously lacking etc)

4. How would you describe the influence of NMDS-SC service on broader research/policy processes?
(Include Research Assessment Exercise/REF here if relevant)

5. Would you say that NMDS-SC has an influence on tacit knowledge in your organisation in addition to explicit knowledge?
(If so, how do you think this happens?)

6. Are there any potentially negative impacts of NMDS-SC on research/policy?

7.  What proportion of information which makes use of NMDS-SC would you say ends up publicly available, and what proportion either lives in internal working documents or in confidential documents produced for client use only?

8. What difference would it make to the overall approach to social care workforce research/policy if NMDS-SC service did *not* exist?
(Would the same research/policy work be done, but using different instruments/data? Would it take longer to do the same research/policy work? Would it not be possible to do the same research/policy work at all?)

9. Are there any aspects of NMDS-SC which could be changed or improved to help you in your research/policy work?

## A4: Online survey text

**National Minimum Dataset for Social Care: policy impacts**

_____

Hello, and thank you for your time in reviewing these questions.

This survey is part of a wider evaluation of the National Minimum Dataset for Social Care (NMDS-SC), commissioned by Skills for Care, to help them continue to improve the dataset and enhance its impacts. It is being sent to a small number of key researchers, policy-makers and knowledge intermediaries who are engaged with NMDS-SC outputs in a range of ways.

During the evaluation, we have been identifying the types of impact that research can have on policy.* Eight of them are described below. As a key stakeholder, we are interested in which of these impacts, if any, you feel can be ascribed to NMDS-SC.

If you are able to provide examples, or have any other comments, please feel free to add them; any detail you can offer will be very valuable to us.

Thank you

Sara Dunn

sara@saradunn-associates.net

*Adapted from Nutley at al. (2006) Using Evidence: How Research Can Inform Public Services, and HEFCE 2012, Panel Criteria and working methods, social work and social policy, and informed by NMDS-SC stakeholder interviews

Your name*

_____

Your organisation's name*

_____

Your job title or role*

_____

A: Potential direct impacts of NMDS-SC on policy

Itemised below are five types of direct impact that research can have on national or local policy. Please indicate in each case whether you think it can be ascribed to NMDS-SC.

1) NMDS-SC outputs have...

Alerted policy makers, or other researchers, to a particular issue in adult social care*

( ) Not to my knowledge

( ) On one occasion

( ) On several occasions

( ) I don't think this applies to NMDS-SC

( ) I don't feel able to comment on this

If you are able to describe specific example/s of how NMDS-SC has alerted policy-makers/researchers to a particular issue, that would be very helpful. Please provide as much detail as you are able.

2) NMDS-SC outputs have...

Identified priorities for policy action, or priorities for further research*

( ) Not to my knowledge
( ) On one occasion
( ) On several occasions
( ) I don't think this applies to NMDS-SC
( ) I don't feel able to comment on this

If you are able to describe specific example/s of how NMDS-SC identified priorities for policy or research action, that would be very helpful.

3) NMDS-SC outputs have…
Influenced policy decisions*
( ) Not to my knowledge
( ) On one occasion
( ) On several occasions
( ) I don't think this applies to NMDS-SC
( ) I don't feel able to comment on this

If you are able to describe specific example/s of how NMDS-SC influenced policy decisions, that would be very helpful.

4) NMDS-SC outputs have…
Influenced professional standards or guidelines in the sector*
( ) Not to my knowledge
( ) On one occasion
( ) On several occasions
( ) I don't think this applies to NMDS-SC
( ) I don't feel able to comment on this

If you are able to describe specific example/s of how NMDS-SC influenced professional standards or guidelines, that would be very helpful.

5) NMDS-SC outputs have…
Influenced the planning or management of services within the sector*
( ) Not to my knowledge
( ) On one occasion
( ) On several occasions
( ) I don't think this applies to NMDS-SC
( ) I don't feel able to comment on this

If you are able to describe specific example/s of how NMDS-SC influenced the planning or management of services, that would be very helpful.

B: Potential indirect impacts of research on policy
Itemised below are three types of indirect impact that research can have on national or local policy. Please indicate in each case whether you think it can be ascribed to NMDS-SC.

6) NMDS-SC outputs have…

Supported informal exchange of knowledge between researchers, policy-makers and others working in the sector*
( ) Not to my knowledge
( ) On one occasion
( ) On several occasions
( ) I don't think this applies to NMDS-SC
( ) I don't feel able to comment on this

If you are able to describe specific example/s of NMDS-SC supporting informal knowledge exchange, that would be very helpful.

7) NMDS-SC outputs have...
Challenged conventional wisdom within the sector*
( ) Not to my knowledge
( ) On one occasion
( ) On several occasions
( ) I don't think this applies to NMDS-SC
( ) I don't feel able to comment on this

If you are able to describe specific example/s of how NMDS-SC challenged conventional wisdom, that would be very helpful.

8) NMDS-SC outputs have...
Enhanced general knowledge and understanding about the workforce, within and beyond the sector*
( ) Not to my knowledge
( ) On one occasion
( ) On several occasions
( ) I don't think this applies to NMDS-SC
( ) I don't feel able to comment on this

If you are able to describe specific example/s of how NMDS-SC has enhanced general knowledge and understanding, that would be very helpful.

Would you like to add any further comments about the impact of the NMDS-SC on policy?

Are you happy for us to quote any comments in our final report for Skills for Care?*
( ) Yes, and you can attribute them to me by name
( ) Yes, but please make them anonymous
( ) No, please don't quote them

Can we contact you by email if we have any queries?*
( ) Yes
( ) No
Your email address
_____
Thank You!
Thank you very much for providing us with your insights; they are much appreciated.

## A5: Supplementary data on dissemination from Skills for Care

**Specialist care workforce media**

Skills for Care have supplied data concerning mentions of Skills for Care in specialist third party media over the last 12 months. By and large, as the table below indicates, these concern the process of completing returns by employers, or other technical aspects of the dataset.

| Publication Medium | Title/content | Date |
|---|---|---|
| National Care Forum: Online news section | 'NMDS[-SC] updated to include QCF' | Feb 2011 |
| NHS NW: workforce information network portal | 'Improvements to NMDS-SC' | Jul 2011 |
| Department for Education website: general article | 'Reporting on workforce data returns' | Aug 2011 |
| NHS National End of Life Care programme website: news item | 'New e-learning available for NMDS[-SC] users' | Aug 2010 (?) |
| National Care Forum: Members update | 'My Workforce Development NMDS-SC requirements report' | Dec 2011 |
| Social Enterprise Kent: Diary item | 'SfC Workforce development fund forum' | Jan 2012 |
| Brooks and Kirk Healthcare management | 'Funding still available…' | Feb 2012 |
| NHS NW: workforce information network portal | 'NMDS-SC dashboard pilot' | Feb 2012 |
| Active independence | 'AI get Skills for Care funding' | Feb 2012 |

*Specialist media coverage of NMDS-SC reported by Skills for Care*

**Download figures for NMDS-SC Briefings**

Figures from Skills for Care for April 2012 show over 500 downloads of titles from the NMDS-SC *Briefings* series, and 117 downloads of the National Key Statistics report (comparisons with previous months/years unavailable.)

## A6: Documentary search: aggregated results: all identified items using NMDS-SC 2006 to present

Key:

- Organisation type: TRA = care trade; TT=think thank; CAM=campaigning; SfC=Skills for Care; KI=knowledge intermediary; PRE=press; GOV= government; ACA=academic
- Document type: comm=communication; rep=report; art=academic article

| no | Documents making use of NMDS-SC (alphabetical by author) | Level of use | Org type | date | Doc type |
|---|---|---|---|---|---|
| 1 | ADASS (2010). Building a social work workforce fit for the future - what we must change now (Chief Executives CWDC, SfC. GSCC). National Children's and Adult Services Conference 2010 Fringe Session 7. | 3 | TRA | 2010 | comm |
| 2 | All party parliamentary group on social care (2007). *Oral evidence session 27 November 2007*. London. | 3 | GOV | 2007 | comm |
| 3 | Anon (2007). News in brief. *Community Care*. | 2 | PRE | 2007 | comm |
| 4 | Atkinson, C., Godden, J., & Lucas, R. (2008). *Employment practices and performance: rewards and incentives and their relationship to recruitment, retention and quality of service in adult social care in England: part 1 literature review and statistical analysis*. Leeds: Skills for Care. | 5 | KI (SfC) | 2008 | rep |
| 5 | Baginsky, M., Moriarty, J., Manthorpe, J., Stevens, M., MacInnes, T., & Nagendran, T. (2010). *Social workers' workload survey: messages from the frontline*. London: Department for Children, Schools and Families. | 4 | GOV | 2010 | rep |
| 6 | BBC (2011). All work and no pay. BBC Panorama documentary including interview with S Hussein. | 3 | PRE | 2011 | comm |
| 7 | Bedford Borough Council (2012). Skills for Care. | 3 | GOV | 2012 | comm |
| 8 | Beesley, L. (2006). *The social care workforce in England: the current position and the challenges of supply (Background paper to Securing good care for older people)*. London: King's Fund. | 4 | TT | 2006 | rep |
| 9 | Bernard, C. (2011). *Diversity and progression among social work students in England*. London: Goldsmiths College. | 4 | ACA | 2011 | rep |
| 10 | Bernard, J. & Statham, D. (2010). *Dartington review on the future of the adult social care: the future adult social care workforce*. Dartington: RIPFA. | 4 | KI | 2010 | rep |
| 11 | Bradley, L. (2011). *Home care in London*. London: IPPR (Institute for Public Policy Research). | 4 | TT | 2011 | rep |
| 12 | Bridport News (2008). Care roadshow on its way. *Bridport and Lyme Regis News*. | 2 | PRE | 2008 | comm |
| 13 | Brindle, D. (2007). Proof in the figures: recruitment and retention crisis confirmed. *Guardian*. | 5 | PRE | 2007 | comm |
| 14 | Brindle, D. (2009). Andy Burnham calls for better pay for careworkers. *Guardian*. | 2 | PRE | 2009 | comm |
| 15 | Brindle, D. (2010). Is social care about to be swallowed up by health? (Joe Public blog). *Guardian*. | 5 | PRE | 2010 | comm |

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| 16 | Campbell, F. & Heron, C. (2010). *Scrutinising the transformation of adult social care: practice guide.* London: Centre for Public Scrutiny. | 4 | CAM | 2010 | rep |
| 17 | Cangiano, A., Shutes, I., Spencer, S., & Leeson, G. (2009). *Migrant care workers in ageing societies: research findings in the United Kingdom.* Oxford: University of Oxford, COMPAS. | 5 | ACA | 2009 | rep |
| 18 | Cangiano, A. & Shutes, I. (2012). Ageing, demand for care and the role of migrant care workers in the UK. *Journal of Population Ageing, 3,* 39-57. | 4 | ACA | 2012 | art |
| 19 | Carey, M. (2011). Here today, gone tomorrow? The ambivalent ethics of contingency social work. *Critical Social Policy, 31,* 540-561. | 4 | ACA | 2011 | art |
| 20 | Carr, S. (2009). *The implementation of individual budget schemes in adult social care.* London: SCIE, Social Care Institute for Excellence. | 4 | KI | 2009 | rep |
| 21 | Centre for Workforce Intelligence (2012). Workforce risks and opportunities: adult social care. *Local Government Association Employment Digest.* | 4 | KI | 2012 | rep |
| 22 | Children's Workforce Development Council (2010). *State of the children and young people's workforce data review 2009/2010.* L: CWDC. | 5 | KI | 2010 | rep |
| 23 | Clews, M.-A. (2010). Social care staff shortages set to worsen with immigration cap. *Community Care.* | 5 | PRE | 2010 | comm |
| 24 | Clews, M.-L. (2010). A government crackdown on immigration is forcing overseas care workers out of the country. *Community Care.* | 2 | PRE | 2010 | comm |
| 25 | Cole, A. (2007). In search of the invisible workers. *The Guardian.* | 3 | PRE | 2007 | comm |
| 26 | Colombo, F., Llena-Nozal, A., Mercier, J., & Tjadens, F. (2011). How to prepare for the future longterm care workforce. In Help wanted? Providing and paying for longterm care. (pp. 189-212). Paris: OECD Health Policy Studies http://www.oecd.org/dataoecd/52/10/47884930.pdf | 5 | GOV | 2011 | rep |
| 27 | Commission for Social Care Inspection (2009). *The state of social care in England 2007-08.* London: CSCI. | 4 | KI | 2009 | rep |
| 28 | Curtis, L., Moriarty, J., & Netten, A. (2010). The expected working life of a social worker. *British Journal of Social Work, 40,* 1628-1643. | 4 | ACA | 2010 | art |
| 29 | Curtis, L. (2010). *Unit costs of health & social care 2009.* Canterbury: PSSRU (originally published 2009, revised version 2010) | 5 | ACA | 2010 | rep |
| 30 | Curtis, L. (2010). *Unit costs of health & social care 2010.* Canterbury: University of Kent, PSSRU. | 5 | ACA | 2010 | rep |
| 31 | Curtis, L. (2011). *Unit costs of health & social care 2011.* Canterbury: University of Kent, PSSRU | 5 | ACA | 2011 | rep |
| 32 | Department for Education (2011). Announcement confirming the data source for children's workforce data for 2011/12. | 3 | GOV | 2011 | comm |
| 33 | Department for Education (2011). Reporting on workforce data (NMDS-SC) returns. | 3 | GOV | 2011 | comm |
| 34 | Department for Education (2011). Workforce data standards FAQs. | 3 | GOV | 2011 | comm |

| 35 | Department of Health (2008). *Department of Health: departmental report 2008*. London: Department of Health. | 4 | GOV | 2008 | rep |
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| 36 | Department of Health (2009). *Working to put people first* . London: Department of Health. | 4 | GOV | 2009 | rep |
| 37 | Department of Health (2010). *Valuing people now: summary report March 2009-September 2010: including findings from Learning Disability Partnership Board self assessments 2009-2010*. London: Department of Health. | 4 | GOV | 2010 | rep |
| 38 | Department of Health (2011). *Working for personalised care: Framework for PAs 2011*. London: Department of Health. | 5 | GOV | 2011 | rep |
| 39 | Department of Health (2011). *Vision for adult social care*. London: Department of Health. | 4 | GOV | 2011 | rep |
| 40 | Department of Health (2011). *Fundamental review of data returns*. | 3 | GOV | 2011 | comm |
| 41 | Derbyshire County Council (2012). National Minimum Dataset - Social Care. | 3 | GOV | 2012 | comm |
| 42 | Dixon, A., Firth, J., & Buchan, J. (2009). *Proposals for a centre of excellence for workforce strategy and planning*. London: King's Fund. | 3 | TT | 2009 | rep |
| 43 | Dunning, J. (2011). Monitoring overload. *Community Care*. | 3 | PRE | 2011 | comm |
| 44 | Eborall, C. (2011). *The contribution of worker qualifications to achieving high inspection scores in care homes: a preliminary exploration of the data*. Leeds: Skills for Care. | 5 | KI (SfC) | 2011 | rep |
| 45 | Fenton, W. (2011). *The size and structure of the adult social care sector and workforce in England, 2011*. Leeds: Skills for Care. | 5 | KI (SfC) | 2011 | rep |
| 46 | Gardam, J. & ADASS (2010). *ADASS response to: National Minimum Dataset for Social Care Request for Change Consultation*. London: ADASS | 3 | TRA | 2010 | rep |
| 47 | Gardam, J. & ADASS (2011). *Response to low pay commission consultation*. | 2 | TRA | 2011 | rep |
| 48 | Garwood, S. (2010). *A better life for older people with high support needs in housing with care*. York: JRF | 5 | KI | 2010 | rep |
| 49 | Gates, B. (2010). When a workforce strategy won't work: critique on current policy direction in England, UK. *Journal of Intellectual Disabilities, 14,* 251-258. | 5 | ACA | 2010 | art |
| 50 | General Social Care Council (2008). *Diversity and progression in social work education in England*. | 4 | KI | 2008 | rep |
| 51 | Gloucestershire County Council (2012). NMDS-SC. | 3 | GOV | 2012 | comm |
| 52 | Gospel, H. & Lewis, P. A. (2011). Who cares about skills? The impact and limits of statutory regulation on qualifications and skills in social care. *British Journal of Industrial Relations, 49,* 601-622. | 5 | ACA | 2011 | art |
| 53 | Great Britain (2010). *Public expenditure: second report of session 2010-11: volume 2: additional written evidence*. London: Stationery Office. | 4 | GOV | 2010 | rep |
| 54 | Griffiths, J. (2007). Social care database 'will improve HR skills'. *People Management, 13,* 15. | 3 | ACA | 2007 | art |
| 55 | Grimshaw, D., Rubery, J., & Marchington, M. (2010). Managing people across hospital networks in the UK: multiple employers and the shaping of HRM. *Human Resource Management Journal, 20,* 407-423. | 4 | ACA | 2010 | art |

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| 56 | Hertforshire County Council (2010). *Integrated Local Area Workforce Strategy (InLAWS) for Adult Care Services.* | 5 | GOV | 2010 | comm |
| 57 | Hickman, B. (2007). Linking by Translation:the key to comparable codesets. In ?? (Unidentified slideset) | 5 | GOV | 2007 | comm |
| 58 | Himmelweit, S. & Land, H. (2008). *Reducing gender inequalities to produce a sustainable care system.* York: Joseph Rowntree Foundation. | 5 | KI | 2008 | rep |
| 59 | Humphries, R. (2010). *Dartington review on the future of adult social care.* Dartington: RIPFA. | 4 | KI | 2010 | rep |
| 60 | Hussein, S., Stevens, M., Manthorpe, J., Rapaport, J., Martineau, S., & Harris, J. (2009). Banned from working in social care: a secondary analysis of staff characteristics and reasons for their referrals to the POVA list in England and Wales. *Health and Social Care in the Community, 17,* 423-433. | 4 | ACA | 2009 | art |
| 61 | Hussein, S. & Manthorpe, J. (2010). The adult day care workforce in England at a time of policy change: implications for learning disability support services. *Journal of Intellectual Disabilities, 14,* 95-110. | 5 | ACA | 2010 | art |
| 62 | Hussein, S. & Manthorpe, J. (2010). Attracting young adults (18-25 years) to work in social care in England: how secondary data analysis may assist policy makers and providers. *Diversity in Health and Care, 7,* 229-238. | 5 | ACA | 2010 | art |
| 63 | Hussein, S. (2010). Pay in adult social care in England. *Social Care Workforce Periodical.* | 5 | ACA | 2010 | rep |
| 64 | Hussein, S. (2010). Reported reasons for job shifting in the English care sector. *Social Care Workforce Periodical.* | 5 | ACA | 2010 | rep |
| 65 | Hussein, S., Manthorpe, J., & Stevens, M. (2011). Exploring the potential of refugees and asylum seekers for social care work in England: a qualitative study. *Health and Social Care in the Community, 19,* 468-475. | 4 | ACA | 2011 | art |
| 66 | Hussein, S., Manthorpe, J., & Stevens, M. (2011). Social care as first work experience in England: a secondary analysis of the profile of a national sample of migrant workers. *Health and Social Care in the Community, 19,* 89-97. | 5 | ACA | 2011 | art |
| 67 | Hussein, S. (2011). The contribution of migrants to the English care sector. *Social Care Workforce Periodical.* | 5 | ACA | 2011 | rep |
| 68 | Hussein, S. & Manthorpe, J. (2012). The dementia social care workforce in England: secondary analysis of a national workforce dataset. *Aging Ment.Health, 16,* 110-118. | 5 | ACA | 2012 | art |
| 69 | Hussein, S. & Manthorpe, J. (2012). 'Third-age' workers caring for adults and older people in England: findings from secondary analysis of the National Minimum Data Set for Social Care. *Diversity in Health and Care, 8,* 103-112. | 5 | ACA | 2012 | art |
| 70 | Hussein, S. (2009). Social care workforce profile: age, gender and ethnicity. *Social Care Workforce Periodical.* | 5 | ACA | 2009 | rep |
| 71 | Hussein, S. (2009). The size, roles and stability of the social care workforce in England. *Social Care Workforce Periodical.* | 5 | ACA | 2009 | rep |
| 72 | Hussein, S. (2010). Modelling pay in adult care using linear mixed effects models. *Social Care Workforce Periodical.* | 5 | ACA | 2010 | rep |

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| 73 | Hussein, S., Stevens, M., & Manthorpe, J. (2010). *International social care workers in England: profile, motivations, experiences and future expectations.* London: Kings College Social Care Workforce Research Unit. | 4 | ACA | 2010 | rep |
| 74 | Hussein, S. (2010). Who cares for the family-carers of adults and older people? *Social Care Workforce Periodical.* | 5 | ACA | 2010 | rep |
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| 76 | Hussein, S. (2010). The role of young workers (18-25) in the English care sector. *Social Care Workforce Periodical.* | 5 | ACA | 2010 | rep |
| 77 | Hussein, S. (2011). *The use of 'large scale datasets' in UK social care research.* NIHR School for Social Care Research, LSE. | 5 | ACA | 2011 | rep |
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| 81 | Hussein, S. (2011). Men in the English care sector. *Social Care Workforce Periodical.* | 5 | ACA | 2011 | rep |
| 82 | Hussein, S. (2011). Volunteers in the formal long-term care workforce. *Social Care Workforce Periodical.* | 5 | ACA | 2011 | rep |
| 83 | Hussein, S. (2011). Migrant workers in long term care: evidence from Engalnd on trends, pay and profile. *Social Care Workforce Periodical.* | 5 | ACA | 2011 | rep |
| 84 | Hussein, S. & Manthorpe, J. (2011). *Longitudinal changes in care worker turnover and vacancy rates and reasons for job leaving in England (2008-2010).* London: Kings College London Social Care Workforce Research Unit. | 5 | ACA | 2011 | rep |
| 85 | Hussein, Shereen (2011). Government immigration policies may well restrict quality and quantity of social care professionals (LSE blog post). British Policy and Politics at LSE. | 3 | ACA | 2011 | comm |
| 86 | Hussein, Shereen (2012). The scale of very low-pay for care workers is much larger than previously anticipated and demands immediate attention. British Policy and Politics at LSE. | 3 | ACA | 2012 | comm |
| 87 | Hussein, Shereen (2012). 'Big Society' volunteering in long term care must not substitute for skilled paid staff. British Policy and Politics at LSE. | 3 | ACA | 2012 | comm |
| 88 | Imison, C., Buchan, J., & Xavier, S. (2009). *NHS workforce planning: limitations and possibilities.* London: King's Fund. | 4 | TT | 2009 | rep |
| 89 | Jacobs, N. (2008). Skills for Care predicts huge hike in workforce. *Community Care.* | 2 | PRE | 2008 | comm |
| 90 | Jacobs, N. (2008). Adult social care workforce needs to grow by more than a million. *Community Care.* | 5 | PRE | 2008 | comm |
| 91 | Kelly, Gavin (2011). The scandal of low paid care workers. New Statesman. | 3 | PRE | 2011 | comm |

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| 92 | King's Fund (2009). *Proposals for a Centre of Excellence for workforce strategy and planning*. London: King's Fund. | 4 | TT | 2009 | rep |
| 93 | Land, H. & Himmelweit, S. (2010). *Who cares? Who pays? A report on personalisation in social care prepared for Unison*. | 4 | CAM | 2010 | rep |
| 94 | Lombard, D. (2010). News. *Community Care*. | 2 | PRE | 2010 | comm |
| 95 | Lombard, D. (2010). Adult social care workforce set to double in 15 years. *Community Care*. | 5 | PRE | 2010 | comm |
| 96 | Lombard, D. (2010). Care workers paid less than supermarket cashiers (Workforce blog). *Community Care*. | 5 | PRE | 2010 | comm |
| 97 | Lombard, D. (2011). News. *Community Care, March 17*. | 2 | PRE | 2011 | comm |
| 98 | Lombard, D. & McGregor, K. (2011). The changing face of social care. *Community Care*. | 4 | PRE | 2011 | comm |
| 99 | Lombard, D. (2011). Job satisfaction more important than pay. *Community Care*. | 5 | PRE | 2011 | comm |
| 100 | Lombard, D. (2011). Outsourcing: the different employment models. *Community Care*. | 5 | PRE | 2011 | comm |
| 101 | Lucas, R., Atkinson, C., & Godden, J. (2009). *Reward and incentives research: nursing homes, residential homes and domiciliary care establishments: phase 2: case studies*. Manchester: MMU Business School. | 5 | ACA | 2009 | rep |
| 102 | Lucas, R., Atkinson, C., & Godden, J. (2009). *Direct payment support service organisations*. Leeds: Skills for Care. | 4 | KI (SfC) | 2009 | rep |
| 103 | Luff, R., Ferreira, Z., & Meyer, J. (2011). *Care homes*. London: LSE, School for Social Care Research/NIHR. | 4 | ACA | 2011 | rep |
| 104 | Luton Borough Council (2012). Central Bedfordshire and Luton Training Partnership. | 3 | GOV | 2012 | comm |
| 105 | Manchester City Council (2012). National Minimum Data Set for Social Care Providers. | 2 | GOV | 2012 | comm |
| 106 | Manthorpe, J., Martineau, S., Moriarty, J., Hussein, S., & Stevens, M. (2010). Support workers in social care in England: a scoping study. *Health and Social Care in the Community, 18,* 316-324. | 4 | ACA | 2010 | art |
| 107 | Manthorpe, J., Hussein, S., Charles, N., Rapaport, P., Stevens, M., & Nagendran, T. (2010). Social care stakeholders' perceptions of the recruitment of international practitioners in the United Kingdom-a qualitative study. *European Journal of Social Work, 13,* 393-408. | 4 | ACA | 2010 | art |
| 108 | Manthorpe, J., Moriarty, J., & Cornes, M. (2011). Keeping it in the family? People with learning disabilities and families employing their own care and support workers: findings from a scoping review of the literature. *Journal of Intellectual Disabilities, 15,* 195-207. | 4 | ACA | 2011 | art |
| 109 | Manthorpe, J., Stevens, M., Rapaport, J., Challis, D., Jacobs, S., Netten, A. et al. (2011). Individual budgets and adult safeguarding: Parallel or converging tracks? Further findings from the evaluation of the Individual Budget pilots. *Journal of Social Work, 11,* 422-438. | 4 | ACA | 2011 | art |

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| 110 | Manthorpe, J. & Moriarty, J. (2011). Housing or care workers? Who is supporting older people with high support needs? *Journal of Integrated Care, 19,* 16-25. | 4 | ACA | 2011 | art |
| 111 | McCririck, V. & Department of Health South West (2010). *Guidance note on workforce planning for care providers.* London: CfWI. | 4 | KI | 2010 | comm |
| 112 | McGregor, K. (2010). Gender pay gap revealed in adult social care. *Community Care.* | 5 | PRE | 2010 | comm |
| 113 | McQuaid, R., Raeside, R., Canduela, J., Egdell, V., Lindsay, C., & Berry, C. (2012). *Engaging low skilled employees in workplace learning. Technical report.* London: UKCES (produced by Napier University for UKCES). | 4 | GOV | 2012 | rep |
| 114 | McQuaid, R., Raeside, R., Canduela, J., Egdell, V., Lindsay, C., & Berry, C. (2012). *Engaging low skilled employees in workplace learning. Evidence Report.* London: UKCES (produced by Napier University for UKCES). | 4 | GOV | 2012 | rep |
| 115 | Mellor, D., McDonnell, F., & Children's Workforce Development Council (2010). *A picture worth millions: state of the young people's workforce.* Leeds: CWDC, | 4 | KI | 2010 | rep |
| 116 | Mickel, A. (2011). Soaring fuel costs (Working Lives). *Community Care.* | 2 | PRE | 2011 | comm |
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**A7: Google Scholar citations for Curtis et al. 'The expected working like of a social worker'**

> The 13 items below are those that Google Scholar (retrieved 11 June 2012) identifies as citing the article Curtis, L., Moriarty, J., & Netten, A. (2010) 'The expected working life of a social worker'*British Journal of Social Work* 40, 1628-1643.

"1. Do the characteristics of seconded or sponsored social work students in England differ from those of other social work students?—A quantitative analysis using …S Hussein, J Manthorpe… - Social Work Education, 2011 - Taylor & Francis
Amongst initiatives by social work employers in the United Kingdom (UK) to resolve recruitment difficulties is the use of secondment and sponsorship to attract entrants to the profession; commonly known as Grow Your Own schemes.

2. Change and continuity: a quantitative investigation of trends and characteristics of international social workers in EnglandS Hussein, M Stevens, J Manthorpe… - British Journal of Social …, 2011 - BASW
The UK has long experienced a shortage of social workers and has recruited internationally to meet demand. There have been few specific data quantifying the scale of social work mobility to the UK through which such experiences can be set in context.

3. Exploring stress resilience in trainee social workers: The role of emotional and social competencies G Kinman… - British Journal of Social Work, 2011 –British Association of Social Workers (BASW)
The high levels of stress and burnout endemic to social work have been found to contribute to the current retention problems in the UK. It has been argued that resilience is a  protective factor that enhances the ability to manage stress, and promotes well-being in ...

4. Enhancing Wellbeing in Social Work Students: Building Resilience in the Next Generation L Grant… - 2011 - Taylor & Francis
The need for social workers to be resilient is widely emphasised. Although enhancing resilience in social work trainees presents a challenge to educators, they are nonetheless responsible for developing professionals who are able to cope with the ...

5. Professional Supervision: A Workforce Retention Strategy for Social Work? P Chiller… - Australian Social Work, 2012 - Taylor & Francis
Retaining social workers in the workforce is a significant challenge and a considerable amount of research has focused on identifying and examining the reasons why social workers choose to leave the profession.

6. International social workers in England: Factors influencing supply and demand J Moriarty, S Hussein, J Manthorpe… - International Social …, 2012 - isw.sagepub.com
Recent years have seen considerable increases in the number of internationally-qualified social workers in England. This article presents trends in the international labour mobility of social workers migrating to work in England alongside information on the ...

7. Costs, Quality and Outcomes from pssru.ac.uk A Netten, T Bäumker, L Curtis, K Jones, J Malley… - The PSSRU, 2003 - pssru.ac.uk

Costs and outcomes are key aspects of social and health care provision. If we are to make the best use of our resources in the 'production of welfare' we need to know how much services cost and how effective they are in delivering the desired outcomes.

8. What Can Be Done to Promote the Retention of Social Workers? A Systematic Review of Interventions CM Webb… - British Journal of Social Work, 2011 - BASW
There are long-standing concerns in many developed countries about high workforce turnover within social work and the associated negative impact on service users and agencies.

9. Autism spectrum disorders, family life and short breaks: an investigation into the experience of family life and short breaks of families that have children with autism … [PDF] from bham.ac.uk DR Preece - 2010 - etheses.bham.ac.uk
Research was undertaken in an English shire county, investigating the experience of families that have children with autism spectrum disorders (ASD) regarding daily life and their attitudes and experience concerning short breaks ('respite care').

10. Research use in practice[PDF] from lse.ac.uk M Fisher - 2011 - lse.ac.uk
Frameworks (2) Mode 2…▪ applied from the start▪[mode 2] knowledge is intended to be useful to someone, whether in industry, or government, or to society more generally, and this imperative is present from the beginning (p. 4)▪ includes a range of stakeholders▪ ...

11. Twenty-first century social work: the influence of political context on public service provision in social work education and service delivery P Welbourne - European Journal of Social Work, 2011 - Taylor & Francis
This article explores the thesis that there is a discernible 'direction for social work' in Britain, and considers the ways in which its development is influenced by state policies influenced by New Managerialist, 'market' based and neoliberal ideologies.

12. The Costs of Qualifying a Social Worker L Curtis, J Moriarty… - British Journal of Social Work, 2011 - BASW
Cost containment is a priority in most social care systems and there is an increasing importance in using staff in the most effective way within available resources. Previous work has revealed that the social worker does not remain in the profession for as long as health ...

13. The complexities of caring for child protection workers: the contexts of practice and supervision C Goddard… - Journal of Social Work Practice, 2011 - Taylor & Francis
This paper focuses on the challenges and complexities of caring for front-line child protection workers. It is organised in four main sections. After a brief explanation of the background, the paper reviews the silencing of children as a form of defensive denial."

## A8: List of acronyms

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|---|---|
| ADASS | Association of Directors of Adult Social Services |
| BASW | British Association of Social Workers |
| BIS | Department for Business, Innovation and Skills |
| BJSW | British Journal of Social Work |
| CfWI | Centre for Workforce Intelligence |
| CQC | Care Quality Commission |
| CSCI | Commission for Social Care Inspection (no longer extant) |
| CWDC | Children's Workforce Development Council (no longer extant) |
| DfE | Department for Education |
| DH | Department of Health |
| ECCA | English Community Care Association |
| HEFCE | Higher Education Funding Council for England |
| InLAWS | Integrated local area workforce strategy |
| IPPR | Institute for Public Policy Research |
| JSNA | Joint Strategic Needs Assessment |
| LGA | Local Government Association |
| MAC | Migration Advisory Committee |
| NCA | National Care Association |
| NCF | National Care Forum |
| NICE | National Institute for Health and Clinical Excellence |
| NIHR | National Institute for Health Research |
| NMDS-SC | National Minimum Dataset for Social Care |
| NSASC | National Skills Academy for Social Care |
| PSSRU | Personal Social Services Research Unit |
| REF | Research Excellence Framework |
| RiP | Research in Practice |
| RiPfa | Research in Practice for Adults |
| SCIE | Social Care Institute for Excellence |
| SCWRU | Social Care Workforce Research Unit |
| UKBA | UK Border Agency |
| WoS | Web of Science |