How members of the public are involved in the WCEC

Dr Natalie Joseph-Williams
Senior Lecturer in Improving Patient Care
Cardiff University School of Medicine / WCEC Core Team

on behalf of the WCEC Public Partnership Group
The Welsh Public – the real ‘why?’

We can only ‘learn to live’ with COVID-19 by learning from those who have lived through it.

“How do we deal with living with covid and rebuilding people's lives… and how can we try and prevent something like this happening again?”

Debs Smith
WCEC Public Partnership Group Member
Involving the public in WCEC work

Identifying & Prioritising Questions
Are we asking the right research questions?
Which evidence is most important?

Supporting Evidence Reviews
What do these findings mean to patients & the public?
What difference could this evidence make?

Knowledge Mobilisation & Impact
Is our evidence understandable & accessible?
Sharing the evidence to make a difference
Identifying what matters to the Welsh public

Public Stakeholder Research Priorities Consultation

- Health and Care Research Wales Public Forum (May 2021)
- SUPER Group (Summer - Autumn 2021) PRIME Centre Wales PPI Group

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## Identifying what matters to the Welsh public

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WCEC Public Partnership Group

Work together with the WCEC core team, evidence review collaborating partners, and other stakeholders to support all our processes from start to finish.
Role of the WCEC Public Partnership Group

**Prioritise**

- Prioritise research questions
  - Questions submitted via stakeholder consultation
  - Help WCEC to rank research questions identified by our stakeholders & prioritise research topics
  - Approx. 2-6 hours over 6 months

**Answer**

- Evidence Review & Report process
  - Support review process (each report takes 1-2 months) – refine the questions, discuss early findings, write report, recommendations
  - Attend meetings with Collaborating Partner and other stakeholders
  - Approx. 2-3 one-hour meetings per report

**Share**

- Lay Summary, Evidence Briefing Panels, Dissemination
  - Work with Core Team to prepare 300-word public facing lay summary of our report findings
  - Approx. 1-2 lay summaries per-month
What innovations help to attract, recruit and retain social care workers within the UK context?

Report number – RR_00026

(December 2021)

Lay Summary

The social care sector has suffered staff shortages and been under pressure for several years now. The COVID pandemic and restrictions on overseas recruitment have made the situation worse recently. This research aims to explore new ways to attract, recruit and retain social care workers in the UK and to understand what factors affect turnover. Articles from 2001 – 2021 involving social workers and the social care workforce were studied. Key ideas for recruiting and retaining staff were:

Social Workers
- Opportunities for work placements prior to employment
- Recruiting graduates on fast-track programmes
- Apprenticeships

Social Care Workers
- Appointing care workers as champions had a positive effect both on the champions themselves and in attracting and keeping new staff
- Pre-employment training to help build skills and confidence
- National recruitment campaigns
- Recruiting staff on the basis of values and behaviours rather than just on their qualifications and experience

Poor terms and conditions, low pay, unsociable working hours, and inexperience of both employees and managers all made it difficult to keep social care staff in post. High stressful workloads made it difficult to keep social workers.

Pay and bonuses, good working conditions and having achievements recognised, all encouraged staff to stay.

Although there have been many new ideas tried in this area, the evidence about which ones have been successful is often poor. The results also come largely from a time before BREXIT and COVID which may affect their relevance to the current situation.

We need to plan how new ideas will be evaluated right from the start so that we confidently choose successes. Further research is needed so that this can be done.

Several of the ideas identified above show promise and will be investigated further by Social Care Wales who are currently drawing up a new social work framework for Wales.

Campaigns to promote care work are needed to address negative views and the low status of this work.
60% Of people who died with COVID-19 between Jan – Nov 2020 were disabled

Greater reduction in access to healthcare compared to rest of population

Greater proportion ICU admissions from most deprived quintile & COVID-19 mortality rate twice as high in most deprived communities.

COVID-19 mortality rate in people younger than 64 from deprived communities 3.7 times higher than least deprived areas.

4 x People from ethnic minority communities at higher risk of COVID-19 mortality during first wave – black African people 3.7 times more likely to die than white men

Prevalence of psychological distress among those aged 18-24 increased from 23% (2017) to 44% (April 2020)

Employment levels fell for those aged 18-24 by 9% compared with 0.4% for those aged 25-64

Sources: CMO Wales Report 2021, The Health Foundation 2021, PHE 2021
“Why public involvement in the WCEC is essential”
Thank you

Diolch yn Fawr

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@NJosephWilliams