



Social work with older people

About this briefing

This briefing draws on the findings of the [Social Work with Older People \(SWOP\) research project](#). The project, which was led by researchers at the University of Birmingham and University of Bristol, shone light on social work practice with older people by shadowing social workers and looking at how their work makes a difference in older people's lives.

SWOP is the first research study to take a close and detailed look at what social workers supporting older people do and how they do it. The research team adopted an ethnographic approach to capture the reality of social work with older people in diverse settings and situations: as well as shadowing the social workers, researchers interviewed the social workers, older people, carers and other professionals. They also analysed case records.

This approach gave a multi-layered perspective on three questions:

- > What professional capabilities do social workers use in their practice with older people?
- > What difference and impact do social workers have on older people's wellbeing?
- > How does the context of practice impact on social workers' ability to make a positive difference?

With the health and social care sector facing significant and continuing pressures, it is important that social workers are deployed when their specific expertise is required. This means it's important to understand what social workers **do, how** they work with older people and the **impact** this work has. This briefing sets out the specialist skills and knowledge practitioners bring to their work, the impact they have on the people they work with, and the factors that enable effective practice.

The briefing is primarily aimed at:

- > newly qualified social workers
- > student social workers
- > supervisors and managers of social workers who work with older people
- > professionals from across the health and social care sector who work alongside social workers on integrated teams
- > educators working with students.

It will also be useful to anyone, including commissioners and policymakers, who wants to know more about what social work with older people involves, how social workers contribute to older people's wellbeing, and what challenges they face on the ground.

Experienced social workers who have worked with older people for some time may be familiar with much of the content, but we hope this briefing will also be useful as a reference and as a means for reflecting on experiences in practice.

Throughout the briefing, findings from the SWOP project are presented in shaded boxes. These findings are supplemented by related findings from the broader research literature.

The briefing also includes:

 reflective questions and signposts  additional resources and further reading.

The briefing comprises the following sections:

- > **The research**
 - Why and how was the research undertaken
 - The sites and the people involved
- > **Context: Social care and the needs of older people**
- > **What do social workers do when working with older people?**
- > **How do social workers make a difference in the lives of older people, their carers and their families?**
 - What older people say about social work
 - ‘Therapeutic’ conversations and good relationships
 - Supporting carers
 - Supporting older people’s personal and intimate relationships
- > **Multi-disciplinary teams: What other professionals value about working with social workers**
- > **Managing the emotional impact of supporting older people**
- > **Implications for practice and systems**
 - Systems-level challenges
 - Supporting practice with older people
- > **Conclusion**
- > **References**

The research

Why and how was the research undertaken?

Most of us will need some form of support as we grow older, and social workers play a crucial role in helping older people to access essential support. However, social work practice with older people often goes invisible and unrecognised.

The SWOP research project sought to capture the details of what social workers do in their practice with older people and how older people experience the support on offer. The aim is to use the evidence to build understanding of the role, help to improve services and encourage social workers into this important field of practice.

The research was carried out by researchers based in the University of Birmingham and University of Bristol and funded by the National Institute for Health and Care Research. It focused on two local authorities: one site was in an urban area in the West Midlands, and the other was a rural local authority in the South West of England. The project began in October 2021 and was completed in November 2023. SWOP was in a unique position to observe how social workers respond to mounting pressure as the fieldwork took place over the winter of 2022–23, a period of acute pressure for health and social care services.

The sites and the people involved

Through a series of snapshots, the researchers aimed to get a 360-degree view of what social workers do and to explore the difference that their work makes to the lives and wellbeing of older people.

- > In the urban site, five social workers took part ranging from newly qualified to very experienced, with a mix of gender and ethnic backgrounds.
- > In the rural site, five social workers took part. All were white British. This sample included more experienced workers than the sample from the urban site.
- > Seventeen older people, carers and families were involved, and their situations were observed and discussed in depth. Of this sample, 15 people were white British and two people were from minority ethnic communities.
- > The research team interviewed 24 additional practitioners and professionals from across the NHS, adult social care and local community organisations.

The team worked with a local authority advisory group recruited in each site and an expert advisory group of social work practitioners, older people and carers. The researchers also had the support of a national stakeholder group made up of key policy and practice leads who will assist in taking forward the findings within and beyond their organisations.

Most of the social workers in the research project engaged in hybrid working, going into offices once or twice per week but mostly working from home or across other settings, such as in a hospital or rehabilitation centre.



Resources and further reading

- > For more information about SWOP, including the main findings ([Tanner et al., 2023](#)), visit the [SWOP website](#).
- > The SWOP project has developed a [range of resources](#) to support people to understand and act on its research findings.

Context: Social care and the needs of older people

In the UK, a number of broad and intersecting challenges shape the need for and the context of social care services for older people.

Increasing complexity: People's health and care needs in later life are becoming increasingly complex as more older people live with multiple long-term conditions ([Raymond et al., 2021](#)). The evidence also points to a stark and worsening 'wealth gap' in terms of health and wellbeing, with health inequalities increasing as people live longer and many poorer older people living with a range of conditions (ELSA, 2020, p. 31). Moreover, when people come to social services for support, they are presenting with increasingly severe and urgent needs ([ADASS, 2022](#)). Social workers are typically working with older people who have complex and intersecting support needs.

Longer waits: Older people are waiting longer for social care assessment and support. The [ADASS spring survey of 2023](#) found that after the challenges of coronavirus (COVID-19), care waiting lists had reduced from a high of 542,000 in April 2022 to 430,000 at the end of March 2023, but this figure is still historically high. When people have to wait longer for support, their needs can escalate during the period of delay.

Delayed discharges: Older people are being delayed in their discharge from hospital with a significant proportion waiting for a bed in a care home, a short-term bed or a home care package ([Schlepper et al., 2023](#)). Analysis by the Nuffield Trust and the Health Foundation¹ found that the most common reason (24%) for delayed discharge was waiting for in-home support to be arranged by NHS or social care providers ([Nuffield Trust, 2023](#)). For longer-term stays, which typically require further support following discharge, arranging short-term beds (21%) or permanent beds in care homes (26%) are the most common factors in delayed discharge. In January 2024, the Department for Health and Social Care released updated [guidance on hospital discharge](#), which aims to clarify the responsibilities of partner agencies across a range of discharge pathways.

Carers under pressure: Carers report increasing pressures are adversely affecting their quality of life. More than one in three (36%) carers in the UK say that not knowing what services are available is a barrier to accessing support ([Carers UK, 2022](#)). Only one in four (25%) carers in England said they had undertaken a carer's assessment; and of those who had, many were concerned that the assessment had not led to any improvements in the support provided to them. When carers are under stress and unable to meet a person's care needs, this leads to increased need for support from statutory services.

Workforce shortfalls: As people live longer, the number of those in need of support from social care continues to grow. But as a specialist discipline, social work with older people is struggling to attract sufficient numbers of qualified social workers. Ageism remains an issue in the general public, from other professionals and within social services. One social worker interviewed by the SWOP project reflected on how she thinks social work with older people is perceived:

¹ Quality Watch is a joint research programme of the Nuffield Trust and the Health Foundation that monitors how the quality of health and social care is changing over time.
www.nuffieldtrust.org.uk/qualitywatch/about-qualitywatch

‘So I don’t think we are quite as glamorous [as other services]. I don’t think perhaps the complexity of what we do is recognized. Because all of the complexity of human relationships and all of those things don’t stop just because you get older.’

For every request for help, adult social care is currently able to draw on almost five times fewer social workers than child and family social care (Department for Education, 2022; Skills for Care, 2022).



Resources and further reading

- > See the [SWOP policy briefing](#) (Nosowska et al., 2023) published by British Association of Social Workers
- > The evidence review [A brighter social care future](#) (Bracher et al., 2023), co-produced by Research in Practice and Social Care Future, starts from the principle that adult social care has been under-imagined. It considers the role of social care in realising wellbeing as imagined by those with lived experiences, including older people.

What do social workers do when working with older people?

As well as interviewing social workers, other practitioners and older people, the researchers observed the detail of everyday practice directly and looked at older people's social care records. Social work practice took place in older people's homes, in care homes, in rehabilitation centres and in hospitals where social workers monitored admissions and supported discharges.

The breadth of work undertaken by social workers was extensive. Most social workers are involved in carrying out assessments, care planning, interventions and review under the *Care Act 2014*. Mental capacity assessments, deprivation of liberty, safeguarding, hospital discharge and NHS continuing care were all day-to-day features of practice. Social workers also advise and mentor social work colleagues and staff in other agencies.

The project found that social workers contribute to the wellbeing of older people across all areas covered by the definition of wellbeing in [section 1 of the Care Act 2014](#) (s.1):

- > personal dignity (including treatment of the individual with respect)
- > physical and mental health and emotional wellbeing
- > protection from abuse and neglect
- > control over day-to-day life, including care and support plans
- > participation in work, education, training or recreation
- > social and economic wellbeing
- > domestic, family and personal relationships
- > suitability of living accommodation
- > the individual's contribution to society.²

However, the support offered to older people went a lot further than meeting statutory obligations. The research found that social workers offered support that spoke to older people's care and support needs on multiple levels:

- > At a **practical level**, social workers had knowledge of local care services and infrastructure, how to access benefits and entitlements, and how to navigate financial arrangements to pay for support services.
- > At a **biopsychosocial level**, social workers supported older people through times of transition between care arrangements. They helped older people face challenges associated with grief and loss of identity or connections that characterised older age. They considered health-related factors that may be impacting on a person's wellbeing such as changes in medication, meals and diet, communication impairments, and mobility issues.

² For a full discussion of social workers' contribution to all the domains of older people's wellbeing, see the SWOP main findings report (Tanner et al., 2023, pp. 5–7).

- > At a **legal level**, social workers demonstrated (sometimes varying) degrees of legal literacy in social care law. This included how to use the *Care Act 2014* to uphold the voices and wellbeing of service users and how to apply the *Mental Capacity Act 2005* and related codes of practice when older people experience changes in mental capacity or their capacity to make decisions about them is questioned by others.
- > At a **societal level**, social workers were attuned to and ready to counter the impact of ageism. Ageist ideas can compromise the rights of older people, limit resources to older people's support and cloud people's judgment about the capacities, strengths and skills of older people.

The project emphasised that it's the unique combination of social workers' skills and knowledge that older people appreciate. Social workers brought specific knowledge about the challenges and strengths associated with later life to their work with older people.



Resources and further reading

- > The practice tool *Promoting good social work with older people and their families* (Milne, 2024) uses insights from the SWOP project to explore the skills, values and knowledge that contribute to good outcomes for older people.



Reflective question

How does your work with older people reflect the different levels of support identified by the SWOP project findings in terms of:

- Practical support?
- Biopsychological support?
- Legal literacy?
- Addressing ageism or any other societal barriers?

How do social workers make a difference in the lives of older people, their carers and their families?

Social work practice with older people brings both psychosocial and material benefits – for example, psychosocial benefits through the process of building and sustaining supportive relationships, and more tangible benefits by brokering changes in older people’s care arrangements and circumstances.

Older people, carers and families also appreciate social workers’ ability to get things done or prevent things from happening that were against their wishes. In particular, social workers’ professional capabilities are important in creating a therapeutic, ethical and rights-based experience for older people, and the SWOP research demonstrated a clear link between social workers’ capabilities and older people’s wellbeing (see Tanner et al., 2023, pp. 5–7).

What older people say about social work

Older people, carers and families placed high value on social workers’ knowledge of care, health and legal systems, which can otherwise seem inaccessible or difficult to navigate. They found the information shared to inform their decision-making helpful.

In particular, older people valued being offered options they hadn’t previously considered. They also valued being kept informed through regular contact and having conversations with a ‘critical friend’ who maintains a focus on their interests. These are examples of what the SWOP researchers call ‘therapeutic conversations’ (Tanner et al., 2023, p. 8).

Older people and their families appreciated:

- > Being empowered to take part in decision-making about care and support plans.
- > Receiving practical support to ‘get things done’.
- > The social worker’s reassurance and emotional support .
- > The social worker taking a lead on getting entitlements.
- > The social worker’s readiness to take positive risks (whereas health services were perceived as risk-averse).

‘Therapeutic’ conversations and strong relationships

The SWOP findings also emphasise that older people and their families value working **with** social workers. In other words, ‘how things are done (the process of relating to and supporting an older person) matters as much as what is done (the decisions and actions made, and outcomes achieved)’ (Tanner et al., 2023, p. 11).

Evidence from elsewhere in the literature supports the idea that older people value the social work **process** as much, if not more, than the ‘outcomes’ of a social work intervention (Moriarty & Manthorpe, 2016). Specifically, older people value:

- > An emphasis on self-determination.
- > A perspective that recognises their individual abilities and strengths, as well as their needs for care and support.
- > Advocacy for their right to retain their chosen lifestyle.
- > A relational approach.
- > An assessment experience that ‘minimises trauma, maximises competence and assures the well-being of the person being assessed’ (O’Connor, 2010, p. 25).

Good relationships are at the heart of practice that works. SWOP findings point to the relationship between social worker and older person as pivotal in building trust and working together. Social workers, older people and their carers and families all emphasised the importance of the relationship – and, crucially, having continuity of relationship with the same social worker. When relationships are disrupted, social workers’ capacity to contribute to older people’s wellbeing is compromised.

The Institute for Research and Innovation in Social Services (Iriss) has set out research findings on what people accessing services want their relationships with professionals to look like (Ingram & Smith, 2018). The research they cite emphasises the importance of friendship (McLeod, 2010), reciprocity (Beresford et al., 2008), equality (Halvorsen, 2009) and negotiation (Kleipoedszus, 2011). The authors conclude: ‘In all of this, everyday acts of care and recognition are more important than formal standards and procedural requirements’ (Ingram & Smith, 2018).



Resources and further reading

- > Across professional standards and guidance for social work, strong and trusting relationships between social workers and the person accessing care and support are emphasised as a foundation for good practice. The **BASW Professional Capabilities Framework** and the **DHSC Knowledge and Skills Statement** both contain direction as to what this looks like in practice with adults and their families and carers.

Supporting carers

Social workers will be aware that the *Care Act 2014* gives carers the same rights to support as the person they care for. The SWOP project highlighted how many carers of older people are also older people themselves, often being the spouse or partner of the person accessing services, and may require support themselves.

Working with carers to advocate for the needs and wishes of them and the person they care for requires careful listening. Research in Practice's practice tool *Responding to the voice of older carers – building on what works* (Elliott, 2019) includes top tips for supporting older carers (see box).

Ten top tips for supporting older carers

1. Tune in to the carer's world before you ring or visit, be ready and prepared to really listen and empathise.
2. Think about your greeting – is a casual “Hi, how are you today?” sufficient?
3. Expect interruptions, be flexible. Remember the carer is likely to be multi-tasking and may be very stressed.
4. Keep simplicity of process – don't give too much information at once.
5. Don't leave a list of services expecting the carer to be able to navigate the system.
6. Make sure the carer is aware of local peer support groups and has access to reliable substitute care to attend.
7. Check their GP and surgery staff are aware that the older person is a carer and that any reasonable adjustments have been made for them both to access health services.
8. Check appropriate information-sharing processes are in place.
9. Ensure the carer knows who to contact in an emergency.
10. Ask for feedback – has the conversation with you been helpful?

(Elliott, 2019, p. 8)



Resources and further reading

- > The Research in Practice resource hub on [social work with carers](#) has links to an extensive range of open-access resources to support social work with carers.

Supporting older people's personal and intimate relationships

Helping to maintain personal relationships that are important to an older person is another key aspect of the social work role. SWOP found that social workers recognised the importance of friendships and family relationships to older people's wellbeing and were able to promote and support those relationships. Social workers also demonstrated a proficiency in interpersonal skills when negotiating difficult family dynamics or conflicts, and were able to do so in an inclusive way that protected the autonomy of the older person (Tanner et al., 2023, p. 6).

Research into older people's relationships emphasises that there is a range of key relationships to consider:

*The quality of people's personal relationships is key to promoting social inclusion and a sense of community, and older people have consistently identified the importance of social relationships and social contact with their **partners, family members and friends** as crucial to their overall quality of life, including **intimacy and sexuality**.*

(Hafford-Letchfield, 2023, p. 3)

Research in Practice's Evidence Review on ageing and intimacy found that older adults' sexuality can be marginalised or stigmatised by attitudes and practices in society, especially when ageing intersects with other aspects of identity like ethnicity, gender and sexuality (Hafford-Letchfield, 2021). Despite societal progress in some areas of sexual freedom and relationships, there are little to no services tailored towards the sexual wellbeing of older people. This is one major area where ageist attitudes can have a negative impact on people's quality of life and can be internalised by older people themselves.

Older people who are transgender or non-binary may require support to access specialist health and social care services or advocacy from social workers (Willis et al., 2022). Social care professionals and social workers in particular can play a part in encouraging expression of love, romance, sexuality and gender identity in older people's lives, bearing in mind that:

Self-expression should be the consequence of informed individual choice and consent, and not be constrained by care arrangements or restricted by the attitude and behaviours of others.

(Hafford-Letchfield, 2023, p. 5)



Resources and further reading

- > **Supporting intimacy and relationships in later life: Practice Tool** (Hafford-Letchfield, 2023) encourages practitioners to think about supporting older people's expression of intimacy and sexuality.
- > **Working with older trans people: Practice Tool** (Willis et al., 2022) published by Research in Practice includes reflective and practical to build practitioners' confidence in supporting older trans people.



Reflective question

Considering your own practice, or that of your team, identify practice that has demonstrated some of the above outcomes or benefits. What supported that practice? How can you share your learning with others?

Multi-disciplinary teams: What other professionals value when working with social workers

Social work with older people requires the application of specialist skills and different sources of knowledge, including an understanding of ageing and the life course and awareness of the impact of ageism. Social workers who work with older people have a blend of expertise that is different from other staff in health and social care. In particular, their commitment to advocating for and upholding older people's rights and dignity means they offer something of unique value to older people and their families.

Non-social workers who took part in the SWOP research said that they particularly valued social workers' ethical perspective, knowledge, skills and professionalism (Tanner et al., 2023, p. 5), including their expertise about the law and social care system, their 'practical know-how' and ability to connect with older people (Nosowska et al., 2023b, p. 9). Like older people and their families, non-social work professionals also spoke of the importance of continuity of relationships.

Other professionals said they appreciated how social workers:

- > **... show empathy and compassion.** *'He's very compassionate with people and takes his time with people and listens to them, whilst also giving them information and giving them time.'*
- > **... provide support to other colleagues.** *'It's helpful to have the advice of someone who is qualified in what they're doing. He's quite into learning and always coming out with these theories or this that you learn at university, so that's quite handy, it's beneficial, as well.'*
- > **... are professional, knowledgeable, skilled in communication and advocate for families and uphold rights** *'[she has a] professional approach to ensuring the rights and inclusion of older people... She's very upfront as to what we're trying to do ... she always sort of, advocates, even if it might put her [at] odds.'*
- > **... can be a 'fixer' and source of support.** A family carer said, *'She's very good. She's sorted everything out and sorted all the finance and everything for us ... We feel lucky. You know, we've had a really good outcome.'*



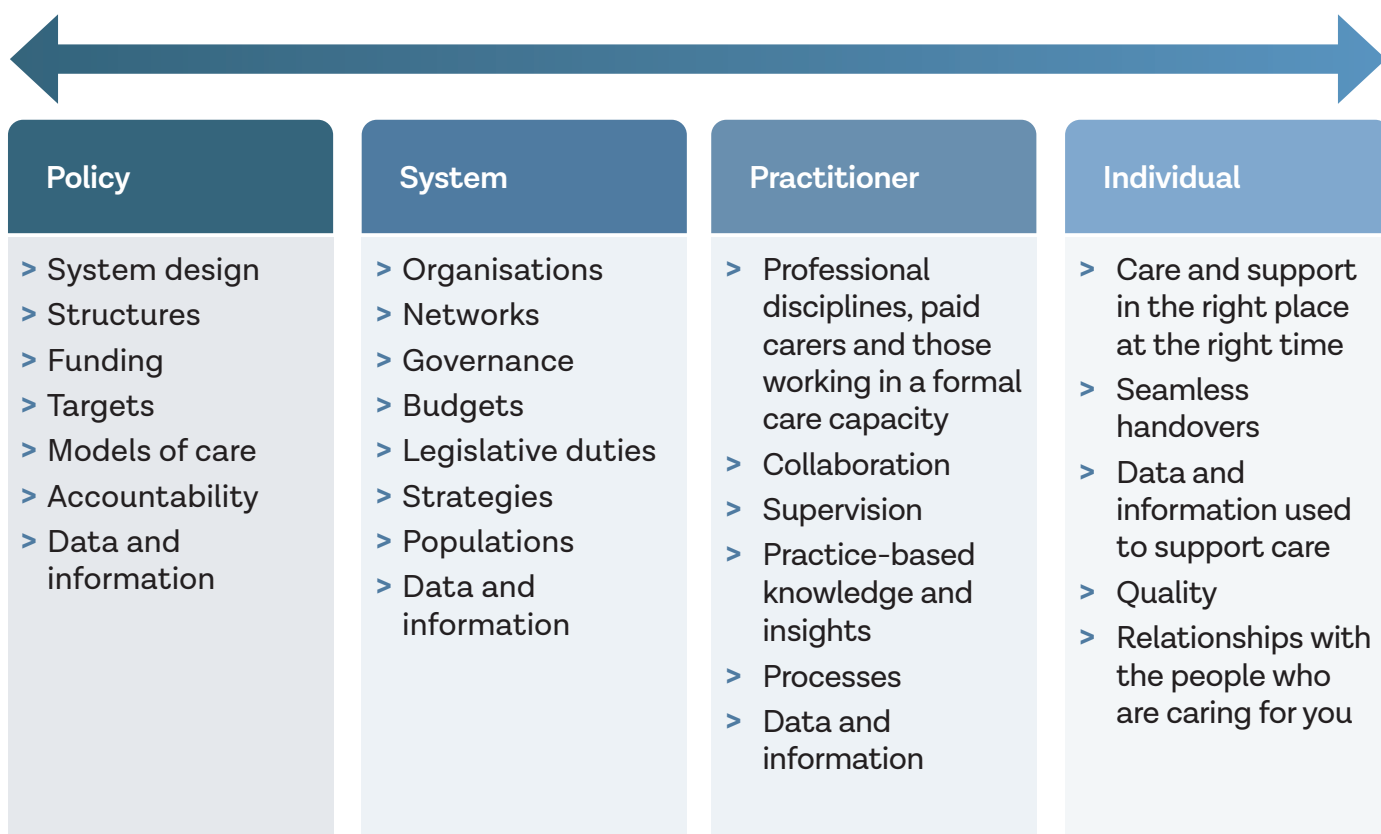
Reflective question

How do you demonstrate, and articulate, the unique contribution of social work and social workers in a multi-disciplinary setting? Which social work skills and contributions would you share with colleagues to support that wider understanding of the social work role?

What does it mean to be part of an integrated team?

A lot of writing on integrated care focuses on the leadership and systemic aspects. However, there is a key role to play for all practitioners involved in a care system.

Diagram from [Leaders Forum](#): Usha Boolaky



SCIE's guide to integration emphasises **transitions of care** as a key point for multi-disciplinary teams to cooperate on in order to deliver consistently person-centred care.

Managing the emotional impact of supporting older people

Social work with older people is emotionally demanding. Working closely with people, especially at points of change or crisis can have a toll on professionals' emotional wellbeing and their mental health. Research shows that the emotional impact associated with social work and social care roles can lead to stress and burnout (Grant et al., 2021).

Most social workers who took part in the SWOP research emphasised the emotional impact that their role had on them. This included feelings of frustration, anger and distress at not always being able to provide optimal support or to secure an appropriate placement.

Some social workers also spoke of experiencing grief when older people die.

'To work with older people, you have to be an optimist of, "Whatever time this person has left, I'm going to try and make it dignified for them," but yes, there is an element of, I suppose, we grieve also ... for that person.'
Social worker

Employers need to ensure they have robust support mechanisms in place to support social workers and to enable good practice.



Resources and further reading

- > The **Social Work Organisational Resilience Diagnostic (SWORD)** survey and workbook (Grant et al., 2021) was developed to audit the resilience of individuals and organisations.
- > Research in Practice has also published a related practice guide **Supporting practitioner wellbeing** (Kinman, 2022), which draws on research to help social workers develop a self-care action plan to nurture and sustain their wellbeing.

Implications for practice and systems

As well as identifying important areas of practice for social work with older people, the SWOP findings highlight some systems-level challenges that may need to be overcome to support best practice. The findings also point to important enablers for working effectively with older people.

Systems-level challenges

High levels of demand, including a mismatch between demand and available services, was a particular concern. Sustained underfunding throughout the system has led to a shortage of social care services, including home care services, a lack of beds in care homes and a lack of mental health support. And the move away from preventative provision means demand isn't being constrained.

The lack of available services also means that older people are often not getting the care and support that they would want or is most appropriate to their needs. Older people who would have preferred to be in their own home, for example, are having to go into care homes because of a lack of home care support services. This creates ethical dilemmas for social workers and can add to their stress.

The SWOP findings highlight the extent to which systemic challenges are very much felt at an individual level and the impact that they can have on social workers' capacity and job satisfaction.

- > **Limited resources and ethical dilemmas:** The limited availability of resources and appropriate care services not only has an adverse impact on the choices available to older people, it also compromises social workers' ethical position. Workers reflected on the ethical difficulties inherent in situations where there is a lack of suitable options for an older person.
- > **Workforce shortfalls:** Social work teams were directly affected by recruitment and retention difficulties, with social workers having to cover for vacant posts, duty slots and absences. Some social workers were also having to fill gaps elsewhere in the system, sometimes spending hours ringing around care homes when the sourcing department was understaffed. This took valuable time away from direct work with older people.
- > **Morale and job satisfaction:** Searching for resources can also negatively affect social workers' satisfaction in their work and lead to feelings of frustration. *'I just remember it was the most demoralising part of my job at that time ... I would spend almost half a day ringing round every single care home. There were three people I couldn't find a home for, and I would ring and ring and ring and ring and ring.'*
- > **Pressures on time:** Time was a 'scarce commodity', and the need for social workers to have more time was 'one of the most clearly identified areas for improvement' (Tanner et al., 2023, p. 9). More time is needed for conversations with older people to ensure better decisions and to support older people who have communication or cognitive impairments. One social worker said: *'you need those rich conversations, but they take a huge amount of time ... getting a sense of personhood ... that's so essential in working with older people, it's about respect more than anything else.'*

- > **Rural services:** Finding support packages was particularly problematic in rural areas, where an acute lack of services could lead to delays, complications and extra work for social workers as well as restricted options for older people. For example, one worker spoke of a client in an isolated hamlet who couldn't get support to go into her own home. Difficulties could also arise if responsibility for transport fell between agencies. *'We had a lot of problems arranging transport for people who are non-weight bearing, who are cared for in bed. We do not do that as a social care thing, and health don't do it either unless going to a hospital.'*
- > **Bureaucracy:** Bureaucratic processes, including form filling and repetitive and inefficient IT systems, were an everyday frustration. In particular, social workers highlighted the 'multiple layers of permission' they sometimes had to get in order to secure funding to meet an older person's identified needs. Different local authorities using different systems also meant social workers had to learn new processes if they changed jobs. The burden of bureaucratic processes can affect the service that social workers are able to provide to older people, as [Pascoe et al. \(2023\)](#) found in their literature review.

Supporting practice with older people

SWOP participants also shared positive examples of the sort of factors and support that enable their practice to thrive. These included regular reflective supervision, opportunities for peer learning and multi-agency working. All were highlighted as making a positive difference to social workers' practice.

Participants also recognised the importance of social workers being able to specialise in work with older people, as it enables them to develop specific knowledge and skills.

- > **Regular supervision** supports workers in analysis and reflection. It also helps to contain the emotional impact of the work. Good supervision and management is a key factor influencing social workers' job satisfaction and whether they remain with that employer.
- > Practice is enhanced by social workers being allowed **sufficient time** to build supportive relationships with older people and their families. Time is also a factor in supervision. As one social worker said, *'Supervision is offered and available but there [is] never time and it falls off the bottom of the to-do /priority list.'*
- > **Peer support** is vital for sustaining social workers' wellbeing and motivation. Peer support is facilitated by regular times to meet with colleagues face-to-face. This requires a suitable office environment.
- > Social workers also welcome opportunities to **share their knowledge and skills** – for example, by supporting newly qualified staff. Mentoring by experienced social workers is also important for building expertise and growing the specialist workforce that older people need.

- > **Working with other agencies** supports effective work with older people. One social worker who worked in an intermediate care services team referred positively to the built-in integration of approaches and skills, including working with occupational therapists, mental health specialists, physiotherapists and other professionals.
- > Social workers value having **managers who were social workers** themselves and who understand the pressures of social work and have retained links with direct practice.
- > Social workers report working better if they have some **flexibility in working arrangements** and are able to choose whether to work in the office or at home, according to the nature of the tasks and duties for that day. But social workers are also clear about the importance of spending time with colleagues face to face – to connect in person, to have ‘nurturing conversations’ and to seek advice and support.
- > Social workers were clear that the **commitment of families**, unpaid carers and volunteers is often a key part of making a difference in an older person’s life and a source of support for social workers themselves.



Resources and further reading

- > *‘Being that hopeful person’: Capabilities for social work with older people* by Nosowska, et al. (2023a) sets out a series of ‘doable’ recommendations arising from the SWOP research.



Reflective question

Think about some of the challenges and enablers outlined above, and ask yourself:

- > What actions can I take as an individual practitioner, to support myself and my colleagues?
- > What can my organisation do to support social workers working with older people, from a systems perspective?

Conclusion

The SWOP project is the first large-scale research study to show comprehensively what social workers working with older people do and how they do it, and the first to demonstrate the connection between social work capabilities and the wellbeing of older people and their families.

This briefing highlights central areas of practice to consider. Working with older people is described by social workers in the research as a privilege (Nosowska et al., 2023b, p. 13). Although social work with older people does bring challenges, it also provides a vital opportunity to enhance later life for people who experience barriers to wellbeing.

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