LTC workforce: New Approaches for Inclusive Partnerships and Coproduction

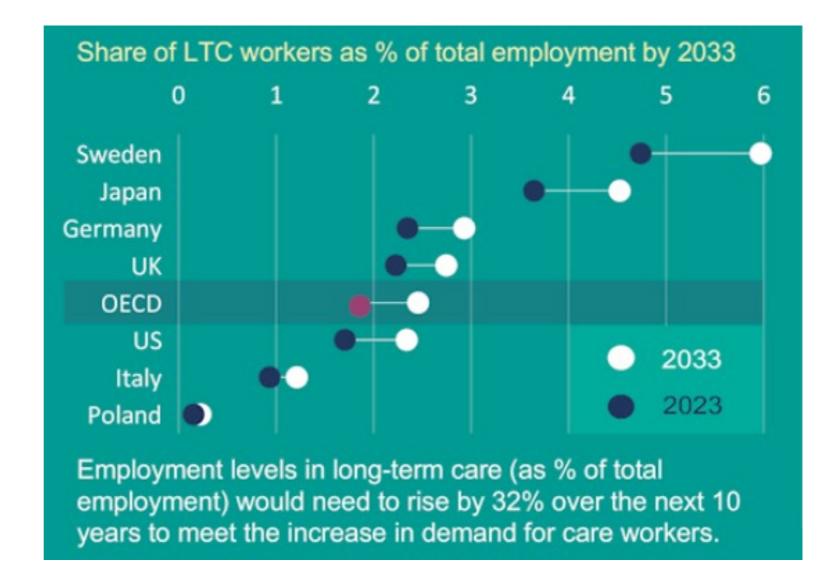
European Social Services Conference June 27^{th,} 2024, Antwerpen Tine Rostgaard, Professor



Need for LTC workers

With ageing societies, demand for formally employed long-term care workers expected to increase by 32% over the next decade

Source: OECD (2023) Beyond Applause? Improving Working Conditions in Long-Term Care

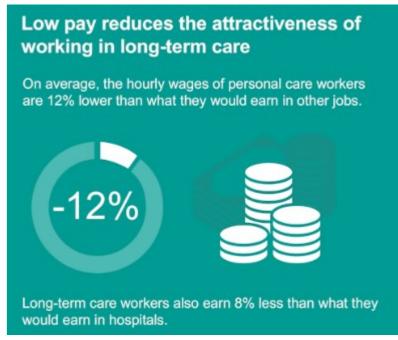


Low attractiveness of LTC jobs

- Job is meaningful, but....
- Relatively low salaries
- Poor working conditions
- Lack of social recognition of care and of the skills required
- Low professional autonomy; NPM



- Recruitment tensions: Personal care work among the least desired occupations among younger people
- Problems of retention, e.g. 43% of Danish LTC workforce consider quitting. And more so in the time of 'the great resignation': Surge in quits from poor-quality and low-paid jobs.





Source: OECD (2023)

What's in a word?

- Co-creation a top-down process to design, develop and improve services in dialogue with users (and perhaps professionals); focus on innovation in outputs (e.g. Prahalad and Venkat Ramaswamy, 2004)
- Co-production a bottom-up process continously involving users and professionals in the implementation phase of the production of services; focus on collaboration and shared value-understanding; empowerment and democratisation (e.g. Ostrom 1996; Pestoff, 2008)

Co-production & inclusive partnership – how to do it?

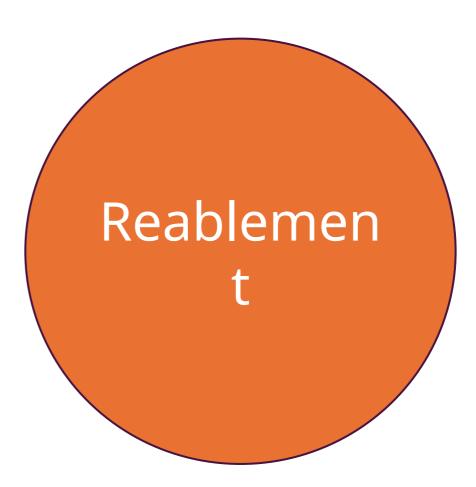
Whole system approach in the management of change

- Culture the beliefs and values that define an organisation and the way that it works
- Structure the way the organisation is arranged and the systems it has set up to conduct its work
- Practice how the organisation and the people who work for it conduct their work
- Review monitoring how the work is conducted and the outcomes or impacts that result from the work.

Source: The Social Care Institute for Excellence (SCIE)

The LTC workforce: Two approaches for inclusive partnerships and co-production

Selfmanaged home care teams



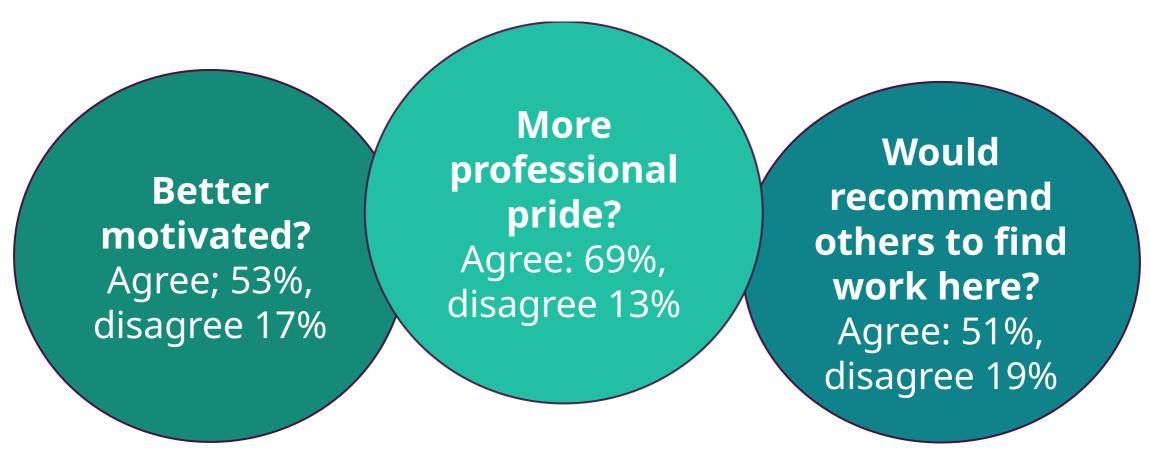
1. Self-managed home care teams

Case study Denmark

- Buurtzorg-inspired, small, multi-disciplinary autonomous teams who plan their own work scedule.
- User oriented, e.g. 'First coffee' in the local authority of Haderslev.
- Evaluation of 25 local authorities shows improved job satisfaction among home care staff and better relation to users as well as colleagues. Nurses, OT, PT and assessors less positive.
- Users are generally satisfied but cannot say that the team approach does the trick!

Source: Sandberg et al (2024) Faste, tværfaglige og selvstyrende teams i ældreplejen – erfaringer fra 25 kommuner, VIVE rapport.

Leading to better motivation, pride and perhaps recruitment



Source: Sandberg et al (2024) Faste, tværfaglige og selvstyrende teams i ældreplejen – erfaringer fra 25 kommuner, VIVE rapport.

2. Reablement

Case study Denmark

- An alternative to conventional home care, enabling and developmental perspective
- Training in every day activities, often supplemented with physical training, assistive devices, and adaption of home, with the aim of maintaining or even gaining function
- Short-term and intensive intervention (4-10 weeks) at home.
- Focus: personal care, physical mobility, cleaning, cooking. But also examples of more holistic approach regarding considering needs for social activities.
- Cross-disciplinary and team-based approach: Social care assistants work closely together with PTs, OTs and nurses.
- Intervention co-produced with user. Goal- and user-oriented, 'what is important to you?'

From 'passive' to 'active' care: 'Doing for/to' 'Doing with'







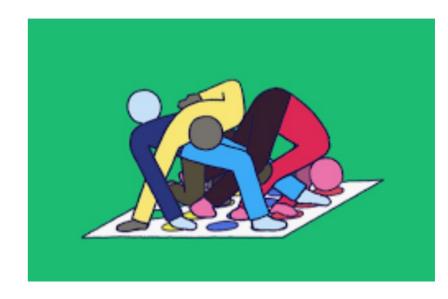
From mono- to inter-disciplinary interventions and collaboration

'Doing along'









Care worker D: 'I think this is a great way to work'.

Care worker E: 'This is the right way to do it'.

Interviewer: 'For you and the citizens both?'

Care worker D: 'For both parties. You know, it damn well adds to your self-esteem when you follow a client throughout the intervention, you can let them go, and they can manage on their own [...] It gives so much to both parties. After all, they're also really happy to be able to take care of themselves again after the intervention'.

Source: Rostgaard and Graff, 2023

Developmental orientation, and cross-disciplinary and team-based approach leading to higher levels of staff satisfaction and reduced desire to quit job

Yes, I provide person-centred care! 41% of those providing reablement vs. 19% among those providing conventional home care

Yes, my job is interesting and meaningfull!
87% of staff providing reablement vs. 57% of those providing conventional home care

No, I have no intentions quitting my job! 38% of those providing reablement, vs. 62% among those providing conventional home care

Source: Rostgaard and Graff, 2023

Conclusion

- Co-production allows involvement and use of professional logics
- Enabling and developmental perspective ensures motivation
- Cross-disciplinary and team-based approach facilitates learning and sharing
- = more job satisfaction, and hopes of better retention and recruitment
- Consider: culture, structure, practice and review

For more info on reablement



57 members from 13 countries; academics conducting research into

reablement

← → C (reable.auckland.ac.nz

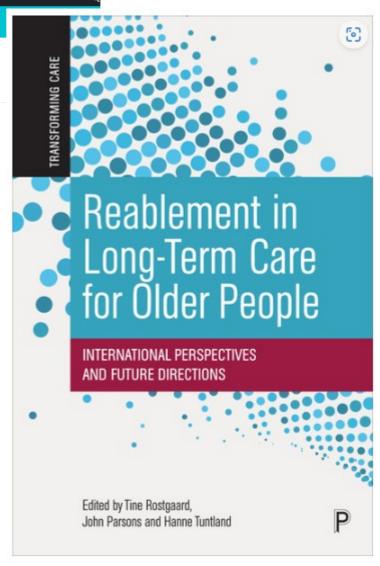


Reablement Restorative home support, a new approach.

Reablement or restorative home support is a new approach to delivering home support for older people. It is a model of care focused on, where possible and appropriate, restoring an individual's capability after an illness or other health setback and therefore restoring their quality of life.

Numerous countries, including Australia, Canada, Denmark, Ireland, Netherlands, New Zealand, Norway, Sweden, UK and US have been developing the approach for several years with some countries taking a very different interpretation. In 2018, a European research project was established to develop greater understanding on the area and brought together the above-mentioned countries to develop an international network of collaboration and development. The group representing academics and clinicians have met on seminars in Sweden, Norway and Denmark. Currently we meet on a regular basis on webinars.

In January 2023, the ReAble research network consists of 55 members from twelve countries (Australia, Belgium, Canada, Denmark, Finland, Ireland, Netherlands, New Zealand, Norway, Sweden, UK and US). Hanne Tuntland (Norway) is the coordinator of the network, with Magnus Zingmark (Sweden)



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Thank you!